

PEPFAR and Global Fund: Delivering ARVs in Kenya

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1. Study Background

There has been an increasing interest in understanding the effects of Global Health Initiatives (GHIs) on nations' overall health systems. As part of a larger study on PEPFAR and the Global Fund's impact on Kenya's health system, we investigated how these two GHIs have affected the supply chain for Kenya's HIV program.

Conceptual Framework: Our study examined PEPFAR and the Global Fund's impact on and interaction with the Kenyan Health System using the framework of the WHO Building Blocks¹ (See Figure 1).

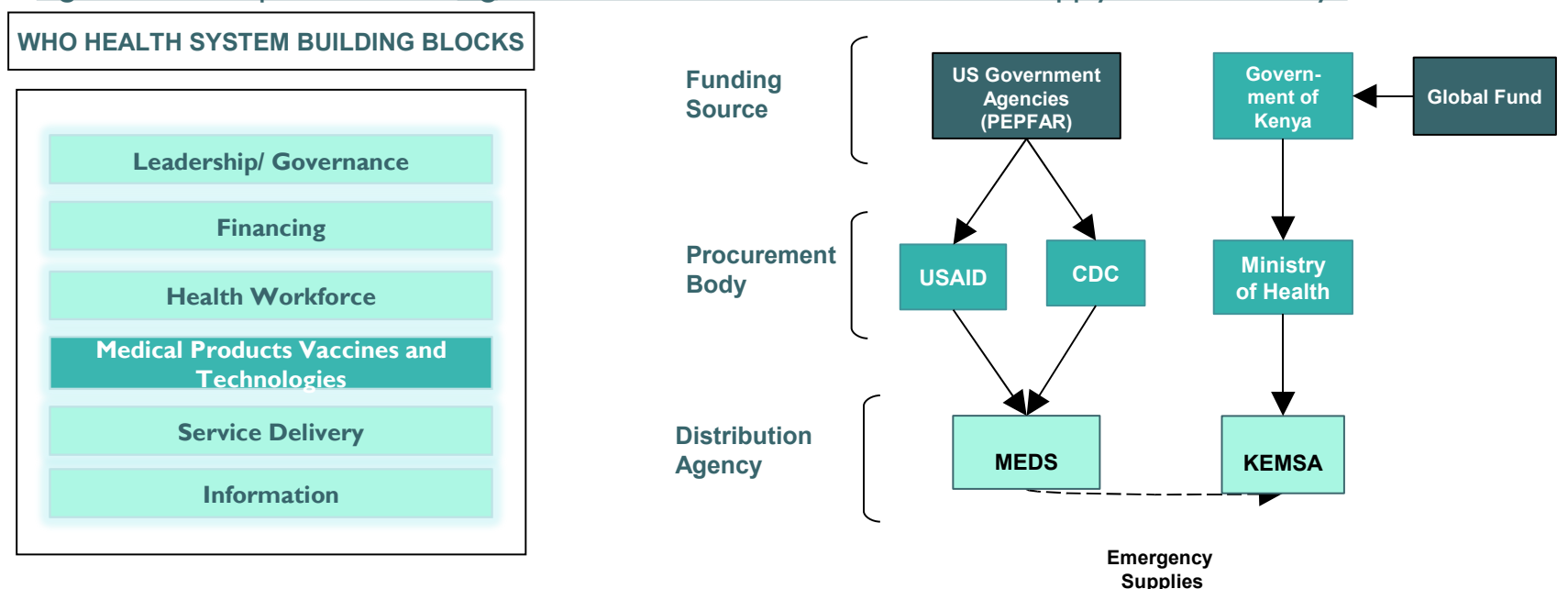
2. Methods

Sources: Data was collected through an extensive literature review and through semi-structured key informant interviews. Interviews were recorded and transcribed with the informed consent of respondents.

Respondent selection: The 50 key informants were selected for their experiences with PEPFAR, Global Fund, or both. Informants represented a range of government, NGO, bilateral, multilateral and private sector organizations.

Analysis: Emergent themes from the data were iteratively developed into a codebook. All interview data was coded in Nvivo 8 (QSR International). The codebook and analysis were organized using the Building Block framework.¹

Figure 1: Conceptual Framework Figure 2: Global Fund and PEPFAR ARV Supply Chains in Kenya



3. Lessons learned:

Global Fund

Informants appreciated that the Global Fund's reliance on government systems catalyzed a positive change in the national **Kenya Medical Supplies Agency (KEMSA)**; as a result of the Global Fund, KEMSA increased capacity, instituted standard operating procedures and improved its ability to manage commodities purchased with Global Fund resources. The Global Fund permitted the purchase of generic drugs, which allowed the government to buy greater quantities of drugs that reached a higher number of patients. Global Fund supported-procurement was seen as a difficult and prolonged process due to the rules about procurement and the disbursement of funding.

PEPFAR

PEPFAR supported strengthening logistics management within KEMSA, but used both the **Mission for Essential Drugs and Supplies (MEDS)**, a non-profit faith-based organization, as well as other donor systems to deliver commodities in both the public and private sector. PEPFAR often supplied the government with ARVs when stock-outs in public facilities seemed imminent due to delays in Global Fund procurement.

4. Conclusions:

- Informants believed that GHIs improved Kenya's ARV supply chain, and consequently strengthened the system's ability to deliver treatment.
- Many government-level informants suggested a need for better alignment between the multiple existing supply chain systems and donors.
- The main challenge is to provide life-saving treatment on time through existing systems while investing in more sustainable, government led supply-chain systems.
- A better aligned supply chain system would lead to better delivery of commodities across the public health sector and extend the benefits of investment beyond HIV services.

Literature cited:

• World Health Organization (WHO). *Everybody's Business: Strengthening Health Systems to improve Health Outcomes: WHO's Framework for Action*. Geneva: WHO Press, 2007.

Acknowledgements:

Thank you to our partners at Kenyatta University for their work on this study and to the WHO and Global Fund for funding this research. This report would not have been possible without the willingness and time of our key informants affiliated with the Kenyan government, NGOs and development partners.

Founding Partners:

Department of Global Health & Social Medicine, Harvard Medical School
Division of Global Health Equity, Brigham and Women's Hospital
Francis-Xavier Bagnoud Center for Health & Human Rights, Harvard School of Public Health
Institute for Strategy and Competitiveness, Harvard Business School
Partners in Health