

**TRAVEL REPORT SUMMARY/
REPORT COVER PAGE**

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Submitted by:
 Marcos Espinal HTM/STB 13 April 2005
 (Name) (Cluster/Dept) (Date)

Programme Classification/Registry file number(s):
 T9-441-27

Visit to:
 Indonesia
 Indicate clearly name and location of project(s), meeting(s), etc

Inclusive travel dates:
 13 February 2005 18 February 2005
 (From) (To)

Co-traveller(s):
 M. Raviglione, J. Broekmans, C. Powell (on behalf of I. Koek)
 Name(s)/Cluster(s)/Department(s)

Purpose/Objective of travel:
 To participate in the Stop TB Partnership Coordinating Board High Level Mission (HLM) to Indonesia in the final stages of the External TB Programme Review between 7-18 March 2005
 Specify the type of work which had to be accomplished

Brief summary:
 The HLM included Jaap Broekmans, Mario Raviglione, Irene Koek (replaced by C. Powell), and Executive Secretary Stop TB Partnership Secretariat. The programme of activities included:

1. full briefing on the findings of the monitoring mission,
2. presenting the findings and recommendations to the Minister of Health,
3. meeting with Commission IX (Social Welfare) of the Parliament, and
4. meeting with local partners.

Indonesia has progressed enormously since the last HLM and programme review in 2003. DOTS has been expanded to lung clinics and hospitals, in addition to health centres (puskesmas). Funding is available through CIDA, GFATM, USAID and the local government. NTP staff are highly competent. By the end of 2004, case detection was around 50%, according to the findings of a recent national TB prevalence survey. This, however, needs further confirmation as the data are still undergoing thorough analysis. The cure rate was 86% in 2003. A full technical report will be available soon.

Challenges include the need (see enclosed one page given to the Minister of Health) to:

- strengthen DOTS at hospital (high defaulting rates) level and strengthen the link with puskesmas,
- improve funding allocation from the government to districts as it is currently inconsistent,
- revitalize the Stop TB Partnership (Gardunas) which is not operating at full strength in some areas,
- stimulate local capacity for high quality drug manufacturing,
- strengthen drug management capacity,
- split large drug shipments from the Global Drug Facility to different ports of entry,
- improve laboratory system and its linkage with the NTP,
- improve capacity building and supervision in a rapidly expanding DOTS environment.

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Recommendation(s)/Action to be taken:

1. Executive Secretary to follow up with the Coordinating Board the proposal to host a meeting of the Board in Indonesia: Spring 2006 is proposed
2. Partnership Officer in Jakarta, Ms P. Heitkamp, to prepare a plan of action to strengthen Gardunas in coordination with the NTP
3. Indonesian partners (KNCV, WHO, MSH, GDF, USAID, and others) to work closely with the NTP to implement suggested programme review technical recommendations
4. WHO EDM to consider a request from Indonesian authorities to provide technical assistance to improve local drug manufacturing
5. Gardunas to engage actively Members of Indonesian Parliament in TB

Clearance: Director, Stop TB
Distribution:
 ADG/HTM
 Senior Policy Adviser, DO/STB
 Comm. Officer, DO/STB
 Coordinator, TBS
 Coordinator, THD
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 EDM
 Petra Heitkamp, Indonesia
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The Minister of Health, Dr F. Supari, received the HLM for a debriefing. The Minister emphasized her commitment to TB control as one of the main priorities of the Indonesian Government. Dr Supari promised to look at the recommendations and implement suggested measures. The HLM invited Dr Supari to address the Coordinating Board meeting in Italy in the Fall which she gladly accepted. Indonesia has also requested to host a meeting of the Board in 2006.

The HLM participated in a national meeting with all the Indonesian partners in which the recommendations of the programme review and HLM were presented and discussed. Finally, the findings were also presented to the media in a formal press event.

Commission IX (Social Welfare) of the Parliament received the HLM participants in a formal two hour session. The findings of the Programme Review were presented by J. Broekmans and the Executive Secretary. Members of Parliament were requested to continue their support to the fight against TB including funding allocation, to become advocates and champions for TB in their own communities, and to work with Government to keep TB as a high priority. There were many questions from Members of Parliament to the delegation. It was clear to the HLM members that Parliament can be a key ally in controlling TB in Indonesia.

TB External Monitoring Mission 7-18 March, 2005

Preliminary Debriefing to Honourable Minister of Health, Dr. Siti Fadillah Supari Sp JP (K)

PROGRESS

1. Remarkable progress since the last review-- treatment success target achieved and sustained and case detection rates steadily increasing
2. Rapid expansion of DOTS services to lung clinics and hospitals
3. Strengthened central technical and managerial capacity
4. Expanded national partnership through Stop TB partners' forum
5. Highly successful management of GFATM and other donor funds by central unit of NTP
6. Active support from the Country Coordination Mechanism

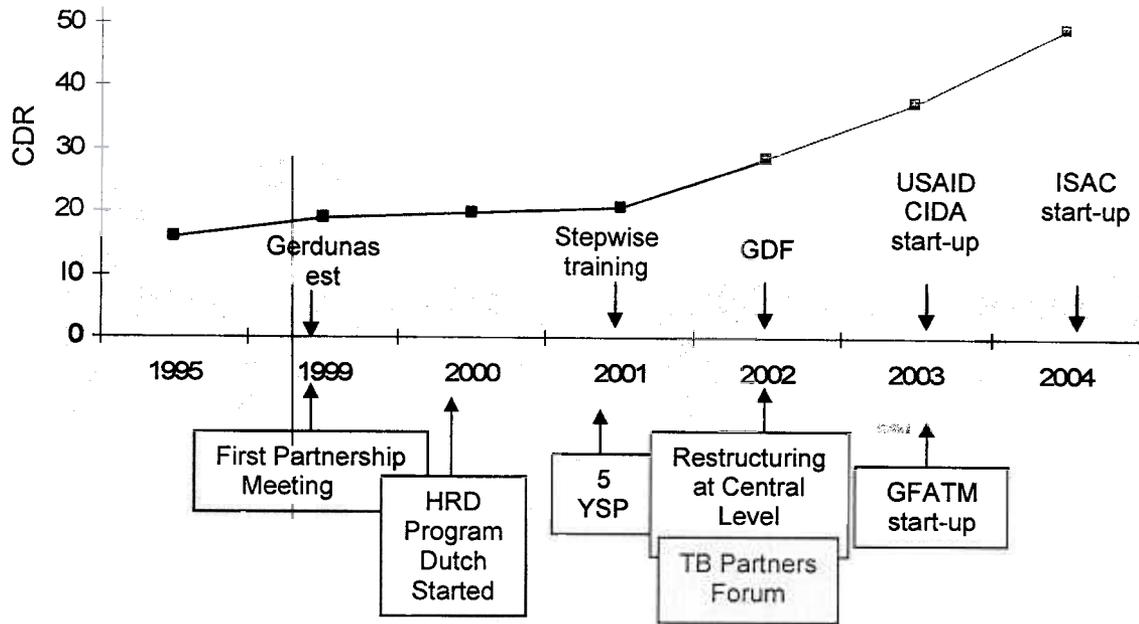
KEY ISSUES

1. Expansion of DOTS to hospitals, while contributing to overall case detection, has been accompanied by a decrease in treatment success
2. Local government allocations for TB control vary widely – many provinces and districts are decreasing budget lines for TB; at risk of becoming donor dependent
3. Local chapters of Gerdunas are largely not operational
4. Collaboration between the laboratory services and the NTP at all levels is still weak
5. Local drug manufacturers yet to meet international quality standards

RECOMMENDATIONS

1. Expand DOTS in a quality manner to the hospital sector, with special attention to referral, the linkages with the puskesmas network, and performance based compensation.
2. Strongly advocate with provincial and district governments to allocate sufficient funds to meet and maintain minimum service standards (SPM) in light of potential phasing out of external funding
3. Encourage local governments to establish provincial DOTS teams and re-vitalize the local Gerdunas in order to enhance linkages with other sectors and widen the resource base for long term sustainability
4. Strengthen the links between laboratory services and the TB programme at all levels
5. Urge POM and Directorate of Pharmacy to ensure that locally procured/produced anti-TB drugs meet international quality standards

Chronology of Events leading to rapid scaling up of DOTS



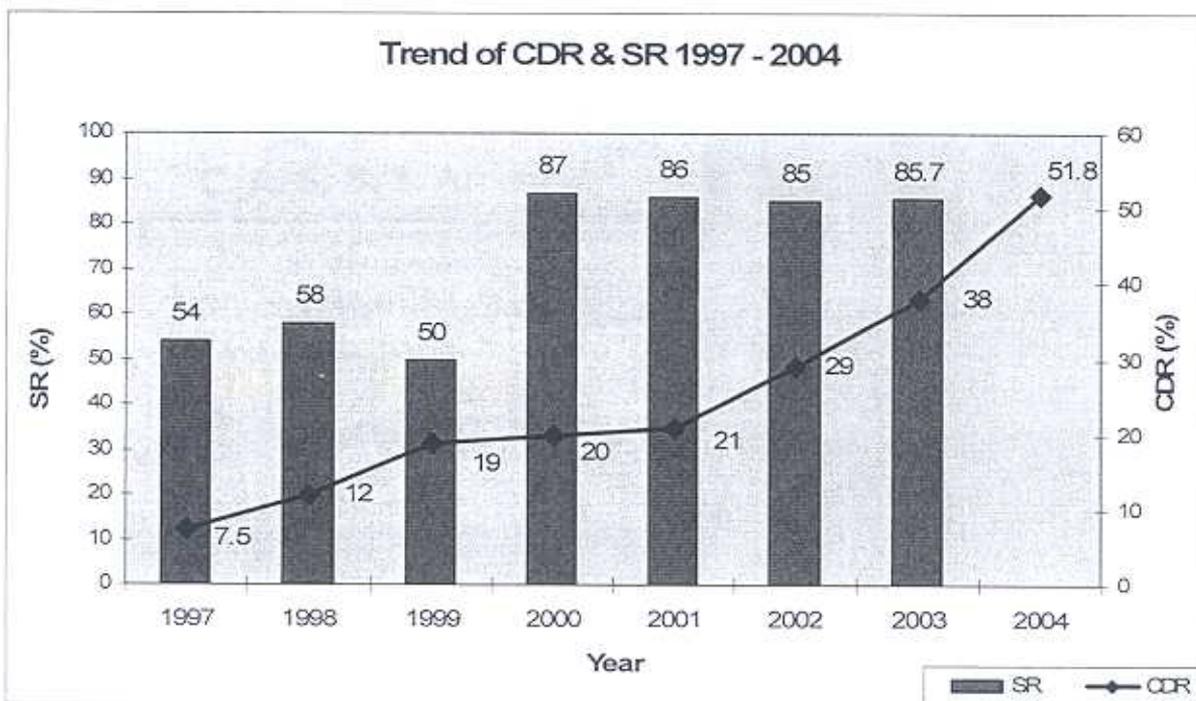
CNR SS(+) Indonesia 2003



CNR SS(+) Indonesia 2004



Trend of CDR & SR 1997 - 2004



CASE DETECTION RATE, INDONESIA, 2002-2004

