

CONTENTS

	Page
COVER	i
APPROVAL	ii
CONTENTS	iii
LIST OF EXHIBITS, FIGURES, TABLES, AND PHOTOS	v
LIST OF ABBREVIATIONS	vii
STATEMENT OF AUTHENTICITY	ix
ACKNOWLEDGEMENTS	x
ABSTRACT	xi
CHAPTER I INTRODUCTION	
A. Background	1
B Formulation of Problems	3
C. Objectives of Research	4
D. Benefits of Research	4
E. Originality of Research	5
CHAPTER II LITERATURE REVIEW	
A. Literature Review	6
B. Theoretical Framework	11
C. Conceptual Framework	12
D. Hypothesis and Research Questions	13
CHAPTER III METHODS OF RESEARCH	
A. Research Type and Design	15
B. Research Setting and Time	17
C. Intervention	19
D. Research Participants	20

E.	Identification of Research Variables	22
F.	Operational Definition of Variables	22
G.	Data Collection and Research Instruments	25
H.	Data Analysis Method	27
I.	Research Ethics	28
J.	Limitations of Research	30

RESEARCH RESULTS AND DISCUSSION

A.	Research Results	31
B.	Discussion	49

CONCLUSIONS AND RECOMMENDATIONS

A.	Conclusion	52
B.	Recommendations	52

BIBLIOGRAPHY		53
---------------------	--	----

APPENDIX

A.	Quantitative Data Collection Tool	63
B.	Qualitative Data Collection Tools	70
C.	Informed Consent Forms	82

LIST OF EXHIBITS, FIGURES, TABLES, AND PHOTOS

		Page
Table 1	Matrix of published literature related to the study	9
Table 2	Matrix of data collection	16
Table 3	Quezon City profile	18
Table 4	Data Collection Sites	19
Table 5	Eligibility criteria for study participants	20
Table 6	Operational definition of quantitative variables	22
Table 7	Operational definition of qualitative variables	23
Table 8	Data collection and research instruments	26
Table 9	Scoring System and Interpretation of 5-Point Likert Scale Mean Scores	27
Table 9	Thematic analysis domains	26
Table 10	Baseline Characteristics of Survey Respondents	32
Table 11	Mean Score of Contextual Factors affecting Treatment Adherence	39
Figure 1	Practical, Robust Implementation and Sustainability Model (PRISM)	11
Figure 2	PRISM Conceptual framework for assessing implementation process and acceptability of SMS-based treatment adherence modality for TB-DOTS	13

Figure 3	Sequential explanatory mixed-methods study design workflow	16
Figure 4	Map of Quezon City	17
Figure 5	TB Treatment Success Rates in Quezon City	33
Figure 6	TB Treatment Service Indicators in Quezon City	34
Figure 7	Process flow of home-based TB treatment using SMS for treatment adherence	35
Figure 8	Likert Scale Responses on Contextual Factors affecting Treatment Adherence	38

LIST OF ABBREVIATIONS

BC	Bacteriologically Confirmed
CB-DOT	Community-based Directly Observed Treatment
CD	Clinically Diagnosed
CXR	Chest X-ray
DATs	Digital Adherence Technologies
DOH	Department of Health
DS-TB	Drug-sensitive Tuberculosis
DR-TB	Drug-resistant TB
DOTS	Directly Observed Treatment, Short-course
FGD	Focus group discussion
HCW	Healthcare Workers
ILI	Influenza-like Illness
LGU	Local government unit
LMICs	Low- or Middle-Income Countries
MDR-TB	Multidrug-resistant Tuberculosis
NAP	NTP Adaptive Plan
NTP	National Tuberculosis Programme

PRISM	Practical, Robust Implementation and Sustainability Model
RE-AIM	Reach, Effectiveness, Adoption, Implementation, and Maintenance
SAT	Self-administered Treatment
SMS	Short Messaging Service
TB	Tuberculosis
TDR	Tropical Disease Research
TSR	Treatment Success Rate
VOT	Video-observed Treatment
WHO	World Health Organization