



*****ONGOING ENDORSEMENT*****

High-Level Roundtable:

TB Response in the African Region: Unprecedented Actions for Unprecedented Times

19 November 2020

*In collaboration with
The African Union
The Global Fund to Fight AIDS, Tuberculosis and Malaria
The Ministry of Health of the Federal Republic of Nigeria*

**Joint Ministerial Statement
On Priority Actions for
Effective TB Response and Impact Recovery
in African Region**

Cameroon, DR Congo, Ethiopia, Ghana, Kenya, Mozambique, Nigeria, South Africa, Tanzania, Uganda, Zambia.

An unprecedented global health emergency, caused by COVID-19 pandemic, jeopardizes the results achieved in saving millions of lives and providing access to essential TB care and prevention. In spite of all efforts, health systems resources are overstretched due to COVID-19 response, leading to serious disruptions in the functioning and access to TB diagnosis, treatment and prevention services. Globally, these disruptions could result in an additional 6.3 million people developing tuberculosis and 1.4 million deaths between 2020 and 2025.

Attainment of the 2022 UNHLM targets and commitments is imperilled. Financing of COVID-19 mitigation measures, coupled with economic slowdown, has diminished governments' ability to meet domestic funding commitments for tuberculosis, the world's top infectious disease killer.

The High-Level Ministerial Roundtable, held in the margins of the 33rd Stop TB Partnership's Board Meeting, reaffirmed our joint determination and collective efforts to regain impact on TB, ensure access to essential care and prevention and revitalize efforts towards saving lives. While we applaud each other countries' individual accomplishments in addressing TB, this Joint Ministerial Statement aims to accelerate the alleviation of the impact of COVID-19 pandemic, through an inclusive, multisectoral and action-driven TB response.

1. Maintenance and increase of Domestic Financing for TB

Pursuant to the united vision and shared solidarity to recover the impact of TB and accelerate towards the targets of the Political Declaration during the UN High-Level Meeting in September 2018 (UNGA) as well as the African Union Catalytic Framework to End HIV/AIDS, TB and Eliminate Malaria by 2030 targets, and to address the existing and projected TB funding gaps, secure sustainable domestic financing and strengthen the national programs, we commit to work towards increasing investments in TB response by:

1. Increasing domestic budget allocation to national TB programs.
2. Exploring innovative financing initiatives – including public private partnerships, subsidized and incentivized loans and grants from development banks.
3. Advocate for research and develop of innovative techniques in the diagnosis and treatment of TB.
4. Consider opportunities for integrating TB and Covid-19 responses, such as in testing, tracing and airborne infection control in health facilities.
5. Meeting the Global Fund’s funding requirements on co-financing.
6. Ensuring that TB and drug-resistant TB are included in essential care package under existing or planned social health insurance schemes.
7. Strengthen south-south learning and knowledge exchange on management of tuberculosis, in particular MDR-TB and childhood-TB between African Countries and other high burden countries.
8. Strengthen efforts on advocacy for increased funding for health to effectively respond to communicable diseases with key emphasis on TB that has mostly been underfunded.

2. Mobilizing New Resources

We recognize the risk of long-term funding gaps in TB response as a result of COVID-19 and associated financing needs and, as such, it is in our interest to ensure that essential TB services are fully funded by safeguarding prior domestic and external funding. We therefore reaffirm and commit towards additional investments, by leveraging financial instruments and new funding sources, to advance and maximize impact.

3. Mitigating Impact of COVID-19 Pandemic on TB Services and Program Management

We, the Ministers of health are determined to work together to minimize the impact of ongoing COVID-19 pandemic on TB services and programming. We affirm the importance of putting in place key actions for implementation that are tailored to the context of our countries, such as:

1. Continue to reprogramming and repurposing current resources to restore access to TB services, i.e. diagnosis, treatment and prevention.
2. Developing plans that are tailored to the local context to address key gaps, and implemented by feasible, innovative, and prioritized interventions.
3. Scaling-up investment in newer TB diagnostic tools, treatment regimens and digital technology for early diagnosis and treatment of all people with TB.

4. Rapidly scaling-up TB preventive treatment to reach all PLHIV and particularly contacts of people with TB of all ages. Investments on contact tracing systems will benefit TB, Covid-19 and other airborne infectious diseases.
5. Invest on affected-communities and address issues related to rights, gender and stigma, and scale up community TB health services to reach all people needing TB diagnosis, prevention and care (including meaningful engagement of communities, civil society organizations and people affected by TB in the TB response and in the Multisectoral Accountability Framework to end TB).
6. Investing on real-time TB notification data to guide the TB responses, using the experience of real-time Covid-19 surveillance and reporting.
7. Partnering with private sector health care providers to improve access to good quality TB care and reduce out-of-pocket costs of people with TB.

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