## Stop IB Partnership

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## Proposal for the Partners' Forum 2007

The Board is asked to consider a proposal for the next Partners' Forum, to be held in 2007. Decision points include: location, date, objectives, satellite events, structure, background documents and participants.

## What is the Stop TB Partners' Forum and what is it for?

The Partners' Forum is the assembly of the Stop TB Partnership and consists of an inclusive, consultative meeting of representatives of all the partners. According to the Partnership organigram, it is the ultimate authority to which all elements of the Partnership are answerable. Participants include representatives of the constituencies of the partnership, with particular emphasis on high level representation of affected countries and of key partners.

The Partners Forum gatherings present a variety of opportunities to:

- provide a highly visible platform to celebrate successes,
- publicly call partners to account on commitments,
- endorse common strategies and policies,
- make further commitments to targets or to implement a plan or strategies,
- honour TB heroes,
- highlight a key constituency that needs a higher profile,
- provide a platform for activists, spokespeople and very high level representatives,
- foster connections among partners,
- provide opportunities for high level engagement of government and partner representatives by Coordinating Board members,
- draw particular attention to the TB issue in the host country and thus influence policy there,
- foster healthy competition among nations battling TB,
- serve as a launching pad for key documents and initiatives,
- provide a forum for constituencies to reach consensus around a policy, statement, or position and communicate that consensus to the greater partnership,
- inform the Partners on progress or challenges in meeting shared goals,
- strengthen the Stop TB Partnership "Brand",
- provide an opportunity to stage satellite events at lower cost,
- introduce new partners to the TB movement, and
- attract media attention to TB.


## What is the history of the Stop TB Partners' Fora?

There have been two Partners' Fora. The first was in 2001 in Washington DC, hosted by the World Bank. The second was in New Delhi in 2004, hosted by the Government of India. The 2001 Partners Forum was attended by approximately 200 high level representatives. The 2004 Partners Forum attracted 350 participants, including more than 20 ministers or vice-ministers. Both meetings were held entirely in plenary.

The key outcome of the 2001 Partners Forum was the "branding" of the Partnership. This event, along with the success of GDF and the launch of the first Global Plan, put the Stop TB Partnership on the map as a vital force in the fight against TB, gave it the stature of a major global movement, and generated momentum for advocacy through a flurry of attention in the prestige press and other media.

The major outcomes of the 2004 Partners Forum were the birth of a patient activist movement for TB, and a rapid acceleration of TB control efforts in several countries (e.g. India, Indonesia and China).

## Proposal for the Partners Forum 2007:

The plan for a Partners Forum in 2007 was approved by the Coordinating Board as part of the 2006-2007 Work Plan. The Work Plan budget for this event is set at: US\$ 365,700. Financial support is through the Stop TB Trust Fund. Additional support for a Financing Summit is being sought from an interested donor.

Key aspects of the Partners Forum that require Coordinating Board consideration are the following:

1) Location
2) Date
3) Objectives
4) Satellite events
5) Structure
6) Background documents
7) Participants

## 1. Location

The following factors should be considered in choosing the location for the Partners Forum:

- Commitments
- Willingness of country to host
- Opportunity to influence policy in the host country and potential for positive policy change and action.
- Cost and ease of transport
- Availability of appropriate venue and infrastructure
- Opportunities to share costs/piggyback
- Media considerations

The cities of Nairobi, Beijing, Rio de Janeiro, Johannesburg, Cape Town have been suggested to the Executive Secretary as possible locations for the Partners Forum 2007. There are many other possibilities, however, these may serve as a useful set of options for the purposes of a comparative analysis, as set out in the comparison table at the end of Annex 1.

## Commitments:

Commitments have been made by the Coordinating Board through the Blueprint for Africa to hold the 2007 Partners' Forum in Africa. This Blueprint has now been endorsed by the African Union. No other commitments have been made regarding the Partners' Forum.

## Willingness of country to host:

China and Brazil have indicated a willingness to host the Forum, but have not offered a venue or facilities. Neither Kenya nor South Africa have yet been approached, pending Board discussions.

## Opportunity to influence policy:

The opportunity to influence policy is a significant consideration. As shown in the Global Plan, the epidemiological region of high HIV-incidence Africa is driving the global epidemic. TB has been declared an emergency in Africa by the African Region Ministers of Health. Three countries have taken up this emergency at national level by developing crisis plans: South Africa, Kenya and Nigeria. However, there are a number of considerations that argue for a special focus on South Africa.

South Africa has the highest TB burden in Africa. It is a centre of the HIVTB co-epidemic. It faces severe health system constraints which result in a TB programme that is disproportionately costly both to the health sector and to affected people and their communities. There are a health policy challenges at the highest level, whereas there is strong commitment to Stop TB at lower policy-making levels. The Deputy President of South Africa, Phumzile Mlambo-Ngcuka, has taken on TB as one of her three personal
challenges. There is also a thriving business movement to fight TB. Stop TB has previous good experience with advocacy campaigns in South Africa in collaboration with Meropa. These include the Hit TB for Six cricket campaign.

A national TB emergency has been declared in South Africa, and a crisis plan has been developed, but this requires shoring up if it is to be effective. There is strong support and influence from the business community and we have an excellent media partner. If we act now, through intensive high level advocacy efforts we have a chance to influence the government's position at the highest level. Our aim could be to set the stage so that the President can be congratulated at the Forum for his progressive stance and actions for positive change in the fight against TB. If we don't act, the disastrous situation will continue. In no other country is there so much potential for positive change through policy dialogue and engagement, though the path to such change would be extremely difficult.

## Cost and ease of transport:

All of Beijing, Rio de Janeiro, Nairobi and Johannesburg are transport hubs. Cape Town is slightly more difficult to reach, but is also readily accessible. Rio de Janeiro is the most expensive to reach, as measured from Africa, Europe, and Central America. Travel costs for Beijing, Nairobi and Johannesburg are roughly equal (see cost table in Annex 1).

## Availability of appropriate venue and infrastructure:

All of these cities can boast world class conference facilities.

## Opportunities to share costs/piggyback:

Significant cost sharing would apply to an event in South Africa held close to the IUATLD World Congress in Cape Town. These cost savings would accrue not only to the Partnership, but also to participants who would otherwise have to pay their own way to both events.

## Media considerations:

Johannesburg is one of the biggest media centres in Africa. Cape Town is not such a centre, and press coverage would most likely be from Johannesburg should the event take place in Cape Town. Nairobi is a good sub-regional media hub. Beijing and Rio de Janeiro are national media centres with some regional and global reach.

## 2. Date

The key options to consider are World TB Day, World AIDS Day, World Health Day, a date close to another major event, or an arbitrary date. Dates to avoid are key religious holidays, the months of July and August, late December, and national holidays or major event days in the host country.

The 2004 Partners' Forum was originally scheduled for World AIDS Day with the hope of drawing attention to the co-epidemic. However, this tactic was not successful as high level representatives needed to be at AIDS events on that day.

The 2004 Forum was rescheduled for World TB Day. Although this provided media opportunities and made it possible to launch the Global TB Report at the Forum, this choice of date unfortunately made it impossible for Ministers of Health and high level representatives to be in their countries on World TB Day.

World Health Day would be a possibility, especially if the World Health Organization had a focus on TB or a related subject on that day. The Partners Forum could provide a platform for the release of the World Health Report. However, it does not seem likely that the 2007 World Health Report will have a particularly relevant focus.

Given the likely choice of a location in Africa for the Partners Forum 2007, the Forum could be chosen to coincide with another major TB event there, in order to benefit from considerable cost savings given the expense of travel to Africa. In late October 2007, the IUATLD World Congress will take place in Cape Town. Therefore, a date immediately before the Congress would capture substantial cost savings and could facilitate the participation of many people who might otherwise not be in a position to attend the Forum.

The Roll Back Malaria Partners' Forum was held last November in Yaounde, immediately following the Malaria research meeting (MIP). The lessons learned were that it is a good idea to hold such meetings back to back but that the Forum should be held first to avoid too many extra (unregistered) participants at the Forum. Holding the Stop TB Forum in another city, Johannesburg, would provide for a separate identity for the two events both for the purposes of media attention, and for "crowd control".

Close association with the IUATLD Congress could reduce the opportunity of the Forum to promote the Stop TB Partnership "Brand", could result in "congress fatigue" and could reduce the media impact of the Partnership event. However, these disadvantages could be partly offset if the venue of the Forum were in Johannesburg rather than Cape Town, if media work were coordinated with IUATLD so as to build the media attention to a crescendo through the two events, and if the Forum were held before the Congress.

## 3. Objectives

At the time of the Partners' Forum, the Global Plan to Stop TB will be 1.5 years old. The Call to Stop TB will be over. We will know whether we have achieved the 2005 targets for TB control. We will very likely still have a long way to go towards filling the financial gap of the Global Plan, and we will probably still not have fully operationalised the Global Plan through countries, constituencies and working groups. Given this context, the following objectives are possible:
a. Provide a voice to constituencies to state their key challenges in implementing the Global Plan and the support they require including financing and beyond in order to put their work plans into action.
b. Bring together donors and those responsible for health budgets in affected countries in a half day financing summit in order to fill the financial gap.
c. Provide a marketplace for connecting partners through staged meetings and informal interaction.
d. Influence key policy makers through carefully prepared bilateral meetings between high level delegations and representatives of the Coordinating Board.
e. Publicly celebrate countries that have met the 2005 TB control targets
f. Report on trends in implementing the Global Plan and provide opportunities for input on possible mid-course corrections.
g. Report on the latest external review of the Partnership and call for endorsement of any structural changes endorsed by the Coordinating Board.

## 4. Satellite Events

## Field Visits

Field visits to clinics and other relevant sites can be arranged as part of the Forum Programme. These may include press events organised around TB Ambassadors or other High Level Forum participants.

High Level Mission to the South African Government and Business Leaders

A mission of Board members to key policy makers in the South African government and to selected business leaders can be built into the Forum Programme.

## TB Research

Note that a satellite research meeting could also be considered. This would be a one-day event comprising:

- the Coordinating Board and a sub-set of the Secretariat
- the R\&D Working Groups,
- other key members of Public-Private Partnerships for new tools to fight disease,
- Chief Scientific Advisers on bioscience to the governments of countries with high bioscience productivity,
- Selected high level researchers in TB
- Major R\&D donors

The objectives would be to define the technical research needs in order to provide a framework for a grant programme. This framework would be delivered to major granting agencies in bioscience with a request that it be used as the basis for the terms for a call for proposals and in the evaluation of the resulting submissions.

## 5. Structure

Preparations for the Partners Forum would include E forums on the topics to be discussed in the breakout sessions. The E forum outcomes should be introduced at the outset of the breakout sessions in order to set the stage for the discussions. There should also be an electronic match-making system devised so that partners attending the Forum can easily identify and arrange to meet with others for the purpose of furthering their mutual interests in fighting TB. Connections with the local business community, NGOs and the affected community would be actively encouraged.

A high level representative of the host country together with other participants of similar stature would be asked to open and/or close the meeting. If given a choice, closing would be preferred, as the second day will be attended by high level ministers and heads of organisations. The first day would be more informal and need not involve ministerial level representatives. In order to give a true voice to the constituencies of the partnership, it is proposed that, after the welcome, the first day of the meeting take place in breakout sessions with the following proposed agenda:

## Day 1: Consultation day

(Ministers and heads of agencies may choose not to attend this day unless a bilateral meeting is planned.)

9:00-10:00: Opening by National TB Ambassador and welcome in plenary, accompanied by cultural intervention.

10:00-12:00 Mixed breakout session on cross-cutting issues (such as financing, advocacy, mobilising partners) with rapporteurs preparing statements immediately. Coffee break during this period.

During this period: bilateral meetings with ministerial delegations and Board.
12: 00-13:00 Reporting back/statement preparation.
13:00-14:30: lunch
14:30-17:00 breakout sessions in constituency groups to formulate statements to be made on the second day. Coffee break during this period.

During this period: bilateral meetings with ministerial delegations and Board.
17:00 marketplace including facilitated meetings among partners and a display of booths.

Evening: Communication event.

## Day 2: Ministerial and Representatives forum

9:00-10:00: Welcome to Ministers and Heads of Agencies joining on this day. Constituency statement presentations, leading to a "declaration" or "call"

10:00-10:30: first Ministerial/Head of Organisation panel discussion (according to meeting objectives)

10:30: coffee
11:00-12:30: series of high level panel discussions and presentations in plenary.

12:30-14:00 lunch/ press event
14:00-17:00: TB Financing summit
17:00 High Level closing ceremony
Evening: Communication event.

## 6. Background documents

The following background documents are proposed:

1) A synopsis of the Global Plan in advocacy-friendly format showing latest trends in implementation and progress to date in putting the plan into action.
2) TB resource tracking report
3) Resource mobilisation plan.
4) External Review/Evaluation report

## 7. Participants

Traditionally, the Partnership has invited Ministers of Health, Finance, Planning and (where relevant) Justice of high burden countries, the Coordinating Board members, a representative of each partner agency/organisation (of which there are now over 500), and other key desired participants on a strategic basis. A limited number of developing country participants (including all high level affected country representatives) are provided with financial support.

ANNEX I
Cost comparison of location options

| No of Participants | From | To | Meeting <br> Days | Overnight flight outward | Overnight flight return | Travel cost | Incidentals | Total Travel cost | Per Diem | Total Per Diem | Total Cost per participant | Grand Total |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  | USD | USD | USD | USD | USD | USD | USD |  |
| 1 | Mexico | Beiijing | 3 | 55.00 | 87.00 | 4,300.00 | 120.00 | 4562.00 | 173.00 | 519.00 | 5,081.00 |  |
| 1 | Nairobi | " |  | 35.00 | 87.00 | 3,200.00 | 120.00 | 3442.00 | 173.00 | 519.00 | 3,961.00 |  |
| 1 | Geneva | " |  | 54.00 | 87.00 | 3,258.00 | 120.00 | 3519.00 | 173.00 | 519.00 | 4,038.00 | \$13,080.00 |
|  |  |  |  |  |  |  |  |  |  |  | 13,080.00 |  |
| 1 | Mexico | Rio De Janeiro | 3 | 55.00 | 140.00 | 3,400.00 | 120.00 | 3715.00 | 279.00 | 837.00 | 4,452.00 |  |
| 1 | Nairobi | " |  | 35.00 | 140.00 | 6,440.00 | 120.00 | 6735.00 | 279.00 | 837.00 | 7,572.00 |  |
| 1 | Geneva | " |  | 54.00 | 140.00 | 3,875.00 | 120.00 | 4189.00 | 279.00 | 837.00 | 5,026.00 |  |
|  |  |  |  |  |  |  |  |  |  |  | 17,050.00 | \$17,050.00 |
| 1 | Mexico | Johannesburg | 3 | 55.00 | 99.00 | 7,100.00 | 120.00 | 7374.00 | 198.00 | 594.00 | 7,968.00 |  |
| 1 | Nairobi |  |  | 35.00 | 99.00 | 1,400.00 | 120.00 | 1654.00 | 198.00 | 594.00 | 2,248.00 |  |
| 1 | Geneva |  |  | 54.00 | 99.00 | 3,278.00 | 120.00 | 3551.00 | 198.00 | 594.00 | 4,145.00 |  |
|  |  |  |  |  |  |  |  |  |  |  | 14,361.00 | \$14,361.00 |
| 1 | Mexico | Nairobi | 3 | 55.00 | 91.00 | 8,500.00 | 120.00 | 8766.00 | 181.00 | 543.00 | 9,309.00 |  |
| 1 | Geneva |  |  | 54.00 | 91.00 | 2,946.00 | 120.00 | 3211.00 | 181.00 | 543.00 | 3,754.00 |  |
|  |  |  |  |  |  |  |  |  |  |  | 13,063.00 | \$13,063.00 |

Drafted by Dorcas Oloo: 24 February 2006

## Overall Comparison Table:

| City | Commitments | Willingness | Policy <br> Change <br> Potential | Cost <br>  <br> ease | Infrastructure | Cost <br> sharing | Media |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Beijing |  | ++ |  | + | ++++ |  | + |
| Rio de Janeiro |  | + |  | + | +++ | + |  |
| Nairobi | +++++ | NA | +++ | + | + |  | + |
| Cape Town | +++++ | NA | +++++ | ++ | +++ | +++++ |  |
| Johannesburg | +++++ | NA | +++++ | +++ | +++ | ++++ | ++++ |
|  |  |  |  |  |  |  |  |

The Board committed to a Partners' Forum in Africa in the framework of discussions on the Africa Blueprint. The Board has not given such a commitment to other governments or regions at this stage.

