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Role of Community Led Monitoring (CLM) as a quality assurance tool for improving coordination of HIV viral load monitoring services under the TASCQ program in Southern Zimbabwe.

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Background

Viral load monitoring is a critical aspect of managing viral infections, especially HIV, for tracking of treatment efficacy and patient outcomes. However, access to viral load testing remains a significant barrier in many low-resource settings. Traditional viral load monitoring often faces challenges such as accessibility, cost, and timely data collection. Community-led monitoring (CLM) offers a potential alternative, integrating local knowledge and resources to enhance viral load surveillance.

Description

To improve viral load surveillance community tailored adaptation strategies were implored in October 2023-August 2024. We engaged and trained 315 Community HIV/AIDS Support Agents (CHASAs) to collect Client Satisfactions Survey (CSS) that are embedded viral load indicators using digital tools in CommCare. Data were collected from a cohort of HIV-positive individuals enrolled in Target Accelerate Sustain Quality Care (TASQC) program across several rural health centres in 4 Southern Zimbabwe provinces namely Matabeleland South, Masvingo, Bulawayo and Harare. The CHASAs were then used as vital links to facilitate referrals, appointment scheduling, and follow-up care via Differentiated Service Delivery (DSD) models, which are central to community systems strengthening initiatives.

Lessons Learnt

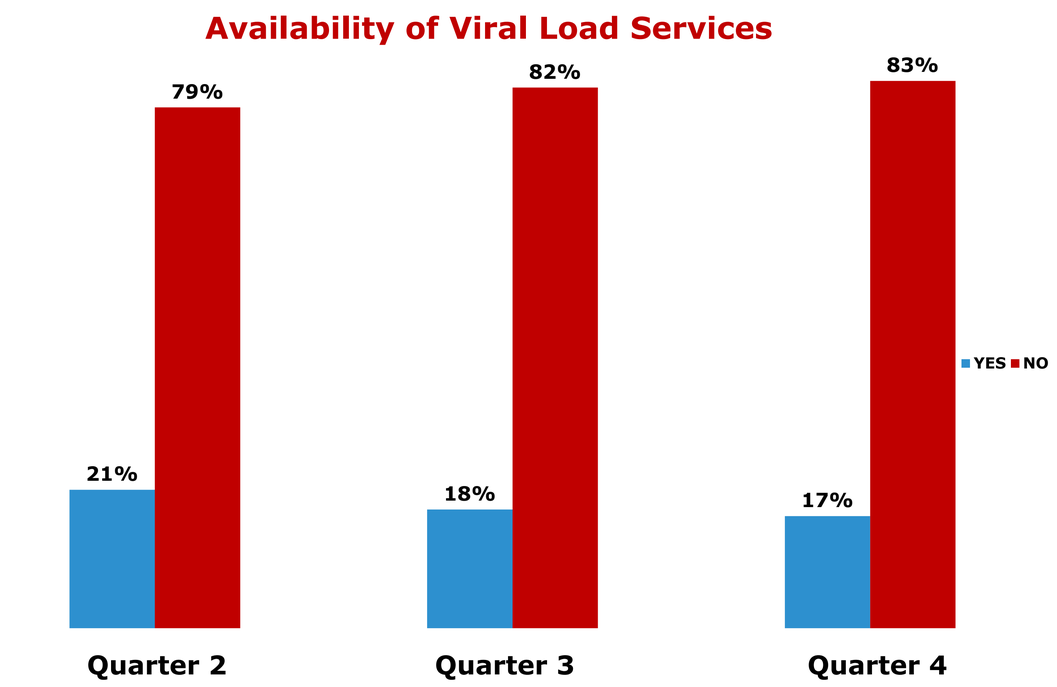

Fig1:Availability of viral load services

The TASCQ program conducted over 53,000 Client Satisfaction Surveys to identify barriers in HIV services, including tracking of viral load indicators. The data has been instrumental in enhancing quality improvement strategies localised at each facility. The enhanced quality improvement led to improvements in viral load monitoring, with the percentage of recipients without valid viral load results decreasing from 22% in March 2024 to 19% in June 2024 and 17% by September 2024.The program has facilitated community-facility linkages and CLM data has been instrumental in advocating for improved procurement planning, decentralized viral load testing, and more patient-centred service delivery.

Conclusion

CLM remains a vital tool for health systems monitoring and surveillance. Augmenting CLM, routine quality improvement efforts with periodic catch-up quality improvement campaigns increases program performance. Looking ahead, scaling up CLM initiatives and better integrating community-led data into decision-making processes will be critical to driving equity and impact in the HIV response addressing barriers to achieving the final 95% of the 95-95-95 targets.

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