



BRINGING CIVIL SOCIETY TOGETHER
TO END THE TUBERCULOSIS EPIDEMIC

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STOP TB
Partnership,
Tajikistan



Secretariat of Coalition "STOP TB Partnership, Tajikistan"
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Spotlight on Tajikistan: TBEC member launching its first-ever social enterprise to fight TB issues in the country!

TB in Tajikistan

In 2016, the TB incidence rate in Tajikistan reached a staggering 60.6 cases per 100 000 people. Compounding this issue is Tajikistan's position as having one of the highest rates of multidrug-resistant tuberculosis (MDR-TB) in the world, with 22 cases for every 100 000 people. Over the last three years, incidence rates for TB and MDR-TB have remained stagnant. This lack of progress runs alongside rising rates of TB/HIV co-infection and number of people diagnosed with extensive drug resistance (XDR-TB). Despite the annual increase in the state budget for TB, up to 85% of overall funding comes from the [Global Fund](#) and other donors. Nevertheless, TB detection and treatment rates remain very low. This is due to a lack of human resources, limited TB prevention and control services, limited access to new medicines, and gaps in provision of second line medicines.

Soon after the collapse of the USSR, Tajikistan was caught in a five-year long civil war between 1992 and 1997. During the conflict and its aftermath, TB prevention and care services faced not only an extreme depletion of available funds for hospital upkeep and drug procurement, but also a mass departure of healthcare staff. TB hospitals and services were left with limited amounts of medicine available, and no staff carrying out prevention, diagnostics and treatment activities. It took until early 2000s, due to support from the Global Fund and other international donors, for Tajikistan not to experience disruptions in delivery and availability of the first-line TB drugs. But the lack of TB drugs and vast practice of disrupted treatment for TB in 1990s fostered an alarming increase in resistance to TB drugs, which can be seen in Tajikistan today.

In 2017 Tajikistan's government has made an effort to address the long-standing issue of staff shortages by increasing the average salary for healthcare professionals working in the TB response. The government has also committed to cover all expenses related to the purchase of first-line TB drugs providing people with TB with free access at the point of use. Furthermore, several TB centres have introduced molecular tests in addition to the existing sputum microscopy tests, which allow MDR-TB diagnostics to take place over a period of a couple days, instead of up to 3 months. Currently, people with drug resistant TB, can receive outpatient treatment from day one. The only exception for in-patient treatment concerns people with advanced level of TB disease who requiring extra medical attention, people who may need extra support not available at home, or repeated cases of drug resistant TB, which likely occurred due to gaps in the previous treatment. In the framework of the "[National Strategic Plan for protection the population from tuberculosis in Tajikistan for 2015-2020](#)", the Ministry of Health and Social



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Protection of Population aims to continue reduction of the number of beds and further decentralisation of TB services.

The Republican Centre of Protection of Population from Tuberculosis (Tajikistan's National TB Control programme), under the Ministry of Health and Social Protection of Population, struggles to address a myriad of issues linked to TB prevention, diagnostics, care and treatment. The TB services often do not have sufficient funding to carry out the activities needed, especially in rural areas. In Tajikistan, for example, if a person is diagnosed with TB, in some regions, the local healthcare centre will not be able to cover expenses related to TB testing of the rest of the family members, including children. One such test costs up to 4 US dollars – a substantial amount in rural Tajikistan. Traditionally, several families live under one roof making it unlikely for the extended family to be able to afford TB testing on their own.

Up to 1 million Tajiks are engaged in seasonal work in Russia and other Central Asian countries. This seasonal migration fuels further issues for TB care. Due to poor housing and living conditions, Tajik migrant workers can often develop active TB. It is common for it to be left untreated due to the high costs of treatment, caused by a lack of coverage under national insurance. On occasion, fear of deportation back to their home country, as a result of their immigration status, can prevent migrant workers from seeking treatment. Furthermore, the seasonality of their work means that in the case of taking the treatment, migrants will most likely interrupt their treatment to return home or to go to work in another country. It is estimated that around one fifth of TB cases are amongst seasonal migrants. Finally, the heavy dependence on international donors for TB treatment raises questions about the long-term sustainability of TB services. For example, in addition to existing 14 [Genexperts](#) several Genexperts will be purchased with the support of the Global Fund, however there is little clarity regarding who or how will the expenses be covered in the long run.

STOP TB Partnership Tajikistan



STOP TB Partnership Tajikistan is an informal network of TB activists, CSOs, health care professionals and government representatives, founded in Dushanbe in 2014. In 2017, the Secretariat of Partnership managed two international projects. The first is a project focused on the identification of advocacy priority TB issues in Tajikistan. The [STOP TB Partnership Challenge Facility for Civil Society](#) supported this project. The second



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project is aimed at increasing capacity of civil society to advocate for effective and efficient TB services and is supported by the Global Fund in the framework of TB Regional EECA Project ([TB-REP](#)). In addition to both projects, the Partnership has developed several initiatives at the local level, aimed at increasing both the sustainability and independence of the Partnership and their services.

The Partnership is able to operate within the existing legislative framework of Tajikistan. In addition to the Law of the Republic of Tajikistan on Volunteering activities, the Ministry of Health and Social Protection of Population has issued an Order to create patient support groups directly linked to observed treatment cabinets across the country. Civil society organisations working on TB have a clear and well-established legal framework within which to plan their activities and events. The Partnership has used this opportunity to create 23 different patient support groups across 14 districts. The patient support groups include doctors, nurses, volunteers and TB survivors. Initially, the majority of patient support groups were funded by donations from TB survivors and their families. The donations allowed regular meetings to be held, with volunteers carrying out case finding, treatment support and follow-up, and also the production of audio, video and print materials that explain what TB is. In some districts, the Partnership organised roundtables with key local decision makers, health care professionals and TB survivors.

During the 2016 General Assembly the long-term financial security of the organisation was secured. A local Tajik entrepreneur, inspired by the work of the Partnership, approached the Secretariat with an offer to support their activities in a sustainable manner. This was matched with a viable and sustainable long-term business plan for a social enterprise that aims to support patient support groups through revenues gained through commercial activity. As the majority of the Dushanbe's population owns at least two cars, a car repair shop seemed like a perfect fit. The entrepreneur agreed to cover the costs of renovation of the shop, the purchase of necessary tools and the hiring of several car mechanics. The profit made after paying the rent and salaries will go directly to cover expenses of the patient support groups – salaries of case managers, expenses for food or medicine for people with TB and their families.



The partnership started a [Facebook page](#), which showcases the groups' activities and lists the funds spent on patient support groups and people with TB, including personal testimonies. Furthermore, TB



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survivors have also been given an opportunity to learn the trade of car repair from the mechanics themselves. In the future, the Partnership aims to use the profit to develop a proper vocational training scheme for TB survivors, covering their transport and food expenses, and even paying a small fee to the trainees, allowing them to re-train as car mechanics. TB survivors, their families, and also government institutions have warmly welcomed the initiative. The Ministry of Health and Social Protection of Population has supported the initiative by sending out official letters to all international organisations and embassies, explaining the state of TB incidence in the country, presenting the initiative and inviting them to contract the repair shop for any further maintenance and repair works for their fleets. The Republican Centre of Protection of Population from Tuberculosis under the Ministry of Health and Social Protection of Population has become the first to sign the servicing contract. Following the letter, several embassies and international organisations such as Agha Khan, Caritas and MSF have visited the repair shop and expressed their interest for further cooperation.



The next steps for the STOP TB Partnership Tajikistan are to register itself as a full-fledged charity and re-register the car repair shop as a social enterprise, and launch similar social enterprises in other regions of Tajikistan. In 2013, the President had an instruction to the local governments in Khatlon region to support TB DOT centres financially via launching new initiatives. This recommendation has opened many doors and encouraged interaction between government officials and the STOP TB Partnership Tajikistan, especially at the local government level. The Secretariat also intends to launch a video, explaining how the social enterprise was funded and run, and how the profit is used to support people with TB in Tajikistan.

The Partnership also aims to work closely with the government and health care professionals to make sure that the move from long-term hospitalisation to quality people-centred care in ambulatory setting happens, whilst taking into account the needs of TB survivors, people with TB and their families. The direct experience in supporting people with TB and their families via patient support groups will enable the direct lived experience of people with TB to engage in advocating for the change needed in Tajikistan and the region to see the end of TB.