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## **The Value of Beneficiary Analyses: Who Benefits from Funds Targeted For HIV/AIDS?**

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# Abstract

The recent increase in financing for HIV/AIDS care makes it important to ensure that the monies are spent in a way that fulfills the goals of country policymakers and donors, i.e., that resources are allocated in a way that provides needed goods and services to targeted populations. In most HIV-endemic countries, stakeholders lack the data to track who is paying for HIV/AIDS care and who is benefiting from it: people living with HIV? at-risk groups? urban vs. rural? rich vs. poor? This paper discusses how beneficiary analyses of resource flows can inform policy. It describes how data can be collected, and two methodologies – National AIDS Accounts and the National Health Accounts Subanalysis for HIV/AIDS – that estimate how public, private, and donor funds for HIV/AIDS flow through the health care system. The methodologies provide information that is valuable for monitoring how current HIV/AIDS care policy goals are being met, and for informing future policy making.

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# 1. Introduction

Given the recent surge in global funding for HIV/AIDS and worldwide commitment to curbing the spread of the disease, mitigating its impact, and extending treatment access, there is enormous pressure on policymakers and donors to monitor the flow of HIV/AIDS funds to ensure that care reaches targeted populations. What matters now is not only the amount that is invested to fight HIV/AIDS but **how** these funds are spent and, ultimately, whether those in need are benefiting from these investments. In most HIV endemic countries, however, stakeholders lack the data needed to monitor the disbursement of HIV resources, let alone to determine if the resources are reaching intended targets. Thus, policymakers in these countries tend to be poorly equipped to make decisions regarding the optimal allocation of resources to meet the needs of vulnerable populations. A comprehensive system to track expenditures on HIV/AIDS programs and services by and for beneficiary populations would provide critical data on the effectiveness of current resource allocation arrangements. Such information can help answer questions such as:

- ▲ What is the burden on people living with HIV/AIDS (PLWHA) of financing HIV/AIDS care and treatment? More specifically, what is the burden on:
  - △ High-risk groups for HIV transmission versus general population?
  - △ Men versus women?
  - △ Urban versus rural dwellers?
  - △ Rich versus poor?
  - △ The poor: do they spend catastrophic amounts<sup>1</sup> to finance HIV/AIDS care?
- ▲ Where are program funds currently targeted? To which population groups? How much is being spent?
- ▲ Are government and donor resources flowing to those most in need?

A ‘beneficiary analysis’ of resource flows for HIV/AIDS can inform critical policy questions. This paper describes the outputs of such analyses and the main approaches to their implementation.

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<sup>1</sup> Out-of-pocket payments for health are considered to be catastrophic when they exceed 40 percent of a household’s capacity to pay (Xu 2005).