

Policy Dialogue on Legislative and Policy Measures to Protect the Rights of People Affected by Tuberculosis (TB).



23 April 2023 WORKSHOP REPORT

Table of Contents

Table of Contents.....	2
Background and Rationale	3
Workshop Objectives.....	3
Target groups and Participants.....	3
DIALOGUE METHODOLOGY AND OUTCOMES	4
Methodology.....	4
DIALOGUE PROCEEDINGS	4
Introductions of Participants	4
Welcome Remarks	5
Overview of the National TB response	6
Testimonials	6
TB Legal Frameworks and Human Rights- Global and Regional View	7
TB Legal landscape Analysis- views from the LEA.....	7
Group Work: Enhancing the legal framework for TB control in Zimbabwe: Collaborative recommendations for improved TB response.	7
Way Forward.....	8
Closing Remarks	9
Annexure 1 POLICY DIALOGUE IN PICTURES	10

Background and Rationale

Tuberculosis (TB) continues to pose a significant global health challenge, affecting millions of individuals each year. Although Zimbabwe was removed from the list of 30 TB triple high burdened countries in 2020, it remains double burdened by TB and MDR-TB with approximately 33 000 people recorded to have developed TB in 2022. Beyond its health implications, TB also gives rise to various social and economic issues, including human rights violations, stigma and discrimination, and challenges related to access to healthcare and livelihood.

The multifaceted challenges of TB make it a difficult disease to address clinically. Effective TB response calls for innovative approaches which are tailor-made to meet all the determinants of the disease including the country's legal framework and the socio-economic space.

Following the conclusion of a TB Legal Landscape Analysis and the Community, Right and Gender Assessment, Jointed Hands Welfare Organisation (JHWO) with support from the Stop TB Partnership funded Lawyers Alert regional grant, held a Policy dialogue on legislative and policy measures to protect the rights of people affected by tuberculosis (TB).

Meeting Objectives

- To raise awareness among policy makers, government officials, and civil society organizations about the human rights challenges faced by people affected by TB in Zimbabwe,
- To facilitate dialogue on potential legislative and policy measures aimed at protecting the rights of people affected by TB, including access to healthcare, employment rights, and social protection, and
- To foster collaboration and consensus-building among stakeholders towards the development and implementation of comprehensive policies that uphold the rights of people affected by TB.

Target groups and Participants

The dialogue was targeting members of the Parliament, members of the judiciary, members of the TB Caucus, representatives from civil society organizations, government departments, TB survivors, and members of the media. All targeted sectors were represented during the dialogue except for the Judiciary where a response could not be given despite multiple engagements and follow-ups.

DIALOGUE METHODOLOGY AND OUTCOMES

Methodology

The dialogue was highly engaging and interactive allowing the diverse participants to share their insights and experience around TB, legislature, rights, and related issues. The dialogue was structured to ensure that all participants including the Parliamentarians, understood the impact of TB and the role they can play in improving the discourse in TB response. This was done through presentations from the Ministry of Health and Child Care's National TB and Leprosy Control Program, World Health Organisation-Zimbabwe, Jointed Hands Welfare Organisation and Lawyers Alert which was represented by Brian Citro a consultant. The dialogue was further supported by three testimonials from three TB survivors who shared their experience with TB showing the far-reaching impact of the TB disease beyond clinical spheres. Throughout the day, participants shared their knowledge, dispelling misconceptions even among legal professionals and Parliamentarians. This highlighted the importance of multi-sectoral engagements and dialogue in shaping the TB landscape and improving the lives of people affected by TB.

DIALOGUE PROCEEDINGS

Introductions of Participants

The dialogue was held at Gazania Lodge in Kwekwe starting from 0900-1630Hrs. Participants were given an opportunity to share introductions allowing them to know the composition of the workshop.

Welcome Remarks



Welcome remarks were given by the NTP acting Deputy Director, Dr Fungai Kavenga and the Chairperson of the Parliament Portfolio Committee on Health, Honourable Daniel Molokele. Dr Kavenga, started by acknowledging the presence of the parliamentarians, the Chief Director of Health Services for the Prisons and Correctional Services, representatives of the legal practitioners, civil society organisations, TB survivors, association of miners, and the media for attending the training. In his welcome remarks Dr Kavenga highlighted the importance of collaborative efforts in TB response. He further encouraged the group to take a moment to remember that TB knows no class, gender and above all age.

Similarly, Hon Molokele welcomed the participants emphasising the commitment of the 10th Parliament to work collaboratively with TB stakeholders in the fight against TB.

Overview of the National TB response



The presentation was delivered by Dr Fungai Kavenga, the acting Deputy Director in the Ministry of Health and Child Care, National TB Program. In his presentation, he shared the current TB statistics and the challenges of catastrophic costs experienced by TB patients. He further alluded to the fact that TB is amongst top 5 causes of mortality for the country and the underlying causes behind the epidemic include HIV, Health access, under nutrition especially among children, housing conditions – ventilation, incarceration, old age, cross-border migration, and mining activities among others.

Testimonials

Three TB survivors shared their experiences with TB. Among the TB survivors was a couple from Mutare who had TB at the same time. The couple shared the challenges they faced in fending for their children during their sickness. To that effect, they pleaded with the dialogue participants to lobby for legal frameworks which support safety nets for people with TB. They further highlighted the

challenges of stigma and discrimination they faced in their community as well as in their Church.

The second testimony was given by the Stop TB Partnership Zimbabwe Chairperson, Mr Ronald Rungoyi who is a Drug Resistant TB Survivor. Mr Rungoyi shared his journey elaborating the challenges of stigma within health facilities. He further shared the burden of catastrophic costs and implored policy makers to work collaboratively with the national TB stakeholders to ensure people affected by TB are fully supported and do not suffer any catastrophic cost.

Testimonies from TB survivors gave TB a face and brought reality to the different dynamics around the TB epidemic. This helped to table TB realities and created empathy to act towards ending TB.

TB Legal Frameworks and Human Rights- Global and Regional View

The consultant, Brian Citro gave a presentation on the TB legal frameworks and human rights. His presentation introduced the TB policy dialogue by providing perspectives around legal frameworks and human rights issues from a global view.

TB Legal landscape Analysis- views from the LEA.

The Jointed Hands Welfare Organisation (JHWO) Executive Director presented on the TB Legal Landscape Analysis. The presentation was anchored on the views drawn from the TB legal landscape analysis which was conducted by Lawyers Alert and the Community Rights and Gender (CRG) Assessment which was conducted by JHWO in collaboration with the Ministry of Health and Child Care.

The presentation highlighted policy gaps and proffered recommendations for course correction. This provided the needed foundation and enlightened the participants for dialogue.

Group Work: Enhancing the legal framework for TB control in Zimbabwe: Collaborative recommendations for improved TB response.

Mr Calvin Fambirai, the Stop TB Partnership Zimbabwe Vice Chairperson and Director of the Doctors for Human Rights led the group work session. The group work provided a platform for the participants to share recommendations to enhance the legal framework for TB control in the country.

The following recommendations and actions were proffered:

- Develop a legal framework for increased domestic funding for TB. The Parliament Portfolio Committee (PPC) on Health to come up with a motion for domestic resources for TB,
- Interrogate the Health Fund to find out how much is being collected from the airtime and how it is being utilised as the information is not currently being shared. To this effect, the PPC on Health will write to the finance minister requesting the Health Fund budget report,
- Develop a schedule of motions which will be used by the PPC on Health,
- Apart from motions, the committee will also utilise questions of national importance by inviting Ministers to answer to such questions,
- Formation of a Petition Committee- the following members volunteered to be part of the committee:
 1. The Church- Zimbabwe Council of Churches,
 2. Miners- Association of Miners,
 3. TB survivors- National Network of TB Survivors,
 4. Civil Society Organisations- ACT, STPZ,
 5. Legal- Legal Resources Foundation,
 6. Parliament- Clerk of Parliament PPC on Health.

The committee was assigned to check the role of the National AIDS Council around the National AIDS Fund verifying also what the fund can and cannot fund.

Way Forward

The way forward was led by Mr K. Ndlovu from the NTP. Participants shared way forward points mostly hammering on the need to quickly action the agreed recommendations. Additionally, the PPC on Health requested for a capacity building training to equip them to defend TB aligned policies and legal frameworks in Parliament. As a way forward, the training will be held during the STPZ supported orientation meeting for Parliamentarians.

Closing Remarks



Honourable Tobaiwa, the Member of Parliament for Kwekwe gave closing remarks. In her remarks, Hon. Tobaiwa appreciated the valuable insights which were availed during the policy dialogue. She acknowledged the diversity of partners in the meeting and highlighted the importance of working together for the betterment of communities and ultimately the achievement of the goal to end TB.

Annexure 1 POLICY DIALOGUE IN PICTURES



Hon. Daniel Mlokele sharing insights during the meeting

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23 APRIL 2024 REPORT**



Brian Citro, Consultant during the meeting



Consultant, Brian Citro presenting during the meeting

**POLICY DIALOGUE
23 APRIL 2024 REPORT**



Hon. Susan Matsunga, Member of Parliament for Budiriro sharing during the Policy Dialogue



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23 APRIL 2024 REPORT**

