



The Stop TB Strategy

The World Health Organization has developed this strategy, which builds on the success of DOTS and addresses unmet needs.

Vision

A world free of TB

Goal

To dramatically reduce the global burden of TB by 2015 in line with the Millennium Development Goals and the Stop TB Partnership targets.

Objectives

- Achieve universal access to high-quality diagnosis and patient-centred treatment.
- Reduce the human suffering and socio-economic burden associated with TB.
- Protect poor and vulnerable populations from TB, TB/HIV and multidrug-resistant TB.
- Support development of new tools and enable their timely and effective use.

Targets

- MDG 6, Target 8 – Halt and begin to reverse the incidence of TB by 2015.
- Targets linked to the MDGs and endorsed by the Stop TB Partnership:
 - by 2005 – detect at least 70% of new sputum smear-positive cases and cure at least 85% of these cases;
 - by 2015 – reduce TB prevalence and death rates by 50% relative to 1990;
 - by 2050 – eliminate TB as a public health problem (1 case per million population).

Components of the Strategy and implementation approaches

1. Pursue high-quality DOTS expansion and enhancement

- Political commitment with increased and sustained financing
- Case detection through quality-assured bacteriology
- Standardized treatment with supervision and patient support
- An effective drug supply and management system
- Monitoring and evaluation system and impact measurement.

2. Address TB/HIV, MDR-TB and other challenges

- Implement TB/HIV collaborative activities;
- Prevent and control multidrug-resistant TB;
- Address prisoners, refugees and other high-risk groups and special situations.

3. Contribute to health system strengthening

- Actively participate in efforts to improve system-wide policy, human resources, financing, management service delivery and information systems
- Share innovations and strengthen systems including the Practical Approach to Lung Health (PAL)
- Adapt innovations from other fields.

4. Engage all care providers

- Public-Public and Public-Private Mix (PPM) approaches
- International Standards for TB Care (ISTC).

5. Empower people with TB and communities

- Advocacy, communication and social mobilization
- Community participation in TB care
- Patients' Charter for Tuberculosis Care.

6. Enable and promote research

- Programme-based operational research
- Research to develop new diagnostics, drugs and vaccines.