

“Nothing for us without us”: Learning from the experience of people living with HIV to optimize decentralization of HIV services

Decentralized Drug Distribution (DDD) Learning Collaborative

March 11, 2021



Session 10: Learning Collaborative Agenda (7-8:30 am EST)

- **Client Perspectives on Decentralized Distribution of ARVs at Private Pharmacies**
Marga Eichleay | *FHI 360*
- **Pelebox Smart Lockers - Improving Access to Medicine**
Neo Hutiri | *Technovera*
- **Panel discussion on ensuring that DDD models meet the needs of PLHIV**
Dr. Stephen Waititi | *Mildmay International*
Folasade Olufunke Lawal | *Victory Drugs Pharmacy*
Margaret Happy | *Advocacy for Quality Health*
- **Q&A**
Brian Pedersen | *FHI 360*





Brian Pedersen
Facilitator



Marga Eichleay
Presenter



Neo Hutiri
Presenter



Dr. Stephen Watiti
Panelist



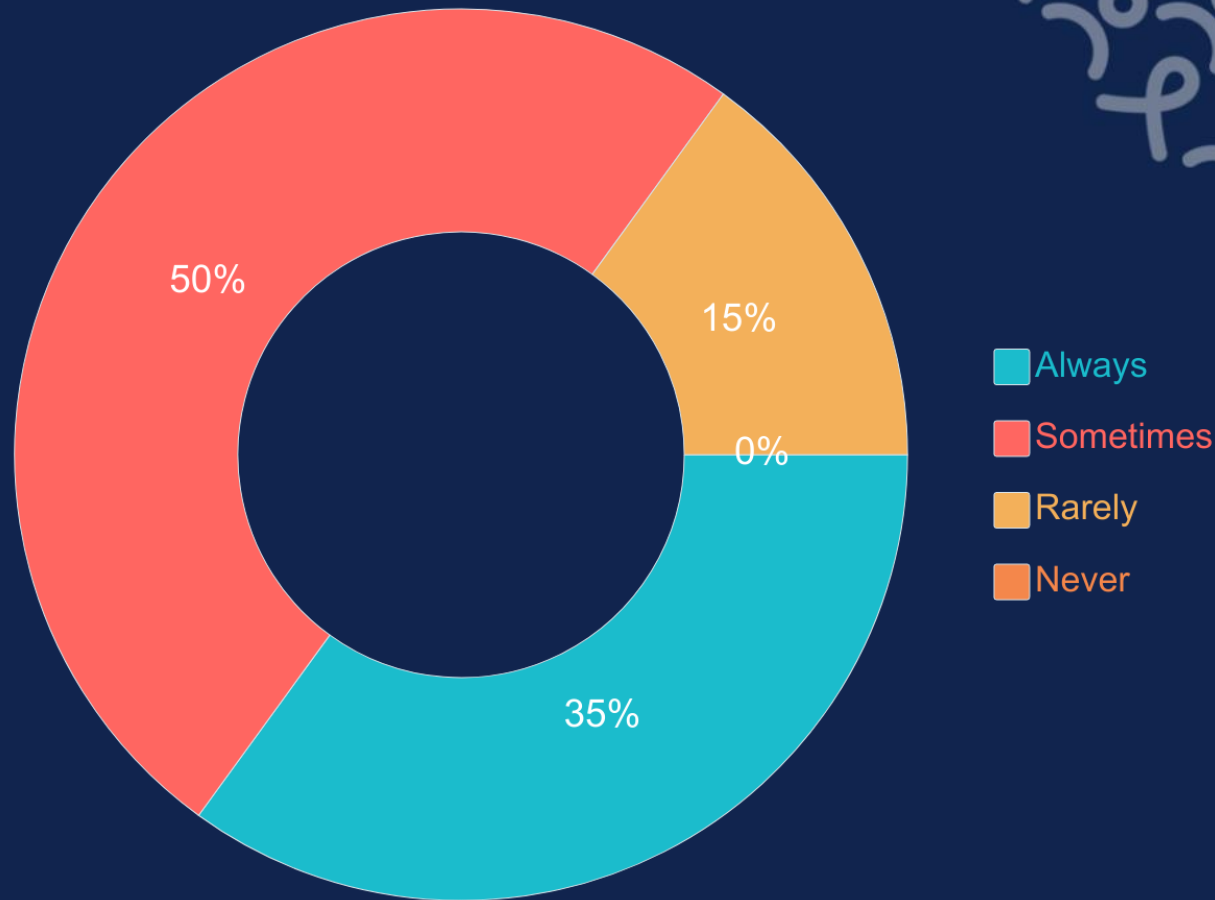
Folasade Lawal
Panelist



Margaret Happy
Panelist

Poll:

How often do you gather and apply client perspectives when designing a new service or program?



Private sector models

- What are the types of private sector HIV services?
 - Hospitals or private wings of hospitals
 - Private clinics
 - Private pharmacies
 - Automated models
 - Courier services
- What roles could they play in increasing access to HIV services?
- What obstacles do we know or anticipate?
 - Paying for services
 - Ability to pay and willingness to pay?
- Who can support payments (government, donors, health insurance)



Private sector models can help address some of the challenges, offer convenience

Why gather (and respond to) client perspectives?



Cross-Country Voices from People Living with HIV: Decentralized Distribution of ARVs at Private Pharmacies

Marga Eichleay

Senior Research Associate, FHI360





Private pharmacy model

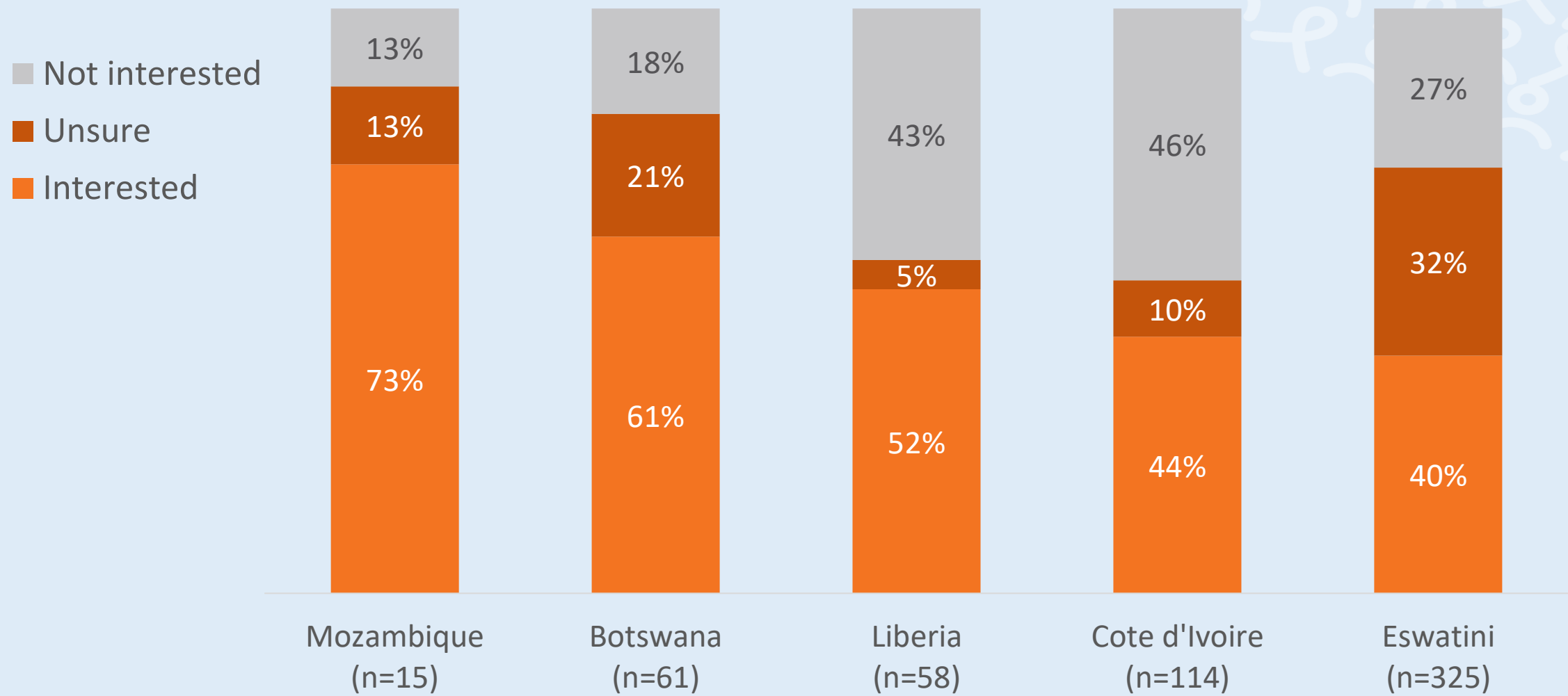
- Clients offered an option to pick up ARVs at a particular private pharmacy
- Private pharmacy staff trained to:
 - dispense ARVs
 - offer counseling
 - provide information to *public* facility about patients refills and ARV accountability
- Client may pay a small service fee but the cost of drugs is covered by government or donors
- Clients return to the *public* facility for clinical reviews and monitoring tests
- Clients can return to the *public* facility at any time

Gathering Client Perspectives

- Rapid, remote interviews
- Adults living with HIV on ART
- Assessed benefits and challenges
- Methods varied by country – all convenience samples



Client Interest in Picking Up ARVs at Private Pharmacies



Anticipated Benefits

- Convenient
 - Closer to home
 - Open after hours
 - Fast service
- Friendly staff
- Guaranteed stock
- Privacy

“The service is fast and the private pharmacy is very close. I am a widow, I have 2 kids to feed, and I leave work late. At the private pharmacy I could easily pick up my ARVs.”

- Mozambique

“Our bosses feel we are always asking for time to go to clinics.”

-Botswana

“They have good medicine and give me what I want”

-Liberia

Client Concerns

- Lack of full service provision at pharmacy
- Higher Cost
- Lack of Privacy

“It's easier at a health facility because you get all the services at the same place.”
-Eswatini

“Not comfortable to pay - since I am poor. If so, I am better off getting at the public facility.”
-Malawi

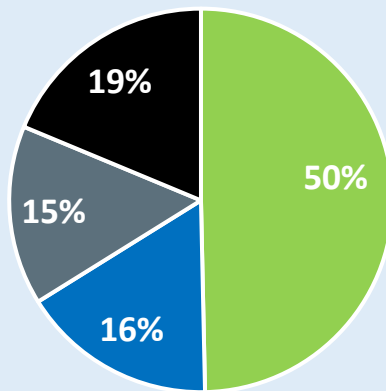
“I would be concerned about stigma because in our zone all of us know each other so when I enter a pharmacy somebody from my zone could enter and see that I'm picking up ARVs.”
- Mozambique

Perceptions of Privacy at Private Pharmacies

Do private pharmacies offer more or less privacy than public clinics?

Eswatini

■ More privacy ■ Less privacy
■ Same ■ No response



Pros

- + Fewer people
- + Staff trained in confidentiality

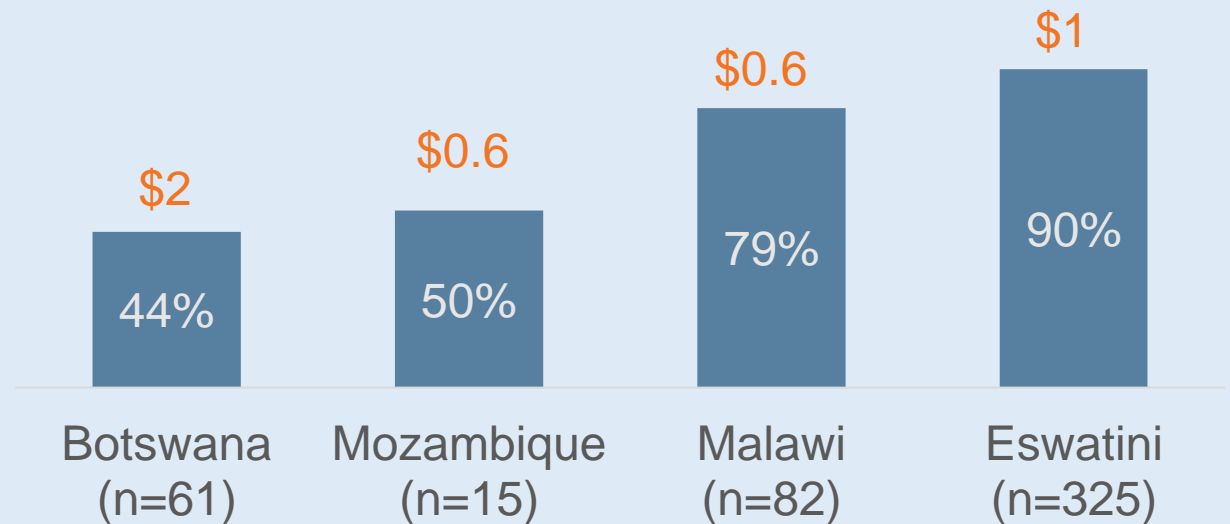
Cons

- They are all from my community
- They are all at the counter at the same time
- No private space / consultation room

Client willingness to pay per pick-up

- Many clients willing to pay
- Average fee considered reasonable was between 60 cents and \$2 per pick-up


Willingness to pay for ARV pick up in private sector



*All costs converted to USD

Conclusions & Implications

- Clients interested in convenience of DDD in private pharmacies
- Concerns about privacy and incomplete service provision
- While some willing to pay, fees may be prohibitive
- Considerations for program design:
 - How can we ensure privacy in private pharmacy setting?
 - How communicate with clients to alleviate concerns?
 - How can we ensure choice of pick-up location?



"I won't have the money to pay."

"Everyone will see me taking my medicine!"

"It would be close and that would be easier for me."

"It is more private because there are no queues."

"I like how they attend to me at the private pharmacy."

"I might not be able to go to the public health facility for consultation and then go to the private pharmacy to pick up my ARVs all the time. It could cause some to abandon ARVs."



Pelebox Smart Lockers

Improving Access to
Medicine

Mar 2021

**Peie
box**
think inside.

TECHNOVERA

The Problem



Low income patient collecting monthly chronic medication from state healthcare facilities often wait hours in long queues



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**Pelebox
Target**



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3,5

Hours

Collection Time



2

MIN

Collection Time



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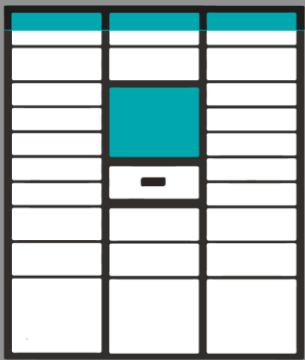




Medication gets packed and loaded for collection



Patient collect medication at Pelebox using a one-time-pin



Medication is then placed in a compartment which is reserved for a patient



Patient receives an SMS containing a one-time-pin for collection



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**pele
box**

Results



TECHNOVERA

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3,5

Hours

Collection Time



22

Seconds

Collection Time

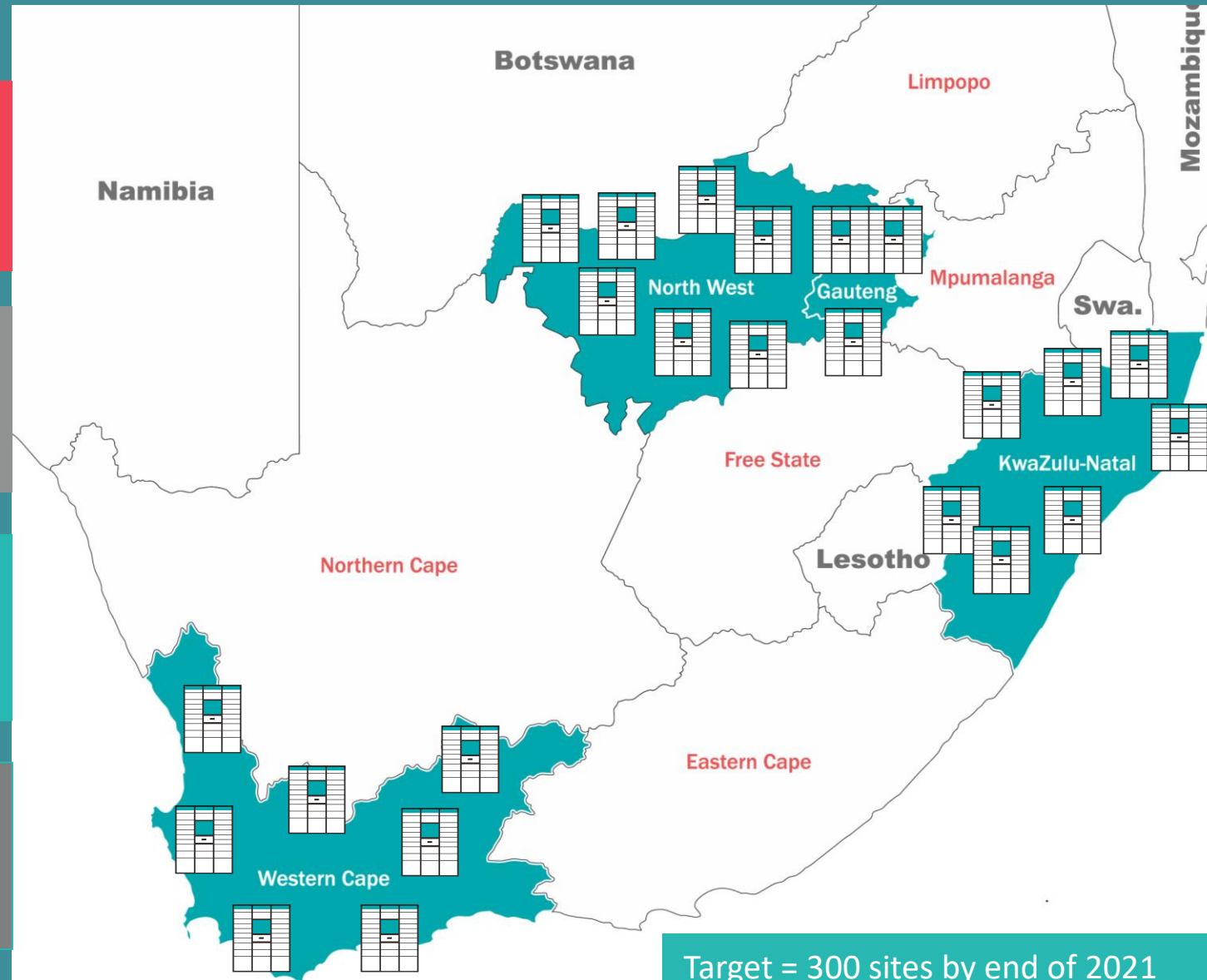
Implementation in South Africa

67 Operational Pelebox Smart Lockers in South Africa & Namibia

23 Additional committed sites under manufacturing or installation

Partner with State & NGO's with a mission to increase access to care

Technovera has an agreement with the National Department of Health





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TIME
**BEST
INVENTIONS
2019**



THANK YOU

Neo Hutiri

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www.pelebox.com

TECHNOVERA

Technovera is a social enterprise focused on developing simple digital technologies with the aim of improving the last and first mile access in Africa.

We've developed Pelebox, a smart locker system that enables clients to collect their items in under 22 seconds instead of waiting hours in queues and worrying about a collection process that is limited by operating hours.



Core: "Enabling patients to access quality treatment easily"

Focus Area: "Reducing **average waiting time** for patients collecting chronic medication at healthcare facilities in Southern Africa"

Mission: "Technovera aims to be a leading provider of innovative and inclusive technology-enabled solutions that improve access to quality healthcare in Africa"





THANK YOU



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Panel discussion



Dr. Stephen Watiti
Panelist



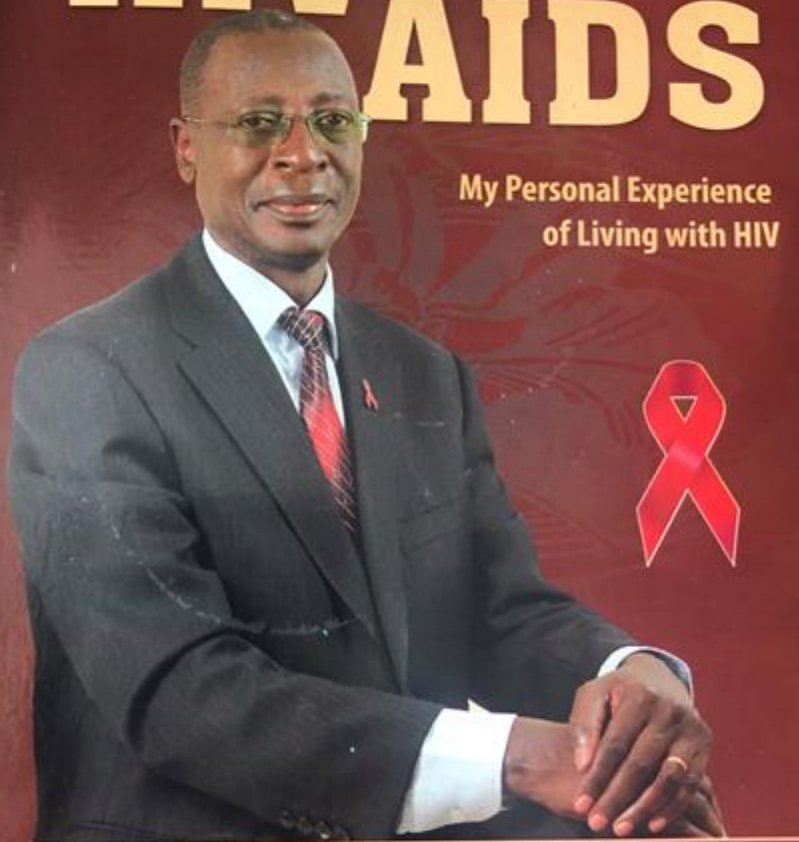
Folasade Lawal
Panelist



Margaret Happy
Panelist

Conquering **HIV** and **AIDS**

My Personal Experience
of Living with HIV



DR. STEPHEN WATITI

Foreword by Michel Sidibe - Executive Director, UNAIDS



Q&A



Upcoming Session

**"Nothing for us without us":
Adapting decentralized drug distribution
models to meet the needs of key populations**

Thursday, April 8, 2021

7:00 AM-8:30 AM ETD | 13:00-14:30 EAT

[Register here](#)

