

Stop TB Coordinating Board Meeting

The Hague, The Netherlands* 10-12 October 2003

Progress Report of the activities of the Stop TB Partnership Secretariat

January to September 2003

Overview

With the departure of the Executive Secretary and the GDF Manager in February of this year, the Partnership Secretariat has faced a considerable challenge. This 9 month period was characterised by an acknowledgement of the critical role of GDF as documented by the evaluation done by McKinsey and Partners. However, even with this very positive report available, it has been extremely difficult to get firm financial contributions from donors to sustain operations of GDF, one of the flagship of the Stop TB Partnership. It has become evident that the start up funding for GDF provided by CIDA and other donors needs to be replaced by steady funding to guarantee a smooth operation of GDF and ultimately of the Stop TB Partnership and DOTS Expansion. Social mobilization, advocacy and communications need to become pillars in a reinvigored fight against tuberculosis.

Progress on Partnerships activities

- The *fifth Coordinating Board* meeting took place in Brasilia from 3 to 5 April 2003 and 7 teleconferences were held to discuss critical issues for the partnership.
- > Preparations for the Partners Forum to be held in India from 4 to 5 December 2003 are ongoing.
- The **Partnership evaluation** conducted by IHSD is **ongoing** and an interim report will be presented at the fifth Board meeting.
- The American and European Regions have conducted meetings to engage more partners while the African and European Regions have done further work in building regional partnerships.
- Indonesia and Russia have conducted national meetings with support of Secretariat to assist national partnership in global fund applications.
- Working Groups A meeting with the Secretariat Focal Points was held in Geneva in March 2003 and subsequent meeting was held with WG Chairs and Secretariat Focal Points following the CB meeting held in Brasilia, 5 April 2003. Other Working Group meetings held were Vaccines Working Group Meeting in Geneva, 31 March 1 April 2003 and TB/HIV Working Group in Montreaux, 4-6 June 2003. DEWG will meet in the Hague, 7-8 October and GATB in October in Paris.
- The *Partnership Directory* has been cleaned up and status of all existing Partners have been revalidated. A CD-rom will be available during the Partners Forum.
- > An **MOU with GFATM** is under discussion and close links have been made with Malaria and HIV initiatives.
- The **Resource Mobilization Directory (RMD)** has been finalized. Projects amounting to USD29million have been listed and further input is expected from the Working Groups.
- The *RMD contact booklet* has been completed and submitted to the World Economic Forum, which has been so far disseminated to Asia and Africa by the WEF.
- A resource mobilization strategist has been contracted to prepare the **resource mobilization strategy** for the partnership.
- The **Workplace Guidelines** were launched at the summit in Durban in June 2003. ILO and WEF as partners to this project have produced the bridging materials to be implemented at the Regions.
- Updating of the Global Plan to Stop TB is being undertaken by Partners in Health with financial support from OSI.

Progress on Global TB Drug Facility (GDF)

- Sixth round of TRC Meeting held in March 2003 with 14 applications received. Out of 14 applications 11 were recommended for approval with a total value of the grant of USD3,242,606 which translates to 53,931 patient treatments.
- During the first half of 2003 new drug orders were placed for 8 countries and drugs from previously placed orders were delivered to 14 countries.



- The *Mayetic Village*, a shared secure website, *is now online* enabling *TRC members to review and vote* on emergency and monitoring applications over the internet without having to come to Geneva.
- ➤ **GDF Procurement Agent: UNDP/IAPSO**, the original GDF procurement agent, has **won** the tender for a second term thus renewing their contract for a further two years.
- Pre-qualification of manufacturers of TB products: Progress has been made in the production of the pre-qualified list of first and second line TB drug manufacturers meeting WHO/international standards. Completion of the first list will take place in September 2003, with publication of the same planned by mid October 2003.
- ➤ Patient kits: Proto-types of two patient kits one for Categories I and III and a second for Category II have been *produced for field trials*. Each contains enough drugs for one full course of treatment and includes an illustrated instruction booklet.
- > The *GDF Direct Procurement Service* was officially launched during the reporting period with a pro-active advocacy campaign involving the distribution of the recently produced Direct Procurement Information Dossier. *Nepal* has already placed an *order for US\$580,000* worth of patient treatments. The contract with the *Philippines* for the purchase of *US\$4,300,000* worth of patient treatments has been finalized and the order placement will follow shortly. A contract with *Lagos State, Nigeria*, for approximately *US\$60,000* worth of patient treatments is being finalized. A contract with *Morocco* is currently *under negotiation*.
- The number of countries **monitored and approved** for a second year of GDF support during the reporting period is **5**, **raising the total number to 9**.
- The GDF has developed a strong partnership with Procter and Gamble in Geneva who have provided 5 volunteers to work with the GDF on branding and on marketing of the GDF Direct Procurement Service.
- An **external evaluation**, undertaken by McKinsey & Company to determine the future and governance of the GDF, was **completed in April 2003** with some very **positive** conclusions.
- Work continues on improving GDF/GFATM collaboration. The GDF has produced a working paper outlining how this might be done and current discussions between the respective Secretariats seek to turn this paper into practice.
- > GDF is now actively **searching** for donors for 2004 and 2005 for a funding requirement to cover the **current commitments of USD27 million.**

Progress on Advocacy and Communications

World TB Day - 24 March 2003

A total of 51 countries reported organizing WTBD programmes in 2003, compared to 53 in 2002. Nearly all countries followed the patient-focused theme promoted by the Secretariat ("DOTS Cured Me - It Will Cure You Too") and involved TB patients in public events. Several countries staged extremely ambitious programs with numerous media and social mobilization events, most notably India, Nepal, Philippines, Russia and South Africa. The Secretariat co-funded a 25-min documentary film on tuberculosis in Europe called 'The Return of TB' that it distributed to 22 selected countries of the region for WTBD and was broadcast on television in three of them - Kosovo, The Netherlands and Slovakia. In addition, two major global media events were organized by the Secretariat to commemorate the '10/10" milestones. One event was in London featuring UK Secretary of State for International Development Clare Short and new WHO Director General-elect JW Lee. The other was co-organized in Washington D.C. with USAID and the National Coalition to Eliminate Tuberculosis and featured Tommy Thompson, Anne Peterson and Ken Castro. The Secretariat will publish a full 4-color Highlights Report on WTBD 2003 in mid-October.

Cricket World Cup

This year's Cricket World Cup (CWC) was hosted by South Africa and involved 6 major HBCs as participants. To capitalize on this unique opportunity, the Secretariat organized a special 'Hit TB for a 6!" initiative with the CWC and NTCP of South Africa. Main activities were: 1) a media launch with CWC Executive Director Ali Bacher and SA Minister of Health at CWC headquarters in Johannesburg, which was covered in all major SA dailies and SABC television; 2) production of 'Hit TB for a 6!' public service announcements with Indian cricket stars Zaheer Khan and Rahul Dravid that were broadcast repeatedly by Indian TV during the semi-final and final matches; 3) production of a 9-part series of 60-second spots with 'Hit TB for a 6!' messages that were broadcast by 50 community radio stations in South Africa; and 4) 'Hit TB for a 6!' announcements played over public address systems in stadiums during the semi-final and final matches.

Communication for Behavioural Impact (COMBI) projects

COMBI projects to accelerate case detection are set to begin in *Kenya* (nationwide) and *India (Kerala State)* in October 2003 with the following preparatory activities having been completed:

- Rapid assessment of advocacy and communication capacities in the 22 HBCs
- Preparation of a **COMBI Best practices handbook**
- Preparation of indicators and data collection mechanisms to evaluate COMBI impact
- Administrative mobilization in Kenya and Kerala State to implement COMBI projects
- Technical assistance and production of materials have been completed to initiate implementation of activities A COMBI action planning exercise was also completed for **Bangladesh** in late 2002, but the NTP only received permission from the MoH to go forward with the COMBI in July of this year. Discussion are now underway about the scope and location of the COMBI.

Experts Consultation on Social Mobilization

As part of the preparatory activities for the 2nd Report of the Ad Hoc Committee on the TB Epidemic, the Secretariat organized this consultation with 15 leading experts in programme communication from 29 June to 1 July 2003 in Cancun, Mexico. The objective of the consultation was to establish a strategic framework for building communication capacity at country level to support DOTS expansion, with three questions in mind:

- What set of communications and social mobilization interventions can rapidly improve TB case-detection and treatment outcomes in a relatively short period of time (2003 2005), and then sustain these rates over a much longer period of time (2005 2015)?
- What factors hamper the widespread implementation of communications/social mobilisation interventions in the TB-endemic countries, and what options are available to deal with them?

Aside from epidemiological data, what other key information needs to be gathered and analysed on an on-going basis by the NTPs to guide the communications and social mobilisation interventions for stopping TB?

Stop TB Advocacy and Communication Task Force meeting

The Secretariat organized this annual meeting from 7-9 September 2003 in Johannesburg, South Africa, with more than 50 participants including 5 African NTPs, 3 donors, programme communication specialists, advocacy NGOs, GFATM, UNAIDS and members of the TB/HIV Working Group. Main outcomes:

- Discussion and approval of 2004-2005 workplan for a) global advocacy, b) national/subnational level communication and c) joint TB/HIV campaign
- Formation of a new 10-member Core Group representing the Task Force constituencies to strengthen planning, coordination, implementation and reporting of A&C activities

Strong recommendation to increase funding for Stop TB advocacy and communication in line with the Global Plan, and to strengthen A&C staff resources in the Secretariat.

> Stop TB Image Library

The library was launched in end-January 2003 and as of 30 April had registered the following statistics:

- total of 6,000 visits, of whom about half were repeat visitors
- total of 550 image downloads
- 54% of visitors from USA, 25% from EU countries
- Regular Stop TB information products were produced on schedule, ie monthly e-communiques, weekly web alerts, publication of two newsletters.

Progress on *Administration*

- Recruitment and selection of the *Executive Secretary* has been completed in a transparent and consultative manner.
- ➤ 2004-2005 Workplan for Secretariat has been prepared for the Coordinating Board's review and consideration. In addition the workplans of the Working Groups were also included for Board's endorsement of the respective working groups funding requirements.
- > Staffing It has been clearly identified that the area of mobilizing of funds is critical in carrying out the many future activities of the Stop TB Partnership. Closely linked to this is also the need to reinforce activities in Advocacy and Communications to further raise public awareness. Therefore, work is underway to advertise and hire 2 additional staff to support in these weak areas, i.e. a Resource Administrator and an Advocacy and Communications Officer.