

## Preface

Tuberculosis has been with us for too long. An epidemic that should belong to the past is still increasing globally. Despite excellent progress in expanding the DOTS strategy, the global TB incidence rate continues to grow by 1% each year. Despite the availability of affordable, effective treatment, the annual toll of 9 million new TB cases and nearly 2 million TB deaths worldwide represents an intolerable burden of human suffering, and an unacceptable barrier to socioeconomic development.

The challenges reach far into economic, societal and health infrastructure issues. The response in the Plan reflects this. TB continues to be found where there is poverty, where people are living in overcrowded and unsanitary environments, and where health is already under siege from malnutrition, co-infection with HIV, and other debilitating conditions.

Progress in TB prevention and control is integrally linked to health development overall. This recognition is a mainspring of the Plan. In the process of working towards the Millennium Development target in 2015 of having «halted ... and begun to reverse the incidence of TB», the Partnership will be contributing to a range of other important MDG goals, particularly those related to poverty reduction, gender, provision of access to affordable essential drugs in developing countries, making available the benefits of new technologies in cooperation with the private sector, and partnership.

The consensus reached on the directions for the new plan demonstrates the strength of successful partnership. That clarity of purpose, combined with a firm commitment to share responsibility for achieving the long-term goals, is an essential resource for the implementation of the Plan. It makes full use of the present evidence-based scientific tools, and sets up the research requirements and timetable for improved and affordable diagnostic tools, drugs and vaccines.

The aim is to provide access to quality diagnosis and treatment for all those in need, and ultimately, to provide safe and reliable prevention through immunization. By 2010, new drugs are envisaged that are effective against antimicrobial resistance, with shorter, more feasible treatment courses, and that are compatible with antiretroviral treatment against HIV. At the same time, simple, sensitive and rapid diagnostic tests that can be used by rural health workers should be available. The first in a series of new, safe, and effective vaccines is expected by 2015.

In the 2005 World Health Assembly resolution on sustainable financing for TB prevention and control (WHA 58.14) Member States articulated their understanding that sufficient programme financing - both domestic and external - must be maintained.

The Partnership has demonstrated its excellent work in putting together the global plan for the next decade. The powerful combination of a productive partnership and effective strategies offers a secure platform for sustainable resourcing and progress to Stop TB.



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