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## **HIV-TB Global Leaders' Forum**

**Monday 9 June 2008, from 15:00 to 18:00**

**Conference Room 2, UN New York**

### **Context**

The HIV pandemic presents a massive challenge to the global control of TB at all levels, particularly in view of the emergence of drug resistant TB. At least one-third of the 33.2 million people living with HIV (PLHIV) worldwide are also infected with TB and it is the leading cause of death among PLHIV in Africa and a major cause of death elsewhere.

PLHIV have a much increased risk of developing TB disease i.e. a 5-15% risk of developing TB every year compared to non HIV infected persons who have a less than 10% risk over their lifetime. The TB community is on its way to achieving the MDG goal of halting and reversing the incidence of TB, however, the dual threat of HIV/TB could undermine this effort, especially on the African continent.

### **Practical Information**

**The first "HIV-TB Global Leaders' Forum", to be held in Conference Room 2 at the UN Building in New York, on Monday 9 June 2008, from 15:00 to 18:00.**

The event is being organized in conjunction with, among others, the United Nations, the World Health Organization, the Stop TB Partnership, the Global Fund, the World Bank and UNAIDS.

- The "HIV-TB Global Leaders' Forum" will bring together Heads of State, senior political and UN officials with leaders of civil society, media and the private sector. We hope this will be a galvanizing action in the achievement of the 2015 targets for tuberculosis with measurable impact on individual health and well-being as well as global health security.
- The 3-hour draft agenda will provide an opportunity to review the global pandemic and to outline a common strategy to scale up efforts to systematically address HIV-TB co-infection. It is anticipated that the outcome of discussions will influence deliberations during the 2008 United Nations General Assembly Special Session on HIV/AIDS (10-11 June), which will review progress and address challenges to universal access.

### **Further Background**

Particular emphasis must be given to detecting, curing and preventing TB. Scaling up implementation of those activities (3Is - intensified case finding, infection control and isoniazid preventive therapy -IPT) that reduce the burden of TB in PLHIV

**14<sup>th</sup> Stop TB Partnership Coordinating Board Meeting  
06-07 May 2008 - Cairo, Egypt**



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must be a priority for all those providing care for people affected by HIV and TB. These interventions mitigate the impact of TB on PLHIV and are essential. Ensuring their delivery in the context of the emergence of extensively drug-resistant TB and the associated high mortality is fundamental. Screening all people living with HIV for TB in order to provide them with TB prevention therapy or treatment must be emphasized as a top priority.

There is also the problem of antiquated diagnostics and old drugs for TB. There are huge unmet research needs and much more investment and political will and commercial interest is needed for a comprehensive research agenda to address these challenges.

However, there have been positive steps recently, there is increased funding for HIV/TB through mechanisms such as the Global Fund. We now have resources available to respond to this dual threat but political commitment and leadership is urgently needed.

## **Call to Action**

Participants will be called upon to demonstrate leadership and commitment to responding to the deadly duality of HIV/TB through the following actions:

1. Endorse TB prevention diagnosis, and treatment within the context of universal access and include TB prevention in all national HIV action frameworks and strategies
2. Prevent unnecessary deaths. Include the goal of reducing TB mortality as part of the indicators in national target setting processes
3. Promote the right of PLHIV to be able to attend health services without fear of contracting TB
4. Develop and implement strategies to involve communities affected by HIV in the TB response
5. Strengthen health systems to be able to effectively respond to the need
6. Promote the development of new tools - drugs, diagnostics and a vaccine that work in the context of co-infection.

It is anticipated that the meeting will close with a call to Member States to assess their response to these HIV-TB leadership challenges and report on plans to scale up where necessary at the Stop TB Partnership Partners' Forum in Rio de Janeiro, Brazil in March 2009



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The Stop TB Partnership, housed at WHO, will function as the Secretariat for this meeting. To confirm the attendance of your delegation or for further information, the Secretariat is at your disposal. [bakerl@who.int](mailto:bakerl@who.int). Tel. + 41 22 791 2879