



# UNITAID

## Enabling scale-up of preventive strategies for TB: UNITAID's role in funding opportunities in LTBI

28 April 2016, Seoul

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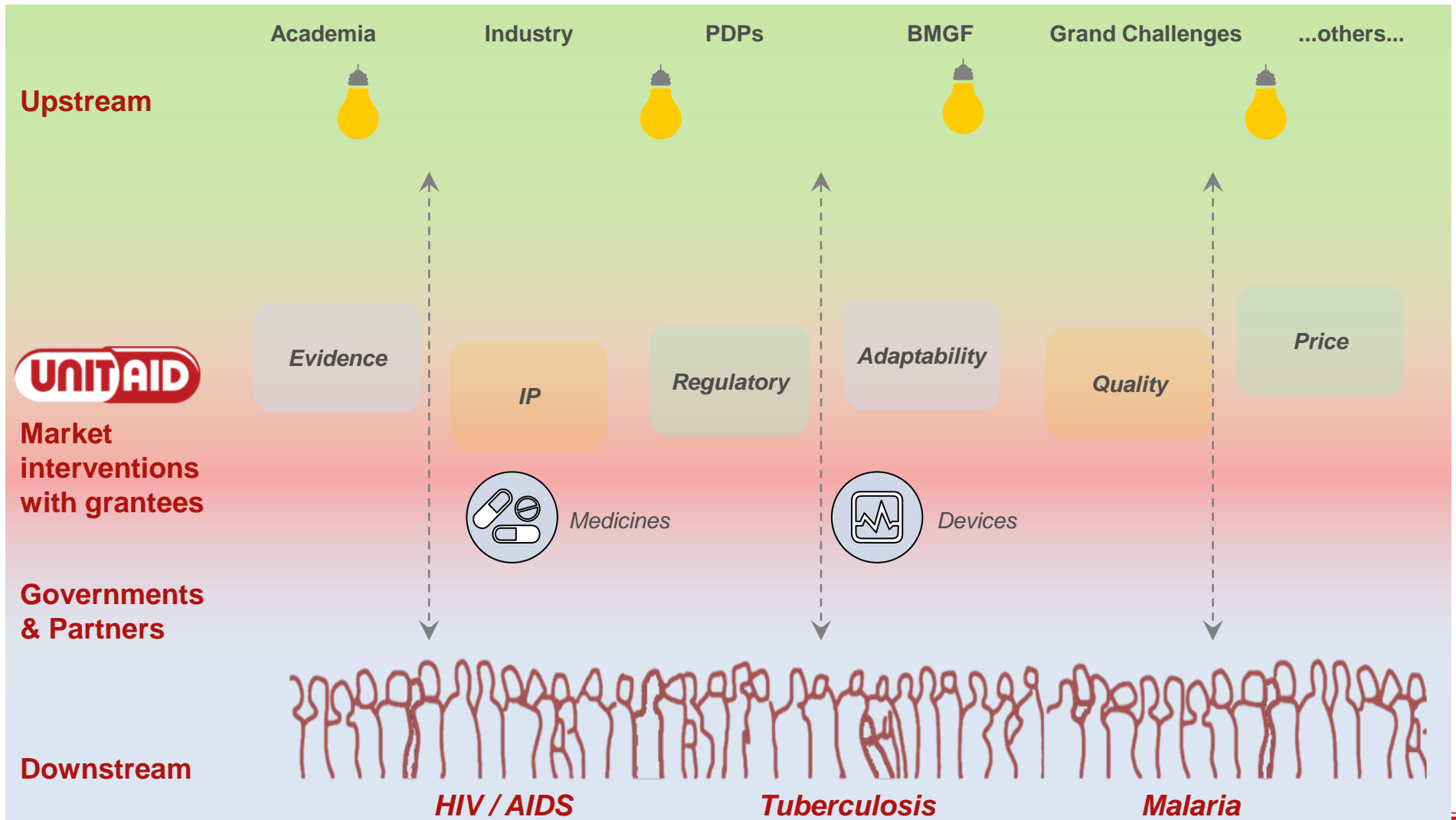
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# Agenda

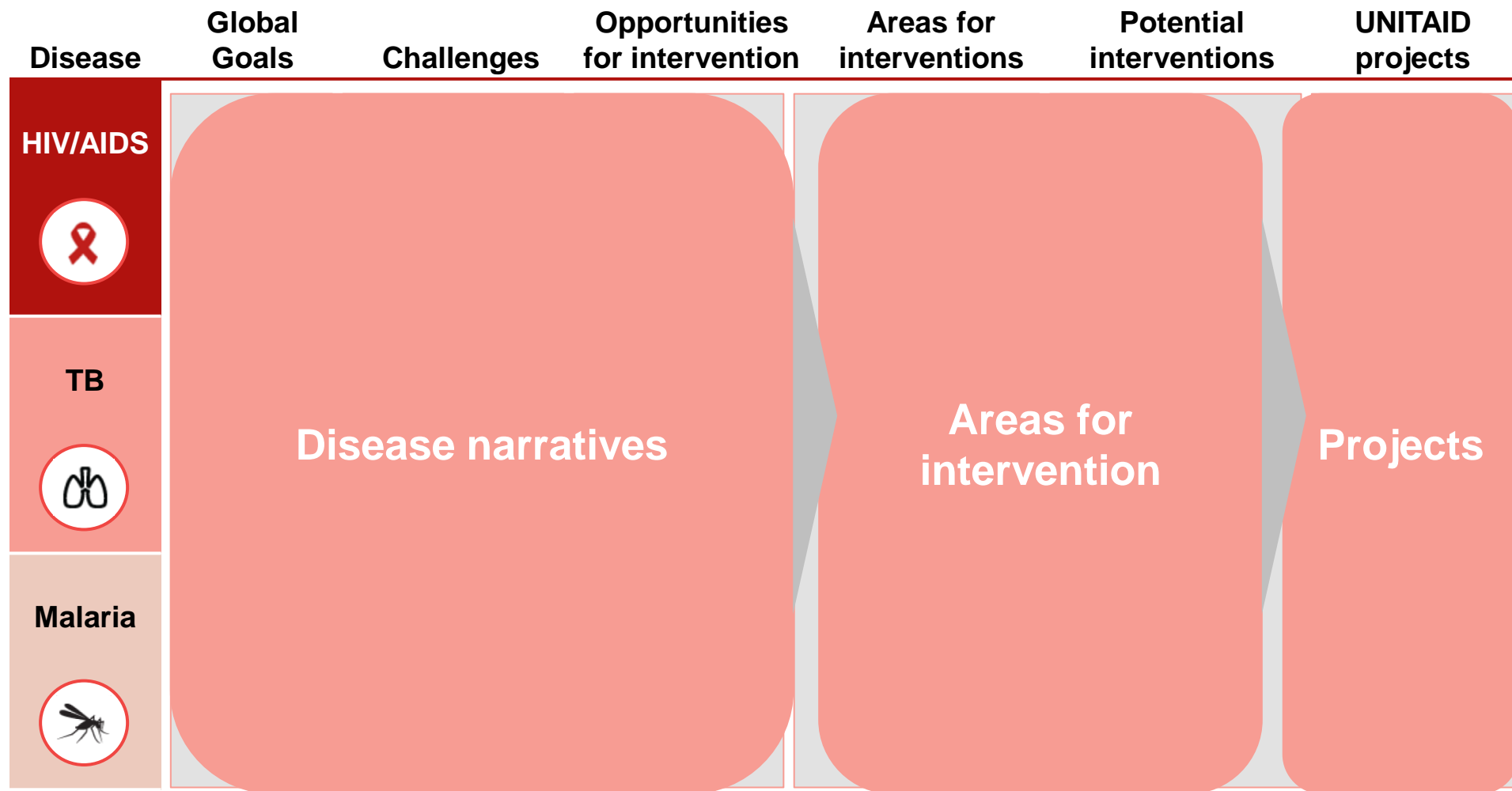
## **UNITAID positioning and operating model**

Focus on UNITAID's role in supporting preventive TB treatment

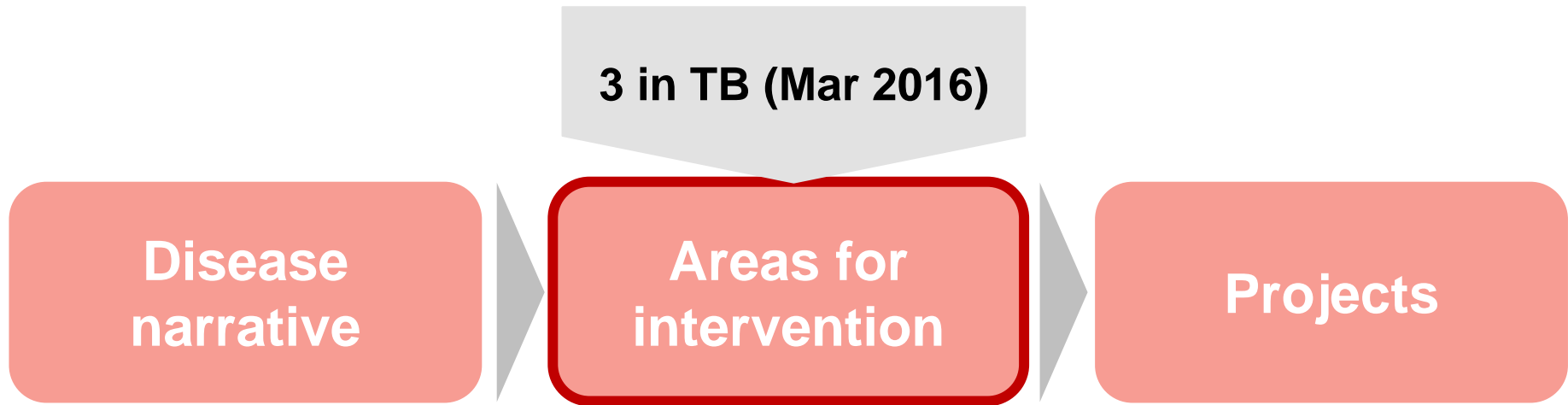
# UNITAID connects the upstream to the downstream and enables others to do "more with less"



# UNITAID has a common strategic investment framework to define investments



# Terminology used in defining UNITAID's investments



- Understand the **disease**, the **global response**, and **challenges**
- Select **potential opportunities**

- Areas in which we **plan to invest**
- Vehicle to issue **calls for proposals**

- UNITAID's **investments** (funded grants)

# Agenda

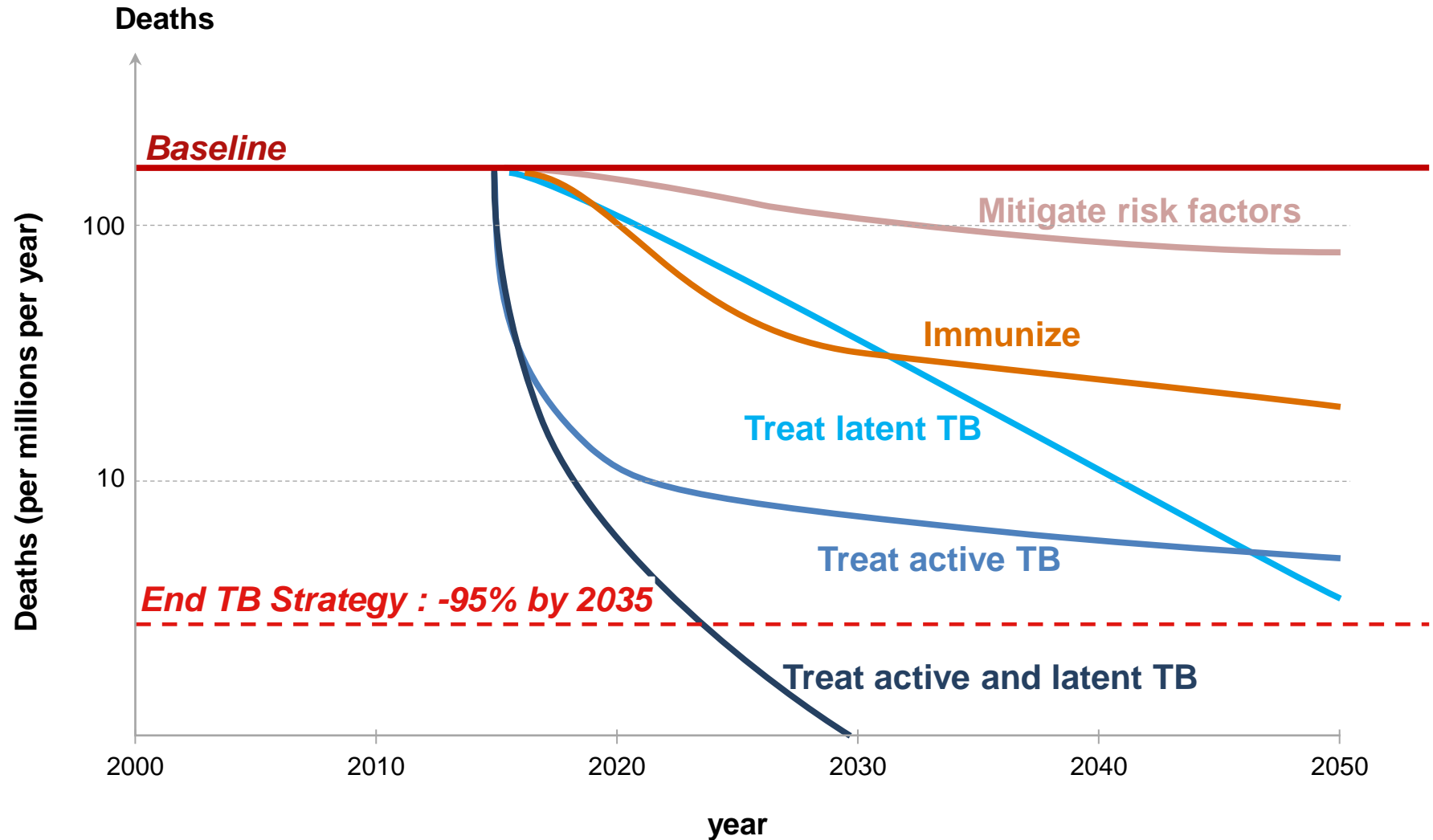
UNITAID positioning and operating model

**Focus on UNITAID's role in supporting preventive TB treatment**

# End TB Strategy sets out ambitious targets

WHO End TB Strategy	Milestones		Targets	
	2020	2025	SDG 2030	END TB 2035
Reduce # of TB deaths vs. 2015	35%	75%	90%	<b>95%</b>
Reduce TB case incidence rate vs. 2015	20%	50%	80%	<b>90%</b>
Families facing catastrophic costs due to TB	<b>ZERO</b>			

# Prevention complements other strategies to reach global goals





# TB outcomes are worst in people living with HIV and in children



Increased risk of progressing from latent TB to active TB for vulnerable populations

Active TB is the leading cause of death in people with HIV



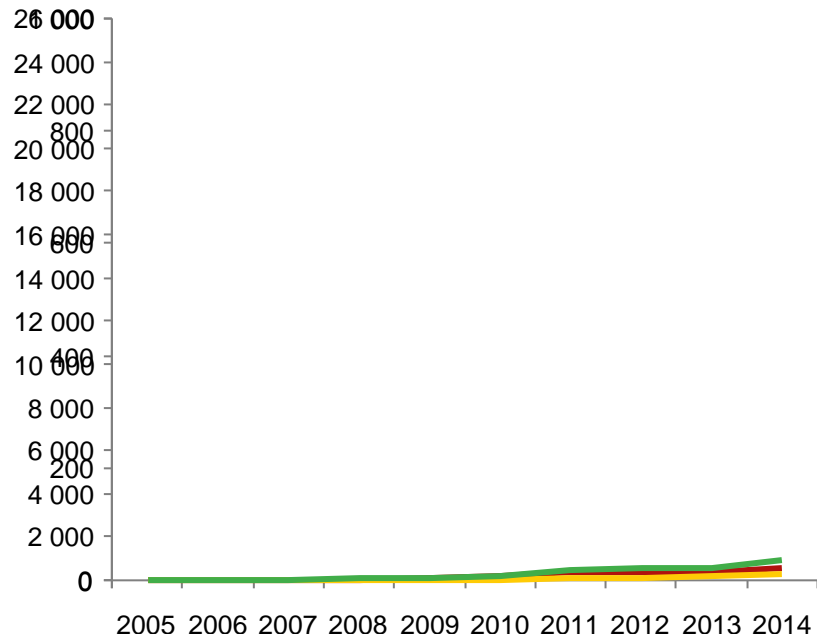
Active TB is top 10 killer in children under five years



# Limited uptake of treatment due to lack of appropriate tools

## Low uptake of isoniazid preventive therapy among PLHIV

Number of people living with HIV (k)



— South Africa — Rest of Africa  
— Rest of world — Global



Long (6-36 months) and complex treatment options



Poor adherence



Re-infection in high burden settings



Challenging to scale up



Deprioritized vs. other interventions

# Potential game-changing treatment but challenges to scale-up

## Product-specific challenges



Long (6-36 months) and complex treatment options



Poor adherence



Re-infection in high burden settings



Challenging to scale up



Formulation



Diagnostics

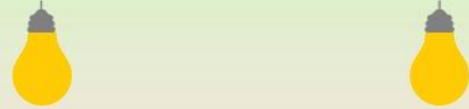


Affordability

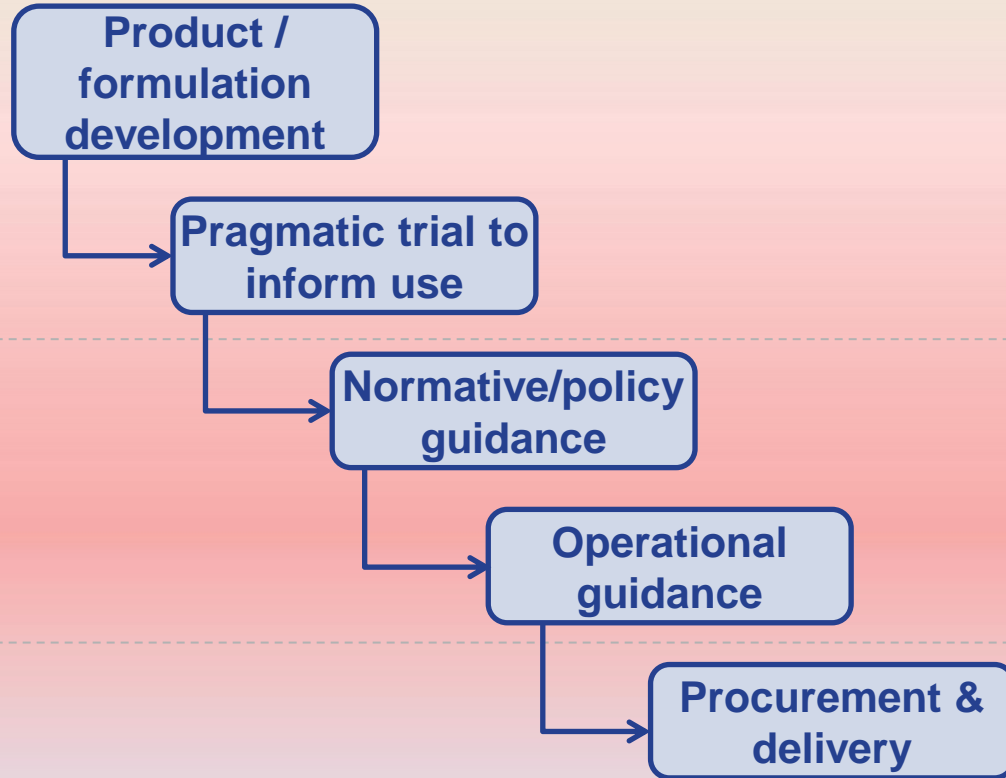


Models / pilots to inform and enable scale-up

# Opportunity to improve guidance and accelerate scale-up



Upstream



**Private sector**



**Researchers**



**(TB and HIV programmes)**



Downstream



**Thank you**

**[www.unitaid.org](http://www.unitaid.org)**

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