### Global TB Report 2021 – figures and tables

### **Executive Commentary**

(single PDF; text, figures and tables to be laid out by a graphic designer; PDF to be posted online, prominently on the main report webpage, with a limited print run)

KF (text); figures and tables as indicated

#### **Figures**

FIG. E.1	DC.
Global trends in the estimated number of incident TB cases (left) and the incidence rate (right), 2000–2020.	PG  Signature Threat
FIG. E.2 Global trends in the estimated number of TB deaths (left) and the mortality rate (right), 2000-2020.	PG
FIG. E.3 Top causes of death worldwide in 2019	PG  Malarami hara disease disease disease palarami hara pa
FIG. E.4 Global estimates of TB incidence (black outline) and case notifications disaggregated by age and sex (female in purple; male in green), 2020	9 D
FIG. E.5 Countries that had more than 100 000 incident cases of TB in 2020	HT
FIG. E.6 Estimated TB incidence rates, 2020 Use categories and names from Table EA6.1	PG To the second
FIG. E.7 Estimated incidence of MDR/RR-TB in 2020, for countries with at least 1000 incident cases	HT Control of the con

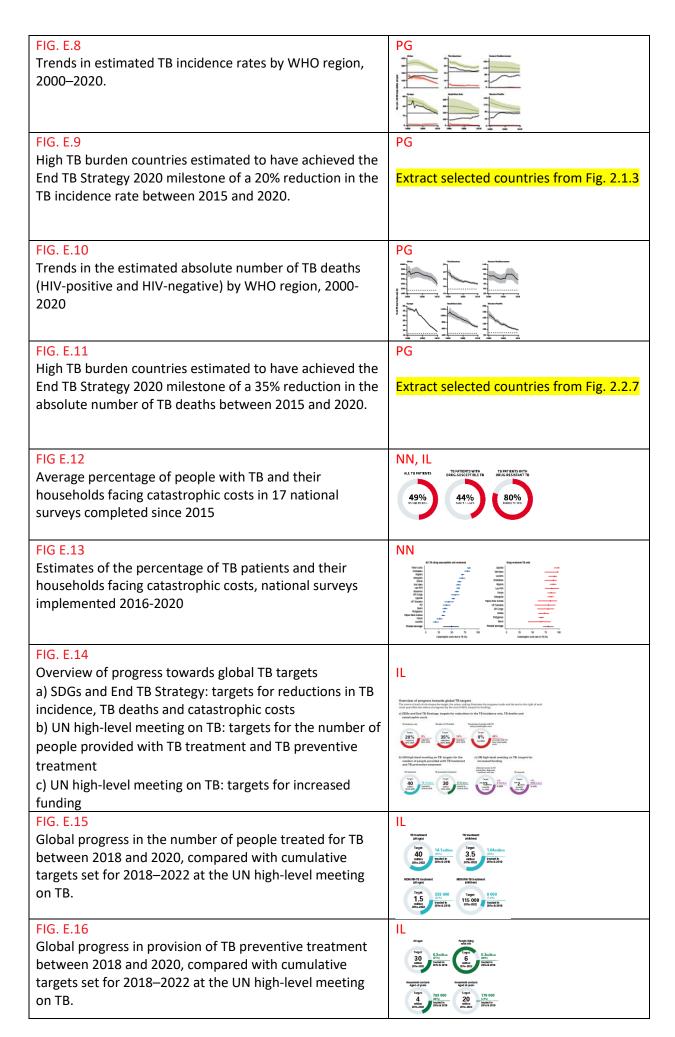
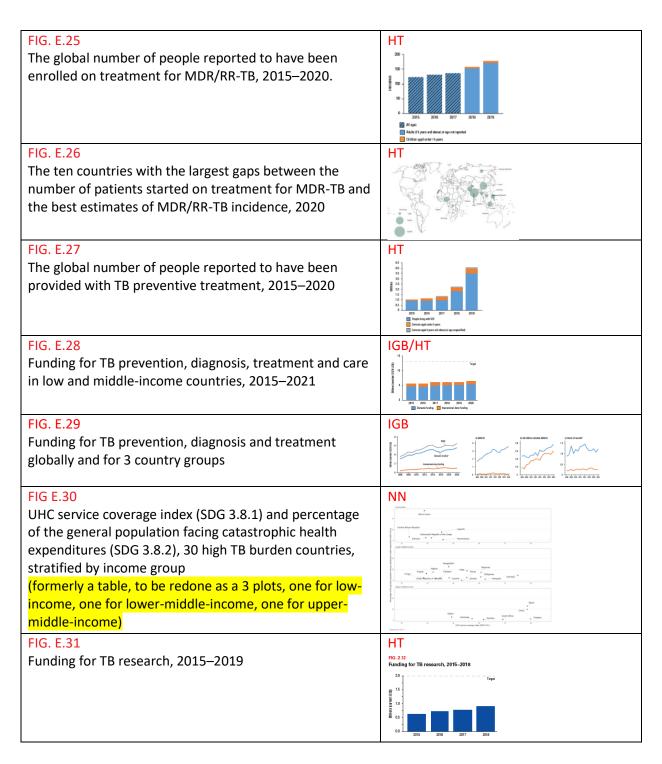


FIG. E.17 Trends in annual and monthly/quarterly TB notifications, selected countries  NB this is to show the impact of the COVID-19 pandemic on TB detection, and explains the impact shown in the preceding figure.  FIG E.18 Estimated Impact of the COVID-19 pandemic on TB incidence, globally and for selected countries, up to 2025  Selected countries will be those for which modelling has been done (approx. 15)	PG
Estimated impact of the COVID-19 pandemic on TB mortality, globally and for selected countries, up to 2025  Selected countries will be those for which modelling has been done (approx. 15)	PG
FIG E.20 The relationship between GDP per capita and the prevalence of undernutrition, and TB incidence per 100 000 population	PG
FIG. E.21 The global number of people reported to have been treated for TB disease, 2015–2020	HT  6  2  2  Multin sped if syeen and above Citétien sped under 15 years
FIG. E.22 Treatment outcomes globally for new and relapse TB cases, new and relapse HIV-positive TB cases, and MDR/RR-TB cases, 2012–2019	The set object to trace  The set object to tra
FIG. E.23 The ten countries with the largest gaps between notifications of new and relapse (incident) TB cases and the best estimates of TB incidence, 2020	HT
FIG. E.24 Percentage of bacteriologically confirmed TB cases tested for RR-TB, globally and for WHO regions, 2009-2020  (Move Global panel to the beginning)	HT    Solution   Solut



#### **Tables**

TABLE E.1	Reproduce 2020 version of
Global TB targets set in the SDGs, the End TB Strategy and the political	Table 2.1 SENT TO SUE
declaration of the UN high-level meeting on TB, for the period up to	
the SDG deadline of 2030	
TABLE E.2	PG
Cumulative number of deaths averted by TB and TB/HIV interventions	
2000–2020 (in millions), globally and by WHO region	Name
TABLE E.3	NN
Global estimates of the number of TB cases attributable to selected	
risk factors	<b>ENTTE</b>
To be done after first round of TB incidence estimates is available	_ : = : : : =

#### **Boxes**

Box E.1 Top facts and messages	New – bullets with five top facts/messages from the
	report KF
Box E.2 The Global TB report 2021: a	New KF
new web-centric approach	This will explain the new concept and associated
	format/structure/content of the 2021 report, as well as
	how this will be further developed in 2022
Box E.3 The End TB Strategy at a glance	Reproduce 2020 version SENT TO SUE
Box E.4 Featured/In focus topics	Text KF
	This will highlight topics covered in the "Featured topics"
	or "In focus" part of the report website

### **Annexes**

Annex E1 Basic facts about TB	Text KF SENT TO SUE
(formerly a box in the Introduction)	
Annex E2 The WHO global TB database	Text and 2 tables HT SENT TO SUE
	Institutionaliza P P P P P P P P P P P P P P P P P P P
	The state of the s
	- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10
Annex E3 Global lists of high TB burden	Text, 1 table, 1 figure KF, HT, IL SENT TO SUE
countries to be used by WHO in the	TRAIN THE TRAIN
period 2021-2025	TB/HIV The MDR/RR-TB
	Section 1997 Annual Sectio
Annex E4	HT, IL SENT TO SUE
Country, regional and global profiles	Text and images (can be almost identical to 2020 version
gramma gramma promot	- 2 pages (text, a couple of small illustrations))
Annex E5 Updates to TB disease burden	Text PG, 1 table (MB), Table 4.2 in 2020 report, Table
in the 2021 report	EA5.1 in this report
	NB This could be expanded to include the maps showing
	methods used to estimate TB incidence and mortality, in
	addition to the table showing data sources for the 30
	HBCs
Annex E6 Supplementary tables	TABLE EA6.1
	Epidemiological categorization of countries and
	territories according to estimated TB incidence per
	100 000 population in 2020
	Silver Segment of the Control of the
	The state of the s
	TO THE DESCRIPTION OF THE PROPERTY OF THE PROP
	TABLE EA6.2 SENT TO SUE
	TB-SDG monitoring framework (reproduce 2020 version)
	医患一种 "医生" " " " " " " " " " " " " " " " " " " "
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	新生。 新生。 新生。 新生。

WEB-BASED CONTENT ONLY – to be produced using R Markdown and uploaded to WHO website in-house (no graphic designer) using Sitefinity style template, according to technical guidance provided by Hazim (available on TME sharepoint).

Each chapter or chapter subsection (for chapters 2 and 3) corresponds to <u>one web page</u>. Leads for each chapter (overall) and chapter subsection are indicated.

Each chapter or chapter subsection webpage will start with some <u>short narrative text</u> (approx. 300-400 words) that comments on the figures/tables that follow. This <u>text should</u> <u>cite the figures and tables that follow, and also provide links/references</u> where more information is available, as appropriate.

This content will also be produced as a single pdf that can be deposited in IRIS, called "Global TB Report 2021: A compilation of all online chapter content (text, figures and tables)". This will need to be produced such that the formatting is as professional/neat as possible, with good use of space.

#### **CHAPTER 1:** The COVID-19 pandemic and TB

Overall lead for figures: Philippe

FIG. 1.1 Global trend in notifications of new and relapse TB cases, 2016-2020	PG, HT
FIG. 1.2  Trends in notifications of new and relapse TB cases by WHO region, 2016-2020	PG, HT
FIG. 1.3  Trends in monthly or quarterly notifications of TB cases from January 2020–June 2021, selected high TB burden countries Data are shown for countries that were able to report provisional national numbers for all months to WHO by August 2021.	PG, HT
FIG. 1.4 Trends in monthly TB case notifications in India in 2020 and 2021	PG  ***********************************
FIG 1.5 Estimated Impact of the COVID-19 pandemic on TB incidence, globally and for selected countries, up to 2025  Selected countries will be those for which modelling has been	PG
done (approx. 15)  FIG 1.6  Estimated impact of the COVID-19 pandemic on TB mortality, globally and for selected countries, up to 2025  Selected countries will be those for which modelling has been	PG
done (approx. 15)	

Consider also including some results from modelling work on impact of COVID on PPM that Nim is doing (contracted by Monica)

# **CHAPTER 2: TB disease burden**

Overall lead for figures/tables: Philippe

### 2.1 Incidence

Philippe (+ Nim Arinapathy + P Dodd)

	1
TABLE 2.1.1	One table to show global and regional
Global and regional estimates of TB incidence,	incidence content of 2020 report Table 4.3 and
2020	4.4 Both abs numbers and rates.
FIG. 2.1.1	PG
Global trends in the estimated number of	15 All ton 1 15 All ton
incident TB cases (left) and the incidence rate	Substitutes alone and object uses 100 July 100 J
(right), 2000–2020.	Silvantine Team of Silvantine Te
FIG. 2.1.2	PG
Trends in estimated TB incidence rates by WHO	
region, 2000–2020.	1
FIG. 2.1.3	Remove red line and uncertainty interval for
Trends in estimated TB incidence rates in the 30	HIV-positive incidence.
high TB burden countries compared with	PG
notifications of new and relapse cases,	
2000–2020.	
FIG. 2.1.4	HT COMPANY
Estimated TB incidence in 2020, for countries	
with at least 100 000 incident cases	
FIG. 2.1.5	PG
Estimated TB incidence rates, 2020	TO MANAGEMENT OF THE PARTY OF T
	A CONTRACTOR OF THE PROPERTY O
FIG. 2.1.6	PG
Estimated HIV prevalence in new and relapse TB	4000
cases, 2020	
cascs, 2020	
FIG. 2.1.7	PD
Global and regional estimates of TB incidence	a hour materia
(black outline) and case notifications	
disaggregated by age and sex (female in purple;	2 0.00 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
male in green), 2020*CHANGE TO RATES TO	
AVOID DUPLICATION WITH 3.3.1	
FIG. 2.1.8	PG
Main methods used to estimate TB incidence	
	Total Account Control

## 2.2 TB mortality

### Philippe

TABLE 2.2.1	One table to show global and
Global and regional estimates of TB mortality, 2020	regional mortality content of 2020
	report Table 4.3 and 4.4 Both abs
	numbers and rates.
FIG. 2.2.1	PG
Global trends in the estimated number of TB deaths (left)	
and the mortality rate (right), 2000-2020.	1 Strengton Strengton Strengton
FIG. 2.2.2	PG
Top causes of death worldwide in 2019	Inhams four Graze  Data  Data  District description  plicities; primes
	delication  delication  and delication  between terminal  Delication methods  Delication methods
	Naud Sign.  Dardwald desame  Lauration
FIG. 2.2.3	PG
Estimated number of deaths from HIV/AIDS and TB in 2020	
25th deed frameer of deaths from they Albs and 15 in 2020	TB HWAIDS
	00 05 10 15
FIG. 2.2.4	PG
Global trends in the estimated number of deaths caused by	P U
•	13 Julius Santa Sa
TB and HIV (in millions), 2000–2020.	er p runn
	200 200 200 200 200
FIG. 2.2.5	PG
Trends in estimated TB mortality rates by WHO region,	
2000–2020.	
FIG. 2.2.6	PG
Trends in the estimated absolute number of TB deaths (HIV-	
positive and HIV-negative) by WHO region, 2000-2020	
positive and this negative, by willo region, 2000-2020	
FIG. 2.2.7	PG
Trends in the estimated absolute number of TB deaths (HIV-	
positive and HIV-negative TB) in the 30 high TB burden	
countries, 2000–2020	
- 55 a.m. 165, 2500 2520	
FIG. 2.2.8	PG
Estimated TB mortality rates in HIV-negative people, 2020	477
25th diced 15 mortality rates in this hegative people, 2020	
	V. V.
FIG. 2.2.9	PD
Global and regional distribution of estimated TB mortality in	a land
HIV-negative people by age group and sex (female in purple;	
male in green), 2020	2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
FIG. 2.2.10	PG
Main methods used to estimate TB mortality in HIV-negative	
people	
	and the state of t

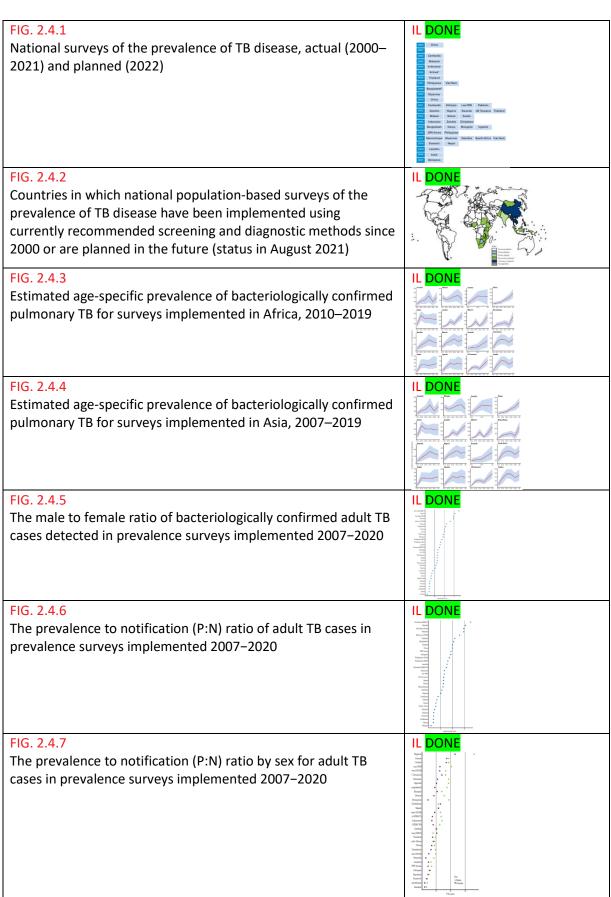
## 2.3 Drug-resistant TB

### Olga/Philippe

TABLE 2.3.1 Estimated global incidence of rifampicin-	PG, OT    STANPOL RESIDEN   REPARTMENT SOLICE THAN   C.C. CALL.
resistant and/or isoniazid-resistant TB, 2020. Number in thousands.	
TABLE 2.3.2	PG
To consider: a table showing global and regional	
estimates for MDR/RR-TB only (extracted from	
the more detailed table that will be in an annex	
to the Executive commentary)	
FIG. 2.3.1	AD/OT
Percentage of new TB cases with MDR/RR-TB	
FIG. 2.3.2	AD/OT
Percentage of previously treated TB cases with MDR/RR-TB	
FIG. 2.3.3	HT
Estimated incidence of MDR/RR-TB in 2020, for	737455
countries with at least 1000 incident cases	
FIG. 2.3.4	AD/PG
Average annual rate of change (represented by	
the slope of red line) in the proportion of new	
pulmonary TB cases with MDR-TB (2010-2020)	
FIG. 2.3.5	AD/OT
Source of data for rifampicin resistance among new cases, 1996 – 2021	
FIG. 2.3.6	AD/OT
Most recent year of data on rifampicin	The second second
resistance among new cases, 1996 – 2021	A Section of the sect
FIG. 2.3.7	AD/OT
Number of data points on rifampicin resistance	
among new cases, 1996 – 2021	

#### 2.4 National TB prevalence surveys

#### Irwin



## **CHAPTER 3:** TB diagnosis and treatment

Overall lead for figures and tables: Hazim

## **3.1 Notifications of new and relapse cases**

The following state of
PG, HT
### 2 2015 2016 2017 2018 2019   Adults appl 15 years and above   Children appl under 15 years
The second secon
HT  Five year of assembly field on a best to the.
HT  First compared many to life our bust to like

FIG 3.1.8  Percentage of basic management units in which there was community contribution to new case finding and/or to treatment adherence support, 2020 <sup>a</sup>	HT  The range and decourage field out in ball in this.
FIG. 3.1.9  Countries with national case-based digital surveillance systems for TB, 2020	HT  Find the good of districts to the last

## 3.2 Diagnostic testing for TB, HIV and drug-resistant TB

FIG. 3.2.1  Percentage of new and relapse pulmonary TB cases with bacteriological confirmation, globally and for WHO regions, 2000–2020  (Move Global to the beginning)	F required and access to the access to the control of the control
FIG. 3.2.2 Percentage of new and relapse pulmonary TB cases with bacteriological confirmation, 2000-2020, 30 high TB burden countries	Fig. 1 may per an analysis fold on a final to the
FIG. 3.2.3 Percentage of new and relapse pulmonary TB cases with bacteriological confirmation, 2020	F require and a state of the st
FIG. 3.2.4  Distribution of the proportion of notified pulmonary cases that were bacteriologically confirmed in 2020, by country income group. Boxes indicate the first, second (median) and third quartiles weighted by a country's number of pulmonary cases; vertical lines extend to the minimum and maximum values. Countries with less than 10 cases are excluded.	PG    This is a price of the control
FIG. 3.2.5 Percentage of new and relapse TB cases initially tested with a WHO-recommended rapid diagnostic test, 2020	E hought an assess that a bhat hink.
FIG. 3.2.6 Percentage of new and relapse TB cases with documented HIV status, 2004–2020, globally and for WHO regions	HT    T = value of mode to the or the tens.

FIG. 3.2.7 Percentage of new and relapse TB cases with documented HIV status, 2020	FT has got at about 9 had as a bad as the
FIG. 3.2.8  Percentage of bacteriologically confirmed TB cases tested for RR-TB, globally and for WHO regions, 2009-2020	F A reason of the second of th
FIG. 3.2.9 Percentage of bacteriologically confirmed TB cases tested for RR-TB, 2020	HT  The regular of seconds field on an India on the
FIG. 3.2.10 Percentage of MDR/RR-TB cases tested for susceptibility to fluoroquinolones, 2020	Financial and a second to the control of the contro
FIG. 3.2.11  Percentage of MDR/RR-TB cases tested for susceptibility to fluoroquinolones <sup>a</sup> , globally and for WHO regions, 2015-2020	F to read and decrease to the control of the contro

TABLE 3.2.X	HT (to d/w Nazir on how to present – fig or
Quality of laboratory services, 2020	tab?)

### 3.3 Treatment and treatment coverage

FIG. 3.3.1	HT
Estimated TB treatment coverage (new and relapse	To the reason and will continue to the first term of the first
patients as a percentage of estimated TB incidence) in	
2020, 30 high TB burden countries, WHO regions and	
globally	
REQUIRES ESTIMATES.	
FIG. 3.3.2	HT
The ten countries with the largest gaps between	The two reason and the relationship (E-child case has been in the first
notifications of new and relapse (incident) TB cases and the	
·	
best estimates of TB incidence, 2020	
REQUIRES ESTIMATES.	
FIG. 3.3.3	HT
Global number of MDR/RR-TB cases detected (blue) and	The transport and minimizing to child may not found a fine fine.
number enrolled on MDR-TB treatment (purple),	
2009–2020, compared with estimate for 2020 of the	
number of incident cases of MDR/RR-TB (uncertainty	
interval shown in <b>black</b> )	
REQUIRES ESTIMATES.	
	1.17
FIG. 3.3.4	F N may pay and automorp Tr. (1980 and an Audo A. N. No.
Number of MDR/RR-TB cases detected (blue) and enrolled	
on MDR-TB treatment (purple), 2009–2020, 30 high MDR-	
TB burden countries	
FIG. 3.3.5	HT
	[] To the compay and will desirately \$1.400 and not have to be the.
The global number of people reported to have been	
enrolled on treatment for MDR/RR-TB, 2015–2020.	
FIG. 3.3.6	HT
Estimated treatment coverage for MDR/RR-TB (patients	
started on treatment for MDR-TB as a percentage of the	
estimated incidence of MDR/RR-TB) in 2020, 30 high MDR-	
TB burden countries, WHO regions and globally	
REQUIRES ESTIMATES.	
FIG. 3.3.7	HT
The ten countries with the largest gaps between the	
number of patients started on treatment for MDR-TB and	
the best estimates of MDR/RR-TB incidence, 2020	
REQUIRES ESTIMATES.	
FIG. 3.3.8	HT
Countries that used shorter MDR-TB treatment regimens by	To the range part and sentencing \$0.000 are set to be \$0.000.
the end of 2020	

FIG. 3.3.9 Countries that used bedaquiline for the treatment of MDR/XDR-TB as part of expanded access, compassionate use or under normal programmatic conditions by the end of 2020	HT  Fragging and section is the contract of th
FIG. 3.3.10 Countries that used all-oral longer MDR-TB treatment regimens by the end of 2020	HT     The result of collection is a relation to the collection of
FIG. 3.3.11  Number of patients with active follow up of adverse events as a proportion of patients enrolled on treatment for drugresistant TB, 2020	HT  Final register of the control of
FIG. 3.3.12 Estimated global number of incident HIV positive TB cases (red) compared with the global number of notified new and relapse TB cases known to be HIV-positive (black) and the global number of TB patients started on antiretroviral therapy (blue), 2004–2020 Shaded area represents uncertainty intervals. REQUIRES ESTIMATES.	HT  Fit has a proper and and the second decision of the condition.
FIG. 3.3.13 Estimated coverage of ART for HIV-positive TB cases (HIV-positive TB patients on ART as a percentage of the estimated incidence of HIV-positive TB) in 2020, 30 high TB/HIV burden countries, WHO regions and globally REQUIRES ESTIMATES.	HT  Of Processor of control & 100 can on Accordance.
TABLE 3.3.1  Number of people newly enrolled in HIV care in 2020 who were also notified as a TB case in 2020, 14 high TB/HIV burden countries that reported annual data (Number of countries may change)	НТ

### 3.4 Treatment outcomes

510.0.4.4	LIT.
FIG. 3.4.1  Treatment outcomes for new and relapse TB cases in 2019, WHO regions and globally	Fig. 19 and a distribution of the section of the se
FIG 3.4.2 Treatment outcomes for new and relapse TB cases, new and relapse HIV-positive TB cases, and MDR/RR-TB cases, 2012–2019 globally	The same of the sa
FIG. 3.4.3  Treatment outcomes for new and relapse TB cases (absolute numbers), 2000–2019, globally and for WHO regions	FT Transport and desirate and an advantage.
FIG. 3.4.4  Treatment success rate for new and relapse TB cases in children aged 0-14 years in 2019, WHO regions and globally	The state of the s
FIG. 3.4.5  Treatment outcomes for new and relapse HIV positive TB cases in 2019, WHO regions and globally	The state of the s
FIG. 3.4.6 Treatment outcomes for MDR/RR-TB cases started on treatment in 2018, WHO regions and globally	FT to the great assessment to the sea to be to the to.

## **CHAPTER 4:** TB prevention services

Overall lead for figures and tables: Hazim

FIG. 4.1 The global number of people provided with TB preventive treatment, 2015–2020  FIG. 4.2	HT     The company and an administration is delicated in the control of the contr
Global progress in provision of TB preventive treatment in 2019 and 2020 compared with cumulative targets set for 2018–2022 at the UN high-level meeting on TB.	F house and other the state of
FIG. 4.3 Provision of TB preventive treatment to people enrolled on HIV treatment, 2005–2020	нт
FIG. 4.4 The top 5 countries providing TB preventive treatment to people enrolled on HIV treatment, 2020	IL (alternative)
FIG. 4.5 Gaps in TB prevention and TB detection for people who were newly enrolled on HIV treatment in 2020, selected countries	HT   F require on shares \$1 cm as of fact in \$6.
FIG. 4.6 Coverage of TB preventive treatment among people living with HIV who started antiretroviral treatment (ART), 2020	HT
Fig 4.7 Percentage of household contacts of bacteriologically confirmed pulmonary new and relapse TB cases evaluated for active TB and TB infection, 2020	HT  Framework and the second and the

FIG. 4.8 Coverage of TB preventive treatment among eligible children aged under 5 years, 2020  (If data are more comprehensive could consider instead a forest plot to be decided once we have finalised data collection)	HT  (F) however and account of the control of the c
Fig 4.9 (New figure suggested by Dennis) TB preventive treatment completion among contacts starting treatment in 2019 Fig 4.10 Use of rifapentine in TB preventive treatment regimens, by June 2021 (Dennis has data file, this is an update of FIG. B5.1.1 in box in the 2020 report)	Panel of bubbles (format to be finalised with DF)  DF
FIG. 4.11  Notification rate ratio of TB among healthcare workers compared with the adult population, 2020	T Now your and a second of the Control of the Contr
FIG. 4.12 BCG vaccination policy by country (Use more granular data on risk groups in whom BCG vaccination is indicated using data obtained by Dennis from the BCG Atlas project))	HT  F transmission and a distribution

# **CHAPTER 5:** Financing for TB prevention, diagnosis and treatment

Overall lead for figures and tables: Inés

FIG. 5.1	IGB
Estimates of funding required for TB prevention, diagnosis and treatment in 129 low- and middle-income countries in the Global Plan to End TB 2019–2022  (Number of countries may change)	(F) No recognization of contract of the second of contract
FIG. 5.2 The 121 low- and middle-income countries included in analyses of TB financing, 2010–2021 (Number of countries may change)	IGB, HT  (F in recognition of control of the contro
FIG. 5.3 Funding for TB prevention, diagnosis and treatment in total and by category of expenditure, 2010–2021, 119 countries with 97% of reported cases (Number of countries may change)	IGB  (F **response in company is the company in the
FIG 5.4. Funding for TB prevention, diagnosis and treatment for 121 low and middle-income countries compared with the global target set at the UN high-level meeting on TB of at least US\$13 billion per year	IGB  (F * *vary and released \$ 600 miles white).
FIG. 5.5 Funding for drug-susceptible TB and MDR-TB, 2010–2021, by country group	IGB  (F Notice and the second as the second
FIG. 5.6 Funding for TB prevention, diagnosis and treatment by funding source, 2010–2021, 121 countries with 97% of reported TB cases (Number of countries may change)	IGB  (F * *vap and reasons 6 also also feel as to.)
FIG. 5.7 Funding for TB prevention, diagnosis and treatment from domestic sources and international donors, 2010–2021, 9 country groups	IGB  (F **New york reasons & 600 on the set to 10.

	1
FIG. 5.8  National budget for TB and sources of funding in India, 2010–2021  (We might want to feature other countries increasing substantially domestic funding)	IGB  (F) **Name and relations of the constraints.
FIG. 5.9 Sources of funding and funding gaps for the TB-specific budgets included in national strategic plans for TB in 2021, 30 high TB burden countries	IGB  (F) Not again and material \$1.000 color from No.
FIG. 5.10 Reported funding gaps for TB by income group and by WHO region, 2010–2021	IGB    The transport of the first of the decision is to the control of the contro
FIG. 5.11 Estimated cost per patient treated for drug-susceptible TB in 109 countries, 2020 (Number of countries may change)	IGB  (F * National and Association of Contract of National Association (Contract of National Association (Co
FIG. 5.12 Estimated cost per patient treated for MDR-TB in 87 countries, 2020 (Number of countries may change)	IGB    The transport of section 1 for the deleteration.

Numbers that were previously in table 7.1 and 7.2 to be sent to Hazim for inclusion in a database and potentially online finance profiles.

# **CHAPTER 6:** Universal health coverage, TB determinants and multisectoral action

Overall lead for figures and tables: Nobu

FIG 6.1  Trends in the UHC service coverage index in WHO regions and World Bank income groups, 2000–2019	NN
(to be provided by Richard Cibulskis based on figure prepared for UHC monitoring report 2020)	
FIG. 6.2 UHC service coverage index by country, 2019	NN   F   No real print of contrast (N district N N N).
(Update map according to latest UHC monitoring report).	
FIG 6.3 Percentage of the general population facing catastrophic health expenditures, latest available year of data	NN    The second of the second
(Update map according to latest UHC monitoring report).	
FIG. 6.4  (BREAK DOWN INTO 3 panels (not table) AND SUMMARISE BY INCOME GROUP)  UHC service coverage index (SDG 3.8.1) and percentage of the general population facing catastrophic health expenditures (SDG 3.8.2), 30 high TB burden countries, stratified by income group	NN/IGB  (F ** visual print or constant in the section in the secti
Fig 6.5 (BREAK DOWN INTO 3 INCOME CATEGORIES) Current health expenditure per capita, 30 high TB burden countries, 2000–2018	NN  (F) To read and desirable that are have reads.
FIG. 6.6  National surveys of costs faced by TB patients and their households since 2016: progress and plans (as of July 2021)	NN   F ** ** ** ** ** ** ** ** ** ** ** ** **
FIG 6.7 Estimates of the percentage of TB patients and their households facing catastrophic costs due to TB disease in 17 national surveys.	NN     Through an annual of the and have note.
FIG. 6.8  Distribution of costs faced by TB patients and their households in 16 national surveys	NN    The result of the control of t

TABLE 6.1 Global estimates of the number of TB cases attributable to selected risk factors To be done after first round of TB incidence estimates is available FIG 6.9 The relationship between GDP per capita and the prevalence of undernutrition, and TB incidence per 100 000 population (AWAIT ESTIMATES)	NN  Processor and design in all found in the second in the
TABLE 6.2  [BREAK DOWN INTO 3 INCOME CATEGORIES]  Status of selected risk factors for TB, 30 high TB burden countries, latest available year	NN    The recognition of the date of the second of the sec
FIG 6.10 Estimated number of TB cases attributable to five risk factors, 30 high TB burden countries, 2020.  To be done after first round of TB incidence estimates is available	NN (Fig 8.9)  First requirements and the date to the
FIG. 6.11 Status of selected SDG indicators beyond SDG 3 that are associated with TB incidence, 30 high TB burden countries, latest available year  (BREAK DOWN INTO 3 INCOME CATEGORIES)	NN (Fig 8.10)

## **CHAPTER 7:** TB research and innovation

Overall lead for figures and tables: Nebiat

TAB. 7.1 An overview of progress in the development of TB diagnostics, August 2021	AK/DF  (F) The comparation and control with the control of the con
TAB. 7.2 The global clinical development pipeline for new anti-TB drugs and regimens, August 2021	NG, MZ  F No transfer and the distribution.
TAB. 7.3  The global clinical development pipeline for new TB preventive medicines and regimens, August 2021	NG, MZ  The requirement of the second
FIG. 7.1  The global clinical development pipeline for new TB vaccines, August 2021	NG, MZ
FIG. 7.2 Funding for TB research, 2015–2019	FIG. 2.12 Funding for TB research, 2015–2018  28 13 15 10 2015 2015 2015 2017 2018