Strategic Key Performance Indicators (KPIs) – 2021 results

Unitaid/EB40/2022/14/Annex1
Recap - Impact framework & 2017-2021 Strategic KPIs

- **KPI 1. Product development activities successful**
- **KPI 2. Critical access barrier overcome**
- **KPI 3.1. Funding secured**
- **KPI 3.2. Coverage scaled-up**
- **KPI 4.1. Lives saved & cases/ infections averted**
- **KPI 4.2. Efficiencies & savings generated**
- **KPI 4.3. Delivering positive returns**
- **KPI 5. Investing for the poorest & the underserved**

Health / Economic outcomes

Unitaid grant

+2 years

+5 years

Time
KPI Reporting 2017 - 2021

In scope of 2021 reporting (KPI 1-4), excluding value of WHO PQ every year

2017: $63
2018: $99
2019: $97
2020: $314
2021: $181

# grants
2017: 5
2018: 3
2019: 3
2020: 8
2021: 9

*WHO PQ financial value is accounted for in 2020
Investments included in 2021 Strategic KPI reporting

**Paediatric TB (AFI)**
*Scaling up better Tuberculosis diagnosis and treatment for children*

- TB Speed – University of Bordeaux - US $14.7 million, 2017-2022
- CapTB EGPAF – US $36.6 million, 2017-2022

**Pre-exposure prophylaxis (AFI)**
*Scale-up PrEP for at risk populations to reduce new HIV infections and and improve market conditions for PrEP*


**WHO PQ**
*Systematically and sustainably increase access to quality-assured, IVDs and medicines, appropriate for use in low income settings.*

- WHO PQ III – US $22.1 million, 2019-2021

**Malaria prevention in Pregnancy (AFI)**
*Expanding access to intermittent preventive treatment of malaria for pregnant women through community health workers*

- TIPTOP JHPIEGO – US $51.6 million, 2017-2022
- MMV Supply Side – US $1 million, 2017-2021

**HIV self testing (AFI)**
*Catalyse the market for HIV self testing and provide platform to test populations that have been difficult to reach with conventional testing*

- PSI STAR3* – US $15 million, 2020-2022
- Solthis ATLAS – US $15.7 million, 2018-2022

*Total investment on STAR (1,2 &3) has been $74.8 million since 2017*
Overview of our strategic KPI performance in 2021

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**10 Grants evaluated**

$181 million total value

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**KPI 1**

Innovation & Availability

- 100% achieved (2/2)

- TB Speed

- MMV Supply Side Grant

**KPI 2**

Access (overall)

- 95% achieved

- Quality (2/2)

- Affordability (2/2)

- Demand & Adoption (7/8)

- Supply & Delivery (7/7)

**KPI 3**

Scalability

- 71% of countries secured funding

- ~39 million people reached

- 2.9M Infections averted

**KPI 4**

Impact

- ~100K Lives saved

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Additional people benefiting 2 years post grant end

- ~36 million additional people tested using HIVST

- 2.9 million additional pregnant women receiving third dose of preventive treatment
<table>
<thead>
<tr>
<th>Innovation &amp; availability</th>
<th>Affordability</th>
<th>Quality</th>
<th>Demand &amp; adoption</th>
<th>Supply &amp; delivery</th>
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<tr>
<td>HIVST STAR (HIV)</td>
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<td>HIVST ATLAS (HIV)</td>
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<td>HIVST MTV Shuga (HIV)</td>
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<td>PrEP Fiotec (HIV)</td>
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<td>PrEP wits (HIV)</td>
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<td>TRIPTOP &amp; MMV (Malaria)</td>
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<td>TB Speed (TB)</td>
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<td>CapTB (TB)</td>
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<td>WHO PQ</td>
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Grant performance against access barriers

2/2 (100%)   2/2 (100%)   2/2 (100%)   7/8 (88%)   7/7 (100%)
### Cumulative performance (closed projects) 2017 -2021

| KPI 1: Innovation & Availability (I&A) | 100%  
|                                      | 8 out of 8 products overcoming I&A barriers |
| KPI 2: Overcoming access barriers     | 83%  
|                                      | 50 out of 60 of barriers overcome |
| KPI 3.1: Securing Funding             | 78%  
|                                      | 108 of 139 project countries secured funding |
| KPI 3.2: Scaling-up coverage (2 yrs scale up) | ~150 million people benefitting from better health products & approaches |
| KPI 4.1: Public health impact         | Estimated ~ 758,000 lives saved & ~ 133 million cases/infections averted |
| KPI 4.2: Economic Impact              | Estimated ~ US $2.3 billion economic savings (est. US$ 5 billion by 2030) |
| KPI 4.3: Delivering positive returns  | Seasonal Malaria Chemoprevention (>100:1)  
|                                      | Next Gen Indoor Residual Sprays (12:1)  
|                                      | Malaria prevention in pregnancy (32:1)  
|                                      | HIV Molecular Diagnostics (4-7:1)  
|                                      | MPP (32:1) b  
|                                      | WHO PQ (30-40:1) |
| KPI 5.1: Investing in poorest         | 100% of projects benefit the poorest |
| KPI 5.2: Investing in underserved     | 100% of projects benefit the underserved |

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*Over 5 yrs beyond end of projects*  
*Based on MPP own estimates*
## Scale-up performance over past 5 years (2017-2021) – closing grants

<table>
<thead>
<tr>
<th>Products and innovative approaches</th>
<th>Challenges to scale up</th>
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<tbody>
<tr>
<td><strong>Immediately leading to/supporting strong scale</strong></td>
<td><strong>Potential for scale up</strong>*</td>
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<tr>
<td>Malaria</td>
<td>Quality Control of Malaria Rapid Diagnostic Tests</td>
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<tr>
<td>- Seasonal malaria chemoprevention</td>
<td>- Rectal Artesunate</td>
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<td>- Next Gen Indoor Residual Sprays</td>
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<td>- Malaria prevention in pregnancy</td>
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<td>HIV &amp; COIM</td>
<td>DNDi – new pediatric HIV formulation</td>
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<td>- Point of Care early infant diagnosis</td>
<td>- Open Polyvalent Platforms/SAMBA</td>
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<tr>
<td>- HIV Self-Testing</td>
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<td>Tuberculosis</td>
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<td>- New paediatric TB formulations</td>
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<td>Cross-cutting</td>
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<td>- Medicines Patent Pool</td>
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<td>- WHO Prequalification programme</td>
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* Although not all conditions are yet in place
HIV Self Testing (HIVST) - STAR3 PSI, ATLAS Solthis and MTV Shuga

**Affordability**

- **Price reduction**: achieved price parity between blood based and oral fluid HIVST (< US$2)
- **Missed opportunity**: private sector prices remain high for customers

**Demand & Adoption**

- **Adoption**: inclusion in HIV testing services guidelines in all project countries (except India)
- **Close to 90% West and Central African countries** included HIVST support within the latest Global Fund allocations
- **Awareness**: exposure MTV Down South 2 series audience associated with higher knowledge of HIV status, awareness of HIVST and PrEP
- **Next Global Fund funding round to require HIVST within HIV funding requests**

**Supply & Delivery**

- **Healthy market**: diverse range of products available (Oral and blood-based tests); however, dependent on donor community decisions

**Scale up & Impact**

- **71% (5/7 STAR3) – 67% (2/3 ATLAS) of project countries have secured scale up funding**
- Over a two-year period (2023-2024) an additional ~36 million people will have access to HIVST and the demand in LMICs is predicted to reach 27 million tests per year by 2025.

Over 2015 – 2027:
- People using HIVST: 146M [120M-180M]
- People diagnosed using HIVST: 3.9M [3.2M-4.9M]
- Linked to ART: 3.5M [2.7M – 4.6M]

Cost-effective in reaching hard to reach populations

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*Total amount of STAR, ATLAS and MTV Shuga investment since 2015: STAR1,2 & 3 ($74.8 M), ATLAS ($15.7 M), MATV Shuga ($10.1 M)
PrEP – Fiotec and Wits

KPI 2

Demand & Adoption

- Oral PreP Policy adoption in Brazil, Mexico and South Africa (Policy not adopted in Peru)
- National roll-outs achieved in Brazil, South Africa and Mexico

Scale up & Impact

- $37 million invested 2017 - 2022

Supply & Delivery

- Integration of PreP within larger health systems
- Development and successful use of digital technology platforms
- Demonstration of delivery models and appropriate use of PreP
- Evidence on linkages with sexually transmitted infections, family planning, Sexual and Reproductive Health Services
- High initiation and low seroconversion rates, however, low continuation rates observed among adolescent girls and young women
- Reaching marginalized populations, inequities exist

KPI 3.1

- 66% (2/3 Fiotec) – 100% (1/1 Wits) of project countries have secured scale up funding though donors or domestic resources

KPI 3.2

- Over 2,000 health facilities, representing 64% of total public health facilities, in South Africa are implementing PreP

KPI 4.1

- PrEP is highly effective for preventing HIV. PreP reduces the risk of HIV transmission by about 99%, however, its overall impact is contingent on factors such as effective use, individual choices and length of treatment continuation

KPI 4.2

KPI 4.3
Community-based Chemoprevention for pregnant women
TIPTOP Jhpiego and MMV

**Innovation & Availability**

- 3 manufacturers producing the treatment for Intermittent preventive treatment in pregnancy (IPTp) in Africa (local production can drive uptake of PQ products)

**Quality**

- 2 products have been WHO prequalified and are now available for procurement (Guilin product already registered in 19 countries and Universal Corporation Limited Kenya in 2 countries)
- EMZOR Nigeria has submitted dossier for WHO PQ, approval expected in 2023. Has ERP approval.

**Demand & Adoption**

- Absence of WHO Normative guideline endorsing provision of Community-IPTp could reduce demand outside project countries.
- Low nationwide adoptions in project and non-project countries
- **Increased acceptability** of the treatment as a result of the new packaging

**Supply & Delivery**

- **Integration** with community service delivery processes
- **Improved coverage** of IPTp3+ across project countries (on avg by 47 percentage points) without compromising ANC coverage
- **Healthy market**: 5 products registered across 22 countries

**Scale up & Impact**

- **KPI 3.1**: All project countries are expected to include Community-IPTp in upcoming funding cycles
- **KPI 3.2**: 11.5 million Pregnant Women targeted and 2.9 million additional women treated with Community-IPTp3 in two years post-project 2023-2024
- **KPI 4.1**: Deaths averted: 101K [28K-156K]
- **KPI 4.2**: Low Birth Weights averted: 493K [107K – 826K]
- **KPI 4.3**: Infections averted: 2.9M [828K- 4.6M]
- **KPI 4.4**: Community-based malaria prevention in pregnancy has a net cost to health systems Estimated ROI $32 : 1

$52.6 million invested 2017 - 2022
Pediatric TB – TB Speed UniB and CapTB EGPAF

KPI 1

**Innovation & Availability**
- Generic aspiration device for nasopharyngeal aspiration developed.
- Target product profile developed and presented to WHO for inclusion in operational handbook.

KPI 2

**Supply & Delivery**
- Introduced innovative models of care, new treatment options and diagnostic tools
- New Paediatric FL FDCs (treatment) and other single dispersible formulations for prevention (TPT) are included in the ERP

KPI 3.1

**Scale-up funding in project countries is yet to be confirmed**, some of the CapTB countries have secured domestic and donor funding for transition

KPI 3.2

**Countries will adopt a subset of interventions that project supported**

**Scale-up**: beyond project countries, and scale-up within project countries above current level → uncertain.

KPI 4.1

**Unitaid’s investment demonstrated increase in childhood TB detection at a subset of facilities (study data):**
- Average monthly rate of children diagnosed/site increased 1.5 times
- Bacteriological confirmation increased by 7 fold from 0.02/site/month to 0.15/site/month

KPI 4.2

**Demand & adoption**
- **Guidelines**: evidence supported update of WHO guidelines for Paediatric TB. Integrated Management of Childhood Illnesses promoted by WHO and UNICEF
- **Updated National policies, strategies and plans** across project countries (CapTB)
- **Increased uptake** of improved Paediatric TB diagnostic tools and Paediatric fixed dose combination (FDC) formulations
- **Limited uptake** of new dispersible formulations for prevention

**Supply & Delivery**
- Strengthened supply chain processes: ensuring adequate supply of preventive treatment and fixed dose combinations, engagement with multiple manufacturers and mapping of regional sources, although national level effect is uncertain
- **Direct support to governments** to procure affordable medicines

$51 million invested 2017 - 2022
WHO Prequalification (PQ III)

$22.1 million invested
2019 - 2021

KPI 2
Quality

43 product prequalified, corresponding to Unitaid’s areas of focus:
• 32 Finished Pharmaceutical Products (FPPs)
• 9 Active Pharmaceutical Ingredients (APIs)
• 2 In-Vitro Diagnostics (IVDs)

KPI 3.1
Not applicable

KPI 3.2
Continued progress streamlining & expanding collaboration with National Regulatory Authorities via the collaborative registration procedure mechanism

COVID 19

• Grant funds repurposed to support the operationalization of WHO COVID-19 Technology Access Pool (C-TAP).
• Emergency use listing (EUL) assessment of IVDs for COVID-19
• Regulatory expertise to the WHO Emergency and Science divisions
• Staff time diverted to COVID

Scale up & Impact

KPI 4.1
Quality-assured products to c.400 million additional people

KPI 4.2
By helping build healthier markets, WHO PQ serves to generate savings and efficiencies for governments

KPI 4.3
WHO PQ (McKinsey) study: ROI of 30-40:1
Summary – 2021 results

• Strong progress on HIV Self-Testing and Community-based delivery of malaria prevention in pregnancy – Unitaid has made a tangible difference in both areas to support scale up (in both cases with a strong equity impact)

• Expected impact of pediatric TB investments to be confirmed; access issues addressed in projects may still only be ‘building blocks’ towards impact. New projects on TB detection another step in this process

• PrEP investments a good example of an area where it is challenging to create impact analysis at scale; context-specific issues in each country and varying outcomes depending on the target population, prevention product used and so on – scope to analyse in more detail when the Long-Acting PrEP work concludes
Reflections – full Strategic period

- Very positive results over strategic period, some major success stories, some of which are not accounted for yet in the KPI reporting due to the definition of KPIs, which focuses on closed investments
  - e.g. the full impact of optimal HIV treatment, next generation bed nets and preventive TB not included in KPI results

- Scope to undertake some reflection and lesson learning:
  - What are the characteristics of the big successes?
  - How to view the investments with scale-potential? TB and HCV prominent – does this reflect the realities of each disease area? What else could we have done, or could do? Were we too optimistic at the outset?
  - Could we have done something differently for less successful investments?

- Legacy projects tended to be less successful
  - Some evidence that the operating model revisions made in 2016/2017 were effective?