

# Catalytic Framework to End AIDS, TB and Eliminate Malaria in Africa by 2030

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## Introduction

The Catalytic Framework to End AIDS, TB and Eliminate Malaria in Africa by 2030 provides an overarching policy framework to respond effectively to the three biggest diseases on the continent. The objective of the Framework is to intensify the implementation of the 2013 Abuja Declaration commitments to end AIDS, TB and Malaria as public health threats through building Africa-wide consensus on the key strategic actions within the context of the existing targets and milestones. It builds on progress made and challenges remaining in implementing the Abuja commitments since 2000 as well as the implementation of the African Union Roadmap for Shared Responsibility and Global Solidarity for AIDS, TB and Malaria in Africa.

The Catalytic Framework provides a business model for investing for impact. The framework emphasises the need for each country to place a specific focus on increasing domestic health financing. It underscores the need to ensure that available resources should be invested and targeted where the disease burden is highest. The framework focusses on three strategic investment areas, each with clear catalytic actions. These areas are health systems strengthening, generation and use of evidence for policy and programme interventions and advocacy and capacity building. The framework provides clear targets and milestones for ending the three diseases by 2030. The Catalytic Framework is aligned with both the health related and broader transformative goals and targets in Africa's long term development strategy, Agenda 2063 and the Sustainable Development Goals.

## VISION



**Contribute to an Africa free of AIDS, tuberculosis and malaria**

## OVERALL GOAL



**To end AIDS and tuberculosis and eliminate malaria in Africa by 2030**

## OBJECTIVES



The following are the key objectives of the Catalytic Framework:

- **To eliminate malaria incidence and mortality, prevent its transmission and re-establishment in all countries by 2030;**
- **To end the AIDS as a public health threat by 2030;**
- **To end TB deaths and cases by 2030.**

## Business model – Investing for Impact

Within each country investing for impact should place a specific focus on increasing domestic health financing with a specific focus on these three major disease burdens in Africa. To invest for impact we should ensure that available resources are targeted where the disease burden is highest. Specifically investing for impact on AIDS, TB and Malaria consists of three strategic investment areas which are health systems strengthening, generation and use of evidence for policy and programme interventions and Advocacy and capacity building. Each investment area has clear catalytic actions.

<b>1</b> ▼	<b>STRATEGIC INVESTMENT AREA ONE:</b>
	<b>Health Systems Strengthening</b>
<b>Catalytic actions</b>	
<p>Prioritise and scale up the following elements of health systems to catalyse actions to end the three diseases:</p> <ul style="list-style-type: none"> <li>• <b>Diversified and Innovative Domestic Financing for Health including putting in place clear efficiency gains measures;</b></li> <li>• <b>Health Management Information Systems (HMIS) and surveillance through data quality monitoring and improvement;</b></li> <li>• <b>Procurement and supply management systems audit and strengthening;</b></li> <li>• <b>Strategic &amp; operational planning strengthening at national/district levels;</b></li> <li>• <b>Human resource mobilisation, management, absorptive capacity monitoring and improvement;</b></li> <li>• <b>Provision of appropriate technologies and equipment;</b></li> <li>• <b>Health workforce training, deployment and retention.</b></li> </ul>	

<b>2</b> ▼	<b>STRATEGIC INVESTMENT AREA TWO:</b>
	<b>Generation and use of evidence for policy and programme interventions</b>
<b>Catalytic actions</b>	
<p>Prioritise generation and use of evidence for catalysing actions to end the three diseases through:</p> <ul style="list-style-type: none"> <li>• <b>Regular household surveys for HIV, TB and Malaria;</b></li> <li>• <b>Annual data peer review and surveillance strengthening meetings at various levels;</b></li> <li>• <b>Development and dissemination of annual country outlook reports based on available data with focus on tailored interventions based on evidence;</b></li> <li>• <b>Annual, mid-term and end-term programme reviews;</b></li> <li>• <b>Special studies and operational researches including drug and vector resistance; monitoring and vector bionomics studies;</b></li> <li>• <b>Documentation and dissemination of best practices;</b></li> <li>• <b>Strengthen reporting and availability of data for National Health Accounts including government allocated funds, donor &amp; private sector contributions;</b></li> <li>• <b>Promote and strengthen financing for research and development &amp; innovation at continental, regional, national and local levels.</b></li> </ul>	

<b>3</b> ▼	<b>STRATEGIC INVESTMENT AREA THREE:</b>
	<b>Advocacy and capacity building</b>
<b>Catalytic actions</b>	
<p>Prioritise catalytic actions that create an enabling environment and build competencies to end the three diseases through:</p> <ul style="list-style-type: none"> <li>• <b>Championing sustainable political will, ownership and accountability;</b></li> <li>• <b>Training of health workers in key priority areas including stratification and programme management;</b></li> <li>• <b>Development and adoption of appropriate implementation guidelines and tools;</b></li> <li>• <b>Consultative and information sharing platforms for health workers;</b></li> <li>• <b>Development and adoption of appropriate norms</b></li> </ul>	

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## Strategic approaches to the Catalytic Framework



Leadership, country ownership, governance and accountability

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Universal and equitable access to prevention, diagnosis, treatment, care and support

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Access to affordable and quality assured medicines, commodities and technologies

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Health financing

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Community participation and involvement

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Research and development & innovation

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Promotion of human rights and gender equality

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Multi-sectoral collaboration and coordination

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Strategic information

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## Milestones and Targets

# AIDS

GOAL		
End AIDS as a public health threat by 2030		
OBJECTIVES, MILESTONES AND TARGETS		
Objectives	Milestones and Targets	
	2020	2030
1. Reduce AIDS-related deaths compared with 2015	Less than 375,000 per year with a treatment coverage of 90-90-90	Less than 150,000 per year with a treatment coverage of 95-95-95
2. Reducing New HIV infections compared with 2015	Less than 375,000 per year	Less than 150,000 per year
3. End Discrimination compared with 2015	90% of PLHIV and at risk of HIV report no discrimination especially in health, education and workplace settings	All PLHIV, key populations and other affected populations fully enjoy their HIV-related rights
STRATEGIES		
Objectives	Strategies	
<b>Objective 1: Reduce all AIDS-related deaths</b> <b>Objective 2: Reducing New HIV infections</b> <b>Objective 3. Discrimination</b>	1. Increase coverage of antiretroviral treatment to achieve 90-90-90	
	2. Eliminate new HIV infection in children and keeping mothers alive	
	3. Increase access to Combination Prevention Services including HIV and SRH services to young people, men and women, and key populations.	
	4. Address HIV and human rights, gender inequality, and offer HIV-sensitive social protection	

## TUBERCULOSIS

<b>GOAL</b>			
<b>To end TB deaths and cases by 2030</b>			
<b>OBJECTIVES, MILESTONES AND TARGETS</b>			
Objectives	Milestones and Targets		
	2020	2025	2030
<b>1. Reduce the number falling ill with TB compared with 2015</b>	20%	50%	80%
<b>2. Reduction in number of TB deaths compared with 2015</b>	35%	75%	90%
<b>3. Reduction in TB incidence rate compared with 2015</b>	20%	50%	80%
<b>4. Reduction of TB-affected families facing catastrophic costs due to TB compared with 2015</b>	Zero	Zero	Zero
<b>STRATEGIES</b>			
Objectives	Strategies		
<b>Objective 1: Reduce the number of people falling ill with TB</b>  <b>Objective 2: Reduction in the number of TB deaths</b>  <b>Objective 3: Reduction in TB incidence rate</b>  <b>Objective 4: Reduction of TB-affected families facing catastrophic costs due to TB</b>	1. Universal access to TB diagnosis and treatment		
	2. Collaborative tuberculosis and HIV activities		
	3. Preventive treatment and vaccination of high risk persons		
	4. Political and community ownership		
	5. Research, innovation and inter country cooperation for Laboratory testing		
	6. Awareness on TB and Infection control		

# MALARIA

## GOAL

**To eliminate malaria incidence and mortality, prevent its transmission and re-establishment in all countries by 2030**

## OBJECTIVES, MILESTONES AND TARGETS

Objectives	Milestones and Targets		
	2020	2025	2030
<b>1. To reduce malaria mortality rates to zero in all countries compared with 2015</b>	At least 40%	At least 75%	Zero malaria death
<b>2. To reduce malaria case incidence to zero in all countries compared with 2015</b>	At least 40%	At least 75%	Zero malaria case
<b>3. To eliminate by 2030 in all countries with transmission compared with 2015</b>	At least 8 countries	At least 13 (8+5) countries	In all 47 (13+34) countries
<b>4. To prevent re-establishment of malaria in all countries that are malaria-free compared with 2015</b>	Re-establishment prevented in malaria-free countries	Re-establishment prevented in malaria-free countries	Re-establishment prevented in malaria-free countries

## STRATEGIES

Objectives	Strategies
<b>Objective 1: To reduce malaria mortality rates to zero in all countries by year 2030</b>	1. Universal access to malaria prevention, diagnosis and treatment
<b>Objective 2: To reduce malaria case incidence to zero in all countries by the year 2030</b>	2. Transform malaria surveillance into a core intervention
	3. Harnessing innovation and expanding research
	4. Strengthening the enabling environment
<b>Objective 3: To eliminate by 2030 in all countries with transmission in 2015.</b>	5. Acceleration of efforts towards elimination
<b>Objective 4: To prevent re-establishment of malaria in all countries that are malaria-free</b>	6. Malaria-free status maintained in all countries with no malaria transmission in 2015 and all that become malaria-free subsequently

