

Janna Health Foundation (JHF)

Activity Report; January, 2019

JHF is implementing 3 projects in Adamawa State. These are:

- The STOP TB Partnership's Challenge Facility for Civil Society (CFCS) Round 8 project
- The Nomads TB REACH Wave 6 Scale up Project
- The IDP Wave 5 Scale up Project

CFCS R 8 Project:

JHF's STOP TB Partnership's Challenge Facility for Civil Society (CFCS) Round 8 project in Nigeria is in its 7th month of implementation. The project started in June 2018 and is being implemented in 12 of the 21 LGAs (Northern and Central Senatorial Zones) of Adamawa State. The CFCS R8 intervention focuses on Nomadic schools and their host communities with emphasis on the detection of childhood TB cases. Through strategic advocacy, JHF was able to secure the support from some of the host LGAs who have been providing diagnostic kits for malaria, anti-malarial drugs, multi-vitamins and anti-helminthic drugs. JHF's collaboration with the State Agency for Control of AIDS led to sustained supply of HIV Rapid Test Kits for use in the target population across the 12 LGAs.

All CFCS R8 activities planned in the month under review were successfully implemented. These activities include:

- Active screening for TB and HIV in the nomadic schools and Host Communities
- Active transportation of presumptive TB Case sputum samples and retrieval of results to the presumptive TB cases
- Transportation of children under 5 years to the facilities where childhood TB cases can be diagnosed by trained Medical Officers
- Active linkage of diagnosed TB & HIV cases to identified TB/HIV service delivery points for treatment, care and support
- Awareness creation among target population on TB, HIV, Cholera and Malaria
- Community outreach targeting school children and their immediate Host Communities.

These activities were implemented by trained Community Volunteers under the supervision of JHF, the State TB programme Team and the State Project Team headed by the Agency for HIV/AIDS Control.

CFCS R 8 Project Results:

In January 2019, 21 Nomadic Schools and 16 Nomadic Communities were screened by the project. A total of 6,872 persons were verbally screened for TB/HIV, 611 presumptive TB cases were identified including 42 under 5 presumptive childhood TB cases. Of all presumptive TB cases identified, sputum samples were collected from 598, out of which 31 all forms of TB cases were detected including 27 Bac+ and 3 under 5 Childhood TB cases. Of all presumptive TB cases detected, 602 had HCT out of which 4 were found to be HIV+ and were referred to treatment, care and support.

TB REACH Wave 5 IDP Scale-up Project:

This project aims to actively detect TB (and HIV) cases from IDP Camps and Host Communities in 4 LGAs of Adamawa State which are Mubi North, Mubi South, Yola North and Yola South. The project started on 1st October 2018, however, active TB case search started in November. 15 Volunteers, 5 DOTS staff and laboratory focal persons were oriented on the project in each of the 4 LGAs.

Results from the TB REACH Wave 5 IDP Scale-up Project:

In January 2019, 4,439 IDPs were verbally screened in camps and host communities, 391 presumptive TB cases were detected out of which 300 were tested by Xpert. A total of 34 all forms of TB cases were detected including 30 Bac+ TB cases. A total of 389 presumptive TB cases had

HCT out of which none were found to be HIV+. All TB cases detected were enrolled on treatment in the 4 LGAs.

Nomads TB REACH Wave 6 IDP Scale-up Project:

JHF is also implementing the above project in collaboration with KNCV TB Foundation in Adamawa and Taraba States. In Adamawa State, the project covers 17 of the 21 LGAs and aims to detect TB cases from Nomadic Communities, settlements and grazing reserves in the State. 102 Volunteers and 50 DOTS Staff have been trained on the project which will be officially flagged off in Adamawa State this January, 2019.

Results from the Nomads TB REACH Wave 6 IDP Scale-up Project:

In January 2019, 15,187 persons were verbally screened across 17 LGAs of Adamawa State, 1,059 (7%) presumptive TB cases were detected out of which 841 had their sputum samples transported and analysed using Xpert TB diagnosis technology. A total of 92 All Forms of TB cases were detected including 91 B+ TB cases. 91 of the 92 TB cases detected were enrolled on treatment at the nearest DOTS centres. Of the 1,069 presumptive TB cases detected, 873 had HCT out of which 15 were found to be HIV+. These were linked to ART sites for Treatment, care and support.

Key challenges encountered across these interventions include:

- Accessibility problems to some hard to reach areas
- Difficulties in transporting childhood presumptive TB cases
- Security challenges in some targeted LGAs (especially Madagali and Michika)

The following are recommendations proposed to meet the stated challenges:

- JHF will continue to advocate for the establishment of DOTS sites within (or proximal to) Nomadic Communities and schools
- JHF would ensure that health education is strengthened by CVs during TB screening exercises to improve on efforts by community leaders to support transportation of <5s for TB screening by Medical Officers
- JHF will continue to liaise with security agents as communities are reached with TB services



JHF Volunteers conducting TB screening in Nomadic Communities; sputum collection and a newly diagnosed TB case.

Thank you!

Report by Hunpiya B. Basason (M & E Officer, JHF)