



Measuring and Reporting on Future Bank-Financed HIV/AIDS Programs

To measure the achievements of the Bank's HIV/AIDS investment portfolio, this study has shown the importance of recording, collecting, and analyzing data. The available rich and detailed data are an indication of the progress made in building and strengthening functioning national HIV monitoring and evaluation systems. The “learning by doing” approach of the MAP, and the changing and complex nature of the HIV epidemic and differences across and within countries, make good M&E even more important than usual. Right from the start, the MAP recognized this and noted the risk that nascent country M&E systems would not provide all the data needed. M&E is a persistent, difficult challenge in World Bank operations across all sectors, so unprecedented support was provided for M&E support to countries. The Bank offered to host a Global AIDS Monitoring and Evaluation Team (GAMET) on behalf of UNAIDS, to help countries build and operationalize national HIV M&E systems, by providing expert hands-on practical field support (as well as tools and guidance).

Even so, obtaining the MAP results presented in this report was not a straightforward process: secondary and primary data from various sources had to be collected and analyzed. Therefore, this section of the report recommends a new Results Scorecard and Generic Results Framework, and a reporting mechanism to make tracking results more routine.

Results Scorecard and Generic Results Framework to Measure HIV/AIDS Assistance by the Bank

Several factors point to the need for a new Results Scorecard and Generic Results Framework for Bank HIV/AIDS projects. First, many MAP projects have included HIV prevalence as a project development objective (PDO) indicator, but it has become increasingly clear that measurement and attribution difficulties make HIV prevalence an inappropriate project indicator (see box 2.3). The scorecard and framework provide guidance to task team leaders on the selection of indicators. Second, there is currently a global effort to harmonize indicators across all the HIV indicator manuals that have been produced. It makes sense for the Bank to develop a results framework that is consistent with the international results framework being prepared. The more that indicators are harmonized across major donors, the less the countries' burden of reporting. Third, the Africa Region has developed a new *AIDS Agenda for Action*, and the new results scorecard and framework will be useful in monitoring implementation of the Africa Region *AIDS Agenda for Action* and *Africa Action Plan*. The consistent set of core indicators for all projects in the scorecard will simplify reporting on the aggregate achievements of Bank-funded projects.

The Results Scorecard (table 6.1) is a set of key indicators that all Bank-funded HIV/AIDS projects will be required to report on and that track over-all country progress. The Generic Results Framework (see appendix H) is an expanded set of indicators from which projects can choose (or to which they can add). The indicators in the framework have been selected from globally agreed-to UNGASS, MDG, and IDA indicators. (The indicators in the scorecard are a subset of the indicators in the framework.) The selection of indicators was based on the reporting capacities of countries, availability of baseline data, and efforts to harmonize and align reporting requirements with major partners (especially UNAIDS, GFATM, and PEPFAR).

Many of the selected indicators are also UNGASS and MDG indicators, so countries should already be reporting on them and have included them in the country's national HIV M&E framework. The indicators do not attempt to measure *attribution* (that is, specifically what World Bank funding has provided), but rather the *contribution* of World Bank funding to overall country progress. Thus much of the data for the scorecard indicators are available from international reports and verified data sources, while some data will need to be reported in the Implementation Status and Results report (ISRs) for all HIV/AIDS projects. The scorecard is therefore not a separate World Bank HIV M&E reporting system but instead will ensure that indicator data from national HIV M&E systems are reported to the World Bank regularly.

Table 6.1 Africa Region HIV/AIDS Results Scorecard

Indicator	Unit	Indicator origin	Data source
A. Demographics			
1. Total population (millions)	Number	World Bank	WDI database
B. Challenge			
2. Estimated number of adults and children living with HIV	Number	UNAIDS	UNAIDS Global Report
3a. Men and women aged 15–24 who are living with HIV (may need to be estimated from antenatal data)	Percentage	UNGASS, IDA 14	UNAIDS Global Report, WHO estimates
3b. Sex workers in the capital city who are living with HIV	Percentage	UNGASS alternate indicator	UNAIDS Global Report, WHO estimates
C. Final outcomes			
4a. <i>Condom use:</i> Men and women aged 15–49 reporting the use of a condom during last sexual intercourse (of those reporting sexual intercourse in the last 12 months)	Percentage	UNGASS	ISR (from country UNGASS report)
4b. <i>Condom use:</i> Sex workers who report using a condom with their most recent client (of those surveyed who report having sex with any clients in the last 12 months)	Percentage	UNGASS	ISR (from country UNGASS report)
5. Women and men aged 15–24 who have had sex with more than one partner in the last 12 months	Percentage	UNGASS	ISR (from country UNGASS report)

(continued)

Table 6.1 Africa Region HIV/AIDS Results Scorecard (continued)

Indicator	Unit	Indicator origin	Data source
D. Intermediate outcomes			
6. Men and women with advanced HIV infection receiving antiretroviral combination therapy	Number	UNGASS	ISR (from country UNGASS report)
	Percentage		ISR (from country UNGASS report)
7. Pregnant women living with HIV who receive a complete course of anti-retroviral prophylaxis to reduce the risk of mother-to-child transmission (MTCT)	Number	UNGASS	ISR (from country UNGASS report)
	Percentage		ISR (from country UNGASS report)
8. Orphans and vulnerable children whose households have received care/support in the past 12 months	Number	UNGASS	ISR (from country UNGASS report)
	Percentage		ISR (from country UNGASS report)
9. Persons age 15 and older who received counseling and testing for HIV and received their test results	Number	World Bank	ISR (from country M&E system)
	Percentage		ISR (from country M&E system)
10. Male and female condoms distributed	Number	World Bank	ISR (from country M&E system)
11. Civil society organizations supported for sub-projects (includes NGO, CBO, FBO)	Number	World Bank	ISR (from country M&E system)
	Amount of funding		ISR (from country M&E system)
12. Public sector organizations supported	Number	World Bank	ISR (from country M&E system)
	Amount of funding		ISR (from country M&E system)
13. National AIDS coordinating authority that reports annually on at least 75 percent of the indicators in its national HIV M&E framework and that disseminates the report to national-	Percentage	World Bank	ISR (from country M&E system)

Table 6.1 Africa Region HIV/AIDS Results Scorecard (continued)

Indicator	Unit	Indicator origin	Data source
level leaders in at least three public sector organizations, national civil society leaders, and business leaders in the private sector.			
E. Financial commitments			
14. Estimated investment requirements for HIV/AIDS, US\$	Amount	World Bank	UNAIDS global data
15. Total commitments for HIV/AIDS, US\$	Amount	World Bank	Calculation (15a + 15b + 15c)
<i>15a. Country commitments</i>	Amount	World Bank	ISR (from country UNGASS report)
<i>15b. World Bank financial commitments for HIV (US\$ millions)</i>	Amount	World Bank	World Bank Business Warehouse
<i>15c. Other development partners' commitments</i>	Amount	World Bank	Development partner Web sites
16. Financing gap to reach HIV/AIDS targets, US\$	Amount	World Bank	Calculation (14–15)
F. Disbursements			
17. World Bank financial disbursements for HIV, US\$	Amount	World Bank	World Bank Client Connection

Note: All of the indicators in the scorecard are based on the latest international consensus on indicator wording. As there are currently efforts under way to harmonize indicators, the indicators in the scorecard may be slightly revised in 2008, when the harmonization process will be complete. Scorecard data are not disaggregated into age groups or sex. This will be reviewed in the future as better data sets become available.

The features of the Generic Results Framework (in appendix H) are as follows:

1. There are two variations of the Results Framework—one for generalized epidemics and one for concentrated epidemics.
2. The Generic Results Framework is intended for all HIV/AIDS funding in Africa.
3. It follows the format of the Africa Region’s latest results strategy and focuses on input-level results, output-level results, and outcome-level results.
4. The Generic Results Framework collects data on HIV service coverage, because these data are needed to determine progress toward universal access targets.
5. For output-level results, the Generic Results Framework has been harmonized with the PEPFAR and GFATM practice of counting the number of service delivery points, the number of persons trained to provide a service, and the number of persons who have accessed a service.
6. Although the results framework is generic, there is scope for countries to add indicators as appropriate to their programs. Further, countries may also drop indicators from the Generic Results Framework if the HIV/AIDS funding provided by the MAP does not address a specific HIV service delivery area.

For the Generic Results Framework to be fully operationalized, it needs to be included in a revised General Operations Manual for MAP projects. The indicators in the Project Appraisal Document (PAD), including the standard PAD annex 3, the Implementation Status and Results report (ISR), and the Development Credit Agreement (DCA), may need to be replaced by the indicators from this results framework. Then indicators will need to be routinely reported and updated in ISRs.