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Georgia HIV Prevention Project

Resource Requirements for Providing
Preventive Interventions for Key
Populations

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Georgia HIV Prevention Project

Resource Requirements for Providing Preventive Interventions for Key Populations

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List of Acronyms

FSW	female sex worker
GEL	Georgian Lari
GHPP	Georgia HIV Prevention Project
HBV	hepatitis b virus
HCV	hepatitis C virus
IEC	information, education, and communication
MSM	men who have sex with men
NGO	nongovernmental organization
PDI	peer-driven intervention
PWID	people who inject drugs
RDS	respondent-driven sampling
UNAIDS	Joint United Nations Programme on HIV/AIDS
VCT	voluntary counseling and testing

Summary

This costing study was conducted to estimate the financial resource requirements to implement preventive programs or services for key populations, including people who inject drugs (PWID), female sex workers (FSWs), and men who have sex with men (MSM) in the Republic of Georgia.

The costing tool was designed to assist main stakeholders and the National Center for Disease Control and Public Health to calculate costs of the different intervention packages for key populations. Specifically, the tool is intended to help stakeholders to recognize total financial requirements and mobilize resources necessary to support preventive interventions for these key populations.

This document presents resource requirements for implementing different intervention packages for key populations by different providers with different service delivery strategies.

The study presents unit costs of preventive interventions aggregated by the following measures:

- Targeted key populations (i.e., PWID, FSWs, and MSM)
- Service delivery strategy (i.e., facility-based, outreach, or peer-driven intervention [PDI])
- Location (the capital city [Tbilisi] or other cities)
- Experience level of nongovernmental organizations (NGOs) providing preventive interventions.

The results of the costing exercise show the following:

- The costs of prevention packages vary across different key populations.
- The costs of the prevention package delivery for each key population differ between the capital and other cities.
- The costs of prevention package delivery depend on the experience of the NGO providing preventive interventions to the key population.
- Prevention package unit costs differ across service delivery strategies: (a) facility-based service delivery, (b) outreach, and (c) PDI for PWID.

Table 1 presents the prevention package's estimated delivery costs, presented by key populations served, cities, service delivery strategies, and NGO experience.

Table 1. Unit Cost (GEL) of the Prevention Package across Key Populations, by City, NGO Experience, and Service Delivery Strategy Used

Key populations	Tbilisi			Other Cities				
	Experienced NGO			Experienced NGO			Newly Established	
	Office	Outreach	PDI	Office	Outreach	PDI	Office	Outreach
PWID	106	119	133	102	116	126	93	94
FSW	91	104		89	101		72	73
MSM	124	149		116	140			

Weighted average costs of the prevention package by key populations served, city, and NGO experience level are presented in Table 2.

Table 2. Weighted Average Unit Cost (GEL) of the Prevention Package across Key Populations, by City and NGO Experience

	Tbilisi		Other Cities		
	Experienced NGO		Experienced NGO		Newly Established NGO
PWID	120		115		93
FSW	101		99		72
MSM	134		136		

The differences in the unit costs of preventive interventions across the three key populations and different service delivery strategies can be explained by the difference in inputs that are included in the package.

Differences in unit costs of preventive interventions between experienced and newly established NGOs result primarily from differences in the service protocol used.

I. Introduction

The purpose of the costing study was to estimate financial resource requirements for providing preventive programs or services for different key populations (i.e., PWID, FSWs, and MSM) in Georgia.

This document provides rough estimates of resource requirements for implementing different intervention packages for three different key populations by different providers, with the different service delivery strategies. The document does not provide any policy recommendations or implementation guidelines for future key population program strategies.

This report and the Microsoft Excel-based costing tool, which is included separately, aim to assist the National Center for Disease Control and Public Health to calculate costs of the different intervention packages for different key populations. Specifically, the document is intended to help the National Center for Disease Control and Public Health to recognize total financial requirements and mobilize resources necessary to support preventive interventions for the key populations.

Calculations were made separately for each key population. Considering that various NGOs work with the same key populations in Georgia, calculations were made separately for different NGOs, based on the data gained from these organizations.

The study presents unit costs of preventive interventions by the following:

- Key populations served (PWID, FSWs, and MSM)
- Service delivery strategy (facility-based, outreach, PDI)
- Location (capital city [Tbilisi], or other cities)
- Experience level of NGOs providing preventive interventions.

II. Conceptual Approach

The costing exercise includes costs of all resources and activities required to implement preventive interventions/prevention package delivery to the key populations, even though some of the resources are donated to the NGOs (e.g., condoms, testing kits). The calculations do not include costs for capital items (e.g., for buildings, vehicles, or equipment).

The present calculations include both direct and indirect costs. Direct costs comprise the costs of all the resources that are directly used for the implementation of preventive interventions. Indirect costs cover those expenses that are not directly related to the implementation of preventive measures, but are nonetheless necessary in implementing preventive measures. Indirect costs represent overhead costs for the preventive interventions and include expenses for office rent, electricity, water, natural gas,

communications, transportation, and other recurrent expenses, including management and administration costs (i.e., salaries for the project coordinator, director of the organization, financial manager, accountant, and support staff).

Costing of preventive interventions for key populations was done for a period of one year per beneficiary; that is, the unit cost/cost of a unified package of preventive interventions was calculated for one PWID, one FSW, and one MSM.

To calculate the cost of a unified prevention package, costs of all preventive interventions included in the package were calculated separately.

III. Data Collection Methodology and Data Sources

Programmatic and financial information required for the costing exercise were collected during the period from June to August of 2012, through a standard data collection instrument prepared in advance (Annexes A, B, and C). In-depth interviews were conducted with the representatives of the following organizations:

- Georgia HIV Prevention Project (GHPP)
- Public Union Bemoni
- The Center for Information and Counseling “Tanadgoma”
- NGO “Indigo”
- Georgian Harm Reduction Network.

Data collection instruments had been prepared and sent electronically to the NGOs. Organizations were asked to complete the instrument. The provided data was validated by visiting the organizations and conducting key informant interviews.

Information on staff salaries and overhead costs was gathered from financial accounting documents of the respective organizations.

Market prices in 2012 were taken as unit costs of testing kits and consumables required for the testing.

Market prices in 2012 were taken as unit costs of condoms, sterile syringes, and lubricants.

IV. Costing Methodology

Prevention Package

A unified prevention package consists of essentially the same interventions/services for all key populations; depending on the specifics of each target group, however, some elements of the prevention package may differ. For example, the prevention package for PWID includes testing for HIV, hepatitis B virus (HBV), and hepatitis C virus (HCV),

while HBV and HCV testing are not provided to FSWs and MSM. One of the preventive measures intended for PWID is the distribution of sterile syringes, but this intervention is not used for FSWs or MSM. Also the number of condoms needed per year differs for one PWID, one FSW, or one MSM. The constituent elements of a prevention package for different key populations are provided in Table 3.

Table 3. Constituent Elements of the Prevention Packages for Different Key Populations

Key Populations	VCT	HIV Testing	HCV Testing	HBV Testing	Syringes	Condoms	Lubricants	IEC Material
PWID	✓	✓	✓	✓	200 pcs	50 pcs		4 pcs
FSWs	✓	✓				60 pcs		4 pcs
MSM	✓	✓				50 pcs	50 pcs	4 pcs

Voluntary counseling includes counseling on HIV, HBV and HCV, tuberculosis, and sexually transmitted infections and also referrals to the appropriate health care facilities.

HIV, HBV, and HCV testing imply only primary testing through rapid tests, and confirmatory testing is not considered. Accordingly, the cost of the package does not include the cost of confirmatory testing.

Information, education, and communication (IEC) materials involve various types of materials (such as leaflets, booklets, and brochures) and their design, printing, and distribution.

During the costing exercise, the assumption was made that a person belonging to a key populations (PWID, MSM, FSW) is considered to be covered if he or she receives all prevention services included in the package, rather than any single service or only a few. However, the costing tool that has been developed (the attached Excel file), enables either the exclusion of any service (e.g., syringes for PWID) from the prevention package or changes to the number of units of the different elements included in the package (condoms, booklets).

Elements of Voluntary Counseling Costs

Costs of voluntary counseling include the cost of personnel (counselors and social workers).

Given that counselors in all NGOs are paid on a monthly basis and not based on the number of provided counseling sessions, the costs for counselors were calculated by the time spent per counseling session. The average duration of voluntary counseling is about 1.5 hours, including both pre- and post-test counseling. A counselor's monthly salary was

divided by the number of working hours per month (168 hours¹) and multiplied by 1.5. The social worker's wages for the voluntary counseling was calculated similarly to the counselor's salary.

Cost Elements of the Testing

The cost of HIV, HCV, and HBV testing consists of the cost of a rapid test and the cost of consumables required for conducting the test. Testing costs also include the cost of medical waste management/disposal.

Because testing using a rapid test is carried out by the same social worker, testing does not have to carry additional expenses for personnel.

Costs for Peer Education Training

Although peer education is not directly related to the delivery of the prevention package to the person, this activity aims to attract key populations and contributes to the increase of coverage of key populations. Therefore, it is necessary to consider the costs of peer education training in the total cost of the prevention package. Necessary information to calculate peer education training cost per beneficiary was obtained from the NGOs. Peer education training cost, per beneficiary for each key population, was defined based on the following methodology:

- **Step 1:** Training expenses per peer educator were calculated.
- **Step 2:** Training cost for one beneficiary was calculated according to the standard ratio of peer educators to clients. According to the UNAIDS (2004) recommendations, a ratio between 1:10 and 1:20 must be considered the standard. For the present calculations, a proportion of 1:10 was used, meaning that on average, one peer educator works with 10 clients.

V. Operational Costs for Outreach

When calculating the costs for the outreach strategy, operating expenses that are needed to implement outreach activities (namely, driver's salary, fuel consumption, and vehicle maintenance costs) were calculated and included in the outreach costs.

Transportation costs are the sum of fuel costs and vehicle maintenance costs and were calculated using a standard methodology with 15% fuel consumption expenses (WHO, GAVI Alliance, 2006).

¹ The number of working hours per month was calculated from the assumption of 21 working days per month and 8 hours per working day.

Costs of Peer-Driven Intervention

Additionally, the costs of PDI were calculated for PWID. This service delivery strategy is used to attract PWID and involves giving the recipient additional monetary incentives for peer recruitment. The recruitment procedures imply respondent-driven sampling (RDS) methodology, and the average amount of the incentive for peer recruitment is 20 GEL per peer.

Overhead Costs

Because financial records/accounts of the NGOs working with key populations do not allow use of the standard methodology in distinguishing the indirect and direct costs to calculate the percentage of overhead costs, the following approach was used to estimate the percentage for overhead costs: For each organization, the proportion of the expenses for the administrative and support personnel in relation to the expenses for the direct staff in 2011 was calculated. This percentage then served as the percentage of organizational overhead and was added to the direct costs of the unified prevention package. Overhead costs include project management and administration costs, as well as the indirect expenses of the organization (office rent, utilities, communications, etc.).

VI. Results

The cost of the unified prevention package delivery/preventive intervention varies depending on which service delivery strategy is used for covering the key populations: (a) a person applies to the organization himself or herself (facility-based service delivery) or (b) the representative of the key populations is reached through outreach (outreach-based service delivery). For the PWID, the unit cost for the third service delivery strategy (PDI) was also calculated.

The costs of delivering the unified prevention package differ by service delivery strategy, because different strategies have different operational costs.

Because several NGOs in Georgia are working with the same key populations (except MSM), the unit costs of the unified prevention package were calculated based on the information gained from different organizations. The unit costs are presented separately for the organizations with different levels of experience.

Because this costing exercise is done for the country and not for any one organization, the number of sterile syringes, condoms, leaflets, and booklets needed for each key population per year is standardized. Consequently, the amount of this prevention material was standardized for all cities and organizations and is based on the number needed for appropriate key populations, despite the fact that the amount of this material distributed by various organizations in 2011 differed among the same key populations, and also differed in the amount of condoms and educational materials distributed by the same organization in various cities.

People Who Inject Drugs

Experienced Organizations (Tbilisi)

The average number of sterile syringes needed for one PWID per year is 200 (Mathers, Degenhardt, and Sabim, 2011). The number of condoms that should be distributed to one PWID per year is 50; this is the average number of condoms, per PWID, to be covered by the prevention package (Mathers, Degenhardt, and Sabim, 2011). In 2011, however, the average number of condoms distributed by the NGOs per PWID was just 11.

In Tbilisi, the unit cost per PWID for prevention package delivery in 2011 in an office setting was 106 GEL.

In Tbilisi, the unit cost per PWID for prevention package delivery in 2011 through an outreach strategy was 119 GEL.

When PDI was used to cover PWIDs, the unit cost per PWID for prevention package delivery in 2011 was 133 GEL.

Experienced Organizations (Other Cities)

In other large cities, the unit cost per PWID for prevention package delivery in office settings by an experienced organization in 2011 was 102 GEL.

In other large cities, the unit cost per PWID for prevention package delivery using an outreach strategy in 2011 was 116 GEL.

The unit cost per PWID for prevention package delivery in 2011 using PDI was 126 GEL.

Newly Established Organizations (Other Cities)

Although prevention package costing results show that the costs of prevention package delivery to PWID by newly established organizations are much less than for more experienced organizations, it is necessary to consider the fact that additional financial resources are needed for capacity development of these new organizations. Based on the experience of GHPP, capacity development activities cost about 4,500 GEL annually.

Newly established organizations do not use PDI when working with PWID and do not conduct peer education trainings; accordingly, peer education training costs are not included in the costs of the prevention package.

In other cities, the unit cost per PWID for prevention package delivery in office settings by the newly established organizations in 2011 was 93 GEL.

Because newly established organizations do not have their own vehicles, these organizations use public transport to conduct outreach activities. The unit cost per PWID for prevention package delivery using an outreach strategy by newly established organizations in 2011 was 94 GEL.

The small difference between the unit costs of these two service delivery strategies likely results from the minimal operating costs of the newly established organization. Such an organization does not have a vehicle and driver; rather, the social worker conducts outreach using public transportation, for which he or she is given 35 GEL per month. On average, eight outreach sessions are carried out, and the average number of counseling sessions conducted per outreach is six. The cost of monthly outreach per PWID is therefore $35/(8 \times 6)$ sessions, for a unit cost of 0.70 GEL.

Men Who Have Sex with Men

Only one organization provides HIV prevention services to MSM in Georgia, and this is an experienced organization. This organization works with MSM in three cities: Tbilisi, Batumi, and Kutaisi.

The cost of the prevention package delivery was estimated separately, depending on the service delivery strategy that was used to cover MSM (i.e., facility-based or outreach services).

Tbilisi

Calculations showed that in Tbilisi the unit cost for prevention package delivery in office settings per MSM in 2011 was 124 GEL.

In Tbilisi, the unit cost per MSM for prevention package delivery through an outreach strategy in 2011 was 149 GEL.

Other Cities

In other cities, the unit cost per MSM for prevention package delivery in 2011 in office settings was 116 GEL and through outreach was 140 GEL.

Female Sex Workers

Experienced Organizations (Tbilisi)

No organizations working with FSWs in Tbilisi use a peer education approach; therefore, peer education training costs are not included in the prevention package costs.

Calculations showed that in Tbilisi, the unit cost per FSW for prevention package delivery in office settings in 2011 was 91 GEL, and the unit cost for prevention package delivery through an outreach strategy by the same organization per FSW in 2011 was 104 GEL.

Experienced Organizations (Other Cities)

In other cities the unit cost per FSW for prevention package delivery by the experienced organization in 2011 in office settings was 89 GEL and through outreach was 101 GEL.

Newly Established Organizations (Other Cities)

In other cities, the unit cost per FSW for prevention package delivery in 2011 is similar for both service delivery strategies, facility-based and outreach, at 72 GEL and 73 GEL, respectively.

VII. Summary

The results of the costing exercise were as follows:

- Costs of delivering the prevention package vary across different key populations.
- Costs of delivering the prevention package for each key population differ between the capital and other cities.
- Prevention package delivery costs depend on the experience of the NGO providing preventive interventions.
- Prevention package unit costs differ across service delivery strategies: (a) facility-based service delivery, (b) outreach, and (c) PDI for PWID.

The difference in the unit costs of preventive interventions across the three key populations and different service delivery strategies results from differences in inputs that are included in the package.

Differences in unit costs of preventive interventions between experienced and newly established organizations result from differences in service protocol used.

The estimated unit costs of the prevention package delivery per PWID, by city and service delivery strategy, are summarized in Table 4.

Table 4. Prevention Package Unit Cost per PWID, by City, Organizational Experience, and Service Delivery Strategy

City	Organizational Experience	Strategy	Unit Cost (GEL)
Tbilisi	Experienced	Facility-based service delivery	106
Tbilisi	Experienced	Outreach	119
Tbilisi	Experienced	PDI	133
Other cities	Experienced	Facility-based service delivery	102
Other cities	Experienced	Outreach	116
Other cities	Experienced	PDI	126
Other cities	Newly established	Facility-based service delivery	93
Other cities	Newly established	Outreach	94

Table 5 presents prevention package delivery costs per MSM, by city, organizational experience, and service delivery strategy.

Table 5. Prevention Package Unit Cost per MSM, by City, Organizational Experience, and Service Delivery Strategy

City	Organizational Experience	Strategy	Unit cost (GEL)
Tbilisi	Experienced	Facility-based service delivery	124
Tbilisi	Experienced	Outreach	149
Other cities	Experienced	Facility-based service delivery	116
Other cities	Experienced	Outreach	140

Table 6 presents prevention package delivery costs per FSW, by city, organizational experience, and service delivery strategy.

Table 6. Prevention Package Unit Cost per FSW, by City, Organizational Experience, and Service Delivery Strategy

City	Organizational Experience	Strategy	Unit cost (GEL)
Tbilisi	Experienced	Facility-based service delivery	91
Tbilisi	Experienced	Outreach	104
Other cities	Experienced	Facility-based service delivery	89
Other cities	Experienced	Outreach	101
Other cities	Newly established	Facility-based service delivery	72
Other cities	Newly established	Outreach	73

Considering that prevention package delivery unit costs for each key population vary across cities (Tbilisi and other cities), and considering that unit costs depend on the experience of the organization providing these services and the strategy used for service delivery, the weighted average cost by the cities and the level of organizational experience were defined. Weighted average cost was calculated separately for Tbilisi and other cities. For the calculation of the weighted average cost, coverage rates for each key population in 2011 were used. Weighted average unit cost by city and by the NGO experience level are presented in Tables 7–9.

Table 7. Prevention Package Coverage and Weighted Average Unit Cost per PWID, by City, Organizational Experience, and Service Delivery Strategy

Strategy	Unit Cost	Coverage	Total Cost	Weighted Average
Tbilisi, experienced organizations				
Facility-based service delivery	106	981	103,649	
Outreach	119	417	49,607	
PDI	133	1,065	141,918	
		2,463	295,175	120

Strategy	Unit Cost	Coverage	Total Cost	Weighted Average
Other cities, experienced organizations				
Facility-based service delivery	102	178	18,243	
Outreach	116	93	10,769	
PDI	126	213	26,857	
		484	55,869	115
Other cities, newly established organizations				
Facility-based service delivery	93	211	19,642	
Outreach	94	140	13,163	
		351	32,805	93

Table 8. Calculating Prevention Package Coverage and Weighted Average Unit Cost per MSM, by City and Service Delivery Strategy

Strategy	Unit Cost	Coverage	Total Cost	Weighted Average
Tbilisi				
Facility-based service delivery	124	120	14,925	
Outreach	149	77	11,436	
		197	26,361	134
Other cities				
Facility-based service delivery	116	36	4,173	
Outreach	140	167	23,370	
		203	27,543	136

Table 9 Prevention Package Coverage and Weighted Average Unit Price per FSW, by City, Organizational Experience, and Service Delivery Strategy

Strategy	Unit Cost	Coverage	Total Cost	Weighted Average
Tbilisi, Experienced Organizations				
Facility-based service delivery	91	50	4,550	
Outreach	104	198	20,567	
		248	25,117	101
Other cities, experienced organizations				
Facility-based service delivery	89	54	4,806	
Outreach	101	285	28,791	
		339	33,597	99
Other cities, newly established organizations				
Facility-based service delivery	72	107	7,704	
Outreach	73	72	5,256	
		179	12,960	72

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Annex A. Data Collection Tool for PWID

Table A-1. Prevention Services Statistics for PWID in 2011, by City

Item	City					
	Tbilisi	Telavi	Batumi	Zugdidi	Kutaisi	Rustavi
PWID reached						
PWID who received VCT						
PWID who received condoms						
PWID who received needles and syringes						
PWID who received IEC						
Average number of condoms distributed to one PWID						
Average number of leaflets distributed to one PWID						
Average number of fliers distributed to one PWID						
Average number of needles distributed to one PWID						
Outreach						
Counselor's monthly salary						
Average number of outreaches per month						
Average number of PWID reached per outreach						
Average kms travelled per outreach						
Driver's salary						
Peer Education						
Incentives per peer educator to attend the training						
Training participants per training						
Trainings conducted per year						
Cost of meals per participant						
Trainers' salary per training						
Facility-Based						
Counselor's monthly salary						
Average number of counseling sessions per year						

Item	City					
	Tbilisi	Telavi	Batumi	Zugdidi	Kutaisi	Rustavi
Number of counselors						
Monthly salary of narcologist						
Monthly salary of organization's director						
Monthly salary of financial director						
Monthly salary of accountant						
Monthly salary of cleaner						
Monthly salary of project coordinator						
Recurrent Costs						
Office rent						
Expenditure on electricity, water, gas						
Expenditure on communication						
Expenditure on office supply						
Supplies						
Cost of condoms						
Cost of needles						
Cost of leaflets						
Cost of fliers						
Cost of HIV tests						
Cost of HBV tests						
Cost of HCV tests						
Cost of supplies needed for testing (alcohol, cotton, etc.)						

Annex B. Data Collection Tool for FSWs

Table B-1. Prevention Services Statistics for FSW in 2011, by City

Item	City				
	Tbilisi	Batumi	Zugdidi	Kutaisi	Rustavi
Total number of FSWs reached					
FSWs who received VCT					
FSWs who received condoms					
FSWs who received IEC					
Average number of condoms distributed to one FSW					
Average number of leaflets distributed to one FSW					
Average number of fliers distributed to one FSW					
Outreach					
Counselor's monthly salary					
Average number of outreaches per month					
Average number of FSWs reached per outreach					
Average kms travelled per outreach					
Driver's salary					
Peer Education					
Incentives per peer educator to attend the training					
Number of training participants per training					
Number of trainings conducted per year					
Cost of meals per participant					
Trainers' salary per training					
Facility-Based					
Counselor's monthly salary					
Average number of counseling sessions per year					
Number of counselors					
Monthly salary of narcologist					
Monthly salary of organization's director					
Monthly salary of financial director					
Monthly salary of accountant					
Monthly salary of cleaner					
Monthly salary of project coordinator					
Recurrent Costs					
Office rent					
Expenditure on electricity, water, gas					
Expenditure on communication					
Expenditure on office supply					

Item	City				
	Tbilisi	Batumi	Zugdidi	Kutaisi	Rustavi
Supplies					
Cost of condoms					
Cost of leaflets					
Cost of fliers					
Cost of HIV tests					
Cost of supplies needed for testing (alcohol, cotton, etc.)					

Annex C. Data Collection Tool for MSM

Table C-1. Prevention Services Statistics for MSM in 2011, by City

Item	Cities			
	Tbilisi	Batumi	Zugdidi	Kutaisi
MSM reached				
MSM who received VCT				
MSM who received condoms				
MSM who received IEC				
Average number of condoms distributed to one MSM				
Average number of leaflets distributed to one MSM				
Average number of fliers distributed to one MSM				
Outreach				
Counselor's monthly salary				
Average number of outreaches per month				
Average number of MSM reached per outreach				
Average kms travelled per outreach				
Driver's salary				
Peer Education				
Incentives per peer educator to attend the training				
Training participants per training				
Trainings conducted per year				
Cost of meals per participant				
Trainers' salary per training				
Office				
Counselor's monthly salary				
Average number of counseling sessions per year				
Number Counselors				
Monthly salary of narcologist				
Monthly salary of organization's director				
Monthly salary of financial director				
Monthly salary of accountant				
Monthly salary of cleaner				
Monthly salary of project coordinator				
Recurrent Costs				
Office rent				
Expenditure on electricity, water, gas				
Expenditure on communication				
Expenditure on office supply				

Item	Cities			
	Tbilisi	Batumi	Zugdidi	Kutaisi
Supplies				
Cost of condoms				
Cost of leaflets				
Cost of fliers				
Cost of HIV tests				
Cost of supplies needed for testing (alcohol, cotton, etc.)				