

Global Tuberculosis

Since 2000, U.S. bilateral TB programs have reduced TB deaths by nearly 50%, and with partners **saved more than 75 million lives.**

What is Tuberculosis and Why It Matters

Tuberculosis (TB) is a contagious, airborne disease that most often affects the lungs. It is preventable and curable, yet it remains the deadliest infectious disease in the world. Each year, over ten million people become sick with TB, and more than a million people die.

TB disproportionately affects people living in poverty and communities facing barriers to health care, including undernutrition, overcrowded and poorly ventilated living and working conditions, and limited access to diagnosis and treatment. Drug-resistant TB presents an even greater challenge requiring longer, more complex, and more expensive treatment. Ending TB is not only a public health priority; it is a matter of human rights.

The State of the Global TB Response

TB is a disease that affects every region of the world, with the highest burden concentrated in a relatively small number of countries. Progress against TB has been uneven. While some countries have reduced cases and deaths, global progress remains far off track.

Persistent gaps in funding, health workforce capacity, and access to diagnostics and treatment continue to limit progress. Disruption to health services – whether from pandemics, conflict, or funding instability – have quickly reversed hard-won gains, allowing TB transmission to increase and drug resistance to spread. Sustained, coordinated action is essential to maintain progress and prevent backsliding.

Driving Progress through U.S. Global TB Investments

For decades, the United States has played a leading role in the global fight against TB. Through bilateral programs and multilateral partnerships, U.S. investments have helped expand access to TB diagnosis, treatment, and prevention in high-burden countries.

Historically, U.S. bilateral TB funding – largely through USAID – supported country-led TB programs, trained health workers, and helped scale up new tools and innovation. These efforts complemented U.S. support for the Global Fund to Fight AIDS, Tuberculosis and Malaria, which remains the largest external source of TB financing worldwide.

Together, these investments have saved millions of lives, reduced TB deaths, and supported global health security by limiting the spread of TB, including drug-resistant TB.

Changes in 2025: Disruptions and Uncertainty

In 2025, the abrupt shut down of U.S. foreign assistance led to widespread disruption of TB programs, and lives lost. Many TB programs were paused, scaled back, or shut down entirely. In addition to supply chains and access to drugs and diagnostics being challenged, this affected services such as active testing, treatment support, laboratory capacity, community-based care, and more.

While some TB activities have since resumed, they often operate at lower levels than before, with reduced reach and continuity. These disruptions have strained health systems in high-burden countries and raised concerns about setbacks in TB control including delayed diagnosis, treatment interruptions, and increased risk of drug resistance. Cuts in international funding in the past year are [projected to risk millions of additional cases and deaths between now and 2035](#) if not addressed.

TB as a U.S. Global Health Priority

Tuberculosis has been identified as a key priority in the [State Department's Global Health Strategy](#). The Administration has acknowledged the importance of U.S. TB programs and their impact in reducing TB rates and deaths, particularly in high TB-burden countries.

The structure and outcomes of the new bilateral health compacts will determine funding agreements and shape how TB programs operate going forward. Over the years, Congress has worked together in a bipartisan way to scale up funding for global TB and set policies that maximize the impact of every dollar, ensuring it goes to the highest impact strategies in the highest need places. For example, in 2023 alone, the U.S. global TB programs supported:

- Treatment for drug-resistant tuberculosis for 113,000 people
- Diagnosis of 6.4 million people with TB, who could then start treatment
- TB prevention for 2.4 million people who were at the highest risk

As the Administration moves ahead with a new strategy, Congress needs to make sure that the outcomes and impact continue.