

## First-Ever Targeted Roadmap Outlines Steps to End Childhood TB Deaths

*Cost to end deaths from childhood TB estimated to be at least US\$120 million annually*

WASHINGTON D.C. | October 1, 2013 -- The deaths of more than 74 000 children from tuberculosis (TB) could be prevented each year through measures outlined in the first ever action plan developed specifically on TB and children.

The *Roadmap for Childhood TB: Toward Zero Deaths*, launched today by global TB leaders<sup>1</sup> in Washington D.C., estimates that US\$120 million per year could have a major impact on saving tens of thousands of children's lives from TB, including among children infected with both TB and HIV.

Every day, more than 200 children under the age of 15 die needlessly from TB – a disease that is preventable and curable. The World Health Organization (WHO) estimates that as many as 1 in 10 TB cases globally (six to 10 per cent of all TB cases) are among this age group, but that the number could be even higher because many children are simply undiagnosed. The new roadmap builds on the latest knowledge of the disease and identifies clear actions to prevent these child deaths.

“Any child who dies from TB is one child too many,” says Dr Mario Raviglione, Director, Global Tuberculosis Programme at WHO. “TB is preventable and treatable, and this roadmap focuses on immediate actions governments and partners can take to stop children dying.”

The launch of the first roadmap on TB and children follows increasing awareness on the urgent need to address the issue. Under the child survival movement's banner of *A Promise Renewed*, more than 175 countries signed a pledge in June 2012, vowing to redouble efforts to stop children from dying of preventable diseases, including tuberculosis.

### **A small price tag to halt a global disease**

The US\$120 million a year in new funding for addressing TB in children from governments and donors includes US\$40 million for HIV antiretroviral therapy and preventive therapy (to prevent active TB disease) for children co-infected with TB and HIV.

The funds will also go towards improving detection, developing better medicines for children and integrating TB treatment into existing maternal and child health programmes. Getting more paediatric health professionals to actively screen for TB with better tools, i.e. drugs, diagnostics and vaccines, will help capture the full scope of the epidemic and reach more children with life-saving treatment sooner.

“Far too many children with tuberculosis are not getting the treatment they need,” says Nicholas Alipui, Director of Programmes for UNICEF. “Most of these children live in the poorest, most vulnerable households. It is wrong that any children should die for want of a

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<sup>1</sup> World Health Organization (WHO), Stop TB Partnership, the International Union Against Tuberculosis and Lung Disease (The Union), UNICEF, U.S. Centers for Disease Control and Prevention (CDC), United States Agency for International Development (USAID) and Treatment Action Group (TAG).

simple, affordable cure, especially where there are community-based options to deliver life-saving interventions.”

### **Ten actions to save young lives**

The *Roadmap for Childhood TB: Toward Zero Deaths* recommends ten actions at national and global levels:

1. Include the needs of children and adolescents in research, policy development and clinical practices.
2. Collect and report better data, including preventive measures.
3. Develop training and reference materials on childhood TB for health workers.
4. Foster local expertise and leadership among child health workers at all levels of health systems.
5. Use critical intervention strategies, such as intensive case finding, contact tracing and preventive therapy; implement policies enabling early diagnosis; and ensure there is an uninterrupted supply of high-quality anti-TB medicines for children.
6. Engage key stakeholders and establish effective communication and collaboration between the health sector and other sectors that address the social determinants of health and access to care.
7. Develop integrated family- and community-centred strategies to provide comprehensive and effective services at the community level.
8. Address research gaps in the following areas: epidemiology, fundamental research, the development of new tools (such as diagnostics, medicines and vaccines); and address gaps in operational research and research looking at health systems and services.
9. Close all funding gaps for childhood TB.
10. Form coalitions and partnerships to study and evaluate the best strategies for preventing and managing childhood TB, and for improving tools used for diagnosis and treatment.

“If a small child can summon the bravery to complete a six-month TB treatment, the global community must be similarly brave in its ambitions to defeat the epidemic,” says Dr Lucica Ditiu, Executive Secretary of the Stop TB Partnership. “To get to zero TB deaths, we must focus on the most vulnerable groups and children are the most vulnerable of all. The steps outlined in this roadmap are simple and low-cost. We owe it to the children of the world to put this plan into action.”

### **Bringing childhood TB into the mainstream**

As more attention has focused on the need to address child TB, experts have sought to broaden the net and involve organizations and agencies beyond the national TB programmes that have contact with children. As much as possible, the roadmap recommends that TB services for children be mainstreamed into existing children’s health services, and more responsibility and accountability be given to primary care providers.

“By scaling up existing tools and investing in improved approaches for the future, we can turn the tide on this hidden epidemic. But we must put these tools in the hands of front-line health care workers and use every opportunity to identify children at risk for TB,” says Dr Tom Kenyon, Director of the Center for Global Health at the U.S. Centers for Disease Control and Prevention. “We must ensure systems are in place to serve children through existing health, community, and child-centred services.”

Moving to this type of family-centred or community-centred approach, however, will require effective collaboration and joint planning among TB control programmes, maternal and child health services, and HIV services.

"If we can shift TB diagnosis and treatment out of specialised programmes and into other existing maternal and child health activities, we automatically gain reach and scale," says José Luis Castro, Interim Executive Director of the International Union Against Tuberculosis and Lung Disease. "Combining that scale with investment in tools and medicine would save tens of thousands of lives."

"By integrating critical child TB interventions into community health services, we will contribute to the global goal of ending preventable child deaths," says Katie Taylor, Deputy Assistant Administrator, Bureau for Global Health, USAID. "The next step will require investment and engagement at all levels, including families, frontline health workers, and community leaders. The Roadmap equips all involved with the tools needed to fight childhood TB. As a result, children will receive the quality and comprehensive care they deserve close to home."

"Current diagnostics, toxic drugs and inadequate drug formulations are insufficient to respond to the needs of children with TB," says Colleen Daniels, Director TB/HIV at Treatment Action Group (TAG). "New tools will be a crucial part of addressing TB in children and current investments are minimal at best. Much more investment and commitment to childhood TB is urgently needed now".

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To download the roadmap please go to: [www.who.int/tb/challenges/children](http://www.who.int/tb/challenges/children)

**About the Global TB Programme, World Health Organization ([www.who.int/tb](http://www.who.int/tb)):**

The Global TB Programme at the World Health Organization guides global action for a world free of TB by advancing universal access to TB prevention, care and control; framing the response to threats through norms, standards and strategy; technically supporting Member States; monitoring the burden and response; and promoting innovation. WHO is the directing and coordinating authority for health within the United Nations system.

**About the International Union Against Tuberculosis and Lung Disease ([www.theunion.org](http://www.theunion.org)):**

The mission of the International Union Against Tuberculosis and Lung Disease (The Union) is to bring innovation, expertise, solutions and support to address health challenges in low- and middle-income populations. With nearly 15,000 members and subscribers from 150 countries, The Union has its headquarters in Paris and offices in the Africa, Asia Pacific, Europe, Latin America, North America and South-East Asia regions. Its scientific departments focus on tuberculosis and HIV, lung health and non-communicable diseases, tobacco control and research.

**About the Stop TB Partnership ([www.stoptb.org](http://www.stoptb.org)):**

The Stop TB Partnership is leading the way to a world without tuberculosis, a disease that is curable but still kills three people every minute. Our partners are a collective force that is transforming the fight against TB in more than 100 countries. They include international and technical organizations, government programmes, research and funding agencies, foundations, NGOs, civil society and community groups and the private sector.

**About the United States Agency for International Development ([www.usaid.gov](http://www.usaid.gov)):**

The American people, through the US Agency for International Development (USAID), have provided economic and social development, as well as humanitarian assistance, worldwide for more than 50 years. USAID's programs in global health represent the commitment and determination of the US government to partner with countries to prevent suffering, save lives, and create a brighter future for families throughout the world. USAID's Bureau for Global Health is contributing to President Obama's goal of eliminating extreme poverty by working to end preventable child deaths and realize an AIDS-free generation.

**About U.S. Centers for Disease Control and Prevention ([www.cdc.gov/tb](http://www.cdc.gov/tb)):**

The Centers for Disease Control and Prevention (CDC) protects people's health and safety by preventing and controlling diseases and injuries; enhances health decisions by providing credible information on critical health issues; and promotes healthy living through strong partnerships with local, national, and international organizations.

**About UNICEF and A Promise Renewed (<http://www.apromiserenewed.org/>):**

UNICEF works in more than 190 countries and territories to help children survive and thrive, from early childhood through adolescence. The world's largest provider of vaccines for developing countries, UNICEF supports child

health and nutrition, good water and sanitation, quality basic education for all boys and girls, and the protection of children from violence, exploitation, and AIDS. UNICEF is hosting the secretariat of A Promise Renewed, a global movement that seeks through action and advocacy to accelerate reductions in preventable maternal, newborn and child deaths. The movement emerged from the Child Survival Call to Action, a high-level forum convened in June 2012 by the Governments of Ethiopia, India and the United States, in collaboration with UNICEF, to examine ways to spur progress on child survival and advance the goals of *Every Woman Every Child*, a strategy launched by United Nations Secretary-General Ban Ki-moon to mobilize and intensify global action to improve the health of women and children everywhere. Over 175 governments have signed a pledge vowing to redouble efforts to stop women and children from dying of preventable causes. Hundreds of civil society organizations, including Save the Children, have signed their own pledges of support for this global effort.

**About the Treatment Action Group ([www.treatmentactiongroup.com](http://www.treatmentactiongroup.com)):**

Treatment Action Group is an independent AIDS research and policy think tank fighting for better treatment, a vaccine, and a cure for AIDS. TAG works to ensure that all people with HIV receive lifesaving treatment, care, and information. We are science-based treatment activists working to expand and accelerate vital research and effective community engagement with research and policy institutions. TAG catalyzes open collective action by all affected communities, scientists, and policy makers to end AIDS.

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