MINISTERIAL STATEMENT OF COMMITMENT

We, the Ministers of Health of the Member States of the WHO South-East Asia Region participating in the High-Level Meeting held on 26 October 2021,

Acknowledge the progress made by the South-East Asia Region (SEAR) as a whole and by individual Member States in furthering highest-level political commitment towards ending tuberculosis (TB), since the 2018 Delhi End-TB Summit;

Note, that consequent to the increase in investments towards ending TB since 2018, there has been a consistent improvement in access to rapid diagnostics and new, safer treatment regimens for TB through people-centred services;

Concerned with the setback to progress as a result of the COVID-19 pandemic that has exacerbated the social and economic factors contributing to development of the TB disease, and temporary yet significant disruption of health services;

Cognizant, that despite progress, the Region as a whole, has missed the 2020 milestones of the End TB strategy and may also miss the 2022 coverage targets as per the political commitment made during the UN High-Level Meeting on TB (UNHLM-TB) in 2018, unless urgent action is taken;

Understand, that if immediate steps are not taken to scale-up preventive, diagnostic and treatment services, and significantly bolster social protection measures including specifically addressing undernutrition among TB vulnerable populations, the cumulative effect may potentially cause hundreds of thousands of additional deaths due to tuberculosis;

State our firm intent to renew our efforts towards ending TB by 2030 and meeting the UNHLM-TB targets of successfully treating at least 18 million people with TB, including ~1.5 million children with TB between 2018 to 2022, successfully treat over half a million people with drug-resistant TB and provide TB preventive treatment (TPT) to 11 million at-risk persons during the same period; and therefore,

Unanimously commit to actualize and intensify essential interventions already agreed in 2017 Delhi call for action and subsequent 2018 Statement of Action, and that for the coming years, we shall prioritize the following actions:

“Operationalize an empowered country initiative led by highest possible political level that monitors progress in reaching the UNHLM-TB targets to the highest levels of government in Member States.”

- An accountability framework based on a revitalised strategy will be established in the country which defines the working terms of the multidisciplinary and multisectoral initiative at national level.
- A whole-of-society approach with the engagement of all relevant government departments, technical and funding partners, the private sector and civil society, including members of the affected community will be followed.
- The framework will work towards defining priorities, ensuring synergistic use of resources and expertise, monitoring and reviewing progress, ensuring and enhancing shared accountability and collectively addressing gaps in progress towards ending TB.

“Increase budgetary and human resource allocations including the upfront investments required to catch-up on lost ground during the COVID-19 pandemic, by governments as well as by their global, regional, domestic and other partners.”

- At the Regional level, it is estimated that investments of up to US$ 3 billion may be needed annually to implement the comprehensive set of interventions required to end TB in the SEA Region.
- Respective national TB funding to be increased in accordance with nationally established estimates for ending TB in the country.
- Efficiency in the use of resources through integrated approaches for various disease programmes to be ensured, wherever possible.

“Ensure the highest attainable standards of rights-based, stigma-free, quality-assured, people-centric preventive, diagnostic, treatment, rehabilitative and palliative care to each and every person, including migrants, prisoners, children, the aged and other high-risk populations, living with any form of TB, including drug-resistant TB, TB/HIV co-infections and those with other comorbidities like diabetes, based on their needs, preferences and expectations.”

- TB effective treatment coverage is a tracer indicator for universal health coverage (UHC) index. Outreach of care will be increased through strengthening service availability at all possible health centres as well as using innovative care and delivery approaches such as digital health and efficient use of technology to reach the unreached.
- Highest possible standards of care will be made available in all sectors providing TB preventive, diagnostic and treatment services.
- Employment policies and work culture will be made non-discriminatory towards workers with TB.
- Gender-sensitivity and rights-based approach will be enhanced at health facilities providing TB services through training of health staff.

“Mainstream social and financial protection along with TB care services.”

- Poverty and undernutrition are among the biggest contributor to the development of TB disease. Systematic provision of socioeconomic support, adapted to country context, to the patient and family has always been essential and has become even more relevant in the COVID-19 era.
- Social support will be provided to TB patients and their families from the time of development of symptoms, to diagnosis till the successful treatment completion and in some case beyond treatment to address the sequelae, to achieve the goal of eliminating catastrophic financial losses.
- Empowerment and engagement of community and civil society representatives in planning, monitoring, organizing and providing for such support will ensure a people-centred response.

We, the Health Ministers of the WHO South-East Asia Region, unanimously commit to strengthen the implementation of interventions enshrined in the 2018 Statement of Action and the 2017 Delhi Call for Action.

We call upon WHO to provide the leadership and technical support to Member States for the implementation and measurement of progress. Review of progress against the UNHLM-TB targets may also be included in the regular Regional Committee agenda as a build-up to the follow-up UNHLM-TB meeting in 2023.

We also call upon our partners to enhance their support to the Region towards the full implementation of the comprehensive strategies towards ending TB. This should take into account the high burden in the Region, and other regional specificities, including countries on the verge of ending TB as well as humanitarian needs at national and sub-national levels in the Region.

We commit to renew and bolster efforts towards ending TB by 2030.