

A light blue world map is visible in the background of the slide, showing the outlines of continents.

# Multisectoral Indicators

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Broadening the response to  
HIV/AIDS



# MSR Cable From the Administrator (6/4/01)

“HIV/AIDS is one of the biggest challenges to Development that we have ever faced....

The HIV/AIDS pandemic is not just a health Sector issue; it is the business of every officer In every sector in the agency. It is imperative That USAID staff in heavily affected countries Consider HIV-prevention programming in all Sectors and not just as part of the mission’s Health programs.”

# Catch-22 of Multisectoral Programming

- ◆ No evidence that multisectoral approaches are effective
- ◆ Without this evidence, multisectoral approaches are not funded
- ◆ Without funding, cannot test multisectoral approaches on a large scale
- ◆ No accepted indicators for measuring impact of multisectoral approaches
- ◆ Therefore, no evidence that multisectoral approaches are effective

# 2007 Global Targets

- ◆ Reduce HIV prevalence rates among 15-24 year olds by 50% in high prevalence countries and maintain rates below 1% in 15-49 year olds in low prevalence countries
- ◆ 25% of HIV+ mothers in high prevalence countries will have access to services to reduce MTCT



# 2007 Global Targets

- ◆ Provide basic care and psychosocial support services to at least 25% of PLWHA
- ◆ Provide community services to at least 25% of children affected by AIDS
- ◆ Mitigate the impact of HIV/AIDS on key sectors (education, health, D&G) in high prevalence countries



# Developing Indicators Process

- ◆ USAID formed working groups
- ◆ MSR group formed last
- ◆ Meetings with key representatives for 7 sectors
- ◆ Worked from the current S.O.s and I.R.s
- ◆ Tried for simplicity

# Developing Indicators Sequence

- ◆ Process
- ◆ Coverage
- ◆ Quality

# Developing Indicators

- ◆ Easy as possible for missions/contractors and CAs
- ◆ Consistent with indicators already in use for different sectoral S.O.s
- ◆ USAID/Washington funding national population surveys



# Multisectoral Responses Underlying Assumptions

- ◆ Multisectoral responses should not reinvent the wheel. Whenever possible sectors should consider current HIV S.O.s, take advantage of existing educational materials, programs, and lessons learned, and work with organizations and individuals already experienced in HIV/AIDS activities

# Multisectoral Responses Underlying Assumptions

- ◆ Multisectoral responses are intended to reinforce and enhance existing prevention, care, and mitigation interventions, not to replace them
- ◆ Collaboration among sectors is essential so multisectoral responses can contribute to scaling up the national HIV/AIDS objectives

# Multisectoral Responses Underlying Assumptions

- ◆ Every sector should begin immediately to assess how HIV/AIDS is affecting its staff and services. Not every sector needs to implement interventions immediately. Carefully setting priorities provides the most effective responses and preserves scarce resources.



# Democracy & Governance Indicators

- ◆ % of population knowing about human and legal rights of PLWHA
- ◆ # targeted CSOs showing improvement on HIV/AIDS advocacy quality index

# Democracy & Governance Indicators

- ◆ CSO body/network exists that actively aggregates CSOs HIV/AIDS interests beyond the local level
- ◆ National laws (or policies/regulations) protecting human rights of PLWHA enacted and/or disseminated\*

\*Needs to include stages of legislation

# Education Indicators

- ◆ # of activities in operational matrix supported by Mission (through TA or direct funding)
- ◆ # of major teacher training institutions providing HIV/AIDS prevention/skills building to teacher trainees
- ◆ # of secondary schools offering a family life skills course



# Education Indicators

- ◆ **# of OVC benefiting from improved access to education**
- ◆ **# of major teacher training institutions preparing teacher trainees to teach family life skills course**
- ◆ **# of primary schools offering a family life skills course**
- ◆ **# of communities/school districts starting new approaches to teach a basic educational curriculum to out-of school youth**



# Optional Education Indicators

- ◆ # of working teachers and teacher trainees aware of policies on professional codes of conduct
- ◆ # of secondary schools offering a family life skills course
- ◆ # of OVC benefiting from improved access to education



# Community-based Natural Resource Management Indicators

- ◆ Assessment of HIV/AIDS impact on USAID-funded CBNRM projects conducted
- ◆ Completed assessment disseminated to stakeholders
- ◆ # of local CBNRM projects taking action against HIV/AIDS

# Agriculture Indicators

- ◆ Stocktaking/assessment of HIV/AIDS impact on agriculture sector completed
- ◆ Mission strategy to respond to HIV/AIDS impact on agricultural sector completed
- ◆ New or modified techniques to maintain agricultural productivity and output appropriate for HIV/AIDS environment developed

# Agriculture Indicators

- ◆ % of new Mission-funded agricultural activities that include HIV/AIDS strategy/component

# Economic Growth Indicators

- ◆ National strategy and operational matrix to respond to the impact of HIV/AIDS completed by Ministry of Trade
- ◆ Completed strategy and matrix disseminated to stakeholders
- ◆ % of total activities planned per year in the operational matrix supported by Mission (through TA or direct funding)

# Microenterprise Indicators

- ◆ Assessment of HIV/AIDS impact on microenterprise sector completed
- ◆ Assessment distributed to stakeholders
- ◆ Up to 5 new microenterprise or microfinance interventions for populations affected by HIV/AIDS developed

# Microenterprise Indicators

- ◆ At least one new microenterprise or microfinance intervention for populations affected by HIV/AIDS implemented per year

# Health Indicators

- ◆ Effective health information system set up/adapted for reporting on HIV/AIDS and other priority health needs (e.g. prevalence, financing, human resources, utilization, expenditures)
- ◆ Policies to increase PLWHA access to health care services implemented

# Health Indicators

- ◆ Policies to increase access of population to prevention and VCT services implemented
- ◆ Policies to increase safety of health care workers on the job implemented
- ◆ Formal assessment of health care financing needs prepared for stakeholders
- ◆ Formal assessment of commodities needed for projected HIV/AIDS caseload developed for stakeholders

# Generic Indicators

- ◆ Assessment of impact of HIV on specific sector completed.
- ◆ Impact assessment disseminated to sectoral stakeholders
- ◆ Sectoral strategy and operational matrix to respond to HIV/AIDS initiated
- ◆ Budget for implementing first year activities in operational matrix allocated

# Major Challenges

- ◆ Sector-specific focus and funding
- ◆ Lack of coordination among projects within each sector
- ◆ Reduced funding for all sectors
- ◆ Reluctance to changing “business as usual” and to changing current M&E plan
- ◆ Lack of leadership at all levels

# Major Challenges

- ◆ Countries at different stages of HIV/AIDS programming
- ◆ Setting priorities
- ◆ Other organizations developing multisectoral indicators
  - World Bank
  - UNGASS
  - Specific Missions

# Next Steps

- ◆ USAID teams going to Missions beginning January 2002 (Kenya) to:
  - identify most appropriate indicators for country programs
  - develop data collection plan
- ◆ Indicators need to be field tested and revised