End TB in Europe: shifting the gears for action

17th Wolfheze Workshops and 13th WHO National TB Programme Managers’ Meeting  
Wednesday 27- Friday 29 May, 2015

The central theme of the Wolfheze Workshops (WW) in 2015 is the **translation and implementation– at country level– of regional action plans and the global WHO End-TB Strategy**. The WHO Regional Office for Europe (WHO) in collaboration with European Center for Disease prevention and Control (ECDC), KNCV Tuberculosis Foundation (KNCV) and other partners is developing a new Regional Tuberculosis Action Plan (Regional TB-AP) for the period of 2016-2020, based on the global WHO End Tb strategy and the lessons learned from implementation of the Consolidated Action Plan to Prevent and Combat Multidrug and Extensively Drug-Resistant Tuberculosis in the WHO European Region (TB-MAP), 2011-2015. In addition WW working groups will provide follow up of the themes identified during the 16th WW in 2013 for common action.

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9:00-9:30
Opening session

Coordinators: Martin van den Boom (WHO), Gerard de Vries (KNCV)
Speakers: Lambert Grijns (Ministry of Foreign Affairs, Netherlands), Oxana Rucsineanu (ex-patient and TB advocate, Moldavia), Masoud Dara (WHO), Marieke van de Werf (ECDC), Kitty van Weezenbeek (KNCV)

9:30-13:00
SESSION 1
Regional adaptation of the global WHO End-TB Strategy: Regional TB Action Plan (TB-AP)

Coordinators: Martin van den Boom (WHO), Barbara Hauer (Robert Koch Institute (RKI), Germany)
Chairpersons: Masoud Dara (WHO), Marieke van der Werf (ECDC), Frank Cobelens (KNCV)
Reporter: Colleen Acosta (WHO), Martin van den Boom (WHO)

Background
The global WHO End Tb Strategy was endorsed by the 67th World Health Assembly in May 2014, constituting a key TB strategic follow up policy guidance document building on and linking to the outgoing global Stop TB Strategy. Similarly to the current global strategy, 2015 marks the final year of the Consolidated Action Plan to Prevent and Combat Multidrug and Extensively Drug-Resistant Tuberculosis in the WHO European Region (TB-MAP), 2011-2015.

In view of the “new” global WHO End Tb strategy, the WHO Regional Office for Europe in collaboration with partners is in the process of developing a new regional Tuberculosis Action Plan (TB-AP) for the period of 2016-2020, in line with the new European health policy framework Health 2020, based on the global WHO End-TB strategy and the lessons learned from implementation of TB-MAP.
A key-stakeholder advisory committee, composed of representatives from key partner organizations and national governments has been taking the lead in working on developing the new regional TB-AP. The aim was to further optimize strategies and interventions which have yielded tangible benefits to date while re-considering others which may have fallen short of reaching their maximum potential.

Regional TB-AP will be building on the achievements made within the implementation of the current Regional Action Plan mentioned above, and also address existing or persisting caveats and challenges. It foresees to put ever more emphasis on patient-centered and patient-friendly TB services and care, continued de-verticalization of TB services and their integration in an overall strengthened and health care reform fostering “public health landscape”. At the same time, it will further improve innovativeness, i.e. with regards to e-surveillance, laboratory and diagnostic capacity and rational introduction of new TB drugs. At the upcoming Regional Committee in September, the new Regional TB-AP is expected to be presented to and endorsed by Member States of the WHO European Region.

The key aim of this WW session is to obtain (pre)-final feedback on the current advanced draft Regional TB-AP and reach consensus on final developmental steps/stages in preparing for Member States’ adoption at the Regional Committee in September 2015.

Objectives
- Provide countries with latest updates on the regional adaptation of the global WHO End-TB Strategy (including both process and content)
- Discuss the draft regional TB-AP focusing on pre-selected areas and formulate input/feedback to it
- Share country-level experience in national (strategic) TB plan introduction, both from low- and high burden settings
- Agree on next steps regarding the finalization of the regional TB-AP

**Content of the session**
1. Regional TB-AP development stages, content and process
2. Good practices and challenges in plan implementation at country level

**Methodology**
1. Presentations
2. Plenary discussion,
3. Group discussions, Questions and answers

**Questions for group work:**
- WG 1: Are there any issues which have so far not been sufficiently addressed in the TB-AP?
- WG 2: In addition to the three targets as defined in TB-AP, what are the added benefits that TB-AP may bring to Member States’ response to TB prevention and care?
- WG 3: What do Member States expect from WHO Regional Office with the implementation of TB-AP?

**Expected outputs**
- Regional TB-AP developmental stage and process understood
- Feedback on draft regional TB-AP received
- Consensus reached on next steps in regional TB-AP plan finalization

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<tr>
<th>Time</th>
<th>Title of talk</th>
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<tbody>
<tr>
<td>09:30-09:50</td>
<td>Presentation of draft Regional TB Action Plan (TB-AP) and regional adaptation process of the global WHO End-TB Strategy</td>
<td>Masoud Dara (WHO)</td>
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<td>09:50-10:05</td>
<td>Overview of TB-AP monitoring and evaluation (M&amp;E) framework</td>
<td>Gerard de Vries (KNCV)</td>
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<td>10:05-10:15</td>
<td>The action framework for low-incidence countries: experiences and challenges in Germany</td>
<td>Barbara Hauer (RKI)</td>
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<td>10:15-10:25</td>
<td>Implementation of the national strategic TB plan with focus on practical aspects from high burden setting: lessons learnt</td>
<td>Tleukhan Abildayev (NTP Kazakhstan)</td>
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<td>10:25-10:30</td>
<td>Introduction to working groups</td>
<td>Barbara Hauer, Martin van den Boom</td>
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<td>10:30 -11:00</td>
<td>Coffee break</td>
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<td>11:00-11:50</td>
<td>Working groups</td>
<td>All, facilitators</td>
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<td>11:50-12:30</td>
<td>Reporting back to the plenary</td>
<td>Group rapporteurs/moderators</td>
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<td>12:30 -13:00</td>
<td>Discussion of next steps and summary</td>
<td>Chairs</td>
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13:00 – 14:00 Lunch
Background
In line with Consolidated Action Plan to Prevent and Combat M/XDR-TB 2011-2015 (TB-MAP), the WW2013 set up a working group (WG) in order to improve case detection and strengthen TB prevention, control and care in the WHO European Region. The WW 2013 expressed a need for assistance to countries in the implementation of the WHO guidelines on screening for active TB released in 2013. Building on this guideline, WHO has recently developed operational guidance and a tool to help prioritization of risk groups for screening for active TB, and choose screening and diagnostic algorithms. These documents tools are mainly designed for high burden countries. In several Eastern European and Central Asian countries, screening for active TB is currently done not only in high risk groups, but also in low risk groups, where such interventions are often inappropriate and cost-ineffective.

In recognition of the importance of latent tuberculosis infection (LTBI) for TB prevention, WHO issued a policy guidance in 2014 on the management of LTBI. In addition, a framework document on how to progress towards TB elimination in low incidence countries has been produced, which recognizes the importance of both LTBI management and screening for active TB in selected risk groups in low-incidence settings. In high and medium burden settings, WHO recommends LTBI preventive treatment for TB contacts younger than 5 years and persons living with HIV. However, in many countries LTBI screening practices are continued in population not specifically at risk for exposure to TB. Moreover, the prevention of TB among TB contacts of infectious MDR-TB patients is a further challenge which calls for concerted action to identify rational approaches. This WW session will provide a platform to discuss challenges and approaches to improve the country-level implementation of LTBI management and screening for active TB in selected risk groups, to improve ‘integrated, patient-centered care and prevention, i.e. pillar 1 of the Global End-TB Strategy.

Objectives
- To inform on policies, practices, and needs for screening for active TB and LTBI management in the WHO European Region
- To inform on WHO-tool to help risk group prioritization, and asses usefulness of the tool for the WHO European Region
- To inform on WHO Guidelines on the management of LTBI and discuss criteria, target groups and challenges for implementation
- To propose and discuss the elements of a monitoring and evaluation tool for programmatic management of LTBI

Content of the session
- Survey data on screening and LTBI management policies and practices in the WHO European Region
- WHO operational guide and tool for screening for active TB
- Guidelines on the management of LTBI

Methodology
- Presentations
- Group work practicing the WHO-tool for prioritizing risk groups for screening for active TB
- Group discussion
- Plenary discussion

Discussion questions

Screening for active TB

High burden countries
- What is the usefulness of the tool to help prioritizing risk groups for screening?
- What technical support is needed to use the tool effectively?
- What country data needs to be imputed by the user?
- What other information than the tool outputs are needed in order to rationally prioritize screening?

Low burden countries:
- What is the usefulness of the tool to help prioritizing risk groups for screening in low-incidence countries?
- What information is needed to rationally prioritize screening in key high risk groups, such as among immigrants from high burden countries?

LTBI management

High burden countries
- What are the bottlenecks of IPT roll-out and implementation among PLHIV?
- What are the bottlenecks of IPT roll-out and implementation among child contacts < 5 years of age?
- What are the bottlenecks of systematic LTBI management?
- What are acceptable options for the management of contacts of MDR-TB?

Low burden countries:
- What are effective and feasible indicators (process and epidemiological) for the LTBI M&E system?
- What are possible process targets and a feasible data management system?

Expected outputs

1. Participants are informed about:
- the WHO operational guide and tool for screening for active TB and the guidelines for LTBI management practices and policies for screening for active TB and LTBI in the European region
- the WHO-tool for prioritizing risk groups for screening for active TB, know how they can use it for their own setting, and what other information is needed for rational prioritization of risk groups to screen

2. Participants have discussed and shared
- best practices / country examples on how LTBI management can be implemented, monitored and evaluated in low burden countries
- how to address strengths, weaknesses and challenges of systematic LTBI screening programs in high incidence settings and settings with high incidence of MDR-TB
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<td>-</td>
<td>Knut Lönnroth Alberto Matteelli Andrei Dadu</td>
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<tr>
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<td>WHO operational guide and tool for screening for active TB and LTBI management guidelines</td>
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<td>Results from the survey on policies and practices on ACF and LTBI in WHO European Region</td>
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<td>14:45 – 15.30</td>
<td><strong>Group work 1</strong> <em>(low burden countries)</em></td>
<td>Facilitator ACF-tool: Knut Lönnroth Facilitator LTBI management: Alberto Matteelli</td>
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<td>Special challenges for risk group screening for active TB in low incidence countries</td>
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<td><strong>Group work 2</strong> <em>(high burden countries)</em></td>
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<td>Specific implementation challenges for LTBI management in high (MDR) burden countries</td>
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<td>15.30 – 16:00</td>
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<td>16:00 – 17.00</td>
<td>Implementation and monitoring of LTBI activities</td>
<td>Facilitator ACF-tool: Knut Lonnroth Facilitator LTBI management: Alberto Matteelli</td>
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<td>Using the WHO-tool for prioritizing risk groups for screening for active TB</td>
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<tr>
<td>17:00 – 17:25</td>
<td>Plenary discussion</td>
<td>Chairs</td>
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<td>17:25-17:30</td>
<td>Wrapping up and next steps</td>
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Thursday 28 May 2015

8:30-10:30
SESSION 3
Addressing low treatment outcome results in the European region
(including patient support)

Coordinators: Marieke J. van der Werf (ECDC), Maria Idrissova (KNCV)
Chairpersons: Tsira Chakhaia (USAID, Georgia), Pierpaolo de Colombani (WHO), Christoph Lange (Research Center, Borstel)
Reporter: Andreas Sandgren (ECDC)

Background
Successful tuberculosis (TB) control and elimination of TB requires early diagnosis and adequate treatment of all TB cases. There are several factors that may hamper reaching a successful TB treatment outcome. First of all, TB treatment requires taking several drugs for a period of 6 to 24 months, depending on the resistance pattern. Adherence to such long treatment is often challenging, especially if patients do not receive adequate patient centered care and support. In addition, patients may experience adverse effects from the drugs which provide an extra challenge for completing the full treatment. There are also programmatic factors that may prevent TB patients from completing treatment such as not having the drugs available for the full duration of treatment.

Globally 86% of all TB cases were treated successfully in 2012. The WHO European Region showed worse results with only 75% of the TB cases being treated successfully. Both in the European Union (EU) and the non-EU European Region countries treatment outcome results for new culture-confirmed pulmonary TB cases notified in 2011 were far below the 85% target. Even though in general the treatment outcomes are disappointing there is a wide variety in different countries with some WHO European Region countries reaching the 85% target whereas others even fail to successfully treat 60% of the cases.

Objectives
− To identify causes that lead to inadequate treatment outcomes both at patient and population level.
− To discuss actions to be implemented to arrive at better treatment outcomes.

Content of the session
1. Factors related to treatment outcomes
2. Interventions to be implemented to arrive at better treatment outcomes

Methodology
1. Presentations
2. Group work
3. Plenary discussion

Questions for group work
1. What are the most important factors (patient, health system, other) contributing to unfavorable treatment outcomes in your country?
2. Can you give an example of an intervention that improved TB treatment outcomes?
3. What actions can be implemented by different actors (Ministry of Health, District level, hospitals, primary health care level, patient organizations etc.) to improve treatment outcomes?
4. How can the actions best be implemented?
**Expected outputs**
- List of actions that can be implemented at national or subnational level to improve tuberculosis treatment outcome.

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<th>Time</th>
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<tr>
<td>8:30-8:35</td>
<td>Introduction</td>
<td>Chairs</td>
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<td>8:35-8:50</td>
<td>Patient perspective on challenges of TB treatment</td>
<td>Tsira Chakhaia (Georgia)</td>
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<td>8:50-9:05</td>
<td>TB treatment outcome in the European Union and European Economic Area: an analysis of the 10-year European Surveillance System (TESSy)-data</td>
<td>Basel Karo (RKI, Germany)</td>
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<td>9:05-10:05</td>
<td>Group work</td>
<td>Facilitators and reporters to be identified</td>
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<td>10:05-10:25</td>
<td>Reporting back from group work and discussion</td>
<td>Chairs</td>
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<td>10:25-10:30</td>
<td>Wrap up and next steps</td>
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**10:30-11:00 Coffee break**

**11:00-13:00**

**SESSION 4**

**Innovations, challenges and progress in programmatic management of drug-resistant tuberculosis (PMDT)**

**Coordinators:** Valiantsin Rusovich (WHO), Svetlana Pak (KNCV)

**Chairpersons:** Agnes Gebhard (KNCV), Viorel Soltan (WHO)

**Reporter:** Svetlana Pak (KNCV), Martin van den Boom (WHO), Valiantsin Rusovich (WHO)

**Background**

While the TB situation in most of the countries across the WHO European Region has been slowly improving over the past decade with an average annual decrease of about 2%, MDR-TB rates and TB-HIV co-infection have been increasing with suboptimal around 50% treatment success for MDR-TB cohorts. During the past two years many National TB programs achieved substantial progress in implementation of the Consolidated Action Plan, especially in terms of MDR-TB treatment scale up, introducing rapid laboratory diagnostic techniques and new models of ambulatory care for M/XDR-TB patients. Emerging of new anti-TB drugs, need for enhanced pharmacovigilance, slow progress in improving treatment outcomes for M/XDR-TB patients poses new challenges for the countries. In particular there are new issues of preventing of appearance of drug resistance to new anti-TB drugs and urgent need to scale up second line drug susceptibility testing (DST) as a pre-requisite of appropriate use of new drug regimens for pre-XDR and XDR-TB patients.

Considering presence of NTP managers, national representatives and international stakeholders, this session will provide excellent opportunity to discuss the main issues of PMDT and ways forward to be supported in the new currently being developed European action plan for TB prevention and control (TB-AP) covering the period 2016–2020.

**Objectives:**
1. Share experiences, achievements and lessons learned on implementing innovative approaches in PMDT, in particular on progress on scaling up rapid TB laboratory diagnostics of drug resistance, new anti-TB drugs, expanded pharmacovigilance for anti-TB drugs, patient oriented models of care for MDR-TB patients.

2. To make suggestions on the priority areas of PMDT in line with the New WHO Regional plan to prevent and combat M/XDR-TB for 2016-2020.

Content of the session

1. WHO situational analyses on M/XDR-TB in WHO European region and main challenges to be addressed.

2. Sharing experiences and best practices in different areas of PMDT

3. Discussion on priority PMDT areas for support from WHO and regional GLC

Methodology
- Presentations, questions and answers, panel discussion

Expected outputs:
- Country representatives will get familiar with the challenges and progress on implementing innovations in PMDT across the region.
- Common challenges on introduction of new anti-TB drugs will be discussed and possible solutions shared with all stakeholders.
- Priority areas to prevent and combat M/XDR-TB identified to be linked to the new WHO Regional TB Action Plan for 2016-2020.

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<th>Time</th>
<th>Title of talk</th>
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<tr>
<td>11:15 – 11:30</td>
<td>Update on MDR TB medicines supplies through GDF</td>
<td>Kaspars Lunte (GDF)</td>
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<td>11:30-11:40</td>
<td>Country presentations</td>
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<td>11:40-11.50</td>
<td>Scaling up of ambulatory patient centered models of care for M/XDR-TB patients in Uzbekistan</td>
<td>Nargiza Parpieva, (Uzbekistan)</td>
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<td>11:50-12:00</td>
<td>Patients vision on ambulatory patient centered model of care</td>
<td>Gulmira Ekbarova &amp; Bunyad Khasmammadov (Azerbaijan)</td>
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<td>12:00-12:15</td>
<td>Experience of Belarus in introducing enhanced pharmacovigilance for linezolid in treatment of XDR-TB</td>
<td>Alena Skrahina (Belarus)</td>
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<td>12:15 – 12.45</td>
<td>Questions &amp; Answers</td>
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<td>12:15 – 12.45</td>
<td>Panel discussion on priority PMDT areas in support of the New WHO Regional plan to prevent and combat M/XDR-TB for 2016-2020</td>
<td>Chairs</td>
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<td>12:45-13:00</td>
<td>Wrap up and next steps</td>
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13:00– 14:00 Lunch
Background

Despite the progress in ensuring adequate funding of tuberculosis (TB) control, many countries face significant and diverse problems in health financing. Some countries face financial crisis and budget cuts and others are using financing mechanisms which do not correspond to modern and effective management of resources aiming to prioritize effectively the allocation of resources.

In line with Consolidated Action Plan to Prevent and Combat M/XDR-TB 2011-2015 (TB-MAP), the Wolfheze Workshop (WW) 2013 concluded to set up a working group (WG) to evaluate main bottlenecks and foster opportunities of health financing of TB programmes in order to strengthen TB prevention, control and care in the WHO European Region. In a pilot stage of the work in 2014-2015, the WG, which has been working since January 2014, consisted of the NTP representatives and health finance experts from both high and low incidence countries, such as Armenia, Belarus, Hungary and the Netherlands.

Objectives:
Discuss policy options and approaches in frame of the WHO End-TB strategy on how:
− to create supportive financing arrangements that effectively promote people centered TB services
− to ensure universal health coverage by eliminating catastrophic costs and financial consequences in TB control

Content of the session
− Bottlenecks and good practices in health financing from the lessons learned in the different country and health systems context;
− Some key lessons from experience of the NTP’s for good practices with health financing along with main bottlenecks;
− Usage of health financing in order to improve the performance of NTP’s.

Methodology
- Presentations, panel and plenary discussion

Expected outputs:
1. The participants will get familiar with the policy alternatives on how to use effectively health finance arrangements to increase performance of the NTPs in different country contexts.
2. The work of the Wolfheze health financing working group is presented to the wider the participants in an interactive way.
14:00-14:05  Introduction
  Speaker: Szabolcs Szigeti (WHO), Saro Tsaturyan (Armenia)

14:05-14:40  Country speeches: Supportive financing arrangements for promoting people centred TB services
  Speakers: Armen Hayrapetyan (Armenia), Rob Riesmeijer (Netherlands), Valiantsin Rusovich (Belarus), Gábor Kovács (Hungary), Fanny Voitzwinkler (GHA)

14:40-15:00  Panel discussion (expert panel)
  - Strengthening the health finance of ambulatory care;
  - How to finance involvement of CSOs.
  Participants: Members of WG and speakers

15:00-15:25  Plenary discussion: Supportive financing arrangements for promoting people centred TB services
  Chairs

15:25-15:30  Wrap up and next steps

16:00-18:00  SESSION 6
  Working group on social determinants and risk factors of TB

Coordinators: Pierpaolo de Colombani (WHO), Fanny Voitzwinkler (GHA)
Chairpersons: Knut Lönnroth (WHO), Andreas Sandgren (ECDC)
Reporter: Pierpaolo de Colombani (WHO)

Background
The new global WHO End-TB Strategy for TB prevention, care and control calls for additional action on the social determinants of TB through social protection and poverty alleviation. These interventions must be built into the next regional TB Action Plan (TB-AP) 2016-2020 and should be implemented by policy makers, service providers and civil society. The 12th WHO National TB Programme Managers’ Meeting and 16th Wolfheze Workshops (WW) held in 2013 concluded to set up a new working group (WG) on social determinants (SD) and risk factors (RF) of TB and drug resistant TB (DR-TB). This session is organized to review the activities of the WG and determine future activities.

Objectives
- Update participants on the activities of the working group
- Discuss SD and RF of TB from the perspective of the civil society organizations (CSO)
- Agree on the future activities of the working group

Content of the session
- Results of two surveys conducted to document how RF and SD are currently collected in the national TB databases and which specific interventions were/are taken by countries to address them
- Importance, particularly for CSOs, of advocacy-communication and social mobilization (ACSM) and operational research to address SD

Methodology
  Presentations and panel discussion
**Expected outputs**

- A report on the objectives accomplished.
- Decisions are taken on the future work, considering the perspective of CSO and including the major strategic directions in ACSM and planning for operational research (OR).

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<tr>
<th>Time</th>
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<tbody>
<tr>
<td>16.00– 16.15</td>
<td>Reporting the results of two surveys: 1) how countries record social determinants and risk factors are 2) how countries tackle them.</td>
<td>Pierpaolo de Colombani (WHO), Wouter Arrazola de Onate (BELTA, Brussels)</td>
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<td>16.15– 17.00</td>
<td>Discussion in Panel 1: What can NTP managers do more to tackle social determinants/risk factors?</td>
<td>Panelists: chair, two country representatives</td>
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<td>17.00– 17:10</td>
<td>Is ACSM important in addressing social determinants of TB and how? The CSO perspective.</td>
<td>Jamila Ismoilova (Project HOPE) and Faromuzova Kataen (local NGO), Tajikistan</td>
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<td>17.10– 17.20</td>
<td>Which are the needs for operational research (OR) to address social determinants of TB? The CSO perspective.</td>
<td>Jonathan Stillo, Antropologist, City University of New York</td>
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<td>17.20– 17.45</td>
<td>Discussion in Panel 2: How should CSOs and NTPs work together?</td>
<td>Panelists: chair, two country representatives</td>
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<td>17.45– 18.00</td>
<td>Discussion in plenary: Should the working group continue its work? What and how?</td>
<td>Chairs</td>
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Background

TB in adolescents differs from TB in younger children, as adolescents are more likely to present with clinical and radiographic findings similar to adults and are more likely infectious than younger children. This facilitates diagnosis in adolescents, but adolescents with TB can be easier impacted by stigma, which can hamper treatment adherence. Prolonged admission can disrupt schooling and disturb social development. To assess the nature and extend of these issues for adolescents with TB in the European region, and how they are/ can be addressed, the Childhood TB Task Force performed a survey on TB policies and practices directed at exploring and assessing specific challenges related to adolescent TB, including both policy and practice. Based on the survey results further actions may be recommended by the audience for follow-up.

In 2014 WHO published a Framework for conducting reviews of national TB programs. A TB programme review assesses the performance of the strategy implemented to fight TB and identifies the strengths and weaknesses of interventions that have been put in place. The general objective of the WHO Framework document is to guide reviewers to assess specific components of the TB control programme, to recommend on strategies addressing gaps and enhance TB prevention and care. The WHO Framework includes a checklist to assess Childhood TB. Based on this checklist KNCV developed a benchmarking tool to measure progress in childhood TB aspects of TB programmes. The WW Childhood TB Task Force intends to share and discuss initial experiences with the checklist, the KNCV benchmark tool and other methodologies used to date, in order to obtain suggestions for further implementation.

Objectives:

− Share experiences, best strategies and achievements on introduction of new policies in TB prevention and care with focus on adolescents (countries perspective)
− Share and discuss methods of assessing childhood TB, such as the checklist “Assessing activities to address childhood TB” from the WHO TB Framework for Conducting Reviews of Tuberculosis Programmes and the related KNCV benchmark tool.

Content of the session

3. WW/WHO situation analysis of Childhood TB in European Region with focus on adolescent TB
4. Best practice and challenges in adolescents with TB
5. Management perspective of childhood TB with focus on adolescents
6. Framework for conducting TB reviews with focus on childhood TB
7. Checklist “Assessing activities to address childhood TB” and the KNCV benchmark tool for childhood TB progress

Methodology

4. Presentations
5. Plenary discussions
6. Panel discussion
Topics/questions plenary discussions:
   a. Outcome of adolescent TB survey: are specific adolescent TB related actions needed? If so, to what extent?
   b. Utilization of childhood TB programmatic tools: opportunities and challenges, are adaptations needed for the WHO-Euro region?
   c. Which further steps on childhood TB should the European Task force embark on?

Expected outputs:
   – Countries’ programmatic and technical awareness will be oriented toward the needs of the adolescent patient group and the need to adapt policy and practices accordingly
   – Next steps in improving TB control in the WHO-Euro region identified

<table>
<thead>
<tr>
<th>Time</th>
<th>Title of talk</th>
<th>Speaker</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:30-8:35</td>
<td>Introduction</td>
<td>Chairs</td>
</tr>
<tr>
<td>8:35-08:45</td>
<td>Presentation of WW/WHO inventory on policy and practices of TB in adolescents the WHO European Region</td>
<td>Martin van den Boom (WHO)</td>
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<tr>
<td>08:45-09:00</td>
<td>Good practice and challenges in managing TB in adolescents (country experience)</td>
<td>Oktam Bobokhojaev (Tajikistan)</td>
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<tr>
<td>09:00-09:10</td>
<td>Presentation related questions and clarifications</td>
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<tr>
<td>09:10-09:25</td>
<td>Discussion on adolescent TB care aspects</td>
<td>Plenary discussion</td>
</tr>
<tr>
<td>09:25-09:40</td>
<td>Addressing challenges in Childhood TB programmes through the use of policy guidance and standardized tools</td>
<td>Malgosia Grzemska (WHO)</td>
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<tr>
<td>09:40-09:50</td>
<td>Introduction to KNCV benchmark tool for Childhood TB programme implementation</td>
<td>Agnes Gebhard (KNCV)</td>
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<tr>
<td>09:50-10:25</td>
<td>Panel discussion: assessing childhood TB and initial country experiences with the KNCV benchmark tool, and discussing further implementation</td>
<td>Agnes Gebhard (KNCV), WHO, ECDC and country representatives</td>
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<tr>
<td>10:25-10:30</td>
<td>Wrap up and next steps</td>
<td>Chairs</td>
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</tbody>
</table>
**Background**

The Wolfheze Conference or Workshops offers an opportunity to stakeholders in national TB programs to meet with policy makers in WHO and ECDC and to share experience between Western and Eastern Europe and Central Asia. The conference focuses on management and coordination of TB control efforts in European countries. During the previous sessions participants have exchanged experiences and identified priorities for action and coordination of efforts in existing or newly formed Wolfheze Working Groups. In the coming period, these working groups will prepare consensus policy documents on specific topics in TB control, based on available scientific evidence and expert opinion, to be discussed and modified during the upcoming meetings and the next pan European conference in 2015.

**Content:**

1. Reporting back from WW working group Urban TB control
2. (New) WW working groups: ToR, deliverables and planning

**Methodology:**

Presentation and plenary discussion

**Objectives:**

- To update participants on products and achievements of WW working group Urban TB control
- To agree on terms of reference and work plan of existing and new Wolfheze Working groups
- To agree on priorities for further collaboration and coordination

**Expected output:**

- Participants updated on policy papers and coordination mechanisms in the context of TB control in urban settings in European Region
- Participants agree on priorities for future collaboration and coordination
- Participants have provided inputs on terms of reference, desired outputs and work plan of new and existing working groups

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<thead>
<tr>
<th>Time</th>
<th>Title of talk</th>
<th>Speaker/facilitators</th>
</tr>
</thead>
<tbody>
<tr>
<td>11.15 – 11.35</td>
<td>Reporting back from WW working group Urban TB control</td>
<td>Al Story (UK)</td>
</tr>
<tr>
<td>11.35 – 12.30</td>
<td>New WW working groups</td>
<td>chairs</td>
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</tbody>
</table>

**12:35 – 13:00**

**Closing session**

KNCV, ECDC, WHO representatives

**13:00 – 14:00** Lunch