

CONCEPT NOTE

Nairobi Strategy on TB and Human Rights: Measuring Progress and Planning for the Future Mombasa County, Kenya 9 – 10 August 2018

1.0 Objectives:

1. **Measure progress** made in implementing the Nairobi Strategy on TB and Human Rights;
2. **Develop and finalize a workplan**, and mobilize human and financial resources, to guide the next two years of implementation of the Nairobi Strategy on TB and Human Rights;
3. **Review the draft Patients' Charter for Tuberculosis Care and launch the new Judicial Handbook** on TB, Human Rights and the Law; and
4. **Draft a communique** on the importance of the Nairobi Strategy on TB and Human Rights for submission to the UN HLM on TB to be shared to the Co-Chairs

2.0 Background:

Tuberculosis (TB) remains a critical global health challenge. It ranks as the leading cause of death from an infectious disease, killing more people each year than HIV/AIDS. An estimated 1.8 million people died and 10.4 million people fell ill with TB in 2016. Nearly 80% of the global burden of TB is found in 22 countries, nine countries in Sub-Saharan Africa belong to the 22 high burden countries, and India alone accounts for 27% of the global disease burden.

A human rights-based approach to TB articulates and upholds the rights of people affected by TB, including the rights to life, health, nondiscrimination, privacy, informed consent, housing, food and water. The approach focuses on the social and economic determinants of the disease, addressing stigma, discrimination and environmental conditions. It articulates the domestic and international legal obligations of governments and non-state actors to ensure good quality testing and treatment for TB is available and accessible without discrimination. The approach also aims to create an enabling legal environment for the research and development of new, more effective TB drugs and diagnostics, and to lower the prices of existing drugs, including new medicines for MDR-TB, and advanced diagnostics.

Against this backdrop, on 24 and 25 June 2016, the Kenya Legal and Ethical Issues Network on HIV and AIDS (KELIN), Stop TB Partnership, University of Chicago Law School, and the Judicial Training Institute of Kenya partnered to conduct the Judicial Dialogue on TB, Human Rights and the Law. The Judicial Dialogue was attended by prominent judges and magistrates from the region, TB survivors, anthropologists, and legal, medical and public health experts from across the world. The Judicial Dialogue sensitized judges on the relationship between TB, human rights and the law, and provided them an opportunity to engage directly with people affected by TB.

This Judicial Dialogue also led to the development of a global action plan to promote a human rights-based approach to TB: The **Nairobi Strategy on TB and Human Rights**. The key components of the Nairobi Strategy include:

- (a) **Empowerment and support of networks of people with TB**, TB survivors and broader civil society at global, regional and national levels;
- (b) **Enhancement of judiciary and legal communities' awareness and understanding** of a human rights-based approach to TB; and
- (c) **Expansion of legislators' and policymakers' capacity** to incorporate human rights-based approaches to TB into laws and policies.

3.0 Justification:

It is now almost two years since the development and launch of the Nairobi Strategy on TB and Human Rights. During this time, implementation of this global action plan, with minimal funding, has resulted in tremendous gains in the field of TB and human rights. Notable achievements include:

- i. The [TB, Human Rights and the Law Case Compendium](#), with summaries of legal cases involving TB from more than 20 countries, researched in six languages, was published and disseminated widely;
- ii. TB Legal Environment Assessments, founded on and in promotion of human rights principles, have been conducted and are ongoing in several countries, including [Kenya](#) and Nigeria;
- iii. The Judicial Handbook on TB, Human Rights and the Law has been developed and drafted through an inclusive, ongoing process;
- iv. [Lawyers](#), law enforcement officers and [health care workers](#) have been trained on TB and human rights at national and regional levels;

- v. Initiatives to develop, empower and support networks of people with TB, TB survivors and broader civil society at global, regional and national levels, have been launched; and
- vi. Scholarship and research on TB, human rights and the law has been conducted and published in books and journals.

It is against this backdrop that we propose a high-level stakeholder workshop to: measure progress made in implementing the Nairobi Strategy on TB and Human Rights; to plan and mobilize resources for the next two years of work; and to launch the revised Patients' Charter for Tuberculosis Care and the new Judicial Handbook on TB, Human Rights and the Law. This workshop will provide a critical point of reflection on the past two years and a strategic moment for planning and investment in the next two. Noting that the first ever High Level Meeting on TB will take place in September, this workshop will allow for the participants to draft and finalise a statement on the importance of using a rights based approach to address TB issue. This statement will be submitted to the co-chairs of the high level meeting.

Work and Activities:

1. **Survey and document** progress made in implementing the Nairobi Strategy on TB and Human Rights, conducted by an Independent Consultant;
2. **Develop a draft costed workplan**, with human and financial resource commitments, to guide the next two years of implementation of the Nairobi Strategy on TB and Human Rights to be adopted at the meeting;
3. **Design, print and publish** of the Judicial Handbook on TB, Human Rights and the Law;
4. **Discuss and provide feedback to** the revised Patients' Charter for Tuberculosis Care;
5. **Organize and conduct** high-level stakeholder meeting; and
6. **Draft a communique** for submission to the Co-Chairs of the High Level Meeting on TB

Expected Outcomes:

1. **Sensitization of high-level stakeholders** on promotion of a human rights-based approach to TB through implementation of the Nairobi Strategy on TB and Human Rights;
2. **Finalized, costed workplan**, with human and financial resource commitments, to guide the next two years of implementation of the Nairobi Strategy on TB and Human Rights;
3. **Feedback provided to revised Patients' Charter** for Tuberculosis Care; and

4. **Publication of Judicial Handbook** on TB, Human Rights and the Law.
5. **Submission of a draft communique** on TB and rights to the Co-Chairs of the High Level Panel Meeting

Principal Organizers and Facilitators:

- Stop TB Partnership, Community, Rights and Gender
- Allan Maleche, *Executive Director, KELIN*; Board Member Developing Country NGO Constituency of the Global Fund Board
- Brian Citro, *Assistant Clinical Professor of Law, Northwestern Pritzker School of Law; Technical Assistance Consultant, Stop TB Partnership*
- Timur Abdulaev, *Community Representative, Stop TB Partnership; Board Member, TBpeople; Steering Committee Member, TB Europe Coalition*