The Global Challenge
With an estimated 3.8 million people living with HIV worldwide, efforts to achieve the UNAIDS 95-95-95 targets towards HIV epidemic control remain as critical as ever. Strategic health information and health information systems play a crucial role in these efforts.

RISE is a 5-year global project (2019–2024), generously funded by PEPFAR and the U.S. Agency for International Development (USAID), to support countries to achieve and maintain epidemic control by providing strategic technical assistance and direct service delivery to improve HIV prevention, case finding, treatment programming, and viral load suppression. To improve quality of care at all levels of the health system, RISE engages and support ministries of health (MOHs) to build and deploy systems for the strategic collection, analysis, dissemination, and use of health information, aligning our approach to support existing local human resources, HISs, eHealth plans, and policies.

Our Technical Focus in Strategic Information
Strong data collection and information systems are the backbone of strong health systems. Optimized information systems allow for continuous monitoring of health, performance, and quality indicators across the health system. RISE partners have experience building on a country’s existing HISs, using cost-effective and appropriate tools with a steady focus on users’ data needs. The RISE approach includes:

- **Strengthening capacity for high-frequency reporting and data use, including interpretation, triangulation, visualization, and use for rapid course correction.** Strategic information is a vital component of our health systems strengthening approach. We work closely with stakeholders to build and manage systems that allow providers and programmers to easily access key data and then leverage that data in their day-to-day work.

- **Integrating national, subnational, and site-level information systems, including health management information systems (HMISs), electronic medical records (EMRs), and DHIS2.** We support the development of standardized tools, forms, and reporting systems and work with countries to build the capacity of stakeholders to enter and use the data. We help transition MOHs to DHIS2 and train district managers and health facility workers to use the system to analyze key indicators. RISE promotes integration of national, subnational, and site-level information systems,
including “situation rooms” for collaborative data review and use, featuring health management information systems, electronic medical records and use of DHIS2.

- **Developing and adapting custom indicators to respond to program monitoring needs.** We work with key stakeholders to assess whether the data being collected can help health care providers and program directors understand the effectiveness and impact of their programs. We work at the national and subnational level to update HMIS tools and facility registers to include World Health Organization indicators and other critical data points, increasing the quality of data in the HMIS.

- **Supporting interoperability between health information subsystems.** We create linkages and data integrated solutions between human resources information systems (HRISs), DHIS2, and other information platforms for seamless integration. RISE partners have experience working with tools for data collection, transmission, aggregation, storage, and visualization, and know the integration efforts required to make these systems efficient.

**Examples of Our Work in Strategic Information**

As is true for all of RISE’s technical areas, our work in Strategic information is crosscutting, spanning efforts in health systems strengthening, HIV testing, and laboratory services, among others. Examples of RISE partners’ work include:

- **In Nigeria,** RISE has supported integration and deployment of biometrics into LAMIS3.0 (USAID supported client-level database) at RISE-supported HIV care and treatments sites in three of four States including Akwa Ibom, Adamawa, and Cross Rivers. Use of biometrics helps improve data quality by preventing identity errors, multiple client registration, combat fraud and identity theft. It also allows easy patient enrollment and identification for both new and existing patients. As of the end of September 2020, a total of 64 (out of 90) facilities currently run and report the Patient Biometric System (PBS) with plans to scale up of this system to all facilities. To date, Adamawa has captured 1,946 (22%) clients, Akwa Ibom 1,373 (4%) and Cross River 818 (10%) of the active clients.

- **As in Nigeria, the RISE SI team has set up an M&E system that fully integrates with the Government of Nigeria’s HMIS and that instills a culture of quality, data use, and accountability across teams. This system uses a project DHIS2 instance to capture real-time data coupled with a server that hosts copies of all supported health facility client-level data which is updated weekly in the National Data Repository. This access to granular data is facilitated with the use of PowerBi dashboard which are shared and used in State managed and run Situation Rooms. Data are reviewed weekly in Situation Rooms to enable real time decision making and course corrections. In Kenya, RISE supports enhanced ARV monitoring to monitor uptake, adverse events and clinical outcomes of PLHIV initiating or switching to new ARV formulations through the NASCOP supported Enhanced Data System (EDS). As part of this work, RISE convened a workshop with key partners to develop and finalize the ARV optimization indicators for enhanced ARV monitoring for adults, adolescents and children. RISE also developed the ARV optimization visualization dashboard in line with the identified indicators and supports dashboard review and publication.

- **In Mozambique,** Jhpiego helped to build eSIP-Saúde, an HRIS for the management and training of health workers, onto the MOH and Government of Mozambique's existing systems, an innovation that saved significant application development costs. The system, which can be accessed through the government’s intranet at no cost to the MOH, is in operation in all 11 provinces, is used by more than 200 human resources personnel, and tracks more than 40,000 employees throughout the country.

- **Also in Mozambique,** Jhpiego developed PiSaude, a Web-based platform to collect geographic coordinates of clients to support service delivery. PiSaude supports community counselors to perform health screening and HIV counseling and testing through mobile phones, and to follow up with HIV clients. Reports can be accessed in real time, with data visualized as graphics, maps, or tables. Through this program, linkage to treatment increased from 33% to 66% in just 1 month.

- **In Ethiopia,** ICAP is providing technical assistance to improve the country’s HIS, with a focus on the country’s HIV program. ICAP will support development of an EMR system to facilitate patient searching, capture information about key populations, support retention efforts, and enhance clinical decision-making (such as flagging ART-eligible clients who have not initiated treatment). Throughout, the project will build capacity at all levels for sustainable local system ownership.

- **As implementer of the USAID-funded Systems for Improved Access to Pharmaceuticals and Services (SIAPS) Program,** MSH worked to ensure equitable, affordable access to safe, quality-assured medicines and related services in 46 countries throughout Africa, Asia, Europe, Latin America and the Caribbean, the Middle East, and Oceania. Forty-three countries use the pharmaceutical management information systems developed through the program, and 93% of surveyed health facilities use SIAPS-supported systems to input consumption data to inform pharmaceutical and health supply ordering. Through this program, MSH supported effective, resilient pharmaceutical systems to provide a wider range of medicines and products, helping to improve health outcomes.

- **In South Africa,** Anova supports the Department of Health (DoH) at facility, subdistrict, district, and national levels to implement and maintain the HIS nationally. Anova has been at the forefront of piloting and implementing new
versions of TIER.Net, an electronic register that captures HIV and ART services data, and is a member of the TB/HIV Information Systems integration technical working group at the DoH. Anova provides ongoing technical assistance to maintain data quality and promotes a culture of data use for decision-making.

- In Tanzania, Jhpiego worked with the Ministry of Health and Social Welfare to develop and strengthen use of DHIS2 for health information management and data use for decision-making. Jhpiego provided technical assistance in the development of VMMC, cervical cancer prevention and treatment, post-exposure prophylaxis, and other DHIS2 modules, and built the capacity of partners, districts, and regions to enter and use the data. In Malawi, Jhpiego supported rollout of DHIS2 to 15 districts, serving a total catchment population of 8,992,006 Malawians, representing over half the country’s population.

The RISE consortium (Jhpiego, ICAP, Management Sciences for Health, Anova Health Institute, BAO Systems, Johns Hopkins Bloomberg School of Public Health, and Mann Global Health) brings unrivaled expertise in taking evidence-based programming to scale and transitioning to local implementing partners for sustainable, self-reliant, and resilient health systems. We have a history of meeting ambitious targets through provision of high-quality, cost-efficient services matched with innovative and human-centered demand-creation approaches.

Tools & Resources
- Rapid Pharmaceutical Management Assessment: An Indicator-Based Approach tool
- SIAPS’ e-TB Manager, Pharmadex, and Quantimed tools
- Knowledge Management for Health and Development Toolkit
- Improving data for decision making: A Toolkit for Cervical Cancer Prevention and Control Programmes

RISE Technical Areas
To learn more about our work, visit our website at https://www.jhpiego.org/RISE, and see our briefs on:
- RISE Introductory Brief & Project Overview
- Health Systems Strengthening
- HIV Prevention: Oral Pre-Exposure Prophylaxis
- HIV Prevention: Voluntary Medical Male Circumcision
- Engaging Men in HIV Testing, Linkage, and Retention in Care
- Antiretroviral Therapy Optimization
- Strategic Information
- Key Populations
- TB/HIV Integration
- Laboratory Services

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