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**Development Co-operation Directorate
Development Assistance Committee**

DAC Working Party on Development Finance Statistics

Update of the CRS purpose codes taxonomy to enable the tracking of COVID-19 activities in the health sector

The WP-STAT meeting of 22-25 June 2020 examined options to enable the tracking of COVID-19 related activities in the CRS, including the creation of a purpose code to track COVID-19 activities in the health sector [DCD/DAC/STAT(2020)21, section 4.2].

This note presents a revised proposal on the COVID-19 purpose code, based on members' comments.

This note is presented for APPROVAL under the written procedure on a non-objection basis, with a deadline of 23 October 2020. If approved, it will enter into force in 2021 for the data collection on 2020 activities.

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Update of the CRS purpose codes taxonomy to enable the tracking of COVID-19 activities in the health sector

Introduction

1. At the WP-STAT meeting of 22-25 June 2020, the Secretariat presented a note on ODA-eligibility and tracking of COVID-19 related activities in the CRS [DCD/DAC/STAT(2020)21]. Section 4 of the paper proposed amendments to the CRS taxonomy to track COVID-19 related activities in the health sector (section 4.1) as well as options for tracking COVID-19 related activities in other sectors (section 4.2). The present note follows up on the discussion on the CRS taxonomy taking into account comments expressed by members during the meeting. A separate note is issued to follow-up section 4.2 on tracking COVID-19 related activities in other sectors [DCD/DAC/STAT(2020)37].
2. This paper is presented to the WP-STAT for APPROVAL under the written procedure on a non-objection basis. The proposal contained in paragraph 5 and table 1 will be considered approved if no objection is transmitted to the Secretariat by **23 October 2020**. If approved, amendments will enter into force in 2021 for the data collection on 2020 activities.

Tracking COVID-19 activities in the health sector

3. The COVID-19 response in the health sector represents a very specific set of actions. These include prevention, treatment, epidemiologic research and other actions for which international co-operation is likely to play a major role. If a viable vaccine for COVID-19 is achieved, it is likely that international co-operation would also play a major role in supporting its mass deployment, as has been the case for other vaccines.
4. In the current version of the CRS purpose codes, COVID-19-related activities in the health sector would fall under the code 'Infectious disease control' (12250). Unless a specific purpose code is created for tracking COVID-19 expenditures under the health sector, costs for COVID-19 related activities would not be able to be distinguished from other infectious diseases. The CRS purpose codes in the health sector already include several codes to track the resources dedicated for the prevention and treatment of specific diseases. These codes are 'Malaria control' (12262), 'Tuberculosis control' (12663) and 'STD control including HIV/AIDS' (13040).

The proposal

5. To allow precise tracking of COVID-19 activities in the health sector, the following amendments to the CRS purpose codes are proposed:

- Creation of a CRS purpose code for 'COVID-19 control', which includes actions in the areas of immunisation, testing, pandemic prevention, treatment and post-recovery therapies.
- Adjustment to the code 12250 to avoid any overlap.

The specific changes to the purpose codes taxonomy are shown in Table 1 below.

Table 1 - Proposed changes to the CRS purpose codes (text additions are underlined)

CRS Code	Description	Clarification
12250	Infectious disease control	Immunisation; prevention and control of infectious and parasite diseases, except malaria (12262), tuberculosis (12263), <u>COVID-19 (12264)</u> , HIV/AIDS and other STDs (13040). It includes diarrheal diseases, vector-borne diseases (e.g. river blindness and guinea worm), viral diseases, mycosis, helminthiasis, zoonosis, diseases by other bacteria and viruses, pediculosis, etc.
<u>12264</u>	<u>COVID-19 control</u>	<u>All activities related to COVID-19 control e.g. information, education and communication; testing; prevention; immunisation, treatment, care.</u>

6. The proposal in table 1 differs from that in DCD/DAC/STAT(2020)21 in the following aspects:

- The clarification notes of the code 12264 have been simplified to make them consistent with the codes related to other specific diseases ['Malaria control' (12262), 'Tuberculosis control' (12663) and 'STD control including HIV/AIDS' (13040)]. The reference to "actions to reinforce emergency treatments" has been removed from the description of code 12264, as these actions are already embedded in the terms "treatment" and "care".
- The proposed changes to the health education code (12661) have not been included in this proposal¹ as they would create confusion given that COVID-19 awareness campaigns are now explicitly included in the proposed purpose code 12264.

7. Finally, at the WP-STAT, one member suggested adding to the code "actions encouraging technology transfer of vaccine production and vaccine production efforts directed at meeting the demand of ODA-eligible countries with equitable access to developed products". The Secretariat did not include this text to avoid mixing ODA eligibility criteria with definitions of purpose codes, which are also used for reporting non ODA-eligible activities.

¹ The previous note proposed to add the wording "including COVID-19 awareness campaigns" in the description of the 'health education' code (12661).