

Global Plan Update

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Chair, Writing Committee

Virtual Stop TB BOD Meeting

September 28, 2021

Why is a new Global Plan needed?




REACHING
THE
UNITED NATIONS
TB TARGETS
31/12/2022

THE PARADIGM SHIFT →

Global Plan to End TB: 2018–2022

United Nations A/73/L.4

 **General Assembly** Distr.: Limited
3 October 2018
Original: English

Seventy-third session
Agenda item 129
Global health and foreign policy

Draft resolution submitted by the President of the General Assembly

Political declaration of the high-level meeting of the General Assembly on the fight against tuberculosis

The General Assembly
Adopts the following political declaration approved by the high-level meeting of the General Assembly on the fight against tuberculosis on 26 September 2018:

Political declaration of the high-level meeting of the General Assembly on the fight against tuberculosis

United to end tuberculosis: an urgent global response to a global epidemic

53. Also request the Secretary-General, with the support of the World Health Organization, to provide a progress report in 2020 on global and national progress, across sectors, in accelerating efforts to achieve agreed tuberculosis goals within the context of achieving the 2030 Agenda for Sustainable Development, including on the progress and implementation of the present declaration towards agreed tuberculosis goals at the national, regional and global levels, which will serve to inform preparations for a comprehensive review by Heads of State and Government at a high-level meeting in 2023.

8 Year Plan to 2030

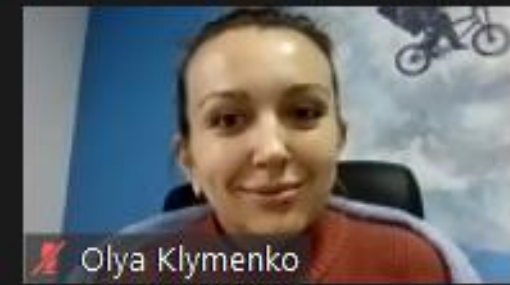
Timeline for development of the Global Plan 2023-2030 (as of 21st September 2021)

	2021								2022						
	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7
Global Plan								1st Draft	2nd Draft		3rd Draft	Proof Reading	Design & Layout Final Draft	Printing	Translations
Board					✓ 28-30									✓ Approval	
Task Force Meeting (Monthly)		✓ 24-25	✓ 21	✓ 26	✓ 21	✓ 13-14	✓ 23	✓ 15-16	✓	✓	✓				
Modeling and Costing Work	✓	✓	✓	✓	✓	✓	✓	✓							
Virtual Consultation Meetings (3)							✓ 1 st & 3 rd week								
New Tool Working Group					✓	✓	✓	✓							
Online Consultation	✓	✓							✓	✓					
Glossary					✓	✓									

GF Investment Case Development: Q1-Q4 2021

Task Force Membership

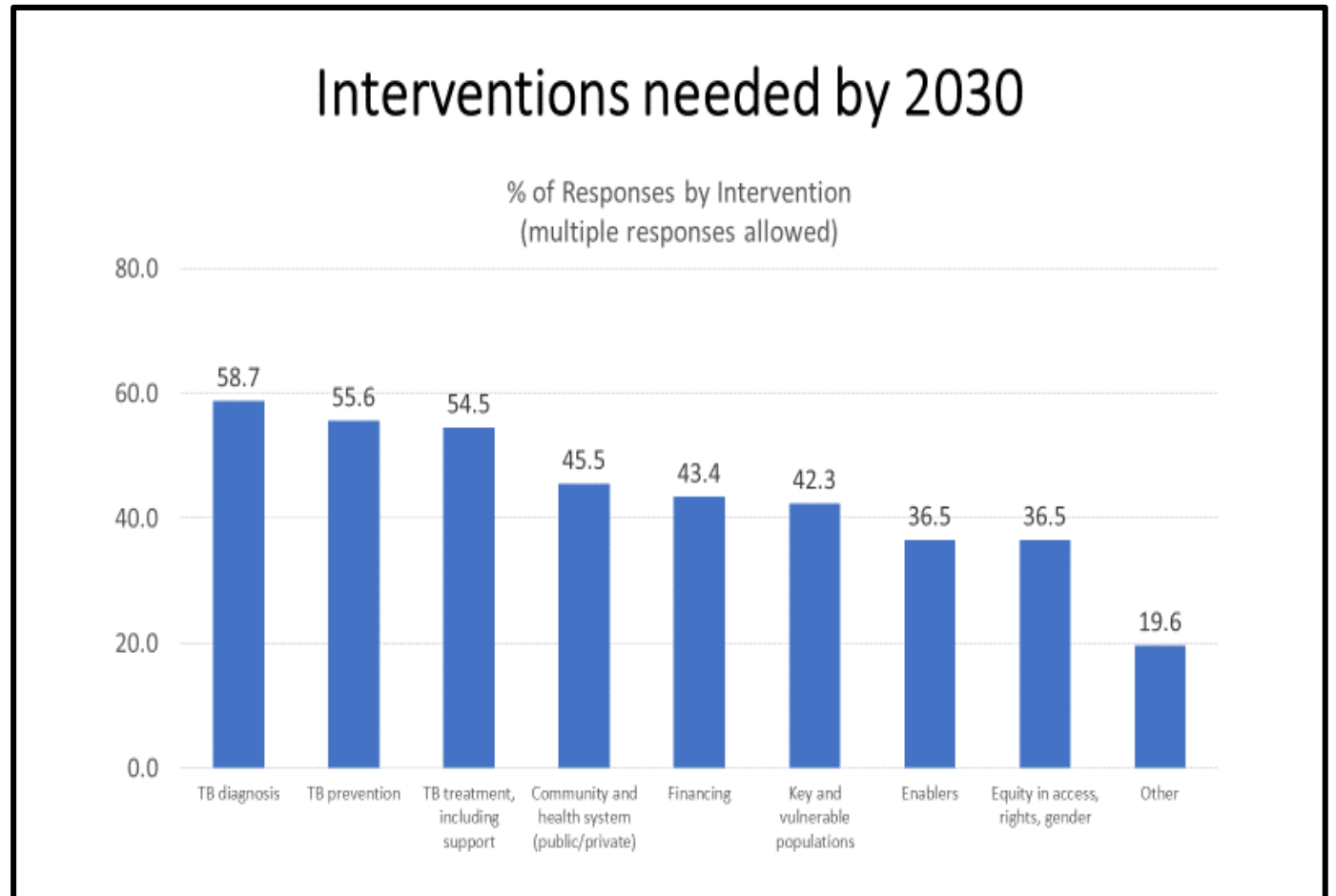
- Countries affected by TB: India, Mozambique, Philippines, Uzbekistan
- 3 Communities affected by TB/TB survivors: Zambia, Cambodia, Ukraine plus alternates
- Multilateral organizations: WHO, Global Fund
- Modelers and Costers
- New Tools Working Group
- Donors (USAID)
- Private Sector: Private Sector Constituency and Friends for Int TB Relief
- 2 Health Economists



Bertrand Kamp...

Online Public Consultation, May-June 21

- 56 countries; 189 responses
- GP contributed to work: 76%
- TB can end by 2030: 52%
- Lessons learned from COVID-19
- TB vaccine by 2025: 43%
 - Pre-clinical pipeline
 - Need primary/prevent progression/therapeutic vaccines
 - Prepare groundwork for access



Priority Topics

- Costing in conjunction with Global Fund deadline 12/21
- Modeling
 - supplementary scenarios for 3-4 countries/regions: India/Indonesia, Kenya, EECA
- Key themes: ACF, PT, subclinical disease, people-centered approach, post-TB life, key vulnerable populations
- New tools: particularly vaccines, digital tools
- Pandemic preparedness
- Country insights: India, Philippines, Mozambique, Uzbekistan

Global Plan Draft Structure (July 2021)

Executive Summary

Chapter 1: Introduction

Chapter 2: What is needed to be on track to reach the targets

Chapter 3: TB care

Chapter 4: TB prevention

Chapter 5: Key Stakeholders: Communities, and the Private Sector

Chapter 6: Key vulnerable populations, Rights, Gender & Stigma

Chapter 7: PPR, Universal Health Coverage and Socioeconomic Action in TB

Chapter 8: New tools

Annexes: Costing & modeling methods; Investment packages by country setting

Drafted with advocacy and investment perspective and style

Virtual Consultations November 2021

FIGURE 2.6: NINE COUNTRY SETTINGS

- 1 **EASTERN EUROPEAN AND CENTRAL ASIAN SETTINGS** that have a high proportion of drug-resistant TB and a hospital-based care delivery system
- 2 **SOUTHERN AND CENTRAL AFRICAN SETTINGS** where HIV and mining are key drivers of the epidemic
- 3 **AFRICAN SETTINGS** with moderate to high HIV where mining is not a significant issue
- 4 **SETTINGS WITH SEVERELY UNDER-RESOURCED HEALTH SYSTEMS** or country settings with challenging operating environments (COE)
- 5 **SETTINGS WITH A HIGH TO MODERATE BURDEN OF TB** with a large proportion in private sector care
- 6 **MIDDLE-INCOME COUNTRY SETTINGS** with a moderate TB burden
- 7 **INDIA SETTING**
- 8 **CHINA SETTING**
- 9 **LOW-BURDEN SETTINGS** and country settings on the verge of eliminating TB

Collapse to 6 settings

- 1 E. Eur/Central Asia
- 2+3 Africa
- 4 Challenging Oper. Env
- 5,6,7,8 Asia
- 5,6,7,8 Latin America
- 9 Low-burden & donors

Simultaneous translations in French, Spanish, Portuguese, Russian

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