

# Improving data quality and validation in the DRC

## INTRODUCTION

The Democratic Republic of Congo (DRC) suffers from one of the highest burdens of tuberculosis (TB) in the world. The DRC's National Program to Fight TB (PNLT) has long collected vital data relating to TB control programs in the country. As a large country with an underdeveloped communication infrastructure, however, the DRC is plagued by problems relating to data quality and to timely data communication. As a result, data are often incomplete, unreliable, or transferred too late. Negative consequences of poor data collection at the local level include a poor understanding of the state of TB at the national level, diverging views and priorities amongst local providers involved in the fight against TB, and the transfer of incorrect information from the country to the global level.

## APPROACH

With support from the United States Agency for International Development (USAID), PATH helped to ensure the promptness, completeness, and reliability of data collected in the DRC through establishing quarterly data validation meetings. With the logistical support of the TB TO2015 Project in seven provincial coordination centers to fight TB (CPLTs), data validation meetings brought together doctors, ministers of health, directors of hospitals, nurse supervisors, and other community actors from each health sector. During these meetings, participants conduct audits of data registers and cross-check reports in order to identify any discrepancies. These meetings also provide opportunities to review different challenges to TB control, and brainstorm possible solutions.

***"The seven CPLTs supported by TB TO2015 always send us their valid epidemiological data on time and well before all the other CPLTs, thanks to PATH's data validation work."***

—Dr. Lay Gertrude, Head of the Monitoring and Evaluation Division of the DRC PNL



Photo: PATH

PATH conducts GeneXpert® training for lab technicians in Kindu.

## OUTCOMES

PATH's work resulted in several important outcomes to improve data collection and communication in DRC TB programs.

### ***Decreased delays between collecting and reporting data***

PATH ensured that validated complete data from the seven PATH-supported CPLTs were sent to the central PNL within 15 days of the end of each quarter, rather than the traditional 45 days.

### ***Increased collaboration between local- and national-level TB stakeholders***

Quarterly data validation meetings provide opportunities for various health care actors to regularly congregate and confirm data quality, discuss challenges, and propose solutions to their colleagues.

### ***Improved national epidemiological data sent to the World Health Organization (WHO)***

As the quality of data collected at the local and regional levels increased, national-level data quality improved, allowing the DRC to send more accurate and relevant data to the WHO regarding the state of TB in the DRC.