

# ESTABLISHING A UNIT COST REPOSITORY FOR HIV INTERVENTIONS IN UGANDA.

International AIDS and Economics Network

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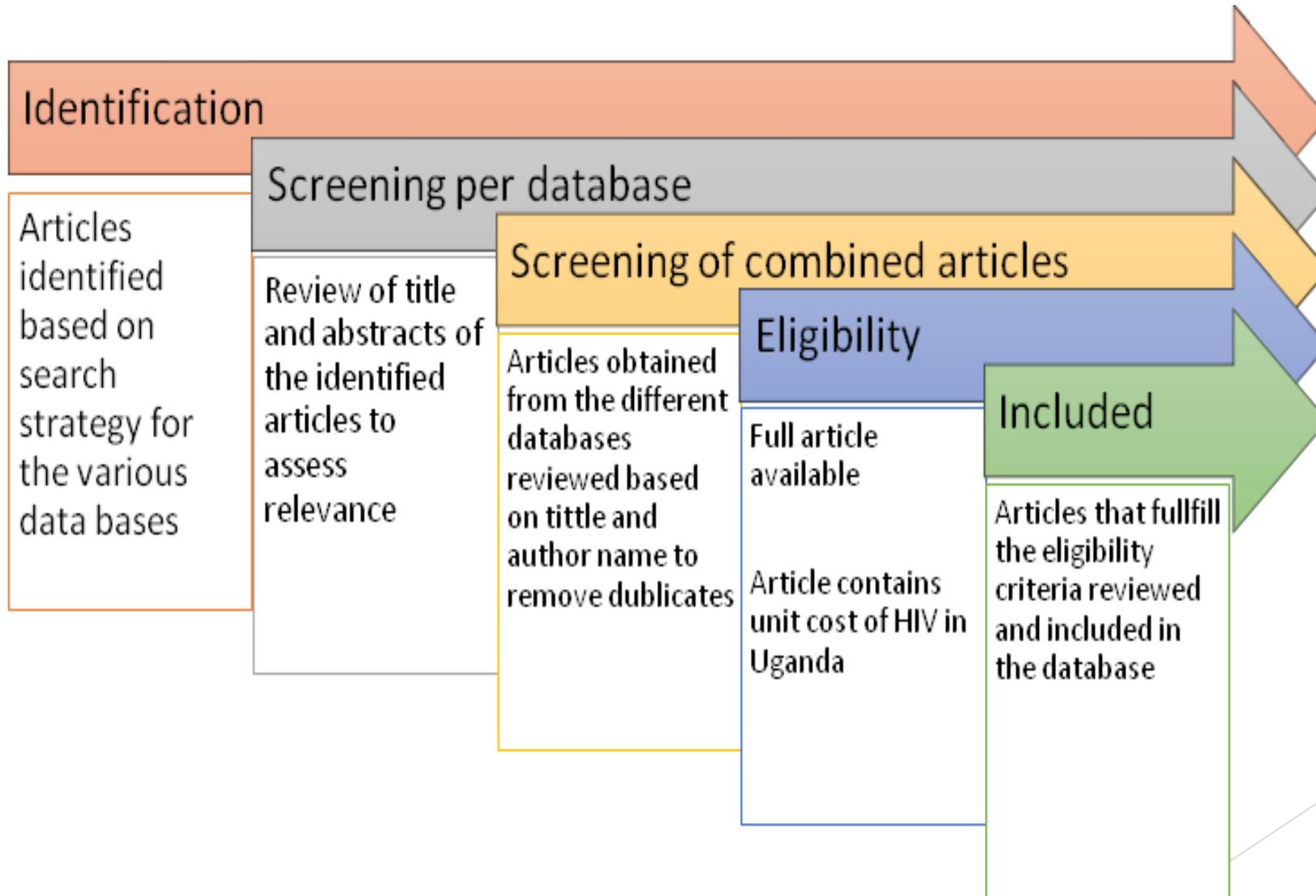
# Background

- ▶ HIV unit costs are a critical input in the process of ensuring a more rational use of the HIV resources in Uganda.
- ▶ Uganda currently lacks a comprehensive, up to date unit cost database or centralized unit cost repository.
- ▶ This has been mainly due to lack of data and lack of capacity by planners and stakeholders many stakeholders in the planning and resource mobilization structures in lack the capacity of conduct costing analyses.
- ▶ This study aimed at setting up a centralized unit cost repository for HIV interventions.

# Methodology

- ▶ A comprehensive review of literature for articles relevant to Uganda was conducted. The review period was 2005 to March 2015.
- ▶ The databases searched were: PUBMED, POPLINE, HIV Insite, Google Scholar and National AIDS Documentation and Information Centre (NADIC).
- ▶ The literature obtained was then captured in an MS Excel based grid chart with variables adapted from the Avenir Health Unit Cost Repository which is a global repository of unit costs for HIV interventions.

# Methodology continued: Process of review of published literature



# Methodology continued...

## Summary of the literature search

Data base	Key words	Total retrieved -Both	Total included based on tittle and abstract 1	Total included based on tittle and abstract 2	Total included
PUBMED	“HIV” “ Cost” “Uganda”	133	37	33	36
POPLINE	“HIV” AND “ Cost” AND “Uganda”	214* 128	34	35	35
Google Scholar	"HIV" "Cost" "Uganda" "Unit Cost"	1050	29	25	24
HIV InSite	“HIV” AND “ Cost” AND “Uganda”	49	4	4	4
Final included based on full article available **					54

# Findings

- ▶ We identified **59 studies** which contained unit costs for HIV interventions.
- ▶ From these studies, we were able to identify **186 unit costs** for various interventions.
- ▶ Unit costs are summarised by various characteristics such as; National Strategic Plan (NSP) thematic area, Investment Case intervention categories, population targeted by intervention and the sector through which the intervention is delivered.

# Findings continued...

- ▶ In the database however, costs were captured by NSP thematic areas of;
  1. Care and Treatment
  2. Prevention
  3. Social support
  4. Systems strengthening

# Findings continued...Sample of database.

A	B	C	D	E	F	G	H	I	J	K
Study ID	ROW ID	Authors	Title	Publication Information	Study link	Correspondence	Year of study	Category of Intervention	NSP Thematic areas	Investment framework category
101	1001	Alamo Stella-Talisu	Cost-Effectiveness of (J Acquir Immune Defic	(J Acquir Immune Defic	<a href="http://journals.lww.com">http://journals.lww.com</a>	Alamo Stella-Talisuna,	2014	HIV Care and Support	Social Support	Basic program activities
101	1002	Alamo Stella-Talisu	Cost-Effectiveness of (J Acquir Immune Defic	(J Acquir Immune Defic	<a href="http://journals.lww.com">http://journals.lww.com</a>	Alamo Stella-Talisuna,	2014	HIV Care and Support	Social Support	Basic program activities
101	1003	Alamo Stella-Talisu	Cost-Effectiveness of (J Acquir Immune Defic	(J Acquir Immune Defic	<a href="http://journals.lww.com">http://journals.lww.com</a>	Alamo Stella-Talisuna,	2014	HIV Care and Support	Social Support	Basic program activities
102	1004	Andreas Kuznik, Mohammed Lamorde	Evaluating the cost-effectiveness of PMTCT	Bull World Health Organ	<a href="http://www.who.int/bulletin">http://www.who.int/bulletin</a>	Mohammed Lamorde (	2012	PMTCT	Prevention	Basic program activities
102	1005	Andreas Kuznik, Mohammed Lamorde	Evaluating the cost-effectiveness of PMTCT	Bull World Health Organ	<a href="http://www.who.int/bulletin">http://www.who.int/bulletin</a>	Mohammed Lamorde (	2012	PMTCT	Prevention	Basic program activities
103	1006	Antonieta Medina	Cost Effectiveness of ART	PLoS ONE 7(4): e33672.	<a href="http://www.ncbi.nlm.nih.gov/pmc/articles/PMC33672/">http://www.ncbi.nlm.nih.gov/pmc/articles/PMC33672/</a>	gilksc@unaids.org	2012	ART	Care and Treatment	Basic program activities
103	1007	Antonieta Medina	Cost Effectiveness of ART	PLoS ONE 7(4): e33672.	<a href="http://www.ncbi.nlm.nih.gov/pmc/articles/PMC33672/">http://www.ncbi.nlm.nih.gov/pmc/articles/PMC33672/</a>	gilksc@unaids.org	2012	ART	Care and Treatment	Basic program activities
103	1008	Antonieta Medina	Cost Effectiveness of ART	PLoS ONE 7(4): e33672.	<a href="http://www.ncbi.nlm.nih.gov/pmc/articles/PMC33672/">http://www.ncbi.nlm.nih.gov/pmc/articles/PMC33672/</a>	gilksc@unaids.org	2012	ART	Care and Treatment	Basic program activities
103	1009	Antonieta Medina	Cost Effectiveness of ART	PLoS ONE 7(4): e33672.	<a href="http://www.ncbi.nlm.nih.gov/pmc/articles/PMC33672/">http://www.ncbi.nlm.nih.gov/pmc/articles/PMC33672/</a>	gilksc@unaids.org	2012	ART	Care and Treatment	Basic program activities
104	1010	Bertran Auvert, Elliot Marseillea	Estimating the Reso	PLoS ONE 3(8): e2679.	<a href="http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2679/">http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2679/</a>	bertran.auvert@uvsq.fr	2008	Male circumcision	Prevention	Basic program activities
105	1011	Bilal S. Ahmed, Bilal S. Ahmed	Does a significant re	Trans R Soc Trop Med H	<a href="http://www.ncbi.nlm.nih.gov/pmc/articles/PMC33672/">http://www.ncbi.nlm.nih.gov/pmc/articles/PMC33672/</a>	Bilal Ahmed 58B Unive	2014	ART	Care and Treatment	Basic program activities
105	1012	Bilal S. Ahmed, Bilal S. Ahmed	Does a significant re	Trans R Soc Trop Med H	<a href="http://www.ncbi.nlm.nih.gov/pmc/articles/PMC33672/">http://www.ncbi.nlm.nih.gov/pmc/articles/PMC33672/</a>	Bilal Ahmed 58B Unive	2014	ART	Care and Treatment	Basic program activities
106	1013	Chang LW, Kagaayi	Cost analyses of pee	AIDS Care. 2012; DOI:10.1080/09540121.2012.72	<a href="http://dx.doi.org/10.1080/09540121.2012.72">http://dx.doi.org/10.1080/09540121.2012.72</a>	Department of Medicin	2012	HIV Care and Support	Social Support	Basic program activities
106	1014	Chang LW, Kagaayi	Cost analyses of pee	AIDS Care. 2012; DOI:10.1080/09540121.2012.72	<a href="http://dx.doi.org/10.1080/09540121.2012.72">http://dx.doi.org/10.1080/09540121.2012.72</a>	Department of Medicin	2012	HIV Care and Support	Social Support	Basic program activities
107	1015	Charles Kiyaga1, Hassan Kiyaga1	Uganda's New Natio	Published: November 1	<a href="http://journals.plos.org">http://journals.plos.org</a>	E-mail: hsendagire@ya	2012	VCT	Prevention	Basic program activities
107	1016	Charles Kiyaga1, Hassan Kiyaga1	Uganda's New Natio	Published: November 1	<a href="http://journals.plos.org">http://journals.plos.org</a>	E-mail: hsendagire@ya	2014	VCT	Prevention	Basic program activities
108	1017	LENNIE S.B. KYOMU	PROSPECTS FOR FIN	PROSPECTS FOR FINAN	<a href="https://tspace.library.utoronto.ca/handle/1807/100000">https://tspace.library.utoronto.ca/handle/1807/100000</a>		2009	ART	Care and Treatment	Basic program activities
109	1018	Elliot Marseillea, Jo	The costs and benef	AIDS 2006, 20:907-914;	<a href="http://www.axios-group.com/assets/Uploads/">http://www.axios-group.com/assets/Uploads/</a>		2006	ART	Care and Treatment	Basic program activities
109	1019	Elliot Marseillea, Jo	The costs and benef	AIDS 2006, 20:907-914;	<a href="http://www.axios-group.com/assets/Uploads/">http://www.axios-group.com/assets/Uploads/</a>		2006	ART	Care and Treatment	Basic program activities

Unit Cost per Sector

Unit Cost per Target Population

Unit Cost Data

Variable description



## Findings continued...

- ▶ Unit costs obtained represented areas like care and treatment (67), prevention (47) while 7 unit costs were obtained for social support and 1 unit cost on systems development.

Area	Unit costs obtained
Care and treatment	67
Prevention	47
Social support	7
Systems development	1
<b>Total number of studies containing unit costs</b>	<b>59</b>

# Findings continued...

- ▶ The areas that lack unit cost data are:
  1. prevention interventions
  2. program management costs
  3. costs of interventions of synergies with other sectors such as gender based violence and systems strengthening interventions.

# Conclusion

- ▶ The centralised unit cost repository set up provides an opportunity for policy makers and all the actors in the HIV response to access all the unit costs of interventions that are currently available.
- ▶ However, Uganda still lacks critical unit cost information especially with regards to service delivery models and systems development.
- ▶ Challenge of different parameters resulting into different costs for the same interventions.

## Illustration of different cost parameters...

Unit Cost by NSP Categories	Average of Economic Unit Cost- 2015	Average of Financial Unit Cost- 2015 USD
<b>Prevention</b>		
<b><i>Male circumcision</i></b>	2,124.2	35.4
Cost per male circumcised using surgical method		23.5
Cost per client for medical male circumcision		35.2
Cost per male circumcised using prepex		32.1
Cost per male circumcised by medical officer	19.6	
Cost per male circumcised by surgeon	22.7	
Cost per male circumcision		10.6
Cost per male circumcision using a disposable circumcision kit		8.9
Cost per male circumcision using a re-usable circumcision kit		19.2
Cost per surgical male circumcision		71.6
Cost per surgical male circumcision by medical officer		20.9
Cost per surgical male circumcision by surgeon		23.8
cost per voluntary male circumcision	31.7	
Costs per infection averted due to male circumcision	2,824.1	
<b><i>Male circumcision</i></b>		55.7
Cost per neonatal surgical male circumcision		38.7
Cost per surgical male circumcision		72.7

# Conclusion continued/ recommendations

- ▶ Further targeted studies should be commissioned to look at unit costs key unit costs needs.
- ▶ Uganda AIDS Commission should act as custodian of the unit cost database to ensure easy access of the repository by stakeholders.
- ▶ Capacity building programs in costing should be done for planners at all levels within the health system to enable them appreciate the importance of unit costs in ensuring equity, efficiency and sustainability in Uganda's HIV/AIDS response.

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**THANK YOU FOR YOUR ATTENTION**