## **Indonesia Work Plan**

FY 2022 Program Year 4

October 2021-September 2022







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### **ACT | EAST PROGRAM OVERVIEW**

The U.S. Agency for International Development (USAID) Act to End Neglected Tropical Diseases (NTDs) | East Program (Act | East) supports national NTD programs in reaching World Health Organization (WHO) goals for NTD control and elimination through proven, cost-effective public health interventions. The Act | East Program also provides critical support to countries on their journey to self-reliance, helping them create sustainable programming for NTD control within robust and resilient health systems. The Act | East Program is being implemented by a consortium of partners, led by RTI International and including The Carter Center; Fred Hollows Foundation; Light for the World; Results for Development (R4D); Save the Children; Sightsavers; and Women Influencing Health, Education, and Rule of Law (WI-HER).

In Indonesia, Act | East program activities are implemented by RTI International.

# COVID-19 PANDEMIC IMPACT ON ACT | EAST ACTIVITIES AND WORK PLANS

The coronavirus disease 2019 (COVID-19) pandemic continues to impact neglected tropical disease (NTD) programs. On April 1, 2020, the World Health Organization (WHO) issued guidance to NTD programs, recommending that almost all in-person activities be postponed until further notice. With the support of USAID, Act | East stopped all activities that matched the criteria outlined.

On July 27, 2020, WHO issued further guidance on assessing whether NTD activities could restart safely. Act | East, in collaboration with Act | West and the U.S. Agency for International Development (USAID), developed activity restart guidance and resource documents to support each country to adapt activities appropriately.

Decisions on all supported activities continue to be made in close coordination with ministries of health and are context-specific, varying by country, region, and activity type, and are subject to changes in COVID-19 dynamics. Act | East continues to provide regular updates to USAID on the plans for specific activities through the submission of monthly updates.

Unless noted, work plans for fiscal year 2022 assume a full year of activities and are written with the best information available at the time of submission. Nevertheless, the situation may change in some countries and will result in adjustments to work plans. Act | East will continue to communicate with USAID to discuss these changes as the situation evolves.

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#### **ACRONYMS LIST**

BBTKL Balai Besar Teknik Kesehatan Lingkungan (National Environmental Health Laboratory)

COVID-19 Coronavirus disease 2019
DHO District Health Office
EU Evaluation Unit
FTS Filariasis Test Strips

FY Fiscal Year

GOI Government of Indonesia

HC Health Center
LF Lymphatic Filariasis

M&E Monitoring and Evaluation MDA Mass Drug Administration

mf Microfilaremia MOH Ministry of Heath

NTD Neglected Tropical Disease PHO Provincial Health Office

RPRG Regional Program Review Group

Subdit Sub-directorate for Lymphatic Filariasis and Soil Transmitted Helminths

TAS Transmission Assessment Survey

USAID United States Agency for International Development

WHO World Health Organization

#### 1. NATIONAL NTD PROGRAM OVERVIEW AND SUPPORT

Indonesia is the fourth largest country in the world in terms of population, with 271 million people spread throughout 13,000 islands, divided into 34 provinces and 514 districts. Administrative and health structures related to the management of the national neglected tropical disease (NTD) program include the Ministry of Health (MOH) at the national level, provincial health offices (PHOs), district health offices (DHOs), and community health centers (HCs).

The Government of Indonesia (GOI) is largely self-reliant in implementing its NTD activities. Starting in 2019, the government has fully funded all MDA rounds for LF and most pre-Transmission Assessment Survey (TAS) and TAS in qualifying districts. USAID assistance continues to focus on providing technical and financial support to fill critical gaps in the MOH operational budgets.

#### 2. PLANNED ACTIVITIES: LF

The GOI endorses elimination of LF as a public health problem, and current projections indicate that the national program will be able to stop MDA in most districts after the October 2021 LF MDA (in 203 out of 236 districts, or 86%) and validate the elimination of LF as soon as 2030.

#### **ACT | EAST FY22 ACTIVITIES**

**National LF M&E Coordination Meeting.** This meeting will support coordination, scheduling and budget planning for pre-TAS and TAS implementation, as well as other M&E activities, in support of the national LF program. Previous experience from implementing the surveys in the field will be discussed, problems identified, and best practices shared. Participants will be prioritized based on seniority and those who have been trained previously as TAS supervisors and participated in supervising TAS in the field.

**TAS Training for PHOs and DHOs.** Program staff from the districts planning TAS in 2022 together with their provincial-level counterparts will be trained in TAS implementation, including eligibility, sampling, preparation, testing methodology, and the interpretation of results. The three-day training will help PHOs and DHOs better understand how to organize the surveys in the field and how to use the appropriate rapid tests. The training will be conducted based on the standard WHO TAS training modules and include additional practice time in the field. Pre- and post-tests will be used to evaluate the participants' changes in knowledge after training, and their abilities to use and read the rapid diagnostic tests will be assessed.

**TAS Supervisor Training for BBTKL and PHOs.** This training will build capacity of approximately 20 new programmatic staff from BBTKL and selected PHOs as TAS supervisors. These personnel will then be provided with mentoring in the field by Act | East and Subdit staff and eventually will become directly responsible for organizing and supervising individual TASs in their respective areas in the near future.

**LF Diagnostic Tools Training.** This training will support laboratory staff from selected BBTKLs and from provincial and district health services in those LF-endemic areas that are ready to implement pre-TAS to be trained in the various laboratory procedures required for LF testing, with a strong emphasis on the various practical laboratory skills involved, including microfilaremia (mf) testing. The training will be organized at the University of Indonesia in Jakarta, where qualified laboratory technicians and LF experts are available. Practical applications and considerable practice in each of the various laboratory tests will be emphasized. The training will include both pre- and post-tests to measure changes in both basic knowledge and the practical application of the appropriate lab tests.

**LF Pre-TAS.** The MOH has prioritized 21 of 58 districts eligible for pre-TAS surveys for FY22. The MOH will support 17 of these surveys (81%) and has requested Act | East to support the remaining four priority surveys. In addition, eight pre-TASs that were not completed in FY21 due to the COVID-19 pandemic are rescheduled for implementation in FY22.

The central-level and BBTKL team will supervise surveys in one sentinel and one spot-check site for each district assessment, using mf testing,<sup>1</sup> in collaboration with provincial and district level program staff and HC laboratory technicians. The results of the pre-TAS will be entered into the Integrated NTD Database and shared with the districts through a formal letter from the Subdit. Surveys will also include additional questions about participation in previous MDAs. Due to COVID-19, any required pre-MDA planning meetings will take place virtually, and Act | East staff may be included to provide technical support.

**LF TAS.** Act | East will support 23 TAS surveys in FY22, including 17 TAS2 (17 evaluation units [EUs]) and 6 TAS3 (6 EUs). Again, due to budget constraints caused by the national COVID-19 response and faulty Brugia rapid tests, the MOH is only able to support 63 of the 86 TASs planned for 2022 (73%) and has therefore requested support from Act | East for the remainder. Most of these 23 surveys will be implemented in districts where USAID has previously supported MDA rounds, via ENVISION, or pre-TAS and/or TAS, via Act | East.

For all TASs, each EU will consist of one implementation unit, except for Lebak District, which has been split into two EUs and Mauro Jambi District, which will split into three EUs. All TASs will be school-based and will apply antigen testing with FTS in *W. bancrofti* areas, or antibody testing with Brugia rapid tests in *Brugia spp.* areas. All required test kits will be procured by the MOH. If any districts

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<sup>&</sup>lt;sup>1</sup> Given that Brugian and mixed areas cannot use FTS and there is no official WHO guidance for use of Brugia rapid tests for pre-TAS, the GOI uses a uniform protocol for all pre-TAS using mf.

result in outcomes above threshold for the TAS2 or TAS3, Act | East will work with the Subdit to submit a request to the WHO Regional Program Review Group (RPRG) for advice on next steps, per the guidance in the 2011 WHO LF TAS Manual and from the 2016 LF TAS Expert Meeting in Jakarta. If surveys in districts supported by Act | East result in outcomes above threshold, the Act | East Indonesia technical team will provide technical assistance to the Subdit in its efforts to investigate reasons for the outcome and encourage districts to make adaptations to the upcoming MDA to address reasons for outcomes above threshold. Due to COVID-19, any pre-MDA planning meetings required will take place virtually, and Act | East staff may be included to provide technical support.

**LF Mini-TAS.** Act | East will support the implementation of a mini-TAS in Buton District (1 EU), as recommended by the Southeast Asia Regional Office (SEARO) RPRG in June 2021, to validate the results of a TAS3 that was completed in February 2021 using faulty Brugia Rapid tests. The standard protocol for mini-TAS will be utilized, including sampling based on the Survey Sample Builder. The Subdit will provide the rapid tests for the survey following careful quality control measures.