CBVCT quality data collection from EECA: COBATEST network data 2015-2021.

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Background: Monitoring and evaluation (M&E) of HIV testing and linkage to care data enable researchers and policy-makers to make informed decision and increase efficiency of interventions which in turn can lead to a substantial decline in new HIV infections. Nevertheless, most of Eastern Europe and Central Asia (EECA) countries have alarmingly increasing numbers of HIV incidence, and their processes of quality data collection and analysis requires strengthening. Community-based voluntary counselling and testing (CBVCT) has been shown to contribute to a sizeable proportion of new HIV diagnoses, especially among key populations, however CBVCT data is often not taken into account to national HIV testing data M&E. The COBATEST network, an European network of CBVCT centers, strives towards addressing this issue through assisting in management and performance of standardized testing data collection by member CBVCT centers in EECA. This study aimed to demonstrate progression of membership and data collection from the network's members from the two regions.

Methodology: Only COBATEST member centers that submit complete data any year in the period of 2015- 2021 were included in this study. People were excluded if aged < 16, previously diagnosed or test results were not available. Only the most recent record per client in each year was kept. Descriptive analysis of the data and of some key indicators were performed.

Results: From 2015 to 2021, twenty-five centers from 17 EECA countries have become members of the network. In total 258,909 persons were tested for HIV during given period in given 25 CBVCTs. While gradual increase in membership and testing data has been found, only 7 members have demonstrated consistent commitment to yearly data collection. Substantial decline in HIV tests reported was found in 2020, specifically by 47%. However, in 2021 tests reported increased by 39%. Not counting the first year of data collection (2015-2016) where only 1 member from Ukraine was from selected regions, the lowest prevalence of tests reported was found in 2020, specifically 37,173 HIV tests. In contrary, the highest prevalence of tests reported was found in 2019, specifically 70,583 HIV tests. Proportion of reactive tests decreased from 1.7% in 2017 to 1.3% through-out 2018 to 2020, increasing again to 1.8% in 2021.

Conclusion: Overall, increase in participation from EECA members has been found in COBATEST network. However, data submission is not consistent throughout 5 years. M&E of CBVCT HIV testing and linkage to care data is an important tool necessary to effectively address HIV incidence and treatment in the two regions where HIV incidence is still substantially increasing. Nevertheless, most of the CBVCTs form EECA are unable to perform quality data collection due to limited resources and training. Future research is required to identify needs of CBVCTs from EECA on performing consistent quality data collection and also on integration of collected data into their national health systems to inform policy makers.