

Challenge: Optimizing HIV testing performance in selected PEPFAR sites

ANALYZING DATA FROM HIV TESTING SERVICES

OUAGADOUGOU, Burkina Faso—One of the biggest obstacles in the fight against HIV/AIDS is that many people who have the virus do not know they are infected because they have not been tested for HIV.

For the past year, Ending AIDS in West Africa (#EAWA), a project funded by USAID and implemented by FHI 360 in Burkina Faso, has been working with the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) to provide HIV prevention, care, and treatment services. In 2020, Data.FI, a global HIV/AIDS project, provided technical support in data analysis and interpretation to optimize access to prevention, testing, care, and treatment services for HIV-positive patients.

A meeting was held in July 2020 in Burkina Faso to review project data from September 30, 2019 to May 31, 2020, selecting 10 sites for review using performance criteria from the Game Changer program. That project supports national efforts to achieve the "90-90-90" objectives. The meeting was attended by the #EAWA team from Burkina Faso, the Health Sector AIDS and STI Prevention Program (PSSLS-IST), clinical providers, and monitoring and evaluation (M&E) professionals from invited partner sites. Stakeholders participated in the data analysis to facilitate decision making with the goal of improving HIV testing services.

DATA ANALYSIS REVEALS UNDERPERFORMING SITES

Analyses of data on testing efforts revealed unmet targets in the number of people tested given insufficient performance at some sites in particular. Four (4) sites—the REVS+ Medical Center (CM), the Medical Center with Surgical Unit (CMA) in Kossodo, the Urban Medical Center (CMU) in Samandin, and the Outpatient Hospital of the University Hospital Center (CHU) in Bobo Dioulasso—had only achieve 30% percent of the annual target for the number of people to be tested by May 31, 2020; at that point in the year, they were expected to reach at least 66%.

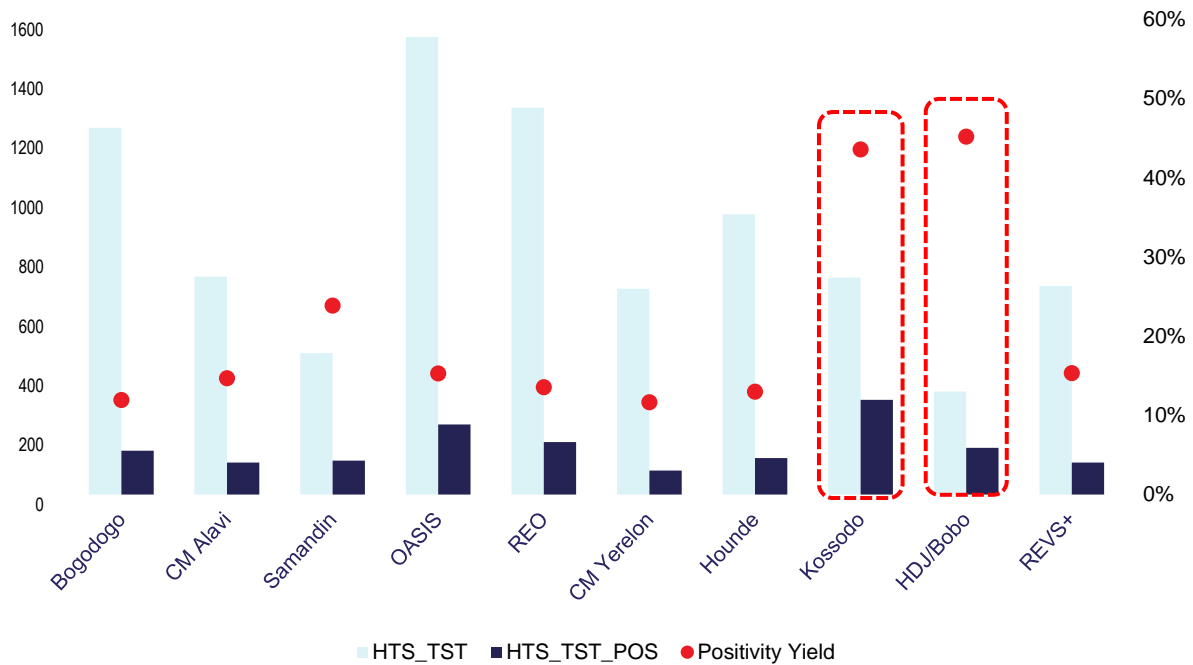
In addition, the Kossodo CMA and the Bobo Dioulasso Outpatient Hospital reported high seropositivity rates between 40% and 50%, reflecting an insufficient number of screening tests. Their data also showed that negative test results were not always entered into the electronic system (e-Tracker). This



A client being tested for HIV. Photo by Kristian Buus, Star Foundation. Flickr Creative Commons.

platform should collect all information, including HIV testing. Issues that led to the low testing numbers included the lack of support from a community association for public sites to conduct community testing, shortages of testing supplies, and a failure to enter all information sources—specifically data from all of the records used for the various testing strategies and methods.

Figure 1. Clients tested, positive cases, and seropositivity by site (October 30, 2019 to May 31, 2020)



URGENT CORRECTIVE ACTIONS

In light of these challenges, #EAWA implemented urgent corrective measures at both the CMO Kossodo and Bobo Dioulasso Inpatient Hospital locations. These actions included:

- Operationalizing support for public sites through a partner community association, to increase the number of people receiving HIV testing
- Providing sites with sufficient supplies to conduct screening tests in collaboration with the PSSLS-IST
- Harmonizing all the testing data collection tools to ensure that all tests performed are entered in the e-Tracker system

In addition to these steps, when the restrictions imposed for the COVID-19 pandemic were lifted, there was a return to normal and an effective relaunch of testing and treatment activities for HIV-positive patients.

EVOLUTION OF SCREENING TESTS BY WEEK

Figure 2. Seropositivity rate for the Bobo Dioulasso Inpatient Hospital¹

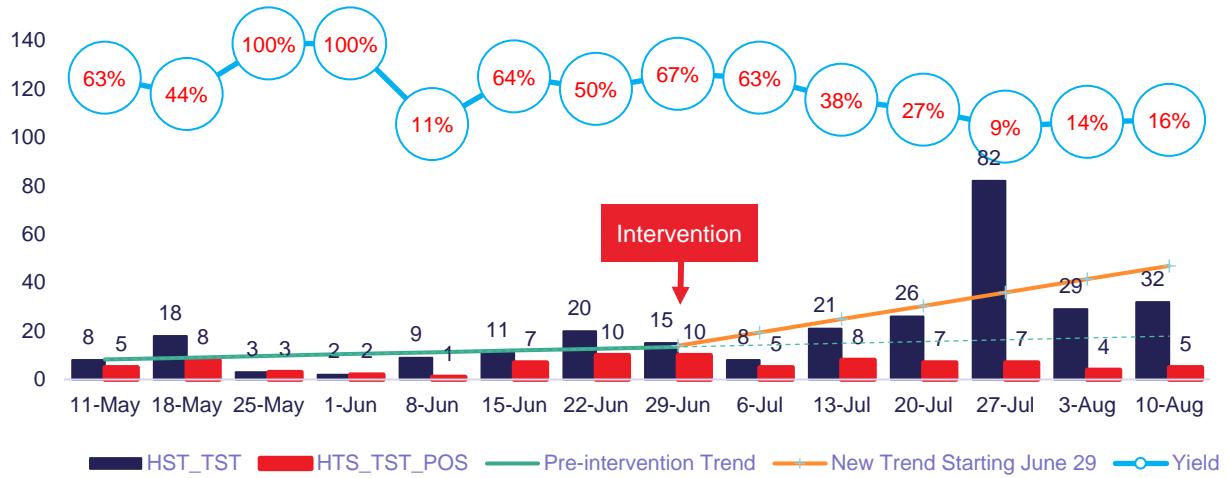
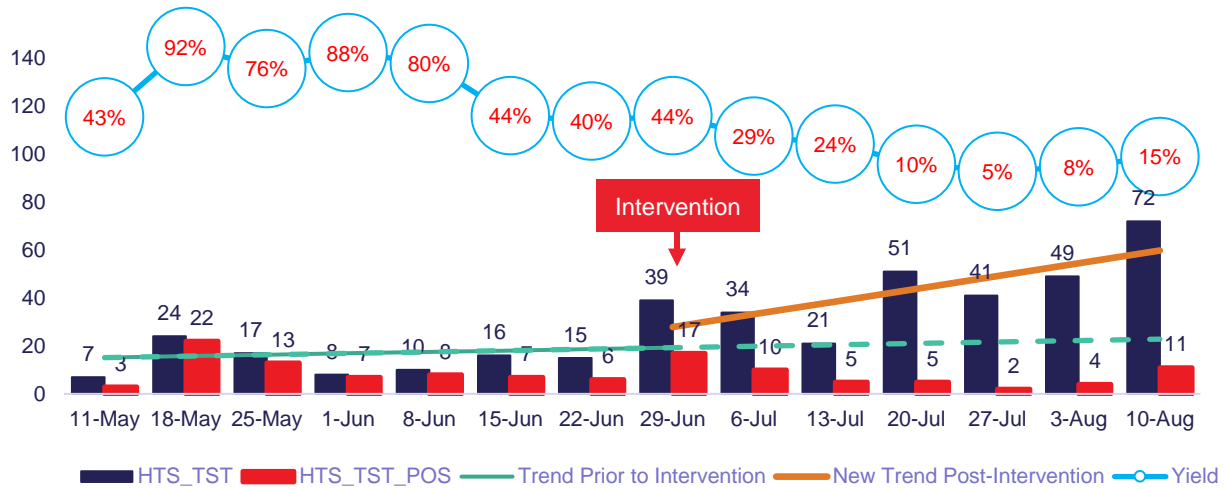


Figure 3. Seropositivity rate for the Kossodo CMA²



¹ HTS_TST Trend before intervention $y = 0.74x + 7.5$ | HTS_TST Trend before intervention $y = 5.5x - 30$

² HTS_TST Trend before intervention $y = 0.74x + 7.5$ | HTS_TST Trend before intervention $y = 5.3x - 14.6$

PERSPECTIVES FOR THE FUTURE

The following measures are needed to improve the performance of HIV counseling/testing data:

- Increasing counseling/screening services at the various sites
- Increasing the contributions of community associations and partners for public sites to conduct screening tests
- Providing sites with sufficient HIV testing supplies
- Systematically collecting all primary reporting tools during the e-tracker data entry



Girls riding bicycles in Bani, in northern Burkina Faso
Photo from IFPRI, Flickr Creative Commons.

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