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**IMPACT OF GOVERNMENT POLICY ON THE MANAGEMENT OF HIV/AIDS IN WUKARI
 LOCAL GOVERNMENT AREA OF TARABA STATE (2015–2025)**

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Abstract

Despite considerable efforts by the Nigerian government to manage the HIV/AIDS epidemic, the disease continues to pose a significant public health challenge, particularly in local communities such as Wukari Local Government Area of Taraba State. This study investigates the impact of government policy on the management of HIV/AIDS in Wukari LGA spanning the period 2015-2025. The main objective is to assess how policy formulation and implementation have influenced service delivery, accessibility, and public health outcomes in the area. A descriptive survey research design was adopted, and data were gathered from health officials, policymakers, persons living with HIV/AIDS, and other stakeholders through questionnaires and interviews. Findings reveal that while policies have led to increased awareness and access to HIV/AIDS services, implementation has been hindered by inadequate funding, poor coordination, and insufficient community involvement. The study recommends stronger monitoring and evaluation mechanisms, improved stakeholder collaboration, and sustained government commitment to policy execution. Enhancing implementation fidelity will ensure more effective management of HIV/AIDS and promote better health outcomes for affected populations in Wukari and similar contexts.

Keywords: HIV/AIDS management, government policy, Wukari, public health, Nigeria.

1. Introduction

Globally, HIV/AIDS has claimed millions of lives and disrupted communities, particularly in Sub-Saharan Africa, which remains the region most affected by the epidemic (UNAIDS, 2022). Nigeria, with the second-largest HIV epidemic in the world, has made progress in combating the disease; however, regional disparities persist. According to the National Agency for the Control of AIDS (NACA, 2020)

The management of HIV/AIDS has remained a significant public health concern in Nigeria, particularly in rural and semi-urban communities where access to healthcare infrastructure is often limited. Wukari Local Government Area (LGA) in Taraba State, Nigeria, typifies such a setting, where socio-cultural, economic, and institutional factors intersect to influence the prevalence and control of the disease. The period between 2015 and 2025 has been crucial in understanding how national and sub-national HIV/AIDS policies have translated into action at the grassroots level, particularly through

local government interventions and partnerships with civil society and international organizations.

Taraba State records one of the higher prevalence rates in Nigeria, with Wukari LGA identified as a hotspot due to factors such as high population mobility, socio-cultural practices, and limited access to consistent healthcare services. The management of HIV/AIDS in Wukari LGA between 2015 and 2025 has involved a multi-pronged approach that includes prevention campaigns, testing and counselling services, antiretroviral therapy (ART), and community sensitization. These efforts have largely been shaped by federal policies such as the National HIV/AIDS Strategic Framework and Action Plan (2017–2021), which emphasizes decentralization and local ownership of HIV response strategies (NACA, 2017).

In Wukari, the implementation of these strategies has involved the local health department, traditional institutions, faith-based organizations, and international donors such as PEPFAR and the Global Fund. A key aspect of HIV/AIDS management in Wukari has been the integration of community-based

approaches. Local NGOs and health educators have played critical roles in raising awareness, reducing stigma, and improving voluntary testing rates, especially among women and youth (Oladipo & Sule, 2021).

Despite these efforts, challenges such as inadequate funding, weak healthcare infrastructure, cultural stigma, and intermittent drug supply continue to hinder the effectiveness of HIV/AIDS interventions (Adebayo et al., 2019). Moreover, the COVID-19 pandemic during 2020–2021 disrupted healthcare delivery, including HIV services, thereby potentially reversing some of the gains made in previous years.

Nonetheless, the decade under review has witnessed measurable progress. Reports indicate increased uptake of ART, improved awareness levels, and greater involvement of community leaders in health governance in Wukari (Taraba State Ministry of Health, 2023). These changes reflect broader national trends toward community resilience and adaptive health management systems (WHO, 2022).

Wukari LGA presents a case study of both the promise and limitations of government HIV/AIDS policy implementation. With its mix of urban and rural populations, migratory labour patterns, and diverse ethnic composition, Wukari has experienced unique challenges in HIV prevention, treatment, and care. Government policies have promoted access to antiretroviral therapy (ART), expansion of HIV testing services, prevention of mother-to-child transmission (PMTCT), and the involvement of community-based organizations in service delivery. Despite these interventions, data from the Taraba State Ministry of Health (2023) indicate that the uptake of HIV services remains inconsistent, with rural communities reporting lower levels of testing and treatment adherence.

Multiple factors affect the implementation of HIV/AIDS policies in Wukari. These include insufficient funding, poor health infrastructure, limited human resources, and low levels of awareness and education, especially in rural wards (Adebayo & Fagbamigbe, 2019). Moreover, stigma and discrimination continue to discourage individuals from seeking HIV-related services, further undermining the reach and impact of government initiatives (Oladipo & Sule, 2021). Against this

background, this study seeks to examine the Impact of Government Policy on the Management of HIV/AIDS in Wukari Local Government of Taraba State.

The National HIV/AIDS Strategic Framework (NSF) 2017–2021 and its successor policies were designed to decentralize HIV response efforts and strengthen state and local implementation capacities (NACA, 2017). However, there appears to be a persistent gap between policy formulation at the federal level and actual execution at the grassroots. Local governments like Wukari often lack the institutional capacity, skilled personnel, and consistent funding necessary for effective implementation of HIV/AIDS programs (Adebayo & Fagbamigbe, 2019). This disconnect is particularly evident in areas such as voluntary counseling and testing, antiretroviral therapy (ART) delivery, and public awareness campaigns, which are frequently hampered by logistical and infrastructural constraints.

Moreover, the impact of these government policies has been further undermined by systemic issues such as poor coordination between federal, state, and local agencies; bureaucratic bottlenecks; and inadequate community engagement (Oladipo & Sule, 2021). Despite the existence of policies promoting community-based care and involvement of traditional institutions in health governance, implementation in Wukari remains inconsistent. Many rural communities still face stigma, misinformation, and limited access to HIV services, which inhibits the effectiveness of government efforts.

Accordingly, the COVID-19 pandemic (2020–2021) exposed significant weaknesses in the health system, disrupting HIV testing and treatment services in many areas, including Wukari (WHO, 2022). While global and national efforts have aimed to restore services post-pandemic, the backlog created during this period may have long-term implications for HIV management. Furthermore, policy responses to these disruptions were slow to reach local governments, illustrating the fragility of the policy delivery mechanism.

The problem is also compounded by a lack of data-driven decision-making at the local level. Policies are often crafted based on national statistics, with limited consideration of local epidemiological

variations and cultural dynamics that influence health behavior. As a result, Wukari LGA has experienced a mismatch between policy intentions and community needs, leading to suboptimal outcomes in HIV/AIDS management (Taraba State Ministry of Health, 2023).

While government policies on HIV/AIDS have been well-intentioned and aligned with international best practices, their impact in Wukari LGA has been diluted by implementation challenges, infrastructural deficiencies, and weak intergovernmental coordination. Understanding these gaps is essential for developing more inclusive and effective policy interventions that address the unique realities of local communities in the fight against HIV/AIDS. Against this backdrop, this study seeks to examine the Impact of Government Policy on the Management of HIV/AIDS in Wukari Local Government of Taraba State

2. Literature Review

2.1 Conceptual Definitions

Concept of Policy

The term *policy* is widely used in political science, public administration, and social sciences, yet its definitions vary depending on the disciplinary context and the perspective of different scholars. Generally, policy refers to a set of deliberate actions or inactions chosen by an individual, group, or institution to guide decisions and achieve specific outcomes.

One of the foundational definitions is offered by Dye (2017), who defines public policy as “whatever governments choose to do or not to do.” This definition underscores both the active and passive dimensions of policy, emphasizing the significance of intentionality in governance. Dye's definition remains central to understanding the scope of governmental responsibilities and decisions.

More recently, Peters (2023) underscores the importance of coherence and coordination in policy-making. He defines policy as “a coordinated set of decisions and actions undertaken by governmental or non-governmental actors aimed at achieving specific policy objectives in a given sector.” Peters' definition acknowledges the growing role of non-state actors and multi-level governance in modern policy-making.

Concept of HIV/AIDS

HIV/AIDS is one of the most researched and discussed public health issues globally. It is not merely a medical condition but also a socio-economic and developmental concern, particularly in low- and middle-income countries. Various scholars have defined HIV/AIDS from different perspectives (biomedical, epidemiological, social and policy-oriented) reflecting its multidimensional nature.

Human Immunodeficiency Virus (HIV) is a virus that attacks the body's immune system, particularly the CD4 cells (T cells), which help the immune system fight off infections. If left untreated, HIV can lead to Acquired Immune Deficiency Syndrome (AIDS), the final and most severe phase of the infection. According to the World Health Organization (WHO, 2023), “HIV is a virus that targets the immune system and weakens people's defence systems against infections and some types of cancer.” AIDS is defined as “the most advanced stage of HIV infection, defined by the development of certain cancers, infections or other severe long-term clinical manifestations.”

Concept of Management

Management is a fundamental concept in organizational, administrative, and business studies. It encompasses the processes, functions, and practices involved in coordinating and directing resources (human, financial, material, and informational) to achieve specific organizational goals. Over the years, scholars have defined management from various perspectives, reflecting its evolving nature and application across sectors.

One of the classical definitions of management is offered by Fayol (1949), who described management as “to forecast and plan, to organize, to command, to coordinate and to control.” Although an early perspective, Fayol's functional approach remains foundational in understanding modern management practices.

In a contemporary context, Robbins and Coulter (2021) define management as “the coordination and oversight of the work activities of others so that their activities are completed efficiently and effectively.” This definition introduces two

critical dimensions of modern management: efficiency (doing things right) and effectiveness (doing the right things). It also reflects the hierarchical and supervisory nature of managerial roles in organizations.

Daft and Marcic (2020) further expand this definition, stating that “management is the attainment of organizational goals in an effective and efficient manner through planning, organizing, leading, and controlling organizational resources.” Their view emphasizes management as a goal-oriented activity grounded in a set of interrelated functions.

3. Methodology

This study adopted a descriptive survey research design, which is suitable for assessing opinions, attitudes, and behaviours of a population regarding a particular phenomenon (Creswell, 2014). The descriptive survey design allows the researcher to gather detailed information on the impact of government policies on HIV/AIDS management through structured questionnaires and interviews. This design is appropriate for the study because it enables a comprehensive understanding of how government interventions are implemented and perceived by stakeholders, including healthcare workers, policy implementers, and people living with HIV/AIDS (PLWHA) in Wukari.

The target population comprises healthcare workers, government health officials, and registered PLWHA in Wukari Local Government Area (LGA). According to the Wukari Local Government Health Department (2023), the estimated number of healthcare workers is 150, government health administrators are 30, and over 500 registered PLWHA currently receive treatment across various health centers. Thus, the total population is 680 individuals. This population was selected to provide relevant insights into policy effectiveness, implementation challenges, and service delivery outcomes.

A sample size was determined using the Taro Yamane (1967) Statistical formula:

$$n = \frac{N}{1 + N(e^2)}$$

Where n is the sample size, N is the population size, 1 is constant and e is the level of precision (0.05). Substituting values, for a total population of 680, the sample will be approximately 252. Sample selected using stratified random sampling to ensure fair representation from healthcare providers, government officials, and PLWHA.

Data collected from the administered questionnaires and interviews were analysed using both quantitative and qualitative techniques. Quantitative data were analysed using descriptive statistics such as frequency tables, percentages, and mean scores to summarise the responses. Inferential statistics, particularly Chi-square (χ^2) and Pearson's correlation coefficient, were employed to test the relationship between government policy variables and HIV/AIDS management outcomes at a 0.05 significance level.

Qualitative data from key informant interviews were subjected to thematic content analysis, which involved coding responses into themes and interpreting patterns related to government policy effectiveness, implementation challenges, and local dynamics influencing HIV/AIDS management. This mixed-method approach allows for a richer understanding of the phenomena by combining numerical trends with in-depth insights (Creswell & Plano Clark, 2018).

All data were analysed using Statistical Package for the Social Sciences (SPSS) version 26, which ensures accuracy and consistency in statistical processing and interpretation.

4. Results and Discussions

Data presentation and analysis in this study involve organizing and interpreting responses from questionnaires and interviews to assess the impact of government policy on HIV/AIDS management in Wukari. Descriptive and inferential statistics, along with thematic analysis, were used to provide comprehensive insights into policy implementation and effectiveness.

Examine the extent to which government HIV/AIDS policies have been implemented in Wukari Local Government

Question: To what extent have government HIV/AIDS policies been implemented in Wukari Local Government?

Table 1: Response Frequency Percentage (%)

Fully implemented	30	12
Partially implemented	180	71
Poorly implemented	34	14
Not implemented at all	8	3
Total	252	100

Source: Field Work, 2025

In Table 1, majority of respondents (71%) believe that government HIV/AIDS policies have been partially implemented in Wukari Local Government. Only 12% of respondents believe that the policies have been fully implemented, while 14% of respondents believe that the policies have been poorly

implemented, 3% believe that they have not been implemented at all.

Question: How would you rate the availability of HIV/AIDS-related services (e.g., testing, counselling, treatment) provided through government policies in Wukari during the period

Table 2: Response Frequency Percentage (%)

Very adequate	31	12
Moderately adequate	182	72
Inadequate	34	14
Completely unavailable	5	2
Total	252	100

Source: Field Work, 2025

In Table 2, majority of respondents (72%) believe that HIV/AIDS-related services are moderately adequate in Wukari, 14% of respondents believe that the services are inadequate, 2% believe that they are completely unavailable and only 12% of respondents believe that the services are very adequate.

Assess the impact of government policies on the accessibility, quality, and utilization of HIV/AIDS prevention and treatment services in Wukari Local Government

Question: How have government policies affected the accessibility of HIV/AIDS prevention and treatment services in Wukari ?

Table 3: Response Frequency Percentage (%)

Greatly improved access	220	87
Slightly improved access	20	8
No significant change	8	3
Reduced access	4	2
Total	252	100

Source: Field Work 2025

In Table 3, majority of respondents (87%) believe that government policies have greatly improved access to HIV/AIDS prevention and treatment services in Wukari, 8% of respondents believe that the policies have slightly improved access, 3% believe that there has been no significant change and only 2% of

respondents believe that the policies have reduced access

Impact of government policies on the effectiveness of HIV/AIDS treatment and prevention programs

Question: What is the impact of government policies on the effectiveness of HIV/AIDS treatment and prevention programs in Wukari?

Table 4: Response Frequency Percentage (%)

Highly effective	45	18
Moderately effective	200	79
Less effective	3	1
Not effective at all	4	2
Total	252	100

Source: Field work, 2025

In table 4, majority of respondents (79%) believe that government policies have been moderately effective in improving the effectiveness of HIV/AIDS treatment and prevention programs in Wukari, 18% of respondents believe that the policies have been highly effective, and 1% believe that they have been less effective and only 2% of respondents believe that the policies have not been effective

4.1 Discussion of Results

The data collected and analysed reveals critical insights into the extent of implementation and impact of government HIV/AIDS policies in Wukari Local Government between 2015 and 2025. Based on Table 1, the majority of respondents (71%) opined that HIV/AIDS policies were only partially implemented, indicating a gap between policy formulation and full operationalization. This limited implementation may be attributed to inadequate funding, weak institutional frameworks, and low political will, which are common constraints in Nigerian health policy execution (Adejoh & Abdulrahman, 2020).

Moreover, the availability of HIV/AIDS-related services such as testing, counselling, and treatment appears to be moderately adequate according to 72% of respondents (Table 2). This suggests that while services exist, they are not comprehensive or consistently accessible to all segments of the population. This corroborates earlier findings by Adebajo et al. (2022), who argued that structural inequalities and logistical bottlenecks impede effective HIV service delivery in rural areas like Wukari.

Importantly, Table 3 shows that 87% of respondents reported improved access to HIV/AIDS services due to government policies. This indicates

that even though the implementation is partial, it has positively influenced service reach. The establishment of primary health centres and decentralization of HIV testing and counselling are likely contributors to this improved accessibility (NACA, 2021). However, access alone does not translate to effectiveness.

In terms of policy effectiveness, Table 4 reveals that 79% of respondents believe the programs have been moderately effective. This aligns with studies that have shown that Nigeria's HIV/AIDS response has made notable progress in awareness and prevention but still struggles with issues of drug adherence, follow-up care, and quality of counselling services (Okeke et al., 2023).

Overall, the findings suggest that government HIV/AIDS policies in Wukari Local Government have made moderate gains in improving access and effectiveness of services. However, the fact that only 12% believe policies were fully implemented and just 18% rated them highly effective highlights the need for strengthened implementation strategies, increased community engagement, and sustained funding. The gap between policy and practice continues to limit the full realization of HIV/AIDS prevention and treatment goals in the region.

5. Conclusion and Recommendations

The study reveals that government policy plays a critical role in shaping the management and control of HIV/AIDS in Wukari Local Government Area of Taraba State. Policies on awareness campaigns, access to antiretroviral drugs, and support services have significantly contributed to reducing the spread and improving the quality of life for those affected. However, challenges such as inadequate funding,

weak policy implementation, and socio-cultural barriers persist. Strengthening policy execution, increasing community engagement, and enhancing healthcare infrastructure are essential for sustained progress. A coordinated and inclusive policy approach remains vital to effectively combat HIV/AIDS in the local government area.

Based on the findings of the study, the recommendations of the study are as follows:

i. to improve the extent of HIV/AIDS policy implementation in Wukari Local Government, there is a need to strengthen institutional frameworks and build local administrative capacity. This includes providing adequate training for health personnel,

ensuring timely disbursement of funds, and establishing a robust monitoring and evaluation system to track policy execution at the local level.

ii. local government officials should also be empowered to customize national policies to suit the unique socio-cultural context of Wukari. This will help close the gap between policy design and actual field-level implementation, thereby enhancing policy effectiveness.

iii. Improving the availability of ART drugs and counselling services at primary healthcare centers can significantly raise treatment adherence and service effectiveness.

References

- Adebajo, S. B., Musa, R., & Johnson, A. (2022). Barriers to HIV prevention services in rural Nigeria: A community-level analysis. *African Health Sciences*, 22(1), 66–74. <https://doi.org/10.4314/ahs.v22i1.9>
- Adebayo, S. B., & Fagbamigbe, A. F. (2019). Rural-urban variations in HIV/AIDS stigma and discrimination in Nigeria. *African Journal of AIDS Research*, 18(1), 44–54.
- Adejoh, P., & Abdulrahman, M. (2020). Policy implementation in Nigeria: A study of the health sector. *Journal of Public Administration and Policy Research*, 12(3), 34–41. <https://doi.org/10.5897/JPAPR2020.0482>
- Anderson, J. E. (2015). *Public policymaking* (8th ed.). Cengage Learning.
- Barnett, T., & Whiteside, A. (2019). *HIV and AIDS: A long-wave event*. Oxford University Press.
- Birkland, T. A. (2019). *An introduction to the policy process: Theories, concepts, and models of public policy making* (4th ed.). Routledge.
- Cairney, P. (2020). *Understanding public policy: Theories and issues* (2nd ed.). Red Globe Press.
- Creswell, J. W. (2014). *Research design: Qualitative, quantitative, and mixed methods approaches* (4th ed.). Sage Publications.
- Creswell, J. W., & Plano Clark, V. L. (2018). *Designing and conducting mixed methods research* (3rd ed.). Sage Publications.
- Daft, R. L., & Marcic, D. (2020). *Understanding management* (11th ed.). Cengage Learning.
- Dye, T. R. (2017). *Understanding public policy* (15th ed.). Pearson.
- Fayol, H. (1949). *General and industrial management* (C. Storrs, Trans.). Pitman Publishing. (Original work published 1916)
- Griffin, R. W., & Moorhead, G. (2014). *Organizational behavior: Managing people and organizations* (11th ed.). Cengage Learning.
- Grindle, M. S., & Thomas, J. W. (2022). *Public choices and policy change: The political economy of reform in developing countries*. Johns Hopkins University Press.
- Howlett, M., & Ramesh, M. (2021). *Studying public policy: Policy cycles and policy subsystems* (5th ed.). Oxford University Press.
- Koontz, H., & Weihrich, H. (2015). *Essentials of management: An international and*

- leadership perspective* (10th ed.). McGraw-Hill Education.
- Mintzberg, H. (2013). *Simply managing: What managers do—and can do better*. Berrett-Koehler Publishers.
- National Agency for the Control of AIDS (NACA). (2017). *National HIV and AIDS Strategic Framework 2017–2021*. Abuja, Nigeria.
- National Agency for the Control of AIDS (NACA). (2020). *Nigeria HIV/AIDS Indicator and Impact Survey (NAIIS) 2019 Report*. Abuja, Nigeria.
- Oladipo, O. T., & Sule, B. (2021). Community-level interventions in HIV/AIDS prevention in Nigeria: A case study of Taraba State. *Health and Development Journal*, 5(2), 112–123.
- Okeke, C. N., Oladepo, O., & Adepoju, J. A. (2023). Evaluating the effectiveness of HIV/AIDS policy interventions in Nigeria. *Nigerian Journal of Health Policy*, 9(2), 120–132.
- Parkhurst, J. (2017). *The politics of evidence: From evidence-based policy to the good governance of evidence*. Routledge.
- Peters, B. G. (2023). *The politics of bureaucracy: An introduction to comparative public administration* (7th ed.). Routledge.
- Poku, N. K. (2017). *HIV/AIDS and governance in Africa: Responses and challenges*. Palgrave Macmillan.
- Rainey, H. G. (2014). *Understanding and managing public organizations* (5th ed.). Jossey-Bass.
- Robbins, S. P., & Coulter, M. (2021). *Management* (15th ed.). Pearson.
- Taraba State Ministry of Health. (2023). *Annual Health Sector Performance Report*. Jalingo: Taraba State Government.
- Taro Yamane. (1967). *Statistics: An introductory analysis* (2nd ed.). Harper & Row.
- UNAIDS. (2022). *Global AIDS update 2022: In danger*. <https://www.unaids.org/en/resources/documents/2022/in-danger-global-aids-update>
- Whiteside, A. (2016). *HIV/AIDS: A very short introduction*. Oxford University Press.
- World Health Organization. (2022). *Health systems resilience during COVID-19: Lessons for HIV response*. Geneva: WHO.
- World Health Organization. (2023). *HIV/AIDS fact sheet*. <https://www.who.int/news-room/fact-sheets/detail/hiv-aids>
- Wukari Local Government Health Department. (2023). *Annual HIV/AIDS Management Report*.