

## Message of WHO Regional Director for Africa, Dr Matshidiso Moeti

This year, the theme of World TB Day on 24 March is "It is time" because we all need to accelerate action to achieve the Sustainable Development Goal (SDG) targets to end TB epidemics by 2030.

In the African Region, new TB cases and deaths are declining. Botswana, Eswatini, Lesotho, Namibia, South Africa and Zimbabwe are recording some of the fastest declines in the world. Expanded

coverage of antiretroviral therapy has led to fast declines in HIV/AIDS-related TB cases and deaths. In 2018, four out of five (80.2%) people with multidrug-resistant or extremely drug-resistant TB were started on treatment.

Although the Region is making progress, we are not on track to achieve the 2030 SDG targets related to TB. There continues to be more new TB cases in the African Region, than in any other WHO region. Only one in two people with TB (56%) across the continent is on treatment. Fewer than one in three children (29%) living with someone with confirmed active TB is on preventive therapy. TB control budgets are chronically underfunded, and most countries do not have information on families facing catastrophic costs due to TB. This is needed to track progress towards the SDG targets.

At WHO, we are working with partners to train health workers in TB prevention and care. This is helping to reach high-risk groups and ensure best practices are applied.

In collaboration with programmes on HIV, maternal and child health, and noncommunicable diseases we are strengthening screening for people at higher risk of TB such as children, people living with HIV, and those with diabetes.

We have worked with all countries to adopt the use of sensitive diagnostic technologies at the policy level. Increased innovative investment is now needed to make these technologies the first-line of diagnosis for all presumptive TB cases.

To monitor progress across the Region, we conduct annual programme reviews and have developed a continental score card in collaboration with the

African Union. Linked to this, we are advocating for collecting information on households experiencing catastrophic costs due to TB.

Building on the gains we have collectively made, it is now time for bold action to achieve our targets:

**It is time** for governments to increase domestic investments in TB, and to strengthen regulatory environments to facilitate importation, monitoring and use of quality products.

**It is time** for health-care providers to implement minimum standards of care in line with WHO recommendations on diagnostics, treatment regimens and preventive therapy for high-risk groups.

**It is time** for governments to position TB as requiring broader action, beyond the health sector. We must engage other ministries, parliamentarians, community leaders, researchers, academic institutions, patient advocacy groups and people affected by TB. Multisectoral action is needed to ensure universal access to services.

**It is time** for governments and partners to work together in addressing risk factors for TB such as overcrowd living environments, high-risk occupations such as mining and health-care workers, and comorbidities such as HIV, diabetes, and malnutrition in children.

Ultimately, to end epidemics of TB and other diseases we need strong health systems as the bedrock of universal health coverage.

For Africa to be free of TB, let's work together to bring quality diagnostics, treatment and follow-up closer to communities, ensuring that no-one is left behind.

### Learn more:

2018 Africa Continental TB Scorecard (WHO and African Union)

<https://www.afro.who.int/sites/default/files/2019-11/TB%20Scorecard%20English%20%281%29.pdf>

Compendium of WHO Guidelines and associated standards: ensuring optimum delivery of the cascade of care for patients with tuberculosis (Second Edition, WHO 2018).

[https://www.who.int/tb/publications/Compendium\\_WHO\\_guidelines\\_TB\\_2017/en/](https://www.who.int/tb/publications/Compendium_WHO_guidelines_TB_2017/en/)

Key international minimum standards to be adopted are as follows:

- Use of diagnostics: Section 4, page 12, Standard 6
- Treatment: Section 6, sub section 6.2, page 20, standards 13 to 15

Latent TB Infection. Updated and consolidated guidelines for programmatic management (WHO, 2018) <https://www.who.int/tb/publications/2018/latent-tuberculosis-infection/en/>

- Preventive therapy: see chapter 5. Treatment options for latent tuberculosis infection, page 23



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