

# ENGAGING ALL HEALTH CARE PROVIDERS IN TB CONTROL



*Guidance on Implementing  
Public-Private Mix Approaches*



World Health  
Organization

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## PREFACE

*“.....We hope that on the basis of this, locally appropriate ways of involving private practitioners in DOTS implementation will be tried out and documented. This will help create an evidence-base for achieving an effective Public-Private Mix (PPM) for TB control. Such an evidence-base will also help delineate more concrete guidelines that may be published subsequently....”*

This was foreseen five years ago in the concluding paragraph of the Preface of the WHO document: *“Involving private practitioners in tuberculosis control: Issues, interventions and emerging policy framework”*. As envisaged then, several locally appropriate ways of involving private practitioners in TB control have indeed been tried out, documented and published. Importantly, however, the concept of PPM has evolved further in response to the ground realities. In different country settings, different types of private as well as public providers operate outside national TB programmes (NTPs). They include informal village doctors, private general practitioners, large public hospitals, specialist physicians, nongovernmental organizations, medical colleges, corporate health services etc. Since WHO’s embarking on the global PPM project, several initiatives in different countries have successfully engaged diverse health care providers in DOTS implementation. Evidence from such initiatives shows that the diversity of settings and provider types regardless, there are distinct commonalities in setting up productive collaborations with the wide array of public and private care providers and that they all fit well under the common umbrella of PPM. Evidence also indicates that PPM DOTS not only improves access to quality TB care but also saves costs of care for the poor. Therefore, engaging all health care providers in TB control is an essential component of the new Stop TB strategy and the Global Plan to Stop TB 2006-2015.

This document guides NTPs on how to engage all relevant health care providers in TB control and thereby promote the use of evidence-based, International Standards for TB Care. The experience and evidence on scaling up and sustaining PPM is now clearly emerging. We hope that this document will help countries to scale up PPM DOTS more rapidly and contribute significantly to achieving the TB-related Millennium Development Goal.

Geneva, March 2006



Dr. Mario Raviglione,  
Director, Stop TB Department



## ABBREVIATIONS

DEWG	DOTS Expansion Working Group
DOT	Directly Observed Treatment
DOTS	The internationally recommended TB control strategy
GFATM	Global Fund to Fight AIDS, TB and Malaria
HIV	Human Immunodeficiency Virus
IMA	Indian Medical Association
KAPTLD	Kenya Association for Prevention of Tuberculosis and Lung Disease
MDG	Millennium Development Goal
MDR TB	Multidrug-resistant Tuberculosis
NGO	Non-Governmental Organization
NTP	National Tuberculosis Programme
PhilCAT	Philippines Coalition Against Tuberculosis
PhilHealth	Philippines Health Insurance Corporation

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