

**USAID/Ethiopia Indicator Reporting format (To be used by updating throughout the year)**

S#	Name of the indicator (and its disaggregation) by result areas	Targets/plan		Previous Cumulative performance (FY12+FY13Q 1+Q2+Q3)	FY2013 Performances					Cumulative performance to date (FY12+FY13)
		LOP**	FY2013		Q I	Q II	QIII	Q IV	Annual (FY13)	
<b>Result 1: MNH and PMTCT services improved by enhancing and strengthening the enabling environment for MNH care</b>										
	<b>Standard indicators</b>									
1.1	Number of studies	3	2	1	0	0	0	2	1	3
The two studies completed during the reporting period are documentation of promising practices and cultural barriers literature review. In FY2012, baseline assessment of community based Kangaroo mother care was completed.										
1.2	Number of (national) policies drafted with USG support	1	0	1	0	0	0	0	0	1
	<b>Custom indicators</b>									
1.3	Number of midwives who receive professional technical updates through EMA and MCHIP support	300	200	245	0	0	120	0	120	245
<b>Result 2: Availability, accessibility and quality of key MNH and PMTCT services improved</b>										
	<b>Standard indicators</b>									
2.1	Number of deliveries with a skilled birth attendant (SBA) In USG-assisted programs	25,000	17,000	16,210	2,648	3,182	5,152	5,557	16,539	21,767

**USAID/Ethiopia Indicator Reporting format (To be used by updating throughout the year)**

S#	Name of the indicator (and its disaggregation) by result areas	Targets/plan		Previous Cumulative performance (FY12+FY13Q 1+Q2+Q3)	FY2013 Performances					Cumulative performance to date (FY12+FY13)
		LOP**	FY2013		Q I	Q II	QIII	Q IV	Annual (FY13)	
2.2	Number of births delivered by caesarean section in USG assisted programs	9,800	6,558	5,693	1,118	1,008	1,325	1,381	4,832	7,074
2.3	Number of postpartum/newborn visits within 3 days of birth in USG-assisted programs	25,000	17,000	17,654	3,091	3,195	5,482	5,790	17,558	23,444
2.4	Number of first ANC visits by skilled providers from USG assisted facilities (health centers only)	70,000	45,000	55,444	9,353	8,086 <sup>1</sup> 10,718	12,256	12,110	44,437	67,554
2.5	Number of health workers trained by cadre on maternal and newborn health services	3,200	1,350	4,290	236	384	443	441	1,504	4,731
	Over achievement in number of individuals trained was due to addition of IESO site strengthening at request of MOH and USAID to support site standardization which resulted in additional training. Use of onsite training in quality improvement training also contributed to include additional trainees in the PQI trainings.									
2.6	Number of USG-assisted service delivery points providing FP counseling or	16	16	26	16	26	26	26	26	26

<sup>1</sup> In the previous quarters it was erroneously reported; this is now corrected

**USAID/Ethiopia Indicator Reporting format (To be used by updating throughout the year)**

S#	Name of the indicator (and its disaggregation) by result areas	Targets/plan		Previous Cumulative performance (FY12+FY13Q 1+Q2+Q3)	FY2013 Performances					Cumulative performance to date (FY12+FY13)
		LOP**	FY2013		Q I	Q II	QIII	Q IV	Annual (FY13)	
	services (the focus is long acting PFP) <sup>2</sup>									
2.7	Number of people trained In FP/RH With USG Funds	192	115	143	0	66	0	0	66	66
2.8	# of clients undergoing post-partum insertion of IUCD	500	400	596	96	82	218	176	582	772
<p>PPIUCD is a new program for Ethiopia and MCHIP set lower target as it was anticipated that acceptability of this method of FP would take a longer time; however the program performed better than anticipated. MCHIP adheres to USAID's FP compliance and does not provide targets to health facilities and providers at site level.</p>										
2.9	Number/Percentage of MCHIP supported health facilities demonstrating increased compliance with clinical standards over baseline	50% (36)	50% (36)	0	0	0	0	0	38% (28 <sup>3</sup> )	38% (28)
2.10	Number of pregnant women who were tested for HIV and know their results	22,937	22,937	18,706	5,011	6,810	6,869	5,552	24,242	24,242
2.11	Percentage of HIV positive pregnant women who	100% 186		7 (52%)	6/11 <sup>4</sup> (55%)	16/23 (70%)	8/13 (53%)	42/42 (100%)	72/89 (81%)	72/89 (81%)

<sup>2</sup> PFP site includes 18 sites providing comprehensive PFP services (counseling and PP-IUCD insertion services), eight sites providing PFP counseling services only).

<sup>3</sup> Compliance with clinical standard means attainment of 80% of performance standards on self-assessment as verified by external assessors but this indicator was compiled based on facilities self-report. External verification is planned in the first two quarters of FY2014. Under achievement of this target is due to longer than expected delays with some facilities in being able to complete their internal assessments which is required prior to external verification.

USAID/Ethiopia Indicator Reporting format (To be used by updating throughout the year)

S#	Name of the indicator (and its disaggregation) by result areas	Targets/plan		Previous Cumulative performance (FY12+FY13Q 1+Q2+Q3)	FY2013 Performances					Cumulative performance to date (FY12+FY13)
		LOP**	FY2013		Q I	Q II	QIII	Q IV	Annual (FY13)	
	<p>received antiretrovirals to reduce the risk of mother-to-child transmission</p> <p>N: Number of HIV positive pregnant women who received antiretrovirals to reduce the risk of mother-to-child transmission</p> <p>D: Number of HIV positive pregnant women identified in the health facility</p>		70							
2.12	<p>Percentage of newborns born to HIV+ mothers who received ARV prophylaxis<sup>5</sup></p> <p>N: Number of newborns born to HIV+ mothers who received ARV prophylaxis</p> <p>D: Number of infants born to HIV positive mothers in the facility</p>	100% 70	100% 70	14/14 (100%)	8/8 (100%)	6/6 (100%)	6/6 (100%)	6/6 (100%)	26/26 (100%)	26/26 (100%)

<sup>4</sup> Based on comments from USAID MCHIP is reporting the numerator and denominator in Indicators 2.11 – 2.14.

<sup>5</sup> Percentage is calculated from the actual number of infants born to HIV positive women whereas target is set using expected number of HIV positive mothers in the population

USAID/Ethiopia Indicator Reporting format (To be used by updating throughout the year)

S#	Name of the indicator (and its disaggregation) by result areas	Targets/plan		Previous Cumulative performance (FY12+FY13Q 1+Q2+Q3)	FY2013 Performances					Cumulative performance to date (FY12+FY13)
		LOP**	FY2013		Q I	Q II	QIII	Q IV	Annual (FY13)	
2.13	Percentage of infants receiving cotrimoxizole (CTX) prophylaxis <sup>6</sup>  N: Number of infants receiving cotrimoxizole (CTX) prophylaxis  D: Number of HEI identified in the reporting period	50% 35	50% 35	8 (24%)	6/7 (86%)	2/9 (22%)	6/11 (55%)	3/10 (30%)	17/37 (46%)	17/37 (46%)
2.14	Percent of infants born to HIV-positive women who received an HIV test within 12 months of birth <sup>7</sup>  N: Number of infants born to HIV-positive women who received an HIV test within 12 months of birth  D: Number of HEI identified in the reporting period	50% 103	35 (50%)	4 (28%)	3/7 (43%)	1/9 (11%)	6/11 (55%)	3/10 (30%)	13/37 (35%)	13/37 (37%)
	<b>Custom indicators</b>									

<sup>6</sup>Percentage is calculated from the actual number of infants born to HIV positive women whereas target is set using HIV prevalence of the population

<sup>7</sup> Percentage is calculated from the actual number of infants born to HIV positive women whereas target is set using HIV prevalence of the population

**USAID/Ethiopia Indicator Reporting format (To be used by updating throughout the year)**

S#	Name of the indicator (and its disaggregation) by result areas	Targets/plan		Previous Cumulative performance (FY12+FY13Q 1+Q2+Q3)	FY2013 Performances					Cumulative performance to date (FY12+FY13)
		LOP**	FY2013		Q I	Q II	QIII	Q IV	Annual (FY13)	
2.15	Percent of births with correct use of Partograph to manage delivery in MCHIP supported facilities	75%	75%	42%	0	0	0	0	68%	55%
2.16	Number of MCHIP supported health centers that practice KMC	104 100%	104 100%	66	66	107	107	107	107	104 100%
2.17	Number of babies who received KMC at facility level	11,000	7,000	2,350	1,243	2,676	2,951	2,710	9,580	11,048
2.18	Number/Percent of IESO graduate sites that are standardized to provide emergency surgical services	100% (37)	100% (37)	17		17	17	17	17	17 46%
<b>Intermediate Result 3: Care takers' knowledge and behaviours on key MNH/Post-partum FP/PMTCT household and care seeking practices improved</b>										
	<b>Custom indicators</b>									
3.1	Number of IEC/BCC materials printed and distributed on newborn care	20,000 job aids	5,400 job aids	24,176	0	6,600	119	0	6,970	24,176
3.2	Number of health posts that practice CKMC	82	82	82	82	82	82	82	82	82

USAID/Ethiopia Indicator Reporting format (To be used by updating throughout the year)

S#	Name of the indicator (and its disaggregation) by result areas	Targets/plan		Previous Cumulative performance (FY12+FY13Q 1+Q2+Q3)	FY2013 Performances					Cumulative performance to date (FY12+FY13)
		LOP**	FY2013		Q I	Q II	QIII	Q IV	Annual (FY13)	
3.3	<p>Ratio of treated pneumonia cases to expected cases by ICCM condition in a given catchment area</p> <p><b>N:</b> # of diarrhea treatments for U5 children provided through iCCM in one year period in a given catchment area</p> <p><b>D:</b> # of diarrhea illnesses expected in a given catchment area in one year period</p>	15%	15%	7.7%	7.8 % (238/3,059)	7.7% (1,242/16,060)	8.04% (1371/17,044)	1.3% (65/5028)	7.1% (2,916/41,191)	7.1% <sup>8</sup>
3.4	<p>Ratio of treated diarrhea cases to expected cases by ICCM condition in a given catchment area</p> <p><b>N:</b> # of diarrhea treatments for U5 children provided through iCCM in one year period in a given catchment area</p> <p><b>D:</b> # of diarrhea illnesses expected in a given catchment</p>	15%	15%	1.2%	1% (330/32,775)	12.3% (2106/17,2076)	0.4% (2844/730455)	0.13%(72/53,876)	2.4% (24,152/989,16)	2.4%

<sup>8</sup> This low performance is due to a misconception by the community that HEW do not provide curative only preventative; sick children therefore bypass the health post and got directly to the HC.

USAID/Ethiopia Indicator Reporting format (To be used by updating throughout the year)

S#	Name of the indicator (and its disaggregation) by result areas	Targets/plan		Previous Cumulative performance (FY12+FY13Q 1+Q2+Q3)	FY2013 Performances					Cumulative performance to date (FY12+FY13)
		LOP**	FY2013		Q I	Q II	QIII	Q IV	Annual (FY13)	
	area in one year period									
3.5	Ratio of treated malaria cases to expected cases by ICCM condition in a given catchment area  N: # of malaria treatments for U5 children provided through iCCM in one year period in a given catchment area  D: # of malaria illnesses expected in a given catchment area in one year period	15%	15%	15.5%	62% (679/1,093)	15.5% (888/5736)	3.97% (967/24349)	6.74% (121/1796)	8% (2655/32,973)	8%
3.6	Proportion of pneumonia cases with consistency between classification and treatment  N: # of pneumonia cases with consistency between classification and treatment  D: total number of pneumonia cases reviewed cases reviewed	80%	80%	78%	45.56% (41/90)	78% <sup>9</sup>	77% (1178/1521)	71.4% (65/91)	75.4% (1284/1,702)	75.4%

<sup>9</sup> The classification and assessment agreement was computed for malaria, diarrhea and pneumonia. Case specific data not available for the particular quarter

USAID/Ethiopia Indicator Reporting format (To be used by updating throughout the year)

S#	Name of the indicator (and its disaggregation) by result areas	Targets/plan		Previous Cumulative performance (FY12+FY13Q 1+Q2+Q3)	FY2013 Performances					Cumulative performance to date (FY12+FY13)
		LOP**	FY2013		Q I	Q II	QIII	Q IV	Annual (FY13)	
3.7	Proportion of malaria cases with consistency between classification and treatment  N: # of malaria cases with consistency between classification and treatment  D: total number of malaria cases reviewed	80%	80%	78%	55% (61/111)	78%	77% <sup>10</sup> (1178/1521)	10.4% (83/799)	64% (392/612)	64% (392/612)
3.8	Proportion of HP that received at least one supervisory contact in the last 30 days N: Number of HP who received at least one supervisory contact in a month period D: Number of HP that implement ICCM	100%	100%	34%	11% (86/796)	34% (267/796)	0	10.4% (83/799)	13.8%	13.8%
	This is an ambitious and unrealistic indicator set by UNICEF and ICCM partners in the National CSTWG and is with the expectation that every HP will be visited every 30 days which is not feasible, and requires review.									

<sup>10</sup> The classification and assessment agreement was computed for malaria, diarrhea and pneumonia