

# Key areas of work in 2014 for Stop TB Partnership - Global Fund and Global Plan 2016-2020

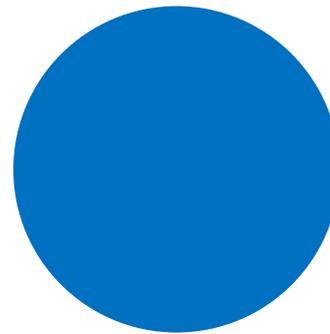
Lucica Ditiu / Suvanand Sahu

GDI meeting, 1 May 2014, Geneva

**Stop**  **Partnership**

the  
burden

TB incidence



target  
10 / 100k

global  
125 / 100k

year

2000

2010

2020

2

# the road to 10 / 100,000

TB incidence

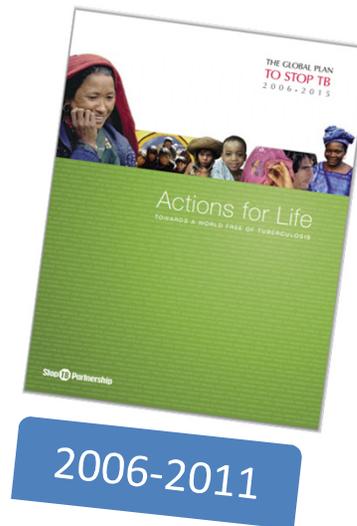
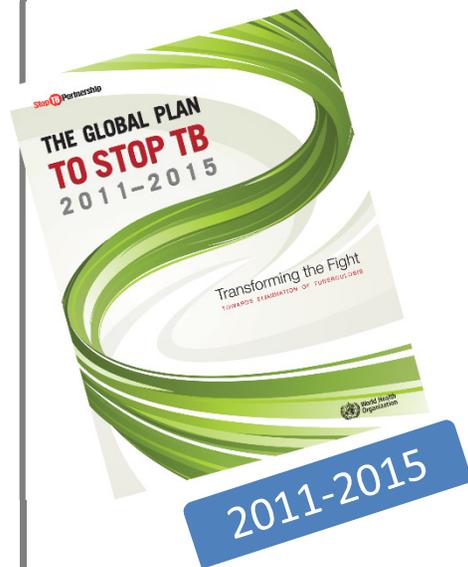


1.

## The Global Plan

## The Context

**The First Global Plan to Stop TB: 2001-2005.**  
**... followed by a ten-year plan, 2006-2015**  
**... which was updated with a 5-year plan: 2011-2015**



**Now we have started the work on the next 5-year plan: 2016-2020**

## Process

### Development of the Global Plan to Stop TB 2016-2020:

- Based on the WHO's "Global strategy and targets for tuberculosis prevention, care and control after 2015"
- Costed, practical and based on countries realities
- A wider group of stakeholders to be involved and consulted
- Commission
  - Analytic modelling of scenarios (8-9 countries)
  - Development of the New Tools section

## **Time table for the Global Plan:**

<b>May – June 2014:</b>	<b>Create the Task Force</b>
<b>June – October 2014:</b>	<b>Commission country modelling</b>
<b>October – December 2014:</b>	<b>Write initial draft</b>
<b>January – March 2015:</b>	<b>Conduct regional consultations</b>
<b>March – April 2015:</b>	<b>Conduct Stakeholder Consultations</b>
<b>April – June 2015:</b>	<b>Finalize draft</b>
<b>July 2015:</b>	<b>Approve the Plan</b>

2.

## Global Fund

Why we  
have  
enhanced  
our work  
with  
Global  
Fund

## Global Fund is important in the fight against TB

- Over 80% of external funding for TB
- Low income countries are entirely dependent of GF
- NFM changed the way GF will invest in countries

## Stop TB collaborations with GF

- Stop TB is on:
  - GF Board
  - SIIC
  - GAC
  - Disease Committee
- TB Situation Room initiative
- TB and HIV Working Group
- TA to countries for accessing NFM
  - CRG, TB REACH and GDF

## Positive outcomes of the work of Stop TB, WHO and Partners with Global Fund

- Over 700 million disbursed in 2013 (unprecedented)
- Allocation for TB increased from 16 to 18%
- Good replenishment of GF
- Joint TB and HIV proposal development
- Rapid supply mechanism with GDF
- Partnership TA agreements

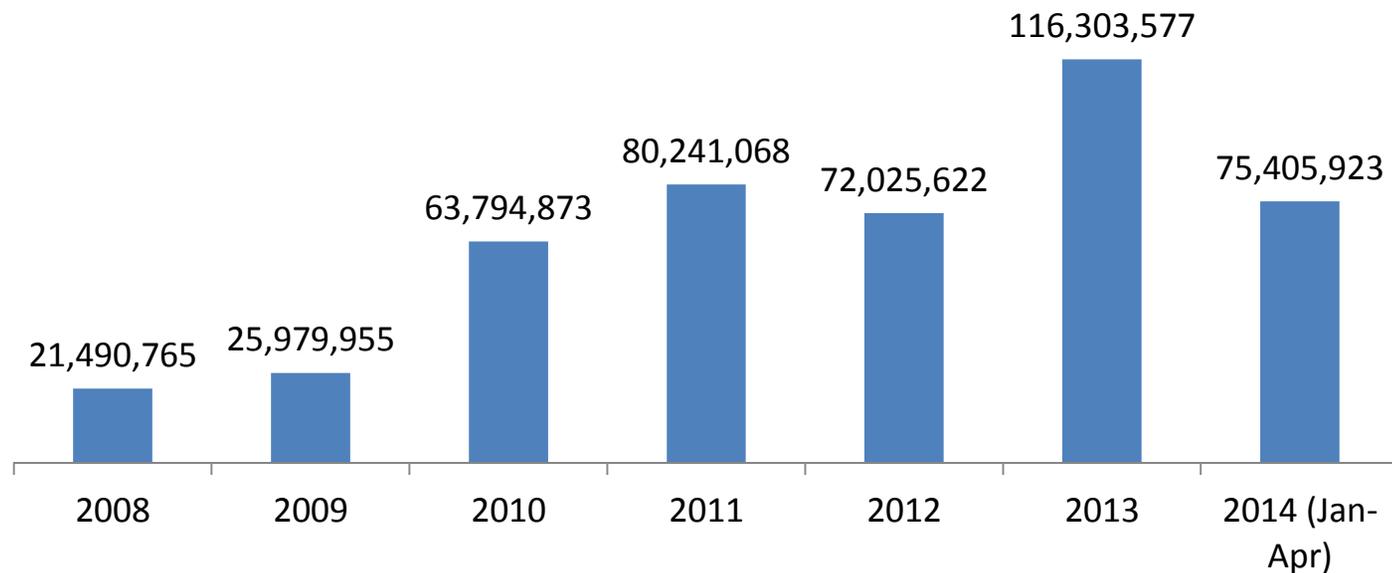
## Challenges

### Challenges related to Global Fund and TB

- Annual needs of TB from GF is 1.6 billion USD
- Allocation for TB is less than 0.7 billion USD per annum
  - CCMs could increase/decrease this amount
- Approx, 1 billion USD annual gap
  - Incentive pool of funds and regional proposals could reduce the gap
- How and what to prioritize in Concept Notes
  - GF policy: Invest for impact

Second line  
drugs

## Money value of GDF SLD orders (in USD)



- Almost all of this is funded by GF
- Already a large portion of the GF indicative allocations (nearly 20%)

3.

## Some other priority areas of work of STP

New

- New Operational Strategy
- New Structure
- New Governance with a streamlined, constituency based Board

Communities

Branding

TB REACH

GDF

**THANK  
YOU**