

THE SUSTAINABLE FINANCING INITIATIVE IN NAMIBIA

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.

Namibia has made tremendous progress in controlling the HIV epidemic and is near its 95-95-95 targets. Estimates indicate that in 2020, approximately 210,000 people (8.3 percent of the population) were living with HIV (PLHIV). About 5,400 people were newly infected with HIV, and close to 2,600 people died from an AIDS-related illness.¹ The Government of the Republic of Namibia (GRN) is committed to health spending (at 15 percent of General Government Expenditure (GGE) per year); increasing program and budget efficacy will be critical to ensure sustainable financing and systems are in place to maintain the progress made to date.

In collaboration with the GRN and relevant stakeholders, SFI focused on increasing domestic resources to close the HIV financing gap, leading the development of a sustainability strategy, implementing reforms to move towards universal health coverage, and engaging with the private sector to form new partnerships. These efforts represent important milestones in Namibia's HIV response.

AT A GLANCE

HIV/AIDS Response Funding Sources in 2017²

Namibia total: \$250 million

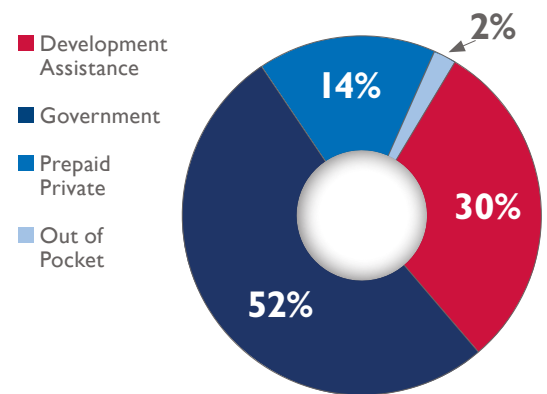


PHOTO: SHOPSPLUS



SFI conducted a survey of over 400 private facilities to inform models for private sector involvement in Namibia's HIV response.



Based on the survey results, SFI developed and proposed three different models of private sector engagement for the GRN's consideration.

How SFI Contributes to a Sustainable HIV Response



SFI-supported analysis made the case for Namibia to utilize the private sector to **increase access to pre-exposure prophylaxis (PrEP)** in order to reduce new HIV infections.



SFI is supporting Namibia's efforts to **close the HIV/AIDS financing gap** by increasing domestic resource mobilization, engaging the private sector, and implementing reforms to move toward universal health coverage.



SFI **strengthened local capacity**, achieving a **57 percent improvement** in resource tracking practices. It also helped improve budget execution for line items related to HIV/AIDS services.

¹ PEPFAR (2020). Namibia Country Operational Plan COP 2020. Strategic Direction Summary. March 2020.

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

SINCE 2019, SFI HAS FOCUSED ON THREE KEY AREAS IN NAMIBIA: PUBLIC FINANCIAL MANAGEMENT, PRIVATE SECTOR ENGAGEMENT, AND FINANCIAL PROTECTION. AS A RESULT OF THIS INITIATIVE, THE COUNTRY HAS IMPLEMENTED REFORMS TO MOVE TOWARD UNIVERSAL HEALTH COVERAGE AND ENSURE A MORE SUSTAINABLE HIV/AIDS RESPONSE AS DONOR FINANCING DIMINISHES.

Public Financial Management

More than one-third (36 percent) of Namibia's donor funding for health care goes to HIV/AIDS programming. As part of its HIV response, **SFI is engaging many stakeholders, including policymakers, funding partners, and researchers, to support sustainability planning for HIV.** In addition, SFI also supported the development of a standardized HIV service package. The Package of HIV/AIDS Services for Epidemic Control provides a concrete way for Namibia's government to integrate HIV services into its universal health coverage plan. It further supports sustainability by transitioning HIV resources from donor to government financing.

SFI worked with the Resource Tracking Technical Working Group and the Ministry of Health and Social Services (MOHSS) to **strengthen resource tracking, which will improve the efficiency of services as well as budget execution.** SFI provided capacity building and mentoring support in hospitals to ensure staff understand the resource tracking methodology, approach, and results.

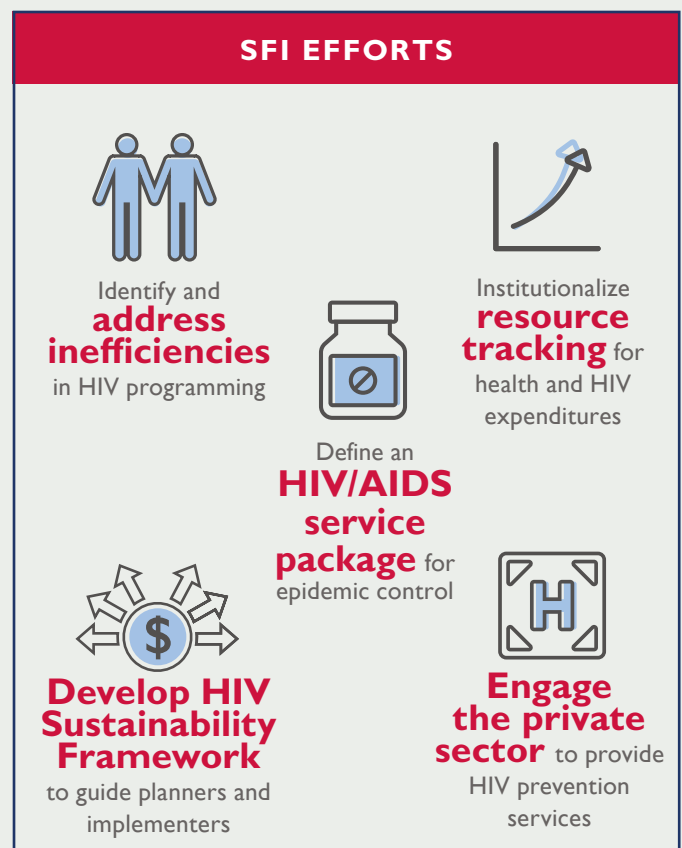
SFI led an efficiency study of hospitals to expand Namibia's fiscal space for HIV funding. This study found that 52 percent of hospitals had technical inefficiencies, presenting opportunities for savings. Addressing the inefficiencies found by this study would **save 32 percent in clinical staff costs and 46 percent in recurring purchases.**

Private Sector Engagement

The goals of Namibia's National Strategic Framework of HIV/AIDS Response are to reduce new HIV infections and decrease disparities in HIV services across genders and regions. **SFI is supporting Namibia to implement a targeted prevention system in hotspot areas, to develop a focused testing service, and to scale up differentiated service delivery methods to improve treatment adherence.** SFI conducted market research to inform expansion of private sector provision of PrEP. A potential market of 51,000 persons in and around the capital Windhoek could be served via scaled up access to preventative care. By utilizing existing private sector infrastructure, the GRN will be able to sustainably scale up PrEP provision.

Financial Protection

Achieving greater efficiency within the health sector is a critical issue for ensuring sustainability of the HIV response in Namibia. The Public Sector Employee Medical Aid Scheme (PSEMAS) spends more than two times the amount in medicines and supplies per beneficiary than MOHSS. Procuring medicines and supplies for PSEMAS via MOHSS would **reduce the cost of providing medicine and services for PLHIV and would generate savings** that could be reallocated to HIV services currently dependent on donor funding. To realize the potential savings, SFI will conduct a cost saving analysis and design up to two pilots for distributing and dispensing HIV commodities. SFI is also supporting reforms to achieve universal health coverage.



SUMMARY

SFI has supported Namibia's journey to self-reliance by increasing domestic resource mobilization to close the HIV financing gap, making the case for private sector facilities to provide PrEP, and addressing inefficiencies in financial protection schemes. To stay on target, Namibia will need to continue advocating for universal health coverage, increasingly leverage private sector capacity to scale up provision of PrEP and other HIV services, and further develop its sustainable HIV response.