

TB Public Private Dialogue



Global Fund GC8 Applications: Practical Lessons on private sector engagement

OUR GUESTS:

 Mohammed Yassin	 Vijayashree Yellappa
 Chakaya Muhwa	 Adeel Tahir
 Obioma Chijioko-Akaniro	 Arnab Pal

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'Global Fund GC8 Applications: Practical Lessons and Opportunities to intensify engagement of private providers'

SUMMARY REPORT

The TBPPM Learning Network convened a global dialogue on Global Fund Grant Cycle 8 (GC8) and opportunities to strengthen private sector engagement (PSE) in tuberculosis detection and care delivery. The session brought together technical experts and implementers from the Global Fund, national TB programs, and implementing organizations in Nigeria, India, and Kenya.

The discussion focused on how countries can incorporate private sector engagement strategies into GC8 funding requests while leveraging innovations such as near point-of-care (NPOC) diagnostics, digital tools, and community-based screening approaches. More than 120 participants registered for the session, reflecting strong interest from countries currently preparing GC8 funding requests. The meeting was opened by Dr. Vijayashree Yellappa, who emphasized the importance of engaging private providers in TB elimination. **"More than 70% of patients seek care in the private sector. Private sector engagement is therefore critical to reaching underserved populations and strengthening TB service delivery."** – Vijayashree Yellappa

Global Fund Strategic Direction for GC8

Dr. Mohammed Yassin (Senior TB Advisor, Global Fund) presented an overview of Global Fund priorities for GC8 and the importance of optimizing investments to maximize TB impact. He highlighted that the Global Fund remains the largest international financier of TB programs, with increasing investments in private sector engagement over the past two decades, resulting in significant contributions from private providers to TB detection in many high-burden countries.

“In several countries, around 35% of TB notifications come from the private sector, yet only about 11% of TB budgets are allocated to private sector engagement.” – Mohammed Yassin

This indicates a major opportunity to increase efficiency and impact through stronger private sector collaboration.

Dr. Yassin also emphasized key strategic shifts in GC8, and advised countries to prioritize high-impact interventions, including molecular diagnostics, digital chest X-ray screening, and new NPOC technologies. Global Fund is supporting 13 early adopter countries in 2026 (GC7) and with the incoming evidence encourage all countries to adapt NPOC during GC8. *“WHO already recommended the use of new near point-of-care tests including tongue swab and sample pooling as opportunities for efficiency and optimization.” – Mohammed Yassin*

- Prioritization of low-income and high-burden countries
- Increased focus on optimized resource use
- Greater emphasis on integration with primary health care systems
- Expanded community and private sector engagement

Lessons from Country Experiences

Panelists shared practical lessons from GC6 and GC7 implementation

Nigeria: Scaling Private Sector Engagement: Dr. Obioma Chijioke-Akaniro from Nigeria’s National TB Program described that *“Nigeria is one of the few countries where we have seen increasing TB notification even during COVID... the private sector contribution is critical”*. – **Obioma Chijioke-Akaniro**

Nigeria achieved 87% TB treatment coverage in 2025, exceeding national targets. Approximately 34% of TB notifications came from private providers, with a large contribution from informal community providers. The program is expanding engagement with private laboratories, pharmacies, and patent medicine vendors. Obioma emphasized that external funding should help build sustainable national capacity rather than replace country leadership: *“We can now ride on what the government has... we can use this way to embed it into what government does... ensuring that you integrate sustainability into it is very important.”* - **Obioma Chijioke-Akaniro**

Nigeria’s GC8 strategy includes:

- GC8 funding will be used for filling the gaps in national health systems and TB service delivery
- Deploying molecular diagnostic platforms in community pharmacies and PHCs
- Building local technical capacity and market shaping for new diagnostic technologies

India: Engaging Informal Providers and Innovative Diagnostics: Prachi Shukla from World Health Partners described ongoing work in India to engage informal providers and strengthen TB detection through new diagnostic methods, particularly ‘Tongue swab’ sampling, as a non-invasive alternative to sputum testing. *“Tongue swab sampling offers a very simple, non-invasive alternative that can be collected easily even in the community setting... tongue swabs are very painless and very easy to collect. They’re particularly suitable for decentralized screenings and community-level testing, including through these informal providers.” – Prachi Shukla*

They have been training informal providers to identify TB symptoms and collect samples. Early results suggest that these approaches can: a) Improve case detection; b) Reduce diagnostic delays; c) Expand screening through trusted community providers

Kenya: Engaging Private Clinicians: Dr. Chakaya Muhwa highlighted the role of private clinicians and smaller facilities in expanding TB screening and diagnosis. He emphasized the importance of engaging Level 2 and Level 3 private providers, not only those in large tertiary hospitals/ clinics. *“At the core of the TB response are private providers that are close to the communities where TB occurs... engaging smaller providers and providing those providers with tools that they can use easily would make a huge difference going forward.” – Chakaya Muhwa*

He emphasized the importance of using digital technologies to improve case notification and for national programs to ensure that private providers have access to quality diagnostics. This approach is particularly important in underserved areas where patients first seek care from private practitioners.

New Opportunities: Point-of-Care Diagnostics

Panelists emphasized that new near point-of-care TB diagnostic technologies represent a major opportunity for strengthening private sector engagement.

Arnab Pal (Clinton Health Access Initiative) explained that these technologies could allow countries to decentralize TB testing to reduce delays and improve access for patients who initially seek care outside the public health system. *“These platforms are very easy to use and low-cost... they allow countries to decentralize TB testing.” – Arnab Pal*

Potential models include:

- Placing diagnostic platforms in private laboratories and clinics, even at lower PHC levels
- Expanding testing through community pharmacies, models being tested in Nigeria

- Integrating private providers into hub-and-spoke diagnostic networks

Country Readiness for GC8

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Panelists emphasized that countries must prepare their health systems to adopt new technologies effectively. *“Optimized use of available resources, including market shaping, integration of services, private sector activities and community systems, will be critical.” – Mohammed Yassin*

Countries were encouraged to begin planning these elements immediately as they prepare GC8 funding requests. *“So, identifying, mapping, and also helping in terms of linkage is one of the key things that a country will need to do... The first few years you're going in is more like you're doing a lot of groundwork... you now weigh yourself based on the processes: have I been able to engage 90% of the people I'm supposed to engage?” – Obioma Chijioke-Akaniro*

Key readiness actions include:

- Mapping private sector providers
- Developing clear Private Sector Action Plans
- Strengthening supply chains and logistics
- Training plans for all providers on new diagnostic technologies
- Integrating private provider data into national TB information systems

Conclusion

The forum reinforced that private sector engagement is essential for reaching missing TB patients. GC8 provides an important opportunity for countries to:

- expand TB detection through private providers
- deploy new diagnostic technologies
- integrate TB services within primary health care systems

Countries that successfully integrate these strategies into GC8 proposals will be better positioned to accelerate progress toward ending TB.

Reading and Practical Tools as background

- [GC8 information sessions, The Global Fund](#)
- [WHO & Global Fund GC8 Support Webinar: Building high-quality GC8 proposals for HIV, TB and RSSH](#), 4 March 2026
- [Private Sector Engagement in Tuberculosis Care](#) (2025), The Global Fund

- [TBPPM Webinar on PSE](#), March 2025
- [WHO Near point-of-care tests, tongue swabs, and sputum pooling for TB](#)

About the Panelists TB Public – Private Dialogue



Dr. Mohammed Yassin is a public health physician and infectious disease epidemiologist currently serving as Senior TB Advisor at The Global Fund to Fight AIDS, Tuberculosis and Malaria, where he provides technical leadership on TB programme strategy, innovation adoption, and strategic investments across global grants. He has over 25 years of experience leading TB clinical and programme work, including piloting national TB interventions, designing ‘same-day’ TB diagnosis approaches, and guiding PPM/PSE initiatives in multiple regions. Dr. Yassin advises Global Fund teams and countries to prioritize evidence-based interventions and accelerate implementation to maximize impact toward ending TB.



Chakaya Muhwa is a Kenyan pulmonologist, professor, and private sector clinician with extensive experience in TB clinical management and research. He has contributed to national and regional TB policy discussions and brings the perspective of frontline private practitioners delivering TB services within mixed health systems. His insights focus on quality of care, diagnostic access, professional engagement, and how funding frameworks can better reflect realities of private clinical practice.



Obioma Chijioko-Akaniro is a senior leader within the National Tuberculosis and Leprosy Control Programme Nigeria (NTBLCP). She has played a central role in strengthening private sector notification, laboratory networks, and engagement of patent medicine vendors under Global Fund-supported grants. Her experience spans GC6 and GC7 implementation, with a focus on scale, monitoring, and integration of private provider contributions into national systems. She provides strategic and programmatic perspectives from a high-burden country context.



Prachi Shukla is a senior leader at World Health Partners (WHP), India, where she oversees large-scale private provider engagement models for TB and primary health care services. She has extensive experience implementing Public–Private Mix (PPM) approaches under Global Fund and domestic financing mechanisms. Her work focuses on digital provider engagement, quality assurance, performance-based incentives, and integration of informal providers into national TB notification systems. She brings practical insights on contracting, supervision, and sustainability of private sector models at scale.



Arnab Pal is a TB market access and health systems expert with Clinton Health Access Initiative (CHAI). He has supported countries in strengthening private sector engagement and scaling up access to WHO-recommended TB diagnostics through strategic procurement and market-shaping approaches. Arnab has been closely involved in India’s Initiative for Promoting Affordable and Quality TB Tests (IPAQT), helping expand affordable access to molecular diagnostics in the private sector. His

work focuses on pricing strategy, diagnostic platform integration, and aligning donor investments with sustainable country readiness.



[Dr. Vijayashree Yellappa](#) Dr. Vijayashree Yellappa is a medical doctor and public health specialist with over two decades of experience working on TB policy, public-private partnerships, and service delivery systems. She has served as Senior TB Consultant at KNCV Tuberculosis Foundation and was appointed Vice-Chair of the WHO TB PPM Core Group, where she contributes to global guidance on public-private mix strategies. Her professional work spans clinical practice, research on private sector engagement, and policy support for strengthening governance and regulatory frameworks to improve private-sector involvement in TB care. Dr.

Yellappa has also served as a Fellow with NITI Aayog, India's premier policy think tank, advising on governance and private sector service delivery reforms.