



# THE SUSTAINABLE FINANCING INITIATIVE IN BOTSWANA

Funded by the United States President's Emergency Plan for AIDS Relief (PEPFAR), the Sustainable Financing Initiative for HIV/AIDS (SFI) aims to increase sustainability of the HIV response by promoting shared financial responsibility with host country governments. Since 2014, the U.S. Agency for International Development (USAID) has implemented SFI in 16 countries and two regional programs, with a budget of nearly \$48 million.

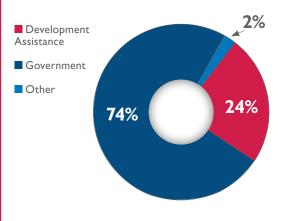
Botswana has made significant progress in its response to the HIV epidemic in recent years despite the high HIV prevalence in the country. In 2019 there were an estimated 360,183 people living with HIV (PLHIV) in Botswana, accounting for 14.8 percent of the population. That year, 6,405 people were newly infected with HIV and 4,791 died from an AIDS-related illness.<sup>1</sup> The Government of Botswana (GOB) is committed to reducing the effects of HIV/AIDS by increasingly financing its HIV response, up to 74 percent in 2017. While it seeks to provide universal health coverage (UHC) for all, the health system suffers from inefficient use of resources, overburdened public healthcare facilities, and inadequate human resources-all obstacles to controlling the HIV epidemic.

In collaboration with the GOB and other stakeholders, SFI improved the capacity of the Ministry of Health and Wellness to establish and manage public-private contracts for health services. It also built local capacity by strengthening government workers' public financial management skills and advocating for inclusive policies and benefits for PLHIV in the Universal Health Services Package. These efforts represent important milestones in Botswana's HIV response.

#### AT A GLANCE

HIV/AIDS Response Funding Sources in 2017<sup>2</sup>

## Botswana total: \$190 million



## How SFI Contributes to a Sustainable HIV Response



SFI is piloting **innovative** decentralized service delivery models, including

partnering with private providers to improve antiretroviral (ARV) delivery.

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SFI advocated for the GOB to adopt pooled procurement platforms by

conducting assessments that support evidencebased decision making.



SFI institutionalized resource tracking to increase efficiencies in HIV expenditures. It also built financial

### management skills

and literacy that improved health spending efficiency at the national and sub-national levels.

#### Spotlight: Decentralized Drug Delivery (DDD) Models

SFI is providing technical support to Botswana to create DDD models for ARVs through partnerships with private pharmacies and clinics as well as community pick-up points. This will provide easy access to ARVs for stable patients, reduce the burden on public sector facilities, and increase the quality of health care provided to PLHIV.

"Health should not necessarily be thought of as a commodity—it is not a proper market, [rather], it should be thought of as a right."

- Representative, Associated Fund Administrators (AFA) Botswana



PEPFAR (2020). Botswana Country Operational Plan COP 2020. Strategic Direction Summary. April 2020.

<sup>2</sup> Institute for Health Metrics and Evaluation (IHME) (2020). Financing Global Health Visualization. Seattle, WA: IHME, University of Washington.

SINCE 2018, SFI HAS FOCUSED ON THREE KEY AREAS IN BOTSWANA: PUBLIC FINANCIAL MANAGEMENT, PRIVATE SECTOR ENGAGEMENT, AND FINANCIAL PROTECTION. WITH ACTIVITIES AIMED AT INCREASING EFFICIENCY IN THE HEALTH SECTOR, STRENGTHENING PRIVATE SECTOR ENGAGEMENT AND ALIGNING POLICIES IN SUPPORT OF UNIVERSAL HEALTHCARE, SFI IS LAYING THE GROUNDWORK FOR A MORE SUSTAINABLE HIV RESPONSE.

## **Private Sector Engagement**

As a result of SFI's advocacy, the Ministry of Health and Wellness increased health system efficiency by outsourcing nonclinical services at seven district and regional hospitals to private suppliers. This shift increased transparency and improved vendor service quality. The ministry also built the capacity of senior hospital administrators by holding workshops on contracting and public-private partnerships. Additionally, SFI conducted an assessment on the private sector landscape to identify future opportunities for private sector engagement.

Public health facilities are often overburdened, covering the 83 percent of the population not covered by any private non-profit

Medical Aids Scheme (MAS), in which membership is often restricted. SFI supports involving private health facilities like those participating in MAS to serve PLHIV who are willing and able to pay for services, which alleviates pressure on public sector facilities.

To give stable patients convenient access to care, SFI has begun piloting decentralized service delivery through the private sector. SFI is **piloting three different models that allow PLHIV to refill drugs** at private clinics and pharmacies and distribute ARVs to PLHIV homes using the postal service. This work is anticipated to increase access to ARVs for over 35,000 PLHIV by 2021.

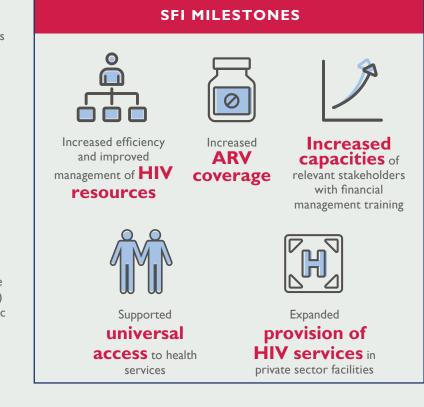
## **Public Financial Management**

To make the most of available resources, **SFI is committed to increasing the efficiency of HIV/AIDS programs.** SFI developed and rolled out Financial Management training packages for budget holders and managers at the sub-national and national levels. Additionally, SFI advocated for GOB to adopt pooled procurement using evidence and information generated from global, regional, and local assessments.

Capacity building is a vital part of SFI's public financial management efforts. By harmonizing previously separate System of Health Accounts (SHA) and National AIDS Spending Assessment (NASA) tools and institutionalizing health and HIV expenditure tracking, **SFI is working to create a more efficient and sustainable system for expenditure tracking.** 

## **Financial Protection**

SFI provided the GOB with cost analyses of an HIV Basic Service Package as part of the Universal Health Services Package (UHSP) insurance solution. The UHSP insurance solution provides a basic level of health coverage available to all citizens. **By estimating the cost of HIV services, SFI is helping Botswana to institutionalize HIV services as part of their healthcare approach**. In addition, SFI collaborated with the GOB and Medical Aid Schemes to improve cost recovery for the HIV response.



## SUMMARY

SFI's efforts in Botswana to strengthen financial management capacity, leverage the private sector to increase access to ARVs and viral load testing, and advocate for universal health coverage will help create a sustainable HIV response. SFI's experience in Botswana suggests that building stakeholder capacity can increase public resources and lead to lasting achievements on the path to epidemic control.

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