

**Report of actions following the decision points from
38th Board Meeting**

	Decision Point	Action
38.1	<ol style="list-style-type: none"> The Board adopts the proposed agenda for the 38th Stop TB Partnership Board meeting. The Board endorses the following new Board members: <ol style="list-style-type: none"> H.E. Dr Teodoro J. Herbosa, Department of Health, The Philippines (Countries Affected by TB) Mr Maxime Lunga, Club des Amis Damien, Democratic Republic of Congo (Community of People Affected by TB) Dr Tanaka Mukuhwa, Zvandiri, Zimbabwe (Community of People Affected by TB) Mrs Ariane McCabe, GSK, Switzerland (Private Sector Constituency) Mr Junichi Takahashi, Ministry of Health, Labour and Welfare, Japan (Donors) 	<ul style="list-style-type: none"> No follow-up required.
38.2	<p>The Board</p> <ol style="list-style-type: none"> Highlights the existence and importance of achieving the UNHLM on TB target to end TB stigma by the end of December 2027 and asks the Secretariat, working closely with partners, to further define the target and develop a package of interventions and processes that will contribute towards ending TB stigma, starting with health care settings. Requests the Secretariat to support national and community partners to advocate for and implement approaches to ending TB stigma, including through the Challenge Facility for Civil Society (CFCS) Round 13. Strongly urges the Secretariat to work in close collaboration with the World Health Organization (WHO) to explore modalities for collecting and integrating data on TB stigma into the annual Global TB Reports. 	<ul style="list-style-type: none"> Progress on addressing stigma has continued despite significant shifts in the global health funding landscape. Seventeen countries have now completed TB stigma assessments. A comprehensive analysis of the evidence highlighting both the types of stigma most experienced and the points along the TB journey where they occur has been submitted for peer review. This analysis will help countries design and implement targeted interventions to overcome stigma enabling more people to be diagnosed and treated. In parallel, the Stigma Dashboard is now active and accessible at https://tbstigma.org. The work on stigma target definition and integration of TB stigma annual reporting is ongoing. Though progress has continued to be made, partner funding reprioritizations in communities, rights and gender and advocacy has significantly limited Stop TB's capacity to work in these areas including on stigma. The issue of stigma remained part of the discussions with WHO TB leadership as an element of the new End TB strategy as well as part of conversations about updated priorities and areas of work.

38.3	<p>The Board calls upon all high burden countries, donor countries, and financial institutions to work towards the 2023 UNHLM commitments on TB financing, and asks the Secretariat, working with partners, to take the following actions:</p> <ol style="list-style-type: none"> 1. Undertake a deep dive analysis of selected high burden countries to understand the funding gaps, possible diversity of funding sources, and options for filling the gaps to inform future advocacy efforts. 2. Support countries to diversify funding sources for TB beyond domestic budgets, traditional donors, and Global Fund grants and to seek new funding from Development Banks, blended loan and grants financing, debt swaps, private sector financing, crowd funding, etc. 3. Work with Ministers of Health and Finance, Members of Parliament, National Stop TB Platforms, TB-affected communities, and advocates to substantially increase the awareness of the TB burden and funding needs, including domestic budgets for TB. 4. Support countries to incorporate TB within applications to various global funding sources, such as the Pandemic Fund and Green Climate Fund. 5. Work with countries to incorporate TB interventions into packages of essential health services covered under prepaid national financing schemes, such as health insurance and primary health care. 6. Engage with Regional Development Banks, especially the Asian Development Bank, towards including TB within their various funding envelopes. 7. Establish a sub-committee of the Board focusing on mobilization of resources for TB and work with the Secretariat on alternative financing sources. The sub-committee will report as necessary and at the Board meeting in 2025. <p>Regarding Global Fund financing for TB, the Board requests the Secretariat:</p> <ol style="list-style-type: none"> 8. To work with TB Situation Room partners, Global Fund country teams, country programmes and partners to do a deep dive analysis of funding gaps in several countries and identify practical solutions needed to close the 2025-2026 financial gaps in these countries. 9. To advocate for increased Global Fund allocations for TB at national level using the existing flexibilities for CCM and governments to decide the appropriate split of country funding envelopes. 10. To work with the Global Fund Secretariat on filling the funding gaps in the current funding cycle using different mechanisms available through Global Fund, such as financial and programmatic efficiencies, portfolio optimization, reprogramming, etc. 	<ul style="list-style-type: none"> • Global funding gaps to end TB worsened in the early part of 2025 in large part due to funding cuts and policy realignments by the US Government. The Stop TB Secretariat acted promptly by analyzing the funding cuts and their impact on high TB burden countries and modeled various scenarios to help address the uncertainties regarding future funding. This piece of work informed advocates and the media and is also now published as a peer reviewed journal article. • The secretariat actively engaged with high burden countries, including with the Ministers of Health who are part of the Stop TB Board. This led to a side event on TB Financing during the 2025 World Bank Spring Meetings. This productive event featured amazing contributions from the Ministers of Health of Indonesia, Nigeria and The Philippines. In addition to this side event there was a meeting hosted by the Stop TB Secretariat, the Ministers of Health of Indonesia, Nigeria, and The Philippines, the World Bank and RESULTS. During the event, the World Bank committed to work with countries to help fill the funding gaps. • Due to partner funding realignments, the Secretariat was unable to support countries to incorporate TB within applications to various global funding sources or to work with countries to incorporate TB interventions into packages of essential health services. Notably, given the significant changes to US global health policy and funding, countries had other priorities and Stop TB's support for the recommended activities was not requested in that area. • The Secretariat robustly engaged with the Asian Development Bank (ADB), signed an MOU with ADB and helped ADB to launch 'EXCITD', a financing initiative for countries which includes TB. The co-hosting of the Stop TB Board by ADB speaks to the overall success of this relationship. Further work is planned with ADB and countries to access ADB financing. This work has also opened possibilities of financing TB innovators through the ADB Venture Funding channel. • Stop TB Partnership worked with the Global Fund (GF) for the re-prioritization exercise of GF grants, shared experiences from TB REACH on efficiency in screening and diagnosis, e.g. data and experience shared on sputum pooling which has the potential of significantly testing more people with less budget. Stop TB Secretariat also convened a virtual meeting of NTPs of high burden countries, discussed efficiency and integration, and provided a platform for sharing of experiences between countries. • Partner funding reprioritizations and reductions in staff working on Global
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38.4	<ol style="list-style-type: none"> 1. The Board requests all constituencies, especially those also working on nutrition and SDG 2 (Zero Hunger), to engage in raising awareness about the role nutrition plays in preventing and treating TB. <p>The Board asks the Secretariat to undertake the following:</p> <ol style="list-style-type: none"> 2. Work towards ensuring that high TB burden countries, partners and nutrition-related stakeholders are aware of the important role that nutrition plays in preventing TB. 3. Use Stop TB Partnership's advocacy, communication, coordination and convening capacity to ensure that provision of nutrition is included as a priority in national TB responses, National Strategic Plans, and Global Fund funding requests, particularly in high TB burden countries with high prevalence of undernutrition; accordingly, TB should also be included in nutrition initiatives. 4. Develop strategic collaborations and concrete actions with UN agencies (such as the World Food Programme, SUN Movement), and other International Organisations (such as Nutrition International), with an objective of increasing awareness of large-scale nutrition initiatives on populations who are undernourished and susceptible to TB. 5. Engage with the Nutrition for Growth (N4G) Paris Summit which will be held in March 2025 as a key moment to galvanise financial and policy commitments to end malnutrition, and to support integrated approaches, including making nutrition interventions an integral part of TB responses. 	<ul style="list-style-type: none"> • Due to partner funding realignment leading to the loss of the advocacy and communications teams, the Secretariat's ability to raise awareness on a broad scale has been severely curtailed. Team and executive leaders continue to raise awareness in their priority areas as much as practicable. • As requested by the Board, Stop TB Secretariat did engage with the N4G Paris Summit and had planned a side meeting. However, the meeting had to be canceled a few days before the event because the co-hosts, who are donor countries on the Stop TB Board, had to cancel. • The US Government ended its support to the SUN Movement. Some of the previously allocated funds for SUN were reprogrammed to Stop TB Partnership and these funds have been used to provide a grant to a partner in Uganda for integrating nutrition interventions into community-based screening activities using ultra-portable X-rays/CAD supported by the introducing New Tools Project (iNTP). Nutritional supplementation will be provided to households of people found to have TB, with a focus on improving the nutritional status of children under 5 years old, and pregnant and breastfeeding mothers, with the wider aim to prevent progression of TB infection to active disease. • Stop TB Secretariat advocacy efforts and messaging now consistently includes nutrition as an important tool to prevent TB as well as to reduce mortality due to TB.

38.5	<p>The Board asks, contingent upon funding availability, the Secretariat to:</p> <ol style="list-style-type: none"> 1. Convene and engage diverse stakeholders and partners, particularly including civil society and communities, in coordination with other initiatives, including the WHO's TB Vaccine Accelerator, to advocate for and support an enabling environment for the concrete and practical development and delivery of TB vaccines including creating opportunities to increase its financing. 2. Develop a TB vaccine focused knowledge sharing platform by aggregating different sources of information from various platforms, technical partners, private sector and researchers. 3. Engage with civil society and communities, including through the Challenge Facility for Civil Society, to advocate, generate demand, and strengthen vaccine literacy. 4. Ensure key stakeholders and partners are kept informed about the progress in TB vaccine development and delivery. 	<ul style="list-style-type: none"> • The Stop TB Partnership has engaged potential donors / funders, including the European Investment Bank, Gates Foundation, and Wellcome Trust, to mobilize resources across three critical areas: (1) multistakeholder convening, (2) TB vaccine knowledge sharing platform and (3) civil society and community engagement. However, due to the current changing funding landscape, we have not been able to mobilize resources for these activities. • The Stop TB Partnership participated in TB Vaccine Accelerator Council meeting on 20 May 2025. All current information about the Council's work and their most recent Progress Report can be found here. • The Stop TB Partnership has been engaging the Working Group on New Tools to integrate critical TB vaccine related information into the TB Innovation Sandbox. • To date, the Stop TB Partnership has not received funding to support vaccine related advocacy though discussions with donors are ongoing. The Secretariat remains aware and updated on the current state of vaccine development and delivery and includes references to the importance of a TB vaccine in high-level discussions and events. Additional discussions will also be included in the 39th Board meeting.
38.6	<p>The Board asks the Secretariat to:</p> <ol style="list-style-type: none"> 1. Encourage the Global Fund Secretariat to work together urgently with national TB programs, local partners and technical organizations to implement and scale-up impactful innovations and report back on progress at the next Board Meeting. 2. Continue to engage developers and innovators while using the TB REACH platform for rapid implementation and evaluation of technologies and approaches. 3. Actively engage with current and potential new donors to appeal for new funding for future TB REACH waves. 4. Use its convening power and global voice to work with implementing partners and other technical partners, including Global Fund, to broadly disseminate impactful innovations for scale-up supported through TB REACH, Introducing New Tools Project (iNTP), Re imagining TB Care and other Stop TB initiatives. 	<ul style="list-style-type: none"> • TB REACH contributed to calls for evidence on multiple topics around improved TB detection including early evaluations of the performance of near point-of-care tongue swab tests and pooled sputum evaluations. • TB REACH partners are working with Global Fund, WHO and others to support rapid uptake of novel tests as part of the next Global Fund grant cycle as pathfinding demonstration projects in several countries supported by GAC and Gates Foundation. • TB REACH coordinated with Global Fund to host an online and in-person seminar to discuss pooled sputum tests and the evidence and practical information about how it is done and how it can save 50-60% of testing costs. • TB REACH engaged many product developers and linked them to local implementers to help evaluate and generate feedback on performance of new technologies including AI for cough, digital stethoscope, and blood tests. • The Digital Health Technology Hub is finalizing the development of the Library for Evaluation of AI Products for TB (LEAP-TB) which will fast track evaluations for implementers and developers of AI technology through a publicly available

		<p>platform and serve as a repository for information on using different AI solutions for TB detection with major support from the United States Centers for Disease Control and Prevention (CDC).</p> <ul style="list-style-type: none"> • The Re-imagining TB Care (RTC) initiative has worked on identifying, adapting, and implementing best practices from the private sector to the public sector for the concrete, practical, and rapid roll-out of innovations for TB, other airborne infections and lung diseases, particularly related to pandemic prevention, preparedness, and response. • Currently, with catalytic funding from the United States Centers for Disease Control and Prevention (CDC), RTC has developed the TB Innovation Sandbox (Sandbox), which is an AI-enabled virtual playground to accelerate the concrete and practical roll-out of TB innovations, similar to how technology companies test run early releases of new products, services, features, etc. As part of the Sandbox, we have further expanded the InnoScan, which has systematically mapped over 400 product innovations across 30 opportunity areas. Both the TB Innovation Sandbox and InnoScan will be further expanded with continued and increased support from CDC and the Ministry of Foreign Affairs of the Republic of Korea (MoFA). • In the future, with catalytic funding support from Korea MoFA, RTC will be exploring the building of a blended, full-stack venture platform, similar to how Silicon Valley accelerators and venture capital firms support innovators and innovations. This platform will bring together the Stop TB Partnership's various innovation work efforts, including RTC, TB REACH, and Introducing New Tools Project (iNTP) and scope how to provide more comprehensive, interconnected support across the critical pathway while seeking a return on investment to support future innovations alongside traditional donor funding. • The Stop TB Partnership and RTC, TB REACH, and iNTP has successfully engaged current and potential donors / funders with additional funding being committed over the past nine months. • A Stop TB Partnership webinar on the new SIILTBCY skin test for TB infection attracted over 750 registered participants, with over 300 people joining online. The webinar shared early experience from TB REACH-supported projects and highlighted its availability through GDF. • Newly funded activities supported by the introducing New Tools Project (iNTP) were kicked off in 2025, expanding countries' capacity for early TB and drug-resistant TB diagnosis including through provision of support for ultra-portable X-ray with CAD, diagnostics connectivity solutions and next-generation sequencing.
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38.7	<p>The Board asks the Secretariat to</p> <ol style="list-style-type: none"> 1. Further strengthen and expand the coordination and alignment of advocacy efforts and messages of various partners at national, regional, and global levels through regular engagement and communications. 2. Work with partners, including the private sector, supporting all efforts made for a successful Global Fund Replenishment. 3. Ensure inclusion and increased visibility of the TB agenda during 2025 high-level events, forums and discussions at national, regional and global levels, such as World Economic Forum, World Bank meetings, World Health Assembly, UNGA, G20, engagement with regional political groups (such as African Union and ASEAN) and national events. 4. Work with national stakeholders and partners and especially civil society, to focus their specific advocacy efforts in a selected group of high TB burden countries towards increasing awareness of TB situation, funding, and gaps to address challenges and make progress towards ending TB. <p>The Board recognizes the importance of up-to-date policies for effective TB responses, aligned with emerging science and evidence and appreciates the STBP Secretariat development of the Step up for TB 2024 (SUFT)</p> <ol style="list-style-type: none"> 5. The Board asks the Secretariat to use this as a tool in STBP advocacy efforts and continuing to monitor progress in TB policies in high TB burden countries. <p>The Board recognizes the 2024 TB Research Funding report of Treatment Action Group (TAG) with support from Stop TB Partnership, appreciates the increase in funding for R&D in 2023, and notes with concern that this represents less than 25% of the total need</p> <ol style="list-style-type: none"> 6. The Board recommends the Secretariat and partners to use this report to advocate for increase financing for TB R&D and work towards developing the 2025 Report. <p>The Board applauds the launch of Round 13 of the Challenge Facility for Civil Society for a historical high level of funding (up to USD 19 million) and appreciates the contributions from USAID and L'Initiative France.</p> <ol style="list-style-type: none"> 7. The Board calls upon civil society and community organizations and networks of people affected by TB to take this opportunity and submit quality applications for the funding. 	<ul style="list-style-type: none"> • Though the Secretariat's advocacy and communications functions have been severely reduced with the closing of the teams, the Stop TB Partnership was still able to lead and participate in a number of events to strengthen and expand the coordination and alignment of broader advocacy efforts, support a successful Global Fund Replenishment, ensure inclusion and increased visibility of the TB agenda at national, regional and global levels including the World Economic Forum, the World Bank Spring Meetings, WHA, TICAD, APEC and World Bio Summit, UNGA, World Health Summit, etc. • On the margins of the World Economic Forum in mid January, Stop TB Partnership co-hosted a roundtable discussion on the importance of harnessing digital technology in the fight against infectious diseases to improve health outcomes and strengthen health systems globally. The event was successful in raising TB's visibility on a rarely reached stage and featured participants including executive leadership from Bain, Anthropic, DataBricks, Google Deepmind, etc. as well as Minister Motsoaledi of South Africa. Discussion also included the importance of the then upcoming Global Fund and Gavi Replenishments. • The Stop TB Partnership leveraged the World Bank Spring Meetings for two events in April including one focused on ending TB through smart investments. The opportune timing and location in Washington, DC prompted discussions around rethinking funding mechanisms and promoting more country-owned, diversified, and sustainable approaches to global health financing. High-level participants including Minister Pate of Nigeria, Minister Sadikin of Indonesia, Minister Herbosa of The Philippines, as well the Director General of Africa CDC, the Zambian and Bangladeshi Ambassadors to the US, etc. The second event co-hosted with RESULTS US, during the World Bank Spring Meetings, also included World Bank Global Director for Health, Nutrition and Population, as well as the WB's regional leaders for Asia Pacific, West Africa, etc. The event served as a candid and rich discussion on experiences, challenges, and solutions to mobilize and use resources more effectively for health through innovative WB financing approaches. • The Stop TB Partnership was also part of the High-Level event on Ending TB in Central Asia and besides presenting and sharing a vision for the future, Stop TB held one-on-one engagements with MoH from KAZ, KYR, TAJ, TRK, UZB. • During the WHA in Geneva, Stop TB Partnership organized three High Level events featuring the Ministers of Health, who are also Board members, as well as representatives of the Governments of Japan and Korea. In addition, Stop
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	<p>8. The Board asks the Secretariat to ensure smooth implementation of the Round 13 and early engagement with donors to ensure a Round 14 of CFCS in 2025.</p>	<p>TB facilitated that attendance and participation of John Green (the American author, influencer and advocate) in Geneva and organized dedicated events with students as well as with GHC staffers and a fireside chat with the ED of the Global Fund</p> <ul style="list-style-type: none"> • Stop TB actively participated in, including delivering a keynote, at the ADB Health Forum held in July in Manila. With this occasion, Stop TB signed an MoU with ADB. • In August, Stop TB partnership was present in Tokyo and Yokohama – for bilateral meetings with the MoH, MoFA, JATA, Japanese private sector companies and JICA. Activities included signing an MoU with JATA for future collaboration in the region. Stop TB had a special place at TICAD 9 in Yokohama as part of the formal agenda, presence at all the formal events including meeting with MoFA Japan, Members of the Parliament and a special session on the private sector. • In early September, Stop TB was present in Seoul, South Korea for bilateral meetings and engagement with MoH, MoFA, Minister of Unification, KOICA CDC, KDC, private sector, innovators and several start-ups. Stop TB also participated in the End TB in Asia Summit and led an APEC side event with engagement of ADB and KOICA. • The funding for Step Up for TB as well as for the R&D Financing Report was solely from USAID. Due to change in priorities and direction of funding of the USG – the development of these two reports is currently unfunded. For the R&D funding report, we are discussing with TAG to identify another potential funder. • Although CFCS Round 12 and Round 13 activities were temporarily suspended following the USG’s decision to halt funding for activities not considered life-saving humanitarian activities, with increased support from UNITAID and continued support from L’Initiative (Expertise France), CFCS 2025 resumed to strengthen efforts to overcome human rights barriers, create demand for new tools, increase social accountability, build people-centered approaches and ensure equitable access to TB services for all. With the support of L’Initiative (Expertise France) and UNITAID, 29 partners across 13 countries are advancing community-led initiatives to end TB.
38.8	<ol style="list-style-type: none"> 1. Based on the recommendation of the Finance Committee, the Board endorses the Stop TB Partnership 2023 Annual Financial Management Report. 2. The Board asks the Finance Committee to continue to monitor expenditures, 	<ul style="list-style-type: none"> • The Secretariat continued to monitor expenditures, encumbrances, and financial risks, and brief the Finance Committee of any concerns.

	<p>encumbrances, and financial risks, and to alert the Executive Committee of any concerns.</p> <p>The Board requests the Secretariat:</p> <ol style="list-style-type: none"> 3. To prepare the Stop TB Partnership 2024 Annual Financial Management Report and submit to the Board for endorsement. 4. To continue to work to implement ways to further increase the interest earned. 5. To continue its efforts to strengthen diversity and equity in staffing, people management, as well as providing a safe and inclusive working environment. 	<ul style="list-style-type: none"> • The 2024 Annual Financial Management Report was prepared and submitted to the Finance Committee for review in August 2025 and it will be submitted to the Board for endorsement during the 39th Board Meeting. • The 2025 budget was prepared and approved by the Executive Committee in December 2024. The 2026 budget is under preparation and will be presented to the Finance Committee in November 2025 for review and subsequent approval by the Executive Committee in December 2025. • The Secretariat continued its work to ensure a healthy work environment taking into consideration the changes in the funding situation. The Secretariat participated in the performance, leadership and culture trainings provided by UNOPS, as well as the annual culture and engagement survey and related actions.
38.9	<ol style="list-style-type: none"> 1. The Board warmly welcomes Dr Teodoro J. Herbosa, Secretary of Health of The Philippines, as the new Chair of the Stop TB Partnership Board, serving from January 2025 to the end of December 2027. 2. The Board requests the Secretariat, with the guidance of the Executive Committee, to define and finalize arrangements for the 39th Board Meeting to be held in September 2025 in, Washington D.C., United States of America. 	<ul style="list-style-type: none"> • While the Secretariat began planning for a Board meeting in the USA, ultimately those plans had to be changed given the increased difficulties that Board members and guests would face in securing visas. In addition, USAID was no longer positioned to co-host us as health ministries usually do in the countries where we host our meetings. At the generous invitation of Secretary Herbosa, the Secretariat has pivoted to planning the 39th Board Meeting for late October in Manila, Philippines.