

ANNUAL REPORT

2017

GLOBAL TB CAUCUS

The Global TB Caucus would like to thank the many partners who have contributed to the Caucus' success in 2017. The Caucus and its staff rely upon the wider TB community for information and support, and its willingness to provide these does not go unnoticed.

We would also like to thank the members of the Global TB Caucus. Being a politician is a tough job, with hundreds of competing demands, and often for little thanks. No member of the Global TB Caucus will win an election because of their work on TB, none are paid for their work with us and yet hundreds of representatives around the world give their time and effort to this cause. Thank you.

The Global TB Caucus Secretariat

INTRODUCTION - THE PRACTICALLY PERFECT PATHOGEN

Throughout human history, no infectious disease has killed more people than tuberculosis (TB). For 70,000 years it has evolved into a practically perfect pathogen. As recently as the 19th century, 25 per cent of all deaths in some countries were due to TB.

Today after a brief demotion, TB has reclaimed its status as the world's biggest infectious killer. 1.7 million people worldwide died from the disease in 2016. It kills as many people each year as HIV and malaria combined, and yet, it is a neglected disease: largely ignored by donors, and under-funded by high-burden countries.

The future of the epidemic could be grim unless urgent action is taken now. Research commissioned by the Global TB Caucus has estimated that TB will cost the world USD\$1 trillion in lost economic output by 2030 if the world continues at its current rate of progress. This is not a doomsday scenario, but the pure economic cost of continuing as we are.

There is a moral, social and economic imperative to take action on TB.

The Global TB Caucus exists to drive that action.

CONTENTS	• INTRODUCTION – THE PRACTICALLY PERFECT PATHOGEN
	• EXECUTIVE SUMMARY
	• TARGETS FOR 2017 - 2020
	• OUR YEAR IN NUMBERS
	• 2017: A TIMELINE

TARGETS FOR 2017 – 2020

Our mission is to build a sustainable political response to TB. We have three organisational priorities for 2017-2020 which will help us achieve that target. They are:

FROM CENTRALLY DIRECTED TO LOCALLY LED

- Appointed and trained advocacy focal points in each Global TB Caucus key country (G20 or WHO long list High TB burden countries (HTBC)s).
- The establishment of links between National TB Caucuses and at least 10 national Stop TB Partnership platforms, bringing together stakeholders in priority countries.

GREATER REACH AND A STRONGER NETWORK

- National TB Caucuses in 75% of G20 countries.
- National TB Caucuses in 75% of WHO HTBCs
- Representation of the Global TB Caucus in at least 130 countries around the world.

SHAPING THE INTERNATIONAL AGENDA

- Reference to TB on the agenda and in the communique of a G20 meeting.
- A meeting of Health Ministers from each of the High TB Burden Countries and an accompanying Declaration on TB.

THE KEY OUTCOMES WE AIM TO SEE IN 2020 ARE:

- Unlocking new funding from at least one major donor for TB- related programmes.
- Securing increased funding for TB control in all WHO HTBCs.
- Improved integration of TB and HIV programmes from major donors.
- Improvement of policies against the Stop TB Partnership's benchmark 'Out of Step' Report and WHO Regional End TB strategies in all WHO HTBCs.



OUR YEAR IN NUMBERS

WHAT WE ACHIEVED:

2,031

the number of parliamentarians who have pledged their personal support to the campaign to end TB

134

the number of countries where the Global TB Caucus has support from political representatives

5

Number of regional and linguistic groups engaged with the Caucus

12

the number of national TB Caucuses launched this year

64

The number of different ministries of Health engaged by Caucus members about the WHO's Global Ministerial Conference

78

The number of United Nations Missions in New York that we have met with.



2017: A YEAR IN HIGHLIGHTS

FEBRUARY

A national TB Caucus was launched in Peru. The launch was attended by the Peruvian Minister of Health and 200 Members of parliament.

TB was integrated into the ASEAN agenda. As a result of advocacy efforts by members of the Philippines TB Caucus, the minister of Health supported his promise of getting TB on the agenda of ASEAN – the Association of Southeast Asian Nations.

Following advocacy by Global TB Caucus members, Myanmar increased their domestic funding of the TB response by 2.5%.

MARCH

National Caucuses were launched in the Philippines and India. In India, the launch saw 36 new members join the Global TB Caucus.

The Berlin TB Summit, organised by the Caucus to draw together parliamentarians from across the G20 countries to build a co-ordinated political response to the AMR agenda at the G20 and press for the prioritisation of TB within the plans to tackle AMR. Following the Summit delegates had great success engaging their country Sherpas. As a result of members efforts and action from a wide range of partners, TB was specifically referenced within the G20 Leaders Communiqué.

Germany agreed enhanced funding for global health R&D thanks to the efforts of Stephan Albani, the European Parliamentary Group on TB's co-chair.

In Morocco, Hon Ruth Labode (MP) Zimbabwe presented on multi-drug resistant TB (MDR-TB) and the Global TB Caucus, to a group of Heads of State, former presidents and the Deputy UN Secretary General, the ECOWAS Secretary General and several speakers of parliament.

Members across the world took part in events to mark World TB Day, in particular Uganda, Ghana and Moldova. Members were also invited to participate in the event held by the African Union in Addis Ababa.

APRIL

Three new national TB Caucuses were established in Cameroon, Uruguay and the Central African Republic. In Cameroon the launch was attended by 50 parliamentarians and in the Central African Republic the launch also resulted in 80 parliamentarians signing the Barcelona declaration and committing themselves to the fight to end TB.

In Zimbabwe, the Hon Ruth Labode hosted a platform at the Zimbabwe International Trade Fair with the National AIDS Council, highlighting TB and HIV. Members of the Zimbabwean TB Caucus manned the platform and the spoke to delegates alongside MDR-TB survivors. This garnered significant media attention. Following the fair, the Vice President of Zimbabwe signed the Barcelona declaration.

Following the Berlin TB Summit work continued to ensure that the work plans were carried out: members met with their Minister of Health and advocated to their governments regarding the upcoming Global Ministerial Conference.



MAY

The G20 Health Ministers' Declaration was agreed with language drafted by the Global TB Caucus and proposed through the Berlin TB Summit.

Burkina Faso launched a sub-committee on TB within the Development and Population Committee.

The Asia Pacific regional TB Caucus took place in Manila. It was attended by a number of important figures: guest of honour Philippino Secretary of the Department of Health, Hon Secretary Paulyn Ubial, reaffirmed commitment to end TB. Hon Alexander O'Connor, Assistant Minister of Health for Fiji, also later presented a paper about the Global TB Caucus to a special parliamentary meeting. Later in the month the World Bank and the Australian government committed to \$30m to TB interventions in Papua New Guinea

Work continued in researching the PACE report on AMR and TB for the Council of Europe with the PACE Rapporteur, Hon Sergi Kiral, MP. Together with secretariat staff, Kiral visited Azerbaijan on a fact-finding mission. Whilst there he met with Azeri MPs, who committed to launch a national TB Caucus.

The Ugandan TB Caucus secured funding from the Global Fund. This will enable the sustainability of parliamentary advocacy on TB in Uganda, one of the Global TB Caucus' key objectives for its network.

In the Americas Co-Chair Hon Luis Gallo made a special intervention on TB at a meeting of EUROLAT – the European/Latin American co-ordination group of parliamentarians.

JUNE

In June the Uruguay National TB Caucus was launched under the leadership of Hon Luis Gallo, Co-chair of the Americas TB Caucus.

JULY

Heads of State from across the G20 countries highlighted the importance of TB within their Leaders' Communique, the first time that TB has been specifically highlighted by the G20 Heads of State.

The Moldovan national TB Caucus was launched.

The second meeting of the African TB Caucus was held in Accra, Ghana. The meeting focused delegates members on advocacy efforts regarding the WHO Global Minister Conference in November and the UN High Level Meeting, and the delegates endorsed a regional position paper to co-ordinate advocacy effort.

African TB Caucus staff also worked with GTCA, the AFRO Global Alliance and the Stop TB Partnership to host an advocacy training for people affected by TB.

In Nepal advocacy efforts resulted in an increase in domestic funding for TB, and TB was also brought into discussions at a Pacific Health Ministers meeting following advocacy work in the Asia Pacific region.

AUGUST

A national TB Caucus was launched in Malaysia.

In Africa, the Global TB Caucus engaged in the development of the African Union position on the UN High-Level Meeting on TB.



SEPTEMBER

In Latvia a national TB/HIV Caucus was launched.

Eastern European and Central Asian Summit was held in Tbilisi. The Summit was held alongside TB People's training event, allowing members of both networks to discuss the state of the TB response in their home countries. At the meeting delegates committed to engaging with Ministers of Health and Heads of State regarding the Global Ministerial Conference and the UN High-Level Meeting. During the Summit Oxana Domenti was elected as Co-Chair of the Eurasian Parliamentary Group on TB.

OCTOBER

In Ukraine a TB Caucus was launched under the leadership of Hon Sergii Kiral, MP, who is also the rapporteur for the PACE report on AMR and TB.

The Americas TB Caucus met for the second time in Guadalajara. The summit brought together members with the national TB programme managers, the Union against Tuberculosis and Lung Health and members of the Inter-Parliamentary Union to address the specific problems faced by the region. During the summit members developed a regional position on the WHO's Global Ministerial Conference and the upcoming UN High-Level Meeting on TB.

Australia announced a \$300m commitment to a regional health security initiative, following a campaign by Asia Pacific TB Caucus Co-Chair Warren Entsch and the Australian TB Caucus.

NOVEMBER

G7 Health Ministers agreed their Declaration including specific references to TB within the AMR threat.

The Euronest Parliamentary Assembly, the inter-parliamentary forum for members of the European Parliament and the national parliaments of Ukraine, Moldova, Belarus, Armenia, Azerbaijan and Georgia, launched a platform on TB, following the intervention of Malahat Ibrahimqizi.

20 Members of the Francophone TB Caucus met in Morocco. The meeting primarily concerned the importance of TB within the Global Fund's work. Following the meeting MP s supported actions to increase the national contribution to global TB financing.

Ahead of the Global Ministerial Conference in Moscow, the Global TB Caucus launched the *Price of Pandemic 2017*, a report which predicted the Global economic cost of the TB epidemic according to the WHO's business as usual figures. The report shifted the conversation about the need for immediate and sustained global investment in the TB response.

The WHO's Global ministerial conference was held in Moscow. Members of the Global TB Caucus were invited to contribute to the event: Global Co-Chair the Rt Hon Nick Herbert, CBE, MP spoke about the need for the development of a vaccination, and Asia Pacific Co-Chair Hon Helen Tan was invited to chair a session on universal access to healthcare. Other members of the Caucus were also invited to attend as delegates. The Moscow Declaration, the outcome document of the conference, referenced several key components of the regional position papers compiled during regional summits.

The Union, the Indian TB Caucus secretariat, and their national partners organised a sensitisation meeting in Mumbai. Following the meeting the Mayor of the Mumbai Municipal Corporation and 200 councillors pledged to end TB.



Congressman Claudio Marte, speaker of the Parlacen Health Committee, organised a public hearing on TB in Panama, resulting in national parliamentarians committing to organising a TB law to protect patients right to care and treatment for TB.

DECEMBER

Following commitments earlier in the year, a national TB Caucus was launched in Azerbaijan.

Secretariat staff began work on the G20 process, chairing a co-ordination call of strategic partners in mid-December.

