

APPROPRIATIONS REQUEST

Tuberculosis

RESULTS requests that members show their support for ending the TB epidemic by requesting \$1 billion in the State and Foreign Operations Appropriations bill for the TB program within USAID Global Health.

In November 2020 COVID-19 overtook tuberculosis (TB) as the leading infectious disease killer. But TB is still the foremost lethal infectious disease in most low- and middle-income countries, and disproportionately affects people in poor and vulnerable communities. While often thought of as a disease of the past, the most recent World Health Organization [Global TB Report](#) found that TB sickened 10 million people and killed 1.4 million in 2019. That was before the compounding effects of COVID-19 and the health system disruptions.

Over the past two decades and with U.S. leadership, progress has been made to fight TB where it occurs most often. Innovations can now dramatically shorten TB treatment, reduce side-effects and save more lives, provided they reach patients in time. Yet, current USAID TB funding represents just 3 percent of the \$9.1 billion provided to USAID and State Department global health programs. **The biggest obstacle to faster progress is lack of funding.** The U.S. cannot reach the next stage of its plan to find and treat people with all forms of TB and reach the global TB prevention goals, without significantly increasing funding above current levels.

TB and COVID-19

The COVID-19 pandemic is having a major impact on individuals with TB and on TB programs and putting decades of global health gains at risk. Given the infrastructure required to respond to an airborne, infectious lung disease, tapping into the expertise of TB programs, facilities, and staff were natural platforms for also addressing COVID-19. But, a USAID [survey](#) found this has come at the expense of the TB response, putting unprecedented pressure on the health workforce, infrastructure, and resources globally.

Many high TB burden countries have reported substantial breakdowns in capacity to diagnose TB, even after the relaxation of COVID-19 lockdowns, resulting in far fewer people starting treatment for the disease. This reduction in treatment will lead to individuals remaining infectious for longer periods, likely leading to a significant increase in community TB transmission. Because of such breakdowns, [modeling projects](#) that the world could see an **additional 6.3 million cases of TB, and an additional 1.4 million TB deaths, between 2020 and 2025, setting the fight against TB back 10 years or more.**

Why Funding Matters

U.S. investments in TB should be expanded in order to accelerate progress to end TB, achieve critical synergies in COVID-TB responses, and contribute to crucial TB research. With substantial new resources, USAID can:

- **Save lives** and recover momentum to expand treatment for all forms of TB, including for multidrug-resistant (MDR) TB, while expanding support for TB prevention as well as crucial TB research.
- **Assist an expanded list of priority countries** in training staff on new approaches required due to COVID-19, digital health, improving infection control, providing mobile diagnostic labs and community-based service delivery, and enhanced engagement of the private sector.
- **Support expanded integration by training staff** on using TB diagnostic networks for COVID-19 and TB and bi-directional testing to find more active cases of disease.
- **Support countries to apply for and implement grants from the Global Fund** and leverage existing U.S. and global investments in global TB response
- **Channel additional resources to local, community-based organizations**, which are now even more important in maintaining and improving TB services.

USAID-supported TB champion helps TB patients in India

Birsa Manjhi is a TB survivor who participated in a mentorship program supported by USAID. He is now a “TB champion” helping to ensure his community has access to better treatment and support services. When India began its nationwide lockdown in March 2020 to prevent the spread of COVID-19, many people with TB were concerned road closures and other obstacles would prevent access to the life-saving daily medications they depend on. Manjhi is a vital part of the healthcare system in his community in India’s Jharkhand State, as the nearest medical center is 20 kilometers away. Using his motorcycle, Manjhi collects and delivers one-month supplies of medicine to his patients. According to Manjhi, “the ready availability of medicines eases the anxiety of people with TB. They feel assured of treatment continuation.” He supplements medicine deliveries with phone counseling and educating patients and families on the importance of wearing protective masks, social distancing, hand washing, adhering to their treatment regiment, and proper nutrition.

Full story on the [USAID website](#).

RESULTS’ Request and Funding History

As members of Congress submit annual personal appropriations requests forms, they should protect critical funding for antipoverty programs in the International Affairs account. RESULTS asks Members to also specifically show their support for ending the TB

epidemic by requesting funding in the State and Foreign Operations Appropriations bill for the TB program within USAID Global Health.

To do so, please submit a formal appropriations request form for the USAID TB account to Senators Coons and Graham or Representatives Lee and Rogers as Chairs and Ranking Members of the State and Foreign Operations Subcommittees of Appropriations. Contact RESULTS' staff Crickett Nicovich for support: cnicovich@results.org

Fiscal Year	FY18	FY19	FY20	FY21	RESULTS' FY22 Request
USAID Tuberculosis	\$261 million	\$301 million	\$310 million	\$319 million	\$1 billion