



Treatment Action Group

TO: Jon Lidén, Project Coordinator, Global Plan to Stop TB 2016–2020 Development
CC: Paula Fujiwara, Chair, Global Plan Development Task Force
Aaron Oxley, Global Advocacy Specialist, Global Plan Development Task Force
Cherise Scott, Chair, STBP New Tools Working Group
Jennifer Wooley, Chair, STBP New Vaccines Working Group

March 2, 2015

Subject: Inclusion of pediatric-specific targets in the *Global Plan to Stop TB, 2016–2020*

Dear Mr. Lidén and members of the Global Plan Development Task Force,

We appreciate the ongoing work of the Stop TB Partnership (STBP) New Tools and New Vaccines Working Groups and the Global Plan Development Task Force to put together the *Global Plan to Stop TB, 2016–2020*. The *Global Plan* is a critical tool for advocacy and for shaping the development of global and national post-2015 tuberculosis (TB) agendas. We urge you to include pediatric-specific program interventions and research and development (R&D) targets in the *Global Plan* to help end the neglect of children in TB programs and research.

An estimated 1 million children develop active TB annually—including 32,000 who develop multidrug-resistant TB—and require treatment. Millions more children exposed to adult contacts require preventive therapy. While international guidelines exist for contact tracing and preventive therapy for children, many settings lack necessary country-level policies, and even where these policies are in place, pediatric TB interventions are not a priority and are not implemented. In order for the 2035 targets set forth in the post-2015 *End TB Strategy* to be realized, we must address TB infection and disease in children. It is imperative that the *Global Plan* include interventions—and funding targets to support them—for pediatric populations in the environment-specific packages it recommends for country scale-up.

Neglect and underfunding of pediatric TB have left major gaps in R&D. As a result, we do not have a vaccine that has lasting efficacy, a sensitive, non-sputum based point-of-care test, or appropriately dosed pediatric medications. We ask that the *Global Plan* include pediatric-specific R&D investment targets and outline actions to be taken between 2016 and 2020 to quantify the research funding needed to close the gap for developing tools appropriate for children.

The Global Plan serves as a call to action on which broader conversations on country program initiatives and R&D funding will be based. The inclusion of pediatric-specific targets is necessary to ending the longstanding neglect of children in TB programs and research.

Please direct your response and queries to Lindsay McKenna at the following address:
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Respectfully submitted,
Treatment Action Group (TAG)