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Honourable Dr Crispus Kiyonga Minister without Portfolio Government of Uganda

P.O. 7066, Kampala

Uganda

In reply refer to:

Référence à rappeler:

24 February 2010

## Dear Honourable Dr Kiyonga,

On behalf of the Coordinating Board of the Global Partnership to Stop TB, we would like to offer congratulations to you for the remarkable progress made in recent months, in rapidly establishing and operationalising the Global Fund to Fight AIDS, TB and Malaria (GFATM). The Stop TB Board would like to do whatever it can to support the work of the GFATM.

The Global Partnership to Stop TB was established in 1998, and has rapidly grown over the last 3 years to comprise over 250 partners around the world. Regional and national Stop TB partnerships are rapidly emerging, significantly contributing to accelerated expansion of anti-TB programming. Strategies to scale up a joint response to AIDS and TB are also being coordinated through the Stop TB Working Group on TB/HIV. In addition, there are five other working groups, two of them focusing on accelerating and scaling up TB control with accessible effective interventions, DOTS and DOTS plus, and the remaining three involving research for development of new tools for TB control, namely diagnostics, drugs and vaccines.

The Stop TB Coordinating Board comprises representatives from high TB-burden countries, geographical regions, donors, WHO, World Bank, UNICEF and NGOs. Several Stop TB Board members are also represented on the Board of the GFATM (specifically, Brazil, Nigeria, Pakistan, Japan, UK, Uganda, and USA).

The GFATM and the Stop TB Partnership have common interests and shared goals in a number of areas. Stop TB brings to the global effort to address the TB epidemic and the AIDS/TB co-epidemic:

- 1. A strong partnership, with a clear plan of action (the Global Plan to Stop TB), based on a well-tested strategy (DOTS) to reach the global targets for TB control.
- 2. A well established mechanism for mobilizing and coordinating financial and technical support for countries, including regular independent monitoring
- 3. A new initiative the Global TB Drug Facility to increase access to quality TB drugs

The Global TB Drug Facility (GDF) was established in March 2001, with the aim of providing TB drugs to treat at least 10 million people over the next 5 years. Over the last

cc: Dr Anders Norstrom, Executive Director Global Fund

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year the GDF has held two rounds of applications, approving grants of TB drugs to 16 countries for treatment of over 600,000 patients. The GDF has application, review and monitoring processes that are closely related to those proposed for the GFATM.

There are significant potential synergies between the GFATM and the Stop TB Partnership, and we propose that specific steps be taken to build on these links. These could include, for example:

- ◆ Identification of shared representation on the Boards of the GFATM and Stop TB
- Collaboration in approval of applications to the GDF and the GFATM that include potential support for TB drugs

We would like to suggest that a briefing and discussion on collaboration between Stop TB and the GFATM be included on the agenda of the forthcoming GFATM Board meeting in April 2002. We feel this would help the GATM in its goal of building on what already exists, and avoiding duplication. This could provide an opportunity to discuss collaboration with other related global initiatives, such as Roll Back Malaria. Specifically we propose that the Secretariat of Stop TB make a short presentation (about 5 minutes) on collaboration and coordination, followed by a brief discussion.

Yours sincerely,

Ernest Loevinsohn Chair.

Stop TB Board

Canada

Francis Omaswa Vice-Chair Stop TB Board

Uganda

Ejaz Rahim Secretary of Health Pakistan

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Board Member of **GFATM** 

Stop TB Board

Masami Sakoi Deputy Director, Minister's Secretariat Ministry of Health, Labour and Welfare

Stop TB Board

Japan