



TB CS and TB Affected Community

Consultation on post 2021 Global AIDS Strategy

TB remains the biggest killer of PLHIV. Prevention, screening, diagnosis and treatment of TB among PLHIV is therefore a priority for both HIV and TB responses.

We must ensure that TB/HIV priorities are well represented in the new global HIV response – in terms of strategy, governance, implementation and accountability.

In the last 4 years the United Nations High Level Meetings (UNHLM) for HIV/AIDS, TB and Universal Health Coverage were held.

These three political declarations all contain commitments related to TB and HIV coinfection: to reduce TB related deaths among PLHIV; ensuring TB preventative therapy for PLHIV; to overcoming barriers to access TB and HIV services, including relating to stigma and discrimination; and the importance of including experiences of hidden, hard to reach and/or criminalized populations through meaningful community engagement. The HIV/AIDS political declaration also recognizes the TB 90 90 90 Global Plan targets demonstrating the strong high-level commitments to jointly combatting TB/HIV.

The Stop TB Partnership Global Plan to End TB 2018-2022 also includes all these high-level TB/HIV commitments. In 2021, the Global Plan 2022-2030 will be developed, aiming to further strengthen responses to end TB and TB/HIV. Read more on the Global Plan to End TB here:

http://www.stoptb.org/assets/documents/global/plan/GPR_2018-2022_Digital.pdf

With less than 10 years to go to reach our common goal of ending AIDS and TB by 2030, UNAIDS has been tasked by the Programme Coordinating Board (PCB) to develop the next global AIDS strategy. The strategy will build on the significant gains already made and will accelerate the pace of action—it will be ambitious, visionary, and evidence-informed.

The new global AIDS strategy will serve as a road map for the world to end AIDS as a public health threat by 2030, guiding key stakeholders to overcome the challenges and to ensure effective country-led AIDS responses. The new strategy, with new global targets for 2025 and resource needs estimates, will shape the next United Nations General Assembly High-Level Meeting on Ending AIDS and its political declaration (as well as subsequent political declarations relating to TB and TB/HIV)

The development of the next strategy will be data-driven and consultative, involving UNAIDS' staff, the Cosponsors, civil society, people living with and affected by HIV, young people, faith institutions, ministers of health, finance and gender and parliamentarians, scientists, donors and the private sector. UNAIDS has invited Stop TB to contribute to this process.

Therefore, we need to hear your voices, as TB affected community and TB civil society to inform our inputs.

You can get further background on the Global AIDS Strategy here:

https://www.unaids.org/en/Global_AIDS_strategy



Suggested areas for prioritization from TB community at large (for discussion)

Prevention: In the context of HIV Strategy, prevention of HIV should also include prevention of TB/HIV. Linkages to the UNHLM TB targets on TB preventative therapy among PLHIV is one important shared target (6 million PLHIV to receive TPT by 2022) – 100% coverage of all eligible PLHIV and reporting on commencement and completion of TPT. In addition, promotion of airborne infection protection/prevention measures (for TB and COVID) in health settings utilized by PLHIV.

Screening and Testing: Screening and testing for TB for among PLHIV and TB/HIV Key populations at every possible opportunity, using the best tools available. For PLHIV, appropriate use of LAM, Xpert/Trunat, X-rays and DST for DR-TB. Also, looking forward, ensuring reference to new TB diagnostics that are in the pipeline but are likely available during the strategy period.

Data: Monitoring of TB mortality among PLHIV, linked to the UNHLM HIV indicator of reducing TB deaths among PLHIV; and, enhancing data collection pertaining to PLHIV who have active TB and identify as key populations; taking steps to realizing TB/HIV data in real time, as is already progressing in India.

Barriers to an enabling environment: Consideration of and investment in nuanced legal, gender, stigma (and other related social barriers) and economic barriers to accessing TB services, particularly among key populations and marginalized/criminalised groups. Barriers to access to TB can be different to HIV barriers and this needs great levels of understanding. Also, risks to enabling environment and progressive legal, social and economic structures, which we have seen wound back in recent times, needs significant re-commitment. In addition, in understanding these challenges, community led monitoring initiatives that explore availability, accessibility, acceptability and quality of TB/HIV services has great potential for scale up.

Funding: The current funding landscapes for TB, HIV and the development sector are uncertain. There will be a need to leverage opportunities to strengthen TB/HIV responses through COVID responses, while to strengthen and scale up investments from donors, including the Global Fund, in priority areas. National HIV responses must also ensure to budget for TB preventative therapy among PLHIV.

COVID, TB & HIV Advocacy and Recovery Plans: There is potential for joint TB/HIV high level advocacy in multilateral forums (UNHLMs, G20 etc), heads of state, mayors and governors of cities to advance the prioritization of TB/HIV responses. In addition, the impact of COVID on TB/HIV programs has been significant (note the modelling), and there is a need to get TB/HIV responses back on track.

Partnerships & Synergy: At the global level, a closer strategic relationship between Stop TB Partnership and UNAIDS in terms of strategy, implementation and advocacy.

Stop TB Partnership will soon commence development of the Global Plan to End TB 2022-2030 and we will ensure that there will be full complementarity and alignment between the two strategies.

Do you agree/disagree? What else would you add? What is most important to you and the community you represent?

Please take 5 minutes to complete the Survey Monkey consultation by 11 September 2020:
<https://www.surveymonkey.com/r/P9CFGKV>