



**IDA14**

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**IDA14 Results Measurement System:  
Mid-Term Review Report**

**International Development Association  
Operations Policy and Country Services**

**November 2006**

## ABBREVIATIONS AND ACRONYMS

AIDS	Acquired immune deficiency syndrome
CAS	Country Assistance Strategy
DEC	Development Economics
DECDG	Development Economics Data Group
DFID	Department for International Development (UK)
DPO	Development policy operation
DPT	Diphtheria, pertussis, tetanus (vaccine)
FY	Fiscal year
GDP	Gross domestic product
HIV	Human immunodeficiency virus
IBRD	International Bank for Reconstruction and Development
ICR	Implementation Completion Report
IDA	International Development Association
IEG	Independent Evaluation Group
IFI	International Financial Institutions
ISR	Implementation Status and Results Report
MAPS	Marrakech Action Plan for Statistics
M&E	Monitoring and evaluation
MDG	Millennium Development Goal
NSDS	National Strategy for the Development of Statistics
OPCS	Operations Policy and Country Services
PARIS21	Partnership in Statistics for Development in the 21st Century
PEFA	Public Expenditure and Financial Accountability
PRSC	Poverty reduction support credit
PRSP	Poverty Reduction Strategy Paper
QAG	Quality Assurance Group
QEA	Quality at Entry Assessment
RBCAS	Results-Based Country Assistance Strategy
RMS	Results Measurement System
STATCAP	Statistical Capacity Building Program
SWAp	Sectorwide approach
TFSCB	Trust Fund for Statistical Capacity Building

## TABLE OF CONTENTS

<b>Executive Summary</b> .....	<b>i</b>
<b>I. Introduction</b> .....	<b>1</b>
<b>II. Progress in Tier 1 Indicators</b> .....	<b>2</b>
<b>III. Progress in Tier 2 Indicators</b> .....	<b>8</b>
A. Country-Level Indicator.....	9
B. Project-Level Monitoring.....	10
<b>IV. Progress in Statistical Capacity Building</b> .....	<b>17</b>
A. Progress.....	17
B. Achievements .....	18
C. Going Forward .....	21
<b>V. The Impact of the IDA14 Results Measurement System</b> .....	<b>22</b>
<b>VI. Conclusions and Next Steps</b> .....	<b>23</b>
 <b>Annexes</b>	
Annex A. Changes in IDA Results Measurement System Tier 1 Outcome Indicators .....	25
Annex B. Variation in Progress among IDA Countries.....	26
Annex C. Data Availability for IDA RMS Tier 1 Indicators.....	27
Annex D. Statistical Capacity Score in IDA Countries .....	28
Annex E. Managing for Results Efforts in the Regions and Networks .....	F
Annex F. Outputs in IDA Operations .....	E
 <b>Boxes</b>	
Box 1. IDA14 RMS Tier 1 Country Outcome Indicators.....	2
Box 2. Strengthening Capacity to Manage for Results.....	7
Box 3. Tier Two: Progress in Monitoring IDA’s Contribution to Country Outcomes.....	9
Box 4. Outputs in DPOs.....	15
Box 5. Use of Outputs: The Case of Health.....	15
Box 6. Good Example of Support to Statistical Capacity at the Project Level .....	20
 <b>Figures</b>	
Figure 1. Growth in Sub-Saharan Africa IDA Countries .....	4
Figure 2. Cost to register a business .....	5
Figure 3. Time to register a business .....	5
Figure 4. Expansion of phone services .....	5
Figure 5. Access to clean water .....	5
Figure 6. Child mortality rate.....	6
Figure 7. Increasing primary completion rate.....	6

## Tables

Table 1. Progress in Tier 1 Outcome Indicators .....	3
Table 2. Implementation of Results-Based Country Assistance Strategies .....	10
Table 3. Quality at Entry in IDA Projects.....	11
Table 4. IEG Indicators in IDA Projects.....	11
Table 5. Outcome Baseline Data in ISRs for IDA Operations .....	12
Table 6. IDA14 Results Measurement System (RMS) Midterm Review Outputs Table .....	14
Table 7. IDA Tools to Support Statistical Capacity Building .....	17
Table 8. Progress in IDA Countries in the Statistical Capacity Score.....	19
Table 9. Statistical Capacity-Building Efforts in IDA projects .....	20
Table 10. IDA Monitoring Indicators and Other Monitoring Initiatives .....	22

# IDA14 RESULTS MEASUREMENT SYSTEM: MID-TERM REVIEW REPORT

## EXECUTIVE SUMMARY

1. IDA was the first international financial institution (IFI) to introduce a results measurement system that systematically tracks key country outcomes as well as IDA's contributions to those outcomes. Building on lessons learned from the IDA13 results measurement system, a two-tiered results measurement system (RMS) was introduced in IDA14 to track (i) trends in 'big picture' outcomes at the country level and (ii) IDA's focus on results. The first tier monitors aggregate progress on fourteen selected country outcome indicators in growth and poverty reduction, public financial management, investment climate, infrastructure, and human development. If a country is unable to monitor key sector outcomes in infrastructure and human development such as under-five mortality rate, primary education completion rate, proportion of population with improved access to safe water sources, and proportion of rural population with access to an all-season rural road, then IDA projects work to strengthen its capacity to collect the indicator, or note if other donors or projects are doing so. The second tier monitors IDA's contribution to country outcomes using indicators for country programs, projects, and aggregate outputs. IDA also committed to implementing results frameworks for all IDA projects and programs. This report, prepared for the IDA14 Mid-Term Review, updates the IDA Deputies on progress in implementing both tiers, as well as the current levels of the indicators in both tiers.

### A. Progress in Tier 1

2. IDA countries are achieving improved outcomes, though progress varies by indicator, and is uneven across countries.

3. ***Growth and Poverty Reduction.*** IDA countries' real GDP per capita growth between 2002 and 2005 was more than double their rate between 1990 and 2002, with significant growth in Sub-Saharan Africa. Despite this, the pace of poverty reduction in IDA countries fell short of the progress needed to halve the proportion of poor people by 2015; and in two-fifths of the IDA countries, extreme poverty rates have not fallen.

4. ***Public Financial Management and Investment Climate.*** There was progress in public financial management, with some countries in Africa showing notable improvements. It is becoming cheaper and faster to register a new business in IDA countries, as the cost and the time required to register a start-up have dropped about one-sixth in the two-year period, more than in non-IDA developing countries. In calendar 2005/06, two-thirds of the countries in Africa made at least one regulatory reform, with two countries from Sub-Saharan Africa now among the top 10 reformers worldwide in reducing the barriers to business development.

5. ***Infrastructure.*** There were improvements in access to an improved water source (adequate to meet the MDGs), and rapid growth in the telecommunications sector in IDA countries. In contrast, it was difficult to ascertain progress in people's access to an all-season road and to electricity, since estimates of baseline conditions from household level data are available only for year 2000. More data will become available at the end of this year.

6. ***Human Development.*** The under-5 mortality rate declined, but the pace of reduction is slower than in the 1990s and far short of what is needed to meet the MDG. HIV/AIDS prevalence appears to have stabilized, but the epidemic may not have halted: the death rate could equal the rate of new infections. Progress in increasing the proportion of births attended by skilled health personnel in IDA countries is also slower than in the past (with almost no improvement in Sub-Saharan Africa), and progress on maternal mortality rate fell far short of what would be needed to meet the MDG target. The primary school completion rate improved, and there was progress in reducing gender disparity in both primary and secondary enrollment; but the reduction in gender disparity was confined to a few countries and was insufficient to meet the MDG target.

7. ***But capacity to measure progress remains constrained.*** Though trends in these outcomes are encouraging, it is important to note that capacity to measure these outcomes is constrained by significant weaknesses in statistical capacity at the country level, particularly at sub-national levels and for disaggregated populations (e.g., by rural and urban areas, and by gender). This limits the ability of decision makers to adjust their policies in response to change (or lack of change) in relevant outcomes. Reflecting this, the Bank has been leading efforts to identify and strengthen statistical capacity in IDA countries. IDA projects increasingly seek to strengthen country capacity to monitor key sector outcomes in Tier 1; 58 percent of IDA projects are reporting on the relevant Tier 1 indicators and a similar share include a work program to support country systems to generate and use these data.

## **B. Progress in Tier 2**

8. There has been good progress in most Tier 2 indicators. In some areas, however, the Bank will need to accelerate its efforts.

9. ***Results-Based Country Assistance Strategies.*** During FY06, the Bank exceeded the original RMS target of 30 Result-Based Country Assistance Strategies (RBCASs); it will continue to meet the targets, as the RBCASs have been mainstreamed in all IDA and IBRD country programs. The focus now is to improve the quality of RBCASs.

10. ***Quality at Entry.*** The latest quality-at-entry assessment rates 91 percent of IDA operations as satisfactory. These are the highest results for IDA projects in seven assessments of quality at entry, although they are lower than those for IBRD countries, where institutional capacity is higher and policy performance is better. The focus now is on maintaining high quality at entry by emphasizing simpler project designs suited to country implementation capacity and by devoting more attention to assuring projects' readiness at entry.

11. ***Results Frameworks in IDA Projects.*** All IDA investment and development policy operations include results frameworks. Management is now focusing on encouraging improvements in the quality and specificity of these results frameworks. A small pilot exercise assessed the quality of results frameworks along three dimensions: the statement of the development objective and indicators, the analysis of the link of the project or program development objective with the outcomes in the CAS, and analysis of borrower monitoring and evaluation (M&E) systems. The review found that in three-quarters of projects the project/program development objective was expressed as a measurable change in the behavior or

condition of the target group and about three-quarters also contained baselines. However, links to outcomes in the CAS were either very general or non-existent, and only about half of the documents included an adequate assessment of institutional arrangements for data collection or analyzed the extent to which the project M&E system draws on the borrower's M&E system.

12. ***Quality at Exit.*** Both quality-at-exit indicators show a continuing positive trend. In FY05, 79 percent of IDA projects achieved a satisfactory outcome rating, and the preliminary figure based on a limited sample for FY06 is 86 percent. In FY05, 93 percent of IDA projects had a satisfactory Implementation Completion Report (ICR), well above the FY04 level of 85 percent and preliminary results for FY06 show that 91 percent of ICRs are of satisfactory quality.

13. ***Availability of Baseline Data.*** About half of the first Implementation Status and Results reports (ISRs) filed in FY05 did not have adequate outcome baseline data. Management, therefore, took urgent steps in the latter half of FY06 to ensure that teams recognize the importance of monitoring project performance against baseline information. As a result, in FY06 more than 75 percent of first ISRs filed to date contained baseline information. In those first ISRs filed in FY06 where availability of baselines was unsatisfactory, teams were asked to re-submit updated ISRs. A review of these second ISRs showed that teams had absorbed the message; 83 percent of previously unsatisfactory ISRs for FY06 now have satisfactory baselines.

14. ***Outputs.*** Management is monitoring project contributions by tracking the outputs of goods and services, provided through specific operations. For example, reviews of ICRs for projects completed in the last five to six years show that IDA transport operations constructed over 6,250 km and rehabilitated or maintained more than 56,700 km of roads; IDA health operations trained more than 78,000 health professionals; IDA education operations trained 298,000 teachers; and IDA water and sanitation operations supported 100,000 new water connections and 111,600 new sanitation facilities. But since use of outputs is not systematically monitored in ICRs, this picture of IDA's contribution to country outcomes is partial at best. Estimates of outputs for operations exiting in FY06 are also preliminary, since about three-quarters of the ICRs for these operations have not yet been finalized. Management is working with country, sector and project level teams to improve the quality and specificity of output reporting.

### **C. Conclusions and Next Steps**

15. The two-tiered IDA14 RMS is designed to systematically track key country outcomes and IDA's contributions to them. It seeks to document progress in key country outcomes as well as improvements in IDA's internal focus on results. At the big picture level, IDA countries are making progress in many outcomes, but most are not likely to meet some MDGs, particularly in human development. More systematic monitoring of IDA countries' progress has brought two problems to the fore: data gaps in critical areas, such as infrastructure, and the enormous effort, resources, and cultural change that are required to build country capacity to collect reliable statistics on a regular basis. More needs to be done to train staff on how issues of country capacity to collect key indicators can be addressed at all levels using a mix of lending and non-lending instruments and through discussion with the country and development partners at the global, sectoral and country levels.

16. The more systematic monitoring of the indicators of IDA's evolving results culture shows considerable progress in four areas: (a) ensuring that all country programs have RBCASs; (b) making substantial improvements in the quality-at-entry of IDA operations; (c) including results frameworks in IDA investment and development policy operations; and (d) continuing the longer-term improvement in reporting on project results at exit. Two indicators show somewhat less progress: (a) the adequacy of baselines by first ISR; and (b) quality of output and outcome reporting in ICRs of IDA operations. More progress is needed in improving the quality of results frameworks at entry and in supporting countries' statistical capacity.

17. The Bank has taken steps to ensure that IDA continues to maintain progress in areas where targets set for the IDA14 period are being met (or even exceeded) and to accelerate progress in areas where improvement is less advanced. Management has already established a Bank-wide Results Steering Group (RSG) to ensure that IDA commitments are monitored, and to bring to Management's attention issues that need to be addressed. The RSG has scaled up training activities for both Washington and country office staff on results frameworks in projects and programs, and it conducts a regular dialogue with Regional Operational and Quality Directors to inform them about progress to date in the IDA14 RMS and outstanding issues, and to agree on actions to ensure higher compliance with the IDA14 RMS.

18. Going forward, Management will take the following specific actions.

- First, Management will strengthen review procedures for results frameworks upstream and monitor trends in their quality on a quarterly basis.
- Second, Management will review the adequacy of discussions in the CAS document on quality of data, demand for use of data in decision making, and statistical capacity.
- Third, Management will monitor self-assessment ratings in CAS Completion Reports (CASCRs) and their independent validation by Independent Evaluation Group (IEG) to ensure focus on the relevance and effectiveness of country programs.
- Fourth, Regional and Sector Management will ensure that project documents in water, education, health and roads sectors going to the Board in FY07-08 include the relevant indicators from Tier 1, and will specifically address how capacity is being developed to monitor the indicator in the project or through other donor and/or development partner efforts.
- Fifth, ICR guidelines are being revised to ensure more specific measurement of project achievements.
- Sixth, the percent of projects with baselines in first ISRs will be a performance indicator in Vice-Presidential Unit-specific Strategy and Performance Contracts.

19. Implementation of the IDA14 RMS is encouraging a stronger focus on results across the Bank group and among IDA borrowers. Though findings from this mid-term review of the system show that there is scope for improvement in the pace of change in both Tier 1 and Tier 2 indicators, Management is encouraged that the system is contributing to broader awareness and

specific systemic changes which are enabling improved monitoring and reporting of country level outcomes and IDA's contributions to them.

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# IDA14 RESULTS MEASUREMENT SYSTEM: MID-TERM REVIEW REPORT

## I. INTRODUCTION

1. ***Innovations in Results Measurement.*** IDA was the first among the international financial institutions (IFIs) to introduce a results measurement framework to systematically monitor key country outcomes as well as IDA's contributions to them. An initial framework for measuring results, including those reflected in the Millennium Development Goals (MDGs), was first introduced during the IDA13 replenishment process.<sup>1</sup> Building on the lessons learned from the IDA13 Results Measurement System (RMS), IDA Management proposed an enhanced RMS for IDA14, with implementation beginning on July 1, 2005.<sup>2</sup>

2. The RMS is a two-tiered system. The first tier monitors the aggregate progress of IDA-eligible countries on 14 core development outcomes, and the second tier focuses on the contribution of IDA-supported activities to country outcomes.<sup>3</sup> Other multilateral agencies are increasingly using the IDA14 RMS, or elements of it, as a framework for their own assistance. The system is also contributing to internal Bank Group initiatives such as the Africa Action Plan and the internal Strategic Performance Contracts, which are also adopting the IDA14 RMS approach.<sup>4</sup>

3. ***Structure of this Report.*** This paper reports on the early implementation of the IDA14 RMS at the mid-term of the IDA14 period. Section II reviews the progress made in IDA countries at the 'big picture' level—describing recent trends in the 14 indicators of country level outcomes, grouped into four categories. Section III reviews trends in indicators of IDA's contribution to country outcomes, as reflected in the Tier 2 indicators. Section IV discusses improvements in building statistical capacity in IDA countries, Section V discusses the impact of the IDA14 RMS, and Section VI presents the conclusions and next steps.

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<sup>1</sup> *IDA Results Measurement System: Progress and Proposals and Technical Annexes* (IDA/SecM2003-0159), April 7, 2003.

<sup>2</sup> *IDA Results Measurement System: Recommendations for IDA14* (IDA/SecM2004-0499), July 2004.

<sup>3</sup> *Report from the Executive Directors of the International Development Association to the Board of Governors / Additions to IDA Resources: Fourteenth Replenishment, Working Together to Achieve the Millennium Development Goals*, March 10, 2005.

<sup>4</sup> *Strengthening the Development Partnership for Achieving the MDGs: An Africa Action Plan* (SecM2005-444) and *Meeting the Challenge of Africa's Development: A World Bank Group Action Plan* (SecM2005-445), August 17, 2005. See also *The World Bank's Budget: Trends and Recommendations for FY06* (R2005-0135/3), October 11, 2005.

## II. PROGRESS IN TIER 1 INDICATORS

4. IDA's overall development strategy rests on two interdependent pillars: (a) fostering the climate and conditions for sustainable growth, investment, and job creation that are inclusive of poor people, and (b) investing in poor people and empowering them to participate in development. To monitor the 'big picture' progress of this strategy in IDA countries, the RMS contains 14 broad development outcome indicators, for which data are gathered at the country level, and then aggregated across all IDA-eligible countries (see Box 1).

5. Unlike the IDA13 RMS framework, Tier 1 does not establish specific short-term targets for progress against these outcomes. The 14 selected country outcome indicators are grouped into four categories that cut across both of IDA's strategic pillars. They were selected by paring down a much broader list of indicators, to focus only on those that are most relevant to IDA's business and currently most measurable in IDA countries. At the start of the IDA14 period, baseline values were selected for each of the 14 Tier 1 indicators. Given the limitations of data availability, the baseline values and most recently available values refer to different years and slightly different time periods for each of the indicators (Table 1 and Annex C).

### Box 1. IDA14 RMS Tier 1 Country Outcome Indicators

The 14 selected outcome indicators for Tier 1 are grouped into four categories

#### I. Growth and poverty reduction

1. GDP per capita (constant year 2000 in US\$)
2. Population below \$1 a day (%)

#### II Public Financial Management and investment climate

3. Public financial management (number of HIPC benchmarks met)
4. Cost required for business start-up (% of GNI per capita)
5. Time required for business start-up (days)

#### III. Infrastructure for development

6. Access to an improved water source (% of population)
7. Fixed line and mobile phone subscribers (per 1,000 people)
8. Access to an all-season road (% of rural population)
9. Household electrification rate (% of households)

#### IV. Human development

10. Under 5 mortality rate (per 1,000)
11. Prevalence of HIV/AIDS, (% adult population aged 15-49)
12. Births attended by skilled health staff (% of total)
13. Primary completion rate, total (% of relevant age group)
14. Ratio of girls to boys in primary and secondary education (%)

Source: IDA Results Measurement system: Recommendations for IDA14( IDA/SecM2004-0499), July 7, 2004

**Table 1. Progress in Tier 1 Outcome Indicators**

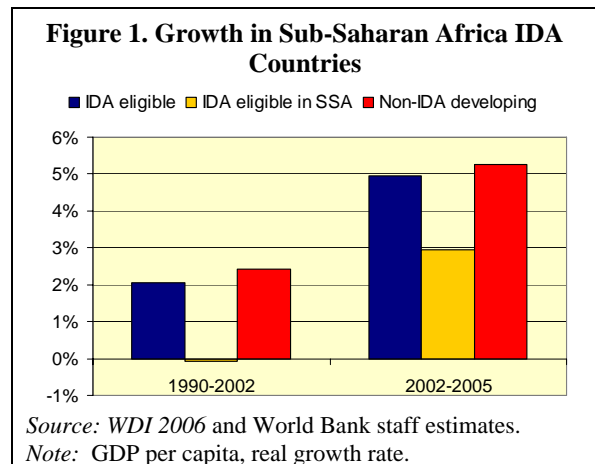
	<i>Aggregate outcomes<sup>1</sup></i>				<i>Country level outcomes</i>	
	<i>Year of baseline value</i>	<i>Year of most recent value</i>	<i>Baseline value</i>	<i>Most recent value</i>	<i>Percent of countries making positive progress</i>	<i>Percent of countries making substantial progress<sup>2</sup></i>
<b>Growth and poverty reduction</b>						
GDP per capita (constant 2000 US\$)	2002	2005	473	549	85	21
Population below \$1 a day (%)	1999	2002	32.1	30.1	57	9
<b>Public financial management and investment climate</b>						
Public financial management (number of HIPC benchmarks met)	2001/02	2004	6	6.5	41	N.A.
Cost required for business start-up (% of GNI per capita)	2003	2005	121	99	83	29
Time required for business start-up (days)	2003	2005	80	68	37	20
<b>Infrastructure for development</b>						
Access to an improved water source (% of population)	1990	2004	65	76	74	38
Fixed line and mobile phone subscribers (per 1,000 people)	2001	2004	39	86	96	40
Access to an all-season road (% of rural population)	2000	N.A.	61	N.A.	N.A.	N.A.
Household electrification rate (% of households)	2000	N.A.	55	N.A.	N.A.	N.A.
<b>Human development</b>						
Under 5 mortality rate (per 1,000)	2001	2004	121	117	74	20
Prevalence of HIV/AIDS (% adult population aged 15-49)	2003	2005	1.68	1.69	38	38
Births attended by skilled health staff (% of total)	2001	2004	43	44	60	34
Primary completion rate, total (% of relevant age group)	2001	2004	73	80	62	38
Ratio of girls to boys in primary and secondary education (%)	2001	2004	83	88	64	38

Source: IDA Results Measurement System: Recommendations for IDA14 (IDA/SecM2004-0499) July 7, 2004; WDI 2006, and World Bank staff estimates.

Notes: Substantial progress is defined differently for each indicator; see Annex B for details. N.A. is not available

6. **Progress.** IDA countries as a whole have made progress during the recent period: economic growth is solid and accelerating, obstacles in the business environment are being removed, infrastructure essential for development is improving, and human development status is also improving (see Table 1 and Annex A). However, progress varies by outcome indicator, and improvement is short of what is needed to achieve most of the MDGs on time. Moreover, progress is uneven across IDA countries: some show strong performance, while others lag behind.

- **Growth and poverty reduction.** In IDA countries, real GDP per capita has grown 4.9 percent annually between 2002 and 2005, which is more than double the average growth rate that these countries experienced between 1990 and 2002. 85 percent of IDA countries have enjoyed positive growth since 2002, with an increase in particular in the IDA countries in Sub-Saharan Africa (SSA, see Figure 1).<sup>5</sup> While Sub-Saharan African countries as a whole had no growth in real GDP per capita between 1990 and 2002, they have grown an average of 3 percent annually since 2002. Although this is a positive development, there is still a significant gap in economic growth rates between African countries and other developing countries. The proportion of people in IDA countries living on less than \$1/day has dropped by nearly two percentage points in three years, to 30.1 percent in 2002. However, the pace of poverty reduction in IDA countries appears to have fallen short of the progress needed to halve the proportion of poor people by 2015.<sup>6</sup> Progress at the country level varies greatly: for two-fifths of the IDA countries, extreme poverty rates have not dropped at all. Much of the improvement occurred in East Asia (recovery from the Asian financial crisis) and South Asia, and in Eastern Europe and Central Asia (transition economies adjusting to a market system).

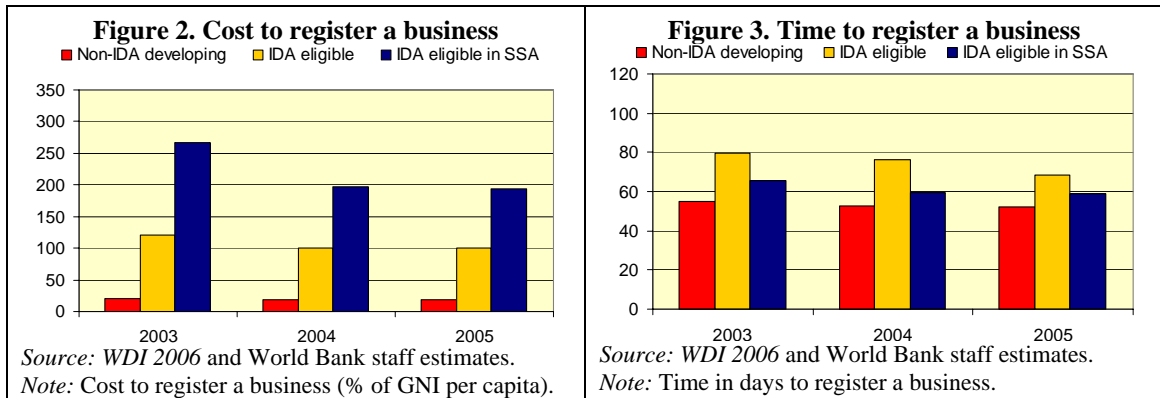


- **Public financial management and investment climate.** Progress in the public financial management of 22 IDA-eligible countries between 2001 and 2004 was uneven. Only Burkina Faso, Mali, and Tanzania score in the top half of possible scores in all five categories of public financial management. Some countries have shown capacity for rapid improvements in their public financial management systems (e.g., Cameroon, Ghana, Mali, Niger, Senegal, and Tanzania) but a majority of them still require substantial upgrading to have effective public financial system capable of reliably tracking public spending. In contrast, the regulatory obstacles to private sector development have been consistently reduced between 2003 and 2005. It is becoming cheaper and faster to register a new business in IDA countries, as the cost and the time required to register a start-up have dropped about one-sixth in the two-year period, more than in non-IDA developing countries (see Figures 2 and 3). Two-thirds of African countries made at least one reform in 2006, and two African countries—Ghana and Tanzania—ranked ninth and tenth across 175 economies for improvements that ease the terms of doing business.<sup>7</sup>

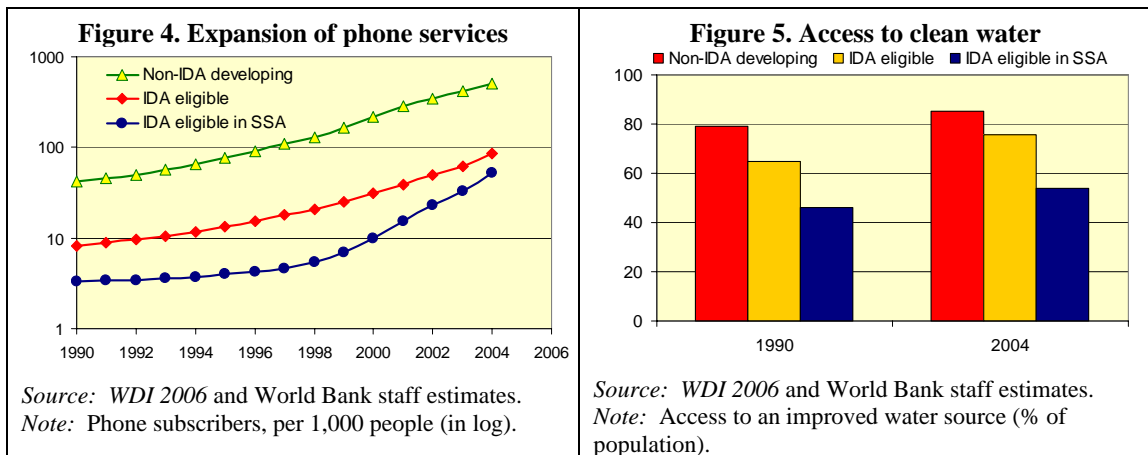
<sup>5</sup> Non-IDA developing countries in figures 1 through 7 refers to all IBRD countries excluding South Korea and Antigua.

<sup>6</sup> Nearly half of the IDA countries are in Sub-Saharan Africa, where the share of population in poverty fell slightly from 46.4 percent in 2001 to 44.0 percent in 2002, but is virtually the same as in 1990. Current projections are that in 2015 Africa's poverty rate will remain over 38 percent, far above the 22.3 percent target (Source: Global Monitoring Report 2006).

<sup>7</sup> *Doing Business Report*, 2007.

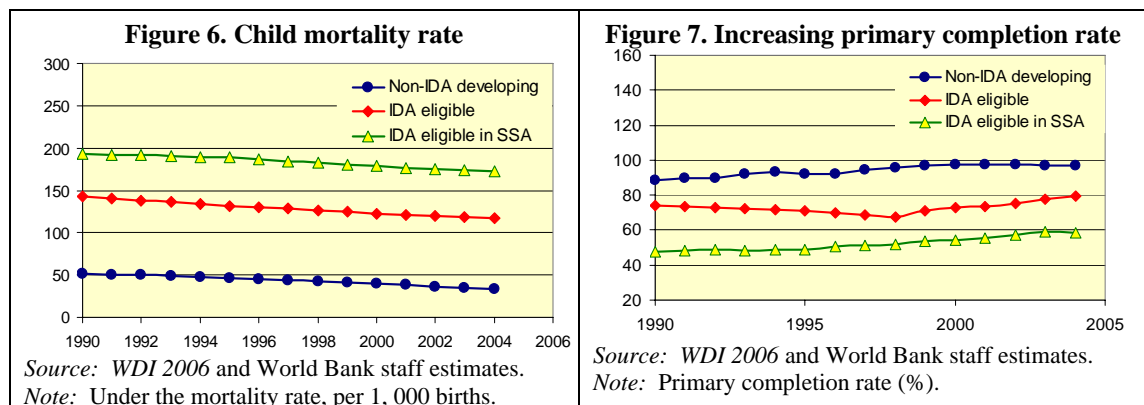


- Infrastructure for development.** In 2004, 76 percent of the population in IDA countries had access to an improved water source, 11 percentage points higher than in 1990. This progress is stronger than that in non-IDA developing countries, and at this rate is adequate to meet the MDG target. Fixed lines and mobile telephone subscribers in IDA countries more than doubled between 2001 and 2004, up from 39 to 86 per 1,000 people. The telecommunications sector is growing rapidly in all Regions, but the rate of progress in IDA countries has surpassed non-IDA countries' growth rate during this same period. All except three IDA countries have seen positive progress, and half have experienced an annual rate of change greater than 25 percent (see Figures 4 and 5). Two of the infrastructure indicators—rural population access to an all-season road, and access to electricity—have only recently been adopted; with only one data point available for them it is not yet possible to assess progress. For both indicators, additional data for many IDA countries will become available by the end of the year.



- Human development.** As the recent *Global Monitoring Report, World Development Indicators*, and other World Bank publications have discussed, progress toward several key human development MDGs remains a focus of concern. For instance, in 2004, 117 of every 1,000 children in IDA countries were expected to die before reaching age five. This is 4 per 1,000 less than three years earlier (see Figure 6); however, the pace of reduction is slower than that of the 1990s and far short of what is needed to meet the MDG goal of reducing child mortality by three-quarters

between 1990 and 2015. Similarly, the adult HIV/AIDS prevalence rate seems to have stabilized in IDA countries. But the lack of increase between 2003 and 2005 does not indicate that the epidemic has been halted—it could mean that the death rate now equals the rate of new infections. Progress in increasing the proportion of births attended by skilled health personnel in IDA countries is also slower than in the past (with almost no improvement in Sub-Saharan Africa), and far short of what is required to reduce the maternal mortality rate by three-quarters between 1990 and 2015. The primary school completion rate has increased by 7 percentage points between 2001 and 2004 (see Figure 7), and 80 percent of children at the official graduation age were able to complete their primary education. Although the ratio of girls’ primary and secondary enrollment to boys’ has increased from 83 percent to 88 percent in three years, this rate of improvement is unlikely to achieve the MDG target, which calls for the elimination of gender disparity in primary education by 2015. While three-fifths of IDA countries are eliminating gender disparity in primary and secondary education, the impressive aggregate change is due largely to a few outstanding performers. In Sub-Saharan-Africa, the primary completion rate for girls is still more than 15 percent lower than that for boys, and only 30 percent of girls go to secondary school.



7. **Improvement in Measurement.** For several Tier 1 indicators, data availability has improved significantly during the last two years: the \$1/day poverty headcount rate, cost and time required to start a business, and the gender parity index. Information on many of the MDGs, such as those for education and health, is also becoming more widely available. The improvement is due both to the stronger demand for good quality and relevant statistics and better statistical capacity in IDA countries, and to the efforts of the international statistics community to collect and report internationally comparable statistics. Further work, mainly relying on data from household surveys, is under way to compile additional observations. The responsibility to assess developing countries’ public financial management is now under the Public Expenditure and Financial Accountability (PEFA) partnership, which has adopted an enhanced assessment framework. Although more than 60 developing countries have completed or plan to complete PEFA assessments in the next two years, significant work is needed to compile scores and prepare guidelines on how to track progress from the HIPC indicators to the PEFA based standards. Finally, significant gaps in statistical capacity at the country level remain, particularly for disaggregated data (by rural/urban and gender) which seriously

constrains the ability of local decision makers to use evidence to improve the effectiveness of program and policy implementation.

8. ***Going Forward.*** Tier 1 can be strengthened by encouraging operational staff to focus more explicitly on assisting country partners to prioritize and build capacity to better measure and monitor results these key sectors. When operations are planned in the sectors monitored by the RMS, staff should include these IDA indicators in their results monitoring framework, and they could be included in the RBCAS. (Box 2 describes how IDA has begun fostering a results culture across the entire Bank group.)

**Box 2. Strengthening Capacity to Manage for Results**

IDA is strengthening the “culture of results” in both partner countries and in the Bank but challenges remain. Recent achievements in the Bank include (a) the creation of a Results Steering Group, with representatives from the Regions and Networks, to support results efforts and to bring to Senior Management’s attention issues or accomplishments that require action or recognition; (b) establishment of portfolio oversight as a performance evaluation item for managers; (c) reform of the budget process to strengthen the links among strategic choices, performance, and results; and (d) enhancing staff capacity to manage for results by providing guidance materials, training sessions for both Washington and country office staff, hands-on guidance in project and CAS preparation, and courses in monitoring and evaluation. At the same time, to strengthen tier 2 of the IDA RMS, the Bank will need to monitor and report on IEG’s CASCR ratings, and monitor the quality of results frameworks in operations during design, implementation during supervision, and quality of results reporting at completion.

To strengthen Tier 1, IDA has adopted different approaches. In the Africa Region for instance, IDA has helped over 25 countries to improve statistical systems or to launch improved data collection instruments, and has supported a number of countries in using a medium-term expenditure framework to strengthen the link between the PRS and public expenditure management. The Bank has worked with the DFID-funded International Benchmarking Network, utility associations, and governments to expand the performance indicators database for water supply and sanitation utilities to 1,000 utilities in more than 50 countries, and to improve the use of these data. In education, both IDA and IBRD have encouraged countries’ participation in regional and international assessments to provide a basis for comparative analysis of student learning outcomes across countries; and capacity building for such national assessments is under way in the Africa Region and the Latin America and the Caribbean Region. Despite this progress, significant challenges remain. Many countries lack basic demographic data: for example, about 53 percent of the people in Sub-Saharan Africa live in countries that have not taken a census in the last 10 years, 62 percent live in countries that have not conducted a poverty survey in the last 5 years, and no country in Sub-Saharan Africa has a functioning vital registration system—all of which are needed to ensure that line ministry programs are using consistent and reasonably up-to-date estimates of the total population and its characteristics. IDA will encourage inclusion of statistical capacity and use of statistics in countries for decision making in projects and programs.

*Source: Accelerating the Results Agenda: Progress and Next Steps (CODE2006-0016), March 8, 2006.*

### III. PROGRESS IN TIER 2 INDICATORS

9. Tier 2 indicators are designed to capture the quality of IDA's interventions at various stages of projects and programs, from initiation to completion, and are designed to reinforce IDA's staff and managerial focus on (i) results, by highlighting trends in the quality of operational products, and (ii) the use of monitoring and evaluation tools to improve IDA and, country partner capacity to use evidence of results in its decision making.

10. The introduction of these indicators is influencing IDA's operational focus on results. Beyond the establishment of systems to regularly report on the indicators, the system encouraged several shifts in managerial attention and focus. Two Regions, for instance, have taken steps to highlight their contributions to country level results through internal and external websites. Tier 2 indicators are now structured into the Strategic Performance Contracts that govern resource allocation across Regions. They are also increasingly influencing the design of sectoral strategies.

11. The findings at this stage of implementation of Tier 2 of the RMS are encouraging but also show considerable room for further progress. IDA managers and staff have made very rapid progress in adopting the results-based approach to country assistance strategies—now mainstreamed across all client groups—and trends in operational quality and outcomes as measured by IEG continue to be positive. Ensuring improvements in the quality of results frameworks for IDA operations, including the appropriateness of baselines, has been more challenging.

12. **Indicators.** Six indicators were selected to track IDA's performance (see Box 3). First, at the country level, the number of results-based CASs prepared during the IDA14 period is being monitored. At the project level, four indicators are being monitored: (a) the percentage of projects with satisfactory outcome ratings; (b) the percentage of ICRs with satisfactory data on project outcomes;<sup>8</sup> (c) the percentage of projects with satisfactory ratings of quality at entry; and (d) the percentage of first ISRs with satisfactory baseline data. The sixth indicator is aggregate progress on selected outputs in four sectors—health, education, transport, and water—in which IDA is most active across a range of countries. IDA also committed to implementing results frameworks for all IDA projects and programs, and to working to ensure that 100 percent of IDA investment projects initiated after July 1, 2004, include such frameworks. Box 3 summarizes progress in these indicators and the subsequent sections discuss each of these indicators.

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<sup>8</sup> The Independent Evaluation Group (IEG) discontinued using this indicator and instead introduced a new, *qualitative* rating category—"M&E Design, Implementation, and Utilization"—which is part of the ICR Review Forms starting from July 1, 2006. OPCS has therefore replaced the "ICR Data Adequacy" indicator with IEG's rating of the "ICR Quality," which closely tracks ICR data adequacy, because this is an important element of the judgment about ICR quality.

**Box 3. Tier Two: Progress in Monitoring IDA's Contribution to Country Outcomes**

**Project level**

**1. & 2. Percentage of projects with satisfactory outcome rating & percentage of projects with satisfactory ICR quality**

	<i>FY03</i>	<i>FY04</i>	<i>FY05</i>	<i>FY06</i>
Percentage of projects with satisfactory outcome rating	72	77	79	86
Percentage of projects with satisfactory ICR quality	85	85	93	91

**3. Percentage of operations with satisfactory quality at entry  
(% satisfactory)**

<i>Group</i>	<i>QEA IV</i>	<i>QEA V</i>	<i>QEA VI</i>	<i>QEA VII</i>
IDA	90	76	85	91

**4. Percentage of ISRs with satisfactory outcome baseline data  
(%adequate baseline data)**

	<i>FY04</i>	<i>FY05</i>	<i>FY06</i>
ISRs from IDA operations	59	50	76

*5. Country Level: Number of RB CASs*

<i>Indicator</i>	<i>FY03</i>	<i>FY04</i>	<i>FY05</i>	<i>FY06</i>	<i>FY07</i>
Cumulative IDA RBCASs	1	5	9	19	n.a.

**6. Outputs: Examples**

	<i>Indicator</i>	<i>FY01-03</i>	<i>FY04-06</i>
Output examples in Health	Number of health professionals trained	41,300	78,000
	Number of insecticide treated bednets	(...)	10,000,000
Output examples in education	Classrooms built or rehabilitated	60,900	53,000
	Number of teachers trained	47,500	298,000
	Number of teachers recruited	(...)	45,000
Output examples in water supply and sanitation	Number of new water connections	(...)	100,000
	Number of new sanitation facilities	61,900	111,600
Output examples in Transport	Roads built (km)	21,600	6,250
	Number of jobs created	(...)	370,000

Source: IDA (2005). "Additions to IDA Resources: Fourteenth Replenishment. Working Together To Achieve the Millennium Development Goals." World Bank staff calculations. Data from FY06 ICRs is partial. For a fuller list of outputs, see Table 6.

**A. Country-Level Indicator**

13. **RBCASs.** The RMS established targets to monitor the *cumulative* introduction of results-based CASs. The cumulative targets were, however, implied for all CASs (IDA and IBRD), for a total of 16 to be completed by end FY05 and a total of 30 to be completed by FY06.

14. **Mainstreaming the RBCAS.** As Table 2 shows, during the FY03-04 pilot phase for RBCASs, six pilot RBCASs were introduced. Later in FY05, cumulatively, 17 RBCASs had

been prepared across Bank Regions, marking a transition year. With successful piloting and a stocktaking of the RBCAS, the approach was assessed as a step forward in the results orientation of country strategies.<sup>9</sup> During FY06, the Bank exceeded the original IDA14 RMS target of 30 RBCASs (see Table 2), and it expects to meet the FY07 target. Given the mandate of 100 percent use of the results-based approach in developing CASs, the focus will now be on improving the quality of RBCASs. The fact that RBCASs are not systematically including baselines and targeted performance measures limits their effectiveness as a monitoring, management, and evaluation tool. They are also not yet distinguishing clearly between longer-term country objectives and those results to which the Bank could contribute.

**Table 2. Implementation of Results-Based Country Assistance Strategies**

<i>Indicator</i>	<i>FY03</i>	<i>FY04</i>	<i>FY05</i>	<i>FY06</i>	<i>FY07</i>
Number of IDA RB CASs	1	4	4	10 <sup>a</sup>	n.a.
Number of RBCASs	1	6	10	15	n.a.
Cumulative IDA RBCASs	1	5	9	19 <sup>a</sup>	n.a.
Cumulative RBCASs	1	7	17	32	n.a.
Tentative target	-	-	16	30	45

Source: OPCS, World Bank.

<sup>a</sup> Includes one blend country.

15. **Going Forward.** In addition to monitoring the number of RBCASs, Management proposes that the RMS also monitor ratings in CASCRs, which are prepared at the end of the CAS period in time to deliver useful lessons for the next CAS. Self-evaluation of the country assistance program in the CASCR is a notable recent development. The CASCR focuses on the relevance and achievement of CAS outcomes and on Bank performance in furthering CAS outcomes, and includes a discussion of projects and analytic and advisory work. All CASCRs are being independently validated by IEG, and each IEG assessment is submitted to the Bank's Board before the Board discusses the next CAS document for the country. Monitoring and reporting of ratings of country outcomes and of Bank performance will facilitate more systematic learning about what worked well and what worked less well, and where and why Bank performance has lagged, providing useful inputs into the design of the next CAS and of Bank operations. The IEG scores from CASCRs would also provide a useful complement to IEG and QAG scores at the project-level for external accountability purposes. The retrospective review of the RMS, to be completed at the end of the IDA 14 period, will report and analyze ratings for IDA country programs, and will draw lessons to improve the design of IDA programs.

## **B. Project-Level Monitoring**

16. Monitoring of IDA's project-level performance is based on a range of data, including data from the quality-at-entry assessments of the Quality Assurance Group (QAG) and project evaluation data from IEG.

### **1. Quality at Entry**

17. Since the mid-1990s, QAG has managed peer review processes for an annual assessment of project quality at entry. Quality at entry, which is correlated with satisfactory project outcomes, can serve as an early leading indicator of project results. In targeting the quality at entry of IDA operations, IDA set a tentative target of 85 percent satisfactory. As Table 3 shows, the target has been achieved. The latest Quality at Entry Assessment (QEA VII), which sampled

<sup>9</sup> *Results Focus in Country Assistance Strategies: A Stocktaking of Results-Based CASs* (R2005-0042), February 24, 2005.

projects that went to the Board in FY04-05, rates 91 percent of IDA operations as satisfactory. These are the highest results for IDA projects in seven assessments of quality at entry, but they are lower than the rating for IBRD countries. QAG assessments also indicate that IDA countries with low Country Policy and Institutional Assessment scores, and low income countries under stress (LICUS), can improve quality at entry further through simpler and more focused project design adapted to weaker implementation capacity, and through greater attention to project readiness at entry.

**Table 3. Quality at Entry in IDA Projects**

<i>Group</i>	<i>QEA IV</i>		<i>QEA V</i>		<i>QEA VI</i>		<i>QEA VII</i>	
	<i>No. of projects</i>	<i>% satisfactory</i>	<i>No. of projects</i>	<i>% satisfactory</i>	<i>No. of projects</i>	<i>% satisfactory</i>	<i>No. of projects</i>	<i>% satisfactory</i>
IDA	52	90	25	76	51	85	73	91
IBRD	34	100	21	100	32	85	40	95
Total projects reviewed <sup>a</sup>	100	94	50	86	85	85	130	92

Source: Business Warehouse, World Bank.

Note: QAG data are taken from Business Warehouse as of July 31, 2006. QEA IV sampled projects taken to the Board from January 2000 to June 2001, QEA V those during FY02, QEA VI those during FY03, and QEA VII those during FY04-05.

<sup>a</sup> Total figures include IBRD, IDA, Special Project Facility, Global Environment Facility, and Monitoring Performance operations.

## 2. Quality at Exit

18. IDA is tracking and targeting: (a) the share of IDA operations that successfully achieve (or are likely to achieve) their development outcomes; and (b) the percentage of projects with satisfactory ICR quality.<sup>10</sup> (As mentioned earlier, the second indicator was substituted for the percentage of ICRs with adequate data.) For the first indicator, the target was 75 percent of IDA projects with satisfactory outcome ratings. As Table 4 shows, the target has been achieved. 79 percent of projects achieved satisfactory outcome rating during FY05, and preliminary figures based on a limited sample for FY06 show 86 percent. This table also shows that the quality of reporting at exit in IDA operations has been consistently high: in FY05, the percentage of projects with satisfactory ICR quality was 93, well above the FY04 level of 85 percent. Preliminary results for FY06 show that quality was satisfactory in 91 percent of ICRs.

**Table 4. IEG Indicators in IDA Projects**

<i>Category</i>	<i>FY03</i>	<i>FY04</i>	<i>FY05</i>	<i>FY06<sup>a</sup></i>
Number of IDA projects	145	147	141	21
Total IDA commitments (\$US mill.)	6,742	5,019	5,746	1,762
Percentage of projects with satisfactory outcome rating	72	77	79	86
Percentage of projects with satisfactory ICR quality	85	85	93	91

Source: Business Warehouse, World Bank.

Note: IEG data are taken from Business Warehouse, August 29, 2006. Figures include IDA and SPF projects.

<sup>a</sup> Partial sample. Figures for FY06 are subject to change as additional ICRs are completed and evaluated.

## 3. Baseline Data

19. Results frameworks with baseline data are critical for tracking progress in the project development objective to be achieved, to make changes in the project if necessary during

<sup>10</sup> IEG's ICR quality ratings provide an independent assessment of the quality and consistency of the content and management ratings in the ICR.

implementation, and to monitor and report on project contributions to sectoral outcomes. Management has worked to ensure that all IDA investment projects initiated after July 1, 2004, and DPOs for which Concept Review took place on or after September 1, 2004, include results frameworks. It has also monitored the availability of adequate baselines so that periodic assessments of project performance are carried out against defined expectations. To that end, Management carried out a review of baselines in first ISRs from all IDA operations approved during FY04, FY05, and FY06—a total of more than 400. The review found that only half of first ISRs in FY05 contained adequate baselines, i.e., at least one project development objective indicator with outcome baseline data, or one intermediate outcome indicator with baseline data. Management, therefore, stepped up efforts in the latter half of FY06 with regions to ensure that teams include baseline data in all IDA projects going to the Board for the remainder of the fiscal year. As a result of these efforts, 76 percent of first ISRs filed to date contain baseline information (Table 5) in FY06 and this number is expected to improve going forward. In addition, in those early FY06 projects where availability of baselines was initially assessed to be unsatisfactory in first ISRs, teams were asked to submit a revised ISR with baseline data, reflecting the seriousness with which Management takes this issue. A review of these second ISRs showed that teams had absorbed the message; 83 percent of previously unsatisfactory ISRs for FY06 have satisfactory baselines now.

**Table 5. Outcome Baseline Data in ISRs for IDA Operations**

<i>FY04</i>		<i>FY05</i>		<i>FY06</i>	
<i>No. ISRs reviewed</i>	<i>% adequate baseline data</i>	<i>No. ISRs reviewed</i>	<i>% adequate baseline data</i>	<i>No. ISRs reviewed</i>	<i>% adequate baseline data</i>
145	59	171	50	163	76 <sup>a</sup>

*Source:* OPCS, World Bank.

*Note:* The fiscal year denotes the year in which the IDA project was approved. For this review, an ISR has adequate baseline if it contains at least one project development indicator with outcome baseline data or one intermediate outcome indicator with baseline data.

20. **Challenges.** The review has brought to the fore the problems in including baseline data for IDA operations in ISRs. One problem is the lack of data in the country; another is striking a balance between choosing relevant outcomes to be monitored and ensuring availability of baseline data to monitor outcomes. Teams are being encouraged to be realistic in defining project development objectives and associated outcomes, given the project’s duration, resources, and approach. But the central issue has to do with the perception among staff that ISR has limited usefulness as a monitoring tool when projects are continuously supervised from the field. An ISR prepared once or twice a year can get outdated very quickly and staff often believe that other tools—such as aide-memoirs and Management Letters—might be more useful to manage the project.

21. There are also issues surrounding incentives to include baselines in ISRs. One issue is that Regional Management typically looks at the portfolio for the region as a whole, and not the ISR of each project. A second issue is that older CASs focus on certain aspects of project implementation, such as disbursement ratios, and not the appropriateness of baseline conditions. A third issue is the diffusion of accountabilities across a wide range of Regional, Network and fiduciary perspectives that can also weaken the clarity and specificity of the design of overall results frameworks. To address these challenges, Management will, by November 30, 2006, clarify to team leaders that the ISR is the key source of reporting to Management, and the primary system the institution has in place to keep track of project implementation and results.

and to inform management and the Board. It will also seek to increase Regional and sector management's accountability for quality of ISRs by sharpening focus on this indicator in the review of Strategy and Performance Contracts.

#### *4. Aggregation of Outputs*

22. For the sixth country-level indicator—reports on examples of outputs in the health, education, water supply, and transport sectors—Management reviewed ICRs from IDA operations in four sectors that exited during FY04, FY05 and FY06. For FY04-05. The review covered 262 ICRs: 71 in health, 78 in education, 54 in water and sanitation, and 59 in transport.<sup>11</sup> It also covered 41 available ICRs for FY06 operations (about a quarter of the total number of completion reports expected in FY07). The review found that outputs can be clustered into general categories within sectors, but with over 60 subcategories. In addition, most of these subcategories are present in less than one third of all ICRs, and they can be very heterogeneous themselves. This is not surprising, given that interventions are country-specific; although final goals might be similar, project and program components and outputs are designed to meet specific country needs. The review also showed that operations are delivering a somewhat different set of outputs compared to those delivered in FY01-03.

23. The most common outputs during 1999-2004—the period during which projects that exited in FY04 and FY05 were implemented—were aggregated for this review. Project outputs from a quarter of ICRs available from projects that exited in FY06 were also included in this exercise. The exercise showed that IDA transport operations constructed over 6,250 km of roads, rehabilitated or maintained more than 56,000 km of roads, created 370,000 jobs and allowed more than 2.5 million people to gain access to basic services (Table 6). IDA health operations trained more than 78,000 health professionals, provided 10 million insecticide treated bed nets and de-wormed 67,000 children. IDA education operations trained about 300,000 teachers, recruited about 50,000 teachers and provided school feeding programs to more than 200,000 children. IDA water and sanitation operations contributed to putting in place 100,000 new water connections, 111,000 new sanitation facilities with 720,000 people gaining protection from floods. (See Annex F for a description of selected outputs for each sector, and also some outputs for selected development policy lending operations and emergency operations.)

24. IDA operations exiting in FY04-06 also delivered a range of institutional outputs not common in FY01-03 operations (see Annex F). In education, for example, several operations supported the introduction of educational quality assessments at the school level, and the establishment of educational organizations and parent associations. In water, operations improved the capacity of institutions in the water sector as measured through steps such as working with water utilities to improve their long term financial position, and in several cases, working to improve accountability through institutions such as infrastructure management committees and farmer water user communities. Operations in the health sector frequently strengthen local facilities such as health posts and primary health care centers. Institutional and regulatory reforms were also completed in many transport projects through work to help local authorities improve systems for vehicle registration and supporting improvements in areas such as regulation of vehicle weight and equipment requirements.

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<sup>11</sup> ICRs of projects that exited in FY01-03 were reviewed in FY04.

25. **Results in Development Policy Operations.** The ICR review shows that teams for many development policy operations (DPO) systematically report on results, using mostly output indicators (see Box 4). However, the use of outcome indicators is increasing:<sup>12</sup> in a sample of 61 ICRs from IDA DPOs (FY02-05), the percentage of outcome indicators increased from 22 in FY02 to 39 in FY05. The review also highlighted that results can mean very different things for DPOs than for traditional investment projects: DPOs (like CASs) tend to use country-level results, whereas results for investment lending operations are more narrowly defined. The teams are still working to enhance the results orientation in DPOs.

**Table 6. IDA14 Results Measurement System (RMS) Midterm Review Outputs Table**

<i>Sector</i>	<i>Indicator</i>	<i>FY01-03</i>	<i>FY04-06<sup>a</sup></i>
Output examples in Health	Hospitals built or rehabilitated <sup>b</sup>	79	114
	Health professional trained	41,300	78,000
	No. of children de-wormed	(...)	67,000
	No. of insecticide treated bed nets	(...)	10,000,000
	No. of refrigerators supplied to hospitals and laboratories	(...)	13,000
Output examples in Education	Classroom built or rehabilitated	60,900	53,000
	No. of teachers trained	47,500	298,000 <sup>c</sup>
	No. of teachers recruited	(...)	45,000
	Textbooks purchased and distributed (mill.)	25.9	5.7 <sup>d</sup>
	No. of pupils benefiting from school feeding programs	(...)	210,000
	No. of pupils receiving scholarships	(...)	28,000
Output examples in Water Supply & Sanitation	No. of beneficiaries from water supply or sanitation interventions	7,545,000	4,960,000 <sup>d</sup>
	No. of new water connections	(...)	100,000
	No. of new sanitation facilities	61,900	111,600
	Construction of sewers (km)	79	150
	No. of sewer household/communal connections	7,800	14,000
	Construction and rehabilitation of drainage (km)	990	5,100
	No. of people that gained protection from flood	(...)	720,000
Output examples in Transport	Total roads built (km)	21,600	6,250
	Total roads rehabilitated and/or maintained (km)	138,200	56,700
	Feeder roads and canals constructed (km)	(...)	4,600
	No. of jobs created <sup>e</sup>	(...)	370,000
	Total railroad constructed or rehabilitated (km)	1,205	900
	Total culverts built or rehabilitated	(...)	3,079
	No. of people that gained increase access to services (e.g., health facilities, schools, markets)	(...)	2,600,000

Source: Staff calculations from Implementation Completion Reports (ICR) of IDA financed operations (does not include AAA).

Notes:

<sup>a</sup> Data for FY06 are based on available ICRs (about 25% of the reports expected during FY07 were available at the time of this midterm review).

<sup>b</sup> Does not include health sub-centers or small clinics.

<sup>c</sup> Does not include several operations that reported training of teachers without the specific figure (e.g., training in 1,640 schools).

<sup>d</sup> Does not include 22,200 metric tons of textbooks and several operations that did not provide specific figures.

<sup>d</sup> This figure does not include additional beneficiaries measured as family units (25,000) and villages (2,000).

<sup>e</sup> In addition, 135,000 men per month received contracts for road construction and 500,000 man-days of employment were created.

<sup>12</sup> See *Development Policy Lending Retrospective* (SecM2006-0319), July 13, 2006.

#### **Box 4. Outputs in DPOs**

Reporting of outputs in DPOs includes the following examples:

**Honduras PRSC:** 45 percent of rural schools now have Local Education Development Associations (ADEL) with a functional Integrated Human Resource Information System for Education (SIARHD).

**Uganda PRSC:** The DPO achieved 3,000 water points in rural areas and 10,000 in urban areas. National water coverage reached 61.5 percent, the financing of the sector was significantly increased, arrears were reduced, and the institution's response time was significantly improved. In health, diphtheria, pertussis, and tetanus (DPT3) immunization coverage increased from 63 percent in 2002 to 84 percent in 2003.

**Senegal PRSC:** the primary health consultation rate increased from 46 percent to 50 percent, the DPT3 coverage rate increased from 70 percent to 75 percent, and the share of assisted deliveries increased from 54 percent to 59 percent.

**Burkina Faso PRSC:** The Ministry of Health increased the budget to regions and health districts by 10 percent annually, and the number of new contacts at health centers increased from 0.27 to 0.32 per capita.

**Ghana PRSC:** The share of supervised deliveries rose from 49 percent in 2002 to 53 percent in 2004.

*Source:* OPCS, World Bank.

26. **Lessons Learned.** The review of outputs presents several challenges to IDA and its partners. Operational practice in defining outputs varies significantly within sectors, even in those sectors that focus on relatively more tangible goods and services. This reflects changes in technical knowledge as well as cross-sectoral differences in sectoral and intervention priorities, shifts in the portfolio as some countries become active in a sector and others exit, and the effort to match interventions to specific country and institutional settings. Variations across projects within a sector can reflect important differences in sectoral priorities and approaches across countries, consistent with the priority in recent years on enhancing country ownership. It is therefore not appropriate to look for year on year trends in numbers of outputs within a single sector; rather, the emphasis must be on ensuring that each project defines expected project achievements at project concept stage, and then measures specific achievements during supervision and at completion. Internal review mechanisms should ensure that each project includes plausible results chain logic and a credible measurement system. Project achievements must include use of outputs by targeted end-users or the quality of the services, or other key measures of overall effectiveness (see Box 5).

#### **Box 5. Use of Outputs: The Case of Health**

Often, *number of health facilities built/renovated* is used as an indicator of health system performance. However, an increase or decrease in the number of facilities means little without the larger context: (a) Are additional facilities what best serves the needs of the target population? and (b) Do facilities have available complementary inputs such as a continuous drug supply and availability of staff? *Use of health facilities* would be a more robust indicator; a time series of outputs may lead to an incorrect assumption that there is a parallel trend in performance. In addition, focusing exclusively on health infrastructure dilutes the emphasis on policy reforms and institutional strengthening that is critical for improving health systems performance. A review of FY04-05 ICRs carried out by OPCS and the Health Nutrition and Population anchor unit suggests that there is a need to (a) select indicators that are more reflective of "real changes" (e.g., use of services) in operations that are supporting infrastructure investments in health; (b) ensure that health indicators among specifically targeted groups are tracked; (c) recognize that different projects have differing interventions; and (d) measure the contribution of Bank-assisted projects to building results management capacity at the country level.

*Source:* HNP Anchor.

## 5. Results Orientation of IDA Operations

27. As mentioned earlier, all IDA operations now include a results framework. Management has issued guidance notes for investment and development policy loans that are helping teams to develop results-oriented IDA operations. For investment lending projects, guidance has been provided in designing the new Project Appraisal Documents and in using results-oriented monitoring and evaluation (M&E) in the new ISRs. For DPOs, Operational Policy 8.60, *Development Policy Lending*, includes provisions to strengthen the M&E of the operation, and good practice notes cover a range of issues. The focus is now the quality of operations' results frameworks. This section reports the findings from a small pilot exercise to assess the quality of results frameworks of operations approved in FY06.

28. **Development Objectives.** The statement of the development objective and indicators was the first area of analysis. In three-quarters of projects the project/program development objective was expressed as a measurable change in the behavior or condition of the target group and about three-quarters also contained baselines. But the operations generally included a very large number of indicators (reflecting in part lack of clarity in the target group), and occasionally included indicators that did not measure the stated intent of the project or program objective complicating efforts to monitor progress during implementation and evaluating it at completion.

29. **Link with CAS Objectives.** The second area of analysis was the link of the project or program development objective with the CAS objectives. It is expected that for all operational activities, the documentation should set out how the activity will support the results that the CAS expects at the country-level. Although the documents for three-quarters of the operations reviewed contained a broad description of how the operation supports the CAS, there was no specific link to the CAS outcome; only one of the reviewed operations could be considered good practice.

30. **Institutional Arrangements.** The Bank has moved from focusing exclusively on the project M&E systems and the project implementation unit's capacity to monitor the project to (a) embedding the monitoring indicators in the arrangements that the borrower has in place for monitoring its own programs; and (b) strengthening country/sector M&E systems where they are weak. While about half of the documents had a reasonably good assessment of most aspects of borrower M&E systems, with some analysis of the extent to which the project M&E system draws on the borrower's M&E system, only one document was good practice. However, Regions' recent engagement in improving the quality of borrowers' M&E frameworks is encouraging. Regions are enhancing staff capacity to improve the results orientation of IDA operations by providing guidance materials, training sessions for both Washington and country office staff, hands-on guidance in preparing projects and CAS, and courses in M&E.

#### IV. PROGRESS IN STATISTICAL CAPACITY BUILDING

31. The IDA14 RMS recognizes that countries need capacity to measure progress toward core development outcomes if they are to lead the implementation of their poverty reduction strategies and support global monitoring of progress toward the MDGs and IDA results. IDA committed to play a leading role in coordinating international partners' efforts to strengthen countries' capacity to compile and use statistics, to develop an indicator on statistical capacity at the country level, to prepare profiles of countries' statistical capacity, and to make this information public on the Bank's external website. IDA also committed to working with other development partners to monitor statistical capacity building activities undertaken in borrowing countries and to prepare an annual note describing and tracking the progress of efforts to improve statistical capacity. The first note was produced in May of this year.<sup>13</sup>

##### A. Progress

32. The World Bank's Development Data Group (DECDG) has been leading the Bank's efforts to identify and strengthen statistical capacity in IDA countries.<sup>14</sup> Its recent progress report, *Statistical Capacity Improvement in IDA Countries*,<sup>15</sup> highlighted measurable improvements in statistical capacity and in the availability and quality of data in IDA countries using a range of tools. (Table 7 summarizes the use of some of these tools in IDA countries.)

**Table 7. IDA Tools to Support Statistical Capacity Building**

Number of STATCAP programs in IDA countries	3
STATCAP commitments in IDA countries (\$US millions)	31
TFSCB commitment in IDA countries (\$US millions)	15
Number of completed NSDS / NSDS being updated in IDA countries	30
Number of NSDS under preparation / NSDS process initiated in IDA countries	26

*Source:* World Bank; data as of June 30, 2006.

*Note:* STATCAP commitments include a component of the Nigeria Federal Government Economic Reform and Governance Project.

- ***Marrakech Action Plan for Statistics.*** Since the 2004 Second Roundtable on Managing for Development Results in Marrakech, Morocco, the World Bank and other development partners have focused on implementing the Marrakech Action Plan for Statistics (MAPS).<sup>16</sup> World Bank-managed financial resources used for this purpose include the Trust Fund for Statistical Capacity Building (TFSCB), the STATCAP multi-country lending program, and support for MAPS through the Development Grant Facility. STATCAP and other statistical capacity improvement projects have a long time horizon, however, so it is difficult to assess results at this stage.
- ***National Strategies for the Development of Statistics.*** The key strategy of MAPS is the improvement of statistical capacity on the basis of national strategies for the

<sup>13</sup> *Statistical Capacity Improvement in IDA Countries* (IDA/SecM2006-0205), May 3, 2006.

<sup>14</sup> *Measuring Results: Improving National Statistics in IDA Countries* (DC2005-0017), November 2004.

<sup>15</sup> *Statistical Capacity Improvement in IDA Countries* (IDA/SecM2006-0205), May 3, 2006.

<sup>16</sup> *Better Data for Better Results: An Action Plan for Improving Development Statistics*, presented to the Second International Roundtable on Managing for Development Results, Marrakech, Morocco, February 4-5, 2004.

development of statistics (NSDSs). Much has been learned about this approach since the Board first discussed it in October 2002, and the PARIS21 partnership<sup>17</sup> has played a crucial advocacy role and has helped countries with guidance and tools. Many IDA countries have developed or are developing an NSDS, but the main challenge is to help them implement these plans. Additional incentives are needed to ensure that both countries and World Bank teams give higher priority to investments in statistical capacity.<sup>18</sup>

- ***Accelerated Data Program for Africa.*** Making sustainable improvements in statistical capacity is widely understood to require a long-term effort, but the data needs of the decision-makers to manage for results at the subnational, national, and international levels call for near-term enhancements in data availability and quality. Working with countries and international organizations within the MAPS framework, the Bank is proposing new activities that focus on Africa through an Accelerated Data Program. This pilot program is focused on the household surveys and censuses that provide estimates of many MDG indicators as well as data for measuring vulnerability, rural development, and access to services such as education, health, and infrastructure.

33. ***Constraints to Progress.*** The DECDG report also reviews factors preventing more rapid progress. As Table 7 showed, to date few IDA countries have launched a STATCAP operation. The main constraints that hold some countries back from making statistical capacity improvements are: (a) weak incentives to treat statistical capacity as a priority even though evidence shows the cost of not prioritizing it;<sup>19</sup> (b) the supply of technical expertise; and (c) the lack of rigorous data quality and statistical capacity assessments of development statistics. There are several ways to address these constraints. To strengthen incentives in countries to invest in statistical capacity building, Management will review the adequacy of discussions in the CAS document on data quality, statistical capacity, and use by countries of data in decision making by drawing on support from PARIS 21 and DECDG's reviews of statistical capacity. It will also encourage greater focus on statistical capacity and data quality improvement by developing a bulletin board where countries can post detailed information about data compilation and dissemination practices for development statistics, and where those practices can be assessed against international standards.

## **B. Achievements**

34. This section reports on improvements in overall country statistical capacity, the status of IDA14 recommendations to support strengthening statistical capacity where appropriate in IDA projects in health, education, water, and transport, and IDA's use of DEC's impact evaluation work to support project interventions based on evidence.

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<sup>17</sup> PARIS21 (Partnership in Statistics for Development in the 21<sup>st</sup> Century) is a partnership of statisticians and data users for improving the production and use of development statistics. The PARIS21 secretariat is housed in the Development Cooperation Directorate of the Organization for Economic Cooperation and Development, Paris.

<sup>18</sup> *Beyond the Numbers: Understanding the Institutions for Monitoring Poverty Reduction Strategies* (Bedi, Coudouel, Goldstein, and Thornton), December 2005.

<sup>19</sup> *Measuring up to the Measurement Problem: The Role of Statistics in Evidence-Based Policy Making*, (Scott, PARIS21), January 2005.

35. **Improvements in Overall Statistical Capacity.** The statistical capacity paper discussed by the Board<sup>20</sup> in October 2002 included a new “statistical capacity score” based on publicly available information in international databases to measure improvements in overall statistical capacity. The methodology was improved, and the results were presented to IDA Deputies in November 2004. Individual scores and the information that is used to calculate them are published on an external website. Three aspects of statistical capacity are measured: adherence to internationally recommended statistical practice, the frequency of data collection, and data accessibility (the last aspect uses the availability of estimates of key socioeconomic indicators in international databases as a proxy). These measurements are combined with equal weight into a score on a scale of 0-100, which can be used to analyze differences and changes in statistical capacity. Table 8 shows the changes in scores between 1999 and 2006. Overall, the scores in 84 percent of IDA countries have increased, and 27 percent show a substantial increase of more than 20 points. On the whole, IDA countries have lower statistical capacity than IBRD countries, but there have been improvements in both groups. In IDA countries, however, the change has been uneven, with African countries showing the least progress. One reason for this is the lack of censuses and the infrequency of household surveys that collect poverty data, compared to the rest of the world. (Annex D contains the country breakdown for each IDA country.) The Accelerated Data Program in Africa, discussed earlier is focused on household surveys and censuses.

**Table 8. Progress in IDA Countries in the Statistical Capacity Score**

<i>Category</i>	<i>IDA Countries</i>	
	<i>Number</i>	<i>Percent</i>
Total countries	81	100
Countries with Statistical Capacity Score for 1999 and 2006	64	79
Countries showing improvement	54	84
Countries showing substantial improvement <sup>a</sup>	17	27
Countries showing decrease	9	14

*Source:* World Bank staff estimates.

<sup>a</sup> Improvement (decrease) is measured by positive (negative) changes in the statistical capacity score. Substantial improvements are changes larger than 20 points in the statistical capacity score.

36. **Improvements at the Project Level.** The earlier section discussed support at the national level through design of NSDSs, PARIS 21 and the Accelerated Program for Africa that is focused on household surveys and censuses. As part of the RMS, IDA also committed that starting in FY06, where possible and appropriate, all new IDA operations in four sectors will report on strengthening country capacity to ensure adequate monitoring of key sector outcomes in health, education, water, and transport operations. The selected key sector outcomes are under-five mortality rate (health), primary education completion rate (education), proportion of population with improved access to safe water sources (water), and proportion of rural population with access to an all-season rural road (transport). This new requirement was introduced to ensure that countries have the capacity to generate regular data for these fundamental development outcomes and, where possible and appropriate, to use IDA operations to strengthen this capacity.

37. **Findings.** Management reviewed IDA Project Appraisal Documents and Program Documents from FY05 and FY06 in these four sectors to identify how project teams are addressing these issues. As Table 9 shows, 58 percent report the latest data for the key sector

<sup>20</sup> *Building Statistical Capacity to Monitor Development Progress* (SecM2002-0539), October 29, 2002.

outcome indicator in the RMS, and 52 percent contain a clear work program to support national country systems.<sup>21</sup> A number of task teams do, however, go beyond a “ring-fenced” M&E approach, with more than three-quarters elaborating on the use of national M&E systems to feed into project M&E to report on key sector outcomes. Looking across project types, recent projects with a sectorwide approach (SWAp) have shown more robust results in this area.<sup>22</sup> During FY05 and FY06, 33 operations were approved that adopted this type of approach, 22 of them in IDA countries; 10 of the IDA SWAps were included in the review of Project Appraisal and Program Documents. This sample of SWAps shows more robust results than the overall figures in Table 9: for example, 70 percent (versus 58 percent) report on the latest data for the key specific sector outcome indicator (Box 6 describes a good example). However, from this review it is clear that the majority of IDA projects are far from what is expected. Regional Management will ensure that projects going to the Board in the coming months comply with this aspect of the RMS.

**Table 9. Statistical Capacity-Building Efforts in IDA projects**

<i>Category</i>	<i>Number of project appraisal and program documents reviewed</i>	<i>Percentage of projects that mention the latest data for the specific key sector indicator</i>	<i>Percentage of projects that have an explicit linkage to MDGs / PRSPs</i>	<i>Percentage of projects that used country M&amp;E systems to monitor key sector indicators</i>	<i>Percentage of projects that highlight a clear work program to support country systems</i>
FY05	40	60	73	63	45
FY06	37	57	78	97	59
<b>Total FY05-06</b>	<b>77</b>	<b>58</b>	<b>75</b>	<b>79</b>	<b>52</b>

Source: World Bank staff estimates.

Notes: Operations reviewed were FY05-06 IDA operations in the appropriate sectors. Some sub-sector operations were not included such as secondary or higher education, HIV-AIDS, or non rural roads transport operations.

**Box 6. Good Example of Support to Statistical Capacity at the Project Level**

The Project Appraisal Document of the Health and Nutrition Support Project for Mauritania (P094278) is a good practice example because it takes a broad approach to the development of statistical capacity that goes beyond narrowly improving the quality of statistical data to supporting information on partner activities, monitoring and evaluating progress in meeting the health MDGs, and developing a sectoral program. The document emphasizes: (a) support to information and monitoring systems, data quality, and timely reporting; (b) improved information on all partners’ activities; (c) a set of monitoring indicators (including on the frequency of reporting) that the health sector can report with a reasonable effort and cost; and (d) support for surveys to be carried out at critical points in program and project development. One project subcomponent is supporting national efforts to monitor and evaluate progress in meeting the MDG targets for health; developing a consolidated sectoral program with common measures and procedures for supervising, monitoring, and evaluating results; and regularly submitting project reports on physical and financial results as well as periodically supervising the project’s key performance indicators.

38. **Impact Evaluation Initiative.** A key challenge facing IDA is to focus development resources on proven, effective interventions—and to provide the relevant and rigorous advice to development countries to help them in designing such interventions. The IDA 14 RMS has

<sup>21</sup> The review looked for any generic work program to support national M&E systems, not work that was specific to the indicators.

<sup>22</sup> A SWAp is an approach by a group of donors to support a locally owned program for a coherent sector in a comprehensive and coordinated manner, moving toward use of country systems. A SWAp typically encompasses an entire sector or a major subsector. It represents a paradigm shift in the focus, relationship, and behaviour of donors and governments.

strengthened interest in impact evaluation at the regional and sectoral level. Comparing the outcomes of a program against a counterfactual that shows what would have happened to beneficiaries *without* the program, allows attributing observed changes to the program. The Networks, DEC and other partners are collaborating in the Development Impact Evaluation initiative (DIME) to promote this form of impact evaluation where the effectiveness of interventions is uncertain. A good example is in the area of girls' education. A number of countries have experimented with programs that provide scholarships to girls. Impact evaluations of such programs in Pakistan, Bangladesh and Cambodia have conclusively shown very positive results. In Pakistan, girls' enrollment increased 33 percent as a result of the program. In Bangladesh for every year that funds were distributed, female secondary school enrollment increased 12 percentage points due to the scholarships. And in Cambodia, a similar program increased girl enrollment in lower secondary school by approximately 20 percentage points, with the largest program impacts to be found among girls from the poorest families. Evidence such as this provides a solid base on which to provide advice to developing countries and make decisions on the type of programs the Bank should be supporting. This work needs to be scaled up in IDA countries.

### **C. Going Forward**

39. IDA countries' statistical capacity has improved in response to new demands for official statistics at the national and international levels and as a result of efforts both by IDA countries and by the international community. These improvements are a necessary element to enable countries to manage for results. However, progress has not been sufficient. Many countries lack incentives to prioritize statistical capacity improvement within their development programs. They also have not sufficiently complemented statistical capacity improvement with work to stimulate greater demand for results within and across the line agencies that are most directly responsible for the delivery of public goods and services, as well as among such key political actors as parliamentarians and civil society. The experience with Poverty Reduction Strategies is clarifying the important role of political and legislative bodies in expressing a demand for information that enables accountability for results in policy process.<sup>23</sup> It is important for World Bank country teams to advocate for better statistics, emphasizing the importance of evidence-based analysis and the use of statistics in policymaking and management.

40. **Proposals.** The May 2006 Board paper highlighted several specific proposals for mainstreaming work on statistical capacity improvement: (a) statistical capacity and data quality assessments could be prepared as part of advisory services to clients; (b) a bulletin board system could be created for monitoring country statistical capacity and the quality of development statistics; and (c) national statistical development strategies could be reviewed in conjunction with poverty reduction strategies to ensure that NSDSs support the monitoring requirements of these strategies and that they consider the needs for improved statistical capacity. In addition, to raise the profile of statistics in the World Bank's country dialogue, good practice results-based CASs should contain a discussion of statistical capacity, and the Bank will encourage countries to promote and disseminate results from service delivery surveys in key services—education, health, water, sanitation and electricity—to stimulate demand in line agencies to collect and use information to improve service delivery. Finally IDA will scale up the Development Impact

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<sup>23</sup> 2005 Poverty Reduction Strategy Review, p. 17

Evaluation initiative to ensure that IDA interventions are informed by evidenced-based causal linkages.

## V. THE IMPACT OF THE IDA14 RESULTS MEASUREMENT SYSTEM

41. Developing countries and donor nations have increasingly requested development agencies to harmonize their multiple and often different reporting systems to avoid burdening the management and administrative capacity of developing countries and to reduce the transaction costs of development assistance. The PARIS Declaration on Aid Effectiveness calls for harmonization around results reporting. The IDA14 RMS was designed in a bottom-up fashion by reviewing poverty reduction strategies in IDA countries and selecting the most common core outcomes and outcome indicators identified by countries. Originally, it did not have an explicit goal to be fully compatible with or similar to other monitoring initiatives, although its outcomes and indicators were closely aligned with the MDGs (see Table 10). Nevertheless, IDA is working to share its reporting experience with development partners.

**Table 10. IDA Monitoring Indicators and Other Monitoring Initiatives**

<i>RMS Indicator</i>	<i>MDG indicator</i>	<i>US MCA list</i>	<i>DFID PSA list</i>	<i>EU EuropeAid</i>
1. Proportion of population below \$US 1/day poverty line	✓	(...)	✓	✓
2. Under-5 mortality	✓	(...)	✓	✓
3. HIV/AIDS prevalence rate of adult population age 15-49	✓	(...)	✓	✓
4. Proportion of births attended by skilled health personnel	✓	(...)	✓	✓
5. Ratio of girls to boys in primary and secondary education	✓	(...)	✓	✓
6. Primary school completion rate	✓	(...)	(...)	✓
7. Proportion of population with access to an improved water source	✓	(...)	(...)	✓
8. Fixed lines and mobile telephones per 1,000 inhabitants	✓	(...)	(...)	(...)
9. Formal cost required for business start up	(...)	✓	(...)	(...)
10. Time required for business start up	(...)	✓	(...)	(...)
11. Public financial management	(...)	(...)	(...)	(...)
12. GDP per capita	(...)	(...)	(...)	(...)
13. Access to rural population to an all-season road	(...)	(...)	(...)	(...)
14. Household electrification rate	(...)	(...)	(...)	(...)

*Source:* WDI 2006 and staff estimates.

*Note:* US MCA = Millennium Challenge Account; DFID PSA = Public Service Agreement.

42. **Impact on Development Partners.** While introducing the RMS, IDA has been in close contact with the African Development Bank and the Asian Development Bank, sharing information on the framework, the process, and specific indicators. During recent months both the African and Asian Development Banks have discussed internally whether to adopt a similar framework for the African Development Fund and the Asian Development Fund, and both institutions are at an advanced stage in those discussions. For the Asian Development Bank, this results framework will complement the reporting mechanism with which it already monitors the implementation of its poverty reduction strategy.

43. **Internal Impact.** The IDA14 RMS has also had some substantial influence in other critical internal World Bank initiatives. One of the objectives of the budget reform is to strengthen the links among strategic options, performance, and results. Strategy and Performance Contracts have been introduced in each vice presidential unit, setting out the unit's

mission, strategic objectives, business lines, resource allocation, trade-offs and choices, risks, and key performance indicators to measure progress at different levels. The IDA14 RMS has been a key reference for many Regions and Networks in defining these indicators. Moreover, in the Africa Region, the IDA14 framework has served to support the development of the Africa Action Plan, which provides a results-oriented framework to support critical policy and public actions led by African countries to achieve well-defined goals, such as the MDGs. The Africa Action Plan uses the IDA14 framework to help track country outcomes as well as lower-level indicators that will help evaluate the success of the Africa Action Plan.

44. ***Going Forward.*** The IDA14 RMS will continue to play a catalytic role both inside and outside the World Bank as a reference for results framework introduction and results reporting. At the international level we expect to see increasing efforts to harmonize results reporting across development partners. Inside the World Bank, as OPCS develops the new Bankwide Results Monitoring and Learning System, it will most likely use the IDA14 framework and the early lessons from implementation as one of the main inputs.

## VI. CONCLUSIONS AND NEXT STEPS

45. IDA was the first international financial institution (IFI) to introduce a results measurement system that systematically tracks key outcome indicators as well as IDA's contributions to these outcomes. Building on lessons learned from the IDA13 results measurement system, IDA14 introduced a two-tiered RMS to track trends in 'big picture' outcomes at the country level as well as IDA's focus on results. At the country level, IDA countries are making progress, but most are unlikely to meet some MDGs, particularly in human development. Monitoring of IDA countries' progress has brought two problems to the fore: data gaps in critical areas, such as infrastructure, and the enormous effort, resources, and cultural change that are required to support country capacity to collect and use reliable statistics for decision-making. More needs to be done to train staff on how issues of country capacity to collect and use key indicators can be addressed at all levels using a mix of lending and non-lending instruments and through discussion with the country and development partners at the global, sectoral and country levels.

46. The more systematic monitoring of the Bank's support to countries in making progress on core development outcomes shows considerable progress in four areas: (a) ensuring that all country programs have results based country assistance strategies (RBCASs); (b) making substantial improvements in the quality-at-entry of IDA operations; (c) including results frameworks in IDA investment and development policy operations; and (d) continuing the longer-term improvement in project results at exit. Two indicators show somewhat less progress: (a) the adequacy of baselines by first ISR; and (b) quality of output and outcome reporting in ICRs prepared at completion of IDA operations. More progress is needed in improving the quality of results frameworks at entry and in supporting country's statistical capacity.

47. The Bank has taken steps to ensure that IDA continues to maintain progress in areas where IDA is meeting or exceeding targets set for the IDA14 period and to ensure progress in areas where progress so far has been somewhat less than expected. Management has already established a Bankwide Results Steering Group to ensure that IDA commitments are monitored,

and to bring to Management's attention issues that need to be addressed. Management is scaling up training activities for both Washington and country office staff on results frameworks in projects and programs, and it conducts a regular dialogue with Regional Operational & Quality Directors to inform them about progress to date in the IDA14 RMS and outstanding issues, and to agree on actions to ensure higher compliance with the IDA14 RMS.

48. Going forward, Management will take the following specific actions:

- First, Management will strengthen review procedures for quality of results frameworks upstream and will monitor them on a quarterly basis.
- Second, Management will review the adequacy of discussions in the CAS document on data quality, statistical capacity, and use by countries of data in decision making.
- Third, Management will monitor self-assessment ratings in CAS Completion Reports (CASCRs) and their independent validation by the Independent Evaluation Group (IEG) to ensure focus on the relevance and effectiveness of country programs.
- Fourth, Regional and Sector Management will ensure that projects in water, education, health and roads sectors going to the Board in FY07-08 include the relevant indicator from Tier 1, and specifically address how capacity is being developed to monitor the indicator through the project or through efforts by other development partners or the country itself.
- Fifth, ICR guidelines are being revised to assure more specific measurement of project achievements.
- Sixth, percent of projects with baselines in first ISRs will be a performance indicator in Vice-Presidential Unit-specific Strategy and Performance Contracts.

49. The implementation of the IDA14 RMS is encouraging a stronger focus on results across the Bank group and among IDA borrowers. Though findings from this mid-term review of the system show that there is scope for improvement in the pace of progress in both Tier 1 and Tier 2 indicators, Management is encouraged that the system is contributing to broader awareness and specific systemic changes which should contribute to improved monitoring and reporting of country level outcomes and IDA's contributions to them.

## ANNEX A. CHANGES IN IDA RESULTS MEASUREMENT SYSTEM TIER 1 OUTCOME INDICATORS

Indicator	Units	Countries include coverage <sup>a</sup>		Year		Outcomes <sup>c</sup>			Benchmark rate of change(ROC) (%)		
		(no.)	(%)	Baseline	Most Recent	Baseline	Most Recent	Average annual rate of change (ROC) (%) <sup>d</sup>	IDA past ROC (1990 - baseline)	IDA required ROC to achieve MDG	Non-IDA developing countries recent ROC
<b>Average progress sufficient to reach MDG target</b>											
Ratio of girls to boys in primary and secondary education	Percent	54	79	2001	2004	83	88	2.2	0.8	1.2	0.3
Primary school completion rate	Percent of pop. of official graduation age	62	87	2001	2004	73	80	2.8	-0.1	1.7	-0.3
Proportion of population with sustainable access to an improved water source	Percent of population	61	98	1990	2004	65	76	1.1	..	1.0	0.5
<b>Recent progress exceeds IDA past ROC (1990 – baseline)</b>											
Proportion of population below \$1/day poverty line	Percent of population	48	91	1999	2002	32.1	30.1	-2.2	-2.0	-2.8	-9.3
Fixed lines and mobile telephone per 1,000 inhabitants	Per 1,000 people	80	100	2001	2004	39	86	26.5	14.2	n/a	19.3
GDP per capita	Constant 2000 \$US	78	97	2002	2005	473	549	4.9	2.1	n/a	5.2
<b>IDA progress exceeds Non-IDA developing countries recent ROC</b>											
HIV prevalence rate of adult population aged 15-49	Percent of population age 15-49	63	96	2003	2005	1.7	1.7	0.3	..	<=0	2.3
Proportion of births attended by skilled health personnel	Percent of births	64	91	2001	2004	43	44	0.7	1.9	3.8	0.5
Formal cost required for business start up	Percent of GNI per capita	65	96	2003	2005	121	99	-9.9	..	n/a	-6.7
Time required for business start up	Days	65	96	2003	2005	80	68	-7.7	..	n/a	-3.0
<b>IDA progress lags or no comparison possible</b>											
Under-5 child mortality	Per 1,000 live births	80	100	2001	2004	121	117	-1.2	-1.5	-4.4	-4.5
Public financial management	Number of benchmarks met	22	27	2001/02	2004	6	6.5	2.7	..	n/a	..
Access to rural population to an all-season road	Percent of rural population	32	83	1995/2003	n/a	61	..	..	..	n/a	..
Household electrification rate	Percent of households	49	95	1995/2003	n/a	55	..	..	..	n/a	..

Source: WDI 2006 and staff estimates.

(..) means insufficient data, (n/a) means not applicable

a 81 IDA eligible countries are considered in the aggregation for all indicators.

b Percent of relevant population from total relevant population in the 81 IDA countries.

c Four indicators do not have sufficient information yet to measure progress between IDA periods.

d The average annual growth is calculated between the baseline estimated value and the most recent estimated value. It is the most recent rate of growth experienced by the indicator.

## ANNEX B. VARIATION IN PROGRESS AMONG IDA COUNTRIES

<i>Indicator<sup>a</sup></i>	<i>Number of IDA countries with observations</i>	<i>% of IDA countries making progress</i>	<i>% of IDA countries making significant progress<sup>b</sup></i>
1. Proportion of the population below \$US 1/day poverty line (%)	48	57	9
2. Under-5 child mortality	81	74	20
3. HIV prevalence rate of adult population aged 15-49	63	38	38
4. Proportion of births attended by skilled health personnel	68	60	34
5. Ratio of girls to boys in primary and secondary education	69	64	38
6. Primary school completion rate	66	62	38
7. Proportion of population with sustainable access to an improved water source	61	74	38
8. Fixed lines and mobile telephone per 1,000 inhabitants	80	96	40
9. Formal cost required for business start up	65	83	29
10. Time required for business start up	65	37	20
11. GDP per capita	78	85	21
12. Public financial management	22	41	..

*Source: WDI 2006 and staff estimates.*

(..) means insufficient data,

<sup>a</sup> Two indicators are excluded from this table because no progress can be measured.

<sup>b</sup> The significant progress value is defined as the 75<sup>th</sup> percentile of the distribution of rate of change for all developing countries

## ANNEX C. DATA AVAILABILITY FOR IDA RMS TIER 1 INDICATORS

<i>Indicator</i>	<i>2004<sup>a</sup></i>		<i>2006<sup>a</sup></i>		
	<i># of IDA countries with data in 2000-02</i>	<i># of IDA countries included in calculation of historical performance</i>	<i># of IDA countries with data in 2000-02</i>	<i># of IDA countries with data in 2002-04</i>	<i># of IDA countries included in calculation of historical performance</i>
GDP per capita (constant 2000 US\$)	77	72	77	77	78
Population below \$1 a day (%)	15	48	25	21	48
Public financial management	24	..	23	29	..
Cost required for business start-up (% of GNI per capita)	55	..	0 <sup>3</sup>	66	..
Time required for business start-up (days)	55	..	0 <sup>3</sup>	66	..
Access to an improved water source (% of population)	75	34	80	79	57
Fixed line and mobile phone subscribers (per 1,000 people)	80	78	80	79	80
Access to an all-season road (% of rural population)	11	..	10	8	..
Household electrification rate (% of households)	18	..	21	2 <sup>d</sup>	..
Under 5 mortality rate (per 1,000)	80	77	80	80	80
Prevalence of HIV/AIDS, (% adult population aged 15-49)	53 <sup>b</sup>	..	0 <sup>c</sup>	63	..
Births attended by skilled health staff (% of total)	53	39	61	40	64
Primary completion rate, total (% of relevant age group)	62	55	62	63	61
Ratio of girls to boys in primary and secondary education (%)	52	49	63	64	54

*Source: WDI 2006 and staff estimates.*

<sup>a</sup> 80 IDA-eligible countries in total, and Timor-Leste was excluded.

<sup>b</sup> The availability was based on prevalence of HIV/AIDS among women aged 15-24.

<sup>c</sup> Previous estimates are not available because of methodology change for recent estimates.

<sup>d</sup> A large number of estimates (DHS/MICS/WHS) will become available at the end of 2006.

*Note:*

- In general, more observations for 2000-02 are available now than two years ago;
- Also more observations are available for the most recent 3-year period (2002-04 as of now) than that of two years ago (2000-02 then);
- As more observations become available, more countries are included in the calculation of historical performance.

## ANNEX D. STATISTICAL CAPACITY SCORE IN IDA COUNTRIES

<i>Country</i>	<i>Overall 1999 (0-100)</i>	<i>Overall 2006 (0-100)</i>
Kyrgyz Republic	67	93
Armenia	50	90
Indonesia	80	85
Albania	63	83
Pakistan	63	80
Bangladesh	60	80
Mongolia	60	80
India	77	77
Bolivia	63	77
Nepal	57	77
Azerbaijan	50	77
Senegal	70	75
Nicaragua	52	75
Vietnam	50	75
Tajikistan	45	75
Uganda	52	73
Georgia	50	73
Burkina Faso	60	72
Sri Lanka	55	72
Cameroon	33	72
Côte d'Ivoire	62	70
Niger	62	70
Moldova	58	70
Mozambique	62	68
Mauritania	52	68
Maldives	n.a.	67
Serbia and Montenegro	37	67
Zambia	78	65
Honduras	60	65
Cambodia	32	65
Madagascar	62	63
Malawi	52	63
Benin	48	63
Mali	47	63
Kenya	65	62
Tanzania	65	62
Lesotho	63	62
Lao PDR	53	62
St. Vincent and the Grenadines	n.a.	60
Ethiopia	58	60
Rwanda	43	60

<i>Country</i>	<i>Overall 1999 (0-100)</i>	<i>Overall 2006 (0-100)</i>
Chad	52	58
Ghana	47	58
Yemen, Rep.	47	58
Uzbekistan	43	58
Comoros	n.a.	57
St. Lucia	n.a.	57
Vanuatu	n.a.	57
Guinea	62	55
Grenada	n.a.	53
Zimbabwe	73	53
Myanmar	42	53
Gambia, The	38	53
Cape Verde	n.a.	52
Dominica	n.a.	52
Nigeria	53	52
Togo	50	52
Guyana	n.a.	50
Tonga	n.a.	50
Papua New Guinea	45	50
Congo, Rep.	25	50
Sao Tome and Principe	n.a.	48
Bosnia and Herzegovina	30	48
Sierra Leone	22	47
Djibouti	n.a.	45
Samoa	n.a.	45
Congo, Dem. Rep.	42	43
Guinea-Bissau	37	43
Burundi	30	40
Central African Republic	40	38
Eritrea	37	38
Angola	27	35
Bhutan	n.a.	33
Haiti	28	32
Kiribati	n.a.	30
Solomon Islands	n.a.	30
Timor-Leste	n.a.	30
Sudan	32	30
Afghanistan	10	28
Liberia	13	18
Somalia	10	17

*Source: World Bank and staff estimates.*

## ANNEX E. MANAGING FOR RESULTS EFFORTS IN THE REGIONS AND NETWORKS

1. This annex highlights selected examples of how IDA is managing for results at the country, and sector-levels through programs and projects.

### Country-Level

2. **Results Based CASs.** The RBCAS constitutes a significant step forward in IDA's capacity to manage for results at the country-level. The RBCAS approach helps distinguish between long-term country development goals and intended outcomes to which the CAS program directly contributes; strengthens the use of lessons learned from the last CAS; improves alignment of the Bank's program with the country's priorities; sharpens the design of the Bank program; and mobilizes country teams around a common vision of delivering results on the ground. Task teams have found that the design of a results-based CAS requires substantive inputs from all sectors. Cross team engagement in the construction of the RB CAS helps disseminate analytical insights to identify potential synergies that can amplify development effectiveness. In the past, by comparison, the CAS might have been developed by only a few individuals, with limited participation from others in the country team. The Armenia team found that the early discussions around the CAS spurred deeper consideration of cross-sectoral linkages and more careful analysis of the problems and solutions to address them. For the Mozambique CAS, the need to be more specific and clear about the logical relationships linking outcomes to activities and the need to select a limited number of outcomes led to broader and more active participation of country team members from several sectors. The Cameroon country team assembled multi-sectoral teams to work on the specification of CAS outcomes. The Burkina Faso country assistance strategy focused on well-specified objectives in support of the government's program. To assess its effectiveness, the CAS identified monitorable indicators and specific monitoring arrangements for each indicator. After defining strategic alignment to the PRSP, the team for the Zambia CAS zeroed in on intermediate outcomes, determining synergies across programmatic support, project lending, analytical work and policy dialogue.

3. **Uganda Poverty Eradication Action Plan (PEAP).** The Bank together with other donors supported Uganda to develop a results and policy framework that would integrate many different government and donor driven M&E initiatives that had proliferated over the last decade. The new integrated M&E framework includes: (a) a comprehensive results and policy matrix with clear outcomes, measurable indicators, and annual policy actions to achieve each defined outcome; (b) a monitoring plan which defines for each outcome indicator, baseline and targets, sources of data, frequency of data collection and reporting, and responsible institution; and (c) a review mechanism to assess progress towards outcomes, which is directly linked to the existing Government mechanisms, particularly the sectoral program reviews, the Public Expenditure Review (PER) and budget negotiations. A strong PEAP results and policy framework has led to donors harmonizing around the PEAP results matrix. In 2004, the WB with several other bilateral and multilateral donors developed a results-based Joint Assistance Strategy (UJAS) for Uganda that is aligned with the PEAP. Within the UJAS, donor's separate policy and results matrices have been replaced by the PEAP results and policy framework as a common framework for policy dialogue, technical assistance, and monitoring and evaluation. This process has reduced the transaction cost for donors and the government.

## Sector -Level

4. ***Exploiting cross-sectoral synergies.*** Achieving results in one sector often requires identifying and removing constraints in others. Sector groups have, therefore, been working to increase the set of operations that achieve cross-sectoral synergies to increase impact on the ground. In FY05 the water supply and sanitation Sector Board developed a toolkit jointly with the poverty reduction and economic management network to improve the integration of water supply and sanitation policy reforms and implementation arrangements into poverty reduction support credits. Then, in recognition of the fact that water supply and sanitation services are key to achieving improved health outcomes (for example, in reducing child mortality), in FY05 the health and infrastructure sectors also launched an important initiative to assess the burden of disease and develop tools for setting priorities. The approach paper *Strategy for Health, Nutrition, and Population*,<sup>24</sup> discussed by CODE in June 2006, proposed a diagnostic tool—the Binding Constraints on Outcome Improvement (to be piloted)—that would highlight the possible gains from enhanced coordination between sectors. More generally, the Bank’s Results Secretariat has worked with Networks in the development of over a dozen results frameworks for sector strategies. The Secretariat seeks to strengthen the results chains in these strategies in several ways: (a) ensuring that objectives are realistic; (b) identifying important synergies between the Bank’s interventions in the sector and in other sectors to achieve the objectives, and designing a strategy to exploit these synergies; and (c) ensuring that the results chain is based on solid evidence about what gets results.

5. ***Diagnostics to improve the results focus of projects and programs.*** The joint World Bank-IFC Doing Business project has produced objective measures of the cost of common business procedures in 145 countries, and the online Investment Climate Survey (ICA) database provides a rich set of data based on responses from over 27,000 firms. Both the Doing Business Reports and ICAs have helped IDA to develop clear, results-oriented strategies for supporting countries in undertaking reform and create powerful domestic constituencies for removing obstacles to private sector-led growth. IDA projects are increasingly drawing upon the Doing Business diagnostic work. For example, the Kenya ICS results helped jump-started dialogue with the new government and was used in the FY04 CAS as a means to provide a greater understanding of the factors that determine investment and business activity in Kenya. The survey results and subsequent ICA fed into a FY05 Micro, Small, and Medium Enterprise Competitiveness Project and a World Bank Institute’s Investment Climate Capacity Building pilot initiative.

6. ***Developing Sector/Thematic Strategies.*** The Bank has supported the development of national rural development strategies in 47 countries. Through its support to the Cities Alliance partnership, the Bank has contributed to the development of City Development Strategies in 121 cities in 34 countries and, in coordination with other agencies, has worked on developing an infrastructure database and M&E system in 16 Sub-Saharan African countries.

7. ***Developing sector capacity in countries to manage for results.*** In health, the Bank is working with key partners to assist countries in tracking overall health outcomes; The Health Metrics Network, launched in May 2005, is part of this effort. In water supply and sanitation,

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<sup>24</sup> World Bank *Strategy for Health, Nutrition and Population Results* (CODE2006-0055), June 12, 2006.

the Infrastructure Network is helping clients build and strengthen statistical capacity in both sector and central agencies; and it has worked with the DFID-funded International Benchmarking Network, utility associations, and governments to expand the performance indicators database for water supply and sanitation utilities to 1,000 utilities in more than 50 countries, and to improve the use of these data. In education, over half the FY05 education projects included support for measuring learning achievement. The **Cambodia** Education Sector Support Project will help establish a National Assessment System (NAS). Under the **Tonga** Education Support Project, each school will prepare a three-year rolling plan, which will include measures to meet “minimum service standards” on student achievement in agreed subjects. The **Nicaragua** Education Project will provide consulting services and equipment to assist in the establishment and maintenance of a national evaluation strategy “that would include the periodic testing of students and teachers, through a series of evaluation techniques, not restricted to nationalized testing. A crucial part of this sub-component will be the feedback from the test results back to the classroom and the school community.” The **Malawi** Education Sector Support Project 1 supports a Primary Achievement Sample Survey, which will “(a) establish the baseline against which student achievement can be measured and (b) identify the factors in the school and home environment, which significantly affect learning achievement and are significantly affected by policy interventions.”

## ANNEX F. OUTPUTS IN IDA OPERATIONS

### WATER OUTPUTS FROM FY04-05-06 ICRs

**Table F1. ICR Availability by FY**

<i>FY</i>	<i>Number of exiting operations</i>	<i>Number of available and reviewed ICRs</i>	<i>% available and reviewed ICRs</i>
FY04	31	30	97
FY05	29	24	83
FY06	25	9	36
<b>Total</b>	<b>85</b>	<b>63</b>	<b>74</b>

**Table F2. Output indicators and data by category**

<i>Category</i>	<i>Output Indicators</i>	<i>Output data</i>
Physical outputs	<ul style="list-style-type: none"> <li>• Construct and/or rehabilitate water supply, sanitation, solid waste, and/or sewerage facility</li> <li>• Increase water production and/or consumption</li> <li>• Water measuring and/or saving facility</li> </ul>	<ul style="list-style-type: none"> <li>• 22 operations contributed to construct and/or rehabilitate water supply facility, specifically 133,000 new connections, 7,622 water wells, 1,800 km of pipes (different types and sizes), 890 boreholes, 400 standpipes and 320 gravity pipes. In addition, 130 water points serving 65,000 people were constructed; 14 small piped water systems designed and 7 small piped water system rehabilitated covering 7 communities affecting 10,800 people</li> <li>• 8 operations contributed to construct 47,500 latrines, 55 toilet blocks, 64 public toilets and 9 toilets were rehabilitated. In addition, 6,900 household latrines, and 57,160 on-site sanitation facilities and 2 sanitary landfills were built. For schools, more that 550 school latrines were constructed and more than 180 schools were provided with latrines.</li> <li>• 3 operations contributed to construct and/or rehabilitate solid waste facility. Specifically 19,761 waste disposal pits were constructed, 649 waste collecting bins were provided, and 490 skip pads were provided.</li> <li>• 7 operations contributed to construct and/or rehabilitate sewerage facility, specifically more than 150 km with over 13,000 new sewer connections constructed or rehabilitated, 18 public sewers and 14,167 communal connections were installed, and 5 sewerage treatment ponds were constructed.</li> <li>• 8 operations contributed to increase water production and/or consumption.</li> <li>• 4 operations contributed to construct water measuring and/or saving facilities such as 146 new hydrometric structures, 190 rainfalls gauges and 6 agro-meteorology stations, 916 river gauge systems, 7,912 observation wells and 436 hydro-meteorological stations were built.</li> <li>• 4 operations contributed to construct and/or rehabilitate flood protection facility. 43 flooding points were worked on, 8.73 km of main channel were rehabilitated, 27.4km embankment was constructed and rehabilitated, 149 key dams constructed, 1,956 check dams, and 1,140 warping dams were built and upgraded. Also, one dam was rehabilitated by raising the dam by 1.5 meters along the 61 meter spillway crest and end walls.</li> <li>• 10 operations contributed to construct and/or rehabilitate more than 5,100 km of drainage.</li> </ul>
Institutional outputs	<ul style="list-style-type: none"> <li>• Improve institution's capacity and/or establish an organization</li> </ul>	<ul style="list-style-type: none"> <li>• 9 operations contributed to improve the capacity of institutions in the sector as measured through indicators as improve long term financial position, reduced arrears, improved institution's response time, decrease of water consumption and increase of bill collection ratio</li> <li>• 4 operations contributed to establish new organizations in the sector: 188 infrastructure management committees were created, 1,312 water and sanitation committees were put in place, 291 community centers were built and 33 Farmer Water User Communities established.</li> </ul>
Access outputs	<ul style="list-style-type: none"> <li>• Water supply service coverage</li> <li>• Other service coverage (no water supply)</li> </ul>	<ul style="list-style-type: none"> <li>• 21 operations contributed to increase water supply coverage. An approximate number of 4,560,000 additional people gained access to water. In addition safe water access increased in almost 2,000 villages and 19,400 families</li> <li>• 6 operations contributed to affect approximately 60,000 beneficiaries for household latrines, 100,000 for school latrines, and 30,000 for public latrines. Also, 720,000 people gained protection from flood, 200,000 people in urban areas were connected to sewerage and major drainage and sewerage networks were created for 5,000 families.</li> </ul>
Capacity outputs	<ul style="list-style-type: none"> <li>• Provide training</li> </ul>	<ul style="list-style-type: none"> <li>• 7 operations provided training for more than 32,000 people. In addition, 4 community watershed management committees, 498 latrine artisans, and 19 hand-dug well contractors are trained.</li> </ul>

## EDUCATION OUTPUTS FROM FY04-05-06 ICRs

**Table F3. ICR Availability by FY**

<i>FY</i>	<i>Number of exiting operations</i>	<i>Number of available and reviewed ICRs</i>	<i>% available and reviewed ICRs</i>
FY04	42	41	98
FY05	48	37	77
FY06	57	15	26
<b>Total</b>	<b>147</b>	<b>93</b>	<b>63</b>

**Table F4: Output indicators and data by category:**

Category	Output Indicators	Output data
Physical outputs	<ul style="list-style-type: none"> <li>• Supply of teaching material, stationary, and provide textbooks</li> <li>• Construct and rehabilitate classroom / education facility</li> <li>• School feeding</li> </ul>	<ul style="list-style-type: none"> <li>• 29 operations reported to have provided education equipments and materials. 19 operations report to have improved pupil-textbook ratio substantially providing more than 5.7 million textbooks in addition to 22,200 metric tons of textbooks and several operations that did not provide specific figures. 7 operations refer to the supply of more than 51,000 teaching manuals to more than 3,500 teachers in 1,300 schools.</li> <li>• 21 operations reported to have constructed and rehabilitated education facilities. 42,355 classrooms have been built and 10,800 rehabilitated. 8,654 latrines for more than 1,302 schools have been constructed and 420 teacher's houses built.</li> <li>• 3 operations referred to school feeding program that have benefited more than 210,000 students.</li> </ul>
Institutional outputs	<ul style="list-style-type: none"> <li>• Established organizations</li> <li>• Institution and system change</li> <li>• Labor market oriented education</li> <li>• Education program increase</li> <li>• Monitor/check education system</li> </ul>	<ul style="list-style-type: none"> <li>• 10 operations reported to have established educational organizations. 80 parent associations, 446 parent-teacher committee, and 100 teacher centers were created.</li> <li>• 12 operations reported to have changed educational institution and system. Video conferencing and e-learning system were established, textbook recycle system and school inspection program were initiated.</li> <li>• 3 operations reported to have supported client countries to conduct labor market oriented education. More than 1,200 students have participated in vocational class.</li> <li>• 4 operations reported to have increased educational programs. Intake of conventional school system increased by more than 25,000.</li> <li>• 2 operations reported to have monitored and checked educational systems. Quality assessments have been conducted in more than 20 schools.</li> </ul>
Access outputs	<ul style="list-style-type: none"> <li>• Distance learning</li> <li>• Enrollment rate increase</li> <li>• Education for the handicapped</li> <li>• Beneficiary</li> <li>• Scholarship</li> </ul>	<ul style="list-style-type: none"> <li>• 2 operations reported to improved distance learning system. Number of participants in distance learning program increased by more than 1,500.</li> <li>• 39 operations reported to have increased enrollment rate. More than 330,000 students were reported to have newly enrolled (although many operations report on increase enrollments, few cite the absolute numbers).</li> <li>• 3 operations reported to have improved education for the handicapped. Training for the handicapped increased by more than 20% in reported countries.</li> <li>• 5 operations reported on the number of beneficiaries of the series of activities. More than 600,000 beneficiaries were reported.</li> <li>• 2 operations reported to have provided scholarships. 24,799 disadvantaged children as well as 3,415 girls were benefited from the scholarships.</li> </ul>
Capacity outputs	<ul style="list-style-type: none"> <li>• Provided training</li> <li>• Recruit more teachers and staff</li> <li>• Improve teacher quality (no training)</li> </ul>	<ul style="list-style-type: none"> <li>• 34 operations reported to have provided training with education professionals. 297,928 teachers and 7,977 other professionals were trained.</li> <li>• 15 operations reported to have recruited teachers and staffs. More than 45,000 teachers and 193 literacy advisors were recruited which contributed to the increase of teacher-pupil ratio.</li> <li>• 7 operations reported to have improved teacher quality by increasing the number of teachers qualifying each project's standard.</li> </ul>

## TRANSPORT OUTPUTS FROM FY04-05-06 ICRs

**Table F5. ICR Availability by FY**

<i>FY</i>	<i>Number of exiting operations</i>	<i>Number of available and reviewed ICRs</i>	<i>% available and reviewed ICRs</i>
FY04	32	29	91
FY05	33	30	91
FY06	21	6	29
<b>Total</b>	<b>86</b>	<b>65</b>	<b>76</b>

**Table F6: Output indicators and data by category**

<i>Category</i>	<i>Output Indicators</i>	<i>Output data</i>
Physical outputs	<ul style="list-style-type: none"> <li>• Road construction / rehabilitation and/o routine maintenance (including feeder roads or canal construction)</li> <li>• Traffic facility (non-road) construction or rehabilitation</li> <li>• Number of vehicles acquired</li> </ul>	<ul style="list-style-type: none"> <li>• 54 operations have contributed to construct more than 6,250 km, rehabilitate more than 10,700 km, and maintain more than 46,000 km of rural and urban roads and/or streets. 4,600 km of feeder roads and canals were constructed. Also, 706 bridges constructed, and 161 rehabilitated. 2,613 culverts were built and 466 rehabilitated.</li> <li>• 8 operations contributed to traffic facility (non-road) construction or rehabilitation. More than 200 km of tracks and trails were constructed and more than 700 km rehabilitated. 125 channels were built and an airport upgraded.</li> <li>• 2 operations supported acquisition of transport vehicles. Specifically, 8 remanufactured engines were ordered and 4 of them were received in order to strengthen locomotive fleet; 298 good second hand passenger coaches have been procured. The other operation contributed to increase the number of vehicles by 29,364, number of vehicles registered by 8,212, and the number of drivers' licenses issued by 6,177.</li> </ul>
Institutional outputs	<ul style="list-style-type: none"> <li>• Institutional change / improvement</li> </ul>	<ul style="list-style-type: none"> <li>• 6 operations supported institutional improvement in Department of Transportation and agencies. Examples include more than 180 infrastructure management committees were created, 4 local authorities were provided with computers, more than 140,000 cars were re-registered thanks to computerization, a road data bank was set up, revised the regulation on maximum permissible gross weight of trucks, and equipments such as 13 pick-ups and 19 motorcycles.</li> </ul>
Access outputs	<ul style="list-style-type: none"> <li>• Beneficiary / accessibility</li> <li>• Hand loading reduction</li> </ul>	<ul style="list-style-type: none"> <li>• 7 operations contributed to increase access for an approximate number of more than 2.6 million people.</li> </ul>
Capacity outputs	<ul style="list-style-type: none"> <li>• Provide training</li> <li>• Job creation</li> </ul>	<ul style="list-style-type: none"> <li>• 8 operations supported training of people. More than 700 Government staff and more than 300 contractors were trained. Also, community leaders were trained regarding the maintenance of tracks.</li> <li>• 6 operations report on the positive effect on employment in different forms. More than 370,000 jobs were created, 135,000 men per month received contracts for road construction, 500,000 man-days of employment were created, and additionally 560 permanent jobs were created.</li> </ul>

## HEALTH OUTPUTS FROM FY04-05-06 ICRS

**Table F7. ICR Availability by FY**

<i>FY</i>	<i>Number of exiting operations</i>	<i>Number of available and reviewed ICRs</i>	<i>% available and reviewed ICRs</i>
FY04	38	38	100
FY05	44	34	77
FY06	45	10	22
<b>Total</b>	<b>127</b>	<b>82</b>	<b>65</b>

**Table F8. Output indicators and data by category**

Category	Output Indicators	Output data
Physical outputs	<ul style="list-style-type: none"> <li>• Construction and/or rehabilitation of health facilities</li> <li>• Provide equipment to health facility, family or village</li> </ul>	<ul style="list-style-type: none"> <li>• 7 operations reported to have constructed health facilities. Two operations report to have constructed 97 health facilities, rehabilitate 17 health facilities, built one state level and 16 district level public health laboratories, 4 blood bank buildings, 12 hospital training centers, 366 deep burial pits.</li> <li>• 22 operations refer to an increase provision of different health equipment that include bed nets, drugs, computers, refrigerators, x-rays, medical kits, contraceptives, furniture, and culturally sensitive equipment. More than 13,000 refrigerators, 10 million insecticide-treated bed nets purchased and medicated mosquito net distributed through public/voluntary social marketing approaches increased from 10,000 to 90,000.</li> </ul>
Institutional outputs	<ul style="list-style-type: none"> <li>• Devolution of health posts</li> </ul>	<ul style="list-style-type: none"> <li>• 2 operations reported to have transferred to the local bodies 1156 sub-health posts out of 1424, 19 health posts out of 265, and 9 primary health care centers out of 79 in 25 districts. The other reported that more 12,100 local health workers were deployed.</li> </ul>
Access outputs	<ul style="list-style-type: none"> <li>• Accessibility to health facility</li> </ul>	<ul style="list-style-type: none"> <li>• 20 operations reported to have improved the access to health facilities. Some use quantitative measures such as percentage of population in the area with access, number of visits, curative consultations, outpatient visits per capita, number of major surgeries and consultation rate.</li> </ul>
Capacity outputs	<ul style="list-style-type: none"> <li>• Increase/improve health facility staff</li> <li>• Improve personal hygiene/health practices or provide treatment</li> <li>• Provide training</li> <li>• Detect/check/monitor people regarding health issue</li> </ul>	<ul style="list-style-type: none"> <li>• 12 operations reported to have increase recruitment of health professionals of different types (lady workers, nurses, health brigades, health assistants, multi-disciplinary staff). From the ones that provide quantitative numbers the figures add to more than 4,000 recruitments. One operation reported to have increased the number of cadres from 200,000 in 1997 to 500,000 in 2006.</li> <li>• 16 operations reported to have improved personal hygiene/health practices or provide treatment such as drop smoking, hand washing, de-worming, breastfeeding, awareness of how to prevent AIDS, use of iodized salt increased or treatment of bed nets. More than 67,000 children were de-wormed.</li> <li>• 20 operations reported to have provided training of health professionals. More than 78,000 health professionals were trained.</li> <li>• 7 operations managed to detect, check or monitor people regarding a specific health issue that could be blood pressure, children growth and weight, regularity of children check ups, or general health surveys. 1.9 million cases of TB were suspected and 650,000 malaria cases were reported.</li> </ul>

