



Treatment Action Group

Health Committee Preliminary Budget Hearing: Testimony on TB's impact on New York City

March 20, 2018

Thank you to Chairman Levine and all the Health Committee members for your commitment to making New York a healthier, more equitable place, and for the opportunity to call your attention to the growing threat of tuberculosis (TB) in New York City.

My name is Erica Lessem, and I'm from Treatment Action Group (TAG). TAG is an independent, activist and community-based research and policy think tank fighting for better treatment, prevention, a vaccine, and a cure for HIV, TB, and hepatitis C.

We at TAG, and our partners representing immigrant communities, housing rights, and public health expertise, are alarmed by TB's recent rise in New York. TB is airborne and infectious, meaning anyone who breathes is at risk of contracting this potentially deadly disease. But TB disproportionately affects the most vulnerable: those with weakened immune systems, people living in crowded settings, and our immigrant communities.

Despite being preventable and curable, **TB is on the rise in New York City** for the first time in over twenty-five years. Also increasing at a rapid pace are cases of drug-resistant TB, which are more difficult and costly to treat: a single average case of drug-resistant TB costs \$294,000. This resurgence of TB is a direct result of years of underinvestment in New York City's TB response. While in recent years the City, thanks to your leadership, has steadily funded TB, a history of cuts since 2007 have reduced the City's TB funding from \$16.43M in 2007 (adjusted for inflation) to just \$8.59 million this year. Ongoing reductions at the state and federal levels over the past decade, and dramatic cuts in recent years, have exacerbated this situation. Total funding for the New York City Department of Health and Mental Hygiene (DOHMH) Bureau of TB Control (BTBC) has been reduced by half in the last ten years. Several of the City's TB clinics have closed, and the few that are still open have much more limited hours and staffing.

Investing in the public health response to TB now will save billions

Adequate funding for the TB response would lift a heavy burden off of New Yorkers, allowing for:

- 1) **proactive outreach by community organizations** to raise awareness about TB, and provide services to identify and prevent it, sparing money and suffering in the long run;
- 2) **restored clinic facilities** that meet patient needs, so people from your districts can seek care in chest clinics instead of more expensive hospitals, and don't have to wait weeks for appointments;



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- 3) **sufficient staffing** to provide coordinated, culturally competent care to people with TB and their families.

These efforts could save the City billions of dollars. Similar to what we're seeing today, budget cuts in the 1970s and 1980s dismantled the public health response to TB, and led to a massive outbreak of drug-resistant TB in New York City. This outbreak cost over \$1 billion to control in the 1990s. This is the first time since then that TB is on the rise again. We are in danger of repeating history, and of overburdening our public health system with an epidemic that could be entirely prevented. We are putting our already vulnerable communities, especially immigrants, at great risk.

I enclose a letter from dozens of your constituents appealing for **a restoration of New York City funding to the DOHMH BTBC to \$14.89 million** (a \$6.3 million increase over the current year). We are making similar—though proportionally higher—requests at the state and federal levels. We look forward to your leadership.

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