



AT A GLANCE

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Ciheb Kenya commemorates the World TB Day

Inside

Engaging County Governments for Sustainable HIV Services Transition in Migori County

Feature >> I am a leader because of DREAMS

COVID-19 Vaccine Integration to Essential Immunization in Muhoroni Sub-county, Kisumu.

Ciheb Kenya Commemorates the World TB Day across its Programs



World TB Day is an annual event observed on March 24th to raise awareness about tuberculosis (TB), a contagious disease caused by *Mycobacterium tuberculosis*. TB primarily affects the lungs but can also affect other body parts, such as the kidneys, bones, and brain. TB is spread through the air when an infected person coughs, sneezes or speaks, and it can affect anyone, regardless of age, gender, or social status.

World Health Organization (WHO) has called for urgent action to accelerate efforts to end TB globally. This includes scaling up access to TB prevention, diagnosis, treatment, and care services and investing in research and innovation to develop new TB diagnostic tools, treatments, and vaccines.

The theme for World TB Day 2023 is “Yes, We can end TB,” which underscores the urgency to accelerate efforts to eliminate TB globally.

On this day, Ciheb Kenya joined Nairobi City County and other stakeholders in an event held at Nairobi’s Bus Station to raise awareness about tuberculosis (TB). The event was attended by the County Executive Committee Member (CECM) Health, Nutrition and Wellness, Dr. Anastacia Nyalita, Chief Officer Health, Tom Nyakaba, Ciheb Kenya CEO, Dr. Emily Koech, Director Preventive, and Promotive Health, Dr. Carol Ngunu, and Ciheb Connect Program Director, Dr. Rebecca Wangusi.



Dr. Nyalita noted that TB remains one of the world’s deadliest infectious diseases, causing an estimated 1.4 million deaths yearly. She further noted that the COVID-19 pandemic has disrupted TB prevention and treatment efforts, with many resources and health systems redirected toward the pandemic response. This has led to setbacks in TB control efforts, including delays in diagnosis, treatment, and care and increased TB-related deaths.

Through PEPFAR funding Ciheb Kenya has collaborated with county governments of Nairobi, Kisumu, Migori, Machakos, Makueni, Kitui, Mombasa, Kilifi, Kwale and Taita Taveta to address this through strengthening infection prevention and control interventions in health facilities, enhancing active TB case finding through screening of individuals in health care setting and for health care providers, providing HIV testing to patients diagnosed with TB, initiating isoniazid prophylaxis therapy for individuals at risk of TB including children under 5 years in contact with person with TB, people living with HIV and



health care providers, and initiating antiretroviral therapy for TB/HIV co-infected individuals.

Ciheb-Kenya's USAID Stawisha, team joined the Kwale County to commemorate World TB Day, where they offered Digital Xray CAD screening at Diani Showground, for high-risk individuals. Other areas where free TB screening was offered include Kaya Waa Quarry in Matuga Sub-county, and in Gogo in Lunga Lunga Sub County close to the Tanzania border, where high-risk groups with high cases of TB have been identified in Umoja and Mpakani villages. Kwale County Tuberculosis, Leprosy, and Lung Disease Coordinator, Mr. Lawrence Tanui, participated in a radio talk show, Radio Kaya, where he sensitized the public on TB prevention, care, and treatment.



Ciheb Kenya's PACT Imara program commemorated the day in Emali, where the rallying call was that everyone has a role to play in reducing the burden of TB through promoting awareness and education about TB, reducing stigma and discrimination towards people with TB, and ensuring everyone has access to high-quality TB services, regardless of their social or economic status.



Engaging County Governments for Sustainable HIV Services Transition in Migori County



The Kenyan government and county officials have been working closely with PEPFAR and other development partners to provide quality HIV and TB services which have seen Kenya make tremendous progress toward epidemic control

The ongoing transition of HIV/TB programs from the Presidential Emergency Funds for AIDS Relief (PEPFAR) to Kenya county governments is a significant step towards promoting sustainability in the healthcare system and ensuring that those who need HIV/AIDS services can access these beyond this funding. PEPFAR funding has been critical in strengthening Kenya's healthcare system focused on providing quality HIV and TB service delivery, supporting human resources for health through hiring multidisciplinary teams for healthcare providers, and through their training and mentoring, strengthening commodity and laboratory systems, enhancing monitoring and evaluation systems including rolling out electronic medical records, ensuring routine data quality assessments and timely reporting, and working with counties to enhance their leadership and oversight of supported HIV and TB services.



Ciheb Kenya's CEO, Dr. Emily Koech, met the Deputy Governor of Migori County, Dr. Joseph Gimunta Mahiri, to discuss how the roadmap towards sustainability of HIV services in the County can be enhanced. Several county officials, including the County Attorney, Mr. Gradus Oluoch Adis, CECM Health, Julius Nyerere, and the Chief Officer of Public Health, Ms. Mable Chanzu also attended the meeting.

The review aimed to assess the progress of the transition process and identify any challenges that may arise. The transition of ownership and management of HIV and TB programs to county governments is crucial in promoting the sustainability of these programs in Kenya. It ensures that county-owned, county-funded, and county-led HIV and TB care is provided to those who need it, which is vital in achieving the Sustainable Development Goal of ending the HIV/AIDS epidemic by 2030.

Migori County's Roadmap towards a Sustainable HIV/TB Program 2022-2027 provides a framework for a phased transition of support and stewardship of HIV/TB services.

The roadmap aims to enhance ownership and spur the county to allocate increased resources for HIV/TB services by 2027, thus progressively supporting PEPFAR-funded activities currently supported by Ciheb-Kenya and other implementing partners who have contributed substantially to alleviating the county's burden of HIV and TB.

TRACK on track: COVID-19 Vaccine Integration to Essential Immunization in Muhoroni Sub-county, Kisumu.

As the world continues to grapple with the COVID-19 pandemic, vaccination efforts are ramping up across the globe. With the widespread availability of vaccines, many governments and healthcare providers are now focusing on routinizing COVID-19 vaccination. This means integrating COVID-19 vaccines into routine healthcare delivery systems to make them more easily accessible to everyone who wants them.



Ciheb Kenya's CDC- TRACK program is focusing on integrating COVID-19 vaccination in routine immunization services to improve access and coverage by defining areas of integration and outlining strategies to achieve this. TRACK is piloting this in six facilities in Muhoroni Sub-county in Kisumu County: Nyangoma, Muhoroni, Jaber, Kandege, Obumba, and Koru dispensaries.

TRACK is integrating COVID-19 vaccination within essential immunization (EI) in the health facilities' Maternal Neonatal Child Health and Family Planning (MNCH/FP) clinic. Eligible individuals are

screened for COVID-19 vaccination at all service delivery points and this is documented in the existing registers, which have been updated to include information on immunization status. Those identified as eligible for vaccination, received brief counseling from a trained healthcare provider and, if willing, are linked to the MNCH/FP clinic for vaccination. Further, the program is strengthening patient tracking systems for routine and COVID-19 immunization through the use of appointment diaries, defaulter tracking registers, and supporting physical tracing in the community using community health volunteers.

TRACK Program Director Dr. Christina Mwachari, reported that the program aims to improve immunization coverage, reduce the number of defaulters, and ultimately contribute to better health outcomes for the community. The program targets to screen 80% of children and adults in health facilities to determine their eligibility for routine and COVID-19 immunization, increase the coverage of antigens in health facilities by 1% monthly, identify, reach, and vaccinate 70% of defaulters with immunization and therefore, increase the antigen coverage to 80% from the baseline. Additionally, the program aims to reduce the antigen drop-out rates to less than 10%.

Routinizing Outcomes

Integrating COVID-19 vaccination in essential immunization can have a range of critical outcomes that could significantly benefit public health and healthcare systems particularly leverage on community vaccination efforts to improve overall vaccination coverage rates, and ultimately protect individuals and communities from the spread of COVID-19 and other vaccine-preventable diseases. Integration can also ensure optimized use of resources and minimize the burden on healthcare systems by leveraging existing immunization infrastructure and systems.



TRACK team with Ciheb Kenya CEO at Jaber Dispensary in Muhoroni

I am a Leader Because of DREAMS

She began to talk and socialize after attending the weekly social asset-building sessions and proudly says she is fully layered

Hadale Saru is an adolescent girls and young women advocate, mentor, and facilitator from Mukuru Viwandani Ward. She comes from the Borana tribe in a family of five children. She enrolled in the DREAMS CONNECT project in 2016 at 19 years old, immediately after completing high school, and describes her time in the project as a learning process.

When she joined the project, Hadale was a quiet and shy girl. She began to talk and socialize after attending the weekly social asset-building sessions. She received all the DREAMS interventions, including HIV testing, education on PrEP and PEP, family planning, entrepreneurship, and financial capability sessions, and proudly says she is fully layered.

After a year on the project, she was encouraged to become a mentor. Due to low self-esteem, she didn't believe she could do this, but after receiving encouragement from her peers and project staff, she applied, trained, and became a mentor to girls aged 20-24 years.

DREAMS has transformed Hadale's life. She now has a positive attitude, is true to herself, and is empowered to tackle life challenges with a learning spirit.

Hadale has evolved from a shy, quiet girl into a brilliant, confident young woman who is a force for change. She is the HIV champion ensuring the prioritization of women and girls in HIV response. She says that being a member of the marginalized Borana tribe does not make her any less of a person. Her activism is mainly inspired by her sister's death, who died due to gender-based violence.

She is now engaged by UN Women in advocacy and actively participates in local and international conferences and forums, addressing hundreds of people and confidently representing the plight of her community. Some of her speaking engagements include

- East Africa International Youth Day virtual conference, Tanzania.

- Women in Leadership Advocating for Climate Crisis, mainly discussing how climate change affects girls



Hadale during a conference in Uganda addressing climate change and its impact on young girls and women facilitated by UN women

and young women in leadership, Uganda.

- PEPFAR Meeting on HIV Response and its Impact on Young Girls in Leadership, Zimbabwe and Canada.

- Score Card to discuss how gatekeepers and service providers can reduce HIV as a triple threat multiplier and how the government can act in Senegal.

- Virtual conversations on how Arts and Crafts can be used as an intervention to communicate and encourage ART adherence for those living with HIV.

Hadale is also an activist against Female Genital Mutilation (FGM), a practice that remains rampant in her community. She holds sessions in Nairobi and challenges harmful social and cultural norms which drive FGM. She has enrolled various community members as advocates to end FGM, including her parents, male champions, and religious leaders. Their involvement has allowed her to reach community elders, which wouldn't have been possible.

Using the training she gained from DREAMS interventions, such as entrepreneurship and financial capability, Hadale saved her earnings from the sti

pendes from the mentorship engagement and started a transport business. She has acquired a motorbike and employed a rider making KES 15,000 profit monthly. With her income, she supports her family with their basic needs, who are very proud of her accomplishments.

Hadale has also been engaged in a year-long mentorship program by UN Women with feminist mentors, which fosters equity and intergenerational sharing to reduce HIV infections. She will pass down the knowledge gained in this program to the girls she mentors and broaden her mentorship capacity.

“I encourage the DREAMS project team and donors to involve girls and young women in the decision-making process, as they are the ones affected. They should also provide opportunities for them to grow in different aspects. The DREAMS Project has transformed lives and continues to empower AGYWs.” She concludes.

Hadale plans to return to school for higher education, where she hopes to pursue a course in Project Management.



Ciheb Connect Meeting with the Nairobi City County Assembly Health Committee to deliberate on comprehensive delivery of HIV/TB services in Nairobi County.



CEO's visit to Relax CBO, alongside the PACT Imara team. This community-based organization offers a range of essential services, including psychosocial support, which has significantly impacted the members of the community in Mlolongo and its environs.



Ciheb Kenya through the Partnership for Advanced Care and Treatment (PACT) Imara program in Lower Eastern signed a Memorandum of Understanding with the Key Populations (KP) Civil Society Organizations (CSOs).



Ciheb Connect program hosted the Centers for Disease Control and Prevention (CDC) Atlanta at the Embakasi Health Center which is doing amazing work in the areas of HIV prevention and treatment, particularly for young people, and the general population.



As part of our ongoing commitment to ensuring a safe and healthy work environment, we conducted a refresher training session on Occupational Safety and Health Administration (OSHA) guidelines for our Entrench team in Kisumu County.



TRACK team site visit and mentorship to Jaber Dispensary in Muhoroni Sub-county, Kisumu County for COVID-19 integration to essential immunization



Stawisha Pwani's Continuous Quality Improvement training to improve patient outcomes

The Ciheb Kenya team in the Stawisha Pwani program collaborated with the Taita Taveta County Department of Health Services to sensitize healthcare workers on Continuous Quality Improvement (CQI) in line with Kenya Quality Model for Health (KQMH).



CQI is critical in improving patient outcomes and it helps healthcare organizations identify areas where patient outcomes can be improved. By analyzing data, identifying trends, and implementing changes, healthcare providers can improve patient safety, reduce medical errors, and enhance patient satisfaction.

Our CQI specialist, George Gititu also helped the participants appreciate an integrated approach to attaining quality



CONNECT and PACT Imara programs conduct internal DQA and SIMS



Ciheb Kenya's CONNECT and PACT Imara teams conducted a Site Improvement through Monitoring Systems (SIMS) in various clinics supported by the programs. These facilities included the Kenyatta University Teaching, Referral and Research Hospital (KUTRRH), Swop City Clinic serving key populations, Machakos Level 5 Hospital, Makueni County Referral Hospital, and Mwingi Level four Hospital.

SIMS is a comprehensive monitoring and evaluation tool designed to identify areas that require improvement, measure progress, and implement corrective measures. On the other hand, Data Quality Assurance (DQA) is a comprehensive approach to improving the accuracy, completeness, and timeliness of health data collected at a health facility. It includes regular monitoring and evaluation of data quality; and feedback to staff and program management on areas that need improvement.



Makueni County Referral Hospital SIMS feedback

These exercises have been instrumental in improving the quality of care and patient satisfaction in our supported facilities. By closely monitoring and evaluating the clinic's performance and the quality

of patient data, the SIMS and DQA tools helped to identify areas that require improvement, such as patient wait times and appointment scheduling, and the facilities' progress in implementing corrective measures identified.

