MEASURE Evaluation August 2019

Community-Based Indicators for HIV Programs Key Populations

In line with MEASURE Evaluation's work to build capacity for monitoring and evaluation of key population programs, the accompanying indicators will guide HIV program implementers in the collection and analysis of data for essential indicators. The standardization and harmonization of essential indicators for performance monitoring improves the effectiveness of efforts to reduce HIV transmission and increases rates of enrollment and retention in care among transgender people, sex workers, men who have sex with men, or people who inject drugs. Community programs have relied on community workers and community mobilization interventions to address HIV risk in key populations through activities like health education, condom distribution, and community organizing, among others. Community and outreach workers and peer volunteers are essential for effective targeting of key populations and bridge populations because these workers have a unique capacity to identify locations of higher prevalence of HIV and other sexually transmitted infections and offer support.

MEASURE Evaluation reached out to PEPFAR (United States President's Emergency Plan for AIDS Relief)—and other donor-supported programs implementing programs at the community level to support key populations, including



the PEPFAR-funded LINKAGES—to obtain data collection tools. The tools received are used by community workers in Nigeria, Ethiopia, South Africa, Uganda, Kenya, Côte d'Ivoire, the Democratic Republic of the Congo, and Botswana to track and monitor outreach provided to key populations—including testing, sensitization trainings, and behavior change communication activities. The most



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common data elements among these tools were incorporated into the indicators in this collection. Each indicator is accompanied by a definition. These definitions were specifically designed to inform data collection by community programs and agents. To learn about the vulnerabilities faced by key populations living with, exposed to, or vulnerable to HIV (and to access associated tools and resources) go to the MEASURE Evaluation Key Populations or FHI360 LINKAGES main pages.

For more information visit the links below.

Number of people who were tested for HIV and received their results

Number of people living with HIV who know their status

Number of people currently on antiretroviral therapy

Number of people known to be on treatment 12 months after initiation of antiretroviral therapy

Number of people who received sexually transmitted infection screening and treatment

Number of people who report the use of a condom at last sex

Number of people of reproductive age currently using a modern family planning method

Number of people testing positive for tuberculosis who adhere to treatment

Number of people identified to have experienced sexual, physical, or emotional violence

Number of people reached with individual or small group level community HIV-prevention interventions

Number of people who were nutritionally assessed and received nutrition counselling and therapeutic or supplementary food

Number of people living with or affected by HIV provided with spiritual or psychosocial support services

Number of vulnerable children provided with educational support services

Number of people who accessed legal counsel, protection, or post-violence services

Number of people provided with socioeconomic strengthening services

Number of people provided with referrals for services in the past three months

Number of people provided with completed referrals for services in the past three months

Community-based information systems (CBIS) are key to understanding how HIV programs are working to control the epidemic at the local level in countries with high burden. MEASURE Evaluation developed this collection of indicators to guide community-based HIV programs in monitoring their performance and thereby enhance informed decision making by governments, major donors, and implementing partners.







