

## Case study

# FIFTEEN YEARS OF SUCCESSFUL COOPERATION BETWEEN THE MINISTRY OF HEALTH OF THE RUSSIAN FEDERATION AND WHO: THE HIGH-LEVEL WORKING GROUP ON TUBERCULOSIS IN THE RUSSIAN FEDERATION

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## ABSTRACT

The Global strategy and targets for tuberculosis prevention, care and control after 2015, adopted by the World Health Assembly at its Sixty-seventh session, provides for coordination and cooperation between specialists at the national and international levels. International cooperation contributes significantly to efforts to address tuberculosis (TB) in the Russian Federation, and has facilitated the exchange of knowledge and experiences between international and Russian TB specialists.

The High-level Working Group on Tuberculosis (HLWG) was set up in August 1999 through a joint initiative of the Ministry of Health of the Russian Federation and the World Health Organization (WHO). It was established with the intention of creating a platform for constructive dialogue between Russian and international specialists, and drafting recommendations on strategies and tactics for TB control in the Russian Federation. Over the years, more than 30 Russian and international nongovernmental organizations (INGOs) have

worked in partnership with the HLWG. Over the past 15 years, the HLWG has proven to be both effective and sustainable. It has brought together a wide range of international and Russian organizations and departments working on TB control in Russia. It has provided a platform for evaluating new evidence, and assessing and consolidating Russia's experience in the fight against TB. This model could be successfully replicated in other countries of the Region.

**Ключевые слова:** СОТРУДНИЧЕСТВО, МЕЖДУНАРОДНОЕ СОТРУДНИЧЕСТВО, РОССИЙСКАЯ ФЕДЕРАЦИЯ, ТУБЕРКУЛЕЗ

## INTRODUCTION

The Global strategy and targets for tuberculosis prevention, care and control after 2015 (1) was adopted by the World Health Assembly at its Sixty-seventh session, to enable the global epidemiological picture of tuberculosis (TB) to be brought under control. It also provides for a coordinated approach to cooperation between specialists at the national and international levels.

International cooperation contributes significantly to efforts to address TB in the Russian Federation, enabling the provision of forward-looking international

strategies to be introduced at the national level. In 2002, international support enabled extra funding to be found for anti-TB activities that would have been difficult to undertake owing to limited budgetary resources. Since then, two targeted national programmes (2,3) have played a significant part in the fight against TB, enhancing patient care through investment projects, renovating and equipping new laboratory and diagnostics facilities, and purchasing expendable supplies, second-line antibiotics and TB drugs.

These measures have enabled TB-targeted funds to be increased throughout the country, which has improved the epidemiological situation (3).

International cooperation has also facilitated exchanges of knowledge and experience between international and Russian TB specialists. It has provided access to information on modern international standards, scientific literature and reviews, and afforded an opportunity for Russian TB specialists to take part in international conferences and seminars, and receive the support of international experts at the local and federal levels.

## HIGH-LEVEL WORKING GROUP ON TUBERCULOSIS (HLWG)

### ESTABLISHMENT OF THE HLWG

The High-level Working Group on Tuberculosis (HLWG) was set up in August 1999 through a joint initiative of the Ministry of Health of the Russian Federation and the World Health Organization (WHO) (4). It was established as an international joint coordination and advisory body, with the intention of creating a platform for constructive dialogue between Russian and international specialists, and drafting recommendations on strategies and tactics for TB control in the Russian Federation.

### FUNCTIONS OF THE HLWG

Through all its activities, the HLWG facilitates effective consultations between Russian and international experts on the organization of TB treatment for the population, and coordinates the activities of Russian and international organizations involved in the fight against TB in the Russian Federation. It also helps to set priorities in line with the “Stop TB” strategy and develop recommendations on strategies and tactics for addressing TB, including multidrug-resistant (MDR)-TB and HIV-associated TB, and other relevant aspects of TB care, including social support. Cooperation with partners enables Russia to share its experiences in TB control on a global scale.

The HLWG also serves as an advisory body, selecting priority issues for consideration and taking decisions on the involvement of technical experts from Russia and international organizations to, among others, share experiences, develop new anti-TB strategies, and conduct monitoring activities.

### ORGANIZATION OF THE HLWG

Pursuant to its rules of procedure, plenary meetings of the HLWG take place once or twice a year. A total of 25 meetings were held from 1999 to December 2014. Intersessional work is done by the HLWG secretariat, which represents all of the HLWG’s member organizations.

Over the years, more than 30 Russian and international nongovernmental organizations have worked in partnership with the HLWG. These include the Central Tuberculosis Research Institute, Central Research Institute for Phthisiopulmonology of the I.M. Sechenov First Moscow State Medical University, Russian Academy of Medical Science, Royal Netherlands Association for the Prevention of Tuberculosis, International Federation of Red Cross and Red Crescent Societies, Russian Red Cross, International Union against Tuberculosis and Lung Disease, Partners in Health, Médecins Sans Frontières, Joint United Nations Programme on HIV/AIDS (UNAIDS) and the International Organization for Migration.

Membership of the HLWG currently comprises representatives of the Ministry of Health of the Russian Federation, Federal Penitentiary Service, Federal Service for Health Care and Social Development, Federal Service for Consumer Rights and Welfare, Central Tuberculosis Research Institute, Federal Research Institutes for Phthisiopulmonology and Tuberculosis, Central Research Institute for the Organization and Computerization of Health Care, and WHO (WHO headquarters, WHO Regional Office for Europe and the WHO Country Office in the Russian Federation). The HLWG’s plenary sittings are chaired on a rotating basis by representatives of the Ministry of Health of the Russian Federation and WHO.

The Interagency Coordinating Committee (later Council) was established in 2003 under the aegis of the HLWG to coordinate the activities of the HLWG’s international partners working on TB control in the Russian Federation. It is an open and voluntary forum, which facilitates the equal participation of Russian and international organizations, and promotes information-sharing and the coordination of joint efforts.

## ACTIVITIES OF THE HLWG

As part of the HLWG's activities, thematic working groups have been set up, comprising leading Russian and international experts on specific issues related to TB care requiring international cooperation. The working groups' activities cover priority issues, such as drafting legislation and codes of practice on hygiene and preventing the spread of infection in TB treatment centres, laboratory diagnostics, epidemiological surveillance and monitoring of TB, professional training for specialists, and awareness-raising measures. The thematic working groups also draft recommendations and suggestions on activities to address multidrug- and extensively drug-resistant TB (M/XDR-TB) and HIV-associated TB.

Experts working with the HLWG through the thematic working groups were involved in preparing materials on key aspects of TB control in projects run by the International Bank for Reconstruction and Development and the Global Fund to Fight AIDS, Tuberculosis and Malaria. These included the development of a five-year plan on guaranteeing diagnosis and treatment, and building Russia's public TB treatment system, for the period 2003–2007. HLWG experts also provide essential technical support for drafting the annual analytical review "Tuberculosis in the Russian Federation" (5).

Discussions have been held on recommendations for the main axes of efforts to counter TB, including how to enhance the reporting forms for medical documentation on TB monitoring and laboratory diagnostics (6). Order No. 109 of the Ministry of Health on enhancing anti-TB activities in the Russian Federation (2003) (7) was discussed by the HLWG at the drafting stage. The Order brought into practice a range of internationally recognized principles for the organization of TB control measures (standardized short-course treatment, standardized principles of laboratory diagnostics, drug sensitivity studies and a reference laboratory system). The provisions of Order No. 50 of the Ministry of Health on the introduction of a system for data collection using quarterly cohort analysis (2004) (8) and Order No. 951 of the Ministry of Health the Russian Federation on approving practical recommendations for the diagnosis and treatment of pulmonary tuberculosis (9) were also discussed. The HLWG supported the preparation of a recommendation on TB treatment in children,

and for the detection and treatment of extrapulmonary TB.

A large number of terms and definitions have been harmonized in order to standardize approaches to solving clinical, epidemiological and organizational issues. In recent years, due to the joint efforts of specialists, including through participation in the HLWG, important scientific guidance materials have been drafted and published on anti-TB measures in the Russian Federation, including an English–Russian glossary of TB-related terms (10), manuals for physicians on pulmonary TB – diagnosis and chemotherapy (11), and organizing TB care for people living with HIV (12), recommendations on lowering TB incidence among populations with high rates of HIV infection (13), and infection control in TB treatment centres (14).

At its plenary meetings, the HLWG also discussed the following recommendations of the Russian Society of Phthisiologists: federal clinical recommendations on diagnosis and care for pulmonary TB (15), federal clinical recommendations on diagnosis and care for TB in HIV patients (16), federal clinical recommendations on diagnosis and care for M/XDR pulmonary TB (17), and federal clinical recommendations on diagnosis and care for pulmonary tuberculosis in children (18).

Owing to coordinated international cooperation and the issuing of new federal standards, it has been possible to disseminate the new national TB strategy swiftly to all regions of the country.

## ACHIEVEMENTS OF THE HLWG

The HLWG is one element of the Russian Federation's cooperation with WHO that enables Russian experiences of TB control to be shared with other countries.

Successful joint projects have been possible as a result of effective partnership between Russian and international organizations through the HLWG. These include the establishment of centres of excellence for TB care in the Vladimir, Ivanovo and Oryol regions, development and introduction of a monitoring system with the participation of international experts, provision of support for best practices in TB care in the civil and penitentiary sectors, and provision of psychosocial support to enhance treatment

adherence. Pursuant to a recommendation adopted at the twenty-fourth meeting of the HLWG, measures will be taken, with WHO's participation, to enhance the mechanisms in place for providing psychosocial support to TB patients, with a view to improving their treatment adherence. An evaluation of the success of this work is planned, along with the development of sustainable models for improving treatment adherence in the Russian Federation.

In line with the resolution on TB adopted at the Sixty-seventh session of the World Health Assembly, and the new plan of action currently being drafted on TB in the WHO European Region 2016–2020, the HLWG's immediate tasks include developing a treatment concept for HIV-associated M/XDR-TB, optimizing reporting forms, developing a comprehensive, personalized system for registration of TB patients, and preventing the spread of TB and HIV among migrants.

## CONCLUSION

Over the past 15 years, the HLWG has proven to be effective. It has maintained its relevance as a forum for bringing together a wide range of international and Russian organizations and departments working on TB control in Russia. The HLWG facilitated the drafting and implementation of a new TB strategy, based on WHO recommendations and international best practices, and supporting implementation of the strategy in the Russian Federation. During that time, a wealth of experience in teamwork, cooperation and problem-solving has been gathered.

The distinguishing feature of the HLWG is its sustainability, which has stood the test of time. It has assumed the role of a health-care leader in the Russian Federation, providing a platform for evaluating new evidence, and assessing and consolidating Russia's experience in the fight against TB. This model could be successfully replicated in other countries of the Region.

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