

Philippines Work Plan

FY 2025

Program Year 7

October 2024–September 2025



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ACT | EAST PROGRAM OVERVIEW

The U.S. Agency for International Development Act to End Neglected Tropical Diseases (NTDs) | East Program supports national NTD programs in reaching World Health Organization goals for NTD control and elimination through proven, cost-effective public health interventions. The Act to End NTDs | East (Act | East) Program provides critical support to governments to create sustainable platforms for NTD services within robust and resilient health systems. The Act | East Program is implemented by a consortium of partners, led by RTI International and including The Carter Center; Fred Hollows Foundation (FHF); Light for the World (LFTW); Results for Development (R4D); Save the Children; Sightsavers; and WI-HER.

In the Philippines, Act | East Program activities are implemented by RTI International and R4D.

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ACRONYMS LIST

| | |
|------------|---|
| Act East | Act to End Neglected Tropical Diseases East |
| CHD | Center for Health Development |
| CHSSS | Comprehensive Health Systems Strengthening Support |
| COVID-19 | Coronavirus Disease 2019 |
| DEC | Diethylcarbamazine Citrate |
| DO | Davao Occidental |
| DOH | Department of Health |
| DPCB | Disease Prevention and Control Bureau |
| EMS | Epidemiological Monitoring Survey |
| EU | Evaluation Unit |
| FHSIS | Field Health Services Information System |
| FY | Fiscal Year |
| HSS | Health Systems Strengthening |
| IDA | Ivermectin, Diethylcarbamazine Citrate, and Albendazole |
| IR | Intermediate Result |
| JAP | Joint Application Package |
| KaLePa | Kalamansig, Lebak, and Palimbang |
| LF | Lymphatic Filariasis |
| LGU | Local Government Unit |
| LIPH | Local Investment Plans for Health |
| LOE | Level of Effort |
| MDA | Mass Drug Administration |
| MDEP | Multi-Disease Elimination Plan |
| MMDP | Morbidity Management and Disability Prevention |
| NTD | Neglected Tropical Disease |
| PC | Preventive Chemotherapy |
| PHO | Provincial Health Office |
| R4D | Results for Development |
| SGLG | Seal of Good Local Governance |
| STH | Soil-Transmitted Helminths |
| STTA | Short-Term Technical Assistance |
| TAS | Transmission Assessment Survey |
| USAID | United States Agency for International Development |
| WASH | Water, Sanitation, and Hygiene |
| WHO | World Health Organization |
| ZDN | Zamboanga del Norte |

NARRATIVE

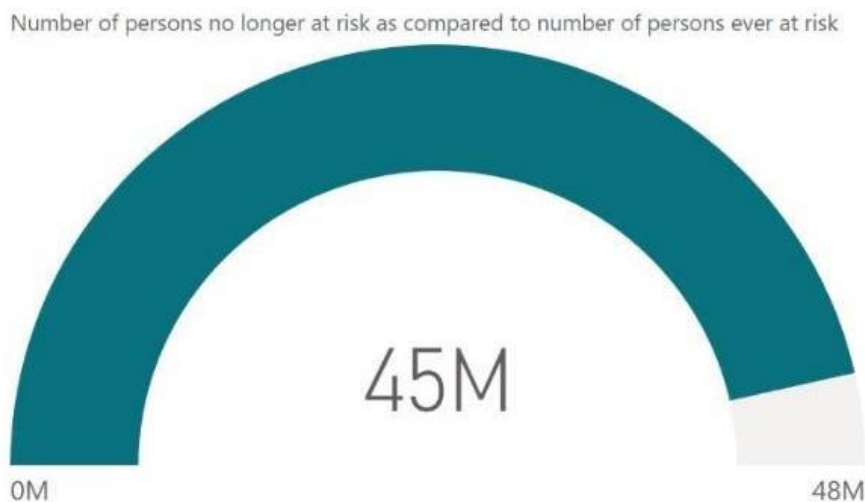
NATIONAL NTD PROGRAM OVERVIEW AND SUPPORT

The Philippines is an island country located in Southeast Asia with a projected population of more than 114.5 million people for 2024, with people aged 0–24 years making up at least 50% of the population. The Philippines consists of three major island groups—Luzon, Visayas, and Mindanao—comprising 7,641 islands. The Philippines health system is decentralized, with autonomous government systems in each of the 82 provinces, 149 cities, and 1,493 municipalities (Figure 1). Operational planning, budgeting, funding, and implementing for most neglected tropical disease (NTD) activities is the responsibility of the Provincial, City, and Municipal Health Offices. The Department of Health (DOH) is the national health governing authority and works through 18 DOH regional offices, called Centers for Health Development (CHDs), in coordination with Provincial Health Offices (PHOs) and City or Municipal Health Offices. The Government of the Philippines funds its NTD activities, including mass drug administration (MDA) and disease-specific assessments. The Philippines is endemic for lymphatic filariasis (LF), schistosomiasis (SCH), rabies, yaws, and leprosy, which the government is working to eliminate, and for soil-transmitted helminths (STH), food-borne trematodes, dengue, zika, and chikungunya, which the government is working to control. Mycetoma and snake bite envenoming are also endemic but do not have priority programs dedicated to them.

LF Program Context

In 2000, at the start of the Global Program for the Elimination of LF, there were 45 million people in 46 provinces in the Philippines that required LF MDA. After redistricting, the number of endemic provinces increased to 48, with 48 million¹ people at risk for LF. In 2024, only 4 provinces require LF MDA, which means that 45 million people are no longer at risk for LF, as shown in Figure 1.

Figure 1. Philippines’ progress toward LF elimination



The Government of the Philippines funds and implements all LF MDA and survey activities. Benefiting from the implementation of ivermectin, DEC, and albendazole (IDA) since 2022 to accelerate elimination, the Philippines has a goal of reaching the threshold for stopping province-wide MDA by

¹ The increase in the population at risk for LF is due to population growth in endemic areas.

2025 in Sultan Kudarat (SK) and 2026 for Oriental Mindoro (OM), Zamboanga del Norte (ZDN), and Davao Occidental (DO), if the MDA schedule is followed and the remaining provinces pass assessments. Table 1 shows the 2022–2025 MDA and survey activities implemented and planned, with specific context for each province below.

Table 1. LF endemic provinces: MDA and survey activities from 2022 to 2025

| Province | 2022 | 2023 | 2024* | 2025 |
|----------|-------------|-------------------|-------------|-----------------------------------|
| OM | — | Focal IDA round 1 | — | Focal IDA round 2 |
| SK | IDA round 1 | Focal MDA | IDA round 2 | Epidemiological Monitoring Survey |
| ZDN | — | — | IDA round 1 | IDA round 2 |
| DO | — | — | IDA round 1 | IDA round 2 |

*In 2024, IDA MDA is planned for December.

Proposed FY25 Activities

Program Implementation Reviews (PIR)

The DOH will fund PIR for all NTDs in 2024 and expects the same for 2025 but has requested continued support from Act | East in developing the agenda and facilitating the sessions. The PIR agenda will incorporate sessions on integrated budgeting and planning; aligning local health investment plans with the DOH plans, policy, and process reviews; and reviewing accomplishments against the MDEP targets.

World NTD Day Celebration in ZDN

In January 2025, Act | East will support a province-level World NTD Day Celebration for mayors of the 25 municipalities and 2 cities in ZDN. Act | East selected this province because the regional office requested support to engage provincial leadership outside the health system to improve motivation and commitment to health programs. Act | East proposes to use the World NTD Day Celebration to seek commitments from elected leaders on NTD activities. Attendees will include DOH central and regional representatives, the provincial governor, PHO staff, city and municipal mayors and staff, USAID/Philippines staff, WHO representatives, and Act | East staff. The event will be a half-day celebration hosted by the DOH.

Epidemiological Monitoring Survey (EMS) training in Sultan Kudarat. Three municipalities in Sultan Kudarat are scheduled to conduct the round 2 of IDA in December 2024. Assuming good coverage, the district will be eligible for EMS in September 2025. Act | East proposes to support a 3-day training for 30 provincial-level medical technologists (public health laboratory staff) in Sultan Kudarat who will be responsible for implementing the first EMS in the country. Act | East will adapt standardized training tools and resources to the local context and facilitate the first 2 days of the training, which will include an orientation to LF surveys and specific training on the new survey guidance, including sampling. The last day will be dedicated to hands-on training in night blood sample collection, slide development, staining and reading, which will be conducted in the DOH Regional Public Health Laboratory in General Santos City and facilitated by the former Provincial LF Coordinator, who is also the laboratory head of the SK PHO.

Technical Support for LF Survey Trainings

Act | East anticipates that the DOH Central Office or CHDs may request support for additional TAS training and supervision in FY25. Act | East will prioritize these requests based on scheduling for other activities and the capacity of regional and provincial staff. Provinces that are implementing surveys for the first time or after a long gap will be prioritized over routine or repeat surveys.

MDEP support

The Philippines MDEP 2024–2030 was formally launched during the World NTD Day Celebration on January 30, 2024. The MDEP includes 13 priority infectious diseases for elimination, including LF, SCH, leprosy, rabies, and yaws; malaria and selected vaccine-preventable diseases like polio, measles, and rubella; maternal and neonatal tetanus; elimination of mother-to-child transmission of HIV; syphilis; and hepatitis B. During the next 6 years, the MDEP will guide local governments and the DOH toward disease elimination goals. Act | East and other partners will work with the DOH and local government units (LGUs) to support the MDEP’s implementation, including support for the development of annual plans, increased health system capacity, mobilization of domestic resources for NTDs, and plans for LF elimination milestones, such as the development of the national dossier and advocacy for strong post-validation surveillance.

Dossier Development Consultant (Short-term technical assistance [STTA])

Act | East will hire a local or Asia-regional consultant to review and clean data, identify gaps, review, and update the narrative document; communicate with the regional LF Coordinators to help fill gaps on MDA surveys; and determine a plan for sustaining updates.

Technical support to transition JAP management to DOH staff (LOE only)

In FY25, Act | East will support the DOH in preparing and ensuring the approval of the PC JAP in coordination with the newly assigned Deputy Program Manager for LF at the DPCB and Procurement and Supply Chain Management Advisor from USAID's Long-Term Exceptional Technical Assistance Global Project. This is a seconded role in the DOH supported by USAID Philippines that focuses on quantification and forecasting of DPCB commodities. This role has insight into other DPCB procurement and supply chain processes and priorities.

Achieving Sustainability: Mainstreaming & Health Systems Strengthening

Governance

Comprehensive Health Systems Strengthening (CHSSS) Phase 3—Monitoring, Evaluation, and Learning

In FY25, Act | East will visit the four remaining LF provinces following up on the findings and related activities from CHSSS Phase 1 and 2 that were implemented by Act | East in FY24. Act | East staff, regional health officials, and provincial health teams will use a structured guide to visit barangays to understand how Phase 2 training and support has been cascaded to the barangay level. Act | East will document the progress against Phase 2 activities and make recommendations to provinces for action and to CHDs for their continued engagement. Additionally, Act | East will specifically document systems improvements that impact IDA MDA implementation through virtual after-action reviews with each of the PHOs. Act | East will continue to play a technical advisory role to provinces and CHDs, but ownership of activities will remain with the provinces.

Financing

Health Financing Consultant

In FY25, R4D will continue to work with a local consultant, the Act | East Senior Technical Advisor, and the DOH to develop resources to help Regional and PHOs prioritize all endemic NTDs in their budgeting and planning processes including:

1. Pilot the **budget cue card tool** in Davao Occidental province. With the DOH, R4D will jointly develop a **short guidance note or memo emphasizing the need to prioritize NTDs in LGU plans and budgets**, highlighting the cost-effectiveness of these interventions and the link to advancing MDEP goals.

The piloted and finalized tool will be made available to all regions and provinces. Regional Program Managers will be oriented to the final tool at the PIR meetings and in turn orient LGU managers in using the tool to include NTD goals in the next 3-year LIPH cycle, submit budget requests, and plan for utilizing other available funding streams. All regional and some provincial PMs were involved in the first phase of development of this tool in November 2023 at the NTD PIR.

2. Design and cost an **NTD insurance package that includes outpatient care for LF.**

This activity applies to NTD services funded through the national insurance scheme, PhilHealth², which currently covers inpatient and outpatient NTD clinical care (services for hospitalized patients affected by SCH, STH, LF, and those who require hydrocelectomy), but does not include them in a single package, making it difficult to navigate reimbursement through insurance. The result is that hospitals underutilize PhilHealth for NTD services, directly billing patients or seeking out other central government funding schemes that are not integrated into the broader health system.

This activity is part of a long-term DOH strategy and goal of the MDEP to have a PhilHealth package for each disease. Malaria and rabies have both an in-patient and outpatient benefit package. Working with the DOH and PhilHealth, R4D will look to consolidate already existing outpatient financing schemes for some NTDs into one comprehensive package for NTDs, contributing to the advancement of NTD goals in the MDEP.

It takes 1-2 years for new packages to be developed and incorporated, with exploratory groundwork required, so there would not be a package included in PhilHealth by the end of Act | East. In FY25, RTI and R4D would 1) identify a proposer and 2) finalize a proposal for the review group.

3. R4D will support the DOH and CHDs in exploring the possibility of including an **NTD indicator in the Seal of Good Local Governance (SGLG) criteria.**

The Seal of Good Local Governance is a law that provides recognition and grant money to local governments. The seal is influential and comes with a 1M peso award that LGUs can allocate to their programs. There is a yearly review of criteria for the SGLG, and this activity will explore adding NTDs to the health criteria by looking deeper into this mechanism to better understand how influential the SGLG is for DRM, what the process and schedule is for including new indicators, and to determine if it makes sense to advocate for NTD indicators to be included. In FY25, Act | East can develop the proposal to ensure the criteria review group has all the info they need to review and add the indicators. The actual

² The Philippine Health Insurance Corporation (PhilHealth) was created to implement universal health coverage in the Philippines. It is a tax-exempt, government-owned and controlled corporation and is attached to the Department of Health.

submission, review, and potential law change would happen in the years following the Act | East program.

Multisectoral Engagement for an Integrated Helminth Control Framework

Act | East proposes to support the DOH to host two workshops that bring together senior-level Philippines Government officials, technical experts, academics, and program managers from DOH departments (e.g., Division of Communicable Diseases, Division of Environmental and Occupational Health, Health Promotion Bureau, and Epidemiology Bureau), agriculture, and WASH to discuss opportunities for cross-sector alignment of programming impacting STH, acknowledging that there will be overlaps with other NTDs, including SCH, food and water borne diseases, and rabies. The objective of the workshops is to determine whether a joint strategy for diseases could be developed in place of the expiring disease-specific strategic plans.

The first workshop will encourage coordination and inputs from partners for a first draft of a multisectoral integrated STH control framework and the second workshop will review a draft of a strategic framework for input and finalization.