



# *Quarterly Field Supervision Summary Report*

## *Project Title*

### *Field Supervision Team*

*Mohamed Mohamoud Abdi*

*(HIV Project Coordinator)*

*Hawa Mohamed Musse*

*(PLHIV Field Officer)*

### *Quarter Three*

*July, August, September -2023*

### *Supervision Starting Date*

*21<sup>st</sup> August-27<sup>th</sup> –August -2023*

*Bossaso, Gardo, Garowe, Galkaio*

*In Puntland-Somalia*

## Introduction

Quarterly field supervision always carry on in each mid of the quarter or end of the quarter visiting in regions seeing the field work which promotes quality outcomes by strengthening of work performance of the outreach workers and also enhancing effective communication, identifying and solving problem, facilitating team work, and providing leadership and support to empower health providers to monitor and improve their own performance. identifying problems and solving them in a timely manner, making a follow-up on decisions reached during previous supervision visit, identifying staff needs and providing opportunities for personal development and reinforcing administrative and technical link between high and lower levels, shall include responsibility for determining competence of special inspectors for the work they are authorized to inspect and monitoring the inspection activities at the jobsite to assure that the qualified inspector is performing his or her duties when work requiring inspection is in progress.

While monitoring should be an integrated activity conducted from the detailed monitoring and evaluation needs of individual HIV Prevention and Care Management and made vulnerable by HIV/AIDS. Some of the indicators may remain relevant at the level of monitoring and evaluating a specific intervention by one community-based organization, but they will certainly not cover the full range of project monitoring and evaluation needs. Also, at project/community level the indicators will probably need to be adjusted to the situation of the beneficiaries and the response for specific communities for which an intervention is programmed.

Quarterly field supervising in all regions of program implementation process is going on such as Bossaso-Bari, region Gardo-karkaar region, Garowe-Nugal region, Galkaio-Mudug region, of field monitoring and assessing how community engagement delivering of HIV/AIDS Awareness through individual contact, in each mid quarter we do field supervision.

In all regions working outreach workers and case managers should be observing during supportive supervision guidelines similarly describe supportive supervision as a process which promotes quality outcomes by strengthening communication, identifying and solving problem, facilitating team work, and providing leadership and support to empower health providers to monitor and improve their own performance. Supportive supervision involves directing and supporting to the team Outreach workers and Case management workers in order to enhance their skills, knowledge and abilities with the goal of improving health outcomes for the patients they manage.

the HIV prevention and case management project output/program through field visits to the organizations that submitted the forms and checking the quality of raw data kept by the reporting organization by examining the daily records used to complete the output monitoring form for a specific reporting period monitoring forms Comparing the output monitoring form 10 data tool individual contact Involves both verifying that appropriate data management systems are in place and the quality of reported data, for key indicators.HIV prevention and care management project in Puntland under with ISDP ORG working closely with MOH and PAC commissioners,

## Objectives

objectives by improving their performance as a regional team of peer educators also ensuring uniformity to set standards, identifying problems and solving them in a timely manner, making a follow-up on decisions reached during previous supervision visit, identifying staff needs and providing opportunities for personal development and reinforcing administrative and technical link between high and lower levels.

- ✓ Maintaining and progressively improving the quality outreach workers,
- ✓ Improving the motivation of health care workers by providing effective technical support.
- ✓ Facilitating team work, and providing leadership and support to empower Peer educators to monitor and improve their own performance. It is an ongoing relationship between health care workers and ART centers which is providing and helping service to achieve work
- ✓ promoting quality at all levels of peer educators weather its CWs,ORWs,PLHIV Peer ART,Mother Mentors,etc working into 4 regions in Puntland.
- ✓ strengthening and updating in the situation of program implementation process focusing on the identification and resolution of problems in the field work and promoting the team and encouraging and working as a team work,
- ✓ Promotion referral uptake service to the ART centre offering guidance and counselling before test and after test of providing rapid test.
- ✓ Ongoing field monitoring work of weak areas and improvements and target performance reached and continue follow-up.
- ✓ Observation of performance work in the field work to identify opportunities for improvement and problem solving,
- ✓ Provide corrective and supportive feedback on performance.

## Specific Objectives

Objectives of the evaluation include assessing the relevance, effectiveness, efficiency, impacts and sustainability of the HIV Prevention and Case Management project and its activities to be reached the target achievement and its indicators These should be realistic, Objectives of the evaluation can also include overseeing if there's a challenges were faced during implementation of the project, and the important lessons learned and recommendations for the future project implementation this ended quarter 3 July, August, September 2023.

- Outreach workers and case managers should promote of enhancing of community awareness with different community sectors in order to increase the efficacy of messages delivered with different community sectors in order to increase HIV/AIDS awareness.
- Promoting outreach workers referrals uptake though VCT centres in each regions by reducing ongoing transmission of HIV.
- Promoting self-test kit of increasing HIV test uptake or reducing the spread of HIV/AIDS or supports to be used health workers, nurse, marrying capable and other teenage of key vulnerable population in the society.

- Increase knowledge and stimulate community dialogue to adopt healthy behaviors
- Empower key populations to reduce self-stigma and discrimination and promote utilization.
- Increasing motivation for testing, promoting of the benefits of HIV testing and the advantages of early diagnosis among FSWs, promoting awareness of the availability of high-quality community.
- Providing information about STIs, HIV/AIDS and behaviour related to the risk of infection.
- By helping each other through discussions, sharing information and experiences related to risk behaviour for HIV infection and STI infection.
- By encouraging compassion and non-discriminatory attitudes and practices towards persons with HIV/AIDS and their families, including how to provide basic care for persons living with HIV/AIDS.
- By developing group norms among peers to support each other to resist behaviour that puts them at risk of infection of STIs and HIV.
- By holding awareness-raising campaigns and drives in the community.
- By developing a network for home-based care of people living with HIV/AIDS.
- **Peer educators in Gardo team during field visit** we meet with ART doctors and their counselors discussed so many issues in the karkaar region about
  - ✓ Scoop cards is in gap for PLHIV clients in Gardo, Karkaar Region from the WFP
  - ✓ the community in Gardo Regions still stigma is too high at Gardo city and the people behaves bad behavior to the people living with HIV/AIDS, that what causes not come up and express on their HIV Status because stigma and discrimination.
  - ✓ If the project is report they said we can't work with ISDP and they recommended to hire other staff Us day give us new contracts
  - ✓ DARYEEL Network is not advocating of people living with HIV which is raised by the peer educators in Gardo and other PLHIV Clients, and that's their responsibilities.



## Peer educators in Galkaio

- **Observing daily work for the peer educators**

The team met at the Galkacyo general hospital ART centres every one of the group of team briefly their daily work and how the its going on for the daily activities just only they mentioned the problem that were high stigma and the people believed we were spread the Virus and other issues that they have raised were fear for the some areas for the clan revenge issue. Finally we agreed every one of the group will accelerate the daily work in order to achieve the project target.

- **Upgrading the staff experience**

The team should done their daily job as they assigned and reach the minimum target as they fulfill the project target requirement easily the outreach workers and they done awareness and prevention for the Key vulnerable people whose whom at risk for the transition of HIV and they provide Psychological support.

Psychological support includes initial and follow-up counseling services to meet the emotional and spiritual needs of people living with HIV/AIDS and their families and to assist in disclosure, including psychosocial support through support groups (post-test clubs) and other peer, volunteer or outreach approaches within communities

- **Updating routine work experience**

The must updated the way they prepared the reports as its daily forms, weekly and monthly in order to get the accurate information and reached the assigned number of every one of the team





**Peer educators in Bossaso we discussed so many issues such as, Relief WFP Scoop cards gaps, which is not receiving since last 2 months, also E-Dahab cards stopped no longer receiving money, the process of relief scoop cards only receives 2 times in person or family what they called 6+ so now in all 6+ PLHIV clients who was receiving scoop cards money is no longer getting it,**

ISDP Nutrition Officer said I communicated with Mohamud WFP Relief Program said that in all scoop cards if they all ready pass though 6+ process is suppose to be given chance those who did not the chance firstly, So now we are going to look another way we can support or process after this and we shall let you know when we get the process.



## Key findings during field visit in each region peer educators

- ✓ Observing daily work for the peer educators
- ✓ Upgrading the staff experience
- ✓ Updating routine work experience
- ✓ Monitoring and evaluating the overall work goes to the Mudug region
- ✓ Scoop cards is in gap for PLHIV clients in Gardo, Karkaar Region from the WFP
- ✓ the community in Gardo Regions still stigma is too high at Gardo city and the people behaves bad behavior to the people living with HIV/AIDS, that what causes not come up and express on their HIV Status because stigma and discrimination.
- ✓ If the project is report they said we can't work with ISDP and they recommended to hire other staff Us day give us new contracts
- ✓ DARYEEL Network is not advocating of people living with HIV which is raised by the peer educators in Gardo and other PLHIV Clients, and that's their responsibilities.
- ✓ During supervisions we reached together with malaria team at Goldogob district. it's a place that health facilities worked actively and they shared me that there is several **HIV news cases they received for the last months** and they strongly requested to establish ART centre .as they located the border areas and more Ethiopian community live that place .Therefore i kindly to share with you for their request and I suggest to advocacy and lobbying how they get the ART centre. Hence recommended to share their request to the relevant ministries and institutions at least they get peer educators in order to provide the community awareness and Education information massages and how they deal the positive people.



## Challenges and Recommendations

- Challenges and obstacles that Galkacyo team raised were refused the use of the HIV self test and they believed the tool carried the virus and that said your aim is to spread the HIV/Aids and they have publicity issues. They pulling and intimidated the team as well as they called the bad names for the team while some of the team feeling stigma and discrimination about this issues as they were already HIV positive people
- Stigma and discrimination reduction level in the society through community awareness of HIV/AIDS knowledge.
- Daryeel Network should promote Advocacy and lobbying and support each other as people with HIV/AIDS.
- Create income generation in order to Improve the quality performance of their life's those vulnerable in the team PLHIV
- This challenge still exists concerned about ARV distributions with different locations we rise this issue so many times allocating ARV transportation cost.
- PLHIV S.G Monthly Meeting should be included Transportations cost and small incentive.
- Increase Incentive Salary and transportation cost of peer educators due to high inflation
- Improving capacity building training of peer educators of their Performance of work.

## Conclusion

Supportive supervision fosters a collaborative approach to strengthen performance work of peer educators in all 4 regions and Supervision is an important aspect in field work. In fact, without supervision, field work is not considered complete. The importance of supervision is emphasized by appointing the key area needed to improve or needs and some changes. The main challenges for supervision are improving quality, increasing the time supervisors actually spend with outreach workers and measuring its cost effectiveness.