

# The Global Fund's Strategic Initiative

To Find the Missing People with TB

# THE NEWSLETTER

to share countries' latest experiences and practices in improving TB case finding, supporting communities, and addressing barriers to care



**Wave 8** **Funding Results!** 13 Applicants selected

**Stop TB Partnership**  
TB REACH

**Representing 11 countries**

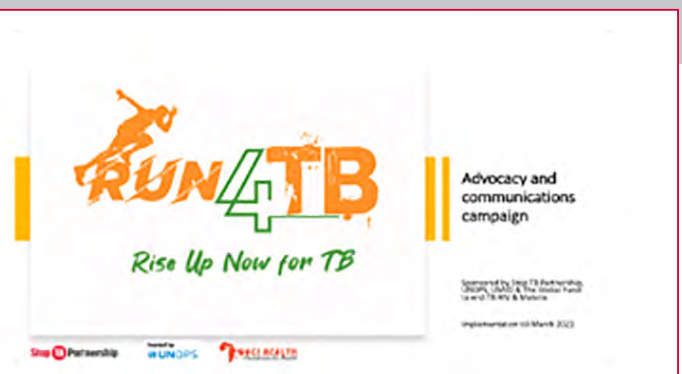
Stop TB Partnership's TB REACH initiative announced the latest round of grantees in July. There were 13 projects selected with a total grant value of more than USD 5.7 million. The new projects will focus on innovative service delivery approaches that engage private providers to improve the number of people detected and treated for TB and are supported by USAID and Global Affairs Canada. Of the 13 projects, 10 of them are from Global Fund Strategic Initiative countries and will work in synergy with current Global Fund investments for private sector engagement. A varied approach to private sector engagement includes the implementation of a new bold business model combining social health insurance for TB and aggregating reimbursements in the Philippines; the engagement of hundreds of drug vendors in Tanzania; and the use of artificial intelligence to read chest x-rays to aid private hospitals in Afghanistan to diagnose TB.

Find out more [here](#).

## CFCS GRANTEES AND PARTNER ON BOARDING WEBINARS

### JULY

Following Challenge Facility and Civil Society (CFCS) grants announcement in June 2020, Stop TB Partnership held webinars to support grantees with the grants management communications and social media expectations attached to the CFCS Round 9 grants. Grants management tools and Communications Toolkit were shared with the grantees. The Regional CFCS grantees also held onboarding sessions with their country partners.





WACI Health, a CFCS Regional grantee in collaboration with ACT Africa introduced their Rise up now for TB (Run4TB) during their onboarding webinar with participants from 10 country partners. Run4TB is a communications and advocacy campaign purposed at amplifying community and civil society voices. Synergizing their effort in ensuring that the END TB UMHLM Targets are met in time.

Prior to the call, a survey was conducted, and a report was produced outlining the needs of the partners. The gaps identified were that partners required additional capacity building to strengthen their advocacy. These thematic areas include: Community gender and rights, Social protection for post MDR-TB treatment complications, TB literacy and UNHLM TB, Continent

and country commitments and targets. WACI Health have engaged Stop TB Partnership Kenya, a recipient of a CFCS grant, to form a peer learning network with Botswana to empower and foster the growth of their network of TB champions.

Through this CFCS grant, WACI Health together with ACT Africa will extend their regional support to other Anglophone Region countries not covered by the CFCS round 9 including Angola, Namibia, Zambia, Lesotho, Botswana, Ethiopia, Mozambique, South Africa, Eswatini, and Ghana for different aspects of Community Based Monitoring, Stigma Assessments and Community Engagement. Africa Coalition on TB (ACT) is currently organizing a follow up workshop for all African regions including Francophone scheduled for the 26th to 28th October 2020.

Similarly, in Asia-Pacific, ACT! Asia-Pacific, APCASO and Stop TB hosted a webinar with all the grantees from the region. The webinar brought together 13 grantees from Philippines, Cambodia, Indonesia, Myanmar, India, Pakistan as well as the two global grantees, GCTA and TBpeople. This webinar enabled experience and priority sharing and ensued there was an opportunity to enhance capacity and partnerships across the region.

## STOP TB PARTNERSHIP JOIN DR TEDROS AND THE GLOBAL COALITION OF TB ACTIVISTS (GCTA) TO ADVANCE TB RIGHTS



Stop TB has long supported TB affected community networks and their leadership of the TB and human rights agenda. Almost 12 months on from the launch of the TBpeople *Declaration of the Rights of People Affected by TB*, Blessina Kumar together with Dr Tedros launched a practical guidance to TB policy makers and program managers on *Activating a Human Rights Based TB Response*. The Guidance contains 20 recommendations

that particularly focus on operationalizing the right to health, the right to be free from discrimination and the right to privacy, confidentiality and informed consent. The recommendations will begin to be implemented with support from the Challenge Facility for Civil Society grant to GCTA.

The Guidance is available [here](#)

# AUGUST

## LEMBAGA KESEHATAN NAHDLATUL ULAMA (LKNU)



In Indonesia, **Lembaga Kesehatan Nahdlatul Ulama (LKNU)** held their pre-launch of OnelImpact Sehat with their Talk Show on Empowering People with TB to Know and Claim their Rights. LKNU and POP TB Indonesia are supporting people affected by TB to better know and claim their rights through the OnelImpact Sehat project – with support from Stop TB Partnership. The talk show aimed to raise awareness about the community-lead monitoring project and OnelImpact. For more information, please visit [this website](#) and [this one](#).

## STOP TB PAKISTAN



**Stop TB Pakistan** – Political leadership of Pakistan held a meeting, chaired by Dr Nausheen Hamid, Parliamentary Secretary for MOH, to discuss “Beyond COVID19 & Politics- Let’s End TB in Pakistan”. A legislation for mandatory TB case and TB drug sale notification was drafted and presented to the parliamentary TB Caucus.

## STOP TB KAZAKHSTAN

**Stop TB Kazakhstan** held an online meeting with the main NGOs in the country, during which the issue of timely diagnosis of TB cases arose. A letter was sent to public health departments in different regions on the importance of including NGOs working in the field of TB into Public councils and involve them more in TB/HIV reduction work. With the USAID ETICA project, an online training program has been prepared for NGO staff in order to increase their capacity on TB and DR-TB issues, to advise clients and people with TB from key populations, and to reduce stigma and discrimination.



# SEPTEMBER

## IMPACT OF COVID ON THE TB RESPONSE

**Impact of COVID on the TB Response: A Community Perspective** was launched on 15 September thanks to an all-star line up of many great organizations: Stop TB Community & Civil Society Delegations, RESULTS, ACTION, GCTA,



TBpeople, WeAreTB, McGill, KANCO and the Global TB Caucus. COVID-19 has had a devastating impact on people affected by TB as well as TB programs around the world. In response to this, 10 global networks including the Stop TB Partnership Affected Community Delegation and the Stop TB Partnership Developing Country NGO Delegation quickly joined forces to take action and launch a civil society-led survey to expand our understanding of experiences in various regions and key stakeholder groups.

During the launch, a call to action was delivered, which highlighted the following community priorities:

1. Develop a Recovery plan including scaling investing in affected communities (through Challenge Facility) reporting barriers, filling gaps and supporting peers
2. Social security systems must be comprehensive, inclusive and accessible, especially for those most vulnerable and marginalized.
3. Simultaneous screening and diagnostics of TB and COVID
4. Real time TB data, including TB key population data, mirroring the real time COVID data systems
5. Leverage COVID R&D investments to include TB R&D

For more information, you can find the full report [here](#), and the factsheet [here](#).

## STOP TB DRC



**Stop TB DRC** brought together key stakeholders and TB Champions to discuss the TB Champions Action Plan, the UN Political Declaration on TB and UNHLM targets and how to best align efforts in different provinces. Currently they are organizing a high-level meeting with heads of state and several ministries and a TB concert.

## STOP TB DRC



The TB Bus Campaign was launched by **Stop TB Mozambique** in several provinces on September 1st. The TB Buses and billboards will provide information aimed at increasing people's awareness and sensitization toward TB in this high-burden country. The campaign will continue through December 2020.

## IMPACT OF COVID ON THE TB RESPONSE



TB and COVID-19 Screening campaigns by **Stop TB Ghana** tested 49'000 people and advanced people's awareness and sensitization of TB and COVID-19. Over 10'000 sputum were collected and tested by GeneXpert and 10'000 positive cases were found.

## COMMUNITIES, RIGHTS AND GENDER (CRG) ASSESSMENTS TOOLS ROLL OUT AND TGF SUPPORT UPDATES

### AUGUST



*Practical session of the TB Stigma assessment interviewer training: 18 August 2020. Kumasi City, Ghana*

Acknowledging that stigma exists is the first step to addressing the issue. Ghana National TB Program and the TB affected communities have embarked into a process of assessing how stigma and discrimination act as a barrier to both accessing and providing TB services using Stop TB Partnership TB stigma assessment tool. The aim is to engage the TB affected community in generating data to create a multi sectoral action plan to tackle and monitor levels of stigma and discrimination impacting TB in Ghana

The assessment is implemented by TB voice Ghana with strategic guidance from the National TB Control Program and jointly coordinated by the and by National TB Control Program and Ghana-West Africa Program to Combat AIDS and STI (WAPCAS). The assessment is supported by the Local Global Fund through the West Africa Program to Combat AIDS & STI NFM II grant with Technical assistance provide by Stop TB Partnership and Scientific Advisory Committee.



*TB Stigma assessment interviewer Training: 18 August 2020, Kumasi City, Ghana*



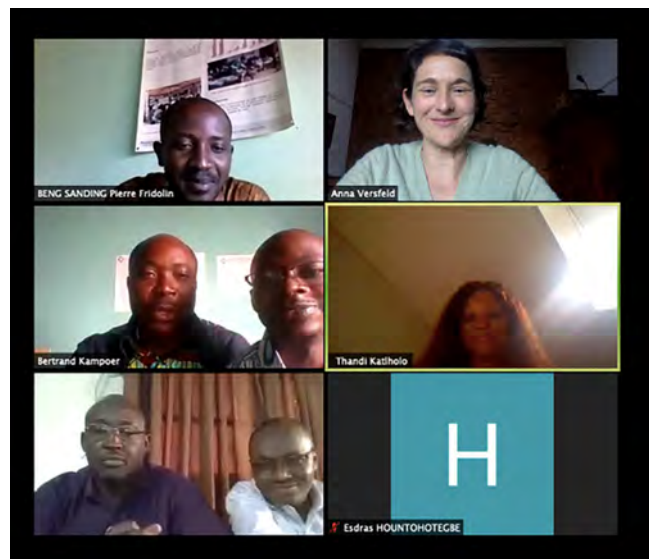
# SEPTEMBER

The Stop TB Partnership has been supporting Communities, Rights and Gender (CRG) assessments in three countries in francophone Africa (Benin, Cameroon, and Niger) as part of the RECAP TB initiative. These assessments are largely funded by Initiative 5% (French Government) and implemented by Alliance Côte d'Ivoire in partnership with Dynamique de la Réponse d'Afrique Francophone sur la TB (DRAF TB).

As a follow up to the Initial TB CRG assessment regional training last year, Stop TB

Partnership supported a second round of training remotely on 18 and 22 September 2020. The training covered essential knowledge and practical skills related to CRG data analysis and report writing. Participants included lead country consultants from each of the three participating countries as well as additional country team members. Training was provided in English and translated into French.

On the basis of this CRG data analysis and report writing, a validation workshop of the CRG Assessment findings and recommendations was held at the **EBOLOWA** in South Cameroon. Twenty four participants worked on the presentation of the different stages of the maturing process of the CRG assessment in Cameroon, and key populations were determined including prison populations, people living with HIV, contact persons, refugees and children.



*Community Rights and Gender Assessment data analysis and reporting Training Webinar: 18 and 24th September 2020: Led by Anna Versfeld*



Similarly, Niger held a validation workshop of their CRG assessment finding with national stakeholders in Niamey. Approximately 20 participants from different sectors discussed the results of the investigation to the advisory group, obtaining stakeholder amendments to the assessment results and improving the quality of the document with observations from the workshop. The methodology focused on the presentation of results to enrich the document to ensure a lasting community dynamic in terms of response to TB in Niger that is sensitive to gender and human rights.

As a follow-up to the national CRG assessment findings and recommendations in Bangladesh and in furtherance of feedback from the Technical Review Panel, Stop TB Partnership continued to support Bangladesh to elaborate priority recommendations arising from the assessment. The **Development of a costed TB Communities, Rights & Gender Action Plan** in Bangladesh took place virtually in September. The development of the plan was led by Stop TB Partnership, together with the Global Fund Country Team from Bangladesh, the Global Fund CRG Team, the National TB Programme in Bangladesh, BRAC and other national partners. The plan provides clear and important guidance on priority CRG interventions with costings that can be implemented at the country level, ensuring that barriers to access can be addressed. Significantly, almost USD 800,000 in TB CRG interventions from the plan are to be funded under the Global Fund country grant. National partners will now be sensitized on CRG and be supported to develop clear implementation guidance to ensure effective implementation of the national CRG Action Plan. We are very excited for the formal launch and validation of the TB CRG Action Plan that will be scheduled in the coming months.

In September, STP continued to support implementation of the Global Fund's **Breaking Down Barriers initiative**, to dramatically scale up programs to remove human rights-related barriers to TB service. To share, learn and build knowledge and capacity among service providers on Human Rights and TB. **The Botswana Network on Ethics, Law and HIV/AIDS** (BONELA) in collaboration with the National TB Programme (NTP) and Stop TB Partnership is leading a series of workshops throughout the country to create awareness of a baseline assessment carried out in Botswana to support its efforts to scale up programs to reduce human-rights-related barriers to TB/HIV integrated services. The training led to a consensus that the NTP should consider conducting CRG and Stigma assessments to generate strategic information of the areas beyond the TB/HIV collaborative services.



*JWANENG HUMAN RIGHTS AND TB STIGMA WORKSHOP: DATE: 22 SEPT - 24 SEPT 2020, BONELA CEO Cindy Kelemi Facilitating Group sessions*



**Stop TB Pakistan** worked with the Sindh Minister of Health Dr Azra Pechuho to discuss next steps on the multi-sectorial accountability framework and foster an on-going dialogue to launch the parliamentary TB Caucus in the Sindh province. Parliamentarians have committed to provide their support to the 'Patient led community groups' by working with them and preserving their rights vis-à-vis TB care services.

## CHALLENGE FACILITY FOR CIVIL SOCIETY IMPLEMENTATION UPDATES



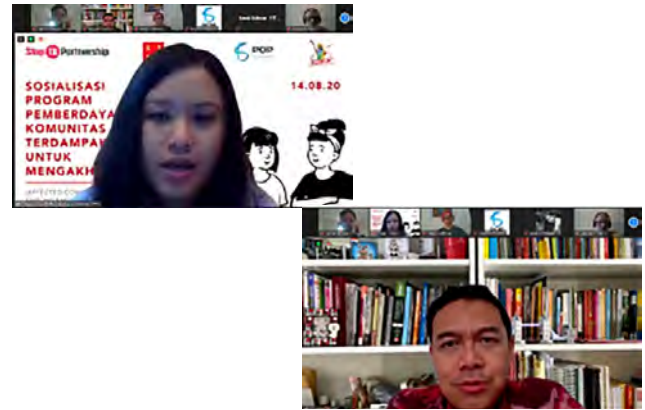
*DHDC and RIRFHUD gives a courtesy call to the NTLF Nigeria, Abuja*

Throughout the month of September, **Challenge Facility For Civil Society Grantee Debriche Health Development Centre (DHDC)**, and their partner **The Roland Igbinoba Real Foundation for Housing and Urban Development (RIRFHUD)** mobilised various partners including the National Assembly Committee on AIDS, Tuberculosis and Malaria Control, **Stop TB Nigeria**, National TB and Leprosy Control Program, Special Adviser to the President of the Federal Republic of Nigeria on Sports, and an award winning stand up Comedian for to promote and garner political support for their CFCS TB stigma assessment project.

The project is a follow up to the recommendations of the recent TB CRG assessments which revealed key and vulnerable populations in Nigeria face human rights and gender barriers negatively impacting availability, accessibility, and quality of TB services. As such, DHDC and RIRFHUD began the implementation of a TB-Stigma Assessment in Lagos slums with their #UnmaskTBStigma and #EndTBStigma campaigns.



**Stop TB Indonesia**, in collaboration with the national TB survivor network in Indonesia, POP TB hosted a webinar to inform and engage national stakeholders regarding the Challenge Facility grant that will be implemented at the country level. The grant will focus on meaningful engagement of TB affected communities, capacity building, overcoming legal barriers to access and reducing stigma and discrimination. This webinar was crucial to ensure that all stakeholders are updated on the mission and to ensure NTP, Global Fund PR and SR as well as TB survivor support and engagement in the Challenge Facility grant and in the national TB CRG agenda more broadly.



*Project presentation meeting at the district level (Chongoene and Chibuto districts). 2nd from left, Dr Carla Chisaque, of Chongoene district and 3rd from left, Dr. Jose Carlos Murrone of Chibuto district*



*Selection of Activists in Chongoene and Chibuto districts.*

**ADPP, AMIMO** and **NAMATI** met in Maputo, Mozambique to align their ideas and perspectives on their Challenge Facility project and common ground. As a result, TOT, activist and trainings for people with TB will be conducted. ADPP also met with a local community radio station (Radio Xai-Xai); the radio station will play a critical role in the promotion of the Onelmpact Tool in the surrounding communities. For more information, please visit this [blog](#) and/or [newsletter](#).

Additionally, the head of Gaza Provincial Directorate of Health hosted a stakeholder meeting to create awareness of the AMIMO CFCS project. The meeting provided a platform for relevant stakeholders and affected communities to discuss and endorse their workplan. As a results of this meeting AMIMO entered into an understanding with Provincial Director of Health in September 2020 to implement their project in two districts of the Gaza Province Activists in Chongoene and Chibuto districts. Were eventually Selected.

**Janna Health Foundation (JHF)** and **Sufabel Community Development Initiative (SCDI)** held an advocacy visit to Sardauna, Kurmi and Gashaka Local Government Areas and Ngada Special Development Area as part of their CFCS Round 9 project. JHF and SCDI identified key stakeholders and highlighted their roles in the CFCS project. They have engaged with Community Health workers from the targeted population inline with NTP guidelines, and they have selected members of the advocacy committee among the key stakeholders. At each community, the Community Leader was visited first, and they pledged their support to the program. The stakeholders' council (led by Community Leaders) presented a proposed list of male and female youths to serve as volunteers; a total of 35 CHWs were ultimately selected, and the training is underway.

**TB Proof and Stellenbosch University** conducted Community Health Worker (CHW) and stigma







interviews at the Luvuyo Clinic in Khayelitsha, South Africa to explore CHWs knowledge and perceptions of TB Stigma; how stigma occurs in each of the stages of the TB care cascade; perspectives, experiences and knowledge of effective stigma reduction interventions in their respective fields of expertise. The *Use My Voice to End TB* study aims to inform the development of community-led, person-centred, gender-responsive TB stigma reduction interventions, among households in Hammanskraal, in Gauteng, and Khayelitsha in the Western Cape.

In Dodoma, Tanzania the **Eastern Africa National Network of AIDS and Health Service Organization (EANNASO)** and **Management and Development for Health (MDH)** hosted the Community Rights and Gender in the Tanzania National TB response workshop, bringing together 30 key stakeholders from the NTL, President Office – Local Government Authority, TB Survivors, Civil Societies and implementing partners. The workshop was an avenue for partners to address the knowledge gap on the CRG concept, and agree upon issues and a plan for a community TB advocacy in 2021. Tanzania is developing its 6th National TB Strategic Plan (NSP), and this provided an excellent opportunity for participants to receive progress updates and discuss possible ways for the TB communities to engage in these processes. As a result of the workshop, a team was formed (led by EANNASO) to review the OneImpact TB Janja content and finalize the advocacy roadmap that was developed during the workshop.

Below: (left) In India, REACH has commenced its work supporting the capacity building of TB Champions and we are working to support these efforts over the course of the Challenge Facility Grant. While in Cambodia (right) Challenge Facility and CRG Grantee KHANA, addressed the USAID TB Accelerator Webinar.



Family Welfare Foundation (FWF), one of the CFCS grantees in Tanzania, conducted a capacity building workshop of 20 Community Health Promoters (CHPs) on CRG concepts with a particular focus on impact of Gender roles and norms on access to TB services. The training was co-facilitated by the National TB and Leprosy Program and Sengerema District Council, Mwanza Region. The aim of the training was to empower the CHPs to enable them to provide gender and culturally sensitive psychosocial support and address GBV in selected 200 households of the Sengerema District Council, Mwanza Region. As a result of the training, The NTL has decided to review National Community TB Care (CTBC) handbook based on the lessons learnt from this training and other stakeholder inputs.



CHPs group work discussion on gender-based violence in TB care and treatment: CHPs CRG Capacity Building Workshop in Sengerema District, September 2020

## STP FIELD GUIDES DISSEMINATION CONTINUES



Towards the end of September, KIT Royal Institute in collaboration with Stop TB Partnership hosted an International virtual training Workshop to design and plan strategic interventions to find and treat the missing people with TB using the Stop TB Field Guides available [here](#). The objective of the workshop was to familiarize National TB Programme staff from Tanzania and Pakistan with the field guides and support them in developing an action plan to operationalize and monitor specific case-finding activities.

As a result of the workshop, the NTP participants were able to identify elements of the Stop TB Partnership field guides to optimize their case-finding activities in 2021. The training workshop will assist them to develop action plans for selected case-finding activities based on guidance from the Stop TB Partnership field guides

## STP FIELD GUIDES DISSEMINATION CONTINUES

**ENGAGE-TB Case Studies** - The WHO ENGAGE-TB Approach aims to strengthen integrated TB services at community level, improve the reach and sustainability of TB interventions, and shift the global perspective of TB from only a medical illness to a broader socioeconomic, community issue. The ENGAGE-TB team published a series of eight case studies on the implementation of community-based TB activities in high burden countries, which are part of the Global Fund Strategic Initiative to Find Missing Persons with TB. The case studies describe experiences and best practices from different implementers. Countries covered in this series include: the **Democratic Republic of Congo, Indonesia, Mozambique, Myanmar, Nigeria, Pakistan** and Tanzania (with a **case study on M&E** and one on **Community Network**). Their stories illustrate challenges, best practices, lessons learned and future outlooks from programmes, interventions and initiatives in the planning and implementation of community-based TB services. Broad topics highlighted in this series draw from a set of key challenges underlined by the implementing countries during the **WHO Global Consultation on Community-Based Service Delivery in TB conducted in 2018 in Addis Ababa**, Ethiopia. The stories are rich in detail and offer a snapshot of real-life implementation challenges and solutions. The aim was to capture the lessons learned from countries' experiences, to enable other countries and implementers to use the insights and evidence to strengthen and scale up integrated community-based TB service delivery in their own efforts to End TB.



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### UPDATES FROM THE FIELD

**Open call to Strategic Initiative priority countries:**

**How are you managing TB in the time of COVID-19?**

If you have stories, experiences or best practices that you would like to share with us for the Strategic Initiative Online Info Sharing Platform, please get in touch with us at [missingpeoplewithTB@stoptb.org](mailto:missingpeoplewithTB@stoptb.org)

### GET INVOLVED

Let us know of your success stories or challenges in TB case finding! Your work can soon feature on the Strategic Initiative **online platform** and in our newsletter!

Contact us at:  
[missingpeoplewithTB@stoptb.org](mailto:missingpeoplewithTB@stoptb.org)