Moving Forward with the Battle Against NTDs During COVID-19:

Lessons and reflections on the COUNTDOWN blog series

By Kelly Smyth, Helen Piotrowski, Shahreen Chowdhury and Motto Nganda on behalf of the COUNTDOWN consortium

At the start of 2020, the COVID-19 pandemic began to spread across the world. To date (4th August 2020), there have <u>been 18,480,085 cases reported worldwide and 698,250 deaths</u>. No country has been unaffected by the virus, and many have experienced a partial or full lockdown since March. On 5th May, <u>COUNTDOWN partners met virtually</u> to discuss how COVID-19 was affecting Neglected Tropical Disease (NTD) programmes and research activities. It was agreed that COUNTDOWN partners would collaborate to produce a cross-country COVID-19 blog series which would meet the <u>objectives</u> of promoting cross-country discussions, and to share learning and experiences from researchers and implementers within the NTD community.



Since the 8th of June, we have released 16 blog posts, with contributions from partners in all six COU**NTD**OWN countries; Liberia, Nigeria, Cameroon, Ghana, UK and USA. <u>These blog posts</u> have been in various formats; Day in the Life photo blogs which documented the day to day experiences of researchers during the pandemic, themed overarching blogs and cross-country conversation blogs between partners.

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

Life in Lockdown is Different for Everyone

With flights suspended, curfews and restriction of movement, the introduction of lockdown dramatically altered the lives of our partners and for us in the UK.

Photo credit: @unitednations at Unsplash.com

Most schools and nurseries have closed, which has meant that many people have found themselves juggling childcare and home-schooling responsibilities with the new challenge of working from home. Adjusting to a merged home and office life has been difficult for most, particularly for our partners in the global south, who have experienced issues with power supply and internet access-sometimes having to work through the night or needing to locate various back up sources of power

Many people have found themselves juggling childcare and homeschooling responsibilities with the new challenge of working from home

The lockdown has been more financially difficult for some- researchers report that with many businesses closed there is increased economic hardship and as many people's livelihoods are dependent on movement, there have been outcries against lockdown, in some places this has resulted in the easing of restrictions. Very sadly, a few of our COUNTDOWN colleagues have lost family members or friends to COVID-19 during this time. Due to limitations to hospital visits and restrictions to funeral attendance and practises, even the process of grief has been restricted, and it has been acknowledged that there are additional needs currently for grief counsellors and health workers trained in palliative care and bereavement.

One positive point is that some of our partners reported improvements to various aspects of their lives. A few were pleased to have been able to spend more time with family and friends than usual, and some have had the opportunity to try out new activities such as gardening and farming.

Disruption to NTD Programmes and Research

On 1st April, <u>WHO issued a recommendation</u> that NTD community-based surveys, active case-finding activities and mass treatment campaigns be postponed until further notice. This meant that all COU**NTD**OWN fieldwork and face-to face research activities ceased, alongside suspension of NTD programmes in some partner countries.

COU**NTD**OWN colleagues began focusing on research activities which could be conducted from desks such as planning, performing literature reviews, virtual training and other capacity strengthening activities.

Health system supply chains began prioritising COVID-19 and there is concern that attention has been diverted away from NTDs. If Mass Drug Administration (MDA) is delayed or missed there are concerns that this could increase prevalence and have significant negative impact on health, particularly in highly endemic areas.

Health system supply chains began prioritising COVID-19 and there is concern that attention has been diverted away from NTDs

Health System Actors in the COVID-19 Pandemic

Across all COUNTDOWN partner countries, health system actors whose usual focus is NTDs, have switched to support efforts against the pandemic in various forms, from practising medicine to working at COVID-19 testing centres, to sensitisation activities. Specifically, in Ghana, laboratories at the Council for Scientific and Industrial Research (CSIR) have been used as COVID-19 testing laboratories.

In other countries, it has been found that past health system shocks have helped to prepare health systems for the pandemic. In Liberia, triage facilities originally developed for the response to Ebola are now being used to help in the fight against COVID-19, and experience of strict border control and virus screening has been beneficial to the country's efforts.

In Cameroon, past civil unrest means that the health workers have a history of success in adapting to health programmes and research disruption. In recent months, the research team at the University of Buea have been teaching community members how to apply COVID-19 prevention strategies



However, redeployment of health workers to the COVID-19 effort is not without difficulties- some partners have reported lack of funding for health workers.

Photo credit: Ayoola Sayako at Unsplash.com

It has been found that past health system shocks have helped to prepare health systems for the pandemic

Others have suggested that more should be done to combine the work against COVID-19 and NTDsparticularly in the areas of community engagement, case-finding and sensitisation. There has already been collaboration between health systems and Water, Sanitation and Hygiene (WASH), but COU**NTD**OWN researchers ask could these links be strengthened further? As was mentioned by the team in Ghana, there are communities where NTD workers are well-known and trusted- it is possible that these relationships could assist in merging COVID-19 and NTD efforts? Many partners expressed the importance of integrating NTDs further into the health system.

> There has already been collaboration between health systems and WASH...could these links be strengthened further?

Fear, Denial and Fake News

Fear is a natural reaction to a global health emergency, and the COVID-19 pandemic is no exception. Our partners spoke of there being fears in communities of going to hospital and worry of bringing home the virus to loved ones. Fear often manifests in stigma, and some people spoke of increased reaction to coughing and sneezing. It was also not unheard of for COVID-19 survivors to be rejected by their community after recovering from the virus, and it was suggested that counselling might be beneficial, or even a certificate to show survivors' virus-free status.



Photo credit: Tai's Captures at Unsplash.com

Denial and fake news have also surrounded the pandemic. It has been found that there has been a reluctance to accept deaths and some people do not believe COVID-19 exists, despite regular addresses by presidents and senior political figures, and regular sensitisation through the media.

It has been suggested that it would be beneficial to show more COVID-19 patients and hospital wards in the media, rather than releasing only facts and figures.

This could be heightened through reported incidents where some religious leaders have suggested that COVID-19 is a 'farce'. This is believed by many and there is a worry that this could result in non-adherence to health and safety protocol. Elsewhere, disbelief has developed into fake news. Our partners mentioned various fake news stories surrounding COVID-19, for example that COVID-19 only affects the rich, that the virus is a fabrication and an attempt by the government to generate sympathy funds and also that a COVID-19 vaccination will contain the virus with the intention to infect more people.

Denial and fake news have surrounded the pandemicthere has been a reluctance to accept deaths and some people do not believe COVID-19 exists

Moving Forward with the battle against NTDs

There is some concern that fear and fake news could cause mistrust within NTD communities or health systems actors, and that this could mean more people refuse to receive a vaccination for COVID-19 if and when it becomes available, but also that trust built between community members and NTD health workers could be damaged.

Many of our partners expressed the importance of clearing misconceptions when NTD activities resume in the future- it will be important to sensitise communities to ensure that NTD programme activities and NTD research can have the maximum positive impact and continue to reach those who might otherwise be left behind. This highlights the importance of culturally appropriate sensitisation and building trust in the health system within communities.

Many of our partners expressed the importance of clearing misconceptions when NTD activities resume in the future

Throughout the course of this blog series, important questions have been raised on how to strengthen health systems in pandemic responses from lessons learnt during experiences of health systems shocks. Despite the challenges, our partners have demonstrated the ability to adapt to the 'new normal' and encouraged dialogue and opportunities for cross country collaboration.

