

NTDs and Covid-19: what did we learn from our partner cross-country meeting?

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COVID-19 is an infectious disease caused by a novel coronavirus. Since first emerging in December 2019, to date (5th June 2020) it has caused 387 298 deaths across the world ([WHO 2020](#)). The full impacts of this global pandemic are yet to be fully understood, but already it has caused widespread challenges to health systems, disrupted public health programmes such as those for Neglected Tropical diseases (NTDs), as well as stopped international and cross-country border travel and forced many of us to work from home, thus limiting progress with ongoing research to strengthen health systems and NTDs.

On the 5th May 2020 [COUNTDOWN](#) research partners from six countries met virtually to discuss the current impact COVID- 19 is having on NTD programmes and research activities in each country context. Countries represented included; Cameroon, Ghana, Liberia, Nigeria, the United Kingdom and the United States of America. Whilst all of us present on the call are currently involved in NTD research, many have dual roles as implementers within health systems. Partner organisations represented include Ministries of Health, academic institutions, and an International Non-Governmental Organisation (INGO).

The objectives of the cross-country call included:

1. To share information between COUNTDOWN partners and stakeholders on the effects of the COVID-19 pandemic on current research projects. To also share this information with the wider research community and create connections based on shared and differing experiences.
2. To obtain information on the experiences of COUNTDOWN researchers and partners on their observations of how COVID-19 is affecting their community, and how research activities may be impacted in both current and future projects.
3. To learn from researchers and partners with experience of working during health system shocks.
4. To take the opportunity to promote cross-country discussions and to build a network to share ideas during the COVID-19 pandemic.



One researcher from each country introduced the current situation in their countries, including what lockdown measures were in place, some basic surveillance data and a summary of how NTD programmes and COUNTDOWN research is being affected. Other partners had the opportunity to ask questions and reflect on the similarities and difference of challenges each country is currently facing, as well as share potential research ideas, implementation responses and learnings.

We learnt that all countries present were experiencing some form of lockdown, although the number of cases in different regions within countries and across countries varied. On the whole, everyone was working from home, schools are closed, and mass gatherings prohibited. Potentially controversial political decisions about re-opening some schools, bars,

restaurants and other economic businesses were creating some challenges in Cameroon, the UK and the USA, with the public message becoming blurred and confused. Inflated costs were causing concern in some countries, especially facemasks. This is leading to some people re-using facemasks or using them inappropriately.

We learnt that COUNTDOWN partners are supporting in a wide range of ways including supporting testing within laboratories (Cameroon/Ghana), acting as technical advisors (Liberia), and assisting in clinical or social science research around COVID 19 (Ghana/UK). We also learnt how health systems actors we collaborate with have also changed their roles to support the response to the pandemic. For example, in Nigeria, NTD implementers are supporting other Health workers with sensitisation on the virus, as well as supporting cross-border health checks to limit transmission.

Whilst essential health services have continued in most countries, this is challenged by disruptions to the supply chain of medical treatments and equipment, including Personal Protective Equipment (PPE) and swab testing kits. This has led to attrition in some health systems as health workers fear not being protected. Ghana expressed how capacity strengthening had increased response for laboratory testing although highlighted the need for safety cabinets, so that support could be increased, while Liberian colleagues reflected on how resilience of responsiveness had been strengthened through the Ebola crisis.

Positive examples were given where there is enhanced collaboration between health systems and Water, Hygiene and Sanitation (WASH). This has important implications for NTDs and the need to sustain this collaboration was expressed. However, concern for communities affected by NTDs was also expressed as most NTD services had been paused since recommended by the World Health Organisation's interim guidance. The impact on communities may include worsening of physical and mental health, economic hardship as well as unknown consequences of disruption to Mass Drug Administration on prevalence and severity of disease.

Through this meeting, a number of challenges were identified. For the next week we will be releasing a blog a day which focuses on one of these themes, or which directly addresses questions raised by partners, which includes:

- **Redeployment of health care staff and the adaption of NTD platforms to support COVID-19 responses.**
- **Short and long-term impacts of Covid-19 on communities affected by NTDs, including impacts on vulnerable communities, community perceptions and the politicisation of COVID-19.**
- **Reflections on burials and funeral guidelines during the pandemic, and its impact on communities.**
- **Researcher challenges during lockdown**

We hope this blog series will ignite conversation within the NTD community and with wider partners in health system strengthening.