RDTs in the private sector, PSI experience

Tanya Shewchuk
Project Director, ACTwatch & Operational Research Diagnosis
Overview of private sector: relevance and consumer access (ACTwatch)

RDT projects experience in Cambodia and Myanmar

Operational research in sub-saharan Africa (future, UNITAID)
Why is the private sector relevant? Role in the antimalarial medicines retail market

Market share of antimalarials sold in the last 7 days in public/not for profit and private for-profit sectors (2011)

DRC data from 2009
The role of the private sector as an initial source of advice/treatment for children < 5

Distribution of initial sources of advice/treatment among children < 5 with fever in the previous two weeks for whom advice was sought

- **Benin**
  - At home: 21%
  - Public/NFP: 35%
  - Private for-profit: 26%

- **Madagascar**
  - At home: 35%
  - Public/NFP: 21%
  - Private for-profit: 39%

- **Nigeria**
  - At home: 39%
  - Public/NFP: 26%
  - Private for-profit: 21%

- **Uganda**
  - At home: 26%
  - Public/NFP: 21%
  - Private for-profit: 39%

Household surveys conducted in 2011
The role of the private sector as a source of antimalarials for children under five

Distribution of original antimalarial source among all antimalarials taken by children <5 with fever in the two previous weeks

**Madagascar**  \( N=462 \)

- At home: 37%
- Public/NFP: 53%
- Private for-profit: 10%

**Nigeria**  \( N=633 \)

- At home: 65%
- Public/NFP: 74%
- Private for-profit: 11%

Household surveys conducted in 2011
Do they stock diagnostic tests?

Availability of any test (microscope or RDT) and availability of RDTs in the private sector, 2011 (out of outlets stocking antimalarials)

ACTwatch Outlet Survey Results
Presentation overview

Overview of private sector: relevance and consumer access (ACTwatch)

RDT projects experience in Cambodia and Myanmar

Operational research in sub-saharan Africa (future, UNITAID)
Cambodia RDT Project

Socially marketed RDT in private sector

Commenced at small scale but then expanded to all provinces

RDT detects both $P_f$ and $P_v$

Recommended retail price

Scale - Wide variety of private outlet types (private clinics, pharmacies, retail outlets)
Availability of RDTs
(out of outlets stocking at least one antimalarial)

ACTwatch Outlet Survey 2011
External Assessments

Yeung et al

Fluctuation in availability due to donor/procurement -> price variability

Slower uptake of RDTs than ACTs: a much more complex message

Monitoring is weak

GUARD study (unpublished)

Quality of RDTs after storage: not an issue

Issues with safe disposal/glove use (same across VMW & private sector)

Most providers reluctant to sell antimalarial without prior blood test
Following these assessments

Strengthened monitoring system:
- Collection of used RDTs
- Simplified data collection form
- Increased supervisory efforts

Restrictions:
- Policy: Outlet types permitted to provide RDTs restricted to registered outlets.
PSI provides malaria control services in nearly 200 townships*

Channels:

i) 880 physicians/clinics, social franchise
ii) 1500 village health workers
iii) In 2013: registered pharmacies (pilot)

*As of April 2012 (not inc. AMTR)
## Private Physician/Clinic Network & Village Health Workers

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Tested</td>
</tr>
<tr>
<td>Village Health Workers</td>
<td>203,057</td>
</tr>
<tr>
<td>Private clinic (880)</td>
<td>142,615</td>
</tr>
<tr>
<td>Total</td>
<td>345,672</td>
</tr>
</tbody>
</table>

**2013:** pilot to introduce RDTs in pharmacies: - different pricing structures will be tested
Presentation overview

Overview of private sector: relevance and consumer access (ACTwatch)

RDT projects experience in Cambodia and Myanmar

Operational research in sub-saharan Africa (future, UNITAID)
UNITAID RDT Scale-up Operational Research project

**WHO**
- Engaging with MOH & Policy development

**FIND**
- Quality control of RDTs

**MC**
- Nigeria, Uganda
- Indirect approach: manufacturer model

**PSI**
- Kenya, Madagascar, Tanzania
- Direct approach: provider model

* PSI is the prime.
Considerations for the private sector

- Strengthen regulatory environment on RDTs & develop appropriate policies, guidelines

- Weak consumer demand: consumers are not aware / do not demand (compounded by belief: fever = malaria)

- Provider incentives: understand provider incentive to achieve appropriate case management (test result adherence). How are negative cases managed?

- Provider knowledge & skills: training & supervision

- Price of RDTs compared to antimalarials

- Systems for RDT quality assurance

- Waste management – what innovations?