Momentum Lost: Re-Energizing Urban and Peri-Urban Tuberculosis Responses

Commitment and accountability

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“We can't fight AIDS unless we do much more to fight TB as well”
-- Nelson Mandela at the XV International AIDS Conference
Facts

- As Covid deaths continue to decline, TB is on track to reclaim the title of the number one infectious killer.
- Even during the pandemic, TB remained number one infectious killer in the developing countries.
- TB was and continues to be the number one cause of death for people living with HIV.
- The Global Fund to fight AIDS, Tuberculosis and Malaria is the largest international funder for TB.
- Until recently, the Global Fund was allocating 18% of its resources to TB. Now this number went up to 19%.
- Yet TB is accountable for almost 60% of the deaths caused by the three diseases – more than HIV and malaria combined.
Why the situation is so bad

- Lack of political will (also manifested in severe funding gap)
- Lack of strong accountability mechanisms
- Limited engagement of TB affected community and civil society in TB response
Opportunities

• The use of Digital tools
• Deadly Divide - Commitment vs Reality
• TB Vaccine by 2025
• Collaborative governance
• Urban planning and Design
What next?

- Inclusiveness
- Crosscutting governance
- Crosscutting financing
- Focus on people (people-centered approach)
Questions

• Is TB addressed meaningfully within Fast-Track Cities?
• Are multi-stakeholder accountability mechanisms in place in Fast-Track Cities?
• Are people affected by TB part of them? If yes, is it meaningful representation, or tokenistic “we have this TB survivor on board”
• If not, why?