Challenges & Recommendations of TB Program during the COVID-19 pandemic

Insights from National TB Protocol Implementation Monitoring Survey

18-26 May 2020

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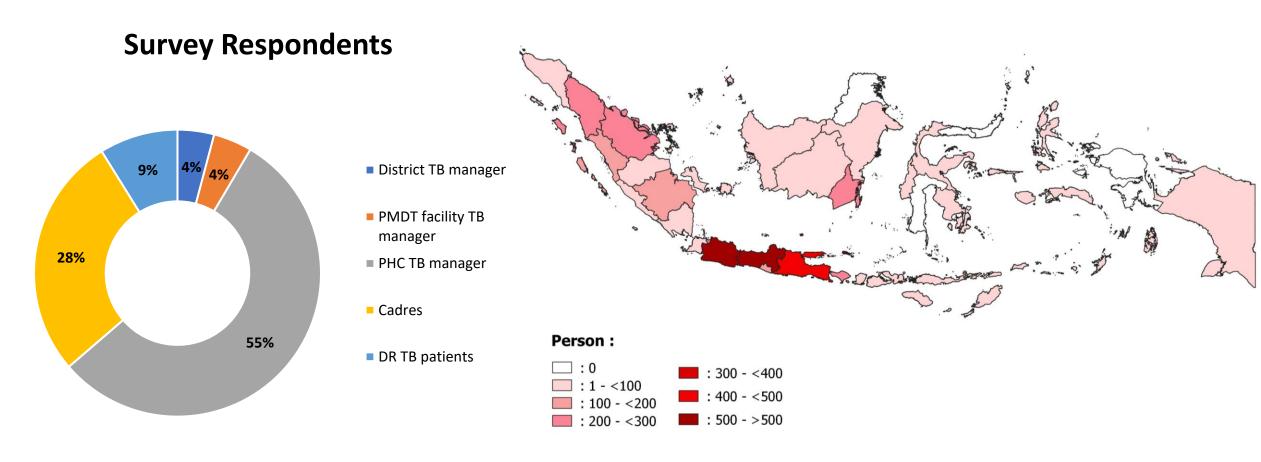


Lembaga Kesehatan Nahdlatul Ulama





4390 respondents from 30 province participated in the survey between 18-26 May 2020



Challenges of 179 District TB Program Managers

- 67.2% district TB managers from 30 province are involved in the COVID-19 district team
- 65.3% district TB managers said that their TB program funding is not adequate until December 2020
- 52.5% district TB managers no longer do supervision and mentoring to health facilities since April 2020
- 34.4% do not have enough DS TB medications until December 2020 (mostly for children)
- 47.2% do not have enough DR TB medications until June 2020
- 81.5% of reports about logistic challenges in TB drugs delivery to districts are barriers in coordination with the Provincial stakeholders
 - The capital city is a red zone for COVID-19
 - Travelling restrictions
 - Limited expedition services

- 50% of respondents reported their health facilities are functioning for COVID-19 services
- Among them, 22.4% do not have enough human resources in the TB program
- 69% of PMDT primary health centres and 41% of PMDT hospitals continue injection for DR-TB treatment at their current facility
- 62.6% PMDT facilities paused contact investigation activities
- 13% of PMDT facilities paused microscopy testing and the biggest reason is because their lab facility focus on COVID-19 services

Challenges of 193 TB program in PMDT facilities Challenges of 1454 TB Program in Primary Health Centers

- 91% of respondents reported that their facility serves patients who are suspected with COVID-19
- 37% have not done community engagement and mapping during the pandemic
- 63% PHC workers continue contact investigation, active case-finding, and tracing lost-to-follow-up patients
- 13% PHCs paused TB sputum examination (microscopy and molecular testing) and the biggest reason is fear of COVID-19 infection
- 10% reported not having enough DS TB drug stocks until end of June 2020 and the biggest reason is challenges in distribution to health facilities

- 71% lives in COVID-19 red zone and 74.7% reported PHCs in their sub-district also assists in COVID-19 program activities
- 2.3% of cadres do not wear masks when they meet TB patietns in-person
- 59.6% reported they are not aware of District TB Hotline
- 64.5% of community health workers (cadres) paused contact investigation activities
- 47.4% cadres paused TB socialization activities in their communities
- 17% do not utilize mobile phone to monitor patients' drug intake

Challenges reported by 1291 TB cadres Challenges reported by 370 DR TB patients

- 80% of respondents are 15-54 years old; 49.8% are unemployed and 15.5% are housewives
- 31% patients are not wearing face masks daily
- 57.2% reported they are not aware of District TB Hotline
- 11% do not have access to mobile phone to communicate with their patient supporters and responsible healthcare workers (informal street vendors/peddlers; farmer; driver; unemployed; housewives)
- 39% DR TB patients in COVID-19 red zone still commute to health facilities daily
- 20.9% patients do not share two contact numbers to healthcare workers

TB treatment services during pandemic

- PPEs that are mostly used by healthcare workers in TB program
 - PHCs: Face mask, handscoon, head cover, N95 mask
 - PMDT facilities: Face mask, handscoon, head cover, N95 mask
- DS TB: >70% of PHCs give TB medications for 14-30 days interval
- DR TB: >70% of PMDT facilities give TB medications for 14-28 days interval



- 70% of PHCs TB healthcare workers, 67% district TB program managers, and 48% PMDT TB healthcare workers reported that they use mobile phones (WhatsApp, call, text/chat) to monitor TB patients drug intake
- The biggest barriers are telecommunication network and patients do not have mobile phones. Healthcare workers contact cadres/patients' family (45% of PHC respondents; 38% of PMDT respondents) or continue to do home visits while practicing physical distancing (41% of PMDT respondents; 18% of PHC respondents)
- 55% of DR TB patient & 41% of TB cadres reported they found TB information through social media; 33% of district TB managers use social media to promote TB information

Utilization of mobile phones & social media

Priority recommendations/asks from respondents

- **District TB program managers:** PPEs and masks (33%), district policies for TB services during the pandemic (17%), adequate district budget (14%)
- **PMDT facilities:** PPEs and masks (35%), improvement in drug supply and delivery (14%), support in TB recording and reporting (12%)
- Primary health centers: non-mask PPEs (23%), masks (18%), mentoring from DHOs (14%)
- Cadres: Mobile data vouchers (25%), non-mask PPEs (18%), masks (14%)
- DR TB patients: Free face masks (25%), improvement for a more personcentered care in health facility (25%), social welfare (16%)