

### **CONTENTS**

OUR GLOBAL IMPACT IN 2019

INTRODUCTORY MESSAGES

HIGHLIGHTS FROM 2019

FINANCIAL REPORT

ORGANISATIONAL INFORMATION

### **OUR GLOBAL IMPACT IN 2019**



Union members in 129 countries collaborated on global lung health issues across seven regions and within seven scientific sections and sub-sections and several working groups. Their work contributed to technical publications, the scientific programme of the Union World Conference and advocacy efforts, among other activities.



The Union's 651 staff and consultants based out of 10 offices around the world worked in 72 countries to conduct and publish research, implement health programmes, convene conferences and consultations, and provide training and technical assistance.



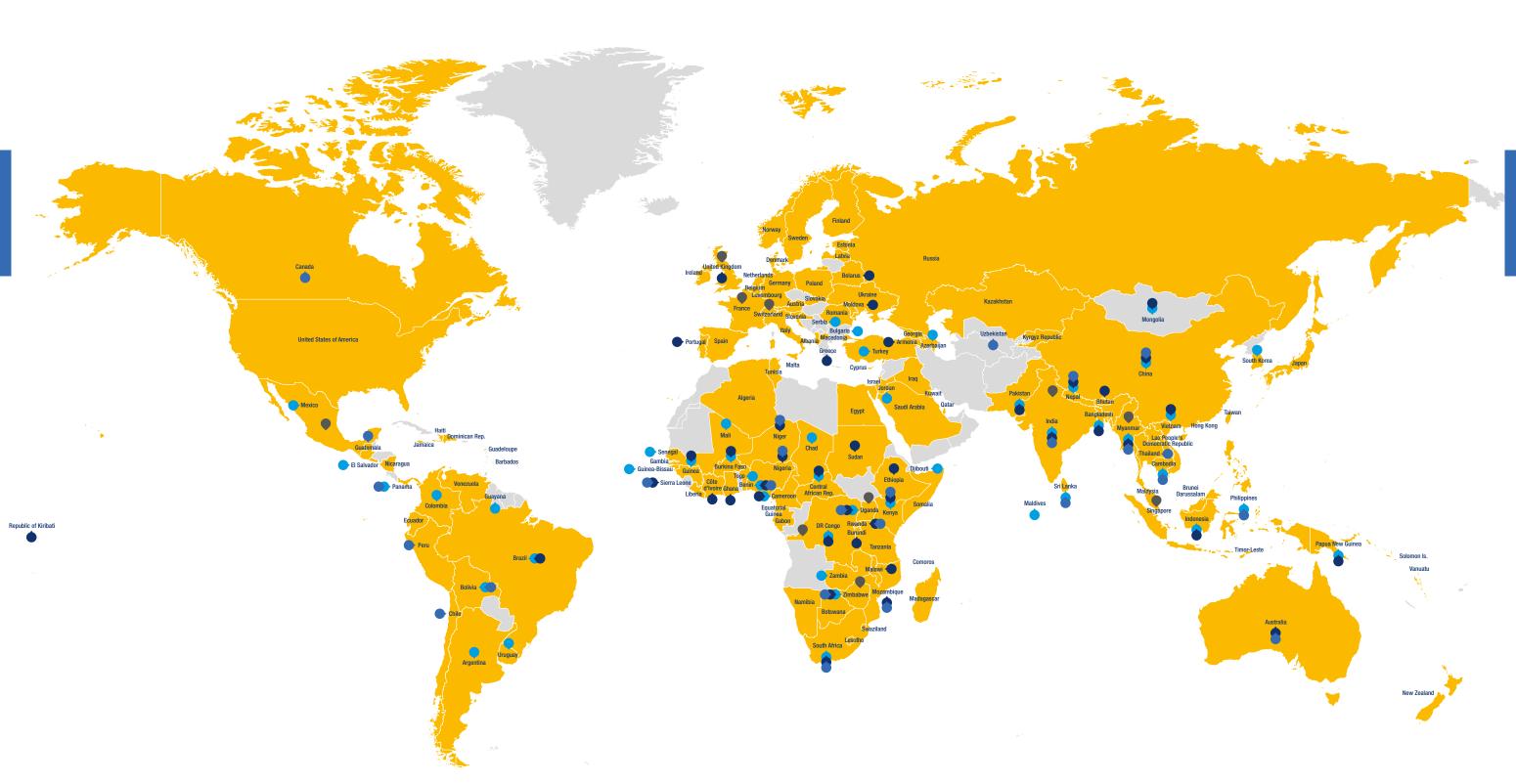
The Union provided technical assistance to 46 countries. Thirty countries received Union technical assistance in TB and The Union's Department of Tobacco Control supported 24 countries to implement tobacco control interventions.

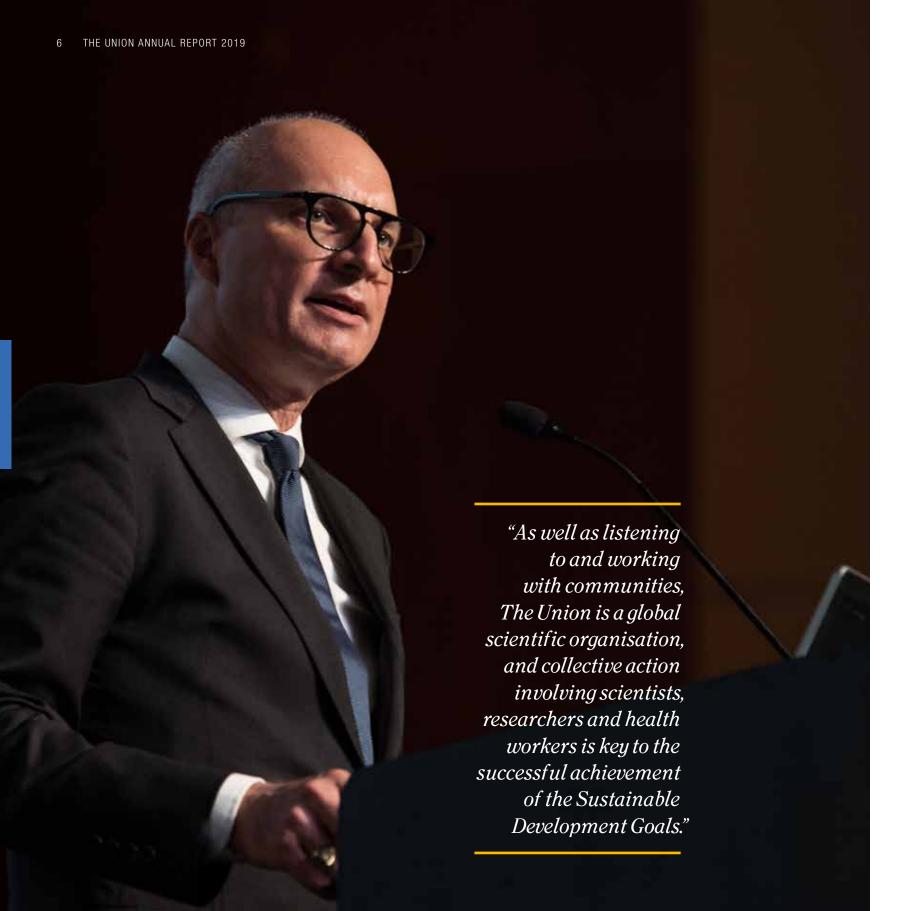


The Union conducted research in 41 countries and developed 162 research studies. Nine operational research fellows worked in Africa and Asia. Of the 206 scientific papers or documents published by the Centre of Operational Research, 145 of them were research projects.



The Union delivered courses and convened conferences in 26 countries. The Union trained 813 participants in international management and development and the clinical and operational management of TB. Operational research training was delivered to 130 participants from 25 countries who attended 10 SORT IT courses and one short courses.





### **MESSAGE FROM THE EXECUTIVE DIRECTOR**

I am proud to share with you The Union's Annual Report for 2019, which provides details of some of our work from the year and reviews our global impact.

The Union is committed to ending TB, and, in parallel, is contributing to the achievement of the Sustainable Development Goals (SDGs) outlined in the 2030 Agenda for Sustainable Development, adopted by all United Nations Member States.

2019 was a year in which The Union identified the need to make greater progress toward the SDGs by playing a stronger role in elevating scientific evidence and also amplifying the voices of affected communities and survivors. Consequently, 2019 witnessed the inaugural Survivors Summit at the 50th Union World Conference in Hyderabad, an event which brought together survivors of tuberculosis (TB) and lung disease, raising the power of the community to create a global advocacy movement that is both strong and coordinated.

Affected communities were also the focus of some of our biggest projects from the year, mobilising thousands of community volunteers in outreach to millions of households in India through Project Axshya, and through HIV prevention activities in Myanmar with The Union's Integrated HIV Care (IHC) programme. In Africa, the Union-led DETECT Child TB project already showed us how medical professionals can be equipped with the knowledge and tools to diagnose and treat TB in children. The Child and Adolescent TB Centre of Excellence in Uganda went on to promote collaboration and learning across Africa to prevent needless TB deaths, giving affected communities the skills to make a difference.

As well as listening to and working with communities, The Union is a global scientific organisation, and collective action involving scientists, researchers and health workers is key to the successful achievement of the SDGs. Among the breaking news announced at the Union World Conference in Hyderabad was the landmark agreement between Sanofi, Unitaid and the Global Fund to significantly lower the price of rifapentine, a critically important drug for TB prevention. Such collective action enables vital research, the development of expertise and the sharing of knowledge to improve the lives of vulnerable people across the globe.

The Union continues to prioritise longstanding issues like TB, air pollution, asthma and tobacco control, whilst reacting to newer priorities such as post-TB complications, as demonstrated by convening the first International Post-TB Symposium in 2019 at Stellenbosch University, South Africa. 2020, The Union's centennial year, witnesses the arrival of the global threat of the novel coronavirus, COVID-19. The Union must remain smart, creative and committed in facing this new challenge. TB and COVID-19 are similar in many ways, and although none of us saw the pandemic coming, our experience of TB and lung disease means we are uniquely prepared.

I sincerely thank our dedicated staff, consultants, members, donors, partners and friends, an amazing and unique selection of people who make all our work possible.

Yose King Carty

**JOSÉ LUIS CASTRO** EXECUTIVE DIRECTOR

### **MESSAGE FROM** THE PRESIDENT

As I write this message, the time since 2019 seems like an eternity. As the world is plunged into turmoil in dealing with the new threat of COVID-19 and its attendant economic, social, political and other health consequences, we must remember that The Union has been confronting major global threats to health, and their consequences, for 100 years before COVID-19.

Major lung health problems – tuberculosis (TB), pneumonia, asthma and COPD, and major threats to lung health – tobacco, polluted air, and airborne infections, disproportionately affect those who are vulnerable and have least power and resources. The Union is here for these people; formed as a federation of civil society organisations committed to tackling the scourge of TB, it remains committed to ending suffering due to TB and lung diseases, both old and new, by advancing better prevention and care.

We are a membership organisation, a technical organisation, and a scientific organisation. We were established in 1920 and are led by people who are committed to our mission and our values of quality, transparency. accountability, respect and independence. Our members are organisations and individuals from all parts of the world. We are made up of government and non-government agencies, charities, donors and funders, professional groups, patient groups and civil society organisations. We bring together clinicians, managers, policy makers, front-line workers and implementers, scientists, patients and survivors, advocates and civil society.

During 2019, our staff, consultants, members and other partners continued to strive, on many fronts, to reduce suffering due to TB and lung disease. Our people are working to generate new knowledge by undertaking innovative operational, clinical and public health research. Our journals, conferences, webinars, courses and web pages continue to lead the way in knowledge dissemination and exchange, capacity building, and communication, both globally and within countries. Our technical teams provide intervention and support for populations vulnerable to TB, lung disease and tobacco. We are actively engaged in leadership and advocacy to advance our mission. We seek to promote engagement with the global health community at large, including governments, donors, multi-lateral agencies and members, as well as to strengthen the voice of affected communities, individuals, and the health care workforce. Finally, while maintaining a focus on our mission, we also seek to build a sustainable and resilient Union, fit for its purpose, in an increasingly challenging environment.

I hope that in reading this Annual Report you will share my pride in the achievements of The Union and my ongoing commitment to its mission and values. As a member of The Union you are part of a unique and diverse global community, sharing common goals. As a Union we have the strength to achieve goals that we cannot achieve as individuals or as disconnected organisations and nations. In my humble opinion, recognising this strength, and recommitting to this Union, is the key political lesson of our troubling times.

Cun's Marks

PROFESSOR GUY B. MARKS PRESIDENT OF THE UNION



THE UNION ANNUAL REPORT 2019 11



# HIGHLIGHTS FROM 2019

The Union works across all areas of lung health, drawing from the best scientific evidence and expertise to advance solutions to public health challenges that affect people living in poverty. We conduct research to provide evidence for public health policy and practice, we disseminate scientific knowledge to strengthen public health programmes, and we deliver services and conduct advocacy to safeguard people's health. This section provides highlights from The Union's activities during 2019, touching on our priorities: TB, multi-drug resistant TB, child TB, TB-HIV-diabetes, lung health and NCDs, and tobacco control.

On the eve of the Union World Conference, press representatives and Ambassador for The Union, film and television actor Claire Forlani, met TB survivors in Hyderabad.

The 50<sup>th</sup> Union World Conference on Lung Health in Hyderabad, India, followed the theme *Ending* the Emergency: Science, Leadership, Action, focusing on what is needed to ensure commitments become action, and that lifesaving targets are met.

Among the breaking news announced at the conference was the landmark agreement between Sanofi, Unitaid and the Global Fund to significantly lower the price of rifapentine, a critically important drug for tuberculosis (TB) prevention.

Also announced, during the second TBScience 2019 pre-conference, were the results of a trial for a new TB vaccine known as M72/AS01E and developed by GlaxoSmithKline, which contributed to preventing TB in 50 percent of people receiving it, representing a significant advancement towards ending the TB emergency.





### ORIGINAL RESEARCH CONTINUES TO EXPLORE **NEW SOLUTIONS AND EXPAND THE EVIDENCE BASE**

The Union welcomed two new Editors in Chief to the International Journal of Tuberculosis and Lung Disease (IJTLD), and published numerous articles and editorials on Union studies, on topics including: Global Fund investment in operational research; the need for a target to address health-related quality of life post-TB treatment; improved local use of TB data in Zimbabwe, and preventing TB in people living with HIV. Other research from the IJTLD highlighted issues ranging from the use of animal models to explore the dual burden of TB-diabetes to the impact of World TB Day.

The Union's online journal, *Public Health Action*, issued quarterly open-access editions, broadening its coverage and publishing a special supplement on Papua New Guinea.

And Union researchers published articles in other journals on topics including: treatment for TB infection, translating TB treatment guidelines into national strategic plans; the impact of smoking cessation activities on people who underwent TB treatment; adolescent-specific care in HIV programmes in Myanmar; active case finding and diagnosis delay; and the final results from the STREAM stage 1 clinical trial.

# THE UNION ANNUAL REPORT 2019 "No child or adolescent should miss out on being able to access the best treatment available for a wholly treatable and curable disease." DR GRANIA BRIGDEN DIRECTOR OF THE DEPARTMENT OF TUBERCULOSIS Mutesi developed TB while pregnant. She was diagnosed and put on treatment through The Union's DETECT Child TB Project.

### **CENTRE OF EXCELLENCE STRENGTHENS TB ACTIVITIES FOR CHILDREN AND ADOLESCENTS**

The Union launched the Child and Adolescent TB Centre of Excellence in Uganda to promote collaboration and learning across the Africa region and prevent needless child and adolescent TB deaths.

With this initiative, The Union aims to create a virtual network of TB professionals and organisations across Africa, offering technical leadership, capacity building and funding opportunities to improve child and adolescent TB research and practice.

An estimated 1.12 million children under 15 years of age developed TB in 2018. The TB diagnosis and reporting gap remains unacceptably high across all age groups approaching 33 percent globally.

1,120,000

Estimated number of children under 15 years of age that developed TB in 2018.

THE UNION ANNUAL REPORT 2019 17

### THE UNION'S PROJECT AXSHYA PRESENTED TO PRESS AS MODEL FOR INNOVATIVE TB PROGRAMMES

The Union's Project Axshya, a long-running multi-sectoral TB response continued to provide innovative interventions targeted towards traditionally hard-to-reach and at-risk populations in India. Supported by the Global Fund since 2010, Project Axshya has established a network of 15,000 community volunteers mobilised to provide support and help connect people to services across the country, initiated fast-track interventions in 121 over-burdened district hospitals and held more than 150,000 community meetings providing TB awareness and information to 2.5 million people.

In the lead up to the Global Fund's Sixth Replenishment Conference in October 2019, The Union and the Global Fund coordinated an outreach effort, bringing journalists from international media to visit Project Axshya, as a model for people-centred solutions to challenges posed by the TB epidemic.

The story was picked up by outlets including Le Monde, Libération, The Japan Times, La Vanguardia, and The International News of Pakistan.

supporting TB services.

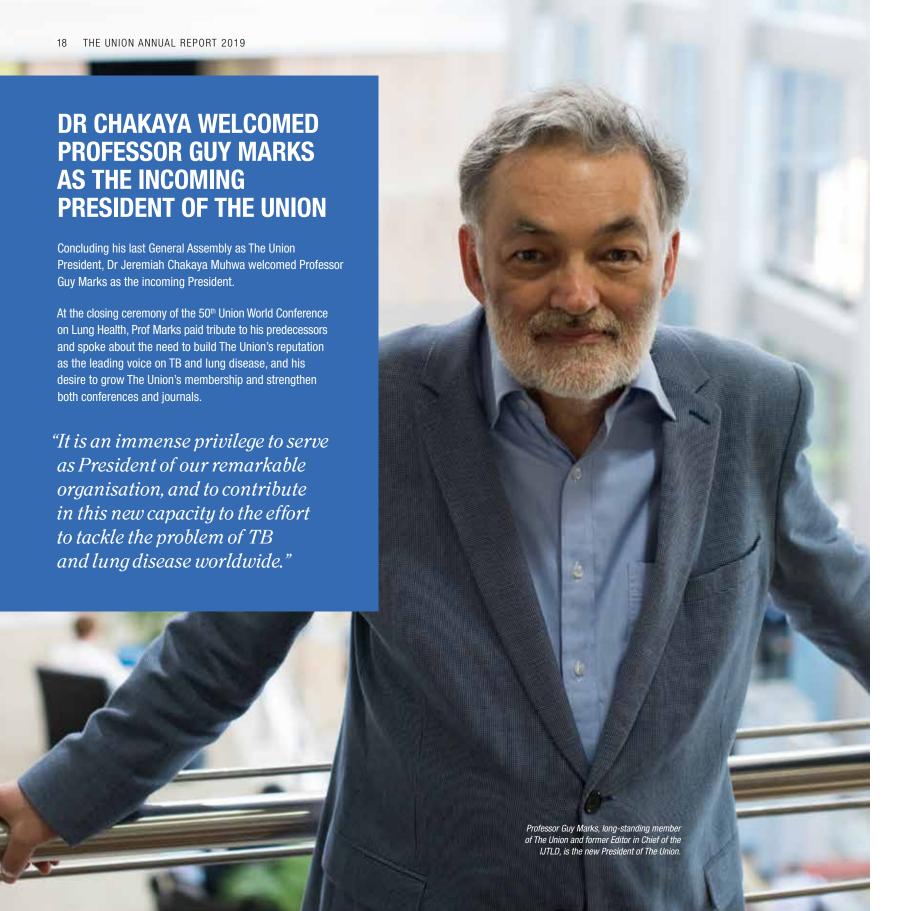
2.5m

Community volunteers

People reached with TB

awareness and information.





### TB PREVENTIVE CARE THE FOCUS OF NEW OPEN-ACCESS UNION COURSE

The Union launched a new open access online course in TB prevention entitled *Prevent Tuberculosis:* Management of TB Infection. The course is designed for national TB and AIDS programme staff and clinicians to support the improvement of TB preventive care for people at risk of developing TB disease.

Ensuring people have access to diagnosis and appropriate care at the earliest stage after exposure to TB is critical to reducing TB transmission and ending the epidemic. It is with this in mind that the TB prevention course aims to better equip healthcare workers to confront the TB epidemic before causing illness and harm to anyone.

Thanks to the financial support of Sanofi, the course is available online in English. French and Spanish versions will be available in 2020.



Dr Jamie Tonsing, Director of The Union South-East Asia Office, holds up the issue brief Advancing TB Prevention at the press conference.





### SYMPOSIUM ADVOCATES FOR PEOPLE **SUFFERING FROM COMPLICATIONS POST TB TREATMENT**

The first International Post-TB Symposium took place at Stellenbosch University, South Africa, with The Union's working group for post-TB chronic respiratory disorders playing a key role in its establishment and operation. The two-day event attracted 68 invited delegates from around the world.

The symposium advocated for people suffering with post-TB complications, facilitating face-to-face networking between

leaders in the field, defining the current state of knowledge surrounding post-TB disease, and achieving consensus on important aspects of post-TB lung diseases. Future priority research needs were also identified, and a reference document was produced for researchers and workers in the field.

A new target addressing quality of life posttreatment was recently proposed in a Union article in the IJTLD.

> The Union World Conference's first plenary also addressed life after TB, with Stellah Mpagama discussing treatment optimisation to maximise health and well-being after TB.

### THE UNION DECLARES **'IT'S TIME' ON WORLD TB DAY**

On World TB Day, 24 March, Union members and staff united across the globe under the theme It's Time to End TB.

Staff from The Union Office in Myanmar took a series of photos and shared them widely to raise awareness around TB eradication. In Zimbabwe, The Union held a community discussion forum with local and traditional leaders to make them more aware of TB. They also organised a media field trip.

To mark the day, Executive Director José Luis Castro, said: "It's time for a breakthrough in TB". He referred to the publication of *The Lancet Commission* with its roadmap setting out five priority investments, as "laying out the steps to bring about the breakthroughs we are

In the lead up to World TB Day, The Union hosted a panel discussion in New Delhi on the challenge of ending the TB emergency in India and globally.

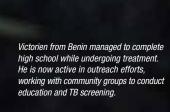


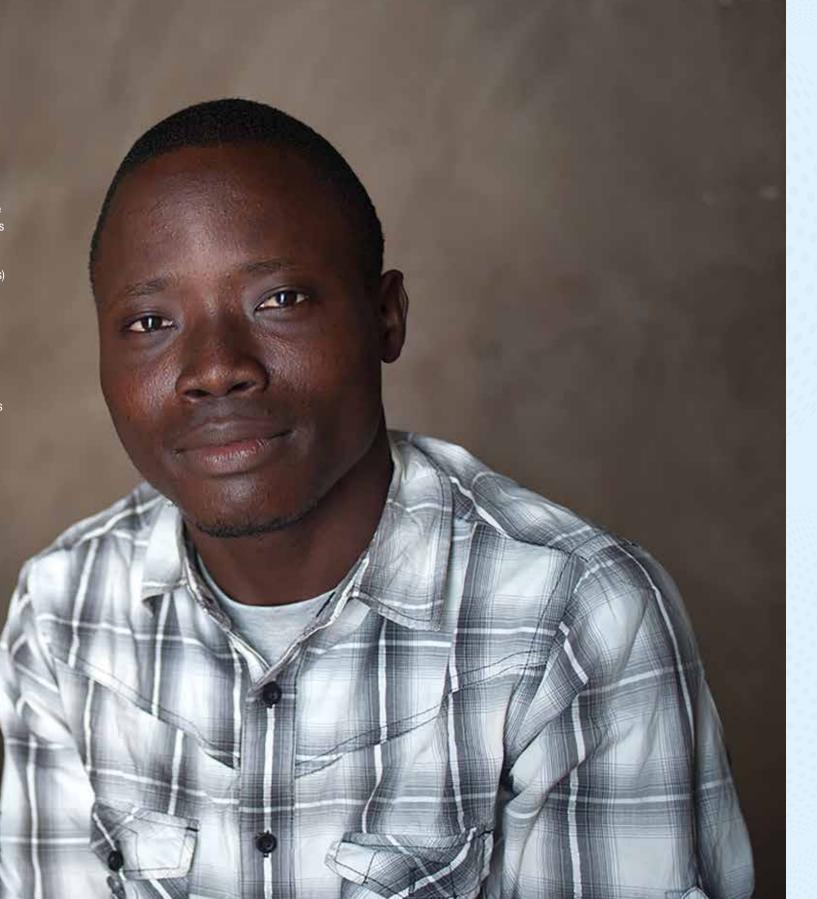
### **CETA SUPPORTS** TB ELIMINATION IN FRANCOPHONE AFRICA

The Union launched a new project, 'Contributing to the Elimination of Tuberculosis in Africa (CETA)', which aims to eliminate TB in Francophone Africa by 2035.

The project will support national TB programmes (NTPs) in eight countries with TB screening and prevention, improving healthcare delivery by better integrating it into the wider health system, and strengthening the governance of these NTPs.

The project builds on The Union's many years of work supporting TB efforts in the African content and a history of close collaboration with the eight countries covered by CETA: Benin, Burkina Faso, Cameroon, Guinea, Central African Republic, Niger, Senegal and Togo.





### THE UNION'S GLOBAL **IMPLEMENTATION** PROGRAMME LAUNCHED IN INDONESIA

The Union's Global Implementation Programme, funded by Bloomberg Philanthropies, officially launched in its first two cities, Yogyakarta and Depok City, Indonesia.

At the launch events, Yogyakarta and Depok City Mayors publicly committed to improve the implementation of smoke-free laws, as well as implementation of point of sale tobacco advertising, promotion and sponsorship bans in Depok City.

The Global Implementation Programme will soon launch in cities in China, India and Pakistan, and will provide technical assistance and capacity building at the city level to effectively implement evidence-based tobacco control policies and de-normalise tobacco use.

In Hyderabad, a smoke-free initiative was also launched in the lead up to the Union World Conference.

### UNION MEMBERS FROM ACROSS THE **GLOBE CONVENED AT REGION CONFERENCES** IN MANILA, PANAMA AND VANCOUVER

The Union's members are affiliated by region, and they work together to organise region conferences on TB, lung health and related topics. These scientific conferences brought together regional and international TB advocates, survivors, scientists, clinicians and programme managers to hear about the latest on TB diagnostics, drugs, treatment, prevention and clinical trials.

In Manila, hundreds of delegates from across the Asia Pacific region attended the conference under the theme Unity in Diversity: One Against Tuberculosis and Other Lung Diseases, while the conference in Panama focused on Prevention, People and Partnerships. In February 2019 in Vancouver delegates convened on the topic of ending TB, following conversations around the United Nations High-Level Meeting on TB in New York in September 2018, which culminated in a political declaration committed to ending TB by 2030.





An anti-smoking event during the 4th APCAT Summit, which attracted delegates from 12 countries in the Asia Pacific region.

### **LEADERS CONVENED** AT THE 4TH APCAT SUMMIT ON TOBACCO CONTROL

The 4th Asia Pacific Cities Alliance for Tobacco Control and noncommunicable disease (NCD) Prevention (APCAT) Summit provided a platform for knowledge exchange and the sharing of best practice and actions to combat the tobacco epidemic in the region.

Held on 25-26 September in Bogor, Indonesia, APCAT recognised its host city as the first city in Indonesia to implement a smoking ban in public places and a ban on tobacco product displays at point-of-sale.

In many countries in Asia Pacific, however, tobacco control laws are poorly enforced.

"Tobacco control is a political choice," said Dr Tara Singh Bam, Deputy Director for The Union Asia Pacific Office. "Strong subnational leadership will ensure effective measures of tobacco control by identifying local solutions to local problems in the region."

The Union's Integrated HIV Care (IHC) programme started HIV prevention activities in fourteen townships in Myanmar, targeting partners and spouses of people living with HIV (PLHIV) who are taking ART services at IHC clinics. Community volunteers are involved in the prevention activities, which include partner testing which is a focused activity in which partners and spouses, including children of people diagnosed with HIV are offered HIV testing services.

The community volunteers, many who are living with HIV themselves, work with the IHC team to provide counselling and prevention services.

During the year, The Union in Myanmar also supported World AIDS Day by showcasing the impact of its work for the theme 'Communities make the difference' and hosted its annual fun day for children living with HIV under the IHC Programme.

32,576

32,576 people receiving ART through the IHC programme. **270** PLHIV initiated on treatment per month.



**270** 

### ON WORLD LUNG DAY, THE UNION HIGHLIGHTED THE **URGENT PUBLIC HEALTH EMERGENCY CAUSED BY AIR POLLUTION**

On World Lung Day 2019, The Union, as part of the Forum of International Respiratory Societies, called for all countries to adopt the World Health Organization's air quality standards to reduce ambient, indoor and occupational air pollution.

The human cost of air pollution is significant, as it is a critical risk factor for NCDs, causing respiratory illness like asthma, chronic obstructive pulmonary disease, allergies, emphysema and lung cancer, with children especially vulnerable.

With 91 percent of people worldwide breathing unhealthy air, resulting in about seven million deaths annually, there is an urgent need for action and countries must do more to put in place long-term solutions that protect people from air pollution.

Reductions in air pollution can yield fast and dramatic impacts on health, as demonstrated in the research paper Health Benefits of Air Pollution Reduction.

THE UNION ANNUAL REPORT 2019 31 The Union THE 50TH UNION WORLD CONFERENCE ON LUNG HEALTH 30 OCTOBER - 2 NOVEMBER 2019 HYDERABAD, INDIA

Sundeep Salvi speaking on 'Air pollution and chronic lung disease at the Union World Conference's plenary on 'Deadly Air'.

Union members meet at the General

Assembly to review the past year and plan for the coming one, and participate

in elections, resolutions and voting

in the Christmas Seals Contest.



## SEVENTH EDITION OF THE UNION'S POPULAR 'ORANGE GUIDE' PUBLISHED

Management of Tuberculosis, also known as the 'Orange Guide' for its recognisable orange cover, was first published in 1986. Widely used reference for health workers worldwide, this is The Union's most popular and widely used publication, with more than 50,000 copies printed in five languages. Each new revision reflects the changing dynamics of the TB epidemic and the evolving methods for TB management.

This latest edition, launched during a press conference at the 50<sup>th</sup> Union World Conference on Lung Health, includes new information on bacteriological diagnosis of TB, management of people with tuberculous

infection, co-management of people with TB and selected comorbidities, such as HIV infection, diabetes mellitus and tobacco use. The guide also contains a chapter on the treatment of drug-resistant TB and prevention of TB.

"Strong and well-functioning national TB responses are essential to drive TB elimination efforts and to coordinate multi-sectoral engagement across relevant stakeholder groups. This resource provides the technical guidance to support that effort", said Dr Riitta Dlodlo, Senior Advisor to The Union, who coordinated the development of this edition.

Dr Jeremiah Chakaya Muhwa, The Union's President, shows the 'Orange Guide', one of the organisation's most practical contributions to TB care and management.

## UNION MEMBERS SET THE DIRECTION FOR THE UNION'S 100<sup>TH</sup> YEAR

Union members met at the General Assembly in Hyderabad to set the direction for The Union's 100<sup>th</sup> year. Members were focused on driving member recruitment to build and steer the organisation, especially in the fields of chronic lung disease, respiratory disease and air pollution in order to further important work in these areas.

Over the course of the year, The Union published 12 Achiever profiles, which highlight the outstanding work of individual Union staff, consultants and members from around the world. Many of the Achievers touched on the subject of Union membership

as a movement of like-minded individuals and organisations, who work together to champion change for a better future in lung health.

Union members participated in 17 webinars throughout 2019, organised by Union sections and working groups. The webinars covered a broad range of topics, including: TB and Maternal and Child Health, Integrating tobacco control in national TB programmes, diabetes and TB, the use of Xpert for TB diagnosis, post-TB lung disease and financial support for Operational Research within Global Fund investments.



### **GENERAL ASSEMBLY**

The General Assembly is held in conjunction with the Union World Conference and is attended by the Federation – the governing body of The Union. It is an opportunity for Union members to review the past year and the plans for the coming one, elect new members and officers to the Board of Directors, and to conduct other business.

The General Assembly 2019 was held in Hyderabad, India, on Friday 1 November 2019. Dr Jeremiah Chakaya Muhwa, The Union's President, welcomed heritage, organisational, honorary, and individual members to the proceedings.

At the General Assembly members vote for their favourite Christmas seals in one of the Union World Conference's most colourful traditions.



#### THE PRESIDENT'S REPORT

Dr Chakaya presented updates on some of The Union's achievements in 2018 as they relate to the strategic goals of the organisation as set forth by the Board of Directors. Highlights included: 290,000 people were provided with TB screening through Union projects; 940,000 people were educated through 18,000 health talks delivered by 1,000 community volunteers in Myanmar; 2,000 children were treated with TB preventive therapy through The Union's TITI study; 31,300 people received ART through The Union's IHC programme in Myanmar; 4,000 participants attended the 49th Union World Conference on Lung Health in The Netherlands; and 3.69 billion people in 37 countries were protected through smoke-free laws.

#### **ELECTIONS**

The Nominating Committee received eight applications for the two vacant seats for individual member representatives on the Board of Directors.

The General Assembly elected the following individual member representatives: Dr Mira Aghi (India), and Ms Ingrid Schoeman (South Africa).

#### **RESOLUTIONS**

The General Assembly approved the Annual Report. treasurer's report, and audited accounts for the period of 1 January to 31 December 2018, and the budget for 2020.

The General Assembly, having read the reports, gave full discharge to the President and the Board of Directors for the management of that period.

The Assembly gave power to the Board of Directors or its President by delegation, to fulfil all the formalities or distribution/diffusion relative to the aforementioned adopted resolutions.

#### **UNION WORLD CONFERENCES 2020**

The location for the Union World Conference on Lung Health for 2020 (Seville, Spain) was announced.

#### **AWARDS AND HONOURS**

The winners of the 2019 Christmas Seals Contest were announced:

1st **Prize:** The Tuberculosis Association of India

2<sup>nd</sup> Prize: Japan Anti-Tuberculosis Association 3rd Prize: Korean National Tuberculosis Association

IN MEMORIAM

The following members who passed away in 2019 were remembered for their contribution to our common cause.

- Prof Victorino Farga Cuesta
- Edith Alarcon
- Prof Margaret R Becklake
- Dr Thelma E Tupasi
- Dr Sheila Ndyanabangi

#### **OTHER BUSINESS**

The General Assembly was informed that membership had been going down over the past few years and everyone's help was called upon to strengthen and grow Union membership. The organisation needs to recruit members in the fields of chronic lung disease, respiratory disease and air pollution in order to further important work in these areas.

#### THANK YOU

Dr Chakaya thanked the General Assembly and adjourned the meeting.

36 THE UNION ANNUAL REPORT 2019 THE UNION ANNUAL REPORT 2019 37

### **FINANCIAL REPORT**

The Union's latest financial reports will follow shortly once they have been finalised and approved by the General Assembly.

**MEMBERS** 

The Union is made up of a federation of members shaping global lung health. We rely on our members – both organisations and individuals – to provide leadership, influence and support to reach our common goal.

#### **HERITAGE MEMBERS**

Heritage members are recognised for their contribution as longstanding member organisations. They have supported The Union for many years and have helped make vital services and resources available. Heritage members represent their country in shaping the direction of The Union and the global agenda for public health.

#### Australia

Australian Respiratory Council

#### Austria

Verein Heilanstalt Alland

#### Chad

Programme National de Lutte Contre la Tuberculose

#### China

Chinese Anti-Tuberculosis Association

#### Côte d'Ivoire

Comité National Antituberculeux de Côte d'Ivoire

#### Finland

Finnish Lung Health Association – Filha Ry

#### Germany

DZK-German Central Committee Against Tuberculosis e.V.

#### **Hong Kong**

Hong Kong Tuberculosis Chest and Heart Diseases Association

#### India

The Tuberculosis Association of India

#### Indonesia

The Indonesian Association **Against Tuberculosis** 

#### Israel

Israel Lung and Tuberculosis Association

Japan Anti-Tuberculosis Association

#### Korea, Republic of

Korean Institute of Tuberculosis

#### Luxemboura

Lique luxembourgeoise de Prévention et d'Action Médico-Sociales

Ministry of Health and Population

#### Malaysia

Malaysian Association for the Prevention of Tuberculosis

#### Netherlands

**KNCV Tuberculosis Foundation** 

#### Nepal

Nepal Anti Tuberculosis Association

#### Norway

Norwegian Health Association

#### Pakistan

Pakistan Anti Tuberculosis Association

#### **Philippines**

Philippine Tuberculosis Society. Inc

#### Saudi Arabia

Ministry of Health

Singapore SATA CommHealth

Sri Lanka Ceylon National Association for the Prevention of Tuberculosis

#### Sudan

EpiLab

#### Switzerland

Swiss Lung Association

#### Taipei. China

National Tuberculosis Association

#### Tanzania

National Tuberculosis and Leprosy Programme

#### Viet Nam

National Lung Hospital

#### ORGANISATIONAL **MEMBERS**

Any not-for-profit organisation may apply to join The Union as an organisational member. These members play an active role in shaping The Union's priorities and contribute significant support to The Union's technical assistance, education and research activities.

#### Canada

British Columbia Lung Association

#### Nepal

SAARC Tuberculosis and HIV/AIDS Center

#### Norway

LHL International Tuberculosis Foundation

#### **Philippines**

Tropical Disease Foundation, Inc

#### Singapore

International Union Against Tuberculosis and Lung Disease, Asia Pacific Ltd

#### **United Kinadom**

International Union Against Tuberculosis and Lung Disease, United Kingdom

#### **United States of America**

American Thoracic Society

#### **United States of America**

Project HOPE

#### **United States of America**

Vital Strategies

#### **ASSOCIATE ORGANISATIONAL MEMBERS**

Any not-for-profit organisation may apply to join The Union as an associate organisational member.

#### Brazil

Alliance for the Control of Tobacco Use

#### Germany

Kuratorium Tuberkulose in der Welt e.V.

#### India

Catholic Health Association of India

#### India

LEPRA India, Blue Peter Public Health and Research Centre

#### **United Kingdom**

TB Alert

#### **BENEFACTOR AND 15-YEAR MEMBERS**

These individual members have chosen to make a contribution beyond the basic membership fee to help support The Union's work in lung health.

#### **GOLD**

Max Salfinger, USA Dean Schraufnag, USA

Charles M Nolan, USA

#### **SILVER**

Seiya Kato, Japan Jeremiah Chakaya Muhwa, Kenya Edward Nardell, USA

Richard O'Brien, USA Bess Miller, USA

Jeffrey R Starke, USA

#### 15-YEAR MEMBERS

Individual members who have committed to a long-term membership of The Union.

Frank Adae Bonsu, Ghana

Didi Bang, Denmark

E Jane Carter, USA

Chen-Yuan Chiang, Taiwan Louis James de Viel Castel, Switzerland

Asma El Sony, Sudan

Anne Fanning, Canada

Jean-William Fitting, Switzerland

Paula I Fuiiwara, USA

Ludwing Greseley Sud, Ecuador

Anthony D Harries, UK

#### **HONORARY MEMBERS**

The title of Honorary Member of The Union is granted to a person who has become distinguished through active participation in The Union's activities and the fulfilment of its goals. These members serve as informal advisors to The Union.

H.I.H. Crown Princess Akishino, Japan Joseph Aluoch, Kenya Nulda Beyers, South Africa Asma El Sony, Sudan

Michael Iseman, USA Robert Loddenkemper, Germany

Andrew Nunn, UK

Frances R Ogasawara, USA Francoise Portaels, Belgium Lee Reichman, USA A Samy, Egypt Hendrik Simon Schaaf, South Africa James Swomley, USA Li-Xing Zhang, China S Bertel Squire, UK David Miller, UK Antonio Pio, Argentina Valentin Cuesta Aramburu, Uruquay Tadao Shimao, Japan Elif Dagli, Turkey Earl Hershfield, Canada Sonkgram Supcharoen, Thailand Donald Enarson, Canada Arata Kochi, Switzerland Rodolfo Rodriguez Cruz, USA H Chum, Tanzania, United Rep. Abbas Hassan El Masry, Sudan

### **ACKNOWLEDGEMENTS**

The Union gratefully acknowledges the following governments, agencies, foundations, corporations and individuals that supported The Union's work in 2019.

#### **CORPORATIONS**

AeroMed

Becton Dickinson (BD) Blue Pen Partners Carl Zeiss Microimaging

Cepheid

DeepTek Medical Imaging Pvt Ltd

**Delft Imaging Systems** 

Docturnal eMoyo Fuiifilm

Hain Lifescience

**Hattaway Communications** 

Hetero Labs Limited **Human Diagnostics Worldwide** 

**Hunan-Tech Medical Systems** 

Johnson & Johnson Global Public Health

Longhorn Vaccines & Diagnostics

**Lung Health Corporation** 

Lupin Limited

Macleods Pharmaceuticals

MinXray

Molbio Diagnostics

MYLAN

Oxford Immunotec

Oxford Nanopore Technologies

Plos Medicine

Qure.ai Radisen Roche

Qiagen

Sanofi Savics

Schiller Healthcare India

SD Biosensor SmartspotQ Svizera Europe System0ne

Transasia Bio-Medicals Ltd MedGenome Labs Ltd

Prognosys Healthcare India Private Ltd

#### **FOUNDATIONS AND OTHER ORGANISATIONS**

Aurum Institute

Bill and Melinda Gates Foundation

Bloomberg Philanthropies

**European & Developing Countries** Clinical Trials Partnership (EDCTP)

FHI 360

Foundation for Innovative New Diagnostics (FIND)

Hong Kong Tuberculosis, Chest and Heart Diseases Association

**IDA Foundation** 

Japan Anti-Tuberculosis Association (JATA)

John Hopkins Bloomberg School

of Public Health

KNCV Tuberculosis Foundation (KNCV)

Liverpool School of Tropical Medicine (LSTM) London School of Hygiene & Tropical Medicine (LSHTM)

Médecins Sans Frontières (MSF).

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Luxembourg New Venture Fund Operation Asha

Research Institute of Tuberculosis (RIT)

Save The Children, Nepal

TB Alliance TB DIAH/JSI Vital Strategies

World Diabetes Foundation (WDF)

#### **GOVERNMENT AND** INTERNATIONAL **AGENCIES**

3MDG programme in Myanmar with funds from seven major donors (Australia, Denmark, the European Union, Sweden, Switzerland, the United Kingdom and the United States of America)

Agence Française de Développement (AFD)

Agence Régionale de Santé Guyane

City of Hyderabad, India

CHALLENGE TB implemented by the Tuberculosis Coalition for Technical Assistance (TBCTA) with funds from United States Agency for International Development (USAID)

Commune de Prémierfait, France

Department for International Development (DFID) of the British Government

FHI 360 with funds from the United States Agency for International Development (USAID)

Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund)

Japan Anti-Tuberculosis Association (JATA)/Research Institute of Tuberculosis

Ministry of Public Health of Republic of Niger (NTP)

Stop TB Partnership

The 5% Initiative, implemented by Expertise France, who acts as the Secretariat, under the oversight of France's Ministry of Foreign Affairs

United States Agency for International Development (USAID)

US Department of Health and Human Services Centers for Disease Control and Prevention (CDC)

WHO Special Programme for Research and Training in Tropical Diseases (TDR) World Health Organisation (WHO)

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The Union gratefully acknowledges all those who contributed to the Centennial Campaign in 2019.

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### **ACRONYMS**

AIDS Acquired immune deficiency syndrome

**ART** Antiretroviral therapy

CCSA Coordinating Committee for Scientific Activities
CDC Centers for Disease Control and Prevention

CETA Contribuer à l'Elimination de la Tuberculose en Afrique

**COPD** Chronic obstructive pulmonary disease

**DETECT Child TB**Decentralise tuberculosis services and engage communities to transform lives of children with tuberculosis

**DOTS** Directly observed treatment, short course

**DR-TB** Drug-resistant tuberculosis

FCTC Framework Convention on Tobacco Control

FIRS Forum of International Respiratory Societies

Global Fund Global Fund to Fight HIV, Tuberculosis and Malaria

HIH Her Imperial Highness
HRH Her Royal Highness

HIV Human immunodeficiency virus

**HLM** High-Level Meeting

IHC Programme Integrated HIV Care Programme

IJTLD International Journal of Tuberculosis and Lung Disease

LTBI Latent TB infection

 MDR-TB
 Multidrug-resistant tuberculosis

 NCD
 Non-communicable disease

 NTP
 National Tuberculosis Programme

PHA Public Health Action

**R&D** Research and development

**SORT IT** Structured Operational Research and Training Initiative

SDGs Sustainable Development Goals

STREAM clinical trial Standardised Treatment Regimen of Anti-TB Drugs for Patients with MDR-TB

TB Tuberculosis

TITI Transmission Investiguée de la Tuberculose Infantile

UN United Nations

**UNOPS** United Nations Office for Project Services

**USAID** United States Agency for International Development

WHA World Health Assembly
WHO World Health Organization

**XDR-TB** Extensively drug-resistant tuberculosis

44 THE UNION ANNUAL REPORT 2019 THE UNION ANNUAL REPORT 2019 45

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The DETECT Child TB Project in Uganda decentralised health services to detect and treat TB in children, and conducted household contact tracing to ensure those at-risk receive TB preventive therapy.