Sitakhela Likusasa Impact Evaluation

Evaluating the Effectiveness of Incentives to improve HIV Prevention Outcomes for Young Females in Eswatini

Standard Operating Procedure - # 16 Midline data collection
Midline Biomedical and Behavioural Data Collection Procedures for the Sitakhela Likusasa Impact Evaluation

Document 0 in a series of 20 Standard Operating Procedures

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Standard Operating Procedure - # 16 Midline Data COollection

Midline Biomedical and Behavioural Data Collection Procedures for the Sitakhela Likusasa Impact Evaluation

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1 Introduction

During midline, biological and behavioural data – similar to that collected during baseline – will be collected from all participants. The midline data collection process will consist of (a) preparatory steps before a data collection site visit, (b) a data collection site visit by all participants, and (c) follow up after the data collection site visit for those participants who are either HIV positive, syphilis positive, trichomonas positive or have reported GBV.

The purpose of this SOP is to:

(a) describe preparatory steps before a site visit,
(b) describe and detail the site visit by all participants, and
(c) follow up after the site visit for those participants who are either HIV positive, syphilis positive, trichomonas positive or have reported GBV.

2 Preparations before Data Collection Site Visit

2.1 Initiating work in rural EAs before midline data collection

To initiate fieldwork in the rural areas, it is necessary to meet the community leaders so that they know about the work happening in their communities. The first point of contact when entering a chiefdom is to meet with the chief or his representative to introduce the impact evaluation team leader for that EA to the chief and/or his leadership team, and to inform the chief (or his representative) of the date that midline data collection in the EA will begin (this must occur before the king goes into seclusion).

The person doing this, needs to have:

a) the date that the regional sensitization meetings with chief happened,

b) Impact Evaluation protocol and ethical clearance,

c) relevant contact information, and

d) leave a phone number of the impact evaluation team leader that the chief / his representative can call if they have any questions.

Female impact evaluation team members should not wear pants and must wear long dresses or long skirts that go down to the knees. When introducing the impact evaluation team, the contractor representative should start with his/her surname and introduce the rest of the impact evaluation team by their surnames before the contractor is to say his/her name

While in the chiefdoms, do not take photographs in any of the households

When asking to administer the midline questionnaire, take into consideration it is ploughing season, and be flexible with the time frames the questionnaires will be given
The chief or his representative will be asked to nominate an individual (community focal person) from the impact evaluation community to:

- help identify the place for the impact evaluation site/s in the EA, and
- help identify the selected individuals and households in the EA. The impact evaluation team representative doing this introduction visit to the chief should leave with the name and phone number of the nominated person.

Field team leader contact the community focal person to agree on a site for the impact evaluation site. If the team cannot complete this step on this date of meeting the chief, then this step will be done on the first date that the impact evaluation team commences with midline data collection in the field. Criteria for selecting sites in the rural areas are as follows:

- close to common areas that are easily identifiable and that people in the community will know where to go to
- respect respondent’s confidentiality
- not places frequented by other youth
- if feasible, a local health facility (if close enough)
- if feasible, inkhundla
- if feasible, community halls
- if feasible, youth centres
- not close to schools
- not linked to the traditional authority structures

### 2.2 Process overview: Preparing for identified site visit for midline data collection

Because of some minor planned changes to the impact evaluation implementation between baseline and midline, all participants 18 and over prior to midline data collection will need to sign additional forms to accommodate 2 minor changes to the impact evaluation. All participants younger than 18 will have their parents/guardians sign the additional consent forms, and the participants will sign new assent.

All participants will be contacted by phone, sms or WhatsApp, and informed via the newspaper that the midline data collection process has started. They will be notified that they need to participate in a midline interview 12 months from the date that they enrolled. An appointment will be scheduled with them, and they will be requested to record the appointment date, venue and time in the impact evaluation database. Calls, SMSes and WhatsApp messages will be made/sent by a team of data clerks from the IHM office guided by a script for under 18 participants and participants 18 and older.

The contacting of the participants will be led by a team of data clerks who will be based at IHM offices. Each Data Clerk (DC) will be assigned a random list of participants to follow up on a daily basis in addition to cases that were not completed the previous week. If the DC knows the parent/guardian or the participant she/he has been assigned to call, she/he should recuse herself/himself before the call is made and hand the case to another DC. Each DC will be given a mobile phone for making calls and a tablet for collecting data and reading interview scripts. Appointments can be made for day of one-year anniversary of the baseline interview and up to two weeks after, not before the day of the one-year anniversary of baseline interview.

An overview of the step-by-step process for making appointments and getting consent forms signed, is as follows:
PROCESS STEPS IF PERSON IS UNDER-18

Start

Step 1. Contact participant using PNF

Contact successful?

Yes

Guardian at home?

No

Step 2: Implement contact unsuccessful procedure for participants

End

No

Step 3: Obtain caregiver contact details and alternate contact details

Step 3: Implement contact unsuccessful procedure for guardians

Contact successful?

Yes

Step 4: Contact guardian to set appointment for consenting process using GAF

Contact successful?

Yes

Step 5: Set participant appointment for midline using PNF and PAF

End

No

Step 6: Field team to implement consenting process with guardian using CCLF

Consent given?

Yes

Step 7a: Refer to supervisor

No

Step 7b: Supervisor to conduct withdrawal process

End

Legend:

PAF: Participant Appointment Form
GAF: Guardian Appointment Form
PNF: Participant Notification Form
CCLF: Consent Confirmation & Location Form
Step 1: Contact participant using PNF

(a) Use the participant appointment list provided by the DM team to call to the next participant on your call list.

(b) If the call is successful, use the PNF to guide you through the relevant steps and what to say in the conversation.

(c) If the call is not successful, go to Step 2.

Step 2: Implement “contact unsuccessful” procedure for participants

The contact unsuccessful procedure consists of the following actions, as detailed in the table below:

<table>
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<th>Call Outcome</th>
<th>Action</th>
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| 1. Contact number unavailable [“the MTN number you have dialled cannot be reached at the moment. It is either switched off or out of coverage area ”] | a) **If an alternative number(s) is/are available**, call the alternative number(s) right away. Repeat calling back every hour up to 3 times a day (i.e. a total of 4 calls a day). Try to call back at different times of the day, as participants might be in school (also call over weekends as many participants may be reached in this way). Repeat this process for up to 3 days while alternating the time for the first call each day. One of the days must be a weekend day. After 3 days of unsuccessful call attempts, please send the following text via SMS or WhatsApp to the participant using your allocated tablet: *Sitakhela Likusasa Impact Evaluation has started midline data collection. Please call or send "Please call me" SMS or WhatsApp to 76283414, 76807473, 76807394 or 76283196 for appointment and your inconvenience fee. Thank you.* Then refer the case to the field team for infield tracing.

b) **If there is no alternative number**, call back after 1 hour. Repeat calling back every hour up to 3 times a day (i.e. a total of 4 calls a day). Repeat this process for up to 3 days while alternating the time for the first call each day. One of the days must be a weekend. After 3 days of unsuccessful call attempts, please send the following text via SMS or WhatsApp to the participant using your allocated tablet: *Sitakhela Likusasa Impact Evaluation has started midline data collection. Please call or send "Please call me" SMS or WhatsApp to 76283414, 76807473, 76807394 or 76283196 for appointment and your inconvenience fee. Thank you.* Then refer the case to the field team for infield tracing.

c) **Participant or Parent/Guardian did not answer phone**

2. Participant or Parent/Guardian did not answer phone | a) **For participants**, Repeat calling back every hour up to 3 times a day (i.e. a total of 4 calls a day). Repeat this process for up to 3 days while alternating the time for the first call each day. One of the days must be a weekend. After 3 days of unsuccessful call attempts, please send the following text via SMS or WhatsApp to the participant using your allocated tablet: *Sitakhela Likusasa Impact Evaluation has started midline data collection. Please call or send "Please call me" SMS or WhatsApp to 76283414, 76807473, 76807394 or 76283196 for appointment and your inconvenience fee. Thank you.* Then refer the case to the field team for infield tracing.

c) **Parent/Guardian**, repeat calling back every hour up to 3 times a day (i.e. a total of 4 calls a day). Repeat this process for up to 3 days while alternating the time for the first call each day. One of the days must be a weekend. After 3 days of
### Call Outcome Action

unsuccessful call attempts, please send the following text via SMS or WhatsApp to the participant using your allocated tablet: *Sitakhela Likusasa Impact Evaluation is trying to reach you because you are a parent or guardian of the participant. Please send "Please call me" SMS or WhatsApp to 76283414, 76807473, 76807394 or 76283196 and we will call you back immediately. Thank you.* Then refer the case to the field team for infield tracing.

| 3. Participant or Parent/Guardian not available | a) Set appointment for the next follow up call if person who answered call knows when participant or parent/guardian will be available.  
   b) **If the participant is in South Africa and you are given the South African phone number**, add the contact on the tablet and check if there is a WhatsApp account for the number, if so, please send the following message **“Sitakhela Likusasa Impact Evaluation is trying to reach (FULL NAME), is this you?”**. If the participants respond to confirm the name (i) send **“Sitakhela Likusasa study has started midline data collection. Please call or send a WhatsApp message to +26876283414, +26876807473, +26876807394 or +26876283196 for appointment and your inconvenience fee. Thank you.”** (ii) call the number using WhatsApp.  
   c) **If the person does not have any details**, repeat calling back every hour up to 3 times a day (i.e. a total of 4 calls a day). Repeat this process for up to 3 days while alternating the time for the first call each day. One of the days must be a weekend. After 3 days of unsuccessful call attempts, please send the following text via SMS or WhatsApp to the participant using your allocated tablet: *Sitakhela Likusasa Impact Evaluation has started midline data collection. Please call or send "Please call me" SMS or WhatsApp to 76283414, 76807473, 76807394 or 76283196 for appointment and your inconvenience fee. Thank you.* Then refer the case to the field team for infield tracing. |

| 4. Wrong contact details [“the number you have entered is not correct”] | If an alternative number(s) is/are available, call the alternative number(s) right away. If unsuccessful, **Refer to the field team on the same day.** |

| 5. Call back later | Call back later at the date and time agreed upon. This should supersede the calling schedule for the agreed call back time and day. |

For all participants that are referred to the field team, the field referral process is as follows:

**Field referrals:** The CAPI manager will produce an Appointment and Interview Reconciliation List (AIR List) every day at 19:00 pm. The AIR List will be sent to the Field Manager and Project Assistant. The Field manager will share appropriate sections of the AIR list with field supervisors. The Project assistant will share appropriate sections of the AIR list with the DCs. The AIR list will contain the following sections:

- **Refer to field cases:** List of PIDs referred to the field and reason for the referral, from the last call outcome variable. Field manager and field supervisor will use this list assign cases to RAs for infield tracing
- **Successful appointments:** List of PIDs with appointment dates. Field manager and field supervisors will use this list assign cases to RAs for interviews at the site
- **No show appointments:** List of PIDs and appointment dates. DCs will use this list to call and reschedule appointments
- **Parent/Guardian consent signed but no participant appointment:** List of PIDs for DCs to call and schedule appointments
e) Cumulative number of successful interviews (response rate)
f) Special cases referred to the supervisor

**Tracing participants and parents/guardians by the field team:** Once a case has been referred to the field team, the field team will include this case in their daily schedule of follow-up. Tracing of the participants and/or guardians will be followed-up for up to 30 days from the baseline interview anniversary date.

a) For participants who were enrolled on the last day of baseline enrolment, their follow up will last up to 31 March 2017, allowing up to 30 days of tracing. This duration includes call attempts to reach the participants and parents/guardians through a phone call by the DCs.

b) If a participant or parent/guardian is untraceable for up to 30 days, an outcome will be recorded indicating such.

a) If RAs successfully trace a participant 18 or older, use the Participant Appointment Form to schedule an appointment.

**How to make appointments for in-field traced participants and parents/guardians:** If RAs successfully trace a parent/guardian of a participant younger than 18, use the Guardian Appointment Form to make an appointment.

**Step 3: Obtain guardian contact details and alternate contact details**

a) Request the latest updated contact information from participants

b) Use the GAF to record any new information about guardians or parents

**Step 4: Contact guardian to set appointment for consenting process using Guardian Appointment Form (GAF)**

a) Call or visit the parent/guardian to make an appointment to meet with them.

b) If the contact is unsuccessful, go to Step 5.

c) Explain the purpose of the meeting, and the time that it should take to be completed.

d) Record the information on the Guardian Appointment Form (GAF) and go to Step 6.

**Step 5: Implement “contact unsuccessful procedure” for guardians**

Go to Step 2, which details the sequential steps to be followed in case on unsuccessful attempts to contact the guardian/parent (sequential calling, then WhatsApp / SMS and then tracing in the field).
Step 6: Field team to implement consenting process with guardian using CCLF

For all successfully-scheduled appointments with parents/guardians, the data management team will supply the field team and the admin team with the follow up schedule. This will include the PID, area name, participant name, age, name of school (if applicable), contact numbers and GPS coordinates. After receiving this information, the field team will follow these steps in ensuring that appointments are set up and additional consent forms signed.

Figure 1: Parent/Guardian consenting process

<table>
<thead>
<tr>
<th>Lane</th>
<th>Actor</th>
<th>Process</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location information</td>
<td>RA</td>
<td>Collect location data (Use CCLF)</td>
</tr>
<tr>
<td>Signing of form</td>
<td>RA</td>
<td>Explain signing of additional form. For minor changes, including urine sample &amp; blood sample</td>
</tr>
<tr>
<td>Check participant sub-arm allocation</td>
<td>RA</td>
<td>Check sub-arm allocation for participant</td>
</tr>
<tr>
<td>Administrative paperwork form</td>
<td>RA</td>
<td>Which sub-arm?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>CCT Only (Use M003)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>CCT &amp; Raffle (Use M003)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Raffle Only (Use M006)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Control Only (Use M009)</td>
</tr>
</tbody>
</table>

(a) Once at the person’s home, ask to speak to the parent/guardian of the participant. If the parent/guardian is home, proceed to (b). If no, make an appointment for a re-visit and go to next house.

(b) Explain the impact evaluation to the parent/guardian, remind them that they already consented, and explain why an updated consent form needs to be signed. Use CCLF. The following minor aspects of the impact evaluation has been added and therefore we require another form to be signed to provide this necessary approval:

i. Confirmation of incentives for those in tertiary education, doing upgrading classes and enrolled in short courses

ii. **Urine sample for a random sample of 10% of participants**: To do confirmation tests, a random sample of participants might be asked to provide a urine sample. This sample will be used to confirm the initial trichomonas test result. This test will be done at a
laboratory approved by the National Reference Laboratory of the Ministry of Health in Eswatini and the results will be given to your child if they differ from the vaginal swab test, followed by an opportunity for treatment. The urine sample will be destroyed after use.

iii. **Blood sample for a random sample of 10% of participants:** To do confirmation tests, a random sample of Participants will have a blood sample taken from their arm for confirmation of HIV testing result. The person who will draw blood will be trained phlebotomist. The samples will be done by the Ministry of Health in National Research Laboratory of Eswatini. They will store the blood samples after they have used it.

(c) Selection of the appropriate consent and assent forms. To select the appropriate consent and assent forms, check in which sub-arm the participant is enrolled in. If the sub-arm is:

i. Educational Incentive Only, use M003 for the parent/guardian consent.
ii. STI-Raffle and Educational Incentive, use M003 for the parent/guardian consent.
iii. Control Only sub-arm, use M009 for the parent/guardian consent.
iv. STI Raffle Only sub-arm, use M006 for the parent/guardian consent.

(d) Ask the guardian if he/she consents to the few minor additions by signing the new version of the consent form.

(e) If the parent/guardian consents, administer the appropriate parent/guardian consent form and ensure that the parent / guardian signs two copies of the form. Leave one copy of the consent form with the parent/guardian, retain the signed section of the consent form and proceed to the next step.

(f) Complete/update the Consent Confirmation and Location Form.

(g) If the participant is available and ready to make an appointment after the parent/guardian has signed the consent form, the RA should verify the participant’s identity with the participant ID card.

(h) Check if the participant ID has the latest phone numbers. If not, replace the numbers by adding a sticker to the participant ID. Inform the participant that if the participant ID is lost, a verification process will be followed (see SOP4) and a new one will be provided. Remind them to look after the participant ID and to keep it in a safe place.

(i) Make the appointment using the Participant Notification Form (PNF) and Participant Appointment Form (PAF).

(j) If the participant is not available when parent/guardian signed consent, the RA will obtain the latest contact information for the participant, and use it to call the participant. The RA will use the PNF and PAF to then schedule an appointment with the participant.
Step 7: If need be, conduct withdrawal process

(a) If the parent/guardian does not consent, thank the parent / guardian for their time and inform them that the impact evaluation supervisor will contact them at another time to initiate the participant’s withdrawal from the Impact Evaluation.

(b) Refer the matter to the supervisor.

(c) Supervisor will contact the parent /guardian, and counsel them about the participant who will no longer be participating and its implications.

(d) Supervisor will also contact the participant and counsel them that their parent / guardian has withdrawn consent for participation in the impact evaluation and as such, the participant can no longer be part of the study (even if the participant disagrees with the parent on this).

(e) To do so, the supervisor will implement the steps detailed in SOP15 (Impact Evaluation withdrawal process).

Step 8: Set participant appointment for midline using PNF and PAF

(a) Use PNF and PAF to set up the appointment.

(b) Mention that the participant will receive an E30 airtime voucher as an inconvenience fee to thank them for going to the data collection site on the agreed date. If the participant is in school, inform the participant that they should not miss school to go to the data collection site for the appointment – the appointment will be set up outside of school hours.

(c) Remind participant to bring PAF and participant ID to data collection site visit.

Step 9: Appointment Reminder before the Data Collection Site Visit

a) The week before a given schedule at a data collection site, send WhatsApp or SMS messages, or call participant to confirm appointments. Remind the participant to bring to the data collection site: her participant ID card AND cell phone (or SIM card, if the person does not have a cell phone but only a SIM card).

b) Call or SMS again the day before the appointment to remind them. Record all possible alternative phone numbers when making appointment on the Participant Appointment Form. Remind the participant to bring to the data collection site: her participant ID card AND cell phone (or SIM card, if the person does not have a cell phone but only a SIM card).
Step 1: Contact participant using PNF

(a) Use the participant appointment list provided by the DM team to call to the next participant on your call list

(b) If the call is successful, use the PNF to guide you through the relevant steps and what to say in the conversation.

(c) If the call is not successful, go to Step 2.

Step 2: Implement “contact unsuccessful” procedure for participants

The contact unsuccessful procedure consists of the following actions, as detailed in the table below:

Table 2: Action to be Taken with Different ‘Call Unsuccessful’ outcomes

<table>
<thead>
<tr>
<th>Call Outcome</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Contact number unavailable</td>
<td>d) <strong>If an alternative number(s) is/are available,</strong> call the alternative number(s) right away. Repeat calling back every hour up to 3 times a day (i.e. a total of 4 calls a day). Try to call back at different times of the day, as participants might be in school (also call over weekends as many participants may be reached in this way). Repeat this process for up to 3 days while alternating the time for the first call</td>
</tr>
<tr>
<td>“the MTN number</td>
<td></td>
</tr>
<tr>
<td>Call Outcome</td>
<td>Action</td>
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<td>--------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
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| you have dialled cannot be reached at the moment. It is either switched off or out of coverage area | each day. One of the days must be a weekend day. After 3 days of unsuccessful call attempts, please send the following text via SMS or WhatsApp to the participant using your allocated tablet: *Sitakhela Likusasa Impact Evaluation has started midline data collection. Please call or send "Please call me" SMS or WhatsApp to 76283414, 76807473, 76807394 or 76283196 for appointment and your inconvenience fee. Thank you.* Then refer the case to the field team for infield tracing.  
| e) If there is no alternative number, call back after 1 hour. Repeat calling back every hour up to 3 times a day (i.e. a total of 4 calls a day). Repeat this process for up to 3 days while alternating the time for the first call each day. One of the days must be a weekend. After 3 days of unsuccessful call attempts, please send the following text via SMS or WhatsApp to the participant using your allocated tablet: *Sitakhela Likusasa Impact Evaluation has started midline data collection. Please call or send "Please call me" SMS or WhatsApp to 76283414, 76807473, 76807394 or 76283196 for appointment and your inconvenience fee. Thank you.* Then refer the case to the field team for infield tracing. |
| 2. Participant or Parent/Guardian did not answer phone | b) For participants, Repeat calling back every hour up to 3 times a day (i.e. a total of 4 calls a day). Repeat this process for up to 3 days while alternating the time for the first call each day. One of the days must be a weekend. After 3 days of unsuccessful call attempts, please send the following text via SMS or WhatsApp to the participant using your allocated tablet: *Sitakhela Likusasa Impact Evaluation has started midline data collection. Please call or send "Please call me" SMS or WhatsApp to 76283414, 76807473, 76807394 or 76283196 for appointment and your inconvenience fee. Thank you.* Then refer the case to the field team for infield tracing.  
| f) Parent/Guardian, repeat calling back every hour up to 3 times a day (i.e. a total of 4 calls a day). Repeat this process for up to 3 days while alternating the time for the first call each day. One of the days must be a weekend. After 3 days of unsuccessful call attempts, please send the following text via SMS or WhatsApp to the participant using your allocated tablet: *Sitakhela Likusasa Impact Evaluation is trying to reach you because you are a parent or guardian of the participant. Please send "Please call me" SMS or WhatsApp to 76283414, 76807473, 76807394 or 76283196 and we will call you back immediately. Thank you.* Then refer the case to the field team for infield tracing. |
| 3. Participant or Parent/Guardian not available   | d) Set appointment for the next follow up call if person who answered call knows when participant or parent/guardian will be available.  
| e) If the participant is in South Africa and you are given the South African phone number, add the contact on the tablet and check if there is a WhatsApp account for the number, if so, please send the following message “Sitakhela Likusasa Impact Evaluation is trying to reach {FULL NAME}, is this you?”. If the participants respond to confirm the name (i) send “Sitakhela Likusasa Impact Evaluation has started midline data collection. Please call or send a WhatsApp message to +26876283414, +26876807473, +26876807394 or +26876283196 for appointment and your inconvenience fee. Thank you.” (ii) call the number using WhatsApp.  
| f) If the person does not have any details, repeat calling back every hour up to 3 times a day (i.e. a total of 4 calls a day). Repeat this process for up to 3 days while alternating the time for the first call each day. One of the days must be a weekend. After 3 days of unsuccessful call attempts, please send the following text via SMS or WhatsApp to the participant using your allocated tablet: *Sitakhela Likusasa Impact Evaluation has started midline data collection. Please call or send
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<td>If an alternative number(s) is/are available, call the alternative number(s) right away. If unsuccessful, Refer to the field team on the same day.</td>
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<tr>
<td>5. Call back later</td>
<td>Call back later at the date and time agreed upon. This should supersede the calling schedule for the agreed call back time and day.</td>
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For all participants that are referred to the field team, the field referral process is as follows:

**Field referrals:** The CAPI manager will produce an Appointment and Interview Reconciliation List (AIR List) every day at 19:00 pm. The AIR List will be sent to the Field Manager and Project Assistant. The Field manager will share appropriate sections of the AIR list with field supervisors. The Project assistant will share appropriate sections of the AIR list with the DCs. The AIR list will contain the following sections:

a) **Refer to field cases:** List of PIDs referred to the field and reason for the referral, from the last call outcome variable. Field manager and field supervisor will use this list assign cases to RAs for infield tracing.
b) **Successful appointments:** List of PIDs with appointment dates. Field manager and field supervisors will use this list assign cases to RAs for interviews at the site.
c) **No show appointments:** List of PIDs and appointment dates. DCs will use this list to call and reschedule appointments.
d) **Parent/Guardian consent signed but no participant appointment:** List of PIDs for DCs to call and schedule appointments.
e) **Cumulative number of successful interviews (response rate)**
f) **Special cases referred to the supervisor**

**Tracing participants by the field team:** Once a case has been referred to the field team, the field team will include this case in their daily schedule of follow-up. Tracing of the participants and/or guardians will be followed-up for up to 30 days from the baseline interview anniversary date.

c) For participants who were enrolled on the last day of baseline enrolment, their follow up will last up to 31 March 2017, allowing up to 30 days of tracing. This duration includes call attempts to reach the participants and parents/guardians through a phone call by the DCs.
d) If a participant or parent/guardian is untraceable for up to 30 days, an outcome will be recorded indicating such.

**Step 3: Set participant appointment for midline using PNF and PAF**

(a) Use PNF and PAF to set up the appointment.
(b) Mention that the participant will receive an E30 airtime voucher as an inconvenience fee to thank them for going to the data collection site on the agreed date. If the participant is in school, inform the participant that they should not miss school to go to the data collection site for the appointment – the appointment will be set up outside of school hours.

(c) Remind participant to bring participant ID card with them to data collection site. Inform the participant that if the participant ID is lost, a verification process will be followed at data collection site (see SOP4) and a new one will be provided. Remind them to look after the participant ID and to keep it in a safe place.

Step 4: Appointment Reminder before the Data Collection Site Visit

a) The week before a given schedule at a data collection site, send WhatsApp or SMS messages, or call participant to confirm appointments. Remind the participant to bring to the data collection site: her participant ID card AND cell phone (or SIM card, if the person does not have a cell phone but only a SIM card) AND national ID, if they want to register for MTN mobile money.

b) Call or SMS again the day before the appointment to remind them. Record all possible alternative phone numbers when making appointment on the Participant Appointment Form. Remind the participant to bring to the data collection site: her participant ID card AND cell phone (or SIM card, if the person does not have a cell phone but only a SIM card) AND national ID, if they want to register for MTN mobile money.
# Data Collection site processes

## 3.1 Process overview

#### Step 1: Check PID, Confirm Age and update Contact Information

a) Welcome the participant to the data collection site.

b) Thank the participant for their time and explain the process at the data collection site to them.

c) Confirm identity of the participant by checking the participant ID card and appointment confirmation form.
d) Check if the participant ID has the latest phone numbers as data collection site contact numbers on the back. If not, replace the numbers by adding a sticker to the participant ID.

e) If the participant does not have their participant ID card or appointment confirmation form, then either ask the participant to go home to fetch it (if close by), or to reschedule the appointment to another day. If an appointment could not be completed while the participant was onsite for reasons such as late arrival of the participant for an appointment, use the PAF to reschedule the appointment.

f) If the participant has lost his/her participant ID, then inform the participant that if the participant ID is lost, a verification process will be followed (see SOP4) and a new one will be provided. Remind them to look after the participant ID and to keep it in a safe place.

g) Issue a new participant ID to the person.

h) If rescheduling the appointment, record it on a new PAF.

i) Check whether the participant contact information needs to be updated. If yes, use the first section of the midline behavioural questionnaire to do so.

Step 2: Check sub-arm allocation for participant

a) Select the appropriate consent or assent form, dependent on sub- arm and participant age. To select the appropriate assent forms, check participants sub-arm. If it the sub- arm is:

   i. Educational Incentive Only, use M002 for participant assent.
   ii. STI-Raffle and Educational Incentive, use M002 for participant assent.
   iii. STI Raffle Only sub- arm, use M004 for participant assent.
   iv. Control Only sub- arm, use M008 for participant assent.

b) Explain to the participant that the additional form needs to be signed and explain these changes. The 3 minor change for which permission / consent forms need to be signed, are:

   i. Confirmation of incentives for those in tertiary education, doing upgrading classes and enrolled in short courses
   ii. **Urine sample for a random sample of 10% of participants:** To do confirmation tests, a random sample of participants might be asked to provide a urine sample. This sample will be used to confirm the initial trichomonas test result. This test will be done at a laboratory approved by the National Reference Laboratory of the Ministry of Health in Eswatini and the results will be given to your child if they differ from the vaginal swab test, followed by an opportunity for treatment. The urine sample will be destroyed after use.
   iii. **Blood sample for a random sample of 10% of participants:** To do confirmation tests, a random sample of participants will have a blood sample taken from their arm for confirmation of HIV testing result. The person who will draw blood will be trained phlebotomist. The samples will be done by the Ministry of Health in National Research Laboratory of Eswatini. They will store the blood samples after they have used it.

c) Select the appropriate consent form.
   To select the appropriate consent forms, check participants sub- arm and if it the sub- arm is:
   v. Educational Incentive Only, use M001 for participant consent.
vi. STI-Raffle and Educational Incentive, use M001 for participant consent.

vii. STI Raffle Only sub- arm, use M004 for participant consent.

viii. Control Only sub- arm, use M007 for participant consent.


d) Administer the appropriate participant consent form. If the AGYW consent, leave a copy of the consent form with the participant, retain the signed section of the consent form and proceed to step 4. If the participant does not consent, thank the participant for their time, counsel the participant that she will be withdrawn from the impact evaluation and its implications. Administer SOP14 (withdrawal process).

e) Document the consent form outcome on the Participant Consent Confirmation and Location Form, and complete the rest of the form,

Step 3: Register for Mobile Money

a) If the participant who is 18 or older has a cell number is not registered for MTN Mobile Money, provide them the opportunity to register this participant. The field teams will be trained on how to register participants who do not have MTN mobile money accounts.

b) Record the MTN Mobile Money number in the database and record it on the midline questionnaire CAPI form.

Step 4: Administer Midline behavioural questionnaire

a) Administer the midline questionnaire. Remind the participant that all answers are strictly confidential.

b) After the midline questionnaire is complete, ask the participant if she has any questions about the questionnaire that was just administered.

Step 5: Undertake STI & HIV counseling and testing in accordance with SOP 2

a) Tell the participant that now she will undergo STI and HIV counseling by a trained HTC counselor before the administration of the STI and HIV rapid tests (as per SOP 2).

Step 6: Conduct GBV screening in accordance with SOP 7

a) Administer the GBV screening form as per SOP 7. If the participant is suspected to have experienced any gender based violence and/or sexual violence based on the answers from the GBV screening form, then refer the individual to SWAAGA. To do this, please refer to the processes and forms in SOP 7 for sexual violence/ gender based violence.

Step 7: End Midline data collection

a) Thank the participant for their time.

b) Answer any questions that they might have, and provide the participant with the E30 inconvenience fee in the form of an airtime voucher.
4 Post Data Collection Site Processes

4.1 Participant-related Processes

Depending on the context for each participant, the following follow-up processes need to be implemented:

- GBV Referral and Follow-up
- STI Treatment and Partner Referral Follow-up
- HIV Treatment and Linkage Follow-up

4.2 Data and Field Team-related Processes

a) Supervisor

- Coordinate and supervise all enumeration activities in the EA during the data collection process.
- Ensure that field teams have all documents and equipment required before going out the field.
- Monitor the condition of survey equipment assigned to the enumerators. These include tables, tablets, tents, biomedical equipment, etc.
- Review all supplementary material sent from the activQuest (including clarifications concerning technical or logistical issues) with the field staff in a timely manner.
- Providing feedback on progress and challenges to the Field Manager on a day-to-day basis.
- Understanding of the Midline Questionnaire.
- Understanding of the CAPI system.
- Implementing disciplinary procedures as required.
- Ensure the existence of a map for each EA assigned to the team and a rollout schedule.
- Ensure that interviews are conducted in a given EA within the time necessary for the successful completion of daily workload.
- Submit completed field management tools to the Field Manager on a day-to-day basis.
- Ensure that field staff meet their target.
- Submit signed consent forms to the office and ensure proper documentation.

b) Nurse Team Leader (NTL)

- The NTL will lead the team whilst conducting data collection.
- The NTL will assist the team to identify enumeration areas (EAs) assigned to the team by their supervisor.
- The NTL will provide support to the team by setting up of data collection sites.
- The NTL will conduct syphilis and trichomonas vaginalis testing during the midline process.
- The NTL will assist the team in tracking of participants into the Impact Evaluation.
- The NTL will conduct all procedures described under SOP 2.
c) HTC Counsellor

- The HTC will provide support to the team in identifying EAs assigned to the team by their supervisor.
- The HTC Counsellor will partake in identifying selected households in the assigned EA.
- The NTL will assist the team in tracking of participants into the impact evaluation.
- The HCT Counsellor will provide STI pre-test counselling to participants who have completed midline questionnaire interview.
- The HCT Counsellor will provide STI post-test counselling to participants who have completed HIV and STI testing.
- The HTC Counsellor will conduct all procedures as described in SOP 2.

d) Research Assistants (RAs)

- The RA will provide support to the team in identifying EAs assigned to the team by their supervisor.
- The RA will partake in identifying selected households in the assigned EA.
- The RA will obtain informed consent from participants.
- The RA will invite participants to the data collection site for midline interview.
- The RA will conduct midline interviews to potential participants.
- The RA will conduct all procedures described in SOP 16 for midline procedures.

5 Midline Administration

5.1 Storage of tablets, mobile phones, notebooks and appointment diary

DCs will be assigned a storage locker/drawer with lock and key. At the end of each work day, all tablets, mobile phones, notebooks and appointment diaries must be stored in the locker/drawer and lock with key. These items MUST NEVER leave the IHM office building.

5.2 Use of IHM Impact Evaluation team’s own private mobile phones

DCs and the field team should under no circumstances use their private cell phone numbers to contact participants or parents/guardians on behalf of the impact evaluation. This include all forms of contact including but not limited to SMS, Facebook, Twitter, WhatsApp, Twoo, Mixit, Snapchat, Instagram and Imo. All impact evaluation related communications must be done using the approved provided communications equipment.

5.3 Tablet administration

Tablets belong to IHM and not to the individual. The tablets may only be used for work related purposes relating to the Sitakhela Likusasa project. All Sitakhela Likusasa staff and consultants will be required to adhere to IHM’s Internet, Email and Computer Use policy. Please familiarise yourself with this policy.

5.4 Lost or stolen tablet
In event of losing your assigned tablet, the following procedure must be followed as soon as you became aware that you are no longer in possession of the tablet:

a) Call CAPI Administrator (Vimbai Tsododo). He will initiate tablet tracing and data wipe protocol. This is a time sensitive issue, please call and report loss of the tablet immediately! In case you were unable to reach the CAPI Administrator, call the Field Manager (Henry Ginindza) and report the loss of the tablet

b) Report the loss of the tablet to your field supervisor. The field supervisor will either assign you a new tablet or assign your case load to another RA on your field team

c) Write an incident report, due at the end of the day of the incident. Submit your report to your supervisor. The field supervisor will submit the report to the Field manager

d) Person who lost the tablet, should also report the loss to the police within 24 hours. Obtain a police report in 7 days and submit the report to your field supervisor. The field supervisor will submit the report to the Field manager

5.5 Daily housekeeping tasks during midline data collection

Before ending the day’s activities, the midline team members need to ensure that the following tasks have been executed:

| Field Manager | • Prepare AIR report  
|               | • Daily field report preparation for sending to WB  
|               | • Deployment of field teams  
|               | • Brainstorm ideas for increasing success rate  
|               | • Work with Data Manager on data cleaning (see housekeeping tasks) |
| Assistant Field Manager | • Troubleshoot reports from field (supervisors and teams)  
|                        | • Ensure all teams are working as deployed  
|                        | • Ensure all teams have field supplies and equipment  
|                        | • Motivation of field teams  
|                        | • Tracking of field team targets  
|                        | • Update field manager on daily progress made  
|                        | • Communicate with medical supervisor on issues that require his attention |
| Supervisors | • Check in with RAs  
|            | • Troubleshoot problems from RA teams  
|            | • Tracking of field team targets  
|            | • Deployment of teams for the next day |
| Research Assistants | • Complete daily activity template  
|                     | • Ensure all data have uploaded  
|                     | • Log off from server  
|                     | • Charge tablet for use the next day  
|                     | • Stock take of cell phone stock and vouchers |
| Data Clerks | • Ensure all data have uploaded  
|            | • DCs will be assigned a storage locker/drawer with lock and key. At
the end of each work day, all tablets, mobile phones, notebooks and appointment diaries must be stored in the locker/drawer and lock with key. These items MUST NEVER leave the IHM office building.  
- Log off from server  
- Charge tablet for use the next day

| Medical Supervisor |  
|-------------------|---|
| Daily report on progress made  
| Ensure that data collection site teams have all logistics and consumables  
| Supervise HTC counsellors and nurses and allocate to data collection sites  
| Recruitment and training of additional HTC counsellors and nurses  
| Follow up on STI and HIV positive cases, using STI and HIV Follow Up CAPI form  
| Troubleshoot problems challenges by impact evaluation teams  
| Report GBV referral cases to SWAAGA  

| HTC counsellors and nurses |  
|-----------------------------|---|
| Nurse supervisor to collect and transport blood samples to NRL  
| Undertake HIV and STI testing  
| Complete CAPI form for STI and HIV testing  
| Stock take and advise medical supervisor of need to replenish stock |