### SUMMARY SHEET

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#### Introduction:

The GFATM represents the major source of external funding for TB. For the 5th Round, the Stop TB Partnership has undertaken coordinated, widespread support efforts to influence round 5 outcomes.

#### Summary

The proportion of approved GFATM approved proposals for TB in Round 4 was 44% (Malaria 51% and HIV 38%) - see enclosed overview (DOC 1.05-14.1). The proportion of disbursement against 2 year funding for TB has been 53% so far - the highest when compared to the other diseases. However, GFATM funding for TB is low compared with other diseases (15% of all approved 2 year funding for all diseases). Round 5 should be the TB round.

This presentation will outline the strategic thinking, actions, and current state-of-play in efforts to support countries and increase funding for TB in round 5.

Notable points of reference will include:
- A DOTS Expansion Working Group workshop for 31 consultants held in Geneva to prepare advisers/consultants to provide policy advice, guidance and tools to prepare successful GFATM applications.
- An advocacy, communication and social mobilization (ACS) workshop for 13 consultants in Cairo to support the integration of ACS components into GFATM TB applications.
- Mission coordination and support for approximately 30 countries.

Further points of discussion may focus on whether:
- Successful round 5 applications for TB control will support the agenda for TB control in Africa?
- The perception of a low overall financial gap for TB in general undercuts arguments for more $ from GFATM?

#### Decisions requested from the Stop TB Coordinating Board

1) Discuss the need to generate comprehensive, ambitious proposals from countries to target TB control efforts centred around DOTS.
2) Endorse the continuation of the GFATM focal point position (currently in TB Strategy and Operation (TBS) team at WHO) in advance of Round 6.

#### Next steps and time frame

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