EVALUATING THE IMPLEMENTATION OF THE APPOINTMENT SPACING MODEL/ MULTI-MONTH DISPENSING AND ART PHARMACY SERVICES IN ETHIOPIA

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It is critical that patients living with HIV are incentivized to adhere to their antiretroviral treatment (ART) so they can live healthier lives.

New Solutions for Increased Adherence



The USAID Global Health Supply Chain Program-Procurement and Supply Management (GHSC-PSM) project partnered with the Ethiopia Ministry of Health (MOH) to conduct two assessments to:

In 2017, Ethiopia began implementing the appointment spacing model (ASM) of multi-month dispensing (MMD) to patients on ART.

By reducing the frequency by which patients must visit ART facilities and providing larger-count bottles of medication, this service delivery model can improve the treatment burden on patients, ART pharmacies and clinics while maintaining high retention of care. This also gives care providers more time for adherence counselling to improve adherence of patients to the treatment.

A successful ASM/MMD transition in Ethiopia required two major components:

- Patient enrollment in ASM/MMD
- ART pharmacies capable to handle the new dispensing model



• Evaluate the adoption of ASM/MMD.

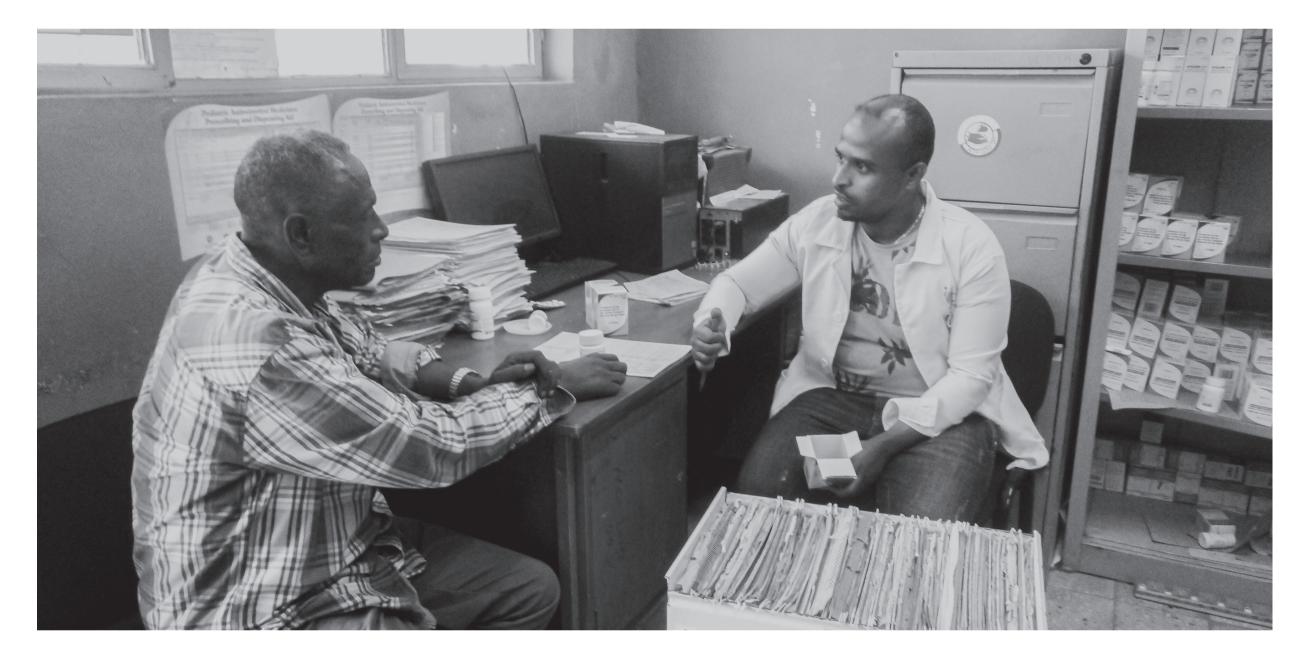
• Understand the performance of ART pharmacies in relation to ASM/MMD.

Assessment I: April 2018

- Conducted in 88 ART sites
- Collected data by reviewing relevant records and interviewing health professionals working in ART clinics and pharmacy units • Examined enrollment rates and reasons for low enrollment

Assessment 2: May - June 2018

- Conducted in 205 ART sites
- Collected data by reviewing relevant records and interviewing health professionals and key informants from government and partners

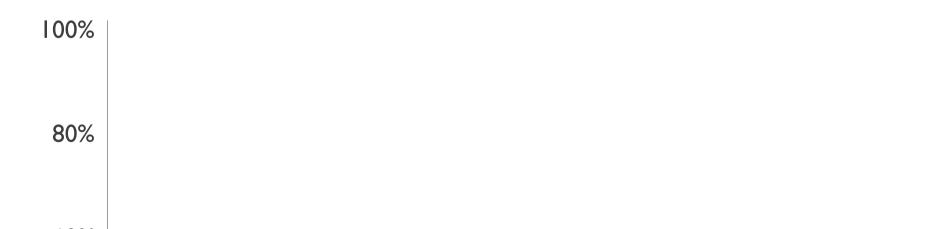


Results from the first assessment showed that:

- Patient enrollment was significantly below expectations. Only 36% of adult first-line ART clients were enrolled in ASM/MMD as of April 2018, while the expectation was to enroll 70% of adult first-line clients. • Patient refusal of ASM/MMD was reported by 65.5% of the visited facilities.
- Reasons for patient refusal included:
 - Limited storage space for medicines at home
 - Fear of stigma by carrying large quantities of ARVs,
 - Need to have frequent consultations with their providers.

Results from the second assessment are presented in the below graph:

PROPORTION OF HEALTH FACILITIES

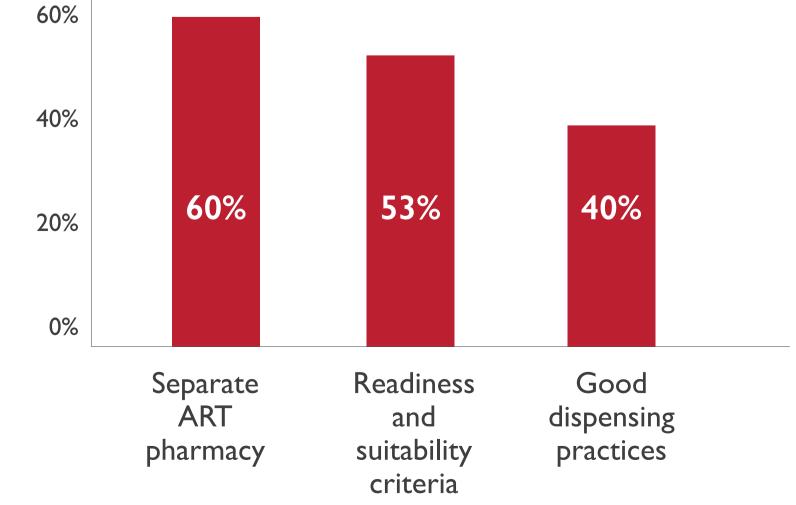


Ethiopian pharmacist Elias counsels HIV patient on TLD treatment regimen. Photo credit: GHSC-PSM/Asrat Abate



- Addressing patient enrollment challenges and ART pharmacy service shortcomings is critical to expanding the implementation of ASM/MMD in Ethiopia.
- Sharing the lessons from these assessments to other countries will help them as they transition to ASM/MMD.

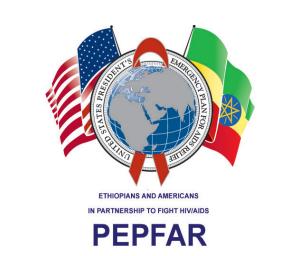
Based on the findings of these assessments, GHSC-PSM and MOH



are enhancing the quality of and adherence to ASM/MMD in ART pharmacies by providing:

• ART in-service trainings • ART pharmacy mentoring checklists • Supportive supervision for staff • Recording and documentation tools provided to ART pharmacies







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