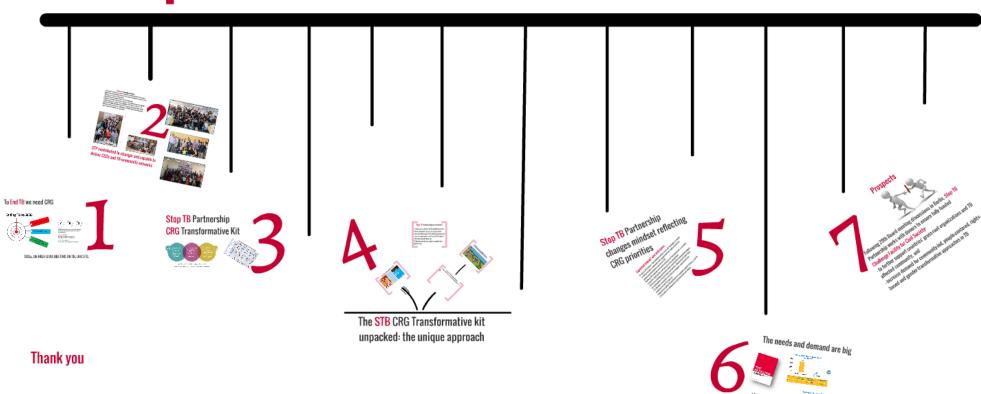
Stop TB Partnership community-led, people-centered, rights-based and gender-transformative responses to end TB

STP Board meeting 30 January 2019, Geneva

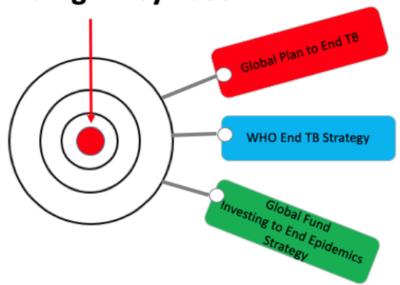


Stop TB CRG transformative kit



To End TB we need CRG

Ending TB by 2035









END TB STRATEGY

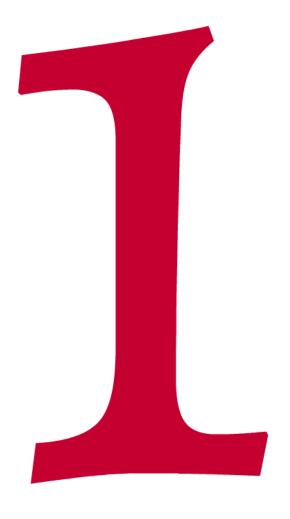
Strong coalitions with civil society and community organizations Protection and promotion of human rights, ethics and equity People Centered Care

GLOBAL PLAN TO END TB

Community and people centered approaches Human Rights and Gender Based Approaches

INVESTING TO END EPIDEMICS

Promote and Protect Human Rights and Gender Equality



SDGs, UN HIGH LEVEL MEETING ON TB, UHC ETC.







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INVESTING TO END EPIDEMICS

Promote and Protect Human Rights and Gender Equality

The Stop TB Partnership contribution

- · In 13 priority countries grass-root TB affected community networks strengthened
- Regional community networks in Asia & Pacific, Africa (including Francophone), EECA, MENA, LAC are at center of TB response
- · Global TB networks capable to deliver: GCTA and TBpeople
- Celebrities, journalists, private sector and other "non-traditional suspects" engaged
- Excellent collaboration, support and engagement of TB affected community, CS activists, NTPs&MOH, the Global Fund CRG, TB, regional and country teams, USAID DC/Country Offices & Backstops, IFRC&National RC, WHO GTB/Regional& Country offices, French 5PC Initiative and many others







STP contributed to stronger and capable to deliver CSOs and TB community networks







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Stop TB Partnership CRG Transformative Kit



partially captured under health systems

- home care





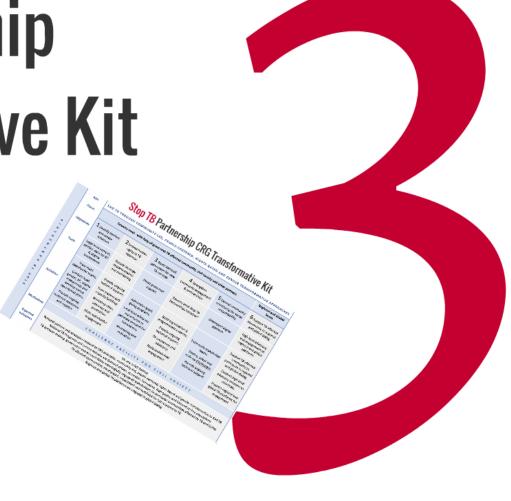




Community systems strengthening approaches need to be adapted to different responses across the spectrum



Source: The Crucial Role of Communities: Strengthening Responses to HIV, Tuberculosis and Malaria. The Global Fund. 2018





Community responses formalized under health systems

- Community health workers
- ► Integrated Community Case Management
- ► Formalized local governance

Community responses partially captured under health systems

- ► Community health education
- ► Health commodity distribution
- ► Adherence support, home care

Community responses outside of the formal health sector



- ► Social determinants (human rights programs, gender norms)
- ► "Under radar" services
- Community-led social accountability



Community systems strengthening approaches need to be adapted to different responses across the spectrum



Source: The Crucial Role of Communities: Strengthening Responses to HIV, Tuberculosis and Malaria. The Global Fund, 2018

Stop TB Partnership CRG Transformative Kit

	Aim	END TB THROUGH COMMUNITY-LED, PEOPLE-CENTERED, RIGHTS-BASED AND GENDER TRANSFORMATIVE APPROACHES						
	Focus	Country	Regional and Global levels					
STOP TB PARTNERSHIP	Objectives	1 Identify barriers and create solutions	2 Embed human rights in TB response	3 Boost demand generation for new TB services	4 Strengthen community engagement & partnerships	5 Expand community monitoring for social accountability	6 Support TB affected community in regional and global dialog	
	Tools	Legal environment, gender, data for KP & stigma assessments	Nairobi Strategy implementation and monitoring	Direct grass-root support	Country level Stop TB Partnerships Initiative*	Onelmpact digital platform	High level advocacy and engagement of regional and global platforms	
	Activities	Train multi- stakeholder teams; Conduct legal, gender, KP, stigma assessments and develop costed operational plans; Provide ongoing technical assistance and support	Provide ongoing technical support; Train trainers and capacity building; Workshop ideas, advocacy and promotion; Multi-stakeholder engagement	Administer grant giving programs; Local level advocacy and activism to generate demand for innovations; Monitoring and evaluation	Build organization & programmatic capacity; Provide ongoing technical support; TB awareness and advocacy; Multi-stakeholder engagement	Train multi-stakeholder teams; Deploy, adapt and scale-up OneImpact; Provide ongoing technical support	Support TB affected community to participate in regional and global dialog; Conduct high level advocacy missions to countries; Support regional and global TB platforms for engagement	
	Mechanism	CHALLENGE FACILITY FOR CIVIL SOCIETY						
	Expected outcomes	No one is left behind National policies and strategies respond to CRG principles: community-led, people-centered, rights-based and gender transformative to End TB National TB Programs and service delivery are demand-driven, accessible, innovative, high quality and focused on key populations TB decision-making, governance and accountability meaningfully engage all stakeholders (in particular communities affected by TB and CSOs) TB affected communities are engaged, capacitated and mobilized for full response to TB Regional and global TB platforms are engaged in global dialog						

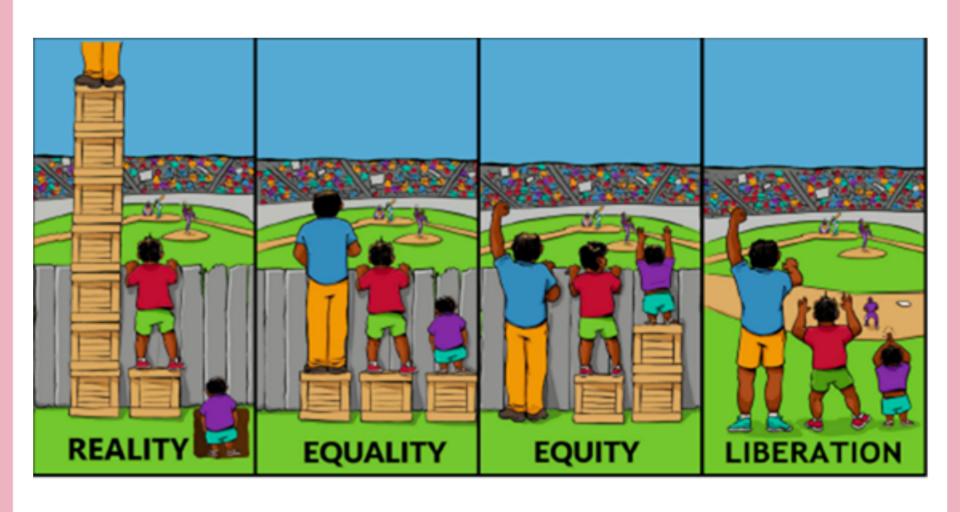


The STB CRG Transformative kit unpacked: the unique approach

Stop TB Partnership cornerstones

- Challenge Facility for Civil Society Mechanism
- Direct support of grass root organizations
- Promote ownership of TB affected communities
- Access large pool of south-based CRG experts
- Maintain coordination role
- Build partnerships at country, regional and global levels

Addressing Barriers



Focus on TB key populations

- know your epidemics for a people centered approach to End TB

People who have INCREASED EXPOSURE

to TB
due to where they
live or work

Prisoners, sex workers, miners, hospital visitors, health care workers and community health workers

PEOPLE WHO:

- + live in urban slums
- live in poorly ventilated or dusty conditions
- + are contacts of TB patients, including children
- work in environments that are overcrowded
- work in hospitals or are health care professionals

People who have
LIMITED
ACCESS TO
QUALITY TB
SERVICES

Migrant workers, women in settings with gender disparity, children, refugees or internally displaced people, illegal miners, and undocumented migrants

PEOPLE WHO:

- + are from tribal populations or indigenous groups
- are homeless
- blive in hard-to-reach areas
- live in homes for the elderly
- have mental or physical disabilities
- face legal barriers to access care
- + are lesbian, gay, bisexual or transgender

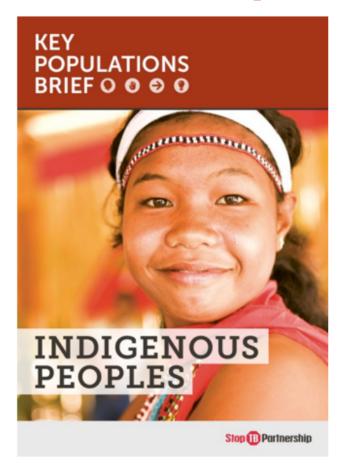
INCREASED RISK

of TB because of biological or behavioural factors that compromise immune function

PEOPLE WHO:

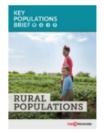
- live with HIV
- + have diabetes or silicosis
- undergo immunosuppressive therapy
- are undernourished
- use tobacco
- suffer from alcohol-use disorders
- inject drugs

Stop TB Partnership Tools

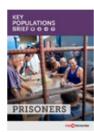






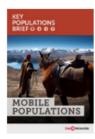




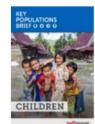




July 2017











Stop TB Partnership changes mindset reflecting CRG priorities





- No one is left behind the national policies, laws and strategies respond to CRG principles: community-led, people-centered, rights-based and gender-transformative responses to TB;
- National TB programs and service delivery are demand-driven, accessible, innovative, high quality and focused on key populations
- TB decision-making, governance and accountability meaningfully engage all stakeholders (in particular communities affected by TB and CSOs)
- TB affected community and CSOs are engaged, capacitated and mobilized for full TB response
- Regional and global TB platforms are engaged in global dialog to End TB
- Cross-sectoral collaboration fully functional and deliver



The needs and demand are big





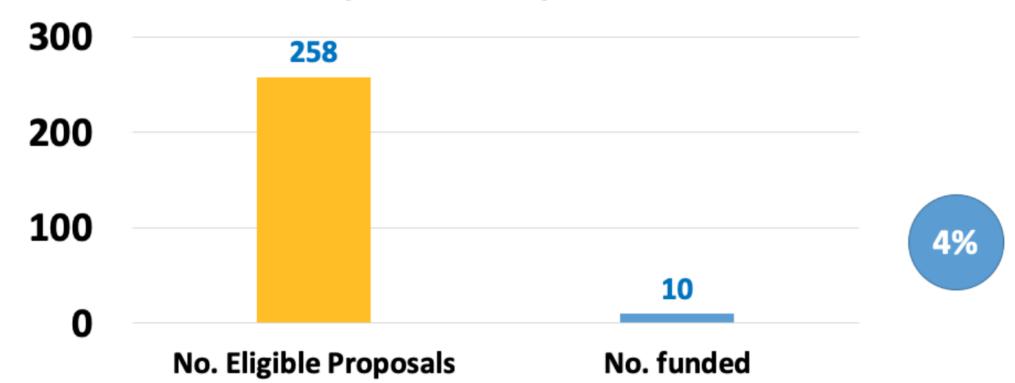






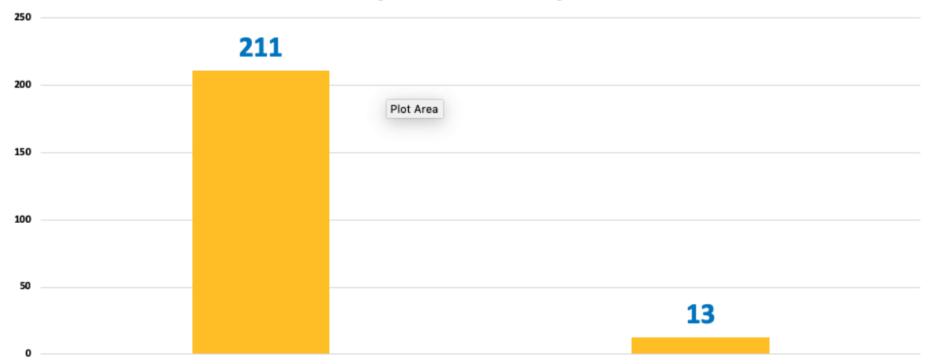


Challenge Facility for Civil Society Round 7 (44 countries)



No. countries	Total number eligible proposals	Total funding requested (approx.)	Funding Available
44	258	US\$ 15 million	US\$ 600,000

Challenge Facility for Civil Society Round 8 (14 countries)



Total No. Eligible Proposals

Funded Proposals

No. countries	Total number eligible proposals	Total funding requested (approx.)	Funding Available
14	211	US\$ 8 million	US\$ 520,000

6%

Prospects



Following 29th Board meeting discussions in Berlin, Stop TB Partnership works with donors to ensure fully funded Challenge Facility for Civil Society:

- to further support countries' grass-root organizations and TB affected community, and
- increase demand for community-led, people-centered, rights-based and gender-transformative approaches in TB

Thank you