



ANNEX A

TECHNICAL NOTE: METHODOLOGY FOR SCORING THE SADC SRHR SCORE CARD

In November 2018, SADC member states approved the SADC Regional Strategy and Scorecard for Sexual and Reproductive Health and Rights (SRHR) 2019-2030. The SRHR Scorecard is an important monitoring and evaluating tool that set targets as articulated in the Sustainable development Goals (SDGs), descriptions, outcomes and frequency.

The Score card consists of 20 key indicators that covers sexual and reproductive health; comprehensive sexuality education; HIV and AIDS; gender-based violence; child marriage and safe abortion.

The indicators will be divided into two groups. One those that have global or regional target and those that do not. The indicators will be measured using a 'Traffic light' approach:

- GREEN = Member State has achieved the target;

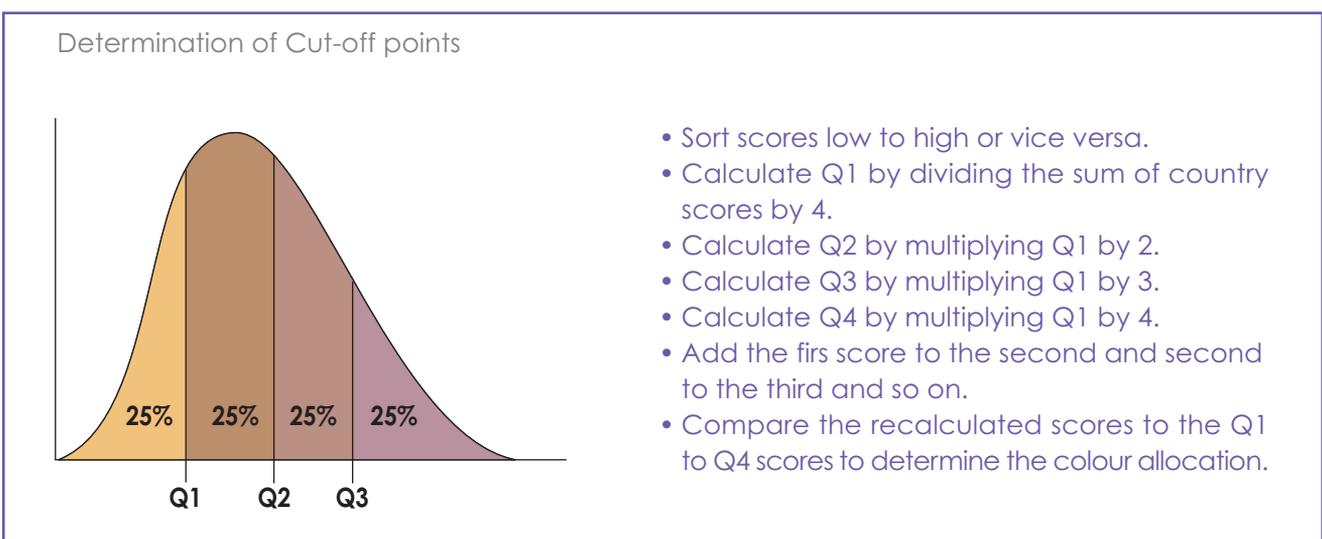
- YELLOW = Progress made but more efforts required to achieve the targets;
- RED = Urgent action required if targets are to be met.

Where global target exists, data from the 16 SADC member states will be used as the initial regional baseline and progress measured year on year. The dataset is sorted in ascending or descending order depending on the nature of the indicator.

Where targets do not exist, the data is divided into three parts. The dataset will be divided into three sections using the interquartile range:

- 1st quartile will consist of the GREEN color - best performers.
- Values in between the 1st and 3rd quartile will fall under the YELLOW color.
- Those below the 3rd quartile will fall under the RED color - worst performers.

The diagram provides the method for calculating the four quartiles.



Indicator	Means of verification	Sources of data
1. Maternal mortality, institutional (to be complemented with population-based estimates or survey data, where available).	Comparison against global target 70 per 100 000	The World Health Organisation (WHO)
2. Neonatal mortality, institutional (to be complemented with population-based estimates or survey data, where available).	Comparison against global target 12 per 100	The World Health Organisation (WHO)
3. Percentage of obstetric and gynecological admissions due to abortion, b) Facility records for the treatment of abortion complications.	Health facilities admission data	Quantifying data is difficult, health facilities record admissions as obstetric or gynaecological complications
4. Adolescent birth rate, 10-19 years of age.	Country health data	The World Health Organisation (WHO)
5. Proportion of population accessing integrated SRH services (total population).	Country health data	Definition of integrated SRHR services unclear; data is not recorded in health facilities
6. Existence of laws and policies that allow adolescents to access SRH services without third party authorization.	Laws exist or not	National laws and policies
7. Percentage of primary and secondary schools that provided life skills-based HIV and sexuality education in the previous academic year.	Country education data	This data is currently not measured annually
8. Unmet need for family planning (contraception).	Country health data	The World Health Organisation (WHO)
9. Percentage reduction in new HIV infections, females 15 - 24.	National HIV and AIDS data	UNAIDS
10. Mother to child transmission of HIV	National HIV and AIDS data	UNAIDS
11. Percentage of condom use with last high-risk sex among adolescent girls and young women aged 15-24 years of age.	National HIV and AIDS data	UNAIDS
12. Sexually transmitted infections (STIs) incidence rate, using the overall rate of syphilis, given the impact of syphilis on sexual and reproductive health outcomes.	Country health data	Country level data on STIs is not consistently gathered or available in central repository
13. Proportion of females who have received the recommended number of doses of HPV vaccine prior to age 15 (age).	Country health data	The HPV is not widely available in health facilities
14. Minimum legal age of consent to marriage, 18 years for all irrespective.	Age of marriage legal provisions	National laws and policies
15. Legal status of abortion	Abortion available on demand or not	National laws and policies
16. Proportion of ever-partnered girls and women (ages 15 and above) subjected to physical and/or sexual violence by a current or former intimate partner, in the last 12 months.	Country GBV prevalence data	Demographic Health Surveys (DHS); not done annually or at regular intervals
17. Non-partner sexual violence prevalence	Country GBV prevalence data	Demographic Health Surveys (DHS); not done annually or at regular intervals
18. Percentage of annual budgets allocated to health sector	Abuja Declaration recommends 15%	National budgets
19. Health worker density and distribution for SRMNAH	Statistics from health facilities	Departments of Health, health workers provide a broad of services and it is not disaggregated by area of work
20. Proportion of services within the essential package of SRHR services covered by public health system	SRHR services offered at health facilities	Departments of Health, health workers provide a broad of services and it is not disaggregated by area of work

Key issues on scoring

- **Data gaps and anomalies:** On certain indicators data is not being collected in a manner that will enable its measurement. In some instances, data does not exist. Some indicators require annual measurement but the data is gathered over a different time period.
- **When global or regional targets exist:** If targets are met it is green however how yellow and red be determined. What are the cut off scores that determine where the result should be located? There should be guidance on for the different indicators.
- **Measuring policy or legislation:** A policy or legislation exists or does not. Does that imply that the result is a green or a red? Or, for example, abortion legislation, does it refer to abortion on demand?
- **Measuring numerical indicators that are not standard:** For example, the age of marriage. While countries stipulate that 18 is the age of marriage they provide for exceptions. Guidance is needed on how to interpret the data.
- **Calculating scores where no target exists:** The scores are calculated using a quartile system. This means that scores are calculated using a four-part measurement system. The calculations are made using the countries performance scores and working out where countries are by comparing country to country without establishing what the optimum target is. Working out what a good or bad performance is, is relative to other countries. In this regard, a fixed target might be a better option.
- **Colour coding ranges where no target exist:** Green in this instance are the best performers and red the worst. The challenge is in the yellow classification. Yellow includes quartiles two and three. This creates a vastly varying set of scores that are grouped together. The lower end of quartile three is often closer to the red zone. Splitting the two quartiles will provide a more accurate representation of the score.