

SOUTH AFRICA TB RECOVERY PLAN TO MITIGATE THE IMPACT OF COVID-19

The COVID-19 pandemic has had far-reaching effects on the global tuberculosis (TB) response, threatening to erase years of progress. In South Africa, there was a **41 percent decline**¹ in TB case notifications and a **26 percent decline**² in drug-resistant TB (DR-TB) case notifications in 2020, compared to 2019. To address these concerning declines, USAID has developed this TB Recovery Plan³ in support of the National TB Program’s (NTP) larger efforts to mitigate the impacts of COVID-19 on the country’s TB response. Table 1 below provides detail on the interventions that USAID will support to address TB setbacks and further make progress towards the United Nations High-Level Meeting on TB (UNHLM) targets. USAID is dedicating more than **\$11,500,000** in assistance towards the recovery plan activities described below.⁴ This is expected to contribute to an estimated 14 percent increase in TB case notifications in 2021, compared to 2019.⁵ These activities were planned in coordination with and are complementary to the Global Fund to Fight AIDS, Tuberculosis and Malaria’s recovery efforts.

Table 1: Snapshot of USAID-supported TB activities to mitigate the impacts of COVID-19.

TB activities most affected by COVID-19	USAID-supported Key Interventions
Drastic reduction in TB case finding and notifications	Scale up simultaneous screening and testing for TB as part of the integrated service delivery package for COVID-19 by training healthcare workers on how to integrate TB and COVID-19 testing; providing job aids and references; and using linkage officers to provide follow up services to patients (including health education), monitor implementation of effective infection prevention and control (IPC) practices, and link contacts of TB patient to TB testing services, etc.
	Expand TB contact investigation interventions by implementing the mobile clinic model and providing technical assistance (TA) to community health care workers.
	Scale up targeted universal testing for TB (TUTT) to test asymptomatic high-risk groups including TB contacts and people living with HIV (PLHIV) in communities and facilities.

¹ Based on data collected by the World Health Organization.

² Based on data collected by the World Health Organization and National TB Program.

³ This TB Recovery Plan is implemented over a nine-month period from March to December 2021.

⁴ No additional funding was provided to USAID for implementation of this TB Recovery Plan. While there are other interventions that also require attention and resources, USAID prioritized support for key interventions that could produce the greatest impact on recovery efforts within existing, limited budget levels.

⁵ Given the uncertain trajectory of the COVID-19 epidemic, these plans are made with the assumption that the COVID-19 containment measures are successful in 2021.

TB activities most affected by COVID-19	USAID-supported Key Interventions
<p>Drastic reduction in TB case finding and notifications (continued)</p>	<p>Further scale up the use of digital Chest X-rays (CXR) to identify additional TB cases.</p>
	<p>Improve linkage to treatment and service delivery for patients diagnosed with TB, including DR-TB, by more effectively using Rif-alert and National Health Laboratory Service data, scaling up the use of the comprehensive active TB tracker (CATT - an online tool for monitoring DR-TB patients), sending direct messages to alert patients of their TB status, etc.</p>
	<p>Assess and improve the TB diagnostic services to ensure maximum access to all.</p>
<p>Decline in TB treatment success rate</p>	<p>Scale up the use of comprehensive care packages by training health care workers as well as procuring and implementing the use of digital adherence and monitoring tools like pill boxes.</p>
	<p>Ensure patients have access to treatment for the duration of the TB treatment regimen by delivering TB medicines to patients' homes, increasing awareness of the availability of TB medicines, and conducting mortality audits to identify and address all factors contributing to the high death rate.</p>
<p>TB data quality issues</p>	<p>Address TB data quality issues by deploying data capturers to ensure data is captured in real time to better understand the impact of COVID-19, conducting TB data quality audits (DQAs), and procuring the necessary equipment (e.g. computers) for facilities.</p>
<p>Lack of available resources for TB</p>	<p>Pilot a TB Government to Government (G2G) mechanism that will intensify TA at the provincial level to address systemic challenges that are contributing to poor implementation of key TB interventions and policies that have been exacerbated by COVID-19.</p>
	<p>Provide TA at the national level to further build NTP capacity to address areas impacted by COVID-19 including laboratory capacity, TB supply chains, pharmacovigilance, data quality, etc.</p>
	<p>Support the NTP in the implementation, monitoring, and review of the government's TB catch-up (recovery) plans through active participation in the Think Tank and provision of TA at the district and provincial level.</p>