



From information to impact: advancing data quality and use among civil society partners in Jakarta's HIV response

Background

After more than 40 years, an end to AIDS is within measurable reach. By assessing and closing outstanding gaps in access to HIV testing, treatment, and prevention services among individuals facing the greatest infection risks, we can achieve lasting control of the HIV pandemic and end the suffering associated with AIDS. How far do we still have to go, and how can we best get there? Well, let's consider the challenges that remain.

For routine program data to serve as a reliable compass on the path to HIV epidemic control, programs must overcome outstanding gaps in data quality and data use. Ironically, many of the front-line community health workers who play a leading role in delivering and documenting client services are less engaged in the quality assurance and analysis of data to guide action. Constraints on their time, complex review and analysis systems, and other factors impose substantial barriers to data use among those who might be best positioned to translate information into public health impact.

Strategies to overcome these barriers to data quality assurance and data use are essential to close service access gaps among individuals and populations with the greatest needs. To address this challenge in Indonesia's largest urban center, DKI Jakarta, the Meeting Targets and Maintaining Epidemic Control (EpiC) project, with funding from the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) through the United States Agency for International Development (USAID), introduced the *Pertemuan Validasi, Analisis, Visualisasi dan Interpretasi Data* (PERSIS) approach.

PERSIS supports more inclusive participation in data quality assurance and continuous quality improvement through a simple, structured system of engagement with HIV service delivery providers. Initial results for improving data quality in the public sector were described in an earlier report.¹ This document describes the application of the PERSIS approach to help

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¹ Advancing HIV data quality in the Jakarta, Indonesia public health system: initial assessment findings. 2021. Jakarta: FHI 360 LINKAGES.

community-level civil-society partners routinely assess, improve, and apply quality data to drive action. By enhancing these community capacities, PERSIS aims to lay the groundwork for expanded engagement and financing of civil society in the national response to HIV.

Data quality assessment process and tools

PERSIS implementation is driven by structured consultations with site-level staff focusing on comparisons of routinely recorded and reported data with the information in individual client records. In collaboration with the Jakarta Provincial Health Office (PHO), the EpiC team helped to develop and introduce a client management database (CMD) that can generate summaries and dashboards of reported data to facilitate rapid comparisons with individual-level data for completeness and consistency.

Members of the EpiC team work closely with community partners through monthly virtual meetings focused on validation and review of performance data from the previous month. During these two-hour consultations, participants review designated key indicators, discuss the root causes of any observed data quality deficiencies, and brainstorm solutions. If community organization staff feel they can correct any observed data discrepancies during the meeting, they make immediate revisions.

The monthly consultations typically focus on review of a core set of indicators that have documented associations with both individual client-level outcomes and population-level impact. These include: (1) the number of key population members reached, (2) the number and proportion of eligible key population members who received HIV testing, (3) the number of individuals newly diagnosed with HIV, (4) the number of individuals enrolled in care, and (5) the number of individuals initiating HIV treatment. The PERSIS tool's confidential identifier codes facilitate cohort analyses of individual client outcomes. These analyses afford teams opportunities to identify underlying client characteristics that are associated with a reduced likelihood of service engagement or continuation, and to differentiate services and prioritize support to serve individuals with these elevated risks.

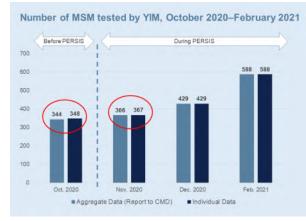
Initial implementation results

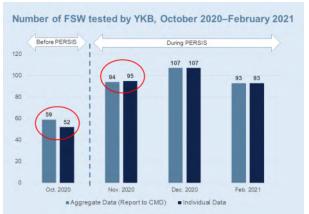
Experience to date shows data quality issues are most common for the HIV testing indicator but can be resolved rapidly. During initial implementation of PERSIS among five community partners between October 2020 and February 2021, teams flagged substantial discrepancies between reported HIV testing data and individual client records on file. The discrepancies observed among two of these partners prior to and following PERSIS implementation are depicted in Figure 1. Within one month of beginning participation in the PERSIS process, teams were able to achieve perfect consistency of reported results and individual-level client records.



At both sites—one focused on services for men who have sex with men and the other focused on services for female sex workers—testing uptake also increased substantially following PERSIS implementation. However, this may be the result of additional factors, including budgetary and target changes associated with the beginning of a new fiscal year.







Next steps

As the Jakarta PHO and the Indonesian National AIDS Program strive toward the ambitious targets necessary to achieve and sustain epidemic control, their data systems must be able to accurately track achievements and challenges. By supporting the continued evolution and implementation of PERSIS, the EpiC team aims to improve the quality of program data and strengthen capacities for routine data analysis and data-driven action. Looking ahead, EpiC plans to support the expansion of PERSIS implementation to both public sector and civil society HIV service sites across Greater Jakarta, including those receiving support through the Global Fund to Fight AIDS, Tuberculosis and Malaria.

EpiC is a global cooperative agreement dedicated to achieving and maintaining HIV epidemic control. It is led by FHI 360 with core partners Right to Care, Palladium International, Population Services International (PSI), and Gobee Group. For more information about EpiC, including the areas in which we offer technical assistance, click <u>here</u>.