

**A STATEMENT TO COMMEMORATE THE WORLD TUBERCULOSIS DAY-2023
MADE BY HON. DR MARK KURT NAWAANE- MP FOR NABDAM AND DEPUTY
RANKING MEMBER OF THE HEALTH COMMITTEE.**

Thank you, Right Hon. Speaker, for the opportunity to make this statement to commemorate the World TB Day 2023. It is a day set aside to raise public awareness about the devastating health, social and economic consequences of tuberculosis and to step up efforts to end the Global Tuberculosis epidemic. The date marks the day in 1882 when Dr Robert Koch discovered the bacterium that causes Tuberculosis which opened the way towards diagnosing and curing this disease.

Right Hon. Speaker, Tuberculosis is caused by mycobacterium Tuberculosis. It spreads through the air when a person with TB disease of the Lungs or throat coughs, speaks or sneezes and people nearby breath in these bacteria and become infected. TB usually affects the lungs but it can also affect other parts of the body such as the brain, the Kidneys or the spine. To diagnose TB, chest X-ray, sputum for AFB's, GeneXpert and blood test can be done. The Golden standard for TB diagnosis is to culture the bacteria. TB can be treated and cured by using antibiotics. Indeed, TB is curable and preventable.

Mr. Speaker, globally 10.6 million people fell ill with TB equivalent to 134 cases per 100,000 population. Worldwide TB is the 13th leading cause of death with a total of 1.6million people dying in 2021. Each day, close to 4400 people lose their lives to TB. TB has overtaken HIV/AIDS as a leading infectious killer.

Mr. Speaker, the prevalence of TB in Ghana is estimated at 200 per 100,000 of the population.

In 2020, 20,000 new cases were recorded; in 2021, 13000 new cases and in 2022, 16,500 new cases. As at March 2022, there were 76,000 people who had TB with another 400 identified having multi drug resistant TB{MDR-TB}. Death rate in the country fell from 49 cases in 2002 to 36 cases per 100,000 of the population in 2021. We are expected to find 44,000 TB patients annually but we are finding on the average 16,000 annually.

Our diagnosis coverage is about 60% of the country and leaving the rest unreached Since 2018 when H. E the president signed onto the United Nations High Level TB Meeting targets for Ghana, we have only been able to achieve about 60% of those targets. In Ghana, the data shows that a minimum of 3 persons die a day with TB. There is therefore a great variance between the UN's targets for Ghana and the reality of work done in Ghana

Mr. Speaker, this year world TB Day is on the theme “**Yes! We can end TB**”. On this day global citizens wish to inspire hope and encourage high level leadership, increase investments, faster uptake of new W.H.O recommendations, adoption of innovations, accelerated action, and multisectoral collaboration to combat the TB epidermic. This year is critical, with opportunities

to raise visibility and political commitment at the 2023 UN high-level meeting on TB. It will also be used to assess the state of the short oral treatment and the TB prevention therapy.

Mr. Speaker, this day in Ghana is used to review our management of TB, identify the challenges, discuss the solutions and carry out advocacy on the need to prioritize TB care in the country. On this day the Minister of Health, Ghana Health Service, Parliamentarians, the National TB program, civil organizations, such as Stop TB Partnership Ghana platform, TB voice and other stakeholders come together to organize meetings to sensitize the populace on TB care.

Right Hon.Speaker, at the heart of TB care is the accurate diagnosis of TB cases in the country and the medical equipment used for the purpose is the GeneXpert. There are 261 districts, Municipal and Metropolitan Assemblies. However, there are 168 GeneXpert machines in the country. What it means is that, 93 districts Health facilities do not have this equipment to assist diagnose cases. There are problems associated with the transportation of the sputum to the sites of these limited GeneXpert machines. The cartridges that are used in the procedure are sometimes in short supply, thus delaying the diagnostic process. Also, there are 73 Computer Assisted Digital X-rays machines which are used to assist diagnose cases of chest infections including TB. This is woefully inadequate.

Right Hon.Speaker, currently an estimated 13 billion dollars is needed annually for TB prevention, diagnosis, treatment and care to achieve the global target agreed at the UN high level meeting on TB in 2018. However, in 2020 only 5.3 billion dollars, less than 41% of the global target was spent. This global underfunding has also affected Ghana. TB has overly been under funded by the Global Fund, whilst domestic funding from government can be described as sub optimal- we are doing 10% whilst the rest of the sub region is doing 50%. Ghana needs a minimum of 18 million dollars a year for effective national TB care to be able to end TB by 2030. The national TB program is unfortunately working with support from civil society with an average of 7 million dollars annually instead of the 18-million-dollar program budget. Meanwhile Right Hon. Speaker, we have civil society movement that has visibility across the country to support the government if H.E the president is ready to hold the TB bull by the horns

Mr. Speaker, tuberculosis is a primarily a socio-economic problem. People with TB are among the most marginalized and vulnerable facing barriers in accessing care and stigmatization. TB incidence is high in areas of inhumane living or working conditions. These include overcrowding in our prisons, slums and mining sites.

Mr. Speaker, in conclusion, I recommend the following,

{I} A high level meeting be held by all stakeholders {Government officials, non-state actors, civil society organizations, businessmen etc.} to discuss the issue of complementing the current financing module of TB in the country. As a nation, we need to find the extra resources to fight the TB epidemic

{II} An appeal to the business community and philanthropists to purchase and donate GeneXpert machines at a cost of 18,000 dollars each to the National Tuberculosis Program. This will assist in the diagnosis of TB in deprived communities. Also, the purchase of cartridges and computer assisted digital X-rays will ensure that the targeted 40,000 cases TB patients which can be diagnosed annually is achieved.

{III} Right Hon. Speaker, permit us to use your good office to appeal to all Hon members of the august house to call on H.E to declare TB as an emergency in Ghana with the following:

- We require the Government of Ghana to create an emergency fund to support the call to end TB in Ghana
- We ask that H.E brings TB under the office of the president just like the Ghana AIDS Commission
- We ask that the implementation of the AIDS Fund should include the End TB 2030 Agenda

{IV} Majority of TB patients need financial assistance and should be enlisted on the government program of LEAP. It is estimated that families of TB patients spent 20% of their household incomes on such patients.

{V} I appeal to the finance minister to release all monies collected by the G.R.A on behalf of NHIA to the authority. This will enable us as parliamentarians to advocate for an increase in the allocation from the NHIA fund to the national TB program for its activities. Currently the Minister of Finance releases only about 50% of revenue collected on behalf of NHIA to it.

{VI} As a matter of urgency. Let H.E push into action a national multi-stakeholder TB accountability committee to be responsible for letting no stone unturned to end TB in Ghana by 2030. And finally, that H.E endeavors to participate by carrying along TB CSO partners to the second UNHLM on TB on September 2023, in New York in order to account and renew commitments to ending TB in Ghana.

Right Hon Speaker, we are grateful to you for giving us the opportunity. Yes! We can end TB in Ghana. Yes! If we put all our collective efforts together **“We can”**.

Thank you, Mr. Speaker for the opportunity.