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**THE FIRST UNITED NATIONS GENERAL ASSEMBLY HIGH-LEVEL MEETING ON  
TUBERCULOSIS - IMPLICATIONS FOR THE WHO AFRICAN REGION**

**Information Document**

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## BACKGROUND

1. Even though there have been steady and impressive declines in tuberculosis (TB) incidence between 2010 and 2017 as recorded in the 2018 Global TB Report,<sup>1</sup> TB remains a major challenge in the African Region. The 2017 regional TB rates of 237 per 100 000 population compared to 133 per 100 000 population globally are the highest in the world. In 2017 alone, an estimated 2.5 million new TB cases (25% of global cases) occurred in the Region.

2. Prevalence surveys conducted from 2010 to 2016 revealed that in some Member States,<sup>2</sup> up to half of existing TB cases are not being detected; and by the end of 2017, nine of the 47 Member States<sup>3</sup> were using the recommended rapid molecular testing as first line for TB diagnosis. Only 50% of multidrug-resistant TB (MDR-TB) cases are being detected and successfully treated; and the number of people living with HIV (PLHIV) whose likelihood of developing TB is at least tenfold higher compared to those without HIV remains very high. Furthermore, 16 of the 30 high TB burden countries<sup>4</sup> in the world are in the African Region; and in 2017, forty-six per cent of TB budgets in Member States were unfunded.

3. TB is one of the communicable diseases targeted for elimination by 2030 in the Sustainable Development Goals<sup>5</sup> and the WHO End TB Strategy.<sup>6</sup> In this context, in September 2018, the first United Nations General Assembly (UNGA) High-level Meeting on Tuberculosis (HLM-TB) set targets to treat 40 million TB cases and provide TB preventive treatment to 30 million people<sup>7,8</sup> between 2018 and 2022.

4. This document gives an update on actions taken in the Region since the High-level Meeting and proposes the next steps.

## ACTIONS TAKEN

5. **Dissemination of the Common African Position on TB (CAP-TB):** WHO has been working with the African Union Commission and other partners to support Member States in domesticating the CAP-TB as part and parcel of national strategic plans and policies. The Common African Position on Ending the TB epidemic<sup>9</sup> on the continent focuses on leadership and governance; universal health coverage (UHC) and social protection; oversight and accountability. It also focuses on universal and equitable access to prevention, diagnosis, treatment and care services for all forms of TB. The CAP-TB promotes innovations for expanding TB diagnosis, prevention and care through research.

<sup>1</sup> Global Tuberculosis Report 2018. World Health Organization. WHO/CDS/TB/2018.20.

<sup>2</sup> Ghana, Kenya, Malawi, Nigeria, United Republic of Tanzania, Uganda, and Zambia.

<sup>3</sup> Botswana, Eswatini, Ethiopia, Lesotho, Nigeria, South Africa, United Republic of Tanzania, Zambia and Zimbabwe.

<sup>4</sup> Angola, Central African Republic, Congo, Democratic Republic of the Congo, Ethiopia, Kenya, Lesotho, Liberia, Mozambique, Namibia, Nigeria, Sierra Leone, South Africa, United Republic of Tanzania, Zambia, Zimbabwe.

<sup>5</sup> Resolution A/RES/70/1: Sustainable Development Goals. In: UN General Assembly, 69th session, agenda 13a and 115. New York, September 2015.

<sup>6</sup> Resolution WHA Resolution A67/11. The WHO End TB Strategy. In: Sixty-seventh session of the World Health Assembly. Geneva, May 2014.

<sup>7</sup> Political Declaration A/73/L.4. UNGA Seventy-third session. New York, 3 October 2018.

<sup>8</sup> Resolution A/RES/73/3. Political declaration of the high-level meeting of the General Assembly on the fight against tuberculosis. In: United Nations General Assembly Seventy-third session, 18th plenary meeting Wednesday, New York, 10 October 2018. [<https://www.un.org/press/en/2018/ga12076.doc.htm>].

<sup>9</sup> African Union. Africa Common Position to the United Nations General Assembly High Level Meeting on Tuberculosis. Addis Ababa, Ethiopia. Nov 2017.

Furthermore, it increases domestic funding to health and innovation and policy reforms to eliminate catastrophic costs from TB; and enhances strategic information and data management systems to inform policy.

6. **Dissemination of the Continental End TB Accountability Framework for Action:** The African Continental End TB Accountability Framework for Action endorsed by African Union Heads of State and Government at their Summit in Nouakchott in July 2018 has been disseminated, and Member States are being technically supported to adapt the framework for implementation at country level.

7. **Operationalization of the African Continental End TB Scorecard:** As demanded by the African Union Heads of State and Government during their Nouakchott Summit, the World Health Organization Regional Office for Africa, in collaboration with the World Health Organization Regional Office for the Eastern Mediterranean, has produced and disseminated the 2018 version of the Continental End TB Scorecard to assist Member States in tracking their performance on the top 10 indicators for monitoring the End TB Strategy (Annex 1).

8. **Dissemination of new WHO Guidelines for treatment of drug-resistant TB and latent TB infection:** Since the HLM-TB, WHO has released new guidelines for the management of drug-resistant TB, and treatment of latent TB infection. These have been disseminated and Member States are being supported to adopt them for implementation. To date, since the initial rapid information on the guidelines was launched in August 2018, at least 22 countries<sup>10</sup> have adopted and are using aspects of the new guidelines.

9. **Support for reviewing and updating national policies to capture the HLM-TB recommendations:** Member States are being supported to review and update national policies, strategic plans and treatment guidelines to make them consistent with the latest global policy directions, strategies and targets, including those arising from the End TB Strategy and the UNHLM-TB. They are also being supported to adopt and adapt related management guidelines.

## NEXT STEPS

10. Member States should:

- (a) ensure implementation of control policies and strategies that are fully aligned with the SDG, End TB Strategy and HLM-TB targets;
- (b) review and update TB control policies, strategies and targets to incorporate the HLM-TB resolutions;
- (c) speedily implement WHO policy recommendations to use rapid molecular diagnostic tests as first line of testing, and adopt the latest recommended treatment regimens for children and adults as the minimum standard of care;
- (d) scale up activities to find and treat missing TB cases, especially among key populations such as children, adolescents, diabetics and PLHIV;

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<sup>10</sup> Benin, Burkina Faso, Cameroon, Côte d'Ivoire, DRC, Equatorial Guinea, Eswatini, Guinea, Kenya, Lesotho, Liberia, Mali, Mozambique, Namibia, Niger, Nigeria, Senegal, Sierra Leone, South Africa, Uganda, United Republic of Tanzania and Zimbabwe.

- (e) develop and implement country specific End-TB Accountability Frameworks to regularly track the top performance indicators towards ending the epidemic;
  - (f) take responsibility for, and increase financing of core TB control services from domestic sources.
11. WHO and partners should:
- (a) provide technical, human and financial resources to support implementation of the proposed actions;
  - (b) monitor implementation of these actions by Member States through annual progress reports starting in 2020.
12. The Regional Committee took note of the information report and approved the recommendations made.