

TAJKISTAN 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 Tajikistan, there was a **28 percent decline**¹ in TB case notifications and a **34 percent decline**² in drug-resistant TB (DR-TB) case notifications in 2020, as compared to 2019. To address these concerning declines, USAID 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 **\$2,700,000** in assistance towards the recovery plan activities described below.⁴ This is expected to contribute to an estimated 5 percent increase in TB case notifications and an estimated 15 percent increase in DR-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 (Global Fund) 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 decline in TB case notifications	Strengthen specimen transportation system including transport from rural village health facilities to district laboratories.
	Intensify case detection and contact investigation via community outreach teams and social worker support including the procurement of TB diagnostic equipment and commodities.
	Introduction and scale-up of the TB component of simultaneous TB and COVID-19 testing including training of the lab staff on using and interpreting simultaneous TB and COVID-19 test results.
Decrease in TB screening for people with presumptive TB	Advocate and provide technical assistance (TA) to the Ministry of Health (MOH) to increase access to free Chest X-ray (CXR) screening for all people who are contacts of TB patients and presumptive TB patients.

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
Decrease in DR-TB treatment initiation	Expand access to all-oral DR-TB treatment regimens for patients and improve treatment adherence and monitoring by scaling up community outreach activities and expanding patient access to psycho-social support.
Increased difficulty for TB patients to continue treatment during COVID-19 lockdowns	Scale up innovative treatment adherence technologies (e.g. virtual directly observed therapy [V-DOT], family DOT [F-DOT], community-based DOT).
	Increase coordination with the local network of non-governmental organizations (NGOs) and community-based organizations (CBOs) to increase treatment adherence and patient access to psycho-social support, and minimize patients lost to follow-up between TB diagnosis and treatment.
Limited availability of TB staff due to reassignment to COVID-19	Establish a pool of health professionals who have training and experience in TB control that can provide surge support.
Exacerbation of stigma and discrimination	Provide continuous training on stigma and discrimination regularly for outreach workers, community volunteers, and primary care workers.
Delays in Global Fund TB grant implementation may cause delays in order and shipment of laboratory commodities and diagnostics	Procure a limited supply of laboratory commodities and diagnostics to ensure there is no stock-out or shortage.