Why is data important in advocacy?

Maureen Milanga
Health Global Access Project (Health GAP)

Sent 9/10/13 8:04 AM

Sokolich text to Baroni: Presently we have four very busy traffic lanes merging into only one toll booth.....
The bigger problem is getting kids to school. Help please. It's maddening
Received 9/10/13 8:05 AM

is it wrong that I am smiling?

Sent 9/10/13 8:05 AM

No

PEPFAR SOLUTIONS PLATFORM (BETA)

EPIDEMIC CONTROL   SOLUTIONS   EMERGING TECHNOLOGY   TOOLS   SEARCH

WHAT'S WORKING
to control the global HIV/AIDS epidemic

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The United States President's Emergency Plan for AIDS Relief

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Our Mission

The Office of the U.S. Global AIDS Coordinator and Global Health

ACTING U.S. GLOBAL AIDS COORDINATOR AND SPECIAL

PEPFAR in the beginning   **PEPFAR Now**

Discover the Latest Results of the U.S. Government's Efforts in Global AIDS Relief

The PEPFAR Monitoring, Evaluation, and Reporting (MER) Database is a tool for exploring the impact of PEPFAR and the current state of the HIV/AIDS epidemic.

I would like to see results for the following:

Pick a Country or Region

The U.S. President's Emergency Plan for AIDS Relief (PEPFAR) delivers life-saving services to people affected by the HIV/AIDS epidemic in 36 country and regional programs. Founded in 2003, PEPFAR is the largest investment in combating a single disease by a single country in history. To date, more than $51.52 billion has been programmed through bilateral investments in countries.

Since 2015, PEPFAR has greatly expanded access to and availability of programmatic performance data, including at the district and facility level on its own data platform.

amfAR, The Foundation for AIDS Research, is one of the world's leading nonprofit organizations dedicated to the support of AIDS research, HIV prevention, treatment education, and advocacy. Since 1985, amfAR has invested more than $517 million in its programs and has awarded more than 3,300 grants to research teams worldwide.

This database is a creation of amfAR's Public Policy Office and developed to help expand access to HIV programmatic data to strengthen civil society organizations ability to monitor, oversee, and engage with the PEPFAR program at a more robust level. It complements our PEPFAR funding database.

SECTION 3: PAST PERFORMANCE – COP 2019 Review

Table 5. COP Kenya Level FY20 Program Results (COP19) against FY21 Targets (COP20)

Indicator	FY20 result (COP19)	FY21 target (COP20)
TX Current <15	68,607	87,802
TX Current >15	1,127,827	1,261,825
VMMC >15	57,907	54,901
DREAMS (AGYW PREV)	257,358	-
Cervical Cancer Screening	7,564	292,715
TB Preventive Therapy	90,529	133,179

Table 6. COP 2019 | FY 2020 Agency-level Outlays versus Approved Budget*

Agency	Sum of Approved COP/ROP 2019 Planning Level	Sum of Total FY 2020 Outlays	Sum of Over/Under Outlays
DOD	15,723,196	13,487,342	2,235,854

2.2.5 Scale Up of Dolutegravir

As of the end of FY20 Q1, more than 500,000 PLHIV were receiving Dolutegravir (DGT) as per the 2018 ART guidelines and the July 2019 NASCOP circular that allowed for use of DTG in women of reproductive age. These guidelines are currently under revision and DTG use will be explicitly captured as part of the revision. In FY20/21, Kenya will continue to scale up use of DTG per the WHO guidelines in combination with other appropriate treatment

molecules. Kenya is already using DTG for the pediatric population and nevirapine phase out is well under way with the very small number of clients currently on nevirapine expected to transition to appropriate regimens by the start of COP20.

Even strategies built on a strong policy foundation are not enough for rapid progress. Wise use of data, with analysis down to the site-level, is needed to rapidly accelerate progress. At the Regional Planning Meeting, the Government of Tanzania (GOT), along with the United States Government (USG), renewed their commitment to working closely together to review site-level data, to use those data for rapid action, and to continue its monthly program and policy review meetings chaired monthly by the Chief Medical Officer and quarterly by the Honorable Minister of Health or Deputy Minister. GOT and USG will continue work side-by-side throughout this process to ensure that proposed policy changes quickly roll-Out at facility and patient levels.

To **make** policy where there is none and **change** policy were it is not effective at reaching people

TABLE 2: COP 2021 Earmarks by Appropriation Year*

	Appropriation Year			
	FY21	FY20	FY19	TOTAL
C&T	$ 247,000,000	$ -	$ -	$ 247,000,000
OVC	$ 38,500,000	$ -	$ -	$ 38,500,000
GBV	$ 6,000,000	$ -	$ -	$ 6,000,000
Water	$ 3,779,991	$ -	$ -	$ 3,779,991

*Only GHP-State and GHP-USAID will count towards the Care and Treatment and OVC earmarks. **Only GHP-State will count towards the GBV and Water earmarks.'*

Uganda's Planning level letter COP 21

To understand how PEPFAR programs spend resources

TABLE 3: COP 2021 Initiative Controls

	Bilateral	Central	TOTAL
Total Funding	$ 425,000,000	$ 1,500,000	$ 426,500,000
Core Program	$ 425,000,000	$ -	$ 425,000,000
Cervical Cancer	$ -	$ -	$ -
Community-Led Monitoring	$ -	$ -	$ -
Condoms (GHP-USAID Central Funding)	$ -	$ 1,500,000	$ 1,500,000
DREAMS	$ -	$ -	$ -
HBCU Tx	$ -	$ -	$ -
One-time Conditional Funding	$ -	$ -	$ -
Surveillance and Public Health Response	$ -	$ -	$ -
VMMC	$ -	$ -	$ -

Nigeria's Planning level Letter COP 21

APR 20 Performance Summary: Comparable performance of FY 19 and FY 20

Operating Unit	Indicator - *Please click indicator below for narrative	Numerator/ Denominator	FY19 Cum. Results	FY19 Target	FY19 %	FY20 Q1 Results	FY20 Q2 Results	FY20 Q3 Results	FY20 Q4 Results	FY20 Cum. Results	FY20 Target	FY20 %
Kenya	AGYW_PREV	D					220,631		257,358	257,358		
		N	120,193				124,390		217,319	217,319		
	KP_MAT	N	2,460	8,249	30%				3,746	3,746	7,936	47%
	KP_PREV	D										
		N	277,330	295,502	94%		151,740		139,048	290,788	298,626	97%
	OVC_SERV	N	627,006	794,320	79%		663,333		732,159	732,159	628,813	116%
	OVC_SERV_ACTIVE	N	599,543	788,654	76%		655,118		712,256	712,256	554,164	129%
	OVC_SERV_GRADUATED	N	27,463	5,666	485%		8,215		19,903	19,903	74,649	27%
	OVC_SERV_OVER_18	N	80,991	147,048	55%		42,628		63,845	63,845	10,553	605%
	OVC_SERV_UNDER_18	N	546,015	645,023	85%		620,705		668,314	668,314	618,260	108%
	PMTCT_ART	D	54,485	64,909	84%	12,358	14,684	13,168	12,806	53,016	60,702	87%
		N	53,836	60,376	89%	12,252	14,600	13,068	12,739	52,659	57,691	91%
	PMTCT_EID	D	56,625	64,909	87%	12,868	15,229	13,684	13,360	55,141	60,702	91%
		N	50,802	8,600	591%	11,143	13,406	12,401	12,831	49,781	57,666	86%
	PMTCT_EID_Less_Equal_Two_Months	N	41,003	305	13444%	9,447	11,159	10,434	10,477	41,517	51,598	80%
	PMTCT_HEI_POS	N	1,352			228	288	244	262	1,022		
	PMTCT_STAT	D	1,083,705	1,220,916	89%	238,889	284,098	263,512	252,331	1,038,830	1,232,277	84%
		N	1,081,051	1,194,681	90%	237,940	283,424	262,833	252,146	1,036,343	1,170,669	89%
	PMTCT_STAT_POS	N	54,485	64,909	84%	12,358	14,684	13,168	12,806	53,016	60,702	87%
	PP_PREV	D										
		N	378,604	325,522	116%		194,262		240,433	434,695	612,676	71%
	PrEP_CURR	N	37,720				41,229		57,600	57,600	47,499	121%
	PrEP_NEW	D										
		N	34,110	31,047	110%		19,325		20,516	39,841	37,947	105%
	TB_PREV	D	105,962	182,277	58%		53,029		48,263	101,292	1,323,729	8%
		N	95,995	153,454	63%		47,037		43,311	90,348	1,151,642	8%
	VMMC_CIRC	N	281,038	300,051	94%	61,338	15,669	12,806	31,779	121,592	200,000	61%

Data helps us know what we can advocate for

Source: PEPFAR Panorama Accessed 12/4/2020

PEPFAR

Data helps us defend the programs we believe should get funded

Worst performing sites in quarter 1: "Are the staff friendly and professional?"

Province	District	Facility	Are Staff Friendly and Professional?				
			Yes	Sometimes	No	Don't know	SCORE
KwaZulu-Natal	eThekwini	Cato Manor CHC	1	2	12	0	0.27
Western Cape	City of Cape Town	Nolungile CDC	0	1	2	0	0.33
Western Cape	City of Cape Town	Weltevreden Valley Clinic	0	2	3	0	0.40
Western Cape	City of Cape Town	Kuyasa CDC	1	5	8	1	0.50
Gauteng	City of Tshwane	Stanza Bopape II Clinic	0	8	8	0	0.50
Gauteng	City of Tshwane	Soshanguve Block TT Clinic	3	2	9	0	0.57
Free State	Lejweleputswa	Albert Luthuli Memorial Clinic	2	3	7	0	0.58
Free State	Thabo Mofutsanyana	Phuthaditjhaba Clinic	2	6	9	0	0.59
KwaZulu-Natal	uMgungundlovu	Howick Clinic	0	10	7	0	0.59
North West	Bojanala Platinum	Tlhabane CHC	1	7	7	0	0.60
KwaZulu-Natal	uMgungundlovu	Caluza Clinic	1	7	7	0	0.60
KwaZulu-Natal	Ugu	Umzinto Clinic	1	7	7	0	0.60
Gauteng	Ekurhuleni	Tsakane Clinic	1	7	7	0	0.60
Gauteng	City of Tshwane	Stanza Bopape CHC	2	6	8	0	0.63
Free State	Lejweleputswa	Kgotsong (Bothaville) Clinic	1	9	6	0	0.63
KwaZulu-Natal	uMgungundlovu	Mpophomeni Clinic	2	5	6	2	0.69
Gauteng	Ekurhuleni	Phola Park CHC	1	8	5	1	0.71
KwaZulu-Natal	eThekwini	Sydenham Heights Clinic	3	5	7	0	0.73
KwaZulu-Natal	eThekwini	Redhill Clinic	3	5	7	0	0.73
Western Cape	City of Cape Town	Matthew Goniwe CDC	0	3	1	0	0.75
KwaZulu-Natal	Ugu	Turton CHC	2	8	5	0	0.80
Gauteng	Ekurhuleni	Boksburg Civic Centre Clinic	0	12	3	0	0.80
Eastern Cape	OR Tambo	St Elizabeth's Gateway Clinic	0	14	3	0	0.82
Gauteng	Ekurhuleni	Nokuthela Ngwenya CHC	2	10	5	0	0.82
Free State	Lejweleputswa	Phahameng (Bultfontein) Clinic	4	8	7	0	0.84
Mpumalanga	Ehlanzeni	Tonga Block C Clinic	2	13	5	0	0.85
KwaZulu-Natal	Ugu	KwaMbunde Clinic	2	8	4	1	0.86
KwaZulu-Natal	Ugu	Marburg Clinic	5	3	7	0	0.87
Gauteng	Ekurhuleni	Lethabong Clinic	3	7	5	0	0.87
Gauteng	Ekurhuleni	Kempton Park Civic Centre Clinic	3	8	5	0	0.88
KwaZulu-Natal	eThekwini	Addington Gateway Clinic	4	6	6	0	0.88
KwaZulu-Natal	eThekwini	Goodwins Clinic	2	11	4	0	0.88
Free State	Lejweleputswa	Hani Park Clinic	4	14	6	0	0.92
KwaZulu-Natal	eThekwini	Umlazi G Clinic	3	8	4	0	0.93
Eastern Cape	OR Tambo	Holy Cross Gateway Clinic	0	14	1	1	0.93
KwaZulu-Natal	Ugu	Southport Clinic	1	12	2	0	0.93
Gauteng	Ekurhuleni	Katlehong North Clinic	1	12	2	0	0.93
KwaZulu-Natal	uMgungundlovu	Azalea Clinic	1	12	2	0	0.93
KwaZulu-Natal	eThekwini	Umlazi D Clinic	3	8	4	0	0.93
Free State	Lejweleputswa	Welkom Clinic	4	6	5	0	0.93
Eastern Cape	Buffalo City	Nontyatyambo CHC	5	5	6	0	0.94
Eastern Cape	Buffalo City	Fezeka NU 3 Clinic	1	14	2	0	0.94

Ritshidze Community-Led Monitoring South Africa

Advocacy to put resources at the front line of HIV service delivery—where it is needed most.

Understanding data helps us not make blanket recommendations but those based on evidence and understand how PEPFAR prioritises funding for countries.

The more you understand the data,

the more effectively you can advocate!

Thank you!

HIV Policy Lab

Matt Kavanagh
Georgetown University
hivpolicylab.org

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HIV Policy Lab

The HIV Policy Lab online platform systematically gathers and monitors laws and policies adopted by countries around the world—documenting where key HIV science has been translated into policy. It is an open, growing global public resource that builds data from legal documents, government reporting, and independent research. In-depth country pages, an interactive global map and comparison across issues and countries is available. Please click below to enter.

Find a country

Enter country name

Global map

View map

Compare countries

View countries

Dealing with the Data:
Accessing PEPFAR and other Data to Strengthen Advocacy

Primarily a Budgeting Exercise at the Country Level

- High level budget in the Planning Letters
- Strategy and Approaches for Programs

What's NOT Up for Discussion (generally)

- Country Level Funding (Can only be challenged with PEPFAR Headquarters)
- Which specific implementing partners will get funding.
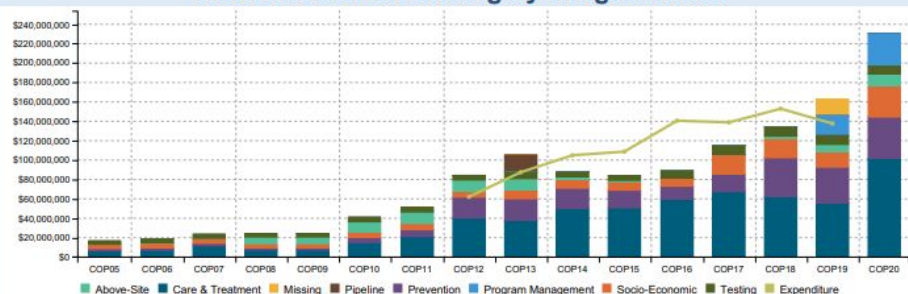
S/GAC will not assign targets to countries, but only provide notional budget levels sufficient to achieve the full SDG goal and sustain gains made. **Teams will develop their own targets across PEPFAR program areas, with the treatment current target no less than the result that was to be achieved in COP 2020.** After the PEPFAR country team submits their COP21 targets, the notional budget will then be adjusted to the presented level of ambition.

The PEPFAR Country Operational Plan (COP 2021) notional budget for Malawi is **$175,785,000** inclusive of all new funding accounts and applied pipeline. All earmarks and program direction provided below must be met. Targets and the subsequent approved budget should reflect the level of ambition the PEPFAR team, in collaboration with the Government of Malawi and civil society of Malawi, believes is critical for the country's progress towards controlling the pandemic and maintaining control.

We are hoping this approach to target-setting and budget will establish an open dialogue on target-setting and empower teams to work with all stakeholders to plan a strategic and impactful COP. The expectation is for country teams and agencies to propose to S/GAC the targets they believe are achievable and feasible and hold their partners accountable to that achievement.

PEPFAR, with partner governments, multilateral partners, and communities, continues to move rapidly toward control of the HIV pandemic and plan for sustainability of programs. Achieving epidemic control for HIV will be a remarkable accomplishment, saving millions of lives, significantly lowering the burden of HIV/AIDS in countries and communities, reducing the future costs required to sustain the HIV

TABLE 1: All COP 2021 Funding by Appropriation Year

| | Bilateral | | | | Central | | | | Total |
	FY21	FY20	FY19	Unspecified	FY21	FY20	FY19	Unspecified	TOTAL
Total New Funding	$ 166,597,085	$ -	$ -	$ -	$ 785,000	$ -	$ -	$ -	$ 167,382,085
GHP-State	$ 165,084,585	$ -	$ -			$ -	$ -	$ -	$ 165,084,585
GHP-USAID	$ -				$ 785,000				$ 785,000
GAP	$ 1,512,500				$ -				$ 1,512,500
Total Applied Pipeline	$ -	$ -	$ -	$ 8,402,915	$ -	$ -	$ -	$ -	$ 8,402,915
DOD				$ 408,022				$ -	$ 408,022
HHS/CDC				$ 696,819				$ -	$ 696,819
HHS/HRSA				$ -				$ -	$ -
PC				$ 1,967,177				$ -	$ 1,967,177
USAID				$ 3,759,857				$ -	$ 3,759,857
USAID/WCF				$ 71,040				$ -	$ 71,040
State				$ -				$ -	$ -
State/AF				$ 1,500,000				$ -	$ 1,500,000
State/EAP				$ -				$ -	$ -
State/EUR				$ -				$ -	$ -
State/PRM				$ -				$ -	$ -
State/SCA				$ -				$ -	$ -
State/SGAC				$ -				$ -	$ -
State/WHA				$ -				$ -	$ -
TOTAL FUNDING	$ 166,597,085	$ -	$ -	$ 8,402,915	$ 785,000	$ -	$ -	$ -	$ 175,785,000

SECTION 2: COP 2021 BUDGETARY REQUIREMENTS AND OTHER CONSIDERATIONS

Malawi should plan for the full Care and Treatment (C&T) level of **$94,000,000** and the full Orphans and Vulnerable Children (OVC) level of **$20,000,000** of the PLL across all funding sources. These earmark levels on new funding are subsets of those amounts that must be programmed with specific types of

PEPFAR uses data to target its resources and interventions
- At the end of the COPs process country teams must set the main targets for each country and distribute them to each district.
- Must also determine budgets for each implementing partner (CSOs NOT involved)
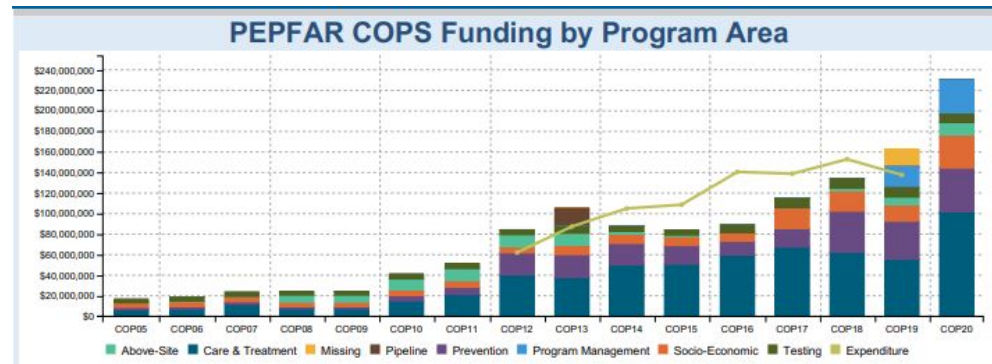
Tools PEPFAR Uses in the Room:
- **DataPack:** Sets targets for districts
- **Fast Tool:** Sets budgets for each program and implementing partner
- **Table 6:** Identifies investments in strategic information and above-site activities

PEPFAR COPS Funding by Program Area

amfAR
MAKING AIDS HISTORY

MER System

- **Primary Performance Management and M&E System PEPFAR Uses**
- **Tally based system - counts the number of services being provided, no information about the quality or individuals accessing services**

Key Pieces of Data only Available in MER

- **Primary means for tracking quarterly improvement and implementation of the COPs**
- **Granular district/facility level and implementing partner level results**

https://datim.zendesk.com/hc/article_attachments/360071630231/FY21_MER_2.5_Indicator_Reference_Guide.pdf
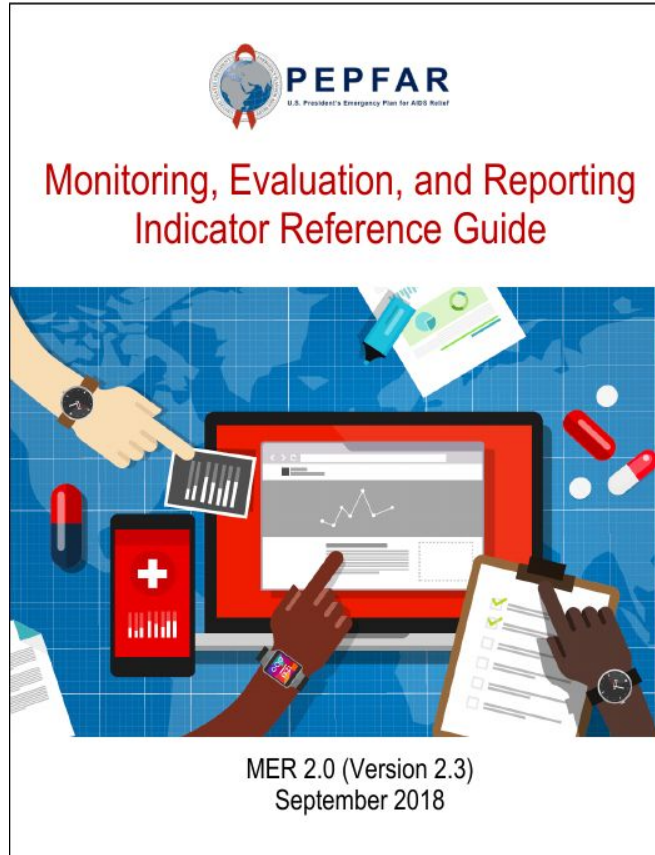
MER 2.0 (Version 2.3)
September 2018

Monitoring and Evaluation

Monitoring, Evaluation, and Reporting (MER) System

Site Improvement through Monitoring System (SIMS)

MAKING AIDS HISTORY

Prevention Services:
- *AGYW_PREV: % of AGYW that have DREAMS primary prevention package*
- *FPINT_SITE: # of service delivery sites offering integrated family planning services (NOT PUBLIC)*
- *GEND_GBV: # of people receiving post-GBV clinical care*
- *KP_MAT: # of people who inject drugs (PWID) receiving Medication Assisted Therapy (MAT)*
- KP_PREV: # of key population individuals reached with prevention programming
- *OVC_SERV*: # of orphans/vulnerable children served
- *PP_PREV*: # of priority prevent individuals reached with prevention programming
- *PrEP_CURR*: # of people currently on PrEP
- *PrEP_NEW*: # of people newly enrolled on PrEP
- *TB_PREV*: # of people completing course of TPT
- *VMMC_CIRC*: # of males accessing voluntary medical male circumcision

PEPFAR Data Systems - Monitoring and Evaluation

Testing Services:
- CXCA_SCRN: # of women screened for cervical cancer
- *HTS_INDEX: # of individuals identified and receiving HIV testing through index testing services (Partially PUBLIC)*
- *HTS_RECENT: # of newly diagnosed individuals tested with an HIV recency assay*
- *HTS_SELF: # of HIV self-test kits distributed*
- *HTS_TST: # of individuals tested for HIV and receiving their results*
- *HTS_TST_POS: # of individuals newly testing positive for HIV*
- *OVC_HIVSTAT: % of OVC with documented HIV status*
- *PMTCT_EID: # of infants tested for HIV in early infant diagnosis programs*
- *PMTCT_FO: % of infants with documented final HIV status that were part of a birth cohort (NOT PUBLIC)*
- *PMTCT_HEI_POS: # of infants (<12 months) diagnosed HIV positive*
- PMTCT_STAT: # of pregnant women tested for HIV
- TB_STAT: % of TB patients tested for HIV

Figure 1. PEPFAR MER indicators infographic

PEPFAR
Monitoring, Evaluation, and
Reporting (MER) Indicators

Prevention
1. AGYW_PREV
2. FPINT_SITE
3. GEND_GBV
4. KP_MAT
5. KP_PREV
6. OVC_SERV
7. PP_PREV
8. PrEP_CURR
9. PrEP_NEW
10. TB_PREV
11. VMMC_CIRC

Testing
12. CXCA_SCRN
13. HTS_INDEX
14. HTS_RECENT
15. HTS_SELF
16. HTS_TST
17. OVC_HIVSTAT
18. PMTCT_EID
19. PMTCT_FO
20. PMTCT_HEI_POS
21. PMTCT_STAT
22. TB_STAT

Treatment
23. CXCA_TX
24. PMTCT_ART
25. TB_ART
26. TX_CURR
27. TX_ML
28. TX_NEW
29. TX_TB
30. TX_RTT

Viral Suppression
31. TX_PVLS

Health Systems
32. EMR_SITE
33. HRH_CURR
34. HRH_PRE
35. LAB_PTCQI
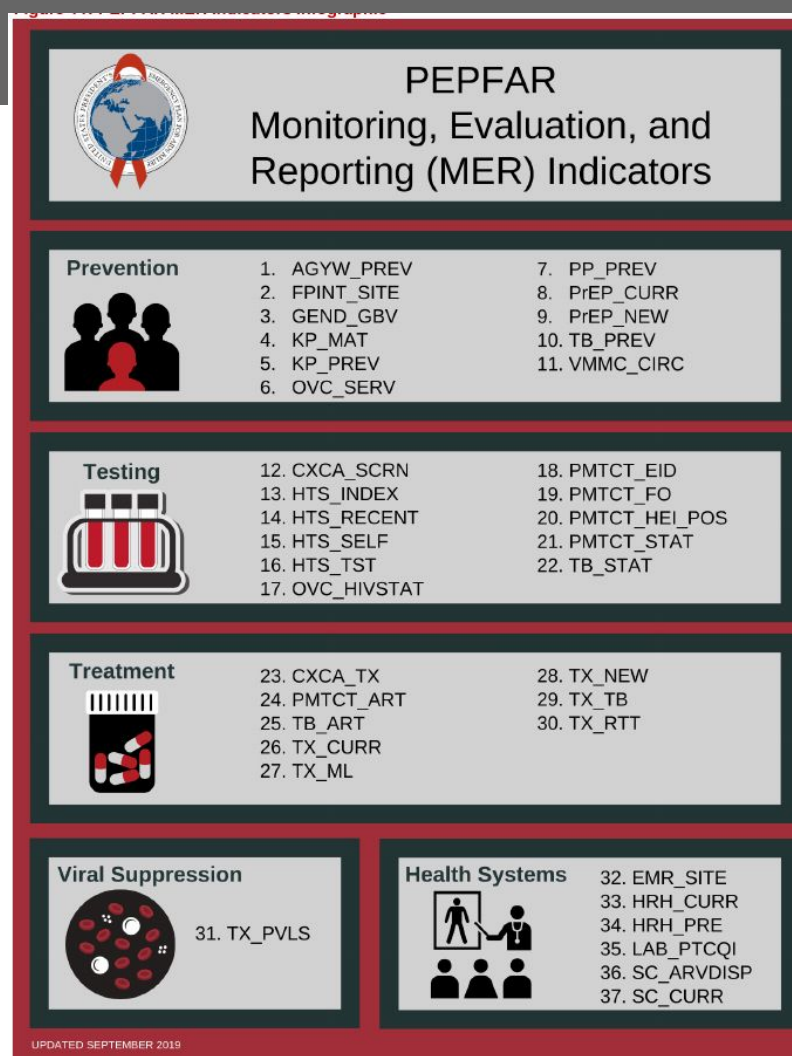36. SC_ARVDISP
37. SC_CURR

UPDATED SEPTEMBER 2019

PEPFAR Data Systems - Monitoring and Evaluation

Treatment Services:
- CXCA_TX: % of women screening positive for cervical cancer that received treatment
- PMTCT_ART: % of HIV positive pregnant women accessing HIV treatment
- TB_ART: % of HIV positive TB-patients accessing HIV treatment
- TX_CURR: # of individual currently on ARV treatment
- *TX_ML: # of ART patients who have been lost-to-follow-up (NOT PUBLIC)*
- TX_NEW: # of individuals newly enrolled on ARV treatment
- TX_TB: % of ART patients screened for TB
- *TX_RTT: # of ART patients returned to treatment after being lost-to-follow-up*

Viral Suppression Services
- TX_PVLS: % of ART patients with a suppressed viral load

PEPFAR
Monitoring, Evaluation, and Reporting (MER) Indicators

Prevention
1. AGYW_PREV
2. FPINT_SITE
3. GEND_GBV
4. KP_MAT
5. KP_PREV
6. OVC_SERV
7. PP_PREV
8. PrEP_CURR
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33. HRH_CURR
34. HRH_PRE
35. LAB_PTCQI
36. SC_ARVDISP
37. SC_CURR

UPDATED SEPTEMBER 2019

PEPFAR Data Systems - Monitoring and Evaluation

Health Systems:

- *EMR_SITE: # of PEPFAR supported facilities with an Electronic Medical Record System (NOT PUBLIC)*
- *HRH_CURR: # of health care workers working on HIV supported by PEPFAR*
- *HRH_PRE: # of new health care workers graduated with support from PEPFAR*
- *HRH_STAFF: # of health care workers working at a facility*
- *LAB_PTCQI: # of PEPFAR supported laboratory and point-of-care sites engaged in quality improvement and proficiency testing*
- *SC_ARVDISP: # of bottles of ARV dispensed by patients (NOT PUBLIC)*
- *SC_CURR: # of ARV bottles in stock (NOT PUBLIC)*

Figure: PEPFAR MER Indicators Infographic

PEPFAR
Monitoring, Evaluation, and Reporting (MER) Indicators

Prevention
1. AGYW_PREV
2. FPINT_SITE
3. GEND_GBV
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34. HRH_PRE
35. LAB_PTCQI
36. SC_ARVDISP
37. SC_CURR

UPDATED SEPTEMBER 2019

SIMS System

- **Quality Assurance and Monitoring System PEPFAR uses**
- **Meant to monitor whether facilities are implementing programs correctly and consistently**
- **Not limited to assessing PEPFAR programming at a facility**

Key Pieces of Data only Available in SIMS

- **More detail about what may be going wrong at a facility that is under-performing (i.e. is defaulter tracing being done? Do patients get viral load results? etc)**

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SIMS

Site Improvement through Monitoring System (SIMS) Implementation Guide

Version 4.0

30 November 2018

Monitoring and Evaluation

Monitoring, Evaluation, and Reporting (MER) System

Site Improvement through Monitoring System (SIMS)

MAKING AIDS HISTORY

What it is

- Spreadsheet of data
- Tool used to set the targets for the COP
- Headquarters developed and driven tool (it serves their interests primarily)
- Contains assumptions - such as PLHIV estimates - for setting national and district/county level targets
- Updated nightly throughout the COP meetings
- Only place to get certain data (such as KP and AGYW program data)

Demand it!

- DataPacks are often ONLY provided if demanded they be shared by civil society representatives
- amfAR, AVAC, Health GAP, and other colleagues will work through the data with you if you get it
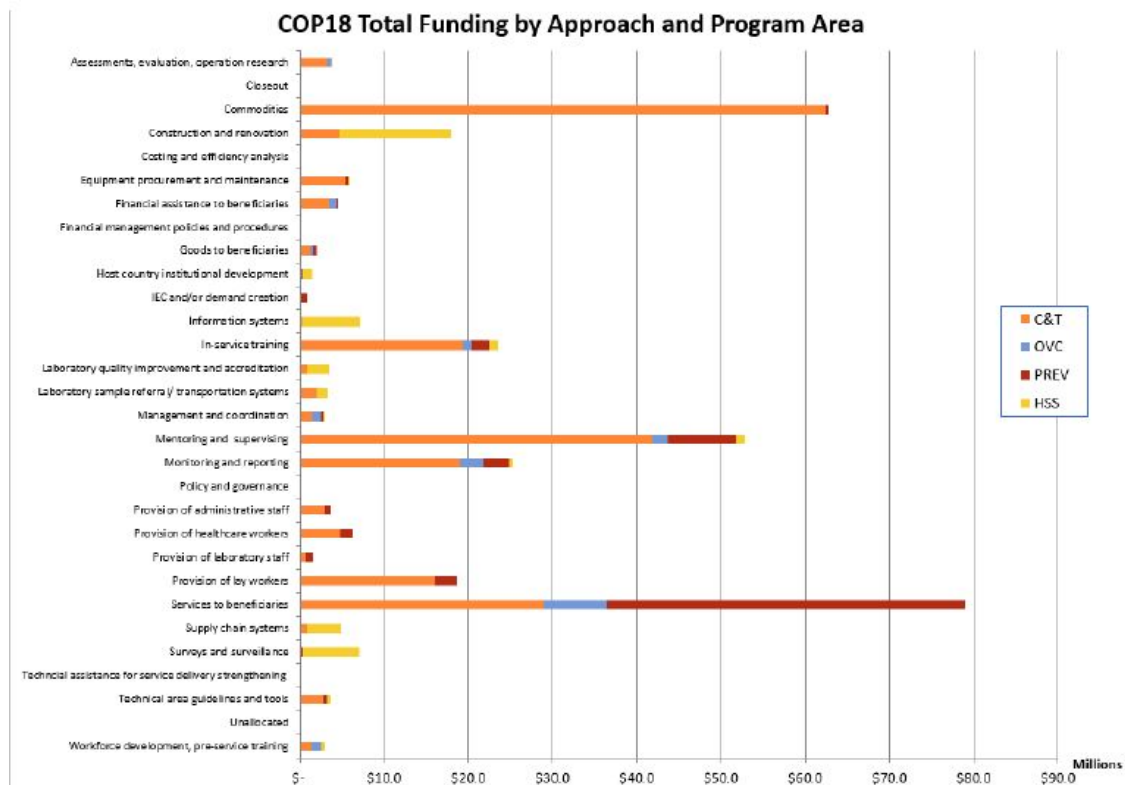- Send to: data@pepfarwatch.org

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MAKING AIDS HISTORY
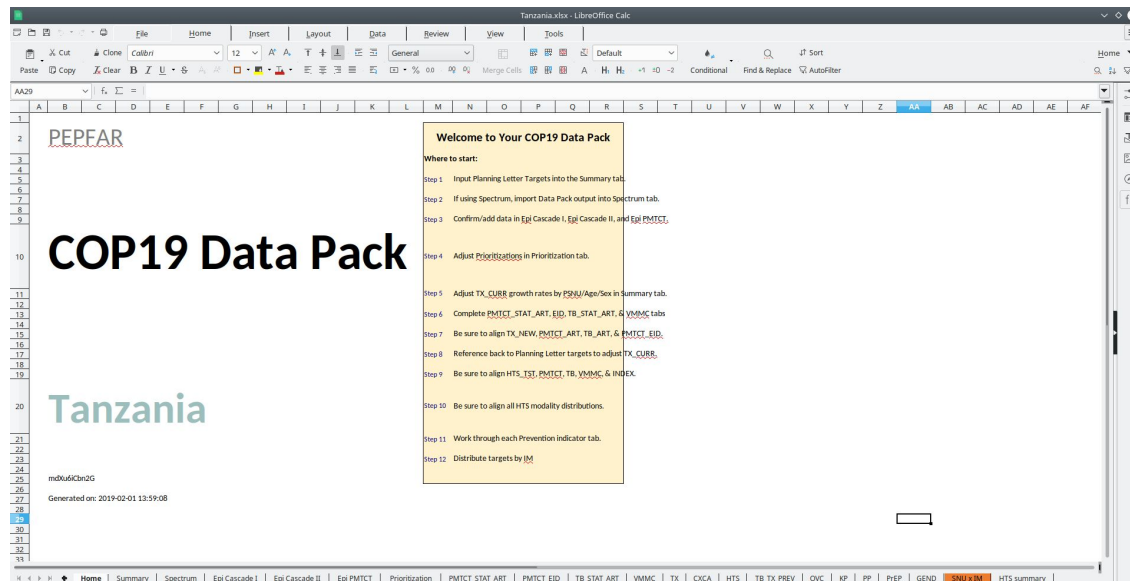
What it is
- Budgeting Tool
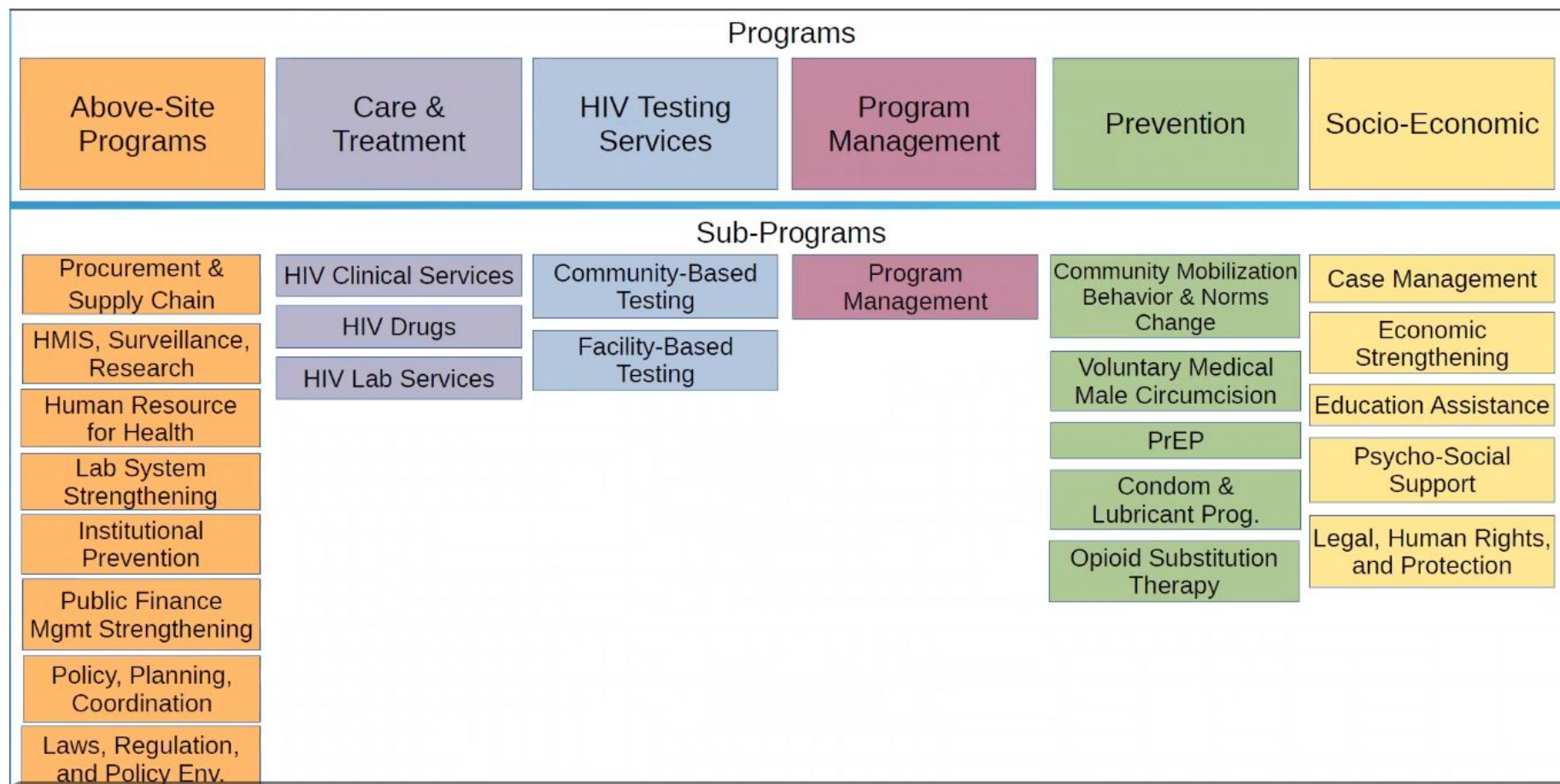- Allocates resources across partners, objectives, and populations to be served
- Determines what SPECIFIC activities will be funded
- Uses Financial Classification Framework

Demand it!
- Often NOT shared because of sensitive information
- HOWEVER, different parts CAN AND SHOULD BE SHARED with civil society representatitves
- Send to: data@pepfarwatch.org

COP18 Total Funding by Approach and Program Area

Programs

Above-Site Programs	Care & Treatment	HIV Testing Services	Program Management	Prevention	Socio-Economic

Sub-Programs

Above-Site Programs:
- Procurement & Supply Chain
- HMIS, Surveillance, Research
- Human Resource for Health
- Lab System Strengthening
- Institutional Prevention
- Public Finance Mgmt Strengthening
- Policy, Planning, Coordination
- Laws, Regulation, and Policy Env.

Care & Treatment:
- HIV Clinical Services
- HIV Drugs
- HIV Lab Services

HIV Testing Services:
- Community-Based Testing
- Facility-Based Testing

Program Management:
- Program Management

Prevention:
- Community Mobilization Behavior & Norms Change
- Voluntary Medical Male Circumcision
- PrEP
- Condom & Lubricant Prog.
- Opioid Substitution Therapy

Socio-Economic:
- Case Management
- Economic Strengthening
- Education Assistance
- Psycho-Social Support
- Legal, Human Rights, and Protection

Beneficiaries

Females	Key Populations	Males	Non-Targeted	OVC	Pregnant / Breastfeeding Women
	Priority Populations				

Sub-Beneficiaries

Adult Men (25+ years)	Displaced Persons	People who Inject Drugs
Adult Women (25+ years)	Girls (<15 years)	Sex Workers
Adults (25+ years)	Men who have Sex with Men	Transgender Individuals
Boys (<15 years)	Military & Uniformed Services	Young/Adolescent Males (15-24)
Care givers of OVC	Mobile Populations	Young/Adolescent Females (15-24)
Children (<15 years)	OVC	Young/Adolescent (15-24)
Clients of Sex Workers	People in Prisons	Not Specified

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MAKING AIDS HISTORY

PEPFAR Data Tools in the Room - Budget Structure

Cost Category	Sub Cost Category			
Construction	Construction	Not Specified		
Contractual	Health Care Workers	Interventions	Other	Not specified
Equipment	Health Equipment	Non-Health Equipment	Not specified	
Error	Error			
Fringe Benefits	Fringe Benefits			
Indirect Charges	Indirect Charges			
Personnel	Health Care Workers	Other Staff		
Subrecipient	Subrecipient			
Supplies	non-Pharmaceutical	Pharmaceutical	Other	Not specified
Training	Training	Not Specified		
Travel	Domestic Travel	International Travel	Not Specified	
Other	Other			

EXPENDITURE DATA ONLY - NOT IN BUDGET

What it is

- Details investments in above-site and strategic information
- IBBS Surveys
- IT Systems (electronic medical records)
- Supply Chain Management Systems
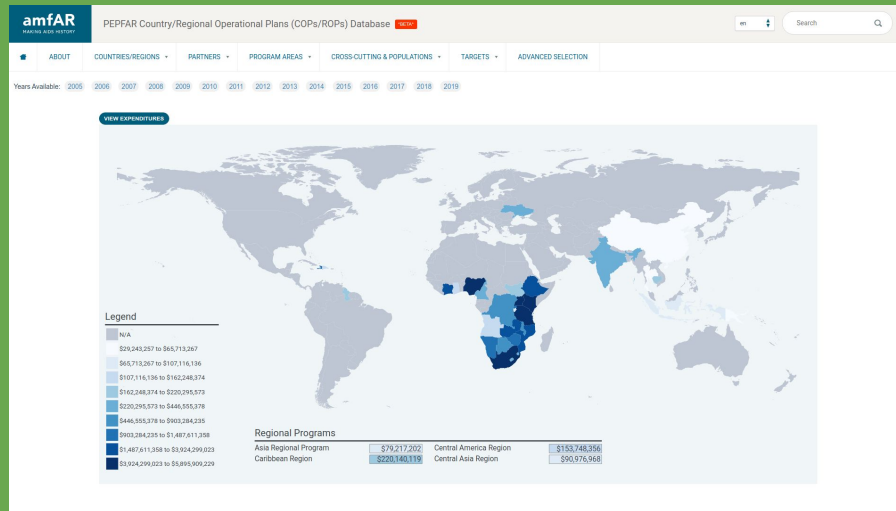- New Guidelines Development

Demand it!

- Money allocated to Table 6 can often be used to win more funding for other more important programs
- PEPFAR headquarters often skeptical of these investments as well
- Send to: data@pepfarwatch.org

Funding Agency	Mech ID	Program Area	COP18 Strategic Objective	Approach
USAID	7139	HSS	Increase Sustainable Finance and Domestic Resource Mobilization for Kenya's Health Sector	Costing and efficiency analysis
USAID	7139	HSS	Increase Sustainable Finance and Domestic Resource Mobilization for Kenya's Health Sector	Financial management policies and procedures
USAID	7139	C&T	Increase Sustainable Finance and Domestic Resource Mobilization for Kenya's Health Sector	Financial management policies and procedures
USAID	7139	HSS	Strengthen national and county linkages to enhance Kenya's health finance, policy and governance	Policy and governance
HHS/CDC	13346	C&T	Technical support for operationalization and implementation of Treat All guidelines, including improvement of clinic-lab interphase and resource mobilization.	Technical area guidelines and tools
HHS/CDC	13346	PREV	Provide technical support for HIV Self-testing; assisted partner notification services; Pre-exposure prophylaxis (PrEP) services; assessment of VMMC coverage by age bands; and implementation of the VMMC sustainability phase.	Technical area guidelines and tools
USAID	13868	HSS	Strengthened capacity of government to lead, manage and govern health communications and marketing	IEC and/or demand creation
HHS/CDC	13919	HSS	Strengthen laboratory capacity to ensure high-quality HIV diagnosis and monitoring tests, including HIV rapid tests, CD4, viral load, PCR-EID, TB microscopy and Gene Xpert. Also addresses systems barrier 2 (Laboratory in Table 6:3): weak lab quality improvement initiatives to ensure accurate and timely diagnostics.	Laboratory quality improvement and accreditation
USAID	14012	C&T	Strengthen the capacity of MOH facilities and County Health Systems	Host country institutional development
USAID	14022	C&T	Strengthen the capacity of MOH facilities and County Health Systems	Host country institutional

PEPFAR Data Systems - Accessing PEPFAR Data
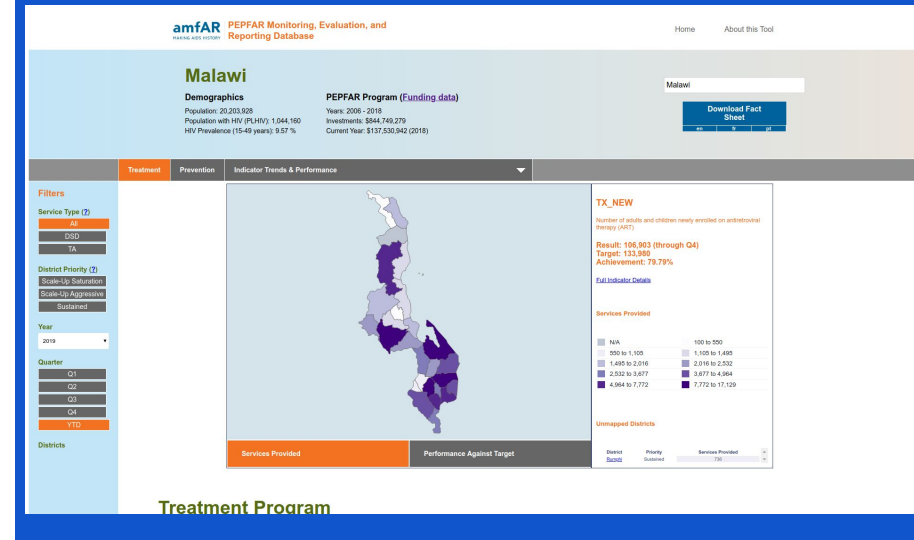
COPs Database
- PEPFAR Funding
  - What's being funded?
  - Who's getting the funding?
- PEPFAR Spending
  - Did the money get spent the way it was supposed to?

MER Database
- PEPFAR Targets and Results
  - Is the program hitting their targets?
  - Where?

Factsheets
- Summary that pulls from both databases
- Handy in the (virtual) room

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MAKING AIDS HISTORY

Thank you!

brian.honermann@amfar.org
austin.jones@amfar.org