THE WHO GLOBAL TASK FORCE ON TB IMPACT MEASUREMENT

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WHO ARE WE?

In June 2006, the Global TB Programme (GTB) in the World Health Organization (WHO) established a Global Task Force on TB Impact Measurement, with the TB monitoring and evaluation (TME) team in GTB acting as the secretariat.

The Task Force includes a wide range of experts in TB epidemiology, representatives from major technical and financial partners, development agencies and representatives from countries with a high burden of TB. There have been five full Task Force meetings since its inception.
WHAT IS TB IMPACT MEASUREMENT?

The aim is to measure the burden of disease caused by TB, i.e. incidence, prevalence and mortality, and their trends. These impact indicators are used to measure progress towards 2015 global targets set within the Millennium Development Goals (MDGs) and by the Stop TB Partnership (STP). The MDG target is that TB incidence should be falling by 2015 (MDG target 6c); the STP targets are that TB mortality and prevalence rates should be halved by 2015 compared with a baseline of 1990.

A TB impact measurement policy paper (2009) sets out recommendations agreed by the Task Force that were approved by the WHO Strategic and Technical Advisory Group for TB (STAG-TB).
WHAT IS OUR MANDATE?

The Task Force’s mandate is to:

1) Produce a robust, rigorous and widely endorsed assessment of whether the 2015 global targets set for TB control are achieved at global, regional and country levels.

2) Regularly report on progress towards these targets in the years leading up to 2015.

3) Help build and strengthen national capacity in monitoring and evaluation.
WHAT ARE OUR STRATEGIC AREAS OF WORK (2007—2015)?

1. METHODS TO ESTIMATE DISEASE BURDEN

Periodic review and updating of methods used to translate surveillance and survey data into estimates of TB incidence, prevalence and mortality. The latest methods are documented in WHO’s annual global tuberculosis report (2014).

9.0 million incident cases of TB (2013)
11 million prevalent TB cases (2013)
1.5 million TB Deaths (2013)

The Global Tuberculosis Report is published annually; it provides the latest data and analysis about the TB epidemic and progress in TB care and control at global, regional and country levels.

A global consultation to review and update methods for producing estimates of TB disease burden, and an associated strategy for using these methods to assess whether 2015 global TB targets are achieved at global, regional and country levels, will be held in 2015.
WHAT ARE OUR STRATEGIC AREAS OF WORK (2007—2015)?

2. NATIONAL TB PREVALENCE SURVEYS

National population-based surveys of the prevalence of TB disease will take place in 20 global focus countries during 2008—2015, following guidance in the Tuberculosis prevalence surveys handbook (2nd edition: the "lime book") developed by the Task Force in 2010.

Provisional results from The Gambia, Nigeria, Rwanda, Tanzania and Thailand were released in 2013, and are expected from Ghana, Indonesia, Malawi, Sudan and Zambia in 2014.

Numerous country missions and workshops have been held to facilitate inter-country collaboration and bolster technical capacity to design and implement high-quality surveys and to analyse and report results according to best-practice standards, especially through "AA collaboration" (Asia—Asia, Asia—Africa, Africa—Africa).
WHAT ARE OUR STRATEGIC AREAS OF WORK (2007—2015)?

3. STRENGTHENING ROUTINE SURVEILLANCE

The ultimate goal is the direct measurement of TB cases and deaths from TB notification and vital registration systems, respectively.

The TB checklist of standards and benchmarks for TB surveillance and vital registration systems and its accompanying user guide can be used to assess a national surveillance system's ability to accurately measure TB cases and deaths, and identify gaps in national surveillance systems that need to be addressed. These assessments are being linked to national TB control programme reviews and the development of “Monitoring and Evaluation investment plans”.

Between January 2014 to July 2014, countries that completed the checklist include Afghanistan, Bangladesh, Côte d’Ivoire, Egypt, Ethiopia, Ghana, Indonesia, Kenya, Mozambique, Nigeria, Pakistan, Philippines, Rwanda, Saudi Arabia, Swaziland, Tanzania, Thailand, Uganda, Viet Nam, Zambia and Zimbabwe.
WHAT ARE OUR STRATEGIC AREAS OF WORK (2007—2015)?

3. STRENGTHENING ROUTINE SURVEILLANCE (CONT.)

Country health information systems provide a rich source of data on the burden of disease caused by TB and the effectiveness of programmatic efforts to reduce this burden, both of which are crucial for public health action. However, the available data are often underused, or not used at all. Further understanding of trends will assist with assessment of programme performance and impact.

Understanding and using tuberculosis data is a new handbook that provides practical advice for national tuberculosis programmes, especially monitoring and evaluation units, to improve the understanding and use of the data that they collect. It sets out recommended approaches to analysis of surveillance data relevant to TB, in particular TB notification data, data from surveillance of anti-TB drug resistance, and mortality data compiled in national vital registration systems. It starts from the most basic kinds of analyses that can be done, and progresses to more challenging topics such as the estimation of disease burden using multiple sources of evidence, including data from special surveys.
WHAT ARE OUR STRATEGIC AREAS OF WORK (2007—2015)?

3. STRENGTHENING ROUTINE SURVEILLANCE (CONT.)

The *Electronic recording and reporting for tuberculosis care and control* guide provides practical advice for countries planning to introduce electronic recording and reporting systems, or to enhance existing systems. Only by introducing electronic recording and ensuring high data quality in these systems will the utility of surveillance data be maximized.

Estimates of TB incidence rely on the systematic analysis of case notification and programmatic data combined with expert opinion about the number of cases not reported and not diagnosed. The *Assessing tuberculosis under-reporting through inventory studies* guide, published in 2012, describes and explains how to design, implement and analyse inventory studies to measure TB under-reporting. Inventory studies are now being promoted in selected countries linked to the application of the TB surveillance checklist.