

Intercountry high-level meeting on health systems strengthening for enhanced tuberculosis prevention and care: Regional Eastern European and Central Asian Project (TB – REP)

Copenhagen, Denmark, 26–28 April 2016

07 March 2016
Original: English

Scope and purpose

Background

Despite notable progress made in the past decade, tuberculosis (TB) is still a public health concern in most Member States of the WHO European Region. Whereas the European Region accounts for less than 4% of the global TB burden, the incidence rate of multidrug-resistant tuberculosis (MDR-TB) is more than twice as high as any other WHO region, with 25% of global MDR-TB cases. At present, many countries in the Region are in transition from somewhat over-hospitalized, vertical TB systems to more integrated, outpatient- and patient-centred services with a strong focus on primary health care (PHC). However, those driving the transition must overcome the legacy of fragmented governance, service delivery and finance systems, lack of modern equipment and understaffing, low motivation and/or inequitable distribution of staff (such as in rural areas), with few incentives for health workers to stay or to further develop their skills.

Within this context, the overall goal of the 3-year multipartner TB-REP project (see information note enclosed as Annex) is to contribute to decreasing the burden of TB and halting the spread of drug resistance in 11 project countries¹ through increasing political commitment and translating evidence into implementation of country-context adapted patient-centred TB models of care. Furthermore TB-REP purports to foster fundamental transformation of health systems delivery and financing mechanisms, by aligning financial reforms with transformation of service delivery. This is supported by quality technical support and high-level advocacy to project countries, addressing intersectoral and governance aspects of TB and strengthening the links between all of these.

This intercountry, high-level meeting is organized by the WHO Regional Office for Europe in collaboration with project partners. The first day of the meeting will provide high-level decision-makers from 11 countries information about the project and the strategic benefits for countries, while illustrating the vital importance of high-level political commitment.

¹ The 11 countries from eastern Europe and central Asia (EECA) are: Armenia, Azerbaijan, Belarus, Georgia, Kazakhstan, Kyrgyzstan, Republic of Moldova, Tajikistan, Turkmenistan, Ukraine and Uzbekistan.

On the second and third days, technical project-related aspects will be addressed including health financing, TB prevention and care service delivery and human resources development.

Objectives

The objectives of the consultation are:

- to increase high-level political commitment in order to halt TB, through strengthened regional and intercountry cooperation and evidence sharing for effective and sustainable transformation of health systems;
- to familiarize participants with the structure and content of TB-REP, stressing the potential country benefits stemming from its successful and sustainable implementation;
- to transfer knowledge and skills on how roadmaps for TB-REP can be developed at country level;
- to discuss and finalize the baseline TB-REP country profiles, representing a base for the upcoming country roadmap, and reform development and implementation;
- to provide participants with insight in good practice examples of models of care, TB relevant health financing and human resources development.

Expected outcomes

The following deliverables are expected outcomes of the consultation:

- baseline country profiles are finalized;
- participants are familiar with the purpose, structure and key content of TB-REP;
- participants are familiar with some existing country experiences and good practices with regard to TB-REP, from TB related health financing, models of care and human resources development;
- participants are guided in developing and implementing roadmaps for TB-REP in their own country contexts.

Participants

Participants invited to the meeting include: high-level representatives as delegated by the Ministers of Health (for the first day), and up to two additional nominees from the 11 TB-REP Member States, from any of the following categories: NTP managers, representatives of the national health insurance fund, state penitentiary services, TB research institutes, schools of public health. Furthermore, project partners, such as representatives from the Global Fund, the London School of Economics, the London School of Hygiene and Tropical Medicine (LSHTM), the European Respiratory Society, the TB Europe Coalition, the Centre for Health Policies and Studies, nongovernmental organizations, the Regional Office for Europe and WHO headquarters will be participating.

Format

The consultation will consist of presentations, and plenary and working group sessions, facilitated by representatives from TB-REP partner organizations. Simultaneous translation in English and Russian will be provided.

Annex

Factsheet: TB Regional EECA¹ Project (TB-REP)

Brief background

In September 2015 a US\$ 6 million grant agreement was signed between the Global Fund (<http://www.theglobalfund.org/en/>) and the Centre for Health Policies and Studies (PAS Centre; <http://www.pas.md/en/>), a nongovernmental organization based in the Republic of Moldova, as the principal recipient of a regional grant to boost tuberculosis (TB) control. The grant agreement, supported by the WHO Regional Office for Europe (<http://www.euro.who.int/en/home>) and partners, covers 11 countries from eastern Europe and central Asia.

Duration

January 2016 to December 2018

Goal and key objectives

The overall goal of this project is to decrease the burden of TB disease and halt the spread of drug resistance in the 11 EECA countries by increasing political commitment and translating evidence into the implementation of patient centred TB models of care.

The project aims to translate existing good practices at the country level and replicate them, in a feasible, rational, cost-effective and context-adapted manner, across eastern Europe and central Asia. There are two main objectives:

- to increase political commitment to end TB through regional cooperation and evidence sharing for effective and sustainable transformation of health systems;
- to support countries to implement effective and efficient TB service delivery systems with sustainable financing.

The EECA TB control activities are directly linked to the priorities of the Consolidated Action Plan to Prevent and Combat Multidrug- and Extensively Drug-Resistant Tuberculosis in the WHO European Region 2011–2015 and to the regional Tuberculosis action plan for the WHO European Region 2016–2020, the latter of which is in line with the global End TB Strategy.

The Regional Office for Europe will provide strategic guidance and technical advice, and facilitate the dialogue with all participating countries within the project implementation framework. The project's participating partners – TB Europe Coalition (TBEC; <http://www.tbcoalition.eu/>), the European Respiratory Society (ERS; <http://www.ersnet.org/>), the London School of Economics (LSE; <http://www.lse.ac.uk/home.aspx>), the London School of Hygiene and Tropical Medicine (LSHTM; <http://www.lshtm.ac.uk/>) – will be involved in various project stages, including preparatory operational research, appropriate technical assistance and project implementation.

Synergies will be sought and capitalized on with additional partners in order to maximize outcomes.

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