Accelerating TB and HIV Diagnosis Among Children: Outcome of Integrating Community-Based Interventions During a National Childhood TB Testing Week

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BACKGROUND

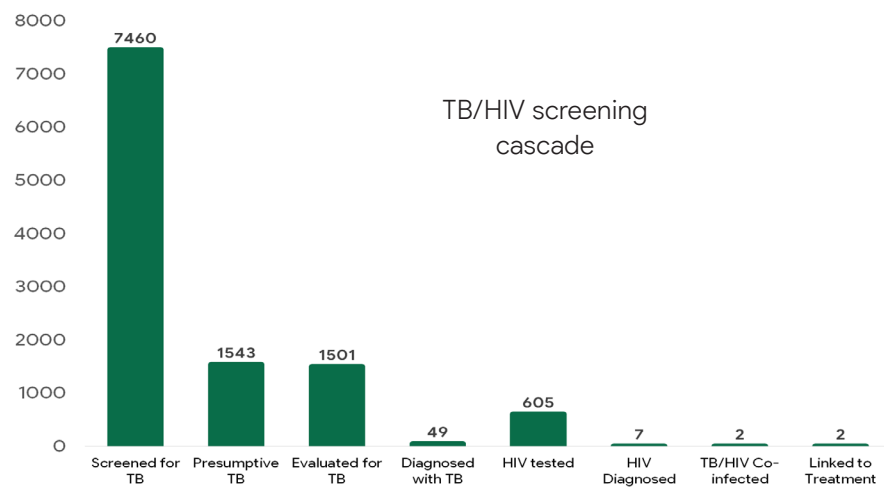
Significant gaps remain in tuberculosis (TB) and HIV diagnosis among children in Nigeria. Excellence Community Education Welfare Scheme supported the Cross River State Government to integrate TB/HIV screening into the Nigeria National Childhood TB Testing Week (May 27th – June 2nd, 2024). This paper describes the intervention and reports the outcomes of this integrated approach to TB/HIV diagnosis among children in Southern Nigeria.

DESCRIPTION

This initiative began with collaborative planning, dissemination of the Childhood TB guidelines, and stakeholder engagement including TB and HIV programs in Nigeria. Community mapping identified high-TB-prevalence locations such as slums, primary schools and orphanages. Resources including consumables and personnel were deployed from health facilities. Children <15 years identified in these settings were screened for TB using a symptom checklist, and HIV testing was offered to those with presumptive TB. Sputum or stool samples were collected for GeneXpert testing from children with presumptive TB and those diagnosed with TB and/or HIV were referred to the health facility. Regression analysis was used to assess factors associated with TB and HIV testing, with significance set at $p<0.05$.

LESSONS LEARNT/RESULTS

A total of 7,460 children were screened for TB, 75.5% (5,634) were aged 5 to 14 years and 54.5% (4,064) were females. Of these 20.7% (1,543) were presumptive for TB, 97.3% (1,501/1,543) were evaluated for TB and 3.3% (49/1,501) were diagnosed with TB. Of the 1,543 children presumed to have TB, 39.2% (605) were tested for HIV and seven (0.1%) children were diagnosed with HIV. Two children had TB/HIV co-infection. 100% of those diagnosed with HIV and TB were linked to treatment. Children aged 0-4 years were less likely to be tested for TB (OR: 0.2, 95% CI: 0.01–0.05, $p<0.01$) and children aged 5-14 years were less likely to be tested for HIV (OR: 0.36, 95% CI: 0.27–0.49, $p<0.01$).



CONCLUSION

The integrated TB/HIV screening during the National Childhood TB Testing Week successfully identified and linked children previously unaware of their TB and HIV status to treatment. However, more targeted strategies are needed to improve TB and HIV testing among children.

RECOMMENDATION

» Expand the HIV/TB Integrated Testing Model to service delivery points routinely used to serve children.

REFERENCES

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