

The background features a series of concentric circles in light gray, some solid and some dashed, creating a ripple effect. A large, solid green oval is centered on the page, containing the main text. A thick, dark gray curved line sweeps across the bottom left, partially overlapping the green oval.

# TB, HIV and Malaria Country Dialogues for National Strategic Plan and Priorities for 2021-2023

WHO/UNAIDS

14<sup>th</sup> -15<sup>th</sup> November, 2019

Sule Shangri-la Hotel, Yangon

# Context



**Primary Health Care** is at the center for Universal Health Coverage- Astana Declaration 2018



**Universal Health Coverage-** no one left behind, is central to achieving Sustainable Development Goal



**Integrated service delivery** through Primary Health Care approach is the main mantra to achieve Universal Health Coverage in Myanmar with diverse geo-political situation



18,000 malaria volunteers have been transformed to Integrated Community malaria Volunteer (now caters malaria, TB, HIV, Dengue, LF and Leprosy)



Numbers of peer educators and number of volunteers work for HIV and TB respectively

# Context



TB, HIV and Malaria programmes are developing the National Strategic Plans for 2021-2025



Programmes are mobilizing resources to implement these plans



Global Fund is the main donor that is funding these programmes through series of grants



Next cycle of GFATM grant is for 2021-2023



The GFATM application is due 23 March 2020. TB-HIV joint concept note.

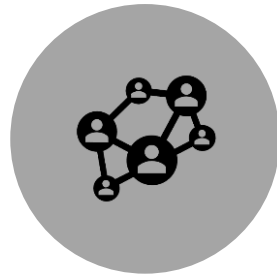


Country dialogues are essential to the funding application development

# Rationale for country dialogue



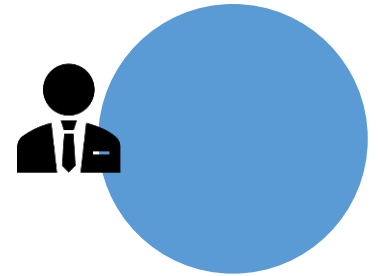
GLOBAL FUND  
INCREASES THE  
FOCUS OF ITS  
INVESTMENTS ON  
**HIGH-IMPACT  
INTERVENTIONS AND  
SETTINGS**



**CLOSER  
ENGAGEMENT** WITH  
COMMUNITIES IS  
ESSENTIAL TO  
ACHIEVING THAT  
GOAL



**WIDER AND MORE INCLUSIVE  
PROCESSES** OF COUNTRY  
DIALOGUE ARE DETERMINING  
NATIONAL PRIORITIES FOR  
FUNDING ON HEALTH, AND ARE  
MAKING PROGRAMS MORE  
EFFECTIVE



**DIVERSE  
GROUPS**



“ Civil society and community-based organizations – especially those that represent people living with or affected by disease – and key populations have a crucial role to play in the design, delivery, monitoring, and governance of HIV, TB and malaria programs. Since it was established in 2002, the Global Fund has been committed to engaging communities, strengthening community-based responses and promoting gender equality and human rights in the programs that it supports. ”

Eg. At a regional level, stronger civil society engagement in governance of the Global Fund-supported Regional Artemisinin Initiative in the **Greater Mekong region** is helping to ensure that malaria interventions reach the most vulnerable people in the most remote communities.

# Communities

- **Involve communities** in each steps of program management
- Obtain **acceptance and participation** of communities on disease control program activities
- Ensure **effective collaboration** with communities in implementing disease control activities:
  - Case finding
  - Referral for diagnostic
  - Treatment follow up
  - Public awareness
  - Advocacy for implementation of essential services
  - Quality assurance

# Private sectors

1

Ensure only good-quality medicines are available in private providers

2

Ensure only good-quality diagnostic testing is available in private providers

3

Increase availability and affordability of quality-assured medicines

4

Increase availability and affordability of quality-assured diagnostic services

5

Ensure case management by private providers in line with national and international standards

6

Improve consumer knowledge and awareness of appropriate treatment seeking, diagnosis, medicine choice and adherence

7

Participate in TB, HIV and malaria surveillance by reporting case to public sector

## Streamlining Human right and gender in programmes

- Global Fund is committed to support programming that advances human rights and gender equality, as captured in 2017-22 Strategic Framework.
- Strategic Objective 3 (“Respect and promote human rights and gender equality”) has the following sub-objectives:
  - Scale up programs to **support women and girls**.
  - Invest to **reduce gender and age-related disparities** in health.
  - Introduce and scale up programs that **remove human rights barriers to accessing** HIV, TB and malaria services
  - Support meaningful participation **of key and vulnerable populations** and networks in Global Fund-related processes.
  - Integrate **human rights considerations** throughout the grant cycle and in policies and policy-making processes.



## Objectives

### Consult

Consult with TB, HIV, Malaria stakeholders on the National Strategic Plans for TB, HIV and Malaria

### Consult

Consult priority interventions and activities to be implemented through GF sources for 2021-2023 through the support of civil society organizations , private sectors

### Identify

Identify list of priority activities for TB, HIV, and Malaria for 2021-2023

### Address

Address human rights and gender issues in TB, HIV and Malaria interventions and activities

### Inform

Inform the stakeholders on GF funding opportunities for 2021-2023 and processes and timelines for application

# Expected Outcomes

- **GF funding opportunities for 2021-2023 and timelines explained**
- **Three disease National Strategic Plans and priority activities presented and discussed**
- **Gather and consolidate the inputs from various stakeholders concerned in the implementation of the National Strategic Plans**

# Agenda items

- **Joint session: Presentation of the National Strategic Plans and priorities (2021-2025)- TB, HIV and Malaria PMs (Myanmar Ballroom, level 2)**
- **Global Fund application process and requirements- MHSCC**
- **Break out sessions (14-15 Nov 2019):**
  - **TB- Ballroom 1, level 2**
  - **HIV- Bago room, level 1**
  - **Malaria – Ballroom 2, level 2**
- **Joint session (15 Nov): Conclusions and way forward- TB, HIV, Malaria (Myanmar Ballroom, level 2)**



Thank you

