

1. Parvana Valiyeva

Parvana is the executive director of the NGO “Saglamliga Khidmat” Public Union (SK PU), a national civil society organization in Azerbaijan, which was founded in August 2010, and has been a member of TBEC since 2017. She is also a member of CCM Azerbaijan member, and secretary for Azerbaijan TB NGO Coalition.

Parvana has a BA in enterprise management from the Academy of Public Administration under the President of the Republic of Azerbaijan. She started her career as a volunteer in the Ministry of Labour and Social Protection, where her desire to help vulnerable people led me to the position of TB advocacy Team Leader.

SK PU is a sub-sub recipient of the Global Fund to Fight AIDS, TB and Malaria (GF) Grant for Azerbaijan to address HIV/AIDS and TB implementing the project “Organization and follow up of treatment of patients with TB and drug-resistant TB (DR TB) after release from prison”. The project is one of the world’s best practices in the follow-up of ex-prisoners’ TB treatment.

Parvana was involved in advocacy and awareness activities to increase political commitment to address TB and DR-TB, focusing on people-centred models of TB care within the TB Regional EECA Project (TB REP) in 2016-2018, and was a project coordinator from 2020 under a project supported by TB REP 2.0.

Parvana worked for 6 years for GF funded projects which enhanced my experience on the funding models and strategies of the GF, expertise in advocating TB issues, administering the program budgets and the activities taking into consideration Grant implementation tools and policies.

Parvana has experience as the program manager of the “Empowering the women who graduated from boarding schools” project, which was financially supported by the US Embassy in Azerbaijan in 2019 and aimed to protect women and children rights’, provide free vocational education courses and to achieve gender equality, reduce inequalities in the society to reach SDG 2030 targets.

Parvana’s experience managing the “Increase knowledge on Mandatory Health Insurance (MHI) among the general population and primary health care workers” project in 2019 and, “TB & COVID-19 response project” in 2020 presented her with an opportunity to be well-known as a health expert in the country which led to her active participation in more than 50 TV talk shows, video reportages, interviews, and published media articles on TB, COVID-19, vaccines, MHI, etc. between 2019-2020.

Parvana is good at leadership and has strong communication skills. She has the ability to work with a team, performs well at organizational work and multi-tasking, and is also experienced in conducting advocacy activities. She believes she has a strong will and power to contribute to TB Europe Coalition development; being a board member can provide an opportunity for her country to be part of regional TB advocacy actions and strengthen and build the capacity of the Azerbaijan TB NGO Coalition.

2. Dr. Zeki Kılıçaslan

Prof Dr Zeki Kılıçaslan is a specialist in Chest Diseases. He is currently working at Istanbul University, Istanbul Faculty of Medicine, Department of Chest Diseases. Prof Kılıçaslan has been working in the fight against tuberculosis control since the 1990's in Istanbul and in Turkey. Prof Kılıçaslan is the president of the Federation of Turkey's association fund that has 60 members of the National Tuberculosis Association of Turkey. Prof Kılıçaslan is serving as representatives of civil society organizations in the Ministry of Health tuberculosis control efforts in the Republic of Turkey. Prof Kılıçaslan is a member of IUATLD and regularly participates in IUATLD congress and Wolfeze meetings.

3. Alesia Matushevych

With a degree in Law, Alesia has worked as a lawyer in Ukraine for most of her professional history. She has worked for 5 years as an assistant to a member of Ukrainian parliament (MP), Mr. Serhiy Kiral, who is a former Co-chair of the EECA region of GTBC. Her cooperation with TBEC started in a different role, from the parliamentarians perspective. After joining the GTBC, two years ago, she currently works with TBEC as a partner. Therefore, she can claim she knows both sides of the fence and understands the huge impact a partnership between parliamentarians and civil society can have when they work effectively together.

From Alesia's perspective, civil society should be seen as an effective bridge between healthcare staff and hard-to reach groups, including for the implementation of the active case-finding strategies for early TB detection in key populations. On another note, MPs can be very sensitive to what they hear from doctors and patients in their own constituencies. That's why MPs need to be well-informed about the benefits and key principles of people-centred care from the perspectives of both the patient and the healthcare system. If Alesia were to become a board member, she believes she can lead to settling a better approach in this regard – being directly involved in strategic, operational and financial oversight of the implementation of TBEC's strategy would give directions about the gaps between MPs and CSOs. It would also provide information to MPs, who can press governments to make decisions based on how the quality people-centered care should look like, through the rights-based, people-centered, equity-shaped perspectives. To Alesia, becoming a Board member of TBEC would be a good chance to contribute with her knowledge, energy and time to support civil society organisations and activists in their advocacy role, at national and regional levels, to drive changes for quality people-centered care and prioritize the importance of TB in the political agenda, and agendas of the high-level officials.

4. Belinda Elizabeth Ameterra

Belina has been the chairperson of Boland Research Community Advisory Board: since 2014, but she joined the cab in 2008. Their Cab affiliates under the Research Site: Satvi (South African Tuberculosis Vaccine Initiative) who are also doing Research for ACTG. She is also the chairperson of FAMCRU (Family Centre for Research with Umbunti) in Worcester, and has been in existence for about 3 years. Their Cab was only launched in October 2020. She has also previously been a DOTS worker for about 3 yrs, until all DOTS workers were assigned to Hospices. Belinda is serving as a Facilitator's Boardmember for the Minister of Health, at Brewelskloof hospital, which is mainly for TB patients.

As a CAB member for the sites, they assist in combating TB, through, TB, educational talks at schools, Libraries and just walk the talk getting the message in an understanding, non-stigmatizing manner to our communities. They also ask community inputs about certain TB / HIV/aids treatments especially on protocol studies. It's their duty to ensure that participants understand the informed consent forms, and everything that goes with it. They also fight stigmatizing language, and discrimination towards patients. Belinda also serves on various committees within the ACTG which gives her a great advantage of urgent need to know information which she can bring back to their cab and communities. She is not a professional expert in all of these, but her good communication skills, passion, flexibility and commitment to her work, is a great asset that makes teamwork dreamwork. She can work under great pressure within a team and on my own. She is definitely target orientated and goal driven.

Belinda is also part of the protocol study review team where they review certain protocol studies, for community input, as community plays a vital role in protocol studies, without community input there cannot be closure but uncertainty. If Belinda consolidates the work she does within her communities, and as a volunteer definitely adds broader vision to the table to fulfill our mission. She brings a Positive mindset, strategic thinking, passion, commitment, teamwork, good communication, and active listening. She believes that together we can go further.

5. Cristina Enache

Cristina is currently a member of the TB Europe Coalition Board and has been a member of TB Europe Coalition since 2012.

She has been working since 2009 for the Romanian Angel Appeal Foundation (RAA – www.raa.ro) in Bucharest and as Advocacy Officer since 2017, coordinating the advocacy campaign aimed at improving public health policies for people at risk or affected by TB and/or HIV. Notably, together with the campaign team, she contributed to the adoption and implementation of the TB Law in Romania, which, among other provisions, ensures TB patients' right to monthly food allowance and paid sick leave, until cured.

As secretariat for the Romanian Stop TB Partnership (<https://stop-tb.ro/>), Cristina also coordinates the information and awareness campaign carried out throughout the year, culminating with the World TB Day online and offline events. She also collaborates with the

Global TB Caucus and, in 2018, helped organize the Romanian TB Caucus in the Romanian Parliament.

Under the current The Global Fund to Fight AIDS, Tuberculosis and Malaria transition grant implemented by the Romanian Ministry of Health and the Romanian Angel Appeal Foundation, Cristina is part of the RAA team providing support to the MoH for the implementation of the ambulatory TB care reform and of the public procurement legislation changes for TB drugs. Cristina is also involved in a TB screening project carried out by the “Marius Nasta” Pulmonology Institute of Bucharest, together with 5 other CSOs. She’s in charge of community information and mobilization in rural areas in order to bring people to the screening mobile unit.

As a TBEC member, she contributed to organizing and carrying out a number of advocacy workshops in Romania, Moldova and Latvia and worked together with other Board members to register TBEC as a legally registered entity.

Whether or not selected for a second term on the TBEC Board, Cristina will continue to contribute with her almost 20 years of experience of working for and with people at risk of HIV and/or TB to the organization’s growth. TBEC is poised to become the main go-to resource and advocacy organization for the WHO Europe Region due to the high number of members and the multitude of experiences and expertise that the members have.

6. Sharonann Lynch

Sharonann Lynch is the Senior HIV and TB Policy Advisor for the Médecins Sans Frontières (MSF) Access Campaign. Ms. Lynch has worked for nearly 20 years in the global health and humanitarian field, primarily related to access to HIV and TB treatment. She joined MSF in 2006, working for four years in various positions in the field in southern Africa, primarily focused on introducing innovative models of community-based treatment, care, and adherence support and changing national policies to support improved quality of care. In 2009 she joined MSF’s Access Campaign and has led numerous advocacy campaigns related to HIV, TB, and access to essential medicines policies of national governments, bilateral and multilateral agencies, and other global health actors. Prior to joining MSF, Ms. Lynch was a founding member of Health Global Access Project (GAP). Prior to Health GAP, and active in ACT UP since starting a chapter in 1991.

Strengths & potential contribution to TBEC:

Sharonann has a proven record of achievement in setting and reaching strategic policy objectives related to infectious disease and global health policy, including TB. She has an understanding of both programme implementation challenges—from working in the field with MSF on TB and HIV in southern Africa—and of advocating for and monitoring changes in national and international policy—from her many years working with the MSF Access Campaign leading their HIV and TB advocacy and other non-governmental organisations (NGOs). Sharonann has technical knowledge and a keen understanding of the real-life consequences of inadequate access to effective and affordable diagnosis, care, prevention, and treatment for people affected by or at risk of TB. She is equally comfortable working with

grassroots community groups, frontline clinical staff, and high-level policy-makers and decision-makers in the halls of power.

Sharonann is motivated by a fundamental belief that, when equipped with accurate information and adequate resources, civil society and affected populations can successfully challenge and change local, national, and global health policies that affect their lives.

Sharonann's hopes for the future of TBEC is that it has the support and motivation to achieve its goals, which she is absolutely aligned with, in particular the need to win scale-up of optimal oral ambulatory care and treatment for TB and its drug resistant forms.

7. Paul Sommerfeld

Paul is putting himself forward for the Board again as someone who has been involved with TB Europe Coalition (TBEC) right from the start, and who has remained very actively engaged as Chair since July 2019 when he succeeded Fanny Voitzwinkler.

In the early years of TBEC, Paul led efforts by TBEC, at the time mostly Western activists, to reach out and build links with civil society organisations (CSOs) across the whole of the WHO Europe Region. Those efforts led to early visits to many of you who are now actively involved in TBEC.

Those early links led to requests for training workshops to help civil society build advocacy strategies and skills. Unexpectedly, he found himself dusting off his skills as a facilitator, which had been a major part of his early career, working in management training. Since 2012, Paul has been involved in many country or regional TBEC workshops across Eastern Europe and Central Asia (EECA).

Paul believes he brings additional skills from a working career in NGOs and global health. He has a good understanding of the management of CSOs and their relationships with governmental agencies such as National TB Programmes. Paul continues to help with issues that keep coming up with our bank and regulator in the Netherlands. He supports our Executive Director and staff in networking with regional bodies such as WHO-Europe; and have recently become Chair of the Regional Coordinating Committee for TB, HIV, and Hepatitis which helps the profile of TBEC.

If re-elected, Paul hopes to continue to help build TBEC as an agency promoting civil society both as advocates for TB action and as contributors to operational work against TB.

TBEC has become an effective and respected regional agency. Over the 3-year term of the next Board, the World will be coming out of the Covid pandemic. We will need to be flexible and creative, stressing the value of civil society in re-building TB services and in helping communities engage with both TB and Covid.

Lastly, he may look a little older than most of you but he is at least a couple of years younger than the new US President and still with a fair amount of energy!

8. Oxana Rucsineanu

Oxana is the Director of programs at “SMIT” (Society of Moldova against Tuberculosis) TB Patients Association in Moldova. She is leading SMIT organization in Moldova, which provides psychosocial support, peer education, end TB Stigma activities and advocacy interventions. Becoming a TB activist, after having gone through personal experience of drug-resistant tuberculosis, she is a member of National NGOs Platforms, Country Coordinating Mechanism and TB and HIV National Committee of Experts in the country. In the country, she coordinated several projects focusing on the rights of TB communities and comprehensive approaches to TB care. Oxana is strongly committed to advocating for constructive partnerships and efficient treatment processes, community engagement in operational and clinical research as well as to making TB voices heard in the global response to the disease. Regionally and internationally, Oxana is affiliated with TB Global CAB, Global Coalition of TB Activists (GCTA), TB People, South Eastern Europe Regional Community network (SEE-RCN) and World Health Organization Regional Committee of TB, HIV and viral Hepatitis (RCC-THV). For almost a decade, Oxana has been enjoying working and collaborating with TB Europe Coalition on different TB-related initiatives. She has a Licentiate (EDU) Degree from Balti State University, Moldova and is currently studying at Public Health School, Moldova.

Continuing collaborating with TBEC, as a board member, no doubt, will be a great opportunity to continue advocating for family approaches in TB care; to bringing community perspective and to advocating to the adaptation of public health principles and programmatic TB management to the needs of diverse populations and cultural settings, as well as to further develop her skills and to ensure professional growth. “I, for one, know that I am willing to invest all the necessary knowledge, skills and willpower if selected by TBEC members.”

9. Olya Klymenko

“TBpeopleUkraine” unites a powerful community of people affected by tuberculosis, as well as all those who care about this problem in Ukraine, whose priority is to respond to the tuberculosis and HIV/AIDS epidemic, influencing the development and implementation of national and regional policies, strengthening the healthcare system, improving treatment conditions, and protecting the rights and common interests of patients and health workers.

As the head of one of the largest patient organizations in Ukraine, Olya is responsible for the development, achievement of goals and main objectives, including fundraising, building partnerships, and strengthening the role of civil society.

It has been an honor for her to represent TBEC as a board member since 2018 at events of different levels, to be involved in the implementation of the strategy and to be part of a team of very strong and highly motivated activists and experts. Olya believes that in these three years, the organization has significantly strengthened its position in the region, increased the NGO development opportunities for EECA countries and achieved significant results in increasing political commitment to TB response and introducing social contracting.

Using her experience in advocacy, community development and resource mobilization, Olya

would like to contribute to the development of civil society in the region, expand the implementation of the strategy for integrating service sustainability, reduce barriers to access to treatment and support services, and achieve zero stigmatization of people living with TB.

Together we can deliver on the commitments to the Global Strategy 2030!
Olya shares the values and vision of the TB Europe Coalition.

10. Aida Kurtovic

Aida is a global health leader with over two decades of experience in global health, international development, and health program management, with an active engagement with stakeholders at the highest levels.

Aida is mission oriented, and a team player with a proven track record of working on complex and politically sensitive issues with a range of stakeholders. She is knowledgeable about the global and regional health horizons, as well as with the Global Fund, EU and UN architecture, CSOs, with significant experience at the senior levels in Geneva in leadership of the Board of the Global Fund. Aida is currently a fellow / visiting scientist at the Harvard Global Health Institute and the Women and Health Initiative at the Harvard T.H. Chan School of Public Health.

Aida has served as the Chair of the Board of the Global Fund to Fight AIDS, Tuberculosis and Malaria in period 2017 – 2019 (Chair Emeritus), and as as the Vice-Chair in 2015 – 2017. She was the only professional serving the Board leadership role who was reelected to continue the service in the leadership role of the Board and was given the honorary title of the Chair Emeritus of the Board of The Global Fund by the Board in May 2019.

During this tenure, together with the Vice-Chair, Amb. John Simon I have presided over significant deliberations and decisions that will continue to shape the future of the Global Fund. Under our leadership, the Board appointed the Executive Director, guided resource mobilization efforts, adopted key decisions, including, the Revised Eligibility Policy and criteria regarding potential engagement with on-eligible countries in crisis, a strengthened Board Leadership Selection Process, the CCM evolution initiative, the Allocation Methodology and Catalytic Investments for the 2020-2022 Allocation Period, and integrated additional public donors into the Global Fund Governance Structure.

As the Executive Director of Partnerships in Health, Aida has had direct involvement and/or supervision of programme development for various programmes supporting the health care system reform, national response to HIV/AIDS and TB, including operational management of the grants, financial and programmatic monitoring, and reporting. Aida served as a member of the National Working Group, tasked by the Council of Ministers to develop a new National Strategy for the prevention and control of HIV/AIDS in Bosnia and Herzegovina for the period 2010 - 2015.

She was co-author and a member of the Governing Board of research on behavior in correlation with HIV prevalence within high-risk groups such as sex workers and men who have sex with men in 2008 and 2011. She is also co-author of the National Voluntary

Counseling and Testing Protocol for Bosnia and Herzegovina in 2019. Aida currently leads a national Task Force for the development of Clinical guidelines for treatment of HIV/AIDS in Bosnia and Herzegovina, and she established the South Eastern Europe Regional TB and HIV community network, in 2019, with involvement of CSOs and communities from 11 countries of the SEE region.

11. Jonathan Stillo

Dr. Jonathan Stillo is an Assistant Professor at Wayne State University where he teaches Medical Anthropology and Public Health. He specializes in infectious diseases, health and human rights, and people centered care. He received his PhD at the City University of New York Graduate Center. He has received research grants from the US National Science Foundation, the US Fulbright-Hays Commission, The US Department of State, among others.

Since 2006, Jonathan has been researching tuberculosis (TB) in Romania—including living at a Romanian TB sanatorium for several months—interviewing hundreds of patients and medical personnel across the country. His research focuses on the social, economic and structural aspects of tuberculosis. Jonathan has served as an International Expert on multiple World Health Organization TB review teams, and has also consulted for ECDC, The Global Fund, and the US Embassy in Romania in recent years. He recently worked on people-centered care projects with the Moldovan anti-TB organization, SMIT, and is currently working on projects related to hearing loss due to M/XDR-TB treatment including an article which will include stories of people from Romania, Armenia, and elsewhere.

In addition to his research activities, Jonathan is an advocate for improved TB diagnosis and care, is a member of the Wolfheze working group on People-Centred Care and is a member of the Global TB Community Advisory Board. Jonathan has been an active member of the TB Europe Coalition Steering Committee (precursor of TBEC Board) since 2012 and currently serves as Co-Chair of the TBEC Board. He is committed to continuing TBEC's work on human rights and people centered care if he is re-elected to the board More about his research and advocacy can be found here: <https://clasprofiles.wayne.edu/profile/gc4943>

12. Nela Ivanova

Since 2011, Nela Ivanova has been working as a social worker at the “Dose of Love” Association – a non-governmental organization that unites experts in the field of drug use and HIV/AIDS prevention in Burgas, Bulgaria. Nela started working at the “Dose of Love” as a volunteer, later she continued as an outreach worker with vulnerable groups, project coordinator, and Executive Director. At present, she coordinates a local project on TB and is acting as Financial Director on the Managing Board of “Dose of Love”. Nela has experience in working with vulnerable groups: drug users, sex workers, men having sex with men, homeless people and prison inmates, with a focus on drug use and addictions, HIV/AIDS and TB.

13. Marina Chokheli

Marina Chokheli is a lawyer. She holds a degree of Master of Law and Public Health and Health Policy. She is an alumni of the School of Human Rights organized by Polish Helsinki Foundation for Human Rights (2006-2007) and Women's Human Rights Training Institute (WHRTI) organized by the Bulgarian Gender Research Foundation (BGRF) in 2007-2009.

Marina has worked in the field of human rights and Public Health since 1999, in particular: in 1999-2010 she worked for Article 42 of the Constitution, as a board member in 2003-2006, and as an Executive Director of the organization in 2006-2009. Marina has been working for OSGF since 2010 as a coordinator of Public Health.

Marina has been actively engaged in various areas related to public health, harm reduction and access to Medicines: community mobilization; strengthening and capacity building of community organizations and activists, promoting human rights of vulnerable groups (people who use drugs, OST patients, people living with HCV, HIV/AIDS, sex workers, People affected with TB, LGBT community); drug policy and promoting humane and efficient law enforcement policies and practices affecting vulnerable groups; advocating, developing and launching of the first National Hepatitis C treatment programs in Prison and for general population in Georgia. Marina's current professional interests focus on such areas as drug policy, transparent and accountable decision-making in healthcare, budget monitoring, Women Rights, innovative medicines, TB etc.

Since 2009 Marina has been a member of the International Treatment Preparedness Coalition. Marina Chokheli is a Chair of the Steering Committee of the Eurasian Harm Reduction Association, and Since 2017 consultant of the Network TBpeople.

14. Daniel Kashnitsky

Daniel works as an Academic Relations Coordinator at the Regional Expert Group on Migration and Health. He is also a Junior Researcher at the Institute of Social Policy, Higher School of Economics based in Moscow Russia. Daniel has a Master of Public Health from Lund University, Sweden. Since 2006, he has been working in public health organizations with a focus on prevention and advocacy of access to HIV and TB care in Russia. As of 2015, he has been providing technical assistance to community-based NGOs of key affected populations in 11 countries of East Europe and Central Asia within GFATM, Robert Carr and Elton John AIDS Foundation projects. Daniel's main areas of expertise are related to program management, monitoring, budget advocacy, stakeholder communication, qualitative research, health of mobile populations, and people-centered approach in HIV and TB care. He is a member of the Regional Coordinating Committee on HIV, TB and Hepatitis where he aims to promote better coordination between research and advocacy initiatives in the area of mobile populations health in WHO European region, with a more close focus on EECA. Being a part of the academic community he believes in the nexus between evidence base and stronger advocacy.

As someone who has worked for TBEC for 1,5 years (and enjoyed this period much) Daniel had been in close touch with civil society and TB-affected communities all throughout the EECA region. He has always shared a view that a TBEC should first of all support the voices

of the affected communities (rather than state officials) with the support of civil society experts. Daniel believes in communities rather than in organizations. But we need committed organizations to lead the change and structure the work in order to achieve goals. And with this vision he would be glad to contribute his expertise and voice to the work of TBEC board, if appropriate.

15. Stefan Radut

My name is Stefan Radut, I am from Bucharest, Romania. I am 34 years old. I am a former MDR TB patient. I get sick in 2011 and in 2012 I started to be involved in ASPTMR, a young MDR TB patients organization in that time. I met for the first time in 2012, when I heard for the first time the word “advocacy”. In that moment I understood that advocacy is one of the ways to solve the MDR TB and TB problems from Romania and from region. Now, after 9 years and 3 advocacy workshops provided by TBEC, and another advocacy sessions I started to make advocacy in Romania. I was involved in writing The National Strategy for Tuberculosis Control. I was involved in writing The Project of Romanian TB Law. Now, in Romania we we have the TB law approved. I am member of Romanian CCM. I represent Romania in SEE Regional Coordination Mechanism. I am the Vicepresident of COPAC-Romania (Coalition of Organizations of Patients with Chronic Diseases from Romania). I am member of TBEC and TB People. 3 years ago The US Embassy offered me a Exchange Experience Program for NGO’s leaders how work with marginal population, and I spent 3 weeks in US and I meet a lot of people from US Government and form NGO’s. My organization, ASPTMR organize 1-2 advocacy events each year.

I wish to be a TBEC Board Member to contribute to develop TB Advocacy Strategy in the region. I wish to eliminate TB and I think TBEC is one of the organizations that can fight for TB correct abordation. We need to become a strong regional organization for end TB. I have some experience to share with other colleagues.

16. Denis Godlevskiy

Denis is 37 years old and a TB and cancer survivor. He was diagnosed with TB when he was 16, and was lucky enough to have drug-sensitive pulmonary TB, which was successfully treated.

Since the age of 22, after completion of technical college Denis has been working for various NGOs. He started his career in an NGO which was helping to re-socialize people after detention, and providing rehabilitation, care and counselling for people who use chemical substances . In 2007, Denis joined the International Treatment Preparedness Coalition in EECA (ITPCru) as infomanager. During his work in this organization his team started the first-ever project on drug-procurement monitoring for HIV in Russia, which had evolved by now into one of the key areas of civil society advocacy in the EECA region in terms of access to treatment. In 2013-2018, Denis worked as an advocacy manager and later, Advocacy Director for European Bureau of AIDS Healthcare Foundation. He coordinated marketing and advocacy activities in 7 countries of Europe where the Foundation had its programs (Russia, Ukraine, Estonia, Lithuania, Greece, Portugal, Netherlands).

For many years his professional interest was mainly in HIV, but in recent years, after leaving AIDS Healthcare Foundation it is evolving and includes viral hepatitis and tuberculosis. Denis became a member of TB People Network, and started to search for opportunities to develop programs related to improvement of access to TB treatment and diagnostics in Russia.

Denis graduated from Moscow Institute of Law and Management with a specialty in "State and municipal management" in 2016. He has participated in multiple international conferences and training.

In addition to a standard set of professional qualities such as multitasking, ability to work in the team, strategic vision etc., Denis' strong qualities include a good knowledge of pharmaceutical and diagnostics market, understanding of the key NGO stakeholders in the public health field and proven record of work with strategic documents such as long term planning strategies, multi-year and multi-country budgets etc.

Denis sees the role of the Board member on one hand as supportive to the management of the organization in development of long-term strategy, planning and financial well-being of organization. On the other hand the important role of the Board members is to make sure the plans are being timely implemented and improved based on the changing reality. Current situation in public health in general has a lot of challenges, we are living in the environment of shrinking resources allocated for health, decreasing level of political commitment and other challenges. Thus in addition to good planning, organisations need to be flexible and able to react to changing political and financial situations. Denis hopes his experience could be of help to further develop the TBEC and to keep improving the lives of people living with TB.

17. Ksenia Shchenina

Hello everyone, I am Ksenia and I had TB already 11 years ago.

Since then, my life has changed dramatically. Once you become an activist, you cannot stop being one. And no matter how many times I emotionally burned out with every loss, with every death, no matter how much I said that I've had enough and it's impossible to live like that, I still can't stop.

Because it doesn't matter to anyone but us.

Every year I am more and more angry to this disease. I am angry at the obstacles, human indifference that is stands in front of us and does not allow us to write tuberculosis into history finally.

I'm tired of polite smiles and the words "you need to understand, it's not that simple."
I refuse to understand.

After 2020, there will be a spike in morbidity - and I damn well refuse to understand why we should smile politely back.

Anger and love are two huge forces that propel me forward. This is my fuel.
I will continue to use it.

I will help. I will do jokes about infectious laughter. I will cry. I will shout if necessary.
Because I already scream inside myself every day.
It should not be.
And it won't.

Всем привет, я Ксюша и у меня был ТБ уже 11 лет назад.
С тех пор моя жизнь изрядно поменялась. Став активисткой, ты не можешь перестать ей быть. И сколько бы раз я эмоционально сгорала с каждой потерей, с каждой смертью, сколько я бы не говорила, что с меня хватит и так жить невозможно, я всё равно не могу остановиться.

Потому что никому кроме нас это не важно.

С каждым годом всё больше злюсь на эту болезнь. Я злюсь на преграды, людское равнодушие, которые стоят перед нами и не дают окончательно вписать туберкулёз в историю.

Я до смерти устала от вежливых улыбок и слов "вы же понимаете, всё не так просто". Я отказываюсь понимать.

После 2020 года нас ждёт скачок заболеваемости — и я, чёрт возьми, отказываюсь понимать, почему мы должны вежливо улыбаться в ответ.

Злость и любовь — это две огромных силы, которые двигают меня вперёд. Это моё топливо.

Я буду и дальше использовать его.

Я буду помогать. Я буду шутить шутки про заразительный смех. Буду плакать. Буду кричать, если нужно.

Потому что я и так кричу внутри себя каждый день.

Так не должно быть.

И так не будет.

18. Tretiakov, Viktor

Areas of expertise:

Administration/Public Health Administration - 5 to 10 years – Proficient; Epidemiology - more than 10 years – Developing; Communicable Disease - more than 10 years – Proficient; HIV/AIDS - more than 10 years – Proficient, TB – 2 to 5 years – Developing

Education:

2000 graduated from Kharkiv state medical university (Ukraine)

2012 graduated from The National Medical Postgraduate Academy named after L.Shupika (Kyiv, Ukraine)

Present and previous employment:

2000-2017- military service, Infectious Diseases specialist, including Military Peacekeeping mission for Peace and Stabilization MONUSCO, DR Congo, 2013-2014

2017- CDC, HIV Care and Treatment Specialist

2018-now CO "All-Ukrainian Network of People Living with HIV/AIDS" (CO"100 PERCENT LIFE"), from Leading Specialist in the Development of National and International Tuberculosis Treatment Programs, Head of Treatment Programs Development Team (TB direction in GFATM grant for 2018-2020) to Head of Analytical Team (implementation of TB module for MIS HIV)

Strengths and future contribution:

- a. managing TB part of GFATM grant for 2.5 years
- b. practical implementation of LF-LAM testing among PLHIV in Ukraine
- c. participating in writing parts related to TB interventions for new GFATM grant (2021-2023)
- d. communication with state stakeholders (TB service) in Ukraine
- e. constant postgraduate education in HIV, TB and hepatitis
- f. experience on implementing TB module for actual medical informational system (interoperability with e-TB manager)
- g. prevention on TB treatment interruptions
- h. close coordination in the future efforts on TB-oriented social interventions
- i. cooperation with TB-centered NGO's

19. Wouter Arrazola de Oñate

Wouter Arrazola de Oñate is a TB-survivor, an opinion leader, feminist, anti-racist and universal health care activist. Besides that, he is medical doctor specialised in public health and working with or on TB since almost 20 years. Trained in Mozambique and the Southern African Region in reproductive health and women's rights, the HIV-epidemic and co-infection with TB came across his path, but as well did the huge achievements of the people of the Treatment Action Campaign.

Former director at the World Health Organisation (WHO) prof dr Marleen Temmerman was one of his strongest mentors. Since 2007 he is the medical director of the Belgian Lung and Tuberculosis Association (the Flemish branch of this bilingual TB-organisation), BELTA. The over 120y experienced scientific association running the TB-programme in the field with free of charge health centres and strong advising roles to governments. His strong interests are the social (political and commercial) determinants of TB, people centred care, outreach, mobile health and access to treatment for all. One of his projects on intensified and personalised support (social, psychological, financial, logistical) of people with TB was selected by the WHO for their Compendium on Good Practices.

Wouter as a member of the current board of TBEC . He has participated as an expert in many commissions and working groups with the European Centre for Disease Prevention and Control and the World Health Organisation. He is member of the board of Kifkif, an anti-racist civil society organisation. He is working on his first book "From GDP to GDH" pleading for (public) Health to become the central theme around which societies and economies should be designed. Since 2020, Wouter is one of the advisors on COVID-19 for all governments in his country. His other areas of expertise are tobacco control and air pollution (and he likes dancing).