

Action on the Social Determinants of TB: are
social protection interventions the way
forward?

The creation of a collaborative
partnership: short and long-term
objectives, best format and funding
mechanism

(Expert Consultation Meeting: 16-17 February, 2012)

Delia Boccia

International collaborative network

5 years work package

TB experts, policy makers,
economists, civil society
representatives, funders

To generate new, generalisable, policy-relevant scientific knowledge about the impact of social protection intervention on TB control in settings characterized by different resources and TB epidemic profile



TB policy change

To design, implement and evaluate innovative social protection initiatives to improve TB control in a variety of epidemiological settings

To set quality standards for the evaluation of these interventions

To review and assess the “unintentional” impact of existing social protection programs on local TB indicators

To model the impact of social protection on TB risk factors and thus predict the long term effect

To test the strength and limitations of different cross-sectoral partnership models

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TB control paradigm shift

A

Design, implement and evaluate innovative social protection initiatives to improve TB control in a variety of epidemiological settings

B

Review and assess the “unintentional” impact of existing social protection programs on local TB indicators

C

Model the impact of social protection on TB risk factors and thus predict the long term effect

D

Assess the cost-effectiveness of social protection strategies for TB control

E

To test the strength and limitations of different cross-sectoral partnership models

Cash transfer and microfinance interventions for tuberculosis control: review of the impact evidence and policy implications

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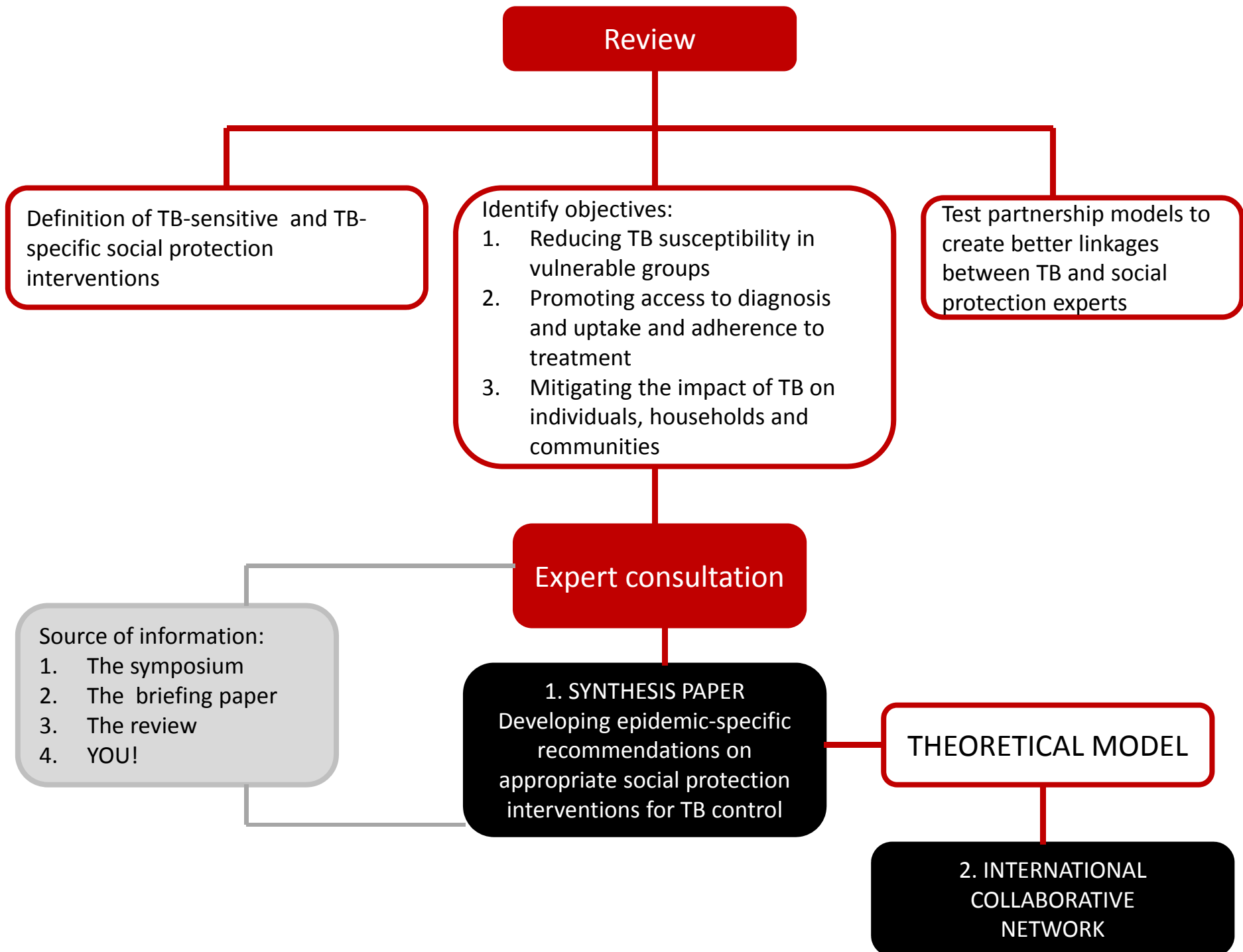
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OBJECTIVE: To quantify the impact of cash transfer and microfinance interventions on a selected list of tuberculosis (TB) risk factors and assess their potential role in supporting TB control.

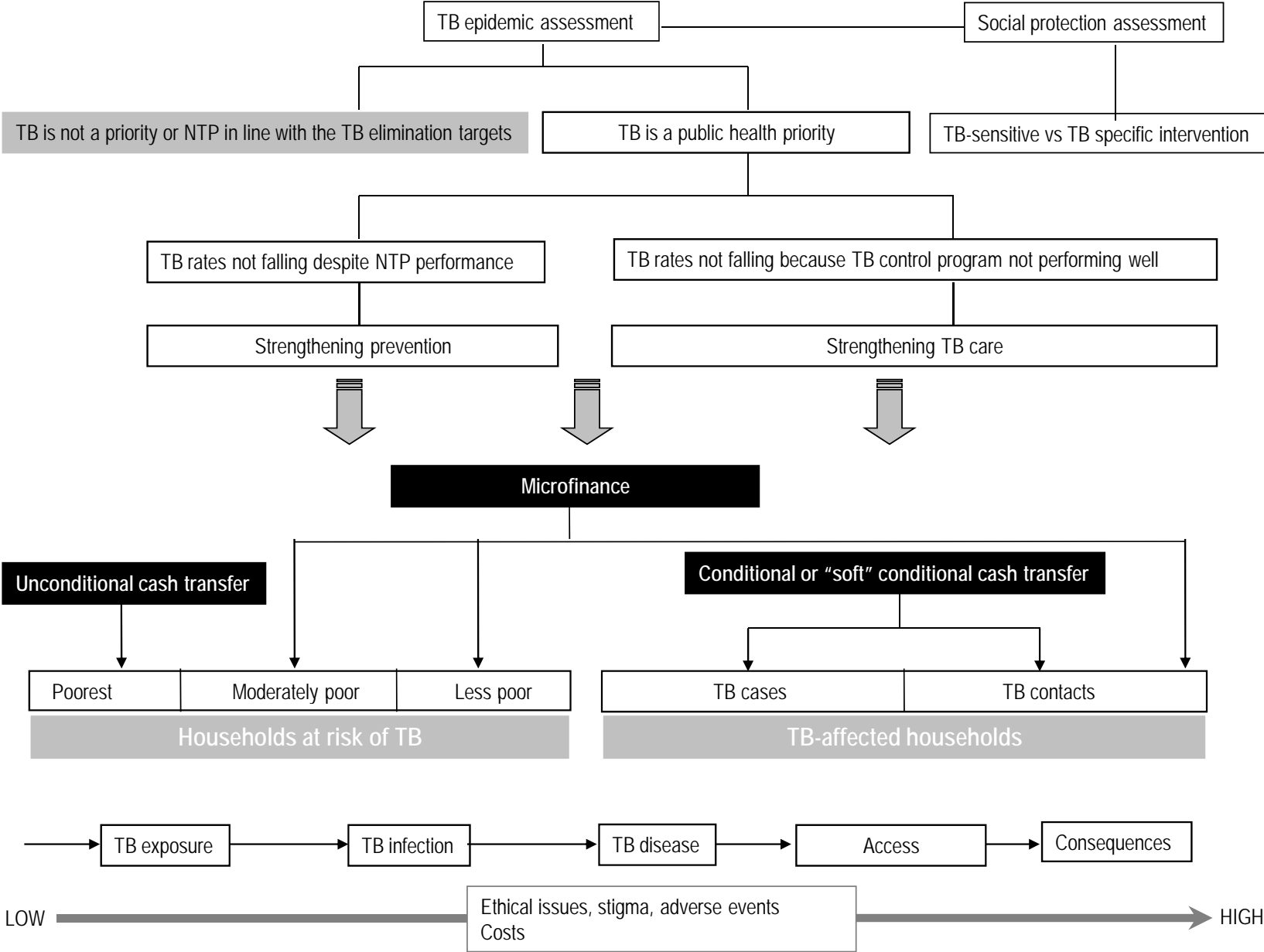
DATA SOURCE: Published and unpublished references identified from clinical and social electronic databases, grey literature and web sites.

METHODS: Eligible interventions had to be conducted in middle- or low-income countries and document an impact evaluation on any of the following outcomes: 1) TB or other respiratory infections; 2) household socio-economic position; and 3) factors mediating the association between low household socio-economic position and

addressed TB or any other respiratory infection. Of 11 cash transfer and four microfinance interventions, respectively seven and four reported a positive impact on indicators of economic well-being. A positive impact on household food security was documented in eight of nine and three of five cash transfer and microfinance interventions. Improved health care was documented respectively in 10 of 12 cash transfer and four of five microfinance interventions. The only intervention evaluating impact on HIV incidence was a microfinance project that found no effect. No cash transfer or microfinance interventions had an impact on malnutrition.



A theoretical implementation model



Think

TB epidemic profile

Social protection needs

Barriers and opportunities
(TB sensitive vs TB-specific interventions)

Draft a proposal

Expected impact on TB indicators and/or TB risk factors

Presentation and plenary discussion using matrix forms provided

Review

Policy working group

Research working group

Presentation and plenary discussion

Synthesis

To agree on a synthesis document containing interim recommendations on how to best design and evaluate social protection interventions for TB control.

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To agree on a synthesis document containing interim recommendations on how to best design and evaluate social protection interventions for TB control.

- Target audience
- Editorial/writing board
- Format/structure and content
- Deadline

Research component  :

- In countries where initiatives are already in place (e.g. Pakistan, Peru, Brazil, South Africa)
- The more diversified the better
- Each project will be fully independent

Research component **B** and **C**:

- In countries where there is currently no linkage between social protection and TB control (e.g. Zambia)
- Linkage with community-based organization, NGOs and food-aid programs
- They deliver, we measure
- Each project will be fully independent

Questions

- Countries selection and partners
- Only one level of coordination: Set of quality standards of research practice and results report
- One disease-focussed
- Fundability and funding mechanism
- Maintenance of the network