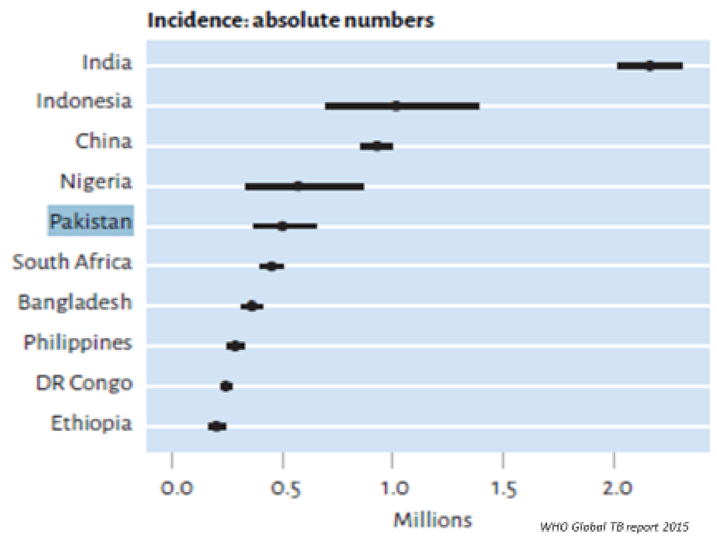
National TB Control Program Pakistan's Response to The End TB Strategy

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Background

PRE DOTS SCENARIO (1995-2000)	▪ DOTS Strategy adopted ▪ National guidelines issued, 5 pilot sites initiated ▪ TB control integrated in PHC ▪ NTP revived
DOTS STRATEGY (2001-05)	▪ TB declared national emergency ▪ 100% DOTS coverage in public sector through PHC ▪ Public sector funding ensured
STOP TB STRATEGY (2006-15) & MDGs	Core TB: *≥ 3 million TB cases diagnosed & treated with quality assured ATT drugs in 1300 TB care facilities* Quality assured bacteriology: *≥1400 microscopy centers, 8 culture, 5 DST laboratories and 68 X-pert sites* PMDT: *≥8000 MDR-TB cases enrolled at 27 PMDT sites with upgradation of infection control and social support.* PPM: *>20% case contribution through PPM interventions* TB/HIV: *≥11000 TB cases screened for HV at 16 sentinel sites*
THE END TB STRATEGY (2016-35) & SDGs	NTP PAKISTAN RESPONSE WITH MULTIPLE INTERVENTIONS

HBC's



TB burden

Population	185 m (2014)
Susceptible TB *(est. incident cases all forms)*	**≥ 500,000**
Prevalence	341 /100K
Incidence All Type	270 /100K
Mortality	26/100K
Drug Resistant TB *(est. incident cases)*	**12000**
Among New	3.7%
Among Retreatment	18%

Interventions

COSTED NATIONAL STRATEGIC PLAN "VISION 2020" *(2014-2020)*

PUBLIC SECTOR FINANCING FOR TB CONTROL *(2015-18)*

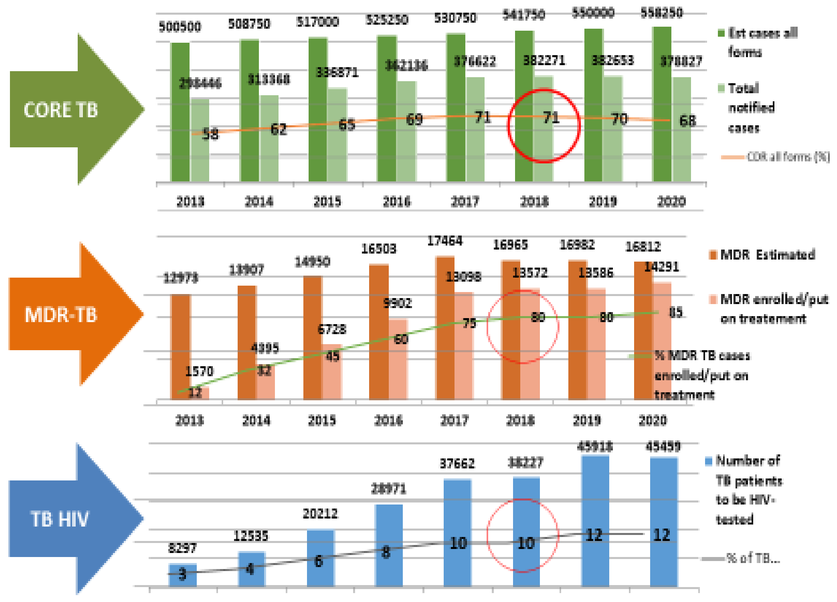
GLOBAL FUND SUPPORT NEW FUNDING MODEL *(2015-17)*

National Strategic Plan "Vision 2020"

NATIONAL STRATEGIC PLAN

PROGRAM COMPONENTS	YEAR	COST (US$)
Improving diagnosis	2014	61,615,976
Patient support		
First-line drugs procurement and management	2015	90,588,164
Monitoring & Evaluation	2016	106,096,921
Program management and supervision		
Human Resource Development (staff, Technical assistance & trainings)	2017	148,072,092
Collaborative TB/HIV activities	2018	149,227,162
MDR-TB		
High risk groups	2019	156,016,194
Infection control		
Involving all care providers: PPM/ISTC	2020	164,368,675
Partnering initiatives		
Community involvement	Total	875,985,184
Operational research		

Targets- NSP



MARK DYBUL & LUTICA CALL ON PRESIDENT
AGENDA FOR UNIVERSAL ACCESS TO TB CARE - 2014







Public sector financing

PROVINCE/ REGION	PKR (million)	DURATION
AJK	11.7	2012-16
BALOCHISTAN	373.0	2015-18
FATA	187.0	2014-15
KPK	285.0	2014-17
PUNJAB	1341.0	2015-18
SINDH	619.0	2012-15
GB	90.0	2015-18
NTP	52.5	2014-17

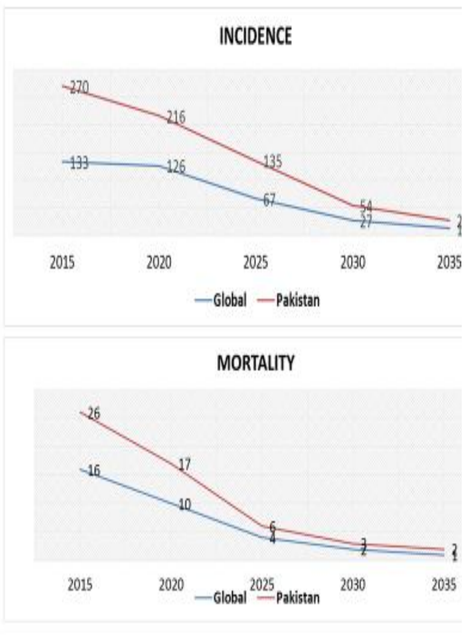
GF-NFM Targets

PROGRAM COMPONENTS	(Baseline)	JUL 14 JUN 15	JUL 15 JUN 16	JUL 16 JUN 17	JUL 17 DEC 17
PRIMARY TB CARE					
No. of TB cases to be notified	306227 (61%)	325703 (63%)	350130 (67%)	370041 (70%)	189723 (71%)
ENGAGING ALL CARE PROVIDERS					
No. of TB cases to be notified in private sector	62107 (20%)	73460 (23%)	82921 (24%)	104895 (28%)	61272 (32%)
DRUG RESISTANT-TB					
No. of MDR-TB cases to be enrolled and treated	2116	2340	3695	4093	2339
TB/HIV CO-INFECTION					
No. of TB cases to be screened for HIV	10433 (3%)	16405 (5%)	24636 (7%)	33376 (9%)	19006 (10%)

GF-NFM GRANT

- Total Grant Period : 1st July 2015 to 31st Dec 2017
- Total Grant Budget: USD 138.6 million

NTP Response



Way forward

- *NTP as institutional entity in post devolution context for uniformity in policies, donor liaison, advocacy and backup technical assistance to PTPs.*
- *Notification of "missed" TB cases*
- *High enrollment of drug resistant TB cases*
- Enhanced investment from domestic and donor sources for "Universal access to TB care" in Pakistan