OVERVIEW

Tuberculosis (TB) remains one of the leading contributors to deaths from infectious diseases worldwide and was only recently overtaken by COVID-19. Current estimates of people affected by active TB disease highlight major gaps in case finding and diagnosis. Of the estimated 10.6 million people to have developed TB in 2021, only 6.4 million were diagnosed and reported.¹

The growing number of people affected by TB disease directly impacts the health of the children, mothers, and families that we serve. People living with HIV are not only more likely to develop TB infection, they are also more likely to die as a result. All of the countries where we work (except Côte d’Ivoire) are included on the World Health Organization’s list of high TB burden countries.² Even more concerningly, in the majority of those countries (eight of 12), children represent less than 10% of all TB cases notified. This demonstrates that cases of TB among children and adolescents, including children and adolescents living with HIV (CALHIV), are missed in EGPAF-supported countries.

National TB programs and TB research and development initiatives have historically suffered from chronic underfunding, making it difficult for countries with high burdens of TB to introduce the important advances in diagnostics, treatment, and service delivery models that have been made in the last 10-15 years. However, recent global initiatives — like the Global Plan to Stop TB 2023-2030 — present an opportunity to take advantage of growing stakeholder awareness and resource allocation.³

This strategy bolsters EGPAF’s role as a first responder to TB for children and adolescents, elevating the Foundation’s work to address critical gaps in services with tactical partnerships while innovating for the most cost-effective, sustainable strategies.
STRATEGIC OBJECTIVES

EGPAF aims to be a lead implementer, innovator, and advocate in the provision of TB services for children and adolescents (ages 0-19 years), ensuring these populations benefit from high-quality and integrated TB care. The strategy includes objectives that focus on strengthening the delivery of integrated TB and HIV care; providing technical assistance; and implementing programs for children and adolescents and CALHIV.

1. Optimize the integration of TB and HIV services and continue building and consolidating EGPAF’s role as a program implementer and technical assistance provider by strategically leveraging current awards and grants to deliver high-quality, TB services for all children and adolescents, especially CALHIV.

2. Generate and disseminate high-quality evidence on improved and scalable solutions for the integration of TB prevention, diagnosis, and treatment in CALHIV and prepare the ground for evidence generation on child and adolescent TB across all populations.

3. Advocate locally, nationally, regionally, and globally for the resources, policies, and leadership needed to support comprehensive care for children and adolescents, including TB-specific interventions.

4. Identify and build partnerships with key stakeholders to raise awareness and ensure stakeholders are motivated to address the challenge of TB for children and adolescents.
OPERATIONALIZING THE STRATEGY

A time-bound operational plan will be developed to guide the implementation of this strategy. Representatives from relevant teams across EGPAF will contribute to the development and implementation of those plans. EGPAF’s programs, projects, and research teams will use this strategy to advance their contributions to goals and objectives where relevant and possible.

INTERNAL AND EXTERNAL TECHNICAL LEADERSHIP AND COLLABORATION

INTERNAL

› TB Technical Working Group
› Pediatric HIV CoP

EXTERNAL

› TB/HIV Rome Action Plan
› Stop TB Partnership’s Child and Adolescent TB Working Group
› World Health Organization
› Global TB Caucus
› African Union Commission
ENDNOTES

1  WHO Global TB Report 2022. Available at: https://apps.who.int/iris/rest/bitstreams/1474924/retrieve


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