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KNCV

TB | PLUS

KNCV
TUBERCULOSIS
FOUNDATION
**STRATEGIC
PLAN
2026/2030**

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1. ABOUT KNCV

KNCV is an international non-profit organization dedicated to the fight against tuberculosis (TB) and related health challenges.

KNCV has been fighting TB since its establishment in 1903 as a collaborative effort by several private local TB elimination initiatives in the Netherlands. Over the past 120+ years, the organization has acquired indispensable knowledge and experience in the field of effective TB prevention and care, resulting in pre-elimination in the Netherlands and has made significant contributions to global evidence generation, policy development, and TB program implementation worldwide.

KNCV has partnered with various National TB Programs, implementing partners, a wide range of government agencies, civil society organizations/affected communities, academia, technical organizations, and foundations

to deliver lasting results in over 40 countries. Partners value KNCV for its technical expertise and decades of experience across all areas of TB Prevention & Care.

As an international knowledge center, KNCV promotes effective, efficient, innovative, and situation-specific strategies and solutions to eliminate TB and related health challenges in both national and international contexts. KNCV does TB surveillance and surveillance systems, epidemiological modeling, mobile and digital health solutions, health systems strengthening (including human resources for health, CME, e-learning, and blended learning programs), decentralized financing of integrated TB programming, and increasing access for vulnerable groups, including programming to address discrimination and stigma. In addition, KNCV has extensive in-house project management experience.

2. KNCV'S PURPOSE, MISSION AND VISION



OUR PURPOSE

Our purpose is to contribute to a world free of tuberculosis and related health challenges



OUR MISSION

Our mission is to save lives and end human suffering through the promotion of health and the global elimination of tuberculosis and related health challenges

KNCV'S STRATEGIC VISION

Accelerate the global fight against Tuberculosis and related health challenges by catalyzing uptake and scale-up of cutting-edge innovation, people-centred and country-led action, anchored in an equal-alliance network.

3. GUIDING PRINCIPLES AND VALUES

KNCV'S GUIDING PRINCIPLES

Our work is guided by eight principles:

- 

Ensure alignment of the KNCV strategy with the global END TB Strategy, national health strategies, HO Euro Strategy 2026-20230 and the health-related Sustainable Development Goals (SDGs);
- 

Maximize impact while minimizing cost and optimizing effort;
- 

Embrace solution localization and ownership (i.e., country-specific design of interventions and ensure country ownership);
- 

Amplify impact through partnerships at all levels;
- 

Promote capacity building by ensuring transfer of knowledge as an integral part of KNCV's technical assistance;
- 

Embrace innovation, resilience and adaptability in TB+ care to respond effectively to emerging challenges and opportunities;
- 

Leverage data and technology to drive evidence-based decision-making and improve the efficiency and effectiveness of TB interventions;
- 

Operate an apolitical organization with focus on ensuring health as a right.

KNCV'S CORE VALUES

We take pride in our core values:

- 

People-focused
- 

Results-driven and guided by impact
- 

Reliable and accountable
- 

Flexible, agile and resilient
- 

Powered by responsible innovation
- 

Engaged in synergistic partnerships





4. KNCV'S EVOLVING ROLE IN A RAPIDLY CHANGING ENVIRONMENT

The global landscape for Tuberculosis (TB) and related health challenges is at a critical juncture. TB remains a formidable global health challenge, marked by escalating TB and antimicrobial resistance (AMR) further complicated by recent funding cuts which threaten to jeopardize the innovation and advancement needed in this area to truly eliminate TB. Urgent action and renewed financial commitments are needed to avert a worsening crisis.

1: TB reclaims top spot as infectious killer:

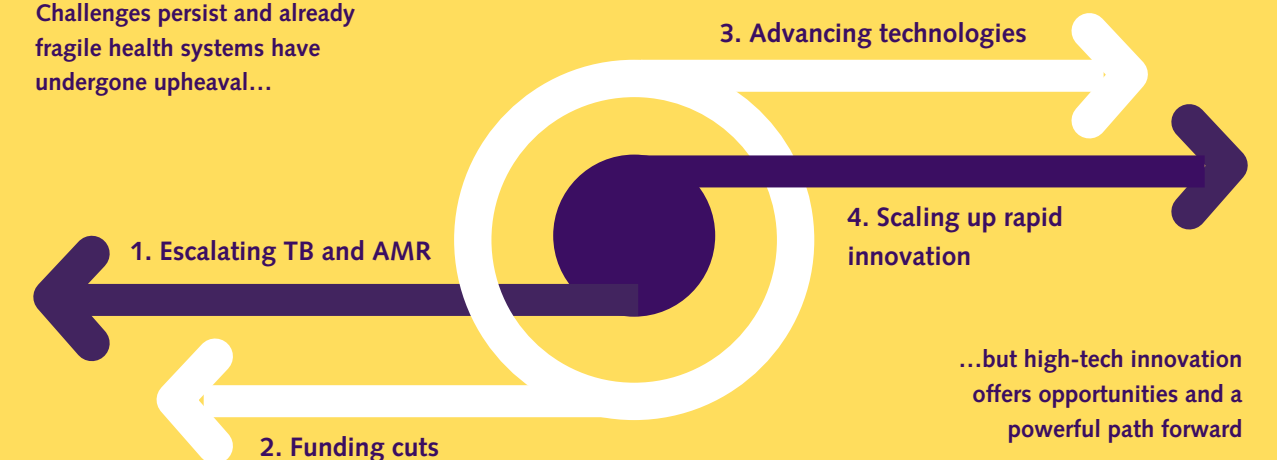
TB has once again become the leading infectious disease killer, with an estimated 10.8 million people affected by TB and 1.25 million deaths globally in 2023 [WHO data]. Further, the multi-drug-resistant TB (MDR-TB) performance gap is an example of the AMR crisis, making infections harder to treat and threatening to reverse decades of medical progress. The rise in drug-resistant TB strains put millions at renewed risk, especially where healthcare systems

have low readiness or are already strained.

2: Shrinking funding for global health: The WHO 2024 Global TB Report highlights significant financial gaps in the fight against TB. Nearly half of all TB-affected households continue to face catastrophic costs for diagnosis and treatment. In addition, recent reductions in global health funding, including strategic shifts in U.S. support for USAID programs, may slow progress in research and essential service expansion. These developments could challenge ongoing efforts to combating TB, AMR and evolving health threats.

3: However, technical advancement is unlocking high-quality, accessible care, offering a powerful path forward. New technologies and tools like AI for comprehensive chest X-ray reporting, next-generation sequencing for drug resistance, and advanced antigen detection methods promise faster, more accessible and accurate diagnoses.

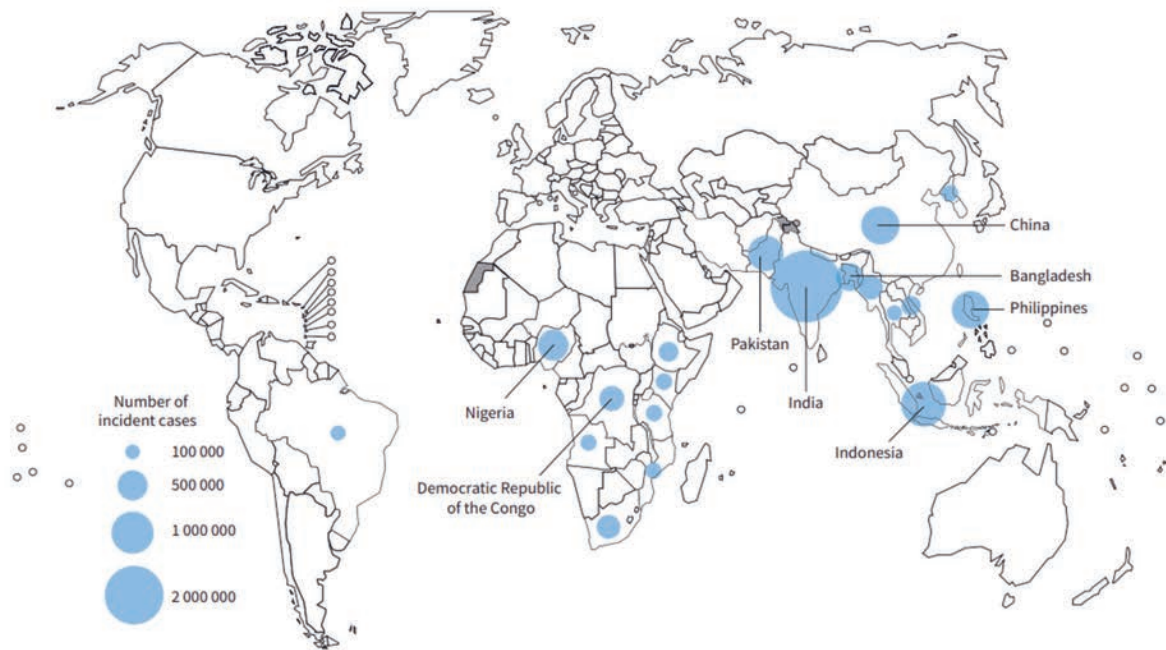
Challenges persist and already fragile health systems have undergone upheaval...



4: Additionally, **continuous innovation and scaling up** proven interventions—such as early detection, rapid molecular diagnostics, and shorter treatment regimens—is essential. However, Access, Uptake, and Optimization remain a key challenge requiring and investment in social and implementation science.

ESTIMATED NUMBER OF INCIDENT TB CASES IN 2023

Indicates countries with estimated incidence of tuberculosis per 100,000 population.



TB continues to a global challenge, affecting both the Global North and Global South, albeit for different but interconnected reasons.

In the **Global North**, the threat is underscored by:

- Global—including European—governments are increasingly concerned about pandemic and AMR-related threats. **The burden of multidrug-resistant TB (MDR-TB)** is disproportionately high, with the WHO European Region alone accounting for 25% of the world's MDR-TB cases, despite representing only a small fraction of global TB incidence.
- This challenge is further compounded by a **growing population of vulnerable migrants**, who face increased risk due to factors such as prior exposure, difficult transit conditions, and barriers to accessing healthcare in host countries.
- Additionally, many health systems in the Global North exhibit **low clinical readiness for TB**, characterized by gaps in staff training, **delays in the registration of new drugs and appropriate formulations**, and inadequate infrastructure—all of which hinder timely diagnosis and effective management.

Source: Global Tuberculosis Report 2024 (WHO)

In the **Global South**, the situation is even more acute as

- The countries account for **over 90% of the total global amount of people affected by TB**, with Southeast Asia and Africa bearing the highest burdens.
- Vulnerability is heightened by a **heavy reliance on international aid** and severely constrained fiscal space—exacerbated by rising debt and recent funding cuts—which jeopardize essential TB control programs and innovation. National governments are increasingly taking greater ownership of their TB programs and require strategic support to efficiently deliver high-quality care.
- Stigma surrounding TB remains pervasive**, discouraging individuals from seeking timely diagnosis and treatment, and further fueling transmission. Community engagement is increasingly recognized as a key lever in the fight against TB. Equally important is addressing unequal access to health services, particularly among vulnerable groups in many Global South countries.
- Moreover, **health systems are often fragile** and operate in a siloed manner, lacking integration with broader health services—limiting the effectiveness and reach of TB interventions. There is also **inadequate alignment of TB efforts with the broader Sustainable Development Goals (SDG) targets**, which serve not only as drivers and barriers but also as opportunities for impact.

In this challenging and diverse global context, the role of KNCV is more crucial than ever. As an international center of expertise, KNCV continues to lead the fight against TB by promoting innovative, effective, and sustainable control strategies tailored to the unique challenges of both the Global North and South. Additionally, there is an opportunity for KNCV to further strengthen national and global ownership in the effort to **end TB, fostering stronger commitment and collaboration**.

KNCV TB Plus operates within a rapidly evolving global health landscape, where converging crises—ranging from co-infections and AMR to climate change and shifting demographics—demand integrated, system-wide responses. As the TB Plus initiative expands KNCV's scope, its engagement with external stakeholders has evolved to address these complex realities.

Beneficiaries now include not only people affected by TB and their families, but also those at risk from related conditions such as HIV, AMR, and non-communicable diseases. KNCV's approach is to work closely with National TB Programs (NTPs), Ministries of Health (MoHs), health care workers (HCWs), and communities, ensuring that interventions are people-centered, locally relevant, and responsive to broader health determinants.

KNCV's partnerships have diversified to include technical agencies, academia, civil society, research institutes, and private sector innovators. By leading and collaborating on projects that integrate digital health, laboratory strengthening, and market access for new diagnostics and regimens, KNCV ensures a comprehensive and forward-looking approach to health interventions.

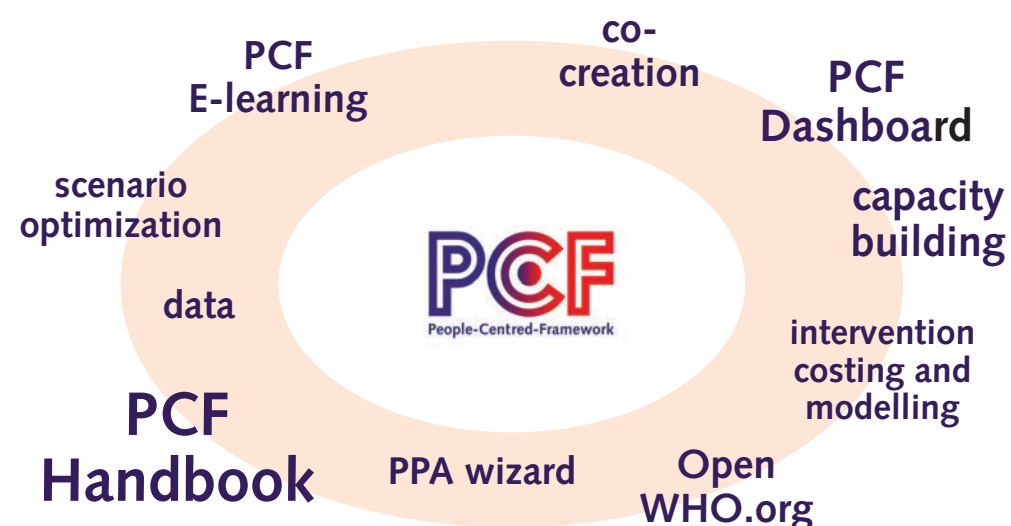
This is exemplified by initiatives such as the ASCENT project, the Patient-Centered Framework (PCF), and collaborations with Unitaaid, the Gates Foundation, and Africa CDC.

Donor relationships are increasingly focused on sustainable, cross-disease funding, supporting KNCV's alignment with the WHO End-TB Strategy, the Tuberculosis Action Plan for the WHO European Region 2023–2030, and the upcoming Second WHO Europe Programme of Work (EPW2 2026–30), which prioritizes technology-optimized systems, demographic and climate shifts, non-communicable diseases (NCDs) and mental health, and health security.

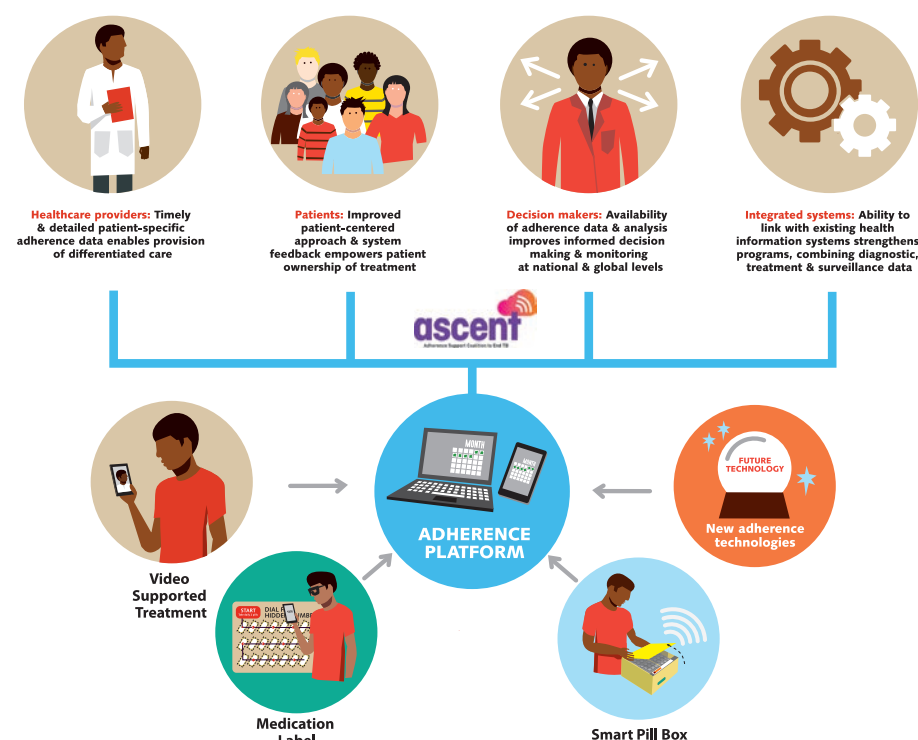
KNCV's **capacity transfer** and knowledge leadership help shape national strategic plans and support countries in leveraging local evidence for robust, multisectoral responses.

“In this ever-evolving landscape, KNCV continues to strive for innovation and is committed to system-wide impact, ensuring its work remains at the forefront of global efforts to end TB and address interconnected health threats”

The PCF Approach is a powerful tool in the fight against TB, enabling countries to develop and implement optimized, responsive, and resilient National Strategic Plans (NSPs) for TB programming. By aligning with the WHO End TB Strategy and the Sustainable Development Goals (SDG), PCF aims to accelerate progress in the fight against TB.



The Unitaaid supported ASCENT project aimed to help people affected by TB succeed in their TB treatment using digital adherence technology.



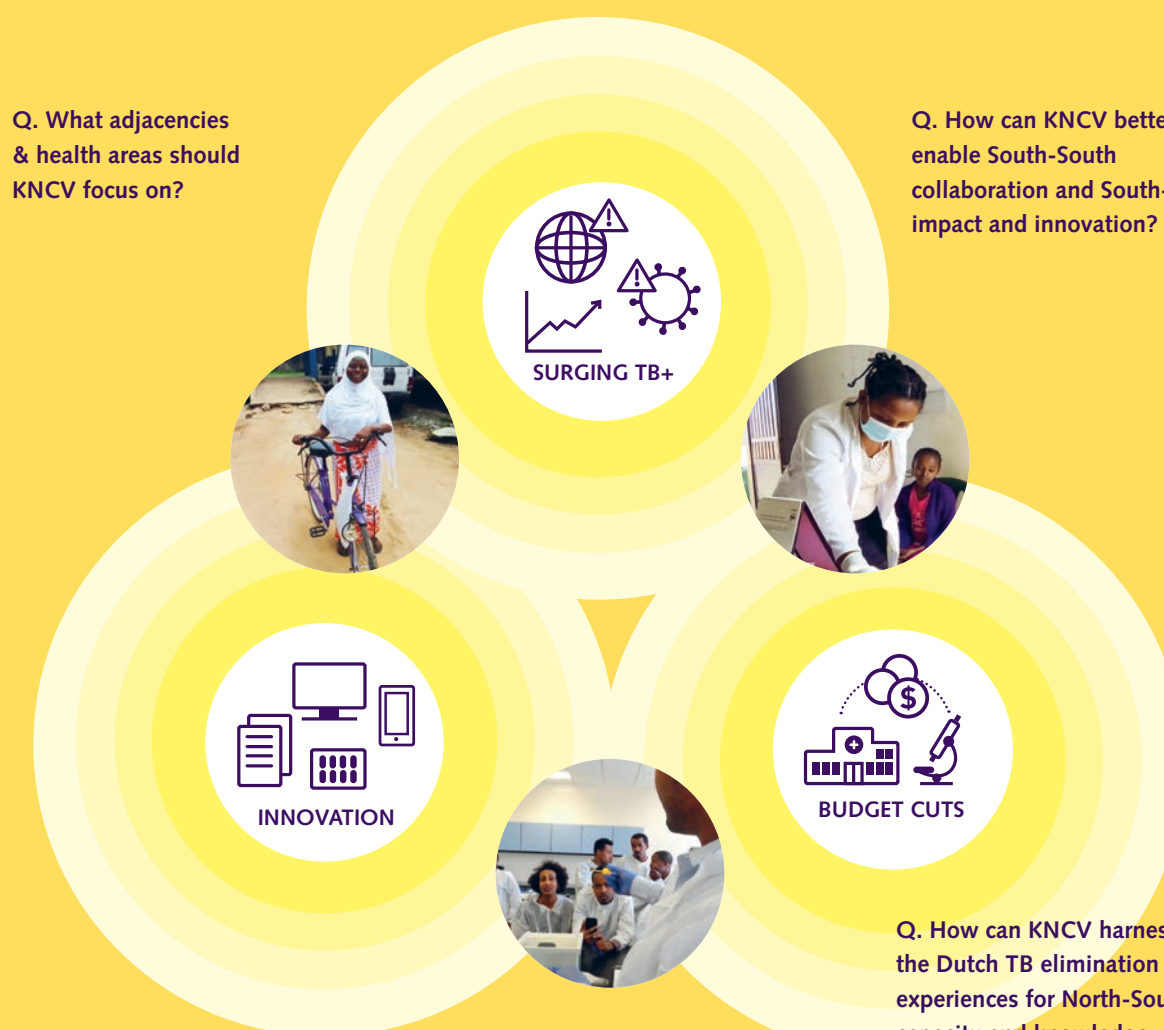
Reimagining KNCV's role in ever-evolving global health landscape

KNCV is at a pivotal juncture, shaped by intensifying global headwinds such as the resurgence of TB, funding

challenges, and a rapidly evolving innovation landscape. These factors necessitate a strategic recalibration. By addressing bold questions about its strategic adjacencies and operating model, KNCV is laying the foundation to future-proof its impact.

Q. What adjacencies & health areas should KNCV focus on?

Q. How can KNCV better enable South-South collaboration and South-led impact and innovation?



Q. How can KNCV resiliently position itself within the evolving TB & global health ecosystem to maximize its impact?

Q. How can KNCV harness the Dutch TB elimination experiences for North-South capacity and knowledge transfer, especially for countries transitioning from high to low incidence?

Internal ways of working

As part of the overall reflection and assessment of the KNCV strategic plan 2020-2025; the following key considerations were identified:

- ✓ Strengthening resource mobilization and business model to ensure financial sustainability.
- ✓ Defining and aligning the roles and responsibilities of the global office, country offices, and national entities to optimize efficiency and impact.
- ✓ Exploring sustainable funding models and cost structures for KNCV to maintain and enhance its operations.

5. STRATEGY DEVELOPMENT PROCESS

The development process of KNCV's strategic plan 2026-2030 was structured around **three sequential phases: Discover, Design, and Deliver.**

1: In the Discover phase, the process began with a **highly consultative approach** involving the KNCV core strategy team. This phase included consultations and group discussions with key internal stakeholders, one-on-one interviews with external key opinion leaders, and relevant desk research. The goal was to gather insights and lay the groundwork for the strategic plan.

2: The Design phase was anchored by two **co-creation workshops** aimed at identifying high-level options for KNCV's future areas of focus. These workshops included members of the strategic team as well as

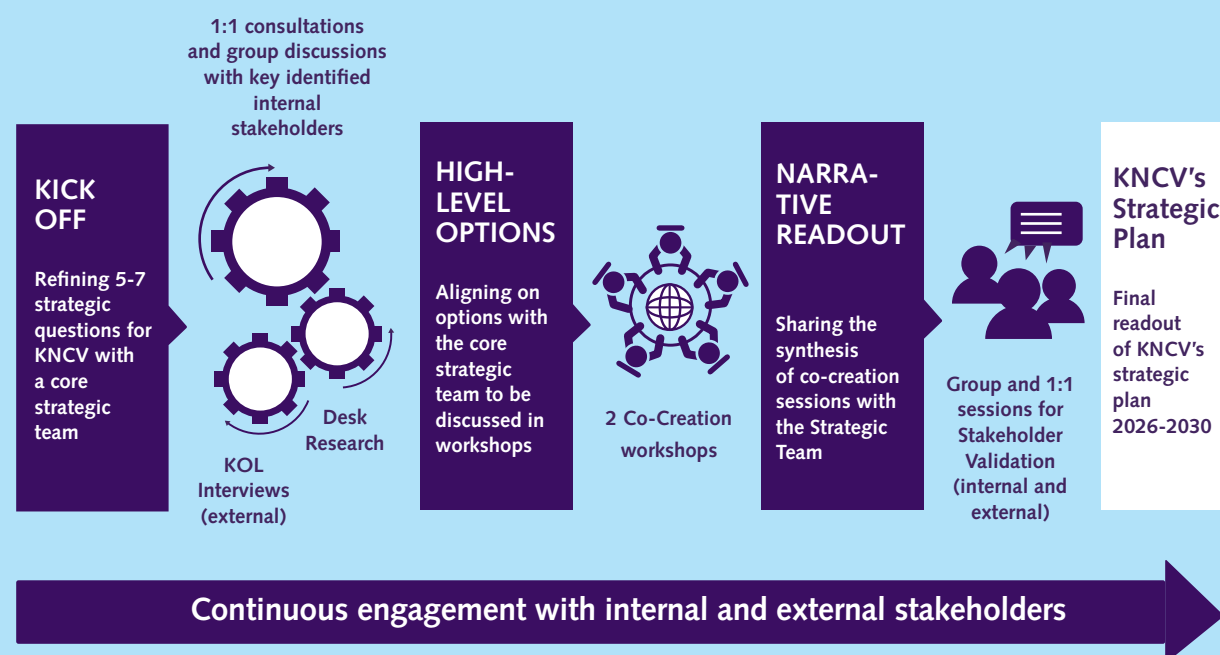
selected KNCV team members, identified by senior leadership. The outcomes of these sessions were synthesized into a narrative readout, which was shared with the KNCV Strategic Team to ensure alignment and clarity.

3: Finally, the Deliver phase focused on validating the high-level options through group and **one-on-one interactive sessions** with internal stakeholders. This phase culminated in the finalization of KNCV's 2026-2030 Strategic Plan.

The strategy development process relied heavily on internal and external stakeholder engagement, ensuring that the resulting strategic plan was both grounded in reality and feasible for implementation within the five-year timeframe.

KNCV's Highly Consultative and Engaging Strategic Planning Process for 2026-2030

1: DISCOVER 2: DESIGN 2: DELIVER



Stakeholder Engagement

Throughout the development of its Strategic Plan 2026-2030, KNCV gathered valuable insights from both internal stakeholders and external thought leaders. These inputs were informed by reflections and lessons learned from the current strategic plan (2020-2025), as well as key external factors—including political and economic shifts, social determinants of health, rapid technological advancements, environmental changes such as climate impacts, and legal considerations, particularly around regulatory frameworks.

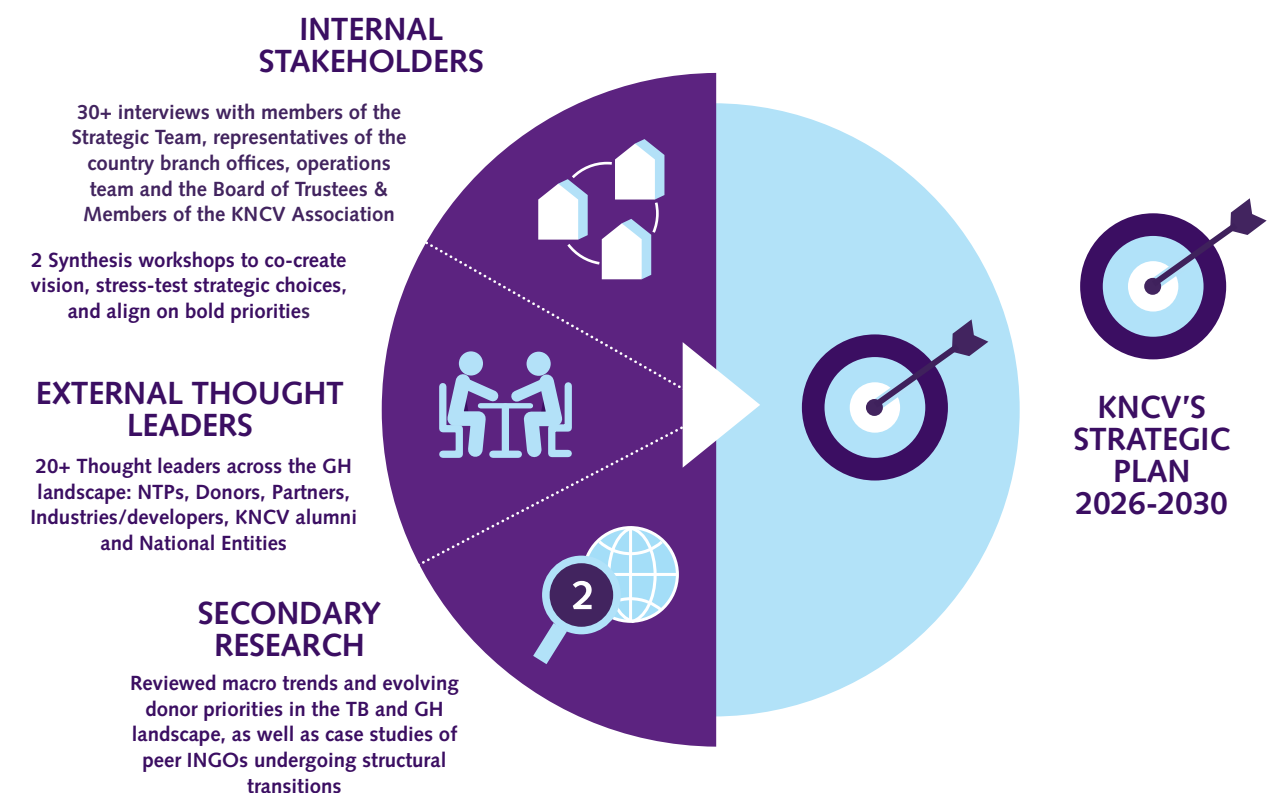
> Internally, KNCV conducted over 30 discussions with members of the Strategic Team, representatives from country offices, program staff, and the Board of Trustees. These interviews were followed by synthesis sessions where the vision was co-created, strategic

priorities were identified, and key action points were defined.

> Externally, more than 20 thought leaders across the global health landscape were consulted, including representatives from National Tuberculosis Programs (NTPs), donors, partners, KNCV alumni, and national entities.

> This consultative process was further supported by robust secondary research to analyze macro trends and evidence, with a focus on priorities within the tuberculosis and broader global health landscape.

This comprehensive approach ensured that KNCV's strategic plan is well-informed, grounded in current realities, and poised to drive significant progress in the years ahead.



Leaders across the global health ecosystem regard KNCV as a technically robust, trusted, and forward-thinking organization with deep expertise in tuberculosis (TB). They recognize KNCV's ability to translate innovation into actionable strategies and acknowledge its significant potential to expand its capabilities across various disease areas, delivery models, and geographies.

Results of Stakeholder Engagement:

WHAT IS KNCV GOOD AT?



Strong technical expertise in TB

“Experience and Expertise, KNCV’s support for **technical assistance** remains critical to sustain progress”



Innovation mindset

“KNCV’s role in supporting practical implementation has been crucial [...], its ability to **translate innovations into actionable strategies** is invaluable”



Trusted partner

“If we have a **first choice of partner**, KNCV International... will always be our preferred organization. We look to them for implementation research, programmatic introduction of innovation, and quality assurance... these are areas where they excel.”

WHAT CAN KNCV DO BETTER?



Extension of its TB skill set to other areas

“While TB remains at KNCV’s core, it is key to demonstrate how its TB expertise benefits **broader health initiatives**”



Identification of a differentiated role in the future

“The days of **massive project implementation** are over technical expertise is where KNCV must carve its niche”



Need for a sustainable business model

“Instead of relying solely on direct grants, we should **market our expertise** so that countries seek us out when they need specialized support”

KNCV Tuberculosis Foundation:
Track record and Comparative Advantages

Deep TB Expertise and Global Leadership: With over a century of experience, KNCV has led innovations in TB prevention and care and is recognized as a trusted technical authority by both global and national TB programs.

Successful approach towards the elimination of TB in the Netherlands through collaboration with relevant stakeholders and the strengthening of TB prevention and care strategies for a low-incidence country.

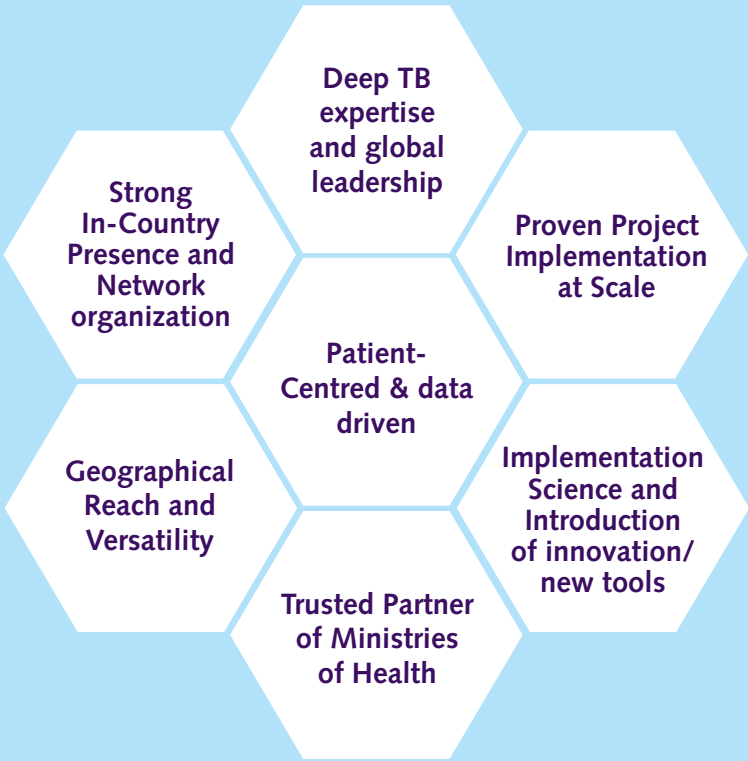
Proven Project Implementation at Scale: KNCV has successfully managed multi-country projects funded by USAID, the Global Fund, Unitaid, and others — including Challenge TB, TB REACH, ASCENT, and IMPAACT4TB. These projects highlight our capacity to deliver impactful, accountable interventions at both national and subnational levels.

Implementation Science and Innovation: KNCV bridges research and practice by translating evidence into policy.

We supported the adoption of shorter TB treatment regimens, digital adherence technologies, and innovative diagnostics such as rapid molecular diagnostic platforms, genome sequencing, and digital/AI-aided chest X-rays through strategic partnerships with national programs and regulatory bodies. KNCV contributes to the global TB knowledge base by generating and disseminating evidence, publishing an average of 50 peer-reviewed papers annually.

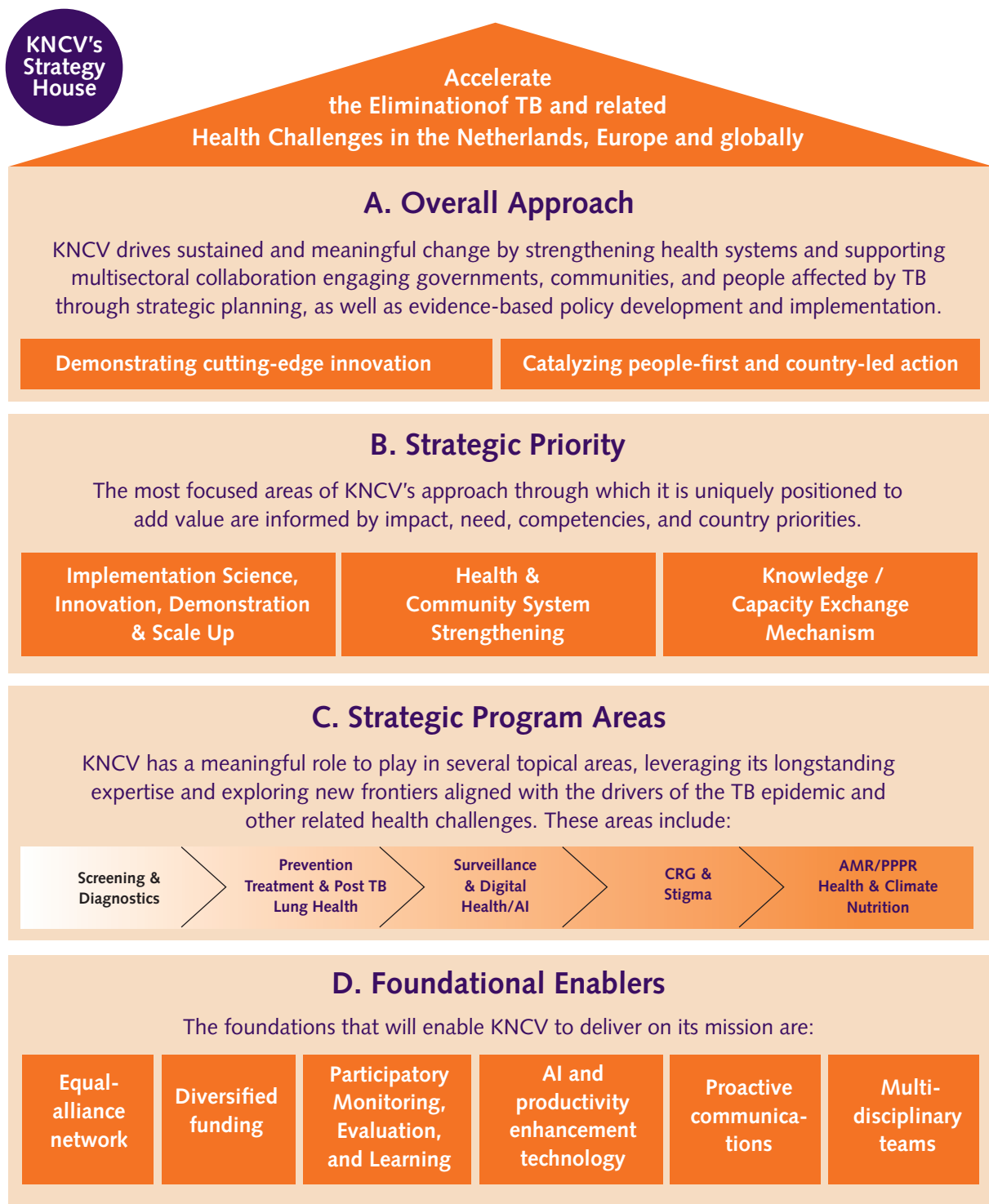
Trusted Partner of Ministries of Health: KNCV works closely with national TB programs in over 40 countries. Our technical support aligns with national priorities, promoting local ownership and sustainability.

Geographical Reach and Versatility: Our work spans both high- and low-burden TB countries. With a strong in-country presence and embedded support through established KNCV network organizations holding national legal status, we ensure contextual alignment, technical mentorship, and sustainable impact.



6. KNCV'S STRATEGIC PLAN 2026-2030

KNCV's strategy outlines focused priorities that leverage its unique capabilities to lead effectively as KNCV Global (including country branch offices). By identifying the foundational enablers, KNCV aims to unlock long-term impact and sustainability. These elements collectively form **KNCV's Strategy House**, an integrated model designed to deliver health solutions at scale, positioning KNCV to fulfill its mission.





7. KEY STRATEGIC PRIORITIES

KNCV has outlined three strategic priorities to enhance its impact in the fight against TB and related health challenges. These priorities are informed by the

organization's competencies, evolving global health landscape, and the needs of the communities served by KNCV.

Strategic Priority 1 Implementation Science, Innovation, Demonstration & Scale Up

KNCV is committed to advancing the fight against TB and related health challenges through science-led innovation. This strategic priority focuses on identifying, piloting, and validating novel interventions - including diagnostics, shorter and more effective regimens, digital adherence technologies, and future TB vaccines - to assess their feasibility in real-world settings and inform scalable impact.

The primary **objectives** of KNCV's science-led innovation demonstration strategic priority include:



Demonstrate novel interventions with innovators: Support countries in implementing and evaluating cutting-edge screening and diagnostic tools, prevention and treatment regimens, and digital health solutions in real-world settings (e.g., Project ASCENT, which implements and evaluates digital adherence technologies like smart pillboxes). These efforts are often conducted in collaboration with tech companies, research institutions, and healthcare providers.



Inform scale-up: Leverage evidence from pilot programs and implementation science to advise national and global partners on scaling context-appropriate, cost-effective innovations across the TB care continuum and adjacent health areas (e.g., the implementation and scale-up of Xpert MTB/RIF).



Collaboration: Engage with organizations such as RIVM, GGD, academic institutions, and EMR to ensure access to medicines and regimens for people affected by TB in the Netherlands and across Europe.

Potential offerings associated with this priority are outlined as under:



TB & Cross-disease Care Continuum for TB & related health challenges: Operational research to build the optimum use cases and a comprehensive prevention package¹ to complement partially effective TB vaccines.



South-South collaboration: Promote cost-effective innovations originating in the Global South to enable South-South collaboration.



Diagnostics Integration: Support multiplexing of diagnostics to utilize TB laboratories for multiple infectious diseases enhancing cost-efficiency and integration across therapeutic areas.



AMR & Pandemic Preparedness: Leverage TB laboratory networks for real-time antimicrobial resistance (AMR) detection, contributing to national early-warning systems.



Health & Climate, Gender, Nutrition: Design and implement demonstration projects that link TB services to fragile settings and climate-related challenges. Develop practical approaches for integrating nutritional support as a preventive measure and as a core component of high-quality TB care.

¹ - Multiple thought leaders involved in TB vaccine introduction discussed the need for a multi-component approach, combining vaccines with complementary prevention tools and strategies (e.g. TPT, adherence etc.) to build a layered defense, particularly for high-risk populations.

Illustrative Success Stories – KNCV’s Role in Translating Science into Impact



1: Prevention: KNCV co-led the introduction of the short-course 3HP and 1HP regimens, demonstrating their feasibility in-country and generating evidence to support global uptake.



2: Treatment: KNCV co-led the development of WHO’s active Drug Safety Monitoring and Management (aDSM) framework



3: Adherence: KNCV empowered people affected by TB by operationalizing electronic pillboxes and chatbots to improve treatment adherence.

now mainstreamed across countries and supported the introduction of shorter, safer, and more effective treatments, such as Bedaquiline, Delamanid, and the STR BPaL/M regimens.

Strategic Priority 2
Health & Community System Strengthening

KNCV is committed to enhancing the effectiveness and resilience of global health systems—work that has become even more critical amid recent funding disruptions that have strained already fragile systems. KNCV employs a systems-focused, science-led approach rooted in strategic planning to strengthen the foundations of health systems, ensuring the delivery of high-quality, equitable TB and related health services, in alignment with WHO’s health system building blocks.

Primary objectives:



Evidence-led system design: Support countries in designing tailored, integrated TB care packages enabled by social health insurance or blended finance mechanisms (e.g., Development Impact Bonds) to sustain TB responses in resource-constrained settings.



Service Integration: Leverage experience from TB/HIV integration to promote broader integration with other disease programs, especially in lung health and noncommunicable diseases (NCDs).



Capacity building through National Institutions: Deliver targeted training on newer TB diagnostics and public health innovations (e.g., SOS training). Support frontline teams in operationalizing emerging technologies and develop capacities in leadership, procurement, supply management, and project implementation.



Multisectoral Accountability Framework (MAF): Facilitate multisectoral engagement across the TB planning and implementation cycle to ensure sustainable resources beyond Ministries of Health.



Community-Led Monitoring & Stigma Reduction: Support TB programs with integrated community-led monitoring and targeted stigma reduction strategies.



Quality Assurance: Lead quality assurance and accreditation efforts not only for laboratories and service delivery sites but also for TB programs overall—ensuring adherence to global standards.



Equity and Inclusion: Ensure all interventions address the needs of vulnerable, high-risk, and underserved populations.

Success Story: KNCV co-developed the People-Centered Framework (PCF) for TB strategic planning, now integrated into WHO guidance. This data-driven, people-first planning model has been adopted by multiple National TB Programs as a transformative approach to designing integrated TB responses.

Potential offerings:



TB & Cross-disease Care Continuum:

- Develop regional laboratory strengthening strategies, SOPs, QA guidelines, and accreditation frameworks.
- Create actionable guidelines and training modules for integrating TB screening, referral, and adherence into community services, PHCs, and other disease programs (e.g., HIV, immunization).
- Assess and enhance health system readiness for TB vaccine introduction.



Health & Climate, Gender, Nutrition:

- Identify systemic vulnerabilities and develop heat-crisis-resilient TB care models.
- Address the impact of climate change on TB by building integrated, adaptive, and resilient TB responses.



KNCV’s Impact: Since 2019, KNCV has supported over 10 countries in developing evidence-based, prioritized, and costed National Strategic Plans (NSPs). These NSPs form the foundation for robust national TB responses, aligned with WHO’s End TB Strategy and broader Universal Health Coverage goals.



Health financing:

- Assist national programs in making evidence-based financing decisions.
- Collaborate with social health insurance actors to improve access to TB care.



AMR & Pandemic Preparedness:

- Utilize TB expertise to build AMR

stewardship frameworks.

- Design infection control and outbreak response strategies that leverage existing TB infrastructure.

Strategic Priority 3
Knowledge & Capacity Exchange

KNCV seeks to function as a global hub for knowledge exchange—bringing together a wide range of stakeholders to accelerate collective learning and impact across TB and related health challenges, all with the ultimate goal of ending TB.

Primary objectives:



Deliver practitioner-focused learning opportunities: Design and scale practical, applied learning programs in KNCV’s areas of expertise (e.g., advanced TB diagnostics, digital tools in low-bandwidth settings) to build national capacity to respond to emerging challenges on-the-ground and support country-led health agendas.



Codify & Disseminate Knowledge: Translate implementation insights into accessible knowledge products, tools, and

decision-making frameworks such as the People-Centered Framework (PCF), to foster data-driven, people-centered TB strategies.



Foster Strategic Alignment: Leverage KNCV’s trusted relationships with governments, donors, academia, and civil society to foster coordinated action on priority health topics. This includes collaboration with Dutch knowledge institutes such as AIGHD, KIT, and academic partners.

Potential offerings:



TB & Cross-disease Care Continuum:

- **Create** a curated e-campus/knowledge platform to host KNCV’s tools, training materials, publications, and case studies, potentially in partnership with academic institutions.



- **Facilitate** cross-program collaboration among global (Gavi, WHO, Global Fund) and national stakeholders to reduce fragmentation.



- **Collaborate** with European NGOs on TB advocacy and funding.



Health, Climate, Gender and Nutrition: Lead forums with civil society, gender experts, and nutritionists to embed equity and inclusiveness in TB programming. country-led health agendas.



8. KEY STRATEGIC LEVERS

To ensure that KNCV's vision is brought to life, the strategic plan is both action-oriented and pragmatic. The six strategic levers outlined below are crucial for KNCV to evolve in a manner that allows it to remain externally relevant, while becoming a more sustainable and efficient organization internally. By empowering national entities, developing marketable offerings, and expanding its focus to address broader health challenges, KNCV can navigate the ever-evolving

landscape effectively. Internally, by diversifying funding, adopting technology for efficiency, and nurturing skills, KNCV can secure long-term financial stability and operational excellence. Together, these strategic levers will enable KNCV to continue making a significant impact in global health for decades to come. These levers will be incorporated into the annual plan, along with appropriate KPIs to ensure effective monitoring.

Six strategic levers:

Staying relevant **externally** to navigate an ever-evolving landscape...

- 1 Drive greater national and local empowerment through a stronger and broader global network to support ground-level action.
- 2 Build marketable, specialized offerings leveraging KNCV's extensive TB expertise, including interventions for the Netherlands and Europe.
- 3 Materially expand the focus to TB+ to leverage KNCV's technical expertise to address a wide spectrum of drivers of TB and other health challenges.

...while striving for continual gains in **internal** efficiency and organizational sustainability.

- 4 Build a robust and diversified funding portfolio to ensure KNCV's long-term financial sustainability.
- 5 Enhance organizational efficiency by optimizing costs, increasing productivity, and maximizing the impact of fundraising efforts.
- 6 Create a strong foundation for future leadership to uphold and advance KNCV's legacy.

1

Drive Greater National and Local Empowerment Through a Stronger and Broader Global Network to Support Groud-level Action.

Building on the successful implementation of the KNCV network organizations—currently including at least six functional national entities—KNCV is committed to strengthening an **Equal Alliance Network** by deepening collaborations among global and in-country actors, along with other key stakeholders.

Country presence has long been KNCV’s key differentiator, enabling seamless execution in diverse

contexts and providing on-the-ground insights from across geographies. This new approach aims to further those strengths by fostering an alliance based on strategic complementarity between global and in-country actors, co-creating solutions that are both scalable and rooted in local context. This model reinforces KNCV’s commitment to localization by elevating in-country entities as equal partners and building institutional capacity close to where the impact occurs.

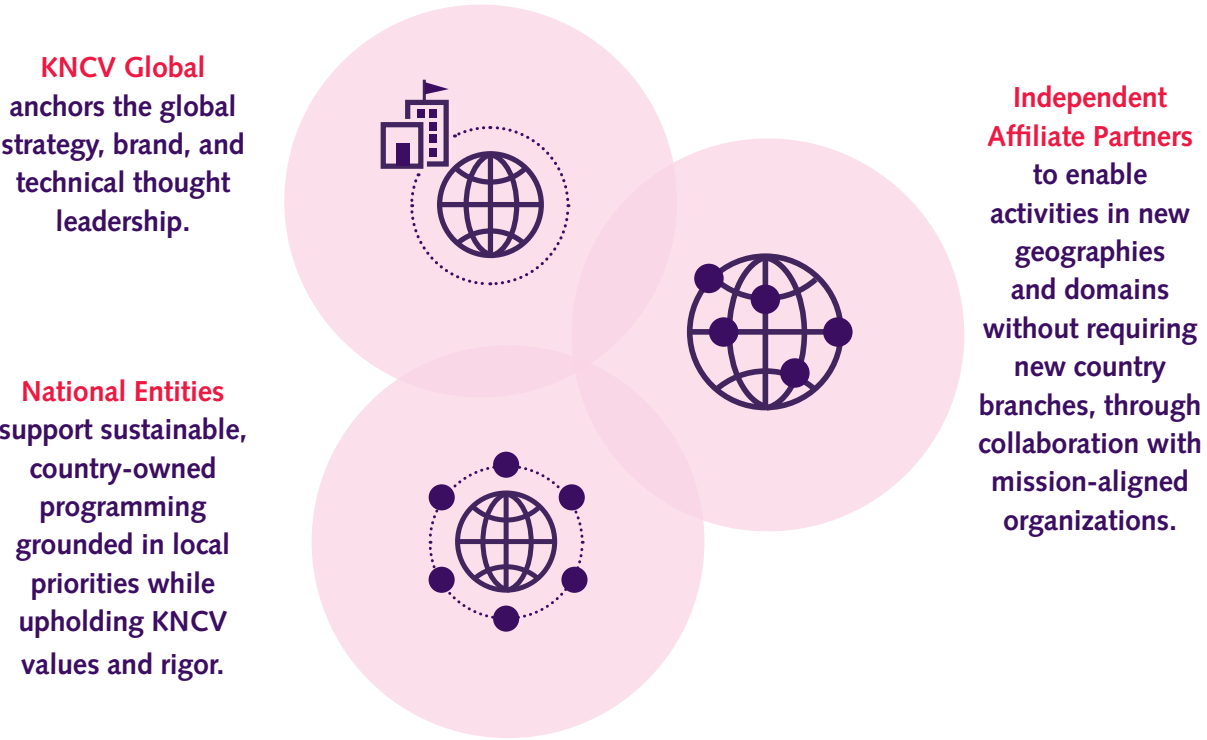
What is the Equal Alliance Network?

A **globally coherent but locally owned model** for TB+ programming that fosters mutual accountability. National entities and KNCV Global share a **level playing field** in setting the alliance’s agenda.

- It aims to:
- Truly empower national entities
 - Ensure complementarity of effort
 - Strengthen KNCV’s positioning as a multi-country implementation partner across relevant disease areas and donors

- Affiliate partners may be integrated into the Equal Alliance Network based on **clear alignment principles**:
- Demonstrated commitment to KNCV’s core mission and willingness to adopt integrated, multi-disease health systems approaches
 - A systems-based approach to implementation, particularly with embedded networks in national programs
 - Complementary strengths that enhance KNCV’s capabilities in deploying innovations

The Equal Alliance Network will function through clearly defined and complementary roles between KNCV Global and in-country actors, **leveraging the distinct strengths of each**.



KNCV Global will:

- **Co-define** the TB+ innovation agenda, ensuring integration and alignment with other of key drivers such as climate, gender, and nutrition
- **Facilitate** operational research, product evaluation, and knowledge generation (e.g., vaccine readiness).
- **Co-build** and maintain global knowledge platforms and technical assets
- **Co-develop** strategic partnerships with multilaterals, donors, technology developers, and academic institutions
- **Support** national and regional policy advocacy through dedicated partnerships with key advocacy organizations

In-Country Actors (National Entities and Independent Affiliate Partners) will

- **Localize** and implement global policies, tools, frameworks, and training based on national context
- **Support** development, demonstration, and validation of innovations, and conduct health system assessments (e.g., lab accreditation, vaccine readiness)
- **Collaborate** with local institutions and civil society organizations to convene forums, build capacity, and foster south-south learning
- **Secure** local and domestic funding

“KNCV’s Equal Alliance Network shall strive to turn ambition into action through shared infrastructure, rotating leadership, and mutual accountability”

The Equal Alliance Network fosters shared ownership and responsibility among all participating actors. This is achieved through **mutual accountability mechanisms**, suggested below, that ensure transparency, collaboration, and collective decision-making.

1. Network Charter

- A shared governance document outlining the principles, roles, and responsibilities of all members.
- It includes co-developed quality standards, collaboration expectations, and mechanisms for monitoring and learning.

2. Rotating Secretariat for South-Led Action

- A time-bound coordination role rotated among qualified alliance members (e.g., KNCV Global, strong national entities) to steward the alliance’s agenda, managing logistics, convening stakeholders.
- Host provides core staffing, convenes working groups, tracks shared priorities, and maintains alliance documentation.

3. Communities of practice (CoPs) for South-South, North-South Collaboration

- Thematic CoPs facilitated by alliance members, with shared resource libraries and monthly engagements. These promote cross-learning, replication of successful models, and the development of collective expertise in areas of cutting-edge action.

4. Trademark Licensing Agreement (National Entities Only)

- A legally binding agreement governing the use of the KNCV name and brand by national entities.
- It ensures brand integrity through clear criteria on technical quality, compliance, and alignment with KNCV’s mission.

2 Build marketable, specialized offerings that leverage KNCV’s extensive expertise in TB expertise, including interventions for the Netherlands and Europe.

KNCV aims to transform its deep technical expertise into targeted offerings for both public and private sector clients.

Targeted offerings for private sector for consideration:
Specifically for **private sector clients**, this approach diversifies the funding base and aligns public health priorities with private-sector needs through a social enterprise model.

	 Research & Evidence Generation	 Go-to-market Partner
Approaches	Conduct “Phase 4” research and generate evidence to support the development of pharmaceuticals and medical equipment for the private life sciences sector. Local partners can be involved in early clinical trial stages, making the drug development support service more comprehensive	Offer a tested pathway to scale for private-sector innovators and product development partners-PDPs (diagnostics makers, life sciences companies) looking to enter or expand in high-burden markets, building on their expertise in scale-up planning, technical assistance for the scale-up process and workforce training on innovative tools
KNCV’s value proposition	Multi-country presence backed by a legacy of research and evidence generation work for the global health sector in TB+ and a stellar track record of evidence generation and scaling of innovations	Comprehensive support to de-risk market entry, generate early implementation evidence, and drive sustainable demand
Operational Enablers	Skilled global team and local partners, upskilling in digital tools for improved efficacy	Facilitate partnerships with innovators, donors, and governments
Case Study	KNCV’s legacy in developing and refining the DOTS strategy, a globally adopted method for TB prevention and care it continues to implement in various countries	KNCV successfully supported scale-up of the BPaL regimen for MDR-TB in countries like Kyrgyzstan and Nigeria

In light of tightening donor funding, **public sector clients** are seeking high-impact, cost-effective services. KNCV is well-positioned to market the following:

	 KNCV Academy	 Quality Assurance
Approaches	Provide practical, hands-on training grounded in real-world implementation experience, targeted at practitioners, delivered in partnership with Global South academic and public health institutions via an e-Campus platform.	Support countries to design and implement robust QA systems, enable lab service accreditation, and embed quality standards into care and training.
KNCV’s value proposition	Technical Programming: Highly targeted programs based on KNCV’s technical experience and successful implementation proof points.	Deep experience in translating international guidelines into operational, context-specific, locally relevant guidelines as well as experience with innovations
Operational Enablers	Education/Pedagogy Specialists, Partnerships team to operationalize collaboration with institutions	QA Technical Experts and in-country experts working to roll out offerings

Digital and AI-Driven Decision-Making Tools

KNCV is shaping services in digital health and AI to enable more responsive, data-driven TB and health system interventions.

Examples for both public and private sector clients:

Approaches

KNCV's value proposition

Operational Enablers



Data & AI-enabled Decision Support

Predictive Models: Integrate health data and social determinants to support NTP managers' decisions.

KNCV' experience with the PCF DHIS2 allowing NTP managers to make evidence-based decisions

Partnerships to collaborate with tech providers as well as internal/consulting data scientists

Strategic Priority 4
TB in the Netherlands & Europe

KNCV as part of its tripartite agreement with RIVM and GGD and close relationship with other organizations and academic institutes (Aidsfonds, Cordaid, Wemos, AIGHD, KIT, Universities in the Netherlands & the region, ECDC, & WHO Euro) will continue to ensure quality of TB care in the Netherlands and other WHO Europe countries through:

- Evidence generation and dissemination
- Contribution to policy development
- Capacity strengthening of health workers
- Advocacy for improved TB medicines and regimens

Key interventions of KNCV in the Netherlands and Europe will include:

1. Maintain TB care knowledge and skills among healthcare workers via educational sessions and CME.
2. Ensure quality care for vulnerable groups, including stigma reduction.
3. Advocate for access to new, patient-friendly TB medicines and treatment regimen in the Netherlands and the region.
4. Develop comprehensive evidence-based packages for TB care for migrant and vulnerable populations.

5. Support scale up of post-TB lung health care.
6. Identify the most cost-effective methods for sustaining TB elimination and related health problems efforts in low incidence countries as a basis for EU and countries' strategic decisions and policy development.

Potential offerings:

1. Standardized training packages for various health care workers cadres on TB care and prevention.
2. Demand-driven Technical Assistance within countries in the region.
3. Platform for knowledge and best practices sharing among TB low incidence countries and high burden countries heading to low incidence.
4. Implementation science research focused on TB among vulnerable groups including migrants.

3

Materially Expand the Focus to TB+ to Leverage KNCV's Technical Expertise to Address a Wide Spectrum of Drivers of TB and Other Health Challenges.

Expanding KNCV's focus to TB+ is a strategic evolution that builds on over 120 years of excellence in TB programming and reinforces its role as a frontrunner in integrating TB with related health conditions—such as lung health—across healthcare systems and communities. This strategic shift not only capitalizes on KNCV's unparalleled technical expertise but also enhances its ability to address a broader range of related health challenges.

The world is currently facing converging health crises—rising co-infections, increasing antimicrobial resistance (AMR), unstable global environments, and widening inequalities. KNCV's global reputation in TB programming positions it well to respond to these challenges holistically. Through cross-disease integration, innovative health financing, and by addressing social determinants—including human rights—KNCV can continue to lead in global health security and improve outcomes for diverse populations.

What is TB+?

The TB+ initiative is an integrated program and strategic construct that expands KNCV's capabilities beyond tuberculosis to include lung health and other related conditions. It aims to address the broader continuum of health threats while maintaining a strong commitment to ending TB. TB+ means leveraging KNCV's decades of experience, expertise, and tools developed for TB to address other related health challenges, especially infectious diseases, while also using broader health system investments to strengthen TB care and prevention.

Cross-disease Integration
Integrated services—built on TB infrastructure—for both communicable and non-communicable diseases (e.g., HIV/ AIDS, diabetes, lung health) enable more efficient, patient-centered care delivered at potentially lower cost.



AMR & Pandemic Preparedness
Leverage KNCV's MDR-TB expertise to detect and treat broader antimicrobial resistance (AMR), monitor outbreaks, and strengthen response protocols across diseases, in alignment with EU and global health security goals.



Health Financing
Support sustainable financing decisions by working with social health insurance actors to ensure affordable, accessible, and integrated service delivery across TB and non-TB health areas.



Health & Climate, Gender, Nutrition
Address environmental vulnerability, gender inequities, human rights issues, and undernutrition—factors that drive both TB and other diseases—and place them at the center of TB and broader health programming.



KNCV is well-positioned to **extend its proven capabilities across the care continuum** to address a broader range of health challenges beyond TB and to drive more resilient and efficient health systems.

	Cross-disease Integration	AMR & PPR	HCGN ¹	Health Financing
Prevention	• Create concise, actionable guidelines and training modules for the integration of TB screening, referral, and adherence into routine community services and primary health care (PHCs). • Embed TB preventive screening into broader community outreach efforts for HIV, malaria, viral hepatitis, immunizations, etc.	• Leverage infection control frameworks for pandemic preparedness and response (PP&R), building on their utilization during CO-VID-19. • Strengthen antimicrobial resistance (AMR) stewardship within TB prevention.	• Address social and environmental drivers of TB through multi-stakeholder engagements.	
Diagnosis	• Expand lab network strengthening efforts beyond TB. • Introduce multiplex platforms for multi-disease testing (e.g., TB + HIV). • Replicate partnership models, such as with Cepheid, across other disease areas.	• Promote Whole Genome Sequencing for broader pathogen surveillance.		
Treatment	• Apply TB treatment learnings to non-communicable diseases (NCDs). • Improve community-based treatment approaches across diseases.	• Apply treatment innovations to emerging pandemics and chronic diseases.		
Care & Support	• Apply stigma reduction models (e.g., Photovoices) to HIV, leprosy, obesity, etc., in partnership with disease-focused organizations. • Expand community engagement strategies to include multiple diseases.	• Strengthen pandemic risk communication strategies that are culturally sensitive and grounded in trusted local networks.	• Identify climate and gender vulnerabilities within health systems.	• Support National TB Programs (NTPs) in partnering with social health insurance actors to strengthen access to TB care.
Surveillance	• Extend integrated disease surveillance by adapting TB case notification systems to capture data on co-infections (e.g., HIV, viral hepatitis), enabling the creation of joint dashboards.	• Leverage TB laboratory networks for real-time pandemic detection, feeding into national early-warning systems.		

1 – HCGN: Health X Climate, Gender and Nutrition

4

Building a Robust and Diversified Funding Portfolio to Ensure KNCV’s Long-Term Financial Stability.
The pathway will be based on three pillars.

To build a diversified funding portfolio, KNCV should focus on expanding its institutional donor base within existing income streams, as well as increasing unrestricted funding through private and corporate fundraising. KNCV also seeks to mobilize investments for the broader

ecosystem through its convening activities and strategic partnerships, leveraging innovative financing tools. All three pillars will collectively contribute to a sustainable and diversified funding base, ensuring the organization’s financial stability and growth.



a) Strengthen existing income streams



b) Increase unrestricted funding



c) Mobilise Investments for the Ecosystem

a) Strengthen Existing Income Streams from Institutional Donors – NGO, Government, and Lottery Funding

These restricted, project-based funding opportunities will continue to provide stability and ensure utilization of the majority of KNCV’s key staff. KNCV will continue to apply for such opportunities in its current countries of operation, while also exploring new geographies.

KNCV will rebalance its portfolio by adding new donors and focusing on more value-added projects. The aim is to phase out generic Technical Assistance (TA) to local partners and instead undertake more value-added work internally (e.g., new diagnostics and interventions such as Project ASCENT).

To strengthen its positioning, KNCV will focus on producing cost-optimized high-quality output, continue to acquire and maintain future-relevant skillsets and engage in more proactive communication of past work, with an emphasis on demonstrated outcomes.

NGO Contributions: KNCV will reduce reactive grant

applications and focus on building long-term partnerships. It will proactively reach out to donor NGOs with opportunities and conceptual workplans. In addition, KNCV will tap into TB+ donor focus areas such as child health (e.g., the MacArthur Foundation) and nutrition, seeking funding from organizations like the Gates Foundation, GAIN, and The Global Fund.

Government Grants: KNCV will expand its scope from TB-focused grant calls to broader TB+ or public health calls for proposals. In cases where there are missing skill sets, KNCV will co-write applications with partners that bring complementary expertise. KNCV will also advocate for underfunded areas and, where necessary, co-apply to donors alongside Ministries of Health (MOHs).

Lottery Income: KNCV will expand its focus beyond Dutch lotteries to include Europe-based lottery organizations that are committed to health, both within Europe and internationally.

Income Stream	Current Model	Way Forward
NGO Contribution	Methods - Grant Application - Proposal Writing Partners Gates Foundation, Unitaid, TB Alliance, Dr. C. de Langen Foundation	Methods - Reduce reactive grant applications - Build long-term partnerships - Proactively reach out to donor NGOs with opportunities and conceptual workplans - Tap into TB+ donor focus areas such as child health (e.g., MacArthur Foundation) and nutrition for funding from organizations like the Gates Foundation, GAIN, and The Global Fund
Government Grants	Methods - Grant Application - Proposal Writing Partners USAID, The Global Fund, Centre for Disease Control	Methods - Expand focus from TB-specific grant calls to broader TB+ or public health calls for applications. In cases of missing skill sets, co-write proposals with partners who bring complementary expertise - Advocate for underfunded areas and, if necessary, co-apply to donors together with Ministries of Health (MOHs)
Lottery Income	Methods - Grant Application - Proposal Writing Partners Nationale Postcode Loterij, VriendenLoterij, De Lotto	Methods Expand focus beyond Dutch lotteries to include Europe-based lottery organizations that support health initiatives both in Europe and internationally

b) Increase Unrestricted Funding – Private Fundraising from Individuals and Corporates

KNCV will strengthen its brand and storytelling efforts to raise awareness among citizens of the Global North about the ongoing health challenges posed by tuberculosis (TB), highlighting KNCV’s interventions and successes. To secure high-value contributions from individuals and corporates, KNCV will:

- Run data-led crowdfunding campaigns targeting individuals
- Approach **corporate foundations and CSR heads** in Europe and in regions where KNCV operates

Additionally, KNCV will:

- Prepare project plans that outline funding needs and map each donor to a potential outcome, ensuring transparency and accountability
- Scale up engagement with family offices and high-net-worth individuals (HNIs) to further support KNCV’s initiatives

Income Stream	Current Model	Way Forward
Private Fundraising – Individual	Methods - Marketing & Fundraising Campaigns - Automated collection - Legacies & endowments - Gifts Partners Dutch citizens (primarily the ageing population)	Process - Direct mail campaigns - Online donation options on the website - Recurring donations via bank mandates - Online platforms and crowdfunding websites such as GoFundMe, Kickstarter, and Indiegogo - Social media campaigns based on cause and storytelling, using data-driven targeting - Partner with religious institutions such as churches and mosques to organize donation drives Partners (In order of preference): Dutch citizens across age groups, European citizens Global citizens, utilizing avenues like Transnational Giving Europe (TGE) for cross-border donations.
Private Fundraising – Corporate	Methods: NA Methods: NA	Methods - Seek one-time large donations - Recurring CSR-based partnerships - Encourage companies for matching gift programs with their employees’ donations to KNCV - Exhibit and network at CSR, sustainability and global health events^ Partners - Dutch corporates, followed by large European donor countries like Germany, France and Switzerland - HNIs and family office foundations across Europe

^Events - Impact Fair ; CSR Netherlands ; International Conference on CSR, Sustainability, Ethics, and Governance ; Donation facilitators - Transnational Giving Europe

c) Mobilize Investments for the Ecosystem - Innovative Financing Mechanisms (IFMs) like Bonds and Debt Swaps
Create Long-Term Contracting Options

Innovative Financing Mechanisms (IFMs) such as Social Impact Bonds (SIBs), Development Impact Bonds (DIBs) and Sovereign Debt Swaps, represent a significant departure from traditional funding sources. IFMs also involve:

- large ticket sizes,
- multiple high-level stakeholders, and
- projects that span several years

making them highly sensitive to a national government's risk profile and participation. These characteristics are similar to health sector programs supported by Multilateral Development Banks (MDBs) and other regional development banks, which will continue to be part of KNCV's advocacy and mobilization agenda alongside IFMs.

Leveraging its strong relationships with Health Ministries and key stakeholders—such as the World Health Organization (WHO), the Gates Foundation, and The Global Fund—KNCV will play a pivotal role in:

- initiating discussions
- convening taskforces, and
- supporting the development of social cases and measurable outcomes.

In these scenarios, KNCV will not be the direct recipient of funding; instead, funds will be directed to the government or a Special Purpose Vehicle (SPV) responsible for overseeing payments and project execution. This approach allows KNCV to benefit by being awarded the implementation contract, typically alongside a local partner.

Based on the instrument's scalability, track record, relevance to TB+, and KNCV's own experience, two IFMs have been shortlisted—Social Impact Bonds and Sovereign Debt Swaps. KNCV plans to leverage these instruments as outlined below:

Social/Development Impact Bonds (SIBs/DIBs): KNCV will support discussions on SIBs/DIBs for TB and related health challenges, collaborating with organizations such as The Global Fund (TGF), the World Bank (WB), and WHO. KNCV will provide Technical Assistance (TA), Monitoring, Evaluation, and Learning (MEL), and Project Management Office (PMO) support to facilitate these bonds.

Sovereign Debt Swaps: KNCV will shortlist countries based on its strong footprint, legacy relationships, or high TB incidence/prevalence. Discussions will be held with the Ministry of Health (MoH) and National TB Program (NTP) of the shortlisted countries to gauge interest in IFMs. KNCV will then engage with a guarantor—such as The Global Fund—and the lender country to structure proposals. KNCV will aim to provide TA, MEL, and PMO support.

In addition to the two shortlisted IFMs, KNCV is willing to support any TB+ linked finance structure by providing technical expertise and guidance during the discovery, design, and implementation stages. This support also includes actively promoting TB+ as a priority in broader health-focused financing discussions.

Proposed Income Stream	Way Forward
IFM – Social/ Development Impact Bond	Methods - Partner with NTPs and leverage connections with donors and guarantors to test the feasibility of securing funding. - Simultaneously pitch to lead or jointly coordinate project execution. - Participate in identifying the social cause, defining clear and measurable outcomes, and assessing feasibility, implementation, review, and scaling. Partners - TA in instrument structuring and MEL by MDBs and UN agencies such as the World Bank (WB), WHO, the African Development Bank (AfDB), and the Asian Development Bank (ADB) - Funders and Guarantors like The Global Fund (TGF), The Gates Foundation, and UBS Optimus Foundation
IFM – Sovereign Debt Swaps	Methods - Debt-for-Health Swap Method: Advocate for a Debt-for-High Mortality/Incidence Diseases Swap in relevant countries. Begin by shortlisting countries based on KNCV's footprint, legacy relationships, or high TB burden. - Engage stakeholders such as creditors, MDBs, and UN agencies to discuss the swap. - Implement development projects under the agreed contract. Partners - Government to redirect funding towards development - Funders can include lender countries* beyond Netherlands and MDBs - TA in instrument structuring and MEL by MDBs and UN agencies such as the WB, WHO, AfDB, and ADB

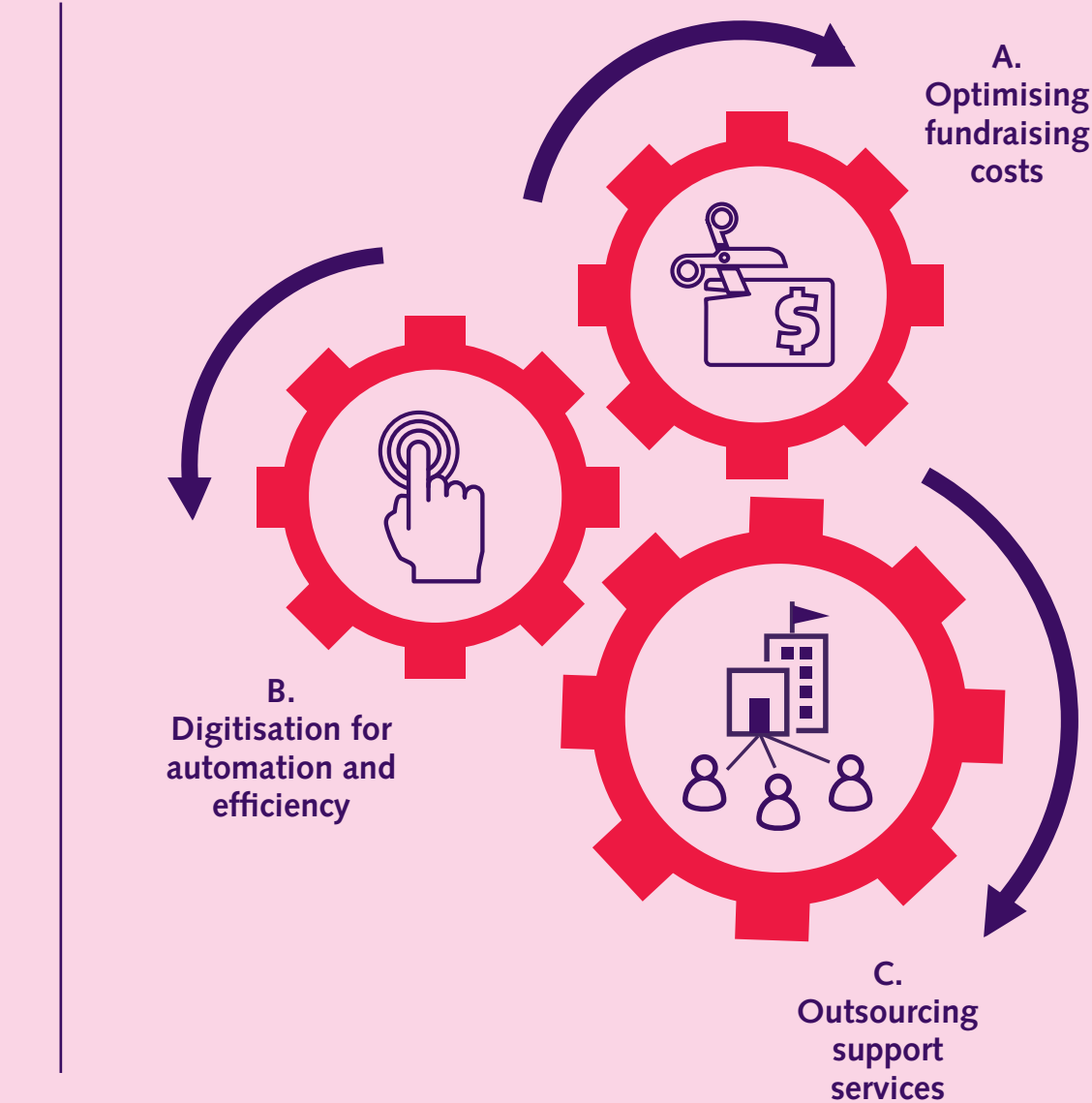
* To be evaluated on an ongoing basis based on the countries' stake in a possible arrangement, its budget outlook for external aid and other geo-political factors

5

Become a More Efficient Organization to Optimize Costs, Increase Productivity, and Maximize Fundraising Impact

To truly embody KNCV's vision, it is imperative to transform into a more efficient organization. This strategic action focuses on three pivotal areas: optimizing fundraising costs, embracing digitization for automation and efficiency, and outsourcing support services.

Immediate



Long-term



A. Optimizing Fundraising Costs

Imagine a future where every dollar spent on fundraising yields a higher return on investment. By reducing online fundraising costs from the current 20% to a more efficient 10–15% range, KNCV can channel more resources directly into impactful initiatives. This can be achieved through meticulously planned, short-term targeted campaigns. Additionally, bringing in a fundraising expert for a limited tenure can provide the specialized knowledge needed to refine strategies and achieve these cost reductions.



B. Digitization for Automation and Efficiency

In the digital age, leveraging technology is not just an option but a necessity. By adopting cutting-edge digital tools and technologies, KNCV aims to streamline operations and enhance productivity. However, the true potential of these tools can only be unlocked through comprehensive training programs that empower employees to use them effectively. Automating routine tasks like accounting, reporting, and support for writing grant requests will free up valuable time and resources to focus on strategic initiatives. This is the future KNCV can achieve by integrating technology into its core operations.



C. Outsourcing Support Services

By exploring opportunities to share back-office resources with other non-profits or outsource support services, KNCV aims to significantly reduce costs and improve operational efficiency. For instance, collaborating with a Netherlands-based NGO or outsourcing to a BPO like CBR can ensure that resources are utilized more effectively, allowing KNCV to concentrate on its mission-critical activities.

6

Create a Strong Foundation for Future Leadership to Uphold and Advance KNCV’s Legacy.

To uphold and advance KNCV’s esteemed legacy, KNCV recognizes the crucial need to build a **strong foundation for its future leadership**. This entails nurturing a second layer of leadership that is technically skilled and functionally empowered to step into leadership roles when needed. This focus on growing the next generation of leaders will help ensure KNCV’s long-term growth and stability. KNCV plans to implement the following **three essential measures** to achieve this:

Immediate

Implementation Timeline



Empower mid-management personnel to serve as deputies and support the technical and functional heads. By giving them room to grow and develop, KNCV will cultivate the next tier of leaders.



Foster a culture of continuous upskilling in new and advanced technologies, including data and AI. By promoting **knowledge sharing** on TB-related capabilities across the global network, KNCV will ensure its leaders remain at the forefront of technological advancements.



Create space for **strategic thinking and innovation by reducing administrative burden**. Automating routine tasks—such as documentation for funding and partnerships—will allow leaders to dedicate more time to innovation and strategic initiatives. Additionally, KNCV plans to **engage short-term contractual experts** (e.g., in communication, Artificial Intelligence (AI), and Innovative Financing Mechanisms (IFM)) to support the organization’s transition toward new and advanced capabilities.

Long-term





9. KEY ENABLERS

Foundational Enablers for Implementing KNCV's Strategic Plan to successfully achieve its mission.

1. Collaboration, Partnership & Merger



KNCV is committed to fostering equitable partnerships that drive innovation and elevate local leadership.

- KNCV will deepen its existing collaborations with multilaterals, NTPs, and advocacy groups, while proactively engaging private and new-age players such as HealthTechs
- KNCV aims to strengthen its network of independent, mission-aligned Southern partners by building their capabilities. Some of these partners will also contribute to KNCV's Equal Alliance, maintaining institutional autonomy and contributing to joint priorities through defined collaboration frameworks
- KNCV will also forge deep partnerships with health and academic institutions across both the Global South and North to co-create training and research programs.
- In response to growing competition and the increasing emphasis on national NGOs, KNCV will explore potential merger opportunities with other Dutch NGOs or NGOs in the Global South working in similar fields (e.g., HIV/AIDS, neglected tropical diseases, maternal and child health, environment and health) to promote an integrated approach to health.

2. Diversified Funding



KNCV's current funding is largely skewed toward restricted project funding. The organization aims to strategically diversify its revenue streams by tapping into private funding sources and income from social enterprise models.

- KNCV will pursue increased unrestricted funding from individual and corporate donors to accelerate its research and innovation agenda, providing the flexibility needed to invest in bold ideas.
- The organization will develop a suite of high-value service offerings tailored to the needs of both private and public sector stakeholders, generating stable, mission-aligned revenue streams while advancing public health innovation and implementation.

3. Participatory Monitoring, Evaluation, and Learning



KNCV aims to invest in PMEL systems that effectively capture outcomes and recommend human resources’ trainings. This will enhance KNCV’s ability to scale successful initiatives, pivot strategies when necessary, and clearly demonstrate value to funders, partners, and communities.

- KNCV will work closely with in-country actors, national entities, and other implementing partners to co-design PMEL frameworks that are relevant to local contexts and harmonized with global standards. These frameworks will emphasize data interoperability, methodological rigor, and continuous upskilling.
- An annual plan will outline strategic priorities, KPIs, and expected outcomes. Progress against these KPIs will be systematically tracked through the PMEL system, fostering accountability and enabling evidence-based course corrections.
- PMEL systems will also be used to identify areas requiring additional learning and capacity building. These insights will inform targeted training, mentorship, and knowledge-sharing initiatives to ensure staff are continuously equipped to respond to emerging priorities and lead in key focus areas.

Refer **Annex I** for more on PMEL framework & **Annex II** overall organizational KPIS.

4. Digital Enablement



Going digital will require both inward and outward transformation. Internally, KNCV will automate and optimize processes. Externally, it will deliver modern technological solutions on the ground.

- KNCV will upgrade its workspace infrastructure to ensure access to modern tools, plug-ins, and essential training—such as Perplexity and Copilot in Microsoft Teams.
- It will also digitize and optimize health solutions to reduce costs, increase efficiency, and enable effective scaling. These solutions will be adaptable to the limited infrastructure of low- and middle-income countries (LMICs), including low-bandwidth communication settings.

5. Proactive Communication



KNCV strives to raise awareness about the ongoing threat of TB and related health challenges and highlight its efforts in combating the disease through clear, consistent impact-focused communication across multiple platforms.

- KNCV will use various channels—including newsletters, social media, editorials, and webinars—to engage a broad range of audiences, from donors and policymakers to communities and technical partners.
- KNCV will package and share success stories, case studies, and data-driven insights that demonstrate its impact and amplify the urgency of sustained investment and innovation in TB care and prevention.

Refer **Annex III** for more



10. RISKS AND STRATEGIC CONSIDERATIONS

KNCV’s strategic plan aims to strengthen its role in the global health landscape particularly in fighting TB and related health challenges. However, the environment remains highly volatile and unpredictable, with risks emerging from shifting disease patterns, changing donor priorities, geopolitical instability, and rapid technological changes. This document outlines these risks, which could potentially impact the successful implementation of the strategic plan over the next five years.

Strategic Risks

As KNCV expands its TB-Plus approach—integrating TB, HIV, AMR, pandemic preparedness, and broader health system strengthening—it becomes more exposed to evolving global health threats and shifting global priorities. Early stakeholder engagement, streamlined communication, **rigorous monitoring and evaluation**, and **proactive risk management** are critical for maintaining relevance and feasibility in diverse settings.

Funding Risk

The global funding landscape is undergoing a strategic shift, with traditional donors such as USAID and several EU partners adjusting their priorities and funding approaches. KNCV will mitigate these changes by **diversifying funding sources**, building long-term partnerships, and maintaining **adaptive resource mobilization** strategies.

Market Risk

Operating in diverse economic contexts exposes KNCV to risks such as inflation, currency instability,

and delayed disbursements from local partners. Geopolitical tensions and conflict further create unstable environments that may disrupt program implementation. Robust internal controls, strong accountability mechanisms, and sound financial management will be critical for **resilience**.

Operational and Organizational Risk

Managing multi-country, multi-partner projects and driving innovation requires a highly skilled and adaptable workforce. KNCV invests in **continuous staff development and upskilling**, particularly in digital technologies, to harness opportunities while managing risks such as data security and digital exclusion.

Reputational Risk

KNCV’s reputation depends on the integrity of its staff and partners. Strict codes of conduct, safeguarding policies, and whistleblower procedures are in place to ensure **high standards of integrity and accountability**.

To safeguard against unforeseen changes, KNCV will conduct regular scenario planning exercises to anticipate and prepare for potential disruptions. By fostering a culture of learning, innovation, flexibility and adaptability, KNCV remains committed to navigating uncertainty and seizing opportunities to fulfill its mission—even in the face of external shocks and rapid change.

ANNEX 1/2/3



ANNEX 1

Participatory Monitoring, Evaluation, and Learning

KNCV’s focus on PMEL is integrated and responsive to both internal needs and external realities especially in a world facing increasing fragility, health system shocks, and funding volatility. Below are the key focus areas for MEL under this new strategic plan:

Focus Area	Strategic Objective	Key Actions
1. Results-Oriented Learning Culture	Foster a learning organization where evidence drives decisions	• Embed learning loops at all program levels (project, country, global) • Facilitate regular after-action reviews, reflection spaces, and learning exchanges • Promote adaptive management by using real-time data
2. Outcome and Impact Measurement	Demonstrate contribution to ending TB and strengthening health systems	• Shift emphasis from output tracking to outcome and impact measurement (e.g., lives saved, TB incidence, treatment outcomes) • Develop standard metrics aligned with SDGs and national priorities • Use mixed-method evaluations to capture both quantitative and qualitative impact
3. Integration of Fragility-Responsive Indicators	Ensure MEL is sensitive to fragile and conflict-affected settings	• Include contextual fragility indicators (e.g., access, equity, safety of health workers)
4. Digital and Technological Innovation	Modernize MEL systems to be efficient and scalable	• Use digital dashboards, mobile data collection, and AI-assisted analytics • Leverage existing digital health platforms for integrated data capture • Enable remote monitoring where access is constrained
5. Partner and Community-Informed MEL	Enhance participation, accountability, and relevance	• Co-design MEL frameworks with country partners and communities • Use participatory methods (e.g., Most Significant Change stories) • Promote local ownership of data and findings
6. Learning for Resource Mobilization	Use evidence to inform fundraising and donor engagement	• Package MEL findings to demonstrate return on investment • Share impact stories and lessons learned with donors and partners • Build strong evidence bases for proposals
7. Internal Capacity Building	Strengthen KNCV staff and partners’ MEL capabilities	• Provide training on adaptive MEL, data visualization, and evaluation ethics • Develop guidance tools and communities of practice across the network
8. Alignment with Global and National Frameworks	Ensure relevance and synergy with TB and health agendas	• Align MEL with WHO End TB Strategy, Global Fund MEL frameworks • Share evidence through publications and learning events

ANNEX 2

KNCV Strategic Monitoring Framework/KPIS

This framework outlines high-level Key Performance Indicators (KPIs) aligned with KNCV's strategic goals and objectives, as well as global End TB targets & SDG goals.

Strategic Objective Area	Key Performance Indicator (KPI)
Global Contribution to End TB & SDGs	- % improvement on End TB targets annually in KNCV-supported countries & globally - % improvement on WHO top 10 key performance indicators for KNCV-supported countries & globally - Number of national strategic plans supported/revised
Implementation Science & Innovation	- Number of implementation research projects initiated and completed - Number of peer-reviewed publications, technical briefs, and toolkits produced/shared globally - Number of new tools/approaches piloted and scaled - Number of innovations adopted into global and national policies and guidelines
South-South & North-South Knowledge Exchange	- Number of South-to-South and North-South learning exchanges facilitated - Number of people participating in S2S and N2S learning exchanges - Number of country best practices documented and shared globally
Financial Viability & Sustainability	- Diversification of funding sources (institution, private/corporate, individuals, domestic, philanthropic)- in percentages - Productivity (Direct days as % of total days; % of indirect costs) - Annual project net result in % of project income; annual overall financial net result.
KNCV Network Strengthening & Equal Alliance	- Number of joint projects or proposals developed by KNCV network organizations - Number of multi-country best practices and peer-reviewed articles published - Internal network satisfaction and collaboration index (via staff survey) - Frequency of internal knowledge exchange forums across the KNCV network
Community Engagement (community rights, gender, and stigma)	- % of KNCV-supported programs with integrated community-led monitoring and stigma reduction measures - Number of interventions addressing vulnerable, high-risk, or underserved populations.

ANNEX 3

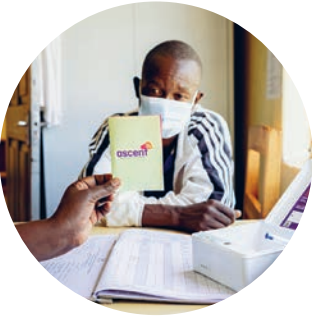
Proactive Communication

KNCV will implement a proactive communication strategy to highlight its global impact on health issues. This approach ensures that KNCV's expertise is consistently recognized and valued worldwide.



FROM THE HAGUE TO THE WORLD

What began in The Hague for the Netherlands has now become a truly global organization. With operations in over 20 countries, KNCV is the preferred partner for multi-country TB+ projects, empowering local partners to take the lead.



INNOVATION AT THE FOREFRONT

KNCV's commitment to innovation is evident through its successful delivery of advanced medical regimens. By collaborating with innovators in both development and implementation, KNCV positions itself as a key enabler across the entire value chain.



CHAMPIONING TB+

Combating a disease requires a comprehensive approach. KNCV extends its efforts to adjacent topics like HIV, AMR, and other respiratory diseases. With extensive coverage of the TB+ value chain, KNCV is the ideal partner for tackling infectious diseases and implementing integrated healthcare interventions.



SHAPING TOMORROW WITH A LEGACY OF 120+ YEARS

KNCV's 120-year history is a testament to its unwavering commitment to combating TB. Its vision and forward-thinking approach have consistently maintained its relevance in the ever-evolving healthcare landscape.

ACKNOWLEDGEMENT

This strategic plan is the result of a collaborative effort involving numerous individuals and institutions whose dedication and expertise have played an essential role in its development. We acknowledge and extend our sincere gratitude to the entire KNCV staff for contributing to the strategic direction of this plan. Their insights and efforts have been invaluable to its foundation and vision.

The Board of Trustees strategic guidance provided a strong foundation for this work.

- Mirella Visser, Chair, Board of Trustees
- Tjipke Bergsma, Vice Chair, Board of Trustees
- Dr. Frank Cobelens, Member, Board of Trustees
- Dr. Zemzem Shigute Shuka, Member Audit Committee, Board of Trustees
- Rolph van der Hoeven, Member Audit Committee, Board of Trustees
- Sophie Toumanian, Member, Board of Trustees

Strategic Team's leadership, analytical rigor, and sustained commitment have been pivotal in shaping the direction and content of this strategy.

- Dr. Gidado Mustapha, Executive Director
- Mario Willemsen, Director F&A
- Dr. Emmy van der Grinten, Director Operations
- Dr. Agnes Gebhard, Director TBE&HIS
- Beatrijs Stickers, Board Secretary & Public Affairs
- Alexandra Hostier, Institutional Fundraising
- Lilian Polderman, Communication & Private Fundraising

Team Leads across various departments offered domain expertise that helped ensure the strategy is both comprehensive and practicable.

- Dr. Kristin Kremer, Teamlead, Diagnostics
- Dr. Degu Dare, Teamlead, Evidence and Impact
- Dr. Christiaan Mulder, Teamlead, Prevention & Access

- Dr. Mansa Mbenga, Teamlead, Treatment and Care
- Job van Rest, Teamlead, Digital Health Solutions
- Kathy Fiekert, Teamlead, Health and Community Systems
- Niesje Jansen, Teamlead, NL/Europa
- Dr Vijayashree Yellappa

General Operations contributed critical insights into the functional domains, strengthening the feasibility of the strategy.

- Stephanie Borsboom, Grant Manager
- Natalia Andreeva, Grant Manager
- Jense van der Wal, Grant Manager
- Katja Lumelova, Grant Manager
- Ramon Harpers, Grant Administrator
- Prewesh Jagessar, Teamlead Finance
- Nicolien Weststeijn, Human Resource

Country Representative Officers shared grounded perspectives and local implementation experiences, helping to contextualize the strategy to real-world challenges and opportunities.

- Dr. Asfawesen, Country Representative Officer, KNCV Ethiopia
- Dr. Svetlana Pak, Country Representative Officer, KNCV Kazakhstan
- Prisca Ajiboye, Country Representative Officer, KNCV Nigeria
- Dr. Lillian Mtei, Country Representative Officer, KNCV Tanzania
- Huong Nguyen, Country Representative Officer, KNCV Vietnam

The strategy also benefited from input provided by KNCV National Entities. Their operational perspectives and contextual experiences added significant value to aligning the strategy with local needs and ownership models

- Dr. Sani Useni, Director of Technical Programs, KNCV Nigeria
- Muratbek Ahmatov, Executive Director, KNCV Kyrgyzstan
- Shodmon Khushvahtov, Executive Director, KNCV Tajikistan
- Dr. Ahmed Bedru, Executive Director, KNCV Ethiopia

KNCV Alumni shared insightful reflections on lessons learned and opportunities for strengthening future organizational approaches.

- Dr. Maarten van Cleeff, KNCV Alumni
- Dr. Christine Whalen, KNCV Alumni
- Dr. Kitty van Weezenbeek, KNCV Alumni

Engagement with National Tuberculosis Programs (NTPs), the TB Program Netherlands, and TB Treatment and Care Europe provided valuable input in identifying priorities.

- Dr. Rosalind Vianzon, NTP Manager, NTP Philippines
- Taye Letta, NTP Manager, NTP Ethiopia
- Yuliia Kalancha, Executive Director, TB Europe Coalition
- Dr. Askar Yedilbayev, Regional TB Adviser, WHO

Regional Office for Europe

- Dr. Marieke van der Werf, Head – STI, BBV & TB Section, ECDC
- Wieneke Meijer, TB Physician, GGD, former KNCV BoT member and CPT Chair

The support and collaboration of Partner Organizations, including WHO, Stop TB Partnership, Aurum Institute, and Damien Foundation helped situate this strategy within the broader international agenda.

- Dr. Tereza Kasaeva, Director, WHO Department on HIV, Tuberculosis, Hepatitis, and Sexually Transmitted Infection, WHO
- Dr. Lucica Ditiu, Executive Secretary, Stop TB Partnership
- Dr. Gavin Churchyard, Group CEO, Aurum Institute
- Pascale Barnich, General Director, Damien Foundation

Philanthropic Partners offered key perspectives on funding strategies, priorities, and the evolving landscape of global health financing.

- Guy Stallworthy, Global TB Private Provider Engagement Lead, Gates Foundation
- Esther-Gilah Schneider, Charity Account Manager, Nationale Postcode Loterij
- Dr. Eliud Wandwalo, Head Tuberculosis, Global Fund
- Dr. Cherise Scott, Senior Technical Manager Strategy, UNITAID

We are sincerely thankful to all contributors for their invaluable roles in formulating this strategy.

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