PREPARATIONS FOR THE SECOND UN HIGH LEVEL MEETING ON TB

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Current status of the TB epidemic

End TB commitments, action and status of progress

Why ending TB remains a global challenge?

What next and why this is a vital moment for the fight to end TB?

Linkages between agendas of Ending TB, Universal Health Coverage and Pandemic Preparedness
TB IS ONE OF THE TOP INFECTIOUS KILLERS IN THE WORLD BUT TB IS PREVENTABLE & CURABLE

It is the leading cause of death of people with HIV and a major contributor of antimicrobial resistance related deaths.

In 2021 alone,

- **1.6 million** people died from TB
- **10.6 million** people fell ill with TB
- **Half a million people** developed drug resistant forms of the disease

About a quarter of the global population is estimated to have been infected with TB bacteria.
TB affects every country of the world, but its magnitude & impact are greatest in low-and-middle income countries.

- More than 87% of global TB cases are in 30 high TB burden countries
- 68% of global cases in 2021 were in eight countries

TB affects people of all age groups

Men (56.5%), women (33.5%), children (11%)
Towards TB elimination in low incidence countries - definitions

- **Low incidence**
  - <100 cases (all forms) per million (<1/100,000)
  - Pre-elimination
    - By 2035
  - Elimination
    - By 2050

World Health Organization
COVID-19 HAS REVERSED YEARS OF PROGRESS IN THE FIGHT AGAINST TB

IN 2021

- **TB deaths and disease increased** reversing years of decline between 2005 and 2019
- **Fewer people were diagnosed and treated** or provided with TB preventive treatment
- **Fewer resources** for essential TB services and TB R&D
TB is a unique global health and development challenge.

- TB is driven by complex health and social determinants such as undernutrition and poverty.
- Half of people who develop TB disease face significant financial hardship because of their illness.
On the road to end TB - Commitments and targets

- End TB Strategy 2015
- Global Ministerial Conference to End TB, 2017
- UN High Level Meeting on TB, 2018
- UN SG Progress Report 2020

10 priority recommendations
END TB LEADERSHIP

WORLD HEALTH ORGANIZATION ROLE

Working for better health for everyone, everywhere including for those ill with tuberculosis

“Ending TB—this debilitating disease—remains a priority for WHO.”

Dr Tedros Adhanom Ghebreyesus, WHO Director-General
RAPID UPTAKE OF WHO POLICIES, TOOLS AND RECOMMENDATIONS

- Living guidelines
- Consolidated guidance
- Rapid updates (almost annual) based on new developments
- Public consultation
- Rapid communication
- Guidelines accompanied by operational handbooks and training courses to enable rapid implementation
DISSEMINATION & UPTAKE OF WHO TB GUIDELINES

OPEN WHO ONLINE TRAINING COURSES ON WHO TB GUIDELINES
STRENGTHENED MONITORING AND EVALUATION

Reporting of preliminary case notification data on a monthly or quarterly basis is ongoing.
PROGRESS TOWARDS END TB TARGETS
### 2018 UNHLM Declaration

1. Providing diagnosis and treatment with the aim of **successfully treating 40 million people** with TB from 2018 to 2022, including **3.5 million children**, and **1.5 million people** with drug-resistant TB;

2. Preventing TB for those most at risk of falling ill, through the rapid scaling up of access to testing and the provision of preventive treatment, so that at least **30 million people receive preventive treatment by 2022**, with specific targets for children, household contacts and people living with HIV;

3. Mobilizing **sufficient and sustainable financing**, with the aim of increasing overall global investments for ending TB, and reaching at least **US$ 13 billion a year by 2022**, with an additional **US$ 2 billion a year for TB research**;

4. Overcoming the **global public health crisis of multidrug-resistant TB** through actions for prevention, diagnosis, treatment and care;

5. Improving policies and systems on each country’s path towards achieving and sustaining universal health coverage;

6. Enabling and pursuing **multisectoral collaboration** at the global, regional, national and local levels;

7. Addressing the economic and social determinants of the disease; **promoting an end to stigma** and all forms of discrimination, including through the protection and promotion of human rights and dignity; and providing special attention to the poor, vulnerable and communities especially at risk;

8. Advancing research and innovation through global collaboration including through WHO mechanisms, and networks;

9. Requesting the Director-General of WHO to continue to develop the **multisectoral accountability framework** and ensure its timely implementation no later than 2019;

10. Requesting the Secretary-General of the UN, with the support of WHO, to provide a **progress report in 2020** on global and national progress, which will serve to inform preparations for a comprehensive review by Heads of State and Government at a high-level meeting in 2023;
ACCELERATED ACTION REQUIRED TO REACH SDG AND END TB STRATEGY TARGETS

**TB INCIDENCE**
- Milestone: 50% reduction 2015-2025
- Milestone: 10% reduction 2015-2021

**NUMBER OF TB DEATHS**
- Milestone: 75% reduction 2015-2025
- Milestone: 5.9% reduction 2015-2021

**% OF PEOPLE WITH TB FACING CATASTROPHIC COSTS**
- Milestone: ZERO reduction in 2025
- Milestone: 48% of people with TB face catastrophic costs
GLOBAL PROGRESS IN THE NUMBER OF PEOPLE TREATED LAGS BEHIND

Urgent action required to ensure universal access to care, especially for people with drug-resistant TB

**TB TREATMENT (ALL AGES)**

Target: 40 million 2018-2022

66% treated in 2018-2021

26.3 million treated in 2018-2021

**TB TREATMENT (CHILDREN)**

Target: 3.5 million 2018-2022

54% treated in 2018-2021

1.9 million treated in 2018-2021

**MDR/RR-TB TREATMENT (ALL AGES)**

Target: 1.5 million 2018-2022

43% treated in 2018-2021

649 000 treated in 2018-2021

**MDR/RR-TB TREATMENT (CHILDREN)**

Target: 115 000 2018-2022

15% treated in 2018-2021

17 700 treated in 2018-2021
GLOBAL PROGRESS IN PROVISION OF TB PREVENTIVE TREATMENT LAGS BEHIND

TB PREVENTIVE TREATMENT (ALL AGES)
Target: 30 million 2018-2022
42% treated in 12.5 million 2018-2021

PEOPLE LIVING WITH HIV
Target: 6 million 2018-2022
10.3 million >100% treated in 2018-2021

HOUSEHOLD CONTACTS AGED <5 YEARS
Target: 4 million 2018-2022
1.6 million 40% treated in 2018-2021

HOUSEHOLD CONTACTS AGED ≥5 YEARS
Target: 20 million 2018-2022
0.60 million 3.0% treated in 2018-2021

WHO recommends preventive treatment for people living with HIV and all contacts living in households with TB (including children under 5 years)
**FUNDING GAPS FOR IMPLEMENTATION AND RESEARCH IMPEDE PROGRESS**

**UNIVERSAL ACCESS TO TB PREVENTION, DIAGNOSIS, TREATMENT AND CARE**

Target: US$13 billion annually by 2022

Only US$5.4 billion spent on TB services in 2021

**TB RESEARCH**

Target: US$2 billion annually 2018-2022

Only US$0.9 billion invested in TB research in 2020
PROGRESS IN THE ACHIEVEMENT OF COMMITMENTS

• WHO-led monthly/annual monitoring and reporting from over 100/200 countries on TB epidemiology and management help countries address urgent needs in real time and plan properly activities;

• Under the DG’s FIND.TREAT.ALL#ENDTB flagship initiative support has been provided to more than 100 countries, including 49 countries with high TB burden;

• WHO developed new consolidated TB guidelines, recommending for the first time fully oral, shorter (2-3 times), more effective treatment, including for MDR TB;

• Two new anti-TB drugs and 12 new TB diagnostic tests were recommended by WHO.

• All WHO-recommended oral medicines for the treatment of MDR-TB in children have a child-friendly formulation commercially available.

• 109 Countries using recommended by WHO all-oral new treatment of MDR TB,

• 26 out of 30 highest TB burden countries using WHO-recommended rapid molecular diagnostic test;

• Child-friendly drug formulations for MDR-TB available in 74 countries;

• New effective drugs for TB treatment are available due to the WHO effective collaboration of WHO, member states, partners, such as STB Partnership, UNITAID, GF, USAID manufactures and civil society
PROGRESS IN THE ACHIEVEMENT OF OTHER COMMITMENTS

• Multisectoral response and accountability
  • National multisectoral accountability under high-level leadership among 70% of high-tuberculosis burden
  • Global reporting: Biennial reporting to WHA, UNSG report 2020

• Political leadership
  • Global political fora such as BRICS, G20, and ASEAN

• Civil society and community engagement
  • Increased engagement of civil society and TB-affected communities in all aspects of the TB response
  • Establishment and contribution of the WHO Civil Society Taskforce
Implementation of the global strategy for TB research and innovation

Vaccine for adults:
- 50% eff. avert 37.2–76 million TB incid. and 4.6–8.5 million TB deaths
- 75% eff. avert 54–110 million TB incid. and 6.7–12.3 million TB deaths
WHY ENDING TB REMAINS A CHALLENGE?

- Barriers in access to health services due to inequities, stigma and discrimination
- Lack of investments and prioritization
- Impact of COVID-19 pandemic
- Drug resistance
- Infection pool of about 2 billion people
- Drivers of the epidemic including poverty and undernutrition, HIV, diabetes, tobacco and alcohol use
- Slow R&D- we urgently need new TB vaccines, affordable POC diagnostics, safer and more effective treatments
- Increasing vulnerability because of conflicts & mass displacement
- Climate change, air pollution, crowding, urban population in slums
WHAT NEXT & WHY THIS IS A VITAL MOMENT FOR THE FIGHT TO END TB?

Building on the 2018 political commitments, world leaders have a unique opportunity to reverse the impact of the COVID-19 pandemic on the TB response and to accelerate progress towards the SDGs

- Put prevention and treatment at the heart of the response – universal access for all people
- Improve quality of care, through high quality diagnostic, and quality assured medicines coverage)
- End the drug-resistant TB crisis by closing gaps in prevention, diagnosis and treatment
- Adequately and sustainably fund the TB response including by increasing funding for research and development
- Advance Research and development to develop safer and shorter treatment regimens, point of care of tests that can be used at community levels, and novel TB vaccines to achieve a sharper decline in disease incidence
- Advance multisectoral response and accountability to reduce infection, disease and mortality, by addressing determinants such as poverty, undernutrition and the prevalence of HIV infection, diabetes, mental health and smoking.
The TB response (e.g. treatment access, or epidemiology) can serve as surrogates to measure progress towards universal health coverage, especially in countries with a high TB burden.

**TB IS A TRACER FOR UNIVERSAL HEALTH COVERAGE, PARTICULARLY IN HIGH TB BURDEN COUNTRIES**

Within TB services, TB care and prevention should also fulfil key attributes of UHC (access, quality and financial protection) in a coherent manner.

Achieving UHC within TB care and prevention

Policy interactions between UHC and TB policies
INVESTING IN THE TB RESPONSE STRENGTHENS PANDEMIC PREVENTION, PREPAREDNESS AND RESPONSE

➢ **How?** - by strengthening public health measures to prevent, detect, and respond to new *air-borne* epidemics, and pandemics (e.g., surveillance and information systems, research and laboratory infrastructures) and universal and rights-based access to health services

➢ **Lessons from the response to COVID-19**: TB molecular diagnostic infrastructures, screening, surveillance and contact tracing platforms and staff were extensively used to support the response to the COVID-19 pandemic in many countries
Universal Access to TB Prevention & Care: Towards UHC

- Announced on World TB Day 2023
- The implementation of the Flagship Initiative will accelerate progress towards ending TB through 2023 and 2027.
- WHO will work closely with countries, UN agencies, partners and civil society to build on the spirit of collaboration and trust to deliver early and tangible gains towards reaching end TB targets.
New targets to fast-track progress

The initiative covers a period of 5 years from 2023 to 2027, with a milestone of 2025, that matches the 2025 milestones of the End TB Strategy.

High level targets and additional complementary targets have been proposed to drive commitment and action. Process indicators will also be prioritized covering areas such as uptake of new tools, WHO policies, etc.

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<th>INDICATORS</th>
<th>TARGETS</th>
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| **1. Universal access to WHO-recommended TB treatment for all** | 90% people reached with TB treatment between 2023-2027  
(End TB Strategy target is ≥ 90% by 2025) |
| **2. Universal access to WHO-recommended rapid diagnostic tests for all** | 100% of people diagnosed with TB were tested initially with a WHO recommended diagnostic test  
(End TB Strategy target is ≥ 90% by 2025) |
| **3. Universal access to TB preventive treatment for all** | 90% reached with TB preventive treatment between 2023-2027  
(End TB Strategy target is ≥ 90% by 2025) |
| **4. Financial risk protection for vulnerable people with TB (process indicator)** | 100%  
All (eligible) people with TB, have access to health and social benefits package so they don’t endure financial hardship because of TB disease |
| **5. License a new TB vaccine to accelerate TB incidence decline (process indicator)** | Licensing of at least one new TB vaccine by 2025 |
| **6. Sustained and adequate financing for TB services and TB research and innovation (process indicator)** | Reaching US$22 billion annually by 2027  
US $5 billion per year for research by 2027 |
REQUEST TO WHO TO SUPPORT PREPARATIONS FOR THE 2023 UN HIGH LEVEL MEETING ON TB

10 PRIORITY RECOMMENDATIONS OF THE UN SECRETARY-GENERAL’S 2020 PROGRESS REPORT ON TB FOR ACTIONS NEEDED TO ACCELERATE PROGRESS TOWARDS GLOBAL TB TARGETS

1. Fully activate high-level leadership to urgently reduce TB deaths and drive multisectoral action to end TB

2. Urgently increase funding for essential TB services including for the health workforce

3. Advance universal health coverage to ensure all people with TB have access to affordable quality care and resolve under-reporting challenges

4. Address the drug-resistant TB crisis to close

7. Ensure meaningful engagement of civil society, communities and people affected by TB

8. Substantially increase investments in TB research to drive technological breakthroughs and rapid uptake of innovations

9. Ensure that TB prevention and care are safeguarded in the context of COVID-19 and other emerging threats

10. Request WHO to continue to provide global leadership for the TB response, working in close collaboration with Member States and other stakeholders, including to prepare for a high-level meeting on TB in 2023, that aligns with the high level meeting of the General Assembly on universal health coverage also to be held in 2023
Date: 22 September, 2023
Where: UN Headquarters, New York

Co-facilitators: Uzbekistan and Poland

MULTISTAKEHOLDER HEARING: 8-9 May, 2023
Participants: UN Member States at the highest possible level, preferably at the level of Heads of State and Government; observers of the General Assembly; NGOs, civil society organizations, academic institutions and the private sector

LEADERSHIP: OFFICE OF THE PRESIDENT OF THE GENERAL ASSEMBLY with UNSG and WHO
H.E. Mr Csaba Kőrösi, President of the UN General Assembly

HLM outcome: concise and action-oriented political declaration, agreed in advance by consensus through intergovernmental negotiations
2018-2020

UNHLM-TB 2018
A/RES/73/3

UNSG progress report
A/75/236

2022

May

UNHLM-TB 2018
A/RES/73/3

WHA progress Report
(WHA73/2022/REC/1)

September

Sde-event
(UNGA77): Progress and multisectoral action towards achieving global targets to end TB

Oct/Nov

Appointment of co-facilitators

2023

February

Res. on scope, modalities, format & organization
(A/77/274)

March

MS briefing
(NY)

--April--

UNSG progress report

-----May-----

MS briefing
(Geneva)

July

3-5 July WHO STAG-TB

22 Sept

Inter-governmental negotiation

WHA76

UN High-Level Meeting on ending TB

Linkages between agendas of Ending TB, Universal Health Coverage and Pandemic Preparedness
20 MARCH: UN MISSION BRIEFING
Organized by the Permanent Missions of Poland and Uzbekistan to the UN and WHO

Over 50 Permanent Missions to the UN in attendance
Each of the Multi-stakeholder Hearings will be a half-day event which will take place on 8 - 9 May at the United Nations Headquarters in New York, USA.

**TB Multistakeholder Hearing on 8 May at 3pm EST**

Each half-day interactive Hearing will be divided into an opening segment, two interactive panel discussions and a closing segment. The Multi-stakeholder Hearing on TB will feature two panels covering themes aligned with the panels set in the scope and modalities document of the UN High Level Meeting on TB.

WHO in collaboration with Stop TB Partnership organizing the Hearing
GLOBAL: PROGRESS REPORT ON TB

1. Introduction
2. Progress towards global TB targets: Where do we stand? (advances and challenges)
   • End TB Strategy targets
   • 2018 UNHLM targets
3. Progress in translating commitments into action
4. Impact and implications of Covid 19 and other crises
5. Recommendations for consideration by Member States during the negotiations on the 2023 political declaration on TB

12. Requests the Secretary-General, with the support of the World Health Organization, to submit a follow-up comprehensive and analytical report on progress achieved and challenges remaining in realizing tuberculosis goals within the context of achieving the 2030 Agenda for Sustainable Development, including on the progress and implementation of the 2018 political declaration of the high-level meeting of the General Assembly on the fight against tuberculosis, which will serve to inform the preparations for a comprehensive review by Heads of State and Government at the high-level meeting in 2023:
ALL HANDS-ON-DECK REQUIRED TO PREPARE FOR A SUCCESSFUL UN HIGH LEVEL MEETING ON TB

- **Strategic dialogue and advocacy**, and leveraging key moments in the next months for highest level engagement and multisectoral action
- Contribution to 2nd UNHLM **political declaration** and encouraging Head-of-State participation
- MAF-TB implementation accelerated, including **high level reviews of progress**
THANK YOU!

WORLD TB DAY
24 March 2023