

COVID-19 and COUNTDOWN NTD Field Activities

5 Key Learnings from Field Researchers in Liberia and Nigeria

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The current COVID-19 pandemic and its global influence on travel and physical distancing is affecting Neglected Tropical Disease-related activities, including [COUNTDOWN implementation research](#) on case management strategies for girls and women affected by [Female Genital Schistosomiasis \(FGS\)](#) in Liberia and Nigeria . In this blog post, three frontline researchers of COUNTDOWN field activities in Ogun state, Nigeria and in Bong and Nimba counties, Liberia shared their experiences and ideas on how the COVID-19 pandemic is affecting their work and daily life. Partners discussed previous learnings and current experiences, and how these could be used to shape current and future impact of the COVID-19 pandemic and promote the continuity of NTD programs.

Impact of COVID-19 on NTD research and daily life of researchers

NTD and Research field activities are on hold: Mass Drug Administration (MDA) campaigns and roll-out of case management strategies for girls and women affected by Female Genital Schistosomiasis (FGS) have been suspended. Researchers are adapting to reaching potential research participants online, while hoping for project timelines to be revised and preferably extended. Working from home has been challenging with internet failures and power outages, however researchers have adapted to flexible working hours which has kept work ongoing. Moreover, physical distancing is perceived to have improved family life.

Josephine: The MDA which was to start in April, the meetings with stakeholders and health workers and rolling out the intervention of FGS which was supposed to take up this June could not hold. Presently our study lead is working on the protocol amendment to conclude on vital meetings, if possible, to meet all stakeholders online. We are also working on virtual participant information sheets to send to them so we can at least move forward and not remain in one place. We have a timeline.... but it has been put on hold and has drawn us back somehow. There should be a revision of the project timeline and the meetings with stakeholders and frontline health workers in NTD endemic areas. So, we hope that the project will be extended.



Gartee at her work desk working during unofficial hours



Home Power generator used to supply energy during power outages

Gartee: With poor internet connection, electricity issues, sometimes we have to work at night, I can still manage to do my work from home.

Victoria: It has not really affected work, except for the activities we have with frontline health workers and stakeholders, basically every other thing in the office is still ongoing.

Josephine: The curfews and restrictions, it brought us closer to our family members and we get to know them more.

COUNTDOWN and NTD staff support COVID-19 response

COUNTDOWN partners have been redeployed to support COVID-19 test and trace centres in Liberia, and disability and food support programmes in Ogun, Nigeria. NTD staff can also use experience on disease control and surveillance to support COVID-19 related sensitization and WASH programmes. Currently:

Gartee: The NTD coordinators for Liberia are working with the contact tracers.

Josephine: In Nigeria, research leads are involved in remote support of people with disabilities and in food programmes. I think the way NTD staff can support COVID-19 is by contact tracing and in educating people on hand washing, maintaining social distancing, and creating awareness about this pandemic. They will need call cards and communication gadgets to be able to monitor people.

"I think the way NTD staff can support COVID-19 is by contact tracing and in educating people on hand washing, maintaining social distancing, and creating awareness about this pandemic" (Josephine, Nigeria)

Learnings from previous outbreaks used in the COVID-19 response

Emergency operations and health system triage established during the Ebola outbreak is being used in the COVID-19 response.

Gartee: ... like during Ebola, at first our health system and facilities never had triage, where they will have PPE (Personal Protective Equipment), masks, face shields or take precautions, but since the Ebola, after the trainings when Ebola left the country, facilities stayed. Some of the strategies from Ebola is now used for COVID-19 like using face shield, hand washing and hand sanitizers...

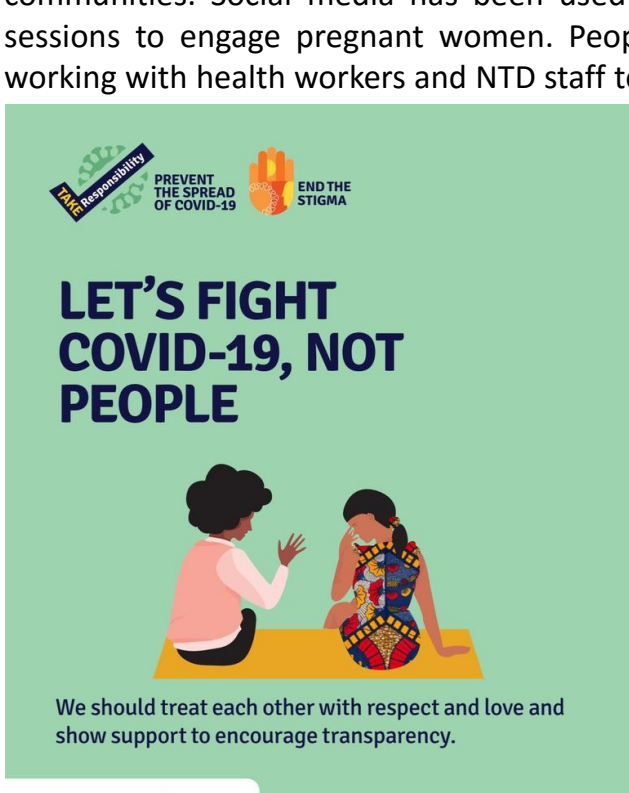
Josephine: In Nigeria, the spread of Ebola was easily curtailed and very few structures and facilities were on ground before now, however these were built upon for COVID-19 response alongside other cultures of personal hygiene, frequent hand washing with sanitizers, social distancing and temperature checks with infrared thermometer which had been previously laid down.

Victoria: Ebola helped to create emergency operations centres in Nigeria.

"Ebola helped to create emergency operations centres in Nigeria" (Victoria, Nigeria)

Myths, Misconceptions and Stigma on COVID-19 in NTD communities

Communities perceive COVID-19 as unreal, some attributing it to the colder climate in the global north. People treated from COVID-19 are not accepted back into their communities. Researchers proposed using health certificates to improve formal integration of treated persons back into their communities. Social media has been used to engage young people, and ANC (Ante-natal care) sessions to engage pregnant women. People successfully treated for COVID-19 have also been working with health workers and NTD staff to sensitise communities.



Victoria: Some community members, even the educated, believe COVID-19 is not real, but an opportunity for the government to generate both national and international sympathy funds ... only health professionals and parents of those in the health profession believe in the existence of COVID-19.

There are strong comparisons between UK and USA with the cold weather which gave rise to the COVID-19 cases in those countries unlike in Nigeria where the temperature is extremely hot and we consume lots of hot yam flour (amala) hence, some people believe COVID-19 cannot thrive amongst us. I have a friend who was just discharged last week that I also use as a point of contact to reach out to those that are educated and think this whole COVID-19 is a scam. It's now beyond sensitizing and testing, it's progressed to ignorance.

Gartee: One case...even after being treated of COVID-19 and testing negative, only for him to be rejected in the community when he ought to be reunited with his family. The community threatened to burn down his house if he insists on staying back in the community after being wade off. The situation becomes worse because there was no form of information from the Ministry of Health on integration of discharged COVID-19 free persons into the community. Moving forward, there should be concurrent awareness and counselling of COVID-19 and a clean bill of health certificate be issued out to discharged person for easy integration into the community just as it was done during the Ebola era.

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(Gartee, Liberia)

Persistent and targeted sensitization is necessary to proceed with NTD activities

The final reflections of researchers were focused on persistent sensitization of communities on COVID-19 to clear doubts and increase awareness of NTD activities. Groups of persons are being targeted, including social media to reach young people and ANC (Ante-natal care) sessions to engage pregnant women.

Josephine: We should be persistent and patient in explaining to the community and clear their doubts of whatever concerns they may have.

Victoria: Online education and training are a means of engaging the children. Hospitals devised different means of reaching out to the pregnant women for ANC such that news of safe delivery are being heard across the country. When field activities resume, we should take our time in clearing some misconceptions that our likely respondents or participants may have had following the turn of events in the past couple of months.

Gartee: A lot of NTD awareness will be required in others to cautiously proceed with NTD activity for total acceptance because the frontline health workers who take part in the COVID-19 control are also the same who take part in conducting the MDA programs.



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