

## UKRAINE 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 Ukraine, there was a **31 percent decline**<sup>1</sup> in TB case notifications and a **47 percent decline**<sup>2</sup> in drug-resistant TB (DR-TB) case notifications in 2020, compared to 2019. To address these concerning declines, USAID developed this TB Recovery Plan<sup>3</sup> 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 **\$3,200,000** in assistance towards the recovery plan activities described below.<sup>4</sup> These activities will be implemented in USAID supported areas which are expected to contribute to an estimated 65 percent of the overall national TB case notifications.<sup>5</sup> 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
Reduced availability of TB diagnostic services because of shorter healthcare facility hours, the shifting focus of healthcare providers to COVID-19, and the lack of a sample transport system	Improve routes of existing mobile clinics and introduce new mobile clinics equipped with mobile digital Chest X-ray (CXR) machines in regions with limited access to health facilities and rapid molecular diagnostics.
	Scale up the use of simultaneous TB and COVID-19 testing by developing algorithms, pre-screening forms, and targeted training for healthcare workers.
	Provide support to strengthen the sample transport by scaling up and adapting the system introduced at the beginning of the pandemic; concurrently this will also strengthen the delivery of TB medicines to community level health facilities.

<sup>1</sup> Based on data collected by the World Health Organization.

<sup>2</sup> Based on data collected by the World Health Organization and National TB Program.

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

<sup>4</sup> 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.

<sup>5</sup> 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
The current provision of patient support packages is not sufficient for TB patients, especially when many have lost incomes due to COVID-19 and the increased stigma	Improve TB treatment outcomes by: developing enhanced TB patient support packages; scaling up innovative treatment adherence technologies (e.g. virtual directly observed therapy [V-DOT] and smart pill boxes) to ensure the provision of high quality, patient-centered care; and providing focused training for primary health care workers.
Reduction in contact investigation activities due to staffing shortages and travel restrictions	Mobilize and expand existing community based contact investigation activities to regions with the highest drop in TB case notification.
	Pilot and scale up the use of community social workers to support contact investigation; community social workers work more closely with TB patients and will ensure all contacts are screened and, as necessary, linked to appropriate treatment.
Decrease in active case finding (ACF) for children under five due to COVID-19 disruptions	Improve case notification for pediatric TB by: piloting and scaling up GeneXpert stool testing and conducting a rapid assessment to identify and address disruptions in ACF among children.
Changes to the provision and financing of TB services were compounded by the concurrent impacts of COVID-19 on the health system and patient care-seeking behaviors	Support the transition of TB services to the new financing model (per the healthcare reform) to ensure adequate funding for access for all, especially during COVID-19 and the correlating increase in costs.
Lack of real-time surveillance data to track the impact of COVID-19 on the TB program including the absence of a digital information system/platform for data collection	Enhance data collection system for on COVID-19's impact on TB through: the development of a TB/COVID-19 electronic data collection instrument for better monitoring and evaluation (M&E) to drive evidence-based decision making; the introduction and adoption of the prevent TB digital platform for monitoring patients along the entire preventive care cascade; and the introduction of the OneImpact application for community-based monitoring of barriers to accessing care.
Multiple, concurrent in-country efforts working to address the impact of COVID-19 on TB and other health areas which leads to a high demand on resources to build an effective response	Improve donor coordination on, and leverage resources for, mitigating the impact of COVID-19 on TB through strengthening the TB/COVID-19 task force (working group) established by NTP and working to establish a joint coordination mechanism to better plan and track donor funded efforts on TB/COVID-19-related issues.