



REGIONAL STRATEGIC PLAN

VISIÓN	Americas without tuberculosis
MISSION	Ensure that each TB patient has full access to quality treatment and diagnosis in order to reduce the social and economic burden and inequity imposed by TB
GENERAL OBJECTIVE	Reduce TB's incidence, prevalence, and mortality in the countries of the Region through the Stop TB Initiative
SPECIFIC OBJECTIVES	<p>Objective 1: Guarantee care for every TB patient in health services that implement the DOTS strategy for quality care</p> <p>Objective 2: Reduce the incidence of TB and HIV in populations affected by both diseases</p> <p>Objective 3: Prevent and control MDR-TB within the framework of the DOTS strategy</p> <p>Objective 4: Guarantee timely, quality diagnosis and bacteriological control through strengthened laboratory networks</p> <p>Objective 5: Involve all health care providers (public, nongovernmental, and private) in TB control</p> <p>Objective 6: Reduce stigma and discrimination and improve access by TB patients to DOTS services through advocacy, communication, and social mobilization strategies and the participation of affected people</p> <p>Objective 7: Strengthen management of the NTPs through human resources development strategies as an integral part of the national plans of the NTPs</p>
GOALS	<ul style="list-style-type: none"> - The Region reports more than 70% of the new AFB + cases and cures 85% of them in 2005 - All the countries of the Region reverse the incidence of TB and reduce mortality and prevalence by 50% relative to 1990 by 2015 (targets of the Millennium Development Goals–MDG)

STRATEGIC LINES OF WORK

- 1** Expanding and/or strengthening high quality DOTS strategy (Objective 1)
- 2** Implementing and/or strengthening:
 - . Interprogrammatic collaboration activities in TB and HIV/AIDS
 - . MDR-TB prevention and control activities
 - . Community strategies for neglected populations—indigenous groups, prisoners, periurban populations, etc. (Objectives 2 and 3)
- 3** Strengthening health systems, with emphasis on primary care, an integrated approach to respiratory diseases (PAL initiative), the laboratory network, and the development of human resources policies for tuberculosis (Objectives 4 and 7)
- 4** Improving the population's access to tuberculosis diagnosis and treatment through by involving all health care providers, public and private (Objective 5)
- 5** Facilitating empowerment of the people affected, and the community through implementation of advocacy, communication, and social mobilization strategies (Objective 6)
- 6** Including clinical, epidemiological, and operations research in the plans of the National TB Control Programs (Objective 8)



World Health
Organization

THE STOP TB STRATEGY

VISION

A WORLD FREE OF TB

GOAL

To dramatically reduce the global burden of TB by 2015 in line with the Millennium Development Goals and the Stop TB Partnership targets

OBJECTIVES

- Achieve universal access to high-quality diagnosis and patient-centred treatment
- Reduce the human suffering and socioeconomic burden associated with TB
- Protect poor and vulnerable populations from TB, TB/HIV and multidrug-resistant TB
- Support development of new tools and enable their timely and effective use

TARGETS

- MDG 6, Target 8: Halt and begin to reverse the incidence of TB by 2015
- Targets linked to the MDGs and endorsed by Stop TB Partnership:
 - by 2005: detect at least 70% of new sputum smear-positive TB cases and cure at least 85% of these cases
 - by 2015: reduce prevalence of and deaths due to TB by 50% relative to 1990
 - 2050: eliminate TB as a public health problem (1 case per million population)

COMPONENTS OF THE STOP TB STRATEGY

1 PURSUE HIGH-QUALITY DOTS EXPANSION AND ENHANCEMENT

- a. Political commitment with increased and sustained financing
- b. Case detection through quality-assured bacteriology
- c. Standardized treatment with supervision and patient support
- d. An effective drug supply and management system
- e. Monitoring and evaluation system, and impact measurement

2 ADDRESS TB/HIV, MDR-TB AND OTHER CHALLENGES

- Implement collaborative TB/HIV activities
- Prevent and control multidrug-resistant TB
- Address prisoners, refugees and other high-risk groups and special situations

3 CONTRIBUTE TO HEALTH SYSTEM STRENGTHENING

- Actively participate in efforts to improve system-wide policy, human resources, financing, management, service delivery, and information systems
- Share innovations that strengthen systems, including the Practical Approach to Lung Health (PAL)
- Adapt innovations from other fields

4 ENGAGE ALL CARE PROVIDERS

- Public-Public, and Public-Private Mix (PPM) approaches
- International Standards for TB Care (ISTC)

5 EMPOWER PEOPLE WITH TB, AND COMMUNITIES

- Advocacy, communication and social mobilization
- Community participation in TB care
- Patients' Charter for Tuberculosis Care

6 ENABLE AND PROMOTE RESEARCH

- Programme-based operational research
- Research to develop new diagnostics, drugs and vaccines