

**TUBERCULOSIS CONTROL: THE SITUATION IN THE
AFRICAN REGION** (document AFR/RC55/INF.DOC/3)

The Regional Committee,

Deeply concerned about the gravity of the tuberculosis epidemic in the African Region;

Recalling Resolution AFR/RC44/R6 of September 1994 by the Regional Committee on implementation of short-course TB therapy for control programmes in the Region;

Noting the negative impact of the HIV/AIDS epidemic on tuberculosis incidence and death, the insufficient coverage of health services and the scarcity of human resources;

Noting the national and international commitments to fight AIDS, tuberculosis and malaria; and the increasing financial resources made available, among others, by the Global Fund to Fight AIDS, Tuberculosis and Malaria; the Stop TB Partnership and bilateral partners;

Convinced that unless urgent extraordinary actions are undertaken to address the current trend of the epidemic, the situation will only get worse and the Abuja and Millennium Development Goal targets will not be achieved;

1. DECLARES tuberculosis an emergency in the African Region;
2. URGES Member States:
 - (a) to develop and implement with immediate effect emergency strategies and plans to control the worsening tuberculosis epidemic;
 - (b) to rapidly improve tuberculosis case detection and treatment success rates;
 - (c) to accelerate directly-observed treatment short-course (DOTS) coverage at district and national levels;
 - (d) to accelerate implementation of interventions to combat the TB/HIV epidemic, including increased access to ARVs by doubly-infected patients;
 - (e) to expand national partnerships for tuberculosis control, especially public-private partnerships;

- (f) to improve the quantity and quality of staff involved in tuberculosis control;
- (g) to implement strategies to reduce patient default and transfer-out rates to 10% or less.

3. REQUESTS the Regional Director:

- (a) to provide intensified technical support to Member States for scaling up control interventions in order to rapidly reduce tuberculosis incidence and death;
- (b) to hasten research on new effective shorter duration treatment regimens and appropriate diagnostic tools for tuberculosis;
- (c) to mobilize additional resources for tuberculosis control in the Region;
- (d) to report to the Regional Committee every two years on progress with tuberculosis control in the Region.

Eighth meeting, 25 August 2005