**DESCRIPTION**

Tuberculosis (TB) funding in partnership with private and public donors supports interventions that prevent, detect, and cure tuberculosis—an airborne, bacterial disease. The U.S. works in 23 priority countries and provides targeted technical assistance to an additional 32 countries to build the capacity for diagnosis, prevention, and treatment services for millions of people affected by TB and multidrug-resistant tuberculosis (MDR-TB).

**WHAT DOES IT BUY?**

Funds support efforts to prevent and treat TB and MDR-TB through enhanced screening, diagnosis, infection control, healthcare training, technical assistance, and critical research into new TB treatments.

**WHY IS IT IMPORTANT?**

- Between 2000 and 2019, an estimated 60 million lives were saved through TB diagnosis and treatment.
- Since 2000, TB incidence decreased by 29% and TB mortality decreased by 47% in USAID’s priority countries.
- In 2019, 10 million people fell ill with TB, including 1.2 million children.
- U.S.-developed innovations in TB diagnosis and treatment can speed up diagnosis, shorten treatment, and save lives—provided they reach patients and are used effectively.
- In 2018, in USAID priority countries, 4,600,000 TB cases were detected, and an 89% treatment success rate was achieved.
- Progress against TB has been slow. New cases are falling by just 1% to 2% annually. TB is one of the top ten causes of death globally and kills more people than any other infectious disease.
- Despite most cases being curable with a six-month treatment that costs less than $40, nearly 1.5 million people lose their lives each year to TB.
- MDR-TB is a public health and security threat. In 2019, 206,030 people with MDR-TB or rifampicin-resistant TB were detected, a 10% increase from 2018.

**WHY SHOULD AMERICANS CARE?**

- TB presents a unique threat that knows no borders. MDR-TB poses a particular health security threat.
- Roughly 29% of people with active TB go untreated each year. Every year that a single person with active TB is untreated, they will infect an average of 10–15 people. By increasing assistance and fostering greater leadership at all levels, the U.S. can reduce the spread of TB and MDR-TB while also reducing the burden on health systems.
- TB funding supports U.S. national security by reducing the number of cases and developing the global capacity to prevent, detect, and respond to dangerous outbreaks that threaten the health of Americans.

**COVID-19 IMPACTS**

- People with TB are at increased risk for severe illness or death from COVID-19.
- For a historical perspective, in the 1990s, the socioeconomic crisis in Eastern Europe led to the highest rates in the world of MDR-TB, a tragedy that continues today.
- According to the World Health Organization, the pandemic brought sharp drops in TB diagnoses around the world.
  - In Indonesia, a 70% decline; in Mozambique and South Africa, 50%; and in China, 20%.
  - In Mexico, as COVID-19 infection rates increased in late May 2020, TB diagnoses recorded by the government fell to 263 cases, down from 1,097 the same week in the prior year.
  - In India, home to about 27% of the world’s TB cases, diagnoses have dropped by nearly 75% since the beginning of the pandemic.

In 2019, 10 million people fell ill with TB, and 1.4 million died.

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**Tuberculosis**

Minimum Requirement F.Y. 2022

$366.85 million

F.Y. 2021 Enacted

$319 million
WHAT MORE COULD BE DONE?

- Prior to the pandemic, according to the WHO, the funding shortfall required from all sources for a full response to the TB epidemic in developing countries was estimated at $3.3 billion, excluding research and development. At least an extra $1.3 billion per year was needed for research and development.
  - Additional funding would increase the support to priority countries that have a strong commitment to reaching TB targets.
  - Greater U.S. support would add more countries with a significant TB burden to the list of priority countries. For instance, Pakistan has a large TB burden and has shown a clear commitment to address TB.

- Modeling indicates that COVID-19 will significantly impact global TB programs, potentially adding approximately 6.3 million cases and 1.4 million more TB-related deaths by 2025.

FUNDING HISTORY

<table>
<thead>
<tr>
<th>Year</th>
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<tbody>
<tr>
<td>FY 19</td>
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<td>$275 m</td>
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<td>FY 20</td>
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Funding levels may not exactly reflect those in the appropriations bills and/or reports due to rounding.