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January

# 12 Components Monitoring and Evaluation System Strengthening Tool



**UNAIDS**  
JOINT UNITED NATIONS PROGRAMME ON HIV/AIDS

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# 12 Components Monitoring and Evaluation System Strengthening Tool



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# Instruction for Using the Tool

These instructions accompany the *12 Components Monitoring and Evaluation System Assessment Tool*. Geneva: UNAIDS, March 2009.

## 1. What is the purpose of these instructions?

The instructions provide further clarification about the individual questions in the 12 Components M&E System Strengthening Tool. They are intended to be used by the facilitator(s) of a national HIV M&E assessment as well as by individuals and organisations participating in the assessment. They aim to ensure that everyone understands what is being assessed in the same way. The assessment is intended to be a diagnostic exercise to identify strengths and weaknesses in the HIV M&E system and to agree on actions needed to enhance M&E system performance.

## 2. How does the assessment tool function?

The *12 Components M&E System Strengthening Tool* is designed as a series of statements for which there are three response scales

1. a 5-point scale (Yes-completely, Mostly, Partly, No-not at all, Not Applicable)
2. a 3-point scale (Yes, No, Not Applicable)
3. numerical responses

For example, statement: "The frequency of data collection is stated for all indicators." If such frequency is stated for all indicators, the response is "**Yes-completely**". For at least 75% of indicators, the answer should be "**Mostly**". If less than 50% of indicators have frequencies of data collection, the response should be "**Partly**", and if no indicators have frequency indicated, the response should be "**No-not at all**". In cases in which the statement is not applicable, respondents should select "**Not Applicable**".

If the answer to a statement is anything other than "Yes-completely", respondents are requested to provide an explanation in the COMMENT box. This will provide important information to consider in discussing the necessary actions to take. If possible, any comments that help to identify and plan for strategic interventions should also be recorded under "proposed activities".

The electronic version of the tool is set up to facilitate selection of the response and summarizing the assessment results at the end of the assessment.

The appropriate response can be selected from a drop-down menu in the ANSWER column. The "**Yes-completely**" responses will appear in green, "**Mostly**" and "**Partly**" will appear in yellow, and "**No-not at all**" will appear in red. This visualization in color will help with summarizing the assessment results and with prioritizing actions. A SUMMARY DASHBOARD of the results will be automatically generated and display the distribution of scores overall and for each of the 12 components. It provides a visual representation of gaps in the HIV M&E system at different levels. A detailed review will help to prioritize the actions to be undertaken.

### 3. General comments about the tool

For group 1 (NACA), the title of the coordinating authority varies by country. Also, the location of the NACA varies (e.g. within the Prime Minister's office, in the Ministry of Health, independent trust or parastatal); and the NACA might represent more than one coordination structure (might be a NACA and a person/unit within president's office).

## Participant Information

Country		
Stakeholder Group		
Name of Workshop Facilitator		
Workshop Date		
Participant List		
Name	Organisation	Title
Source Documents		

## M&E System Component 1: Organisational Structures with HIV M&E Functions

		Pre-assessment Checklist:						
		National Level	National Level	National Level	Sub National Level	Sub National Level	Sub National Level	Comments
<b>Respond to each statement following the instructions given</b> (Click on the statement icon below (📄) for statement-specific guidance.)		National Level	National Level	National Level	Sub National Level	Sub National Level	Sub National Level	
		National AIDS Coordinating Authority	Ministry of Health AIDS Control Programme	HIV/AIDS Umbrella organisations (each one completes separate sheet)	Other Government Ministries/ Sectors	Local Government Authorities / AIDS Coordinating Authorities	Health Facilities	Other implementers of HIV services
1.	There is an M&E unit/Division/ Directorate within the entity 						Please validate the response given by other groups	
2.	The number of full-time and/or part-time M&E posts (filled or vacant) 							
3.	Percentage of M&E full-time and/or part-time posts filled (people currently working) 							



		<b>Pre-assessment Checklist:</b>						
		1. Check if there is an M&E unit/division/divis- rectorate at NACA and MoH 2. Number of full-time and/or part-time M&E POSTS (filled or vacant) at NACA and MoH 3. Number of M&E full-time and/or part-time posts filled (people currently working) at NACA and MoH						
		Sub National Level		Sub National Level		Sub National Level		
		Health Facilities		Other implementers of HIV services		Comments		
		Local Government Authorities / AIDS Coordinating Authorities		Other Government Ministries/ Sectors				
		HIV/AIDS Umbrella organisations (each one completes separate sheet)						
		Ministry of Health AIDS Control Programme						
		National AIDS Coordinating Authority						
<b>Respond to each statement following the instructions given</b> (Click on the statement icon below  ) for statement-specific guidance.)								
8.	M&E responsibilities are clearly defined in job descriptions.							
9.	External M&E technical support is required (at times) on an ongoing basis to fulfill routine M&E tasks usually the responsibility of government							
10.	Recognizing that most entities do not have the human resources needed to fulfill their mandate, the technical assistance is made available when and in the quantity needed and of the type needed							
11.	The entity has the written mandate to execute its M&E functions							









		<b>Pre-assessment Checklist:</b> 1. Check if there is an M&E unit/division/divis- rectorate at NACA and MoH 2. Number of full-time and/or part-time M&E POSTS (filled or vacant) at NACA and MoH 3. Number of M&E full-time and/or part-time posts filled (people currently working) at NACA and MoH						
		National Level	National Level	National Level	Sub National- al Level	Sub National Level	Sub National Level	Comments
		National Level	National Level	National Level	Other Govern- ment Authori- ties / AIDS Coordinating Authorities	Health Facilities	Other implem- enters of HIV services	
		National Level	Ministry of Health AIDS Control Pro- gramme	HIV/AIDS Umbrella organisations (each one com- pletes separate sheet)	Other Government Ministries/ Sectors			
		National Level	National Level	National Level				
		National Level	National Level	National Level				
	<b>Respond to each statement following                      the instructions given</b> (Click on the statement icon below  ) for statement-specific guidance.)							
4.	It is an under-funded priority and there are written plans to support pre-service training and/or recruitment and retention of additional epidemiologists, IT specialists and database managers in key entities							
5.	There is nationally-endorsed M&E training curriculum (appropriate for personnel within or supported by your entity) 							
6.	M&E human capacity relative to the M&E system is being built through colleges, universities and/or technical schools 							
7.	M&E human capacity relative to M&E is being built through routine supervision and/or on-the-job training (OJT) and mentorship 							















### Pre-assessment Checklist:

1. Check if there is a National Strategic Plan for HIV
2. Check if there is a National M&E Plan for HIV
3. Review the M&E plan and check if:
  - » It describe all 12 components of an HIV M&E system?;
  - » All the building blocks of performance for each component are described
  - » The M&E plan has an estimate of the resources/budget required for M&E
  - » The time period of National M&E Plan is aligned with the time period of NSP
  - » It includes indicators to monitor progress & performance of the M&E system
  - » Indicators of the National M&E Plan are aligned with objectives of the NSP
  - » Data sources of indicator values are specified in the National M&E Plan
  - » Measurement of each indicator is defined in the National M&E Plan
  - » Frequencies of data collection for indicator values are specified
  - » Data use plan is described
  - » Baseline values are included for indicators
  - » Targets are set for each indicator

§ Review the M&E plan, NSP or other relevant documents and calculate:

  - » Percentage of total HIV programme funding from government allocated for M&E plan
  - » Percentage of total HIV programme funding from development partners allocated for M&E plan

### National HIV M&E Plan Checklist

1. This checklist is to be used in conjunction with the Component 4 assessment.
2. Its purpose is to rate the technical adequacy of the national HIV M&E plan by giving a rating to various aspects of the M&E plan. It requires a thorough reading of the National M&E Plan and its annexes.
3. The workshop facilitator and the national HIV M&E coordinator should study the National M&E Plan (if one is in existence) BEFORE the assessment workshop and answer the following questions about it
4. At the workshop, the facilitator then presents the results of the National M&E Plan assessment for validation by the different groups (see statement 5 of the Component 4 assessment page). This implies that copies of the completed checklist should be available at the workshop.

	FROM (year)	TO (year)
Time period of the country's current HIV national strategic plan		
Time period of the country's current HIV national monitoring and evaluation plan		

### Aspect of National HIV M&E Plan Being Assessed

	Criteria for adequacy	RATING: Is this part of the M&E plan adequate?	Reason / explanation for rating given
<b>1. DEFINITIONS IN THE M&amp;E PLAN OF WHAT TO MEASURE WITH THE M&amp;E SYSTEM</b>			
1.1	Indicators in the HIV M&E plan are aligned with objectives of the NSP		'Aligned with the objectives of the NSP' means that there are indicators to measure each of the main NSP objectives (or result statements) and that there are no indicators that cannot directly be linked to one or more of the NSP objectives / results. Also, it means that the indicator is relevant to the NSP objective (i.e. if the NSP objective is to improve coverage of ART services, the indicator should not be about increased life expectancy of PLHIVs).
1.2	Indicators are fully defined		A fully-defined indicator is one that has a clearly stated title, definition, purpose and rationale. Also, the method of measurement for the indicator should be clearly defined, including the description of the numerator, denominator and calculation, where applicable. Any relevant data disaggregation should be clearly defined, and guidelines to interpret and use data from this indicator should be included. Strengths, weaknesses and challenges in using the indicator are clearly stated. It is desirable to give the participants an example of a fully-defined indicator.
1.3	The data collection method for the indicator is clearly stated		The data collection method is the monitoring process or evaluation tool that will be used to collect indicator values on a periodic basis, and may include routine programme monitoring forms, national survey data, or surveillance reports.

	<b>Criteria for adequacy</b>	<b>RATING: Is this part of the M&amp;E plan adequate?</b>	<b>Reason / explanation for rating given</b>
1.4	The measurement frequency for the indicator is clearly defined		
1.5	Indicators have baseline values		
1.6	Indicators have midterm and end-of-NSP targets		
1.7	Indicators to monitor progress & performance of the M&E system (M&E of the M&E system) are included in the M&E plan		

Criteria for adequacy		RATING: Is this part of the M&E plan adequate?	Reason / explanation for rating given
<b>2. DESCRIPTIONS IN THE M&amp;E PLAN OF HOW THE M&amp;E SYSTEM WILL FUNCTION</b>			
Assess whether each of the following aspects of a fully functional HIV M&E system is described in the national HIV M&E plan. In the 'Criteria' column, a description is given of what the M&E plan should have in order to give the M&E plan specific ratings:			
2.1	Component 1: Organisational structures for HIV M&E are described		For a ' <b>Completely</b> ' rating, the M&E plan should show an organisational structure with specific M&E posts, and define the roles and responsibilities of all M&E posts, entities with M&E responsibilities (i.e. their mandate), and committees responsible for the oversight of one or more aspects of the M&E system.
2.2	Component 2: Processes for assessing and building human capacity for HIV M&E are defined		For a ' <b>Completely</b> ' rating, the institutions, curricula and capacity development processes should be identified, the need for databases of trainees and training service providers should be stipulated, and capacity assessment processes should be described.
2.3	Component 3: Internal and external partnerships for HIV M&E are described		For a ' <b>Completely</b> ' rating, the nature of external and internal partnerships, mechanism to establish and strengthen them, should be described.
2.4	Component 4: HIV M&E plan review and linkages are clearly described		For a ' <b>Completely</b> ' rating, the timeframes and procedures for the review of the M&E plan itself is included in the national HIV M&E plan, as well as procedures for how entity-level M&E plans should link to the national HIV M&E plan
2.5	Component 5: Budgets, funding and resources for the national HIV M&E system are calculated and included in the HIV M&E plan		For a ' <b>Completely</b> ' rating, the National M&E Plan should include an estimate of the M&E resource/budget requirements, with a detailed costing and assignment of responsibilities for M&E functions (Component 5).

	<b>Criteria for adequacy</b>	<b>RATING: Is this part of the M&amp;E plan adequate?</b>	<b>Reason / explanation for rating given</b>
2.6	Component 6: Strategies to advocate for and communicate about HIV M&E and results are described		
2.7	Component 7: In addition to stating routine monitoring as one of the types of data to be collected to measure, routine monitoring data flow, data collection forms and responsible institutions are described		
2.8	Component 8: Survey and surveillance frequency, guidelines, protocols and governance structures for the surveys and surveillance are defined		
2.9	Component 9: How national and sub national databases with HIV-related information will link and be strengthened (where needed) is defined		

For a **'Completely'** rating, so as to create a demand for data and political will to keep the M&E system functional, procedures and strategies for advocacy and communication about HIV M&E and results should be stipulated.

For a **'Completely'** rating, the routine monitoring processes, forms and guidelines should be described, or referred to another guideline where this will be described. Linkages to the HIS should also be made clearly, so that overlap is avoided. Data use at the decentralised levels should be given special attention.

In addition to identifying which surveys and surveillance are needed to provide indicator values (statement 1.3 of this checklist), it is necessary, for a **'Completely'** rating, to identify who will carry out surveys, which protocols they will use, how data will flow, and what are the minimum data requirements (i.e. cross tabulations) needed from surveys and surveillance to obtain indicator values as stipulated in the M&E plan.

For a **'Completely'** rating, a network diagram showing how different databases will link, the software used for each, and the need for new database development, should be stipulated. Alternatively, if the country has decided to use a paper-based M&E system and not use electronic databases, this should be stipulated in the M&E plan.

	<b>Criteria for adequacy</b>	<b>RATING: Is this part of the M&amp;E plan adequate?</b>	<b>Reason / explanation for rating given</b>
2.10	Component 10: Supportive supervision and data auditing procedures, guidelines and M&E posts responsible are defined		
2.11	Component 11: Biomedical and social science HIV-related evaluation and research processes and structures are defined		
2.12	Component 12: Data analysis, information creation, information dissemination and use are clearly defined		











		<b>Pre-assessment Checklist:</b> 1. Check if there is a National M&E Work Plan for HIV/AIDS 2. Check if there is a work plan for the National HIV/AIDS program 3. Check if the National M&E Work Plan is costed, has timeline and responsible partners 4. Review the M&E work plan, HIV/AIDS Program work plan or other relevant documents (see below for more details)									
		National Level	National Level	National Level	National Level	Sub National Level	Sub National Level	Sub National Level	Sub National Level	Other implementers of HIV services	Comments

**NOTE: Statements in section 3 and in section 4 needs to be answered jointly in plenary NOT in the smaller groups**

<b>Respond to each statement following the instructions given</b> (Click on the statement icon below (📄) for statement-specific guidance.)		National Level	National Level	National Level	National Level	Sub National Level	Sub National Level	Sub National Level	Sub National Level	Other Government Ministries/ Sectors	Local Government Authorities / AIDS Coordinating Authorities	Health Facilities	Other implementers of HIV services	Comments
4.4	Percentage of total HIV programme funding from development partners allocated for M&E plan 													
4.5	Percentage of total HIV programme funding from all sources (government and development partners) allocated for M&E plan 													

<b>Summary of Key Action Points:</b>	
1.	
2.	
3.	
4.	
5.	

**Pre-assessment Checklist:**

1. Check if there is a National M&E Work Plan for HIV/AIDS
2. Check if there is a work plan for the National HIV/AIDS program
3. Check if the National M&E Work Plan is costed, has timeline for implementation, responsible partners are identified for implementation of each activity
4. Review the M&E work plan, HIV/AIDS Program work plan or other relevant documents and calculate:
  - » Percentage of total HIV programme funding from government allocated for M&E work plan
  - » Percentage of total HIV programme funding from development partners allocated for M&E work plan
  - » Percentage of total HIV programme funding from all sources (government and development partners) allocated for M&E work plan







		Pre-assessment Checklist:							
		1. Identify the main program areas (e.g., VCT, PMTCT, ARV, Condoms, Care & Support) in the country 2. For each program area, check if there are guidelines on on data recording, collecting, collating and reporting							
		National Level	National Level	National Level	National Level	Sub National Level	Sub National Level	Sub National Level	Sub National Level
		Pro-gram Area 1:	Pro-gram Area 2:	Pro-gram Area 3:	Pro-gram Area 4:	Pro-gram Area 5:	Pro-gram Area 6:	Pro-gram Area 7:	Comments
<b>Respond to each statement following the instructions given</b> Type program area in column headings at right (over-write "Program Area") (Click on the statement icon below (📄) for state-ment-specific guidance.)									
4.	National guidelines exist that provide instructions on how data quality should be maintained (e.g., avoiding double counting, assure reliability and validity) <b>from civil society/community-based systems (and therefore data for program area 6 or 7)</b>	📄							
5.	National guidelines exist for monitoring and managing the supply of drugs related to program areas 1, 2, 3, 4 or 5	📄							
6.	National guidelines exist to assure that individual medical records support quality and continuity of health care related to program areas 1, 2, 3, 4 or 5	📄							
7.	National guidelines exist to support reporting of health data by private sector health facilities related to program areas 1, 2, 3, 4 or 5	📄							
8.	The same operational definitions of routine monitoring (program output) indicators (from the national M&E system) are systematically used by all groups delivering services in program areas 1, 2, 3, 4, 5, 6 or 7	📄							

**NOTE:** For this component, the participants will be put into different groups; 7-8 groups should be formed for different programme areas. These programme areas will vary by country and should be identified before the workshop. The list of participants should also be reviewed and the composition of these groups should be decided before the workshop. Some services are implemented in the community, others at health facilities. Both types should be assessed here.

		Pre-assessment Checklist:						
		1. Identify the main program areas (e.g., VCT, PMTCT, ARV, Condoms, Care & Support) in the country 2. For each program area, check if there are guidelines on data recording, collecting, collating and reporting						
		National Level	National Level	National Level	Sub National Level	Sub National Level	Sub National Level	Program Comments
		Area 1:	Area 2:	Area 3:	Area 4:	Area 5:	Area 6:	Area 7:
<b>Respond to each statement following the instructions given</b> Type program area in column headings at right (over-write "Program Area") (Click on the statement icon below (📄) for state-specific guidance.)								
9.	Supplies and equipment are available for routine program monitoring of program areas 1, 2, 3, 4, 5, 6 or 7	📄						
10.	Entities delivering the same services use standardized data collection forms	📄						
11.	Entities delivering the same services use standardized reporting forms	📄						
12.	People with assigned responsibilities have been assuring data quality prior to submission to the next level	📄						
13.	During previous data auditing visits, all source documents (e.g., completed forms) have been available for auditing purposes	📄						
14.	Officers responsible for receiving reports from lower levels, systematically verify their completeness, timeliness and identify obvious mistakes before aggregating the data.							
15.	Mechanisms/procedures are in place to reconcile discrepancies in reports and to provide systematic feedback, including reconciliation of discrepancies in reports, etc.	📄						

**NOTE:** For this component, the participants will be put into different groups; 7-8 groups should be formed for different programme areas. These programme areas will vary by country and should be identified before the workshop. The list of participants should also be reviewed and the composition of these groups should be decided before the workshop. Some services are implemented in the community, others at health facilities. Both types should be assessed here.

	National Level		Sub National Level		Sub National Level		Pre-assessment Checklist: 1. Identify the main program areas (e.g., VCT, PMTCT, ARV, Condoms, Care & Support) in the country 2. For each program area, check if there are guidelines on data recording, collecting, collating and reporting								

**NOTE:** For this component, the participants will be put into different groups; 7-8 groups should be formed for different programme areas. These programme areas will vary by country and should be identified before the workshop. The list of participants should also be reviewed and the composition of these groups should be decided before the workshop. Some services are implemented in the community, others at health facilities. Both types should be assessed here.

	Respond to each statement following the instructions given Type program area in column headings at right (over-write "Program Area") (Click on the statement icon below (🗨️) for state-ment-specific guidance.)												Pro-gram Area 1:	Pro-gram Area 2:	Pro-gram Area 3:	Pro-gram Area 4:	Pro-gram Area 5:	Pro-gram Area 6:	Pro-gram Area 7:	Comments	
16.	Outputs of routine program monitoring contribute to the indicators as defined in the national M&E plan																				
17.	Financial resources/investments for HIV are monitored and reported to the NACA and MOH																				

Summary of Key Action Points:	
1.	
2.	
3.	
4.	
5.	





### **Review Inventory (if existing) of HIV Related Surveys Conducted in the Country**

Gather specific survey and surveillance reports (including Biological and behavioral surveillance, work place surveys, school based surveys, health facility surveys, second generation surveillance; and surveys on condom availability/use)

### **Pre-assessment Checklist**

1. Review inventory (if existing) of HIV related surveys conducted in the country
2. Gather specific survey and surveillance reports (including Biological and behavioral surveillance, work place surveys, school based surveys, health facility surveys, second generation surveillance; and surveys on condom availability/use)
  - » Check if there is an inventory of HIV related surveys conducted in the country
  - » If existing, check when the inventory was last updated
  - » Prepare a summary on how frequently each of the following surveys are conducted in the country:
    - § Biological surveillance
    - § National surveys or surveillance with behavioral component in the general population
    - § National level workplace surveys
    - § National level school-based survey
    - § Health facility surveys in HIV-related services
    - § Second generation surveillance
    - § Survey on condom availability and use









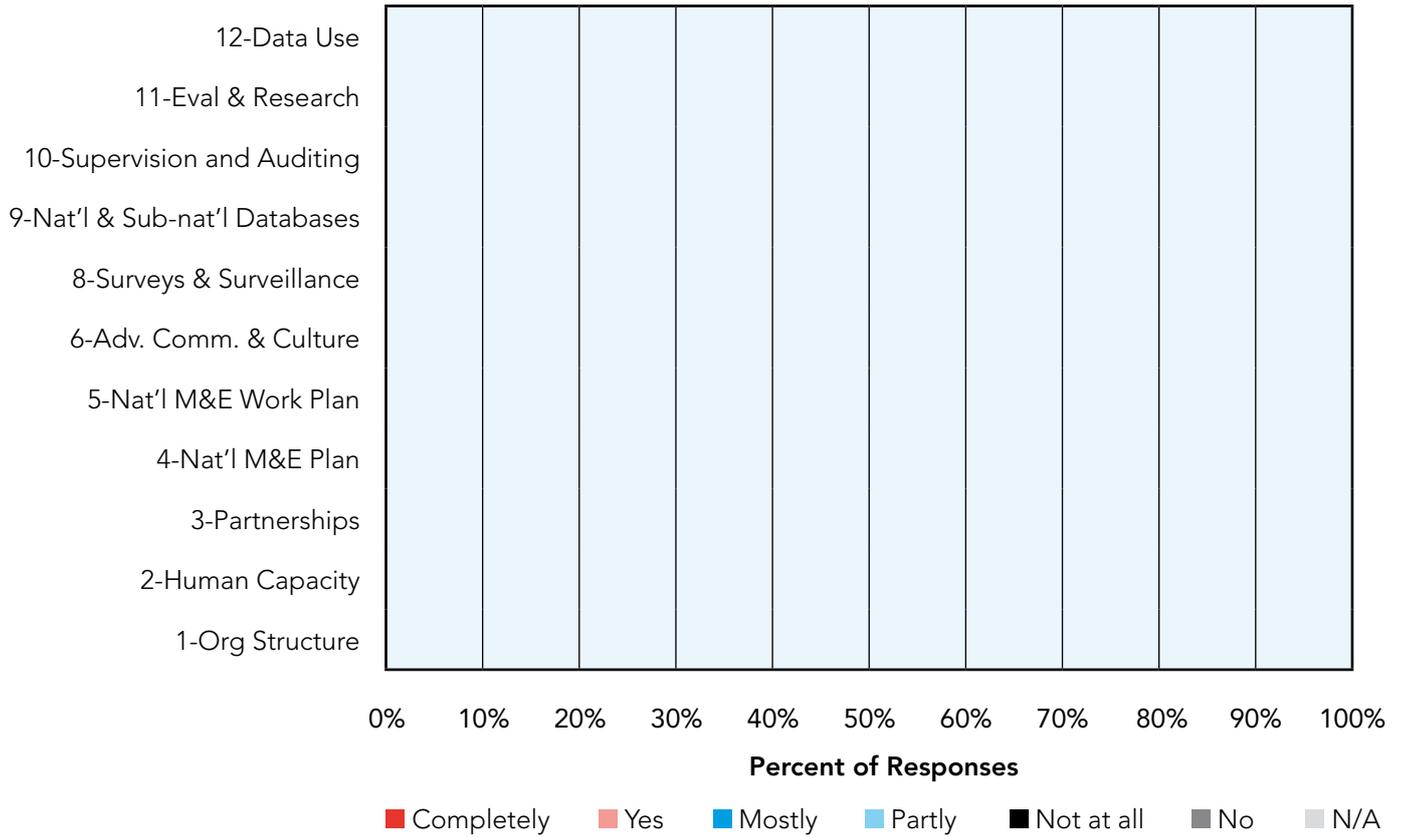
		<b>Pre-assessment Checklist:</b> 1. Check if there is an inventory of HIV related research and evaluation activities (completed, proposed and active) 2. If existing, check when the inventory was last updated 3. Check if there is a document on procedures (strategy) for coordinating and approving (new) HIV research and evaluations						
		National Level	National Level	National Level	National Level	Sub National Level	Sub National Level	Sub National Level
		National Co-ordinating Authority	Ministry of Health AIDS Control Programme	HIV/AIDS Umbrella organisations (each one completes separate sheet)	Other Government Ministries/ Sectors	Local Government Authorities / AIDS Coordinating Authorities	Health Facilities	Other implementers of HIV services
<b>Respond to each statement following the instructions given</b> (Click on the statement icon below  for statement-specific guidance.)								
1.4	Procedures exist for the mandated team/committee to coordinate (new) HIV research and evaluation 							
1.5	An HIV research and evaluation agenda exists that directs future HIV research and evaluation							
1.6	The HIV research and evaluation agenda has been prioritised based on input from key HIV and research stakeholders 							
1.7	The HIV research and evaluations agenda is being used to approve new studies. 							
1.8	The HIV research and evaluations findings are being used in policy formulation, planning and implementation 							
1.9	Research and evaluation findings are regularly disseminated and discussed 							
1.10	Financial resources are earmarked/available for conducting planned research and evaluations 							



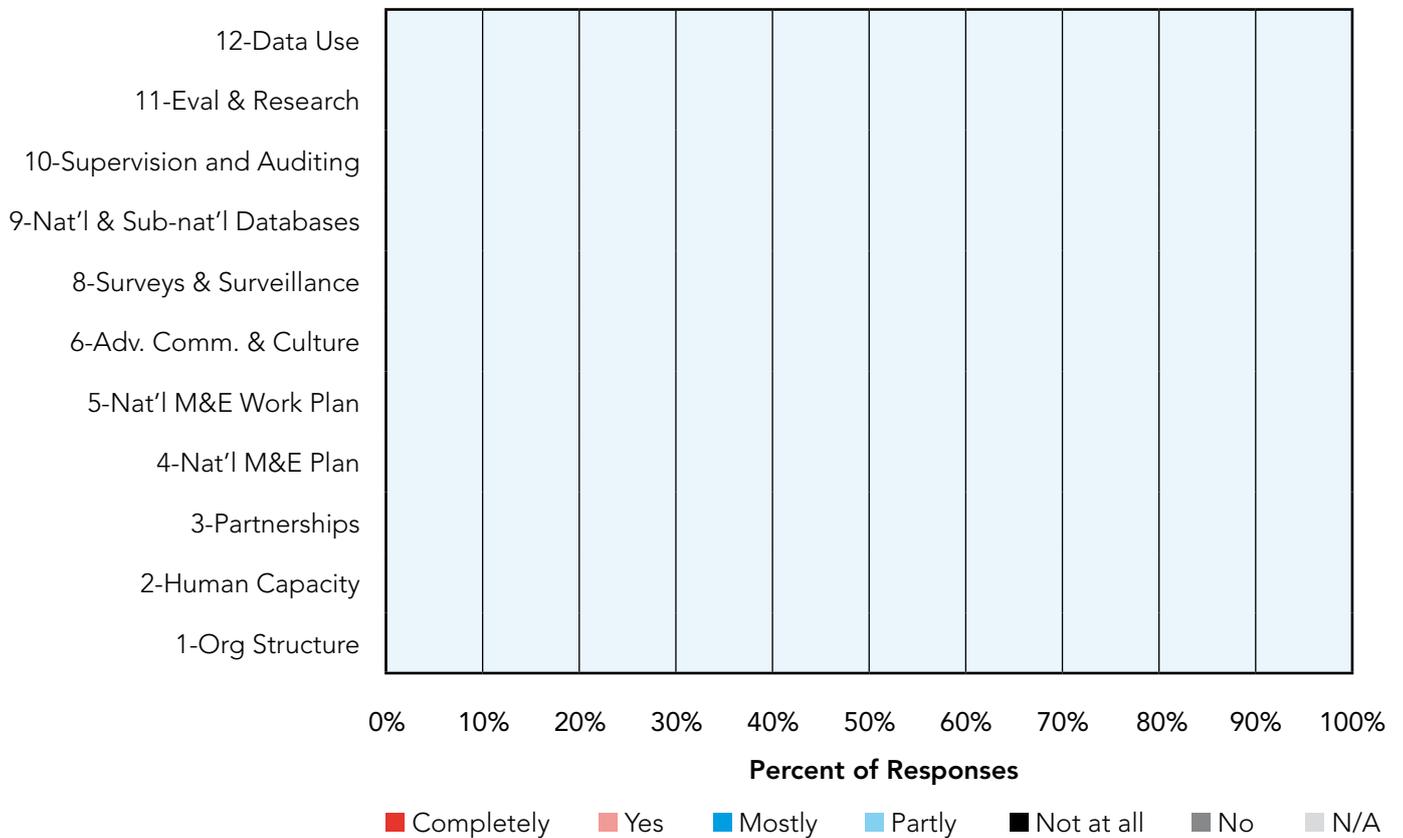


	National Level	National Level	National Level	National Level	National Level	Sub National Level	Sub National Level	Sub National Level	Sub National Level	Pre-assessment Checklist:
	National AIDS Coordinating Authority	Ministry of Health AIDS Control Programme	HIV/AIDS Umbrella organisations (each one completes separate sheet)	Other Government Ministries/ Sectors	Local Government Authorities / AIDS Coordinating Authorities	Health Facilities	Other implementers of HIV services	<b>Pre-assessment Checklist:</b> 1. Check if there is information dissemination strategy/plan or if it is included in the National M&E Plan or Work Plan		
	<b>Respond to each statement following the instructions given</b> (Click on the statement icon below (📄) for state-specific guidance.)									
	<b>Summary of Key Action Points:</b>									
1.										
2.										
3.										
4.										
5.										

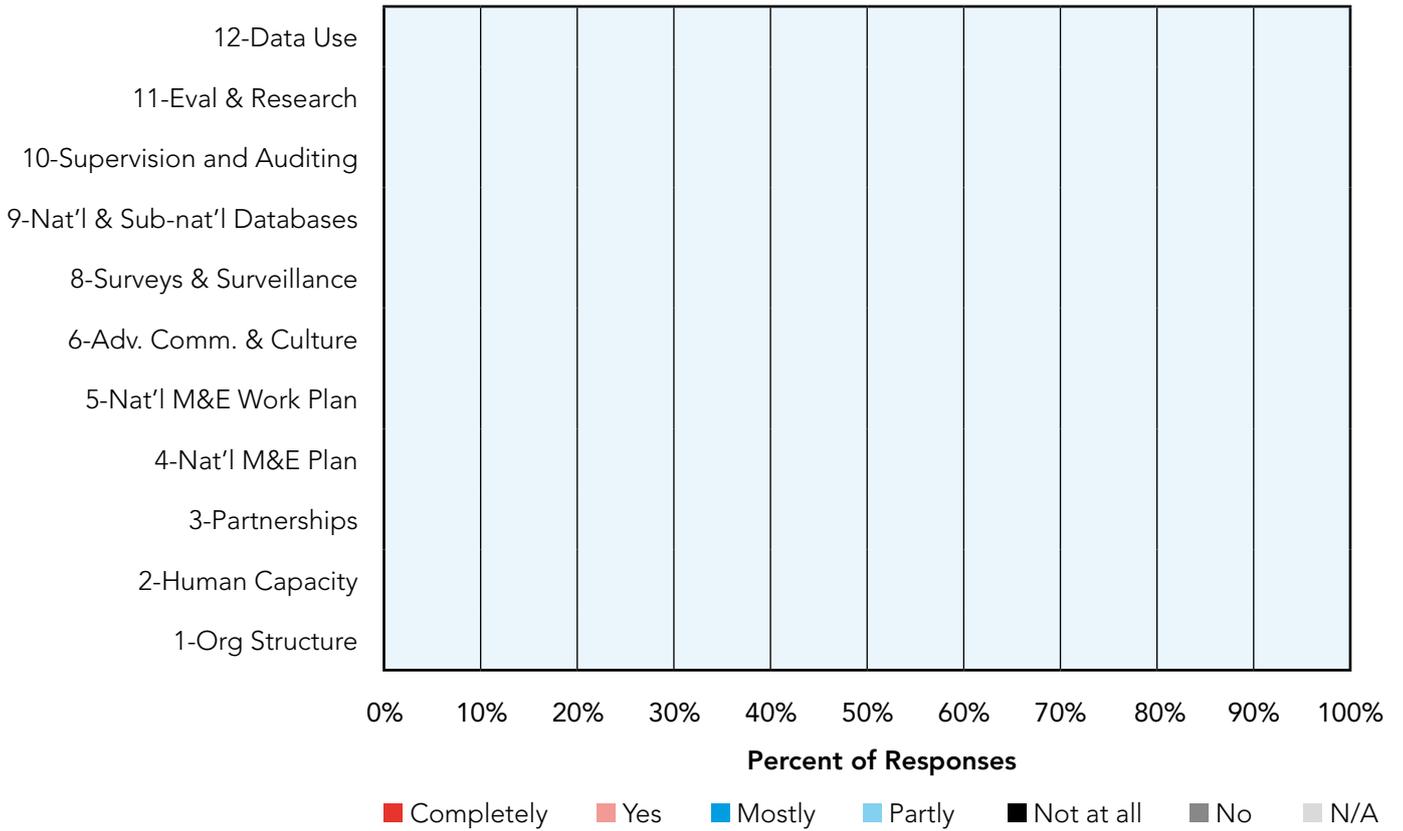
National AIDS Coordinating Authority



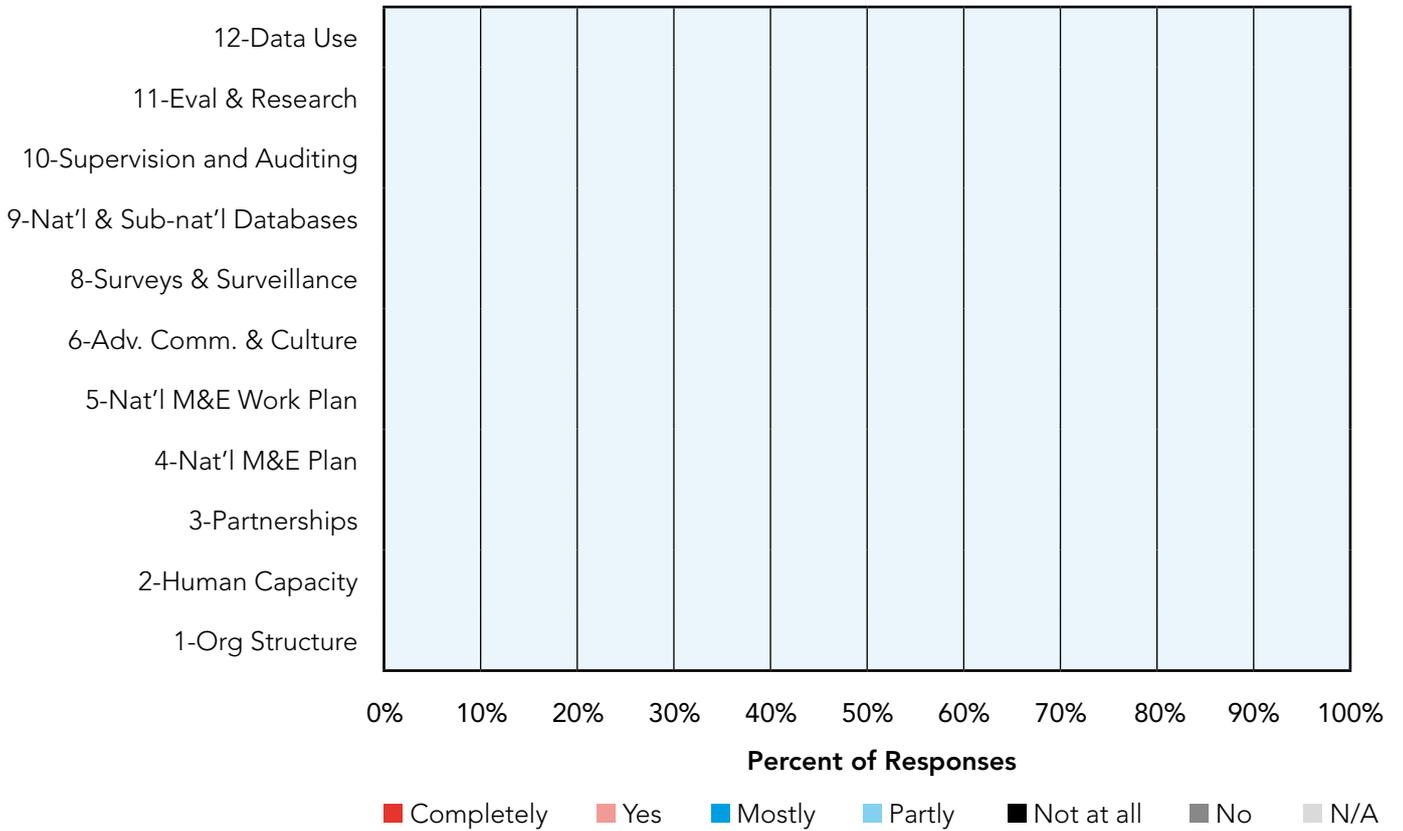
Ministry of Health AIDS Control Programme



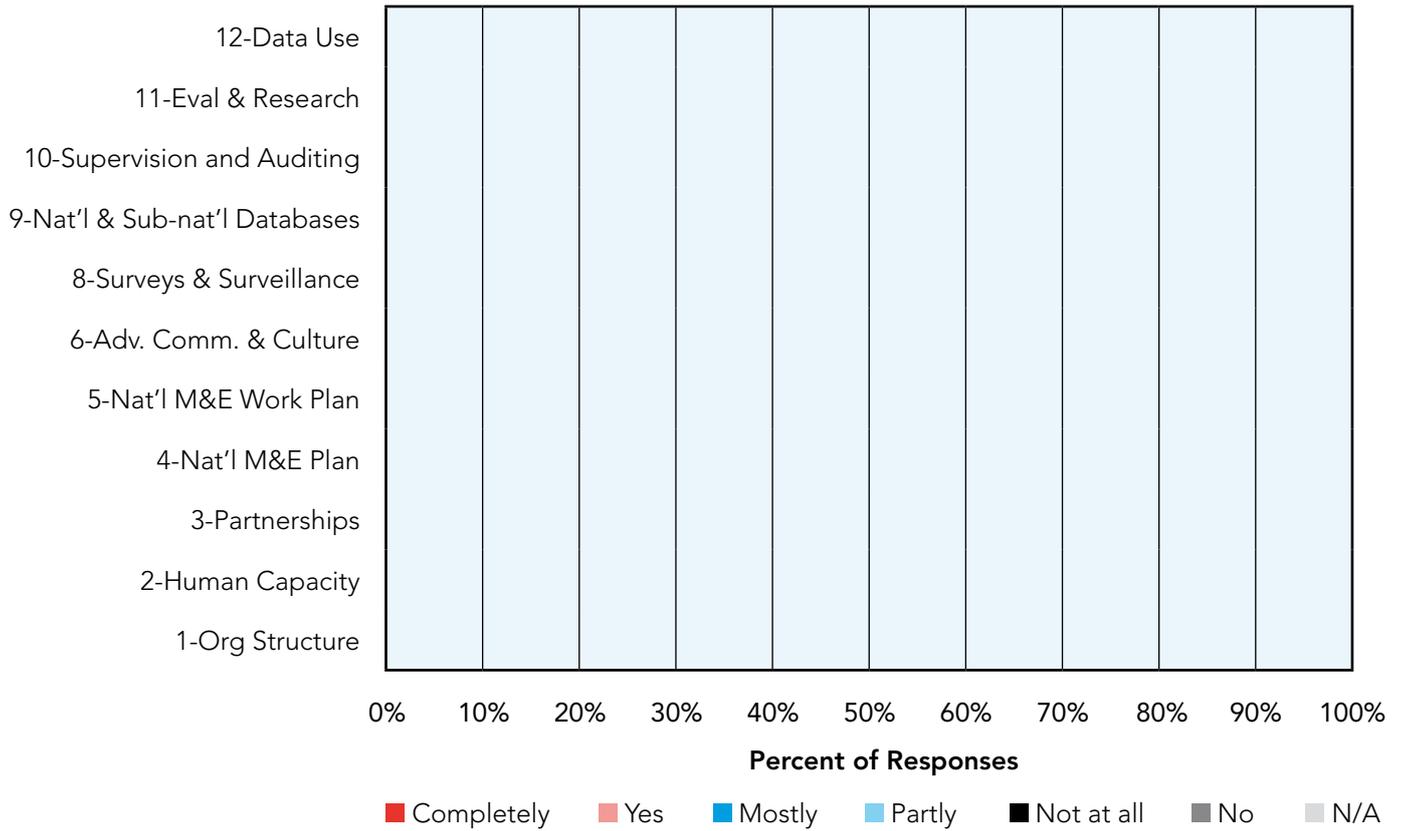
Umbrella organisations for civil society and private sector



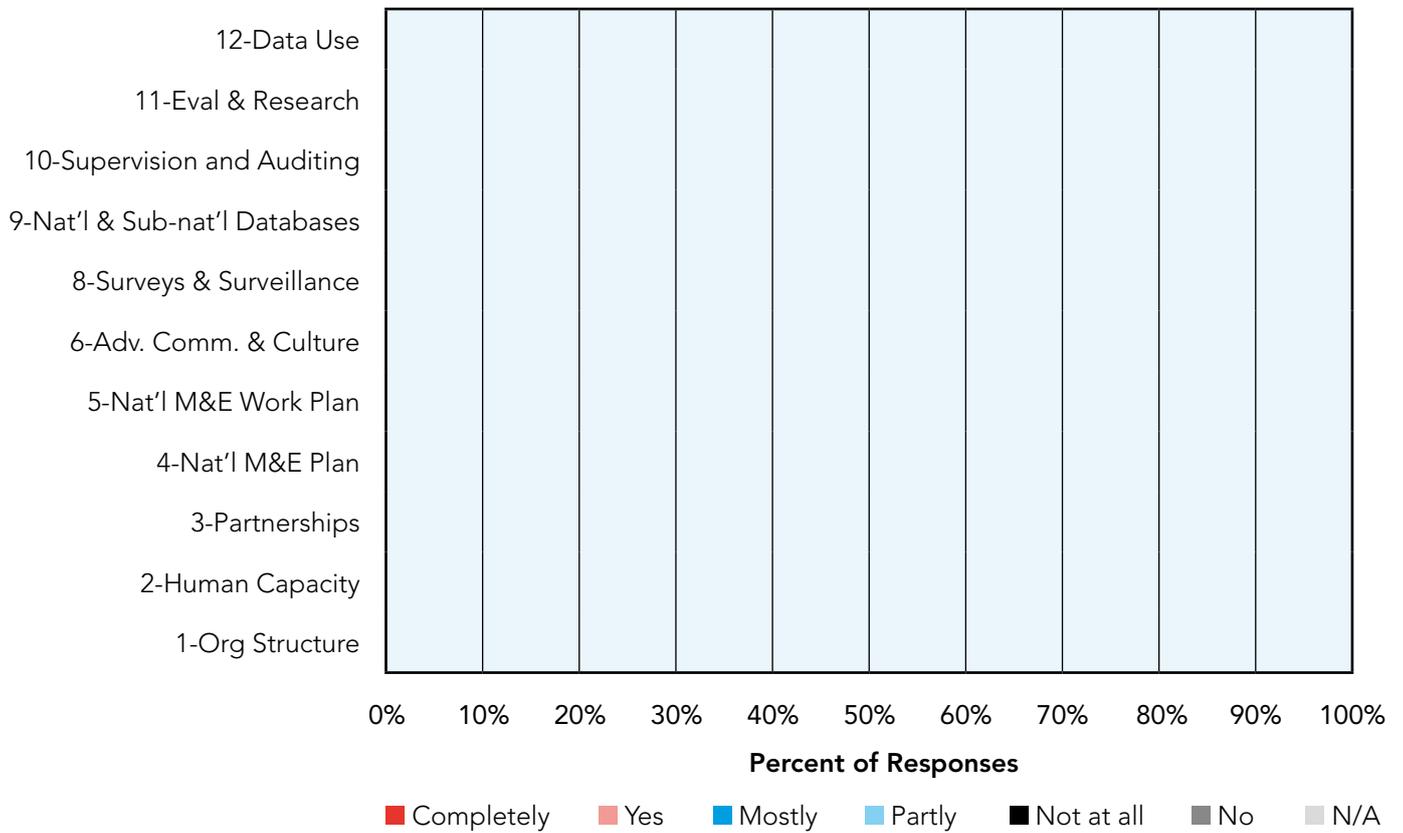
Other Government Ministries



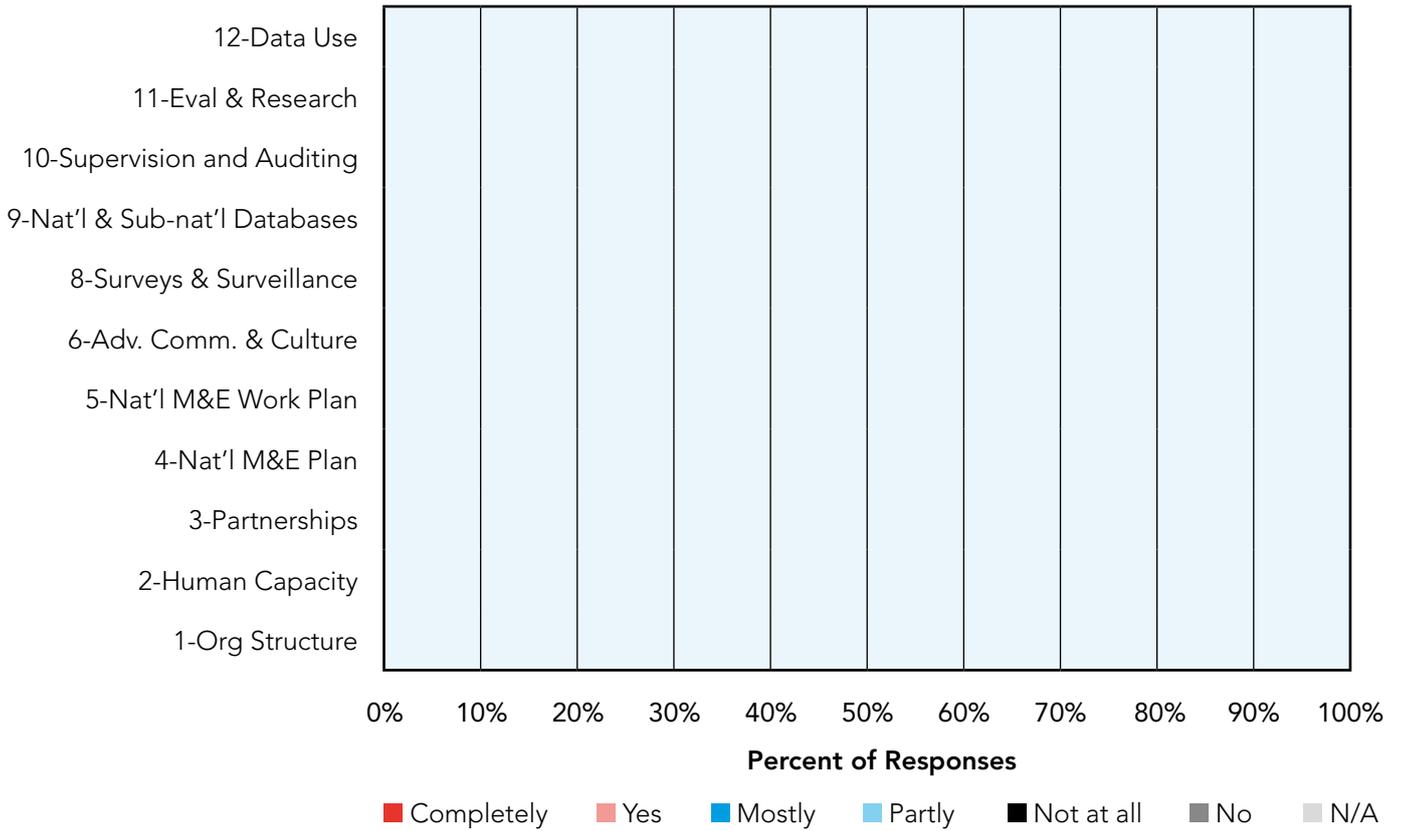
Local Government Authorities / AIDS Coordinating Authorities



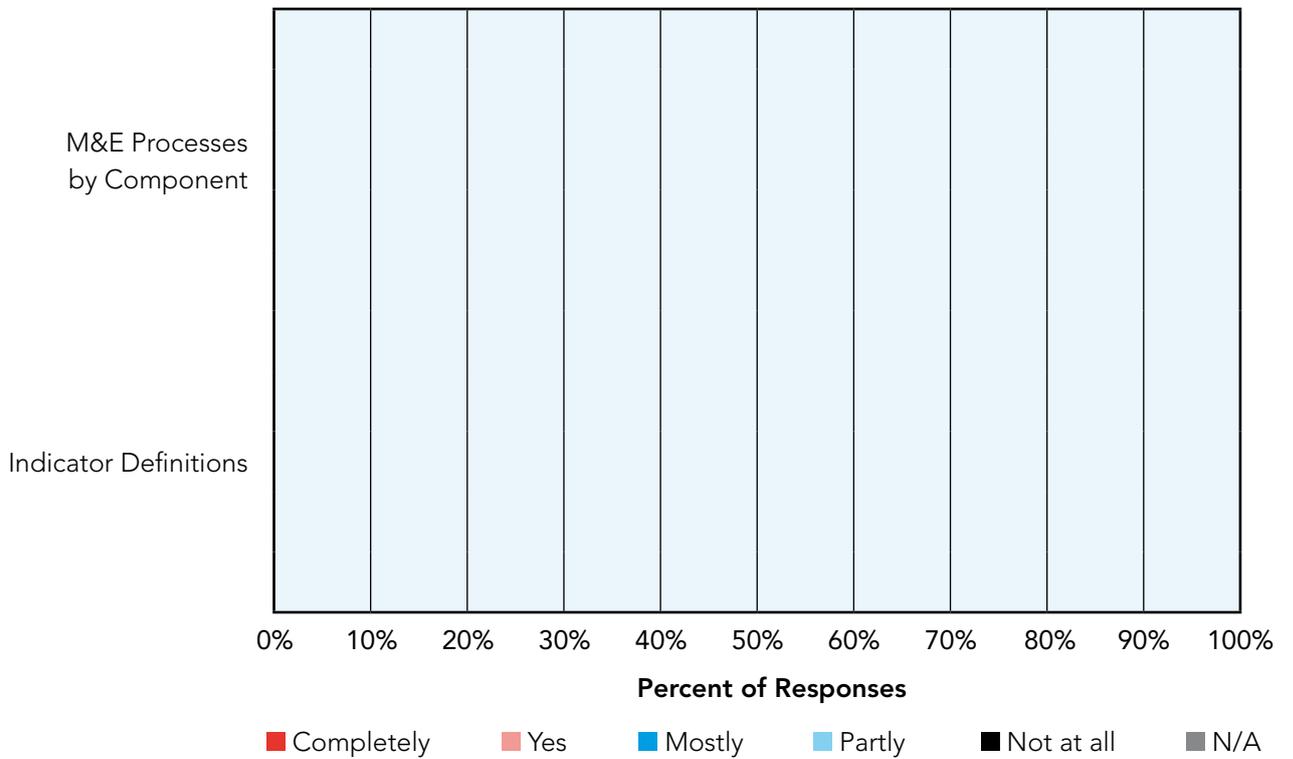
Health Facilities



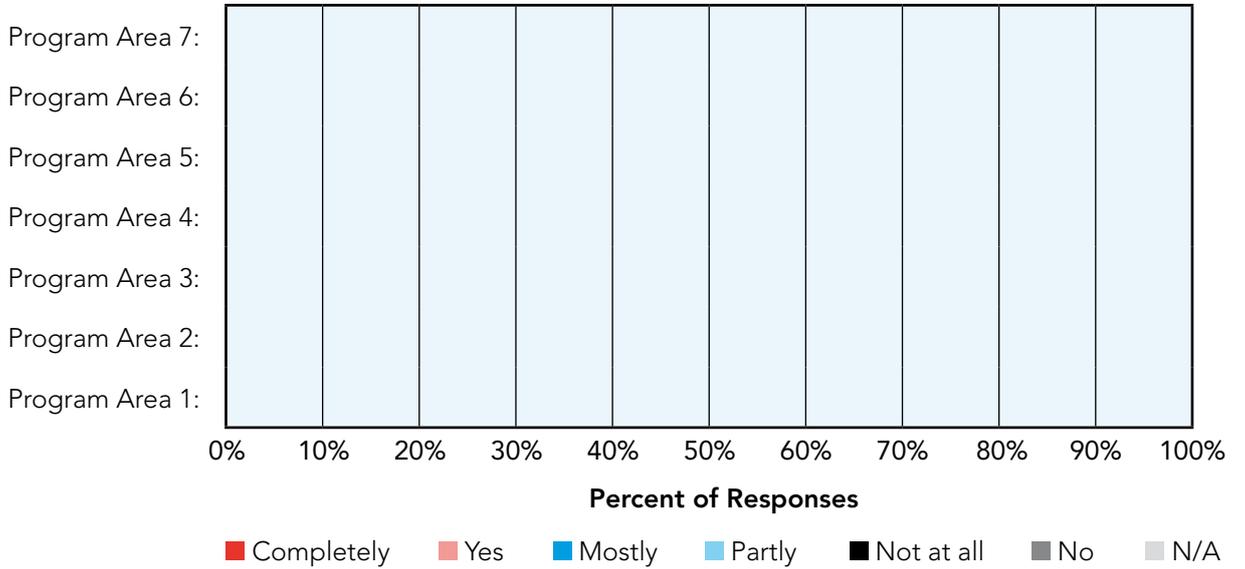
Other Implementing Partners



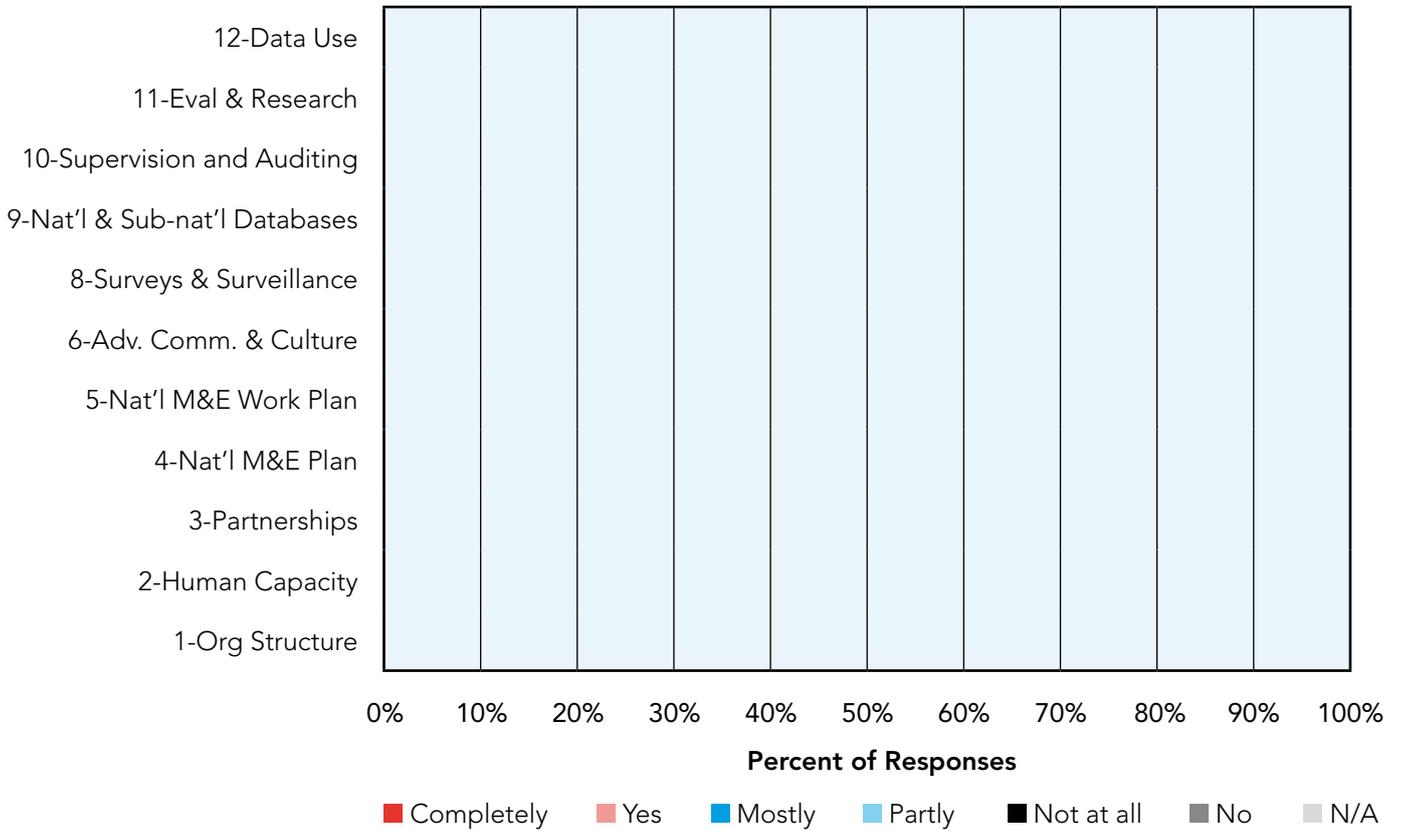
National HIV M&E Plan Checklist



### Component 7: Routine Monitoring



### Overall Dashboard – 12 Components Across Stakeholder Categories



Component	Summary of Action Points
1. Organizational Structure	
2. Human Capacity	
3. Partnerships	
4. National M&E Plan	
5. National M&E Costed Workplan	
6. Advocacy, Communication and Culture	
7. Routine Monitoring	
8. Surveys and Surveillance	
9. National and Subnational databases	
10. Supervision and Data Auditing	
11. Evaluation and Research	
12. Data Use	

## List of ALL MERG Documents 2007-2009

- 1. A Framework for Monitoring and Evaluating HIV Prevention Programmes for Most-At-Risk Populations (2007):**  
Provides an overview of M&E methods and approaches for most at-risk populations; it covers the use of strategic information for programme planning, M&E. Its focus is on the M&E of targeted HIV prevention programmeM&E. Its focus is on the M&E of targeted HIV prevention programme
- 2. Additional Recommended Indicators. Addendum to UNGASS Monitoring the Declaration of Commitment on HIV/AIDS, Guidelines on Construction of Core Indicators (2008):** Presents the 40 core national indicators that provide minimum necessary information for national-level monitoring of the HIV epidemic and response, and to provide detailed specifications and guidance on the 15 indicators recommended in addition to the 25 UNGASS indicators
- 3. Organizing Framework for a Functional National HIV M&E System (2008):** This framework describes 12 main M&E system components and defines a performance goal and results for each component. The framework helps countries to define an agreed set of national performance objectives and measures for the HIV M&E system and to guide strategies for building capacity, where needed, to reach these objectives.
- 4. Glossary of M&E Terminology (2008):** contains an alphabetical listing of M&E terms and their definitions often with more in-depth explanations than would customarily be provided by dictionary definitions. The Glossary will facilitate and improve dialogue and understanding among all those who are involved in M&E of development activities. It should also serve as a valuable reference guide in M&E training. The selection of terms and their definitions in the attached glossary have been carefully discussed and endorsed by the Global UNAIDS Monitoring and Evaluation Reference Group (MERG)
- 5. Indicator Standards and Assessment Tool (2009):** consists of a set of agreed indicator standards that are relevant at the national level for program managers and service providers, who need to select, revise and use indicators to monitor, manage and implement their country's response to the epidemic effectively monitor. This will ensure that indicators provide decision-makers and key stakeholders with useful, feasible and relevant information. An additional aim is to reduce the burden of global reporting on countries by harmonising global level indicators across multilateral and bilateral organisations
- 6. Planning Tool for Developing a Digital Library of M&E Resources (2009):** A Planning Tool to help assure that users of a digital library can successfully locate resources and can make informed decisions regarding the quality of the materials. The Planning Tool has two purposes: 1) To provide guidance to current owners and future developers of a digital library on the range of issues to be addressed in usability and user-friendliness of the library and 2) To provide a list of questions to help organizations brainstorm if they can and should invest their resources in developing a digital library
- 7. Guidance HIV Monitoring and Evaluation Capacity-building (2009):** provides practical advice for national AIDS programmes that are planning and implementing capacity building activities as part of their effort to develop a unified and effective national HIV monitoring and evaluation (M&E) system. The Guidance is relevant to the wide range of individuals and organisations involved in the national HIV M&E system; it is particularly relevant for the health sector, given its central role in M&E of HIV.
- 8. 12 Components Monitoring and Evaluation System Assessment – Guidelines to support preparation, implementation and follow-up activities (2009):** These Guidelines provide information on the preparation for and implementation of an assessment of the national HIV monitoring and evaluation (M&E) system. It also includes key steps to take after an assessment to facilitate implementation of M&E system strengthening activities. The Guidelines are built around the 12 main components of the HIV M&E system, which define the Organizing Framework for a Functional National HIV Monitoring and Evaluation System (UNAIDS, 2008). Consequently, the Guidelines also focus on using the 12 Components Monitoring and Evaluation System Strengthening Tool (Geneva: UNAIDS, 2009a) to ensure a comprehensive and successful assessment.
- 9. 12 Components Monitoring and Evaluation System Strengthening Tool (2009):** Is a tool is for assessing how well each of the 12 components of a national HIV M&E system is functioning. The tool facilitates the identification of strengths and weaknesses in the national HIV M&E system and the prioritization of system strengthening activities.
- 10. Guidelines for Developing Terms of Reference for Prevention Evaluation (2009):** The Guidelines aim to foster a systematic approach to the evaluation of prevention programs by focusing on an often overlooked yet critical step in evaluation planning: the preparation of terms of reference (TOR). It can be used to facilitate the planning of evaluations for HIV prevention, discussions on the design of these evaluations, and the drafting of TOR to guide such assessments. It is intended for use by anyone who prepares or reviews TOR for evaluations of HIV and AIDS prevention programs and projects.



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