Who is implementing Challenge TB?

Challenge TB is led by KNCV Tuberculosis Foundation, who also led USAID's previous TB control projects: TB CARE I (2010-2015), TB CAP (2005-2010) and TBCTA (2000-2005).

Challenge TB is implemented by a unique coalition of nine international organizations in TB control:

Led and managed by:

KNCV Tuberculosis Foundation

Coalition Partners:

- American Thoracic Society (ATS)
- FHI 360
- Interactive Research & Development (IRD)
- International Union Against Tuberculosis and Lung Disease (The Union)
- Japan Anti-Tuberculosis Association (JATA)
- Management Sciences for Health (MSH)
- PATH
- World Health Organization (WHO)

What does Challenge TB do?

Challenge TB contributes to the WHO End TB Strategy targets:

Vision: A world free of TB

Goal: To end the global TB epidemic

By 2025: A 75% reduction in TB deaths (compared with 2015) and less

than 50 cases per 100,000 population.

Global Fund:

Challenge TB assists countries with the full Global Fund life cycle, from epi-analysis and national strategic plans to concept notes and full implementation.

Overarching:

Challenge TB is a cost-effective and efficient mechanism with a particular emphasis on reaching out to vulnerable communities. It assists countries to move towards universal access through a patient-centered approach that identifies and addresses the needs of all patients including women and children.

Where Does Challenge TB Work?

Asia	Africa
Afghanistan	Botswana
Bangladesh	DR Congo
Cambodia	East Africa Region
India	Ethiopia
Indonesia	Malawi
Kyrgyzstan	Mozambique
Myanmar	Namibia
Tajikistan	Nigeria
Ukraine	South Sudan
Uzbekistan	Tanzania
Vietnam	Zimbabwe

Contact Details

For more information and access to the tools, guidelines and other relevant materials developed by Challenge TB and the previous projects please visit our website:

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You can also contact:

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CHALLENGE









The Global Tuberculosis Situation

Tuberculosis (TB) Facts and Figures (2015):

- An estimated 10.4 million people were newly infected with TB
- 400,000 people with TB/HIV died
- An estimated 1 million children acquired TB
- 170,000 children died from TB
- An estimated 480,000 people developed multidrug-resistant TB (MDR-TB)
- An estimated 250,000 people died from MDR-TB
- Of the estimated 10.4 million new TB cases only 6.1 million were actually diagnosed (59%).

The United States Agency for International Development's (USAID) Global Leadership in TB Care and Control:

USAID Bureau for Global Health is building and expanding upon previous successful TB control programs which began in 2000.

Challenge TB is the flagship global mechanism for implementing USAID's TB strategy as well as contributing to TB/HIV activities under the U.S. President's Emergency Plan for AIDS Relief (PEPFAR).

Challenge TB collaborates with other national and international initiatives in providing global leadership and support for national TB control efforts.

Challenge TB Strategies & Principles

The Challenge TB partners operate using a framework which has four strategies:

Engage stakeholders, including national TB programs, new partners and individuals, and especially youth.

Empower key decision-makers, people affected by TB, and marginalized and vulnerable populations.

Evaluate interventions, measure quality, develop evidence, and implement best practices.

Expand on the provider and service range, and remove barriers to access.

In addition, there are four principles to which Challenge TB partners are committed: quality-focused deliverables and technical assistance; locally owned and generated innovations, research and solutions; innovative approaches, technologies, tools and thinkers; and a patient-centered focus throughout our work.

Objectives & Intervention Areas

Challenge TB has three objectives, each with several focus areas for interventions:

Objective 1: Improved access to high-quality patient-centered TB, DR-TB & TB/HIV services

- By improving the enabling environment
- By ensuring a comprehensive, high quality diagnostic network
- By strengthening patient-centered care and treatment.

Objective 2: Prevent transmission and disease progression

- By targeted screening for active TB
- By implementing infection control measures
- By managing latent TB infection.

Objective 3: Strengthen TB service delivery platforms

- By enhancing political commitment & leadership
- By strengthening drug & commodity management systems
- By ensuring quality data, surveillance and monitoring & evaluation
- —By supporting human resource development
- By building comprehensive partnerships & informed community

