**STP Communities, Rights and Gender (CRG) Achievements during 2019**

**CRG is at the heart of the 2018 TB UNHLM Political Declaration Targets and Commitments:**

- Affirmed that all people affected by TB access people-centered prevention, diagnosis, treatment, management of side effects and care, as well as psychosocial, nutritional and socioeconomic support for successful treatment;
- Committed to involve affected communities and civil society in the TB response;
- Committed to recognize the various sociocultural barriers to TB prevention, diagnosis and treatment services, especially for those who are most vulnerable;
- Committed to promote and support an end to stigma and all forms of discrimination, including by removing discriminatory laws, policies and programmes;
- Committed to enacting measures to prevent TB transmission in workplaces, schools, transportation systems, incarceration systems and other congregate settings;
- Committed to developing community-based health services through approaches that protect and promote equity, ethics, gender equality and human rights; and
- Committed to decisive and accountable global leadership that is multi-sectoral and inclusive of TB affected communities and civil society.

The Country and Community Support for Impact (CCS4i) Team at Stop TB Partnership has worked tirelessly with countries to support realizing these commitments.

**CRG tools roll-out**

If we are to find the missing millions, we must understand and overcome the barriers that these missing people face when they endeavor to access TB services. In 2019, Stop TB Partnership supported 13 countries (Bangladesh, Cambodia, DR Congo, India, Indonesia, Kenya, Mozambique, Nigeria, Pakistan, Philippines, South Africa, Tanzania and Ukraine) to roll out assessment tools to identify TB key and vulnerable population data gaps, human rights and gender barriers to accessing TB services and solutions to address these findings. The tools used by countries to assess the human rights and gender barriers to the TB response are:

- **Legal Environment Assessment (LEA):** This tool provides guidance for countries to identify the legal and policy barriers that impede access to TB prevention, treatment, care and support services and through the process fosters national dialogue around TB laws to provide remedies as required ([link](#)).
- **TB/HIV Gender Assessment:** This tool provides guidance for countries to identify how social, legal, cultural and biological issues that underpin gender inequality and impact health seeking behavior and TB treatment outcomes ([link](#)).
- **Data for Action framework on TB Key, Vulnerable and Underserved Populations:** This provides a framework for countries to accelerate efforts in identifying gaps in basic programme data on TB key populations needed to inform TB programmes and design services to reach TB key populations. The process fosters national dialogue on these data gaps, how to address them and how to actively and meaningfully ensure the participation of key populations in programme and service planning, implementation and monitoring at both national and local levels ([link](#)).

The country reports can be downloaded for the following:
- Kenya ([LEA](#), [Gender](#), [Data Key Populations](#))
- India ([LEA](#), [Gender](#), [Data Key Populations](#))
- Tanzania ([LEA](#), [Gender](#), [Data Key Populations](#))

Also, publicly available reports for Bangladesh, Cambodia, Democratic Republic of Congo, Indonesia, Pakistan, South Africa and Philippines can be accessed here ([link](#)). The CRG reports for Nigeria are currently undergoing final endorsement by the Ministry of Health.
In order to promote community ownership, it is critical for the CRG tools rollout to be led by local civil society and affected communities. However, to be effective and sustainable there must also be buy-in, support and understanding from the National TB Programme and other stakeholders. Evidence from country experience with the assessments demonstrate that in order to inform integrated actions there is a need to conduct an integrated assessment. As result, Stop TB Partnership worked on integrating the various CRG tools, streamlining the implementation process and developing an integrated CRG Tools Protocol ([link](#)). To date, countries in Southern Africa (Mozambique), West and Central Africa (Benin, Cameroon and Niger), Eastern Europe and Central Asia (Georgia, Kazakhstan, Tajikistan and Uzbekistan) and The Americas (Peru, Bolivia, Colombia, Mexico, Guatemala, El Salvador, Haiti, Dominican Republic, Paraguay, Panama and Honduras) are rolling out CRG assessment tools using the adapted interim protocol guidance. Based on accumulated global experience, the interim protocol will be further updated and streamlined.

**TB Stigma Assessment Toolkit**

The Stop TB Partnership TB Stigma Assessment ([link](#)) was developed for and by the TB community with the support of TB stigma measurement experts, TB technical experts and human rights experts. The assessment aims to strike a balance between being robust, leveraging the TB stigma measurement tools of KNCV, and easy to use. Its aim is to assess the extent to which and how TB stigma acts as a barrier to both accessing services in different settings and along the TB journey and to support the development of recommendations to address TB stigma so that quality TB services are available, accessible and acceptable to all.

Recognizing the importance of this tool for strengthening national TB responses, the Global Fund has now included three stigma related indicators from this tool in the core set of the modular framework indicators (related to TB self-stigma, stigma in health care and community settings) meaning that this tool can be rolled-out in the context of all national TB grants.

**Community-based monitoring – OneImpact digital platform**

Community-based monitoring (CBM) in TB is an intervention driven by local information and community needs that aims to increase accountability in the TB response so that essential, quality and timely TB care and support services are available, accessible, and acceptable to all - especially those who are vulnerable, underserved or at-risk of TB. To support countries implementing CBM interventions, Stop TB Partnership developed a community-based monitoring (CBM) framework and developed a digital platform ([OneImpact](#)) to facilitate CBM of the TB response. The STP CBM intervention leveraging OneImpact is in line with the WHO Handbook on Digital Technologies for TB to support a phased implementation approach. Eight countries are currently piloting OneImpact (Cambodia, DR Congo, Indonesia, Kenya, Nigeria, Mozambique and Tanzania and Ukraine).

**Challenge Facility for Civil Society**

The Challenge Facility for Civil Society (CFCS) is the Stop TB Partnership grant-giving mechanism for TB affected community and civil society organizations to advance the capacity and engagement of communities, human rights and progress towards gender equality in the TB response. Through round 8 of CFCS, the Stop TB Partnership supported grassroots affected community and civil society organizations in 13 countries (Bangladesh, Cambodia, DR Congo, India, Indonesia, Kenya, Mozambique, Nigeria, Pakistan, Philippines, South Africa, Tanzania and Ukraine) to implement CFCS grants to enhance community empowerment and TB advocacy for demand generation and to develop strategies to find the missing people with TB. More information on CFCS Round 8 grantees be found [here](#).
The largest ever CFCS call for proposals to transform the TB response to be equitable, rights-based, gender-sensitive and people-centered will be announced in Jakarta, Indonesia on 10 December 2019. A total of USD 2.5M USD will be made available for this round of grants through funding from United States Agency for International Development (USAID) and the Global Fund Strategic Initiative.

**Human Rights Initiative**

**Declaration of the Rights of People Affected by TB:** Stop TB Partnership, together with TBpeople and Communities and NGO delegations to the Board of the Global Fund, launched the Declaration of the Rights of People Affected by TB (link) in Geneva in May 2019. The launch was attended by the Director General of WHO, Executive Director of the Global Fund, Deputy Executive Director of UNAIDS, representatives from the Office of the High Commission for Human Rights (OHCHR), human rights academics and TB survivors. This document breaks down the scope of human rights in TB and the issues people must be aware in the promotion and protection of human rights in TB.

**The TB Human Rights Discussion Group:** Stop TB Partnership has committed to advancing a rights-based and gender sensitive TB response. Together with the TB affected community, Stop TB Partnership hosts monthly human rights and TB calls with the TB Human Rights Discussion Group. The Group consists of TB affected communities, civil society, human rights lawyers and academics. Topics and speakers are determined in consultation with TB affected communities and civil society. At least 40 civil society partners join these monthly calls. Stop TB Partnership has covered a range of topics this year, most recently focusing on TB stigma, legal environment assessments, TB and disabilities, TB and the Universal Period Review (UPR), human rights & national TB laws as well as access to TB medicines and diagnostics. Minutes of the calls are disseminated via the Stop TB Partnership web page.

**Nairobi Strategy: A Human Rights Approach to TB:** Stop TB Partnership has continued to progress the work related to the Nairobi Strategy. Work this year has included empowering and supporting the networks of people affected by TB; facilitating the development of the Declaration of the Rights of People Affected by TB; enhancement of judiciary and legal communities’ awareness and understanding of a human rights-based approach to TB; development of guidance for rights-based TB legislation (link) and the expansion of legislators’ and policymakers’ capacity to incorporate human rights-based approaches to TB into laws and policies. Notable achievements include the TB, Human Rights and the Law Case Compendium; the completion of TB Legal Environment Assessments; and the Judicial Handbook on TB, Human Rights and the Law.

**Migration TB and the Law:** With support from Stop TB Partnership, the O’Neill Institute from Georgetown University also completed the Report on Migration, TB and the Law (link) which sets forth relevant legal and policy frameworks, and includes case studies which highlight the situational analysis to make the case for law and policy reform and improvements.

**Coercion, Criminalization and TB:** In 2019 Stop TB Partnership supported the report on Coercion, Criminalization and TB (link) led by the O’Neill Institute for Global Health. For this report, the O’Neill Institute surveyed the laws in 20 of the 30 TB high-burden countries and subjected the laws to coding in order to assess their consistency with human rights. The report reveals that the vast majority of countries have laws related to the TB response that violate even the most basic human rights laws and norms. This work maps and assesses legal frameworks in priority countries, laying the foundations for being able to measure what a human rights-based TB legal environment comprises.

**The Global Fund’s Breaking Down Barriers Initiative:** Stop TB Partnership has continued to work with the Global Fund on the *Breaking down Barriers Initiative* – including in Indonesia, South Africa and DR Congo – to ensure that TB is reflected in the national human rights action plans that are championed by the Global Fund and aligned between the Global Fund CRG team, partners and Stop TB Partnership CRG work.
Community platforms: global, regional and national and empowering people

The Stop TB Partnership continues to work closely with global TB networks, including the Global Coalition of TB Activists (GCTA) and TBpeople, as well as regional networks ACT, ACT! AP, DRAF TB, Americas TB Coalition and TBEC and all from the national level. Over the past twelve months, the work has helped transform advocacy from individual activists to a global community movement. In many ways this is reflected by the formation of three civil society delegations to the Board of the Stop TB Partnership. Stop TB Partnership has worked with GCTA, who together with WHO SEARO partnered to draft a treatment literacy training module for TB affected communities, integrating CRG principles into the module. Stop TB Partnership also supported GCTA and North Western University to train lawyers and TB survivors. STP has also continued to work closely with the global TB survivor network, TBpeople, for the development of the Declaration of the Rights of People Affected by TB and making it available in Russian, French, Spanish, Bahasa etc.

At the regional level, Stop TB Partnership has continued to work closely with regional networks. In particular ACT Asia-Pacific are concluding a project to develop a TB human rights training module. The Americas TB Coalition has been supported by Stop TB Partnership to work closely with the Americas TB Caucus and legal academics to develop guidance notes on human rights legislation in Latin America. The francophone regional network in Africa (DRAF TB) also conducted three community consultations to identify advocacy priorities in the region. It is intended that the priorities identified will be captured in the CRG Assessments that are starting in the region. This year they established a partnership with Alliance Cote d’Ivoire and provided technical assistance, along with Stop TB Partnership, to the Regional Initiative on CRG supported by Initiative 5%.

Representatives from global and regional networks have been supported to attend regional and global dialogues on TB – including the UNION conference, International AIDS Society, Joint Programme Reviews, the Universal Health Coverage High-Level Meeting and the United nations General Assembly. This engagement ensures the capacity of regional network members continues to build while also ensuring that TB survivor voices are represented at the highest levels.

Country level Partnerships Initiative

Stop TB Partnership fosters meaningful engagement of multiple partners for a collective force that aims to revolutionize the TB space and end TB by 2030. Stop TB Partnership supports country-level, multi-stakeholder TB platforms to strengthen their governance, organizational capacity, and convening power to enable effective multi-stakeholder approaches for the implementation of the Global Plan to End TB. Multi-stakeholder partnerships are effective vehicles to engage different actors in TB prevention and care, such as celebrities, journalists, champions, private sector and others.

Since October 2018, Stop TB Partnership has worked closely with National TB Programme managers and country focal points to strengthen existing country-level platforms and the development of new ones. Specifically, support has been offered to Tajikistan, Pakistan, Indonesia, Ukraine, DRC, Mozambique, Cambodia, Cote D’Ivoire, Zimbabwe, Bangladesh and Tanzania. Stop TB Partnership also updated the operational guidelines and terms of reference to serve as a framework for the development of platforms’ action-plans.

So far, 11 high-level meetings with Ministries of Health, TB Survivors, celebrities and TB ambassadors, private sector and other stakeholders took place and 3 more are planned before the end of the year. Some examples are: the launch of the TB Free Sindh Initiative attended by Dr. Azra Fazal Pechuho (Minister of Health and Population Welfare of Sindh) and a charity concert in Tajikistan to advocate for “No TB!” with a number of local and regional celebrities, including singers Shabnami Surayo, Surayo Qosimova and Farzoni Khurshed.

The country-level platforms have been working closely with 15 well-known national and international celebrities who take on the role of TB ambassador, including the First Lady of Zimbabwe, Mrs A. Mnangagwa.
The Kochon Prize 2019, ‘It’s Time for Human Rights and TB’

This years’ Kochon Prize theme focused on human rights and the number of nominations was higher than any other year. The Winner, Kenya Legal and Ethical Issues Network on HIV & AIDS, nominated by Professor Brian Citro and supported by Justice Michael Kirby, Justice High Court of Australia, Anand Grover, UN Special Rapporteur on the Right to Health, Dr. Jennifer Furin, Department of Global Health and Social Medicine Harvard Medical School, Global Coalition of TB Activists, Lawyers Collective India, Treatment Action Group, and the Center on Law and Social Transformation Norway, among others, was awarded during the Opening Ceremony of the 50th Union World Conference on Lung Health in Hyderabad, India, inaugurated by the Honorable Vice-President of the Republic of India, Shri M. Venkaiah Naidu. The Stop TB Partnership looks forward to its ongoing partnership with the Kochon Foundation so that we can continue to acknowledge those who make a highly significant contribution to ending TB.