

Success Story: Antigua and Barbuda: Developing Capacity for the Sustainable Delivery of HIV Services

Over the past year, the Health Systems 20/20 Caribbean project has strengthened the Government of Antigua and Barbuda's capacity to estimate the costs of HIV services and use this information for planning. The project team estimated the costs of clinic-based HIV and primary health care services and presented results to representatives of Antigua's Ministry of Health (MOH) and National AIDS Program in late 2012. The study was conducted to inform efforts to further integrate these services, as well as improve understanding of costs in light of domestic funding constraints and reduced external funding for HIV. The team trained decision-makers to interpret the cost information and use it for decision-making to support sustainable care for PLHIV. They also provided training on data collection and facilitated the formation of small working groups to gather data on the costs of treating opportunistic infections, which are an added burden to the health system.



In early 2013, the MOH and Health Systems 20/20 Caribbean established a local Costing Committee. This was convened and led by Antigua's Chief Medical Officer and included key staff from the MOH, Health Information Division, National AIDS Program, and Antigua's main referral hospital. The Costing Committee was tasked with estimating the costs of services at the hospital, particularly focusing on laboratory and other costs related to care for PLHIV. Taking a highly participatory approach to the activity, a Health Systems 20/20 Caribbean costing specialist assigned data collection tasks to members of the Committee, and each member was highly committed to gaining knowledge and skills related to ongoing collection, analysis, and use of cost data. The data collection and analysis tools themselves were designed to be user-friendly and adaptable so that country counterparts would be comfortable with their use by the end of the exercise.

The continuum of capacity development in Antigua and Barbuda can thus be described as follows:

- Health Systems Assessment Workshop to prioritize a better understanding of the health sector's financial situation, including costs and resource needs
- Costing study of primary health care and HIV services
- Training on how to interpret and use the costing data
- A collaborative costing exercise to directly build skills and experience under the guidance of a project expert.

The joint project/MOH team completed the analysis of service costs at the hospital, which included an estimate of the cost of inpatient services among people living with PLHIV. The study found that in 2012, PLHIV had an average length of stay of 16 days, representing 1.5 percent of all hospital admissions and 4.5 percent of all bed-days for that year. Inpatient care costs for these patients amounted to 2.5 percent of all hospital recurrent costs. The estimated average cost per PLHIV inpatient admission was US\$5,434, implying almost a three-fold higher per-patient cost than the overall inpatient average of US\$1,812.

The project's capacity-development approach takes longer to implement than simply sending an external team to conduct and complete the costing of services. However, the approach has produced dividends, including increased knowledge and skills among key counterparts and increased likelihood that the results of this exercise will be used for decision-making.