Fighting multidrug-resistant tuberculosis in Georgia

ITM and others to assist the government of Georgia in developing a provider incentive payment scheme for tuberculosis

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Georgia is currently facing a problem of a high incidence of tuberculosis (TB) and relatively low treatment success rates. Many patients are not followed up properly which contributes to high levels of multidrug-resistant TB: 12 % of new patients are resistant to first line drugs. The health system underwent a number of dramatic reforms in 2003 and 2007, leading to a full-scale privatisation and deregulation of the health sector. Virtually all aspects of tuberculosis care and prevention are the responsibility of private-for-profit providers, for whom the long treatments that TB patients require are not necessarily a priority. Policymakers intend to use results-based financing (RBF) to stimulate the private actors to better engage with TB care.

Results4TB, a new 48-month research project carried out by teams from the Institute of Tropical Medicine Antwerp (Belgium), the Curatio International Foundation (Georgia), Queen Margaret University (UK) and the London School of Hygiene and Tropical Medicine (UK) will assist the government of Georgia in developing a provider incentive payment scheme for tuberculosis. It will generate evidence on its effects on adherence and treatment success rates and costs, and the conditions of success of the scheme.

“Tracing the introduction of a new policy presents a number of challenges in itself”, said professor Bruno Marchal, head of the research team at ITM, “but even more so when we need to find out how it works while it is being implemented. After all, this policy to motivate providers seems simple, but it intervenes in a complex health system. To assess whether it works and in which conditions, Results4TB brings together a unique skill set”. The project will produce methodological innovation regarding the use of realist evaluation alongside cost-effectiveness analysis and impact evaluation. Ariadna Nebot and professor Marchal from the Unit of Health Systems Organisation at ITM’s Department of Public Health will contribute to designing the theory-informed intervention and will guide its realist evaluation component.

In the framework of the project, policymakers, TB programme managers, providers, representatives of the Global Fund and other actors met with researchers in Telavi, Georgia in May to analyse the country’s approach to TB care. This initial engagement with key stakeholders will be followed by a second workshop in July to inform the design of the intervention, which will be piloted at the end of this year.

The Results4TB project (“Designing and evaluating provider results-based financing for tuberculosis care in Georgia: understanding costs, mechanisms of effect and impact”) is funded by the Department of International Development (DFID), the Economic and Social Research Council (ESRC), the Medical Research Council (MRC) and the Wellcome Trust.