Eliminating the Catastrophic Economic Burden of TB: Universal Health Coverage and Social Protection Opportunities

A consultation to inform a post-2015 TB Elimination Strategy

Hosted and co-organized by the Ministry of Health of Brazil

Medical School of the University of Sao Paulo, Brazil
29 April - 1 May 2013
Our Aim

To bring together diverse stakeholders to contribute to the development of the draft post-2015 TB Elimination Strategy and stimulate future collaboration to eliminate the catastrophic economic burden of TB for those ill and their families.
PILLAR 2:
TB Elimination Strategy

1. Political commitment with adequate resources for TB care and prevention

2. Engagement of communities, civil society organizations, and public and private care providers

3. Universal Health Coverage and regulatory framework for case notification, vital registration, drug quality and rational use, and infection control

4. Social protection, poverty alleviation and actions on other determinants of TB

Bold policies and supportive systems
Objectives

1. To review the Pillar 2 draft content of the proposed TB Elimination Strategy on
   a. TB-sensitive financing for Universal Health Coverage to reduce direct care costs for those ill with TB
   b. TB-sensitive social protection to compensate for indirect economic costs and eliminate stigma and discrimination
   c. Broader development actions to prevent tuberculosis by addressing the social determinants

Expected outcomes:
   a. Contributions made to content and endorsement of strategy elements
   b. Targets and indicators proposed
Objectives

2. To identify opportunities and priority areas for cross-agency and cross-country collaboration in 2013-2015

Expected outcomes:

a. Awareness raised of some best practices and challenges in pursuing TB-sensitive UHC financing and social protection schemes, and lessons from other fields including HIV/AIDS and child health

b. Approaches proposed for leveraging:
   • new policy commitments to UHC and social protection;
   • new platforms of financed social funds and cash transfer mechanisms, social welfare and disability/sickness insurance schemes.

c. Foundation laid for specific collaboration
Objectives

3. To identify priority areas for analysis or research, and means to collaborate
   a. Through the main consultation over 2 ½ days and the ½ day TB and social protection research workshop

Expected outcomes:
   a) Some top research questions defined
   b) Approaches to pursuing analyses suggested
   c) Potential multi-country collaborations proposed
Some precedents

- Ongoing HIV and social protection working group
- **2012:** London School of Hygiene and Tropical Medicine Symposium and Chatham House meeting on TB and Social Protection – birth of a network
- **2012:** Start of post-2015 TB strategy development and the “Zero TB” declaration
- **2012:** World Bank Africa Social Protection Strategy
- **2012:** URC/TBCARE 2 case studies on TB coverage in health insurance schemes
- **2013:** WHO & World Bank Ministerial Meeting on Universal Health Coverage
- **2013:** Botswana meeting on health in the post-2015 development agenda (MDG issues & UHC both prominent)
Intervention options to drive down the economic burden of TB

1. **Universal Health Coverage** to minimize direct medical costs → Day 1

2. **Sickness/disability insurance**, to compensate for income loss during illness.

3. **Social/financial protection schemes** (general or disease targeted) to prevent or compensate for non-medical costs (social welfare payments, cash transfers, food packages/vouchers, travel vouchers, etc).

4. Legislation for **employment protection**.

5. Legal and other instruments to **protect and promote human rights**, minimizing stigma and discrimination, with special attention to gender, ethnicity, and specific vulnerable groups

6. **Development investments** to prevent TB transmission & risk factors

Broader agenda: Social determinants
Thank you

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• London School of Hygiene and Tropical Medicine