Tuberculosis

Since 2015, tuberculosis (TB) has been the leading global infectious disease killer, surpassing even HIV/AIDS and malaria combined. While often thought of as a disease of the past, the World Health Organization now reports that TB sickens 10.2 million people and kills 1.6 million people each year.

This airborne disease disproportionately affects people in poor and vulnerable communities. With U.S. leadership, progress has been made to fight TB where it most often occurs. The U.S. Agency for International Development (USAID) states that in the 23 countries with bilateral US funding the rate of new cases has fallen by 25 percent since 2000, and by 6 percent from 2016 to 2017, which is six times greater than in countries not receiving this assistance.

Exciting 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 2 percent of the $8.69 billion provided to USAID and State Department global health programs. The U.S. cannot reach the next stage of its plan to find and treat people with multi-drug resistant TB (MDR-TB) without funding above current levels.

The fight against TB is gathering momentum. Last year, heads of state gathered at a high-level UN meeting and made make specific, public commitments to end TB. Countries are stepping up their own domestic resources. In India, where the world’s biggest TB epidemic persists, the Prime Minister has increased TB funding and urged action. Congressional action to ensure the necessary funding levels will reinforce and strengthen global progress.

Why Funding Matters

U.S. investments in tuberculosis are saving lives and building capacity. USAID TB funding:

- **Saves lives:** With additional funding, USAID can support countries in treating at least 13 million people with drug-sensitive TB as well as 156,000 patients with MDR-TB, including children, in ten target countries while expanding TB prevention.

- **Implements patient and community-centered approaches:** Every year 4.1 million people are “missed” by health systems after failing to be diagnosed, treated, or reported. USAID supports patient-centered approaches to make it easier for patients to get proper treatment. Additional resources can support efforts to find the “missing millions.”

- **Supports the Global Fund to Fight AIDS, Tuberculosis, and Malaria:** USAID supports countries to develop strong applications to the Global Fund and better manage their grants.

- **Contributes to TB elimination in the U.S.:** The U.S. reports TB cases every year in every state. The CDC reports over 1,000 cases of MDR-TB occurred in the U.S. from 2006 to 2016, severely straining state public health budgets. We cannot end TB in the U.S. until we stop it globally.
Rachel’s Story

Rachel, 11 years old, lost both of her parents to HIV, and she is also HIV positive. She lives with her aunt, in Mararaba, a poor area in the outskirts of Abuja, Nigeria.

“Bit by bit Rachel's life fell apart. First, she stopped playing, then she stopped eating, and finally she was too weak and thin to walk. She lost hope, and nothing made her smile, in the end, she couldn’t even stand without help,” says her aunt, Endurance Sabo.

Endurance desperately tried to find the cause of the illness. Then the Wellness On Wheels (WoW) truck, an initiative of USAID-funded Challenge TB, came to their area. The mobile facility brings the latest in TB diagnostics, free of charge, to vulnerable communities. Tests showed had Rachel had drug-resistant TB. She was so thin she only weighed about 40 pounds, showing how close she had come to death. Now, she has completed TB treatment, and she is strong and well again, with her weight nearly back to normal.

“I call WoW the wonder truck because it has done wonders for us, since had it not been for the wonder truck, she would have died,” says Endurance. “Rachel’s health has been transformed, and she is back to her normal self,” she explains. Rachel now dreams of being a doctor, so she can stop more children from being orphaned like her. While TB is curable, its treatment is lengthy, lasting anywhere from 6 months for drug-sensitive TB to several years for drug-resistant strains. The average TB patient loses up to 4 months of work and up to 30 percent of their annual income. Most patients are treated without being checked for drug resistance, and most people with drug-resistant TB go untreated.

"Nigeria has the biggest TB epidemic in Africa, but U.S. support is making a difference"

USAID assistance to Nigeria has resulted in a major increase in TB screening, including screening over 15,000 children just last year. It has also provided social and economic support for MDR-TB patients. U.S.-backed training of health care personnel will help ensure maximum impact from a new TB grant for Nigeria from the Global Fund.

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 Global Health at USAID.

To do so, please submit a formal appropriations request form for the USAID TB account to Senators Graham and Leahy or Representatives Lowey 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.

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<tr>
<th>Fiscal Year</th>
<th>FY17</th>
<th>FY18</th>
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