Country Experience in single TB-HIV Concept Note

Kenya & Tanzania
Best practices

• Kenya’s experience where both the heads of TB and HIV program managers report to the same director – Facilitated easy working together.
• Use TB/HIV module team (Kenya) or Use of one task force (Tanzania) for the CN writing process.
• Involvement of all stakeholders in the process promotes ownership of the CN.
• Intensified existing collaborative TB/HIV activities
Challenges

• Complexity in terminology used in the CN writing processes
• Difficulty using CN templates especially the budget templates not user friendly
• Lack of prior experience in CN writing
• Suboptimal engagements among other non-technical stakeholders
• Suboptimal ownership in the process
Challenges

• Time consuming, lengthy and highly technical especially for the non technical stakeholders.

• Single Concept Note, but two separate grants:
  – Was necessitated by the existing management structures for grant implementation
  – Procurement of IPT commodities is under TB grant but to be used mainly by HIV team
  – Procurement of all GeneXperts under MDR-TB module, as this module had the most funding from “above allocation”
  – Could result in business as usual
Opportunities

• Joint supportive supervision between
• Harmonized/joint training curriculum
• Harmonized roles of health care workers
Recommendations

• Need for an orientation for all the stakeholders on the technical issues under TB/HIV prior to the CN writing process
• Need for increased meaningful engagement of all stakeholders
• Need to accelerate implementation of TB/HIV activities in order to meet the ambitious targets.