

# Indonesia

## Community, Rights and Gender Country Profile

Working Document



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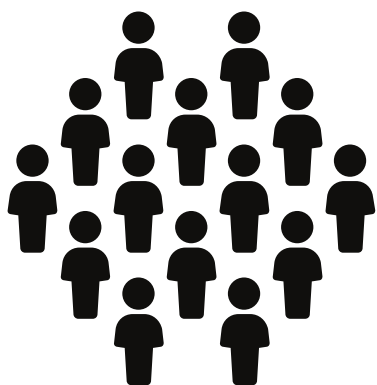


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# Quick Facts



**273.52 million people**

**Working Document**



**High TB, TB/HIV and  
MDR/RR -TB Country**

# UNHLM Targets



## Resource Needs (2022)

829.83 million (USD)

## Available TB Funding 2020 (USD)

Domestic: 43.7 million

International (Excluding Global Fund): 7.5 million

Global Fund: 64.1million

Funding Needs: 429.3 million

## Diagnosis and Treatment Targets (2020)

TB Target: 808,400

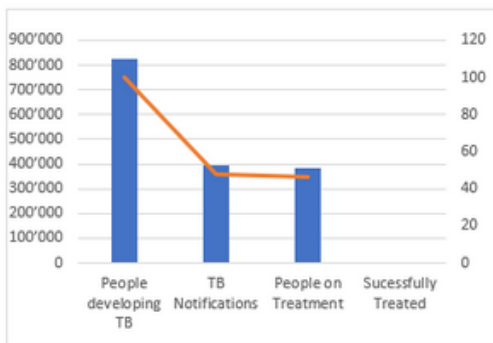
% Target Achieved: 49

# National Strategic Plan and Funding Opportunities

- Next National Strategic Plan Development: **2024**
- Next Global Fund funding request (proposal development): **2023**

# TB Situation

## Epidemiological Data (2020)



Stop TB Dashboard

[https://www.stoptb.org/static\\_pages/UZB\\_Dashboard.html](https://www.stoptb.org/static_pages/UZB_Dashboard.html)

### Major Gaps in TB prevention and Care

- 439,975 Missing people with TB (63,539 were children)
- 93,000 people died because of TB
- 7,921 Laboratory confirmed people with MDR/RR-TB (WHO data, 2020)

**Quality issues:** Transport expenses, lack of information on TB and TB services, lack of nutrition during treatment, long wait times at clinics and high cost of rapid molecular tests limits accessibility.

Laws are not fully implemented leading to AAAQ issues such as delayed diagnosis and treatment initiation, low knowledge about TB and legal rights due to ineffective community outreach, self-stigma and discrimination.

**Discrimination issues:** The study did not find gender-based discrimination but desk review found 10% of marriages end in divorce because wife has TB, 25% of women with TB, report being isolated & discrimination at home, 2% of older couples' marriages end in divorce if wife gets TB. No explicit legal prohibition of TB discrimination though MoH decree calls on public not to stigmatize or discrimination against people with TB. The study did not find discrimination by TB HCWs or families, but from other HCWs including for HIV services and from dentists, as well as neighbors & coworkers.

**Freedoms:** there are no legal protection of right to privacy or confidentiality for people with TB. The study did not find reports of invasive isolation but no explicit law or policy on TB isolation exists. People with TB have the right to association and to establish organisations

**Gender:** there are no laws that specifically address gender equality for TB. The study did not find gender-based discrimination but desk review found 10% of marriages end in divorce because the wife has TB. 25% of women with TB reported being isolated and discriminated against at home. Also, 2% of older couples marriages end in divorce if the wife gets TB. there is a lack of gender-sensitive TB services, TB incidence are higher among men whiles there is higher treatment success rates among women. Men reported they got TB due to unhealthy working conditions. Mostly the caretakers of people with TB are usually female.

**Key and Vulnerable Populations prioritized:** prisoners, factory workers, PLHIV and urban poor living in dense areas.

**Participation:** CSOs and CBOs are not meaningfully involved in TB programming, despite the MoH decree which calls for community empowerment.

**Remedies and Accountability:** there is lack of accountability for companies that wrongfully terminate contracts of people with TB. There is lack of information and knowledge about laws and rights among people affected by TB. There is the need to establish a complaints mechanism to the panel of "Indonesian medical disciplines" for stigma, discrimination or malpractice experienced by people with TB. Also, there should be access to legal aid to enforce Medical Practice Law.

## Community, Rights and Gender Data

The CRG assessment conducted in 2020 showed the following: **Accessibility Barriers:** Transport expenses, geographic distance to and between health facilities, lack of information on TB and TB services, lack of nutrition during treatment and long wait times at clinics. High cost of rapid molecular tests limits accessibility. Low knowledge about TB symptoms, illness and treatment.

**Availability Barriers:** lack of TB counselling, lack of TB tests at PHCs and lack of rapid molecular tests.

**Acceptability issues:** lack of gender-sensitive services and long wait times at clinics.

# Community Engagement and Representation

Active National Stop TB Partnership

- Yes

National Network of People Affected by TB

- POP TB Indonesia

TB Network/Community represented on CCM

- Yes

National High-Level Engagement with Parliamentarians

- Yes

Celebrities Engagement in TB response

- Yes

## Challenge Facility for Civil Society Round 10

- Jaringan Indonesia Psoitif
- Perkumpulan Rekat Surabaya
- Yayasan Pena Bulu-Penabulu Foundation

## CFCS Round 10 Regional Level Partners

- Asia Pacific Council of AIDS Services Organization (APCASO)






## Global Network:

- TB People
- Lean on Me Foundation/ TB Women



# Community Rights and Gender Interventions



- CRG Assessment Complete 
- Costed CRG Action Plan Available 
  - In progress, to be funded by TGF grant and STP TA
- TB Stigma Assessment Conducted 
  - No
- TB Stigma Elimination Plan Available 
  - No
- Community-led Monitoring Mechanism in place 



# CFCS Round 10 Grantees

## Jaringan Indonesia Psoitif

- **Global Fund Sub Recipient**
- Project Location: Jakarta and Greater Jakarta area
- Timeline: December 2021- December 2022
- Objectives
  - To improve and strengthen women living with HIV, people who use drugs and men who have sex with men networks and ex prisoners on participation in the TB response on CRG sensitized (prioritizing, designing interventions, implementing, monitoring and advocacy).
  - To strengthen community-led monitoring and advocacy at national and district level with focus on TB key stakeholders and decision makers

# CFCS Round 10 Grantees

## Perkumpulan Rekat Surabaya

- **Global Fund Grant: No**
- Project Location: Surabaya, Sidoaria and Gresik
- Timeline: December 2021 - December 2022
- Objectives
  - To strengthening organization capacity and Coordination
  - To sensitizing TB affected community and other stakeholder on TB, Human Rights and Gender
  - To provide support female TB survivors to participate in economic development activities

# CFCS Round 10 Grantees

## Yayasan Pena Bulu-Penabulu Foundation

- **Global Fund Principal Recipient**
- Project Location: Medan city, Bandung regency, East Jakarta, Surabaya City and Semarang City.
- Timeline: December 2021- December 2022
- Objectives
  - Ensuring and supporting communities and civil societies put forward Call to Actions for multi-sectorial leadership to meet national TB targets by 2022
  - Ensuring and supporting National TB Programme recovery efforts from COVID-19 are implemented at district-level, particularly at high burden districts
  - Ensuring the promotion of rights-based, gender transformative, and people-centered with bolder evidence from TB-affected communities in the context of COVID-19

# Questions? Contact us.

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