



## Equipping Partners with Skills to Combat HIV – One Data Point at a Time



Photo credit: Clinton Sear/FHI 360

On a sunny Wednesday in November, staff from the PEPFAR-funded LIFT II project met with a team from Afya Women Group (AWG) to review progress in managing local referral networks. Several higher level data management needs arose as the networks became more established and served increasing numbers of clients. Using a participatory approach, LIFT II helped to solve problems *with* AWG than *for* them. To ensure that AWG staff can successfully manage referral data collection, LIFT II mentored the AWG staff and helped create solutions to emerging data management challenges that are necessary to overcome if local partners are to truly control the HIV epidemic.

Globally, LIFT II has referred clients from 73 health facilities across Africa to over 550 non-health services in order to reduce clients' household vulnerability and improve their individual health outcomes. In rural Iringa Region, Tanzania, LIFT II supports AWG, a local NGO, to lead a referral network of 27 partners that extend the continuum of care for PLHIV from clinical services to community-based, non-clinical services.

AWG's efforts directly support PEPFAR 3.0 's Impact Action Agenda, which calls on PEPFAR partners to do the right things in the right places at the right time. Organizations like AWG are the on-the-ground partners whose work contribute to the overall PEPFAR 3.0 goal to sustainably control of the epidemic. This work is the right thing because targeted referrals increase client access to core treatment interventions and decrease barriers to HIV prevention, treatment and care. It is also the right place given that Iringa Region has the third highest HIV/AIDS prevalence rate nationally. Finally, AWG is working at the right time as PEPFAR and partners look to see which interventions are the most cost-effective and provide the greatest impact on epidemic control.

But what exactly does AWG do in this leadership role, and what are the data skills necessary to ensure a partner is making contributions to PEPFAR goals? In short, AWG:

1. Serves as a focal point for all service providers participating in the referral network. To manage this, AWG requires a well-mapped network of services of use to PLHIV and their vulnerable households.
2. Manages referral data collection. AWG is using mHealth surveys created by LIFT II to quickly and accurately enter data about client enrollment and referral completion.
3. Collates and analyzes referral data on a monthly basis. For this task, AWG staff need to be comfortable with health data and descriptive statistics.
4. Shares data back to the referral network and any other partners (including the Ministry of Health and LIFT II). This is a crucial step because continued, direct engagement of referral network stakeholders that includes improvements in health outcomes is essential to obtain buy-in and determine how to best scale operations.

Through LIFT II's workshop, AWG staff learned how to edit the mHealth surveys they use, enabling them to fix translation errors, add additional detail, and understand how to improve surveys for the future. Staff also learned how to review data and disaggregate by HIV status, age and sex—a key step in documenting progress towards the Impact Action Agenda. Finally, staff were oriented to a basic Excel dashboard that simplifies the reporting process and automatically presents referral data in a series of tables and charts for all referral network member services to share.

For organizations like AWG to succeed in combating the epidemic, these essential data management, analysis and communication skills are critical. In fact, they guarantee improvements on PEPFAR's Site Improvement through Monitoring System (SIMS), a quality assurance tool that provides an excellent opportunity to build and strengthen local partner data analysis skills and ensure they have ownership over the fight to control HIV in their community.

The data challenges faced by partners like AWG include higher level work (cleaning data sets, correctly interpreting trends, and on-site use of data) that are necessary to overcome if local partners are to truly control the HIV epidemic. To support AWG, LIFT II's Wednesday workshop taught 7 staff (6 men, 1 woman) advanced Excel skills in a hands-on setting.

**The Livelihoods and Food Security Technical Assistance II (LIFT II)** project was launched in 2013 by USAID as a follow-on to the LIFT project (2009-2013). LIFT II's primary goal is to build the continuum of care for people living with HIV and other vulnerable households by increasing their access to high quality, context appropriate, market-led economic strengthening, livelihoods and food security opportunities to improve their economic resilience and lead to better health. LIFT II is implemented by three core partners—[FHI 360](#), [CARE](#) and [World Vision](#).

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