

Performance Framework				English	
A. Program details					
Country / Applicant:	Angola	PR	United Nations Development Programme, Angola		
Component:	HIV/AIDS				
Start Year:	2016				
Start Month:	July				
Annual Reporting Cycle	Jul - Jun				
Reporting Frequency (Months)	6				
B. Reporting periods					
Period	July-Dec 2016	Jan-June 2017	July-Dec 2017	Jan-June 2018	
PU due	Yes	Yes	Yes	Yes	
PUDR due	No	Yes	No	Yes	

C. Program goals and impact indicators															
Goals:															
1 Strengthening the national response for the control of STI/HIV and viral Hepatitis to ensure an HIV prevalence rate of less than 3%															
Linked to goal(s) #	Impact indicator	Country	Baseline			Required disaggregation	Targets						Comments		
			Value	Year	Source		2016	Report due date	2017	Report due date	2018	Report due date		2019	Report due date
1	HIV I-5: New HIV infections among children	Angola	9.054	2013	AIS (AIDS Indicator Survey)		9.000	Mar-17	9.000	Mar-18	8.500	Mar-19			The baseline is modelled. The PR will be using the sentinel surveillance and the electronic reporting system for notification of HIV cases
1	HIV I-6: Estimated percentage of child HIV infections from HIV-positive women delivering in the past 12 months	Angola	25%	2013	AIS (AIDS Indicator Survey)		24%	Mar-17	22%	Mar-18	18%	Mar-19			The facility-based sentinel surveillance at 35 ANC sites will be used to report on the progress of this indicator. These indicator corresponds to the objective from the NSP "Reduce the rate of vertical transmission below 5% by 2018" which the National HIV program thinks not to be realistic an not feasible to achieve considering the 2013 baseline of 25%. The targets will be revised if necessary based on the planned sentinel surveillance.
1	HIV I-1: Percentage of young people aged 15-24 who are living with HIV	Angola	1.8	2011	Modelled	Sex	1.8	Mar-17	1.8	Mar-18	1.8	Mar-19			The facility-based sentinel surveillance at 35 ANC sites will be used to report on the progress of this indicator

D. Program objectives and outcome indicators														
Objectives:														
1 Maintain the prevalence of HIV positive pregnant women under 3% until 2018														
2 Reduce the rate of vertical transmission below 5% by 2018														
3 Increase PMTCT coverage from 39% to 90% of HIV positive pregnant women by 2018														
4 Increase from 52% to 90% the follow-up of positive pregnant women on antiretroviral treatment (ART) by 2018														
5 Increase from 74% to 90% the percentage of male and female sex workers who report condom use with their last client 2018														

Linked to objective(s) #	Outcome indicator	Country	Baseline			Required disaggregation	Targets						Comments		
			Value	Year	Source		2016	Report due date	2017	Report due date	2018	Report due date			
4	HIV O-1: Percentage of adults and children with HIV known to be on treatment 12 months after initiation of antiretroviral therapy	Angola	46%	2015	CDC survey	Sex, Age, Duration of treatment	51%	Mar-17	56%	Mar-18	59%	Mar-19			The baseline is from CDC operational research in 9 health units in Luanda. The same research will be conducted by CDC to report on the implementation progress. Similar methodology will be used for assessment of treatment retention outside of Luanda - 5 hospitals and 15 health centers
5	HIV O-5: Percentage of sex workers reporting the use of a condom with their most recent client	Angola	82.7%	2015	Specific surveys and research (SADC survey)	Sex	84%	n/a	85%	Jun-18	90%	sep-18			The baseline is for Luanda and Benguela provinces, where the study was conducted. Measure target of condom use in 2018 through operational research. Survey is budgeted in the GF sex workers component in framework of broader survey on quality of service and seroprevalence/STI

E. Modules																		
Module 1																		
Prevention programs for general population																		
Coverage/Output indicator	Responsible Principal Recipient	Is subset of another indicator (when applicable)	Geographic Area (if Sub-national, specify under "Comments")	Cumulation for AFD	Baseline				Required disaggregation	Targets				Comments				
					N#	%	Year	Source		July-Dec 2016		Jan-June 2017			July-Dec 2017		Jan-June 2018	
										D#		N #	%		N #	%	N #	%
GP-1: Number of women and men aged 15+ who	UNDP	Please	National	Non-	1.191.972		2014	Patient records		900.000		1.100.000		1.200.000		1.300.000		The baseline is the number of tests conducted in 2014 according to reporting health units. There is no

received an HIV test and know their results	select...	cumulative										information on repeat testers. The need for current tests is calculated in the attachment
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Module 2													Prevention programs for adolescents and youth, in and out of school												
Coverage/Output indicator	Responsible Principal Recipient	Is subset of another indicator (when applicable)	Geographic Area (if Sub-national, specify under "Comments")	Cumulation for AFD	Baseline				Required disaggregation	Targets								Comments							
					N#	%	Year	Source		July-Dec 2016		Jan-June 2017		July-Dec 2017		Jan-June 2018									
										D#		D#	%	D#	%	D#	%								
YP-1: Percentage of young people aged 10-24 years reached by life skills-based HIV education <u>out of school</u>	UNDP	Please select...	Subnational	Cumulative annually	NA	NA				5.000	3%	8.000	5%	8.000	5%	9.000	6%	These targets are set based on the funding available from the allocation amount. The focus is on out of school girls, the most vulnerable group. Interventions targeting the out of school girls will be implemented in Kunene province, which is the border province with high prevalence. Denominator: Province population 900'000, 50% of population under 15 years old, about 60% of girls finished primary school (women and girls 10-24 out of school estimated at 130'000). UNFPA is an implementing partner for this programs that has a strong experience in implementation of the programs focusing on girls and young women. Assessment of the program implementation will be conducted in July 2016 considering the draught and the malnutrition situation in Kunene resulting from the draught. The assessment will consider the effect of the draught on implementation arrangements (ex. implementation of the program in more than one province)							
					NA					150.000		150.000		150.000		150.000									

Module 3													Prevention programs for MSM and TGs												
Coverage/Output indicator	Responsible Principal Recipient	Is subset of another indicator (when applicable)	Geographic Area (if Sub-national, specify under "Comments")	Cumulation for AFD	Baseline				Required disaggregation	Targets								Comments							
					N#	%	Year	Source		July-Dec 2016		Jan-June 2017		July-Dec 2017		Jan-June 2018									
										D#		D#	%	D#	%	D#	%								
KP-2a: Percentage of MSM reached with HIV prevention programs - individual and/or smaller group level interventions	UNDP	Please select...	Subnational	Non-cumulative	300	5,0%	2015	Operational Research		Not applicable		Not applicable		500	5,6%	500	5,6%	Denominator is size estimate of KPs in South Africa (SANAC study mid est). The program will be implemented in provinces of Luanda and Benguela/Lobito. The individual will be considered as reached when the client is contacted by the peer educator at least 3 times individually or as part of a small group + provided HTC + . For seropositive client, a patient will be referred for health services and provided with referral card. The peer educator will provide a customized follow up including support for adherence to treatment. The targets are set starting from January 2017 as the program implementation will start from January 2017 after the KP Guidelines are developed and based on the budget available. The targets might be revised in November 2016 based on the IBBS and size estimation conducted by the MOH and funded by PEPFAR in 4 provinces for SWs and MSM							
					6.000					Not applicable		Not applicable		9.000		9.000									

Module 4													Prevention programs for sex workers and their clients												
Coverage/Output indicator	Responsible Principal Recipient	Is subset of another indicator (when applicable)	Geographic Area (if Sub-national, specify under "Comments")	Cumulation for AFD	Baseline				Required disaggregation	Targets								Comments							
					N#	%	Year	Source		July-Dec 2016		Jan-June 2017		July-Dec 2017		Jan-June 2018									
										D#		D#	%	D#	%	D#	%								
KP-1c: Percentage of sex workers reached with HIV prevention programs - defined package of services	UNDP	Please select...	Subnational	Non-cumulative	1.300	5,2%	2015	Specific surveys and research (SADC survey 2015)		1.000	4%	2.500	10%	3.000	12%	3.000	12%	There is no programming for FWS in Angola NSP (2014-2018). Denominator is size estimate of KPs in South Africa (SANAC study mid est). Numerator is based on extrapolations from the SADC FSWs study in Luanda province (Viana, Kilamba Kiayi) and Benguela/Lobito estimated population size of FSWs : Lobito =1'767 Benguela City = 3'277 Luanda Viana = 5'695 Kilamba Kiayi = 994 The package of interventions is based on the LINKAGES Project and includes the following: - sensitization session provided at least once by community peer educator - HTC at least once either at KP friendly service or HTC offered on-site by HTC counsellor during the sensitization sessions or HTC offered at mobile truck - provision of male and female condoms (funded by the PEPFAR) These targets are Global Fund specific for provinces of Luanda and Benguela but the project LINKAGES are covering other provinces with PEPFAR funding The targets might be revised in November 2016 based on the IBBS and size estimation conducted by the MOH and funded by PEPFAR in 4 provinces for SWs and MSM							
					25.000					25.000		25.000		25.000											

Module 6		PMTCT							Targets								Comments	
Coverage/Output indicator	Responsible Principal Recipient	Is subset of another indicator (when applicable)	Geographic Area (if Sub-national, specify under "Comments")	Cumulation for AFD	Baseline				Required disaggregation	July-Dec 2016		Jan-June 2017		July-Dec 2017		Jan-June 2018		
					N#	%	Year	Source		N #	%	N #	%	N #	%			
					D#					D #		D #		D #				
PMTCT-2: Percentage of HIV-positive pregnant women who received antiretrovirals to reduce the risk of mother-to-child transmission	UNDP	Please select...	National	Non-cumulative	8.709	40,2%	2014	Reports from PTV providing units	Type of regimen	5.000	46%	5.900	54%	6.200	55%	6.509	58%	The denominator is Spectrum estimated number of HIV-positive pregnant women within the past 12 months who delivered in past 12 months. Numerator is based on the ANC attendance rate (69% at least one ANC) and feasible coverage with ART - i.e. 85%
					21.675					10.850		10.850		11.300		11.300		
PMTCT-3: Percentage of infants born to HIV-positive women receiving a virological test for HIV within 2 months of birth	UNDP	Please select...	Please select...	Non-cumulative	360	2,0%	9-2014-9-2015	Reports from involved units		400	4%	500	5%	600	6,3%	600	6,3%	Denominator are live births to HIV positive mothers Angola-wide. The targets are set based on the availability of VL machines (the only VL machine is in Luanda).
					18.400					9.300		9.300		9.540		9.540		

Module 7		Treatment, care and support							Targets								Comments	
Coverage/Output indicator	Responsible Principal Recipient	Is subset of another indicator (when applicable)	Geographic Area (if Sub-national, specify under "Comments")	Cumulation for AFD	Baseline				Required disaggregation	July-Dec 2016		Jan-June 2017		July-Dec 2017		Jan-June 2018		
					N#	%	Year	Source		N #	%	N #	%	N #	%			
					D#					D #		D #		D #				
TCS-1: Percentage of adults and children currently receiving antiretroviral therapy among all adults and children living with HIV	UNDP	Please select...	National	Cumulative annually	76.666	22,5%	2014	Reports (health facilities to INLS)	Sex, Age	95.000	27%	100.762	29%	105.000	29%	111.874	31%	The baseline (nominator) comes from health facility reports, but needs to be verified. UNDP will have a verification consultation in 2017. The denominator is the Spectrum modelled number of all PLWHA. If nominator proves to be significantly different a new baseline will be used with same percentual growth. The treatment protocol used is >350 for adults or clinical signs, all pregnant women for lifetime, all children, all seropositive TB cases, all seropositive TS and all MSM. Up to 2011, the ART patients were counted adding new patients to the number of old ones and then abstracting a modelled figure of drop-outs. The reports on current ART patients by health facilities are not being systematically verified. GoA to cover 60% (60,457 and 67124) in each of the years 2016 and 2017. World Bank to cover 8,400 adult PLHIV in each of 2016 and 2017. Global Fund allocation will scale up ART coverage by 11% and 12% in 2016 and 2017 respectively.
					341.000					350.000		350.000		359.000		359.000		
TCS-1: Percentage of children currently receiving antiretroviral therapy among all adults and children living with HIV	UNDP	TCS-1	National	Cumulative annually	4.600	15,3%	2014	Reports of health facilities to INLS		3.000	9,7%	6.304	20,3%	6.500	20,3%	6.511	20,3%	Denominator is the modelled number of seropositive children. Total children in need of ART are based on PEN-HIV targets and the 2013 WHO guidelines for paediatric ART and derived from the EPP 2014. An estimated 5% AIDS mortality occurs annually. GoA to cover 60% projected needs in each of the years 2016 and 2017. World Bank will cover 600 in each of years 2016 and 2017. Global Fund allocation will scale up pediatric ART coverage by 12% and 16% in 2016 and 2017 respectively and feasibility of scale up by 240% in 2 years.
					30.000					31.000		31.000		32.000		32.000		

Module 8	TB/HIV								Targets								Comments	
Coverage/Output indicator	Responsible Principal Recipient	Is subset of another indicator (when applicable)	Geographic Area (if Sub-national, specify under "Comments")	Cumulation for AFD	Baseline				Required disaggregation	July-Dec 2016		Jan-June 2017		July-Dec 2017		Jan-June 2018		
					N#	%	Year	Source		N #	%	N #	%	N #	%			
					D#					D #		D #		D #				
TB/HIV-4: Percentage of new HIV-positive patients starting IPT during the reporting period	UNDP		National	Non-cumulative	NA	NA				5.000	3%	10.000	5%	15.000	7%	18.000	8%	This is the new intervention and low scale up is expected at the beginning of the implementation. At the beginning of the implementation the National HIV program will focus on revision of IPT guidelines and training of health personnel, development of data reporting protocol, improvement of patient follow-up and adherence. Reaching the target is fully dependant on the provision of IPT drug by MoH.
					NA				170.000		190.000		210.000		230.000			
TB/HIV-1: Percentage of TB patients who had an HIV test result recorded in the TB register	UNDP		National	Non-cumulative	27.699	48,8%	2014	Reports PNCT		17.941	26,4%	20.000	29,4%	23.000	31,6%	27.641	38,0%	The HIV testing in TB cases had a good scale-up in the past years. Wherever there is a TB service, there is also a HIV service, so the support from HIV services to TB can have full coverage (unlike the other way round). The denominator are total number of TB patients registered during the reporting period.
					56.716				67.930		67.930		72.685		72.685			
TB/HIV-3: Percentage of HIV-positive patients who were screened for TB in HIV care or treatment settings	UNDP		Subnational	Non-cumulative	NA	NA				3.000	1,7%	4.000	2,1%	7.000	3,3%	8.000	3,5%	Patients will be rescreened at every visit. the program expect a slow start in implementation of this new activity. The program will develop reporting forms, conduct training on reporting forms and supervise (local TB services can also supervise local HIV service). the implementation will start in larger facilities, however, trainings will be conducted for all personnel involved in service provision. The INLS will be working jointly with TB program to build a system to ensure that PLHAs that were identified as TB suspect were referred to TB service for investigation and treated appropriately
					NA				175.000		190.000		210.000		230.000			
TB/HIV-2: Percentage of HIV-positive registered TB patients given anti-retroviral therapy during TB treatment	UNDP		National	Non-cumulative	NA	NA	2014	Report 2014 PNCT		1.200	66,9%	1.500	75,0%	1.850	80,4%	2.350	85,0%	The denominator are TB cases tested HIV positive in the 6 months of the period, supposing a stable constant of seropositivity from 2014, 10% of TB cases. The numerator is the number of people put on ARV. Currently the number of people is not known because it is not being reported. Therefore a reporting channel needs to be introduced
					NA				1.794		2.000		2.300		2.764			