

**Vuka! Let's unite towards
a TB-free world!**

9th SA
TB
Conference
8 - 11 June 2026



The effect of intra-departmental and multisectoral collaboration in the mitigation of catastrophic costs of Tuberculosis: An initiative of the Department of Social Development
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Building a Caring Society Together.

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INTRODUCTION AND BACKGROUND

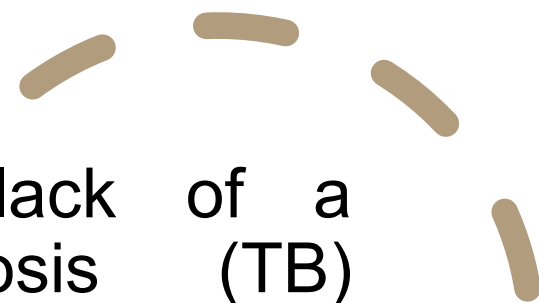
Social and structural determinants such as poverty, undernutrition, substance use, and overcrowding directly influence HIV and broader health outcomes, underscoring the critical role of DSD in the TB response by addressing the social and economic vulnerabilities that drive the epidemic and impede treatment adherence and recovery.



TB places a heavy financial burden on individuals and households, including medical costs (e.g., tests, medicines, consultations), non-medical costs (e.g., food, transport, accommodation), time and income lost to patients and caregivers, often forcing families to deplete assets and adopt coping strategies.



Problem Statement



There has been a lack of a coordinated Tuberculosis (TB) response by the Department of Social Development (DSD). DSD, SASSA, NDA and funded CBOs render social services across the board irrespective of the TB status.

However, this creates a challenge for DSD to respond comprehensively and build a case.



1. UN 17 SDG 2030 (Goal 1- Ending poverty, Goal 2 – Zero hunger and Goal 3- Good health and well-being)
2. World Health Organisation - End TB Strategy
3. The Constitution of South Africa- Chapter 2 –Bill of Rights enshrines the rights of people in SA and affirms the democratic values of human dignity, equality and freedom. The state must respect, protect, promote and fulfil the rights.
4. **Social Assistance Act 13 of 2004 and Regulations**
5. NSP for HIV, AIDS, TB and STIs 2023-2028 : Goals 1,2 and 3
6. TB Strategic Plan 2023-2028 and National TB recovery plan
7. **National Department of Social Development, Strategic Plan, 2025-2030: MTDP Priority 2 –Reduce poverty and tackle the high cost of living**
8. **DSD Comprehensive HIV and AIDS, TB and STI strategy 2023 - 2028**

Coordination Mechanisms

SANAC TWG

- DSD officials participate in the TWGs that are coordinated by SANAC
- DoH (TSU)
- WHO
- CSO
- DCS
- DBE

DSD TB TASK TEAM

- Appointed by DDG: Welfare Services and Families
- HIV and AIDS - Secretariat, coordination and chairing of meetings
- Employee Wellness
- Social Assistance
- Food and Nutrition Coordination
- Substance Use and Disorders

Value of an Intradepartmental and multisectoral collaboration

TB is not only a medical issue but is influenced and driven by social and structural factors. Addressing it effectively requires a collaborative, multisectoral and coordinated approach. Collaboration across health, social services, housing, and correctional services, and CBOs is non-negotiable as it helps to tackle these underlying drivers in an integrated manner.

In this resource-limited environment with reduced funding and government resources, collaboration drives economies of scale, lower costs, wider reach, and greater impact.

By working collaboratively with CBOs, civil society sector enable affected people to access social protection services, food, transport, and psychosocial, rehabilitation for alcohol and drug users, thus reducing treatment interruptions and improving recovery.

Collaboration ensures that no one is left behind in benefiting from the programmes and that the hard-to-reach, vulnerable and hard-to-access populations are identified and reached.

Sustainable impact: Long-term TB control depends on addressing inequality and living conditions, something that cannot be achieved by the single sector alone, but by leveraging community networks, NGOs, and local systems.



Benefits contextualised

- Technical Expertise-
Development of the strategy
 - Financial support
Conferencing and transport
 - Visit to research site
 - Enhancing team work
internally
 - Generation of new knowledge
 - Good model to provinces
 - Human resource support
- 

DSD TB Plan Road Map

A consultative, participatory approach and high-level engagement were used to reach consensus on the development of DSD TB strategy.

The process commenced with an orientation workshop for national and provincial DSD officials , supported by NDOH

Consultation sessions were conducted nationally and in KwaZulu Natal, Western Cape and Eastern Cape provinces from April 2025 to March 2026. DSD, SASSA AND NDA were consulted.

The choice of participants was based on determination of high TB burdened districts, data needs and relevance in implementation of TB programme. In EC, a CNDC was visited post the workshop. TB awareness and health screening took place.

ICROP-Integrated Community Registration Outreach Programme. Spearheaded by Political principals, TB awareness and health screening

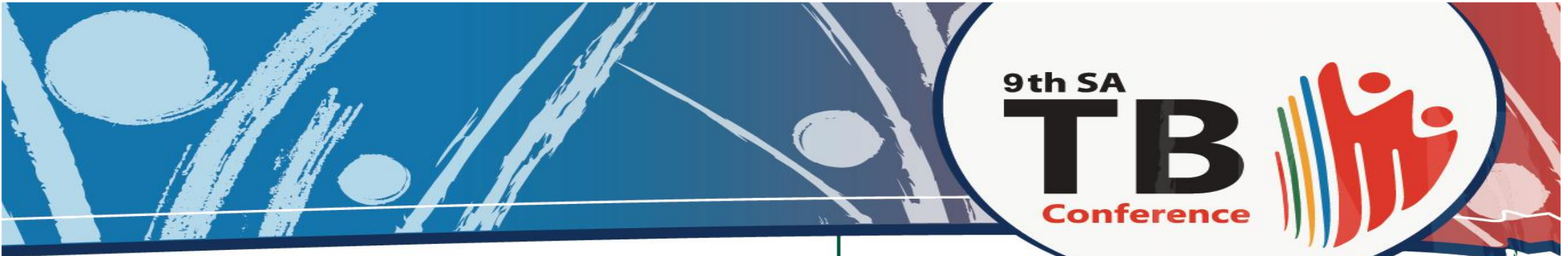
Provincial consultation were made possible by DOH TSU, WHO and Gates Foundation

Way forward

- Gates foundation committed to support DSD with a human resource for coordination role.
- Operational plan for year one of the DSD strategy has been endorsed by management, launch is part of the KPA. Quarterly progress and challenges to be reported at the TB MAF TWG.
- Since TB is Zero budgeted, DSD is intentional in forging partnerships that will assist to implement the TB strategy.
- Utilising DSD facilities for screening, testing, provision of PSS, social protection service and a model of good referral system.
- Ongoing capacity building on basic TB information.

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Date: 10 June 2026

Time: 14:00 -15:30

Venue: Cape Town Hall, Birchwood
Hotel, Gauteng Province



The Deputy Minister of
Department of Social development
will be launching the DSD TB



social development

Department:
Social Development
REPUBLIC OF SOUTH AFRICA



THANK YOU

“Collaboration is multiplication.”

– John C. Maxwell