

EXPANDING SUPPORTIVE SUPERVISION AND TRAINING TO IMPROVE HIV/AIDS CARE AND TREATMENT

Government-to-Government Program at Sub-National Level Helps to Strengthen Provincial Oversight and District-Level Processes

BACKGROUND

In 2019, the Government of the Republic of Mozambique (GRM) and USAID established a government-to-government (G2G) agreement called *The Institutional Strengthening for HIV/AIDS Response Project* to strengthen provincial healthcare systems for the HIV/AIDS response and to transition PEPFAR implementing partner responsibilities to provincial systems. The G2G agreement actively champions USAID's Journey to Self-Reliance and PEPFAR local partner transition goals by strengthening the capacity of the GRM to better manage their HIV response and control efforts. Under the agreement, USAID directly disburses funds to the GRM to achieve program results using the government's own financial management, procurement, and other systems.

Key Successes

- As a result of these improved procedures, which have coincided with other PEPFAR initiatives strengthening commodity procurement in Tete, the province reported a **100 percent drug satisfaction rate in 2019**
- Increased financial and technical monitoring capabilities in DPS Tete staff
- Expanded supervision support
- Better use of data for decision-making

USAID selected the Provincial Health Directorate in Tete (DPS Tete) as the implementing partner for the project's pilot thanks to Tete province's technical capabilities, relatively low fiduciary risk, and strong provincial staff.

The first iteration of the G2G agreement ran from April 2019 through January 2020 and focused around five objectives. This case study highlights successes from the objectives listed below:

1. Improving DPS' capacity for coordination and evidence-based decision-making;
2. Strengthening DPS' technical capacity;
3. Improving provincial HIV/AIDS performance indicators;
4. Increasing HIV service provision; and
5. Disseminating integrated services to victims of gender-based violence (GBV).

Due to the success of the first agreement, USAID awarded a one-year extension in February 2020 to expand the scope of the project and provided additional funds for operational research, management of medicines, production of medical articles, and procurement of surgical medical equipment (MAM).

CHALLENGES

Tete province in central Mozambique has over 2.5 million inhabitants spread throughout 15 districts and rural areas, making it one of the largest territories in the country. DPS Tete's mandate is to provide supervision and technical support to 143 health facilities throughout the province's districts. Oversight and supervision are vital to delivering needed training and process optimization to develop districts' capacity in monitoring, evaluation and learning, quality service delivery, and commodity processing. Supportive supervision also emphasizes joint problem-solving, mentoring, and two-way communication between district and provincial staff, which can improve HIV epidemic control.



Kazula Health Center worker after a supervisory training visit.

Prior to the G2G agreement, DPS Tete was only able to provide limited oversight, support, and supervision to health facilities due to funding limitations. This constrained their ability to supervise activities related to the national HIV/AIDS response and deliver a country-led response.

“The G2G agreement support is essential, especially due to the limitation of the State Budget, without this support, it wouldn't be possible to implement all the reported activities.” - Dr. Alex Bertil, Director of DPS Tete

IMPACT

With the funding through the G2G agreement, DPS Tete was able to visit 105 health facilities in 2019 compared to 87 in 2018 which is an increase of 17 percent. This case study examines the broader impact of the G2G Agreement through each of the aforementioned focus areas.

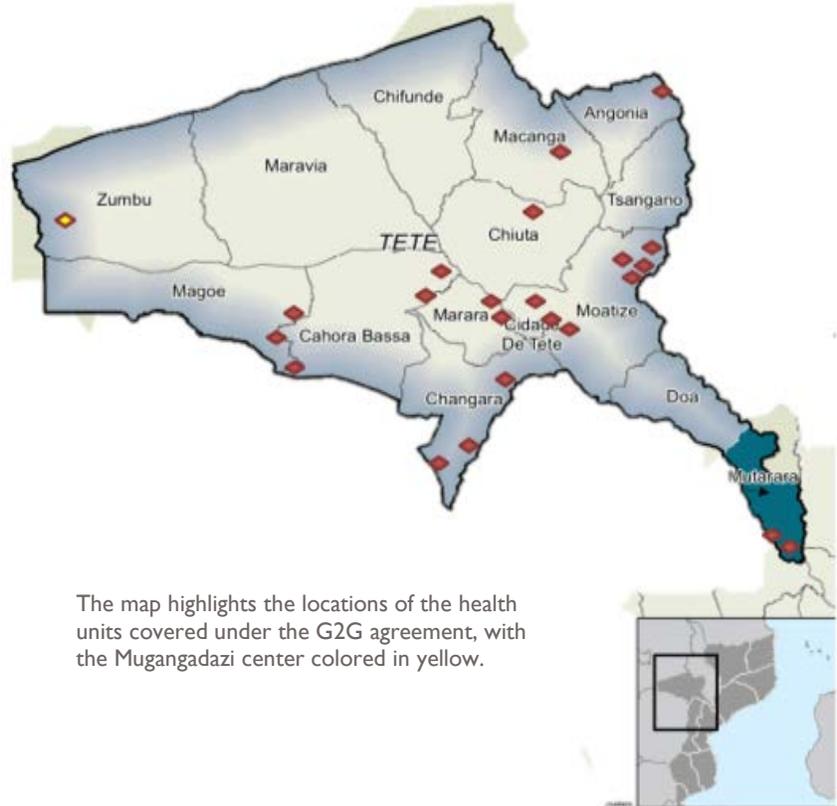
IMPACT: INCREASED SUPERVISION TO REMOTE AREAS

The G2G funding allowed DPS Tete to provide broader support and supervision to health facilities previously neglected due to remote location or lower caseloads. With G2G support, DPS Tete conducted 105 integrated supervision and HIV-focused technical support visits to all districts. Specifically, in 2019, DPS conducted:

- Two visits to each district to provide support on pharmaceutical, laboratory, and nursing technical capacity.
- Three visits to each district to reinforce the provincial monitoring, evaluation, and learning system.
- Two visits to each district to provide HIV clinic tutoring and technical support.

The G2G agreement enabled DPS Tete to provide **seven integrated supervisory visits** to each district, providing the necessary financial support for staff to travel across the province's

expansive territory and reach health centers and districts outside of Tete city, which have not received adequate training to complete duties or supervision in over two years. For example, Mugangadazi Health Center in Zumbu District is the most remote health facility in Tete (see map), located 270 km from the district health office headquarters on the Zimbabwe border. Before the G2G agreement, DPS Tete was not able to visit this location on an annual basis. However, with the G2G agreement, DPS Tete was able to conduct three visits to the Mugangadazi Health Center in 2019.



The map highlights the locations of the health units covered under the G2G agreement, with the Mugangadazi center colored in yellow.

SECONDARY IMPACT: IMPROVED HIV/AIDS DATA QUALITY



DPS supportive supervision to Tete's districts involved training and support on pharmaceutical, laboratory and nursing technical skills.

accurate and timely reports with validated data. As Sandra Viga, Tete's Provincial Supervisor to HIV Programs, notes, "Before the G2G agreement, it was common for district headquarters to lack target monitoring for health facilities. Hence, reporting on HIV programs was extremely poor. After the G2G support, the districts headquarters are knowledgeable of the DPS targets, and are monitoring the targets of the health facilities, and are now capable of doing critical analysis and validation of data shared by the health facilities." With timely reports, DPS Tete can analyze and validate data and monitor target achievements before submitting the data to the central government.



DPS Tete's supervisory visits also improved the quality of HIV/AIDS data reporting. Prior to the G2G agreement, clinical HIV indicator reporting from districts and health facilities were sometimes inconsistent. With G2G funding and increased supervisory visits, **DPS Tete could ensure districts delivered**

SECONDARY IMPACT: IMPROVED DRUG DISPENSATION

In concert with other PEPFAR and government initiatives supporting improved HIV/AIDS supply chain efforts in Tete, the G2G agreement contributed to the province reporting a **100 percent drug satisfaction rate in 2019**. Prior to the G2G agreement, inaccurate reporting from health facilities to the central level sometimes resulted in ART stockouts. Stocks would arrive on time but would not meet demand due to inconsistencies in the request forms. To improve commodity processing, DPS Tete provided training sessions during their integrated supervisory visits. With G2G support, DPS Tete staff delivered trainings associated with stock request procedures to help ensure districts and facilities

correctly fill out the monthly mapping of antiretroviral therapy (ART) medication during supervision visits. DPS Tete also conducted on-the-job training of health facility personnel to correctly fill out the monthly ART Information Map (MMIA), detailing the correct way to fill out the ART booklet, the transposition of the ART booklet to the MMIA report, and the comparison of the number of patients on ART with the number of patients that collect ART. Pinto Siteo, the District Manager of the HIV response in Chifunde District, received this training and stated, “The improvements are visible, health facilities are now complying with procedures to fill in the HIV tools and I don’t remember the last time that stockouts in ART were reported in the health facilities of Chifunde District – it’s been so long since stockouts have been reported.”

SECONDARY IMPACT: 16 DAYS OF GENDER ACTIVISM

Between November 25 and December 10, 2019, Tete released communication messages around GBV awareness, disseminated information on the laws and policies related to sexual violence, and held meetings and lectures in public, private, and community institutions to educate participants on a healthy ways of living for couples and to disseminate instruments for the promotion and protection of women in communities. The 16-days of activism culminated in a central ceremony chaired by Ms. Lina Portugal, the Permanent Secretary of Tete province. She and other speakers delivered key messages about HIV care and treatment, victims of sexual violence, the importance of ending premature unions, and the domestic violence law and other important family laws.

SECONDARY IMPACT: IMPROVED GOVERNMENT RELATIONS AND COORDINATION

The G2G award process strengthened DPS Tete’s capacity to streamline internal coordination and implementation in accordance with Ministry of Health priorities through careful planning, priority verification, and evaluation efforts. This allowed DPS Tete to not only improve district-level capacity, but also improve provincial support. In addition to the additional funding through the G2G agreement, USAID provided technical support from USAID/Mozambique staff to strengthen DPS capacity in planning, administration and finance, human resources, and monitoring and evaluation. For example, USAID facilitated the DPS Tete Organizational Capacity Self-Assessment (OCA), assisted with MEL planning and gender integration development, and completed quarterly technical and financial monitoring visits.

CONCLUSION

The G2G agreement provided the technical assistance and the financial means to help DPS Tete strengthen their internal operations to meet, if not exceed, their mandate to provide oversight and supervision to district health facilities to improve HIV/AIDS epidemic control. This, in turn, improved district-level processes, leading to better quality of care, fewer stockouts, and improved data. The success of the G2G agreement in Tete is now a model that is being applied to other provinces in Mozambique, such as Niassa, and demonstrates the mechanism’s importance when combined with a strong government partner to achieve lasting impact.