The post-2015 Global TB and HIV strategies and agenda setting: what is going on?

Haileyesus Getahun, WHO
Key milestones in the MDGs

• 2000: UN Millennium declaration (Development and poverty eradication was 1 of 7 areas addressed)

• 2001: Road map to the implementation of millennium declaration
UN Millennium Development Goals

Annual monitoring using 18 targets and 48 indicators

HIV: 2 targets and 5 indicators
TB: 0 targets and 2 indicators
## MDGs Progress chart, 2013

### GOAL 4 | Reduce child mortality

<table>
<thead>
<tr>
<th>Goals and Targets</th>
<th>Africa</th>
<th>Asia</th>
<th>Oceania</th>
<th>Latin America &amp; Caribbean</th>
<th>Caucasus &amp; Central Asia</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Northern</td>
<td>Sub-Saharan</td>
<td>Eastern</td>
<td>South-Eastern</td>
<td>Southern</td>
</tr>
<tr>
<td>Reduce mortality of under-five-year-olds by two thirds</td>
<td>low mortality</td>
<td>high mortality</td>
<td>low mortality</td>
<td>low mortality</td>
<td>moderate mortality</td>
</tr>
</tbody>
</table>

### GOAL 5 | Improve maternal health

<table>
<thead>
<tr>
<th>Goals and Targets</th>
<th>Africa</th>
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<th>Oceania</th>
<th>Latin America &amp; Caribbean</th>
<th>Caucasus &amp; Central Asia</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Northern</td>
<td>Sub-Saharan</td>
<td>Eastern</td>
<td>South-Eastern</td>
<td>Southern</td>
</tr>
<tr>
<td>Reduce maternal mortality by three quarters</td>
<td>low mortality</td>
<td>very high mortality</td>
<td>low mortality</td>
<td>moderate mortality</td>
<td>high mortality</td>
</tr>
<tr>
<td>Access to reproductive health</td>
<td>moderate access</td>
<td>low access</td>
<td>high access</td>
<td>moderate access</td>
<td>moderate access</td>
</tr>
</tbody>
</table>

### GOAL 6 | Combat HIV/AIDS, malaria and other diseases

<table>
<thead>
<tr>
<th>Goals and Targets</th>
<th>Africa</th>
<th>Asia</th>
<th>Oceania</th>
<th>Latin America &amp; Caribbean</th>
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<tr>
<td></td>
<td>Northern</td>
<td>Sub-Saharan</td>
<td>Eastern</td>
<td>South-Eastern</td>
<td>Southern</td>
</tr>
<tr>
<td>Halt and begin to reverse the spread of HIV/AIDS</td>
<td>low incidence</td>
<td>high incidence</td>
<td>low incidence</td>
<td>low incidence</td>
<td>low incidence</td>
</tr>
<tr>
<td>Halt and reverse the spread of tuberculosis</td>
<td>low mortality</td>
<td>moderate mortality</td>
<td>low mortality</td>
<td>moderate mortality</td>
<td>low mortality</td>
</tr>
</tbody>
</table>

- **Target already met or expected to be met by 2015.**
- **Progress insufficient to reach the target if prevailing trends persist.**
- **No progress or deterioration.**
- **Missing or insufficient data.**

![GLOBAL TB PROGRAMME](image)

![World Health Organization](image)
Criticisms of MDGs

• Too ambitious goals and poorly specified targets
• Overlooks inequality and specific groups
• Global targets versus national targets
• Too much focus on health (3 out of 8 Goals)
• Key elements are omitted (e.g. human rights)
• Poorly addressed and poorly specified targets
• Poor consultation and CSO engagement
Post 2015 agenda setting: complex process

- Rio +20 (Earth summit 2012)
- Country, regional and global consultations (web-based)
- UN System Task Team
- High level panel of eminent persons
- Thematic consultations (including health)
- Sustainable Development Solutions Network
- Open working group on SDG (Since Jan 2013)
- High-level Political Forum (Since Sept 2013)
Did not elaborate specific goals but stated that the SDGs should be limited in number, aspirational and easy to communicate.
High-level Panel of Eminent Persons on the Post-2015 Development Agenda

Co-chairs of the Panel

Vision and shape of a Post-2015 development agenda that will help respond to the global challenges of the 21st century, building on the MDGs and with a view to ending poverty
4. Ensure Healthy Lives

4a. End preventable infant and under-5 deaths \(^1,2\)

4b. Increase by \(x\%\) the proportion of children, adolescents, at-risk adults and older people that are fully vaccinated \(^1,2\)

4c. Decrease the maternal mortality ratio to no more than \(x\) per 100,000 \(^1,2\)

4d. Ensure universal sexual and reproductive health and rights \(^1,2\)

4e. Reduce the burden of disease from HIV/AIDS, tuberculosis, malaria, neglected tropical diseases and priority non-communicable diseases \(^2\)
Benefits of investing in TB outweigh the costs

Improved health and productivity gains per $1 spent

Reference: The report of the high-level panel of eminent persons on the post-2015 development agenda
<table>
<thead>
<tr>
<th>Priority Areas</th>
<th>Relative Frequency of Responses</th>
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<tbody>
<tr>
<td>Food security &amp; sustainable agriculture</td>
<td></td>
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<td>Water and sanitation</td>
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<tr>
<td>Energy</td>
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<tr>
<td>Education</td>
<td></td>
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<tr>
<td>Poverty eradication</td>
<td></td>
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<tr>
<td>Health</td>
<td></td>
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<tr>
<td>Means of Implementation</td>
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<tr>
<td>Climate change</td>
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<tr>
<td>Environment/management of natural resources</td>
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<td>Employment</td>
<td></td>
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<tr>
<td>Gender</td>
<td></td>
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<tr>
<td>Sustainable consumption and production (SCP)</td>
<td></td>
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<tr>
<td>Cities and housing</td>
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<tr>
<td>Economy &amp; macro-economic stability</td>
<td></td>
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<tr>
<td>Oceans and Seas</td>
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<tr>
<td>Disaster risk reduction</td>
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<tr>
<td>Biodiversity</td>
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<tr>
<td>Equity</td>
<td></td>
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<tr>
<td>Desertification</td>
<td></td>
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<tr>
<td>Waste management</td>
<td></td>
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<tr>
<td>Transport and Infrastructure</td>
<td></td>
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<tr>
<td>Peace and security</td>
<td></td>
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<tr>
<td>Green economy</td>
<td></td>
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<tr>
<td>Good governance</td>
<td></td>
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<tr>
<td>Land management</td>
<td></td>
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<tr>
<td>Forests</td>
<td></td>
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<tr>
<td>ICT</td>
<td></td>
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<tr>
<td>CSR</td>
<td></td>
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<tr>
<td>Community culture and spirituality</td>
<td></td>
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<tr>
<td>Tourism</td>
<td></td>
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<tr>
<td>Beyond GDP</td>
<td></td>
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<tr>
<td>11 global thematic consultations, including one on health</td>
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<tr>
<td>---------------------------------------------------------</td>
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<tr>
<td><strong>Lead UN Agencies</strong></td>
<td><strong>Events</strong></td>
</tr>
<tr>
<td><strong>Growth and employment</strong></td>
<td>ILO, UNCTAD, UNDP</td>
</tr>
<tr>
<td><strong>Inequalities</strong></td>
<td>UNICEF, UNWOMEN</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td>UNESCO, UNICEF</td>
</tr>
<tr>
<td><strong>Environmental sustainability</strong></td>
<td>UNDP, UNEP,</td>
</tr>
<tr>
<td><strong>Food security and nutrition</strong></td>
<td>FAO, WFP</td>
</tr>
<tr>
<td><strong>Governance</strong></td>
<td>UNDP, OHCHR</td>
</tr>
<tr>
<td><strong>Conflict and fragility</strong></td>
<td>UNDP, PBSO, ISDR and UNICEF</td>
</tr>
<tr>
<td><strong>Population dynamics</strong></td>
<td>UNDESA, IOM, UNFPA and UN-HABITAT</td>
</tr>
<tr>
<td><strong>Health</strong></td>
<td>WHO, UNICEF</td>
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<tr>
<td><strong>Water</strong></td>
<td>UNWATER, UNICEF, UNDESA</td>
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<tr>
<td><strong>Energy</strong></td>
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</table>
Health thematic consultation

• Web consultation – October to December 2012
  – 106 papers submitted by civil society, academics, international agencies, development agencies, etc. [www.worldwewant2015.org/health](http://www.worldwewant2015.org/health)

• Face to face consultations
  – Academic, Civil society, Private sector, countries

• Draft synthesis paper posted on the web for comments in February

• High Level Dialogue – Botswana, Mar 4-6, 2013
• Maximizing health at all stages of life
  • Accelerating progress on the health MDG (4,5 and 6)
  • Reducing the burden of major NCDs

• Universal Health Coverage (UHC)
Sustainable Development Goals (SDGs)

“The success of the MDGs means that there is a lot of interest in expanding them to include a broader set of issues. But many of the potential new goals don’t have unanimous support, and adding many new goals, or goals that are not easily measurable, may sap momentum.”

Global TB strategy development milestones

- **Strategic & Technical Advisory Group for TB (STAG-TB)**
  - June 2012

- **Regional Consultations**
  - London, Sao Paulo, Cairo, Chisinau, Nairobi, Phnom Penh and Jakarta
  - June-December 2012

- **HBC consultation and symposium at World TB Congress in Kuala Lumpur**
  - November 2012

- **WHO/Partnership consultation on post-2015 targets**
  - February 2013

**World Health Organization**
Global TB strategy development milestones

**Pillar 2**
Consultation: Universal Health Coverage and Social Protection Opportunities

**Pillar 3**
consultation on research and innovation

**STAG-TB 2013**

**WHO Executive Board and World Health Assembly 2014**

- April 2013
- 10 June 2013
- 11-12 June 2013
- January-May 2014
DRAFT Post-2015 TB Strategy at a glance

VISION:

- A WORLD FREE OF TB
  Zero deaths, disease and suffering due to TB

GOAL:

- End the Global TB Epidemic

TARGETS FOR 2035:

- 95% reduction in TB deaths (<1/100,000)
- 90% reduction in TB incidence rate (<10/100,000)
- Elimination of catastrophic costs for TB-affected households

MILESTONES FOR 2020, 2025 and 2030:
Projected acceleration of TB incidence decline to target levels

- Average -10%/year
- Current global trend: -2%/year
- Average -17%/year
- Optimize current tools, pursue universal health coverage and social protection
- Introduce new vaccine, new prophylaxis

Rate per 100,000/year

2015 2020 2025 2030 2035
TARGETS
• 35% reduction in TB deaths
• 20% reduction TB incidence rate (<85/100,000)
• No affected families with catastrophic costs due to TB

TARGETS
• 75% reduction in TB deaths
• 50% reduction TB incidence rate (<55/100,000)
• No affected families with catastrophic costs due to TB

TARGETS
• 90% reduction in TB deaths
• 80% reduction TB incidence rate (<20/100,000)
• No affected families with catastrophic costs due to TB

GOAL
• 95% reduction in TB deaths
• 90% reduction TB incidence rate (<10/100,000)
• No affected families with catastrophic costs due to TB

Getting there: Milestones
Integrated, patient-centered TB care and prevention

Bold policies and supportive systems

Intensified research and innovation

Government stewardship and accountability, with monitoring and evaluation

Building a strong coalition with civil society and communities

Protecting and promoting human rights, ethics and equity

Adaptation of the strategy and targets at country level, with global collaboration
**Post-2015 Global TB Strategy Pillars**

**Targets:** 95% reduction in deaths and 90% reduction in incidence (< 10 cases / 100,000 population) by 2035

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**Integrated, patient-centered TB Care and Prevention**
- Early diagnosis; systematic screening of contacts and high-risk groups
- Treatment of all forms of TB including drug-resistant TB with patient support
- Collaborative TB/HIV activities and management of co-morbidities
- Preventive treatment

**Bold policies and supportive systems**
- Government stewardship, commitment, and adequate resources for TB care and control with monitoring and evaluation
- Engagement of communities, CSO & all public and private care providers
- Universal health coverage policy; and regulatory framework
- Social protection, poverty alleviation, and actions on other determinants of TB

**Intensified Research and Innovation**
- Discovery, development and rapid uptake of new tools, interventions and strategies
- Operational research to optimize implementation and impact, and promote innovations

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**GLOBAL TB PROGRAMME**

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**World Health Organization**

- At EB in Jan 2014 Brazil requested the development of post 2015 strategy
- Process is expected to commence soon
Conclusion

The place of health in the post-2015 agenda does not seem clear so far