

Executive Committee Call 9 May 2023

Attended:	Apologies:	Secretariat:
Austin Obiefuna (Vice-Chair), Timur Abdullaev Erika Arthun Pierre Blais Amy Bloom Peter Owiti / Carol Nawina Nyirenda	Teresa Kasaeva Deliana Garcia Subrat Mohanty Cheri Vincent	Lucica Ditiu Jenniffer Dietrich Catie Rosado Kerrie Tyas
Minutes of the Call		

Governance - continuation of implementation of the Board Strategy Review

- 1. The meeting started with Executive Committee members expressing their gratitude to Pierre Blais, who announced his retirement, and therefore, resignation from the Stop TB Partnership Board and the Executive Committee.
- 2. Following the implementation of the Board Strategy Review, a brief update was provided on donor seats. While a few people were missing in the conversation, there is alignment with what is in the Governance Manual. Efforts will be made for new donors to join, and a mechanism is being developed to give voice to new donors. This process will likely be finalized over the course of a few weeks. Also, the research and innovation constituency are planning a face-to-face meeting in June in Geneva, starting with a group of about 30. There are a couple of gaps for the first meeting, such as "small industry" innovations.

Discussion:

- For the meeting of the innovation constituency, it was proposed to consider inviting innovators, who
 presented their work during the last Board meeting in Varanasi
- The meeting might also engage advocates; it was proposed to involve the Community Delegation
- 4. The Terms of Reference for Board Members of another new constituency, TB Key and Vulnerable Populations, has been done with McKinsey and went through several reviewers from the Executive Committee. The plan is to finalize the ToR and then launch a call for applications for a month for people to apply. An ad hoc committee will be set up including representatives of the Community Delegation, the Vice Chair, the Secretariat, two Board Members from the NGO Delegations and one non-Board Member, which could review the applications and propose the BMs for these two seats and come back with the names, tentatively for the call in July. (note: this process was later modified based on feedback received from Executive Committee members)

5. **Discussion:**

It was added that, as the TB Key and Vulnerable Populations constituency is not organized, members
can be headhunted from among the people who are already known (such as Tina, who was actively
engaged in Multistakeholder Hearings in New York), and who will help organize the constituency.

6. Action items:



• Once the Board Strategy Review process of Board composition is completed, the composition of the Executive Committee will be renewed, as per the updated Governance Manual.

Follow-ups from 36th Board Meeting

7. There were several things discussed in this segment. First, Community Delegation wrote a request to discuss J&J, the Secretariat can facilitate the conversation, but it needs to happen. The Community Delegation should also have a conversation with Cepheid; the Global Fund tried to renegotiate the prices for their cartridges, but in spite of 12 years of having the monopoly, they refused. Also, Secretariat was asked to engage with the Private Sector Constituency (PSC); it identified three areas in which the PSC could do more, and then there is a fourth area on access. These follow-up points were shared with the PSC.

8. **Discussion:**

- On J&J, it may be wrong to single out one company as there are other companies that are criticized for charging too high for their products
- Advocacy campaigns on intellectual property, pricing and access may be needed before the UN HLM

9. Action items:

The Vice-Chair will set up a call with the Community Delegation

Update from Multisectoral Hearing

- 10. The Executive Director updated on the engagements before the Multistakeholder Hearing (MSH), saying that overall the events were very productive, which shows that the global TB community learned from 2018. The community picnic gave a good opportunity to get prepared; it was followed by a march of solidarity, with everyone walking 2x2, so that people couldn't be stopped by police.
- 11. Almost 40 missions were visited before the MSH, with the number growing to 45 when including the visits in the days following the Executive Committee call. According to the missions themselves, these visits were the best strategy. The visits inspired the civil society partners and gave them an opportunity to establish connections with their ambassadors. Every civil society participant got to meet the mission of their country, in addition to so many others. During the meetings, participants shared the Key Asks, the Deadly Divide, country profiles, as well as other asks (e.g., on vaccines). The MSH is important, but meetings with the missions give an opportunity to deep dive, offer support, and show that we are prepared. The Stop TB Partnership was also invited to the official luncheon for the three high-level meetings, where the Vice Chair and Executive Director called for including TB in the Political Declarations for the two other HLMs. We are open to include the language about their issues, but they seem to be not willing to include language on TB.
- 12. At the MSH itself, when the panelists met with the President of the General Assembly (PGA), he mentioned that the Stop TB Partnership is rich in data, and that Member States should be using this. The Chair was not permitted to do a recorded message, but the Vice-Chair did a fantastic job at the opening, setting the stage by calling attention to the Key Asks and officially launching the Deadly Divide report. During the entire MSH, the people in the room made a lot of noise. A lot of missions spoke in support of the Key Asks. The MSHs on Universal Health Coverage (UHC) and on Pandemic Prevention, Preparedness and Response (PPPR), taking place today will give an opportunity to have the impact by showing the connection between TB and the UHC and the PPPR.



13. The draft of the Political Declaration is being prepared, and the zero draft will appear on May 15, with negotiations taking place on 25 May, 31 May, 5 June, 14 June, and 20 June. The Executive Director will try to come to one of the negotiations to be in the room, hopefully in June.

14. Discussion:

- Responding to a question on how much attention was given in the civil society interventions to
 accountability, it was mentioned that the Vice-Chair specifically mentioned that the civil society is best
 placed to ensure accountability, and that the governments cannot be their own auditors. The Deadly
 Divide was also mentioned as part of accountability.
- There is a conversation on accountability, but stronger push is needed. The Key Asks mention that Heads of State have to be tracking progress in their countries. The approach of WHO with Multisectoral Accountability Framework (MAF) is good, but it is not clear how impactful it has been. The Minister of Health of Indonesia has a call every week on TB this is accountability. Empowering civil society and communities to monitor the progress, also with community-led monitoring tools is accountability.
- Coalition of Leaders on TB is another area that needs to be pushed. It will be good to launch it in September, but preparations need to start happening now.

15. Action items:

- The Executive Committee to discuss how to start the supporting work around the Coalition of Leaders.
- Vice-Chair will set up a call with this specific purpose.