

THEMATIC TRACKS / STOP TB PARTNERS´ FORUM 2009

Track		Lang	Title	OrgName	FocalPoint	Objective of the session	Structure	Speakers	Rapporteur
Addressing the needs of neglected populations	Monday 16h30- 18h00 (Sala 1)	English AN-1	Reaching TB Care to the Unreachable through Partnerships	UNDP/PPD	Dr. Shariful Islam	1. To create a better understanding of of the healthcare options for the hard-to-reach people 2. To demonstrate mechanism of effective partnerships building and creating synergy for greater TB Diagnosis and Care 3. To identify opportunities and perspectives for addressing the needs of the neglected population	There will be a key note presentation followed by a panel discussion among stakeholders working for providing TB care in neglected regions. The floor will then be open for discussion and open debate for providing optimal services.	1. Dr. Shariful Islam 2. Dr. Zahirul Islam 3. Mr. Amadou Moreau	Mr. Pintu Kanti Paul
	Monday 16h30- 18h00 (Sala 2)	Spanish AN-2	TB Control in Neglected Populations: A Challenge in the Americas	PAHO	Mirtha del Granado	Conocer y difundir experiencias exitosas de control de la TB en poblaciones pobres y marginales con alta prevalencia de TB, TB/VIH, TB/MDR, y con acceso limitado al sistema de salud. Temas a cubrir Estrategias implementadas y existosas de control de la TB en poblaciones indigenas, privadas de libertad y marginales de grandes ciudades en Las Americas.	1. La carga de la TB y los grandes desafios en su control en poblaciones vulnerables (indigenas, privadas de libertad y marginales de grandes ciudades) en Las Americas. 2. Control de la TB en poblaciones indigenas - experiencia de Canada. 3. Control de la TB en poblaciones privadas de libertad, experiencia del Peru. 4. Control de la TB en poblaciones marginales de grandes ciudades, experiencia del Brazil	speaker(s) 1. Mirtha del Granado 2. Chief Wilton LittleChild 3. Ministro de Salud del Peru 4. Jefe del Programa Nacional de Control de la TB del Brasil Dr. Draurio Barrera	Name(s) of proposed rapporteur Anne Fanning
	Monday 16h30- 18h00 (Sala 10)	English AN-3	Empowering disadvantaged communities - Dramatic Results in TB Treatment	Operation ASHA	Sandeep Ahuja	Full strategy followed by Operation ASHA. This strategy has helped us reduce default rate to ZERO and increase detection rate of sputum smear positive patients by 39% in last two years. Ken Castro, US Public Health Service from CDC, remarked "truly remarkable work" after visiting DOTS centers of Operation ASHA. Operation ASHA is also extremely cost effective and spends only \$15 US in delivering TB treatment.		Sandeep Ahuja, CEO, Operation ASHA	tbc
	Tuesday 11h00- 12h30 (Sala 16)	Portuguese AN-4	Community participation in tuberculosis control in prisons: from research to the development of new tools	Secretaria de Administração Penitenciária do Rio de Janeiro, Brazil e INSERM UMR707, Paris, France	Alexandra Roma Sanchez	Based on these analysis, the Programa de Controle da Tuberculose da Secretaria de Administração Penitenciária do Estado do Rio now associates, with the basic biomedical actions, an intensive information and awareness program targeted to the various prisons actors (detainees, guards, teachers, health workers, religious agents, detainee's families...) to involve the various members of the prison community to make the fight against TB a community base program. This program was recently implemented in a prison unit to demonstrate his impact on TB detection and cure rate.	1. The first part will include a 20 mn presentation (+ 10 minutes discussion) aimed at explaining how the results of the research-action undertaken resulted in a program integrating the basic bio-medical actions and an intensive information and awareness program with components immediately derived from the research program. 2. The second part will be a panel discussion including short presentations by delegates from Georgia, Malawi and Peru	1st part: Vilma Diuana de Castro, Penitenciária do Rio 2d part: Panel discussion with speakers from Georgia, Malawi (AD Harries), Peru (José Best Romero), Brazil (Vilma Diuana)	Bernard Larouze, Université Pierre et Marie Curie, Paris

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	Tuesday 11h00- 12h30 (Sala 10)	English AN-5	Rights and Access: Promoting TB Care for Undocumented Migrants, Drug Users and Mineworkers	Public Health Watch, Open Society Institute (OSI); Aids and Rights Alliance of Southern Africa (ARASA); Human Rights Wat	Erin Howe	Highlights the particular vulnerabilities of undocumented migrants, drug users and miners to TB infection, as well as the barriers they face to TB diagnosis and treatment. Explores creative approaches to providing these populations with appropriate TB care that respects their human rights.	I) Introduction by rapporteur discussing the needs of marginalized populations and their commonalities and the importance of this to TB prevention and control responses (5 minutes) II.) Moderated discussion on marginalized populations and TB prevention and control (55 minutes) III.) Questions and comments from the audience (30 minutes)	Boniswa Seti, Aids and Rights Alliance of Southern Africa (ARASA) tbc , All-Ukrainian Network of PLWH or Dr. Vladimir Kurpita, All- Ukrainian Network of PLWH Joe Amon, Human Rights Watch (HRW)	Cynthia Eyakuze, Public Health Watch
Empowering communities	Monday 16h30- 18h00 (Plenary)	Portugu ese EC- 1 with interpret	Social mobilization experiences in the field of TB control in Latin America	STOP TB Brazil, GAEXPA, Grupo Pela Vidda-Niterói	Ézio Távora & Ana Glória Pires	This session will focus on exchange of experiences among civil society actors, with a survey of problems and opportunities for joint actions together.	Francisco Rosas, México Pablo Anamaria, Peru Jaime Augueta, El Salvador Inacio Queiros, Brasil		Liandro Lindner, Brasil
	Monday 16h30- 18h00 (Sala 3)	French EC-2	Pour une meilleure mobilisation communautaire face à la tuberculose et à la co- infection TB et VIH en Afrique Francophone	Réseau Afrique 2000/ AIDES and Global Health Advocates	Charlotte Goyon	Comment vulgariser la tuberculose au sein des communautés et spécifiquement les communautés affectées par le VIH/SIDA et comment développer une meilleure connaissance de la charte des Patients en Afrique francophone. Contributions du Tchad, Mali et Burkina Faso.	3 présentations par trois speakers d'Afrique Francophone (45 minutes au total) et groupes de travail autour des objectifs énoncés (30 minutes) et restitution avec recommandations détaillées (15 minutes)	Célestin Gabdoubé Ladiba, Association de soutien et d'entaide aux personnes vivants avec le VIH, Tchad, Ouèdraogo Filèmon, Association African Solidarité, Burkina Faso, Aly Soumountera, Association Walé de lutte contre le SIDA à Ségou, Mali	Charlotte Goyon, Avocats pour la Santé dans le Monde
	Monday 16h30- 18h00 (Sala 4)	English EC-3	Engaging Community Health Workers and other Community Partners in Finding and Treating Tuberculosis	Consortium to Respond Effectively to the AIDS/TB Epidemic (CREATE)	Lois Eldred	Demonstrates how the use of trained community health workers and other community partners can complement and enhance TB programs. Presenters will describe examples of home-based DOT in Brazil, isoniazid preventive therapy in gold miners in South Africa, and a unique program in two Kenyan prisons that utilizes prisoners as TB peer educators, advocates and DOT supporters.	Introduction - David Bryden, Infectious Diseases Center for Global Health Policy and Advocacy 16:40-Using Community Health Workers to Provide Home-Based DOT in a Rio de Janeiro Favela, Dr. Solange Cavalcante, Municipal Health Secretariat of Rio de Janeiro 17:00- Community Mobilization and Peer Education in Thibela: South African Gold Miners, Dr. Lois Eldred, CREATE, Johns Hopkins University 17:20- Community Outreach in Prisons: Using TB Peer Education, Advocacy and DOT Support to Overcome Barriers in Two Prisons in Kenya, Dr. Kennedy Manyoni, JHPIEGO, Kenya 17:40-18:00 Rapporteur Comments and Discussion		Dr. Richard Chaisson, CREATE, Johns Hopkins University

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Tuesday 11h00- 12h30 (Plenary Room)	English EC-4	Empowering Communities to address TB/HIV co - infection, Experinces from Uganda, Zimbabwe , Kenya, and Invory Coast	International Community of Women Living with HIVV/AIDS- East Africa	Dorothy Namutamba , Najjuka Judith	We intend to cover the overview of the projects and the successful strategies that we have used in supporting the Activists that include: • Implementation of the ICW-EA/TAG TB/HIV Advocacy workshop • Strategic identification and selection of participants to attend workshops that come from national and regional HIV, TB /HIV organizations, networks • Continuous support and follow up of the Activists as they plan and implement their work • Lessons learned, challenges and key recommendations	An introductory overview of the project will be given by ICW –EA representative for 10 Minutes, and then the five speakers will be each be given 10 minutes each to present their work and the last 30 Minutes will be spent on the open discussions session that will also take care of any clarifications, questions and answers from the presenters.	Dorothy Namutamba–ICW East Africa regional office, Prima Kazoora Musimenta - HEPS, Uganda, Apina Francis MDRC, Kenya, Albert Soyapi Makone - CWGH, Zimbabwe, Sadia Nathalie -Lumière Action, Ivory Coast	Judith Najjuka - ICW- Eastern Africa
Wednesd ay 11h00- 12h30 (Sala 2)	English EC-5	Advocacy lessons: making community voices heard	Treatment Action Group	Claire Wingfield	This session will cover the need for HIV activists to take up TB as an advocacy priority to achieve full scale up of collaborative TB/HIV activities. It will bring together TB/HIV activists who have effectively advocated policy makers and funders to address community priorities around TB/HIV and highlight successful strategies.	I.) Introduction to session by rapporteur (5 minutes) II.) Presentation sharing the lessons learned from HIV activism on the need for community representation on national and global TB and TB/HIV decision-making bodies (10 minutes) III.) Presentations from 4 panelists highlighting the aim of their respective institutions, their role as community representatives, challenges they face, and achievements they have made (40 minutes) IV.) Panel discussion facilitated by rapporteur to highlight successful strategies and lessons learned (15 minutes) V.) Questions and comments from the audience (20 minutes)	Blessina Kumar, Community representative, Mayowa Joel, IHP+, Thembi Nkambule, Swaziland GFATM, Carol Nyirenda, UNITAID, Obatunde Oladapo, Stop TB Partnership-Nigeria	Claire Wingfield, Treatment Action Group
Tuesday 11h00- 12h30 (Sala 3)	English EC-6	Bridging the Divide: Affected Community and TB Control Partnerships	Treatment Action Group (USA), Socios En Salud (Peru), and ICW East Africa (Uganda)	Javid Syed	The session will highlight TB control and civil society partnerships to implement the community empowerment component of the Stop TB Strategy and address current challenges for TB control.	Partnership for Better Success: Lessons from NTP, Peru and SES (30 min) Addressing TB/HIV challenge through PWA structures: Lessons from Treatment Action Campaign (15min) Treating MDR through community based strategies in high HIV settings: Lessons from Partners in Health, Lesotho (15min) Discussion: 30 mins	Jaime Bayona and Peruvian NTP Rep, Victor Lakay, Hind Satti	Joel Mayowa
Tuesday 11h00- 12h30 (Sala 2)	English EC-7	Monitoring and Evaluation for Advocacy, Communication, and Social Mobilization	PATH	Charlotte Colvin	A key challenge to gaining support for ACSM activities is proving that these investments make a difference. Please join us for a session on the opportunities and challenges associated with monitoring and evaluation for ACSM, including recommendations for the Stop TB Secretariat on this important aspect of TB programs.	11:00-11:30 Introduction and overview of ACSM and M&E for ACSM, including challenges 11:30-12:00 Small group work to brainstorm ways to overcome M&E challenges 12:00-12:30 Plenary session to present small group results, including discussion of the way forward in M&E for ACSM	Charlotte Colvin, Hara Mihalea, D'Arcy Richardson	Hara Mihalea, PATH Cambodia

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	Wednesday 11h00-12h30 (Sala 3)	Spanish EC-8	Experiences in forming and developing organizations for affected communities in the Latin American Region	ORGANIZACION DE AFECTADOS DE TUBERCULOSIS: ASET-COMAS-PERÙ, Asociacion Nacional de Personas Positvas Vida Nueva	ORGANIZACION DE PERSONAS AFECTADAS POR TUBERCULOSIS	Esta experiencia ha sido desarrollada en diez regiones del Perú, realizándose la sistematización con participación activa de las personas afectadas. En ese proceso ha sido importante la identificación de tres hitos, el de la incorporación de las personas afectadas a una organización ya constituida o por constituirse, el de su capacitación y el de la asociatividad. Cada hito aproximadamente duró seis meses dependiendo de la cultura organizativa de cada región. De igual manera señala la experiencia compleja del significado de ser una persona afectada de tuberculosis, abordando los motivos para integrarse, la mejora de capacidades personales desarrolladas y las actitudes identificadas al pertenecer a una Organización.	1. Antecedentes de las Organizaciones de afectados por tuberculosis. 2. Enfoque de la intervención 3. Modelo de intervención 4. Significado de ser una persona afectada por tuberculosis 5. Lecciones aprendidas	Luz Estrada Gonzales	Elena Cuba Zapata y Celia Menzala Peralta, ASET-COMAS-PERÙ
	Wednesday 11h00-12h30 (Sala 10)	English EC-9	Empowering Communities through Community Lead Structural Interventions	ADRA (Adventis Development and Relief Agency)	Ravi Bhatnagar	Strengthening the concept of Community Lead Structural Interventions for reversing and halting TB epidemic.		Ravi Bhatnagar	from the community
Engaging all care providers	Monday 16h30-18h00 (Sala 16)	English with interpretation EA-1	'The workplace – a neglected opportunity to improve TB prevention, treatment and care'	UNAIDS, Liverpool School of Tropical Medicine, WEF, World Gold Council	Alasdair Reid	This session will present an overview of workplace TB control and examples of good practice, followed by a moderated discussion to highlight the challenges and opportunities that arise in engaging the various partners in workplace TB control.	Chair – Joseph Sitienei - National TB programme manager, Kenya • Global overview of TB control in the workplace - Mukund Uplekar, WHO Stop TB Department • Motivation and challenges for workplace and community TB activities - the role of the corporate sector - Brian Chicksen, Anglo Gold Ashanti and Maureen Upton, World Gold Council. • Workplace programmes in the informal sector: linking micro and subsistence enterprise with TB control - the Self-Employed Women's Association in India • The role of the unions and the informal sector in TB control – Kofi Amekudzi, ILO • A toolkit for supporting workplace TB programmes experience from India, South Africa and China - Shaloo Puri, World Economic Forum		Alasdair Reid, UNAIDS
	Tuesday 11h00-12h30 (Sala 4)	English EA-2	Stopping TB through the Integration of TB Screening and Control into "Other" Health Services	Jhpiego	Stacie C. Stender	The objective of this session is to provide "best practice" examples of how TB screening and diagnosis can be integrated into health services to improve upon case finding. Presentations from South Africa, Kenya, and Zambia will elucidate how to improve integration of TB diagnosis in workplaces, antenatal clinics, and inpatient wards, respectively.	11:00 – Introduction to objective of session, Stacie C. Stender 11:10 – TB screening as a component of workplace VCT in South Africa by Jason Wessenaar 11:30 – Integrating TB screening into Focused Antenatal Care in Eastern Province, Kenya by Kennedy Manyonyi 11:50 – Improving TB diagnosis through competency based training of doctors, nurses, and clinical officers working on in-patient wards in Zambia by Joesph Nikisi 12:10 – Discussion, questions, and answers, led by Stacie C. Stender		Stacie C. Stender, Jhpiego

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	Tuesday 11h00- 12h30 (Sala 5)	Spanish EA-3	Metodologías aplicadas para el desarrollo de los componentes de alianzas público privadas en el contexto de los programas de control de la tuberculosis	Ministry of Health, Ecuador	Juan Proaño	Delgates form organizatiосn that are using different methodologies to implement DOTS in organizations	Dr. Patiño (CARE Ecuador) acerca de su participación en el TRACK de Health Impact Assessment - HIA, Dr. Proaño (Ministerio de Saludo del Ecuador) sobre la experiencia utilizando HIA para incorporar DOTS en los Sistemas de Seguridad Social de Ecuador	tbс	
	Wednesd ay 11h00- 12h30 (Sala 4)	English EA-4	Ensuring high quality TB care	World Health Organization/American Thoracic Society	Mukund Uplekar/Philip Hopewell	The objective of the session is to stimulate effective private sector involvement in TB care and control.	This session will consist of 5-15 min presentations: 1. Overview of global progress in involving the private sector; 2. Engagement of professional associations in collaborations in TB care and control; 3. Role of the International Standards for TB Care; 4. Engaging the business sector in TB care; 5. Institutionalizing public-private mix: example Philippines.	1. Mukund Uplekar 2. R.V. Asokan 3. Philip Hopewell 4. TBD 5. Charles Yu	Fran DuMelle
	Wednesd ay 11h00- 12h30 (Sala 15)	English EA-5	Frenchised Social Marketing-A new approach to engage private providers	National TB Control Program Pakistan	Dr Ejaz Qadeer	To understand the need for slecting a suitable model for engaging private service delivery and explain the essential ingredients of PPM in social marketing. Share the experience and successful implementation for case detection and treatment out come through social marketing.	Dr Mukund Uplekar Dr Noor Ahmad Baloch	Dr Ejaz Qadeer	
Financing TB	Monday 16h30- 18h00 (Sala 6)	Portuguese FTB-1	How to involve the private sector ?	Instituto Cultural Barong	Marta McBritton	This session will present the experiences of an NGO and its difficulties involving the private sector, with a call for better collaboration.			
	Tuesday 11h00- 12h30 (Sala 15)	English FTB-2	Innovative Financing for TB Control	UNITAID	Lisa REGIS	Areas to be covered: - the innovative approaches to financing TB - financing the scale up of MDR TB - Innovative sources of finance for MDR TB management programmes	1h30 hours information sharing on new innovative approaches to financing TB: the UNITAID model with the Airline ticket levy and other models	Executive Secretary UNITAID, representative from Global Fund for AIDS, TB and Malaria, Kenyan AIDS NGO, representative from WHO Stop TB Department	Lorenzo WITHERS POON & Lisa REGIS, UNITAID
	Wednesd ay 11h00- 12h30 (Sala 5)	English FTB-3	The Global Fund Emergency: Mobilizing \$5 B and Getting the \$100 M Proposals	ACTION (Advocacy to Control TB Internationally) Campaign	Matthew Kavanagh	This session will aim to inform participants about the current funding gap, explore barriers to scaled up TB proposals and generate ideas and recommendations for the TB community to ramp up our efforts to mobilize resources and create demand for the Global Fund to support TB programs.	Overview of the twin problems of resource mobilization and demand creation -Question & Answers -Brainstorming on a \$5B campaign -Brainstorming on barriers and solutions to bigger TB proposals BREAKOUT GROUPS -Crafting one big recommendation on funding and one on demand creation -Report back	Matthew Kavanagh, RESULTS Educational Fund, Lucy Chesire, Kenyan AIDS NGO Consortium, Bobby John, Global Health Advocates, INVITED: Representative of the Global Fund Secretariat, Representative of TB Team	Louise Holly, RESULTS UK

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From Research to Retooling	Monday 16h30- 18h00 (Sala 17)	English RR-1	The TB Research Movement: Evaluating research needs from the users' perspective	Stop TB Partnership	Christian Lienhardt	The purpose of this session is to guide the international research agenda on areas that are deemed to be the most profitable from the user's perspective. After a short introduction on the TB Research Movement, speakers will make presentations (max 10 minutes) on the expected research needs from their own perspective (NTP managers, clinicians, patients, NGOs).	The session will be essentially interactive in order to get most opinions from various users on the needs for research in TB control. Opportunity will also be given to the X-prize Foundation to present their prize on the "Best TB diagnostic test for use in resource-poor countries".	Christian Lienhardt: TB Research Movmt - Jeremiah Chacaya: New tools in research on TB - Mao Tan Eang: NTP managers view - Yvona Cortéz: Need for reserch in MDR-TB - Tido Von Schoen-Angerer: Research needs in Access	Amy Adelberger
	Tuesday 11h00- 12h30 (Sala 14)	English RR-2	New Tools to Address the TB Pandemic	Aeras Global TB Vaccine Foundation, Global Alliance for TB Drug Development, Foundation for Innovative New Diagnostics	Jennifer Woolley	This session will reinforce the important role of research and development of new tools in global efforts to eliminate TB, provide an overview of the status of new vaccines, drugs and diagnostics, outline the challenges and barriers to progress, and provide solutions to help overcome those barriers, identify key actions that countries will need to take to adopt, introduce and implement new tools – a process known as "retooling"	The need for new tools – country level Mr. Ezio Tavora Santos Filho; Ms. Carol Nyirenda 15 minutes - The role of vaccines in addressing the tuberculosis pandemic Dr. Jerald C. Sadoff, Aeras 15 minutes - Responding to the tuberculosis pandemic through improved treatments, Dr. Melvin Spigelman, TB Alliance - Product pipeline for more accurate diagnosis of tuberculosis Dr. Giorgio Roscigno, FIND 15 minutes - Retooling for TB control, Dr. Saidi Egagwa, Ministry of Health and Social Welfare, Tanzania - Q&A; Discussion	Moderated by Mr. Ezio Tavora Santos-Filho (Invited); Mrs. Carol Nyirenda	Heather Ignatius
	Wedesday 11h00- 12h30 (Sala 17)	English RR-3	Progress in evaluating new tools to improve TB control	Consortium to Respond Effectively to the AIDS-TB Epidemic	Richard E. Chaisson	Describe cutting edge clinical research in high burden countries that will lead to new policies and practices for TB control.	4x15 minute talks followed by a 10 minute summary and 20 minutes of audience participation	Dr. Marcus Conde, Fed. Univ Rio de Janeiro, Dr. Elsa Villarino, Centers for Disease Control and Prevention, Dr. Celine Gounder, South Africa and Johns Hopkins University, Dr. Susan Dorman, Johns Hopkins University	Dr. Betina Durovni, Rio de Janeiro Secretariat of Health

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	Wednesday 11h00-12h30 (Sala 14)	Portuguese RR-4	Operational researches in TB control	University of São Paulo – Ribeirão Preto College of Nursing and Medical School of Ribeirão Preto	Rubia Laine de Paula Andrade	Presents research that focuses on assessment of health services facilities in TB care; rethinks professional practices aiming at comprehensive attention to TB patients and their families and interventions that will optimize health services provision; and shows risk areas through geographical analysis.	Operational researches - 11h00-11h20 Operational researches in Brazil - 11h20-11h40 Quality care to patients with TB and priorities for operational research in African countries- 11h40-12h00	Antônio Ruffino- Netto- Rede-TB Speakers: Rodolfo Rodrigues Cruz (PAHO), Tereza Cristina Scatena Villa (Rede-TB), Gini Williams (International Council of Nurses)	Fabiana Barbosa Assumpção de Souza – Rede-TB
	Tuesday 11h00-12h30 (Sala 1)	English RR-5	Research towards change TB control policies and practices	Rede-TB/ Brazil	Afranio Kritski	To focus on the Research activities from different organizations in the context of Research and TB control activities, to jointly examine and address its impact on change TB control policies and practices.	Maarten van Cleeff (KNCV), Bertie Squires (International Union Against Tuberculosis), Paul Jensen (CDC/CCID/NCHHSTP), Gail H. Cassell (Eli Lilly and Company), Afranio Kritski (Programa Acadêmico de TB da UFRJ)	Chair: Nils Billo (Union)	Christy Hanson (GH/HIDN/ID)
Increasing Access and Equity	Monday 16h30-18h00 (Sala 5)	English IA-1	"A world free of TB needs free TB diagnosis"	Liverpool School of Tropical Medicine, TB & Poverty Sub-group, & Sandoz, India	Dr S B Squire	To explore, through lively debate, the issues that must be addressed in the coming 5 years: a) Create a global consensus that the diagnostic process for confirmation or exclusion of TB disease should be available free of charge to all people seeking care for cough symptoms of 2 weeks and more; b) Ensure that truly free TB diagnosis becomes a reality for all; c) Ensure that the STOP-TB Strategy explicitly endorses the global need for free TB diagnosis and treatment for all	The motion for debate: "This house believes that the diagnostic process (consultation and tests) for all patients with chronic cough can and should be free in order to promote access, especially for the poor and vulnerable, to free TB treatment for all forms of TB disease" Welcome and introductions: 5 minutes Voting by participants: 5 minutes – to determine the opinion of the audience before the debate, Proposing the motion: 15 minutes Opposing the motion: 15 minutes Speeches from the floor: 20 minutes (maximum 5 minutes each – chairperson's discretion) Proposer's right of reply: 10 minutes Opposer's right of reply: 10 minutes	Jean-Francois de Lavison, Dr Noor Ahmed, Dr Wang Xuejing, Christy Hanson, Kim Barker,	Dr Jeremiah Chakaya and Dr Bertie Squire
	Monday 16h30-18h00 (Sala 14)	English IA-2	Applying ACSM Approaches to Increase Access to TB Services in Marginalized Communities	HealthRight International, Catholic Relief Services, World Vision	Vandana Tripathi	Case studies to be presented and discussed will include: • A program training and mobilizing members of rural, indigenous communities to conduct community-based TB education, case-finding, and treatment, Chiapas, Mexico. • A program increasing case finding and treatment completion in a minority community by strengthening the roles of community health workers in diagnosis and treatment and by increasing peer-led community support for TB patients. Maguindanao Province, Philippines. • A program increasing access to anti-retroviral treatment for TB patients, using increased community involvement to strengthen integrated TB-HIV care. Uthukela District, Kzazulu-Natal, South Africa. • Generalized discussion (10 minutes)	Vandana Tripathi, Doctors of the World-USA • Elena McEwan, Catholic Relief Services • Dennis Cherian, World Vision	Alka Dev, Independent Consultant (Core Group, Stop TB ACSM at Country Level Sub-Group)	
	Tuesday 11h00-12h30 (Sala 17)	English IA-3	Together towards a TB Free Afghanistan	WHO Regional Office for the Eastern Mediterranean	Wasiq Khan	The meeting will be attended by key financing and implementation partners of TB control Programme in Afghanistan and will feature launch of an exclusive Partners Acknowledgement Report.	Approx. 1 hour with brief comments from Minister and Manager with key donors and NGOs in the country. Later to be followed by launch & distribution of the Partners Acknowledgement Report by the Chief Guest.	Minister of Health Afghanistan and key supporters of TB in Afghanistan	Dr Syed Karam Shah

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	English IA_4	Enhancing access of TB treatment services through innovative communication methodologies and the media	Panos Global AIDS Programme (GAP)	Anushree Mishra/ Johanna Hanefeld	Panos GAP's work with the media on TB issues for the past six years suggests that health practitioners, activists and TB patients are not engaging with the media as effectively as they could. In addition journalists, editors and media houses face daily realities that impede good health reporting. In short, more needs to be done to improve media coverage, to promote greater accountability and ultimately better health service delivery around TB, HIV and other global health priorities.	The session would include key policy makers, programme implementors, patient activists, patients from marginalised communities and the media. Structured as follows: Presentation by Panos Global AIDS Programme on the role of communication and media in enhancing access (12 minutes) Presentation by National TB Programme Manager on communication initiatives at the national level (12 minutes) Presentation by a senior editor on obstacles facing the media in reporting on TB (12 minutes) Presentation by a patient activist/ representative of a marginalised community on some of the challenges (12 minutes) Discussion and dialogue among key stakeholders on key challenges and role of communication in improving access of marginalised groups to TB prevention and treatment services	Anushree Mishra, Panos Global AIDS Programme Director National TB Programme Manager from Eastern/Southern Africa Patient activist from treatment action campaign Senior editor from a daily in Eastern Africa	Patricia Watson, Panos Global AIDS Programme
Wednesday 11h00-12h30 (Sala 1)	English IA-5	Tuberculosis: time to strengthen the human rights approach?	WHO, UNAIDS, OSI Human Rights Watch	Alasdair Reid	The aim of this session is to explore the human rights issues in relation to tuberculosis prevention, treatment and care. It will examine how human rights abuses, such as inadequate conditions of incarceration or inequitable access to health care, can increase vulnerability to TB, drug resistance, and HIV and the consequences for TB control; and will describe the potential for human rights abuses to occur within TB programmes, will highlight how a human rights approach can strengthen the overall global response to TB.	Chair – Pedro Chequer, UNAIDS Country Coordinator, Brazil 11:00: Joseph Amon, Human Rights Watch – Protecting the human rights of people at risk of and affected by TB 11:15: Paula Akugizibwe, ARASA – Experiences from the community – preventing the infringement of human rights can improve TB control 11:30: Sabine Beckmann, UNDP – Introducing UNDP's role in promoting a human rights approach 11:45: Paulo de Tarso Vannuchi, Minister of the Special Secretariat for Human Rights (SEDH), Brazil - What can TB programmes learn from the protection of human rights 12:00: Diana Weil, WHO Stop TB department – Human rights approach in Stop TB Strategy 12:15: Discussion		Alasdair Reid (UNAIDS)
Wednesday 11h00-12h30 (Sala 16)	French IA-6	Accroissement à l'accès équitable aux soins de la tuberculose: Rôles des Organisations de la Société Civile	Association Burkinabé pour la Survie de l'Enfance (ABSE)	Jean François Aristide ZONGO	Harmoniser les points de vue sur les stratégies à mettre en œuvre au niveau communautaire pour assurer l'accès et l'équité des malades aux soins contre la tuberculose. Voir comment les organisations de la société civile pourront mieux travailler aux côtés des structures gouvernementales pour accroître l'accès aux soins à tous les malades		Mr Jean François Aristide Zongo - Mrs Wendbénédo Aline Bontogho - Dr. Jean François Somé (PAMAC)	Charlotte Goyon

THEMATIC TRACKS / STOP TB PARTNERS' FORUM 2009

TB and Health Systems	Monday 16h30-18h00 (Sala 15)	English HS-1	Preparing for Regimen Change	Global Alliance for TB Drug Development	William Wells	This session aims to discuss steps required for regimen change, in the context of health systems. It will outline WHO's approach to regimen adoption and present an overview of key issues for regimen change in high burden countries, from a recent study.	Four presenters will each present a 10-15 minute presentation with remaining time allocated for discussion among the audience and panel members Dr. Leopold Blanc, STOP TB Department, WHO Dr. Margareth Dalcolmo, Helio Fraga Reference Center, FIOCRUZ / MoH-Brazil Dr. William Wells, Global Alliance for TB Drug Development Dr. Saidi M. Egwaga, National TB Programme-Tanzania	Heather Ignatius	
	Tuesday 11h00-12h30 (Sala 6)	English HS-2	Web-Based Tool for Programmatic Management of TB and Drug-Resistant TB	Management Sciences for Health (MSH)	Joël Keravec	To demonstrate and discuss with the participants the web-based information system actually in use in Brazil to monitor DR-TB cases and how since 2004 its operation improved the surveillance of cases and the rational use of second-line anti-TB drugs nationwide. This system called e-TB Manager integrates all relevant aspects required for national TB program management functions at different levels (e.g., cases, medicines, and other TB commodities) and provides key information consolidated for rapid decision making and epidemiological surveillance where interventions are needed. The e-TB Manager is being implemented in Philippines, Dominican Republic, Ukraine and other Central Asian countries	Background, context for use and key features - 20 min (slide presentation) – Dr Joël Keravec  Brazil MDRTB Surveillance System and key program results to date (slide presentation) - 20 min – Dr Margareth Dalcolmo  Transfer of experience from Brazil to other countries: overview and perspectives - 20 min (slide presentation)– Dr Andrey Zargoski / Dr Joël Keravec  Questions and discussion - 30 minutes	Dr. Joel Keravec (MSH), Dr. Margareth Dalcolmo (Brazilian MoH, Director of Helio Fraga TB Reference Center), Dr Andrey Zargoski (MSH)	Dr. Luis Gustavo Bastos (Projeto MSH)
		English HS-3	Multi-stakeholder Approach to Key Issues in Lab Strengthening including Training, Specimen Transport a	Name of organizing partner(s) organizations: BD	Carole Jefferson	This session will share on the ground partnership experiences, what worked and what did not work in the field for lab strengthening.	The session will be 90 minutes long. There will be minimum 3-4 speakers, each with a 15 minute presentation followed by an interactive panel discussion focusing on partnership approach	Potential partners to share experiences include BD, FIND, PEPFAR and others	Mark Harrington, Treatment Action Group

Size of Rooms: **Sala 1-6:** 100-120 persons, **Sala 10:** 50 persons, **Sala 14-17:** 300 persons