

Indonesia

Community, Rights and Gender Country Profile

Working Document



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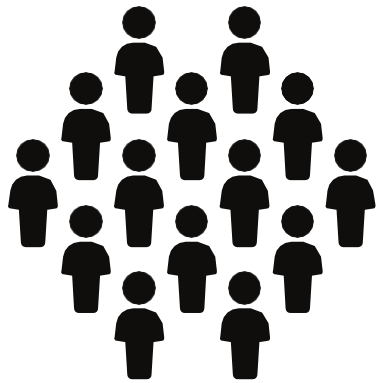
CFCS Round 11 Partners



**Country Level Platform
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COUNTRY PROFILE INDONESIA

Quick Facts



274 million people (2021)



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

COUNTRY PROFILE INDONESIA

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



Prevention Therapy (2022)

Total PT Targets: 587,000

*Please note that this will be updated in October after 2023 UNHLM on TB
Source: [Stop TB Partnership Dashboard](#)

COUNTRY PROFILE INDONESIA



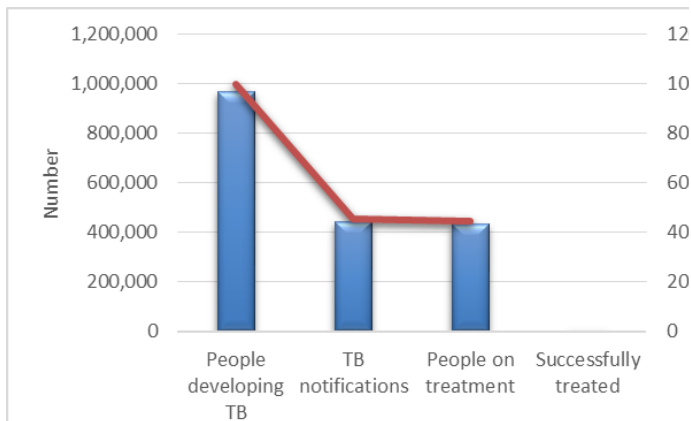
National Strategic Plan And Funding Opportunities

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

COUNTRY PROFILE INDONESIA

TB Situation

Epidemiological Data (2021) ¹



Major Gaps in TB Prevention and Care

- 536,423 Missing people with TB (47,032 were children)
- 150,000 people died because of TB
- 7,876 Laboratory confirmed people with MDR/RR-TB (WHO data, 2021)

Availability Barriers: There are shortages in TB counseling services, limited availability of TB tests at Primary Health Centers (PHCs), and a lack of rapid molecular tests.

Acceptability issues: Gender-sensitive services are lacking, and long waiting times at clinics pose acceptability challenges.

Quality Issues: Various factors affect the quality of TB services, including transport expenses, lack of information about TB and its services, inadequate nutrition during treatment, long wait times at clinics, and the high cost of rapid molecular tests. These issues ultimately limit accessibility. There are gaps in the full implementation of laws, resulting in issues related to availability, accessibility, acceptability, and quality (AAAQ). This leads to delayed diagnosis and treatment initiation, low awareness of TB and legal rights, ineffective community outreach, self-stigma, and discrimination.

Discrimination Issues: The study did not find evidence of gender-based discrimination. However, a desk review revealed that 10% of marriages end in divorce if the wife has TB. Additionally, 25% of women with TB reported experiencing isolation and discrimination at home, while 2% of older couples end their marriages if the wife contracts TB. Although there is no explicit legal prohibition of TB discrimination, a Ministry of Health (MoH) decree encourages the public not to stigmatize or discriminate against people with TB. The study did not find discrimination from TB healthcare workers or families but did identify discrimination from other healthcare workers, including those providing HIV services and dentists, as well as neighbors and coworkers.

Freedoms: There is no legal protection of the right to privacy or confidentiality for people with TB. The study did not find reports of invasive isolation, but there is no explicit law or policy on TB isolation. However, people with TB have the right to associate and establish organizations.

Gender: There are no specific laws addressing gender equality in relation to TB. The study did not find evidence of gender-based discrimination, but the desk review indicated that 10% of marriages end in divorce if the wife has TB. Additionally, 25% of women with TB reported isolation and discrimination within their homes. Furthermore, 2% of older couples end their marriages if the wife contracts TB. Gender-sensitive TB services are lacking, and TB incidence is higher among men, while women tend to have higher treatment success rates. Men reported acquiring TB due to unhealthy working conditions. Typically, female individuals assume the role of caretakers for people with TB.

Key and Vulnerable Populations: The assessment highlights the prioritization of key and vulnerable populations, including prisoners, factory workers, People Living with HIV (PLHIV), and urban poor individuals residing in densely populated areas.

Participation: Despite the MoH decree calling for community empowerment, Civil Society Organizations (CSOs) and Community-Based Organizations (CBOs) are not meaningfully involved in TB programming.

Remedies and Accountability: There is a lack of accountability for companies that wrongfully terminate the contracts of people with TB. Moreover, there is limited information and knowledge about laws and rights among individuals affected by TB. Establishing a complaints mechanism to the "Indonesian Medical Disciplines" panel is necessary to address stigma, discrimination, or malpractice experienced by people with TB. Additionally, access to legal aid is required to enforce the Medical Practice Law.

Source: HHR: Health and Human Rights Journal (2021): Building the Evidence for a Rights-Based, People-Centered, Gender- Transformative Tuberculosis Response: An Analysis of the Stop TB Partnership Community, Rights, and Gender Tuberculosis Assessment

¹ Source: [Stop TB Partnership Interactive Map Dashboard](#)

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 Regional Partner

APCASO

Challenge Facility for Civil Society Round 11 Regional Partner

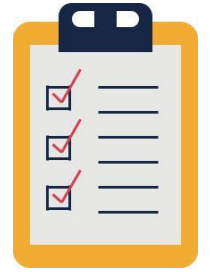
APCASO

Global Networks

Lean on Me Foundation



Community, Rights and Gender



CRG Assessment Complete

Costed CRG Action Plan Available

- In progress, to be funded by TGF

TB Stigma Assessment Conducted

- In progress

TB Stigma Elimination Plan Available

- In progress

Community-led Monitoring Mechanism

- in place

Legal and Human Rights Scorecard Assessment

- No



COUNTRY PROFILE INDONESIA

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 (prioritizing, designing interventions, implementing, monitoring, and advocacy).
- To strengthen community-led monitoring and advocacy at the national and district level with a focus on TB key stakeholders and decision-makers

COUNTRY PROFILE INDONESIA

CFCS Round 10 Grantees

Perkumpulan Rekat Surabaya

Project Location: Surabaya, Sidoaria and Gresik

Timeline: December 2021 - December 2022

Objectives:

- To strengthening organizational capacity and coordination.
- To sensitize TB affected community and other stakeholders on TB, Human Rights and Gender
- To provide support female TB 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

- To ensure and support communities and civil societies put forward Call to Actions for multi-sectorial leadership to meet national TB targets by 2022
- To ensure and support National TB Programme recovery efforts from COVID-19 are implemented at district-level, particularly at high burden districts
- To ensure the promotion of rights-based, gender transformative, and people-centered with bolder evidence from TB-affected communities in the context of COVID-19

COUNTRY PROFILE INDONESIA

CFCS Round 11 Grantees

Jaringan Indonesia Psoitif

Timeline: May 2023-April 2024

Aim:

- To strengthen the national network of women living with HIV, people who use drugs, and men who have sex with men on the TB response participation through Community-led Monitoring and Advocacy in Indonesia

Objectives

- To improve and strengthen women living with HIV, people who use drugs and men who have sex with men networks 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.
- To participate and engage in TB advocacy and accountability initiatives at National, Regional, or Global levels
- To contributing to stronger TB advocacy and accountability in Indonesia

COUNTRY PROFILE INDONESIA

CFCS Round 11

Grantees

Yayasan Rekat Peduli Indonesia

Project Location: Medan city, Bandung reGENCY, East Jakarta, Surabaya City and Semarang City.

Timeline: March 2023 – March 2024

Aim:

- To empower TB survivors organization by involving the TB survivor community in 3 provinces to help them increase their capacity so that they can easily respond to the TB situation starting from access to health services and also learning to advocate on national, regional decision-making platforms

Objective:

- To establish and enhance the empowered community network in their calls to Action to meet the UNHLM 2022 targets
- To remove Human Rights and Gender-related Barriers to TB Services
- To participate and engage in TB advocacy and accountability initiatives at national, regional, and global levels

COUNTRY PROFILE INDONESIA

CFCS Round 11 Grantees

Perkumpulan Organisasi Pasien TB Indonesia (POP TB Indonesia)

Timeline: June 2023-June 2024

Aim:

- To support people with TB and survivors to fight stigma, discrimination and strong psycho-social in efforts to eliminate TB in Indonesia.

Objective:

- To strengthen and scale up systems for community led monitoring in Indonesia.



CFCS Round 11 Grantees

Yayasan KNCV Indonesia

Timeline: April 2023- July 2024

Aim:

- To increase the adoption and to increase demand of novel TB regimen by disseminating success story in using the novel regimen to the TB-affected community in 3 districts of BPaL operational research (OR) location.

Objectives

- To identify target audiences and relevant stakeholders involved in BPaL regimen campaign in 3 districts
- To develop key messages and strategies to increase demand creation on BPaL regimen for quality DR-TB services which also promote the rights of people affected by TB
- To strengthen the capacity of survivor organizations and TB survivors to increase demand of BPaL regimen as part of quality DR-TB service in 3 selected districts
- To deliver the campaign materials which include success story of BPaL users to targeted audiences in the 3 districts,
- To compile lesson learnt and collect success story on the BPaL related campaign
- To strengthen national advocacy and accountability initiatives including through legal scorecard completion.

CFCS Round 11 Grantees

Yayasan Pena Bulu

Project location: Medan, East Jakarta, Bandung Regency, Semarang, Surabaya, Tangerang Regency and Makassar

Timeline: March 2023 – March 2024

Aim:

- To ensure TB-affected communities are equipped with knowledge and platforms to learn, act, and advocate for rights-based, gender transformative, and people-centred interventions.

Objectives

- To enhance community capacity and empowered community networks in their Call to Action to meet the national TB target by 2023 and reach UNHLM
- To empower and engage communities to effectively oversee TB Program and to inform policy and programmatic decision making
- To advance community engagement and campaigning in TB awareness raising, gender sensitivity and TB rights literacy to protect and promote the rights of people affected by TB



Country-Level Platform Partnership

Stop TB Partnership Indonesia

Project location: Indonesia

Timeline: November 2022-May 2024

Overall aim:

- To end TB in Indonesia through strong political support and increased appropriate health-seeking behaviour in communities.

Objectives

- To ensure Multi-sectors government and stakeholders prioritise TB within the health system during the pandemic
- To increase knowledge, expectations, and attitude of people with TB symptoms to access TB diagnosis during the pandemic.
- To establish knowledge and insights to improve TB multi-stakeholders advocacy and BCC to access diagnosis.

Questions? Contact us.

cfcs@stoptb.org

