

Private Sector Constituency

Intervention area	Gap	Reasons for the Gaps	Evidence and references for reasons for the gap	Priority impactful interventions to close the gap	Evidence and references for prioritized interventions/ strategies	Ranking e.g. based on the WHO value for money tool -VfM)
	Limited access to PREP in private sector	people unaware of availability of PREP in private pharmacies	low uptake of PREP in private pharmacies	launched and implemented; advocacy and demand generation led by MOH	MOH is the policy	
	Pharmacy programme for PREP not optimised	Incentive framework for pharmacies offering prep not clear		Service bundling where consumers are encouraged to purchase more services e.g. condom and prep		
		Limited infrastructure in private pharmacies for privacy				
		Lack of training on PREP and reporting		roll out training of pharmacies on PREP		
		Tedious reporting structure	Low reporting rates	streamline the reporting systems	implemented simpler tools	
	stigma	packaging easily identifiable as ARV medication;		discrete packaging		
PREP	Human rights and GESI approach in interventions	lack of explicit prioritization in policy and advocacy efforts	HIV stigma Index	Human rights and GESI prioritization in all policies and programmes; BCC and Value clarification training and attitude		
LUBRICANT	Shortages of condoms	local manufacturing	shortages;media	and capacity building		
	Lack of distribution of condoms in private facilities	condom programming		condoms/lubricants to		
				to fund condom		
				condoms;policy review	condoms which got	
	shortage /unavailability of female condoms					
	Waste disposal-condoms/packaging	No policy guidance on waste management		policy on HPT waste		
PMTCT	Limited capacity for PMTCT services offering	No reporting required ; no PP		health workers training		
	Limited access to PEP in private facilities	No use of community pharmacies;		pharmacies		
PEP	Reporting Gaps from private sector	pharmacovigilance		health workers in		
	lack of ARV distribution in community pharmacy	dispensing and follow up in		availability in		
TREATMENT ,CARE AND SUPPORT	Limited financing of HIV treatment and follow up tests	covered by NHIF and other		treatment and care in		
	sector	reached in HIV treatment update		with professional		
	key population;AGYW programs	KVP rights; no training of health		workers on human		
HUMAN RIGHTS PROGRAMME-	human rights approach			development and		

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