On 19-20 May, 2022, Stop TB Partnership held its 35th Board meeting in hybrid format – with some Board members gathering in Geneva, Switzerland, while others joined via Zoom.

Over the two days of the intensive meeting, the Board reviewed a wide range of issues and approved a number of Decision Points. Thematically, the Decision Points followed the structure of the meeting. Below is the summary of the most relevant Decision Points.

At the Board meeting, the Community Delegation was represented by Board Member Peter Ng’ola Owiti, Alternate Board Member Rhea Lobo, Constituency Focal Point Timur Abdullaev, as well as several Delegation members. The other Board Member (Carol Nawina) and other Delegation members were connecting by Zoom.

Community Representatives have made a number of important comments and suggestions, which were reflected in the decision points.

**Opening session (DP 35-1)**

The Board welcomed Mr. Austin Obiefuna from Nigeria, Executive Director of Afro Global Alliance Ghana – and a former Board member representing Developing Country NGO Constituency – as the new Vice-Chair of the Board.

The Board noted the progress and appreciated the efforts of the Secretariat to address the decision points from the previous Board meeting. It also appreciated the Executive Director Report and acknowledged the entire Secretariat for the commendable work since last Board meeting.

**TB Response Status and Prospect (DP 35-2)**

The Board endorsed of the draft of the Global Plan to End TB 2023-2030 and requested Secretariat to proceed to its launch and dissemination. The Board also requested Secretariat to develop advocacy briefs and investment cases for specific thematic areas derived from the Global Plan, to enable targeted advocacy and resource mobilization efforts.

The Board strongly affirmed the role of the Stop TB Partnership to robustly engage in the 2023 UNHLM on TB process. This includes:

* working with the WHO to engage the Office of the President of the General Assembly to ensure that the preparatory work for the UNHLM starts early;
* establishment a UNHLM on TB Coordination Group that includes civil society and community representatives to ensure a strategic and coordinated approach and to develop a set of key asks following an inclusive process of consultations with all stakeholders;
* support to civil society and community networks to develop, launch and advocate around the second edition of *A Deadly Divide: TB Commitments vs. TB Realities*;
* support the establishment and operation of the civil society advisory panel to promote active informed and meaningful engagement of TB affected communities and broader civil society in the 2023 UNHLM on TB process and outcomes;
* and advocating that the 2023 UNHLM on TB is held on the second day of the 2023 UNGA General Debate (Tuesday, 26 September 2023) in order to ensure the highest levels of political participation.

**Sources of TB Funding (DP 35-3)**

The Board noted with disappointment that the multiple sessions and discussions on TB funding gap over last four years have had limited impact. Finances available for TB care and prevention, as well as for TB research has not increased, while the resource needs estimates have gone up dramatically, resulting in an even wider funding gap.

The Board also noted the unfortunate November 2021 Global Fund Board decision to continue to provide the least proportion of its resources to TB, even though TB kills more people than HIV and malaria together, and appealed to the Global Fund to ensure that additional funding for TB, beyond country allocations, is made available using different levers, such as catalytic funding and portfolio optimization. The Board noted that the joint WHO position statement in November 2021 requested the disease split to allocate at least 21% to TB, while the Community and Developing Country NGO Delegations continue to demand 33% of the disease split to go to TB.

The Board appealed to all high TB burden country governments to increase their domestic budgets for TB.

**Innovations for TB Response (DP 35-4)**

The Board recommended that the Secretariat plays a strengthened advocacy and coordination role with countries, technical partners and donor organizations to ensure adoption of latest innovations as well as their wide and sustainable scale-up.

The Board also recognized the importance of having new innovative funding mechanisms for TB R&D and urged countries and stakeholders to bridge the chronic gap in TB R&D funding, including for vaccines, diagnostics and medicines.

**TB & G20 Presidencies (DP 35-5)**

G20 countries represent 50% of the global TB burden and 60% of the MDR-TB burden, underscoring the need for G20 to pay special attention to the disease, and in this regard the Board congratulated the Minister of Health of Indonesia and his team for their leadership and vision, which resulted in the high profile of health on the G20 Presidency agenda and the special place TB in it. The Board welcomed the current draft of the Call-to-Action on Financing for TB Response developed at the first G20 Health Working Group Side Event on TB (held in March 2022) and encouraged all partners to engage and support the process of finalization of the Call-to-Action so that it includes several asks as presented during the TB side event:

* Increase the domestic resources for TB in G20 TB high-burden countries;
* Position and maintain TB as part of the pandemic preparedness and response efforts
* Support the replenishment of the Global Fund
* Support the UNHLM on TB 2023
* Address accelerated TB financing for TB R&D through development and roll out of a TB vaccine, digital technology and AI, and other innovative tools;
* Continue TB financing discussions in future G20 Presidencies through creation of a Task Force on TB financing to support the G20

**Country-level Advocacy (DP 35-6)**

The Board recognized the significant achievements of country-level Stop TB Partnership national platforms and partners and underlined the need for multi-year funding arrangements for these platforms. The Board agreed, where possible, to engage with and elevate national-level advocacy initiatives – participating in high-level events, supporting media engagement efforts and supporting national partnerships and platforms and civil society representatives to be meaningfully engages and effective in national level decision making bodies, including CCMs. The Board recommended the Secretariat to facilitate capacity building, coordination, engagement and participation of country-level Stop TB Partnerships, Challenge Facility for Civil Society (CFCS) grantees and TB survivors in strategic national and regional forums (such as CCMs) as well as accountability initiatives, including community-led monitoring transforming data into advocacy action.

The Board recognized the unique role of CFCS in mobilizing communities, developing capacity, building evidence, strengthening demand, enhancing accountability and supporting national level advocacy movements and applauded the successful CFCS Round 11, which will provide USD 9 million in grants with the significant support of USAID and the Global Fund. However, the Board emphasized that only 22% of all submitted applications are able to be funded with the resources available, and that donor support is needed to continue to close this national TB community advocacy funding gap and to support technical assistance and other initiatives to increase the technical capacity of civil society and community organizations.

The Board highlighted the increasing strength of the Stop TB Partnership Board’s three civil society Delegations, especially their commitment to develop the second edition of the “Deadly Divide” report to inform discussions prior to the UNHLM on TB in 2023, and requested donors to secure ongoing investment and support for these Delegations.

The Board noted the release of the updated TB Language Guide “Words Matter” and recommended its adoption, adaptation and use by all TB partners globally, regionally and at the country level. It also appreciated the publication of evidence from CRG assessments in 20 countries, which strengthens the evidence-based resources needed for the TB response, and looks forward to the continued progress in developing national costed TB CRG Action Plans and a report with further details in 2023.

Finally, the Board acknowledged the work of the Community and Developing Country NGO Delegations on the TB33% Campaign and requested Secretariat to support country-level efforts to sensitize stakeholders on the need for increased funding for TB.

**Supporting People with TB in Countries Affected by Conflict (DP 35-7)**

The Board extended its solidarity to all people affected by war and conflict, and especially those affected by TB in these complex settings, and committed to stand in solidarity with the people of Ukraine, who are currently suffering due to the war. The Board committed to support Secretariat efforts to ensure that Ukrainian people with TB, internally displaced or refugees in neighboring countries, have access to TB diagnosis, treatment and care. It also requested that the Secretariat engage in a review of the processes undertaken to respond to the challenges presented by the conflict in Ukraine to inform good working practice for rapid response in complex settings such as climate related natural disasters and other unpredictable events that disrupt the programming that the Partnership supports.

**Towards an Inclusive and Thriving Secretariat (DP 35-8)**

The Board noted the progress achieved by the Secretariat in addressing each action point from the *Action Plan in Response to Independent Review of Allegations of Racism and Misconduct at the Stop TB Partnership* and supported the allocation of financial resources to ensure proper implementation of the Action Plan.

The Board reaffirmed its commitment to examining its leadership role on diversity, equity and inclusion across its structures, processes and behaviors, and requested a training of Board members on inclusive leadership before the next Board meeting.

The Board thanked UNOPS team for the update regarding the allegations related to UNOPS Sustainable Infrastructure Investment and Innovation Initiative (https://www.nytimes.com/2022/05/07/world/americas/un-loan-project-services.html) and the ongoing investigation and looks forward to receiving a presentation of the outcomes and any potential strengthened oversight changes required as a result. It also acknowledged a letter received from UNOPS, which noted that:

* The funds associated with S3i come from a dedicated reserve;
* As a hosted partnership, the Stop TB Partnership is a separate business unit within UNOPS and is managed as such;
* The Stop TB Partnership strategy and overarching objectives are set by its Board
* The Executive Director is responsible and accountable for operations, with guidance from the UNOPS Geneva office, the Stop TB Partnership Board and its associated committees;
* Funding received for Stop TB Partnership projects and operations is ring fenced for Stop TB Partnership and is completely independent from other UNOPS business units;
* Stop TB Partnership is regularly subjected to independent audits, the results of which are reported to the Board;
* At no stage have Stop TB Partnership’s funds been at any risk as a result of the issues at S3i.

The Board approved the revised Standard Operating Procedures and asked the Secretariat to review and update the document as needed. It also endorsed the Executive Committee proposal on the process for the Executive Director performance evaluation, including the formation of a panel, which will carry out the evaluation in Q3 2022.

**Board Strategy Review (DP 35-9)**

The Board acknowledged the work done to review the strategic vision, role and governance of the Board (*Board Strategy Review*) and noted that it was undertaken in response to Action Point 10 of the *Action Plan in Response to Independent Review of Allegations of Racism and Misconduct at the Stop TB Partnership*. The Board formally adopted the recommendations of the Executive Committee based on the Board Strategy Review, including:

* The future strategic vision for the Partnership;
* Aspiration for how the Board can advance, implement and model a more diverse, equitable and inclusive TB response;
* Changes to the role and composition of the Board that are indicative of a strengthened and visible commitment to leadership by individuals affected by TB by dedicating at least 50% of seats to this constituency while maintaining the current size of the Board.

The Board requested the Secretariat to align its Operational Strategy with the strategic recommendations of the Board Strategy Review and to amend the Board Governance Manual accordingly.

**Closing (DP 35-10)**

The Board appreciated the offer by the Chair of the Board and the Government of India to host the 36th Board meeting around World TB Day in 2023 and agreed to hold it in New Delhi. The decision on preparations, exact dates and modality (in-person, virtual or hybrid) of the next Board meeting is to be reached by the end of July 2022.