

The Private Sector Constituency of the Stop TB  
Partnership

# Taking partnership with the private sector to the next level

Pre-Read for 30 January 2019 Stop TB Board  
Meeting

**Stop TB Partnership**





## Purpose of this document

For the first time, the global community has come together to set an **ambitious set of targets for TB**, as agreed at the UN High Level meeting in September 2018

The Stop TB Partnership Private Sector Constituency (PSC) includes a **diverse set of member companies who share in the common vision of ending TB by 2030**. The PSC aims to collaborate with stakeholders at national and international levels and believe we can **contribute a broad and diverse set of capabilities which can accelerate progress** toward the targets defined at the UNHLM.

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The PSC has reflected on how we can best work with the international community to achieve the UNHLM goals and identified **four strategic priorities**. Members are **committed to leveraging our collective resources and capabilities to make meaningful contributions** to enhance patient-finding, modernize TB care and prevention, and raise the profile of TB worldwide.

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This document aims to **increase understanding of the private sector's commitment, capabilities, and priorities and to engage in a productive dialogue with TB stakeholders** during the Stop TB Board meeting on 30 January. The ultimate **objective is to support the world in accelerating impact to achieve the UNHLM goals through enhanced collaboration and effective partnership between the public and private sector**.

# The world has set an ambitious global agenda for TB



**World Health Organization**

United Nations General Assembly high-level meeting on tuberculosis

**United to end tuberculosis:**  
an urgent global response to a global epidemic

26 SEPTEMBER 2018, New York

*September 26th, 2018 marked the first ever session of the UN General Assembly dedicated to TB and attended by Heads of State*

## Ambitious targets were set



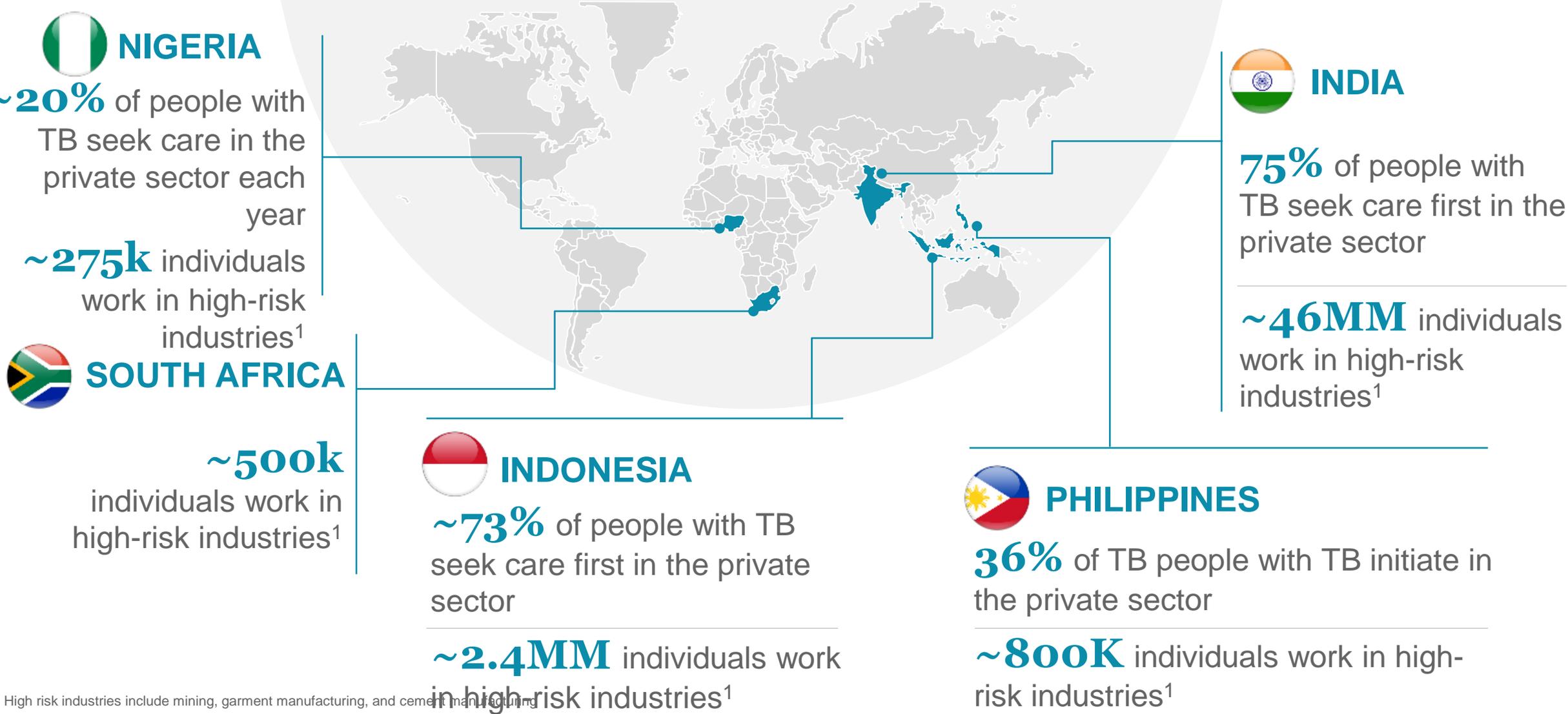
**Successfully treat 40 million cases of tuberculosis from 2018-2022,** including 3.5 million children and 1.5 million people with drug-resistant TB



**Provide preventive treatment to at least 30 million people by 2022,** including 4 million children, 20 million household contacts of people affected by TB, and 6 million people living with HIV/AIDS

# Engaging the private sector will be critical in the highest burden countries

NOT EXHAUSTIVE



<sup>1</sup> High risk industries include mining, garment manufacturing, and cement manufacturing  
SOURCE: Central Bureau of Statistics; ; "Using Patient Pathway Analysis to Design Patient-centered Referral Networks for Diagnosis and Treatment of Tuberculosis: The Case of the Philippines"; South Africa Ministry of Labour and Employment; Philippine Statistics Authority - 2017 Compilation of Industry Statistics on Labor and Employment; Nigeria Medical Journal; "Quality Tuberculosis Care in Indonesia: Using Patient Pathway Analysis to Optimize Public-Private Collaboration" India Ministry of Textiles

# Each private sector segment has a role to play in the fight to end TB



**Private healthcare providers**  
Broad range of organizations providing care, ranging from world-class private hospital/laboratory chains to traditional healers



**Pharmaceutical and medical equipment suppliers**  
Companies who make medical products used for TB control (e.g., vaccines, drugs, diagnostics, other medical supplies)



**Organizations providing healthcare financing**  
Lenders (banks, microloan companies) or insurers who provide patients with financial means to afford diagnosis and treatment



**Health tech companies**  
Organizations developing and deploying innovations for health (e.g., data solutions, apps, mHealth)



**Health impact investors**  
Private equity, venture capital, or other investment firms who can inject critical funding



**Influential consumer brands**  
For-profit businesses whose products/ services are not directly used for TB control (e.g. consumer goods, telecom)



**Companies with TB-impacted workforces**  
Companies operating in high-burden geographies with affected workforces (e.g., mining, garment, cement)



*Example companies that are or could be involved in tuberculosis (not exhaustive)*

# Each segment brings unique capabilities that can accelerate progress towards our shared goals

## Shared goals

**Patient finding**

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**Modernize TB prevention and care**

**Raise TB profile**



### Private health care providers

- Access to diagnostic capabilities
- Provision of care
- Bridge between government and informal healthcare
- Innovation in epidemic control delivery
- Demand for better care techniques

- Advocacy at the national level to shape health policy and financing
- Quality control of public/private healthcare systems



### Pharma and medical equipment suppliers

- Development of new technologies and care approaches
- Existing infrastructure (e.g., medical education, local distributors)
- Observational studies and data

- High visibility at both global and local levels
- Financial resources



### Health tech companies

- Digital tools to support diagnostics (e.g., AI)
- Advanced analytics for active case finding
- Modern technology solutions for adherence and support

- Digital marketing capabilities (e.g., social media, viral campaigns)



### Companies with TB-impacted workforces

- Active screening of high-burden populations
- Access to communities
- Direct treatment of TB communities

- High visibility at both global and local levels
- Financial resources



### Health impact investors

- Capital to be applied to develop/scale new technologies

- Financial resources
- Public relations expertise



### Organizations providing healthcare financing

- Financial means for people to be able to afford diagnosis and treatment (thus addressing affordability of healthcare)

- Help shape the healthcare market nationally (e.g., payors, medicines covered)



### Influential consumer brands

- Specialized capabilities (e.g., logistics, analytics)
- Access to high-burden populations
- Consumer marketing to influence behavior change

- High visibility at global and local levels
- Financial resources
- Consumer marketing

# PSC initiatives can build upon and learn from successful partnerships in the TB space

## Examples of partnerships



A summit to assess the efficacy of current tools to fight TB and plan for the next generation of solutions to drive progress



Collaboration to improve and expand TB diagnostic capacity in the Indonesian market and increase referrals to these labs



Initiative to improve access to BD technology for TB diagnosis in 85 low and middle income countries through price negotiations



Multi-country deployment of WHO endorsed digital adherence technologies via one integrated platform



Pilot program in India focused on TB care and reporting, resulting in improved treatment adherence and notification among the patient cohort

## Key insights

- Successful supplier led partnerships – opportunity to engage diversity of private sector
- **Clustered partnerships** involving companies across segments have been **successful in accelerating delivery**

SOURCE: USAID website, Becton Dickinson website; Apollo Hospitals website; StopTB website

# Key principles for defining the private sector contribution to TB

**Be mission driven:** Build the PSC's reputation in driving the mission and objectives of the Stop TB Partnership

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**Take a targeted and specific approach:** Do not try to do everything- focus on geographies/challenges where private sector can have the greatest impact to help achieve the UNHLM targets

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**Partner to contribute a diverse set of capabilities:** Leverage the wide range of specialized competencies in the private sector that other partners lack (e.g., drug discovery, technology development, marketing)

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**Inject “private sector” thinking:** Contribute new perspectives and approaches to the global health community through private sector analytics, mindsets

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**Do not “reinvent the wheel”:** Build on the lessons learned from past pilots and projects and identify partnerships to scale

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**Ensure domestic ownership:** Provide catalytic support to countries to build capacity and capabilities to fight TB

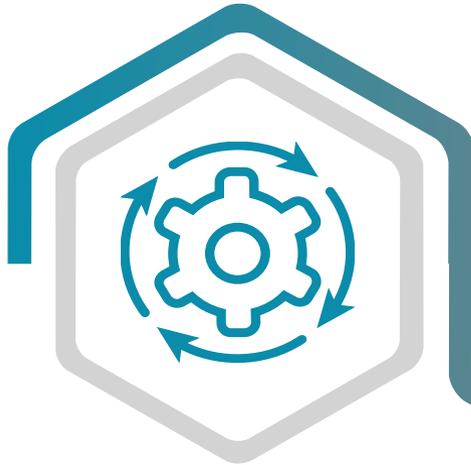


# We have identified four strategic priority areas for private sector engagement to accelerate impact towards the UNHLM goals

-  Patient finding
-  Modernize TB prevention and care
-  Raise TB profile

## 1 *Empowering people through data disruption*

Enhance data generation and use, including a more integrated approach of existing and innovative technologies along the care pathway, enabling patient-generated data collection and improved engagement



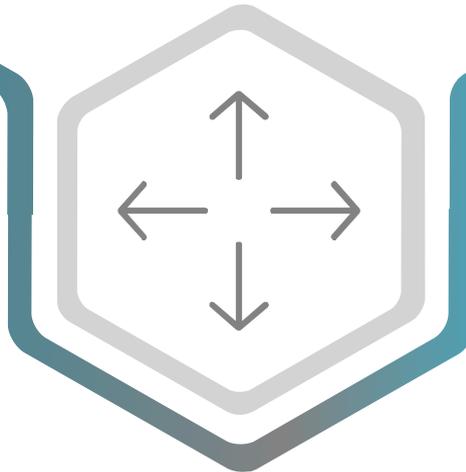
## 3 *Healthy Workplaces*

Help businesses create world-class workplace health programs in high-TB risk industries that drive prevention, treatment and care for employees and communities



## 2 *Diagnosis revolution*

Explore new partnerships to simplify the treatment pathway and accelerate innovation in diagnostics



## 4 *#BreakTheStigma*

Shine a spotlight on TB through a coordinated advocacy campaign and explore new engagement models to spread awareness and mobilize funds



# Strategic priority: *Empowering people through data disruption*

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Enhance data generation and use, including a more integrated approach of existing and innovative technologies along the care pathway, enabling patient-generated data collection and improved engagement

### Why is this needed?

- **TB data is often inaccurate and unreliable**, mostly generated or handled by the healthcare system before being aggregated and used
- **Successful initiatives exist**, but most **focus on a single step of the patient journey**, and they need to be scaled up
- **Engagement currently relies mostly on ‘traditional’ methodologies** (e.g. in-person DOTS for adherence)
- **Stigma** can make people feel isolated

### What could this look like?

- **Joining forces among technology, mHealth players and other key stakeholders** (NTPs, STB, etc) to
  - Foster integration of systems, standardization of data, clarity on data ownership
  - Use technology not only to support people with TB, but also more ‘upstream’ (e.g. advanced analytics to ‘profile’ risk population, social media campaigns)
- **Mapping of existing solutions and apps** for people with TB **from prevention through treatment and identification of opportunities to better:**
  - **Report data** (e.g., stock-outs at health facilities)
  - Connect patients through an **online community**
  - Enable **contact tracing**
  - **Provide digital adherence monitoring/ follow-up support**

### What could the impact be?

- **Better-informed policy decision making** driven by better data, incl. from people who seek care in the private sector
- Improved **patient experience and outcomes**
- **Decreased burden on healthcare system** e.g. through reduction of in-person DOTS and more efficient data collection

### ? How will we start?

- 💡 **Convene private sector companies and public health experts for a workshop** to map existing solutions and identify opportunities for enhanced integration
  - Workshop planned Jan 31, 2019
- 💡 Explore **new partnerships and joint ventures**
- 💡 Collaborate and **build upon complementary initiatives** (e.g., Project X)

Who’s involved:



# Strategic priority : *Diagnosis Revolution*

# 2



## Convene new partnerships to simplify the treatment pathway and accelerate innovation in diagnostics

### Why is this needed?

- **Access to best-in-class dx testing** in high burden countries is limited
- **Manufacturers face common challenges** (aligning design and supply with local needs/capacity, securing funding)
- **Many resources are spent on non value-add activities** (e.g. regulatory hurdles, knowledge gaps, lack of human capacity to use tools, ‘reinventing the wheel’)
- **No common framework/ access agenda exists** among organizations interested in improving diagnostics

### What could this look like?

- **Cluster partnership of manufacturers, funders, country stakeholders** to
  - **Commit to overcoming barriers and increasing access** in targeted geographies who are most at risk
  - **Explore a co-financing proposal** to influence innovation and de-risk development
  - **Find acceleration opportunities** (e.g. community-based screening, enhance awareness of new tools, shift the paradigm from dx tools to diagnosis)
  - **Update TPPs** to address key challenges
- **Leverage CSR funds in India**
  - PSC companies
  - Co-financing proposal (TGF, national Gvts)

### What could the impact be?

- **Expanded access at scale to state-of-the-art diagnostic testing**
- **Accelerated innovation**
- **Enhanced cross-sector dialogue and cooperation, amplifying the impact of initiatives**

### How will we start?

-  Develop concept note and conduct **stakeholder consultations** including on linkage with other initiatives
-  Convene key stakeholders to brainstorm opportunities and outline actions needed to **establish new clustered partnerships** for a diagnosis revolution



# Strategic priority : *Healthy Workplaces*

# 3



## Help businesses create world-class workplace health programs in high-TB risk industries for employees and communities, through private-private collaboration

### Why is this needed?

- **Employees of certain industries** (particularly mining, garments, cement) **in high burden countries** have an **elevated risk of contracting TB<sup>1</sup>**
- **Community-wide TB burden often worsens** as a result of employee incidence in high risk workplaces

### What could this look like?

- **Encourage businesses in high-risk industries to offer world-class worker health programs through enhanced private-to-private collaboration**
- **Influence industry associations** to make TB programs a priority
- **Think broadly about high-risk industries involvement** (e.g. leverage incinerators in cement companies for medical waste)
- As PSC, **role model** to others (e.g. organize **TB testing in facilities of PSC members, or implement an awareness campaign** on World TB day)

### What could the impact be?

- **Improved patient detection, treatment outcomes, and reduced incidence** among vulnerable workers, families, and communities
- **Healthier and more productive workforce** for businesses in affected industries

### How will we start?

-  **Identify best practices** for workplace programs
-  **Role model effective workplace interventions** including awareness and education events
-  **Influence industry associations and high risk employers** to expand existing workplace programs and make TB a priority

### Who's involved:



<sup>1</sup> STOPTB Key Populations Brief: "Exposure to silica dust and other socioeconomic challenges place miners among the populations most impacted by TB"; UK GOV ARK Foundation: "Workers in the garment industry are vulnerable to TB. The workplace setting increases their risk of catching TB due to occupational exposure and cramped working conditions."

SOURCE: StopTB Key Populations Brief; UK GOV ARK Foundation; Expert Interviews

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Shine a spotlight on TB through a coordinated advocacy campaign and explore new engagement models to spread awareness and mobilize funds

Why is this needed?

- **Stigma deeply affects well-being**
- **Stigma often deters people** from seeking diagnosis and treatment
- TB lacks the popular awareness/**support of other public health epidemics** (e.g., HIV, cancer), and there are **relatively few high-profile champions**

What could this look like?

- **Leverage private sector communications and marketing expertise, including patient-centered design, to develop TB awareness materials** that can be shared with partners and deployed in both donor and recipient countries
- Explore sponsoring a **patient-led advocacy campaign and support existing campaigns**, e.g. Stop TB’s “It’s Time”, “Resistance fighter”

What could the impact be?

- **De-stigmatize TB** and increase people with TB proactively seeking diagnosis and treatment
- **Provide positive pressure** on leaders and **mobilize financing** to close global funding gap

How will we start?

-  **Recruit CEOs to participate in World TB Day** (e.g., social media messaging, videos)
-  Explore options for a **coordinated advocacy campaign that leverages consumer capabilities**
-  Explore new opportunities to **engage companies and celebrities** (e.g., consumer marketing effort)

Who’s involved:





## Key principles on how we believe we can work most effectively with other partners

- **Focus on our shared goals:** Commit to working together in a way that aligns with the global TB goals and ensures that people are always our top priority
- **Partner with purpose:** Be strategic and transparent about our objectives and what each party will contribute
- **Celebrate our differences:** Embrace our differences in working style and culture as beneficial, allowing our diverse experiences to serve as an asset and not a barrier
- **Foster sustainability:** Commit to projects, initiatives, and relationships for the long-term, understanding that the passion of many is needed to continue momentum
- **Welcome new partners:** Continually reevaluate the capabilities and expertise needed to drive impact and welcome new players who can help contribute

## Your input is needed to help shape our path forward

- What best practices from past partnerships can we continue to strive for in future endeavors?
- Where can the private sector most meaningfully engage to help accelerate progress towards the UNHLM targets?
- What private sector capabilities are needed?
- Are there areas in which the private sector should not engage?



# Members of the Private Sector Constituency:

NON-EXHAUSTIVE

sureAdhere



systemone

SIEMENS

EPCON

SANOFI



TROPED PHARMA CONSULTING  
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