

World TB Day, the start of a five year campaign



History of World TB Day

- ▷ World Tuberculosis Day, held each year on 24 March, is intended to promote awareness, knowledge, and motivation for action against tuberculosis worldwide.
- ▷ Its origin goes back to the 1982 celebration of the centenary of Koch's discovery. Among the commemorative ceremonies and events organised by governments and NGOs, encouraged by the International Union Against Tuberculosis (IUAT) and the World Health Organization (WHO), one of the IUAT's member associations, the Tuberculosis Association of Mali, Africa, suggested that, like World Health Day (later followed by World No-Smoking Day and International AIDS Day), an International Tuberculosis Day should be established. This proposal was later approved by the IUAT Council, and has since been commemorated jointly by the IUATLD, other NGOs and the WHO.

Past years' themes included:

- ▷ 1999: *Stop TB, use DOTS*, focusing on DOTS success stories
- ▷ 2000: *Forging new partnerships to Stop TB*
- ▷ 2001: *DOTS, TB cure for All*, focusing on the human rights approach to Stop TB.

A call to expand the DOTS strategy

Improving health is a concrete, measurable way of reducing poverty and inequity, at both country and global level. Investments in health are investments in human potential. Tackling the primary diseases of poverty is a way of putting billions of dollars back into the national economies of poorer countries.

The aims of 2002's theme:

- ▷ Emphasise the link between TB and poverty. TB is the main cause of avoidable death in poor countries. It is estimated that only 1 in 4 TB cases receives DOTS treatment.
- ▷ Increase resources for country plans to stop TB. DOTS expansion is critical if we are to reach global TB targets for 2005 and if we are to attack poverty head on. 17 of the 22 high TB burden countries are low-income countries.

World TB Day 24 March 2002 Stop TB, fight poverty

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- ▷ Raise awareness among political leaders, decision-makers and opinion leaders around the world about the implications of TB, especially on the economy, and the fact that there is no excuse for inaction in the face of an available, cost-effective cure.
- ▷ Mobilise TB sufferers and vulnerable groups to demand greater access to treatment, thereby enabling them to become productive members of their society.

“Stop TB, fight poverty”: the start of a five year campaign

*In 2002, the Stop TB partnership is launching a five year campaign focusing the world's attention on reaching specific targets, namely, **by 2005:***

- ▶ **to detect 70% of people with infectious TB**
- ▶ **and to ensure that 85% of those detected are successfully treated.**

During the campaign on 24 March, we urge participants (governments, non-governmental organisations etc.) in the fight against TB to ask themselves the following questions:

- ▷ What is last year's detection rate for people with infectious TB in our country?
- ▷ What is the rate of treatment success among those detected?
- ▷ Are we on target to meet our country's 2005 goals?
- ▷ What progress and failure should be highlighted during the day and throughout the year?
- ▷ What potential solutions are available?
- ▷ How can we put these in place?

If these questions are answered and countries which identify that they have a poor TB control situation act now, we can fight TB effectively. This will help poor countries and poor families to take steps out of poverty and save lives.

- 1- *Global Tuberculosis Control, summary*, WHO 2002.
- 2- *Global Plan to Stop TB*, Stop TB Partnership, Oct. 2001.
- 3- *The Economic impacts of Tuberculosis*, WHO, Amsterdam Ministerial Summit on TB, March 2000.
- 4- *DOTS Expansion report*, WHO, Oct. 2001.
- 5- *TB and Sustainable Development, The Stop TB Initiative 2000 Report*, Amsterdam Summit.
- 6- *STB Advocacy and Communication Strategy*, Jan. 2001.
- 7- *Winthertur Massive Effort against Diseases of Poverty*, publication, Fall 2001.
- 8- *Global DOTS Expansion programs and funding gaps report*, WHO, Fall 2001
- 9- *DOTS Expansion and funding gaps report*, WHO, Nov 1-4, 2001, IUATLD World Congress, Paris.
- 10- *Global TB Drug Facility brochure*.
- 11- *50/50 Towards a TB Free Future*, Report for the Stop TB Partners' Forum meeting, Oct. 2001.
- 12- *Stop TB Partners' Forum meeting*, Washington DC, Oct. 2001.
- 13- *World Bank's involvement and writings on TB*, from the World Bank's web site: www.worldbank.org.
- 14- *World Development Report 2000/2001: Attacking poverty*, World Bank.
- 15- *Highlights of World TB Day 2001*, Stop TB & IUATLD, Fall 2001.
- 16- *Macroeconomics and Health, Commission report*, commissioned by WHO's Executive Director G.H. Brundtland, J. Sachs, Dec. 2001.
- 17- *Global TB/HIV Working Group report and teleconference*, Dec. 2001.
- 18- *TB Advocacy and Communication Strategy (TACS)*, draft, Stop TB partnership, Dec. 2001.
- 19- *Washington Commitment Declaration*, Stop TB Partners' Forum, Washington, DC, Oct. 2001.
- 20- *IUATLD World Congress, presentation and abstracts*, Nov. 1-4, 2001.
- 21- *Potential Economic Benefits of the DOTS Strategy in India*, WHO publication.
- 22- *World Economic Forum's Global Health Initiative*, meeting, Dec. 9, 2001.
- 23- *Health and Development Initiative India, A Not-For-Profit Organization*, Dr. Dinesh Kumar, www.healthinitiative.org.
- 24- *Doctors without Borders, TB related activities*, www.msf.org.
- 25- *Results, NGO, activities against TB*, www.results.org.
- 26- *UNGASS declaration launching GFATM*, June 2001.
- 27- *Global Tuberculosis Control*, WHO report 2001.
- 28- *Bulletin von Medicus Mundi Schweiz Nr. 83, Dec., Kampf der Tuberkulose: A multi-sectoral approach to reducing tuberculosis prevalence*, 2001.
- 29- *International Conference AIDS-INDIA report (TB&HIV section)*, University of Chennai, India, Dec. 2001.
- 30- *Opening Statement by Malawi's Vice President, Justin Malewezi at a GFATM Consultation*, Malawi, 2001.
- 31- *IMF/World Bank PRSP Comprehensive Review*, Fall 2001.
- 32- *Living with TB, a socioanthropological study of TB in two high risk areas of Lima: San Cosme and El Agustino*, published by Visna, Peru Health Ministry, USAID, 2000.
- 33- *Strategies for an Expanded and Comprehensive Response*, P. Lamptey, Family Health International, Jan. 2001.
- 34- *Declaration of State of Emergency Concerning Tuberculosis*, declared by Sohei Miyashita, Minister of Health and Welfare, July 26, 1999.



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