The South-East Asia Regional office of WHO organised two back-to-back meetings towards end of February in Dhaka, Bangladesh. The first one was the Regional Green Light Committee (rGLC) meeting and the second one was Stakeholders’ consultation on tools for strengthening community engagement in MDR-TB services.

The Regional Advisory Committee on MDR-TB in the WHO South-East Asia Region, also known as the Regional Green Light Committee (rGLC) is an advisory body to the Regional Director. The committee provides guidance on new policies and strategies and implementation of programmatic management of drug-resistant TB. The rGLC meeting titled “Ending MDR-TB in the South-East Asia Region” from 25 to 26 February 2019 was the 11th rGLC meeting and first of the reconstituted committee.

The general objective of the rGLC meeting were to review progress in the expansion of the DR-TB services in the Region and make recommendations for improving access. Participants included rGLC members, MDR-TB focal points from 6 High-burden countries, partners like the Global Fund, GDF, Stop TB Partnership and USAID, along with Civil Society and affected communities' representatives.

The second meeting was focussed on strengthening community engagement in MDR-TB services. Community capacity in the South-East Asia Region of WHO to meaningfully engage with national programmes in delivery and monitoring for DR-TB services is one of the key gap area as identified by the rGLC in its meeting held in January 2018. With an aim to develop tools for community capacity building in DR-TB, WHO engaged with community representatives for the development training modules for the community members.

To review the draft training modules, the World Health Organization organized the stakeholders’ consultation on tools for community engagement for drug-resistant TB services from 27 to 28 February 2019 in Dhaka, Bangladesh.

The general objective of the consultation is the development of regional tools for meaningful engagement of community in MDR-TB specifically and TB in general to support efforts towards ending TB. The meeting was well represented by affected communities, WHO civil society task force representatives, other civil society organisations, national programmes and partners. The meeting, in addition to discussions on the modules, provided a platform to sensitize community members on their potential role in delivery of services.