



A PLEA FROM CIVIL SOCIETIES IN INDIA ON BEHALF OF THE MILLIONS AFFECTED BY TB: **DO NOT WITHDRAW YOUR SUPPORT TO SAVING LIVES**

The Global Fund to Fight AIDS, Tuberculosis and Malaria has been a key partner in the world's fight against TB, a killer disease that continues to take millions of lives despite being curable. In India, this is especially true. India bears the highest burden of TB, with over a fifth of the cases globally, and faces the disasters of drug-resistant TB and TB-HIV co-infection that could claim many more lives. The 2011 report of India's National TB Programme points to more new TB cases added here each year (two million in 2009) than in any other country. But, equally, Global Fund support has made a vital difference. It has helped give people a voice and strengthened their very necessary role in spreading awareness and access to complete treatment to combat a disease that thrives on poverty, ignorance and stigma.

The recent decision by donors to cut contributions to The Global Fund is alarming. The war against TB has been extremely hard for all of us. If funding stalls at this stage, it can reverse the gains so far and translate into millions of lives lost. Please do not let this happen. It will be a human tragedy not fit for a civilized world.

While we recognise that recent economic developments have forced donors to curtail global development funding, there are exceptionally strong reasons why funding for TB control in India must not fail at this critical juncture:

- 1 India itself explains why TB continues to be a major scourge here** and why all must jointly combat it. Despite its emerging global stature, it is unimaginably populous, crowded and unequal, with the majority living in abject poverty, without basic health care or social support. It has large migrant, tribal, remote and slum populations that are vulnerable to infectious diseases like TB. Many lack knowledge of TB, suffer from stigma, and go to untrained private practitioners. Health systems are weak, incomplete treatment common, and drug-resistant TB very real. The context calls for an uninterrupted and coordinated effort across sectors.
- 2 Civil society is currently giving one of the strongest pushes, in global history, to TB control**, with support from partners like The Global Fund, and in coordination with the government. Without this support, the movement would die as there is no other funding mechanism in the country for the task at hand. Years of progress will be stalled, and indeed reversed, with the poor and the marginalised bearing the brunt of it. It will be a major setback to goals like 'universal access', to community motivation, and to the money already spent, just as real headway was being made.
- 3 Global Fund Round 9 TB funds to India started a landmark five-year civil society project** in 2010 on 'Advocacy, Communication and Social Mobilisation', with an ambitious target of reaching some 750 million people in 374 districts across 23 states, including 174 million women, 199 million children and 250 million people in poor districts. Phase 1, 2010-12, has shown encouraging results, with 247593 patients put on treatment in the second quarter in 2011. Phase 2, 2012-15, will now be critical.
- 4 Stability of funding is crucial to not stifle newly emerging grassroots voices** that have now begun to mainstream patient and community needs in India. Restricting support at this stage will signal a broader retreat from partnerships in governance, push back rights-based health reforms, and halt the on-going process of community empowerment in TB care and control. The Global Fund has helped India customise its TB programme through social participation in public health, and made access to healthcare more democratic. We must not lose the opportunity to replicate this model.
- 5 India is at a point when the national momentum can have a global impact** on the Millenium Development Goal of halving the rate of TB infections by 2015. While India is increasing its health spending in its next five-year plan, this remains below the World Health Organization standard. With economic slowdown and competing priorities, there are major challenges to consistent health spending by emerging nations like India. Donor funds can be oxygen in this time.

The Executive Secretary of the WHO Stop TB Partnership recently said "Let us not squander the huge investment the world has made in the health of people living with HIV by losing them to TB, a curable illness." What was said in the context of TB-HIV co-infection globally bears a great parallel to 'the huge investment' civil society has made in India.

We cannot squander this investment away.

The Global Fund is a crucial partner now in India's fight against TB. Beyond the logic of reasons for why this fight must go on, and why it needs support, there are bigger questions too: of ethics, of commitment, of solidarity and, indeed, of human life itself. It is our appeal and request that these questions are not forgotten.