



Accelerating progress to end TB

8th SA

TB

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Accelerating progress towards human rights- based responses to TB in South Africa

Track 4: Human rights, Civil Society, Advocacy and TB Policies

Presenter: Pholokgolo Ramothwala

**Authors: Amon, J., Grant, K., Mamphodo, T., Ramothwala, P.,
Ratshefola, A., Motsepe, A. and Tsibolane, Y.**

For more information, please contact:

T: +27 (0) 87 821 1109, E: info@tbconference.co.za / registration@tbconference.co.za

BACKGROUND

Available research shows high levels of TB-related stigma, including self-stigma, and discrimination in South Africa.

The 2021 Stigma Index 2.0 survey in KwaZulu-Natal, Free State and Mpumalanga found that almost 20% of people with TB report verbal abuse and 25% report being the target of gossip.

Other studies found the impact of fear of stigma led to isolation and exclusion, also impacting on psychosocial well-being of people with TB.

Participants in a 2023 study across 3 districts in South Africa reported stigma at community level and within health services, primarily driven by fear of infection. This and other studies have also shown the intersections between HIV- and TB-related stigma.

The study found that TB stigma influenced how people seek care: because of anticipated stigma, people with TB didn't disclose, hid symptoms and medication, and were afraid of being identified (through visits by outreach services or access to health care services) as a person with TB.

However, there is limited research on successful, evidence-informed TB stigma and discrimination strategies to address discrimination.

METHODOLOGY

2023 Global Fund assessed Breaking Down Barriers initiatives looking at **QUALITY, SCALE-UP, SUSTAINABILITY AND IMPACT** of national HIV, TB and human rights programmes.

Desk reviews, key informant interviews with over 50 stakeholders, site visits, discussions of findings at consultations, forums

Standard global methodology looking at (i) whether countries had established enabling national frameworks for rights-based responses; (ii) the scope, scale and quality of programs; (iii) whether programs were comprehensive, integrated and community-led; and (iv) the perceptions of affected populations.

Results were compared with 2017 and 2020 assessments.



RESULTS

The assessment found that although **rights-based barriers to TB services still hinder progress**, there are **signs of advancing efforts** to address TB & human rights

A strengthened national framework for rights-based responses to TB

- National Strategic Plan on HIV, TB and STIs 2023-2028 addresses TB-related stigma and discrimination and prioritizes strengthening TB support groups and networks.
- TB Strategic Plan 2023-2028 addresses TB-related stigma
- National SBCC Strategy for TB promotes rights- and gender-based social behavioural change communications

Increased implementation of rights-based TB programmes

- Stigma and discrimination reduction campaigns are rolling out and have been prioritized in the 2023 TB SBCC Strategy and Action Plan.
- Legal Literacy includes training on TB and human rights
- Health workers are being trained on TB-related human rights issues
- Work within prisons includes interventions on the rights of prisoners with TB
- Community-led monitoring includes monitoring and documenting of rights violations in relation to TB

Better data on TB-related discrimination than in previous assessments

- Stigma Index Studies
- Community-led monitoring data
- Other studies

LESSONS LEARNED

Successful efforts are those that:

Integrate into health programs and community-level interventions

Community-level stigma and discrimination is high

Community-level campaigns to address **intersectional** discrimination (TB, HIV)

Vital to train all health workers **including community health workers**

Address causes

Association with HIV; fear of infection drives stigma and discrimination

Include information on prevention and **transmission**

Manage stereotypes, **prejudices associated with TB**

Address self-stigma and fear of discrimination

Fear of stigma impedes access to health care services

Strengthen **TB support groups**, networks and outreach to **families, communities** to increase support

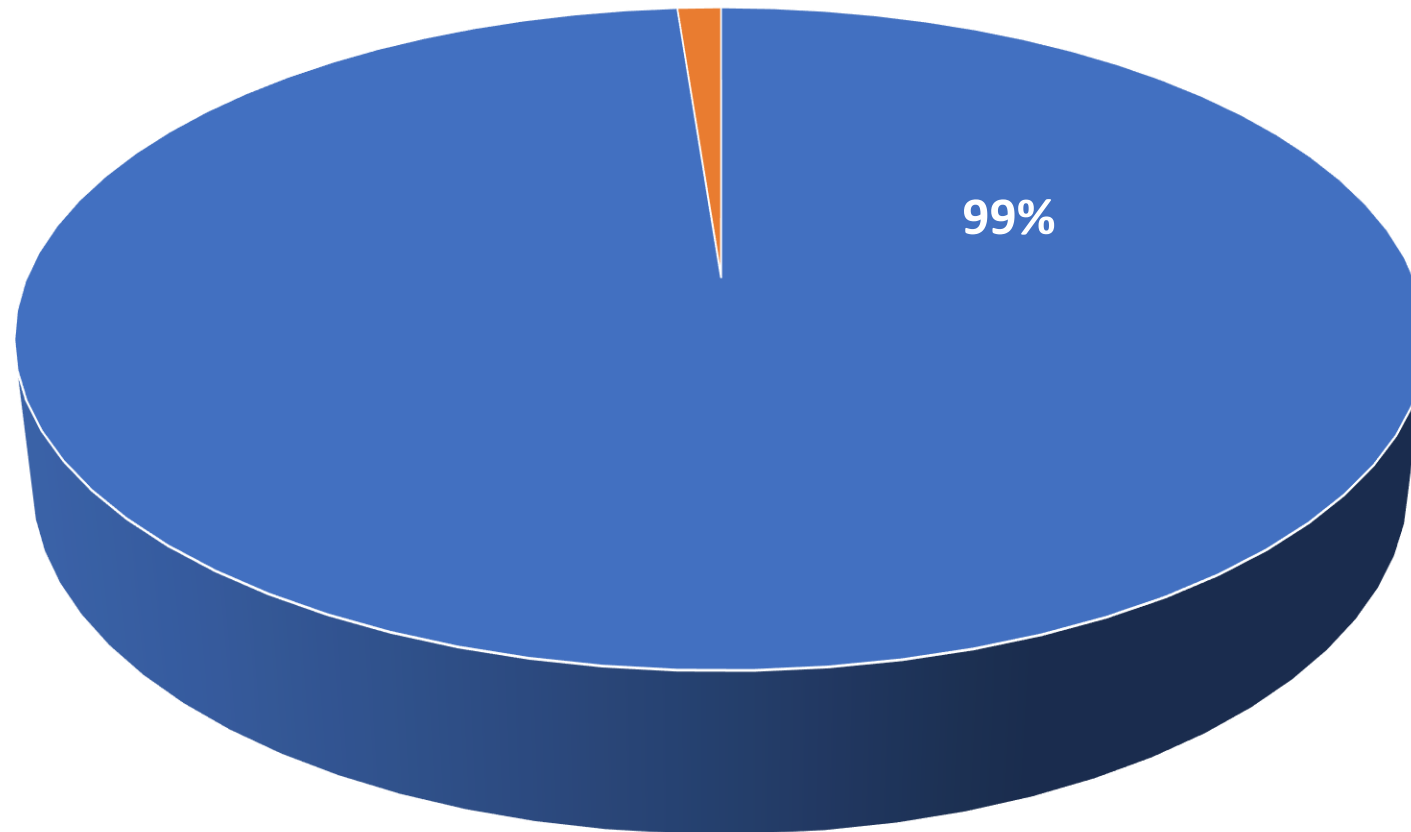
Develop **health policies and mechanisms / legal support** to protect & enforce patients' rights

Challenges remain

- There is limited research on **what makes a successful, evidence-informed TB stigma and discrimination reduction intervention**, to strengthen and inform efforts.
- TB stigma **remains under-prioritized** when integrated within HIV anti-stigma programmes.
 - For instance, stigma and discrimination reduction programmes emphasise HIV-related stigma and discrimination over TB-related issues.
 - Community-led monitoring of human rights violations amongst people living with HIV, people with TB and key populations tend to under-report TB-related rights violations.
- **Successful interventions require partnerships with TB programmes and networks**, yet
 - many TB and human rights programme implementers still lack understanding of, and capacity to implement TB-specific human rights interventions
 - TB support groups and networks are not as prevalent, capacitated, developed as HIV networks

TB-Related Human Rights Violations Reported 1 Apr 23 – 31 Mar 24 (12 months)

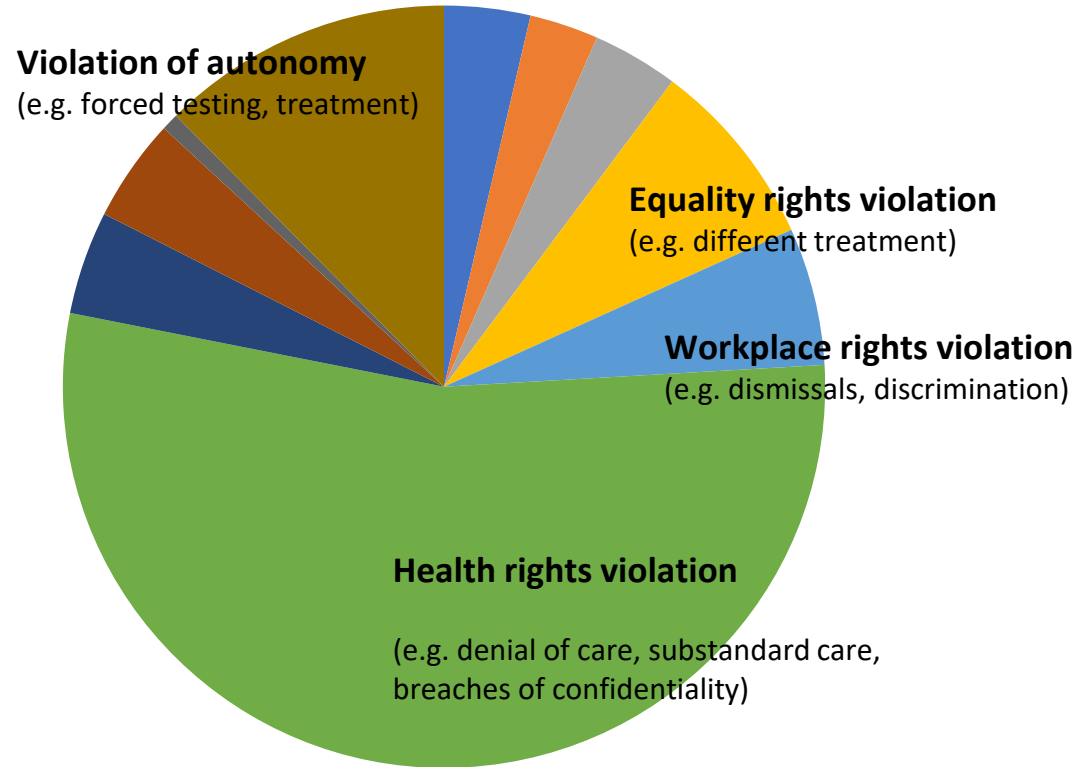
TB-related rights violations are 1% of reported violations against people living with HIV, people with TB, key populations



■ Other violations ■ TB violations

TB-Related Human Rights Violations Reported 1 Apr 23 – 31 Mar 24 (12 months)

Types of Violations



Perpetrators include

Health Workers 60%
Family Members 19%
Community members 15%
Law Enforcers 6%



Conclusions and Recommendations

Strengthened TB & human rights capacity in communities & health sector - amongst HCWs & TB survivors, health, human rights programs, support groups

Stronger partnerships between TB health programmes & human rights programmes

Ongoing assessments to identify the nature, extent, cause and impact of S&D and who affected

Ongoing **monitoring and evaluation** of programmatic responses to understand what works

Strengthened accountability frameworks and services to ensure **enforcement of rights**