



COMMUNITY GUIDE ON TB

GRANT CYCLE 7

(2023-2025 ALLOCATION PERIOD)



WHAT IS THIS GUIDE?

This community guide provides key highlights from the [TB Information Note](#). It is meant to support the meaningful engagement of civil society and communities involved in the preparation of funding requests for tuberculosis (TB) programs.

To guide its investments, the Global Fund has developed an ambitious new Strategy to get progress back on track against HIV, TB and malaria and contribute to the target of achieving universal health coverage. The Global Fund will put a greater focus on equity, sustainability, program quality and innovation.

Priority interventions in the information note are built around the five TB sub-objectives of the new Strategy, described below:

1. Focus on **finding and treating all people with TB**, both drug-sensitive and drug-resistant TB, through equitable, people-centered approaches.
2. **Scale up TB prevention** with emphasis on TB preventive treatment, and airborne infection prevention and control.
3. **Improve the quality of TB services** across the TB care cascade including through management of comorbidities.
4. **Adapt TB programming to respond to the evolving situation**, including through rapid deployment of new tools and innovations.
5. **Promote enabling environments**, in collaboration with partners and affected communities, to reduce TB-related stigma, discrimination, human rights and gender related barriers to care; and advance approaches to address catastrophic cost due to TB.

WHAT IS THE GLOBAL FUND'S INVESTMENT APPROACH?

Global Fund investments should contribute to country-owned responses and align with national priorities. It is important to know that the Global Fund uses a four-stage strategic investment approach:

1. **UNDERSTAND:** continue to know your epidemic and its updated resource needs
2. **DESIGN:** prioritize an optimal mix of interventions and service delivery platforms
3. **DELIVER:** ensure high quality and efficient service delivery for optimal scale-up
4. **SUSTAIN:** strengthen the sustainability of national disease responses and health systems

There is a role for communities and civil society at every stage of investment.

WHAT INTERVENTIONS DOES THE GLOBAL FUND PRIORITIZE?

1. **SCREENING AND DIAGNOSIS:** Find all people with TB, both drug-susceptible TB and drug-resistant TB, including those who may not present TB symptoms, as early as possible and where they prefer to avail of services. Equally important is to understand existing gaps and barriers (related to human rights, gender and other equity-related issues, including financial ones) that limit access to and utilization of integrated diagnostic services.
2. **TREATMENT AND CARE:** Treatment and care services should be designed and delivered considering the needs and preference of people with TB rather than that of the health care system. These services should aim to maximize the proportion of people with TB who have completed their treatment and have bacteriological proof of cure.
3. **TB AND PREVENTION:** Accelerating actions on TB prevention along with early diagnosis and successful treatment are critical to end TB.
4. **DRUG-RESISTANT TB:** Early diagnosis of drug-resistant TB using rapid molecular test, universal drug susceptibility testing for first- and second-line drugs, access to newer and all-oral treatment regimens recommended by WHO. Management of adverse drug reactions and support to improve patient adherence to treatment are critical in the management of people with drug -resistant TB.
5. **TB/HIV COLLABORATIVE ACTIVITIES:** Implementation of TB/HIV collaborative activities will contribute to decrease TB mortality in people living with HIV and reduction in TB incidence, contributing to the end TB and ending AIDS by 2030 goals.
6. **KEY AND VULNERABLE POPULATIONS:** Key and vulnerable population groups for

- TB vary by country but are all disproportionately affected by the disease, poverty, stigma and discrimination, human rights and gender related barriers.
7. **COLLABORATIONS WITH OTHER PROVIDERS AND SECTORS:** This involves working with private health care providers, community leaders, community-based and led organizations and addressing barriers including for gender-sensitive and rights-based service delivery and care.
 8. **COMMUNITY SYSTEMS AND RESPONSES:** Community systems are the processes, structures and mechanisms that communities use to coordinate and deliver responses to their health-related challenges and needs. They are essential to strengthen health systems, improve the TB response and ensure that TB services are designed and delivered to be people-centered, accessible, equitable, cost effective and accountable.
 9. **EQUITY, HUMAN RIGHTS AND GENDER-RELATED BARRIERS:** In accordance with human rights principles, all programs should be designed, implemented, and evaluated with the active participation of affected communities. They should be implemented in ways that are respectful, accountable, gender-responsive and nondiscriminatory.
 10. **NEW PRODUCTS AND INNOVATIONS:** It is important to implement and scale up innovative tools and models of care for TB in a timely manner along with new products, non-product innovations in TB care, including in specimen collection and processing, integrated services and quality improvement throughout the care cascade, integrated treatment decision algorithm, digital community-led monitoring and innovative financing amongst others are foreseen.
 11. **STRATEGIC INFORMATION:** The Global Fund promotes data-driven decision-making, enabled by the rapid generation, analysis and use of high-quality disaggregated data. Support can be requested to fill the critical data gaps.

Program essentials for Global Fund supported TB investments (Table 1) are new in Grant Cycle 7. They define the essentials for selected TB services, which are considered critical to accelerate the TB response to meet the goal of the new Global Fund Strategy and other global TB targets.

These are derived from the latest World Health Organization recommendations and other international guidance and represent a summary which best aligns with the key priority interventions listed in Section 3.1 to 3.11 of this document and the Global Fund's Modular Framework Handbook. They are described in the table below with the role that communities can play in each:

PROGRAM ESSENTIALS

TABLE 1: PROGRAM ESSENTIALS FOR GLOBAL FUND SUPPORTED PROGRAMS

PROGRAM ESSENTIALS FOR TB	ROLE OF COMMUNITIES
1. TB SCREENING AND DIAGNOSIS	
1.1 Systematic TB screening is provided for those at highest risk (key and vulnerable populations), including using Chest X-rays with or without computer-aided detection (currently recommended for people aged 15 years and older).	<p>Advocacy for systematic TB screening and access to diagnostic services for key and vulnerable populations.</p> <p>Community-led TB screening programs.</p>
1.2 Multiyear plan to achieve universal use of rapid molecular assays as the initial test to diagnose TB for all people with presumptive TB, with implementation on track.	
1.3 All people with bacteriologically confirmed TB are tested for at least rifampicin resistance and for those with rifampicin-resistant TB further tests are conducted to rule out resistance to other drugs.	
1.4 TB diagnostic network operates efficiently to increase access to testing and includes specimen transportation, maintenance of equipment, connectivity solutions, biosafety, quality assurance and supply system.	
2. TB TREATMENT AND CARE	
2.1 Child-friendly formulations, all-oral regimens for drug-resistant TB, and 4-month regimen for nonsevere, -TB are used for TB treatment in children.	<p>Advocacy for increased access to TB treatment and care services for all affected individuals.</p> <p>Provide community-led treatment and care support programs.</p>
2.2 People with drug-resistant TB receive shorter, all-oral regimens or individualized longer treatment regimens as recommended by the World Health Organization and people-centered support to complete their treatment.	
3. TB PREVENTION	
3.1 TB preventive treatment (including shorter regimens) is available for all eligible people living with HIV (adults and children) and for all eligible household contacts of people with bacteriologically confirmed pulmonary TB.	<p>Advocacy for increased access to TB preventive treatment services for people living with HIV.</p> <p>Community-led preventive treatment support programs.</p>
4. TB/HIV COLLABORATIVE ACTIVITIES	
4.1 All people living with HIV with active TB are started on antiretroviral treatment early as per recommendations.	<p>Advocacy for early initiation of ARV treatment for people living with HIV with active TB.</p> <p>Carry out HIV/TB education and awareness programs.</p>

5. CROSS-CUTTING AREAS

5.1 Establish, progressively scale-up and maintain a comprehensive, real-time, digital case-based TB surveillance systems and ensure analysis and use of TB data for decision-making at all levels of TB services.

5.2 Prioritized interventions are informed by cascade analysis throughout the pathway of TB care, including for TB preventive treatment.

5.3 Engagement of private health care providers is on a scale commensurate with their role in the provision of TB services.

5.4 Decentralized, ambulatory, community- and home-based, people-centered services are provided across the continuum of TB care.

5.5 All TB programming must be human rights-based, gender-responsive and informed by and respond to analysis of inequities; and include stigma and discrimination reduction activities for people with TB and TB-affected populations; legal literacy and access to justice activities; as well as support for community mobilization and advocacy and community-led monitoring for social accountability.

Advocacy for a human rights-based and gender-responsive approach to TB programming.

Deliver programs that address stigma and discrimination, promote legal literacy and access to justice, and community mobilization

Community-led monitoring and reporting for accountability.

For funding requests during the 2023-2025 allocation period, applicants are now required to outline how advanced the country is in the implementation of each of the program essentials. Applicants from Core and High Impact countries are also asked to describe in their funding request narrative any plans to address Program Essentials that are not fulfilled.



WHAT ARE CATALYTIC MATCHING FUNDS AND HOW DO THEY ACCELERATE PROGRESS ON TB?

Matching Funds are designed to inspire innovation and ambitious, evidence-based programming approaches to increase impact in the following strategic priority area:

- Find and successfully treat the missing people with drug-susceptible and drug-resistant TB.
 - » The focus should be to improve TB treatment coverage and treatment success rate by scaling up successful interventions to find and treat people with TB along with new and innovative interventions and approaches to maximize impact.

Not all countries will be eligible for these investments. Applicants eligible for Matching Funds in the 2023-2025 allocation period were notified in the allocation letters sent to countries at the end of 2022. To access Matching Funds, applicants must meet specific conditions on how funds are budgeted towards the Matching Funds priority areas.

WHAT LESSONS CAN CIVIL SOCIETY AND COMMUNITIES TAKE FROM THE LAST ALLOCATION PERIOD GLOBAL FUND TB PROGRAMS SO FAR?

According to the Technical Review Panel (an independent panel of experts who review applications) is concerned that relatively few civil society and community-led TB organizations are mentioned in the development of TB funding requests and/or implementation. Community mobilization requires more investment, with greater attention to community health workers for TB and community health activities.

READ MORE

GLOBAL FUND STRATEGY 2023-2028: The new strategy puts communities at the centre.

APPLICANT'S HANDBOOK: Explains how to develop a funding request and key steps required to access funding from the Global Fund.

MODULAR FRAMEWORK: Identifies the interventions that the Global Fund supports, associated budget and indicators against which progress is measured.

SUSTAINABILITY AND TRANSITION GUIDANCE (Annex III – Tuberculosis and Sustainability).

ACCESSING AND PROGRAMMING MATCHING FUNDS: Guidance Note that provides strategic guidance to applicants eligible for additional catalytic Matching Funds beyond the allocation amount for 2023-2025.

PRISONS AND OTHER CLOSED SETTINGS: Priorities for Investment and Increased Impact Technical Brief: This brief helps applicants to the Global Fund to plan for HIV/TB services in prisons and other closed settings.

REMOVING HUMAN RIGHTS-RELATED BARRIERS TO TB SERVICES TECHNICAL BRIEF: This brief integrates lessons learned and case studies from the Global Fund's Breaking Down Barriers initiative. It was developed to assist Global Fund applicants to develop strong funding requests that promote and protect human rights and gender equality.

SUSTAINABILITY AND TRANSITION ASSESSMENTS AND PLANNING FOR NATIONAL HIV AND TB RESPONSES GUIDANCE: This Guidance has been developed to support countries to assess their level of readiness for transition and assess sustainability of Global Fund support to undertake robust national planning.

TUBERCULOSIS PROGRAM ESSENTIALS TOOLKIT: Provides step-by-step guidance on incorporating Program Essentials into the funding request as well as on how to manage subsequent monitoring through routine TB program activities.

UNDERTAKING A RAPID ASSESSMENT OF INFORMATION ON HUMAN RIGHTS-RELATED BARRIERS TO HIV AND TB SERVICES: Guidance and Tools: The guidance and tools have been prepared to support countries to gather and analyze required or recommended information on the nature of human rights related barriers to HIV and TB services, and opportunities to enhance programming and address or remove barriers.

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