

8 November 2021

To the Global Fund Board Chair and Vice-Chair, Board Constituencies

Open Letter of Civil Society on the Global Disease Split

We, representatives of civil society organizations involved in TB and HIV responses on the global, regional and national levels, call upon the Global Fund to significantly and meaningfully increase attention and resources to the global TB response.

Tuberculosis has long been the world's deadliest infectious disease and continues to kill 1.5 million and sickens 10 million new people every year. It was only last year that COVID-19 overtook TB as the number one killer in infectious diseases, globally. However, in low- and middle-income countries, TB killed more people than COVID-19 in 2020.

The global TB response has been lagging for a long time. 56% of children with TB & 62% of people with MDR-TB have no access to services. There is a significant TB prevention gap – only 4% of UN HLM targets for TB preventive treatment in contacts were achieved. TB is the leading cause of death among people living with HIV.

The COVID-19 pandemic has greatly interrupted health systems and health service delivery for TB in low- and middle-income countries in 2020. As the Global Fund Executive Director Peter Sands mentioned, “much of the progress we’ve made to close the gap on finding “missing” people with TB has been reversed.”¹ Modeling by the Stop TB Partnership² suggests that TB mortality will keep increasing as a result of disruptions caused by COVID-19.

It is imperative to rapidly scale-up access to more effective early TB and DR-TB diagnosis, better and shorter treatment regimens, active case finding, TB preventive treatment, community mobilization, and work on human rights and gender issues.

We warn that TB responses are at very high risk of further deteriorating unless the needed resources are urgently made available. The Global Fund rates the current risks to TB program quality as very high.

As the Global Fund Board is considering a very complex, yet critical decision on Disease split and allocation methodology, it is crucial to consider:

- the critical role Global Fund plays as the main funder for the TB response and for driving scale-up of newly available more effective TB treatment and TB diagnosis;
- the disproportionate impact of COVID-19 on TB programs;
- the TB death burden across the Global Fund eligible countries;
- the current context of constrained domestic budgets, external funding for TB needs.

¹ [Global Fund Report, April 2021](#)

² Stop TB Partnership: Global Impact of COVID on TB Treatment and Care

The 18% allocation for TB in the current Global Fund disease split is completely inadequate in the context of TB having the highest mortality among the three diseases. We are convinced that it is possible to increase the Global Fund allocation for TB without jeopardizing the progress in the other two diseases, and that addressing the current underfunding of TB programs and resulting program quality risks will actually strengthen the Global Fund investment case for the upcoming replenishment.

We acknowledge that the disease split alone will not fix the financial gap and request the Global Fund to use all possible internal mechanisms, including catalytic funding and portfolio optimization, to substantially increase the resources allocated by Global Fund to TB.

We also note that the burden of responding to the massive need for TB programs should not be left only to the Global Fund. We will continue working with all international and national stakeholders towards ensuring a comprehensive and fully funded TB response.

However, as the main funder for the TB response globally, the Global Fund should set an example and send a clear signal for a meaningful shift.

We urge the Global Fund Board to make the decision guided by the evidence, to increase the resource allocation to the TB response, and ask the Global Fund Secretariat for further analysis as needed for finalizing investment allocations across the three diseases.

1. TB Europe Coalition (TBEC)
2. KNCV Tuberculosis Foundation (KNCV)
3. RESULTS, U.S.
4. ECOM - Eurasian Coalition on Health, Rights, Gender and Sexual Diversity (ECOM)
5. "100% Life Cherkassy" Charity organization, Ukraine
6. All-Ukrainian Association of People who Recover from Tuberculosis "Stronger than TB", Ukraine
7. Association "Health Mission", Serbia
8. Azerbaijan Red Crescent Society, Azerbaijan
9. Center Women and Modern World, Azerbaijan
10. "Community Pulse" Public Association, Republic of Moldova
11. Czech AIDS Help Association, Czechia
12. "Doverie plus" NGO, Kazakhstan
13. Eurasian Harm Reduction Association (EHRA)
14. European AIDS Treatment Group
15. German Central Committee against tuberculosis (DZK)
16. Health Accountability Consortium, Sierra Leone
17. International Women Fund, Azerbaijan
18. "Inkishaf ve Rifah Namina" Public Union, Azerbaijan
19. "Network TBpeople", Georgia
20. "ISHONCH VA HAYOT" NGO, Uzbekistan.
21. Istanbul Anti TB Association, Turkey
22. Istanbul TB Foundation, Turkey

23. Kenya AIDS NGOs Consortium (KANCO)
24. LHL International Tuberculosis Foundation, Norway
25. Metzineres, Spain
26. National Platform against TB, Kyrgyzstan
27. NGO AFI, Republic of Moldova
28. NGO RIEC "INTILISH", Uzbekistan
29. Plus91 Technologies Pvt Ltd, India
30. Public Foundation KNCV-KG, Kyrgyzstan
31. Public Movement "The Ukrainians against Tuberculosis" Foundation CO, Ukraine
32. Regional Expert Group on Migration and Health (REG) for Eastern Europe and Central Asia
33. RESULTS, Canada
34. RESULTS UK, United Kingdom
35. Center for Health Policies and Studies (PAS Center), Moldova
36. RESULTS, Australia
37. "Sanat alemi" NGO, Kazakhstan
38. SAF-TESO
39. Saglamliga Khidmat Public Union, Azerbaijan
40. "Social Support to Persons with Speech and Hearing Impairments" PU, Azerbaijan
41. Stefan Radut, MDR TB Survivor, Romania
42. Stop TB Canada
43. "Stop TB Together" All-Ukrainian Coalition of Public Organisations
44. "Support for people living with HIV "Kuat" NGO, Kazakhstan
45. "Support to Disabled Persons in Protection and Integration" PU, Azerbaijan
46. "Support to Information Initiatives" Public Union, Azerbaijan
47. "Support to Woman Initiatives for Development" PU, Azerbaijan
48. TAC Care Foundation, Russia
49. TB Alert, United Kingdom
50. TB Patients Community Organization, Azerbaijan
51. TB people, Kyrgyzstan
52. "TBpeopleUkraine" CO, Ukraine
53. The Association for Supporting MDR TB patients (ASPTMR), Romania
54. The Association for Supporting MDR TB patients (ASPTMR), Constanta branch, Romania
55. "Veremsiz Geleceye Dogru" Public Union, Azerbaijan
56. Water, Sanitation and Hygiene Network (WASH-Net), Sierra Leone
57. Young Women's Knowledge and Leadership Institute (YOWLI), Sierra Leone
58. Youth Partnership for Peace and Development (YPPD), Sierra Leone