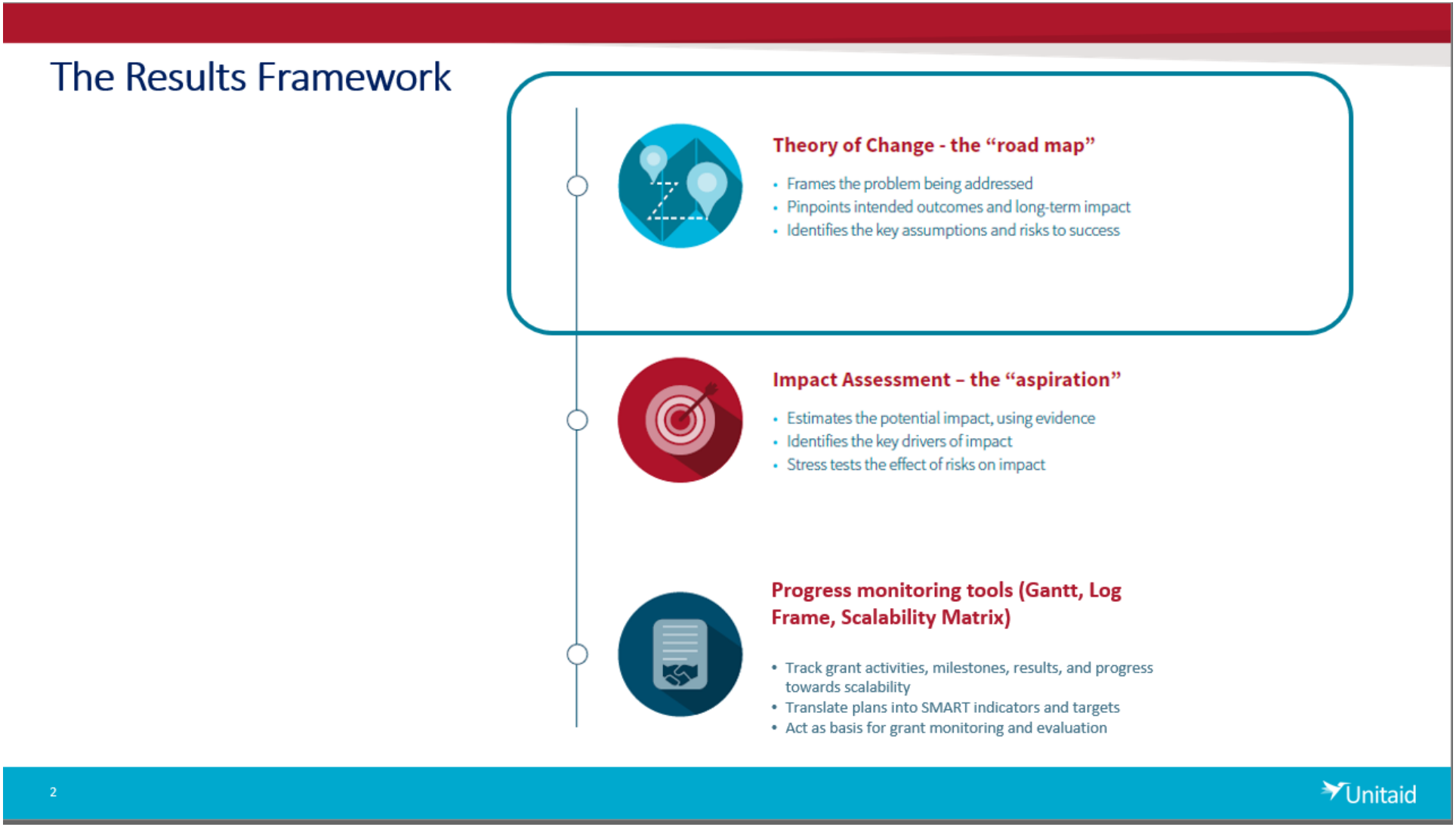
Results Framework 2021

JANUARY 2021

Unitaid
Innovation in Global Health

This document provides an overview of Unitaid's results framework approach to aid applicants' proposal development.

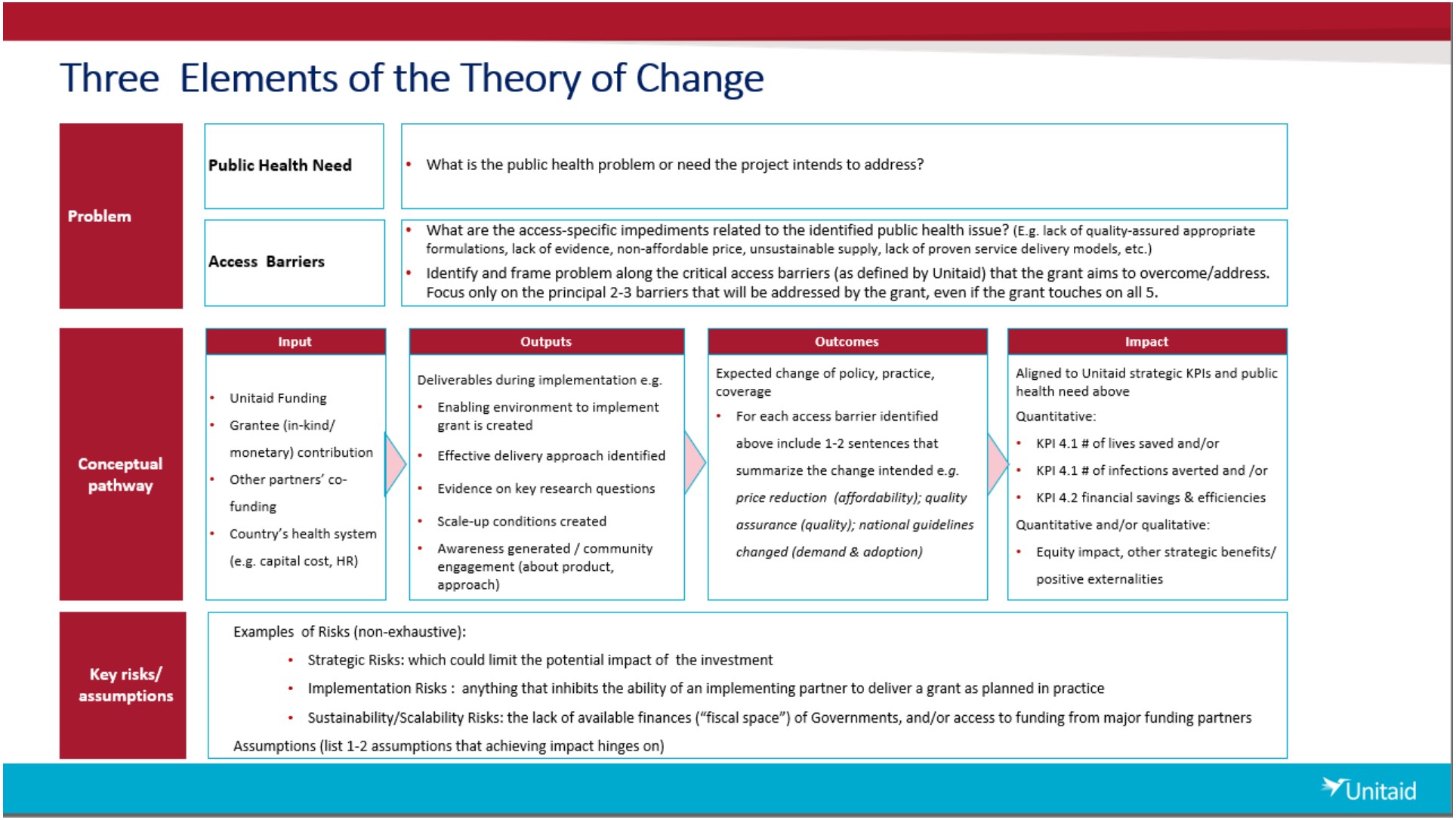


Unitaid's Results Framework has three main components, which are interlinked:

1. The first is the **Theory of Change** – which lays out the road map for the project – defining the public health problem and how the project activities will address key access barriers and lead to impact.
2. The second component is the **impact assessment** – which helps quantify the potential impact of the project.
3. The third is a collection of **progress monitoring tools** (Gantt chart, Logframe and Scalability matrix), which serve as the basis for ongoing project monitoring & evaluation.

The following slides will go into more detail on each of these components.

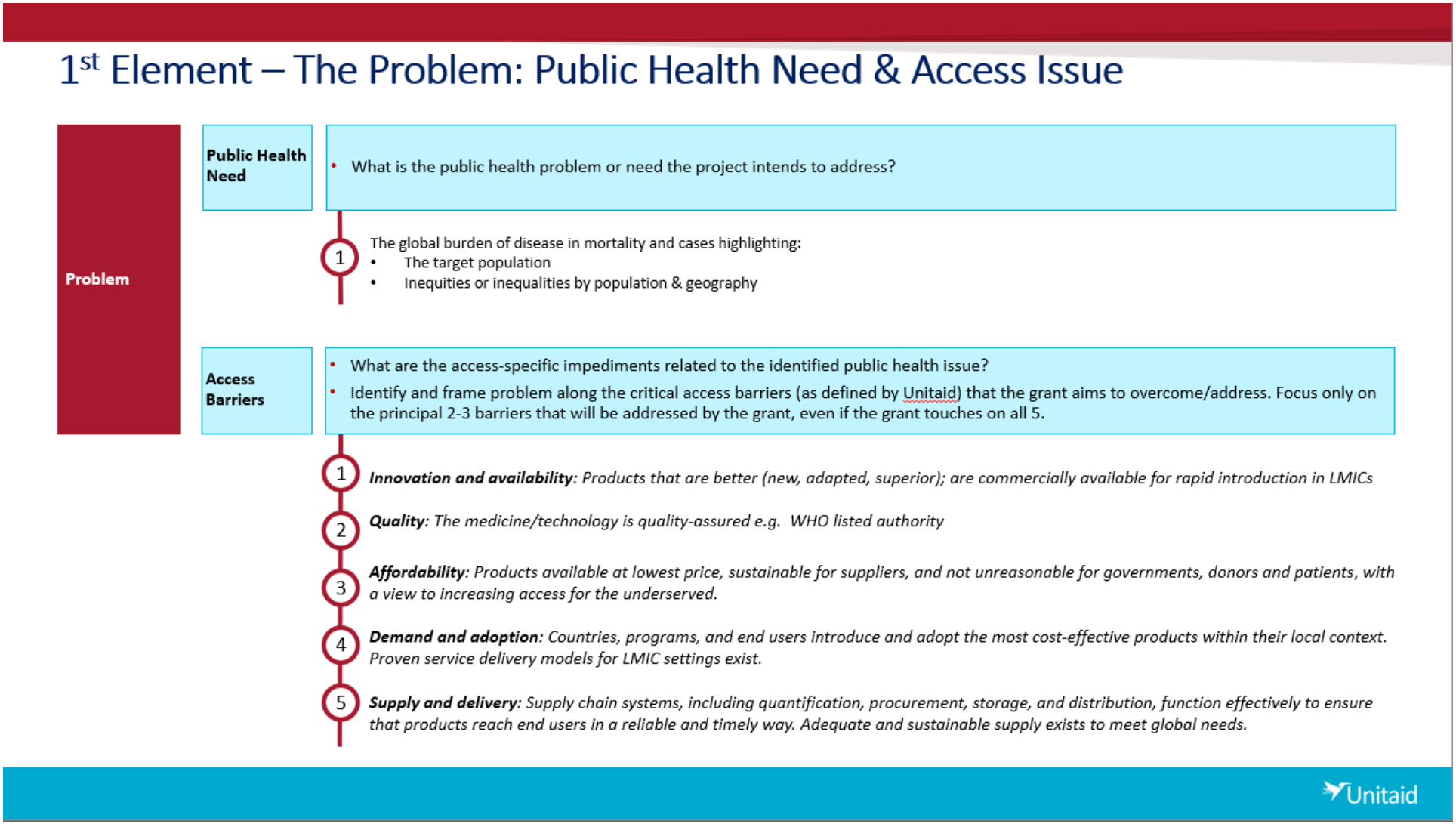
Three Elements of the Theory of Change



This is the schematic of the Theory of Change (TOC), and shows the three key elements of the TOC:

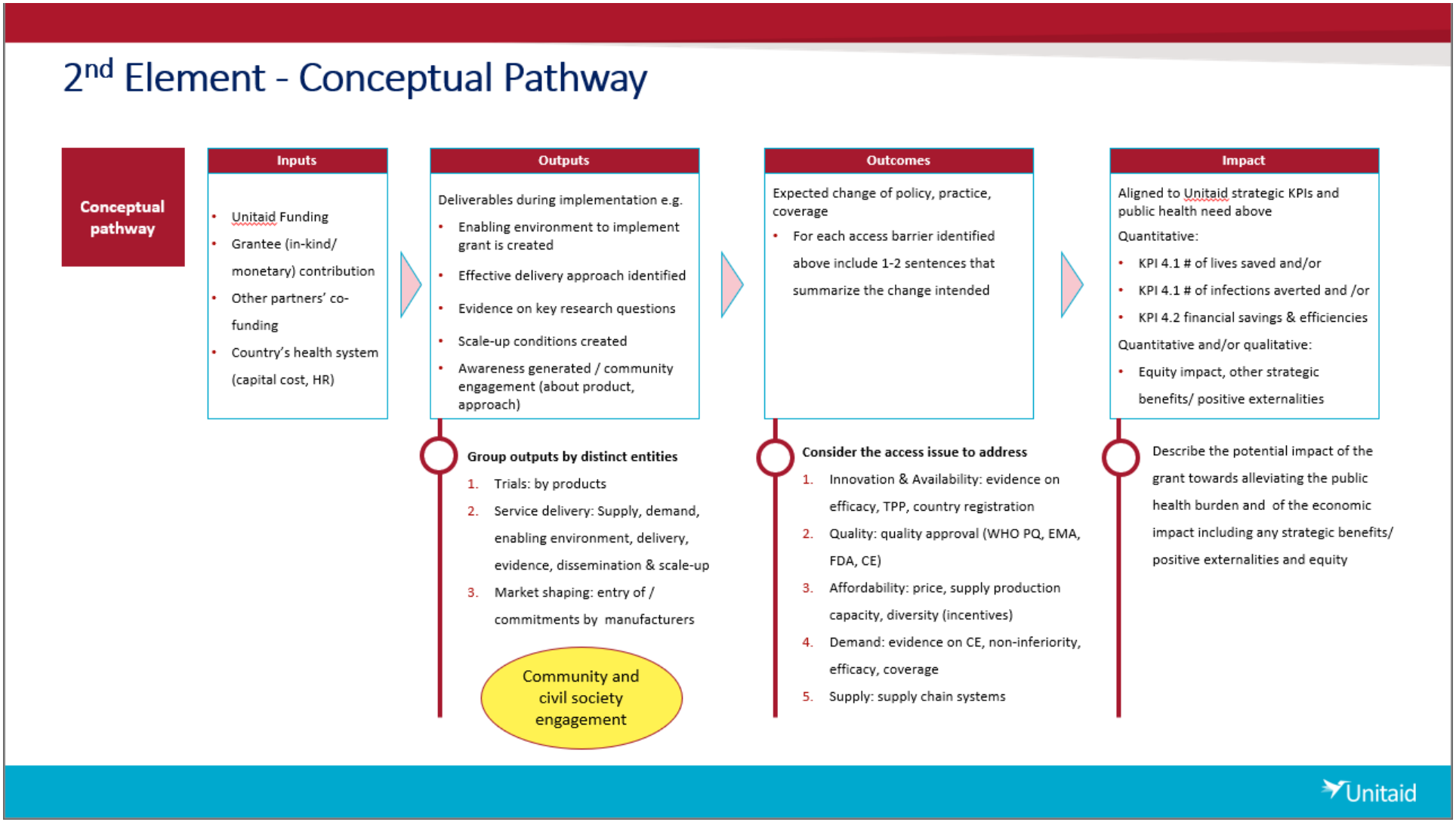
1. the problem,
2. the conceptual pathway, and
3. the risks and assumptions.

The next slides explain these elements in detail.



The Problem section defines the existing health challenge, which the project will address in two ways:

1. The public health problem or need that the project will address: this section should highlight the global burden of disease, the target populations and any inequities or inequalities by population and geography.
2. The access barriers – i.e. what conditions prevent beneficiaries from accessing the most optimal tools or interventions that would address the public health problem identified above. Unitaid has identified 5 broad access barriers and expects that any project is likely to focus largely on 1-3 of these access barriers.



The second element of the TOC is the backbone of the project – it outlines the conceptual pathway from inputs, through outputs and outcomes through to impact.

1. **Inputs**: A summary of key resources for the project including in-kind contribution and other important health system resources from countries
2. **Outputs**: A list of project outputs grouped by distinct entities (e.g. for clinical trials: by product; for service delivery: could be categorized as demand generation, delivery, enabling environment, etc.). Some examples are provided in the slide.
   One important element to highlight is the role of communities and civil society. Unitaid views active engagement with communities and civil society--from project design and throughout implementation--as key to ensuring the scalability of Unitaid's interventions. We ask applicants to consider upfront what role communities and civil society can and should play in the proposed project. For more detail, refer to the proposal form.

3. **Outcomes**: Summary of the expected change in terms of policy, practice and coverage, with 1-2 bullets relating to each access barrier identified in the *Problem* section.
4. **Impact**: A summary of the public health benefits and economic savings to be achieved directly and indirectly by the project. These are defined both in quantitative and qualitative terms. The qualitative aspects are referenced descriptively in the Theory of Change and the proposal form (and later, for successful applicants, in the Project Plan), but are usually not measured.

Unitaid's Strategy has defined key performance indicators (KPIs) aligned to the Outcome and Impact section and some of these KPIs are shown here.
As we move from inputs to impact in the conceptual pathway, we recognize that other actors/stakeholders start assuming an important role in ensuring/contributing to the success of the project i.e. the proposed grant implementer is not solely accountable for achieving the outcomes and impact of the project.

3rd Element – Key Risks & Assumptions

Key risks / assumptions

Examples of risks (non-exhaustive):

- Strategic Risk: which could limit the potential impact of the investment
- Implementation Risk : anything that inhibits the ability of an implementing partner to deliver a grant as planned in practice
- Sustainability/Scalability Risk: the lack of available finances ("fiscal space") of Governments, and/or access to funding from major funding partners

Assumption: (list 1-2 assumptions that achieving impact hinges on)

1. ***Strategic risks:*** *Limit potential impact. e.g. difficulty in accessing / identifying the target population (ex. pre-exposure prophylaxis for HIV requires identifying those at substantial risk of HIV infection); evolving policy landscape that puts at risk the continued relevance of the intervention*
2. ***Implementation risks:*** *Limit success/effectiveness of implementing the grant. e.g. rectal artesunate for pre-referral management of severe malaria requires existence of strong referral system*
3. ***Sustainability/scalability risks:*** *Limit continued support after grant and/or potential for scale-up. e.g. continued financial support after project end; alignment among key partners; enabling policies in place*

Assumptions: *1 – 2 . Conditions expected to be true or in place and are necessary for the success of the project*

NOTE:

- Assumptions and risks are both outside the total control of the project team.
- If the event is within the control of the project team it is neither an assumption nor a risk. It should simply be managed to make it happen.

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The third element of the TOC summarizes the key risks and assumptions. Unitaid groups risks into three categories – strategic risks, implementation risks, and sustainability/scalability risks, which are defined in the slide. The TOC lists only a subset of the risks relevant for the grant; there is opportunity to cover all project risks more extensively in the risk section of the proposal form.

Assumptions refer to conditions that are expected to hold true or be in place that are necessary for the success of the project. The TOC should include the most critical risks and assumptions for the project.

The Results Framework

Theory of Change - the "road map"

- Frames the problem being addressed
- Pinpoints intended outcomes and long-term impact
- Identifies the key assumptions and risks to success

Impact Assessment – the "aspiration"

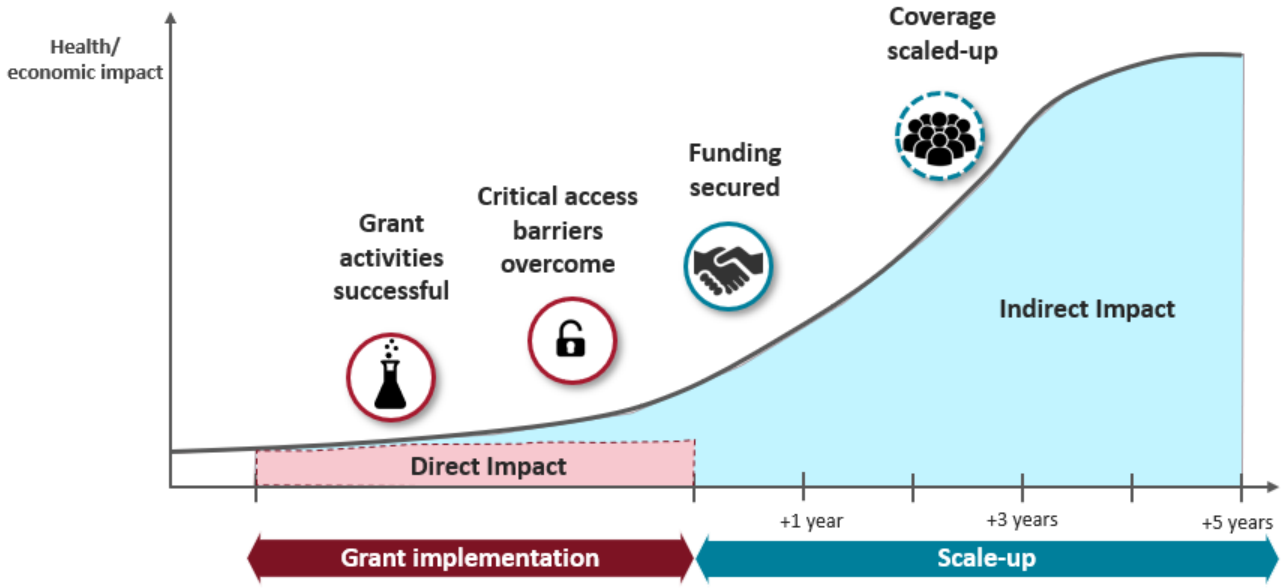
- Estimates the potential impact, using evidence
- Identifies the key drivers of impact
- Stress tests the effect of risks on impact

Progress monitoring tools (Gantt, Log Frame, Scalability Matrix)

- Track grant activities, milestones, results, and progress towards scalability
- Translate plans into SMART indicators and targets
- Act as basis for grant monitoring and evaluation

How Unitaid thinks about impact

Unitaid's strategy is centered on making time-limited investments that enable equitable access to better health products. The ultimate goal for all Unitaid grants is to catalyze "scale up" of these health innovations. Unitaid grants are designed to overcome critical access barriers for innovative health products, and to lay the groundwork for countries and partners to scale up these products with high levels of coverage and impact.



Direct Impact:

- Achieved directly through grant activities and with grant-specific funding only

Indirect Impact:

- Catalyzed by grant activities
- Utilizes other funding and implementation partners
- Indirect impact can start during grant implementation if scale-up begins before the grant ends

What do we mean by *impact*?

Unitaid takes a multi-dimensional approach to impact that includes both quantitative and qualitative elements. The impact areas outlined below are a reflection of Unitaid's strategy and Key Performance Indicators (KPIs). When referencing "impact" we mean *additional impact* of the project, over-and-above what would occur in the absence of the Unitaid investment.

Quantified in impact assessment and summarized in impact section of proposal

Qualitative dimensions to include in descriptive portion of the impact section of the proposal

IMPACT AREAS	Core indicators to include in impact assessment	Optional indicators to include in impact assessment (non-exhaustive)
Public health impact	• Additional lives saved or YLS and/or • Additional cases or infections averted	• Additional patients cured • Additional DALYs averted • Additional complications averted
Economic impact	• Net cost or net cost saving to the health system	• Patient/beneficiary financial savings • Productivity gains or losses
Equity impact	**Does the grant benefit underserved populations?** • Vulnerable or high-risk populations in the disease context (children, pregnant women, etc.) **How does the grant promote equitable access to innovation?**	
Strategic benefits & positive externalities	**Will the investment achieve impact in any of the following areas?** • Antimicrobial or insecticide resistance • Integration across diseases or health services areas • Catalyzing the pipeline • Maternal and child health outcomes • Health system benefits beyond scope of the project	

Value for Money (VfM) analysis such as cost-effectiveness (CE) ratios

The Results Framework

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Progress monitoring tools (Gantt, Log Frame, Scalability Matrix)

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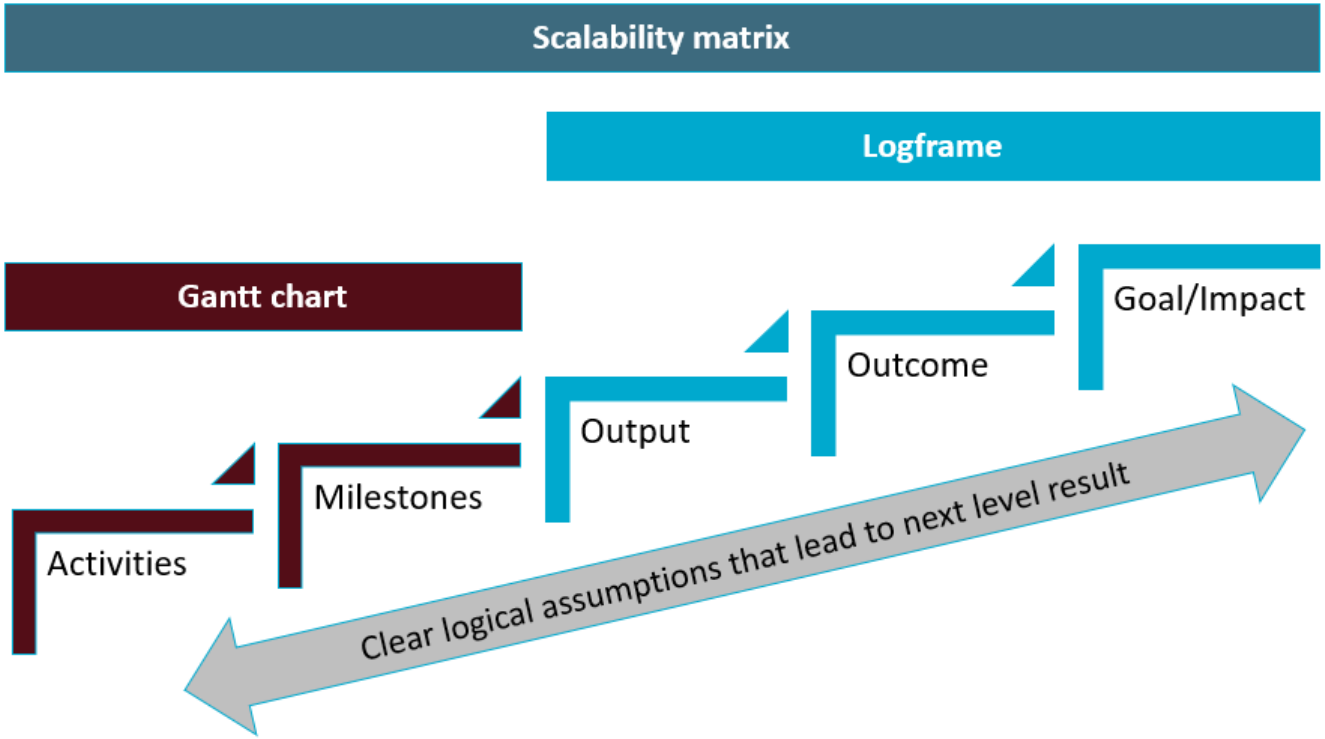
3 main components of progress monitoring

- Gantt chart
- Logframe
- Scalability matrix



Unitaid includes three main components in its approach to progress monitoring:

1. the Gantt chart covering activities and milestones,
2. the logframe defining indicators and targets for outputs, outcomes and impact, and
3. the scalability matrix that outlines progress towards global and country readiness for scale-up and links directly to the Gantt chart and logframe.

The Gantt Chart

- **Activity**: A piece of work that has an expected duration, cost, and human resource need
- **Milestone**: Important event or accomplishment. Often linked to a deliverable (tangible product for the milestone)

The Gantt Chart template

Project Gantt Chart

		Year				Year				Year				Year				Year			
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
OUTPUT 1: Insert title of output																					
Activity 1.1: Insert concise description of activity																					
1.1.1	Activity detail																				
1.1.2	Activity detail																				
1.1.3	Activity detail																				
Activity 1.2: Insert concise description of activity																					
1.2.1	Activity detail																				
1.2.2	Activity detail																				
Milestone 4	Milestone summary		◆									◆									
Milestone 5	Milestone summary															◆					

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The Gantt chart is a snapshot of the project activities and milestones over the timeline of the project – as shown in the template on the slide. It is organized according to the outputs and it should outline all the key activities and sub-activities. In addition, for each output a set of milestones – essentially deliverables – should be outlined with a target date in terms of quarters.

The Logframe

Aligned with the

- Conceptual pathway of the Theory of Change
- Quantitative KPIs from the Impact Assessment

	Definition	Indicators
Goal/ Impact	• The aim or desired long-term results that an intervention seeks to contribute towards. • The impact is not intended to be achieved solely by the project.	Quantify the public health and economic impact contributed by the project
Outcome	• Represents the change to which the project will contribute & defines the access barrier(s) to be addressed	Quantify the catalytic success as a result of the project and other external efforts
Output	• Capture the immediate deliverables of the project, tangible products, goods and services • Often directly attributed to the activities of the project	Quantify the direct results of the activity implementation

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The second component is the logframe – which is aligned with the conceptual pathway of the TOC and also incorporates quantitative KPIs from the impact assessment.
There are three levels to the logframe – starting with the goal/impact level representing the longer-term results of the project, with indicators at the impact level. The second is the outcome level, showing the change the project will contribute to and followed by the output level – capturing the immediate, tangible deliverables of the project that can be directly attributed to the project activities.

Defining Logframe Indicators

	Things to consider	Examples
Goal	From impact assessment and includes 1. **Public Health impact:** improved health outcomes – reduction on mortality and incidence 2. **Economic Impact:** savings (in price or effective delivery) and efficiency (future treatment cost avoided or services not utilized)	<table><tr><th></th><th>Direct impact 2018–2020</th><th>Indirect impact 2021–2025</th></tr><tr><td>Additional lives saved</td><td>4,000 [2,600–5,400]</td><td>60,000 [45,000–90,000]</td></tr><tr><td>Additional infections averted</td><td>9,000 [7,000–10,200]</td><td>130,0000 [105,000–160,000]</td></tr><tr><td>Efficiencies & savings</td><td>1.5M [0.8M–1.7M]</td><td>15.2M [8.5M–18.1M]</td></tr></table>
Outcome	1. At least one indicator for each **access barrier** to be addressed by the project, as defined in Theory of Change 2. Change in **knowledge, attitudes, practice, quality and coverage** (awareness, acceptability, policy adoption, access to services)	1. # of products receiving QA by WHO PQ 2. Price reduction 3. Normative guideline/policy rec. by WHO 4. Implementation guideline endorsed by MoH 5. Product integrated in national LMIS
Output	1. **Clinical trials, product development, advocacy**: Based on key milestones. Can track # of milestones per reporting period 2. **Delivery grants**: # of products distributed, # of people (patients, HCW) reached with services, 3. **Community & civil society engagement**: Ensure activities that are relevant to project's objectives, as well as sufficient budget.	1. # of key milestones achieved 2. # of target population reached with services 3. # of policy briefs, technical reports published/presented in conferences 4. # community members sensitized 5. # women referred by CHWs to clinic services

Note: The logframe monitors performance of
1) the success of the project (may include elements beyond implementing partner control e.g. drug efficacy)
2) progress & quality of implementation is mostly within the control of the implementing partner

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This slide outlines considerations for defining indicators at each level of the logframe. Two things to point out:
1) At the **outcome level** – we ask applicants to define indicators for each access barrier identified in the TOC.
2) On **community and civil society engagement (CCSE)** – Unitaid's position is that all grants can benefit from community and civil society involvement, but the specific activities or focus would vary based on the project's objectives. For some, generating demand for a product might be key, for others community-based delivery could ensure more rapid uptake of an innovation, etc. Whether included as a stand-alone CCSE output or as part of a broader output, focused on demand generation or advocacy, for example, we ask applicants to ensure that their project includes CCSE activities and associated budget, as well as relevant indicators in the logframe and/or ways to capture progress in CCSE qualitatively.

Logframe Template

Results	SMART indicators	Means of verification / Data sources	Assumptions, rationale for indicator use	Reporting Frequency	Indicator Numerator	Indicator Denominator	Baseline and targets: insert additional rows for disaggregation								
							Disaggregation (if applicable)	Baseline (Specify Year in "()")	Year 1 annual target (YYYY)	Year 2 annual target (YYYY)	Year 3 annual target (YYYY)	Year 4 annual target (YYYY)	End of Project Target (Specify year in "()")	Post grant (Specify years in "()")	Comments (on baselines, annual targets, end-of-project targets)
Goal (Impact) :															
Indicator G1														(Cumulative) Projections (20XX - 20YY)	
Indicator G2														(Cumulative) Projections (20XX - 20YY)	

Some guidance in filling the columns

1. ***Means of verification***: *Considers how, who & when. This will help to test whether or not the indicators can be realistically measured in terms of time, money and effort.*
2. ***Assumptions & rationale***: *Why is the indicator relevant for tracking progress of the output or outcome. Consider the cause and effect (if-then) of the logic that influences success of the output and outcome.*
3. ***Reporting frequency***: *Can be annual or semi-annual. Consider using annualized that are summed up at end of project (rather than cumulative). For most output-level indicators, semi-annual reporting of indicators is expected, while outcome-level indicators are generally reported annually.*
4. ***Disaggregation***: *Consider disaggregation that is relevant to the intervention and its equity objectives, e.g., if women or adolescents are considered an underserved population, having disaggregated data by sex and age group, respectively, would facilitate timely identification of differences and course correction.*
5. ***Baseline & Targets***: *Are defined and agreed prior to grant signature. In the event that baselines are not available at grant signature, a plan to include baselines must be established with a clear date for finalization.*

Note:

1. Logframe is only a summary of data that will be collected – more information is collected by the grantee and can be reported in the narrative report.
2. Logframe is a dynamic tool and modifications can be made during the lifetime of a project to better represent its evolution.

However,
Addition of new outputs, activities, or indicators or their deletion must be made in consultation with Unitaid *prior* to any modifications to the logframe.

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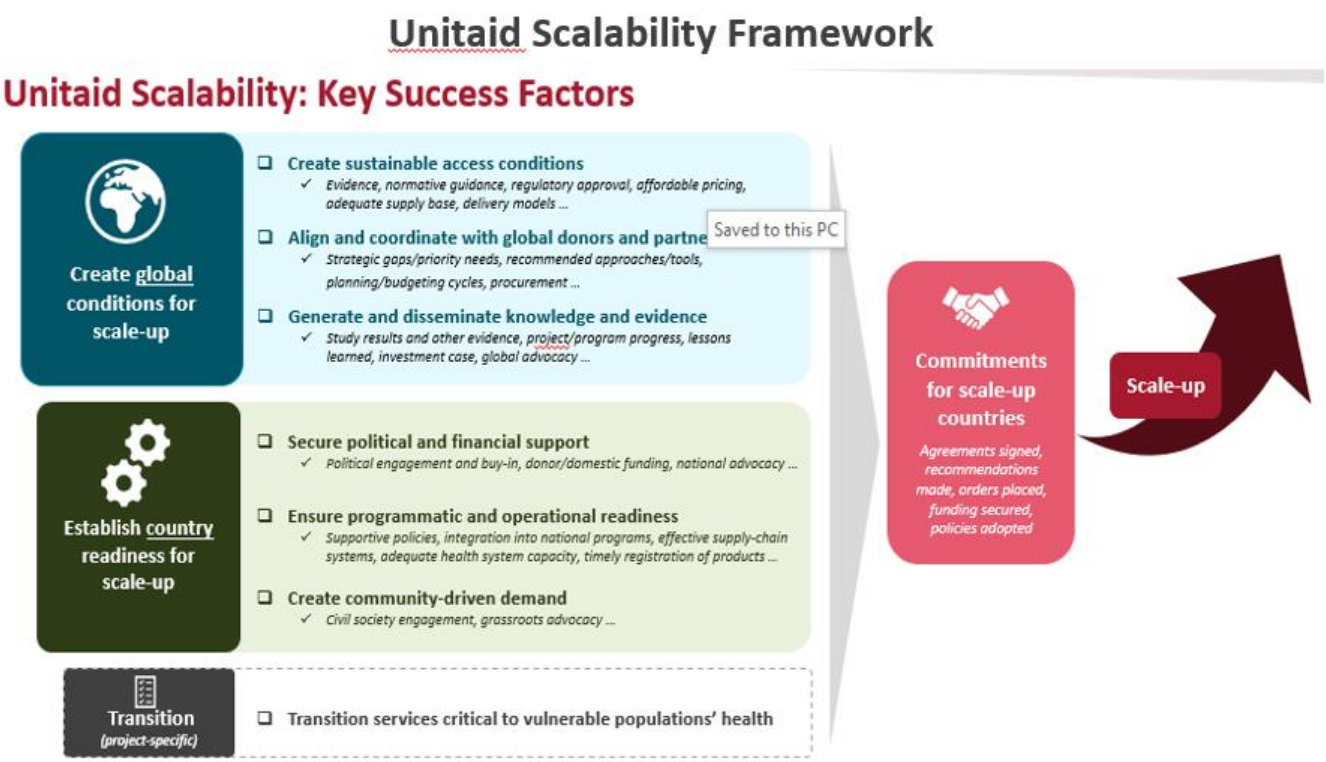
This slide gives a snapshot of the logframe template. It provides a standard set of information for each indicator, including the definition, means of verification, assumptions and rationale, reporting frequency, disaggregation and baselines and targets.

Scalability Matrix - Overview

- Planning and reporting tool aligned with Unitaid's scalability framework
- Linked directly to the logframe and Gantt chart
- Establishes baseline and targets for tracking global and country readiness



Finally, the third component is the scalability matrix, which is a planning and reporting tool aligned with Unitaid's scalability framework shown here on the slide. The scalability framework outlines the key conditions that need to be in place at global and country level to facilitate scale-up of project interventions.

The scalability matrix links directly to the logframe and Gantt chart and establishes baselines and targets for tracking global and country readiness. More information to applicants is provided in the guidance on the Scalability Framework that accompanies the application package. Note that for the proposal stage Unitaid requires a description of the plans to address scalability at global and country levels, while the scalability matrix planning and reporting tool is completed during the grant agreement development stage.