The Stop TB Partnership’s Strategic Vision for the future

Paving the way to a TB-free world
Why a new vision and why now?

The Stop TB Partnership aims to revolutionize the TB space and end TB by 2030 by bringing together expertise from a broad spectrum of national, regional, and global partners. We believe that the most effective way to achieve this TB-free world is with an inclusive and equitable response that challenges biases and unearths structural inequities that hinder efforts to end TB. Our role as a Board is to hence ensure that communities, countries, and vulnerable populations are visibly and authentically represented, engaged, and heard in our leadership, systems, and structures. We further hope to redefine leadership on diversity, equity, and inclusion and inspire others with our actions to influence the broader health and development community.

Recognizing that we would need a clear roadmap to achieve our tall mission, we published the Stop TB Partnership Action Plan in November 2020, and then our Board embarked on a three-month journey to develop the strategic vision for the Partnership for the next ten years.

The first step of this journey was to look back and celebrate how the Partnership has strengthened the TB response thus far. From driving the 2018 UN High-Level Meeting (UN HLM), to adopting 2030 global targets, to amplifying the voices of communities and civil society, the Partnership has already made significant progress in the fight to end TB.

While these are big achievements, we feel that in order to fully realize the Partnership’s ambition, it needs to do much more—starting by translating global targets into national targets, strengthening leadership on diversity, equity, and inclusion, and defining a clear plan to ensure accountability in meeting these goals.
A common consensus that emerged from our discussions with these partners was that the world in which the Stop TB Partnership now operates has been disrupted by social, political, and economic factors, with COVID-19 further accelerating both the pace of innovation and the urgency to curb TB. COVID-19 has had a lasting impact on the fight against TB, potentially setting back the progress by five to eight years. But our partners also see potential to capture opportunities created by the response to the COVID pandemic and other major disruptors.

**Five major opportunities** stand out:

1. COVID-19 has demonstrated the potential to accelerate innovation and production, which partners believe can be translated into R&D and development of a new TB vaccine and other prevention mechanisms on an accelerated scale.

2. Countries and regions are increasingly setting the broader health agenda, allowing partners an opportunity to engage with regional leaders on advocacy, procurement, and technical assistance and ensure strong policy and technical engagement.

3. Health security has become a focal point—nationally and internationally—providing an opportunity to align the goals of the global health security agenda with those of TB in an explicitly non-stigmatising way, raising the profile of and financing for TB.
4. An increased focus on people and community-centered care creates an opportunity to reflect the voices of people and communities in TB policies and programs and work more closely with civil society to accelerate impact on TB outcomes.

5. Broadening sources of funding for health may signal the availability of new sources of financing that can close the significant funding gap to the Global Plan.

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**Putting TB at the top of the health agenda**

**Bold TB narrative.** TB is the deadliest infectious disease in most low- and middle-income countries, claiming more than 4,000 lives each day. Yet the current narrative has not captured the attention of decision makers or communities or the funding needed to adequately address the crisis. Our partners believe that intensified social mobilization efforts to engage stakeholders in the broader health and development community, in addition to those directly affected by TB, will be critical to end the TB pandemic. The Stop TB Partnership needs to promote a bold and refreshed narrative for TB that shares the business case for investment with a broader donor base (e.g., the private sector, development banks) and diverse decision-makers (e.g., finance ministers) to close the existing financing gap in TB. While the focus of the narrative will be on TB, partners see an opportunity to position TB as part of other narratives that attract funders from outside of TB (e.g. pandemic preparedness, social justice topics). The Secretariat has a role in shaping that narrative in a way that further resonates with TB-affected communities and countries.

**Accountability.** The 2018 UN HLM was a significant step forward for the Partnership in achieving its mission. However, many partners feel that the Partnership has fallen short of ensuring follow-through. We will support countries in keeping accountability to the targets made at the 2018 UN HLM by monitoring their national progress toward them.

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**Our future strategic vision**

**The partners have urged us** to take bold action to keep pace with global disruptors and accelerate progress toward ending TB. To achieve our strategic vision, we have developed strategic principles to provide the foundation for Stop TB Partnership’s direction over the next ten years and articulate a path for the evolution of its role, priorities, and capabilities given a backdrop of an ever-changing healthcare landscape and the dynamic needs of its partners. These principles address the five opportunities identified by the partners.
Driving progress

**Innovation acceleration.** Innovation in TB has stagnated. For example – there is only one approved TB vaccine that is a century old - the Bacillus Calmette-Guérin (BCG) vaccine. Partners see an opportunity to build on momentum from the COVID-19 pandemic—where a vaccine was developed and authorized for emergency use in under one year for a virus that had only been identified 12 months prior. Now that we know this kind of fast-tracking is achievable, there’s no reason why we cannot also accelerate the development and implementation of diagnostics, therapeutics, vaccines, and prevention mechanisms for TB. The Stop TB Partnership will widen its ecosystem of innovators, increase rapid uptake of new technologies in the countries that need them, and expedite universal access to commodities.

**New voices, more advocates.** Our partners believe that the TB community has been relatively insular and needs new and diverse perspectives to drive social mobilization. The Stop TB Partnership will cultivate the next generation of TB activists by recruiting new, diverse perspectives and individuals beyond those currently involved in TB and health issues, including journalists, national and global celebrities, and private sector influencers. We will provide new and seasoned advocates with strong and focused messages, as well as innovative tools to raise the financing and attention of TB. The Board will take the first step in bringing in these new voices by examining the diversity of its makeup.

Engaging with countries and communities

**Country-driven and country-led approach.** Countries and regions are playing a greater role in setting the TB agenda, and our partners believe in the importance of a country-led approach to achieve a TB-free world. They see the Secretariat’s role as empowering and supporting a broad range of country-level stakeholders to lead, shape, and advocate for domestic, long-term, sustainable TB responses. This includes strengthening country participation in the Board to ensure that the Partnership is led by those impacted.

**Role in country.** Domestic financing plays a pivotal role in funding TB programs. We must enhance our support to individual countries, with the goal of increasing domestic attention to TB to secure this financing. The Stop TB Partnership will work more proactively with priority countries, especially those that influence other countries in their region, and the Secretariat will provide direct support at the regional and national level to enhance advocacy. In addition, overall targets set by the Global Plan, will be used to determine appropriate targets for individual regions and countries.
Reflecting diverse perspectives

TB-affected community leadership. The Stop TB Partnership will lead a response that is equitable, rights-based, and people-centered by positioning TB-affected communities and countries as leaders, advocating for human rights and gender equality, engaging key vulnerable populations, and addressing systemic inequities across TB interventions. The Board is currently reviewing its composition to better reflect and ensure broader representation of TB-affected communities.

Partner support. The Stop TB Partnership has more than 1,700 partners with both a wide range of needs and untapped resources (or strengths). The Secretariat intends to invest in developing and amplifying the voices of a select group of partners that are critical to an equitable and inclusive TB response, such as TB-affected communities, civil society, and national private sector organizations. One way in which the Secretariat can achieve the same is by convening the broader group of partners for important strategic efforts, such as the Global Plan.

Broadening funding

Closing funding gap. The Global Plan has estimated that $13 billion is needed each year to adequately address the TB pandemic. Financing for TB falls short each year, with an annual gap of $7.7 billion in 2020. This has severely constrained the activities of partners and made it impossible to implement even essential work to combat TB. The Board will expand its focus on mobilizing resources and play a more active role in closing the funding gap by identifying new sources of financing, and by brokering between global donors, development financing, and the private sector to maximize overall funding for TB. Empowering civil society organizations as a part of this effort will be key, given their role in bringing TB to the top of the political agenda.
Everyone will play a part in making sure the Partnership stays true to our commitments.

The Board will play an active role in ensuring the Partnership operates in a manner consistent with its strategic principles. This includes individual member commitments to create and ensure an inclusive Board environment; engagement of country representatives in agenda setting and Board discussions; intensifying efforts to close the funding gap by leveraging existing capabilities while also recruiting new voices to work on bolder, innovative financing solutions for TB; and considering a revision in composition to increase the impact and leadership of countries, communities, and civil society in the Partnership.

The Secretariat facilitate the Partnership’s execution of its strategic vision. This means supporting a more diverse Board by comprehensively onboarding and mentoring all new Board members and their teams; elevating and strengthening key TB voices in national health and development mechanisms by working with priority countries that will influence others; and helping to broker financing amongst the wide range of donors domestically, regionally and globally.

Partners will need to translate the Stop TB Partnership’s aspirations and strategic principles to their own contexts. This means role modeling priority behaviors that shape an inclusive environment within their own organizations and embracing a shared TB narrative and messaging that garners greater awareness and attracts both local and global financing.

Ending TB will take enormous international effort. The Stop TB Partnership aims to facilitate this through equitable and inclusive engagement with our partners. This strategic vision has outlined the steps we will take to keep TB at the top of the global health agenda, drive innovation, generate more funding, reflect diverse perspectives, and engage with affected communities on the ground. Our partners have appealed to us to evolve our role and capabilities to ensure all voices in the fight against TB are elevated - from countries to researchers to key vulnerable populations.