Country-level advocacy, demand creation and engagement of TB affected networks & civil society

Viorel Soltan, Head, Country and Community Support for Impact

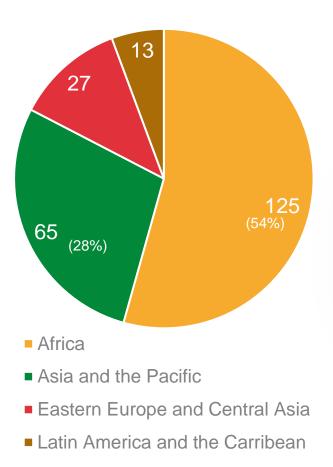*Stop TB Partnership Board Meeting, 19-20 May 2022*
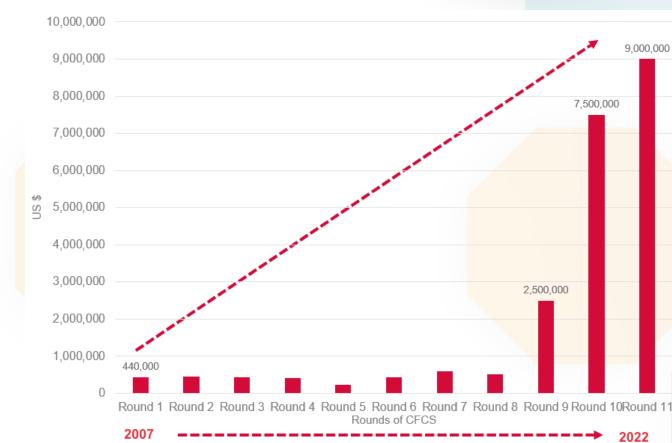
Strong country-level presence – CFCS

Rounds 1-10

230 Grants

47 Countries

US$ 13,540.000

Africa 125 (54%)

Asia and the Pacific 65 (28%)

Eastern Europe and Central Asia 27
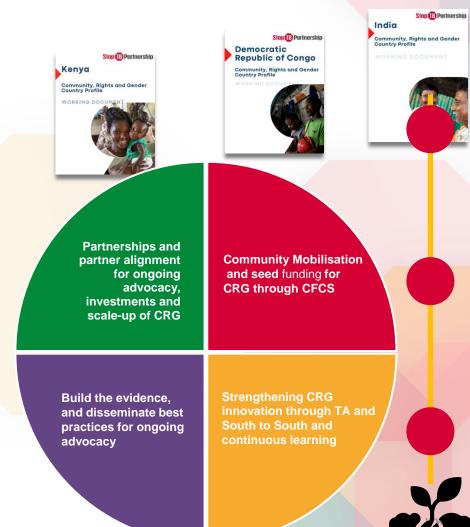
Latin America and the Carribean 13

Strong country-level presence – CFCS (cont)

Initial years focused on creating & supporting community participation initiatives

CFCS augmented to take a country approach and link with STP Platforms

Advocacy, Human Rights programming, CLM, gender transformative interventions, community participation, reaching KVPs, stigma elimination, social protection, women & girls empowerment

- **FOCUS ON COUNTRIES RATHER THAN PROJECTS:** For ongoing and sustainable investments in CRG to end TB.

- **ADDITIONAL COUNTRIES:** CFCS is now supporting 27 HBCs.

- **COUNTRY ONBOARDING PLAN:** More comprehensive country orientations on CRG, STP, reporting requirements and the importance of communication and collective advocacy.

- **STRAGEIC ALIGNMENT AND SUPPORT FROM STP DISEASE ADVISORS AND BY EXTENSION PARTNERS (NTP, TGF, USAID etc):** For visibility, longevity and ongoing and sustainable investments in CRG

- **MONITRING AND EVALUATION:** Improved data for action, best CRG advocacy practices for South-to-South learning

Kenya — Community, Rights and Gender Country Profile — WORKING DOCUMENT

Democratic Republic of Congo — Community, Rights and Gender Country Profile — WORKING DOCUMENT

India — Community, Rights and Gender Country Profile — WORKING DOCUMENT

Ukraine — Community, Rights and Gender Country Profile — Working Document

Partnerships and partner alignment for ongoing advocacy, investments and scale-up of CRG

Community Mobilisation and seed funding for CRG through CFCS

Build the evidence, and disseminate best practices for ongoing advocacy

Strengthening CRG innovation through TA and South to South and continuous learning

Ongoing investments, Scale-up & Growth

Evidence, Dissemination & Country Advocacy

Testing CRG Innovations at country level

Country-level STP Platforms

▸ 30 active STP Platforms in both donor and implementing countries

▸ 17 STP Platforms are supported through grants and TA

Country-level STP Platforms (cont.)

▸ **Tajikistan**: engagment of pop stars and celebrities as TB champions to increase the visibility and profile of TB.

▸ **Cambodia**: broad media engagement in press and talkshows mainstreaming discussions on ending TB.

▸ **Pakistan**: high-level dialogue with President H,R DR, Arif Alvi and national leaders on ending TB

▸ **Kenya**: Mobilising celebrities and communities in a national TB human rights campaign on ending TB stigma and discrimination and access to services.

▸ **DR Congo**: mapping of 7 Key Vulnerable populations and facilitation of representatives of each group in national TB governance

▸ and many, many others! + **Nigeria, Ukraine and Indonesia** are part of the Board discussion today

hosted by
UNOPS

Countries We Support

Challenge Facility for Civil Society (27 countries, six regions, one global)
- *Africa*: Cameroon, DR Congo, Ethiopia, Ghana, Kenya, Malawi, Mozambique, Nigeria, South Africa, Tanzania, Uganda, Zambia, Zimbabwe
- *Americas*: Peru
- Asia-Pacific: Bangladesh, Cambodia, India, Indonesia, Nepal, Pakistan, Papua New Guinea, Philippines, Viet Nam
- *Eastern Europe Central Asia*: Kazakhstan, Kyrgyzstan, Tajikistan, Ukraine
- *Global & Regional Coordination* Grants are supported at the Global Level for national TB survivor networks and at the regional level in Anglophone and Francophone Africa, Asia-Pacific, Eastern Europe Central Asia, Latin America-Caribbean, and Middle East North Africa.

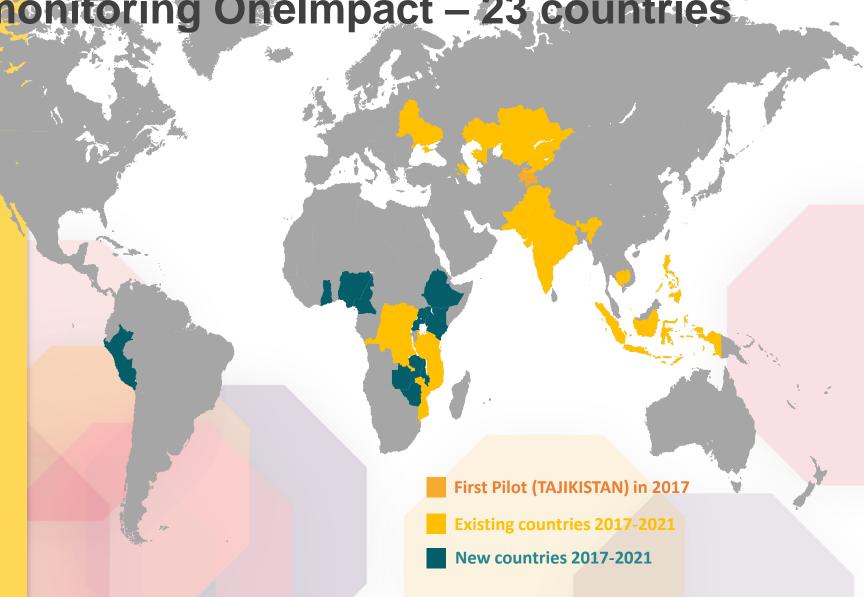**National Stop TB Partnership Platforms (17 countries)**
- *Africa*: DR Congo, Ghana, Kenya, Mozambique, Nigeria, Tanzania, Uganda, Zambia, Zimbabwe
- *Americas*: Brazil (as a Challenge Facility sub-grantee)
- *Asia-Pacific*: Afghanistan, Cambodia, Indonesia, Pakistan,
- *Eastern Europe Central Asia*: Kazakhstan, Tajikistan, Ukraine
- STP also works with STP Brazil through CFCS, and with Japan, Korea and Italy.

Community-led monitoring OneImpact – 23 countries

- ❖ Innovative digital platform and mobile application system
- ❖ Empowers people affected by TB to claim their rights , access health and support services, and report and eliminate TB stigma and discrimination
- ❖ Addresses TB challenges at the individual and community levels
- ❖ Generates essential information and data for advocacy and action
- ❖ Initial pilot in Tajikistan; ready for expansion in *Ukraine, Kazakhstan, Kyrgyzstan, DRC, Cambodia, Mozambique,* Pakistan, Indonesia and Philippines
- ❖ 13 new countries: Cameroon, Ghana, Uganda, Ethiopia, Malawi, Kenya, Nigeria, Uganda, Zambia, Zimbabwe, Peru, Tanzania, Indonesia
- ❖ 2 new regional work in Francophone and Anglophone Africa
- ❖ Adapted for real time bi-directional CLM of TB, COVID and HIV.

Stop TB Partnership

First Pilot (TAJIKISTAN) in 2017

Existing countries 2017-2021

New countries 2017-2021

Tools to inform advocacy are available

▶ Tools have been developed and implemented to support TB CRG engagement and advocacy:

- TB Communities, Rights and Gender (CRG) Assessment & Action Planning Protocol
- TB Stigma Measurement Assessment
- OneImpact Community-Led Monitoring Application and Framework
- TB CRG Investment Packages i.e. Gender
- TB CRG Operational Guidance (including Declaration of the Rights of People Affected by TB, Activating a Rights-based TB Response, Right to Breathe, TB Key Population Guidance) *developed with community partners
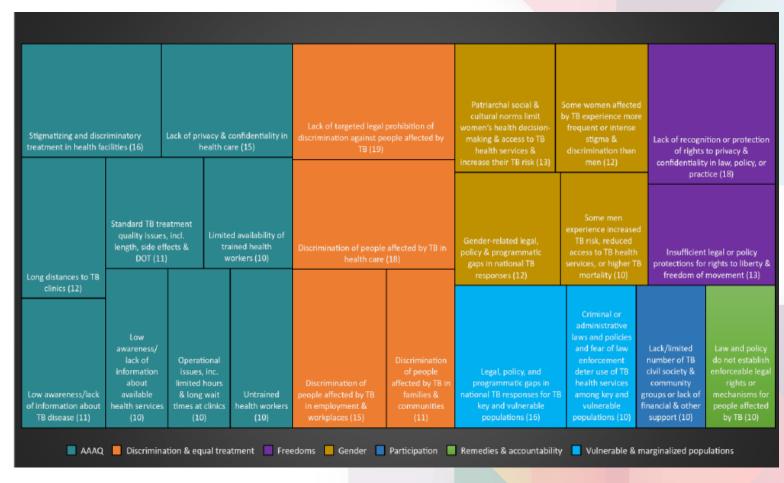- TB Key Population Size Estimation (under development)
- TB Legal, Human Rights and Enabling Environment Scorecard (to be finalized in 2022)
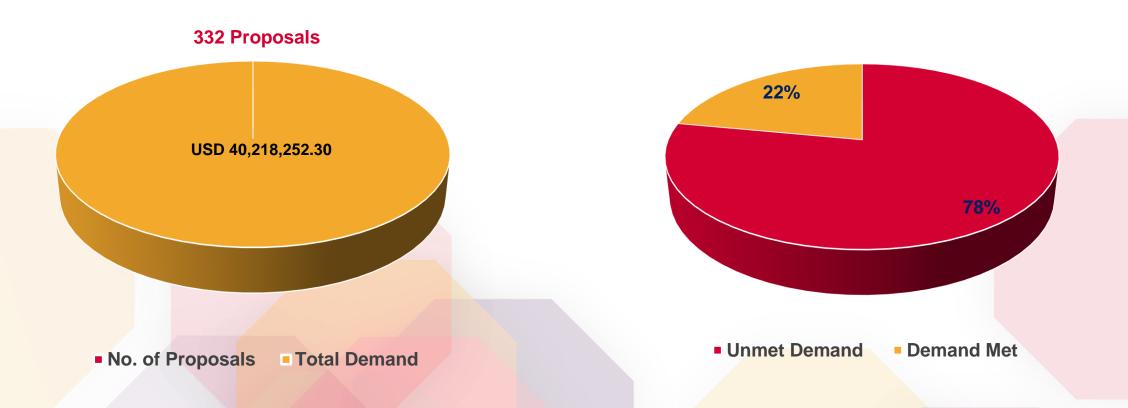
Engagement, development & data for action

- Participation of TB survivors and civil society in national TB processes, structures and forums. Examples: CCMs (Cambodia), Program Reviews (Kenya), Global Fund C19RM funding request (Cameroon). Country profiles are developed
- Strengthening and engagement of developing country NGO delegation and affected community delegation for advocacy
- Data for action: Key findings of CRG assessments have been peer reviewed and published in the Harvard Health & Human Rights Journal

Stigmatizing and discriminatory treatment in health facilities (16)

Lack of privacy & confidentiality in health care (15)

Lack of targeted legal prohibition of discrimination against people affected by TB (19)

Patriarchal social & cultural norms limit women's health decision-making & access to TB health services & increase their TB risk (13)

Some women affected by TB experience more frequent or intense stigma & discrimination than men (12)

Lack of recognition or protection of rights to privacy & confidentiality in law, policy, or practice (18)

Standard TB treatment quality issues, incl. length, side effects & DOT (11)

Limited availability of trained health workers (10)

Discrimination of people affected by TB in health care (18)

Gender-related legal, policy & programmatic gaps in national TB responses (12)

Some men experience increased TB risk, reduced access to TB health services, or higher TB mortality (10)

Insufficient legal or policy protections for rights to liberty & freedom of movement (13)

Long distances to TB clinics (12)

Low awareness/lack of information about TB disease (11)

Low awareness/ lack of information about available health services (10)

Operational issues, inc. limited hours & long wait times at clinics (10)

Untrained health workers (10)

Discrimination of people affected by TB in employment & workplaces (15)

Discrimination of people affected by TB in families & communities (11)

Legal, policy, and programmatic gaps in national TB responses for TB key and vulnerable populations (16)

Criminal or administrative laws and policies and fear of law enforcement deter use of TB health services among key and vulnerable populations (10)

Lack/limited number of TB civil society & community groups or lack of financial & other support (10)

Law and policy do not establish enforceable legal rights or mechanisms for people affected by TB (10)

AAAQ · Discrimination & equal treatment · Freedoms · Gender · Participation · Remedies & accountability · Vulnerable & marginalized populations

hosted by
UNOPS

CFCS Round 11: Available Funding V Demand

332 Proposals

USD 40,218,252.30

■ No. of Proposals   ■ Total Demand

22%

78%

■ Unmet Demand   ■ Demand Met

UNHLM targets & commitments to end TB

▸ The UNHLM on TB contains clear targets on prevention, diagnosis, treatment, AMR, funding etc.

▸ The Declaration also contains clear commitments on CRG and partnerships, including:

- End TB stigma and discrimination
- Access to medicines
- Removing legal and policy barriers
- Gender equity
- Participation of TB key and vulnerable populations
- Psychosocial support
- An equitable and human rights-based approach
- Multisectoral accountability

▸ Communities, with support for STP tools and grants, are **building evidence, strengthen capacity and inform advocacy t**o overcome CRG barriers and **finding the missing people** affected by TB.

▸ See a summary of the targets and commitments and community priorities and reflections *A Deadly Divide* between commitments and realities

"Entre les engagements de lutte contre la tuberculose et les réalités de la tuberculose, un écart fatal"

Rapport des communautés sur les progrès accomplis vers les objectifs fixés par la Déclaration politique des Nations Unies sur la lutte contre la tuberculose et appel à l'action pour combler les lacunes dans les objectifs de lutte contre la tuberculose

Novembre 2020

Thank you