





Quantifying the Role of Private for Profit Health Providers in HIV Testing: Analysis of Data from 18 Countries

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Banyan Global Jhpiego Marie Stopes International Monitor Group O'Hanlon Health Consulting

Why examine the role of the private sector in HIV testing?

- In many countries, a large portion of the population (even the poor) access health services from the private sector.
- Given high use, it is important to ensure that private sector adheres to quality standards and that HTC stats reflect private sector use
- May shed light on whether private sector can be leveraged to increase HIV testing rates

Research questions



- What percent of men and women tested for HIV received the test from a private sector provider?
- How does use of the private sector for HIV testing compare with use of the private sector for other health services?
- What is the relationship between wealth and use of the private sector for HIV testing?
- What percentage of women who visit private vs. public facilities for antenatal care are offered an HIV test?

Data and methods

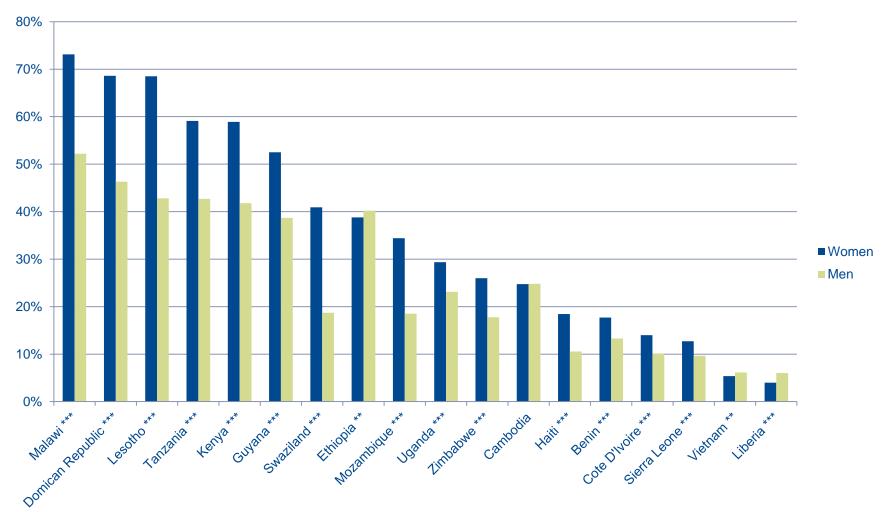
- Used recent Demographic and Health Survey (DHS) and AIDS Indicator Survey (AIS) data from 18 countries
- Coded provider types into public, private nonprofit and private commercial
- Conducted t-tests for differences in means and limited regressions

Countries used in analysis

Country	Year	Dataset type	GDP per capita (2012 USD)	National HIV prevalence	Total women in sample	# women tested for HIV in sample	Total men in sample	# men tested for HIV in sample
Benin	2006	DHS	602	1.2%	17,794	3,055	5,321	676
Cambodia	2010	DHS	795	0.5%	18,754	4,695	8,239	1,986
Cote D'Ivoire	2005	AIS	908	4.8%	5,183	397	4,503	295
DR	2007	DHS	4,334	0.8%	27,195	18,104	27,975	11,651
Ethiopia	2011	DHS	358	1.5%	16,515	6,915	14,110	5,991
Guyana	2008	DHS	2,558	1.2%	4,996	2,525	3,522	1,272
Haiti	2006	DHS	515	2.1%	10,757	1,918	4,958	508
Kenya	2008	DHS	794	6.3%	8,444	4,915	3,465	1,437
Lesotho	2008	DHS	764	23.6%	7,624	5,193	3,317	1,321
Liberia	2007	DHS	211	1.8%	7,092	287	6,009	346
Malawi	2010	DHS	339	11.0%	23,020	17,046	7,175	3,845
Mozambique	2009	AIS	428	11.5%	6,413	2,596	4,799	1,073
Sierra Leone	2008	DHS	348	1.6%	7,374	1,006	3,280	278
Swaziland	2006	DHS	2,894	25.7%	4,987	2,040	4,156	804
Tanzania	2010	DHS	524	5.6%	10,139	5,732	2,527	1,055
Uganda	2011	DHS	487	6.5%	8,674	6505	2295	1282
Vietnam	2006	AIS	731	0.4%	7,289	585	6,707	603
Zimbabwe	2011	DHS	776	14.3%	8948	5499	7480	2810

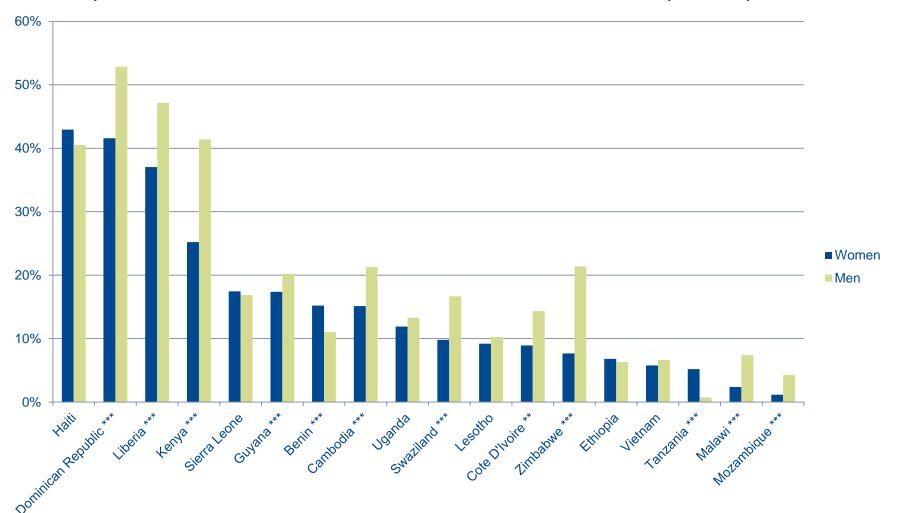
Proportion of individuals who have been tested for HIV varies widely across countries

Proportion of adults who have ever received an HIV test

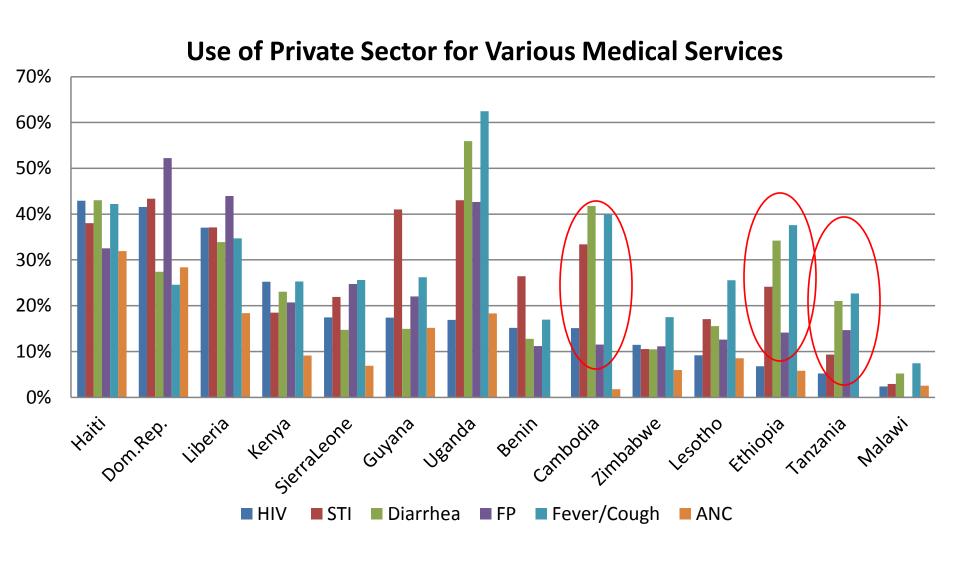


Use of the private sector for HIV testing also varies widely by country and sex

Proportion of those tested for HIV who received test from private provider

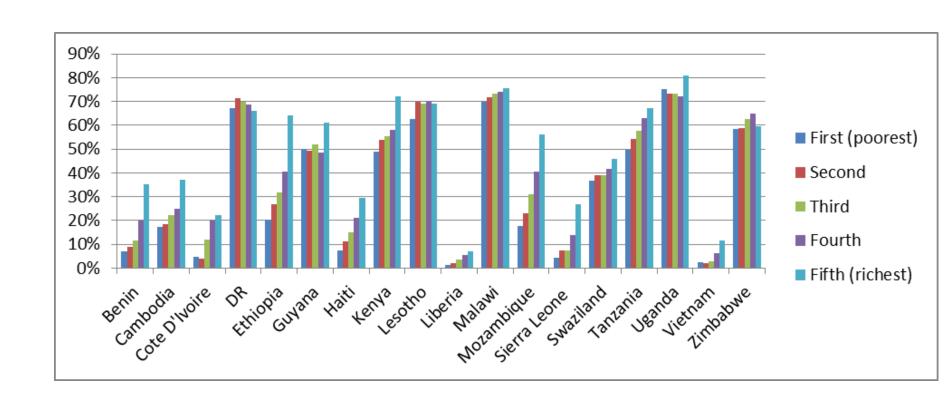


Utilization of the private sector for HIV testing is correlated with other health services but significant differences exist



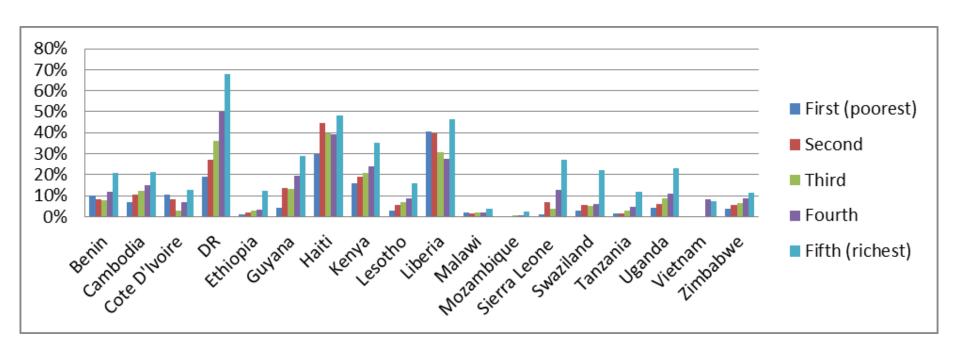
Women from upper wealth quintiles are more likely to have been tested for HIV

Proportion of Women Tested for HIV by Wealth Quintile



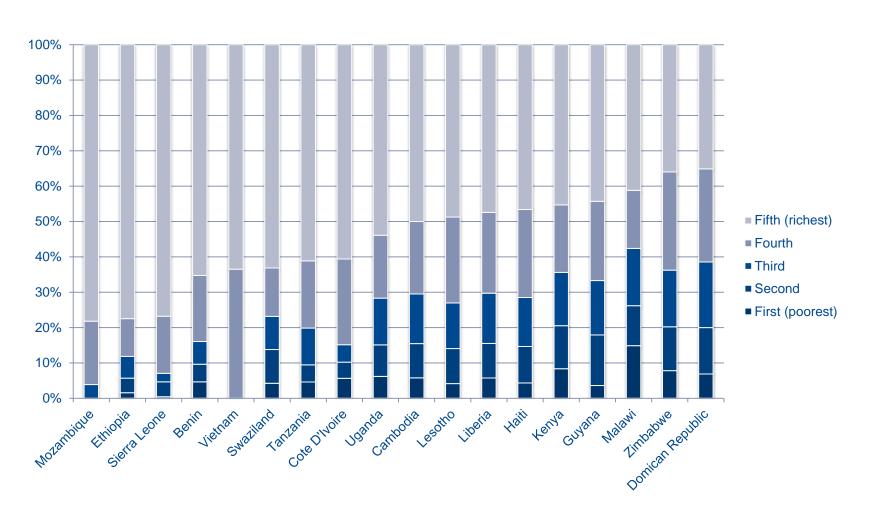
Women from upper wealth quintiles use the private sector for HIV testing more than poor women

Proportion of Women Tested Who Received Test from Private Provider by Wealth Quintile



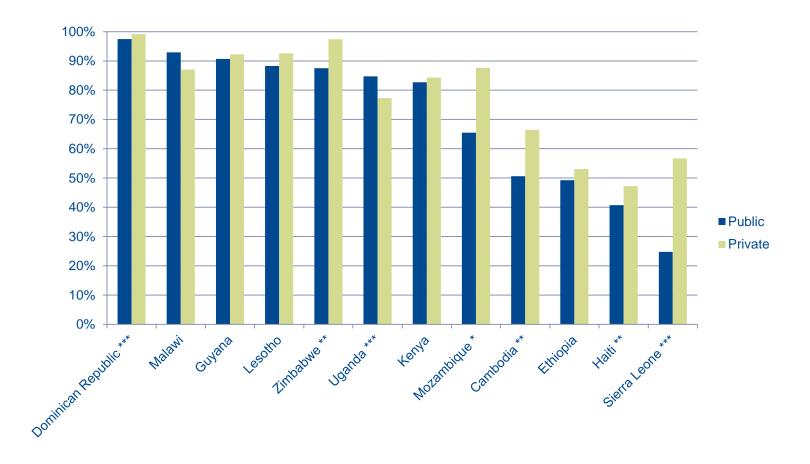
As a result, a large proportion of those tested for HIV by private providers come from the upper income quintiles

Proportion of Women from Each Wealth Quintile among Those Tested for HIV



Provision of women offered HIV test during ANC appears higher for private sector than public in some countries

Proportion of women who received ANC who were offered HIV test by provider type



...But this difference largely disappears once wealth is accounted for

Results from regression of binary variable indicating whether HIV test offered during ANC on provider type and wealth quintile

Country	Coeff on binary variable for private provider (percentage points)	Standard error (percentage points)	N
Cambodia	5.62	(7.37)	3498
DR	1.24**	(0.57)	5863
Ethiopia	-7.59	(5.77)	2151
Guyana	-2.06	(2.82)	1030
Haiti	2.48	(2.72)	2214
Kenya	-2.86	(3.36)	3014
Lesotho	1.04	(2.94)	1438
Malawi	-6.48*	(3.35)	9720
Mozambique	7.05	(10.71)	1967
Sierra Leone	14.07***	(3.98)	1971
Uganda	-10.31***	(2.83)	3458
Zimbabwe	4.19**	(1.90)	2638

Key findings and policy implications

Finding

- Significant proportion of people use private sector for testing in several countries
- Use of private sector and SES of users varies widely by country
- In most countries, private providers perform about as well as public on testing during ANC
- Unexplained differences in use of private sector for HIV testing and between use of private sector by gender exist

Policy implication

- Links between public and private sector should be strengthened
- Strategies for engaging private sector should be country specific
- Further research required

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