

Opening Session

Decision Point 31-1

1. The Board adopts the proposed agenda for the 31st Stop TB Partnership Board meeting.
2. The Board notes the progress on addressing the decision points from the 30th Stop TB Partnership Board meeting.
3. The Board acknowledges the renewal of the memberships of the Minister of Health of Brazil, Minister of Health of India and Minister of Health of Mozambique for subsequent three-year terms and welcomes the following new Board Members:
 - a) Federal Minister of Health of Nigeria, H.E. Prof. Isaac Adewole
 - b) Minister of Healthcare of Kazakhstan, H.E. Dr. Elzhan A. Birtanov
 - c) Vice-President of Global Health at Johnson & Johnson, Dr. Adrian Thomas, representing the Private Sector constituency



Dr Lucica Ditiu
Executive Director




Dr Joanne Carter
Vice-Chair


Report of the Executive Director

Decision Point 31-2

1. The Board welcomes the report of the Executive Director and thanks the Executive Director and the Secretariat team for their excellent work in support of the United Nations High-Level Meeting (UNHLM) on TB that secured a strong political declaration and achieved high level visibility for TB partners and community at large through the TB Innovation Summit, the Night with the Stars event and the participation in all other side events organized in New York in September 2018.
2. The Board congratulates the Secretariat for the ongoing efforts in supporting country programmes and partners in their TB response.
3. The Board welcomes the forward-looking vision that the Executive Director shared and requests a more in-depth discussion at the 32nd Board meeting with the aim of endorsing a 2021-2025 Operational Strategy for the Secretariat during the 33rd Board meeting.
4. The Board also commends the valuable efforts to-date by the Secretariat in ensuring the engagement of TB community on the work around the Global Fund's Sixth Replenishment.



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Post-UNHLM

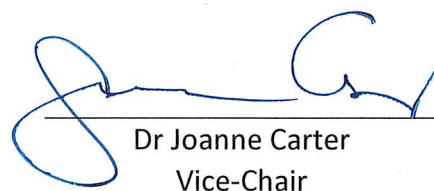
Maintaining Political Momentum

Decision Point 31-3

1. The Board expresses gratitude for the engagement and support of the Board Leadership, H.E. Dr Aaron Motsoaledi, Chair of the Board and Minister of Health of South Africa, and Dr Joanne Carter, Vice-Chair of the Board and Executive Director of RESULTS Educational Fund, United States of America, towards a successful UNHLM on TB in September 2018.
2. The Board supports the planned activities and focused approach of the Secretariat's efforts at the global and national level to support ambitious action by countries and welcomes proposed engagement of the Board Leadership and Board members into high-level missions.
3. The Board recognizes and applauds the unprecedented coordination and collaboration of the various partners working together during 2017 and 2018 in the lead up to the UNHLM on TB, and requests the Secretariat, working with all partners, to ensure that this coordination and alignment is maintained and further scaled up in 2019 and 2020.
4. The Board endorses the proposed roadmap to develop an updated version of the Stop TB Partnership's Global Plan to End TB up to 2022 under the guidance of the Global Plan Task Force, including a revision of the targets to align with the UN Political Declaration on TB and the Global Fund Replenishment period.



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Post-UNHLM

Investing the Funds Needed

Decision Point 31-4

1. The Board requests that the Secretariat help ensure the robust and meaningful engagement of TB partners and the larger network of TB stakeholders to support the Global Fund Investment Case for TB and a successful Sixth Global Fund Replenishment.
2. The Board recognizes that in order to meet the bold targets and commitments made in the 2018 UN Political Declaration on TB, the world needs to fulfil the commitment made in the declaration for making available USD 13 billion per annum for implementing TB interventions and an additional USD 2 billion per annum for research and development (R&D). The Board is concerned about the current low levels of financing and huge funding gaps in both TB implementation and R&D, and issues a call to step up the action towards joining forces with all TB partners to close the financing gap in the TB response and to ensure a fully funded Global Fund. The Board calls
 - i. upon all countries, donors, development banks and investment partners to prioritize investments on TB;
 - ii. Heads of Governments of all high TB burden countries to increase domestic funding for TB, and requests the Stop TB Partnership and its partners to engage with strategically important high-burden middle-income countries to double or triple their domestic budgets for TB;
 - iii. for the full replenishment of the Global Fund and use of all available tools to maximize funds for TB from the Global Fund to meet the ambitious UNHLM targets, which includes full disbursement of country allocations, expansion of catalytic funding, prioritization of portfolio optimization, etc.;
 - iv. for the World Bank and other development banks to ensure that all instruments available for loans and grants to high TB burden countries are considered during negotiations on credit agreements in order to make funds available for TB, including blended finance mechanisms;
 - v. for the Secretariat to work with partners to tap the full potential of social health insurance schemes, innovative funding and impact financing for TB;

- vi. and recognizes funding for TB R&D as a shared responsibility. As such, the Board supports the proposal to develop specific targets for TB R&D for each country, recognizing that different countries might chose to support local or regional research initiatives.
3. The Board requests the Secretariat to form a “Finance Task-Team” to work on traditional and innovative options available to increase funding for TB particularly in the context of UHC, identify opportunities and provide strategic guidance to the Board and Secretariat for resource mobilization for the global TB response.



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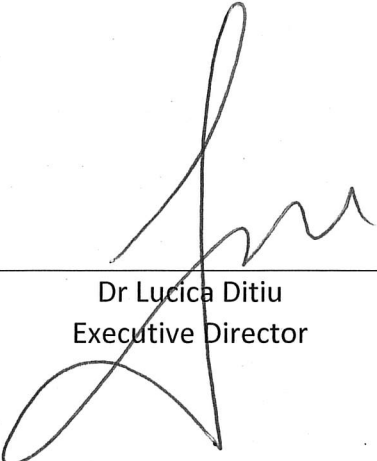
Post-UNHLM

Keeping the Promises

Decision Point 31-5

1. The Board welcomes the emphasis on the accountability of all stakeholders as outlined in the UN Political Declaration on TB and the commitment to establish and promote efforts and collaboration to review progress, share lessons and strengthen collective capacity to end TB.
2. The Board commends the development of the Multisectoral Accountability Framework by the World Health Organization, in consultation with Member States and partners, as well as next steps towards its finalization and implementation in 2019, as requested in the World Health Assembly resolution 2018 and the UN Political Declaration on TB.
3. The Board calls on the Secretariat to work with national governments, regional platforms, the World Health Organization, civil society and affected communities and other partners to promote and support implementation of effective action, monitoring and reporting, and comprehensive, inclusive, transparent and multisectoral review processes at national, regional and global levels, utilizing the Multisectoral Accountability Framework. Efforts should be made to ensure that the gaps in TB accountability are filled.
4. The Board appreciates the modelling work done by the Secretariat to disaggregate the UNHLM targets by country, and asks the Secretariat in collaboration with countries, the World Health Organization, the Global Fund and other partners to help enable actions by governments to revise and/or update their National Strategic Plans with bold country targets in line with commitments made in the UN Political Declaration on TB, and to encourage large countries to consider setting sub-national targets.
5. The Board welcomes the Secretariat's support of the next Out of Step report and TAG R&D Financing report, recognising these and other civil society reports as essential elements of the accountability landscape.
6. The Board requests that the Secretariat support and work with partners, including national governments, donor agencies and other stakeholders, to ensure additional financial resources are made available for robust accountability, particularly for civil society and community groups to effectively play their fundamental role in all components of accountability.

7. The Board commends the work of the Stop TB Partnership's Coordinating Group in support of the UNHLM on TB and associated work tracks, supported by the Secretariat, for their strategic and coordinated approach in the run up to the UNHLM on TB, and calls on the Group to determine the most effective way of sustaining this collaboration, engagement with multiple partners and inclusiveness to help ensure the full delivery of the UN Political Declaration on TB, with a view to the comprehensive review by Heads of State and Government at a high-level meeting in 2023.



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Post-UNHLM

Global Fund & Find.Treat.All Initiative


Decision Point 31-6

1. The Board applauds the significant contributions that the Global Fund made through the Catalytic Funding/Strategic Initiative on finding the missing people with TB and thanks the Stop TB Partnership Secretariat for their work with the Global Fund Secretariat and the World Health Organization, other technical agencies and partners in supporting country programmes towards finding additional 1.5 million people with TB by the end of 2019.
2. The Board appreciates early indication of the unprecedented progress made on finding missing people with TB in the High Impact Asia region of the Global Fund. The progress has also been noted in some countries outside that region. The Board requests the Secretariat, Global Fund, World Health Organization, USAID and other Situation Room partners to support African countries to achieve similar results across the region.
3. The Board congratulates the Secretariat, the Global Fund Secretariat, World Health Organization and other Situation Room partners for the continuous work to support countries programmes to fully utilize their allocations for maximum impact. The Board welcomes the additional USD 80 million going towards the TB Response in 16 countries as part of the two rounds of Portfolio Optimization.
4. The Board applauds the Global Fund, Stop TB/GDF, World Health Organization and other Situation Room partners on supporting countries in transitioning to new MDR-TB treatment guidelines and ensuring no stock-outs and accelerated uptake, including USD 20 million from Global Fund to country programs to bridge the corresponding funding gap.
5. The Board commends the advancement of the Find.Treat.All initiative to have 40 million people with TB diagnosed and treated by 2022, including in-country support, joint country level missions and engagement with leaders and national TB programmes in the highest burden countries, and calls for continued intensification and promotion of efforts under this initiative in 2019 by the Stop TB Partnership, the World Health Organization, the Global Fund and other partners.

6. The Board requests the Secretariat, working with the World Health Organization, USAID, the Global Fund and other partners to ensure:
 - a. a robust demand by country TB programmes to be considered as part of the Portfolio Optimization 2019 rounds
 - b. timely availability of relevant data for finding missing people with TB, by accelerating the process of collection and use of data for monitoring of progress and for making early course corrections, if needed
 - c. full alignment and demand on implementation and scale up of the latest World Health Organization recommendations at country level.
7. The Board requests the Secretariat, working with TB Situation room partners and all other partners to ensure that:
 - a. allocation methodology for the Global Fund funding cycle 2020-2022 will maximize impact in order to reach the UNHLM 2022 targets and commitments.
 - b. Catalytic Funding/Strategic Initiative on finding missing people with TB is continued over the next investment cycle to maintain the momentum and aligned with Find.Treat.All initiative and UNHLM targets.
8. The Board notes the substantial financing gap for the global TB response indicated in Global Fund's investment case, being more than half of the total funding gap on the three diseases even after a full USD 14 billion replenishment of the Global Fund. The Board asks the Secretariat to continue working with the Global Fund to use all available instruments to optimise funding for TB, including additional funding from portfolio optimisation, catalytic funding, and in-country disease splits.
9. The Board also encourages the Secretariat to continue to work with the Global Fund and other stakeholders to mobilise additional resources for TB over and above the replenishment target and processes.
10. The Board requests the Secretariat and the Global Fund to finalize a partnership agreement which is building on the already existing Memorandums of Understanding with Stop TB Partnership teams, GDF and TB REACH, in order to provide an updated framework on how the two organizations work together.



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Executive Director



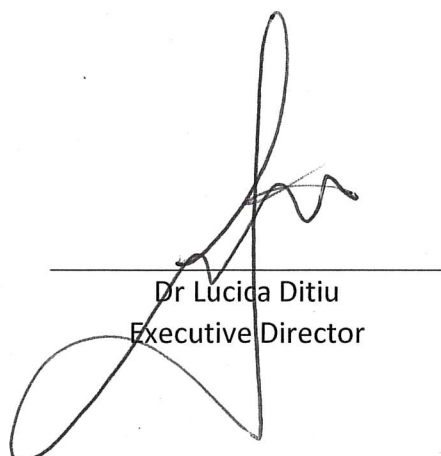
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Post-UNHLM

TB REACH

Decision Point 31-7

1. The Board recognizes the work of both the Secretariat and partners to improve TB case detection by implementing new approaches through TB REACH and notes the impact on additional people diagnosed and treated with TB. The Board also appreciates how TB REACH has collaborated with the Global Fund and other partners to scale up successful approaches.
2. The Board approves the launch of the call for proposals for Wave 7 with a focus on empowering women and girls.
3. The Board acknowledges and appreciates the critical role TB REACH plays in bringing innovation and new ideas and approaches to the TB response. The Board requests the Secretariat, building on the lessons learned and taking into consideration the SDG targets, the UN Political Declaration on TB and commitments as well as the geo-political environment, to develop a strategy for TB REACH version 3.0 to be presented at the 32nd Board meeting.



Dr Lucida Ditiu
Executive Director



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Post-UNHLM

Transform the TB Response to be Equitable, Rights-based and People-centered

Decision Point 31-8

1. The Board commits to promote a TB response that is equitable, human rights-based, gender-sensitive and people-centered, with particular attention given to key, vulnerable and marginalized populations, and reducing stigma and discrimination.
2. The Board recognizes the increased work of the Secretariat in targeting 13 priority countries to roll-out TB gender, legal environment and data for key population assessments and to support grass-root civil society and TB affected community activism and monitoring at country level. The Board welcomes the Secretariat contribution to building six regional TB platforms that were instrumental in regional and global TB advocacy towards achieving UNHLM Commitments focusing on a more equitable, rights-based, gender-sensitive and people-centered TB response.
3. The Board acknowledges the continued increase in demand for support from the Challenge Facility for Civil Society (CFCS) mechanism to scale up country grassroots community rights and gender approaches and its link to regional and global levels. The Board encourages the expansion of the capacity and funding levels of CFCS to respond to the high demand and to undertake resource mobilization for this purpose.
4. The Board will support resource mobilization efforts and Stop TB Partnership capacity to promote and expand equitable, human rights-based, gender-sensitive and people-centered interventions, particularly those designed and implemented by civil society and affected communities.
5. The Board endorses the initiative of the TB-affected Communities and Developing Country NGO constituencies to establish delegations with the aim to improve communication and engagement, strengthen accountability and enhance institutional memory of the constituencies. The Board requests the Secretariat and calls for the partners to explore ways to provide support to the delegation building process.

6. The Board calls on Ministers of Health and national programme managers to emphasize the need for National Strategic Plans on TB to fully integrate the commitments of the UN Political Declaration on TB, with a particular need to operationalize and invest in programmes, interventions and advocacy to mobilize communities affected by TB and promote human rights-based, gender-sensitive and people-centered responses to TB in all countries.



Dr. Lucica Ditiu
Executive Director

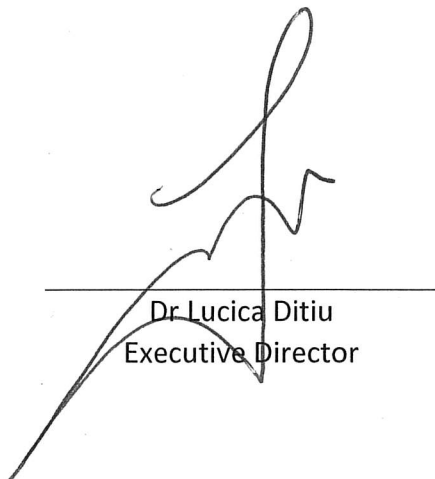


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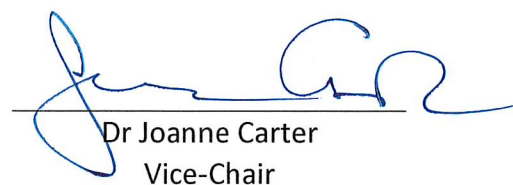
Taking Partnership with the Private Sector to the next level

Decision Point 31-9

1. The Board recognizes the importance of engaging and collaborating with the private sector to achieve the targets set forth in the UN Political Declaration on TB.
2. The Board welcomes the commitment of the Private Sector Constituency and commends its efforts for determining how it can best contribute its capabilities and resources working in collaboration with other partners and stakeholders. The Board encourages the Private Sector Constituency to further diversify its membership to include additional industries and high-burden geographies.
3. The Board supports the new strategy presented by the Private Sector Constituency and commits to discussing lessons learned and best practices in ongoing dialogue to achieve the UNHLM targets.
4. The Board recognizes the value in working with the private sector to address challenges in scaling up TB programs and calls on the Private Sector Constituency to continue its efforts to innovate on effective business models for public health sustainability.
5. The Board recommends that Private Sector Constituency ensures their engagement is aligned with and furthers the achievement of the Secretariat's strategic objectives towards the realization of the targets and commitments of the UNHLM on TB and Sustainable Development Goals.



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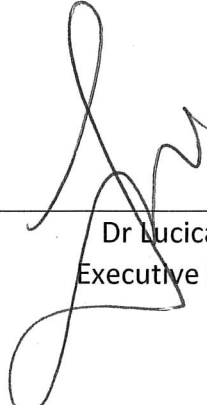


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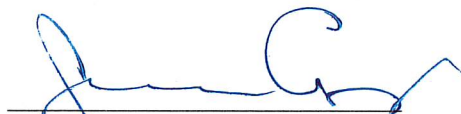
Secretariat Budget 2019-2020

Decision Point 31-10

1. The Board thanks and recognizes the work of the Finance Committee as well as UNOPS Project Management Team, and directs the Finance Committee to continue to monitor expenditures, encumbrances and financial risks, and alert the Executive Committee of any changes as required.
2. The Board endorses the high-level budget for the biennium 2019-2020 that has been reviewed by the Finance Committee and approved in December 2018 by the Executive Committee, together with the detailed budget for the year 2019.
3. Based on the recommendation of the Finance Committee in December 2018, the Board endorses the Stop TB Partnership 2017 Annual Financial Management Report.
4. The Board encourages the Secretariat to pursue resource mobilization efforts, including with new donors, to address the funding gap in the budget.
5. The Board requests the Stop TB Partnership 2018 Annual Financial Management Report to be prepared by the Secretariat and submitted to the Board for approval during the 32nd Board meeting.
6. The Board asks the Secretariat to prepare a detailed budget for 2020 in Q4 2019. The Board directs the Executive Committee to review and approve the detailed budget for 2020 by the end of 2019.



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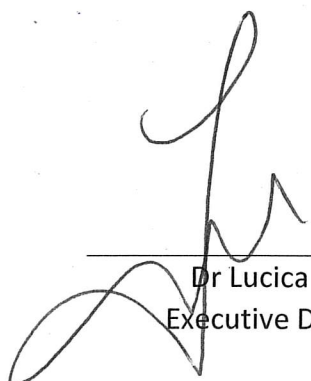


Dr Joanne Carter
Vice-Chair


Stop TB Board Governance

Decision Point 31-11

1. The Board agrees on the timelines and procedure to appoint the next Board Chair and launches a call for nominations for next Board Chair. The Board requests the Secretariat to manage the process following the continuous guidance of the Executive Committee. To this extent, the Board endorses the establishment by the Executive Committee of an ad-hoc Board Chair Nomination Sub-committee which is composed of:
 - i. Paula Fujiwara;
 - ii. David Lewinsohn;
 - iii. Aaron Oxley;
 - iv. Cheri Vincent;
 - v. Austin Obiefuna.
2. Following the recommendation of the Executive Committee, the Board approves:
 - i. the extension of the term of the Vice-Chair up to and including the 33rd Board meeting, in order to allow for a staggered change in the Board Leadership; and
 - ii. that the outgoing Vice-Chair acts, in an ex-officio capacity, to support the incoming Vice-Chair until the 35th Board meeting.
3. The Board agrees to hold its 32nd Board meeting around Q4 2019. Following the recommendation of the Executive Committee, the Board asks the Secretariat to initiate communications with the Government of Indonesia to explore the possibility of hosting the 32nd Board meeting; and to continue working with the Executive Committee to finalize this accordingly. The Board welcomes H.E. Minister of Nigeria's invitation to host the 33rd Board Meeting in Nigeria.



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