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Review Article

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Innovative Models for TB/HIV Integrated Service Delivery in Osun State

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ABSTRACT

Background and Challenges to Implementation: Tuberculosis (TB) and HIV co-infection remain a significant public health challenge, especially in high- burden settings. Integrated service delivery models improve outcomes by ensuring early diagnosis, timely treatment initiation, and better adherence.

Track selection
Track: Track H1: Training, education and programmatic capacity building
2nd Track: Track H4: Digital health technologies

However, traditional TB/HIV service models often experience fragmented care, high loss to follow-up, and overburdened health facilities. This study explores innovative integration models and their impact on service efficiency and outcomes.

Intervention or Response: Three TB/HIV integrated service delivery models were reviewed across multiple high-burden settings:

1. **One-Stop Shop Model** – TB and HIV screening, diagnosis, treatment, and counseling are provided at a single facility by a multidisciplinary team.
2. **Community-Based Integrated Care** – Decentralized care through trained community health workers (CHWs), mobile clinics, and home-based directly observed treatment (DOT).

Digital Health Integration: Use of shared digital platforms to track both TB and HIV services

Key performance indicators, such as case detection rates, were analyzed. Qualitative data were collected from healthcare workers and individuals receiving care to assess feasibility and acceptability.

Results/Impact
Through the One-Stop Shop Model, 14,500 women accessed TB screening and HIV testing at engaged unconventional birth homes in Osun State. Community-Based Integrated Care led to a 45% increase in case detection among key populations and improved retention in care. The Sample Logistics Dashboard improved accountability for TB and early infant diagnosis (EID) samples by tracking logistics and result retrieval. Both healthcare workers and individuals receiving services reported higher satisfaction with streamlined, person-centered care. Identified challenges included training gaps, data harmonization issues, and funding sustainability.

Conclusion
Innovative TB/HIV integration models enhance patient outcomes, improve efficiency, and reduce loss to follow-up. Scaling up these models requires addressing operational barriers and strengthening policy, digital tools, and community engagement for sustainability.

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Summary

Summary: This study examines three innovative models for integrated TB/HIV service delivery in high-burden settings: One-Stop Shop, Community-Based Integrated Care, and Digital Health Integration. It explores their feasibility, acceptability, and potential to improve care coordination, access, and outcomes for individuals affected by both diseases.

Other Fields

Country of research: Nigeria

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