

Amsterdam Declaration to Stop TB

24 MARCH 2000, AMSTERDAM, THE NETHERLANDS

The Ministerial Conference on Tuberculosis & Sustainable Development,
involving ministerial representatives from 20 high-burden countries comprising eighty percent of the global TB burden,
meeting in Amsterdam, on this the first World TB Day of the new millennium, the twenty-fourth day of March in the year 2000;
Expressing the urgent need for accelerated action against tuberculosis, a major killer of our people
& a significant impediment to the development of our nations.

HEREBY ADOPTS THE FOLLOWING DECLARATION:

I. WE NOTE WITH GRAVE CONCERN THAT:

THE MAGNITUDE of suffering & death caused by the global tuberculosis pandemic is both alarming & unacceptable;

TUBERCULOSIS exerts a toll of eight million new sufferers & two million deaths every year, including many children;

WOMEN & men are most affected in their most productive years;

TUBERCULOSIS disrupts the social fabric of society by taking children out of school & stigmatizing individuals;

IT TRAPS the world's poorest, most marginalized & vulnerable groups (including prisoners) in a vicious cycle of disease & poverty;

THREE of every four people stricken by tuberculosis are young adults, many suffering from AIDS, cut down in the prime of their lives;

TUBERCULOSIS is the leading cause of death among HIV-positive people & accounts for one-third of AIDS deaths worldwide;

NO OTHER disease combination more directly blocks the development of families, communities & thus national economies;

YET, in the face of this grave situation, the level of public awareness & political commitment remains inadequate.

II. WE RECOGNIZE THAT:

THE GLOBAL tuberculosis emergency is much more than a health concern;

IT IS a complex socioeconomic problem that impedes human development, & cannot be defeated by the health sector acting alone;

CONFRONTING tuberculosis requires collaboration across government sectors & action across society;

EXPANDED actions must be underpinned by rigorously tested technical strategies;

NEW opportunities exist to enlist modern communications, media & technology in health education aimed at improving health-seeking behaviour;

THERE exists a cost-effective cure;

HOWEVER, accessibility of safe & efficacious first-line drugs is still an important concern in many countries;

MOREOVER the affordability of & access to second- & third-line drugs requires urgent attention;

IN ADDITION, the need for accelerated development of diagnostics, new drugs & vaccines is noted;

AN ACCELERATED response to tuberculosis founded on increased political commitment is now required to avert a worldwide drug-resistant epidemic with colossal social & economic costs.

III. WE AFFIRM THAT:

THE EFFECTIVE management of tuberculosis in adults & children is an integral part of primary health care; if mainstreamed as a high priority it can be a major contributor to the overall development of national health systems;

THE WHO-recommended strategy to combat tuberculosis (DOTS) is the internationally-accepted set of core practices required to confront the disease & prevent the emergence of drug resistance;

TUBERCULOSIS control is a highly effective strategy for poverty alleviation;

ACCESS to life-saving tuberculosis control programmes providing safe, high quality drugs opens doors to life's opportunities by getting people back to work & school;

TB CONTROL represents a global public good as the epidemic will get worse if we fail to effectively treat infectious cases, track the epidemic, & share best practices & tools within & across borders;

EFFECTIVE treatment & cure of tuberculosis is one of the most tangible interventions available to extend the life of persons with HIV/AIDS;

POORLY devised actions lead to the emergence of drug-resistant epidemics.

IV. WE COMMIT OURSELVES TO ACCELERATE ACTION AGAINST TUBERCULOSIS THROUGH:

EXPANDED coverage of our populations with the WHO-recommended strategy to combat tuberculosis (DOTS) providing for at least 70% detection of infectious cases by the year 2005;

ENSURING that sufficient human & financial resources are available on a sustainable basis & expanded to meet the challenges of stopping tuberculosis;

ENSURING that the implementation capacity is developed to utilize these resources efficiently & effectively;

IMPLEMENTING, monitoring & evaluating our national tuberculosis programmes in line with internationally-accepted WHO standards;

IMPROVING systems of procurement & distribution of tuberculosis drugs to ensure quality, access, transparency & timely supply;

INCORPORATING basic outcome measures for tuberculosis as performance indicators for overall health sector performance;

PROMOTING the development of national & international partnerships to stop tuberculosis with all stakeholders in society, including government departments & organizations, private health sector, industry, nongovernmental organizations & the community;

ACTIVELY participating in the development & subsequent implementation of a global partnership agreement to Stop Tuberculosis designed to foster ownership & accountability.

V. WE CALL UPON PARTNERS:

WHILE recognizing that it is first & foremost the responsibility of affected countries to take the necessary actions essential for sustained progress against tuberculosis, we call attention to the fact that the problem is often the greatest in the very countries which can least afford to take action, & that it is in the interest of the global community to support tuberculosis control worldwide;

WELCOMING the initiative of the Director-General of WHO & the President of the World Bank who, as partners in the Stop TB Initiative, convened this Conference & have committed their organizations to work with our governments to develop & implement a global partnership agreement;

THROUGH this agreement individuals, governments, private organizations & industry can all contribute to mobilizing increased political will & financial resources & accelerating national & international progress;

RECOGNIZING the enormity of the task ahead & the huge amount of resources required, we call upon international development partners from the UN system, Bretton Woods institutions, bilateral agencies, nongovernmental organizations & foundations to increase their support to tuberculosis control efforts by contributing resources, taking into account the debt burden of the recipient countries, in order to:

- develop &/or strengthen national development plans that incorporate health development & tuberculosis control as essential components;
- build new international approaches towards ensuring universal access to, & efficient national systems of, procurement & distribution of tuberculosis drugs;
- accelerate basic & operational research for the development & delivery of new tools, including diagnostics, drugs & vaccines, & pay attention to the need for improved incentives for drug & vaccine development in a manner consistent with affordability & accessibility of such new products;
- establish a Global Fund for Tuberculosis to mobilize & invest new, additional resources to support the above activities;

MOREOVER, we call upon partners not to let any externality, including politics, sanctions & war, affect the flow of logistic & financial support to programmes.

RECOGNIZING that we represent the governments of countries with the highest burden of tuberculosis in the world, but that other countries not represented in this Conference face many or all of the same problems, we call on our colleagues around the world to join WHO, the World Bank & others in the Stop TB Initiative to actively participate in building new momentum against tuberculosis for better health for all in the new millennium.