

What will it take for Ghana to achieve 90-90-90?

Costing an enhanced HIV treatment cascade

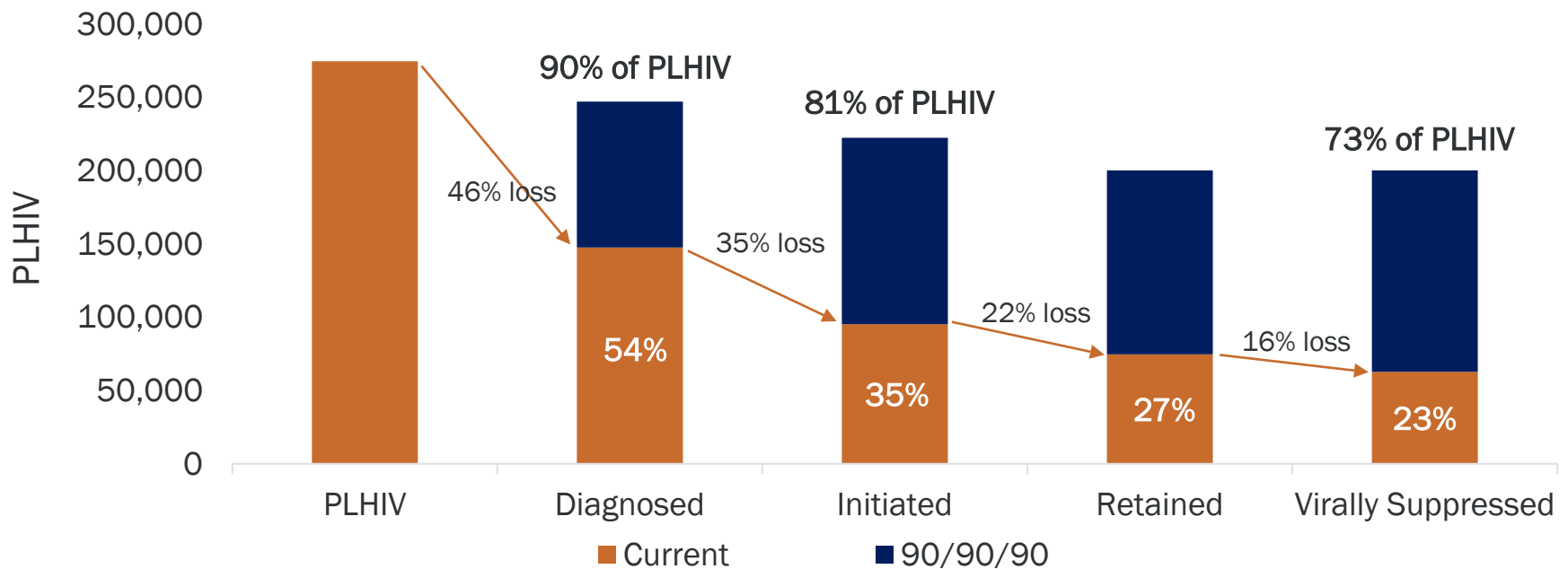
Health Policy Plus



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HIV landscape in Ghana: losses along the cascade and gap vs. 90-90-90 scenario

- **1.6%** HIV prevalence (age 15-49)
- **~24%** new infections from key population groups
- **2.7 million:** 2017 HIV testing target
- **~90%** undiagnosed people living with HIV (PLHIV) located in four priority regions



Objectives of public sector cost analysis of Ghana's HIV clinical cascade

Rationale

Provide evidence on the resource needs for the government to meet 90-90-90 by 2020 in order to advocate for financing and inform policy

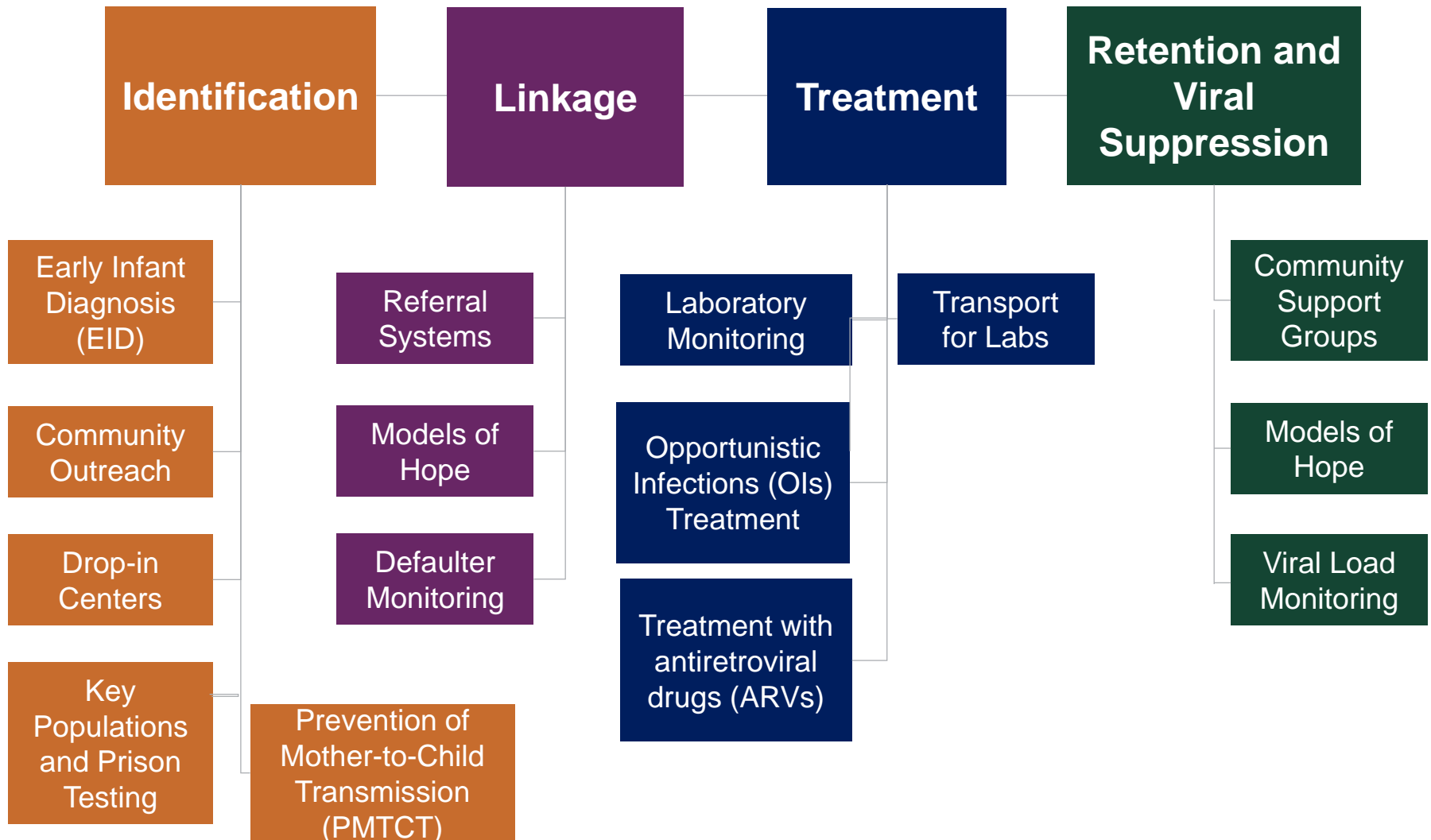
Key Study Considerations

- Interventions to help retain clients and reinitiate those lost to follow-up within cascade
- Possibility for cost efficiencies from differentiated care

Stakeholders

GHS, NACP, GAC, MOH, PEPFAR, USAID, GHSC-PSM, EQUIP, Care Continuum

Ghana cascade steps and sub-steps for costing



Methods and activities

Data Collection

- Secondary data from existing programmatic sources
- Expert opinion from structured interviews

Programmatic Review

- Consideration of where undiagnosed PLHIV may be and ways to improve targeted testing
- Key bottlenecks along the treatment cascade

Cost Modeling and Data Analysis

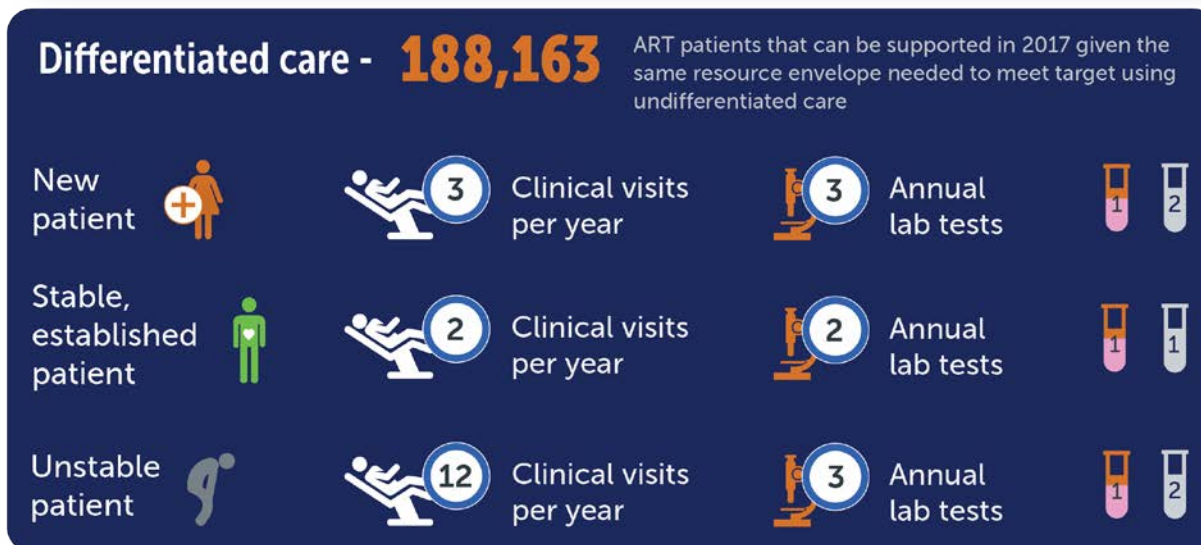
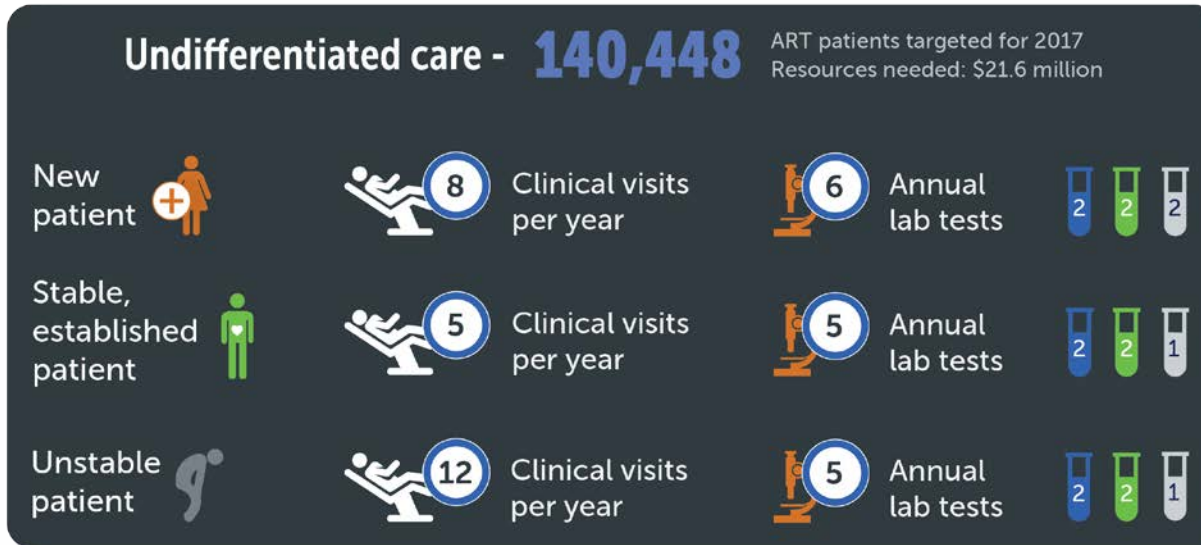
- Changes to testing yields over time
- Cost efficiency gains from more efficient service delivery models

GFATM and PEPFAR supply plan vs. resource needs for commodities

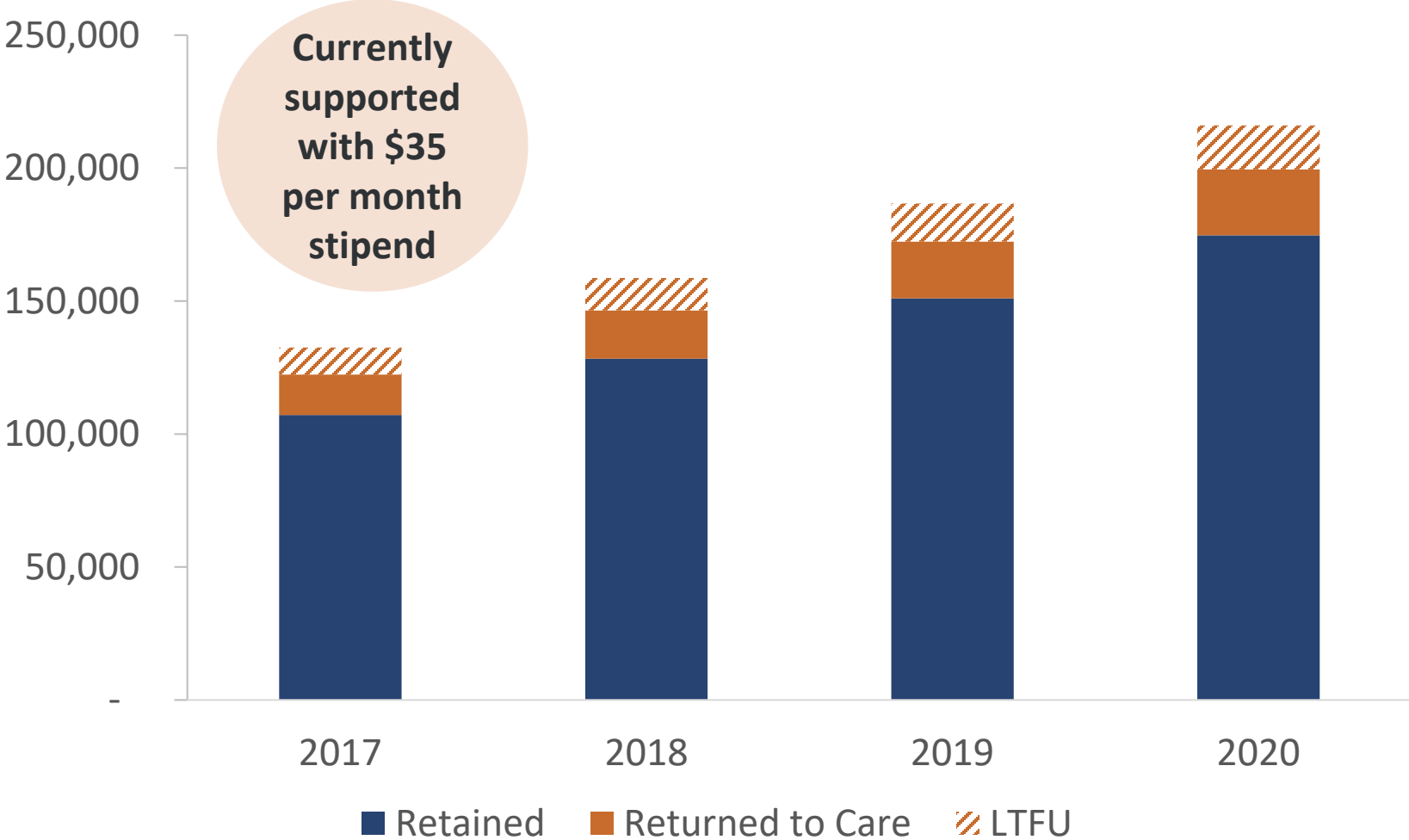


Source: GFATM and PEPFAR supply plan and HP+ calculation, assumes 2019–2020 funding remains constant at 2018 levels

Potential cost efficiency of \$28 million (2017-2020) from differentiated care for stable patients



Effects of Models of Hope peer counselling and defaulter tracking

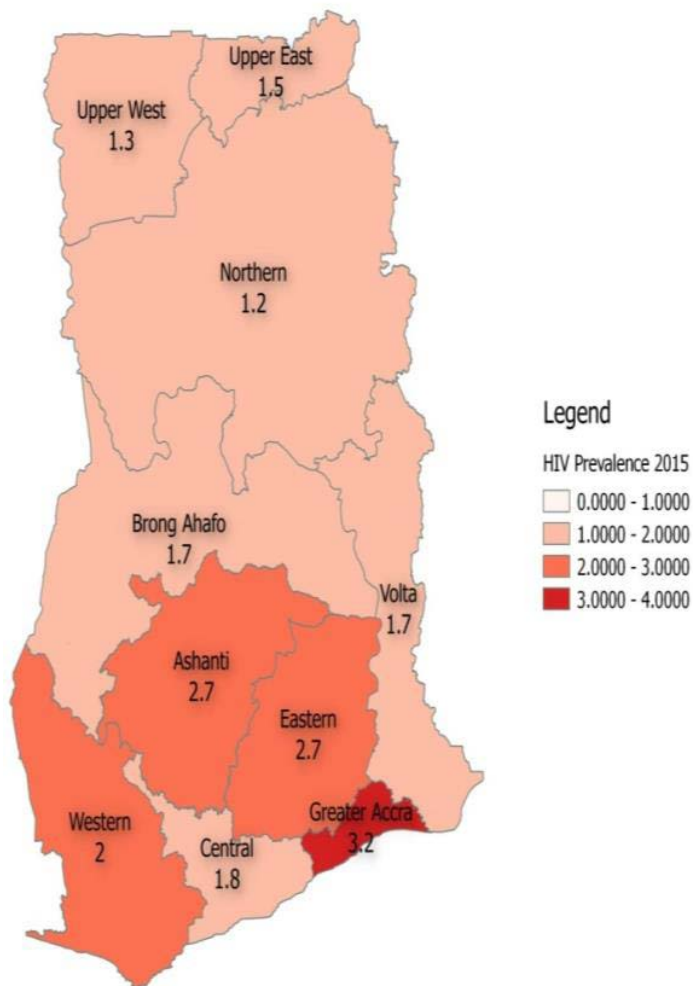


Source: Models of Hope interviews and HP+ analysis

Prioritization for HIV testing

2015 HIV SENTINEL SURVEY

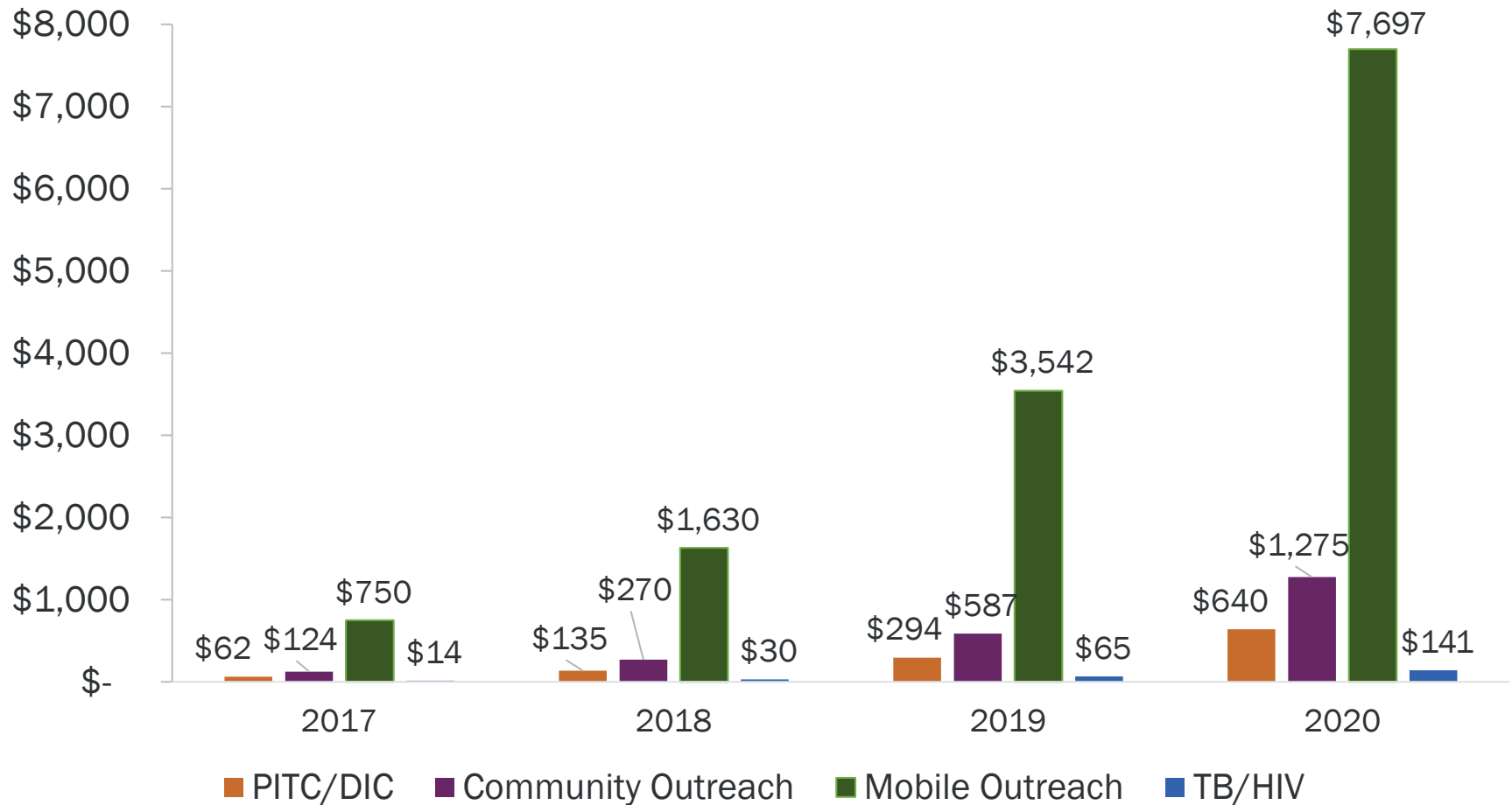
HIV Prevalence By Region



Key Population	Size	Prevalence	% of All New Infections
Men Who Have Sex with Men	30,579	17.5%	3.6%
Female Sex Workers and Partners	51,937	11.1%	18.4%
Prisoners	13,714	2.3%	0.8%
People Who Inject Drugs	9,598	16.9%	1.0%

Source: NACP 90-90-90 roadmap, NACP 2017 update, and HP+ interpolation

Over time, diminishing yields will increase the cost per positive patient identified



Key results and takeaways

- ✦ Country HIV testing and counseling strategies are limited when they do not consider varying costs by testing mode or specify a cost-efficient testing mix
 - Once high yielding populations are addressed, a revised targeted strategy is needed
- ✦ Models of Hope appears to be an effective way to reduce loss to follow-up at linkage and retention (~\$3.5 million additional cost per year)
- ✦ Differentiated care for stable patients adds efficiencies and increases number of patients that can be supported for same resource envelope

HP+

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