Private sector opportunities to deliver oral PrEP to women

*OPTIONS refers to PrEP as the product category (inclusive of all formulations of ARV-based HIV prevention), and refers to specific products by formulation designation and/or name (e.g. oral PrEP/TDF-FTC, topical PrEP/dapivirine ring, injectable PrEP/cabotegravir, etc.).

**BACKGROUND**

The Important Role of the Private Sector

- Introduction of oral PrEP in Africa has primarily focused on public sector delivery channels. However, a significant number of women and girls at risk for HIV access health services through the private sector seeking confidentiality, convenience, and/or consistency of care.
- Currently, 20-40% of women and girls in Kenya, Zimbabwe and South Africa use the private sector for HIV counseling and testing and 62% of unmarried young women across sub-Saharan Africa utilize the private sector for family planning.

**Research Objectives**

- The objective of this research was to explore potential opportunities to improve access and uptake of oral PrEP for women and adolescent girls by making PrEP available through private sector channels.
- This research was designed to inform planning by national governments, international donors, and implementing agencies by providing an overview of the opportunities and considerations for delivering oral PrEP through private sector channels.
- Our aim was also to develop a consistent framework that could be used in other countries, based on the work conducted in our three focus countries (Kenya, South Africa, and Zimbabwe).

**METHODS**

Research Methodology

- Our team analyzed existing publications, HIV incidence and health services utilization and expenditure data and conducted 30 interviews with implementers, donors and policy experts in Kenya, South Africa and Zimbabwe.
- Based on this input, we assessed six delivery channels (commercial facilities, private doctors, NGO clinics and social franchises, pharmacies, faith-based organizations, and university clinics) against a six-factor framework.
- The framework included 3 factors related to the accessibility of these channels for women and adolescent girls at high-risk of HIV and 3 factors related to the capability of these channels to deliver oral PrEP to women and adolescent girls.

**RESULTS**

1. We assessed six private sector healthcare channels in South Africa, Kenya and Zimbabwe

2. Six factors were identified by experts as relevant to assess a healthcare channel for oral PrEP delivery

3. Each of the channels we assessed had different strengths and weaknesses (Kenya example)

4. Considering these factors, some private sector channels present stronger opportunities for oral PrEP

5. Channels also differ by the populations that they serve, which vary by age, geography, and income

6. Results varied across South Africa, Kenya and Zimbabwe

**CONCLUSIONS**

There is an opportunity to reach women and girls with oral PrEP through private channels

- Assessments of Kenya, South Africa and Zimbabwe found that many women access, prefer and can afford subsidized private health services.
- Four private channels were identified for potential delivery of oral PrEP in at least one country:
  - 1. Private Doctors due to affordability, reach and capacity to deliver confidential, quality care consistently over time with the same individual.
  - 2. NGO Clinics/Social Franchises due to their ability to reach lower-income women with high-quality, subsidized care.
  - 3. Faith-Based Organizations due to their ability to reach rural populations in some countries.
  - 4. Higher Education Institutions due to extensive HIV testing and family planning services for difficult-to-reach populations.
- While commercial facilities have the reputation for delivering high quality care, they are often unaffordable. Prescription and testing requirements for oral PrEP bulky limit near-term efforts in pharmacies to information dissemination in most settings.

Public private partnerships will be needed to realize these opportunities

- Potential challenges to private sector delivery of oral PrEP include limited ability to track and follow up patients, affordability of services and products for the majority of women, and lack of HIV specialization among providers.
- These challenges could be addressed through public-private partnerships that invest in subsidization of oral PrEP, shared patient monitoring systems, adherence and retention systems, and adaptation of public sector training for private sector providers.
- In the near-term, some channels could be considered as effective ways to distribute information about oral PrEP even if they are not providing oral PrEP services – this is especially true for pharmacies and university clinics.