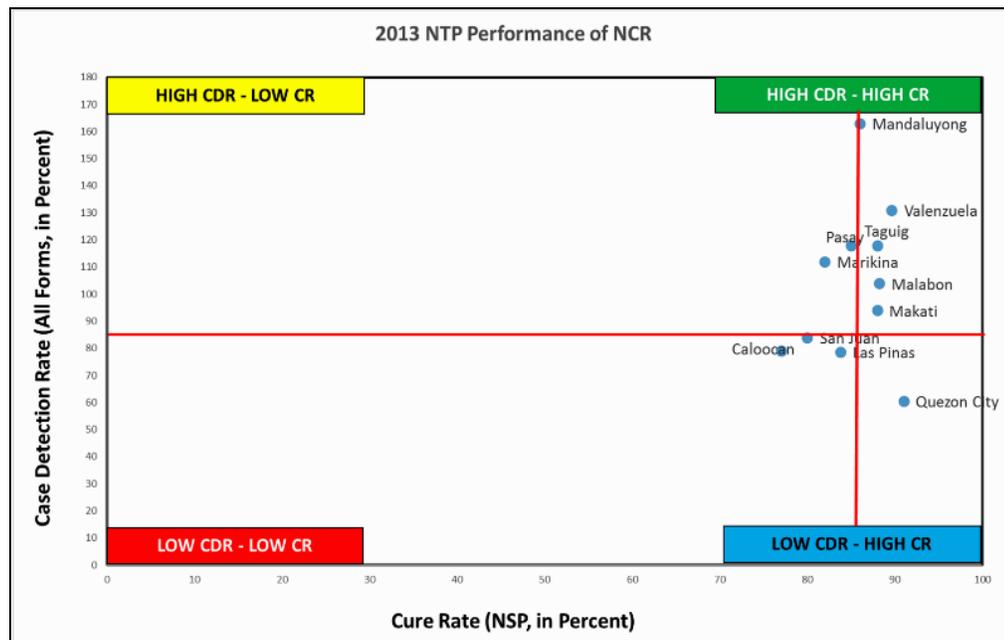


# Activity Highlights

Forum on Synergizing Efforts to Combat Tuberculosis in Cities  
June 19, 2014, Cafe Kapitan, Kapitan Moy Bldg, Marikina City

- LCP is implementing the Cities Combating Tuberculosis (CCTB) Project which is being supported by the Philippine Business for Social Progress (PBSP) under the USAID-supported Innovations and Multisectoral Partnerships to Achieve Control of Tuberculosis (IMPACT) project. The IMPACT project is being implemented in 43 project sites in 17 regions in Luzon, Visayas, and Mindanao.
- Through the CCTB project, LCP is assisting cities jumpstart their formation of Multi-Stakeholder's Alliance (MSA) and enable the development of local policy support like ordinance through provision of technical and logistical assistance.
- In the implementation of local TB control, common issues across NCR cities are observed.<sup>1</sup> – 1.) Inadequate staff for monitoring 2.) *Need for technical assistance on MSA formation*; 3.) *Need to engage the private sector*; 4. Advocacy or campaign promotions



- The chart above represents the NTP Performance of NCR cities in terms of Case Detection Rate (finding TB cases) and Cure Rate (cases with smear positive given complete set of treatment and sputum examinations for six months). The ideal is cities must be located within the quadrant of High CDR and CR. It is observed that there is an improving performance among NCR cities in terms of CDR and CR. There is a need to sustain the gains of these high performances.<sup>2</sup>
- The IMPACT project, which is until 2017, reports its progress of implementation in its 11 project sites (NCR cities)<sup>3</sup>

<sup>1</sup> Espero, Fernando, Presentation on Cities Combating Tuberculosis (CCTB)

<sup>2</sup> Dr. Karen Dalawangbayan, Presentation of Project IMPACT

<sup>3</sup> Dr. Karen Dalawangbayan, Presentation of Project IMPACT

Project Objectives	Project Activities
1. Increase demand for and utilization of quality TB control services and MDR/XDR TB management and treatment	Provision of capacity development interventions to frontline health workers; Technical assistance to organize MSAs; Scaling up TB for the Urban Poor program.
2. Scale up the delivery of quality DOTS services.	Provision of technical assistance and assessment of data quality training; Skills enhancement training; Technical assistance to drafting comprehensive referral system; Engaging private hospitals;
3. Strengthen the capacity of national, regional, and LGU health offices in providing technical assistance to local TB staff.	Cap dev for TB disease activity assessment and outsourcing for CHO NTP coordinators and LGU physicians and nurses;
4. Improve the adoption of and compliance with national TB policies and guidelines	Orientation on TB DOTs certification and accreditation and Philhealth claims/reimbursement; Training on policy development-evidence based legislation for CHO NTP coordinators

- Next plans include 1.) To assist LGUs in developing policy on TB control; 2.) To assist in the formation and/or strengthening MSAs; 3. To engage/ scale-up of and capacity building of community-based organizations (CBOs).
- DOH NCR Dr. Ruben Shapno also praised the performance of NCR cities for achieving already its 2015 target (50% decrease each in TB prevalence and in TB mortality compared to 1990 data) for a TB-free NCR. He again emphasized the need to sustain the gains. As per indicators in the Philippine Plan of Action for Tuberculosis (PhilPact), only five (5) of 17 NCR cities has public-private coordinating body on TB control. Another observation was that few or only 16% of 144 TB-DOTs facilities are DOH/PhilCAT certified and PhilHealth accredited (23). Out of the 23 DOTs certified facilities, only 17 availed of Philhealth package.
- Dr. Shapno said the low indicators have implications in terms of sustaining the gains of current local TB control implementation. Partnerships can offset some potential cost and most importantly, can harmonize the community efforts for TB control. TB should not only be an LGU's business but also everybody's concern as well.
- Moreover, DOH/Philcat certification enables LGU to reimburse the cost of treatment. Philhealth rep Dr. Coracel Ontalan said Php 4,000 per patient is allocated from Philhealth to LGUs.<sup>4</sup> Philhealth outpatient TB-DOTS benefit package is a strategy to detect and cure TB patients and is considered as one of the most effective strategy for controlling TB epidemic

---

<sup>4</sup> Dr. Coracel Ontalan, Presentation of Philhealth on TB-DOTS accreditation & TB-DOTS benefit package as a resource for financing local TB Control implementation.

- Dr. Verdades Linga of Quezon City Health Office said MSA formation is a tedious process.<sup>5</sup> The QC initiatives for public-private alliance building for local TB control started as early as 2005. A great deal of time was invested for dialogue among all stakeholders (hospitals & NGOs) to foster trust. This led to the development of The outcome was a success.
- She underscored political commitment as a key factor in enabling public-private partnerships for TB control. A strategic direction is strengthening the city's initiative at the barangay level where a village TB-free council is being organized.
- Dino Alberto SubingSubing said MSA brings in many benefits to LGUs. It helps build consensus easier on any development of local policies for TB control including allocation of budgets. It fosters co-ownership of the program and reinforces the value that TB control is not just a public concern but it is everybody's business. MSAs also broaden opportunities for participation and help improve existing mechanisms to be further inclusive like the local health boards, and the inter-local health boards. MSAs complement efforts of local government in the implementation of local TB control program thereby reducing transaction costs and prevention of the overlapping of supply.
- The formation of MSAs does not happen overnight. Cooperation agreement outlining the roles among stakeholders is a good start. MSAs also address TB from a governance point of view.

## ● Next Steps

- LCP will conduct a one-on-one meeting with the city mayor/ city health officers to show further appreciation to the LCE support. Integral to the IMPACT project, LCP will offer whatever technical cooperation is needed to jumpstart the formation of MSAs and development of enabling local policy support (i.e. local ordinance);
- Project IMPACT c/o PBSP will provide logistical support to the formation of MSAs and establishing local ordinance to sustain the local TB initiatives.

---

<sup>5</sup> Dr. Verdades P. Linga, A Multi-Sectoral Alliance Building for TB Control: A Quezon City Experience