

Project brief

The Tuberculosis Regional Eastern European and Central Asian Project (TB-REP) on strengthening health systems for effective tuberculosis (TB) and drug-resistant TB prevention and care is a three-year project that began in 2016. It is funded by the Global Fund to Fight AIDS, Tuberculosis and Malaria and implemented by the Center for Health Policies and Studies of the Republic of Moldova as the principal recipient and the WHO Regional Office for Europe as the technical lead agency, in collaboration with partners, namely TB Europe Coalition (through Alliance for Public Health Ukraine), Stop TB Partnership, and technical expertise of London School of Economics and Political Science, European Respiratory Society London School of Hygiene and Tropical Medicine.

The project support 11 countries of eastern European and central Asian in addressing outdated models of TB care in order to tackle the high burden of TB and MDR-TB. The project assists countries in implementing effective and efficient TB service delivery systems with sustainable financing.

This newsletter summarizes project key activities and achievements during June-December 2017.

Key deliverables

- **A People Centered Model of TB Care produced to assist countries in implementing people-centred approach**

The TB-REP technical partners have produced the key deliverable of the project, the *People Centered Model of Care: Blueprint for EECA Countries* and is now available in both Russian and English versions. It looks at new approaches to TB service delivery, health financing and human resources, taking into consideration basic elements of people-centred care.

The Blueprint was designed to assist countries in choosing and developing new TB service delivery models, such as shifting towards an outpatient model of care with sustainable financing and well-aligned payment mechanisms.

The document provides policy instruments to improve TB prevention and treatment outcomes through better financing of TB services, improved models of TB care and rational planning of the health workforce for TB control. Implementation of the Blueprint at the country level has been started through TB-REP technical missions.

The blueprint was developed as part of TB-REP by the Centre for Health Policies and Studies, in partnership with the European Respiratory Society, the London School of Economics and the London School of Hygiene and Tropical Medicine, under the technical leadership of WHO/Europe, and with contributions from the Stop TB Partnership, the TB Europe Coalition, and from civil society organizations that are national partners.

The Blueprint is available here: [English](#) [Russian](#)

More information [here](#)



- **Countries taking commitment to action**

Two countries, Kyrgyzstan and the Republic of Moldova, have approved roadmaps to implement a people-centred model of care for TB, tailored to their countries. The roadmaps include practical step-by-step actions for system-wide interventions that will lead countries to shifting their health systems towards more outpatient-oriented models of TB care and better outcomes in TB control. They outline specific actions, at the level of activities and tasks, to be implemented in the short and medium term.

Through roadmap development, both countries have mobilized their national stakeholders, including ministries of health, national treatment programmes, and communities, to engage in people-centred health system transformation to improve TB prevention and care. National teams have started implementation process, with support provided by TB-REP and other partners.

The National Working Groups are in the process to develop Roadmaps in Azerbaijan, Belarus, Tajikistan and other countries are expected to start work on their roadmaps.

- **Available practical tools to operationalize the change**

Two practical tools can be applied by countries in implementing people-centred model of TB care:

- **A tool to estimate TB hospital bed needs**

The tool is designed to provide stakeholders in targeted countries with data that can be used to forecast TB hospital-bed needs, based on epidemiological and policy trends. The forecasting tool contains 18 steps, divided into two stages – estimating the TB epidemic profile and reflecting treatment strategies and hospitalization practice.

Countries can use this estimator for appropriate planning of TB beds, which is one of the critical steps in efficient resource allocation and in shifting the systems towards more people-centred and integrated models of care.

It can be accessed [here](#):

- **A tool to assess human resources for TB control**

The tool is designed to guide countries in conducting the situation assessment of their workforce involved in delivering TB care. Apart from general assessment of the health workforce, the tool includes a task shifting component to address proper redistribution of the selected tasks from specialist and generalist medical doctors to mid-level health professionals and, in turn, from mid-level professionals to non-medical professionals, patients and patients' supporters.

Countries can use this tool to conduct health workforce planning ensuring adequacy of the supply and distribution of the human resources.

Key events

- **Technical consultation of TB-REP countries to discuss ways of implementing people-centred model of care for TB patients**



On June 30 – July 01, 2017, in Chisinau, Moldova, the project partners have conducted a technical consultation of TB-REP partners representing 11 TB REP countries. During the consultation, participants received practical guidance provided by the WHO experts in developing policies that will lead to better outcomes in TB control. Principles and key elements of the people-centred model of TB care were presented, encouraging stakeholders to initiate actions at the country level.

As mentioned by the participants, results of this regional technical consultation will help them to make difficult decisions about which policy options to pursue with more confidence to reform the overall model of TB care in their countries.

Story [here](#).

- **TB-REP Ministerial Breakfast meeting at 67th session of the WHO Regional Committee for Europe**

During a meeting held on 13 September 2017, Budapest, Hungary, in conjunction with the 67th session of the WHO Regional Committee for Europe, health leaders, including Ministers from EECA countries discussed TB-REP progress and future steps to system-wide transformation for better TB control.



Country representatives commended the approaches of TB-REP towards reaching the common goal of decreasing TB burden by strengthening health systems. As well, participants expressed the need for sustainability of ongoing efforts, highlighting the importance of continuing TB-REP after 2018.

Story [here](#)

- **WHO course on Health system strengthening for improved TB prevention and care attended in Barcelona**

Representatives from TB-REP countries - Armenia, Azerbaijan, Belarus, Bulgaria, Georgia, Kazakhstan, Kyrgyzstan, the Republic of Moldova, Tajikistan, Ukraine and Uzbekistan – attended the WHO course on Health system strengthening for improved TB prevention and care on October 16-20 in Barcelona, Spain. The course was the second, adapted based on feedback received of the 1st course in 2016 and was delivered by the WHO/Europe's Division of Health Systems and Public health, through the WHO Barcelona Office for Health Systems Strengthening.



The purpose of the Barcelona course was to build the capacity of state stakeholders in TB-REP countries to ensure transformation of health systems to end TB. In line with the holistic approach to strengthening health systems, WHO experts presented and discussed with participants policy options to support transformation of how TB services are financed and delivered in the European Region.

During the five-day course 45 participants were provided with knowledge and tools to design and implement new models of people-centred TB care. Barcelona course covered topics such as analyzing and diagnosing health system performance, improving the delivery of people-centred TB prevention and care, improving health system financing, improving governance and management of change, and developing country-specific system diagnostics and reform proposals.

Feedback from participants can be viewed [here](#).

- **TB-REP highlighted in the EECA TB Summit**

During the Eastern Europe and Central Asia TB Summit held by the Eurasian Parliamentary Group on TB on September 17-19 in Tbilisi, Georgia, the TB-REP team has presented its approach and implementation to high level representatives, including parliamentarians from TB-REP countries.

This was very timely, while the parliamentarians from across the EECA region were establishing regional position on the First Global Ministerial Conference on TB in November 2017 and the United Nations (UN) High Level Meeting (HLM) on TB in 2018.

High-level discussions underscoring TB-REP raised the profile of the project in the context of the cohesive regional response to the threat of TB. Recognising TB-REP as a valuable initiative, participants identified opportunities for members of parliament to positively support TB-REP implementation in their countries through their work in parliaments.



- **TB-REP experience shared at the World Conference on Lung Health**

On October 11 – 14, in Guadalajara, Mexico, TB-REP partners involved in the project implementation participated at the 48th Union World Conference of Lung Health.



This was a great opportunity to engage in the discussions on the global fight against tuberculosis and present TB-REP perspective in the context of the conference theme 'Accelerating Toward Elimination'.

A number of partners representing TB-REP contributed to the Civil Society and Community Engagement Symposium, highlighting vital role of civil society in people-

centred care and the ways of establishing effective partnerships between decision makers and civil sector.

Story [here](#)

Civil society bottom up advocacy activities

In 11 countries of the TB-REP project, civil society organisations (CSOs) are involved through small grants program to reinforce national grassroots advocacy capacities and ensure that the voices of people with TB experience and affected by TB are heard when the decisions regarding TB model of care are made. The full list of TB-REP grantees is available [here](#).

Activities implemented by the CSOs are focused mainly on reducing stigma and discrimination, facilitating the countries' dialogue on developing TB outpatient care model, sensitizing high-level policy makers on importance of transitioning from hospital towards outpatient TB care model, building CSO capacity for social contracting, and involving community leaders.

Several country-level achievements of TB-REP grantees in promoting ambulatory model of care are highlighted below:

- **Social video to inform population about advantages of the patient-centred approach to TB treatment released in Azerbaijan**

In Azerbaijan, population is reached with accessible information about tuberculosis through video messages explaining that tuberculosis is a curable disease; that it can be treated on an outpatient basis; and that the earlier the treatment starts, the easier it is to get cured. Video materials were designed and produced by the NGO "Saglamliga Khidmat" under the leadership of Elchin Mukhtarli - civil society partners of the TB-REP project.

Dissemination of these video messages, mostly through social media channels, aims to increase population's awareness, knowledge, and acceptance of the people-centred



approach to TB care. Once the videos have been released, both medical workers and NGOs noticed an increased interest that patients and their families show for out-patient treatment.

The video can be viewed at the following [link](#).

- **In Belarus, forum theater brings changes in the knowledge and attitude towards tuberculosis**

The Republican Public Association “Defeat Tuberculosis Together” – civil society partner of the TB-REP project in Belarus –took the task to increase awareness among the community about tuberculosis applying innovative formats of interaction, which actively engage the audience into the discussion of the problem - the Forum Theaters.



Under the slogan “Ambulatory TB care – time for us, money for the state, health for all!” performances were organized in Brest, Vitebsk and Grodno. Presenting real daily situations, which are staged as dramatic scenes with further discussions, performances of the forum theater contribute to the ability to assess the emotional state of people

and analyze different models of behavior. Assessment of the change in the level of knowledge and tolerant attitude to people affected by TB among the audience found a 19% increase in understanding that tuberculosis is curable and a 29% increase in the awareness of the fact that a patient with tuberculosis who receives treatment is not infectious for people around.

- **Former TB patients from Ukraine mobilized to actively promote the outpatient treatment model**

The Public Movement Ukrainians Against Tuberculosis Fund, TB-REP grantee in Ukraine, mobilized volunteers from groups of the former TB patients and their families to establish an independent organization: All-Ukrainian Association of People who had Tuberculosis.

Actively engaging in collaboration with the public authorities, particularly in Kherson, Kiev and Zhytomyr regions, members of the Association do their utmost to raise their voice, to use their experience not only to support other patients but to help changing the current model of the disease treatment. They act through expansion and empowerment of the network of people with experience of TB in several regions of Ukraine, who further inform relevant stakeholders about the priorities of the people-centered model of care and present their specific demands, asking for changes.



- **TB patients in Tajikistan are supported through innovative community-based model with involvement of the religious communities**

The civil society partner of TB-REP project in Tajikistan, “Young Generation Tajikistan”, influenced establishment of the community-based model – sponsorship for people with TB, which is reaching out TB patients on ambulatory treatment through partnership with religious communities.



In two pilot districts, with the participation of the Committee for Religious Affairs, regulation of national traditions, celebrations and ceremonies under the Government of the Republic of Tajikistan, local authorities entrusted the district Jamoats (village councils) to provide material support to people with TB. As a result, with the help of Jamoats, families affected by TB receive food packages in the Farkhor district, while in Yovon district patients with TB are provided with monetary support.

Technical missions to countries

TB-REP consultants in conjunction with WHO Regional Office for Europe and PAS Center staff have conducted technical visits to Armenia, Azerbaijan, Belarus, Georgia, Kazakhstan, Kyrgyzstan, and the Republic of Moldova to assess situation and propose practical implementation recommendations related to model of care, financing and human resources. Technical mission reports are being finalized and some have already been shared with National Focal Points and relevant stakeholders.

Technical missions are expected to contribute to further advance progress in implementation of next steps, and to lead to roadmap development, country adaptation of TB service delivery model, propose financing solutions and are expected to lead to TB-REP relevant improvements: propose a service delivery model to the pilot in Azerbaijan, hospital bed reductions and re-organization of TB services in Kyrgyzstan; expansion of ambulatory care in Belarus, Ukraine and the Republic of Moldova; and further legislative progress, for example, in Belarus, Kyrgyzstan and the Republic of Moldova, propose provider payment options in Armenia, Kyrgyzstan, Georgia and Moldova.

Stories: [Georgia](#) [Belarus](#) [Kyrgyzstan](#)

High-level advocacy missions to the countries

A series of high-level TB-REP advocacy events took place with the aim to engage governments and other national partners and to obtain their commitment to strengthen health systems for better TB control. In 2017, senior TB-REP advocates and representatives – Michele Kazatchkine, the UN Secretary-General’s Special Envoy for AIDS in EECA; Hans Kluge, Director of the Division of Health Systems and Public Health; Baroness Suttie, Vice-chair of the Eurasian Parliamentary Group on TB, Global TB Caucus; Lucica Ditiu, Executive Director of the Stop TB Partnership – conducted visits to Georgia, Kazakhstan, the Republic of Moldova, Ukraine and Uzbekistan to negotiate with decision-makers on health system reforms to implement people-centred approaches to TB care.

High-level advocacy actions helped to convey the importance of transformation of national health systems in the respective countries, supported the in-country work of TB-REP assigned national civil society organizations, and created commitment to engage in the TB-REP work at the national level.

More information [here](#)

Strengthening strategic partnerships

- **Linkages and synergies with the Global Caucus on TB**

TB-REP team and partners have continued active engagement with high level partners, including Parliamentarians and strengthened TB-REP partnership with the Global Caucus on TB – an international movement founded in 2014 that brings together more the 1000 Parliamentarians committed to the fight against tuberculosis.

Facilitated through trustful partnership, Parliamentarians representing TB-REP countries have joined the European and Central Asia branch of the Global TB Caucus and took the initiative to advance and promote acceleration of TB response in EECA region. Member of the Parliament from the Republic of Moldova, Ms. Oxana Domenti, was elected as a co-chair of the Eurasian Parliamentary Group on TB (during the EECA Summit in Tbilisi, September 2017). More information [here](#).

- **Cooperation with TB People to promote people-centred solutions in TB control**

Promoting regional collaboration between all interested parties to strengthen control of tuberculosis, TB-REP has established effective working relationships with TB People – first network of people with experience of TB in the EECA region.



In the framework of this partnership, TB-REP contributed to the European regional meeting on strategic planning and building the capacity of the network of people with experience of TB, TB People, held during September 16–19, Georgia, Tbilisi. Representatives from 7 CSOs implementing country-level TB-REP grants (Armenia, Azerbaijan, Georgia, Moldova, Kyrgyzstan, Tajikistan, Ukraine) brought TB-REP perspective in formulating policies and

strategic priorities of the community of people affected by TB to improve TB control throughout the region.

Further engagement with TB People will allow putting key affected community at the heart of policy change and actions promoted by TB-REP.

Additional online resources

- TB-REP Mid-term report covering the first 1.5 years of the project and highlighting a number of milestones was produced by the WHO Regional Office for Europe. Available [here](#)

- Web-sites to follow TB-REP progress and updates on project activities

PAS TB-REP web site [here](#)

WHO Europe web-site on health system response to tuberculosis [here](#)

WHO Europe web-site on tuberculosis [here](#)

TB Europe Coalition web-site [here](#)

Alliance for Public Health web-site [here](#)