



Localization Technical Brief



Efficiencies for Clinical HIV Outcomes (ECHO)

The ECHO project aims to support the Government of Mozambique in achieving epidemic control by optimizing HIV service delivery, with an emphasis on strengthening local systems and paving the way for future sustainable HIV response led by governments and local organizations.

Introduction

In 2020, ECHO launched capacity-strengthening activities to support robust and sustained community-level activities that are critical to achieving and maintaining HIV epidemic control. In the first five years of ECHO's community strategy, the project counted on services provided by five community organizations—ANDA and Kubitsirana in Manica, the Christian Council of Mozambique (CCM) and Kuphedzana in Sofala, Kupulumusana in Tete, and Hankoni in Niassa. These organizations employ community actors including facilitators of grassroots village saving and loan (VSL) groups, community health dialogue facilitators, mentor mothers supporting pregnant and lactating women, mentor sisters supporting fellow adolescent girls, male champions promoting testing and treatment among men, adolescent youth mentors, and faith-based activists. These diverse community actors collectively serve as crucial conduits for engaging various segments of the community, breaking down barriers, and fostering ownership, thereby enhancing the project's effectiveness in scaling up HIV testing, treatment, and suppression.

As part of its overall localization efforts, ECHO works through community-based organizations (CBOs) to implement community-based activities.

Over time, ECHO has strengthened its community partners by assessing, training, and investing in them to close gaps in performance. With this approach, ECHO is supporting local actors to play increasingly more prominent roles in fighting the HIV epidemic.

ECHO has also invested in local health systems by supporting the Provincial Health Services (SPS) and Provincial Health Directorate (DPS)—eight government health authorities in total across the four provinces. Funding for provincial SPSs and DPSs in Manica, Sofala, Tete, and Niassa includes assistance to medical facilities, such as the reorganization of some One-Stop care and treatment offices that provide distinct clinical assistance and psychosocial support accessible in one facility.

This technical brief reviews ECHO's initial evaluations of local needs and its responses to them through three strategies to strengthen community-based partners: **organizational strengthening, providing grants and in-kind support, and capacity strengthening for implementation and monitoring.**



Community Actors

Community dialogue facilitators:

Community members who lead groups to discuss and reduce stigma around HIV.

Mentor mothers:

Mothers who have gone through ARV therapy and offer guidance to newly diagnosed pregnant and lactating women.

Mentor sisters:

Woman-to-woman mentors who spread knowledge to reduce the spread of HIV and mentor newly diagnosed peers.

Adolescent youth mentors:

Employed in schools and youth centers to educate adolescents on HIV prevention.

Male champions:

Men living with HIV who engage male peers and encourage getting tested for HIV and receiving treatment.

Faith-based activists:

Members of faith communities who promote HIV testing, prevention, and reduced stigma through their place of worship.

In 2021, ECHO introduced capacity assessments of CBOs that identified key strengths and weaknesses and then provided targeted integrated technical support accordingly. CBO assessments were very thorough and involved the participation of all central ECHO project staff for each technical area. They allowed ECHO to understand the performance of the whole organization including community staff, health facilities staff, and HR management. The assessments concluded that CBOs struggled with employee retention, lack of equipment, and insufficient transportation. Additionally, they needed support from ECHO with management training, financial reporting, and technical assistance.

The approaches identified below, including organizational assessments, organizational strengthening, investments and resource support, and promotion of data for decision-making, are the result of ECHO's efforts to strengthen infrastructure in Mozambique so that local teams can continue pursuing ECHO's mission beyond the scope of donor funding. Finally, we share key lessons learned from working with local organizations, such as maintaining accountability while increasing funding, which can help future implementing organizations that seek to increase localization.

Forms of Funding for Local Entities

Standard Grant	A standard grant authorizes advance payments after the completion of a comprehensive pre-award evaluation. The grants include provisions as specified by USAID policies and can be accompanied by technical assistance and more rigorous financial monitoring to reduce risks.	Ex. ECHO allocated \$1,044,173USD to SPSs across Mozambique between 2022 and 2023, which each SPS uses to fund health facilities.
In-kind Donation	ECHO provides goods or services (not cash) to the grantee as in-kind assistance. The grantee is required to use and conserve the donation for the purposes specified in the grant award or according to the standard provision	Ex. ECHO has donated 37 motorcycles and 1,337 bicycles to CBOs to meet transportation needs.
FAA	The Fixed Amount Award (FAA) format allows for the award of a grant for specific program elements or deliverables. The value of each deliverable is agreed in advance, and it is up to the grantee to manage its budget accordingly.	Ex. ECHO donated \$495,039USD to the organization World Bike Relief as an FAA in 2021.
Simplified Grant	In a Simplified Grant, also called a cost reimbursement, a grantee will be reimbursed for allowable costs by submitting a request for reimbursement and supporting back-up documentation for payment.	Ex. ECHO gave \$356,300USD, as a cost reimbursement to mothers2mothers, an organization that employs mentor mothers to advise HIV+ pregnant and lactating women.

Community Based Organization Assessments

In early 2021, the ECHO grants team visited CBO partners to assess their performance in a range of capability areas, including human resources, financial management, indicators, monitoring and evaluation (M&E), administration, communication, and advocacy. Using interviews, qualitative observation, meeting notes, monthly reports, archives, and accounting records, evaluators assigned a score out of 100 points to each of the CBO's capabilities. An organization with a score of 80/100 was deemed to need minimal help, while a score of 50-80/100 signified needing moderate support, and below 50/100 signified needing a large amount of support.

After identifying each point of weakness, the team looked for possible causes and assigned a point-person from ECHO with a next step and a deadline to implement it.

For example, the assessment of the CBO Hankoni in Niassa found that Hankoni was falling behind on several indicators related to community interaction. In the section of community indicators, Hankoni received a score of 22/100, due to issues verifying target achievements for patient reintegration, records of Village Savings and Loans group meetings, records of community dialogue groups, participation in health committee meetings, and records of interactions with community leaders.

This issue was assigned to the south and north zones programs official, who identified that the causes were a lack of regular committee meetings and dialogue groups and inadequate reporting after meetings with community leaders. The next step was to make Hankoni staff aware of the importance of writing a report after meetings with leaders with a deadline for implementation of 45 days following meetings. ECHO assessed each CBO four times total between March 21, 2021 and February 16, 2022, tracking the identified issues. By the fourth assessment in April 2022, Hankoni had improved its indicator capabilities to a score of 80/100, with the only remaining issue being the frequency of health committee meetings and regular meetings with community leaders.

Organizational Strengthening

To strengthen the quality of each CBO's services, ECHO has worked on improving their internal processes, such as human resources, performance reviews, and workflow management.

ECHO has introduced new human resources practices to partners through training and tools to improve administration and finance standards, workplace conduct rules, and mandatory policies such as children's rights, fraud, and corruption. HR trainings also discussed processes for recruitment, selection, discipline, and grounds for dismissal of employees, which increases the professional caliber of CBOs. Offering competitive wages also allows CBOs to hire qualified personnel, which is reflected in the improved quality of their projects. ECHO also helped CBOs modernize their internal processes, using timesheets to track hours and moving from a manual to electronic payment system.

With ECHO's guidance, CBOs have also developed performance spreadsheets to monitor community actor performance. This allows the organization to identify underperforming employees who then receive targeted technical support. The performance spreadsheets also allow the organization to identify its best-performing counselors to employ them for longer contractual periods.

Further strengthening of organizational structures and workflows has enabled CBOs to operate more efficiently. In Sofala, an ECHO review of the Catholic Charities of Mozambique (CCM) resulted in the addition of the position of program manager, who oversees grant applications, leads research,

and identifies support needed at each level of the organization. The program manager uses data to identify when progress on key indicators begins to decline, and then organizes a forum for staff to discuss potential solutions. The program manager also uses this data to create reports on CCM's work for ECHO. Additional positions added from ECHO's HR recommendations included hiring a receptionist, assistant, logistics officer, and a manager for mentor mothers. These steps decentralized the institution's activities so that the tasks were not completed by one employee.

Investments and Resource Allocation

Localization requires concrete resource commitments, which ECHO has pursued by increasing CBO and provincial health service investment each year. Between August 2019 through September 2023, ECHO distributed \$30,508,684 in in-kind donations to 31 different local entities across Mozambique, including provincial health authorities and CBOs. These donations support these organizations by providing the infrastructure necessary to execute their work. For example, ECHO financed the purchase of computers, desks, printers, and chairs that created a better work environment for the CBO Hankoni in Niassa. These in-kind donations are one of many forms of funding for local entities.

At the end of 2022, ECHO transitioned from funding through in-kind grants and signed a standard grant agreement with the SPS of each province. These standard grants provided \$741,000 in funds in their first year, greater financial management autonomy, and opportunities for growth to the 149 SPS-led health facilities in ECHO-supported provinces. The grants came with robust procurement, financial management, and technical support to improve the quality of care delivered. The funds supported training sessions on care and treatment, cervical cancer screening, psychosocial counseling; improved outreach to key populations, data monitoring and decision-making; and male engagement in maternal and child health. These have built the government's capacity to provide regular supervision and improve quality of care.

ECHO holds weekly coordination meetings with provincial SPSs to encourage skill sharing and an organic, learning-through-doing approach to capacity strengthening.

These meetings are part of *Massimba* (synergy), an ECHO-created platform that facilitates weekly virtual meetings as well as continuous sharing through WhatsApp. *Massimba* meetings bring together administrative and financial staff, ECHO's grants managers, and USAID focal points to align financial procedures, discuss administrative processes, and bolster financial autonomy.

Another key area where ECHO has invested in its partner capacity is transportation. Across Mozambique, ECHO has aimed to reduce transportation struggles by distributing bicycles and motorcycles to community partners so they can perform routine check-ins with patients faster than they had previously been able to on foot. With the donation of bicycles by World Bicycle Relief, counselors at Catholic Charities of Mozambique in the city of Beira were able to start community monitoring of more patients. Previously, transportation constraints meant that counselors located few patients daily. Now, they can reach more than 3 patients daily. This made their work more effective because they were able to retain and test more patients for their HIV status. The donation of motorcycles for supervisors in Beira has also enabled them to perform routine supervision activities in health units and at community sites. In cases of emergency, supervisors can also transport patients from their homes to hospitals via motorcycle.

Data for Decision-Making

ECHO has equipped its partners with tools and training to track and analyze their own data, which is both important for progress monitoring and programmatic autonomy. In Manica, ECHO has trained mentors working through CBO ANDA in the DREAMS program, which provides PrEP and other HIV interventions to adolescents girls and young women and promotes gender equality, ensures access to education, offers economic empowerment opportunities, and supports survivors of gender-based violence. Trainings focused on clinical management and on the acquisition and use of tools for information collection that enabled ANDA staff to track defaulted patients, collect demographic information, and identify trends among key populations.



CBOs Benefit From Dedicated Workplace Training Sessions on HR and Ethics

In an effort to strengthen HR in its partner organizations, ECHO funded workplace ethics and conducted trainings. Many CBOs had expressed a need for harassment, ethics, and gender trainings that would build a solid cultural foundation for the organizations and strengthen their mission. One employee, Carlitos, at the Catholic Council of Mozambique in Sofala noted that the human resources training for counselors made him more sensitive about his language and respect for colleagues. Other trainings focused on technical assistance, so that ECHO could suggest places for improvement in the organizations' services. Another CCM employee, Nazir, described "The support of the CCM given by the ECHO project is being passed on to all components, whether to the areas of human resources, finance, management of the areas that make up the project and monitoring and evaluation, these have helped to better the system of capture and evaluation to have access to vacancies." Nazir described how he had benefited from the technical assistance given to the psychosocial support division, which includes community actors. Describing how thorough the trainings were, Nazir noted, "For example, most technical support and technical assistance take place together: part of the CCM leadership is there, the mentor mother, the supervisor, the monitoring specialist, and the counselor are there." Nazir recognized how recommendations and strategies given from the ECHO technical assistance teams cascade through the CCM and eventually improve services provided to patients.

After ECHO trained ANDA staff on data evaluation, ANDA began implementing weekly data analyses of prior weeks' outcomes. When a set of indicators is below the target range, ANDA staff think of a creative solution and implement it. If they need extra assistance from the ECHO team to address the data, then they can address it at a weekly meeting with project experts. According to ANDA, this resulted in improved numbers for new patients enrolled in ART within their cohort.

ECHO has also used data evaluations to help CCM understand demographic trends among patients who are defaulting or who have a high viral load (above 1,000 copies/mL). CCM also began creating lists of patients who are leaving treatment so that they can be re-engaged by community actors.

ECHO has helped equip all CCM employees with computers, and subsequently launched bimonthly meetings for instruction on data verification, the use of DHIS2 (a platform used for storing health data), and in data digitalization. This training has significantly contributed to ECHO's capacity-building efforts with CBOs. A CCM official remarked, "I affirm with total certainty that in the area of monitoring and evaluation, we have the capacity to work autonomously."

Problem-Solving

A recurring theme from assessments was that CBOs needed to improve activity documentation rather than simply performance. For example, ECHO evaluators noted that a partner organization lacked documentation of their meetings with community leaders. Though these meetings were happening, evaluators needed to verify the evidence of interactions between CBOs and community leaders to address health promotion issues. The CBO also received a low score for reporting its participation in health and co-management committees. The solution to these issues was for ECHO evaluators to frequently remind CBO staff of the importance of documenting their work so that ECHO could verify their participation and meetings.

Another recurring challenge was empowering managers to use leadership skills within CBOs. ECHO recognizes the need for further leadership training for local staff, and evaluations revealed that staff required training on reporting structures and understanding their roles in the organization.

In response, management and leadership training was done for the executive managers of CBOs and is planned for lower-level staff.

Results and Impact

Between 2019 and 2022, the percentage of ECHO's budget that was allocated to local organizations rose from approximately 5% to 33%. This was the result of a concerted effort to increase the capacity of CBOs, which is part of ECHO's mission for a future transition of the project to local ownership. Over time, ECHO has transitioned from being the lead implementor of the mission to a co-lead that monitors progress, conducts data analysis, and distributes a large amount of its funding to partners.

To prepare its partners to co-lead, ECHO invested in local system strengthening. Restructuring the organization of CBOs enabled them to increase their capacity to reach patients, implement its activities, and continue operating autonomously after the project. Joeldine Nazaré, an ECHO liaison with CCM in its psychosocial support division reported that since the start of CCM's partnership with ECHO in 2019, its testing, counseling, reintegration of lost patients, and reduction of lost patients (those who have dropped out of treatment) have all increased. In 2020, the health center in Ponta Gea had enrolled 6,000 patients, which has risen to 14,000 currently.

Local systems strengthening has also been implemented through increased in-kind support, such as office supplies and transportation equipment. In-kind donations enabled CBOs to perform more effectively, therefore improving their quality of work. ECHO's provision of computers, chairs, and other necessary office equipment to CBO management offices made the work environment more conducive to employee productivity. Additionally, health workers who previously had to travel long distances on foot to visit patients received bicycles and motorcycles. This reduced the time and energy expended on transportation and increased the number of patients at risk of defaulting who were reintegrated. Regina Salomão, a Mentor Mother from Sofala, said that with the donation of bicycles, her daily patient follow-up visits have grown from two to five.



Sustainability

As one staff member from CCM remarked, ECHO's support has enabled CBOs "to work autonomously." ECHO relies on community-based organizations to use a range of strategies to create demand, track patients, and build trust through their embeddedness in the community. Strategies include lectures in health units and community theaters, as well as providers visiting the community.

Investing in CBO's transportation infrastructure through motorcycles and bikes allows them to quickly connect to their patients. Other investments in necessary technology and data training allow CBOs to efficiently track their progress. Internal organizational strengthening through restructuring the workforce and adding new positions has eased the CBO's workflow and decentralized important tasks.

ECHO's localization strategy also includes investing in and training its partners so that they can fully leverage their community connections and take the lead in preventing and treating HIV across Mozambique.

When ECHO identifies challenges in its mission, the solutions are co-designed with its partners through a continuous quality improvement process. ECHO inputs are strategically deployed, including grants to provincial and district health authorities,

digital solutions to improve data management, and embedded Technical Advisors at central and provincial levels to provide technical assistance (TA) for capacity and quality improvement efforts from within the health system.

Investing in CBOs has allowed them to work more effectively and with more autonomy. Increased local autonomy makes ECHO's mission more sustainable for the future when CBOs can continue their work independently.



Lessons Learned

- **Data analysis skills at all levels:** Improving data analysis capabilities among individuals working within CBOs was crucial. ECHO trained CBO staff on proper documentation and digitalization of health records (using tools like Master Cards and DHIS2) and analyzing data like patient demographic trends and viral load levels. This growth individual level fosters accurate data collection and, most importantly, informed decision-making.

- **Enhancing CBO accountability and financial capacity:** In the first months of ECHO's CBO partnerships, financial reporting delays and errors were common. Monthly technical assistance from ECHO grants managers significantly improved the quality and timeliness of these reports. This ensured transparency and adherence to USAID guidelines, and it was not a one-time effort. Continuous capacity strengthening for local institutions is essential to maintain accountability and effective financial management to position local institutions for greater responsibility in the future.
- **Robust HR and ethics trainings:** ECHO learned that partners working with health records and sensitive topics required comprehensive training on workplace conduct, including children's rights, fraud prevention, corruption, harassment, ethics, and gender discrimination. CBOs also requested HR training to clarify the employee dismissal process.
- **Fostering local autonomy with structured support systems:** ECHO's distribution of standard grants to provincial health services empowered national health authorities to manage activities and funds with new levels of independence at state health facilities. This autonomy also brought challenges related to accountability, compliance, and problem-solving. To address these issues, ECHO promoted *Massimba* meetings—weekly virtual sessions involving provincial administrative and financial staff, ECHO's grants managers, and USAID focal points. These meetings help align financial procedures and allow recipients to share problem-solving strategies.
- **Addressing HR needs:** Review of each partner organization's workflow made ECHO aware of roles that were overburdened and tasks that needed specialized positions. This enabled ECHO to provide HR recommendations for additional roles in each CBO.



In-Kind Donations Bring Health Workers Independence and Efficiency

As part of its in-kind donations to CBO's, ECHO provided organizations with 37 motorcycles and 1,337 bicycles to shorten the time it takes for community health workers to travel to support patients. The bicycles help workers reach patients for preventive visits, integration, and reintegration into HIV treatment, and HIV testing, and they enable health workers to use shorter routes that are inaccessible by car. They can also be used for emergency transportation of patients who have defaulted or are seriously ill. Domingos Armando, a nurse at Centro de Saude No. 2, described "When we find a critical patient, we accompany him to the health unit and then we accompany him home using the donated [motorcycles or bicycles], without which we wouldn't be able to provide so much support for the sick."

Between September and December 2021, bikes helped community health workers reach 98 percent of HIV patients in their communities who had abandoned or interrupted their treatment. According to counselors in Sofala province—where interruptions to service dropped by almost 63 percent during the six months after the donation—these bikes enabled health workers to integrate new patients and ensure they maintain treatment. Reductions in patients dropping out of treatment has continued since 2021. Of the cohort of people in treatment, dropouts went from accounting for 4.1% in October 2021 to 2% in October 2023.