

23 May 2023

Your Excellencies,

With the negotiations for the political declaration of the UN High-Level Meeting on the fight against tuberculosis underway, we are writing to you as academics and healthcare workers from around the world, calling on you to ensure the outcome document is robust and ambitious.

As healthcare staff working on the frontline, we have a unique perspective on the barriers and systemic issues which prevent people from accessing life-saving vaccines, diagnostics, treatment, and care. As researchers, we are at the cutting edge of the scientific effort to better understand the TB pandemic and to create the new tools and approaches needed for equitable access to TB prevention and care. Working on the frontline, many of us have first-hand experience of TB, but we know that together, we can end TB once and for all.

We welcome the draft political declaration, but believe it can be strengthened in a number of key ways. To build on the 2018 political declaration and drive progress, we urge you to include specific, numeric targets for diagnosis, prevention, and treatment, and to strengthen the language on meeting the needs of key and vulnerable populations and involving all stakeholders in the TB response.

In particular, we urge you to strengthen:

Recognition of the role of academics, researchers and healthcare workers in the development and implementation of evidence-informed policy and rapid uptake of new innovations, committing to strengthen the engagement of these professions in policymaking forums, planning and multisectoral accountability and review mechanisms.

- Language on TB vaccine research, committing to meet the investment need of at least USD 1.25 billion per year to develop at least one new vaccine, build a sustainable pipeline of vaccine candidates, and prepare for the implementation of new vaccines once licensed and globally recommended.
- Commitments to address the social determinants of TB, including recognizing gender as a key social determinant of TB, the impact of rising global poverty and that approximately 20% of global TB cases are attributable to undernutrition, as well as HIV, diabetes, smoking and alcohol use disorders on the risk of infection, disease, and adverse treatment outcomes. In particular, we call on the inclusion of a commitment to, by 2027, ensure 90% of people with TB have a nutritional assessment, 90% of undernourished people with TB should receive nutritional support, and 90% of these patients show a 5% increase in BMI after 2 months of therapy.
- Language recognizing the human right to enjoy the benefits of scientific progress and its applications as an important guiding principle of the TB response alongside the right to enjoy the highest attainable standard of physical and mental health.

- Commitments to ensuring the availability, accessibility, acceptability and affordability of new tools including diagnostics, treatments and vaccines and other benefits resulting from TB research, acknowledging that most funding for TB research comes from the public sector and as such conditionalities promoting access and transparency of publicly funded research efforts are required.

Attached, please find an annotated version of the zero draft that we have had sight of, along with precedents and evidence to justify the proposed amendments.

As academics, researchers, and healthcare workers, we stand ready to play our role in delivering these ambitious commitments. We would welcome an opportunity to discuss these revisions and stand at your service throughout the negotiation process.

With kind regards.

Sincerely,

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