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Strengthening Health Outcomes  
*through the Private Sector*

# Leveraging the Private Sector to Sustain Priority HIV and AIDS Services

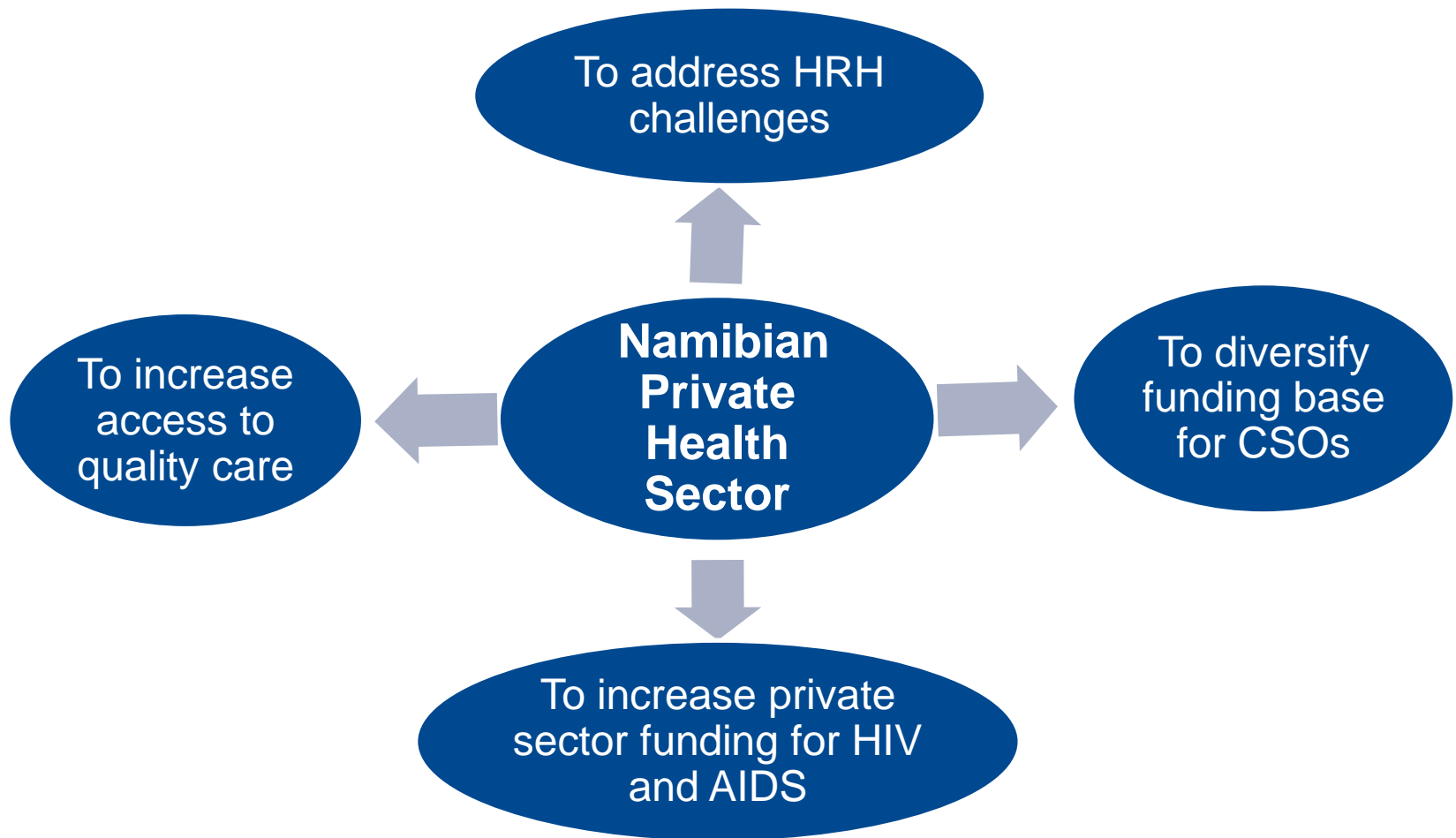
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May 30, 2013



**SHOPS is funded by the U.S. Agency for International Development.**  
**Abt Associates leads the project in collaboration with**  
Banyan Global  
Jhpiego  
Marie Stopes International  
Monitor Group  
O'Hanlon Health Consulting

# Private Sector Resources Can Be Leveraged



# Leveraging Private Sector Resources to Expand Low-Cost Health Insurance

## **Rationale:**

- Half of the formally employed lack health insurance
- A 1% enrollment increase in private medical insurance could save GRN \$1 million per year
- Burden on public sector could be reduced

## **Interventions:**

- Presented MoHSS with potential savings worth \$5 million in annual ART cost that could impact insurance premiums
- Engaging private pharmaceutical suppliers to reduce cost of ART
- Exploring low-cost health services

But, there are challenges...

# Leveraging Private Sector Resources to Provide and Finance VMMC

## Rationale:

- Slow VMMC uptake in public sector
- ~93,500 eligible males have private insurance
- 72% of doctors in private sector

## Interventions:

- Uniform insurance rate for VMMC as HIV preventative benefit submitted and accepted
- VMMC training curriculum for private doctors developed
- Brokered private sector routine reporting on MC

## Results

- ❑ Reduced VMMC cost from \$1200 to \$200
- ❑ 9/10 health insurance schemes providing VMMC as benefit
- ❑ Improved value for money

### USG VMMC Investments in Namibia

	Public sector	Private Sector
Duration	3 years	1.5 years
USG Total Investment	\$6,600,000	\$327,000
MCs Provided	12,509	1,839
VFM	\$527/MC	\$178/MC*

\*MC provision in the private sector is funded by health insurance schemes

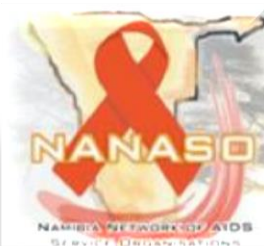
# Leveraging Private Sector Resources to Promote CSO Sustainability

## Rationale:

- Financial risks threaten sustainability of important HIV prevention and care gains
- End goal: sustainable organizations with diverse funding base

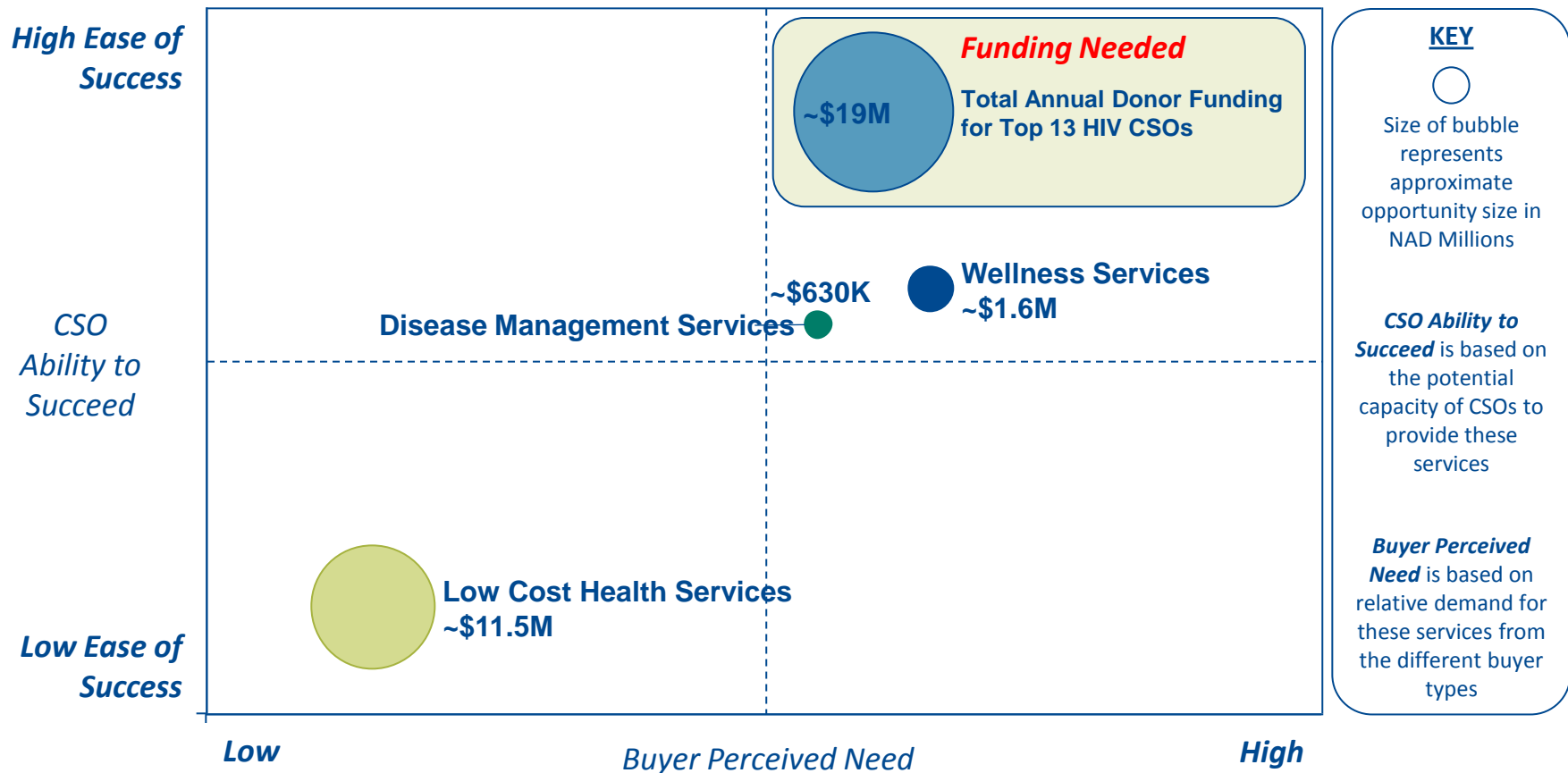
## Interventions:

- Implemented market research on commercial market for CSO services/products
  - Assessed CSO opportunities to meet corporate demand
- Piloting two CSO-corporate contractual partnerships
- Assessing opportunities for low-cost health services



# Assessment of CSO Opportunities

None of the three identified opportunities is large enough to compensate for a total removal of external donor funding for CSOs; additionally, the largest opportunity will be the most difficult to address



# Strengthening the Stewardship Role of the MoHSS for Increased PPP Engagement

## Rationale

- Lack of formal mechanism for private sector engagement
- MoHSS restructuring includes a PPP Unit

## Interventions

- Assisted MoHSS with health PPP documents to inform internal deliberations while linking public and private health sectors

## Results

- PPP for increased access to care for remote populations (mobile clinics)
- SHOPS-informed discussion document approved
- ToR for health PPP strategy drafted
- Discussions for private sector engagement in service delivery in the Erongo region advancing positively

# Leveraging Private Sector Resources for HIV Counseling and Testing

- **Rationale:**

- Option B+ will further overstretch public facilities
- Need for more facilities to facilitate test and treat

- **Interventions:**

- Increase high-quality HCT in private pharmacies and in primary health care clinics
- Explore uniform insurance rate for HCT in the private sector
- Explore private sector employment opportunities for trained HCT counselors







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