International Human Rights Day 2020 – There was a call from TB-affected communities for a rights-based and equitable TB response. This call was accompanied by the global dissemination, in six languages, of the Deadly Divide: TB Commitments vs. TB Realities report.

Tuberculosis (TB) remains one of the world’s biggest infectious killers, resulting in 15 million unnecessary deaths in the last decade. TB is the leading cause of death among people living with HIV. Despite grand promises by the world’s leaders at the United Nations High-Level Meeting on TB in 2018, we have seen insufficient progress to fulfil the targets and commitments contained within the Political Declaration on TB.

This deadly divide between words and action, and in the level of resources available to countries with a high burden of TB, has been documented by TB-affected communities and civil society in a groundbreaking report, A Deadly Divide: TB Commitments versus TB Realities. The new report, which complements the 2020 Progress Report of the UN Secretary-General, outlines the urgent need for a TB response that is equitable, community-led, rights-based, and people-centred.

Developed by the Stop TB Partnership Board Delegations that represent Affected Communities, Developing Country NGOs, and Developed Country NGOs, and with inputs from 150 community partners from over 60 countries, the report provides operational guidance on how countries and other
stakeholders can realize the necessary paradigm shift. The people behind the report represent an unrelenting global movement of people affected by TB demanding that their rights be recognized and realized.

A Deadly Divide includes a Call to Action that focuses on six key Areas of Action, based on the 5 key asks that TB communities presented at the United Nations High-Level Meeting on TB in 2018, with the addition of a sixth Area of Action on COVID-19. These are: 1) reaching all people through TB detection, diagnosis, treatment, care and prevention; 2) making the TB response rights based, equitable and stigma-free, with communities at the centre; 3) accelerating the development of, and access to, new tools to end TB; 4) investing the funds necessary to end TB; 5) committing to multisectoral accountability and leadership on TB; and 6) leveraging COVID-19 as a strategic opportunity to end TB.

The key findings of A Deadly Divide were shared in a series of regional online launch events co-hosted by the Global TB Caucus and regional TB advocacy networks, reaching key TB stakeholders in Asia Pacific, Anglophone Africa, Francophone Africa, Middle East and North Africa, the Americas, Eastern Europe and Central Asia, and Lusophone countries. Joining these events to raise their voices in support of action to end TB were well-known personalities and TB Champions Bebecool, Florent Ibenge, Gilberto Mendes, Johana Bahamon, Noziya Karomatullo, Richard Mofe-Damijo, and Sania Saeed.

Stop TB will continue to work with country partners to advance the Call to Action, guided by the advocacy toolkit that was developed in support of the report dissemination.

The full report, Call to Action and advocacy toolkit are available at: http://www.stoptb.org/communities/divide.asp

AUGUST

Stop TB Partnership Ukraine - National Dialogue, 28 October 2020

The Stop TB Partnership in the Ukraine organized a national dialogue on the united efforts of state agencies and civil society organizations for a sustainable response. Dr. Lucica Ditiu, Executive Director of the Stop TB Partnership, opened the event with a message that strengthened the need for all partners to work together to maximize efforts and resources, and the need to think long-term in the fight against TB.

NOVEMBER


Dr. Sreenivas Nair and James Malar from Stop TB Partnership presented the keynote address to open the 2-day law school conference for lawyers, law students and legal academics on the subject of the law, public health and pandemics. During the keynote, the speakers unpacked the impact of COVID-19 on the TB response, but also the lessons that can be learnt from TB in the fight against COVID-19. There was particular focus on human rights, TB Community, Rights and Gender (CRG) Assessments, community-led monitoring, the roles of lawyers in access to justice initiatives, human rights-based TB and COVID-19 laws and policies.

Supporting TB CRG in Francophone Africa - “Formation des Speakers Francophone” Douala, Cameroon, 30 November – 4 December 2020

Building on the work of the Global Fund Advocates Network (GFAN) to support Francophone advocacy for Global Fund replenishment, Stop TB supported a regional training aimed at advancing advocacy efforts in the region to fight HIV, TB and malaria. This regional training for francophone civil society and community advocates took place from 30 November to 4 December 2020 in Douala, Cameroon. It was organized by Impact Santé Afrique and supported by Stop TB, The Global Fund, Rollback Malaria, GFAN and Civil Society.
for Malaria Elimination. The aim of the training was to strengthen advocacy from the francophone region in the fight against malaria, HIV/AIDS and tuberculosis. Stop TB supported the travel and participation of 5 civil society and community representatives from the region, translation and dissemination of Stop TB CRG materials including the TB Stigma Assessment, CRG Investment Packages and the UNHLM on TB’s Targets and Commitments summary. During the workshop Stop TB, in collaboration with Club des Amis Damian, DRAF TB (both Challenge Facility for Civil Society Round 9 grantees) and Alliance Cote d’Ivoire, presented the Stop TB CRG portfolio and its implementation at regional and national level. Stop TB will continue its engagement with Impact Santé Afrique and other partners in the region to ensure francophone advocates continue their active participation in the TB response and collaboration with HIV/AIDS and malaria advocates.

**Workshops to Strengthen Country Capacity, November & December 2021**

The WHO Global TB Programme, in collaboration with The Global Fund, Stop TB Partnership and USAID, conducted three virtual workshops on the 9th and 10th of November, under the theme “Finding the Missing People with TB Strategic Initiative: Overview of progress and country orientation on the next funding cycle.” More than 120 participants attended the meeting.

During these meetings, participants were oriented on the new modalities of the Strategic Initiative on finding the missing cases for TB. Countries shared experiences and perspectives on challenges, successes, and innovations in addressing the impact of the COVID-19 pandemic on finding people with TB.

Implementers as well as funding and technical agencies from the 20 focus countries for the new cycle of the Strategic Initiative shared ideas on how best to coordinate and support efforts to mitigate the impact of COVID-19 on TB services. Some of the good practices and innovations shared by countries include the use of the weekly TB Situation Room in Zambia to track and address challenges in the diagnosis and notification of TB, the use of Video Observed Treatment (VOT) in Ukraine, and the experience with bidirectional screening for TB and COVID-19 in India. To facilitate more in-depth understanding of these good practices, a dedicated follow-up session was organized on the 11th of December, where these practices were described in more detail.

Agenda and presentations are available via the following link: [SI MEETINGS NOV DEC 2020](#)

**DECEMBER**

**Round table discussion with national Stop TB Partnership platforms, 10 December 2020**

The Stop TB Partnership Secretariat hosted a virtual event attended by 36 partners from national Stop TB Partnership platforms. The event included presentations from STP Italy (on CAMPER Milan), STP Tajikistan (Religious leaders advocacy), and STP Indonesia (community-led survey), followed by a conversation on key challenges and successes encountered in 2020 on programme implementation.

**Botswana TB Survivors 1st workshop (Representation from the South), 21-22 December 2020**

With support from WACI Health’s Challenge Facility for Civil Society Round 9 regional project and the National TB Programme, Victus Global Botswana Organization hosted an orientation for TB survivors on networking to discuss UNHLM targets and establish a TB network and interim committee. To date, such a committee does not exist, and this is seen as a great opportunity to bring survivors together to help others in the community.
The Stop TB Partnership in DRC hosted a round table for TB survivors and ambassadors. Vita Football Club’s Coach Florent Ibenge advocated for the protection of the rights of those affected by TB, HIV and malaria in the time of COVID-19. We thank Coach Florent Ibenge for his voice, support and endless effort in this cause.

Break the Silence: Human Rights, Gender, Stigma and Discrimination Barriers to TB Services in Georgia, Kazakhstan, Kyrgyzstan, Tajikistan, Ukraine – 17 December 2020

Stop TB Partnership’s TB CRG Assessment was implemented across several countries in Eastern Europe and Central Asia (EECA) through TBREP and PAS Center. Stop TB Partnership provided technical assistance in training, implementation and review of the assessment and was on hand to help launch the regional report featuring analysis and recommendations pertaining to observed TB CRG barriers, as well as recommendations to overcome these barriers, from 5 countries in the region. The next step will be to develop and implement costed TB CRG Action Plans in countries across the region. The report is available in this link

Association for Social Development, Pakistan

With funding from CFCS Round 9, ASD Pakistan has developed a program-led contextualized intervention that links TB affected communities with public sector TB treatment centers. The aim of this activity is to ensure that TB care is responsive to the needs of people with TB.

DRAF TB, Francophone Africa

In just a few short months, DRAF TB, with support from their CFCS Round 9 grant, succeeded to build and strengthen partnerships and collaboration among key stakeholders at all levels to monitor the UNHLM on TB Political Declaration across Francophone countries in West and Central Africa. Stakeholders include affected communities; TB survivors, National TB Programmes; parliamentarians; networks of NTP in West and Central Africa; and WHO country, regional and global offices.

Kenya Legal & Ethical Issues Network on HIV and AIDS (KELIN), Kenya

As part of their wider work under CFCS Round 9 to train and engage TB Champions in Nairobi, Homa Bay, Kisumu and Mombasa regions in Kenya, KELIN held a one-day meeting with the Nairobi County Health Management Team and the National TB and Leprosy Programme on 25 September 2020. As a result, Nairobi County endorsed 10 TB Champions and formulated the county’s priority issues for advocacy at the community level. The TB Champions will facilitate access to justice for TB affected communities whose rights have been violated by documenting these human rights violations and engaging pro-bono lawyers. More details here: Nairobi County endorses 10 TB champions to monitor, report and demand accountability for rights violations of people with TB – KELIN (kelinkenya.org)
In November 2020, Socios en Salud launched a virtual survey to identify people and civil society organizations in Latin America and the Caribbean involved in addressing TB in 3 key populations: migrant populations; persons deprived of liberty; and indigenous populations. The results of this survey will assist Socios en Salud in the continued implementation of their CFCS Round 9 grant. This is a critical next step in advancing the evidence base pertaining to TB Key and Vulnerable Populations through TB Key Population Briefs, and through the TB Key Population Data for Action component of the TB CRG Assessment that has been conducted in 20 countries, and which contributes to the UNHLM commitment on prioritising populations that are most marginalised and vulnerable.

In December 2020, REACH launched a wide-reaching social media campaign to promote TB Mukt Vahini, a TB survivor-led network based in Bihar. The group is supported by REACH through their CFCS Round 9 grant. The aim of the social media campaign is to show how the network is growing, and posts in December aimed to highlight new district chapters as well as to showcase new TB survivors who have recently joined the network. The campaign has so far (in January 2021) reached more than 5,000 people through Twitter and Facebook. https://twitter.com/SpeakTB/status/1342054914248208384?s=20

With funding from the CFCS Round 9 grant, TBpeople Global has supported the creation of TBpeople country chapters in Pakistan, Cameroon, Nigeria and India. TBpeople will complement these national efforts by finalising three key global initiatives that have already commenced: first, an online learning, communication and engagement platform for people affected by TB; second, a discussion paper on human rights and TB DOTS; and third, a briefing on TB and people who use drugs, as part of the Memorandum of Understanding between International Network of People who Use Drugs (INPUD) and TBpeople.

TB Proof has established a community-academic partnership to enhance research skills of a network of people affected by TB. Harvard and Stellenbosch University were engaged to enrich the planning and development of interviews. As a result, TB Proof has developed a training manual on how to conduct stigma assessments which will be available in the coming months in a downloadable format, making it more accessible to a wider audience. Virtual training of two research assistants, who will be conducting stigma assessments in Khayelitsha, was facilitated by TB Proof and Stellenbosch University.
Nhork Kang, an Executive Committee Member of the District Network of People Living with and Experienced TB (DNPET) from Siem Reap, through the support of CFCS and the OneImpact Project, was elected amongst TB survivors to be a full member of the Country Coordinating Mechanism (CCM) for the Global Fund to Fight AIDS, Tuberculosis and Malaria for the term of 2021-2023. Sitting in this high-level platform will not only allow her to share her experiences living with TB, but that of the communities she represents. Through the CFCS grant, she will be supported to assume a role in the Oversight Committee of the CCM, where she can use CLM data from the affected community to inform her opinions and priorities.

In addition, also thanks to the CFCS grant, Pom Sopheap, another representative from the community affected by TB who is a Lay Counselor, was also elected as a CCM alternate, representing TB affected communities. She is from Kandal Province and working under the USAID-funded COMMIT project, which aligns with CFCS. Importantly, both are women, representing voices which are often left behind in the TB response.

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<tr>
<th>Debriche Health Development Centre, Nigeria</th>
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<td>As part of their CFCS Round 9 grant, Debriche, in partnership with RIRFHUD, launched a social media engagement campaign with the Lagos State TB programme and local celebrities. The campaign aims to promote public participation in the implementation of the Lagos slums stigma assessment. Celebrities and opinion leaders have been engaged to accentuate the project, using the hashtags #UnmaskTBstigmaNG and #EndTBStigmaNG. To date, over 20,000 Facebook users have been reached through the campaign.</td>
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<td><a href="https://twitter.com/DHDCNigeria/status/1313861173377486848?s=20">https://twitter.com/DHDCNigeria/status/1313861173377486848?s=20</a></td>
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<td>In December, DHDC conducted a virtual induction of new volunteers providing them with in-depth information on their vision and mission, pressing health topics and their role in changing poor health narratives and providing them with strategic information on the TB burden in Nigeria including the impact of stigma and discrimination. Volunteers pledged their commitment toward awareness-creation on the prevention, diagnosis and treatment of TB at the grassroots level. Further capacity building sessions for volunteers are planned for 2021.</td>
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<td>With funding from CFCS, the Janna Health Foundation launched a TB project in the communities of Ngada and neighbouring LGAs and conducted their first visit in December 2020 to support Health Care Workers and Community Volunteers. In the process, two laboratory technicians were identified, a microscope was provided by the Taraba State TB Control, and the leader of the Development Area Council donated room space, an electricity generator and a motorcycle to support TB screening and sputum transportation. At the time of the end of the visit, four new cases of TB had been detected from two community outreach sessions.</td>
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<th>TBpeople, Ukraine</th>
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<td>Support in analysing the legislation of Ukraine for compliance with the Declaration of the Rights of People Affected by Tuberculosis made it possible to hold the First National Dialogue in Ukraine in 2020 on different issues surrounding tuberculosis. In partnership with the TBEuropeCoalition as well as national and international partners, TBpeople Ukraine were able to involve representatives from 5 government ministries in the discussion. The results achieved have also made it possible to intensify the updating of the Law on Counteracting Tuberculosis in Ukraine, including this will allow eliminating the dispensation barriers for people affected by tuberculosis.</td>
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| Accessing Ngada Communities in Nigeria |

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The Association of Mozambican Mineworkers (AMIMO), Mozambique

Through CFCS funding, AMIMO aims to empower TB key populations and their surrounding communities to address the stigma that negatively impacts access to TB services in the districts of Chongoene and Chibuto in the province of Gaza. AMIMO is creating demand for TB services, developing a sustainable link with human rights NGOs to provide legal aid and services to people living with TB, and lobbying parliament to initiate considerable law reforms and policies to address the wide-spread human rights and gender inequalities that currently exist.

Family Welfare Foundation, United Republic of Tanzania

The Family Welfare Foundation, in collaboration with National Tuberculosis and Leprosy Program (NTLP), held a multi-stakeholder workshop to validate the draft National CRG guide for TB responses and CRG training toolkit for community health workers. The constructive inputs from this workshop helped to finalize the implementation guide, which has now been printed for launch and distribution. The implementation guide can be found here: http://www.stoptb.org/assets/documents/communities/National%20CRG%20Implementation%20Guide%20for%20TB%20responses%20-Tanzania.pdf

TB REACH HIGHLIGHTS INNOVATIVE SOLUTIONS TO CONTINUE IMPLEMENTATION DURING COVID-19 LOCKDOWNS

Aquity Innovations South Africa Expands Transport Support for Community Health Workers with the use of Tuk Tuks

Nelson Mandela Metro Bay is one of 19 high burden districts that together account for up to 80% of the national TB burden in South Africa. Due to COVID-19 lockdowns and restrictions, people have been unable to access health facilities, which has adversely affected many public health initiatives. TB REACH has funded Aquity Innovations in a unique pilot in this region – a private-public mix that allows individuals with presumptive TB identified by the community to be served by private practitioners. Community Healthcare Workers (CHWs) visit homes to conduct TB screening and collect sputum samples from presumptive persons. Through another funding source, Aquity has been implementing a project targeting paediatric DR-TB care in the same region, involving household visits to children diagnosed with DR-TB using Tuk Tuks hired in partnership with Out and About Logistics to assist with transportation. This allowed for the integration of Aquity’s TB REACH project CHWs to resume the facilitation of community screening and delivery of medication. We applaud Aquity Innovation’s innovative thinking during the COVID-19 pandemic!
WHO’s ENGAGE-TB approach aims to strengthen integrated TB services at the 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 Global TB Programme of WHO has developed a new, fully virtual and highly interactive training on ENGAGE-TB. The new training is a unique learning experience that unpacks the ENGAGE-TB approach and uses a series of interactive exercises to improve stakeholder’s engagement and the use of soft skills for effective communication and negotiation, specifically tailored to the current COVID-19 context.

Three editions of the virtual training were delivered between November and December 2020: two in English and one in French. Each edition consisted of seven 2-hour webinars with live coaching by expert facilitators. A total of 34 participants from 19 TB high burden and priority countries from all WHO Regions benefited from the training, including civil society stakeholders, implementers of community-based TB activities, national TB programmes, consultants, and the WHO Civil Society Task Force on TB.

Participants’ feedback on this first virtual edition of the ENGAGE-TB training was extremely positive. A number of high burden TB countries have subsequently reached out to the ENGAGE-TB Secretariat with requests to support the roll-out of the training to their national stakeholders. WHO is working with its country offices and stakeholders to support these requests.

For more information on the ENGAGE-TB training click here [EN] [FR]. An intro video to the training is available here: https://youtu.be/W8l69-UnARg

If you are interested in the upcoming sessions, please contact: engage-tb@who.int or visit https://www.who.int/activities/engaging-affected-communities-and-civil-society-to-end-tb/

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

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Implementing partners of the Strategic Initiative jointly funded by USAID and The Global Fund