

SUMMARY SHEET

Agenda Nr. 2.04/1	Subject	Recent issues in progress of TB control	
For Information <input type="checkbox"/>	For Discussion <input type="checkbox"/>	For Decision <input checked="" type="checkbox"/>	
<p>Introduction</p> <p>Intensified Support Action Countries (ISAC) is a new initiative to accelerate DOTS Expansion with specific focus on the 2005 World Health Assembly targets supported by the DOTS Expansion WG, GFATM, other financial partners, and the Stop TB Partnership.</p> <p>Significant progress has been made towards tuberculosis control and the targets set by the World Health Assembly for 2005: to detect at least 70% of the estimated number of infectious TB cases and cure 85% of them. However, an assessment in 2002 revealed that, while the average treatment success rate in DOTS programmes is 82%, the case detection rate has risen steadily to just 37%, still far from the 70% target.</p> <p>A variety of factors are preventing more rapid progress in case detection and reporting under DOTS, in particular absence of support to build capacity or to establish mechanism to optimize the use of human resources and infrastructure.</p>			
<p>Summary</p> <p>Objective : To substantially increase technical capacity in selected countries in order to support the effective absorption of the newly available resources and to catalyze acceleration of TB control.</p> <p>Eligibility criteria for ISAC include:</p> <ul style="list-style-type: none"> • Burden of TB disease and/or of TB/HIV infection (absolute number and/or rate). • Presence of, or desire to have, in-country WHO or Stop TB partners' staff and intensified support. • Clear national commitment and potential capacity to implement TB control activities at country level, plus an enabling environment. • Availability of substantial funding for TB or TB/HIV control activities from GFATM, banks, and bilaterals. <p>Phase 1 countries</p> <p>India can be acknowledged as a country in which there is already intensified support and action for TB control. Sustaining the intensity of those efforts is considered key to success in India. The other ISACs are China, Indonesia, Kenya, Pakistan, Romania, the Russian Federation and Uganda. Three countries out of 7 have been fully funded, one have a very small shortfall, others three will have to reduce their ambitions as the resources found will not enable them to implement all activities planed. Funding comes from GFATM, CIDA, USAID, Japan, Italy, DFID, Norway. All countries have now started implementation of ISAC activities, 7 to 9 months after initial discussions.</p> <p>Next steps</p> <p>ISAC will be closely monitored through established systems to assess progress towards targets. Importantly, the ISAC initiative is a temporary measure and need to be phased out by incorporating technical support to countries as part of plans to scale up TB control. However the international technical support will still need to receive separate funding that ensure independence of support and possibility to organise regional and global activities for capacity building and review of the TB situation. Additional high-burden and other countries are being targeted for intensification of efforts in the second half of 2004 in Phase 2 of country selection.</p>			
<p>Decisions requested from the Stop TB Coordinating Board</p> <ul style="list-style-type: none"> - Endorsement of the plan to start with ISAC second tier countries. - Commitment to raise funding to support second tier countries 			
<p>Next steps and time frame</p>			
<p>WHAT</p> <p>Finalization of 2d tier list of countries and call for proposals</p>	<p>WHO</p> <p>DEWG</p>	<p>WHEN</p> <p>Before the DEWG meeting.</p>	<p>FOCAL POINT</p> <p>Secretariat of the DEWG</p>