Joining forces to end TB and AIDS
Progress and key opportunities

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PCB Thematic Segment – Ending Tuberculosis and AIDS:
A Joint Response In the Era of the Sustainable Development Goals
28 June 2018
Overview

- Positioning ending the TB and AIDS epidemics in the broader health agenda
- Global progress towards targets
- Challenges & gaps
- Key political and programmatic opportunities to improve integrated responses in preparation for the TB HLM 2018
SDGs, Universal Health Coverage and GPW: Key opportunities to End TB and AIDS by 2030

TARGET 3.3: BY 2030, END THE EPIDEMICS OF AIDS, TUBERCULOSIS ....

End TB Strategy targets:
- 90% reduction in TB deaths by 2030
- 80% reduction in TB incidence rate
- 0% TB affected families facing catastrophic costs

WHO GENERAL PROGRAMME OF WORK

Healthy Populations
- 1 billion more people enjoying better health and well-being

Health Emergencies
- 1 billion more people better protected from health emergencies

Universal Health Coverage
- 1 billion more people benefiting from universal health coverage

SDG TARGET ON ENDING EPIDEMICS IS AT THE INTERSECTION OF THE 3 BILLION GOALS

#HEALTHFORALL

Universal Health Coverage

Leave no-one behind – health is a human right
Treat the person not the disease

HIV Strategy and UN 2016 Political Declaration:
Reduce TB deaths among people living with HIV by 75% by 2020
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WHO Policy on collaborative TB/HIV activities

A. Set up and strengthen a coordinating body for collaborative TB/HIV activities functional at all levels
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A.2. Determine HIV prevalence among TB patients and TB prevalence among people living with HIV
A.3. Carry out joint TB/HIV planning to integrate the delivery of TB and HIV services
A.4. Monitor and evaluate collaborative TB/HIV activities

B. Reduce the burden of TB in people living with HIV and initiate early antiretroviral therapy (the Three I’s for HIV/TB)
B.1. Intensify TB case-finding and ensure high quality anti-TB treatment
B.2. Initiate TB prevention with Isoniazid preventive therapy and early antiretroviral therapy
B.3. Ensure control of TB Infection in health-care facilities and congregate settings

C. Reduce the burden of HIV in patients with presumptive and diagnosed TB
C.1. Provide HIV testing and counselling to patients with presumptive and diagnosed TB
C.2. Provide HIV prevention interventions for patients with presumptive and diagnosed TB
C.3. Provide co-trimoxazole preventive therapy for TB patients living with HIV
C.4. Ensure HIV prevention interventions, treatment and care for TB patients living with HIV
C.5. Provide antiretroviral therapy for TB patients living with HIV
Trends in TB Incidence and new HIV infections
2000–2016

TB incidence

- HIV-associated TB: 1.0
- Total: 10.4

Incidence rate falling at about 2% per year

Source: Global TB Report, 2017
Trends TB and HIV deaths, 2000–2016

Source: Global TB Report, 2017
Current status of progress towards selected End TB Strategy operational targets

- **Notified TB patients who know their HIV status**: 57%
- **Estimated TB patients living with HIV notified and treated for TB**: 46%
- **Notified TB patients living with HIV successfully treated**: 78%
- **People living with HIV initiated on TB preventive treatment**: 42%

Target:
- 100%
- 90%
Impressive scale-up of ART in People living with HIV

36.7 million PLHIV in 2016
53% of PLHIV receiving ART 2016
20.9 million on ART by mid-2017

Source: UNAIDS/WHO estimates.
Progress in 90:90:90 targets for HIV

- 70% (51-84%) of people living with HIV know their status
- 77% (57-89%) of people living with HIV who know their status are on treatment
- 82% (60-89%) of people on treatment are virally suppressed
Evolution of the global uptake of WHO Treat All policy

<table>
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<th>Low-Middle Income Countries (139)</th>
<th>Fast Track Countries (35)</th>
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<td>end 2017</td>
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* Preliminary data

Implementation of Treat All recommendation among adults and adolescents living with HIV (situation as of November 2017)

- Implemented countrywide
- Implemented in many (>50%) treatment sites
- Implemented in few (<50%) treatment sites
- No planned year for implementation
- Recommending treat all later in 2017
- Recommending treat all in 2016, 2019 or 2020
- Other
- Data not reported
- Not applicable

Data Source: World Health Organization
Map Production: Information, Evidence, and Research (IER)
World Health Organization
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People Living with HIV still dying of TB


- TB is the leading killer of people with HIV
- 374,000 TB deaths among people with HIV in 2016 (37% of HIV deaths & 22% of TB deaths)
- 1 million people with TB were living with HIV (10% of all TB).
Progress and **gaps in access to care**

**Progress in access to HIV testing for TB patients**

- Africa: 82%
- The Americas: 80%
- Eastern Mediterranean: 16%
- Europe: 83%
- South East Asia: 56%
- Western Pacific: 42%
- Global: 57% (globally)

**Gaps in case detection and ART coverage**

- Detection gap (550,000 people - 54%)

**Gaps in access to preventive treatment (IPT)**

- Not reported in 18/30 high TB/HIV burden countries
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High-level spotlight on ending TB and AIDS

2016

2016 HIGH-LEVEL MEETING ON ENDING AIDS

UNITED NATIONS GENERAL ASSEMBLY
NEW YORK | 8–10 JUNE 2016

2017

END TB

FIRST WHO GLOBAL MINISTERIAL CONFERENCE ENDING TB IN THE SUSTAINABLE DEVELOPMENT ERA: A MULTISECTORAL RESPONSE
16-17 NOVEMBER 2017, MOSCOW, RUSSIAN FEDERATION

2018

AIDS 2018

Ministerial Policy Dialogue on HIV and related comorbidities in Eastern European and Central Asia at IAS (July 23 2018)

26 September 2018

END TB
Moscow Declaration to End TB

- Adopted by ministers and other leaders from 120 countries, who came together with over 800 partners including civil society.
- Will inform the first UN High-Level Meeting on TB in 2018.
Strengthen engagement with Civil Society in lead up to UNHLM and beyond

Interactive Civil Society Hearing, 4 June: Focus included on accelerating the TB/HIV response and testimonies from people living with HIV

WHO taskforce on civil society engagement and regular collaboration with civil society
UN High-Level Meeting on TB

- The UNHLM will be held on Wednesday 26 September 2018
- Convene Heads of Government / State in New York
- Entire preparatory process, including outcome document negotiations, held in New York
- Civil society engagement with interactive civil society hearing on 4 June
- Adoption of an outcome document with new, bold time-bound commitments that will drive multisectoral action to end TB with greater accountability.
Opportunities to end TB and AIDS by 2030

- **Reinvigorate political commitment** to end TB deaths among PLHIV, building on opportunities of UNHLM on TB.
- **Enhance collaboration between programmes** → *Treat the patient, not the disease*
- **Decentralise and integrate TB and HIV services** closer to the patient
- **Ensure** national coverage of integrated TB and HIV community based services
- **Exploit existing platforms** to **scale up access to effective TB prevention, early diagnosis** and **early treatment** among PLHIV
- **Strengthen multi-sectoral engagement** to ensure no-one is left behind
- **Advance the research agenda** to improve tools and implementation
The time for action is **NOW**
Together we will **END TB & AIDS**
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