



Joint Statement by the WHO Director-General and the WHO Civil Society Task Force on TB

Translating Commitments from the 2nd UN General Assembly High-level Meeting on the Fight against Tuberculosis into Action

Tuberculosis struck 10.8 million people in 2023, and killed around 1.25 million (including 161 000 among people with HIV), making it the top leading cause of death from an infectious agent. This is despite TB being a preventable and treatable disease, with rapid diagnostics, newer and safer drugs, shorter regimens, and updated guidelines and policies based on the latest evidence. While there has been significant progress against TB, it has been too slow, due largely to chronic underfunding of the TB response globally. The COVID-19 pandemic compounded the situation, putting us further off-track to achieve the targets set in the WHO End TB Strategy.

In 2023, at the United Nations General Assembly high level meeting on the fight against tuberculosis (UNHLM-TB), Member States adopted a political declaration in which they committed to achieving ambitious targets by 2027:

- Diagnose and treat 90% of people with TB;
 - Provide TB preventive treatment to 90% of those eligible;
 - Test 100% of people with TB with rapid diagnostic tests;
 - Ensure that all people with TB have access to a health and social benefits package;
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- License at least one new TB vaccine within 5 years;
- Mobilize at least US\$ 22 billion a year by 2027, and US\$ 5 billion for TB research.

We are deeply concerned that the current funding allocation for TB from both domestic and international sources is grossly insufficient. In some cases, this is even hampering the regular supply of essential drugs and commodities. According to the [Global tuberculosis report 2024](#), annual funding available for TB in 2023 was only US\$ 5.7 billion. Achieving the targets in the political declaration will require an almost four-fold increase, to US\$ 22 billion per year by 2027. Without adequate investment, the targets that world leaders have set will remain a wish list.

We urge all stakeholders to join forces in our determination to translate the commitments in the political declaration of the UNHLM-TB into concrete actions to achieve tangible results. Recognizing the pivotal role of affected communities and civil society in ending TB, we appeal for adequate financing and meaningful community engagement in all aspects of the TB response, in particular at the community level.

The TB response must be rights-based, equitable, multisectoral and innovative. We urge all stakeholders to take concrete, measurable, and accountable actions to end TB. To be effective, the TB response must be built on evidence from scientific research as well as bottom-up experiential knowledge to advance innovation beyond rhetoric.

We urge all stakeholders to:

- 1) Significantly increase domestic and international funding for ending TB, including for meaningful engagement of civil society and TB-affected communities;**
 - 2) Empower civil society and affected communities to be part of the planning, decision making, implementation and monitoring of national strategic plans to end TB;**
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3) Ensure robust social support and protection measures to avoid catastrophic costs for persons with TB and their families;

4) Ensure equitable and uninterrupted access to affordable, high-quality TB prevention and care including novel tools, drugs and vaccines.

We have a moral duty to End TB and the preventable deaths, disability, financial hardship and lost economic productivity it causes.

Yes, we can end TB. Let's do it together.

WHO CIVIL SOCIETY TASK FORCE ON TB

WHO Civil Society Task Force on TB provides a platform for discussion and exchange with WHO, acting as an advisory body focusing on leveraging engagement with civil society and affected communities at all levels to accelerate progress towards ending TB, in line with WHO End TB Strategy. More information can be found [HERE](#).
