

Actions for Life

TOWARDS A WORLD FREE OF TUBERCULOSIS

The launch of the Global Plan to Stop TB 2006–2015 is a pivotal moment in humanity's efforts to address a disease that continues to claim over two million lives each year. Today, we draw a line under the history of a disease that for centuries has raged the world over and look to a future that will systematically eliminate the disease by 2050.

In its scope, the collaborative nature of the Global Plan to Stop TB is unprecedented. As a worldwide movement to accelerate social and political action to stop the spread of TB, the Stop TB Partnership provides the platform for international organizations, countries, donors (public and private sector), governmental and nongovernmental organizations, and individuals to contribute to a collective and concerted campaign to stop TB.

The Global Plan to Stop TB clearly sets out the resources needed for the actions to achieve the Stop TB Partnership's goals.

These are Actions for Life: Towards a World Free of TB.

The Global Plan to Stop TB framework

The Global Plan to Stop TB is divided into three sections:

Part I: Strategic directions

Part II: Global and regional scenarios for TB control 2006–2015

Part III: The Stop TB Partnership actions to achieve the goals

PART I: STRATEGIC DIRECTIONS

Part I sets out the Stop TB Partnership's strategic directions for 2006–2015 based on recent achievements and the current global TB situation. The Global Plan to Stop TB provides a vision of what can be achieved if we rise to the challenges of implementing the Global Plan. Part I describes the Partnership's approach to key cross-cutting issues: strengthening health systems, addressing TB and poverty, addressing TB and gender, and TB in children. There is also a summary of planned achievements, resource needs and impact.

PART II: GLOBAL AND REGIONAL SCENARIOS FOR TB CONTROL 2006–2015

Each of the eight TB epidemiological regions covered in the Global Plan faces unique challenges. Part II summarizes the activities planned for each of the regions bearing a high burden of TB. The expected impact and costs of the planned activities are based on an ambitious but realistic scenario. Two regions – Africa and Eastern Europe – face particular challenges: HIV-related TB in Africa and drug-resistant TB in Eastern Europe. Part II also describes what would be needed to overcome these challenges and accelerate progress towards the Partnership's targets.

PART III: PARTNERSHIP ACTIONS TO ACHIEVE THE GOALS

The Stop TB Working Groups are responsible for Partnership actions to achieve the plan's goals by 2015 and to lay the foundations for eliminating TB by 2050. Part III of the Global Plan provides summaries of the strategic plans for 2006–2015 for each of the seven Working Groups and for the Stop TB Partnership Secretariat. These plans set out each Working Group's strategic vision, objectives, planned activities, expected impact and costs. In each case, the milestones set are a means of monitoring progress in implementing the strategic plan.

AS PART OF THE GLOBAL PLAN TO STOP TB, 10 KEY ACTIONS HAVE BEEN IDENTIFIED, WHICH ARE AT THE CORE OF A SUCCESSFUL IMPLEMENTATION OF THE PLAN OVER ITS LIFETIME AND BEYOND TO 2050.



Act

This Global Plan is a call for action: to all countries to fully implement the tasks set out in the Global Plan and to mobilize sufficient domestic and external resources to make this happen; to civil society to demand access to quality TB care and the fruits of research and development; to community groups to support patients to come forward for diagnosis and to complete their treatment.

These are Actions for Life: Towards a World Free of TB.



Treat

Access to quality diagnosis and treatment is a human right for all who have TB. Over the 10 years of the Global Plan, about 50 million people will be treated for TB under the Stop TB Strategy. Since TB is spread from person to person, protecting the community from TB depends on ensuring effective treatment of individuals with the disease.

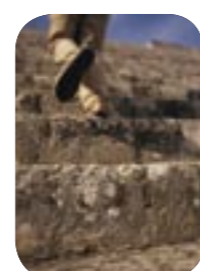
Treatment of TB saves lives and protects communities.



Reach

TB represents a global threat to health. Full implementation of the Global Plan will expand the reach of quality TB care towards all patients wherever they live irrespective of gender, age, socio-economic group or type of TB. To ensure all TB patients have access to quality care, the Stop TB Partnership will reach out to a wide range of partners.

In reaching out to all those who have a role to play to stop TB, the reach extends to communities blighted by TB and thus touches millions of lives.



Achieve

In terms of reaching targets, full funding (US\$ 56 billion) and implementation of the Global Plan would result in achievement of the Millennium Development Goal relevant to TB. It would also result in global achievement of the Partnership's 2015 targets to halve prevalence and death rates from the 1990 baseline.

Achieving the Partnership's targets for 2015 is a step towards the goal of TB elimination by 2050.



Collaborate

This Global Plan is the embodiment of collaboration involving the efforts of the just over 400 Partners that make up the Stop TB Partnership. Expanding this collaboration is crucial to the success of the implementation of the Global Plan. Effective and dynamic collaboration requires understanding and insight into areas beyond our own special areas of interest.

The success of the Global Plan depends on the collaborative efforts of all Partners.



Commit

Building on the progress in TB control thus far, the Global Plan sets out a commitment to implement a new, ambitious strategy to Stop TB. The commitment to successfully carrying out the Global Plan implies a commitment to mobilize resources, expand our efforts and sustain activities over the long term.

Global TB control is a marathon, not a sprint – the targets in this Global Plan for 2015 are a commitment to the long-term goal of TB elimination by 2050.



Advocate

Everybody involved in creating, developing and delivering the Global Plan must act as an advocate to ensure that TB features prominently on the global political and health agenda. People with TB and communities affected by TB who are empowered to speak out will be potent advocates for change.

Sustained advocacy will help persuade national governments and donors to fulfil their commitment to stop TB by investing in the Global Plan.



Invest

Implementing the Global Plan requires an investment by many partners—an investment in time and effort. The Global Plan also requires many partners to invest financial resources. The total cost of realizing the Global Plan is US\$ 56 billion over 10 years. Past experience indicates that a financial investment to stop TB is a good investment—one that yields results.

Investing in the Global Plan brings better TB control, makes healthier communities and reduces poverty.



Innovate

The Global Plan encompasses innovative methods of expanding access to quality TB care. Until recently, TB as a global health issue suffered from a lack of investment in the development of innovative tools to stop TB. The Global Plan encompasses the innovation of research and development in making available new, improved tools to stop TB.

Innovation is the key to progress, through maximizing the benefit of existing tools and promoting the development of new tools.



Hope

The revitalization of global efforts to stop TB since the early 1990s has restored a sense of hope. The actions set out in the Global Plan to Stop TB will provide hope for the millions of people suffering and dying from TB, and hope for future generations that our actions will spare them from the ravages of this disease.

This hope is embodied in the Global Plan to Stop TB's Actions for Life: Towards a World Free of Tuberculosis.

Planned achievements

OF THE GLOBAL PLAN TO STOP TB 2006 – 2015

The ambition and significance of the Global Plan to Stop TB are brought into sharp relief when highlighting the planned achievements. These achievements are not “hopeful projections”, but realizable goals based on the work already undertaken within the TB community, plus accurate forecasts of innovation in diagnostics, vaccines and drugs, and the funding needed to implement the Global Plan.

Full implementation of the Global Plan would represent an enormous achievement in progress towards TB elimination.

Full implementation of the Global Plan to Stop TB 2006–2015 will:

- save approximately 14 million lives;
- treat about 50 million people, including some 800 000 patients with multidrug-resistant TB (MDR-TB);
- expand equitable access to quality TB diagnosis and treatment for all patients;
- provide antiretroviral treatment to around three million patients who have both TB and HIV (TB/HIV);
- introduce, in 2010, the first new TB drug for 40 years and, in 2015, a new short TB regimen (of one to two months);
- by 2010, enable rapid, sensitive and inexpensive detection of active TB with «point of care» diagnostics; and
- by 2015, develop a new, safe, effective and affordable vaccine, which will be available with potential for significant impact on TB control in later years.

The total cost of the Global Plan to Stop TB over its 10-year period is US\$ 56 billion, of which US\$ 47 billion are for implementation of currently available interventions and US\$ 9 billion are for research and development.

In terms of reaching targets, full funding (US\$ 56 billion) and implementation of the Global Plan would result in:

- the global achievement of the Millennium Development Goal: «to have halted by 2015, and begun to reverse the incidence» of TB;
- the global achievement of the Partnership's 2015 targets to halve TB prevalence and death rates from a 1990 baseline; and
- the achievement of enormous progress in all regions over the period of the Global Plan 2006–2015 with prevalence and death rates halved, or close to halved.

THE GLOBAL PLAN
TO STOP TB
2006 - 2015

Actions for Life

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www.stoptb.org

Stop TB Partnership

