



## APPENDIX 1

# Outline of the Monitoring and Evaluation Framework

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## A1.1 Support to Countries

| RESULTS CHAIN  | EXPECTED RESULTS   |
|----------------|--|
| <b>Impact</b>  | Reduction of all-cause child (under five) mortality (MDG 4)  |
|                | Improvement of maternal health (MDG 5)   |
|                | Reduction of malaria-specific morbidity and mortality (MDG 6)  |
|                | Reduction of productivity losses attributable to malaria   |
|                | Reduction of illness and absenteeism in school-age children and mitigation of other impediments to learning caused by malaria (MDG 2)  |
| <b>Outcome</b> | Improved coverage, access, and utilization of technically sound and cost-effective program interventions for (i) prevention and (ii) treatment at community and facility levels, as appropriate  |
|                | Data-driven and evidence-based strategic management and decision making  |
| <b>Output</b>  | Good disease surveillance to track trends and ability to detect and respond promptly to epidemics  |
|                | Operational research (epidemiology and economics of malaria) to provide knowledge on (i) the cost-effectiveness of interventions in the country and (ii) resource flows, including malaria modules within national health accounts, household expenditures, public and private sector expenditures |
|                | Viable M&E system (with baseline data, indicators, targets, staffing, capacity at all levels of program activity) that enables (i) data-driven/evidence-based decision making; (ii) the delineation and monitoring of accountabilities; and (iii) information of the public at large               |
|                | M&E system to be in line with technically sound consensus of the M&E reference Group of the RBM Partnership, including (i) vector control, (ii) prompt access to effective treatment for vulnerable populations, and (iii) prevention and control of malaria in pregnant women.                    |

## Rolling Back Malaria

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Strong leadership and commitment at all levels of government and among relevant sectors for high priority, intensified efforts to control malaria:

- PRSPs and CASs have well-justified, prioritized, and sound strategies for fighting malaria with explicit goals and targets that fit country goals and strategies
  - Full integration of malaria control into national planning/budgeting frameworks (MTEFs and development plans) (and used as an instrument for donor coordination and collaboration)
  - Appropriate linkages with other sectors
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Technically sound, well-targeted, and well-implemented malaria program thanks to:

- Technical knowledge and support
  - National capacity and trained personnel
  - Adequate and flexible/decentralized financing to accommodate needs of front-line implementers
  - Partnerships with other sectors and civil society; private sector in line with comparative advantages (underpinned by analytic work on capacity and comparative advantages)
  - Adequate infrastructure
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### Inputs

*\*see also matrix on Bank capacity building*

Lending and Grant Assistance (increase in funding for malaria programs)

- *Health sector and PRSC lending*
    - Board approval of the Booster Program
      - Country-specific programs effective in at least 10 eligible countries by fiscal 2006–7
      - 20 eligible countries (cumulative total) by fiscal 2008
    - Mobilization of financing under other health lending instruments (PRSCs and SWAps) and reflected on MTEF
      - at least 5 countries by fiscal 2006–7
      - at least 10 countries (cumulative) by fiscal 2008
  - *Other development sector lending*
    - Malaria components in other, selected priority development sectors (number retrofitted, number incorporated into new projects)
      - Education
      - Agriculture
      - Infrastructure
      - Water
      - Environment
      - Other
    - Malaria addressed in CDD and other cross-cutting lending (e.g., public sector service delivery) (number retrofitted, number incorporated into new projects)
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Nonlending assistance and analytic and advisory services

- Technical assistance/joint analytic work to:
  - Establish/complete baseline for malaria program, establish targets, and set up M&E system and plan
  - Elevate and justify its importance in PRSPs (burden of disease and its implications for social and economic development and poverty reduction prospects)
  - Assessment of capacity and institutional/organizational frameworks for greater efficiencies and productive partnerships (government, central and decentralized; civil society; private sector [formal and informal])

## A1.2 Support to Regional/Global Partnerships and Collective Efforts

| RESULTS CHAIN            | EXPECTED RESULTS   |
|--------------------------|--|
| <b>Ultimate impact</b>   | Reduction of all-cause child (under five) mortality (MDG 4)  |
|                          | Improvement of maternal health (MDG 5)   |
|                          | Reduction of malaria-specific morbidity and mortality (MDG 6)  |
|                          | Reduction of productivity losses attributable to malaria   |
|                          | Reduction of illness and absenteeism in school-age children and mitigation of other impediments to learning caused by malaria (MDG 2)  |
| <b>Short-term impact</b> | Minimization of wasteful overlaps and gaps among partners by proactive focus on Bank's comparative advantage, including: <ul style="list-style-type: none"> <li>• Evaluative and operational research</li> <li>• Medium- to long-term financing horizon</li> <li>• Cross-sectoral work</li> <li>• Budgeting/planning frameworks and fit with overall macroeconomic growth agenda</li> <li>• Selective support for product development and applied research</li> <li>• Convening power</li> </ul> |
|                          | Improved coherence and evidence base of the Bank's and other partners' strategies and packages of assistance to countries through the development and dissemination of the Bank's knowledge and experience (macroeconomics, system-wide approach, cross-sectoral perspective, evaluations, operational research, and so forth)   |
| <b>Outcome</b>           | Improved (and well-earned) appreciation of the Bank's contribution to global malaria control efforts   |

## Rolling Back Malaria

|                |  |
|----------------|--|
|                | Improved knowledge to inform evidence-based decision making and support (thanks to research on epidemiology, economics, development effectiveness of malaria). Improved knowledge base/continual update of approaches/strategies based on emerging best practices/technologies   |
|                | Shared information systems that enable coordination among agencies   |
|                | In coordination with other partners, subsidized antimalarial drugs available to any eligible purchaser from malaria-endemic countries in order to ensure universal access and to crowd out monotherapy   |
| <b>Outputs</b> | High-impact operational research on epidemiology and economics of malaria, service delivery, and program management  |
|                | Evaluative research on development effectiveness of malaria control  |
| <b>Inputs</b>  | Implementation of strategic communications strategy to shape the global discussion around issues related to the Bank's comparative advantage among RBM partners. This will include dissemination of the Bank's strategy and program of action, progress toward meeting targets, implementation bottlenecks, research findings and implications, and so forth |
|                | (See also the matrix on strengthened Bank capacity.)   |

### A1.3 Strengthening of Bank's Capacity to Contribute Effectively to Malaria Control

(Achievement of this objective is an input into results chains for Support to Countries and Support to Global Efforts.)

| RESULTS CHAIN  | EXPECTED RESULTS  |
|----------------|---|
| <b>Impact</b>  | Improved quality and development effectiveness of the Bank's work on malaria  |
|                | Expanded scope, coverage, and intensity of Bank assistance on malaria   |
|                | Greater flexibility and client orientation  |
| <b>Outcome</b> | Increase in the responsiveness of PRSPs and CASs to malaria control in malaria-endemic countries, measured by the consideration of the relationship between malaria and poverty, country strategies for malaria control, medium-term goals, and short-term actions  |
|                | Strong Bank leadership through the establishment of a high-level Steering Committee and commitment of World Bank country directors responsible for malaria-endemic countries in the Bank, as evidenced by: <ul style="list-style-type: none"> <li>• High priority accorded to malaria work</li> <li>• Intensified advocacy for malaria control in the context of PRSPs, country dialogue, and sector dialogues</li> </ul> |

|               |  |
|---------------|--|
| <b>Output</b> | Bank strategy and program of action on malaria: available and being implemented  |
|               | M&E plan and system for M&E of its support to countries functional and in line with technically sound consensus of the M&E Reference Group of the RBM Partnership. These include (i) vector control, (ii) prompt access to effective treatment for vulnerable populations, and (iii) prevention and control of malaria in pregnant women.  |
|               | Guideline(s) to staff on assisting countries to develop malaria-responsive PRSPs and the preparation of malaria-responsive CASs, PRSCs, and SWAPs in malaria-endemic countries   |
|               | Learning Strategy for the Bank produced  |
|               | Five learning sessions for Bank staff on important aspects of malaria control with emphasis on operational effectiveness (pending learning strategy)   |
|               | Board approval of new lending facility: Booster Program for Malaria Control (and effectiveness of country interventions—see country-level support)   |
|               | AAA work program including: <ul style="list-style-type: none"> <li>• Effects of subsidies for antimalarial drugs and insecticide-treated nets on households, service providers, and program managers</li> <li>• Macroeconomic effects of increased expenditures for malaria control</li> <li>• Modalities to engage the formal and informal private sector</li> <li>• Web-based directory of technical and managerial resources for malaria control programs</li> <li>• Applied research on epidemiology, service delivery, and quality of care</li> </ul> |
|               | Multidisciplinary Malaria Advisory Service established and operational (jointly with WHO, MACEPA, RBM Secretariat, and other partners as appropriate and feasible)   |
|               | Development and implementation of a strategic communications program, including: <ul style="list-style-type: none"> <li>• Documentation and dissemination of best practices and portfolio reviews of the Bank's (improved/expanded) performance</li> </ul>   |
|               | <b>Inputs</b>  |
|               | Financial resources: <ul style="list-style-type: none"> <li>• Administrative budget</li> <li>• Untied Trust Funds</li> </ul>   |