

LEVERAGING THE POWER OF DIGITAL TECHNOLOGY FOR COMMUNITY-LED MONITORING



HEALTH
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DIGITAL TECHNOLOGY, REAL-TIME DATA, AND COMMUNITY ACTION

National HIV, TB and malaria programs continue to face challenges of service quality, commodity supply and distribution, and human rights barriers that negatively affect health outcomes. CLM is an intervention through which communities systematically and routinely collect and analyze data from service delivery sites. CLM mechanisms can focus on general health, disease-specific or intervention-specific services. When implemented at health facility level, these data can provide deep insights on targeted action to improve patient experience and the overall quality of care, resulting in better health outcomes for individuals and the broader community. Importantly, CLM is complementary to national health management information systems (HMIS) and, together, these data can also inform national strategic and operational planning for HIV, TB and malaria programs to improve overall implementation and mitigate programmatic risks.

The Global Fund 2023-2028 Strategy describes CLM as a priority intervention for evidence-based programs and policies, as well as promotes the use of innovative digital approaches for data generation and use. The Global Fund has updated its modular framework, information notes, and application materials to encourage applicants to include CLM in funding requests.

DIGITAL TECHNOLOGY FOR CLM

The strength of CLM rests in that it is owned and conducted by the community. The ability to continuously track unique community-generated data and report back on a set of indicators that matter most to service users is powerful. This data can also be compiled and triangulated with government data over time for a more comprehensive picture of service delivery. While the design approach and choice of data collection tools depend on the goals of each CLM program, digital technology has a central role in supporting the intervention. Digitalized data and digital platforms help accelerate, integrate and improve efficiencies in the collection, analysis and use of data demonstrating good value for money. The potential of real time data and remedial action when things go wrong is a powerful enabler for community action.

Importantly, the introduction of digital technology for CLM may be novel for some communities, and users may express fear and/or mistrust of digitalization. It is critical to acknowledge these concerns, addressing them openly and with sensitivity. Building trust around the digital platforms which facilitate the secure storage and sharing of CLM generated data is a necessary step for fostering local ownership and sustainability.

Dure, a pre-qualified supplier of the Global Fund for digital health and transformation, is an important actor in the digital CLM landscape. [Dure's iMonitor+ CLM platform \(3\)](#) is one of the most widely used digital open-source platforms and is currently implemented in more than 40 countries supporting HIV, TB and malaria programs. It has been adapted, adopted and implemented in many different programmatic contexts by a range of implementing partners, [Onelmpact by Stop TB Partnership \(4\)](#), Voice+ by GNP+, MyRights by Save the Children, ATM Kenya by AMREF and Communities Matter by SANAC and SmartNet by PMI, for example.

iMonitor+ supports the programmatic aims of CLM and can be tailored to communities' specific needs with a range of features including: crowdsourcing data from a range of sources that includes social media channels, mobile apps, web app, USSD, excel sheets and many more; promoting social and behavioral change communication (SBCC); generating and updating facility lists to inform communities on the nearest available health services; and hosting a community forum for virtual dialogue and exchange. There is also a focus on the community response mechanism of CLM. The response module of iMonitor+ enables community-based and community-led organizations to review reported issues through an interactive response module and dashboard in real-time and act promptly with targeted action.

Another key feature of the iMonitor+ CLM platform is a comprehensive advocacy and program dashboard which synthesizes and reports on core CLM indicators, including service availability, accessibility, acceptability and quality; human rights; and support services as reported by affected communities.

The dashboard offers interactive maps, charts and infographics that can be easily understood and communicated by CLM implementers, facilitating evidence-based advocacy and action. The dashboard can be shared with national programs to inform policy and programming decisions.

Importantly, the iMonitor+ smart configuration set-up allows the CLM implementers to constantly update and adapt the platform (i.e., data variables, information content, health facility details, etc.) based on the evolving needs of the community. This fosters local ownership and sustainability from the outset.

ACHIEVING RESULTS

Investments in digital CLM are expected to generate clear outcomes. CLM generates data and supports the community response. Improved efficiencies in data collection, analysis and use will enable CLM implementers to better identify challenges and offer actionable solutions and evidence-based recommendations to improve the effectiveness, efficiency and equity of services across HIV, TB and malaria programs. This will contribute to both reducing incidence and addressing structural barriers to improving health outcomes.



PLANNING, BUDGETING AND IMPLEMENTATION CONSIDERATIONS FOR DIGITAL COMMUNITY-LED MONITORING

There is an opportunity to strategically position digital CLM in funding requests to the Global Fund for the 2023-2025 allocation period. Below are important considerations for applicants as they plan and budget for the design, delivery and evaluation of digital CLM programs. Note, the funding request should include a fully costed budget for CLM; the categories below reflect only those considerations related to digitalization.

DIGITAL PLATFORM

Applicants should plan and budget for the necessary CLM software (i.e., iMonitor+ platform) to enable digital data collection, analysis and reporting. Operational costs to support the software will vary country to country based on hardware availability and additional IT-related needs.

HUMAN RESOURCES

Applicants should plan and budget for the following human resources in the funding request as they relate to digital data collection, analysis and reporting: one dedicated project manager, two field operation managers, one digital CLM specialist, one digital health expert, one data scientist and a senior M&E expert.

TECHNICAL ASSISTANCE

A request for technical assistance (TA) to support digitalization may be included in the funding request. TA will be adapted to meet local needs and may include the conceptualization, adaptation and co-creation of the iMonitor+ platform to ensure the digital solution meets the programmatic needs. Specific TA activities may include, for example, a community needs assessment, the design and adaptation of the iMonitor+ platform, user field testing and support for the implementation and operationalization of the platform on the ground. The team of TA providers is usually composed of a business analyst, team of digital health experts, field testers and digital implementation experts. For first year, two travels should be planned: a first trip will include the business analyst and one project manager for a period of two weeks, and a second trip will include one trainer and one operational expert for a period of two weeks. Once the iMonitor+ CLM platform has been launched, an additional week-long trip for one resource should be planned and budgeted for ongoing implementation, training and field support. Budgets should include flights, accommodation and per diem costs as per the travel policies of the organization.

HOSTING AND DEPLOYMENT

iMonitor+ uses a flexible hosting model. The platform can either be hosted in a country's physical server or hosted in any preferred cloud server by an organization. If feasible, the existing hosting infrastructure should be leveraged. In absence of any existing infrastructure (i.e., servers), the organization should plan and budget for procuring the necessary hosting infrastructure and supporting an enabling environment.

SCALE UP AND DISSEMINATION

Applicants should plan and budget for dissemination and promotion activities to maximize the reach of iMonitor+ CLM platform. Various ways of dissemination approach should be explored such as social media campaigns, national/local television and radio channels and leveraging existing national program communication channels, for example.

ADDITIONAL CITATIONS

1. CLM of programs and policies related to HIV, TB and Malaria - <https://www.differentiatedservicedelivery.org/resources/community-led-monitoring-of-programs-and-policies-related-to-hiv-tuberculosis-and-malaria-a-guide-to-support-inclusion-of-clm-in-funding-requests-to-the-global-fund/>
2. Information note RSSH - https://www.theglobalfund.org/media/4759/core_resilientsustainablestemsforhealthinfonote_en.pdf
3. iMonitor+ CLM Platform - <https://web.imonitorplus.com/>
4. One Impact Digital CLM <https://stoptbpartnershiponeimpact.org/>
5. The Global Fund Quarterly Oct'21 - OneImpact Digital CLM (Page 6) – https://www.theglobalfund.org/media/11449/tb_2021-quarterly-tuberculosis_update_en.pdf
6. The Global Fund Quarterly Oct'22 - Prevent TB Platform (Page 4-6) - https://www.theglobalfund.org/media/12452/tb_2022-10-quarterly-tuberculosis_update_en.pdf
7. The Bangkok TB Community-led Monitoring Summit Statement 2022 - <https://stoptbpartnershiponeimpact.org/statement/v1/>



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