

BOARD REPORT N°32

11th December 2019 - Jakarta Indonesia





FOREWORD



2019, what a year!

Lucica Ditiu
Executive Director
Stop TB Partnership

2019 passed too quickly, in a blink of an eye as some of us felt, but what a year it was! I feel that after all these years of hard work, we are starting to see the light at the end of the tunnel.

The UNHLM on TB in 2018 and the commitments and targets made by heads of states and governments have been critical in generating the necessary momentum towards ending TB by 2030. I feel a great sense of hope as we come to the end of this year as we are seeing more and more heads of states and governments getting involved and supporting the TB response in India, Mozambique, Nigeria, Pakistan, Philippines, the Russian Federation, and South Africa.

Taking the UNHLM on TB commitments and unpacking them per country as “indicative targets” to guide TB programmes in discussing and establishing their national ones, which is now serving as a great accountability tool, developing their national strategic plans, and making the necessary financing requests was an amazing effort and experience. We worked with the African Union and WHO AFRO teams and developed Africa score cards and country profiles, and we applaud our colleagues and partners working in India, Philippines, Nigeria and other countries that took these targets and created sub-national score cards and sub-national dialogues on reaching the commitments made in 2018.

Direct engagement, including through high-level events, with senior-level dignitaries from governments, especially by Ministers of Health, was unprecedented this year for the Stop TB Partnership Secretariat and our partners, as we collectively met and engaged with 32 Ministers of Health.

We worked hard to support country programmes and partners to continue their ambitious efforts and achievements of 2018 – diagnosing and putting on treatment 600,000 more people with TB than in 2017.

As called for at the UNHLM on TB, GDF strengthened its position as the main provider of TB diagnostics and treatments as well as technical support on procurement and supply. We have hope from the new TB vaccine results, from the new BPaL Regimen that the FDA approved in August 2019, which we managed to have listed in GDF’s catalogue in just two months, and from the other regimens being under development and testing.

TB REACH launched Wave 7, which will provide over 15 million USD to 37 grass-roots innovators to transform TB case finding, diagnosis, treatment and care by funding interventions that empower women, evaluate next generational health innovations, and gather more evidence on new treatment regimens such as BPaL.

We continued our robust efforts to strengthen the capacity and engagement of TB affected people and the TB civil society and communities. In 2019, Stop TB Partnership supported 13 countries to roll out assessment tools to identify TB key and vulnerable population data gaps, human rights and gender barriers to accessing TB services and solutions to address these findings. Together with partners, we developed and launched the Stigma Assessment Tool and the first ever TB and Human Right Declaration. We rolled-out the first ever community monitoring tool that we developed One Impact in four countries.

The Accelerator for Impact (a4i) platform continues to engage start-ups and small and medium enterprises (SMEs), including from high burden countries like Botswana and India, to support their efforts in rolling-out next generational health technologies for TB and global health (e.g., artificial intelligence, blockchain, tele-care, wearables, etc.) to make it as convenient as possible for all people, including the most marginalized, to access and receive affordable, quality, and people-centered care. As part of this effort, we are engaging with new, non-traditional partners, such as Fortune 500 companies from other industries (e.g., insurance), investment banks, private equity firms, and sovereign wealth funds to identify and develop potential innovative financing mechanisms that will provide a new, sustainable way to finance next generational health technologies for TB and global health.

The Re-imagining TB Care initiative worked jointly with IDEO.org, one of the world’s leading design companies, to socialize the TB community-at-large, particularly TB survivors, national TB programmes, and innovators to human centered design methods and mindsets, a creative approach that prioritizes designing solutions that aim to have as much impact as possible by focusing on the experiences of the most affected people.

What a year this was! The highest ever Global Fund replenishment with 14 billion USD made available to be put to work to deliver against the countries’ plans to end the three epidemics. TB will just get 18% of these funds and we will have to work towards addressing this, but our team worked hard and supported countries to access an additional 150 million USD from the first three waves of portfolio optimization process of the Global Fund. Our work with Global Fund is at an all time high with all our teams – directly or through participation in the TB Situation Room, GAC, Strategy Committee – deeply engaged in supporting our colleagues and partners in country programmes and the Global Fund country teams to deliver and achieve impact. As such we signed this year an MoU with the Global Fund to further support our work.

It was an amazing year as we see the first ever increase in R&D funding for TB and we are grateful for all funders for their support and we hope to see even steeper increases in years to come.

2019 is the last one of this decade and we in the Stop TB Partnership Secretariat, as well as TB community-at-large changed a lot over last 10 years. In every single area of our work we see obvious progress with a visible acceleration over the last three to four years. The Stop TB Partnership Secretariat evolved, re-defined our directions, strategy, and our governance structures. We grew up in size and operations, we changed our host, we will change it again, we gained a clear and respected place within the global health architecture. We are even closer to our respected donors that accompanied us in this journey and we attracted new ones to join us further.

Looking ahead, as we enter in the 10 years ahead of the 2030 deadline to end of TB, there are many challenging changes ahead of us, our work, our mindsets, our own existence as the Stop TB Partnership. Everything will change – the role of the people affected by TB and diseases and civil society, how we communicate, how we engage, funding landscape, relevance and existence of different structures and organizations, targets and focus, tools that we will have, climate, disease spectrum, etc. We will see a generational change, change in our structures and modus operandi. We already experience a change at this Board with the change in our leadership.

Change is never easy, but it is essential. And we will go through all these, because this will be the only way to end TB by 2030.

And we know that we will end TB!

Governance



The Stop TB Partnership held its 31st Board Meeting on 29–30 January 2019 in Geneva. The meeting was preceded by a UN Briefing in the Palais des Nations, which was attended by Board Members as well as by representatives of the Permanent Missions to the UN Office at Geneva. Missions were briefed on the targets coming out of the UN High-Level Meeting (HLM) on TB and the priority actions and funding needs to achieve the targets.



The Stop TB Partnership's Board has appointed Dr. Luiz Henrique Mandetta, Minister of Health of Brazil, as its new Chair to serve for a 3-year term following the meeting in Jakarta in December 2019.

Minister Mandetta takes over the Chairmanship after a successful 6-year tenure by Dr. Aaron Motsoaledi, Minister of Home Affairs, South Africa (former Minister of Health), under whom the Stop TB Partnership strengthened its identity, engagement and visibility. Minister Motsoaledi's work was pivotal in re-establishing the essential place of the TB community within the global health landscape.

Japan and France – represented by Global Health Ambassador Stéphanie Seydoux – joined the Board, sharing one of the two open seats. The Implementing Working Groups designated Dr. Farhana Amanullah, Chair of the Child and Adolescent TB Working Group, to the Board for 3 years. The second term of four Board Members (civil society constituency representatives) will come to an end in Quarter 1, 2020. Consequently, the three affected constituencies have begun the selection process to identify candidates to replace the representatives on the Board.

Executive Committee: The Executive Committee (EC) held 10 teleconference calls during this reporting period, covering a range of topics, including: 1) Board membership, 2) Board leadership transition, 3) development of agendas for two Board Meetings, 4) dates for the next Board Meeting in December 2019, 5) possible side-events at the Board Meeting, and 6) strategic discussions around the Global Fund Strategy Committee meeting. The EC reviewed the workplans of each of the Stop TB Partnership's Working Groups and approved two memos related to the TB REACH Wave 7 grants.

“Dr. Lucica Ditiu, Executive Director of the Stop TB Partnership, became in November 2019 a member of the World Economic Forum's Board of Stewards for their Health and Healthcare work.”

Finances

In 2019, the Finance team:

RECONCILED AND ISSUED FINAL FINANCIAL REPORTING TO CLIENTS

for nearly 400 GDF in-house procurement orders for TB medicines and diagnostics,

APPROVED MORE THAN 400 ORDERS

placed through the Order Management System (OMS) for the procurement of TB medicines and diagnostics done through GDF,

PROVIDED FINANCIAL ADVICE

to the GDF department on 2019 stock counts.

REVIEWED MORE THAN 200 QUARTERLY FINANCIAL REPORTS

received from grantees for the TB REACH grants under Wave 5, Wave 5 “Scale Up” and Wave 6;

PROCESSED MORE THAN 200 GRANT PAYMENTS AND 1,500 SUPPLIER INVOICES

during the reporting period

PREPARED MORE THAN 100 FINANCIAL REPORTS

to donors, the Finance Committee, the Board, programme teams, and management;

PREPARED STOP TB PARTNERSHIP SECRETARIAT DETAILED 2020 BUDGET

HELD FOUR CALLS

with the Finance Committee;

PREPARED AND SUBMITTED TO THE FINANCE COMMITTEE

the 2018 Stop TB Partnership **Annual Financial Management reports**

quarterly expenditure and commitments reports

paper on the **parameters and use of the Partnership's unearmarked income**

PREPARED SOPS

FOR THE STOP TB PARTNERSHIP'S GRANT MANAGEMENT

(focused on grants' costed and non-costed extensions, grant budget revisions, etc.)

SOPS FOR STRATEGIC ROTATING STOCKPILE (SRS)

write-offs and GDF procurement risk processes;

REVISED THE FLEXIBLE PROCUREMENT FUND (FPF)

operating principles and improved and streamlined the financial management of Stop TB Partnership retainers, in collaboration with UNOPS HR and PMT

CONTINUOUSLY STREAMLINED AND IMPROVED THE STOP TB PARTNERSHIP'S FINANCIAL PROCESSES

including automating financial reporting and improving the accuracy of the financial reconciliation processes between different systems;

Human resources and administration

The Stop TB Partnership's 76 staff members form a dedicated, passionate, and enthusiastic team, representing 42 different nationalities across six continents. The Stop TB Partnership is proud to maintain a female majority of 60% in line with its gender parity strategy.

For the past 4 years, the Stop TB Partnership has provided internships to over 10 students from prestigious universities such as Harvard, Cambridge, McGill, and Yale allowing to experience work with different teams within Stop TB.

A robust pool of over 200 dedicated Roster Candidates has been generated which includes specialized experts to provide TB-related technical assistance in technical areas such as: Case Detection, Monitoring, Evaluation & Surveillance, Global Fund Country Applications & Grants, MDR-TB, Procurement and Supply Chain Management and also capturing regions of experience and proficient languages to allow us to provide the best support to the countries and better organization for missions and easy access and rapid recruitment of experts to deploy for Stop TB projects when needed.

As part of its professional development plan, the Stop TB Partnership organized a writing workshop for the first time and generated a centralized repository of staff talents and skills, allowing senior management to harness in-house expertise and identify missing training requirements where needed.

STOP TB SUPPORTING THE YOUNG GENERATION TO BECOME THE TB LEADERS OF TOMORROW



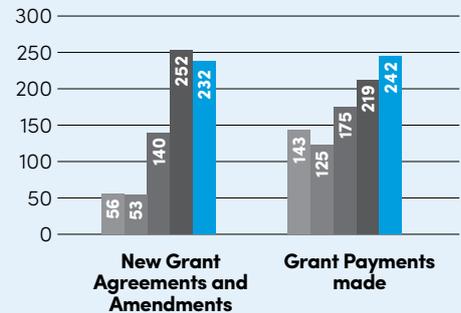
Over 70 university students from three institutions visited the Stop TB Partnership in 2019, getting the opportunity to interact with the different Secretariat teams, learn about TB, procurement of drugs, innovation in health care, human rights, and various efforts being taken to fight the disease. The visitors were from The Royal Tropical Institute (KIT) Amsterdam, studying Health Development (Master of Public Health), the Swiss-based study abroad program (at School for International Training), and the global health department of the University of Giessen, Germany.

In addition, a new Young Student initiative was introduced this year allowing 5 college students (of age 16-17) from 2 International Schools in Geneva (Ecolint International School and the International Institute of Lancy) to experience a week with Stop TB Partnership understanding the nature of work performed by the different teams and giving them an insight to the public health arena.

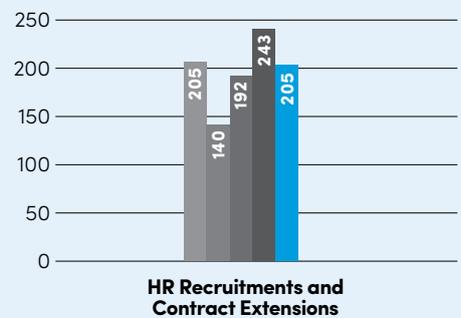
UNOPS portfolio management team data

2015 2016 2017 2018 2019

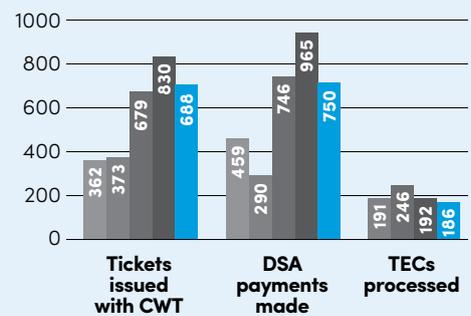
Grant Support



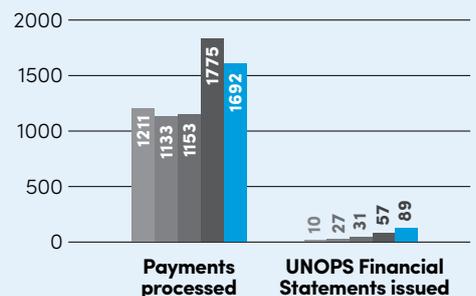
HR



Travel



Finance



THE STOP TB PARTNERSHIP SIGNED THREE MEMORANDUMS OF UNDERSTANDING (MOUs)



An MoU was signed with the Global Fund to End AIDS, Tuberculosis and Malaria to create closer and extensive collaboration between the two organizations. Another MoU was signed with

PATH to improve use of data and enhance the private-sector TB care, among other areas. An MoU signed with the International Association of Providers of AIDS Care (IAPAC) in the summer paved the way to further focus respective efforts on ending TB in large affected urban areas.

In July, Stop TB Partnership, supported by the Private Sector Constituency of its Board, convened a 3-day meeting on TB Preventive Therapy with 70 participants that included international and country experts, private sector, communities, technical partners and donors. The meeting focused on achieving the UNHLM on TB target of reaching at-least 30 million people worldwide with preventive treatment from 2018 to 2022. The meeting shared best practices and technical know-how, developed plans for scale up and identified key bottlenecks that need to be addressed. A side meeting discussed access and pricing barriers for new diagnostics and medicines needed for TB Preventive Therapy.

Advocacy

Throughout 2019, the Stop TB Partnership worked to strengthen the TB community advocacy movement to generate demand for effective implementation of best practice TB interventions, encourage innovations, enhance monitoring and accountability, and further the realization of a human rights-based approach to TB. In the year after the UNHLM on TB, the Advocacy team focused its efforts on ensuring that countries are aware of their TB targets as per the Political declaration on TB and heads of state and government would keep their promise to end TB by 2030.

- ▶ The Advocacy team began the year 2019 with the goal of “demystifying” the UN Political Declaration on TB to ensure that partners could effectively advocate with their governments. To support these efforts, the Advocacy team produced a booklet, “Key targets and commitments for 2022”, which has been translated into all official UN languages. In collaboration with Avenir Health, the Stop TB Partnership also produced the UNHLM targets per country for treatment, DR-TB, childhood and prevention, drawing on the latest TB disease burden estimates and case notification data published by WHO.
- ▶ The majority of the 51 Member States speaking at the 72nd World Health Assembly (WHA) in May referred to the UNHLM on TB as a key milestone in their TB efforts. They outlined the various actions taken to step up progress following the UNHLM, including updating national TB plans in line with the UNHLM targets. During the WHA, the Stop TB Partnership met with 14 Ministers of Health and country delegations.
- ▶ In August 2019, the Stop TB Partnership, WHO and the Global Fund released a joint statement calling on countries to achieve the UNHLM on TB targets: <https://bit.ly/2rYHEqV>.
- ▶ In late August 2019 in Brazzaville, Republic of Congo, on the margins of the 69th Session of the WHO Regional Committee

for Africa, the World Health Organization (WHO) Africa Region, the African Union Commission in collaboration with the Stop TB Partnership launched the Africa Continental TB Scorecard and shared UNHLM TB country profiles at a side event. <https://bit.ly/35yrjHV>

- ▶ The Stop TB Partnership collaborated closely with the Universal Health Coverage (UHC) community throughout the year in the lead up to the UNHLM on UHC on 24 September 2019 in order to ensure that TB would have a prominent place in the UHC agenda. The Partnership’s collaboration included supporting participation of Affected Communities and NGO Board Members Austin Obiefuna and Thokozile Nkhoma to the Interactive Multi-stakeholder Hearing on UHC in New York at the end of April. The Stop TB Partnership was part of the advocacy and communications coordinating group and participated in all coordinating activities and calls in the run-up to the UNHLM on UHC. Due to these intensive efforts and work of partners, TB was mentioned three times in the final Declaration on UHC, reaffirming the commitment to the UNHLM on TB targets. The Stop TB Partnership supported five representatives of the TB communities to attend the UNHLM on UHC and other UN General Assembly health events in September 2019.
- ▶ Throughout the year, the Stop TB Partnership worked with the G20 Coordination Group, chaired by the Global TB Caucus, and other partners to ensure that TB was on the agenda of the 2019 G20 Summit, hosted by Japan. The Stop TB Partnership’s Advocacy team reached out to G20 Member States to request their support for TB in the Health Ministers’ and Leaders’ Declarations. These efforts contributed to the successful outcome of TB, antimicrobial resistance (AMR) and Global Fund replenishment all being mentioned in the final communiqué of the Leaders’ Summit.

THE GLOBAL PLAN TO END TB 2018-2022



The Stop TB Partnership Board requested in January 2019 the development of an update of the ‘Global Plan to End TB 2016-2020: The Paradigm Shift’ to align it with the UNHLM on TB targets and commitments. It estimates the resources needed to achieve the UNHLM targets and put the world on course to achieve the milestones of the WHO End TB Strategy. The updated

Global Plan was developed under the guidance of the Global Plan Task Force. The Stop TB Partnership conducted two online public consultations in preparation for the Global Plan update. With over 150 respondents, the consultations provided a range of inputs from diverse stakeholders, including governments, technical experts, researchers, the private sector, civil society, people affected by the disease, and advocates. The updated Global Plan will be launched in Jakarta, Indonesia on the margins of the Stop TB Partnership 32nd Board Meeting.

Global Plan Task Force: Paula I. Fujiwara (Chair), Katherine Floyd, Blessina Kumar, David Lewinsahn, David Mameja, Thokozile B Nkhoma, Aaron Oxley, KS Sachdeva, Cheri Vincent, Eliud Wandwalo, Richard White.

Alternate Members of Task Force: Sevim Ahmedov, Philippe Glaziou, Janika Hauser, Rachael Hore, Mukadi YaDiul, Mohammed A Yassin.

- ▶ Treatment Action Group (TAG) issued the 2019 Research & Development Funding Trends Report in December.
- ▶ Out of Step 2020 – The Stop TB Partnership and Médecins Sans Frontières (MSF) are collaborating yet again to produce the next Out of Step report foreseen to launch in September 2020 at the UN General Assembly session. The report will focus on 43 high-burden TB countries.

“HITTING THE TARGETS UNDER UNIVERSAL HEALTH COVERAGE”



The Stop TB Partnership’s Advocacy and Communications teams organized the “Hitting the Targets Under Universal Health Coverage (UHC)” event on the margins of the 74th UN General Assembly at the UN Headquarters. The event brought together the world’s leading health voices representing each UNHLM on Health for the first time to present a strong and unified voice in the run-up to the UNHLMs on HIV/AIDS (2021), TB (2023), UHC (2023) and noncommunicable diseases (NCDs) (2025). The Stop TB Partnership invited key global health organizations to join as co-sponsors, including UHC 2030, UNAIDS, RBM Partnership to End Malaria, NCD Alliance, and the Missions of Japan, Thailand, Zambia and Brazil.

Communications

The Communications team supported, promoted and participated in a range of milestone events organized by the Partnership, supporting the work of the Secretariat teams, partners and stakeholders with over 50 news alerts and 9 monthly newsletters, showcasing work of stakeholders and partners.

The team supported with communication campaigns over 10 significant meetings organized on the margins of the Global Fund Board Meeting in March, the World Health Assembly, Women Deliver Conference, the UNHLM on Universal Health Coverage, the TB Innovation Summit, The Global Fund Replenishment Conference, the 50th Union Conference. The events were accompanied by photography, dense social media posts and news alerts. The introduction of spark micro-websites to showcase some of the most important events brought new audience exposure with over 1,000 views per micro-site. All this led to a significant increase in visibility of the Stop TB Partnership (see data on next page).

The Communications team also took the lead in organizing almost 20 brown bag events in the Global Health Campus, supporting Secretariat teams, experts, innovators and artists in presenting their work to colleagues from all five health organizations based in the joint office space. In celebration of cultural differences of the campus sub-tenants, the Stop TB Partnership took the lead in organizing and coordinating in September a fabulous fashion show to highlight exceptional diversity among partner organizations.

HIGHLIGHT EVENTS PROMOTED OR SUPPORTED BY THE COMMUNICATIONS

Declaration of the rights of people affected by Tuberculosis launch



Global Health campus diversity day



TB innovations summit (TBIS) '19



“UN High-Level meeting on health: Hitting the targets under universal health coverage”



Global Fund Replenishment Conference



Kochon prize 2019



50th Union Conference



VALENTINE'S DAY 2019



The Stop TB Partnership launched a campaign on [Valentine's Day](#) (14 February), "It's ValenTime", to open the doors for the World TB Day 2019 campaign and introduce the "It's Time" theme. The campaign was first introduced in 2018; it continued to raise a lot of interest in 2019 because of its unusual approach and unique subtheme: **"Can I propose? Let's End TB Together."**

<https://adobe.ly/33TAWzM>

WORLD TB DAY 2019

World TB Day was more significant, bolder and brighter this year, with tremendous uptake of the campaign theme by partners across the world. The versatile yet straightforward theme **"IT'S TIME"** was the result of extensive consultations with partners and stakeholders. The broad adoption of the theme demonstrated its universal appeal, compelling message and easy translation into all languages. "IT'S TIME" will remain the World TB Day theme in 2020, which will allow the Stop TB Partnership and all stakeholders' and partners' communicators to envisage creative ways in which to broaden the scope of the campaign.



The campaign [toolkit's](#) logo and visual identity were developed in-house in six UN languages. The toolkit was launched online on 22 February with over 3,000 campaigners visiting the pages. The Communications team used Adobe Spark to build a more appealing campaign and high-impact content webpages. The stated numbers have already shown that a designed toolkit approach had a very positive impact on audiences.

The milestone marker for the campaign, the [#ItsTimetoEndTB](#) hashtag, did exceptionally well with a reach of over **38 million people**. To further encourage and

amplify support, a straightforward photo challenge was executed, asking people to post images with clocks, wrist-watches, etc. The photo campaign performed far beyond expectations in terms of the creativity and enthusiasm generated.

GENEVA WORLD TB DAY ACTIVITIES



It included a **photo booth** in the common areas of the Global Health Campus on Friday 22 March, with hundreds of colleagues stopping by to take a photo against the "IT'S TIME" background. World TB Day 2019 ended with the Stop TB Partnership's now yearly **"Light Up for TB"** effort, with the Global Health Campus building and Geneva's Jet d'Eau being lit up in red.

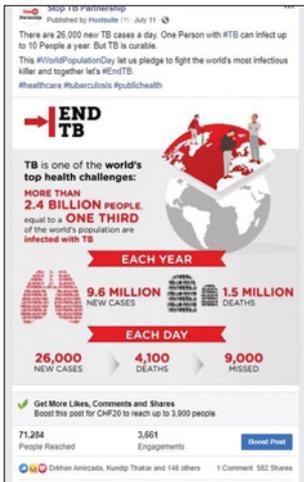


TB Infection test – For World TB Day 2019, the Stop TB Partnership organized a TB infection blood (QuantumFeron) test with the participation of staff from organizations based at the Global Health Campus along with WHO and UNAIDS staff. Over 3 days, 220 people gave blood samples for testing and the Stop TB Partnership hosted three nurses



and medical staff from the Swiss-based Unilabs facility. The blood sample collection was preceded by two information sessions and accompanying information about latent TB infection (LTBI).

Best performing Facebook post:



Reach: 71,824
Shares: 582

Top Twitter posts



Impressions: 18.2K

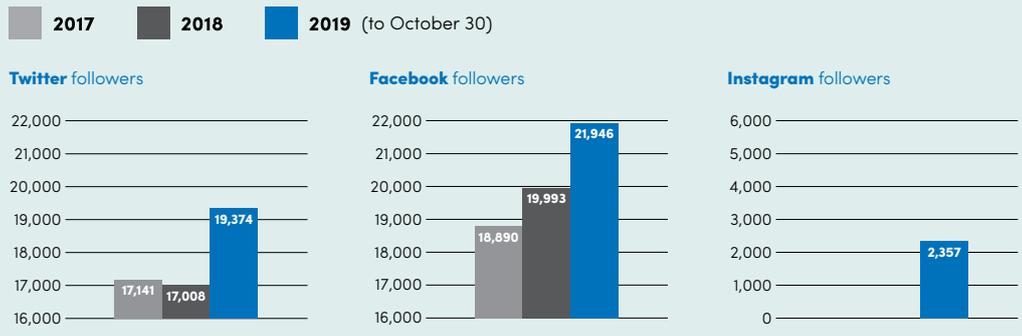


Impressions: 16.8K



Impressions: 16.9K

The Stop TB Partnership's social media presence showed significant growth in 2019



HIGH-LEVEL MISSIONS AND MEETINGS

In 2019, the Stop TB Partnership engaged in over 30 high-level missions and meetings worldwide, meeting heads of state and government, ministers of health, and other government representatives, stakeholders and partners to discuss in person the UNHLM on TB targets and commitments.

Some highlights:

WORLD ECONOMIC FORUM (WEF)
Davos, Switzerland
high-level sessions to address themes around the global commitment to achieve Universal Health Coverage (UHC), including TB related topics.

GLOBAL FUND PRE-REPLENISHMENT CONFERENCE
New Delhi, India

NORTH AMERICAN UNION TB CONFERENCE
Vancouver, Canada
focusing on the next steps following the UNHLM on TB.

AFRICAN REGIONAL TB SUMMIT POST-UNHLM: STEP UP EFFORTS TO FIND ALL PEOPLE WITH TB
Kigali, Rwanda.

IT'S TIME TO END TB: NATIONAL DIALOGUE ON TUBERCULOSIS
Maputo, Mozambique.
Meeting the president Filipe Nyusi.

LANCET COMMISSION AND USAID EVENT
Washington, DC, USA.

GALA NIGHT EVENT HOSTED BY THE FIRST LADY
Abuja, Nigeria
Meeting the first lady Aisha Buhari

THE ECONOMIST ANTIMICROBIAL RESISTANCE SUMMIT
London, UK.

REGIONAL UNION CONFERENCE
Manila, Philippines
Meeting the president Rodrigo Duterte

HIGH-LEVEL PANEL "MAKING UNIVERSAL HEALTH COVERAGE WORK FOR KEY, VULNERABLE AND UNDERSERVED POPULATIONS"
UN Headquarters, Geneva, Switzerland

REGIONAL MEETING
Muscat, Oman
meeting on TB for migrants

THE GLOBAL HEALTH SECURITY CONFERENCE AND TB EVENTS
Sydney, Australia
University of Sydney

DEMOCRATIC PEOPLE'S REPUBLIC OF KOREA (DPRK)
Meeting Ministers.

TB/HIV 2019 SYMPOSIUM
Mexico City, Mexico
convened by the International AIDS Society (IAS) HIV Co-infections and

Co-Morbidities Initiative

69TH WHO/AFRO REGIONAL COMMITTEE
Brazzaville, Congo.

Launch of the Africa Union, WHO AFRO and the Stop TB Partnership TB Performance scorecard and country profiles. Meeting Minister of Health.

HIGH-LEVEL MEETING IN TOKYO
Tokyo, Japan

Tokyo International Conference on African Development (TICAD) 2019. Meeting ministers.

HIGH-LEVEL MEETINGS:
South Korea

KOFIH, KOICA, Ministry of Foreign Affairs, and Unification & National Assembly

HIGH-LEVEL MEETINGS:
Singapore

SIN Capital, Fullerton Health Foundation & National Centre of Infectious Diseases

MEETING THE MINISTER OF HEALTH DR. LUIZ HENRIQUE MANDETTA
Brasilia, Brazil.

GLOBAL FUND'S SIXTH REPLENISHMENT CONFERENCE
Lyon, France.

Meeting the President Emmanuel Macron

HIGH-LEVEL MEETING BRICS
Curitiba, Brazil

IX BRICS Health Ministers Meeting

MEETING THE MINISTER OF HEALTH AND DIRECTOR OF ICMR

New Delhi, India

50TH UNION CONFERENCE ON LUNG HEALTH

Hyderabad, India

High-level meetings with stakeholders and partners & media activities.

HIGH-LEVEL MEETING IN PAKISTAN

Islamabad, Pakistan

Meeting the Prime Minister of Pakistan, Imran Khan.

USAID TB ACCELERATOR

Washington DC, USA

First anniversary.

TREATMENT ACTION GROUP

On 10th December 2019, the **Treatment Action Group**, through the support of the Stop TB Partnership, issued the 2019 Report on Tuberculosis Research Funding Trends which measured progress towards achieving the UNHLM on TB target to increase TB R&D funding to USD2 billion a year by 2022. The report found that global TB R&D expenditures increased to US\$906 million in 2018—the highest ever reported amount and an increase of USD134 million from 2017. Together with multi-lateral and philanthropic institutions, the public sector accounted for 91% of total contributions. The public sector contributed more than two-thirds of total TB research spending in 2018 (USD617 million) and is the only sector with a substantial increase in funding over 2017. In addition, the report stipulates that the U.S. National Institutes of Health accounted for 37% of the total USD134 million funding increase between 2017 and 2018.

Innovations & Grants

in 2019,
TB REACH grantees

SCREENED MORE THAN 6.1 MILLION PEOPLE

and placed more than **250,000 PEOPLE ON ANTI-TB TREATMENT** in project areas.

WAVE 6 GRANTEES project activities:

13 PROJECTS IN 12 COUNTRIES ARE USING DIGITAL ADHERENCE TECHNOLOGIES

to assist people with TB and enable health systems to provide better, more targeted support to improve adherence and outcomes.

TB REACH supported the creation of

“ISLANDS OF ELIMINATION”,

which aim to establish comprehensive care to drastically reduce the TB burden through active case finding, treatment for active disease and large-scale preventive treatment. These efforts have been implemented in the Marshall Islands and Viet Nam.

In February, **THE WAVE 7** call for proposals was launched,

★
ATTRACTING 593 APPLICATIONS

★
This Wave highlights the importance of empowering women and girls in the TB response.

In September,

THE EXECUTIVE COMMITTEE APPROVED US\$ 15.4 MILLION IN NEW FUNDING FOR 37 TB REACH PROJECTS IN 23 COUNTRIES.

The projects range from scaling up preventive treatment and using handheld X-ray machines to screen hard-to-reach communities, and supporting early uptake of the newest DR-TB treatment with the BPaL regimen.

In August, the Stop TB Partnership

COMPLETED THE MID-TERM EVALUATION OF TB REACH,

finding that the initiative has been a successful catalyst for innovative approaches that

have increased the number of people diagnosed and put on treatment, and improved treatment success rates. TB REACH was also commended for its role in integrating different thematic areas into TB response interventions.

USAID provided a total of

US\$ 8.2 MILLION

to support innovative approaches to engaging private sector clinicians in Waves 6 and 7, funding over 20 different projects.

MULTIPLE DEEP LEARNING SYSTEMS FOR READING CHEST X-RAY IMAGES



In October, TB REACH and partners published the first-ever evaluation of multiple deep learning systems for reading chest X-ray images (<https://go.nature.com/33Ofhji>) in multiple countries. The results were read widely, placing the publication in the top 1% of viewed articles among more than 220,000 tracked articles.

In November, the Proposal Review Committee recommended approximately

US\$ 6.5 MILLION IN NEW FUNDING TO SCALE UP WAVE 6 TB REACH PROJECTS

that have demonstrated great success.

In December, OVER 100 GRANTEES AND M&E MEMBERS FROM WAVES 6 AND 7

came together in Ho Chi Minh City, Viet Nam to discuss the TB REACH evaluation and reporting framework.

FOCUS ON WOMEN



In June, a panel was convened at Women Deliver in Vancouver, Canada that saw participation from Stop TB Partnership's Executive Director Dr. Lucica Ditiu, along with the UNAIDS Deputy Director, First Lady of Belize, Executive Director of the feminist organization CREA and other impressive panelists. The discussion focused on incorporating women's empowerment and concepts of gender equality and equity into development programmes.

Communities and Country Support for Impact (CCS4I)

COUNTRY-LEVEL STOP TB PARTNERSHIP PLATFORMS

Stop TB Partnership supported efforts to engage multiple and different stakeholders in ending TB at country level in high burden countries across Eastern Europe and Asia, Africa, Asia and Pacific. High level events and activities to engage celebrities, media, members of the governments, parliamentarians and other influencers covered largely by media reports have been organized in Pakistan, Indonesia, Tajikistan, Cambodia, Ukraine, Mozambique, Côte d'Ivoire and Zimbabwe. The Stop TB Partnership contributed to develop new partnerships as well as strengthen the existing one as following:

DEVELOPMENT OF NEW PARTNERSHIPS

- Bangladesh
- Mozambique
- Cambodia
- Zimbabwe
- Cote d'Ivoire
- United Republic of Tanzania

STRENGTHENING OF EXISTING PARTNERSHIPS

- Tajikistan
- Pakistan
- Philippines
- Indonesia
- Ukraine
- Democratic Republic of the Congo

COMMUNITY, RIGHTS AND GENDER

TB STIGMA ASSESSMENT



- In 2019, the Stop TB Partnership developed the TB Stigma Assessment tool in collaboration with a number of partners and with support from USAID.
- Partners include: ACT Asia Pacific, African Coalition on TB, CISMAT Sierra Leone, DRAF TB, EANNASO, International Council of Nurses, KELIN, Frontline AIDS, Global Coalition of TB Activists, Global Fund, NTP representatives, REACH, TBEC, TBpeople, KNCV, The Work for Change, UNAIDS, University of Sydney, Woolcock Institute of Medical Research, USAID and WHO.
- As result, the Global Fund Modular Framework now includes stigma indicators.
- The TB Stigma Assessment tool is launched with support from community organizations during December 2019 – January 2020. In January 2020 a global launch is planned with key partners and stakeholders.

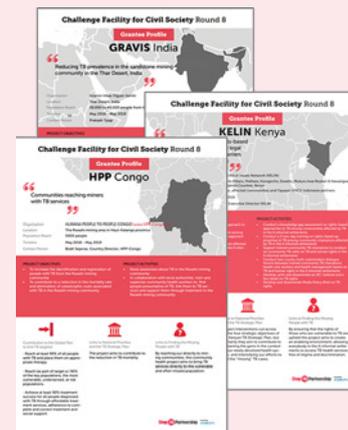
ONEIMPACT



- **A digital platform** to facilitate community-based monitoring (CBM) of the TB response, as part of the Initiative to Find the Missing People with TB (with support from USAID and the Global Fund)
- **Eight countries supported in 2019** to implement CBM using OneImpact: Cambodia, DR Congo, Indonesia, Kenya, Nigeria, Mozambique, Tanzania and Ukraine

▪ **Ukraine is scaling up the intervention**, while other countries are exploring scale-up possibilities

CHALLENGE FACILITY FOR CIVIL SOCIETY (CFCS) ROUND 8



- Theme: **“Enhancing the empowerment of communities, community advocacy, and community service delivery interventions to find the missing people with TB.”**
- **13 community organizations** from Bangladesh, Cambodia, DR Congo, India, Indonesia, Kenya, Mozambique, Nigeria, Pakistan, Philippines, South Africa, Tanzania and Ukraine supported:
 - **Six organizations** engaged in Finding the Missing People with TB
 - **Five organizations** engaged in Community Advocacy
 - **Two organizations** engaged in Community Empowerment
- Grantees shared their work on global and regional conferences as best practice examples of community engagement.
- KELIN, a CFCS grantee, won the Kochon Prize 2019 for “Leadership in Advancing Human Rights.”

EMPOWER PEOPLE AND PROMOTE HUMAN RIGHTS

The Stop TB Partnership, together with the TB affected communities,

HOSTS MONTHLY CALLS ON HUMAN RIGHTS AND TB.

An average of **40 CIVIL SOCIETY PARTNERS**

have been joining these calls and covered TB stigma; legal environment assessments; TB and disabilities; TB and the universal period review; human rights and national TB laws; and access to TB medicines and diagnostics.

The Stop TB Partnership worked closely with global network of people affected by TB, TBpeople and the Global Coalition of TB Activists (GCTA) as well as regional and country platforms from Europe, Asia and the Pacific, Africa, Latin America and the Caribbean to **TRANSFORM ADVOCACY FROM THE EFFORTS OF INDIVIDUAL ACTIVISTS TO A GLOBAL COMMUNITY MOVEMENT.**

The Stop TB Partnership has partnered with GCTA, together with WHO SEARO, to

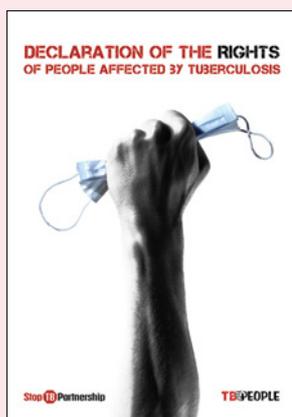
DRAFT A TREATMENT LITERACY TRAINING MODULE FOR TB AFFECTED COMMUNITIES

to ensure that the principles of a communities, rights and gender (CRG) approach are integrated into the module.

The Stop TB Partnership also supported GCTA and North Western University in

ORGANIZING A FIRST TIME EVER TRAINING OF LAWYERS AND TB SURVIVORS.

DECLARATION OF THE RIGHTS OF PEOPLE AFFECTED BY TUBERCULOSIS

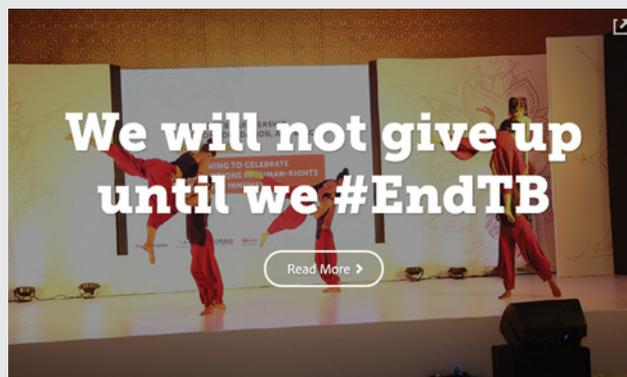


The Stop TB Partnership in partnership with TBpeople developed, launched and translated (into Russian, French, Spanish and Bahasa) the Declaration of the Rights of People Affected by TB. This was led by the TB affected communities and human rights experts to increase the understanding of what a human rights-based response to TB involves. The declaration utilizes established human rights law, language and principles, and applies them to the TB context. The Stop TB Partnership, together with TBpeople and the three communities and civil society delegations of the Global Fund Board launched the declaration in Geneva which was attended by Dr. Tedros Adhanom Ghebreyesus, Director-General of WHO, Peter Sands, Executive Director of the Global Fund, Dr. Shannon Hader, Deputy Executive Director of UNAIDS, representatives from the Office of the High Commission for Human Rights (OHCHR), human rights academics and TB survivors. <https://bit.ly/2O8599K>

ROLL-OUT OF THREE CRG ASSESSMENT TOOLS

The Stop TB Partnership rolled out the TB/HIV gender assessment tool, legal environment assessment (LEA) tool, and the data for action framework on TB key, vulnerable, and underserved populations in Bangladesh, Cambodia, DR Congo, India, Indonesia, Kenya, Mozambique, Nigeria, Pakistan, Philippines, South Africa, Tanzania and Ukraine. This work has been aligned with the Global Fund strategic initiative on breaking down barriers and TGF CRG department to identify TB key and vulnerable population data gaps, human rights and gender barriers to accessing TB services and solutions to address these findings. The Stop TB Partnership provided follow-up technical support to countries in the tools' operationalization and implementation. Stop TB Partnership supported additional initiatives in West and Central Africa (Benin, Cameroon and Niger), Eastern Europe and Central Asia (Georgia, Kazakhstan, Tajikistan and Uzbekistan) and The Americas (Peru, Bolivia, Colombia, Mexico, Guatemala, El Salvador, Haiti, Dominican Republic, Paraguay, Panama and Honduras) to expand the CRG assessment tools in these countries.

THE KOCHON PRIZE 2019



The Opening Ceremony of the 50th Union World Conference on Lung Health in Hyderabad, India provided the perfect opportunity to award the prestigious Kochon Prize 2019. The theme for this year was **"It's Time for Human Rights and TB"**. The award was presented to Kenya Legal and Ethical Issues Network on HIV & AIDS (KELIN), represented by Executive Director Allan Maleche.

The Stop TB Partnership organized a gala event on the sidelines of the Union conference, where the Partnership and partners also recognized other outstanding TB champions:

- ▶ **TBpeople** won the Stop TB Partnership 2019 Empowering Community Voices Award.
- ▶ REACH awarded **journalists** for keeping TB in the news and ensuring that it was a significant health topic covered by the media.
- ▶ **Business leaders** were praised for their companies' efforts in the fight against TB.
- ▶ KIT hosted the first-ever hackathon in TB and awarded the **computer scientists, software engineers and other innovators** for their efforts.

You can read the full story here: <https://bit.ly/337AAVN>

SUPPORT TO COUNTRIES TO IMPLEMENT THE GLOBAL FUND PROGRAMS

Overall, the Stop TB Partnership provided targeted technical support for:

FINDING MISSING PEOPLE WITH TB

under the Global Fund supported programs implementation, active case finding, private sector TB care, data for action, innovative strategies, assessment of barriers to services, community monitoring etc.

CONDUCTING NATIONAL PROGRAM ASSESSMENTS

with Stop TB partners;

IDENTIFICATION OF SOLUTIONS TO OVERCOME SOCIAL, LEGAL, ECONOMIC AND GENDER RELATED BARRIERS

to access TB prevention, diagnosis, treatment, care and support services, and stigma reduction;

SUPPORTING CAPACITY BUILDING AND ADVOCACY

to reach UNHLM targets;

BUILDING CAPACITY, COORDINATION AND MEANINGFUL ENGAGEMENT

of TB affected communities and TB survivors in policy and programs design, implementation, monitoring and evaluation etc.

THE GLOBAL FUND GRANTS IMPLEMENTATION,

including funding request development, TRP clarifications, grant making and operationalization;

PROMOTING "SOUTH-SOUTH LEARNING"

as well as support advocacy for policy change.

IMPORTANT HIGHLIGHTS

INDIA

- ▶ Actively engaged with Govt of India, World Bank and TGF for the USD 400 million WB loan buy down agreement. This led to approval of the GF board of the Loan buy down for India of USD 41.6 million to supports India`s NSP
- ▶ Support to GF private sector engagement JEET project: 500,000 people with TB notified from private sector providers in 2018 and in 2019, the number has already exceeded 550,000 by October 2019
- ▶ Facilitated reprogramming of India grant: USD 28 million for buying Xpert (2 module) 1000 machines (2000 modules) and for procurement of second line anti TB drugs.

PHILIPPINES

- ▶ Stockout of first line drugs: coordination with partners for GF and USAID funding for 60,000 courses for two months, procured through GDF. The drugs reached the country in June
- ▶ Joint Monitoring Mission: identified low case finding and low success rate in drug resistant TB and the fall in domestic allocation for TB budget for 2020 and the urgent need for scale up in private sector engagement.

PAKISTAN

- ▶ Sensitized the TGF country team and NTP on the potential for using the anti TB drug sale data for estimating and monitoring the number of TB patients treated in private sector and facilitated procurement of the data from IQVIA at a concessional rate.

INDONESIA

- ▶ Through our technical

assistance, Indonesia is successfully implementing data mop up activities to improve TB notification from large hospitals. In 2018, the notification increased by nearly 100,000 to 531,000

- ▶ TA to Indonesia for accelerated scale up plan for MDR TB diagnosis and treatment.

UKRAINE

- ▶ Baseline assessment and technical assistance in case finding activities and diagnostic network planning, adaptation and use of SI field guides, digital technologies for patient follow up and adherence support (in cooperation with KIT Netherlands)
- ▶ Reassessment of TB and DR-TB burden in the country including the joint WHO/TGF/USAID/STP mission to the country
- ▶ Support to TGF country team in the grant reprogramming (TB component);
- ▶ Implementation of Zero TB Initiative interventions in Odessa city under TGF 'Cities' project.

KAZAKHSTAN

- ▶ National TB Program Review 2018 with WHO/EURO
- ▶ Technical support to TB laboratory network strengthening
- ▶ National assessment of performance of TB case-finding activities and Xpert MTB/RIF needs by region and district
- ▶ Procurement of TB drugs and diagnostics through Stop TB Partnership/GDF: GeneXpert machines under additional USAID funding and Xpert cartridges and second-line drugs under Government funding;
- ▶ Development of the

new TB application to the Global Fund, TRP clarifications and grant negotiations

- ▶ National strategic planning for following up on the UNHLM commitments and country targets and launch of USAID TB Accelerator, jointly with USAID Central Asia Mission
- ▶ Implementation of Zero TB Initiative in Kazakhstan (Almaty and Nur-Sultan cities) under TGF 'Cities' project
- ▶ Deployment of two Stop TB Partnership in-country advisors for Kazakhstan (TB Drugs Quality Management Specialist and TB Financing Advisor) with USAID funding

TAJIKISTAN

- ▶ Continuous in-country technical support to the Global Fund TB project implementation
- ▶ Deployment of the STP in-country laboratory specialist for Tajikistan
- ▶ National strategic planning for following up on the UNHLM commitments and country targets and launch of USAID TB Accelerator, jointly with USAID Central Asia Mission

UZBEKISTAN

- National strategic planning for following up on the UNHLM commitments and country targets and launch of USAID TB Accelerator, jointly with USAID Central Asia Mission
- ▶ Development of master class on TB hospitals' planning and optimization
- ▶ Support to TGF Country Team, USAID Mission in Uzbekistan and national partners in transition of functions of the Principal Recipient (PR) to the Republican Specialized Scientific and Practical Medical Center of

Phthysiology and Pulm-onology (RSSPMCPP) and capacity building of the new PR.

SOUTH AFRICA

- ▶ Support country team in key areas of grant imple- mentation (portfolio re- view, re-programming, portfolio optimization, key issues meetings)
- ▶ Scaling up of TB quality improvement initiative to 10 priority districts

NIGERIA

- ▶ Focused technical support to Lagos State Ministry of Health for the expansion of TB services in public and private health facilities
- ▶ Strengthening of sample referral system and establishment of x-ray screening in high volume health facilities within informal settlements (ongoing)

GHANA

- ▶ Establishment and scale up of sample transport (using Ghana Post) and scale up of program quality improvement approach for TB case finding in health facilities
- ▶ Support country team in key areas of grant imple- mentation (portfolio re- view, re-programming, portfolio optimization, key issues meetings)

KENYA

- ▶ bringing to scale pro- gram quality improve- ment approach for TB case-finding in health facilities from few pilot districts to entire coun- try and support country team in grant implemen- tation

In addition, technical support to Kenya, Uganda, Tanzania, Nigeria and Malawi was provided towards transition to new MDR-TB treatment regimens. In Kyrgyzstan-



rolling out rapid diagnostic tests and introduction of revised DR-TB guidance; National TB Program Review in collaboration with WHO/EURO. In Turkmenistan: National TB Program Review, in collaboration with WHO/EURO and TGF. In Georgia - development of the new TGF TB application and grant making, external TA for revision of DR-TB management guidelines, external TA for Zero TB Initiative activities in Adjara region, Zero TB Initiative in Tbilisi city within TGF 'Cities' project. In Belarus - operationalization of the Memorandum of Understanding between the Stop TB Partnership and the Ministry of Health including implementation of Zero TB Initiative interventions and technical assistance for implementation of revised DR-TB guidance and transition planning. In Moldova - estimation of needs in Xpert investigations and Zero TB Initiative implementation in Balti city within TGF 'Cities' project.

DATA

UNHLM FOR TB COUNTRY TARGETS

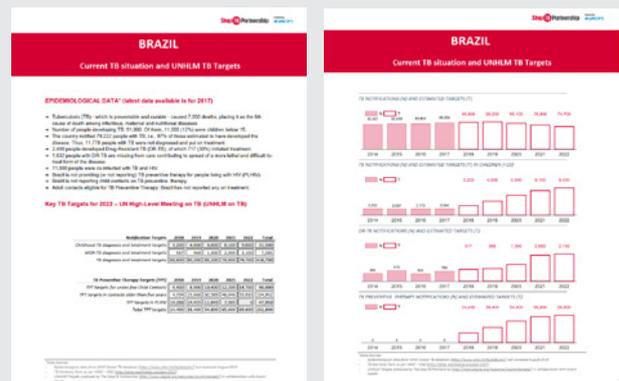
Updated for 2018:
Disaggregation of UNHLM targets by country, considering WHO burden estimates and notification data from 2018
<http://www.stoptb.org/resources/cd/>

INTERACTIVE MAPPING TOOL

Development of a mapping tool containing over 250 in- teractive maps/plots on TB and updated with the latest WHO data (2018)
<https://bit.ly/2XB7FYQ>

UNHLM ON TB ACCOUNTABILITY FACTSHEET

The Stop TB Partnership developed country by country "accountability" factsheets for each country reporting to WHO containing information on the epidemiological situ- ation along with UNHLM TB targets.



Strategic Initiatives & Innovative Financing

KEY ACHIEVEMENTS

DEVELOPING RE-IMAGINED TB CARE MODELS

for active TB, latent TB, childhood TB, and TB/HIV

RAISING AWARENESS ABOUT HUMAN-CENTERED DESIGN (HCD) MINDSETS AND METHODS

with the TB community in order to integrate HCD design into the development of new service delivery approaches and product innovations in TB and global health

WORKING WITH COUNTRY PROGRAMMES AND INNOVATORS

to develop a packaged set of solutions for service providers and TB affected people across the TB care model

STRENGTHENING THE INNOVATION ECOSYSTEMS

in Asia, the Middle East, Southern Africa and South-East Asia to catalyse the next generation of solutions for TB and global health

SUPPORTING START-UPS

developing new emerging technologies to cross the second "valley of death" and accelerate product roll-out

DEVELOPING DIGITAL HEALTH TOOL KIT AND WEB-BASED INNOVATOR PATHWAY

to be launched by the end of 2019

FEATURED EVENTS IN 2019

May RE-IMAGINING TB CARE CONSULTATION

co-hosted with the World Economic Forum

September TB INNOVATION SUMMIT 2019

co-hosted with PATH, the Global Fund, Fullerton Health Foundation, Johnson & Johnson and the World Economic Forum

September TB FINANCING DIALOGUE

co-hosted with Columbia University's Center for Sustainable Development

October HUMAN-CENTERED DESIGN WORKSHOP

co-hosted with IDEO.org

November HELINA 2019 CONFERENCE

co-sponsored with the Ministry of Health & Wellness of Botswana to discuss digital health interventions in Africa to achieve Universal Health Coverage.

TB INNOVATION SUMMIT '19 – THE NEXT NEW BIG IDEA AND INNOVATION TO CHANGE THE WAY WE FIGHT TB



The Stop TB Partnership, PATH, the Global Fund to Fight AIDS, Tuberculosis and Malaria, Johnson & Johnson, Fullerton Health Foundation, and the World Economic Forum convened the second TB Innovation Summit ("Summit"), on the eve of the United Nations High Level Meeting (UNHLM) on Universal Health Coverage (UHC), to explore and build the next big idea and innovation in TB and global health.

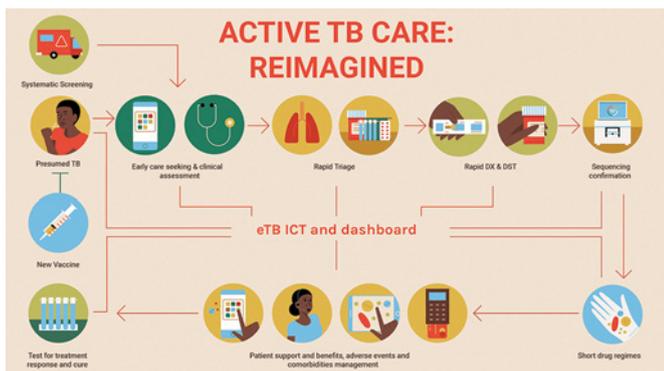
As this year marks 50 years since Neil Armstrong took his first small steps on the moon, we are inspired to take our own giant leap forward to live in a world without TB. The TB Innovation Summit brought together a unique mix of traditional and non-traditional partners and stakeholders and explored topics related to:

- ▶ **Creating an inclusive entrepreneurial and innovation ecosystem** in TB and global health;
- ▶ **Transforming perceptions** of how new TB innovations can be financed, roll-out, and scaled-up; and
- ▶ **Showcasing the next generation of emerging technological solutions** (e.g., artificial intelligence, digital health solutions, etc.), which will make it as convenient as possible for all TB affected people to access and receive affordable and quality care.

HUMAN-CENTERED DESIGN – CREATIVE AND NEW APPROACH FOR IMPACT



The Human-Centered Design (HCD) Workshop, which was co-hosted with and facilitated by IDEO.org, socialized TB survivors, national TB programme managers, innovators, and other key partners and stakeholders to HCD methods and mindsets, a creative approach that prioritizes designing solutions that aim to have as much impact as possible by focusing on the experiences of the most affected people. The event's objectives were to: (1) invite participants to bring their expertise into a generative, immersive environment that feels more like an innovation incubator than a workshop, with a focus on the value of prototyping and (2) identify opportunities for HCD demonstration projects with participants' organizations.



Stop TB Partnership's Global Drug Facility (GDF)

LEADING THE ROLL-OUT OF THE FIRST, OPTIMIZED, CHILD-FRIENDLY FORMULATIONS FOR DR-TB:



Thanks to funding provided by the Government of Japan, USAID, and GDF, more than 50 countries are being supported to introduce and procure these life-saving medicines tailored to treat DR-TB in children. By December 2019, 56 countries

had procured the new formulations along with tailored assistance to scale up these new products.

IGRA ADDED TO THE GDF DIAGNOSTICS CATALOGUE:

GDF-negotiated pricing will facilitate country roll-out of this test for LTBI.

Countries using domestic financing to procure through GDF have been able to buy

UP TO SEVEN TIMES MORE RAPID MOLECULAR TESTS

compared to buying through national distributors.

GROWING THE CLIENT BASE FOR QUALITY-ASSURED DIAGNOSTICS AT AFFORDABLE PRICES:

In the past year, 71 countries purchased diagnostics through GDF, 10 of which were first-time diagnostics clients.



INCREASING GENEXPERT INSTRUMENT UPTIME:

GDF is guiding countries to obtain improved service agreements for GeneXpert systems, including through surcharge-based service and maintenance in line with the model Service Level Agreement; progress is underway to expand access globally.

PROVIDING "BRIDGE" LOANS TO COUNTRIES:

To date, **16 COUNTRIES** have benefited from GDF's Flexible Procurement Fund to resolve financial constraints related to prepayment requirements.

TACKLING GLOBAL PRICING AND ACCESS ISSUES FOR KEY MEDICINES AND DIAGNOSTICS:

GDF and the TB Procurement & Market-Shaping Action Team (TPMAT) brings together the largest buyers, donors, technical partners and civil society to collaboratively address major TB market challenges, including:

- ▶ 35 products added, modified, deleted and/or rejected during the 2019 update to the Essential Medicines List and Essential Medicines list for Children
- ▶ 20 products changed in the WHO Prequalification Programme Expression of Interest
- ▶ 6 countries using the new Cepheid Service Level Agreements
- ▶ 8 more countries in negotiations
- ▶ 5 new products prioritized and quality-assured through the Global Fund Expert Review Panel

AVERTING WASTAGE AND PREVENTING STOCKOUTS OF TB MEDICINES



From January to September 2019, GDF's activities averted wastage for a total value of **US\$ 14 million**. GDF also prevented potential stockouts that would have affected the treatment of **26,964 people with DS-TB and 1,031 people with DR-TB**.

SUPPORTING TB R&D:

GDF is helping clinical researchers to procure quality-assured TB medicines and diagnostics in order to accelerate the start of their trials. GDF has been approached to supply to **22 clinical trials** and eight have already procured.

END OF THE 4-YEAR USAID-JANSSEN BEDAQUILINE DONATION PROGRAM:

GDF was the sole provider for the Donation Program. When the Program closed successfully on 6 March 2019, GDF had managed to equitably allocate **102,798** patient-treatments of bedaquiline across **83 countries**.

ENSURING SUPPLY SECURITY AND DRAMATIC PRICE REDUCTIONS FOR THE ALL-ORAL DR-TB TREATMENT REGIMENS:

★
GDF achieved a 50% reduction in the price of clofazimine

from US\$ 98 to US\$ 50 for the reference price of a pack of 100 caps. GDF contracted two new suppliers of clofazimine in 2019. This will ensure stronger supply security by having three suppliers with three different APIs sources.

★
GDF also achieved a 46% price reduction for linezolid 600mg

(from US\$ 140 to US\$ 75 for the reference price of a pack of 100 tabs). Linezolid's supply security is ensured through four suppliers.

KNOWLEDGE IS POWER:



GDF's catalogues and technical information notes are more than just a repository of available products; these materials provide free and user-friendly advice on the suite of products required for TB diagnosis and treatment.

FIVE REASONS TO PROCURE TB MEDICINES AND DIAGNOSTICS VIA GDF

1

GDF secures

COMPETITIVE AND SUSTAINABLE PRICES

that are available to all GDF clients **procuring with donor and domestic funds;**

2

GDF ensures

NEWLY-APPROVED MEDICINES AND FORMULATIONS ARE IMMEDIATELY AVAILABLE FOR PROCUREMENT;

then works with suppliers and National TB Programs to expedite their introduction;

3

GDF SAVES CLIENTS MILLIONS OF DOLLARS PER YEAR

through its order validation and flexible procurement systems;

4

GDF's Strategic Rotating Stockpile and pooled procurement approach enables

GDF TO RESPONDS TO URGENT ORDERS, THEREBY AVERTING STOCKOUTS

and,

5

GDF provides

TECHNICAL ASSISTANCE AND CAPACITY BUILDING ON QUANTIFICATION AND EARLY WARNING SYSTEM

to ensure uninterrupted treatment.



ALL COUNTRIES CAN PROCURE THROUGH GDF USING BOTH DONOR AND DOMESTIC FUNDING.

"We, Heads of State and Government and representatives of States and Governments encourage all nations to use the Stop TB Partnership's Global Drug Facility"

Resolution adopted by the UN General Assembly, October 2018

In 2019, GDF conducted

36 TECHNICAL ASSISTANCE MISSIONS

to countries in Africa, Asia, Eastern Europe and Central Asia.

FACILITATING REGISTRATION OF TB MEDICINES IN COUNTRIES:



The mandatory registration of TB medicines in many countries has become a significant impediment to the import of and access to TB medicines. By the end of September 2019, GDF had facilitated the registration of 89 TB medicines in seven countries where it is no longer possible to import products that are not registered. GDF will continue its efforts to facilitate the registration of TB medicines in countries in order to guarantee worldwide access to quality-assured TB medicines to all in need.

GDF conducted **ONE REGIONAL AND THREE COUNTRY QUANTIFICATION TRAININGS**

and provided guidance on procurement and supply chain management (PSM) at

FIVE REGIONAL WORKSHOPS

focusing on the transition to the new WHO treatment guidelines for multidrug- and rifampicin-resistant TB.

Representatives from 70 countries participated in and benefited from these events.

TREATMENTS DELIVERED



From its inception in 2001 to September 2019, GDF delivered:

- 2.4 MILLION CHILDREN WITH DRUG-SENSITIVE TB**
- 32.7 MILLION ADULTS WITH DRUG-SENSITIVE TB**
- 381 THOUSAND PEOPLE WITH DRUG-RESISTANT TB**

Stop TB Partnership's Working Groups

The Stop TB Partnership has nine different Implementing and Research/New Tools Working Groups and Task Forces that provide inputs on critical strategic issues for TB globally. The Stop TB Partnership Board draws on these inputs for decision-making. One of the strategic goals of the Partnership is to strengthen support for the Working Groups and facilitate collaboration among them. The Partnership identifies opportunities and gaps for new partners to engage in Working Groups through ongoing and regular dialogue with group members, stakeholders and partners, including experts and civil society

GLOBAL DRUG-RESISTANT TB INITIATIVE (GDI) WORKING GROUP

The GDI and Global Laboratory Initiative (GLI) Working Groups organized a joint workshop at the 50th Union World Conference on Lung Health, which took place in Hyderabad, India on 30 October – 2 November 2019. GDI and the TB, Human Rights, and the Law Task Force also completed work on the Judicial Handbook, which was presented and launched at a dedicated workshop event at the conference (WS-13-E3).

PUBLIC-PRIVATE MIX FOR TB CARE AND CONTROL (PPM) WORKING GROUP

The 14th Global Meeting of the PPM Working Group was held in Jakarta, Indonesia on 16–18 July 2019, bringing together over 150 representatives from NTPs, partners and civil society from across 20 countries. The focus for 2019 was the roll-out of the PPM Roadmap launched the previous year in The Hague.

CHILD AND ADOLESCENT TB (CA TB) WORKING GROUP

The CA TB Working Group continued its work in 2019 to decrease childhood TB mortality and morbidity. The Working Group currently counts 357 members among its partners and

is working to stabilize the funding situation before the end of the year.

GLOBAL LABORATORY INITIATIVE (GLI) WORKING GROUP

the GLI Core Group has worked on finalizing the following products that are expected to be released in 2019:

- ▶ **A practical guide to support the introduction of TB-LAM uptake:** Alignment with new recommendations for the use of this test is currently under discussion.
- ▶ **Practical guide to implementing a quality assurance system for Xpert MTB/RIF testing (and accompanying quick guide):** Revision of the information table on proficiency testing providers required further clarification.
- ▶ **TB laboratory safe working practices handbook:** The GLI Core Group has completed the final revision of this work, and the handbook is now in the layout and design stage.
- ▶ **Initial draft of the model diagnostic algorithms** was completed in June 2019, in collaboration with the WHO Global TB Programme.

END TB TRANSMISSION INITIATIVE (ETTI) WORKING GROUP



The Working Group held regular update calls and a Core Group meeting in June 2019. In August, ETTi elected three new Core Group members: Dr. Mustapha Gidado (Nigeria), Dr. Liu Yuhong (China) and Ms. Isabel Milagros Ochoa Delgado (Peru).

DRUG-RESISTANT TB SCALE-UP TREATMENT ACTION TEAM (DR-TB STAT)

Since 2015, DR-TB STAT has been working to monitor and support the use of newer and repurposed drugs and adjusted its activities in 2019 accordingly. DR-TB STAT will continue to use existing infrastructure and will now include the use of novel regimens under operational research conditions.

RESEARCH/NEW TOOLS WORKING GROUPS (NTWG)

In 2019, the Research/New Tools Working Groups continued discussions on how to track progress against the Global Plan, coordinated and facilitated by the Working Group on

New TB Vaccines (WGNV). The WGNV was initially hosted by AERAs and later transitioned to IAVI, the New Diagnostics Working Group (NDWG) is hosted by FIND, and the Working Group on New TB Drugs (WGND) is hosted by the TB Alliance. NTWG provided critical content for the Global Plan to End TB 2018–2022 with the updated New Tools chapter.

WORKING GROUP ON NEW TB VACCINES (WGNV)

WGNV is working to organize the 6th Global Forum on TB Vaccines is expected to take place in Western Europe in the first half of 2021.

NEW DIAGNOSTICS WORKING GROUP (NDWG)

The NDWG organized a joint symposium/annual meeting along with FIND, "Lighting the Path to TB Care – Advances in Diagnostics", and held a joint booth with FIND at the 50th Union World Conference. The annual meeting of the NDWG Core Group took place on 30 October 2019 also in Hyderabad, India.

Photography credit:

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**WORLD
TB DAY**

March 24 →

It's
TIME



For World TB Day 2020

→ **END
TB**