Meeting of ENGAGE-TB five focus countries to review status and plan for Monitoring and Evaluation scale-up

15 November 2012, Kuala Lumpur, Malaysia
WHO, Stop TB Department, THC

Meeting Report

Background and purpose

The ENGAGE-TB Approach aims at integrating community-based tuberculosis activities into the work of nongovernmental and other civil society organizations. The Operational Guidance developed by WHO Stop TB Department has been published and was launched at the Stop TB Symposium during the 43rd Union World Conference on Lung Health on 13 November 2012, Kuala Lumpur, Malaysia. Five focus countries, including Democratic Republic of Congo, Ethiopia, Kenya, South Africa and Tanzania, are currently implementing the ENGAGE-TB Approach, with WHO support from country, subregional, regional and headquarter levels. In the five countries, desired outcomes include ensuring an enabling environment, effective monitoring and evaluation system, and engagement of at least 2 new NGOs in community-based TB activities per country with meaningful synergies with the national TB programme and local communities.

Despite the take-up of community-based approaches in addressing TB in many countries over the past decade, the lack of standardized indicators and poor linkages with national TB programmes have made it difficult to measure the contribution of community-based actions towards key TB outcomes and mainstream community-based activities into routine national TB programming. The meeting also discussed how to address these challenges and enhance the documentation of community-based TB activities using the standard indicators identified in the ENGAGE-TB Approach through routine TB data collection system in the five implementing countries.

The following key issues were discussed and action points drawn:

Status of implementation of the ENGAGE-TB Approach

National-level consultation with mostly unengaged NGOs have been held in each of the five countries and national level NGO coordinating bodies on TB established, with WHO technical support and brokering role. National-level guidance documents in line with the ENGAGE-TB Operational Guidance have been finalized in the Democratic Republic of Congo, Kenya and Tanzania. Several NGOs in each of the five countries have submitted proposals to BMSF STF for technical assistance and financial support. WHO HQ, in coordination with Regional and Country Offices, provided technical review input to BMSF STF on all applications submitted to the Technical Assistance Program as possible ENGAGE-TB partners. The status of development of M&E for community engagement as per the ENGAGE-TB Approach is summarized in a separate section below.

Action points:

- STB to keep disseminating the ENGAGE-TB Approach Operational Guidance as well as emerging good practices from the implementation experience in the five focus countries and promote scale-up in other countries.
In the implementing countries, NTPs to keep implementing their respective action plans with WHO support

Key issues and experiences in engaging unengaged NGOs

Meeting participants shared their experiences in engaging the unengaged NGOs in their respective countries and highlighted the critical issues that need to be promoted for sustaining the systematic engagement of NGOs for community based TB activities. The following are the key observations:

- NTP ownership of the process to engage a wide range of community-based stakeholders is a key to sustained success. This will help ensure that community-based strategies address programmatic gaps and needs.
- Meaningful engagement of NGOs and other CSOs begins with proactive engagement in the joint development of National Strategic Plans.
- Focus on underserved vulnerable populations will help demonstrate impact on TB control quickly at the national level. The process to define such groups needs to be anchored in a situational analysis, through NTP dialogue with the NGOs and other CSOs.
- Given the increasing scarcity of financial resources and donor support, focusing on carefully developed strategies which clearly address programmatic gaps are important.
- NGOs and other CSOs focusing on HIV response at community levels (but not TB) still represent untapped opportunity that has to be pursued aggressively and systematically.
- Adoption of the two monitoring indicators as per the ENGAGE-TB Approach and designing appropriate data collection tools at the national level is key for tracking community-based contributions.
- The two indicators represent the minimum that each national TB programme is expected to monitor to track the progress of community engagement through a single national monitoring and evaluation system.

Action points:

- WHO at all levels to keep providing strong technical assistance and catalytic role in the implementation of the ENGAGE-TB approach and the two monitoring indicators in the five focus countries, and other selected countries in the Region and beyond.
- The implementing countries and their respective NTPs to keep reaching out to the unengaged NGOs and other CSOs with the aim of maximizing take-up and implementation of the ENGAGE-TB Approach.
- Unengaged NGOs and other CSOs whose work focuses on issues correlated with TB or its determinants to consider integrating community-based TB activities into their ongoing work, and commence the dialogue with the NTPs and WHO.

Documenting already existing community-based TB activities

Participants of the meeting discussed the importance of documenting already existing community-based TB activities using the standardised indicators on a nationwide scale beyond the project areas and even beyond the five pioneer countries. The two indicators of the ENGAGE-TB Approach measure the contribution of community-based activities to TB referrals and new notifications, and contribution of community-based activities to TB treatment success. The clarity of definition of community volunteer and community health worker in the ENGAGE-TB Approach was discussed to further facilitate the nationwide documentation of ongoing activities. In addition, systematic use of simple referral forms or slips from community workers and volunteers to the outpatient department, TB clinic or to
The laboratory will further facilitate the documentation. The following were observations from the discussion:

- All countries except South Africa have completed the development of the M&E tools for the project areas, which will inform nationwide expansion.
- Kenya, Tanzania and Ethiopia already have this data nationwide or for some parts of the country, and can easily integrate them in the National TB M&E system that will subsequently inform global TB monitoring and evaluation reports. The Democratic Republic of Congo and South Africa will proceed to develop the systems to capture this information in due course.
- Participating countries agreed to report on the two indicators during the global data collection in 2013. This data will be published in the WHO Global Tuberculosis Control Report 2013.
- Agreement was reached to hold an additional meeting of the five focus countries, including the NTP M&E focal points and relevant STB staff working on data collection, sometime in 2013 to further strengthen the data collection and reporting.

Action points:

- **STB, in close collaboration with STB/TME, WHO AFRO and Country Offices of the five focus countries to further discuss and define next steps on how to record and report on the two core indicators for community engagement as part of the WHO Global Tuberculosis Control Report 2013.**
- **STB and WHO AFRO to discuss and define next steps on strengthening recording and reporting of community-based TB activities as part of the routine NTP M&E system in the five countries and beyond.**
- **STB to organize a meeting in 2013 to further discuss monitoring of the two indicators in greater detail.**