

POLICY BRIEF COMPETITION OUTPUT

Increasing Private Sector Investment In The TOSS Tuberculosis Program To Achieve The 2030 Tuberculosis Elimination Target

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Summary

The lack of private-sector investment in TB programs is due to unclear private-public partnership mechanisms, poor incentives, and a lack of systematic regional strategies to engage the private sector. This brief tries to find possible solutions to increase TB program financing so that the SDGs 2030 goal is achieved. Private sector investment is important to support TB program financing. Currently, Indonesia has TOSS TB as a TB program that has the potential to receive financial support from the private sector. Referring to the international scale, private sector investment for TB financing has been successfully carried out in Bangladesh and the Philippines by maximizing the role of Non-Governmental Organizations (NGOs). By adopting this policy, the recommendations that can be given is clarifying the private-public partnership for TOSS TB, including partnerships with companies through Corporate Social Responsibility (CSR), philanthropists, NGOs, and BAZNAS, as well as providing attractive incentives for private sector involvement in the TOSS TB program.

Current Landscape of Tuberculosis Policy and Programs in Indonesia

Despite being the country with the highest TB incidence rate in the world (1), Indonesia's TB funding is still dependent on global funds and grants. International funds played a big role in 2022 TB funding, which was 61% (US\$ 106,7 million), while the rest 39% (US\$70,1 million) came from domestic budgeting (2). The low percentage of domestic financing is not in line with the severity of Indonesia's TB incidence rate which are still far from the SDGs 2030 elimination target. Indonesia's TB incidence rate was 354 per 100,000 population in 2021. Meanwhile, the TB elimination target for 2030 is 65 cases per 100,000 population (1).

The National TB Strategic Plan (NTSP) projects that Indonesia's dependence on global funds and grants will decrease with increased private-sector investment. The private sector investment can be in the form of private-public partnerships (PPP) schemes including companies, NGOs, philanthropy, and zakat (3). However, private investment in national TB funding is not significant because it only contributed 1.72% in 2022. Consequently, participation in TB funding from the private sector is still urgently needed to accelerate the reduction of TB and achieve the 2030 target (4).

Increasing Private Sector Involvement in TB Programs

The lack of participation of the private sector caused by several things: unclear mechanisms and regulations related to public-private mix (PPM) resulting in mutual distrust between the public and private sector, improper incentives, and TB control standards implementation that has not been widely promoted caused misunderstanding in the private sector (5,6). In addition, local stakeholders, including the District Health Office (DHO) and the Regional Financial and Asset Management Agency (BPKAD), do not have a -

-systematic strategy in their efforts to increase private sector investment (7).

The TOSS TB strategy (Find and Treat Until Cured) is one of the potential programs for the private sector investment. TOSS TB is a form of DOTS (Directly observed treatment, short-course) strategy, an essential TB service guideline developed by WHO (8). The TOSS TB program consists of three crucial TB control steps (9).

The first step is finding cases in the community. Efforts to increase case detection are conducted by increasing TB awareness in the community through education and strong surveillance system. Second, treating TB properly and quickly. This step is actualized by providing a large supply of TB drugs in public and private health services and conducting TB treatment in all primary health services. Third, observing TB treatment until fully cured. In Indonesia, there is a PMO (Medicine Swallowing Supervisor) program as the government's efforts to ensure patients' medication adherence. PMO requires substantial funds for recruiting and training skilled workers to be implemented throughout Indonesia. All these efforts require a lot of financial support from various parties.

In the international scale, several countries have succeeded in increasing the private sector investment within the DOTS program. Bangladesh optimizing the private sector investment by assigning an NGO for each district to provide human resource support called Community Health Workers (CHWs) that are in charge to do case finding, referral, and treatment support (10). The output of this policy is that 38% of all notified cases came from CHWs reports, and it dominated the notified cases from private providers with a percentage of 69%.

In the Philippines, private sector investment from NGOs is focused on two main stakeholders, including the Philippines Coalition Against Tuberculosis (PhilCAT) and Philippines Business for Social Progress (PBSP). PhilCAT is a coalition of organizational health practitioners, academics, and advocacy groups from the private or public sector. PhilCAT actively organizes TB Conventions and commemorates World TB Day. These efforts can contribute to building public awareness regarding TB. Meanwhile, PBSP is an organizational forum for business to carry out social activities. In 2019, PBSP gained US\$21.8 million in grants from donors, non-members, and member companies (10).

The success of private sector engagement in these countries proves that the DOTS program, as represented by TOSS TB in Indonesia, is a potential program to be targeted for private investment. The investment can be actualized through private-public partnerships (PPP), CSR, NGOs, philanthropy, and zakat.

Increasing Private Sector Involvement in TB Programs

Many possible actions can be done by engaging the private sector in performing 3 steps in the TOSS TB program to achieve the 2030 target. Some of the recommendations for the government to increase private sector investment are to (1) develop clearer private-public partnership (PPP) mechanisms and strategies, involving, (2) formulate proper and attractive incentives, and (3) conduct monitoring and evaluation measures. Developing clear PP mechanisms should aim to involve companies and philanthropy organizations, NGOs, and domestic community grants.

Detailed actions of the three step recommendation is detailed below

1) Make clearer private-public partnership (PPP) mechanisms and strategies, involving:

a. Companies & Philanthropy Organizations

- i. Regional stakeholders, such as DHO and BPKAD, work with USAID TBPS to form technical guidelines and accountability systems related to CSR activities and philanthropic actions that can be carried out in the TOSS TB program by providing financial support, such as:
 - Increase the competence of health workers and community awareness of TB through training and outreach.
 - Fund TB research and development, and laboratory examination of TB patients.
 - Provide anti-TB drugs.
 - Fund the development of a good surveillance system so that more TB cases are found
 - Create innovative activities initiated by themselves
- ii. Develop market research of the potential companies and foundations to be targeted for conducting CSR and philanthropy activities.
- iii. Develop a tracker containing a list of companies and foundations that have entered PPPs for future long-term partnerships.

b. NGOs

The Indonesian government could establish the KNCV Tuberculosis Foundation as the main stakeholder in the implementation of TOSS TB by NGOs. This recommendation is based on the findings that the Philippines has succeeded in increasing private engagements by focusing on 2 NGO partners for the TB program. KNCV' plays role to coordinate other small NGOs to create collaborative actions in TOSS TB.

c. Domestic Community Grants

Involving Amil Zakat National Agency (BAZNAS) in allocating domestic community grants to the TOSS TB program by forming internal regulations that require an allocation of zakat for TOSS TB. The Ministry of Health (MoH) can play a role in providing recommendations for specific activities that will receive funding allocations from BAZNAS.

2) Formulate proper and attractive incentives

- a. Provide tax incentives to companies that contributed to the TOSS TB program financing.
- b. Provide convenience for licensing philanthropic institutions in collecting money or goods related to the acceleration of TB reduction.

3) Conduct monitoring and evaluation

- a. Philanthropists, companies, and NGOs create an annual report evaluating the expenditure of funds for TB, which is approved by the supervisory meeting and is reported to the public accountant under the relevant ministry.
- b. The Ministry of Religious Affairs monitors and evaluates zakat managed by BAZNAS to be allocated to the TB elimination program.

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