**Agenda Item:** 3.9 Preparation for a high-level meeting of the General Assembly on ending tuberculosis

**Statement:**

MMI would like to take this opportunity to address agenda 3.9 on the preparation for a high-level meeting of the UN General Assembly on ending Tuberculosis. The statement is supported by PHM.

Tuberculosis remains the topmost public health burden in the world and the ambitious target set by the WHO’s End TB Strategy is laudable.

However, we would like to draw attention towards the current model of UHC practiced in many countries. Private sector involvement in the insurance-based Universal Health Coverage model in several countries have paid little attention to TB, despite it being a widespread disease, largely because treatment of TB is not seen as a profitable proposition. A model of UHC that is not premised on strengthening comprehensive primary health care services would do little to eliminate TB. Consequently TB programmes run the risk of becoming vertical programmes that do little to strengthen health systems. The TB epidemic can truly be ended only when the diagnosis and treatment of TB, including of resistant forms, is accessible to everyone through a comprehensive primary care network.

Further, it is important to understand that the root causes of TB are based on social determinants such as poverty, undernutrition, unhealthy living conditions, etc. While we commend the fact that the report advocates actions on strengthened social assistance, food and employment security, we urge that the high-level meeting propose concrete actions to address key social determinants of TB.

We urge MS to consider the implications of US$ 1 billion/year shortfall in funds for TB research. Currently research on TB receives just 0.25% of the allocation on health-related research, completely disproportionate to the personal and societal burden of TB. Elimination of TB cannot be achieved without serious financial commitments.