



DIRECTOR'S NOTE

Dear Colleagues,

Welcome to the summer edition of our quarterly newsletter. These past few months the Global Health Cost Consortium has been busy working on a variety of activities. We are continuing to request primary data on HIV costing studies from authors, clean our extracted published cost data for HIV and TB, and finalize our methodology to populate an interactive costing tool for HIV and TB interventions. We have also collaborated with the World Bank to create learning modules on utilizing costing data. Throughout the quarter, GHCC team members have participated in several conferences and events including the Social Behavioral Change Communication Summit and the Model Guidance Group for the Global Fund.

Currently the GHCC is preparing for the **International AIDS Economics Network pre-conference** in Amsterdam, the Netherlands. We will be presenting our work in a panel discussion. In addition, the GHCC will be hosting a happy hour on 20 July. The happy hour will be a chance to not only meet GHCC team members, but an opportunity for you to test out our new **Unit Cost Study Repository Tool**. You can RSVP to the happy hour [here](#). We hope to see you there!

All the best,
Carol Levin

SPOTLIGHT

Showing 97 entries for HIV, Prevention, VMMC

Study	Cost in 2016 USD	Unit	Alerts	Country	Intervention	Technology	Perspective	Target group (demographic)	Target group (clinical)	Platform	Ownership
Chiwewa, CM, 2010	\$81.67	Per Person Receiving MC		Zambia	VMMC	Surgical	Provider	Men	HIV negative	Fixed Facility	Mixed
Chiwewa, CM, 2010	\$55.71	Per Person Receiving MC		Zambia	VMMC	Surgical	Provider	Men	HIV negative	Fixed Facility	Public
Chiwewa, CM, 2010	\$57.04	Per Person Receiving MC		Zambia	VMMC	Surgical	Provider	Men	HIV negative	Other	



Unit Cost Study Repository

A critical gap in the arsenal needed for planning TB and HIV programs is a centralized source of standardized and context-specific intervention cost data that is easily accessible to policy analysts, country officials, researchers, and implementing organizations.

The Unit Cost Study Repository (UCSR) is set to be launched at the IAEN Pre-Conference on July 20. The UCSR gathers together in one easily accessible online platform all published and grey literature cost estimates for HIV and TB interventions. Costs are categorized by intervention, and users may choose to display available intervention cost data after filtering for the disease (HIV, TB) and intervention class (prevention, treatment, etc.). The cost estimates have been standardized by the GHCC (and adjusted to 2017 USD), in consultation with expert advisors, stakeholders, and partners, in terms of output units (e.g., per person served, per visit), intervention implementation (e.g., service delivery platforms, ownership, target populations, technologies), disaggregated cost categories (e.g., personnel, capital costs), and costing perspectives. Please note, the UCSR is an evolving product, and your recommendations in the **UCSR Feedback Survey** will be essential in refining it.

HIV Costing for Key Populations

Key populations (KP), including men who have sex with men, sex workers, and people who inject drugs, are known to bear the highest burden of HIV. A barrier to addressing this issue is the lack of information on the cost of HIV service provision for these groups. Available results of cost assessments often do not go beyond the costs of provision of clinical or preventive services. Often omitted are the costs of activities such as mapping and size estimation of the populations, and KP-sensitive staff training and supervision, which are necessary to successful HIV programs for KP.

A research project, currently being conducted by GHCC core team members from the Instituto Nacional de Salud Pública (INSP), seeks to fill this gap. The project is developing a new system for prospective cost estimation, in concert with USAID's large-scale LINKAGES KP-HIV service delivery programs in Kenya and Malawi, which will address common issues in HIV service costing for KP by comprehensively assessing costs of all programmatic activities. The results of this research will not only provide robust cost estimates for HIV programs for KP in these countries, but will also offer a methodological framework for cost and cost-effectiveness evaluation of similar programs in the future.

JOURNAL ROUNDUP

Choice of time horizon critical in estimating costs and effects of changes to HIV programmes.

McCreesh N, Andrianakis I, Nsubuga RN, Strong M, Vernon I, McKinley TJ, Oakley JE, Goldstein M,

Hayes R, White RG.

Drivers of patient costs in accessing HIV/AIDS services in Tanzania.

Mnzava T, Mmari E, Berruti A.

Cost-effectiveness of cervical cancer screening in women living with HIV in South Africa: A mathematical modeling study. JAIDS June 15, 2018 e-pub ahead of print.

Campos N, Lince-Deroche N, Chibwasha CJ, Firnhaber C, Smith JS, Mayer-Rath G, Jamieson L, Jordaan S, Sharma M, Regan C, Sy S, Liu G, Tsu V, Jeronimo J, Kim JJ.

Cost analysis of two community-based HIV testing service modalities led by a Non-Governmental Organization in Cape Town, South Africa.

Meehan S, Beyers N, Burger R.

Catastrophic costs of tuberculosis care: a mixed methods study from Puducherry, India.

Prasanna T, Jeyashree K, Chinnakali P, Bahurupi Y, Vasudevan K, Mas M.

Effectiveness and cost-effectiveness of screening migrants for active tuberculosis and latent tuberculous infection.

Zenner D, Hafezi H, Potter J, Capone S, Matteelli A.

Economic evaluation of TB screening programmes in migrants: need for a comprehensive framework.

Gomez GB, Rupert S, Houben RMGJ.

Delivery of antiretroviral treatment services in India: estimated costs incurred under the National AIDS Control Programme.

Agarwal R, Rewari BB, Shastri S, Nagaraja SB, Rathore AS.

Upgrading Supply Chain Management Systems to Improve Availability of Medicines in Tanzania: Evaluation of Performance and Cost Effects.

Mwencha M, Rosen JE, Spisak C, Watson N, Kisoka N, Mberesero H.

Costs of providing tuberculosis diagnosis and treatment services in Viet Nam.

Minh HV, Mai VQ, Nhung NV, Hoi LV, Giang KV, Chung LH, Kien VD, Duyen NT, Ngoc NB, Anh TT, Phuong TB, Ngan TT, Khanh PH.

INTERNATIONAL MEETINGS

July 11-14, 2018 *Maastricht, Netherlands*

European Health Economics Association (EuHEA), 2018 Conference

July 20-21, 2018 *Amsterdam, Netherlands*

International Aids Economic Network (IAEN): Pre-Conference for the 22nd International AIDS Conference

July 23-27, 2018 *Amsterdam, Netherlands*

International AIDS Society (IAS): 22nd International AIDS Conference

October 8-12, 2018 *Liverpool, United Kingdom*

The Fifth Global Symposium on Health Systems Research (HSR2018)

October 24-27, 2018 *The Hague, Netherlands*

International Union Against Tuberculosis and Lung Disease: 49th Union World Conference on Lung Health



Contribute your insights to the discussion forum



Data Producers, share your data!



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