

END TB BY 2030 WITH SOLIDIFIED POLITICAL WILL, INCREASED INVESTMENTS AND IMPROVED COMMUNITY MEANINGFUL ENGAGEMENT

World Tuberculosis (TB) Day in 2020 is observed today on 24th March, while the world is hit hard by the Coronavirus (COVID-19) pandemic, an infectious disease caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). COVID-19 and TB share similarities as both diseases impact the respiratory system, mainly the lungs. The Activists' Coalition on TB Asia Pacific (ACT! AP), APCASO, Global Coalition of TB Activists (GCTA), and the Global Fund Advocates Network Asia-Pacific (GFAN AP) while acknowledging the severity of COVID-19 and its impact(s) on global health, health systems and economies, reminds the importance of recognizing that TB still remains a major cause of ill health. TB is one of the top 10 causes of death worldwide and the leading cause of death from a single infectious agent ranking above HIV and AIDS. In 2018, globally, an estimated 10.0 million people fell ill with TB; 1.2 million HIV-negative people and an additional 251,000 people living with HIV died of TB.

The Asia-Pacific region continues to bear the brunt of TB infections with 44% of infections in WHO South-East Asia region and 18% of infections in WHO Western-Pacific region. India (27%), China (9%), Indonesia (8%), Philippines (6%), and Pakistan (6%) are among the eight countries accounting for two-thirds of the global total of TB infections in 2018.¹ India contributes to one-fourth of the global burden of multidrug-resistant tuberculosis (MDR-TB) with inadequate diagnostic infrastructure for drug susceptibility testing (DST).²

The Sustainable Development Goals (SDGs) had set the bold target of ending TB by 2030 and the Political Declaration of the United Nations High Level Meeting (UN HLM) on TB in 2018 has identified a number of forward looking targets including treating 40 million people for TB disease and reaching at least 30 million people with TB preventive treatment for a latent TB infection in the five-year period 2018–2022 and mobilize at least US\$ 13 billion annually for universal access to TB diagnosis, treatment and care by 2022 which will lead the world to ending TB by 2030.

ACT! AP, APCASO, GCTA and GFAN AP express grave concern that the current trajectory of the TB response is not leading towards ending the disease as an epidemic by 2030 as among other challenges, funding gaps of close to US\$ 5 billion annually impede progress in the overall TB response.

Those affected and living with TB still face severe challenges in accessing lifesaving medicine due to stigma, discrimination, and affordability of existing drugs especially for those from low-income backgrounds and affected by MDR-TB³ despite the target of achieving zero percentage of TB-affected households incurring catastrophic costs related to TB care by the year 2020 in the End Tuberculosis (TB) Strategy.

Effective and meaningful engagement of communities living with, affected by TB and survivors of TB in national and local level TB responses still remain far less as the responses are mainly biomedical. The responses to the current COVID-19 pandemic is indicative of the lack of capacity of existing health systems to effectively respond to a global health crisis in a timely manner, and is also applicable to the existing health systems to address the TB epidemic⁴ and emphasizes the urgency to establish people-centred, sustainable and resilient systems for health (including communities and civil society systems) to address existing epidemics and pandemics that may hit the world in the future.

With less than a decade to 2030, ACT! AP, APCASO, GCTA and GFAN AP calls upon all stakeholders of the TB response at local, national, regional and global level to commit to ending TB as an epidemic by 2030 through solidified political will, increased investments and improved meaningful community engagement.

¹ Global Tuberculosis Report 2019, World Health Organization

² Chatterjee, S Poonawala, H & Jain, Y 2017, "Drug-resistant tuberculosis: is India ready for the challenge?", *BMJ Global Health*

³ Viney, K Islam, T Binh Hoa, N FMorishita, F & Lönnroth, K 2019, "The Financial Burden of Tuberculosis for Patients in the Western-Pacific Region", *Tropical Medicine and Infectious Diseases*

⁴ Monedero, I Bhavaraju, R Mendoza-Ticona, A & Sánchez-Montalvá, A 2017, *Expert Review of Respiratory Medicine*, "The paradigm shift to end tuberculosis. Are we ready to assume the changes?", Vol 11, Issue 7



We call upon all member states to commit to transform the commitments of the Political Declaration of the UN HLM on TB to concretise actions through ensuring political commitment and increasing domestic resources for national TB responses, including resources for community-led organisations and civil society, in line with achieving Universal Health Coverage (UHC) and leaving no one behind.

Whilst governments are responding to the COVID-19 pandemic, we note that a sustainable and resilient health system responds to diseases across different spectrums, and not only to address specific diseases, and we call upon all donors to increase their investments for the TB response, financial and other wise, to close the funding gap of nearly US\$ 5 billion annually and to invest in building and strengthening communities and civil society systems for a robust TB and health response.

We urge all countries, including Global Fund funded implementing countries to employ the most effective, rights-based interventions to increase the momentum of response, ensure highest return on investments, and to sustain the gains made so far.

We call upon governments and national TB programs to guarantee effective and meaningful engagement of communities living with and affected by TB and TB survivors in designing, implementing and monitoring TB interventions to ensure community-led and -owned interventions.

We call upon all community networks to initiate and include areas of convergence with other health and social issues, such as migration, maternal and child health, and non-communicable diseases to achieve a multi-sectoral, comprehensive and inclusive TB response.

In solidarity, ACT! AP, APCASO, GCTA and GFAN AP are committed to work with civil society partners, governments and other regional and global bodies to make sure that ending TB as an epidemic by 2030 is a reality.

Activists' Coalition on TB Asia-Pacific

The Activists' Coalition on TB Asia-Pacific (ACT! AP) is a regional coalition of individuals and community and civil society groups working for effective, people-centred, rights-based, and sufficiently and strategically resourced TB responses. The coalition has brought together more than 30 activists organizations and individuals around one goal: end the tuberculosis epidemic in the Asia-Pacific region. ACT! AP works to ensure that the concerns and the priorities of those affected by tuberculosis stay at the centre of the agenda in the Asia-Pacific region. ACT! AP is currently being hosted by APCASO. For more information, contact APCASO secretariat@apcaso.org or visit the website at www.apcaso.org.

APCASO

APCASO is a regional civil society networks of health and social justice community-based and nongovernment organisations, with a focus on advocacy and community capacity development in Asia and the Pacific. APCASO envisions just and inclusive societies that respect, fulfil, and advance the rights of communities most in need – thereby hastening the end of the AIDS epidemic and other health challenges. For more information, please visit www.apcaso.org.

Global Coalition of TB Activists

The Global Coalition of TB Activists (GCTA) is a global platform of people affected by TB that amplifies community engagement and strengthens the capacity of TB activists at all levels. We envision a world free of Tuberculosis and work towards making this a reality and aims to ensure the voices of TB-affected communities influence the global TB and health agenda. For more information, please visit www.gctacommunity.org

Global Fund Advocates Network Asia-Pacific

Global Fund Advocates Network Asia-Pacific (GFAN AP) is a platform of community and civil society advocates for a fully resourced Global Fund. It supports community and civil society mobilisation in the areas of increased domestic financing for HIV, TB and malaria responses; increased donor contributions towards the Global Fund; and ensuring that policy frameworks on health financing take into account community, rights and gender issues. For more information, please visit www.gfanasiapacific.org