



Joint United Nations Programme on HIV/AIDS

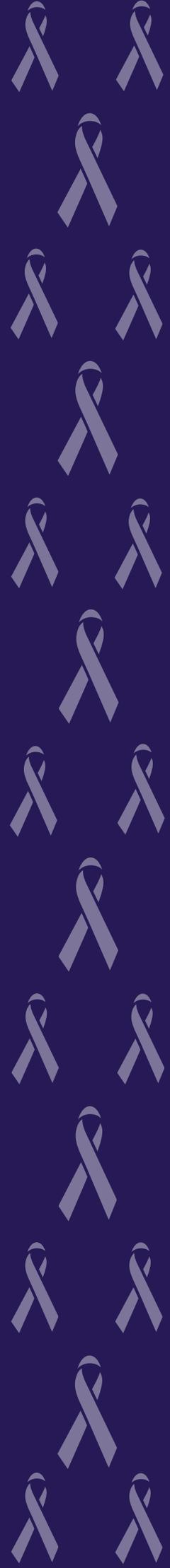
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United Nations General Assembly Special Session on HIV/AIDS

Monitoring the Declaration of Commitment on HIV/AIDS

GUIDELINES ON CONSTRUCTION OF CORE INDICATORS



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*Geneva, Switzerland
August 2002*

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Acronyms

AIDS	Acquired immunodeficiency syndrome
ANC(s)	Antenatal clinic(s)
API	AIDS Programme Effort Index
BSS	Behavioural surveillance surveys
CCA	Common country assessments
CRIS	Country Response Information System
DAC	Development Assistance Committee
DHS	Demographic and health survey
EC	European Community
FHI	Family Health International
HIV	Human immunodeficiency virus
IDU(s)	Injecting drug user(s)
IEC	Information, education and communication
ILO	International Labour Organization
MEASURE	Monitoring and Evaluation to Assess and Use Results
MICS	Multiple Indicator Cluster Surveys
MTCT	Mother-to-child transmission
NAC(s)	National AIDS Council(s)
NAP(s)	National AIDS Programme(s)
NGO(s)	Nongovernmental organization(s)
NIDI	Netherlands Interdisciplinary Demographic Institute
NSP	National Strategic Plan
OECD	Organization for Economic Cooperation and Development
PCB	Programme Coordinating Board
PMTCT	Prevention of mother-to-child transmission
PRSP	Poverty Reduction Strategy Papers
SPA	Service Provision Assessment
STD(s)	Sexually transmitted disease(s)
STI(s)	Sexually transmitted infection(s)
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNCTAD	United Nations Conference on Trade and Development
UNDAF	United Nations Development Assistance Framework
UNFPA	United Nations Population Fund
UNGASS	United Nations General Assembly Special Session
UNICEF	United Nations Children's Fund
VCT	Voluntary counselling and testing
WHO	World Health Organization

Introduction

Background

At the United Nations General Assembly Special Session (UNGASS) on HIV/AIDS, in June 2001, governments from 189 countries committed themselves to a comprehensive programme of international and national action to fight the HIV/AIDS pandemic by adopting the Declaration of Commitment on HIV/AIDS¹. The Declaration established a number of goals for the achievement of specific quantified and time-bound targets, including reductions in HIV infection among infants and young adults; improvements in HIV/AIDS education, health care and treatment; and improvements in orphan support.

The Declaration of Commitment also included a pledge, on the part of the United Nations General Assembly, that it would itself devote at least one full day per annum to reviewing the progress achieved in realizing the goals established. To facilitate this ongoing review process, the Joint United Nations Programme on HIV/AIDS (UNAIDS) and its partners have developed a set of core indicators that permit monitoring of measurable aspects of the various international and national actions, national programme outcomes, and national impact objectives envisaged in the Declaration of Commitment. Information obtained on these indicators will also be incorporated into reports and publications produced for broader dissemination and debate.

Purpose

The purpose of the current guidelines is to provide countries with technical guidance on the detailed specification of the indicators, on the information required and the basis of their construction, and on their interpretation. These guidelines aim to maximize the validity, internal consistency and comparability across countries and over time of the indicator estimates obtained, and to ensure consistency in the types of data and methods of calculation employed.

Global and national indicators for implementation of the Declaration of Commitment

The indicators are divided into two subgroups: global indicators and national indicators. The global indicators comprise a combination of five indicators that provide information on levels and trends in international commitment to HIV/AIDS control. UNAIDS and its partners are responsible for calculating the global-level indicators. Detailed specifications of these global indicators, the information required to measure them, and guidance on their interpretation are included in these guidelines for easy reference.

The national indicators are further subdivided into three categories:

- i) Indicators of national **commitment and action**. These indicators focus on policy, strategic and financial inputs for the prevention of the spread of HIV infection, to provide care and support for those who are infected, and to mitigate the social and economic consequences of high morbidity and mortality;
- ii) Indicators of national **programme and behaviour**. These indicators focus primarily on programme outputs, coverage and outcomes (e.g., increased knowledge about HIV/AIDS or altered behaviour);
- iii) Indicators of national-level programme **impact**. These indicators measure the extent to which programme activities have succeeded in reducing rates of HIV infection.

For the first two of these categories of national indicators (national commitment and action, and national programme and behaviour), a higher score on an indicator implies better or improved

¹ Resolution A/RES/S-26/2.

performance. For example, if one country has a higher score on the indicator of life-skills-based HIV/AIDS education than another country, this suggests that the first country has a more comprehensive life-skills programme than the second. However, for the third category of indicators (those of national-level programme impact), higher scores on the indicators imply higher prevalence of HIV. Thus, for example, a country with a higher percentage of HIV-infected infants born to HIV-infected mothers would appear to have a less successful programme for preventing mother-to-child transmission of HIV. Clearly, cross-national comparisons will reflect differences in local conditions and differences in data quality as well as differences in programme performance.

The national indicators focus on progress within individual countries. Four of them are also Millennium Development Indicators, established to monitor progress in achieving the goals and targets set in the Millennium Declaration, adopted by all 189 Member States of the United Nations General Assembly in 2000. As far as possible, national indicators have been built on those that have previously been recommended for use in monitoring and evaluation of HIV/AIDS programmes.

Each of the national indicators is applicable to all countries, with the exception of the indicator covering injecting drug users (IDUs). This indicator is applicable to countries where injecting drug use is an established mode of HIV transmission. Similarly, countries with low and concentrated epidemics should report on an alternative indicator of HIV prevalence among high-risk-behaviour groups, as opposed to prevalence among young people obtained from antenatal clinic sentinel surveillance. It is recommended that countries with generalized epidemics also report on this indicator to track the epidemic among all key high-risk-behaviour groups.

A number of additional national indicators have been suggested in the guidelines that could complement or serve to elucidate the information obtained using the relevant core indicator in some settings. For example, an additional indicator might be calculated, utilized and reported on by a country to provide useful interim information in circumstances where calculation of the core indicator awaits the collection of specialist survey data. It is recommended that countries report on these additional indicators, especially those on median age at first sex; number of non-regular sexual partners in the last year; and condom use during last commercial sex.

For those indicators where the Declaration of Commitment requires a specific focus on the 15–24-year-old age group, it is recommended that data be obtained for the whole 15–49-year-old age range, with separate indicator scores being reported by gender for the 15–19-, 20–24- and 25–49-year-old age groups. The Declaration of Commitment listed specific targets to be achieved by 2005 and 2010 for 3 out of the 13 national indicators: knowledge about HIV/AIDS among young people; prevalence of HIV among young people; and prevalence of HIV among newborns.

Some of the targets set in the Declaration of Commitment apply only to those countries that are

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