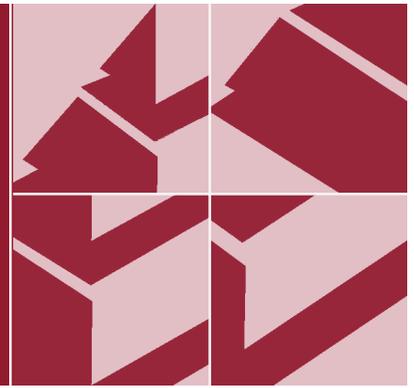




Partners for Health Reform *plus*

PHR *plus*

in brief en bref en breve



A New Tool to Cost HIV/AIDS Treatment

PHR*plus* is helping policymakers plan and cost country-specific national antiretroviral (ARV) treatment programs through an easy-to-use software tool called AIDS*TREATCOST* (ATC). The practical user-friendly tool, currently under development and soon to be pre-tested, allows policymakers to choose different ARV treatment scenarios, based on local data and resources, and estimate projected costs of each option over five years.

**six million
people need
ARV drugs
and only
230,000 have
access to them**

The ATC tool is based on a broader approach that looks not only at the services associated with ARV treatment and the system through which the services are delivered, but also at how variables such as the epidemiology of the HIV/AIDS epidemic, policy decisions about treatment eligibility, and access to health services influence demand for treatment.

The target audience for the information provided by the software is the relevant Ministries of Health, Finance, Planning, and national HIV/AIDS coordinating bodies

responsible for planning service delivery, infrastructure investment, and a funding strategy. Policymakers can use the ATC reports to support and inform program and policy decisions for comprehensive national responses to HIV/AIDS.

The ATC model uses simple, readily accessible spreadsheets and software with minimal hardware requirements.

To use the ATC tool, technical assistance would be provided to tailor the software for each country by entering country-specific data on demographics, resource costs, and ARV treatment program options.

Users would then create alternative scenarios by defining specific policy and program options. These include, for example, the number and type of facilities, providers, laboratory tests, drugs, and clinic visits needed to meet anticipated demand and effectively implement the chosen ARV treatment program.



Abt Associates Inc.
4800 Montgomery Lane
Suite 600

Bethesda, MD 20814 USA

Tel: 301-913-0500

Fax: 301-652-3916

URL: www.PHRproject.com

E-mail: PHR-InfoCenter@abtassoc.com



The **PHR*plus* Project** is funded by the U.S. Agency for International Development under contract no.

HRN-C-00-00-00019-00 and implemented by Abt Associates Inc. and partners:

Development Associates, Inc.

Emory University Rollins School of Public Health

Philoxenia International Travel, Inc.

Program for Appropriate Technology in Health
SAG Corporation

Social Sectors Development Strategies, Inc.

Training Resources Group

Tulane University School of Public Health and
Tropical Medicine

University Research Co., LLC

Choice of ARV treatment programs can range from focusing on monotherapy to prevent mother-to-child transmission of HIV/AIDS to broader programs that provide ARV treatment to all eligible adults.

The price tag for each ARV treatment scenario is estimated by looking not only at the cost of drugs, but also at what it will take to effectively introduce ARV treatment in individual countries. This includes, for example, costs of training staff, clinic visits, laboratory tests, and facility and laboratory equipment upgrades.

Once the treatment program elements have been defined and total costs estimated, the ATC software would then produce summary reports and graphs detailing one to five year projections of the costs of a fully implemented program.

Why is such a tool needed? Until now, ARV treatment in many low-resource countries has been available mostly through the private sector; treatment in the public sector is limited. Consequently, treatment is generally accessible only to those who can afford to pay or who are covered through health insurance or social security programs.

However, more and more countries globally are introducing ARV treatment programs throughout the public sector. According to the recent announcement by the Global Trust Fund for HIV/AIDS, TB, and Malaria, 21 of the 28 countries hit hard by the HIV/AIDS epidemic will use monies from the fund to purchase ARV drugs.

By providing treatment through the public as well as the private sector, countries will reach more people living with HIV/AIDS. In human terms, the level of need is sobering: six million people need ARV drugs and only

230,000 have access to them.¹ The extent to which this access to treatment could be expanded, and how much a comprehensive ARV treatment program would cost, is still being determined.

The PHR*plus* ATC tool concentrates on public-sector clinical management of HIV/AIDS and HIV-related opportunistic infections (OI). Private sector provision of ARV services is included as an option when done in collaboration with the public sector.

Some of the larger community-level care and support issues for people living with HIV/AIDS not addressed by the ATC tool include psychosocial or nutritional support and home-based care. In addition, some infrastructure development costs, such as ARV and OI drug management, are beyond the scope of the software model.

By focusing on ARV treatment services, the ATC model complements other costing tools available for HIV/AIDS prevention and care.

For more information, contact:
janet_edmond@abtassoc.com

¹ World Health Organization. 2002. *Scaling Up Antiretroviral Therapy in Resource Limited Settings: Guidelines for a Public Health Approach*. April 2002 draft. www.who.int/HIV_AIDS/HIV_AIDS_Care/ARV_Draft_April_2002.pdf