January 2012 Coordinating Board

Global Task Force on TB Impact Measurement

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- To produce robust, rigorous, widely-endorsed assessment of whether 2015 targets are achieved at global level, regional and country levels
- To regularly report on progress towards impact targets in years leading up to 2015
- To strengthen national capacity in monitoring and evaluation of TB control



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3 strategic areas of work

- Strengthening surveillance of cases and deaths in all countries, with ultimate goal of direct measurement from notification and vital registration data
- National TB prevalence surveys in ≥ 21 global focus countries
- Periodic review and revision of methods used to translate surveillance and survey data into estimates of disease burden



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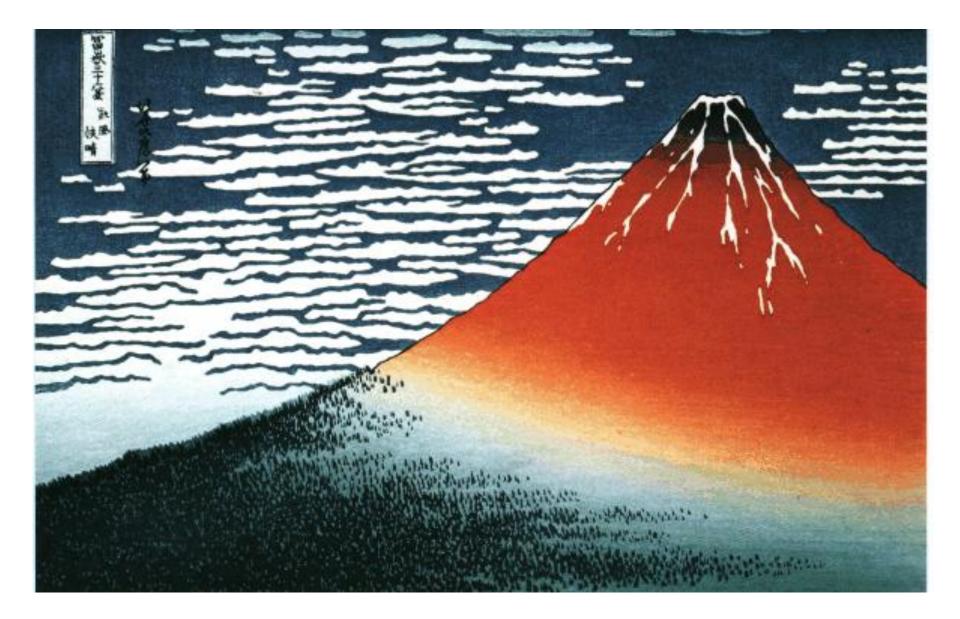
Progress since Johannesburg CB 2010: main messages

- Prevalence of TB disease surveys: major global momentum achieved - must be sustained in the critical years of 2012 and 2013
- Surveillance/M&E: Accelerated progress since mid-2011, facilitated by intensified WHO-CDC collaboration and continued joint efforts with Global Fund – potential needs to be fully realised
- Methods: Further progress on direct measurement of mortality, notably in China and India



STOP TB Delay paper TB Inpact Measurement Delay and the mean and the m

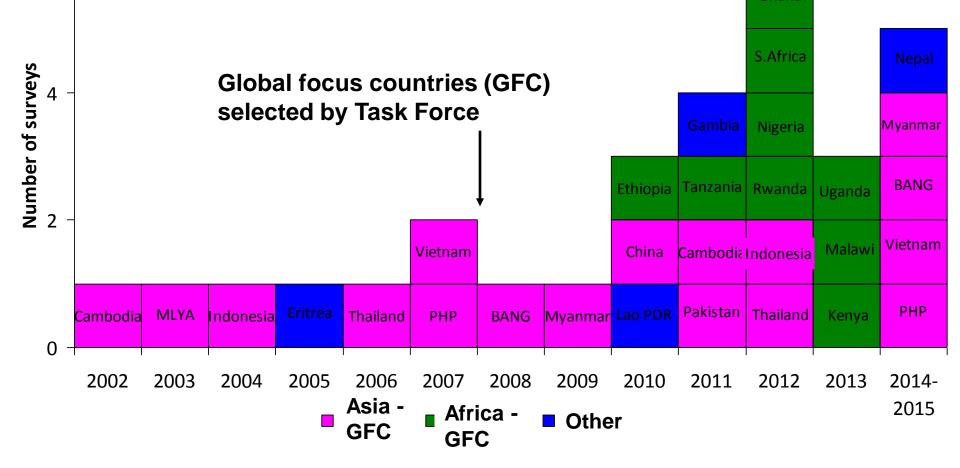




Prevalence surveys major global momentum

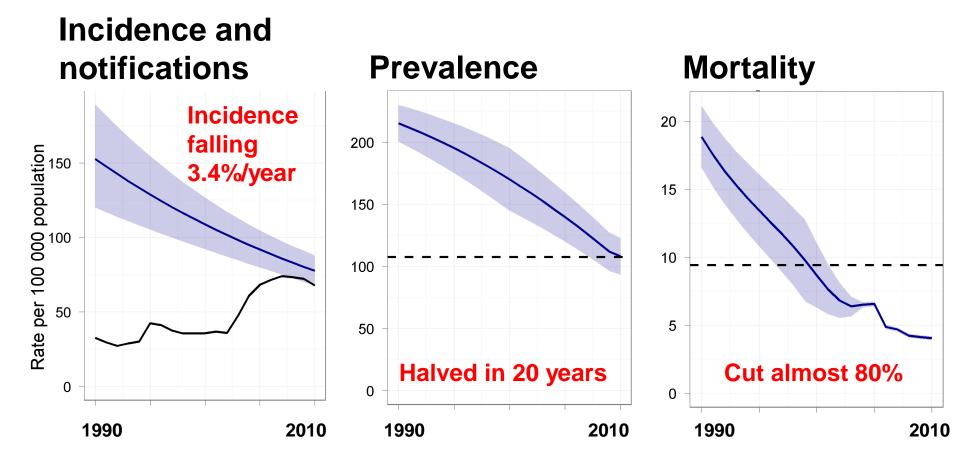
Underpinned by "AA" collaboration + global coordination among international technical and financial partners

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Ghana

Substantial reductions in TB cases and deaths in China, 1990–2010



Ethiopia 2010/11

first survey in Africa in 50 years following WHO guidelines

| | Sm+ (per 100,000) | Bacteriologically+ (per 100,000) |
|-----------|-------------------|----------------------------------|
| ≥15 years | 108 (73–143) | 277 (208–347) |



- Observed prevalence much less than previously estimated
- Laboratory and radiology capacity (staff and infrastructure) insufficient to detect cases early

BREAKING NEWS 30 January

Cambodia: results from 2011 repeat survey (baseline 2002) being released next week





Strengthening surveillance/M&E

 Ultimate goal – direct measurement of cases and deaths from notification and vital registration data

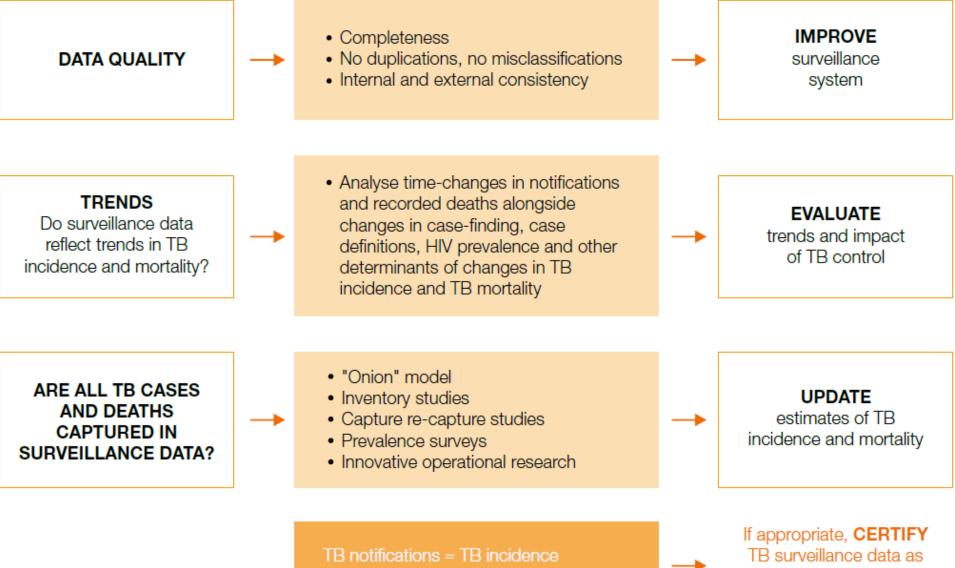
Estimates of disease burden highly reliant on expert opinion if S&B not met, better quantification of "surveillance gap" e.g. via inventory studies

improved estimates

Progressively better estimates based more and more on direct measurements from surveillance data that meet standards and benchmarks (S&B) (already major progress on mortality)

Recommendations for how to strengthen surveillance to move closer to the goal

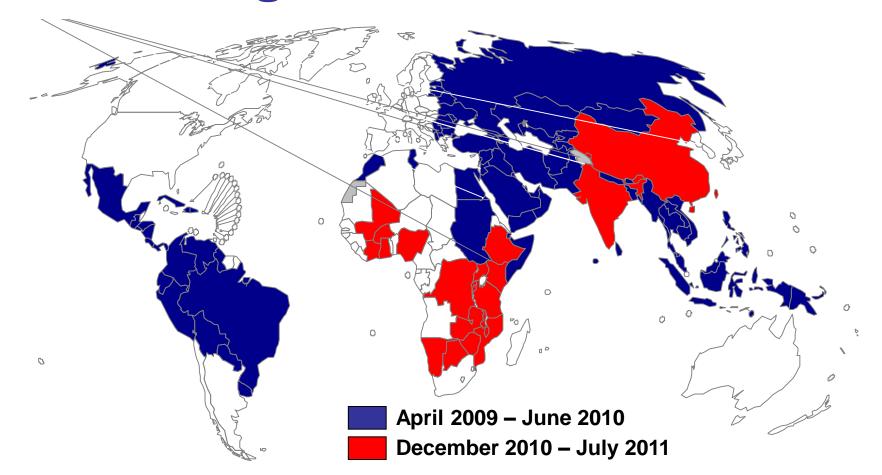
Strengthening surveillance



TB deaths in VR system ≈ TB mortality

TB surveillance data as direct measure of TB incidence and mortality

Major progress in measuring and estimating disease burden



96 country consultations in 2 years 17 African countries plus India and China in past year



Direct measurements of mortality

national vital registration (90 countries) + mortality surveys (India)

α 0 91 countries, 46% estimated global TB deaths, Up from 89 countries with 8% global TB deaths in 2010 China and India for the first time in 2011

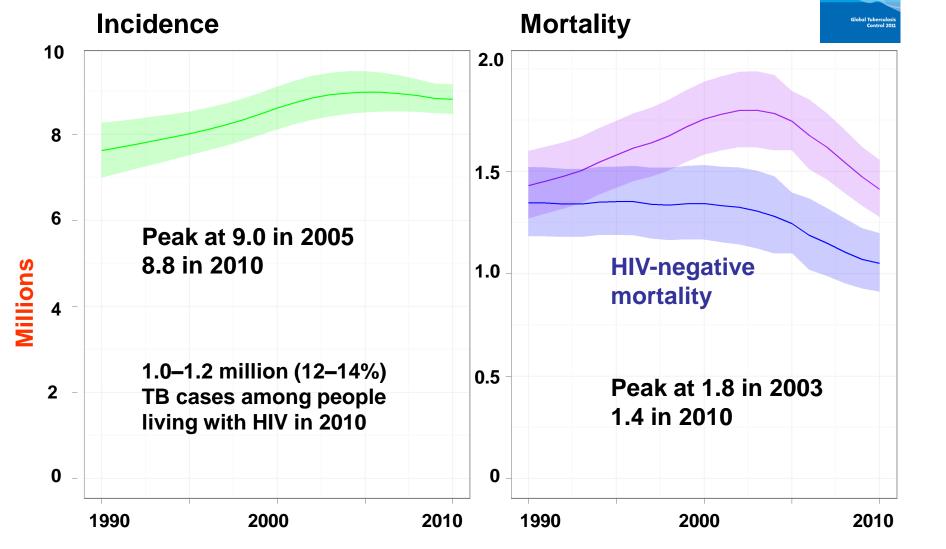
Surveillance: 4 priorities for 2011 IMPROVE Completeness No duplications, no misclassifications DATA QUALITY surveillance Internal and external consistency system **1. Electronic recording and reporting** Analyse time-changes in notifications TRENDS and recorded deaths alongside EVALUATE Do surveillance data changes in case-finding, case trends and impact reflect trends in TB definitions, HIV prevalence and other of TB control incidence and mortality? determinants of changes in TB incidence and TB mortality 2. Guide on inventory studies to measure under-reporting "Onion" model ARE ALL TB CASES UPDATE Inventory studies AND DEATHS Capture re-capture studies estimates of TB CAPTURED IN incidence and mortality Prevalence surveys SURVEILLANCE DATA? Innovative operational research 3. Definition of 4. "Institutionalize" use standards/benchmarks of S&B + related efforts to If appropriate, **CERTIFY** strengthen surveillance TB notifications ≈ TB incidence TB surveillance data as direct measure of TB via GF grants incidence and mortality



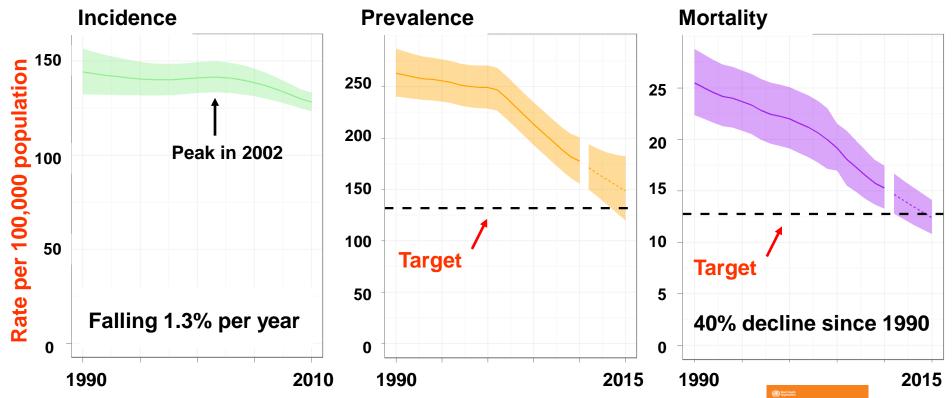
Review/update of methods

- 18-month review by subgroup, mid 2008–2009
- Updated methods endorsed by full Task Force in March 2010 and applied in WHO global reports
- Global Burden of Disease study?

TB cases and deaths, 1990–2010 absolute numbers



Incidence, prevalence and mortality rates: global estimates







Next steps and priorities in 2012/13 Task Force meeting May 9-10

1. Prevalence surveys – maintain momentum 2012/13

- Finalize/disseminate/publish results from China, Myanmar, Ethiopia, Cambodia, Laos, Pakistan
- High-quality surveys in Tanzania, Gambia, Rwanda, Nigeria, Thailand, Ghana, S. Africa, Malawi, Uganda, Kenya, Indonesia
- Paper summarizing results + lessons learned, recent surveys

2. Strengthening surveillance/M&E – gaining momentum

- Finalize standards and benchmarks (including mainstreaming surveillance of drug resistance)
- Publish and disseminate guides on electronic recording & reporting and inventory studies
- Institutionalize strengthening surveillance/M&E via widespread and systematic roll-out of standards and benchmarks alongside ERR and inventory studies: NEEDS MORE SUPPORT

Request to Coordinating Board

In general: commitment to strategic and (where possible) financial support

Strengthening surveillance/M&E

 Additional strategic and financial support to bring Task Force work to its full potential

Prevalence surveys

 US\$0.3 million/year required for global coordination, including AA collaboration

