

Original article

## NATIONAL COMMITMENTS: CREATING MOMENTUM FOR ENDING THE TUBERCULOSIS EPIDEMIC FROM NEPAL BY 2035

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### ABSTRACT

**Introduction:** The tuberculosis prevalence survey was carried out in Nepal in 2019 provided a new estimation for Tuberculosis with a prevalence of 117,000, incidence of 69,000, death of 17,000, and Drug Resistance Tuberculosis (DRTB) of 2,200 which is a prevalence of 1.8 times, the incidence of 1.6 times, mortality of 3.1 times, and DRTB is 1.57 times higher than the previous estimation in Nepal. The Government of Nepal has made several commitments in the national and international forums to eliminate TB from the country by 2035. The objective of the review was to gather and compile the commitments of Nepal to ending Tuberculosis in the country.

**Methodology:** Published articles, grey reports, and progress reports of the Nepal National Tuberculosis Program related information collected from the Google search engine using keywords such as national commitment to end TB. All relevant manuscripts and reports were reviewed using Preferred Reporting Items for Systematic Review and Meta-Analysis (PRISMA) method. Documents were analysed and the main messages were summarized in terms of their relevance to the Ending TB strategy.

**Results:** The Government of Nepal has made several commitments in international forums to eliminating Tuberculosis, some of which are the WHO-Global Ministerial Conference on Ending TB in Sustainable Development Era in Moscow, United Nations General Assembly High-Level Meeting (UNHLM) on TB, and Delhi End TB Summit. In the year 2018, the elected parliamentarians also pledged to extend their full commitment toward ending TB and HIV in Nepal. Furthermore, in the recent past, the Prime ministers of Nepal have formally expressed their commitment to adopt a multisectoral collaborative framework and implement TB-free initiatives in the country during their tenures. Nepal also participated and reinforced the commitments in the ministerial-level meeting to renew the TB response in the South East Asia Region in 2021.

**Conclusion:** All pledges are instrumental to increase multisectoral collaboration, domestic funding, and effective leadership in the TB programme. Effective implementation of the TB-free initiative nationwide is critical for attaining SDG and END TB targets by 2035.

### INTRODUCTION

Tuberculosis (TB) is an airborne disease known to mankind since ancient times. In 1882, Dr. Robert

Koch declared that TB is caused by a bacteria called "Mycobacterium Tuberculosis"<sup>1</sup>. Discovering the bacteria was the most important step taken towards ending TB around the globe. As a result many effective medicines were produced to fight against the deadly disease and save the lives of billions of people. However, TB still remains a leading killer and public health problem around the globe and in Nepal as well.

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TB prevalence survey was conducted for the first time in Nepal in 2018/19 and it provides an annual national estimate of TB prevalence as 117,000 and incidence as 69,000 and mortality as 17,000, which are 1.8, 1.6, and 3.1 times higher than the previous estimation<sup>2</sup>. But only around 38,000 people affected with TB were identified and enrolled for treatment in 2021/22 in Nepal<sup>3</sup>. That means currently almost 45% of estimated people with TB are undetected or underreported. This could be due to the stigma and/or lack of knowledge and access to patient-friendly TB care and services.

TB prevalence survey also suggested that approximately 2,200 people are infected with drug resistance TB annually in Nepal, which is 1.57 times higher than the previously estimated (1,400 DRTB cases). This poses challenges to addressing the current high-burden situation of DRTB in Nepal<sup>2</sup>. Recent WHO estimate of annual DRTB cases in Nepal is even higher (2800)<sup>4</sup>.

Nepal has made various commitments in the national and international forums to achieve the Sustainable Development Goals and END TB targets and to eliminate the TB disease from the country. GoN has adopted the multi-sectoral response framework, which was endorsed in the WHO-Global Ministerial Conference on Ending TB in Sustainable Development Era, held on 16-17 November 2017 in Moscow. Through the multi-sectoral response framework, Ministers and leaders from 120 countries have given their commitment to accelerate progress to end TB through international action to generate sustainable financing, pursuing scientific research and development to respond to TB<sup>5</sup>.

At the regional level, in March 2017, each of the Region's Member States issued Delhi Call for Action, highlighting the political, technical, and strategic interventions needed to defeat TB. In the call, the leaders made the commitment to respond to Tuberculosis issues by increasing budgetary and human resource allocations and ensuring comprehensive and fully funded national TB plans. They ensured to provide the best possible care for everyone, supplementing medical care for TB patients, and empower communities with necessary social and financial protection in a holistic manner through collaborations across and beyond the health sector were other key areas of Delhi's call for action<sup>5</sup>.

Delhi End TB Summit was held again in March 2018, where member states unanimously adopted a Statement of Action requesting to intensify efforts towards ending TB by or before 2030. During the meeting, Minister for Health and Population from Nepal expressed his commitment by saying that "the Government of Nepal highly prioritizes the response to TB and is committed to reducing the people's suffering from this preventable and treatable illness. We have adopted the End TB Strategy to eliminate TB from Nepal by 2035". The Ministry of Health and Population has translated the commitment into actions through the TB National Strategy Plan (NSP), and the TB-free initiative<sup>6</sup>.

Following the Moscow Ministerial meeting, the United Nations General Assembly High-Level Meeting on TB which was held in September 2018 in New York, USA. The theme of the meeting was "United to End Tuberculosis: An Urgent Global Response to a Global Epidemic". The Member States including Nepal made vital contributions to the Political Declaration on the Fight against TB and made the commitment for ending TB Epidemic in the country<sup>7</sup>.

In December 2018, the SAARC TB and HIV-AIDS and National Tuberculosis Control Centre (NTCC) jointly organized a meeting with the Health and Education Committee of the House of Representatives. During the meeting, the parliamentarians made various commitments to end TB in Nepal<sup>8</sup>. Major action points of the commitments were;

- Form the SAARC-level parliamentarian forum to achieve the goals of ending TB and HIV from the SAARC countries.
- Develop an action plan to execute the commitments made at the National and International levels.
- Take action to develop leadership at all levels to fight against TB in the countries.
- Take initiation to manage the required funding for the TB and HIV Programme.
- Take a positive role to manage necessary human resources in line with the federal context.
- Provide support to initiate TB/HIV free Local Levels and social protection programs for the TB patient and people living with HIV in the country

- Support and develop the required law and acts for controlling HIV and ending TB

To reinforce the actions against TB, the Prime Minister of Nepal has made a renewed assurance on it during world TB Day 2021. He reiterated his commitment to provide momentum for economic and structural reforms which are essential to effectively implement NTP and make Nepal Free of TB. The TB Free Initiative is to be implemented by forming and mobilizing a high-level mechanism led by the Prime Minister at the federal level, the Chief Minister at the provincial level, and the Mayors of Local Levels, along with allocation of necessary resources and means, and adoption and promotion of multi-sectoral partnership<sup>9</sup>.

On October 2021, WHO SEARO organized a ministerial-level meeting to renew the TB response in the South East Asia Region. In the meeting, the health minister, a high-level official from the Ministry of Health and Population (MoHP), and the WHO representative, unanimously made the commitment to strengthen the implementation of interventions identified in the 2018 Statement of Action and the 2017 Delhi Call for Action, focusing to implement TB free initiative to achieve the targets of TB Elimination in the country<sup>10</sup>.

On world TB Day 2022, the Prime Minister and Minister for Health and Population of Nepal reinforced their promises and called for creating a conducive environment to allocate domestic resources for the fight against the deadly TB disease in the country<sup>9</sup>.

Comprehensive 5 years TB National Strategic Plan (NSP) for 2021/22-2025/26 developed by MoHP/NTCC contains all these commitments and includes several innovative interventions. The TB Free Nepal Initiative is one of the key initiative, which is being implemented in 24 districts of Nepal with comprehensive interventions included TB identification, diagnosis, treatment, prevention and support and care since 2021/22. The estimated expenditure of the NSP is USD 192 million and half of the projected costs to implement the plan are underfunded. NTP believes that these obligations will encourage and make political leaders accountable for ending the TB epidemic in the country<sup>11</sup>.

The paper intends to sensitize policy maker about the urgency to End the TB epidemic in the country

and intensify activities to fulfill their commitment. The paper can be an important medium to reach up to program managers, policymakers, and practitioners through direct communication, media coverage, and advocacy groups or organization. Once the policymakers are fully aware of the urgency to end TB in the country, they can contribute to allocate more financial resources for TB prevention, diagnosis, and treatment. Moreover, they can formulate new policies and strategies, campaign public awareness to promote the importance of TB prevention and early diagnosis, and funding for research on TB prevention, diagnosis, and treatment. The response activities implemented through Nepal's National Tuberculosis Control Program are gaining momentum. This can be observed from the promises and additional budget allocated to TB program from various Municipalities. The Government of Nepal has piloted TB free initiative in 25 Local Levels (LLs) and planned to expand this effort to all 753 LLs within the coming five years. The Ministry of Health and Population has increased the budget (around 40%) to implement the initiative this year from domestic resources, more than 50% of additional TB cases were identified and enrolled in the treatment at the initiative implemented LLs. Moreover, LLs have mobilized additional local resources in the initiative. To fulfill the commitment, END TB committees have been formed at different levels, allocate the budget to respond to TB issues. Forming and executing the high-level END TB committee under the Health Minister at federal, Health/Social Minister at Province and Mayor or Chairman at LL will provide a unique opportunity to secure political commitment to enhance NTP through revived and transformative TB efforts. To effectively END the TB epidemic in Nepal by 2035 and eliminate the disease before 2050, the following specific and precise actions are required;

- Strengthening of the Tuberculosis program in Nepal, including increased funding for prevention, diagnosis, treatment, and care
- Development and implementation targeted interventions in high-risk groups, including those living in poverty, people with HIV and diabetics and migrant and other vulnerable communities
- Implementation of a comprehensive approach to TB elimination that addresses the social determinants of disease, including poverty, malnutrition, and inadequate housing

- Integration of TB elimination with other health programs including HIV, maternal and child health, and health insurance
- Development and implementation of a robust case-based surveillance system for TB that includes monitoring of drug resistance patterns and treatment outcomes
- Strengthening of the laboratory network to ensure accurate and timely diagnosis of TB
- Promoting community awareness and their engagement in TB control, including access to information about TB and empowering communities to participate in TB prevention and control activities
- Address the challenges of inadequate supply and quantity of drugs, reagents, and equipment for TB management including.
- Strengthening the capacity of the health workforce through training and community members across advocacy and motivation.

With these specific and comprehensive actions in the policies and allocating sufficient resources to implement the interventions, Nepal can make measurable progress towards ending the TB epidemic by 2035 and eliminating the disease from the country.

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## CONFLICT OF INTEREST

None

## PATIENTS CONSENT

Not required

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