

Public Health and HIV Section's
**Guiding Principles
and Strategic Plans for**

HIV and AIDS

Malaria Control

Nutrition and Food Security

Reproductive Health

Water and Sanitation

**Appendix:
Cross-Reference of Indicators**

2008-2012

APPENDIX: CROSS-REFERENCE OF INDICATORS¹

Table 1: Identically Worded Indicators in More than One Strategic Plan

INDICATORS	Cross-references by indicator numbering				
	HIV/AIDS	Malaria	Nutrition and Food Security	Reproductive Health	Water and Sanitation
Number of reported cases of GBV, segregated by type, age and sex.				1.1.3	1.2.2
% of pregnant women presenting to ANC receiving ≥ 2 doses of Intermittent Preventative Treatment in pregnancy.		3.6.1		3.1.4	3.5.1
% coverage of suitable dwellings when IRS was utilized to control or prevent epidemics.		3.5.1			
% of refugee operations that provide blood transfusions which screen blood for HIV in a quality-assured manner.	3.2.1			3.4.6	
% refugee operations where universal precautions are satisfactorily applied.	3.3.1			3.4.5	
% countries, when indicated, where pregnant women received antiretroviral medication to reduce the risk of mother to child transmission of HIV.	3.8.1			3.1.3	
% countries reporting provision of PEP to survivors of rape within 72 hours of rape.	3.9.1			3.5.2	
Incidence of male urethral discharge – by age.	3.4.1			3.4.1	
Incidence of genital ulcer disease – by age and sex.	3.4.2			3.4.2	
% of clients tested for syphilis with a positive result –by age and sex.	3.4.3			3.4.3	
% of partners/contacts of STI patients that were notified and treated –by age and sex.	3.4.4			3.4.4	
% of refugee operations where sufficient number of male and female condoms are distributed.	3.10.1			3.4.7	
% of newborns born with <2500g of weight.			3.1.2	3.2.3	
% of infants (<6 months of age) exclusively breastfed for the first six months of life.			3.3.2	3.2.4	

¹ These indicators are relevant to the monitoring of cross-cutting objectives that are shared between the Malaria, HIV/AIDS, Reproductive Health, Nutrition/Food Security and Water and Sanitation strategic plans.

Table 2: Indicators referred to in More than One Strategic Plan²

INDICATORS	Cross-references by indicator numbering				
	HIV/AIDS	Malaria	Nutrition and Food Security	Reproductive Health	Water and Sanitation
Nut/FS (1.1.1) Prevalence of global acute malnutrition (GAM) for children 6-59 months of age.	X				
Malaria (1.2.1) % of women receiving LLIN/ITN during pregnancy in emergency phase.	X		X	X	X
Malaria (1.2.2) % of households with ≥ LLIN/ITN in stable phase.	X		X	X	X
WatSan (1.3.1) % of camps having ≥ 20L of water per person per day.			X		
HIV (1.5.1) % of refugee children by sex enrolled in grades 1-6.		X	X	X	X
HIV (1.5.2) % of refugee children enrolled by sex in grades 7 -12.		X	X	X	X
HIV (1.4.1) % of countries that have integrated GBV prevention and response activities into HIV activities.				X	
Nut/FS (1.2.1) Amount of food distributed through general food ration, as % of planned amount, as measured by: kilocalories, fat/energy percentage, protein/energy percentage, and selected micronutrients.				X	
RH (1.1.3) Number of reported cases of GBV, segregated per type, age and sex.	X				X
RH (1.2.1) % of operations supporting health clinics with treatment and case management protocols for rape survivors in place.	X				
RH (1.4.1) % of all birth that take place in EmONC facilities.	X				
RH (1.4.2) % of women who had at least 4 antenatal care visits to a health professional with midwifery skills by time of delivery.	X				
RH (1.5.1) % of women who delivered before age of 18 years (teenage pregnancies).	X				

² Unlike in Table 1, the indicators in Table 2 are only written in one strategic plan but are referenced as being applicable in one or more other strategic plans.

Table 2: Indicators referred to in More than One Strategic Plan² (cont.)

INDICATORS	Cross-references by indicator numbering				
	HIV/AIDS	Malaria	Nutrition and Food Security	Reproductive Health	Water and Sanitation
RH (2.2.1) % of UNHCR operations systematically investigating every maternal death.	X				
HIV (3.2.1)/RH (3.4.6) % of refugee operations that provide blood transfusions which screen blood for HIV in a quality-assured manner.		X			
Nut/FS (3.2.4) Prevalence of anaemia in children 6-59 months of age.		X			
Nut/FS (3.2.5) Prevalence of anaemia in women 15-49 years of age.		X		X	
WatSan (3.5.2) % of camps with ≤ 500 persons per communal refuse pit.		X			
Nut/FS (3.1.3) % of pregnant and lactating women provided supplementary feeding.				X	
HIV (3.1.1) % countries that have access to culturally appropriate HIV and AIDS information, education, communication materials.			X	X	
Malaria (3.6.1)/RH (3.1.4) % of pregnant women presenting at ANC who receive ≥2 doses of IPTp, when appropriate.	X				
RH (3.1.1) % of pregnant women screened for syphilis during the antenatal period.	X				
RH (3.1.2) % of antenatal care mothers that tested positive for syphilis.	X				
RH (3.2.1) % of all birth through Caesarean section.	X				
RH (3.2.2) % of camps with access to EmONC, 24 hours per day, 7 days per week.	X				
RH (3.2.4)/Nut/FS (3.3.2) % of infants (0-<6 months of age) exclusively breastfed for the first six months of life.	X				
RH (3.3.1) % of women who use (or whose partner uses) a modern family planning method.	X				
RH (3.5.2) % of UNHCR operation ensuring access and availability of emergency contraception.	X				

Table 2: Indicators referred to in More than One Strategic Plan² (cont.)

INDICATORS	Cross-references by indicator numbering				
	HIV/AIDS	Malaria	Nutrition and Food Security	Reproductive Health	Water and Sanitation
RH (3.5.1) % of countries reporting provision of emergency contraception to non pregnant rape survivors within 120 hours of rape.	X				
Nut/FS (3.3.3) % of non-breastfed infants with access to necessary quantity of breast milk substitute, resources and follow-up.	X				
Malaria (3.4.1) % households that have ≥1 distributed net six months after net distribution.			X		
Malaria (3.4.2) % inpatient facilities that have LLIN/ITN for each bed.			X		
HIV (3.8.1) % countries, when indicated, where pregnant women and the infant received antiretroviral medication to reduce the risk of mother to child transmission of HIV.			X		
Nut/FS (4.1.2) % of SFPs that adhere to standard treatment protocols.	X				
Nut/FS (4.2.1) % operations where community-based management SAM is being implemented where HCR determined it is appropriate and necessary.	X				
Nut/FS (4.2.3) % of TFPs that adhere to standard treatment protocols.	X				
Malaria (4.1.1) % of operations where refugees are provided with appropriate returnee packages defined here as ≥1 LLIN/ITN per household and instructions on use, where appropriate.	X		X	X	
RH (4.1.1) % of operations where refugees are provided with appropriate returnee packages for reproductive health (defined here as sanitary towels and family planning material).	X				
RH (4.1.3) % of programmes at point of return that offer EmONC services.	X				
Nut/FS (5.1.1) % of operations where refugees are provided with appropriate returnee food package.	X				
Nut/FS (5.1.2) % of operations where nutrition and food security have been designed or integrated in exit strategies (integration areas or areas of return).	X				
RH (6.1.1) % of reproductive health assessments undertaken during initial emergency phase based on standard checklist.	X				

Notes

A series of horizontal dotted lines for writing notes.

