KNCV
NIGERIA
Knowledge Network for disease Control and Vigilance

PROFILE


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DR. BETHRAND ODUME

THE EXECUTIVE DIRECTOR
KNCV NIGERIA

FROM THE EXECUTIVE DIRECTOR

KNCV NIGERIA

Working with a critical mass of highly dedicated, multi-disciplinary team of professionals with a broad range of expertise in disease control and deliberate public health practice, KNCV Nigeria has remained committed to its vision of becoming a globally recognized Centre of excellence for the prevention and control of Tuberculosis and other diseases of public health concern in Nigeria.

In line with its goal of achieving a grand convergence in global health, the organization is evolving into a public health institute with multiple disease focus and practice areas to include Tuberculosis, HIV, COVID-19, Emerging Infectious Diseases, Digital health, Health technology innovations and Research. Fostering effective partnerships and synergies, KNCV Nigeria is repositioned to generate and synthesize evidence to address public health challenges in complex settings.

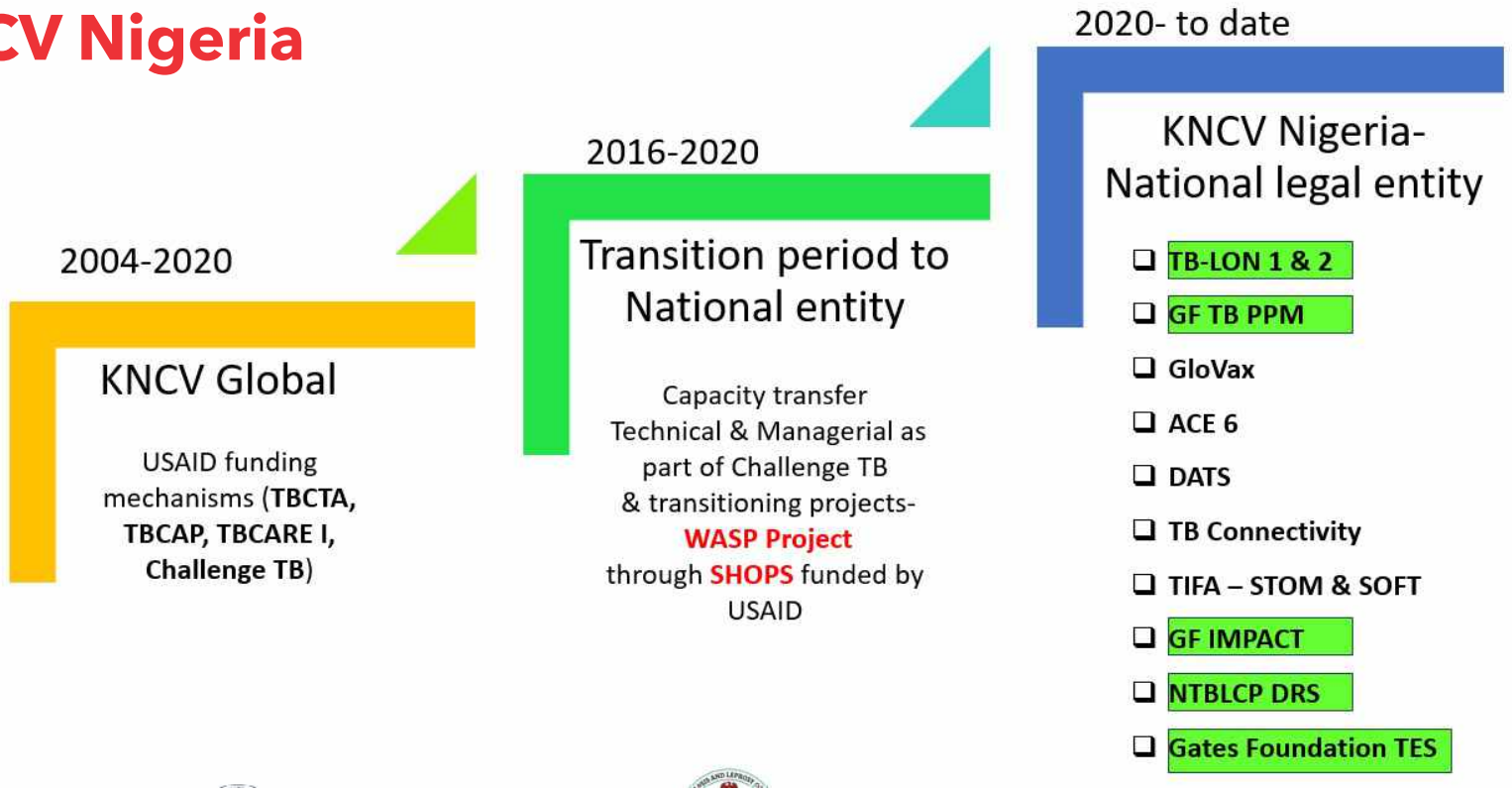
Our strategic imperatives are those of intentional dynamism and conscious adaptability to emerging trends and paradigm shifts in public health approaches. We purpose to continue the development and implementation of effective, efficient, and sustainable strategies that support the Nigerian government to achieve the broader health agenda of Universal Health Coverage and other health related sustainable development goals. As an organization, we are determined and committed to a Nigeria and an African continent that provides high quality health care for its citizens through very responsive and resilient health systems.

We are glad to partner with You.

ABOUT **US**

KNCV Nigeria is a National Non-profitable organization dedicated to the fight against Tuberculosis an other diseases of public health concern in Nigeria.
We are a Center that promotes Effective, Efficient, Innovative and Sustainable disease control strategies in a National context

KNCV Nigeria



KNCV NIGERIA VISION AND MISSION

VISION STATEMENT

A globally recognized center of excellence for the prevention and control of Tuberculosis and other diseases of public health concern in Nigeria

MISSION STATEMENT

To promote and support the prevention and control of TB and other diseases of public health concern in Nigeria through the implementation of innovative and evidence informed disease control strategies.

KNCV NIGERIA VALUES

INTEGRITY: ***We are trusted by the communities we serve.***
Our commitment to excellence over the years has earned us pride of place as a trusted source of high-quality programmatic evidence and knowledge in the field of public health.

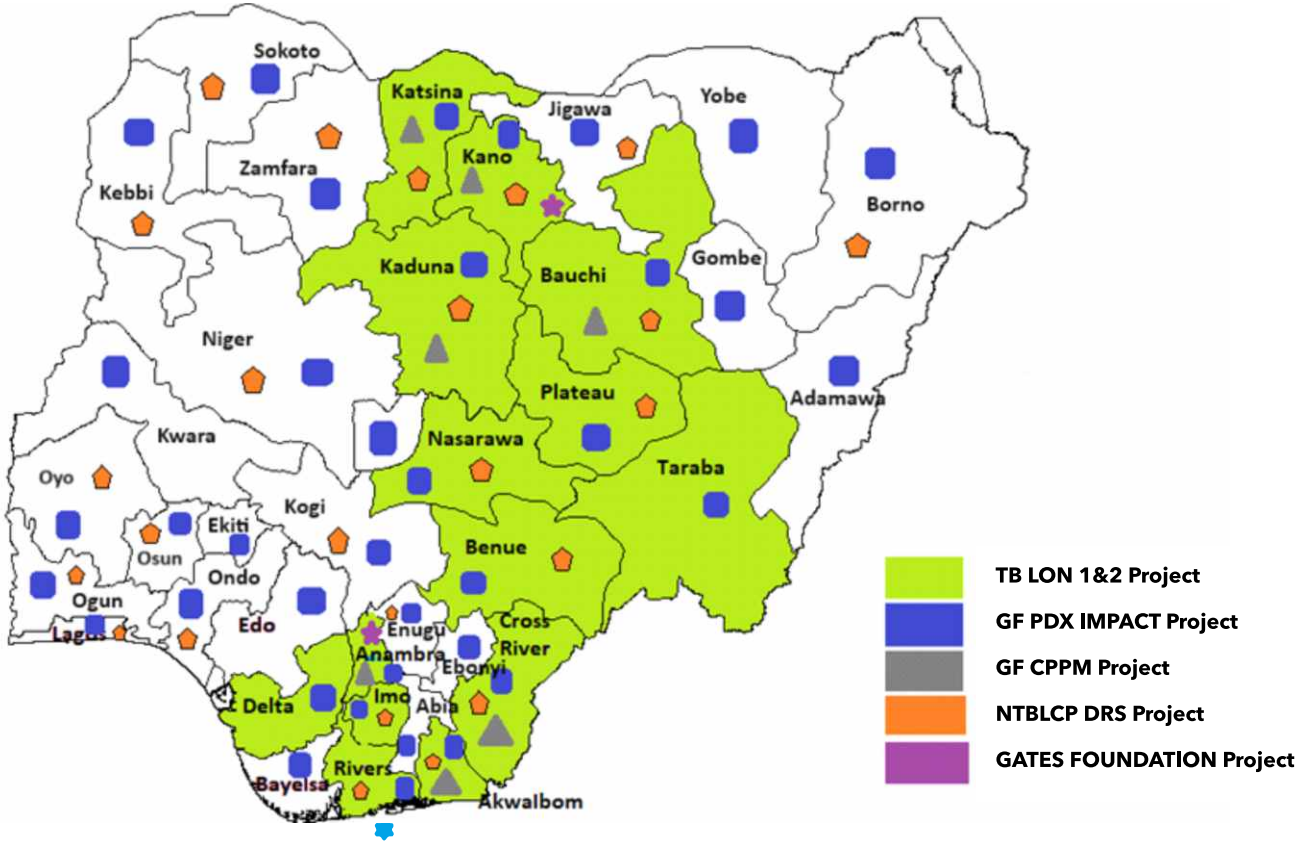
INNOVATIVE: ***We explore all possibilities.***
We are committed to seeking out novel approaches in all that we do – our operations, evidence generation and stakeholder engagements.

PARTNERSHIPS: ***We are stronger together.***
Our best results are realized from working collaboratively with partners at all levels. In each of our partnerships, we seek the best from each other as we work collaboratively to improve health outcomes.

RESPONSIVE: ***We act decisively.***
We respond passionately and efficiently to the needs of those we serve and constantly seek new ways to serve them better.

INCLUSIVE: ***We embrace diversity.***
We recognize, respect and appreciate differences in age, gender, ethnicity, education, physical abilities, race, and religion among our respective stakeholders. Internally, we strive to achieve greater impact in the work we do by leveraging on the diversity within our workforce.

KNCV NIGERIA PROJECT MAP



OUR PROJECTS

TB LON 1&2 PROJECT

THE LOCAL ORGANIZATION NETWORK

GLOBAL FUND PROJECT

PUBLIC PRIVATE MIX (PPM) IN TB CONTROL

GATE FOUNDATION PROJECT

GATES FOUNDATION TOOLS EVALUATION STUDIES

IMPACT PROJECT

IMPLEMENTATION OF PORTABLE DIGITAL X-RAY FOR ACF

ASCENT PROJECT

ADHERENCE SUPPORT COALITION TO END TB

AIDA PROJECT

VIRTUAL TREATMENT SUPPORTER AVAILABLE ON WHATSAPP

TUBERCULOSIS LOCAL ORGANIZATIONS NETWORK (TB LON)

The TB LON 1 & 2 Project, implemented by KNCV Nigeria, aims to improve tuberculosis (TB) prevention, detection, treatment, and notification across 14 states in Nigeria; Bauchi, Kaduna, Katsina, Kano, Nasarawa, Plateau, Taraba, Anambra, Akwa Ibom, Benue, Cross River, Delta, Imo, and Rivers State. The initial award period started in 2020 and lasted until 2025, with an extension from March 2025 to March 2026. The project engages 220 staff, 1008 Adhoc staff, 334 LGAs, and 1,740 private and public health facilities, communities, and civil society to expand access to high-quality, person-centered TB services. It strengthens health systems, reduces TB transmission, and accelerates innovative solutions with support from a consortium of partners and service providers. The project's four intermediate results are as follows;

- **Improved access to high-quality, person-centered TB, DR-TB, and TB/Human Immunodeficiency Virus (TB/HIV) services;**
- **Strengthened TB service delivery platforms;**
- **ReducedTB disease transmission and progression and**
- **AcceleratedTB innovations with improved impact on program implementation**

KNCV Nigeria is working with a consortium of partners- two sub recipients- CCCRN and KNCV International and six strategic service package providers- Intrasat Global, IPCD, Jana Health Foundation, Diadem Consult, Public Health Concerns Ltd and TB Network. Towards meeting the project set targets, KNCV Nigeria and partners adopted a mixed model of community and facility based, health systems strengthening strategies and digital solutions to find TB cases in a Roll in, Roll on and Roll out staged approach.
Roll in is the planning stage, collaborations and capacity building, Roll on is the saturation stage while roll out is the transitioning Stage.

GLOBAL FUND

KNCV Nigeria serves as a Sub-recipient (SR) for the Global Fund Community and Public Private Mix (COMMPPM) Grant, which seeks to scale up TB prevention, diagnostic, and treatment services through optimal community and Private sector engagements in Nigeria, in addition to reducing the transmission of HIV from an infected mother to her child. The overarching goals of the grant are:

1. To accelerate efforts at ending the TB epidemic in Nigeria by ensuring access to comprehensive and high-quality patient-centred and community-owned TB (TB, TB/HIV and DRTB) services for all Nigerians by 2026
2. To increase the PPM contribution to the National TB case notification from 24% in 2022 to 30% in 2026, and to increase community contribution to the National TB case notification from 43% in 2022 to 45% in 2026.
3. To achieve 100% HIV screening among pregnant and breastfeeding women in unconventional settings (TBAs and Home Settings) in Nigeria by 2026.

The current grant is a 3-year award (2024 – 2026), and KNCV Nigeria is supporting 7 states of Nigeria (Akwa Ibom, Anambra, Bauchi, Cross river, Kaduna, Kano and Katsina states) to notify a total of 67,546 TB cases from private health establishments, and additional notification of 111,633 TB cases through community active TB case finding, as well as test 1,540,443 pregnant women for HIV during the lifespan of the project. In the supported States, KNCV will also support TB sample transportation across testing sites, as well as implement programmatic management of community MDRTB.

To achieve this mandate, KNCV works with the following private provider types to actively screen, diagnose, and manage TB cases:

- FAITH-BASED HOSPITAL AND CLINICS (FBO)
- PRIVATE FOR-PROFIT HOSPITALS AND CLINICS (PFP)
- PRIVATE STAND-ALONE LABORATORIES
- PATENT MEDICINE VENDORS (PMV)
- COMMUNITY PHARMACIES (CP)

Similarly, to optimise TB case finding from community structures, KNCV Nigeria engaged 18 community-based organisations across the supported states to drive active TB case finding across all LGAs in the supported States.

GF IMPACT PROJECT

The Implementation of Portable Digital X-ray for Active TB case finding (IMPACT) Project, by KNCV Nigeria, is a Global Fund project under the GC7. grant National TB and Leprosy Control Programme (NTBLCP) is the Principal Recipient, whereas KNCV is the technical lead. ; .

IMPACT project oversees the deployment and operationalization of 411 digital x-ray platforms. These platforms are strategically distributed across both community-based settings and healthcare facilities spanning all 36 states and the Federal Capital Territory (FCT). The implementation prioritizes underserved and remote regions, correctional facilities, and high-risk demographics, including Persons Living with HIV (PLHIV). The digital x-ray utilizes artificial intelligence (AI) and W4SS to profile presumptive cases while integrating with XMAP, a digital x-ray reporting platform for clinical TB diagnosis. The project is driven through collaboration with the NTBLCP, STBLCP, KNCV, all the SR under the IHV-Nigeria C-PPM grant, and a very close partnership with the CBOs and members of every community where this project is located.
To optimize system utilization and ensure long-term operational sustainability, targeted capacity-building workshops were conducted across Nigeria's six geopolitical zones. These training initiatives aimed to enhance the proficiency of personnel involved in the field deployment and implementation within both facility and community settings

GATES FOUNDATION PROJECT

KNCV Nigeria is implementing the Tools Evaluation Studies project, a novel initiative funded by Gates Foundation in collaboration with the National Tuberculosis and Leprosy Control Program (NTBLCP). The project aims to evaluate the accuracy and operational feasibility of new point-of-care TB diagnostics among presumptive TB clients at primary care settings and patients being screened for TB in community settings. Through this project, KNCV Nigeria will pilot two cutting-edge point-of-care diagnostic platform, PlusLife and Truenat Ultima that have the potential to transform TB diagnosis, particularly at the primary healthcare and community levels. In addition to evaluating the two diagnostic platforms, the project will explore complementary innovations such as the Raisonance AI-powered cough analysis app and digital stethoscope to strengthen TB screening at the point of care.

The project implementation states include Anambra and Kano States, leveraging a dual approach that combines field implementation and operational research. The field implementation component focuses on deploying the new diagnostic and screening tools in real-world healthcare and community settings, while the research arm will generate evidence on diagnostic accuracy, feasibility, and user acceptability.

Insights from this study will guide policy development and inform the integration of these tools into the national TB diagnostic algorithm, contributing to more efficient, accessible, and equitable TB diagnostic services across the country. Also, findings from this study will help close persistent diagnostic gaps, enhance case TB case finding, and support Nigeria's broader goal of ending TB as a public health threat. This initiative reflects KNCV Nigeria's continued commitment to innovation, evidence generation, and partnership-driven solutions for improving health outcomes nationwide

KNCV Nigeria team, led by the Executive Director Dr Odume with stakeholders from NTBLCP following a project introductory meeting

Truenat Ultima Quattro
The Truenat MTB Ultima assay uses sputum and tongue swab samples that is a non-invasive and convenient alternative to sputum

PlusLife Mini Dock
A rapid point-of-care diagnostic tool which uses sputum swabs and tongue swabs with are a non-invasive and convenient

RAIsonance AudibleHealth TB Screener
A non-evasive AI-powered tool that analyzes cough sounds to identify unique acoustic patterns in coughs enabling rapid TB screening without the need for specialized equipment

AI Diagnostics Digital Stethoscope
A portable, rapid, cost-effective, wireless digital stethoscope paired with an AI model that screens for pulmonary tuberculosis through lung sound analysis

ASCENT DRTB PROJECT

The ASCENT DR-TB (Adherence Support Coalition to End TB) Project, funded by the Treatment Action Group (TAG), is addressing barriers to DR-TB treatment in Nigeria, particularly low literacy, stigma, and weak health infrastructure. With the introduction of the BPaL/M short regimen, the project emphasizes community empowerment and system strengthening to ensure effective treatment uptake.
Through a multi-pronged approach, ASCENT DR-TB engages Community Health Advocates (CHAs), Healthcare Workers (HCWs), and local leaders to raise awareness, eliminate stigma, promote early diagnosis, and support treatment adherence.
The project also supports the uptake of WHO's shorter regimen recommendations using a stage-gated approach, beginning with a country self-assessment to identify gaps and define a technical assistance (TA) plan, delivered in collaboration with the National TB Programme (NTP) and partners.
A key component of the project is community demand generation, led by TAG in partnership with Civil Society Organizations (CSOs) to build patient treatment literacy and advocate for access to shorter, patient-centered DR-TB regimens and care.

KNCV NIGERIA'S ROLE IN THE UNITAID ASCENT PROJECT

The ASCENT (Adherence Support Coalition to End TB) project is a Unitaid-funded global initiative implemented by a consortium of partners, KNCV Tuberculosis Foundation (lead partner), and the Treatment Action Group (TAG). The project is being implemented across several high TB-burden countries, including Nigeria, with the goal of improving treatment outcomes for people affected by drug-resistant tuberculosis (DR-TB) through the use of digital adherence technologies (DATs) and community-based support.
In Nigeria, KNCV Nigeria serves as the lead implementing partner, working closely with the National Tuberculosis and Leprosy Control Programme (NTBLCP), state TB programs, and other stakeholders to roll out and scale up ASCENT activities. The organization provides technical leadership, program coordination, and capacity strengthening for health workers and community advocates.

SPECIFICALLY, KNCV NIGERIA IS RESPONSIBLE FOR:

· Leading project implementation and coordination at national and state levels.
· Supporting the adoption of WHO-recommended shorter DR-TB regimens such as BPaL/M.
· Strengthening community engagement through Community Health Advocates (CHAs) and Civil Society Organizations (CSOs).
· Driving data use, monitoring, and evaluation to track progress and inform policy decisions.
· Collaborating with partners like TAG to promote patient-centered approaches and treatment literacy.

Through its leadership role, KNCV Nigeria ensures that ASCENT's innovations and best practices contribute to Nigeria's national efforts to end DR-TB and improve treatment adherence outcomes.

Aida PROJECT

KNCV Nigeria is excited to introduce "Aida", a virtual treatment supporter available on WhatsApp and powered by OpenAI's GPT-4o model. Aida is not an acronym, but a unique name chosen to represent a TB treatment companion that offers interactive, multilingual support and provides personalized information and guidance throughout the treatment journey.

Developed by KNCV Tuberculosis Foundation, Netherlands, and in collaboration with the National Tuberculosis, Leprosy and Buruli Ulcer Control Program (NTBLCP), KNCV Nigeria is piloting Aida in eight DR-TB outpatient clinics across Kano State, reaching both drug-resistant and drug-susceptible TB patients. The project has a research component designed to assess Aida's feasibility and acceptability as a virtual treatment supporter. Through this, the project seeks to generate valuable insights on patient engagement, user satisfaction, and the role of artificial intelligence in improving adherence by strengthening self-efficacy and encouraging active participation in TB management. The findings will help refine Aida further and shape strategies for scaling AI-driven adherence technologies within the TB program.

Project implementation began after introductory meetings with the NTBLCP and the Kano State TB program, followed by training sessions for DOT officers, TB Local Government Supervisors, and state TB program representatives. The interactive training sessions provided hands-on mentorship, guiding participants on how to register patients on Aida, support their treatment journey, and make full use of the chatbot's features. On-site onboarding sessions were then conducted to assist DOT officers with patient enrolment, while also documenting early observations from the field. To complement these activities, posters and pamphlets were distributed across implementing facilities, ensuring that patients were made aware of the benefits of enrolling on Aida.

At Dambatta General Hospital, one of the first patients enrolled shared her excitement about the Aida chatbot, noting how much convenience it brings to treatment.

"Honestly the app is very useful because it would reduce or rather it would be bring much ease to us, like we don't need to go anywhere to ask questions, we would not need to go to the Hospital too, we can just use our phone (in real time) to process or make enquiries that we have and we would get reply immediately without any stress, so you see it would be of great help"
When probed further on if she envisages any challenges in the use of Aida, she responded as follows

"Honestly, there wouldn't be any challenges whatsoever. It's a relief to us and also a relief to you, the leaders, that we keep looking for you to answer our questions, so the workload on your shoulders has also been reduced."

Aida is already beginning to show its promise, not only as a tool that eases the treatment journey for patients but also as one that reduces the burden on health workers, creating a win-win for the TB response in Nigeria.

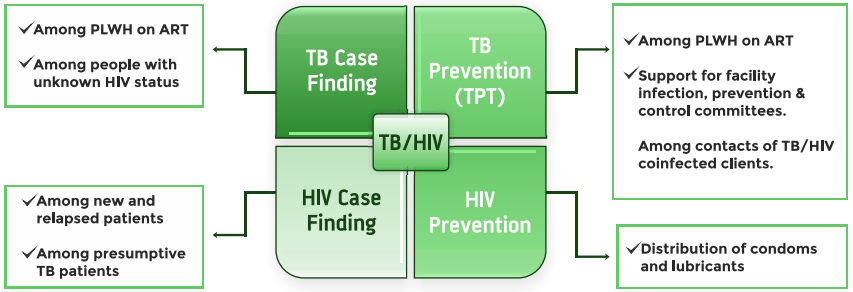
Enrolment of patient on Aida at GH Dambatta by the DOT officer

ACE 6 PROJECT

The ACE 6 (Accelerating Control of the HIV Epidemic Cluster 6) Project is being implemented in three states namely Bayelsa, Edo and Lagos states with a consortium of partners led by the Heartland Alliance as the principal recipient and KNCV Nigeria as one of the sub grantees. The project employs a rights-based approach that integrates contextual health systems strengthening with comprehensive HIV care.

KNCV Nigeria is the leading consortium partner responsible for providing technical assistance towards effective TB/HIV implementation through facility and community based strategies particularly strengthened TB surveillance and 95% preventive therapy coverage among over 85,000 ART clients. KNCV Nigeria also ensures that at least 95% of all presumptive and diagnosed TB patients in supported LGAs know their HIV status, at least 95% of those with HIV positive status are linked to ART, and at least 95% of TB/HIV coinfected clients are virally suppressed and achieve a good treatment outcome.

The illustration below summarizes the various project strategies:



2ND NATIONAL DRUG RESISTANCE SURVEY (DRS) PROJECT

To mitigate potential disruptions and ensure continuity of critical survey activities following the funding cuts from the United States Government (USG) in January 2025, the project successfully leveraged alternative funding through the Federal Ministry of Health Nigeria's Sector-Wide Approach (SWAp) office. This strategic financing enabled the continuation of program implementation across all 24 participating states during the approved project extension period. The SWAp funds were prioritized to address backlog payments for consultants, core project staff, and ad hoc field personnel, thereby stabilizing the workforce and sustaining momentum for survey completion.

With these financial gaps addressed, participant enrollment activities were completed across all 60 survey clusters, led by trained ad hoc staff operating within the cluster health facilities. Concurrently, national laboratory supervisory teams conducted targeted laboratory supervision visits to assess and strengthen readiness for isolate shipment. Laboratory coordination by designated lab associates ensured timely sample processing at culture laboratories, adherence to quality assurance protocols, and shipment of isolates to the zonal reference laboratories. Subsequently, isolates were shipped to the Supranational Reference Laboratory (SRL) in Milan, Italy, for advanced drug susceptibility testing and further analysis, in line with WHO DRS standards.

KNCV Nigeria Executive Director, Dr. Odume Bethrand accompanied by representatives from the NTBLCP and KNCV Nigeria, on a courtesy visit to the Director of Disease Control at the

GLOVAX PROJECT

The COVID -19 Vaccination Acceleration project has an overall goal of promoting COVID-19 vaccine access, acceptability, and uptake, while strengthening adverse drug reaction feedback and timely response, by leveraging on the ongoing USAID-supported Tuberculosis Local Organization Network (TB LON) 1 & 2 project structures. To ensure acceptance and address the challenges posed by vaccine hesitancy, the project strategically integrates the vaccination program within the KNCV Nigeria TB LON community outreach TB active Cases Finding (ACF) intervention while also leveraging our structure in the supported public and private health facilities. The project has an overall target of reaching 1,454,479 people with full COVID-19 vaccination.

Vaccination began in July 2022 across the initial seven states namely Anambra, Bauchi, Cross River, Imo, Kaduna, Kano, and Taraba and the project deployed innovative strategies such as mobile vaccinations in institutions such as military and paramilitary barracks, motor parks, churches, mosques, schools to improve access to vaccinations. Another innovative strategy aimed at reaching people in extremely difficult terrain is the deployment of reconfigured tricycles "WOW Keke". These are equipped with portable digital X-ray machine (DLB) and Truenat or TB LAMP devices and are deployed to distant and hard-to-reach communities to provide integrated health services with COVID-19 vaccination and other reasonable medical concerns as well as provide routine drugs and screening for chronic illness (Hypertension and Diabetes). Reminder call to clients to ensure full vaccination have also been deployed.

The GLOVAX Project is currently being implemented in five states which are Anambra, Benue, Delta, Rivers and Taraba state. To date, over four million doses of vaccines have been administered across the ten supported states in the country.

DIGITAL ADHERENCE TECHNOLOGIES(DATS) PROJECT

To strengthen adherence to TB medication for improved treatment outcomes, KNCV Nigeria with funding from STOP TB Partnership/UNOPS and a consortium of partners KNCV TB PLUS, Everwell Solutions and Interra Networks implemented the Digital Adherence Technologies (DATs) project in eight (8) states, Akwa Ibom, Rivers, Anambra, Imo, Kano, Kaduna, Nasarawa and Benue States for a 1-year period.

The different DATs models help to remind patients to take their medication, facilitate digital observation of pill-taking, compile dosing histories, triage patients based on their level of adherence, thereby facilitating the provision of individualized care by the TB program based on patient's risk.

KNCV Nigeria implemented two DATs models, 99DOTS using medication labels and Video Observed Technology (VOT). Patients enrolled on 99DOTS recorded medication intake by texting a unique hidden 3-digit code on the medication label to the in-country short-code "3340" while patients enrolled on VOT recorded videos of medication intake daily using the SureAdhere app. Real-time patient-level insights on adherence to medication intake from the two models were available for DOT providers using the Everwell Adherence mobile app.

In one year of implementation, 7665 were enrolled on the two DATs models, 7605 on 99DOTS and 60 on VOT.

TB IMPLEMENTATION FRAMEWORK AGREEMENT (TIFA)

Through the USAID-funded Tuberculosis Implementation Framework Agreement (TIFA) which is a five-year initiative (2019-2024) executed by JSI Research and Training Institute, KNCV Nigeria implements two TIFA fixed-award TB Commitment grants (TCG); the Spot to Tent Onion Model of Contact Investigation (STOM) project and the Social Franchising for TB Contact Investigation (SOFT) project for a 1-year period.

The STOM project employs a systematic approach of TB contact investigation via competency-based training of community health workers (CHWs) to actively screen household contacts of index TB cases identified from treatment registers of DOT facilities across the thirty-one (31) Local Government Areas (LGAs) of Akwa Ibom state while placing eligible household contacts on TPT. This STOM approach includes a "spot" of index patient household contact investigation and a "tent" of house-to-house screening of extended contacts of the index TB case within a 2-km radius of the spot location. This strategy helps reduce stigma and avoid any suspicion on why the index patient's household was visited to facilitate retrieval of missing and newly identified TB cases for linkage to care and treatment.

The SOFT project leverages on the structures set up by the TB LON project in Kano state to improve contact investigation and TPT uptake in private and public health facilities utilizing social franchising. This social franchising involves the engagement of a highly visible network of community-based organizations (CBOs) who are contractually obligated to deliver specified TB services in accordance with franchise standards as a sustainable model to improve the coverage of investigated contacts of index TB cases with training and routine monitoring that ensures standards are upheld and that the required services reach populations most in need in cost effective and timely manner.

TB DIAGNOSTIC CONNECTIVITY PROJECT

With funding from Stop TB Partnership/UNOPS, KNCV Nigeria implements the TB Diagnostic Connectivity Project in fourteen (14) states with the aim to introduce and strengthen the use of the ASPECT connectivity solutions for TB diagnostic instrument networks in Nigeria.

TB diagnostics connectivity solutions are designed to accurately and instantly transmit results from diagnostic instruments to a connectivity dashboard for real-time diagnostic information and decision making by health providers and TB stakeholders. The WHO Global TB Program has strongly advocated for countries to adopt diagnostics connectivity solutions and to make optimal use of the data produced by newer diagnostic instruments that produce digital data as part of the 2016 WHO framework of indicators and targets for laboratory strengthening under the End TB strategy. Under this 1-year project, KNCV Nigeria works with the National Tuberculosis Leprosy and Buruli Ulcer Control Program (NTBLCP) and technical partner SystemOne to establish connectivity for 38 Truenat instruments and build capacity of laboratory personnel and TB stakeholders under the USAID introducing New Tools Project (iNTP) leveraging the ASPECT platform.

JENSEN PAED

TB SURGE PROJECT

The Pediatrics TB Surge is a one-year project funded by Jensen Pharmaceuticals through USAID to rapidly increase childhood TB diagnosis in states with the most need. It leverages on the USG Funded TB LON project and complements the active TB case finding in a manner that addresses existing gaps in childhood TB case finding including under diagnosis.

The project is being implemented in three Northern states on the USG funded KNCV Nigeria TB LON 1 & 2 project namely Kano, Katsina, Bauchi and one Southern State Akwa Ibom.
These are high TB burden states.

Pediatrics TB Surge activities include Active TB Case Finding (ACF) in schools, Intensified TB Case finding in Nutrition, immunization and child health clinics; Childhood TB targeted community TB case finding and improving access to diagnostic using stool based Xpert test and Chest Xray.
It is expected that these activities will close the gap between estimated and notified childhood TB cases in implementing states.

THE TB LAMP

The TB Loop-mediated isothermal Amplification (TB LAMP) is a molecular TB detection tool that is less dependent on environmental temperature and operates on the principle of PCR techniques. WHO endorsed it for use as a replacement to smear microscopy and to complement GeneXpert in countries facing Xpert operational challenges. The mobile solar system made it adaptable for use at peripheral health centers with pervasive power issues.

KNCV Nigeria in collaboration with NTBLCP through USAID funding introduced eleven TB LAMP platforms across seven states in Nigeria after a pilot study. The scientific evidence from the pilot study informed the scale up of TB LAMP across all states with 117 TB LAMP platforms installed in KNCV TB LON supported states. From February 2021 when TB LAMP implementation commenced to December 2025, a total of 1,110,918 sputum samples were tested with the 117 TB LAMP platforms and 87,221TB cases detected.

THE STOOL BASED GENEXPERT

To improve on TB case finding Tamong children, K N C V Nigeria introduced a novel stool based method for GeneXpert diagnosis across the country. This is part of the renewed NTBLCP efforts to improve access to early diagnosis of TB, through systemic screening of children using stool. KNCV Nigeria piloted the stool based Xpert test and supported the country wide scale up. There are 79 TB-LAMP platforms in Nigeria as of June 2023. Between July 2020 to June 2023 a total of 63679 Stool samples, were tested with 2916 TB cases detected.

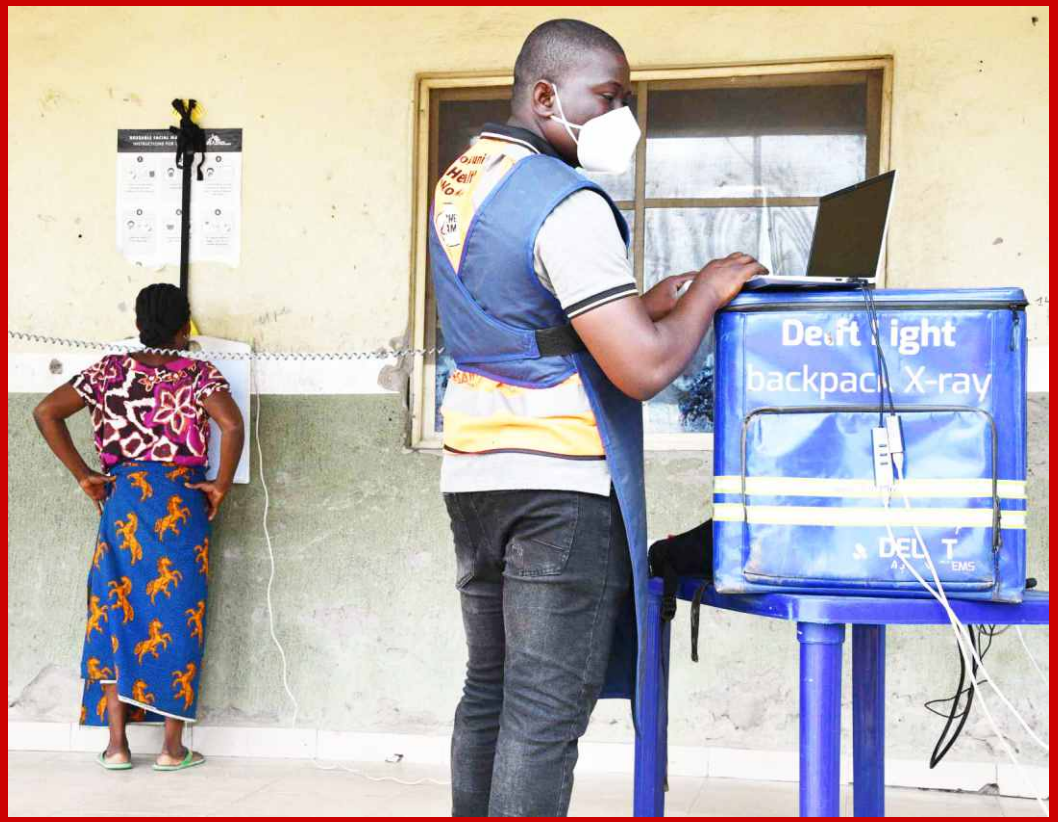
THE NEW TOOLS PROJECT

The new tools project is a collaboration between the Stop TB Partnership and the United States Agency for International Development (USAID) to roll-out a package of the latest innovations in diagnostics, treatments and digital health technologies to strengthen TB care in high burden countries.

TRUENAT

Nigeria successfully introduced 38 Truenat testing platforms for expansion of TB and RR-TB diagnostic access particularly in underserved rural communities. KNCV Nigeria supports implementation of the 28 Truenat platforms across 11 states. Pre-implementation activities which entailed getting the buy-in of NTP and other stakeholders, site assessment & selection, infrastructural upgrade, trainings and machine installations were conducted in November/December 2021. Between December 2021 and June 2023, a total of 4929 TB cases and 60 Rif-resistant cases were detected from 52070 tests conducted using Truenat instruments.

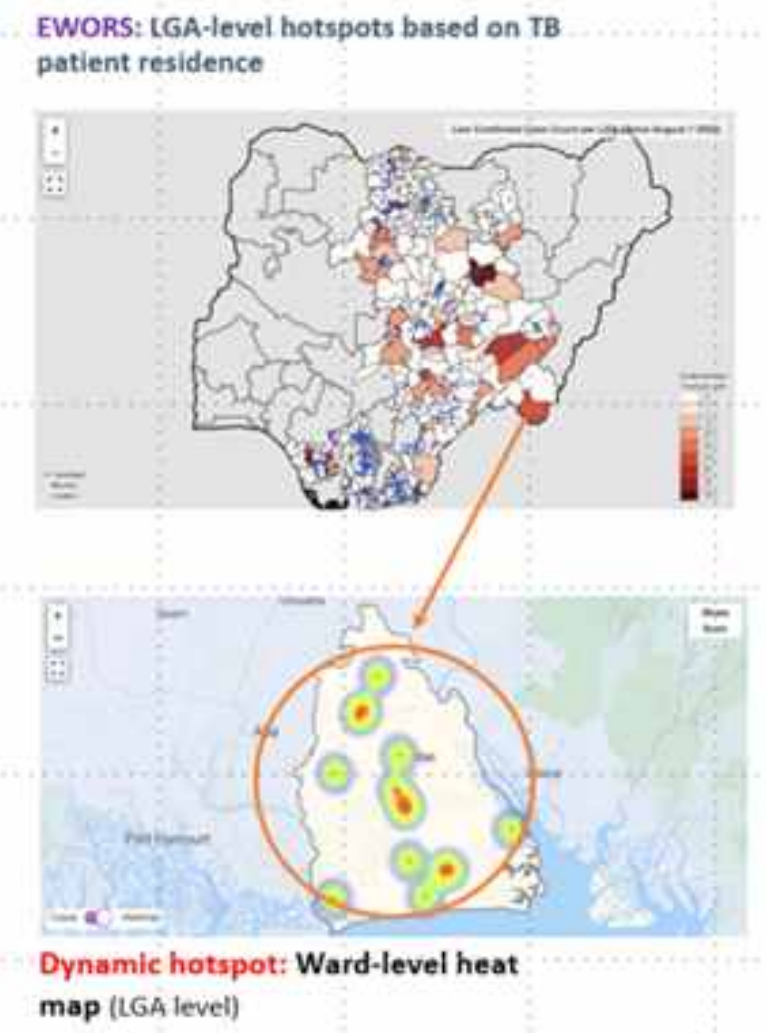
THE **DLB**



The delft-light Backpack known as DLB is a miniature or portable digital X-ray (PDX) machine, equipped with Computer Aided Detection for Tuberculosis Artificial Intelligence (CAD4TB AI) software used for on-the-spot prediagnostic screening amongst the most at-risk populations (MARPs) for TB right at their doorsteps. It has improved access to TB services by reducing the cost of X-rays, transportation time and fare. The USAID, through the new tools project donated 10 DLBs to the country. KNCV Nigeria deployed 7 DLBs for active case finding across 7 states. Between December 2021 and June 2023, 157,730 clients were screened and 3,427 TB cases diagnosed under the DLB PDX community active TB case finding intervention

EARLY WARNING OUTBREAK RECOGNITION SYSTEM (EWORS)

EWORS is an innovative disease surveillance and response system that enables the detection of disease outbreaks and hotspots. KNCV Nigeria deployed the EWORS tool in 14 states in Nigeria under the TB-LON regions 1 & 2 project, as an advanced surveillance mechanism to identify TB hotspots for targeting community TB screening. Introduced by KNCV Nigeria in 2020 as the first TB dynamic hotspot predictive tool in Nigeria, EWORS facilitated the prompt identification of TB hotspots, utilizing heat maps dashboards to display the real-time status of actively monitored TB hotspots in 14 states. The EWORS Artificial Intelligence (AI) algorithms are run every two weeks, based on 14 days of rolling historical data, and alarms are automatically generated for Wards (communities) that meet the set thresholds. Alarm emails are sent to State managers and field officers to conduct community active TB screening interventions in the identified Wards. This innovation has been scaled up to the 36 states and the FCT in Nigeria by the National TB Program.



COMMCARE APP

KNCV Nigeria deployed the Commcare mobile application under the USAID-funded TB LON 1 & 2 project in 2020 for TB screening in health facilities across 14 states in Nigeria. The application serves as a point-of-care (POC) TB screening model for intensified case-finding interventions in healthcare facilities. The CommCare application provides longitudinal data collection and highly customized form logic, enabling frontline healthcare workers to screen clients and monitor service delivery along the patient care pathway, which comprises TB screening, presumptive identification and referral, TB diagnosis, and TB notification. It also captures patient location data at the Ward level for hotspot analytics. Its capabilities also include case-based data management, which categorizes clients based on symptoms and risk level, thereby increasing the efficiency, accuracy, and prioritization of TB service provision and monitoring. Its TB symptom scoring and prioritization follow a standardized algorithm based on risk factors.

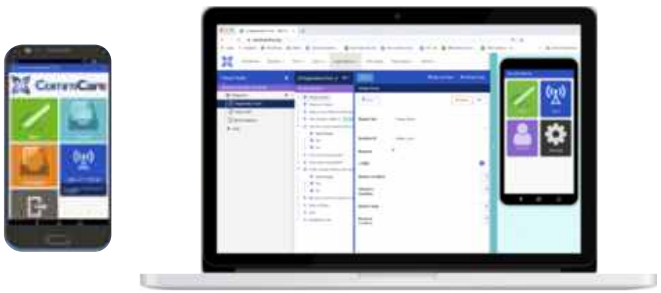
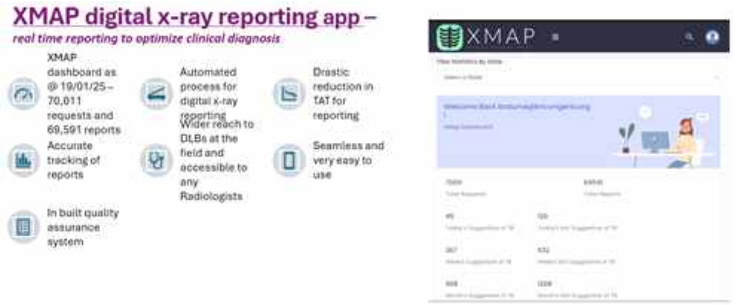


Figure: EWORS. Commcare mobile App and desktop app

XMAP



The KNCV Nigeria introduced the novel XMAP system as part of the innovation to improve TB case finding in Nigeria. The mobile application supports real-time tracking of chest x-ray reporting and facilitates real-time chest x-ray reading and reporting between radiographers conducting CXR screening across remote communities and radiologists/clinicians around the world. Through this innovative application, KNCV Nigeria optimizes clinical diagnosis of presumptive TB cases identified, especially in remote communities, where on-the-spot pre-diagnostic screening using the portable digital x-ray (PDX) machine takes place at the doorsteps of the most at-risk populations (MARPS). The XMAP interactive dashboard provides at-a-glance analytics on CXR results interpretation between screening officers and radiographers, enabling prompt interpretation and linkage to care and treatment. This innovation has been scaled up by the National TB Program and covers over 420 PDXs on the US Government funded TB LON project and Global Fund IMPACT project.

THE CENTER FOR RESEARCH AND INNOVATION IN DISEASE CONTROL (CRID)

The Center for Research and Innovation in Disease Control (CRID) is a Nigerian public health-focused initiative established by KNCV Nigeria. CRID provides cutting-edge research, innovative disease control interventions, training, and policy support to tackle Nigeria's major public health challenges including tuberculosis, malaria, HIV/AIDS, and emerging infectious diseases.

CRID aims to leverage KNCV Nigeria's expertise in research, disease surveillance, and public health innovation to introduce novel strategies, advanced diagnostics, and collaborative frameworks that can enhance Nigeria's disease control capabilities. By fostering partnerships with local stakeholders, international organizations, and academia, the center seeks to catalyse research-driven solutions and contribute to sustainable improvements in public health outcomes across Nigeria.

The establishment of the Center for Research and Innovation in Disease Control by KNCV Nigeria presents a pivotal opportunity to significantly enhance disease control efforts in Nigeria. Leveraging KNCV Nigeria's world-class technical expertise in TB control and other diseases of public health concern, the center is positioned to support government agencies, donors, and health institutions in delivering high-impact solutions especially in the areas of public health research and innovation, disease surveillance and epidemiology, training, capacity building & mentorship, health systems strengthening and implementation science and community engagement

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OUR **PUBLICATIONS**

2020 KNCV NIGERIA PUBLICATIONS

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