TB REACH

About TB REACH

- Stop TB Partnership initiative to promote **early and increased** TB case detection using **innovative** approaches
  - Supported by a 5-Year CIDA Grant to the Partnership
- Funds projects up to US$ 1 million for 1 year
  - Funding is fast-track
- Open to all possible applicants
  - Govt. as well as non-govt. and civil society organizations
- Multiple applications possible from countries
  - NTP support letter required

TB REACH Wave-1

- Wave -1 funding announced in Jan 2010
- 192 applications received
- 30 approved for funding (May- 2010)
  - 10 Govt. (including 7 NTP)
  - 20 non-Govt (CSOs)
  - Budget varies from US$ 150,000 to 1 million
  - Total $18.4 million committed
  - Aim at detecting and treating over 40,000 additional smear positive cases

TB REACH - Wave 2

- Launch: 1st December 2010
- Open for applications up to 28 Feb 2011
- PRC Meeting: Starting last week of March 2011
- Presentation to the CB, April 2011
- Clarifications process – May 2011
- Grant Agreement signed – June-July 2011

Country eligibility

Main changes

- More flexible country income criteria
  - Per capita GNI ≤ US$2000
  - Sub-national poor population/poverty pockets
    - in countries with per capita GNI US$2000 to 3000
    - in the remaining HBCs
  - Guidance to applicants on "poverty pockets"
- Dropping of CDR as a criteria

TB REACH Eligible Countries

TB REACH Wave-2 Eligible Countries

Countries with per capita GNI US$2000, or less
(source: World Bank, 2009 data, revised 9 July 2010)

	Region	Country	GNI per capita (WB 2009 data)	TB high burden country (HBC)
1	EMR	Afghanistan	370	HBC
2	SEA	Bangladesh	590	HBC
3	AFR	Benin	750	
4	AMR	Bolivia	1,630	
5	AFR	Burkina Faso	510	
6	AFR	Burundi	150	
7	WPR	Cambodia	650	HBC
8	AFR	Cameroon	1,170	
9	AFR	Central African Republic	450	
10	AFR	Chad	620	
11	AFR	Comoros	870	
12	AFR	Congo, Rep.	1,830	
13	AFR	Côte d'Ivoire	1,060	
14	EMR	Djibouti	1,280	
15	SEA	DPR Korea	j (estimated to be low income, i.e. $995, or less)	
16	AFR	DR Congo	160	HBC
17	AFR	Eritrea	300	
18	AFR	Ethiopia	330	HBC
19	AFR	Gambia, The	440	
20	AFR	Ghana	700	
21	AFR	Guinea	370	
22	AFR	Guinea-Bissau	510	
23	AMR	Guyana	1,450	
24	AMR	Haiti	j (estimated to be low income, i.e. $995, or less)	
25	AMR	Honduras	1,820	
26	SEA	India	1,170	HBC
27	AFR	Kenya	770	HBC
28	WPR	Kiribati	1,890	
29	EUR	Kyrgyzstan	870	
30	WPR	Lao PDR	880	
31	AFR	Lesotho	1,020	
32	AFR	Liberia	160	
33	AFR	Madagascar	420	
34	AFR	Malawi	280	
35	AFR	Mali	680	
36	AFR	Mauritania	960	
37	WPR	Mongolia	1,630	
38	AFR	Mozambique	440	HBC
39	SEA	Myanmar	j (estimated to be low income, i.e. $995, or less)	HBC
40	SEA	Nepal	440	
41	AMR	Nicaragua	1,010	
42	AFR	Niger	340	
43	AFR	Nigeria	1,140	HBC
44	EMR	Pakistan	1,020	HBC
45	WPR	Papua New Guinea	1,180	
46	WPR	Philippines	1,790	HBC
47	EUR	Republic of Moldova	1,590	
48	AFR	Rwanda	460	
49	AFR	São Tomé and Principe	1,140	

TB REACH Wave-2 Eligible Countries

Countries with per capita GNI US$2000, or less
(source: World Bank, 2009 data, revised 9 July 2010)

	Region	Country	GNI per capita (WB 2009 data)	TB high burden country (HBC)
50	AFR	Senegal	1,040	
51	AFR	Sierra Leone	340	
52	WPR	Solomon Islands	910	
53	EMR	Somalia	j (estimated to be low income, i.e. $995, or less)	
54	SEA	Sri Lanka	1,990	
55	EMR	Sudan	1,230	
56	EUR	Tajikistan	700	
57	AFR	Togo	440	
58	AFR	Uganda	460	HBC
59	AFR	UR Tanzania	500	HBC
60	EUR	Uzbekistan	1,100	
61	WPR	Viet Nam	1,010	HBC
62	EMR	West Bank and Ghaza Strip	k (estimated to be lower middle income ($996 to $3945))	
63	EMR	Yemen, Rep.	1,060	
64	AFR	Zambia	970	
65	AFR	Zimbabwe	j (estimated to be low income, i.e. $995, or less)	HBC

Note 1: Additionally countries that are not in this list can apply for sub-national populations/areas that are poor (poverty pockets) with justification provided in the application form. Countries** that have a **per capita GNI between US$2000** and **US$3000** are especially requested to consider this approach.

	**	
SEA	Bhutan	
SEA	Democratic Republic of Timor-Leste	
EMR	Egypt	
EUR	Georgia	
AMR	Guatemala	
SEA	Indonesia	HBC
EMR	Iraq	
WPR	Micronesia (Fed States of)	
EMR	Morocco	
AMR	Paraguay	
WPR	Samoa	
AFR	Swaziland	
EMR	Syrian Arab Republic	
EUR	Ukraine	
WPR	Vanuatu	

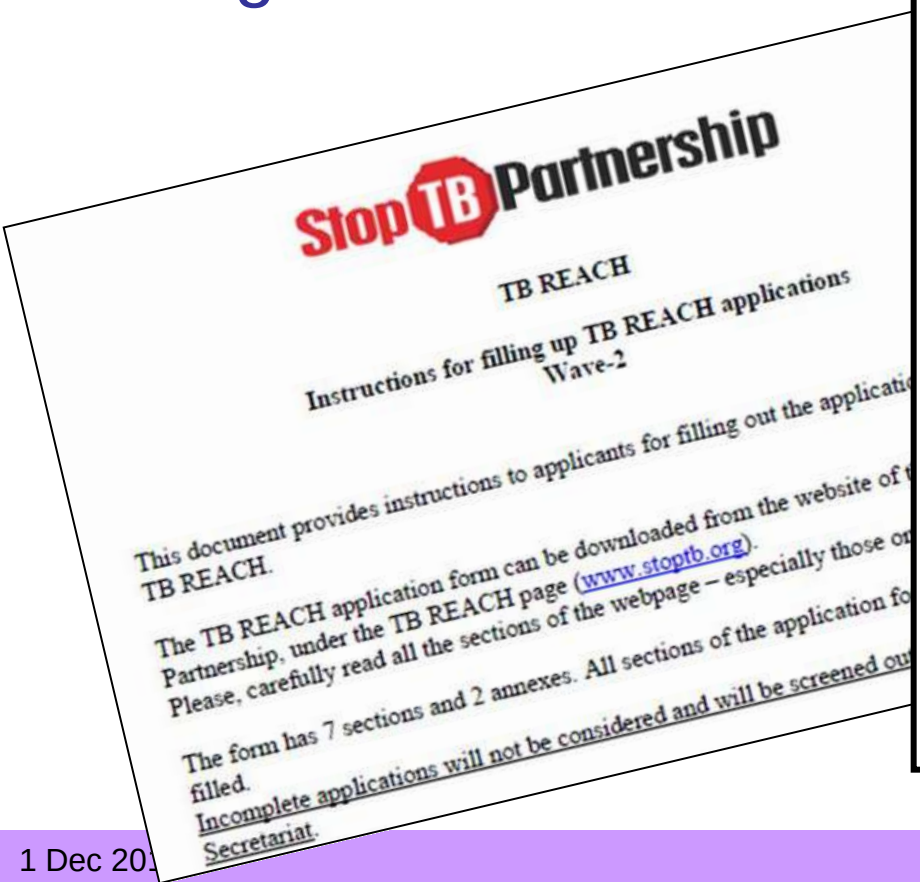
Note 2: Applicants from the **remaining TB high burden countries**** and who are planning to target sub-national/ provincial/ district populations that are demonstrated to be economically poor (poverty pockets), with low TB case detection and limited access to TB services, may consult with the TB REACH secretariat for confirming their eligibility prior to applying.

	****	
AMR	Brazil	HBC
WPR	China	HBC
EUR	Russian Federation	HBC
AFR	South Africa	HBC
SEA	Thailand	HBC

Requirements for applications..1

- Who can apply?
  - CSOs, NTPs, NAPs, govt. and non-govt. organizations, affected communities and any STOP TB Partner
- Multiple applications per country possible, but one applicant cannot submit more than one proposal per country.
- Applicants to target vulnerable population, population living in poor areas/poverty pockets, population with "limited access to healthcare"
- Applications from outside of NTP requires a letter of endorsement from the NTP and a statement on the role of the NTP in the project.
  - In exceptional situations, if the applicant is not able to obtain a response from the NTP, then the applicant needs to submit supporting evidence that the project was discussed and submitted to the NTP in a timely manner.
- Budget
  - Up to US$ 1 million for one year
    - Budgets less than $200,000 will require justification
  - To ensure sustainability - the per capita cost (budget per additional estimated bacteriologically-positive TB case detected and treated successfully) must be as low as possible.
  - Applicant should have in-country presence and no support will be provided for establishing new office

Standard application form can be downloaded from the TB REACH website along with instructions



Stop TB Partnership

TB REACH

Instructions for filling up TB REACH applications
Wave-2

This document provides instructions to applicants for filling out the applicati
TB REACH.

The TB REACH application form can be downloaded from the website of t
Partnership, under the TB REACH page (www.stoptb.org).
Please, carefully read all the sections of the webpage – especially those or

The form has 7 sections and 2 annexes. All sections of the application fo
filled.
Incomplete applications will not be considered and will be screened ou
Secretariat.

Stop TB Partnership

TB REACH
– FINANCING FACILITY FOR INNOVATIVE TB CASE DETECTION

APPLICATION FORM

Country				
Title of the proposed project				
Applicant				
Application Type	TB REACH - Wave 2			
Application amount (in US$)	US$			
Proposed duration	Start (month and year):		End (month and year):	

IMPORTANT: Applicants should carefully read the Instructions for TB REACH Applications before completing this application form and follow the instructions as they respond to each section.

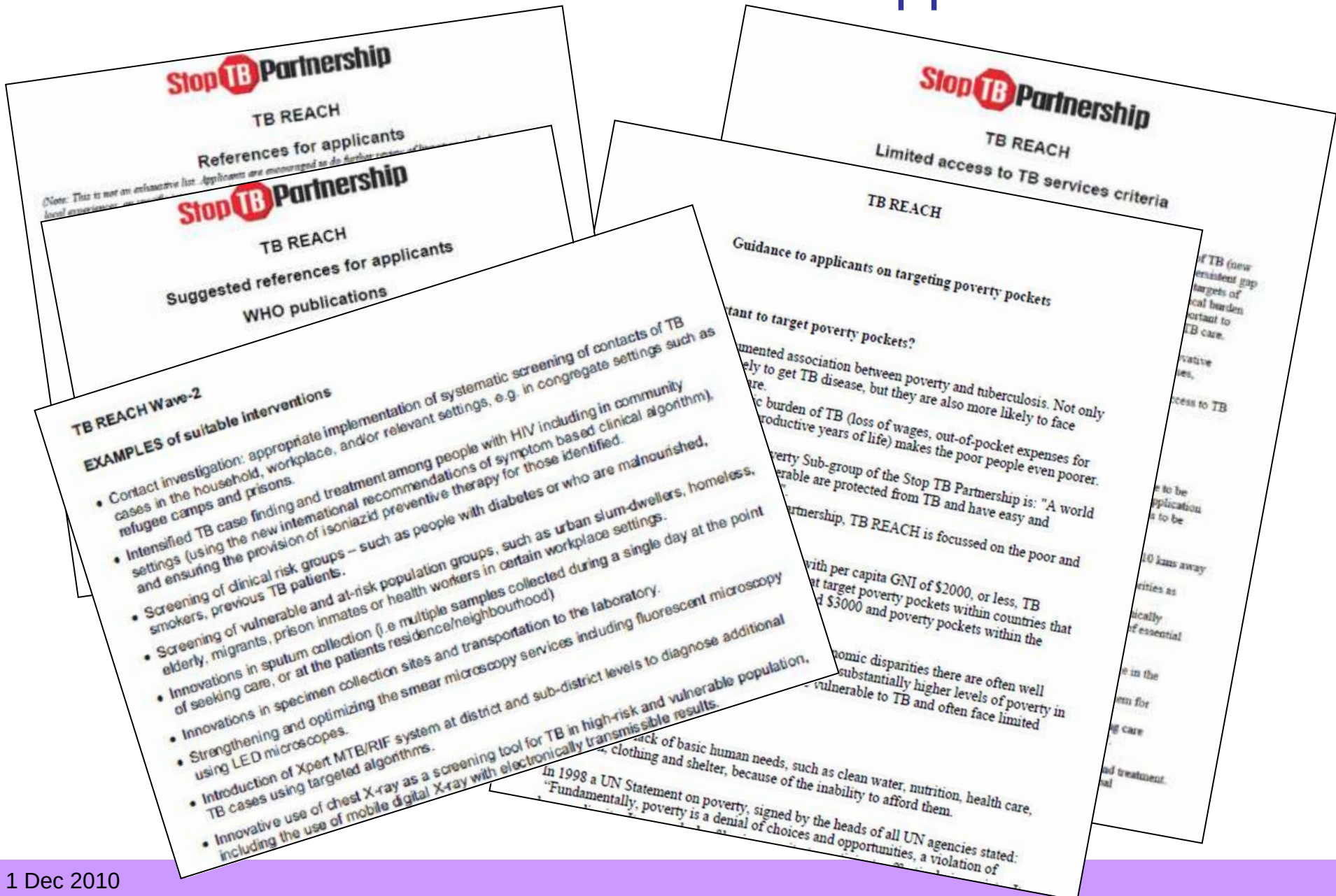
Filled in application should be sent to tbreach@who.int with the subject line "TB REACH application". In case email is not possible send by surface mail to:
Edin Karahasanovic, Stop TB Partnership Secretariat, World Health Organization, WHO/STB/TBP, 20 Avenue Appia, CH-1211 Geneva 27, Switzerland

Deadline for receipt of application: 28 February 2011
5pm (Central European Time)

Wave-2: Suggested Interventions

- List of suggested interventions - not intended to be exhaustive
  - Local innovative interventions and approaches possible
- Guidance documents and tools to be provided on the web site

Documents and tools for applicants



IMPORTANT

- TB REACH Wave 2 should be used to obtain the evidence needed to scale up

- Funding for treatment of drug resistant TB (including drug procurement and distribution) is beyond the scope of TB REACH initiative

GOOD LUCK !