Brief: The Global Plan to End TB 2023-2030

The Global Plan to End TB, 2023–2030 (Global Plan) is the investment plan for ending tuberculosis (TB) as a public health challenge by 2030—as committed in the UN Sustainable Development Goals.

Projected impact by 2030

90%
decline in the number of people who die from TB annually (compared to 2015)

80%
decline in the number of people who develop TB annually per 100,000 population (compared to 2015)

The return on investment
Modeling projects that implementing the Global Plan’s priority actions would deliver a global return of US$ 40 for every dollar invested and US$59 for every dollar invested in low- and middle-income countries, with benefits accruing through 2050.

The cost of inaction
If current trends continue from 2023 through 2030, an additional 43 million people will develop TB and an additional 6.6 million people will die, at a global economic cost of US$ 1 trillion.
Mobilize **$ 250 billion** between 2023 and 2030, including:

- **$ 157 billion** for TB prevention and care, averaging **$ 20 billion** per year
- **$ 40 billion** to accelerate the development of new TB medicines and treatment regimens (**$ 16 billion**), diagnostics (**$ 8 billion**), and vaccines (**$ 10 billion**), and to conduct basic science research (**$ 6 billion**)
- **$ 53 billion** for vaccination once new vaccines are available

*All funding figures are in US dollars*

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**Priority actions**

Invest in the comprehensive package of TB interventions that provide universal access to services.

**Scale up TB diagnosis and care:**

- Expand early diagnosis, including at subclinical stages with active TB case finding using modern diagnostics
- Develop and implement public communications strategies to raise TB awareness and promote early health seeking
- Integrate TB screening and testing into other health services, with a focus on services that address common comorbidities or risk groups, depending on local context
- Provide support that enables people receiving TB care to complete a full course of treatment without an undue burden on them and their families, while avoiding catastrophic costs. Strengthen national procurement systems and supply chains

**Scale up TB prevention:**

- Implement airborne infection prevention and control measures in health care settings and high-risk indoor places where people congregate
- Provide TB preventive therapy to people with TB infection and at higher risk of progressing to active TB disease
- Deploy effective vaccines once such vaccines are officially recommended and available
- Address TB risk factors and social determinants

**Partner with affected communities and the private sector**

- Increase funding support for engaging TB-affected communities in the TB response at least 4 times, investing new resources in advocacy, demand generation, law and policy reform, human rights, governance and accountability
- Support community-based and home-based models for delivering TB prevention and care
- Scale up public–private mix approaches to improve the quality of TB care, reduce out-of-pocket expenses and improve data reporting in the private health sector
- Expand access to TB services through universal health coverage initiatives, and position the TB response at the centre of pandemic preparedness and response efforts

**Address human rights, stigma, gender, and key and vulnerable populations:**

- Position universal human rights at the foundation of the TB response
- Eliminate TB-related stigma and discrimination
- Ensure TB interventions are gender-sensitive and gender-transformative
- Prioritize, reach and involve key and vulnerable populations in the TB response by:
  - Implementing TB communities, rights and gender (CRG) assessments and action plans
  - Understanding the size and characteristics of key vulnerable populations
  - Supporting real-time community-led monitoring of access, service quality, stigma, and human-rights related barriers to TB services
  - Enabling the mobilization of TB survivor networks

**Accelerate the development and use of new TB tools to prevent, diagnose and treat TB:**

- Invest a minimum of US$ 5 billion annually to accelerate the R&D of new TB diagnostics, medicines and vaccines
- Develop a new TB vaccine by 2025
- Expand the use of operational research
- Develop and implement digital tools
- Create an enabling environment for TB R&D
- Apply best practices in community engagement throughout the R&D process
- Apply access principles in rolling out and optimizing the use of new tools
- Strengthen advocacy for TB research and development