STRENGTHENING TB RESPONSE: THE CRUCIAL ROLE OF COMMUNITY, RIGHTS, AND GENDER ASPECTS

This brief aims to provide an in-depth understanding of why integrating community, rights, and gender aspects is crucial for an effective tuberculosis (TB) response. It refers to the World Health Organization (WHO) END TB Strategy, the Stop TB Global Plan to End TB, and the 2018 UN High-Level Meeting (UNHLM) on TB Political Declaration. By recognizing and addressing these crucial aspects in the 2023 political declaration on TB, we can strengthen the overall TB response and move closer to achieving global targets.

COMMUNITY ENGAGEMENT

Community engagement plays a central role in the fight against TB, bringing together affected individuals, community leaders, civil society organizations, and healthcare providers. Key aspects of effective community engagement include:

a. **Meaningful involvement**: Meaningful engagement of affected communities is essential for successful TB control and elimination efforts. Communities possess valuable insights into local contexts, cultural practices, and barriers to care. Their active participation enables tailoring of interventions that are more effective, acceptable, and sustainable.

b. **Improved access and adherence**: Community-led responses improve access to TB care and treatment, especially for marginalized populations and those living in remote areas. Community health workers (CHWs) or peer educators can bridge gaps by providing information, support, and treatment adherence counselling, leading to improved outcomes.

c. **Empowerment and ownership**: Engaging communities empowers individuals and fosters ownership of TB programs. By involving affected communities in planning, implementation, and monitoring, they become partners rather than passive recipients of services, resulting in increased program effectiveness, local capacity, and sustainability.

d. **Addressing barriers**: Community-based organizations are rooted within the communities they serve. They have a deep understanding of the local context, including the social, cultural, and economic factors that influence health-seeking behaviors. Their close proximity allows them to build trust and establish strong relationships with community members, which is crucial for overcoming barriers to TB care. They can conduct targeted outreach efforts to identify individuals who may be at risk of or affected by TB, provide social support, assist with transportation or nutrition, and facilitate linkages to other essential services, such as HIV testing and treatment or mental health support.
Integrating gender considerations into TB programs addresses gender inequalities and improves outcomes. Key gender considerations include:

a. **Gender disparities**: Gender influences the experience of TB, with women facing specific challenges that require targeted interventions. These challenges include delayed diagnosis, barriers to accessing care, and the impact of gender roles and responsibilities on treatment adherence.

b. **Gender-responsive approaches**: Gender-responsive interventions tailor TB services to address the specific needs and realities of both women and men. This includes gender-sensitive health promotion, ensuring equitable access to services, and addressing gender-related socio-cultural norms that hinder early diagnosis and treatment-seeking behaviour.

c. **Women-centred care**: TB programs need to provide women-centred care that accounts for their unique health-seeking and carer behaviours, reproductive health concerns, and socio-economic circumstances. This includes integrating TB services with reproductive health services and addressing barriers such as transportation or childcare that may prevent women from accessing care.

Upholding human rights is critical to ensuring an equitable and effective TB response. Key elements of a human rights approach include:

a. **Dignity and equality**: A human rights-based approach recognizes that every individual has the right to health, dignity, and equality. Upholding these principles helps eliminate discrimination and stigma associated with TB, creating an enabling environment for individuals to seek timely diagnosis, treatment, and care.

b. **Non-discrimination**: TB affects individuals from diverse backgrounds, including marginalized groups, prisoners, migrants, and those living in poverty. Integrating human rights principles ensures non-discrimination and equal access to quality TB services for all, irrespective of their socio-economic status, gender, age, ethnicity, or other characteristics.

c. **Privacy and confidentiality**: Protecting individuals' privacy and confidentiality is essential to build trust and encourage TB testing, treatment, and reporting. Ensuring confidentiality can help overcome fears of disclosure, allowing individuals to seek care without the fear of discrimination or social repercussions.

d. **Accountability and remedies**: A human rights framework demands accountability for TB programs, ensuring that policies, resources, and services are aligned with human rights standards. It provides mechanisms for individuals to seek remedies in cases of human rights violations and promotes transparency and good governance in the TB response.
d. **Engaging men and boys:** Men are more susceptible to TB but seek treatment much less than women. Multiple barriers, including stigma and patriarchal norms, contribute to this disparity. Men often face societal pressure to appear strong and may delay seeking care. Targeted efforts are needed to engage men and boys in TB awareness, diagnosis, and treatment, including addressing stigma and promoting health-seeking behaviours.

e. **Gender minorities:** Gender minorities, including transgender and non-binary individuals, face unique challenges in accessing TB services. They may encounter discrimination, stigma, and lack of culturally competent care. It is essential to ensure inclusive and respectful TB services that address the specific needs and rights of gender minorities, including appropriate gender-affirming care, confidentiality, and sensitivity to their lived experiences.

**RELEVANT FRAMEWORKS AND DECLARATIONS**

a. **WHO END TB Strategy:**

The **END TB Strategy**, adopted by the World Health Assembly, provides a roadmap for ending the global TB epidemic. It emphasizes the importance of engaging communities, promoting human rights, and addressing social determinants of TB. The strategy recognizes that strong community, rights, and gender dimensions are critical for achieving its goals.

b. **Stop TB Global Plan to End TB:**

The **Stop TB Partnership's Global Plan** outlines the strategic priorities and actions needed to end the TB epidemic. The plan emphasizes community-based approaches, human rights, and gender-responsive interventions. It highlights the importance of partnerships with affected communities, civil society organizations, and other stakeholders.

c. **2018 UNHLM on TB Political Declaration:**

The **2018 UNHLM on TB Political Declaration** underscored the commitment to accelerate the TB response globally. It also emphasized the importance of community engagement, human rights, and gender equity in TB programs. The declaration called for the meaningful involvement of TB-affected communities in decision-making processes.

**Conclusion:**

Integrating community, rights, and gender aspects into the Political Declaration for the 2023 UNHLM on TB and the global TB response is fundamental to achieving the objectives set forth in the WHO END TB Strategy, Stop TB Global Plan, and the 2018 UNHLM on TB Political Declaration. By actively involving communities, upholding human rights, and addressing gender inequalities, we can build a stronger, more inclusive TB response, ultimately moving closer to a world free from TB. Together, let us prioritize these crucial aspects and work towards a future where TB is eradicated, and no one is left behind.

#2023TBHLM