



Global strategy and targets for tuberculosis prevention, care and control after 2015



VISION	A world free of tuberculosis – zero deaths, disease and suffering due to tuberculosis			
GOAL	End the global tuberculosis epidemic			
INDICATORS	MILESTONES		TARGETS	
	2020	2025	SDG 2030	END TB 2035
Reduction in number of TB deaths compared with 2015 (%)	35%	75%	90%	95%
Reduction in TB incidence rate	20%	50%	80%	90%
compared with 2015 (%)	(<85/100 000)	(<55/100 000)	(<20/100 000)	(<10/100 000)
TB-affected families facing catastrophic costs due to TB (%)	Zero	Zero	Zero	Zero

PRINCIPLES

- 1. Government stewardship and accountability, with monitoring and evaluation
- 2. Strong coalition with civil society organizations and communities
- 3. Protection and promotion of human rights, ethics and equity
- **4.** Adaptation of the strategy and targets at country level, with global collaboration

PILLARS AND COMPONENTS

1. INTEGRATED, PATIENT-CENTRED CARE AND PREVENTION

- A. Early diagnosis of tuberculosis including universal drug-susceptibility testing, and systematic screening of contacts and high-risk groups
- B. Treatment of all people with tuberculosis including drug-resistant tuberculosis, and patient support
- C. Collaborative tuberculosis/HIV activities, and management of co-morbidities
- D. Preventive treatment of persons at high risk, and vaccination against tuberculosis

2. BOLD POLICIES AND SUPPORTIVE SYSTEMS

- A. Political commitment with adequate resources for tuberculosis care and prevention
- B. Engagement of communities, civil society organizations, and public and private care providers
- C. Universal health coverage policy, and regulatory frameworks for case notification, vital registration, quality and rational use of medicines, and infection control
- D. Social protection, poverty alleviation and actions on other determinants of tuberculosis

3. INTENSIFIED RESEARCH AND INNOVATION

- A. Discovery, development and rapid uptake of new tools, interventions and strategies
- B. Research to optimize implementation and impact, and promote innovations

THE GLOBAL STRATEGY AND TARGETS FOR TUBERCULOSIS PREVENTION, CARE AND CONTROL AFTER 2015, WERE ENDORSED BY ALL MEMBER STATES AT THE 2014 WORLD HEALTH ASSEMBLY.

ENDING THE TB EPIDEMIC

Ending the global TB epidemic is feasible with dramatic decline in TB deaths and cases, and elimination of economic and social burden of TB. Failure to do so will carry serious individual and global public health consequences.

Achievement of this goal by 2030 requires:

- Expanding the scope and reach of interventions for TB care and prevention, with a focus on high-impact, integrated and patient-centered approaches;
- Eliciting full benefits of health and development policies and systems, through engaging a much wider set of collaborators across government, communities and the private sector;
- 3. Pursuing new scientific knowledge and innovations that can dramatically change TB prevention and care.

To ensure full impact, these actions must build on principles of government stewardship, engagement of civil society, human rights and equity, and adaptation to the unique context of diverse epidemics and settings.



IMPLEMENTING THE END TB STRATEGY:

THE ESSENTIALS

For more information on implementing the END TB Strategy:

http://www.who.int/tb /publications/2015/The __Essentials_to_End_TB/ en/

TOP-TEN PRIORITY INDICATORS FOR MONITORING IMPLEMENTATION OF THE END TB STRATEGY AT GLOBAL AND NATIONAL LEVELS

INDICATOR	RECOMMENDED TARGET LEVEL
TB TREATMENT COVERAGE	≥ 90%
TB TREATMENT SUCCESS RATE	≥ 90%
PERCENTAGE OF TB-AFFECTED	0%
HOUSEHOLDS THAT EXPERIENCE	
CATASTROPHIC COSTS DUE TO TB	
PERCENTAGE OF NEW AND	≥ 90%
RELAPSE TB PATIENTS TESTED	
USING A WHO-RECOMMENDED	
RAPID TESTS AT THE TIME OF	
DIAGNOSIS	
LATENT TB INFECTION	≥ 90%
TREATMENT COVERAGE	
CONTACT INVESTIGATION	≥ 90%
COVERAGE	
DRUG SUSCEPTIBILITY TESTING	100%
(DST) COVERAGE FOR TB	
PATIENTS	
TREATMENT COVERAGE, NEW TB	≥ 90%
DRUGS	
DOCUMENTATION OF HIV STATUS	100%
AMONG TB PATIENTS	
CASE FATALITY RATIO (CFR)	≤ 5%

KEY TB FACTS

- 10 million people fell ill with TB in 2017, including 0.9 million among people living with HIV.
- TB was one of the top 10 causes of death worldwide in 2017, and was responsible for more deaths than HIV. In 2017, 1.6 million people died from TB*, including 0.3 million among people with HIV.
- Globally in 2017, an estimated 558 000 people developed TB that was resistant to rifampicin (RR-TB), the most effective first-line drug, and of these, 82% had multidrug-resistant TB (MDR-TB).

ACHIEVEMENTS



lives saved between 2000 and 2017



33% drop in TB deaths between 2000 and 2017

CHALLENGES



MDR-TB crisis

Gaps in detection and treatment. Only one in four people needing MDR-TB treatment were enrolled on it



Funding gap

US\$3.5 billion funding shortfall for TB implementation in 2018, and over US\$2.0 billion per year for TB research