

MODULE 7 EXERCISE MONITORING & EVALUATION OF FACILITY-BASED HIV SELF-TESTING

OBJECTIVE

This exercise will help health workers apply Monitoring & Evaluation (M&E) principles in facility-based HIV self-testing (HIVST), focusing on indicator tracking, program quality improvement, and data-driven decision-making.

LEARNING OUTCOMES

By completing this exercise, participants will:

- Understand the importance of M&E in facility-based HIVST programs.
- Identify key M&E indicators for HIVST distribution, use, and linkage
- Learn how to apply HIVST cascade analysis to track implementation, progress and identify service gaps.
- Interpret data to make decisions on programmatic improvements.

TAKEAWAY MESSAGE

Effective Monitoring & Evaluation (M&E) ensures that facility-based HIVST programs are efficient, accountable, and impactful. Tracking key indicators and using data-driven approaches enhances program quality, service delivery, and client health outcomes.

SCENARIO

You are a health worker responsible for monitoring and evaluating the HIVST program at your facility. Your role includes to support collecting data, tracking performance indicators, and identifying service gaps to improve client outcomes.

TASKS

1. UNDERSTANDING KEY HIVST INDICATORS

Instructions:

- Identify and discuss the following M&E indicators for HIVST:
 - Distribution indicators (e.g., number of kits distributed, entry points/ sites offering HIVST).
 - _ Use indicators (e.g., percentage of self-testers, test result reporting).
 - _ Linkage indicators (e.g., proportion of clients with reactive results linked to confirmatory testing and ART, linked to prevention services).
- Discuss why these indicators matter in facility-based HIVST.

Focus Areas:

- Ensure indicators align with program goals.
- Explore practical data tracking approaches for different facility settings.

2. MAPPING THE HIVST CASCADE & IDENTIFYING BOTTLENECKS Instructions:

- In groups, analyze a sample HIVST cascade:
 - Number of kits distributed \rightarrow Number of individuals who used HIVST
 - $_$ Number of individuals who used HIVST \rightarrow Number of reactive results
 - Number of reactive results \rightarrow Number linked to confirmatory testing & ART initiation.
 - _ Number of non-reactive results → Number linked to prevention services
- > Identify drop-off points where clients fail to move to the next step.
- > Discuss possible solutions to improve linkage

Focus Areas:

- Assess M&E challenges for follow up and outcome indicators
- Propose strategies to improve follow-up and linkage to care.

3. USING DATA TO DRIVE PROGRAM IMPROVEMENTS

Instructions:

- Review sample HIVST program data and interpret key findings.
- > Answer the following:
 - _ What trends do the data reveal about HIVST usage and linkage?
 - What adjustments could improve program performance?
 - How can the findings be used to advocate for improved services?

Focus Areas:

- Discuss how data can improve decision-making and resource allocation.
- Explore how M&E findings can inform services.

4. ADDRESSING CHALLENGES IN HIVST DATA COLLECTION & REPORTING Instructions:

- > Identify common challenges in M&E for facility-based HIVST, such as:
 - _ Inconsistent data reporting.
 - _ Privacy concerns in self-reporting results.
 - _ Tracking secondary distribution of test kits.
- Propose practical solutions to address these challenges.

Focus Areas:

- Explore strategies for improving data quality and completeness.
- Discuss the role of staff training and simplified reporting tools.

FINAL REFLECTION

Instructions:

- Individually reflect on:
 - How can M&E strengthen the impact of HIVST programs?
 - What challenges do you foresee in implementing M&E at your facility, and how can they be addressed?
- > Share reflections in a group discussion.

Discussion Points:

- How can M&E improve HIVST program sustainability?
- What are the best strategies for real-time monitoring and reporting?