USAID Tujenge Jamii Project Utilization of TB/HIV Collaborative Services

PROJECT PROFILE



Our Work

USAID Tujenge Jamii Project (UTJ) is a five-year (2021-2026) USAID-funded project supporting HIV Prevention, Care and Treatment, Maternal Child Health, Reproductive Health, WASH and Nutrition services. Our activities are structured with a purpose of increasing use of quality county-led, county-owned, and county-managed health and social services. The project objectives are to:

Increase access and demand for quality HIV prevention services;

Increase access and demand for quality FP/ RMNCAH, nutrition, and WASH services. Increase access and demand for quality HIV treatment services.

Strengthen capacity of county health systems, local partners, and communities to deliver quality health services.

The Approach

Tuberculosis (TB) is a communicable disease that spreads through the air when an infected person coughs, sneezes, speaks, laughs, or sings. This disease is characterized by high morbidity and mortality with an estimated 120,000 people being infected annually and about 32,000 people dying from TB each year (WHO 2022).

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USAID Tujenge Jamii is collaborating with the Ministry of Health (MoH) through the National Tuberculosis, Leprosy and Lung Program (NTLD-P) and the County Department of Health by making significant progress towards Active Case Findings (ACF) in line with recommendations of the 2016 TB prevalence survey. Active TB case Finding is the systematic identification of people with suspected active TB, in predetermined target groups, by use of tests, examinations, or other procedures that can be applied rapidly. The project is working on improving the quality of TB screening for all PLHIV to ensure positivity yield from TB screening efforts and to strengthen and optimize the use of all available diagnostics tools (GeneXpert, TrueNat, and other molecular WHO-recommended rapid diagnostics, chest x-ray, TB LAM, Lateral Flow - Loop-mediated isothermal Amplification (LF -LAM) and smear microscopy) for active TB among PLHIV who screen positive for TB.

The project is using the following strategies:

- Training healthcare workers on the new 2021 TB/HIV guidelines and conducting mentorship and support supervision to 210 health facilities and strengthening infection prevention and control practices (IPC) to prevent transmission of TB within ART clinics.
- To find missing TB cases through optimization of ACF, the health facility management team, including facility managers are sensitized through the continuous medical education (CME) conducted to facility staff to improve the quality of care offered to Drugresistant TB (DR TB) cases,
- Conducting communitylevel targeted outreaches in identified TB hotspots in various counties for case identification while ensuring a robust TB/HIV data collection and reporting system to inform national TB and HIV programs policies and guidelines.
- TB sample transportation to testing sites.

- Supporting the scale-up of TB Preventive Therapy (TPT) commodity forecasting and quantification meetings to ensure that correct quantities are delivered while strengthening TB/HIV service delivery through Differentiated service delivery (DSD) modules
- All best practices are shared in the county collaboration, learning and adapting forums.

DURATION 2021-2026

ACTIVITY LOCATIONS Baringo, Nakuru, Laikipia, and Samburu Counties

IMPLEMENTING PARTNERS

Deloitte and Touche LLP Goldstar Kenya County Department of Health

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