



World Bank Global  
HIV/AIDS Program

# HIV/AIDS M&E - *Getting Results*

These reports describe activities, challenges and lessons learned during the Global AIDS Monitoring and Evaluation Team (GAMET)'s work with countries and other partners.

## Know Your Response: The Power of Evaluative Knowledge in Results-focused Management

*The Global AIDS Monitoring and Evaluation Team (GAMET)*

This note explains the uses and importance of evaluation. Evaluation is essential for learning what works and what doesn't, and why. It assesses whether changes expected from program interventions are actually happening. Evaluation can help identify and resolve problems and thus improve management. The Global AIDS Monitoring and Evaluation Team (GAMET) works with countries to enhance capacity for evaluation and use of evaluative evidence to improve HIV programs and achieve stronger results and greater impact.

### Context

Many countries now realize the value of having a well-functioning monitoring and evaluation system to collect, analyze, and report on desired results related to their response to HIV/AIDS. They are increasingly aware that M&E systems can help assess progress toward meeting national development goals, including the MDGs and HIV Universal Access targets.

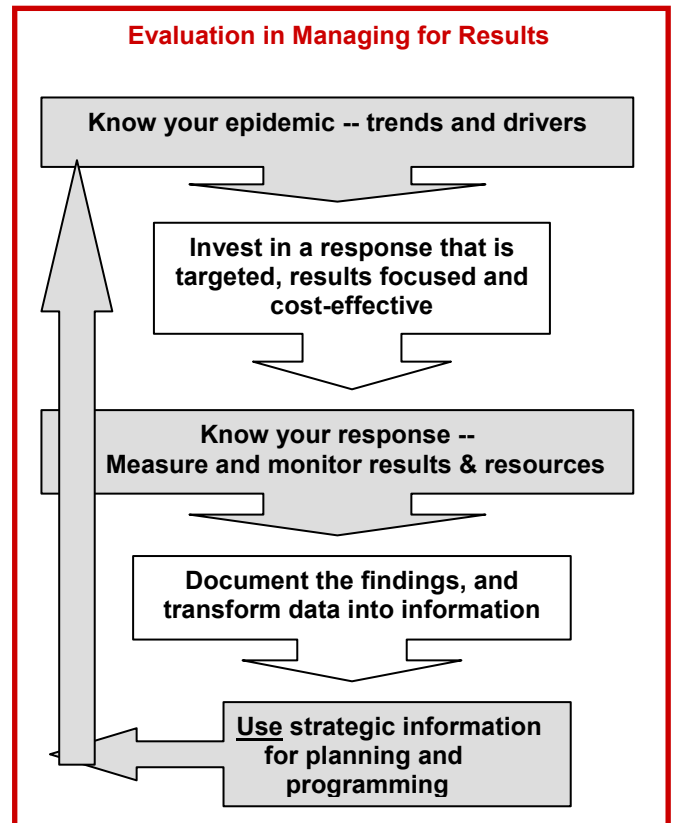
M&E information and data are "public goods" – once collected and in the public domain, they can be used by some without detracting from their use by others (they are not "used up") and they provide benefits that people cannot be excluded from sharing. It is a defining feature of public goods that governments or other non-market providers are needed to ensure that optimal amounts are supplied. Thus, many development partners provide support for improving national M&E.

Earlier efforts to improve M&E focused on enhancing the monitoring of key performance indicators and on the data systems necessary for this. Monitoring data provide information on "How well are we implementing policies, programs and services?" But to answer the question "Are we implementing the *right* policies, services and programs?" countries need good evaluation information. Thus they need to scale up their M&E efforts – particularly evaluation efforts. GAMET supports these country-led efforts by helping expand and improve evaluation capacity.

GAMET's goal is twofold: (1) to provide policy and technical advice to enhance evaluation capacity at

country level, and (2) to help create evaluative knowledge on the epidemic and the effects of national responses. Specifically, GAMET works with countries to:

- build on and maximize the use of existing data
- support well-crafted and rigorous evaluation studies that are mindful of the need to provide decision makers with quality but also timely information
- support studies of new or different approaches to services delivery to provide managers, administrators and policymakers with the information they need to improve or scale up existing delivery activities and to plan future ones
- support the transformation of data from different and varied sources into strategic information that is in a form that can be used readily, and
- help embed the use of information in public management and planning to assist countries better manage for results.



## Managing for Results Approach

GAMET is committed to supporting countries manage their programs to maximize the results they achieve. **Managing for Results refers to a comprehensive and integrated management system that focuses on achieving national objectives for the population while assuring accountability for public funds.** Evaluative information is important to allow decision-makers to adjust the national response and refine national policies. The key elements of managing to achieve HIV/AIDS results are identified in the figure on page 1.



Photograph taken in the Republic of Yemen by Curt Carnemark

## Why Emphasize Evaluation NOW?

National and international resources to confront HIV/AIDS have grown rapidly in recent years, reaching US\$60 billion pledged at the G8 meeting in June, 2007. This commitment has been matched by recognition of the importance of revitalized and improved HIV/AIDS evaluation to ensure that the increased resources are used effectively. Evaluation is recognized by UNAIDS and the World Bank as one of the weakest area in HIV/AIDS evidence building.

**Know your response.** Much of the M&E effort to date has been to strengthen monitoring and data collection, through improvements in surveillance and monitoring frameworks that aim to track the UNGASS indicators and indicators related to individual donor programs. Scant funding and little focus has been given to evaluation – to support a learning agenda on what is working and what is not working and why, and to assess whether changes expected from program and policy interventions, are actually happening. It is the evaluation component of M&E that can assess whether programs and interventions are achieving their intended aims, and provide a basis for decision making that is truly evidence

based. It is now recognized that systematic evaluations of key programs and interventions are needed to learn what works and what does not work and why, and test innovations to enable sensible and effective HIV programming scaling-up.

**Know your epidemic.** There is now greater insight into the heterogeneity of HIV, globally and within regions, and of the need to ensure that investments in HIV prevention are grounded in a rigorous understanding of each country's distinct epidemic, and in clear adherence to relevant, proven approaches. Analytic work is required to understand each country's epidemic, identify relevant and effective approaches and ensure they are implemented effectively, on a sufficient scale to reduce HIV transmission. Better understanding of how HIV transmission occurs contributes to a more focused and effective response.

GAMET has intensified its technical support to enable countries to synthesize and analyze their data so they can better understand their epidemic trends and drivers, and the effects of their national response. These syntheses are not exclusively epidemiological or programmatic; they analyze epidemiological and programmatic data together, to draw conclusions about the state of the epidemic and the adequacy of the programmatic response. When this analytical process involves a consultative process – as it has in Honduras and Madagascar, for example, the analytical exercise has the added value of catalyzing and benefiting from the experiences of key national and international actors including partners and other stakeholders.

**Generate strategic information.** “There are no data” is a phrase often heard in meetings. Yet, in many countries, data on HIV and AIDS do exist from surveillance, surveys and facilities. However, the data are often not interrelated (“knitted together”) to explain the HIV/AIDS trends in the country or provide an authoritative source of information on the drivers of the epidemic or the most-at-risk populations. If data are not analyzed and synthesized, then they are not transformed into *information* that decision makers can easily use and communicate.

Many countries are now collecting epidemiological and programmatic data, but lack a key feature of robust evaluations-- being able to collect data to respond to specific evaluative questions, analyze the findings, interpret them in the appropriate context and transform “mere data” into *strategic information* to improve policies and programs.

Although there are more data than it seems at first glance, there are also important knowledge gaps which make it difficult to demonstrate the effects that financial and technical support has on the HIV/AIDS epidemic.

The World Bank's reviews of its HIV/AIDS program support have suggested the need for these programs to become more evidence-based – with baselines, interventions that are evidence-based and results-oriented, and better monitoring and evaluation systems.<sup>1</sup> This requires investments in results-based planning, monitoring and evaluation.<sup>2</sup> These reviews have identified areas where the lack of evaluative evidence is especially critical. For instance, the reviews indicate the need for more evaluation in several areas listed below.

### **Multi-sectoriality of HIV/AIDS programs – public sector management and policy**

- The types of “multi-sectoral support” and their relative effectiveness and complementarities
- Effectiveness of public sector coordination
- Needs and requirements of the health sector and other sectors in scaling up HIV prevention, treatment and/or care
- Incentives for sector performance in achieving HIV/AIDS results

### **Organizational models of National AIDS Commissions (also state and provincial levels)**

- Types of governance structures that exist and their effectiveness at the national and sub-national levels.
- The extent to which decentralization has been effective in removing inefficient levels of bureaucracy, and enabling decision making that is faster and more appropriate for local circumstances.

### **Community and civil society response, and NGOs**

- Types and results of civil society engagement
- Effectiveness of civil society and NGOs engagement, as per their mission, in –for instance– (i) broad awareness raising and community mobilization, (ii) behavioral change, (iii) targeting vulnerable populations, and/or (iii) reaching specific populations with goods and services.
- Incentives to reward performance and deter under-performance, including considering results-based disbursements

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<sup>1</sup> World Bank, 2004. *Interim Review of the Multi-Country HIV/AIDS Program for Africa*, and, World Bank, 2005. *Committing to Results: Improving the Effectiveness of HIV/AIDS Assistance*, An OED Evaluation of the World Bank's Assistance for HIV/AIDS Control.

<sup>2</sup> The World Bank's Africa Region HIV/AIDS Agenda for Action 2007-2011, June 2007.

- Types of effective capacity building models
- Models for reaching target populations at the local level

### **Prevention, treatment and care interventions and services delivery**

- Prioritization and selectivity of prevention efforts based on evidence (do you know the epidemic? Are effective service delivery models known, and have they been tested?)
- Benefits, sustainability, affordability and equity implications of treatment and care options
- The extent to which HIV/AIDS interventions respond to the characteristics of the epidemic
- Quality of interventions, quality of community HIV/AIDS response, quality of services and outreach, especially as these are scaled up
- Barriers to service delivery and alternative approaches

### **Planning, monitoring, reporting and evaluation**

- Mechanisms for building local evidence that is used at different levels.
- The extent to which existing data help design and monitor the response
- The extent to which data are consistently used for program and policy adjustments and programmatic decisions.

When and how operations research is done may vary according to the program and country situation. A program that is starting may need to diagnose or identify problems; a program that has been running for some time may need to test new and innovative strategies; and a program that is coming to an end may need to examine the costs and effects of its interventions. A program that is starting may also wish to consider and plan for selected impact evaluation, which are likely to require randomization and counter-factual/s against which to compare the program.

Strategic information incorporates various kinds of evaluative knowledge to support decision-making in a “managing for results” system. Sometimes strategic information is based only on evaluations. At other times it may draw on evaluative information from several sources and composed of several kinds of knowledge – statistical, administrative and services data, research, surveillance, epidemiological analysis, impact evaluation, and others.



Women medical staff at Casablanca maternity hospital, Morocco. Photograph by Julia Etchart.

## Getting Started on Evaluation

GAMET's support of evaluative work is guided by the Managing for Results approach. When planning an evaluative exercise, getting the evaluation questions right is critical. Countries may wish to apply the managing for results approach, (depicted in the box on page 1) starting by learning about the epidemic, about the results of the response, and about interventions that work and why. For instance it is now widely accepted that the HIV epidemic is very diverse and what may be "critical to know" in one region or country may not be as relevant in another. The summary in the next paragraph describes how different the epidemic is across the globe.

**Know your epidemic.** This would involve checking national documents and national statistics as well as major regional or global reports. For instance,

- **Globally**, almost half of new HIV infections occur among youth ages 15-24. Young women in the 15-25 year old age group are three times more likely to be infected than young men in the same age group.
- Displaced people and migrants are potential vectors of transmission but equally vulnerable to infection by the communities with which they interact.
- In **Africa** the epidemic is very heterogeneous. The highly generalized epidemic in Southern Africa is driven largely by heterosexual transmission, with significant variations among and within countries, but generally higher prevalence than in the generalized epidemics in East Africa. In many countries in West Africa the epidemic is mixed, with very high rates in some specific sub-populations.
- In **Eastern and Central Asia** the epidemic is concentrated and driven by IDUs.

- In **South Asia** the epidemic is concentrated, with the highest prevalence being among sex workers in India, and among IDUs in other countries.
- In **Central America** the epidemic is concentrated in high-risk groups (mobile populations, sex workers and their clients, MSM, and certain ethnic groups). Transmission in the sub-region is driven by heterosexual sex except in Costa Rica (MSM) with variations within countries (for example, there is a generalized epidemic among the population in the Atlantic coastal area of Honduras). Mechanisms of HIV transmission need to be better known.

**Learn about the response.** Working in the different regions, GAMET has developed expertise and experience in areas which many countries want to know more about. For instance:

- Using data to make informed decisions and to improve programs, policies and systems
- Cost-benefits and cost-effectiveness of interventions
- Intervention types that work or do not work and why, which is particularly important in considering scaling up services and to "know your response"
- The extent to which existing data help design and monitor the response
- Targeting (at-risk and vulnerable groups) increases the quality and effectiveness of responses when countries "know their epidemic"
- The effectiveness of various types of civil society engagement and NGOs in, for instance, (i) broad awareness raising and community mobilization, (ii) behavioral change, (iii) targeting at-risk and vulnerable populations, and (iv) actually reaching specific populations with good and services
- Determining the extent to which HIV/AIDS responses match the characteristics of the epidemic in a specific country/area. In some cases, modeling may be an appropriate way to forecast epidemic trends.

The process of learning about the response helps identify the key questions that evaluation needs to answer. It is only after the fundamental questions to be studied are selected that attention should be turned to selecting the most appropriate method to answer the questions.

**Select relevant evaluation question(s).** Countries can choose from several recognized and rigorous types of evaluations based on whether the evaluation needs to answer questions related to:

- policy and strategy appropriateness, targeting or prioritization

- program or institutional performance
- the planning and implementation process
- the impact of interventions
- the costs and effectiveness of interventions
- testing new service delivery modes
- client satisfaction
- governance structures
- uses of information at different administrative levels
- validating good-best practices and innovation
- documenting a particular experience.

### Criteria for selecting the evaluation approach.

Answering all evaluative questions that may have been selected is not always feasible or cost-effective. In deciding whether a particular evaluation method and approach is feasible – or even whether the evaluation can be conducted at a particular time – countries may find it useful to apply criteria such as:

- Are the biological markers of the epidemic known?
- Are there reliable and available primary data?
- If new data need to be collected, can this be done in a rapid and affordable way?
- Is there capacity and know-how in the country to plan, manage and/or conduct the evaluation?
- Is there capacity for statistical and other analysis, synthesis and for drawing out the policy and programmatic implications of evaluation findings?
- Is there capacity for testing services delivery approaches and innovative actions?
- Is there strong support from national stakeholders and from partners?
- Is the evaluation responding to national policy bodies' request for accountability?

### Evaluation Areas that GAMET Supports

GAMET supports results-based evaluation that assesses planned, on-going or completed interventions to determine their relevance, efficiency, effectiveness, impact and sustainability. The intent is to generate evidence – and promote its use – for accountability, learning and management. More specifically, GAMET is providing support to generate evidence in six broad areas of evaluation and analytical work:

1. **Regional and national epidemiological and response syntheses**, to ensure that epidemics are rigorously characterized and properly understood, so that investments follow the characteristics of the epidemic. Examples include: a regional study that involves 17 countries in West Africa; and synthesis studies in Ethiopia, Honduras, Indonesia and Madagascar and in eight countries in

South Asia including India, Nepal, Pakistan, and Sri Lanka. These syntheses are broad, strategic, multi-sectoral, policy orientated pieces, which draw upon the World Bank's expertise.

**A Synthesis** identifies and pulls together data and findings from existing epidemiological, behavioral and other studies, operational and other type of research, and thematic, programmatic and other evaluations. It is a thorough and in-depth exercise that may use modeling to fill in data gaps or project epidemic trends.

**Rapid Reviews** can be conducted to summarize and highlight the characteristics of an epidemic and its drivers. It may be done in one country or include several countries, and would usually focus on one or more specific sub-populations.

2. **Programmatic and thematic evaluations** to build more evidence at the country level on what works and why. One example is an assessment of the community component of an HIV/AIDS multi-sectoral program. In some cases, a case study methodology is used to document particular interventions, actions or good practices such as results-based consultative strategic planning in Honduras. GAMET also supports World Bank project teams and clients (as in Zambia) in learning whether or not program interventions are addressing the appropriate issues, and whether interventions are achieving the expected results (to guide decisions on which interventions to fund).

**Thematic Evaluations** explore a particular theme in a project or program, or across several projects; for instance, performance of NGOs in reaching vulnerable populations in their catchment areas.

3. **Systems evaluations** to assess surveillance systems, management, and information systems in order to identify bottlenecks, determine data availability and quality, and assess the overall capacity of the systems to support managing for results and implementation of the national response.
4. **Service delivery evaluation (operations research)** to test innovations and different options for providing services in order to improve interventions. These evaluations may include (i) exploratory and diagnostic studies, to identify barriers to delivering program interventions, when the problem/problems are not known; (ii) field intervention evaluations, when the problem is known and solutions need to be tested in a controlled manner, and then to evaluate whether the problems

have been solved; and (iii) in-depth analysis of the causes and effects, and the costs, of an intervention or program.

These evaluations are an essential part of program implementation because they provide a systematic way to identify good practices that can be incorporated into improving HIV/AIDS services delivery, whether in education, prevention, treatment, care or mitigation services or new approaches to data generation or program management.

**Service Delivery Evaluation or Operations Research** seeks practical solutions to problem situations, and viable alternatives when problems are identified during other evaluation exercises.

5. **Cost-effectiveness evaluations**, to identify promising models and delivery options for priority interventions, evaluate their effectiveness and cost-effectiveness and present governments with evidence to promote selectivity, and information to guide intervention implementation choices (recognizing that other criteria in addition to cost-effectiveness may also be considered when making choices).

**Cost effectiveness** refers to the benefits, relative to the money spent. It compares the expenditures (costs) and outcomes (effects) of two or more courses of action, looking for options that provide the best results for the money spent, or the options that achieve the results desired at the lowest cost.

**Effectiveness** refers to the ability of interventions to produce a result. An effective intervention accomplishes a desired result, especially as viewed after the fact.

6. **Value-for-money evaluations**. Expenditure tracking and resource analysis are used to track the flow of funds and AIDS spending, understand what outcomes they buy, and make practical recommendations for improving funds utilization and effectiveness. For instance, UNAIDS and GHAP are collaborating in Honduras in applying the UNAIDS NASA spending analysis method which is leading to a better understanding of where funds go, what they buy and where they come from.

**Value-for-money** looks at the services, results or outcomes achieved with the funds spent. It involves knowing what the costs are, and comparing the costs with the results or benefits obtained.

**Resources analysis** looks at actual expenditures, and at projected costs, to help estimate the level of financial resources needed for planned activities.

In addition, and to help build strategic evidence for policy and programming, there is need to improve the **quality of data** in many contexts, to ensure the ensuing information is sound enough to guide policy and strategy choices. In such cases, GAMET will co-fund urgently needed evidence-building products, to ensure there is sufficient strategic information for evidence-informed planning and programming.

**Evaluation Plans.** To better embed evaluation into public sector management, GAMET advises countries to develop evaluation plans as part of their national HIV/AIDS strategy planning or M&E Frameworks. The evaluation plan helps make sure that evaluations are costed and budgeted for, making them more likely to be implemented. Often countries find it useful to compile a table of evaluation, research, program reviews, studies, and other reporting activities. This promotes continuity and coherence of evaluative information for decision-making and creates knowledge for learning, accountability and management.



*Photograph taken in India by Curt Carnemark.*

### **Partnerships**

GAMET and partners provide support to national AIDS authorities in all regions. Analytical and evaluative work is largely driven by country needs and undertaken in partnership with major national actors and international partners, including bilateral agencies, UNAIDS in all analytic areas, WHO, PAHO and CDC in surveillance, DEC in economic work, and regional institutions, such as

SISCA in Central America, SADC in Southern Africa and the ADB in Asia. As appropriate, GAMET may consider establishing a partnership reference group to facilitate coordination and implementation of the work.

### Acronyms

ADB	Asian Development Bank
CDC	Centers for Disease Control (of the USA)
DEC	Development Economics group, World Bank
GAMET	Global AIDS Monitoring and Evaluation Team
SADC	Southern African Development Community
SISCA	Social Integration Secretariat of Central America
PAHO	Pan-American Health Organization
UNAIDS	Joint United Nations Programme on AIDS
WHO	World Health Organization



Photograph taken at Hanoi University, Vietnam, by Simone McCourtie.

## Lessons and Opportunities

- ✚ **Improving existing structures, systems and public sector management** towards creation of evaluative knowledge is critical. Partnerships among key national agencies and civil society actors and between these and the national AIDS authority around this issue is gaining in importance as the national HIV/AIDS response in many countries is scaling up and becoming more decentralized.
- ✚ **Funding alone is not enough**; there needs to be an effort to **strengthen the “know-how” of national staff and evaluators** through formal training, coaching, and knowledge and technology transfer. Evaluation capacity includes being able to design concept papers for evaluations and manage their evolution into actual evaluation designs that are appropriate and can be implemented effectively. Harmonized support from partners’ in this area is critical.
- ✚ **National champions and engaged international stakeholders are needed** to embed evaluation and the use of evaluative knowledge in the way programs are managed, so they can achieve strong results. National leadership *and* technical capacity are both central to strengthening the “E” in M&E.
- ✚ Advocacy about the critical importance of **good quality data and sound analysis that transform data into strategic information** continues to be a pivotal role for GAMET’s support of evaluation and analytical work. This includes fostering the creation of an enabling environment where HIV/AIDS information is valued at all levels as an indispensable tool for local and national policymakers to track progress towards national goals in responding to the HIV/AIDS epidemic; that is, to **manage for results**.

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