Activities are well underway to prepare for the first population-based HIV impact assessment (PHIA) surveys in Malawi and Zimbabwe, MPHIA and ZIMPHIA. These preparations include finalizing survey protocols and questionnaires, conducting household listings and setting up communication and community mobilization strategies.

This month’s newsletter features the recent household listings, a critical step in survey sampling in both countries, and highlights an innovative approach used for the listing in Malawi.

**HOUSEHOLD LISTING AND ELECTRONIC DATA COLLECTION**

MPHIA and ZIMPHIA will each include a nationally representative sample of adults and children from approximately 15,000 selected households. Households are selected through a two-step process: approximately 500 representative enumeration areas, similar to a village or urban ward, are randomly selected from all of the enumeration areas in each country. Field staff then visit each selected enumeration area and record the location and description of all of the dwellings in that area. About 30 households from each enumeration area are then randomly selected for the main survey.

In January and February 2015, the Zimbabwe National Statistics Agency (ZIMSTAT), with support from the Ministry of Health and Child Care (MOHCC), CDC and ICAP, went to each province in Zimbabwe and listed every household in each of 500 randomly selected enumeration areas. Over 200 listers and 40 team leaders completed the listing in four weeks.

In April 2015, the Government of Malawi National Statistics Office and Ministry of Health, and the Centre for Social Research (CSR), with support from CDC, ICAP and Westat, initiated household listings using electronic tablets with an Open Data Kit (ODK) software application. ODK is a free and open-source set of electronic tools used for data collection. Approximately 140 trained listers are using tablets to complete the listing exercise across Malawi by early May.

This innovative use of tablets for household listings offers several advantages over traditional paper-based methods:

- Interactive maps of the selected enumeration areas help guide listers to the right location.
- Data are electronically transferred from the tablets to the database, eliminating the transcription errors that may occur when manually entering data from paper forms.
Tablet software randomly selects 10% of listed households for relisting to check on data accuracy, offering a systematic approach to quality control.

About ICAP
ICAP was founded in 2003 at Columbia University’s Mailman School of Public Health. Now a global leader in HIV and health systems strengthening, ICAP provides technical assistance and implementation support to governments and non-governmental organizations in more than 21 countries. ICAP has supported work at more than 3,380 health facilities around the world. More than 2.3 million people have received HIV care through ICAP-supported programs and over 1.4 million have begun antiretroviral therapy. Online at ICAP.columbia.edu

This project is supported by the President’s Emergency Plan for AIDS Relief (PEPFAR) through the Centers for Disease Control and Prevention under the terms of #U2GGH001226. The contents are the responsibility of ICAP and the project partners and do not necessarily reflect the views of the United States Government.