



Issue Paper:
***Review of the Human Rights Content of Frameworks
to
Assess the Effectiveness of HIV/AIDS Programming***

Defining the Issue

This paper examines approaches used by some of the primary intergovernmental and governmental agencies in assessing the effectiveness of HIV/AIDS programmes, as they have been reviewed by the UNAIDS Monitoring and Evaluation Reference Group (MERG). This is to attempt to begin to shed light on how the effectiveness of HIV/AIDS programs are currently assessed by UNAIDS, its partners, and other major organizations, and to understand the extent and ways in which human rights considerations form parts of these assessments.

Background: Building on and supporting the work of MERG

MERG has been charged with guiding UNAIDS, its cosponsors, and national programs in the development of monitoring and evaluation processes.¹ Over the course of their seven meetings, MERG has reviewed and analyzed several monitoring and evaluation (M&E) frameworks.² More recently, MERG has engaged with the M&E frameworks for the Millennium Development Goals (MDGs) and Global Fund to Fight AIDS, Tuberculosis, and Malaria (GFATM), but this work is only beginning.³ The M&E frameworks MERG appear to have engaged with the most are summarized below, noting the ways in which these frameworks appear to, or could potentially, address human rights concerns. Attention to the components MERG suggests be used for measuring effectiveness through these frameworks will be key in determining how attention to human rights can help support these efforts. It is to be noted that some of these are draft frameworks, still under review by MERG.

**Monitoring and Evaluation Frameworks
UNGASS Declaration of Commitment.**

Document: *Monitoring the UNGASS Declaration of Commitment*. UNAIDS, 2002⁴.

The M&E framework for the United Nations General Assembly Special Session Declaration of Commitment (UNGASS DOC) consists of 18 core indicators developed by UNAIDS in consultation with MERG. These 18 were chosen from a much larger number and are “operational indicators which will be acceptable to all Governments.”⁵ These presumptively measure effectiveness in achieving DOC goals. The fourth meeting report (2001) also notes that “to the extent possible, the process of developing the indicators will take into account the recent international efforts to strengthen and harmonize monitoring and evaluation of the HIV/AIDS epidemic by UNAIDS, bilateral agencies and other international technical organizations.”

The framework is made up of Global and National level indicators. Global indicators measure “progress in policy, partnerships and resource mobilization”⁶. National level indicators are divided into three categories: national action in policy development, partnerships and resource mobilization; national program and behavior; and impact level indicators that measure the prevalence of HIV among young people and the percentage of infants born with HIV. Human rights indicators are identified within the first category under the “National Composite Policy Index.”

Comments on Human Rights

There are four indicators explicitly named as human rights indicators and these establish whether countries have: laws to protect against discrimination of people living with HIV/AIDS; laws to protect against discrimination of groups of people identified as being “especially vulnerable to HIV/AIDS”; policies to ensure equal access for men and women to prevention and care, with an emphasis on “vulnerable groups”; and policies to ensure that HIV/AIDS research protocols are reviewed and approved by an ethics committee. While broad in scope, they have limitations. For example, they measure whether or not policies are in place and do not attempt to explore the quality or degree of implementation.

Other Core Indicators have relevance to human rights but have not been constructed from a human rights perspective, for example:

Indicator	Potential Human Rights Issues
Percentage of patients with STIs at healthcare facilities properly diagnosed.	Potentially if disaggregated by sex or factors of vulnerability could be relevant to non-discrimination
Percentage of young people aged 15-24 reporting the use of condom.	Potentially if disaggregated by sex or factors of vulnerability could be relevant to non-discrimination and could be also be a measure to assess right to information and to health (access to information and services.)
“Strategic Plan” indicators	Potentially addresses participation and accountability issues.
Prevention indicators	These are all potentially useful in addressing nondiscrimination and the right to health. However, measures could also determine information and how participation of affected communities is ensured. These would have to be linked to strategic plan indicators to ensure participation of vulnerable groups, and raises the question of how countries are accountable (means of redress).
Care and support indicators	These are all potentially useful in addressing nondiscrimination and the right to health. However, measures could also determine information and how participation of affected communities is ensured. These would have to be linked to strategic plan indicators to ensure participation of vulnerable groups, and raises the question of how countries are accountable (means of redress).

IPAA (International Partnerships Against AIDS in Africa).

Document: *Guidelines for Using the IPAA Monitoring Framework: Indicators for measuring the national response to HIV/AIDS. UNAIDS, 2001*⁷

The M&E framework is organized around four overall IPAA objectives: a scaled up response; a coordinated response; an efficient and effective response; and a supported response. Each objective has a specific number of outputs, and each output a cluster of quantitative and qualitative indicators to measure the progress and performance for each of the outputs. The framework guidelines also note that “this is not a comprehensive monitoring framework [but] seeks to capture what goes beyond epidemiological information and provision of services by focusing on national processes.”

These guidelines were revised after being field-tested in August 2001. MERG noted in their fourth meeting report (2001) that while impact level data is collected, outcome data is not regularly collected, and process data is scarce and usually not captured in monitoring systems. MERG recommended that this framework be adapted and integrated into the UNGASS framework as part of the efforts to harmonize monitoring of national responses to HIV/AIDS.

Comments on Human Rights

This is not a comprehensive framework but focuses on measuring “national processes of organizing response to HIV/AIDS.” The framework does not explicitly mention human rights. However, several of the indicators could be used to address human rights concerns, for example:

Indicator	Potential Human Rights Issues
Strengthening policy response	Focuses on participation, right to health, such as those to improve access to health care services and treatment and the concept of progressive realization
Broadening range of partner participation	Addresses participation and non-discrimination
Increased geographic coverage	Could be human rights sensitive if looking at disaggregated data including marginalized and underserved populations
Strengthened government leadership	Addresses accountability
Strengthened coordination within and between stakeholders	Addresses participation and accountability
Reduced prices and increased equitable availability of commodities	Promotes realization to right to health note in particular potential attention to progressive realization
Information sharing system among all constituencies	Addresses transparency

Country Response Information System (CRIS)

Document: *Country Response Information System: Overview of the System and its Plan of Establishment*. UNAIDS⁸.

The Country Response Information System (CRIS)⁹, is a UNAIDS database, planned to be operational by 2005. The system essentially provides a structure for countries to collect information relative to the epidemic, the response and the impact, including: epidemiological information; strategic planning, costing and coordination capacities; budget allocations to AIDS programming and other resource flows; and project implementation rates. CRIS includes a core of standardized information on the HIV/AIDS situation and the response in participating countries, facilitating analysis of that information.¹⁰

MERG noted that one of the most critical constraints of the CRIS is lack of available data in countries and the quality/authenticity of these data. Some additional challenges¹¹ include: improved understanding of CRIS and its relationship with other information systems at global, regional, and national levels; improved national capacity for data collection and analysis; prioritizing data collection; and mobilizing resources.

Comments on Human Rights

Since core fields correspond to indicators for DOC, comments similar to those made for the DOC would apply here. However, CRIS has also proposed additional indicators which could raise human rights issues, for example:

Indicator	Proposed Human Rights Issues
Percentage of primary and secondary schools with "life-skills-based HIV/AIDS" education	If information is collected on location may shed light on discriminatory practices
Public antenatal clinics with VCT services or VCT referral	Potentially could be useful in promoting right to health (access to prevention and treatment services) or could shed light on violations
Health facilities with capacity to deliver appropriate care	Again may be useful to address right to health (access and quality of services)

UNAIDS "AIDS Programme Efforts Index" (API).

Document: *The Level of Effort in the National Response to HIV/AIDS: The AIDS Program Effort Index (API) 2003 Round*. USAID, UNAIDS, WHO, POLICY Project, 2003¹².

API is a composite index designed to measure political commitment and program effort in the areas of prevention and care¹³. It tries to capture many of the inputs and outputs of a national HIV/AIDS program, measuring change over time¹⁴. The country's performance is scored through indicators from 10 main components determined to be necessary for an "effective national response": political support, policy formulation, organisational structure, programme resources, evaluation and research, legal and regulatory aspects, human rights, prevention programmes, care programmes and service availability¹⁵. The

API was applied in 40 countries in 2000; a revised index was applied in 54 countries in early 2003.

Noteworthy is its stated attention to human rights concerns. In a review of the first year implementation of the API, MERG¹⁶ noted that policies on legal environment and human rights received “highest scores”, however noting that questions lacked specificity and therefore could have been interpreted in different ways. The recommendation was to improve these sections.¹⁷

Comments on Human Rights

API explicitly mentions human rights as one of ten key components. The questionnaire and tools sent to countries were not available on the website for further analysis of specific questions. However there are two sections ostensibly addressing human rights issues: questions on whether countries have ratified the major international human rights instruments; and a focus on participation and rights of People Living with HIV/AIDS. The other components could also raise relevant human rights issues, for example some of the questions raised in the legal and regulatory component including access to information and supplies, confidentiality, access to effective and safe medications at affordable prices, and harm reduction programs for IDUs.

Millennium Development Goals

Document: Millennium Indicators Database: Goals, targets and indicators¹⁸

The Millennium Development Goals (MDGs) are currently being reviewed by MERG¹⁹. The United Nations Millennium Declaration establishes 18 targets mainly for “development and poverty eradication.” Underneath each target there are a select number of indicators (48 total). The target on HIV/AIDS has four indicators (which are also DOC indicators): (1) knowledge about HIV/AIDS among young people; (2) condom use among young people; (3) current school attendance among orphans; and (4) HIV prevalence among pregnant women. MERG in its review of these indicators has asked for some revisions. The group, has for example, advised UNAIDS and its partners to negotiate the deletion of the indicator on contraceptive prevalence rate “as it has very little significance, if not a negative one vis a vis HIV/AIDS.”²⁰

The Reference Group has recently reviewed the Millennium Project’s Interim Report of Task Force 5 Working Group on HIV/AIDS and provided extensive feedback on the human rights concerns and issues that were raised by the report²¹.

Many MDG indicators potentially raise human rights issues and concerns, in addition to concerns cited earlier, one issue relates to the manner in which data is collected. Concerns related to consent issues, privacy and confidentiality are crucial, for example, as relates to the indicator on HIV prevalence among pregnant women.

The following questions are raised:

- 1 Are the MERG elaborated criteria for addressing effectiveness in M&E frameworks for HIV/AIDS programming sufficient to measure human rights concerns?

- 2 If not, how could these frameworks be modified to address human rights concerns, in other words, how could these already existing frameworks be harnessed to measure human rights based approaches?
- 3 How should the issue of privacy and potential stigma and discrimination in the collection and/or use of these data be addressed?
- 4 How should the concept of the “three ones” now being operationalized in relation to these issues be addressed?

Supporting Documents

- 1- Core Indicators for Implementation of the Declaration of Commitment. Source:
http://www.unaids.org/NetTools/Misc/DocInfo.aspx?LANG=en&href=http%3a%2f%2fgva-doc-owl%2fWEBcontent%2fDocuments%2fpub%2fPublications%2fIRC-pub02%2fJC869-LeafletCoreInd_en%26%2346%3bpdf
- 2- Format for Monitoring the National Response to HIV/AIDS: Annex 1 of Guidelines for using the IPAA monitoring framework. Source:
http://www.unaids.org/en/in+focus/monitoringevaluation/m_e+library/m_e+frameworks.asp
- 3- Core fields within the CRIS indicator database: proposed indicators: Annex A of Country Response Information System: Overview of the System and its Plan of Establishment. Source:
<http://www.unaids.org/en/in+focus/monitoringevaluation/country+response+information+system.asp>
- 4- MDG Goals, Targets, and Indicators. Source: . Source:
http://millenniumindicators.un.org/unsd/mi/mi_goals.asp

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¹ See for example the Report on the 7th meeting of the UNAIDS Monitoring and Evaluation Reference Group, Geneva, 2003. The role of MERG includes the review of the status of new indicators; of new indicators guidelines; and of current global reporting efforts and activities to support country monitoring and evaluation programmes.

² At the sixth meeting of MERG (September 2002) in discussing the DOC’s dissemination and implementation strategy it was noted that the “consultation process on the selection of the core indicators to monitor the implementation of the DoC would have benefited from a wider consultation, which was not

always possible due to competing time pressure.” The conclusions reached at that meeting included: Ensure that the monitoring of the implementation of the DoC fits within the overall M&E of countries; Ensure that resources (both human and financial) are not diverted for reporting on the DoC as opposed to country needs; For the first year of reporting (2003), data gathering should be conducted at the global level.; Need to ensure clear responsibilities of the Cosponsors in the "operationalization" part-there are gaps in the process; Need for a technical coordinating unit-M&E Unit, Global HIV/AIDS Office of the World Bank-to map partners' activities; Ensure, to the extent possible, that data is of high quality and standardized in order to enable comparisons.

³ MERG fifth meeting report, April 2002

⁴ Source:

http://www.unaids.org/en/in+focus/monitoringevaluation/monitoring+the+un+special+session+declaration+of+commitment+on+hiv+_aids+.asp

⁵ MERG fourth meeting report, November 2001

⁶ MERG fifth meeting report, April 2002

⁷ Source:

http://www.unaids.org/en/in+focus/monitoringevaluation/m_e+library/unaids+monitoring+and+evaluation+unit+m+and+e+frameworks.asp

⁸ Source:

<http://www.unaids.org/en/in+focus/monitoringevaluation/country+response+information+system.asp>

⁹ UNAIDS website:

<http://www.unaids.org/en/in+focus/monitoringevaluation/country+response+information+system.asp>

¹⁰ In addition to helping individual countries, local CRIS systems provide data to UNAIDS to be aggregated and presented on the upcoming UNAIDS GRID website. This site will provide tools to facilitate the creation of reports and pursue more detailed analysis of global data from the three modules of the CRIS system (Indicator, Project Resource Tracking, and Research Inventory Database). An indicator database has been put together that includes core fields with predetermined definitions installed which correspond to the indicators for measuring follow-up to the UNGASS Declaration of Commitment. The guidelines state that the database is being put together with an ability to support “collection of indicators relating to particular thematic areas, such as human rights.”

¹¹ MERG seventh meeting report, July 2003

¹² Source: <http://www.policyproject.com/abstract.cfm?ID=1677>

¹³ Measure HIV/AIDS Survey Indicator database:

http://www.measuredhs.com/hivdata/ind_detl.cfm?ind_id=1&prog_area_id=1

¹⁴ See The level of Effort in the National Response to HIV/AIDS; the AIDS Program Effort Index (API) 2003 Round

¹⁵ Measure HIV/AIDS Survey Indicators Database

¹⁶ MERG's fifth meeting, April 2002

¹⁷ According to the report on 2003 Round of reviews, “The API is intended to measure the effort put into HIV prevention and care. It does not measure the socioeconomic context of the epidemic and response nor does it measure the outcomes.” The human rights component is also included “although an outcome because it also influences service outputs and service utilization.”

¹⁸ . Source: http://millenniumindicators.un.org/unsd/mi/mi_goals.asp

¹⁹ The website of the UNAIDS Monitoring and Evaluation department has segment on MDGs project.

²⁰ See Fifth meeting report, April 2002.

²¹ See the EGI's Final Report to Task Force 5 Working Group on HIV/AIDS