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## Report on the Impact of US Government Funding Halt on TB Responses in High TB Burden Countries

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### Introduction

The US Government funding halt, particularly through USAID, has significantly disrupted tuberculosis (TB) response efforts in several high TB burden countries. This report outlines the key areas of disruption, the specific impacts on TB programs, and the mitigation measures being implemented or planned to address these challenges. The report is structured around the broad areas of work affected, including TB screening, diagnosis, treatment, prevention, community-led activities, private sector engagement, monitoring and evaluation, supply chain management, operational research, technical assistance, capacity building, and other critical activities.

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### 1. TB Screening and Active Case Finding (ACF)

#### Disruptions:

- **Bangladesh:** Active Case Finding (ACF) supported by USAID projects (ACTB, TB-DNS) has been interrupted, affecting pediatric TB detection, diabetic clinics, and field operations for 26 portable X-ray systems.
- **Cambodia:** ACF in half of the country has halted, resulting in 100,000 people missing TB screening, 300 DR-TB cases, and 10,000 DS-TB cases going undetected.
- **Ethiopia:** 5,000 health staff funded by USAID are not working, severely affecting TB screening and detection.
- **India:** USAID-funded TB screening projects in vulnerable groups (urban slums, poor populations) have stopped.
- **Kenya:** Supervision of sub-county TB coordinators has halted, impacting case-finding activities.
- **Nigeria:** Termination of 1,800 staff in 18 high-burden states has affected OPD screening.
- **Pakistan:** All screening and ACF activities in 27 districts have been suspended.
- **Philippines:** ACF in 4 USAID projects has been disrupted, and new CXR and mRDT support has halted.
- **Tajikistan:** Community-based TB case-finding activities under USAID LON projects have stopped.
- **Tanzania:** Direct TB service delivery, including case finding, in 18 regions has ceased. CHVS who conduct case finding in health facilities and communities. They also support sample transport in the 18 regions. Overall USG supports about 30,000 HCWs and

23,000 CHWs across TB& HIV. These HCWs include lab staff that perform Genexpert testing at high volume sites.

**Mitigation:**

- **Bangladesh:** The National TB Program (NTP) is reviewing the feasibility of BRAC/Global Fund support to continue ACF activities.
  - **Cambodia:** Exploring adding ACF activities to other donor projects (e.g., L'Initiative/Expertise France and Australia Government).
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**2. TB Diagnosis: Rapid Testing, DST, Specimen Transport, and Other Diagnostic Processes**

**Disruptions:**

- **Bangladesh:** Activities at regional reference labs have been affected due to the suspension of USAID-supported microbiologists.
- **Cambodia:** 25,000 people missed TB diagnoses, and mobile ACF in hard-to-reach populations has been impacted.
- **Ethiopia:** Specimen transport funded by PEPFAR has been disrupted, though a waiver was granted on 10 February.
- **Kenya:** Sample transport supported by USAID has halted, affecting DS and DR-TB diagnosis.
- **Nigeria:** Outreach activities and sample transportation in 18 states have been affected.
- **Pakistan:** Diagnostic activities in 27 districts have been disrupted.
- **Tajikistan:** Country Lab TB advisor and external TA from SRL-Gauting, Germany, have stopped.
- **Tanzania:** Sample transport for DS and DR-TB in 14 regions has been affected.
- **Uganda:** Specimen transport reliant on PEPFAR has been disrupted, and the National Medical Stores cannot distribute USAID supplies.
- **Ukraine:** Laboratory support, including reagents, equipment, and training, has stopped.

**Mitigation:**

- **Cambodia:** TB networks and Peer Support Groups are encouraged to refer presumptive TB cases from the community level.
  - **Kenya:** Sample transport may resume once new budgets and workplans are approved.
  - **Uganda:** The NTP is trying to manage specimen transport with existing government resources.
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### 3. TB Treatment (Including DR-TB and TB/HIV Treatment) and Treatment Adherence Support

#### Disruptions:

- **Bangladesh:** MDR patient management at hospitals has been affected due to the suspension of dedicated medical doctors from the ACTB project.
- **Cambodia:** Treatment support for half of the country has been impacted. **Nigeria:** Case holding in OPD services has been affected.
- **Philippines:** Pilot projects for peer support have halted.
- **Tajikistan:** Treatment adherence support, including psychosocial support and NGO engagement, has stopped.
- **Tanzania:** Delay the rollout of BPaLM, as the key DR-TB focal person and supporting partners are no longer available, potentially impacting treatment initiation.
- **Ukraine:** TB treatment is affected due to drug supply issues, and adherence support has been disrupted.

#### Mitigation:

- **Cambodia:** Peer support groups are encouraged to step in
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### 4. TB Prevention: Contact Investigation, Testing for TB Infection, and TB Preventive Treatment (TPT)

#### Disruptions:

- **Bangladesh:** The halt of USAID-supported contact tracing and screening hinder further distribution and use of 3HP FDC, putting TPT targets at risk and increasing the likelihood of medicines wastage.
  - **Ethiopia:** The halt of USAID-supported contact tracing and screening hinder further distribution and use of 3HP FDC, putting TPT targets at risk and increasing the likelihood of medicines wastage.
  - **Cambodia:** Contact screening of 2,500 contacts and 10,000 TPT enrollments have been halted.
  - **Nigeria:** TPT activities in 18 states have been affected.
  - **Pakistan:** TPT activities in 27 districts have been disrupted.
  - **Tanzania:** Contact investigations in 14 regions have been affected. .
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## 5. Community-Led Activities, Including Community-Supported TB Prevention and Care, Community-Led Monitoring, and Stigma Reduction

### Disruptions:

- **Bangladesh:** Community-led activities, including TB prevention and stigma reduction, have stopped.
  - **Cambodia:** 8,000 people missed TB awareness activities, and support for CLM-OneImpact has halted.
  - **India:** USAID-funded community-led activities, including TB prevention and monitoring, have stopped.
  - **Nigeria:** TB outreach activities have halted.
  - **Pakistan:** CLM activities and stigma reduction work have stopped.
  - **Tanzania:** Community TB services in 3 regions have been affected.
  - **Ukraine:** Pilot interventions for mobilizing local governance and communities for TB elimination have stopped.
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## 6. Private Sector Engagement in TB Care

### Disruptions:

- **Bangladesh:** 4 out of 10 PPM sites supported by USAID have stopped working.
- **Nigeria:** PPM activities in USAID-supported states have been affected.
- **Pakistan:** PPM activities in 27 districts have halted.
- **Philippines:** Engagement with the Lab Consortium has halted.
- **Tanzania:** Private sector engagement in 14 regions has been impacted.

### Mitigation:

- **Bangladesh:** The NTP is asking the Global Fund to support the 4 PPM sites.
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## 7. Recording and Reporting, Program Supervision, Monitoring, and Evaluation (M&E)

### Disruptions:

- **Bangladesh:** Upgradation of the digital TB reporting system (e-TB manager) has stalled.
- **Cambodia:** TB-MIS support and supervision meetings in USAID areas have stopped.
- **Ethiopia:** LabXpert connectivity system has been halted.
- **Kenya:** The TB information system (TIBU) has been impacted, and support for strengthening the TIBU LIMS connectivity system has halted.

- **Pakistan:** District TB Program Review Meetings supported by USAID will no longer occur.
- **Tajikistan:** Development of the electronic TB recording and reporting system has stopped.
- **Tanzania:** Sub-national performance review meetings in 14 regions have been affected.
- **Uganda:** The halt of USAID support has disrupted patient data collection, with the NTP expecting up to 50% underreporting.
- **Ukraine:** Monitoring visits to regions have stopped.

#### **Mitigation:**

- **Bangladesh:** The NTP is asking the Global Fund to support upgrading the e-TB manager.
- **Cambodia:** Provincial Health Departments continue to monitor health facilities.

## **8. Procurement and Supply Chain of TB Drugs, Diagnostics, and Other Commodities**

#### **Disruptions:**

- **Bangladesh:**
  - Disrupt information system upgrades, e-LMIS training, warehouse support, and data collection, impacting quantification and supply planning
  - Suspend support for contact tracing, screening, DR-TB management, and laboratory services, potentially reducing medicine consumption and increasing the risk of wastage
- **Cambodia:**
  - Procurement of portable and digital X-ray machines has been halted
  - The scaling up of new regimens particularly for DR-TB case enrollment, and data quality for medicine quantification affected.
- **Democratic Republic of Congo:**
  - Impact the procurement of DR-TB medicines for all XDR and some MDR-TB cases, Xpert cartridges and Truenat MTB tests procurement for 2025.
  - Leave 2026 procurement unfunded, as USAID was expected to contribute to diagnostics and DR-TB treatment.
  - Halt provincial-level distribution in 12 out of 26 provinces.
  - Disrupt information collection, quantification, and supply planning across the country.
  - Disrupting the scale-up of 3HP preventive treatment, as 30% of the 188,238 treatments procured under USAID catalytic funding have been distributed to four provinces, while the remaining 70% remain in Kinshasa, set to expire in 2026. This raises concerns about meeting program targets and the risk of potential wastage.
- **Ethiopia:**
  - Disrupt the 2025 procurement of GeneXpert and TrueNat cartridges and X-ray machines.
  - Impact medicine delivery to conflict-affected areas.

- Hinder contact tracing and screening, potentially disrupting scale-up of 3HP preventive treatment, and increasing the risk of medicine wastage.
- Affect data collection and quantification validation.
- **Ghana:**
  - The last-mile distribution in the Eastern, Northern, and Upper West regions affected.
- **Indonesia:**
  - The halt of USAID support for training on logistics management information systems, planned QuanTB training across provinces, and TA for coordinating NTP and the Global Fund on PSM is expected to affect the quality and timeliness of routine reporting and in-country distribution.
- **Kazakhstan:**
  - For quantification digitalization project, external TA remains essential to prevent system underutilization and quantification errors that could disrupt PSM activities.
- **Kenya:**
  - Disrupt emergency TB medicine supplies, inter-facility transfers, and PSM activities by County and Sub-County TB Leprosy Coordinators, delaying enrolment and LMIS reports and impacting data quality for quantification and supply planning.
  - Affect procurement of medicines for 3HP preventive treatment and distribution for PLHIVs.
- **Liberia:**
  - Impacted TB medicine services at the central medical warehouse, while distribution remains unaffected as it is funded by the Global Fund. To fill this gap, the government is finalizing an MoU with WFP to support warehouse operations.
- **Malawi:**
  - Affect stock and enrollment data quality, which are essential for quantification and stock reviews due to the suspension of quarterly supervision visits.
  - Reduce TB medicine consumption, including for preventive treatment, by disrupting case-finding and contact-tracing support, increasing the risk of expiries and wastage.
- **Mozambique:**
  - Data quality for quantification and supply planning
  - Distribution planning and the movement of TB medicines from central to regional levels and health facilities
- **Nigeria:**
  - Halted the procurement of 200,000 Xpert tests
- **Philippines:**
  - Stopped financial support for a one-month stopgap supply of DS-TB medicines, expected to result in a stockout from April to May 2025.

- Delayed the distribution and user training of USAID-funded IGRA tests, increasing the risk of expiry before July 2025.
- **Tajikistan:**
  - Embedded TA for laboratory services has stopped, creating gaps in lab commodities procurement and supply planning.
- **Tanzania:**
  - Delay the rollout of BPaLM, as the absence of the key DR-TB focal person and supporting partners will slow treatment initiation, leading to unpredictable medicine demand and potential shortages or wastage.
  - The procurement of commodities worth USD 1.3 million (167,500 GeneXpert cartridges, equivalent to a six-month supply) under the USAID-funded GHSC project halted, potentially leading to shortages unless the country secures an alternative funding source.
- **Uganda:**
  - Creating stockouts, with a GeneXpert cartridge shortage expected in May 2025, while TrueNat cartridges and medicines for 3HP preventive treatment are already out of stock at the central level.
  - Delay X-ray machine installation and training, as competing priorities may hinder the government's efforts to secure alternative funding, potentially impacting diagnostic capacity and timely treatment initiation
  - Disrupt patient data collection, leading to up to 50% underreporting, which will hinder new regimen uptake monitoring and stock analysis.
  - Impact the redistribution of medicines between facilities and the collection of emergency orders, further affecting supply chain efficiency
- **Ukraine:**
  - There is no clarity on TB commodity procurement funding for 2026, as USAID was a major contributor to domestic funding substitution for DS-TB and DR-TB medicine procurement.
- **Uzbekistan:**
  - The halt of the planned establishment of a PSM Unit, along with staff training, regulatory framework development, and regional quantification workshops under the USAID project will weaken supply planning and procurement capacity, increasing the risk of supply chain disruptions.
- **Zambia:**
  - Severely impact GeneXpert cartridge procurement, leaving 600,000 planned tests (9.6 months of stock) unfunded and unprocured, with the country already facing stockouts.
  - Delay TB medicine distribution as the broader supply system is affected, impacting facility-level redistribution and emergency orders from central medical store deliveries.
  - Affect medicine distribution, though it will not come to a complete halt, as TB medicines are primarily funded by the Global Fund. While USAID provided partial support for distribution, delays are expected due to the broader impact on the overall supply system into which TB medicines are integrated. The last-mile distribution, previously supported by the USAID-funded, has been disrupted. Although the Zambia Medicines and Medical Supplies Agency

(ZAMMSA) will continue last-mile distribution, its capacity is limited. Additionally, the redistribution of medicines at the facility level to address stock imbalances, along with the delivery of emergency orders and supplies from central medical stores, will be affected, as these activities relied heavily on USAID support.

- Delay the TB-eLMIS rollout due to the suspension of USAID-funded support for the Electronic Supply Chain Management Information System (eSCMIS) project, which is crucial for eLMIS implementation and data management for essential medicines.
- Disrupt case finding, contact tracing, and data collection due to the halt of USAID-funded TB LON and partner-supported community programs, potentially leading to lower-than-expected TB medicine consumption and affecting supply planning and stock management.
- **Zimbabwe:**
  - The Drug-Resistant Survey halted, leaving trained facilitators underutilized and reagents at risk of expiry.
  - Hinder case detection, treatment initiation, and medicine use due to the loss of USAID-funded staff in DR-TB management, affecting supply planning and stock management, despite some services continuing

**Mitigation:**

- The NTPs of Bangladesh, Cambodia, Democratic Republic of Congo, Ethiopia, Indonesia, Kenya, Malawi, Tanzania, Uganda and Zambia requested GDF's support in data validation, assumption verification for quantification updates.
- **Bangladesh:** The NTP requesting the Global Fund to support eLMIS training.
- **Cambodia:** Follow-up with the Global Drug Facility (GDF) on the procurement is ongoing
- **Ethiopia:** The NTP is requesting GDF's support for monitoring the utilization of medicines provided under the USAID 3HP FDC catalytic project.
- **Kazakhstan:** The NTP is seeking alternative funding for external TA to prevent underutilization of the digital quantification system and quantification errors that could disrupt PSM activities.
- **Kenya:** The NTP is seeking alternative funding to fill the funding gap for 3HP FDC procurement that was under USAID-funded MEDS project.
- **The Philippines:** The Department of Health is working with local suppliers to accelerate domestic procurement and requesting GDF to deliver Global Fund-funded DS-TB medicines before April.
- **Tanzania:** The NTP is assessing the impact on the 2025–2026 supply plan and exploring options to reprogram available funds to fill the gap for procuring commodities initially planned under the USAID-funded GHSC project.
- **Uganda:** The NTP is taking the following actions in response to the halt of USAID support:
  - Seeking alternative funding for GeneXpert cartridges, 3HP, and TrueNat cartridges.



- Working to secure funding for X-ray machine installation and training.
  - Reorganizing medicine redistribution between facilities and the collection of emergency orders to minimize disruptions to supply chain efficiency.
  - **Zambia:** The NTP is seeking alternative funding for the urgent procurement of Xpert tests.
  - **Zimbabwe:** The NTP is working to use available reagents to minimize wastage, as the halt of USAID-supported DRS has left facilitators underutilized and reagents at risk of expiry.
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## 9. Surveys and Operational Research

### Disruptions:

- **Bangladesh:** Initiatives under HS4 TB, including Patient Pathway Assessment and Diagnostic Network Optimization, have stalled.
  - **Cambodia:** Cohort studies and scale-up of IGRA tests have been delayed.
  - **India:** Capacity-building exercises for surveys and operational research have stopped.
  - **Nigeria:** The DRS survey, 90% completed, has been halted.
  - **Philippines:** Pilot studies on urine LF LAM, IGRA, and formative research have stopped.
  - **Tajikistan:** The halt of the Regional USAID RAFET project has made the planned operational research study on the new SIILTIBCY diagnostic test unfeasible. Although a PRF was submitted to GDF in January 2025, no payment was made, and the study, initially set to begin mid-year after preparatory work and test delivery, can no longer proceed.
  - **Zimbabwe:** Drug Resistance Survey halted
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## 10. External Technical Assistance

### Disruptions:

- **Bangladesh:**
  - STTA support for consultants in PSM, digital tools, and COVID testing has stopped.
  - The support of two USAID-funded Country Advisors for TB and DR-TB program management has stopped, and USAID-funded MTaPS support in PSM has also stopped.
- **Cambodia:** The support of 1 USAID-funded Country Advisor for diagnostics and DR-TB programmatic management has stopped, and the USAID-funded CHC/COMMIT2 project, which supported DR-TB regimen scale-up, DR-TB medicines quantification, and case data management, has also stopped.

- **Democratic Republic of Congo:** The support of 3 USAID-funded advisors for PSM, DR-TB programmatic management, and M&E has stopped.
- **Ethiopia:** The support of 3 USAID-funded advisors for PSM, DR-TB programmatic management, and laboratory services has stopped, and USAID-funded staff supporting Ethiopian Pharmaceutical Supply Service (EPSS) hubs have also stopped.
- **Ghana:** The support of 1 USAID-funded advisor for TB programmatic management, all Global Fund-related activities and guideline development has stopped
- **Indonesia:** The support of 2 USAID-funded advisors for PSM, laboratory services, and capacity building on logistics management has stopped.
- **India:** USAID-funded technical assistance in planning, training, and community mobilization has been affected.
- **Kenya:** The support of 1 USAID-funded advisor for DR-TB programmatic management has stopped. The USAID-funded Tamatisha TB project, which facilitated emergency TB medicine supplies, inter-facility transfers, and PSM activities by County and Sub-county TB Leprosy Coordinators, has also ended.
- **Kyrgyzstan:** The support of 2 USAID-funded advisors for DR-TB programmatic management has stopped.
- **Malawi:** The support of four USAID-funded advisors for PSM, Global Fund grant implementation and DR-TB programmatic management has stopped.
- **Mozambique:** The support of 2 USAID-funded advisors for PSM and DR-TB programmatic management has stopped.
- **Myanmar:** The support of 2 USAID-funded advisors for TB and DR-TB programmatic management, as well as for supplementing PSM staff, has stopped.
- **Nigeria:** The support of 1 USAID-funded advisor for laboratory services, over 1,600 sample collection staff and 40 lab ad-hoc staff for ongoing DRS has stopped (
- **Pakistan:** TA provided through TIFA has stopped.
- **Philippines:** The support of 2 USAID-funded advisors for TB and DR-TB programmatic management, the NSP and the Global Fund Funding Proposal development and laboratory services has stopped
- **Tajikistan:** The support of 2 USAID-funded advisors for TB and DR-TB programmatic management, the NSP and the Global Fund Funding Proposal development and laboratory services has stopped.
- **Tanzania:** The support of 4 USAID-funded advisors for TB and DR-TB programmatic management, the Global Fund grant implementation and Funding Request development, and laboratory services has stopped.
- **Uganda:** The support of 2 USAID-funded advisors for PSM, DR-TB programmatic management and all the Global Fund activities has stopped.
- **Ukraine:** The support of 4 USAID-funded advisors for TB and DR-TB programmatic management and the Global Fund Funding proposal development has stopped.

- **Uzbekistan:** The support of 2 USAID-funded advisors for TB and DR-TB programmatic management and the Global Fund Funding proposal development has stopped.
- **Zambia:** The support of 4 USAID-funded advisors for TB and DR-TB programmatic management, laboratory services, M&E, and Global Fund grant management and implementation has stopped. Additionally, seconded staff, including nurses, drug dispensers, and personnel supporting the central medical stores, are no longer working.
- **Zimbabwe:** The support of 1 USAID-funded advisor for TB and DR-TB programmatic management has stopped.

### Mitigation

- **Bangladesh, Cambodia, Democratic Republic of Congo, Ethiopia, Ghana, Indonesia, Kenya, Kyrgyzstan, Malawi, Mozambique, Myanmar, Nigeria, Pakistan, Philippines, Tajikistan, Tanzania, Uganda, Ukraine, Uzbekistan, Zambia, and Zimbabwe** are requesting continued TA from GDF. With the departure of USAID-funded NTP staff—many of whom were mentored and trained by GDF—new personnel now require capacity building to maintain the quality of work within NTPs.
- **Ethiopia:** The government is considering appointing a new staff member to take over the work currently performed by the USAID-funded (seconded) personnel in PSM. The new staff member will require mentorship and training in quantification and procurement planning.
- **Uganda:** The government is considering appointing a new staff member to take over the work currently performed by the USAID-funded (seconded) personnel in PSM. The new staff member will require mentorship and training in quantification and procurement planning.
- **Zimbabwe:** The government-appointed PSM staff is still learning, causing data delays, while the absence of the USAID TB advisor has affected DR-TB information sharing. Mentorship and training in quantification and procurement planning will be needed.

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## 11. Capacity Building and Training

### Disruptions:

- **Bangladesh:** Training on Child TB, CXR, TB-HIV, and e-TB manager has been postponed.
- **Cambodia:** TA for capacity building of 'TB people' has stalled.
- **India:** Capacity building in ACF/TPT, AIC, and comorbidity management has been affected.
- **Pakistan:** Training of Community Champions on TB awareness has halted.
- **Philippines:** Capacity development in tNGS, diagnostic network optimization, and DRTB management has been severely hampered.
- **Ukraine:** Training of teachers for TB education programs has been put on hold.

**Mitigation:**

- **Bangladesh:** The NTP will cover training costs from Global Fund and domestic funds.
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**12. Other Activities****Disruptions:**

- **Philippines:** Key activities like the enhancement of the PhilHealth TB benefit package and support for Regional Coordinating Councils have halted.
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**Conclusion**

The suspension of US Government funding has caused widespread disruptions across multiple aspects of TB response in high-burden countries. Substantial disruption in drugs and diagnostic logistics is seen and potential stock out in the next few months in many countries anticipated. While some mitigation measures are being explored, the long-term impact on TB care efforts could be severe if funding is not restored promptly. Countries are seeking alternative funding sources to continue critical activities, but the gaps in service delivery, diagnosis, and treatment adherence could lead to increased TB transmission and mortality. Urgent action is needed to address these challenges and ensure the continuity of TB programs.