PROGRAMME COORDINATING BOARD

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Provisional agenda item 2:

Future Directions for UNAIDS:
Responding to the Five-Year Evaluation of the Programme

Report of the Executive Director

Executive summary

This report has been prepared in response to the conclusions and recommendations of the Final Report of the Five-Year Evaluation of UNAIDS (UNAIDS/PCB(13)/02.2). It sets out a number of proposed actions aimed at improving the performance and functioning of UNAIDS so that it can more effectively meet expectations of an expanded response to the HIV/AIDS epidemic.

The report also provides: a brief history of the Five-Year Evaluation and subsequent consultations; overviews the context in which the response has been formulated; describes past and current challenges in key areas; proposes a series of actions in response to the Evaluation Report’s findings and recommendations; and, suggests a mechanism and timeline for reporting to the PCB on progress in implementing the recommendations.

ACTION REQUIRED AT THIS MEETING

The Programme Coordinating Board is requested to consider the proposed actions as part of its deliberations on the Five-Year Evaluation.
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Section I. Background

1. This report sets out a number of actions aimed at improving the performance and functioning of UNAIDS, so that it can more effectively meet expectations in mobilizing an expanded response to the HIV/AIDS epidemic. These proposals are in response to the conclusions and recommendations of the Report of the Five-Year Evaluation of UNAIDS.

2. The Evaluation Team (ET), the Evaluation Supervisory Panel (ESP) and the Management Support Team (MST) were faced with a major challenge in this complex and demanding undertaking. UNAIDS is grateful for the effort that the ET made in weighing the comments of the stakeholders in the Programme and reflecting many of them in the Report. The Evaluation Report has been an invaluable tool in focusing our attention on the improvements to be made in the Programme in the months and years ahead.

3. The 29 recommendations of the Evaluation Report provided a framework for further consultations within UNAIDS, with the broader United Nations (UN) system, and with national and international partners. In addition, the recently released recommendations of the Secretary-General on the next phase of UN system reform provided a valuable context for the proposed actions.

4. The consultations involved a review and discussion of the findings and recommendations of the Evaluation Report and helped to identify consensus approaches, both within the Programme and with outside partners, on the most effective actions to propose in order to take the Programme forward. Each of the consultations played a crucial role in developing options for the strengthening of the Programme required to meet the challenges posed by a complex and rapidly changing environment.

Section II. Context for the Response

5. When UNAIDS was established, the global actions and resources addressing the epidemic were roughly one-tenth of what they are today. To be successful in containing the progression of the epidemic, another 10-fold increase in the global effort will be required by the end of this decade. This 100-fold increase in global resources and effort over a period of less than two decades will be a remarkable accomplishment for the global community. While this increase is not inevitable, it is no longer seen as wishful thinking. It is a pathway to success that the work of countless individuals and organizations has legitimized over the last decade. It is the strategic pathway on which countries agreed to continue when they unanimously endorsed the Declaration of Commitment of the United Nations General Assembly Special Session on HIV/AIDS (UNGASS) in June 2001. It is also a pathway that has significant implications for us as we consider what will be required of the Programme in the future.

6. Any programme’s response to an external evaluation report reflects its own evolving perspective on its performance and potential, its strengths and weaknesses, and the opportunities and limitations of the broader context in which it is operating.

7. Five areas, in particular, shape the current context in which the actions proposed in Section IV of this document will need to be considered. They are:
• empirical evidence that the epidemic can be contained;
• the major successes achieved in the response to the epidemic in recent years;
• the changing technical, financial and political environment;
• the continuing epidemic and the persistent challenges it presents to mobilizing an effective response; and
• the evolving institutional platform in the United Nations system and the ongoing UN reform process.

A. Empirical evidence that the epidemic can be contained

8. The first point of context in considering the operational recommendations with which to go forward is the empirical evidence that the epidemic can be contained.

9. There is unequivocal empirical evidence that it is possible to change the course of the HIV epidemic on a national scale. Furthermore, existing affordable prevention and treatment technologies can clearly have a major impact on a much broader scale. This has been documented and described: well known examples are the halving of AIDS mortality in Brazil; the emergence of Cambodia from conflict, its resolute tackling of the HIV threat and the subsequent reduction in the HIV prevalence rate; the focus in Zambia on young people resulting in behavioural changes and falling HIV rates; and the sustained progress against the epidemic demonstrated in Thailand and Uganda.

10. In addition, there have been quite spectacular declines in HIV prevalence among young women, demonstrating again that prevention strategies can work on a large scale in poor countries, particularly among young people. For example, in Addis Ababa, Ethiopia, a 33% decrease was observed between 1995 and 2001 and, in South Africa, a 25% decline was achieved from 1998 to 2001.

11. These reaffirm the feasibility of the internationally agreed global goal of reducing HIV prevalence among young men and women aged 15 to 24 by 25% in the most affected countries by 2005, and by 25% globally by 2010.

B. The major successes achieved in the response to the epidemic in recent years

12. The successes of the many actors addressing the epidemic in the past five years have changed the context in which we are now operating.

13. In addition to a reduction in HIV infection rates and/or AIDS mortality in a number of countries, 10 major achievements over the past few years stand out:

   a. Senior political leadership mobilized on all continents, raising the profile of the epidemic in national, regional and global forums, most notably through the UN Secretary-General’s leadership in mobilizing new partners.

   b. National Strategic Plans (NSPs) developed through a participatory process in virtually all highly affected countries, with a tripling of the number of high-level national AIDS councils or commissions in the past three years.

   c. A nearly seven-fold increase in international resources targeted at HIV/AIDS in Africa to approximately US$1 billion.
d. The establishment of new funding mechanisms addressing the epidemic, notably the World Bank Multicountry AIDS Programme (MAP) and the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM).

e. The Security Council taking up AIDS in Africa, and HIV prevention in UN peacekeeping operations.


g. The UN General Assembly Special Session on HIV/AIDS, resulting in unanimous agreement among Member States on strategies and approaches based on the Global Strategy Framework endorsed by the PCB, and a set of ambitious and measurable goals and targets.

h. An order-of-magnitude reduction in the prices of AIDS drugs for developing countries.

i. Broad mobilization of demand and support for programmes to reduce mother-to-child transmission of HIV.

j. An increased prioritization and major mobilization against HIV/AIDS in the UN system. This includes a Five-Year UN System Strategic Plan on HIV/AIDS (UNSSP), which harmonizes the efforts of 29 organizations and funds, and the global and regional work of the UNAIDS Cosponsors through an expanded and a fully-funded UNAIDS Unified Budget and Workplan (UBW).

14. These are not UNAIDS achievements; they are global achievements. Certainly, the Programme had a major role to play in each of them, but none of them could have been accomplished without the concerted efforts of the much larger and still rapidly growing coalition than now comprises the ‘global AIDS movement’. Taken as a whole, this effort constitutes one of the largest international peacetime collaborations in history, which is as it should be, because we are facing one of the largest international threats in history.

15. The purpose of taking stock of recent success is not to congratulate ourselves but, rather, to remind us that the most significant organizational challenges we are facing today are largely a result of those successes.

C. The changing technical, financial and political environment

16. The third major point of context is the current and changing technical, financial and political environment in which the response to the epidemic is nested.

17. Good research and development work continues to advance the technical environment of the response and our knowledge of AIDS, its prevention and treatment. Continuous progress has been made in understanding how safer behaviours can be promoted and sustained. Significant improvements in biomedical technologies can be expected. However, given the long lead times required to bring technological breakthroughs from the laboratory to those in need, it would be unrealistic to expect any
future major technological breakthrough to have a significant impact on the dynamics of the epidemic during the course of the next five years. Furthermore, the challenge of providing adequate care and support to those already affected will continue.

18. Our recommendations for the next phase of the response can thus anticipate an improving technical environment. However, the impact we can expect to have in the next five years is largely dependent on the technologies we have in hand today.

19. After nearly a decade of stagnation, the **financial environment of the response** to the HIV/AIDS epidemic has begun to improve substantially. The total spending on AIDS in low- and middle-income countries this year is approaching US$3 billion, reflecting increases in the spending of national governments, bilateral and multilateral agencies, foundations, the private sector and nongovernmental organizations (NGOs).

20. In 1996, the global multilateral organizations were programming an estimated US$60 million a year for HIV/AIDS in the developing world in 1995. Since then, country-level disbursements have nearly quadrupled. With the recent IDA replenishment now completed, some US$700 million in new grant resources are expected to be available for commitment for HIV/AIDS programming through the World Bank alone in each of the next three years, requiring dramatic increases in technical and policy services from the other Cosponsors and the Secretariat.

21. Our recommendations for the next phase of the response can thus anticipate a positive and improving financial environment. However, ensuring that HIV/AIDS expenditures in countries increase to required levels will remain a major challenge.

22. As a consequence of several years of intensive mobilization at multiple levels, the **political environment for the response**, including senior-level political engagement, is high in many parts of the world. From the Association of Southeast Asian Nations (ASEAN), the Commonwealth of Independent States (CIS), the Organization of American States and the new African Union, to the G8 and the World Economic Forum, when political and other leaders come together today, AIDS is now on their agenda. Through the UNGASS Declaration of Commitment, the world now has a reference point established with measurable global targets. This means that the AIDS response can make the critical shift from one focused on political advocacy to one increasingly focused on political accountability.

23. Sustaining and further improving that environment will by no means be automatic. Where political commitment exists, it will need to be constantly renewed and transformed into the leadership, resources and working partnerships required to respond to the epidemic.

24. Today, more actors than ever before are engaged in the fight, including community organizations, business and labour, religious leaders, youth organizations, the entertainment industry and a variety of government sectors. The strength of networking and effective organization among people living with HIV/AIDS continues to grow and give a voice to the epidemic.

25. Our recommendations for the next phase of the response can thus anticipate a positive political environment for greater civil society participation. However, to
respond at scale, a much larger number of organizations will need to be engaged, and their success will require new skills and sharing of experiences.

D. The continuing epidemic

26. The fourth and most compelling point of context must be the epidemic itself. Any consideration of past progress and of plans for the future must be grounded in the current reality of its continuing and relentless expansion.

27. Since the epidemic began, more than 60 million people have been infected with the virus. HIV/AIDS is now by far the leading cause of death in sub-Saharan Africa, and the fourth-biggest killer. This year, the epidemic will have claimed approximately 3.1 million lives. An estimated 14 million children alive today have lost one or both parents as a result of AIDS. Approximately 80% of these children—11 million—live in sub-Saharan Africa.

28. AIDS continues to erode decades of progress made in extending life expectancy and expanding livelihood. Twenty years after the world first became aware of AIDS, it is clear that humanity is continuing to face one of the most devastating epidemics in human history—one that threatens development in major regions of the world.

29. It is equally clear that the majority of communities, including those in countries with high national HIV prevalence, have not yet been fully exposed to the virus. Prevention efforts that enable people to protect themselves against HIV, provision of adequate and affordable treatment and care, and efforts to mitigate impact represent three of the most urgent challenges facing humankind today. We must also be clear that we are at the very beginning of the time-course of the AIDS epidemic.

30. Our actions for the next phase of the response must thus anticipate a robust epidemic with an increasing momentum that is not dependent on planning or funding to make its advances. Our actions must also recognize that the age group likely to be most affected has yet to begin primary school. Most developing countries have very young populations and billions will become sexually active over the next decade. In reality, the AIDS-related programmes in the vast majority of the most vulnerable communities are operating at baseline levels, if they have been initiated at all.

31. The continuing strength of the epidemic is a sobering reminder that none of the successes achieved thus far can be seen as irreversible; that some of them must be seen as quite fragile; and that the slightest hesitation on our part in doing all we can, as rapidly as we can, may result in dramatic setbacks in the future.

E. The United Nations system platform

32. The fifth major point of context is the current and changing institutional platform on which the Programme is based: the United Nations system.

33. Over the past five years, the HIV/AIDS epidemic has been repositioned globally as a political and development issue. It is at the top of the UN's agenda, as evidenced by the Secretary-General's personal commitment, and represents a major focus of work of the Cosponsoring Agencies. Last year, the Secretary-General Kofi Annan and the United Nations shared the Nobel Peace Prize, the citation for which included Mr
Annan’s having “risen to such new challenges as HIV/AIDS”. The UN system has risen to meet the challenges of this epidemic, and it can still rise much further.

34. From a distance, the challenges of operating from a UN system platform that is governed by 191 Member States may seem enormous. In the case of UNAIDS, the situation is even more complex, in that the Programme:

- addresses some of the most complex, demanding and socially divisive issues facing human development;
- relates to the PCB and the separate Governing Boards of the eight Cosponsors;
- is tasked to enhance coordination, facilitation, capacity-building, transparency and collaboration—outcomes that are generally difficult to quantify and successfully programme; and
- is funded entirely through voluntary contributions consisting almost entirely of single-year contributions.

35. The challenges presented by all these factors may sometimes be more obvious than the positive aspects of the system. The UN system, by its nature, sometimes imposes processes and approaches that are complex and entail delays and frustration. Still, deliberations on the Evaluation Report need to take account of the fact that the assets of the UN system platform are real and valuable. They include the UNAIDS imprimatur and, with it, the global acceptance that the Programme is based in the UN system, which is committed to:

- principles of human rights, equity, and inclusion;
- eliminating discrimination against women and the gender biases that help fuel the epidemic;
- technically sound and politically endorsed common goals;
- capacity-building with national partners;
- co-ownership of processes in which there are clear synergies to be derived from working together;
- a unique and expanding partnership with civil society;
- the co-option of existing resources, working through, and in support of, established agencies and processes; and
- the mobilization of new resources and partners required to tackle the epidemic.

36. Taken together, these approaches permit access to policy-makers and programme managers on a basis of trust and, with that, enormous opportunities for change and progress. They provide a global neutral platform for policy debate on difficult issues, which is all the more important as AIDS remains a relatively new and complex issue for many of the actors around the world who must confront its challenge.

Section III. Strengthening United Nations System Capacities to Deal with HIV/AIDS

A. Overview

37. The AIDS epidemic requires a global response and, from very practical viewpoint, there is no credible alternative to the UN system as the international platform for that response. If the UN had not existed as a platform for the UNAIDS Programme, the magnitude of the HIV/AIDS epidemic would have justified its invention for that purpose.
38. The opportunities that have come to the Programme because it was built on the UN system platform have often exceeded the human, financial and managerial capacities available to fully exploit them. At the same time, all of us recognize that many of the efforts the Programme initiated several years ago would be much less difficult to accomplish today than they were then. This is not simply because the gravity of HIV/AIDS is more broadly appreciated, but also because the Programme and its approach have gradually become more accepted. The platform that the Programme is working from has become more collaborative, more flexible, and more accountable. As the Evaluation Report has made clear, there has been definite progress. And as it has also made clear, much more needs to be done.

B. Looking forward

39. When the Programme was established by ECOSOC eight years ago, alternative models were carefully considered and a consensus emerged that the path chosen was the most strategic and appropriate of the opportunities available at that time. Rather than revisit the rationale for the original design, the Evaluation Team has appropriately taken a forward-looking perspective.

40. The findings and recommendations of the Evaluation Report and the specific actions proposed in Section IV require careful consideration. In reviewing the Programme’s approaches, we must distinguish which of those:

- continue to be relevant to the new challenges;
- will be relevant only with refinement; and
- require significant re-engineering or replacement to keep pace with opportunity.

41. We must also be prudent where we seek to extend approaches that have been successful or that have served one purpose well in a particular setting and at a particular time, to other purposes or settings where they may be less well suited. At each level of the Programme, our deliberations should distinguish the major challenges faced when the Programme was first established from those that we face today and are likely to face in the future.

C. United Nations system reform at country level

42. UNAIDS efforts at country level were explicitly intended to operate within the framework of UN General Assembly Resolution 47-199, which, in 1992, elaborated the role and responsibilities of the UN Theme Groups and preceded the establishment of UNAIDS. Within the strengths and limitations of that model, it is widely accepted that the Theme Groups on HIV/AIDS have been by far the most successful of the UN Theme Groups addressing cross-agency issues.

43. The Programme started its work in countries two years before the first round of the Secretary-General’s 1997 reforms were articulated. These reforms are reflected in new planning instruments, such as the common country assessments and the United Nations Development Assistance Frameworks (UNDAFs). They are increasingly taking root within a more ‘co-owned’ Resident Coordinator System and within progressively more accountable and collaborative UN Country Teams, which are more focused on supporting countries’ efforts to achieve measurable goals and
objectives through more coherent strategies. Common objectives articulated in the Millennium Development Goals are likely to strengthen these trends further. However, UN system efforts on HIV/AIDS at country level have yet to be fully integrated with other relevant processes within their national social and economic development plans and national poverty reduction and development strategies, such as the Poverty Reduction Strategy Paper (PRSP) and sector-wide approaches (SWAP).

44. In the countries with the highest HIV prevalence, it is not an exaggeration to state that:

- for the national response to the epidemic to make substantial gains, international assistance must be dramatically increased;
- for international assistance to be most effective, the UN system must be utilized to its full potential to add value to the inputs of the major financial partners; and
- for the UN system to reach its full potential, rapid and significant progress must be achieved in its reforms at country level.

45. The UN reform efforts in the countries with the highest prevalence are unlikely to be relevant if they are not centred on the most demanding development challenges facing those countries. So there is—and must be—a definite synergy between the next phase of UNAIDS and the next phase of the Secretary-General’s proposed reforms in high-prevalence and other priority countries, and our actions should reflect the fact that UNAIDS has a significant role to play in the reform effort. Particularly in the most affected countries, the response of the UN system to HIV/AIDS will be intrinsic to UN system reform.

46. Throughout, it is important to keep in mind that ‘UNAIDS’ includes the work programme of the Cosponsors and the Secretariat and that the respective roles and responsibilities of each will vary in responding to the proposed actions.

Section IV. Proposed Actions in Response to the Evaluation

47. Action in response to the Five-Year Evaluation must reinforce an overarching vision for the next phase of UNAIDS that is focused on support to countries in their efforts to respond to the epidemic. The actions within this section are intended to help realize that vision by strengthening UNAIDS in four key areas:

- As a **global advocate** for enhanced multisectoral responses to HIV/AIDS at all levels. The Declaration of Commitment will serve as the platform for UNAIDS leadership and advocacy efforts. These efforts will include promotion of key issues at global level—in particular, those that are highlighted in the Declaration. Reducing stigma and discrimination, promoting gender equality, and balancing prevention and care, treatment and support actions within national programmes are three such areas. In addition, UN Country Teams will be encouraged to facilitate and support broad-based advocacy efforts at country level, on a scale commensurate with the challenge at hand.

- As a **facilitator of partnerships** that add value and effectiveness to individual efforts. This will require a much greater emphasis on the meaningful involvement of civil society, both in country level forums and in deliberations
and processes at global level (e.g., assessing progress in achieving the goals and targets of the Declaration of Commitment). Increasing focus will be put on mobilizing a broad range of groups, including networks of people living with HIV/AIDS, women’s groups, youth organizations and private sector entities.

- As a **centre of knowledge** and reliable information on the current status, future directions and impact of the epidemic in support of country efforts to build national response capacities. This will require intensified work in areas related to: surveillance, modelling and forecasting; the status and achievements of national programmes; monitoring and evaluation designed to measure those achievements; and the tracking of resource flows to HIV/AIDS worldwide.

- As a successful **example of a joint and cosponsored effort within the UN system**. This will involve: investing and further strengthening the capacity of each Cosponsor to contribute fully to expanded, multisectoral responses at all levels; continuing to improve and strengthen the capacity of the UN Resident Coordinator system to support national partners and leverage various sources of international support and finance for national responses; and using the full range of expertise and relationships of the UN system to ensure integration of HIV/AIDS into mainstream development planning.

48. While the 39 proposed actions are organized within the broad groupings presented within the Evaluation Report, they are ordered differently. The actions relating to the **UNAIDS strategic vision** are presented first. **Country-level** actions are then presented as a logical basis for what is required to support them—namely the **regional and intercountry work** in support of countries, the **global-level work** of the Programme and, finally, **UNAIDS governance**.

A. **UNAIDS strategic vision**

49. The four recommendations of the Evaluation Report that address the strategic vision and direction of the Programme are considered individually here.

50. In **Recommendation 1** of the Report, the Evaluation Team draws attention to the six objectives listed within resolution 1994/24 of the Economic and Social Council of the UN (ECOSOC), noting that they were not, in the first instance, framed as measurable objectives. While it is our view that those objectives remain valid, we agree that they would benefit from periodic review.

*Action 1*: It is proposed that the PCB biannually make recommendations to ECOSOC as may be required to clarify or enhance the operations of the Programme.

51. The July 2003 session of ECOSOC, to be held in Geneva, provides the next opportunity for such a recommendation. The UNAIDS Secretariat will work with the Cosponsors to prepare draft recommendations for consideration by the PCB at its June 2003 regular session. UNAIDS will work with its partners to help ensure that ECOSOC resolutions adopted in July 2003 reflect the recommendations of the PCB on the five-year evaluation and the future directions of UNAIDS.
Functions and roles within the Programme

52. We agree with Recommendation 2 of the Evaluation Report on the continuing need to refine, update and clarify functions and roles within the Programme.

53. The suggested functions at global, regional and country level included within the Evaluation Report provide an appropriate basis for further work in this regard by the Cosponsors and the Secretariat. They are included with amendments in Annex 3 of this report and have been supplemented by five cross-cutting functions applicable at all levels of the Programme—namely, to advance:

- leadership and advocacy for effective action on the epidemic;
- strategic information required to guide the efforts of partners;
- tracking, monitoring and evaluation of the epidemic and actions responding to it;
- civil society engagement and partnership development; and
- financial, technical and political resource mobilization.

Action 2: It is proposed that the PCB recommend that the functions of the Programme and the specific roles of constituent parts be clearly reflected throughout the work of the Programme—in particular, through updates and revisions of the Five-Year UN System Strategic Plan (UNSSP) and the Unified Budget and Workplan (UBW).

54. The UNSSP Update and the UBW for the next biennium, both of which will be submitted to the PCB at its next regular session, provide a timely opportunity to respond to this proposed action with objectively verifiable indicators and targets.

Support to major financing partners

55. The activities described in Recommendation 3 of the Evaluation Report, which is focused on UNAIDS support to the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM), apply equally to relationships between the Programme and other major financing partners. These include, in particular, the global and regional financial institutions and the major foundations with which UNAIDS continues to work.

Action 3: It is proposed that the PCB recommend that UNAIDS intensify its support to national governments, civil society and private sector actors in their preparation of funding proposals to the GFATM, the regional development banks, major foundations and the World Bank financing instruments; that UNAIDS provide thematic, monitoring and evaluation, and other technical policy and service support, as may be required to enhance institutional partners’ capacities to support countries to achieve common objectives; and that the Programme develop and periodically update partnership agreements with those financial institutions and instruments as may be required to further clarify respective roles and expectations.

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1 The Unified Workplan and Budget (UBW) is submitted to the PCB biannually. The Five-Year UN System Strategic Plan on HIV/AIDS (UNSSP), currently for 2001 to 2005, and the mid-term updates are also submitted to the PCB for review and endorsement.
56. Progress on the development of the Partnership Agreement between UNAIDS and the GFATM will be reported to the current session of the PCB.

**Strengthening links with relevant United Nations reform processes**

57. In *Recommendation 4* of the Evaluation Report, the potential synergies between the UN reform process and the continuing efforts of UNAIDS to improve its effectiveness are highlighted. Further consideration of the operational steps required to capture those synergies is merited.

58. In this second phase of the Secretary-General’s proposed reforms, increased attention is being directed towards joint programming within the UN system at country level. This is a critical area of development for the Programme, and one on which its ultimate success in assisting countries to achieve the UNGASS goals will be highly dependent. Much of the country-level experience of the Programme over the past five years has been directly relevant to this challenge. Several Executive Committees organized within the reform process provide important opportunities for the Programme to contribute more effectively to the shaping of the reforms, as well as to better anticipate and adapt to them.

**Action 4:** It is proposed that the PCB recommend to the Secretary-General that he draw on the experiences gained through the Programme to assist in informing the implementation of his second phase of UN system reforms. It is further proposed that the PCB request that the Secretary-General consider including UNAIDS within those UN system entities most directly relevant to the organizational development experience and needs of the Programme—in particular, the Executive Committee on Economic and Social Affairs, Humanitarian Affairs and the United Nations Development Group (UNDG).

**B. Country-level actions**

59. The country-level actions proposed in response to the Evaluation Report are intended, first and foremost, to strengthen national capacities to address the epidemic and, secondly, to strengthen the capacity of the UN system to support the national capacity development process.

**National plans**

60. *Recommendations 18 and 19* of the Evaluation Report highlight the importance of better utilizing existing national government-led planning and reporting processes in bringing focus and coherence to the national response. These multisectoral processes provide the necessary links between the urgently required AIDS response, the opportunity to place the response within the broader context of the Millennium Development Goals, and the continuing need to address the root causes of the epidemic. A strong national plan anchored within the PRSP and the MEF provides an effective coordination platform for the engagement of multiple financing partners.

**Action 5.** It is proposed that the PCB urge national governments to give HIV/AIDS high priority as a specific cross-cutting thematic issue to be incorporated into, and monitored within, their national social and economic development plans and national poverty reduction and development strategies,
Medium-Term Expenditure Frameworks and within sector-wide programmes in relevant sectors.

**Government-led joint reviews**

61. Similarly, Recommendation 25 of the Evaluation Report highlights the importance of government-led joint reviews in facilitating a well coordinated, prioritized and synergized national response, and reducing the burden of separate donor reviews on national capacities.

**Action 6.** It is proposed that the PCB encourage national governments to lead periodic joint reviews of the implementation of their National AIDS Plans, and that those reviews should be conducted by teams drawn from government, civil society, the private sector, multilateral and OECD donors, and the UN system organizations.

62. These reviews can form the basis for the joint planning exercises that are necessary to reduce the competing demands on scarce national technical resources and permit improvements in the design, costing and monitoring of the plans of the various partners. They can also support the collaboration required for more timely and cost-effective measurement of programme outcomes and impact.

**International investments in National AIDS Plans**

63. Recommendation 19 of the Evaluation Report provides guidance to bilateral donors on their in-country investments in HIV/AIDS. Well developed and anchored National AIDS Plans should serve as a common reference point for bilateral donors, the development of the MAPs and other World Bank financing instruments, the Country Coordinating Mechanisms through which proposals are submitted to the GFATM, and the efforts of other national, bilateral and multilateral partners.

**Action 7:** It is proposed that the PCB encourage OECD and other donors to link their bilateral country HIV/AIDS programmes to the execution of national strategies that have been articulated within country-led mechanisms—in particular, their Poverty Reduction and Development Strategy—in order to reinforce the capacities of host governments to coordinate international assistance on HIV/AIDS.

64. In turn, the focus and coordination of UN system efforts in support of the national planning processes and the implementation of the national AIDS plan will be strengthened if donors reinforce the principles of synergy, integration and comparative advantage.

**Action 8:** It is proposed that the PCB encourage OECD and other donors, in their HIV/AIDS in-country financial investments that are channelled through UN system agency mechanisms and programmes of assistance, to give priority to those efforts that are integrated within national PRSPs and MEFs, and are clearly articulated within the UN Country Team Implementation Support Plan to the National Response (UN-ISPs, described below), reflecting the comparative roles and functions of the particular UN system organization within the specific country setting.
United Nations Country Team Implementation Support Plan to the National Response (UN-ISP)

65. The work of the UN system on HIV/AIDS in countries serves two vital functions. First, and most importantly, its ‘core function’ is as a major supporter to national governments and implementing partners in the development of National AIDS Plans and in the strengthening of national capacities required to execute the major design, planning, coordination, financing, partnership development, monitoring and evaluation functions. Second, the UN system should serve as a channel for technical and/or financial resources for implementation support, where its mechanisms have a comparative advantage in doing so. The Evaluation Report rightly points out that governments and other national partners continue to expect from UNAIDS a clearer and more comprehensive view of the technical and financial support that is available through the UN system for their HIV/AIDS-related efforts.

66. The need for transparency and accountability in the plans and budgets of the UN system in countries is highlighted in Recommendations 14, 17 and 22 of the Evaluation Report. We agree with the assessment of the Evaluation Team that the Integrated Workplans on HIV/AIDS were insufficient to achieve these purposes, and that more effective instruments are required.

Action 9: It is proposed that current and proposed support from UN system organizations to the implementation of the National AIDS Strategy be presented within a fully integrated UN Country Team Implementation Support Plan to the National Response (UN-ISP), which includes:

- the combined budget and finance plans for joint, integrated and individual agency efforts in support of the National AIDS Strategy;
- clear objectives with monitorable indicators for individual agency efforts reflecting their specific roles and responsibilities and the five key functions of UNAIDS; and
- the coordinating work of the UN Theme Groups on HIV/AIDS.

67. In our view, the Evaluation Report has correctly assessed the major impact the UNAIDS Unified Budget and Workplan (UBW) has had on improving transparency and accountability in HIV/AIDS programming within the UN system at the global and regional levels. However, we disagree that these objectives are best served as suggested in Recommendation 14 of the Evaluation Report by extending the UBW mechanism to the country level. It is our view that these objectives could be better served through the UN-ISPs described above, together with an explicit reporting requirement to the PCB.

Action 10: It is proposed that the PCB seek the endorsement of the Secretary-General to request a written annual progress report on the implementation of the UN-ISP from UN Theme Groups on HIV/AIDS, through the UN Resident Coordinator, in all countries receiving support through the UBW. It is further proposed that this reporting effort be facilitated by the Secretariat through the use of formats designed to maximize transparency, enable compilation for comparative purposes, allow for easy integration with other reporting instruments to minimize duplication of effort, and contribute to the preparation
of the Annual Report of the Secretary-General to the UN General Assembly on Progress towards Implementation of the Declaration of Commitment on HIV/AIDS.

68. These two actions can be expected to:

- enhance the transparency of the UN system efforts;
- reinforce the UN system’s comparative advantage in executing its ‘core function’ described above;
- reinforce the linkages between the UN system efforts in countries and those of key partners in executing the National AIDS Plan;
- increase the coherence and value of the UN system inputs to the national effort, and
- allow national stakeholder review and improved accountability of UN system efforts in countries.

UNAIDS support to strengthening national data utilization and national monitoring and evaluation capacities

69. In Recommendations 13, 14 and 24, the Evaluation Report highlighted the need to assist countries in strengthening their reporting, data utilization, monitoring and evaluation capacities. These capacities are essential for building an effective national platform for planning and coordinating an expanded response to the epidemic. Three areas, in particular, should be well reflected within the UN-ISPs.

**Action 11:** UNAIDS should intensify its efforts to support country actors in expanding and strengthening their capacities and systems to: monitor the epidemic and the national response; evaluate interventions; and improve the analysis and use of surveillance data. These efforts will include advocacy with programme partners to allocate an appropriate share of total programme resources to strengthening monitoring and evaluation efforts.

**Action 12:** UNAIDS should increase its support to National AIDS Councils and ministries of planning, development and finance, to strengthen the analytic capacities they will need to better incorporate and monitor their multisectoral HIV/AIDS strategies within national PRSPs, MEFs and relevant SWAPs and to strengthen the preparation and execution of nationally led joint reviews of the implementation of National AIDS Plans.

**Action 13:** UNAIDS should take the necessary steps to ensure that the Country Response Information System (CRIS) is operational in all high-prevalence and other priority countries by the end of 2003, with sufficient capacity to enable national and international partners to have easy access to key strategic information and to serve as the core instrument of a fully integrated UN system effort to prepare the Annual Report of the Secretary-General to the General Assembly on Progress towards Implementing the UNGASS Declaration of Commitment.

70. Each of these actions will have implications with respect to the strengthening of UN system technical capacities. They will also require a more collaborative approach with other international partners to mobilize technical support for national efforts.
National partnership forums

71. *Recommendations 27 and 28* of the Evaluation Report indicate a strategic direction for UNAIDS of serving as a broker of good practice for local-level efforts in support of national governments, partner donors, the private sector and NGOs in the country. There are many successful examples of the UN system supporting horizontal learning and replication between and within countries, but support for partnership development efforts in HIV/AIDS remains limited. UNAIDS will increase its support to the development of HIV/AIDS-related partnership forums that seek to engage greater participation from civil society and the private sector in the national response. National AIDS Councils in several countries have already demonstrated the usefulness of partnership forums in including and mobilizing NGOs, faith-based organizations, parliamentarians, people living with HIV/AIDS, political leaders, the private sector and other new actors in the response.

**Action 14:** UNAIDS should increase its support to the development of partnerships focused on implementing the National AIDS Plan and involving government, civil society, the private sector and international actors, with particular attention to the participation of people living with HIV/AIDS. This will include support to the partnership forums of National AIDS Councils and other approaches intended to increase participation, improve connectedness of efforts, and strengthen the various actors’ capacity for action.

72. The nature and shape of partnership forums will vary from country to country and evolve according to the local situation. The role of the UN system in these forums should be to provide support to the leadership of the National AIDS Councils and other potential convenors. The UN can also play a resource role by facilitating access to latest evidence and best practices.

United Nations system support for scaling up country action

73. Several priority areas highlighted within the Evaluation Report require increased attention from UNAIDS in support of country efforts to scale up national responses. They include:

- increased provision of technical resources;
- strengthened advocacy at country level;
- further promotion of best practices in countries;
- mobilization of a humanitarian response to HIV/AIDS in particular countries; and
- more flexible approaches to financing programme acceleration.

Provision of technical resources to support national efforts

74. In many countries, one of the most important limiting factors in scaling up the response is the capacity to mobilize the required technical support services. Scaling up of programmes across multiple sectors represents an enormous challenge for many national AIDS efforts.
75. The delivery of technical cooperation to countries was highlighted in the second-phase reform proposals of the Secretary-General, and the general principles articulated there are highly relevant in the specific case of HIV/AIDS. As the Evaluation Report rightly points out, the UN role should be mostly that of a broker and an enabler, helping to create good examples and make available technical and policy resources where none exist, and reinforcing them where they do. Evaluation Report Recommendations 26, 27 and 28 and others highlight specific areas of opportunity for better addressing these challenges.

76. The national and international partners are currently delivering only a fraction of what is required in the way of technical and policy services in a whole range of thematic, programming and financial management areas.

**Action 15:** UNAIDS should include in the next UBW submission provision for multi-agency technical coordinating facilities to more readily make available to country programming partners the substantially increased technical and policy services required for the design, development, implementation, monitoring and evaluation of their programme efforts in support of the National AIDS Plan. It is envisaged that these activities will be based on existing regional and national institutional efforts and promoted and coordinated by the Secretariat with substantial execution responsibilities shared among UNAIDS Cosponsors.

77. It is also envisioned that the effort will be undertaken in close partnership with several bilateral agencies and international NGO networks, so that the start-up can benefit from the management experience of their existing technical resource centres. It is also envisaged that the UNAIDS Intercountry Teams will be reoriented to play an important support role, drawing from existing technical networks at the national and subregional levels. High-quality technical resources organized on a regional or subregional basis offer many advantages to countries in their scaling-up efforts. Important elements of the undertaking will be UNAIDS quality assurance and responsiveness to country clients. This will be facilitated by securing financial resources in the country through the UNAIDS Programme Acceleration Funds (PAFs) and other mechanisms for the ‘flexible purchase’ of the technical services on a progressive cost-sharing basis. Among other benefits, this facility should be particularly useful in facilitating the provision of technical resources required to strengthen country applications to the World Bank MAPs, the GFATM and other financiers, and in supporting the development and implementation of those initiatives.

**Strengthened advocacy at country level**

78. The Evaluation Report highlighted the many advocacy achievements to date, but also drew attention in Recommendation 26 to the need to maintain and expand the successful advocacy work of the UN system at country level. Greater emphasis will be placed on supporting the development of advocacy strategies and programmes in countries through improved facilitation and the provision of more systematic technical and information support. Two distinct but complementary actions are proposed, which relate firstly to the UN system’s advocacy in countries and, secondly, to the strengthened advocacy efforts of partners.
**Action 16:** UNAIDS should take the necessary steps at country level to support the development, implementation and monitoring of an explicit UN Theme Group advocacy strategy on HIV/AIDS for the entire UN system in-country.

79. Sustaining the focus of the public and key country actors on the response to the epidemic will require capacities beyond those of national governments and the UN system. Increased priority will be given to supporting more participatory mechanisms that better engage the information and advocacy resources of the media and other civil society organizations.

80. Parliamentarians and other political leaders, organizations representing people living with HIV/AIDS, community and religious leaders, business and labour organizations, all have important roles to play in using their existing communications and advocacy channels to mobilize their constituencies, and often require only catalytic support to initiate and sustain their efforts.

**Action 17:** UNAIDS should intensify its support in countries to the development and implementation of strategies that engage a range of diverse actors, especially the media and other civil society actors, in more sustainable advocacy approaches in the response to the epidemic.

**Promotion of best practices in countries**

81. Implicit in proposed actions to strengthen technical and policy services, improve the sharing of experiences, and promote more sustainable advocacy approaches in countries, is the assumption that these efforts will be based on technically sound approaches.

**Action 18:** UNAIDS should intensify efforts in countries to promote and support the dissemination of a broad range of best practice documentation through a more coherent multi-agency effort.

82. Particular emphasis will be placed on promoting best practice documentation that is:

- **more comprehensive,** increasingly drawing its content from the experiences of an expanded group of implementing partners and organizations;
- **more relevant** to country programming partners, with more operationally oriented materials drawn from particular regional and country situations;
- **more evaluative,** reflecting greater attention to comparative studies and reviews; and
- **more accessible,** through a wider array of distribution channels and partners and links to national partnership forums.

**Mobilizing a humanitarian response to HIV/AIDS**

83. The Evaluation Report’s call for a contingency plan for a humanitarian response, in Recommendation 16, may inadvertently understate the urgent need for action. Two challenges are intertwined within this area of work. The first is the challenge of delivering HIV/AIDS-specific interventions in an emergency setting. The second is the challenge of responding more generally to a humanitarian emergency when the
affected community’s capacity to respond has been undermined by the impact of high HIV/AIDS prevalence. Two related approaches are recommended.

**Action 19:** UNAIDS, together with other relevant agencies, will develop and facilitate interventions that will address the challenges of HIV/AIDS prevention, care and treatment in the context of security and stability. This response will encompass three target areas affected by humanitarian emergencies, including:

- community security, referring to vulnerable populations affected by conflict;
- national security, referring to defence and civil defence personnel; and
- international security, referring to peacekeeping and humanitarian operations.

84. Specific activities will need to encompass:

- working with the Inter-Agency Standing Committee Reference Group on HIV/AIDS and Emergencies on an operational plan to respond to HIV/AIDS in emergency settings;
- providing guidelines, training materials, programming tools and technical support to countries to support their efforts to develop HIV/AIDS interventions among the uniformed services, with a special emphasis on young recruits; and
- facilitating a coordinated HIV/AIDS care and prevention response among peacekeeping operations worldwide.

85. The second challenge requires a complementary approach.

**Action 20:** UNAIDS, together with other relevant agencies, should develop a strategy and operational plan for a humanitarian response in those specific countries where the impact of the epidemic is substantially compounding the impact of other emergencies.

86. Already, in southern Africa, the capacity of many communities to respond to the drought has been dramatically impaired by significantly reduced productivity in the agriculture sector, as a consequence of HIV/AIDS.

**Financing programme acceleration**

87. With additional programming resources rapidly being made available in countries through national governments, and bilateral and multilateral partners, the need for greater flexibility in financing instruments for the technical support, programme acceleration and scaling-up described above has become more urgent. The Evaluation Report highlights the usefulness of the UNAIDS Programme Acceleration Funds, with Recommendation 20 encouraging the continuation and expansion of the PAF facility, especially to support monitoring and evaluation efforts, provided that current initiatives by the Secretariat to improve the allocation process, utilization and speed of processing are successful.

**Action 21:** UNAIDS should continue to expand the Programme Acceleration Fund (PAF) facility, giving it a more strategic focus on:
• programme planning and development;
• strengthening of monitoring and evaluation efforts and capacities;
• strengthening of partnership development and resource mobilization; and
• financing efforts to better organize and promote the technical resources provided through Cosponsor programmes and additional assistance to programming partners in countries to accelerate their efforts.

88. The Secretariat initiatives referred to within the Evaluation Report Recommendation are now complete, the processes have been further streamlined, and a new disbursement mechanism operating through the UN Resident Coordinator system has been established to permit more rapid transfer of resources to countries. In addition, the new PAF guidelines specifically emphasize the four areas of focus articulated within Action 21.

89. These catalytic funds have been very useful to country partners in supporting the planning and proposal development efforts required to obtain external resources, including from the World Bank MAPs and the GFATM.

90. These resources need to be increased in the next UBW, especially the supplemental component from interested donors. This is particularly the case with respect to rapidly scaling up the system-wide provision of technical and policy services described above in Action 15, and the strengthening of monitoring and evaluation capacities as described below in Action 30.

**Strengthening UNAIDS in countries**

91. The actions described above, which are required to support the strengthening of country capacities for scaling up, all have implications for the capacities of UN country teams, particularly in the most affected countries. Recommendations 21, 22 and 23 of the Evaluation Report, among others, highlighted the need to clarify the accountability and strengthen the capacities of the members of the UN Theme Groups on HIV/AIDS.

**Theme Group development and accountability**

92. In Recommendations 22 and 23 and elsewhere, the Evaluation Report has highlighted persistent confusion on the method of work of the UN Theme Groups on HIV/AIDS, especially as they relate to ‘expanded theme groups’ and the perceived overlap of their functions with those of the partnerships, programme reviews and coordinating efforts led by the National AIDS Councils.

**Action 22:** UNAIDS will revise, update and clarify the expected method of work for UN Theme Groups on HIV/AIDS in close collaboration with the UNDG, consistent with the deliberations of the PCB on the Evaluation Report, and in the light of the Secretary-General’s reform proposals. Particular emphasis will be given to improving vertical and horizontal accountability for HIV/AIDS efforts within the UN Resident Coordinator System and with the respective Cosponsor executive offices, the PCB, and country constituencies.

93. While a single model will not fit all country circumstances, the specific accountability of Theme Group Chairs with respect to the ISPs and supervisory
responsibilities of UNAIDS Secretariat-deployed staff and other shared HIV/AIDS staff resources needs to be further clarified. The annual assessment of theme group performance conducted by the UNAIDS Secretariat will, in the future, include specific performance monitoring indicators emphasizing a ‘360-degree’ assessment approach.

94. It is the responsibility of the UN Resident Coordinator to ensure that UN Theme Groups on HIV/AIDS are established and function effectively to harmonize and coordinate the efforts of the UN system in support of national efforts. In a number of countries where the capacities of the National AIDS Councils to coordinate international assistance were initially weak, an ‘expanded theme group’ sometimes became the forum for coordinating such assistance, with the inclusion of national government, bilateral and civil society partners. This is becoming increasingly rare as National AIDS Councils have strengthened their coordinating capacities. UN theme groups will continue to have the important role of coordinating UN system support. However, ‘expanded theme groups’ should only undertake broader coordination responsibilities beyond the UN system in exceptional circumstances.

Additional UNAIDS staff resources in priority countries

95. In high-prevalence and other priority countries, additional UN system staff resources are urgently required to support the programming of the additional financial resources made available internationally for countries. Several of the UNAIDS Cosponsors need to deploy additional HIV/AIDS project staff in these countries. In addition, there is a critical need for ‘shared’ staff resources in key technical and programme roles that strengthen the capacities of multiple to execute their responsibilities in support of the national response.

Action 23: The UBW submission for the next biennium should include a specific plan and provision for the deployment of the additional financial and staff resources needed to strengthen the capacities of the UN system in priority countries in the areas of: monitoring and evaluation; resource mobilization and tracking; and partnership development with civil society and the private sector.

96. There are different approaches through which these staff resources can be deployed: co-financed by the UN Country Team, seconded from a Cosponsor; or deployed by the UNAIDS Secretariat. A mix of approaches is likely to be required in the short term to allow for a rapid reinforcement of these capacities.

UNAIDS Programme Coordinators

97. The deployment of additional shared staff resources within the Resident Coordinator System will require a review and repositioning of the role of current UNAIDS Country Programme Advisers (CPAs). Increasingly, the CPAs have served the role of ‘UNAIDS Programme Coordinator’ and their titles should be adjusted accordingly. It can be anticipated that, under the direction of the UN Theme Group Chair, the UNAIDS Programme Coordinator will include among their responsibilities the strategic management and monitoring of the UN-ISPs. UNAIDS Programme Coordinators should serve as Deputy Chair of the UN Theme Group and as a full member of the UN Country Team. More senior recruitment and secondments from the UNAIDS Cosponsors are also being sought for priority countries. Taken together,
these actions provide scope for further strengthening the Resident Coordinator System capacities focused on HIV/AIDS.

**Action 24:** It is proposed that UNAIDS make provision to place UNAIDS Programme Coordinators in those additional countries that: currently have high HIV prevalence and/or the potential for future high HIV/AIDS burden; require assistance to mount and sustain an effective expanded response; and provide a strategic opportunity for the UN system to contribute to an effective scaled-up response.

98. It is anticipated that some 8 to 12 additional UNAIDS Programme Coordinators will need to be assigned to countries meeting these criteria.

**Assignment and rotation of Theme Group Chairs**

99. In the first phase of the Programme, the annual rotation of Theme Group Chairs generally served well the objectives of promoting broader ownership of the HIV/AIDS agenda by UNAIDS Cosponsors in countries. However, as efforts to raise the priority given to AIDS within the UN Country Teams have succeeded, so has the shift to programme implementation. The oversight and supervision of this increased workload in priority countries will require a more stable supervisory and accountability line than is afforded through annual rotations.

**Action 25:** In high-prevalence and other priority countries, the Executive Director, in close consultation with UN Country Resident Coordinators and the respective Cosponsoring agency Executive Head, should propose specific agency representatives for non-rotating assignments of more than one year as Chair of the UN Theme Group on HIV/AIDS.

**Further orientation of United Nations system staff in high-prevalence and other priority countries**

100. A key lesson learned in the first phase of the Programme was that its efforts advanced most effectively in country settings where there was a broad understanding of UNAIDS’ objectives and method of work.

**Action 26:** The next UBW submission to the PCB should include provision for intensified learning programme on HIV/AIDS, including an orientation of all relevant UN system staff in high-prevalence and other priority countries on the revised UNAIDS method of work, together with substantive briefings on the implementation of the UNGASS Declaration of Commitment. This orientation and learning effort should be developed and executed in close collaboration with the UNDG and consistent with the deliberations of the PCB on the Evaluation Report.

101. A good but modest start has been made with investments in the current biennium in the development of a multi-agency training effort on HIV/AIDS and in the development of a senior staff training module, together with the UN Staff College in Turin.
C. Regional and intercountry work in support of countries

102. Recommendation 15 of the Evaluation Report encourages the continuation of UNAIDS regional initiatives that are driven by the needs of countries and, where possible, linked to existing institutions. The refocusing of UNAIDS’ efforts in countries will create additional requirements to sharpen the focus of UNAIDS Intercountry Teams in support of these efforts.

**Action 27:** The next UBW submission will reflect refined terms of reference for the UNAIDS Intercountry Teams (ICTs) and related budgetary support in line with core functions to allow them to:

- coordinate regional submissions to the UBW process and the articulation of regional-level UN system priorities on HIV/AIDS;
- identify and promote high-quality national and international technical resources through newly established multi-agency technical coordinating facilities;
- support strengthening of monitoring and evaluation in countries;
- support regional leadership and partnership development activities; and
- support training and reorientation on HIV/AIDS within the UN system and with key programme partners in priority countries.

D. Global-level work of the Programme

Global advocacy

103. Recommendation 10 of the Evaluation Report encourages the continuation of global advocacy work with particular emphasis on political and resource commitments. This has been among the most successful areas of focus within the Programme and should be continued in its second phase. The UNGASS Declaration of Commitment and the Millennium Development Goals provide a strategic context for these continuing efforts to mobilize and work with different constituencies to have impact and generate a truly expanded response.

**Action 28:** UNAIDS will strengthen the advocacy and campaigning links between the HIV/AIDS Declaration of Commitment and the Millennium Development Goals, including through developing and supporting partnerships with a range of constituencies, particularly with civil society and NGOs, and through the intensification of the World AIDS Campaign.

Building and supporting global partnerships

104. The main goal of partnership development at the global level is to mobilize the human, political, technical and financial capacities of a range of constituencies, including governments, NGOs, corporate, philanthropic, and faith-based organizations, and organizations of people living with HIV/AIDS, to respond effectively to the HIV/AIDS epidemic. **Recommendation 10** of the Evaluation Report calls for the promotion of successful techniques of partnership and horizontal learning at global level, taking into account the diverse types of actors needed.
**Action 29:** The next UBW submission will include provision for an expansion of current efforts to strengthen and connect leadership development and support initiatives on HIV/AIDS for political, NGO, faith-based, business, labour, parliamentarian, female and youth leadership. A systematic review of existing partnership and collaborative agreements will also be undertaken to permit expansion and strengthening of civil society, public-sector and private-sector partnerships on HIV/AIDS. By the end of 2003, UNAIDS will develop and make operational a strategy and plan that will take into account the outcomes of this review.

**Evaluation and monitoring**

105. Throughout the Evaluation Report and in Recommendation 12, significant emphasis is placed on the need for UNAIDS to continue scaling up its monitoring and evaluation capacities and to assist countries in developing their own capacity in this area. In its brief history, UNAIDS has been the subject of four external evaluations and is now challenged and positioned to move from being the ‘most evaluated’ programme in the UN system, to become the ‘most evaluating’ programme.

**Action 30:** The next UBW submission to the PCB will include provision for further UNAIDS development of a shared international monitoring and evaluation support capacity, which is currently being established together with major donors and international partners, and will include:

- a common monitoring and evaluation framework for international partners harmonized through the UNAIDS Monitoring and Evaluation Reference Group (MERG);
- shared technical resource facilities at global and regional levels in support of country monitoring and evaluation efforts;
- strengthening and better use of existing data systems, common reference resources and instruments; and
- common coverage surveys on key indicators and joint studies to measure impact indicators.

106. The PCB-approved UNAIDS Monitoring and Evaluation Framework has become broadly accepted and internalized by countries and international partners. The UNAIDS Monitoring and Evaluation Reference Group has become well established as the international technical forum to harmonize evaluation approaches and indicators, and the Programme is substantially increasing evaluation resources focused on HIV/AIDS within the Cosponsoring organizations and in countries, including through a new UNAIDS team based in the World Bank. Currently, it is working to assist countries to put in place the capacities to monitor their progress against the UNGASS Declaration of Commitment and to strengthen the programme monitoring and evaluation capacities required to keep pace with rapidly expanding programmes.

**Operations research**

107. Recommendation 12 of the Evaluation Report also recommends further research into impact at national and regional levels, with the aim of informing national responses.
**Action 31:** With the goal of increasing capacity at all levels to respond to the epidemic, UNAIDS will support HIV/AIDS research endeavours by:

- refining and promoting a research agenda that addresses priority questions;
- advocating increased funding for HIV/AIDS research;
- enhancing the capacity of country and regional partners to undertake relevant operational research; and
- assisting in the strengthening of abilities to analyse data and translate knowledge into programming and policy at country level.

108. Areas currently of high relevance include research into the effectiveness of behavioural change activities and programmes; the development and testing of vaccines and microbicides; and the validation of methods and assumptions for estimates and projections. There is also a need for greater research into the estimation of economic and sectoral impacts, resource needs, strategies for scaling up access to antiretroviral therapy, and impact alleviation.

**Information as a substantive area**

109. *Recommendation 11* of the Evaluation Report encourages the Secretariat to expand current work on information into a substantial functional area. UNAIDS will intensify its role in providing leadership to the global HIV/AIDS response by means of authoritative and effective information and strategic knowledge provision. This will include: forward-looking advocacy planning in order to proactively shape global and national debates about HIV/AIDS; increased capacity to anticipate new developments; and tailored presentation of evidence and policy to meet diverse needs, interests and concerns of targeted audiences and partners, especially at regional and country levels.

110. In addition to continuing to strengthen the overall knowledge management capacities of the Programme, these efforts will build on four major areas, namely:

- the UNAIDS Best Practice Collection,
- global policy forums and ‘horizontal’ collaboration systems;
- sectoral information and data systems related to HIV/AIDS; and
- support to the development of the Country Response Information System (CRIS).

**Best practices**

**Action 32:** UNAIDS will strengthen global and regional efforts to improve the development and expand access to best practices in programme countries, as described in Action 18, through an expanded and strengthened multi-agency effort to:

- more systematically identify gaps in key policy and programme areas, in consultation with appropriate partners;
- review and include relevant offerings of the UNAIDS Cosponsors and Secretariat and those of major development partners; and
- expand global distribution—electronically and in hard copy—through appropriate partnerships.
Global policy forums and ‘horizontal collaboration’

**Action 33**: UNAIDS will intensify efforts to support policy and strategy development in emerging issue areas through the convening and information support to policy forums. This will include support to ‘group-to-group’ horizontal collaboration and information-sharing between country and regional entities.

Sectoral information and data systems

**Action 34**: The next UBW will include provision for strengthening data collection and analysis in key sectors—in particular, the agriculture and food, education, health and social welfare, and productive sectors—including mapping and increasing access to existing data sources, disseminating key analysis, encouraging the development of consistent and comparable analytic methodologies.

Country Response Information System (CRIS)

**Action 35**: Further to Action 13, the next UBW submission to the PCB will include support at global and regional level for the further development and utilization of the Country Response Information System and other instruments, including provision for:
- access to annual progress reports on UN system HIV/AIDS efforts in all HIV/AIDS programme countries;
- financial reporting categories and methodologies for HIV/AIDS-related spending, which are harmonized among all major donors and international partners and regularly updated; and
- regularly updated, country-by-country reporting from all major financial partners (national, multilateral, bilateral and private sector) of projected current-year disbursements, and project-level, survey-based reporting of actual disbursements in prior years.

Resource mobilization

111. **Recommendation 10** of the Evaluation Report also emphasizes the need to intensify the global advocacy work of the Secretariat and the Cosponsors on political and resource commitments. The PCB Report submission *Financial resources for HIV/AIDS programmes* (UNAIDS/PCB(13)/02.4) takes this work further in elaborating the global resources required to finance the actions included within the UNGASS Declaration of Commitment.

**Action 36**: It is proposed that, beginning in early 2003, the UNAIDS Secretariat will facilitate the development of a multiparty global resource mobilization strategy exercise, with the objective of developing an international consensus on financing the global response.

112. Intermediate products will be presented to the PCB in spring 2003, with the aim of completing the strategy by the end of 2003. Among other elements, the strategy will include an elaboration of the efforts of UNAIDS and other partners towards
improving programme and intervention costing, strengthening resource tracking, and strengthening public advocacy and fundraising.

**Improvements in the UBW process**

113. *Recommendation 14* of the Evaluation Report noted the achievements of the UBW process at global and regional levels in bringing together all planned expenditure on HIV/AIDS by the Cosponsors and the Secretariat. While improvements in the UBW process already initiated are described below, we do not believe it is feasible to extend the same process to reflect all country-level expenditure, as recommended by the Evaluation Team. Nevertheless, we believe the intended purpose of the recommendation is well served by the proposed actions to introduce UN-ISPs with annual reporting to the PCB, develop and implement the CRIS resource tracking module by the end of 2003, and include regional and subregional estimates of anticipated Cosponsor expenditures at national level in the next submission of the UBW, as indicated below.

**Action 37**: Efforts already initiated to make improvements in the UBW process in the current cycle should continue and will include:

- further strengthening of a strategic management approach to ongoing performance monitoring and reprogramming in the UBW;
- further simplification of presentation of UBW including explicit identification of action priorities identified through the Evaluation Report; and
- regional and subregional estimates of anticipated Cosponsor expenditures at national level to be reflected in next submission of UBW.

**E. UNAIDS governance**

114. Within the five Recommendations of the Evaluation Report addressing UNAIDS governance are a number of issues that relate to the management of the Programme. Perhaps the most difficult proposal to respond favourably to is the suggestion within *Recommendation 5* that, at the global level, the Committee of Cosponsoring Organizations (CCO) be replaced with a Management Board with wider representation than the current Cosponsors have. While the Evaluation Report rightly draws attention to the high transaction costs inherent in the interagency functions, it is our view that the proposed remedy mixes the governance, accountability and management functions of the Programme and that other more incremental actions might better serve to improve this level of the Programme’s management function.

**The Committee of Cosponsoring Organizations (CCO)**

115. In our view, the CCO, comprised of the Executive Heads of the Cosponsoring Agencies, with its annually rotating chairperson, has effectively served the objective of broadening ownership of the Programme and internalizing HIV/AIDS as a priority within the respective Cosponsors’ advocacy and programmes. The requirement that the CCO endorse the UBW prior to its submission to the PCB has helped to assure that the organizational and policy issues raised through this major coordinating and harmonizing exercise are addressed by the Executive Heads. Furthermore, the CCO has been instrumental in helping to assure that the ongoing clarification of roles and responsibilities at the more operational levels of the agencies are addressed. In addition to the annual meetings of the Executive Heads, more strategic use of *ad hoc*
meetings at Executive Head and/or Deputy level could be envisioned on pressing organizational and substantive policy issues. However, there is scope for such improvements within the current arrangements, which we believe have effectively served the purpose of directional oversight of the Programme and which we would recommend continue.

**CCO-Working Group**

116. Cosponsor focal points making up the CCO-Working Group provided oversight to the Cosponsor component of the biennium budget, which totalled less than US$5 million in the first biennium and less than US$10 million in the second biennium. Today, the Cosponsor component of the core UBW is US$65.2 million and, taken together with the interagency component of the UBW, totals some US$107 million—over half of the Programmes’ core budget. When the Cosponsors’ direct contributions are taken into consideration, some two-thirds of the total UBW is managed by the Cosponsoring agencies.

117. The complexity of the efforts over which the group is expected to provide planning and strategic oversight has also increased substantially during this period. The development of the UBW requires considerable deliberation and negotiation to achieve clarification of roles and responsibilities and the potential programmatic synergies among the Cosponsor efforts. In addition, the regional efforts of the Cosponsors and the Secretariat have more than trebled, increasing the need for harmonization of the combined UN system efforts at that level. Finally, responding to PCB guidance, a major emphasis has been placed on performance monitoring of the overall UN system response.

118. Most of the Cosponsors have, over this period, increased the relative seniority of the UNAIDS focal point function within their agencies. However, in general, the Cosponsors have been much slower to adequately resource the function. Focal points are required to balance a demanding set of programme advocacy and development responsibilities internal to their organizations, with an equally demanding set of interagency responsibilities. It is on the latter that the greater synergies of the Programme are dependent and they must be given higher priority if the progression to genuinely ‘joint and cosponsored’ programme is to continue in the next phase.

119. To address these issues, the interagency programming and performance monitoring functions will need to be more appropriately resourced and more effectively organized.

**Action 38:** The establishment of an inter-agency **Programme Planning and Development Group** is proposed with ongoing responsibilities for the development, update, strategic oversight and performance monitoring of the UBW and the UNSSP and the preparation of the UNAIDS Performance Monitoring Report.

120. Towards the effective functioning of this group, a number of more operational steps will also be required. They include:

- the development of a group workplan with clearly articulated roles and responsibilities of members, individual and collective outputs, and realistic
estimates of the level of effort required of group members to perform those functions;

- the appointment of senior Cosponsor staff to the group following consultation between the respective Cosponsor Executive Head and the UNAIDS Executive Director, in light of the level of effort that will be required of group members. Optionally, more formal ‘joint appointments’ can be made with the individual group member, carrying both their agency designation and that of Associate Director of UNAIDS. In all cases, appointments should be for fixed terms with reappointment to follow assessment by both the respective agency and the UNAIDS Executive Director;

- the proceedings of the group should be chaired in rotation by the Cosponsor that is chairing the CCO. However, this role should be executed at the Deputy Executive Head or senior director level, enabling the agency focal point to continue in their role as a full working member of the group. The Deputy Executive Director of UNAIDS should serve as the Deputy Chair of the Group;

- the Senior Directors of the UNAIDS Secretariat would also serve as group members; and

- technical, information and communications systems support would be provided by the UNAIDS Secretariat.

121. The Group should co-opt other collaborating partners from time to time to help assure that the UNAIDS planning effort is responsive to their needs and reflects a partnership approach. It is our view that, taken together, these more incremental steps to rationalize and appropriately resource critical interagency functions can have a major positive impact on the quality of the Programme and could be more rapidly implemented with greater effect than would the establishment of a Management Board, as proposed in the Evaluation Report.

**Updating the Memorandum of Understanding with the Cosponsors**

122. **Recommendation 6** of the Evaluation Report proposes that a new Memorandum of Understanding (MOU) be drawn up among the Cosponsors establishing substantive and process objectives, accountabilities and indicators for each at global and national level with respect to the achievement of the UNAIDS goal. While agreeing with the spirit of the Recommendation, we would again propose a more incremental and iterative approach in the interest of both speed and longer-term utility.

**Action 39**: It is proposed that the Cosponsors and the Secretariat review the UNAIDS MOU, and that it be updated as necessary, in order to clarify respective and collective responsibilities within the Programme and the major *modus operandi* for achieving them. It is further proposed that the UBW include for each Cosponsor and the Secretariat their respective substantive and process objectives at global and national level relating to the achievement of the Programme’s overall goal and objectives, together with measurable indicators of performance.

**PCB structure and function**

123. The balance of the recommendations within the Evaluation Report relate more directly to the structure and function of the PCB. Consequently, no proposed actions are offered on these recommendations. However, several key considerations are
shared to inform the PCB deliberations in areas where there are more direct implications on the management of the Programme.

124. **Recommendation 7** of the Evaluation Report proposes that the status of the NGO members of the PCB be changed to that of full voting members. PCB NGO members are currently identified on a regional basis and depend on the Secretariat or whatever resource might be required to support their communications with their constituencies. There is no structured communication between the PCB NGO members and those within the GFATM and other forums. Currently, global-level HIV/AIDS NGOs are not represented within the PCB, nor are the ‘mainstream’-development NGOs, the private sector or the foundation sector.

125. **PCB representation from nongovernmental entities** reflects the important principle of inclusion that has been instrumental in the Programme’s successes. Through the consultation process, the utility of a global-level ‘**Partnership Forum**’ as a basis for broadening this inclusiveness was discussed. Some structured connection between such a Forum and the PCB deliberations was considered desirable, perhaps through representatives of the Forum having some standing or membership within the PCB. Such an arrangement was offered as a means of increasing the voice of the expanding group of global partners within the governance process, while still maintaining the intergovernmental nature of the PCB and a size conducive to its deliberations. Aside from governance considerations, the establishment of a global Partnership Forum has merit as a vehicle to help strengthen the Programme’s partnership development efforts. Some further exploration and development of the concept and its relationship to national and regional partnership forums may be of value to the achievement of both UNAIDS governance and programme management deliberations.

126. **The external evaluation function**, which has been well established though the current evaluation, merits the further consideration of the PCB in its deliberations on UNAIDS governance. **Recommendation 9** of the Evaluation Report opens the discussion of possible subcommittees of the PCB, while **Recommendation 29** proposes that the MERG develop a programme of evaluation studies to look at issues of performance for the programme as a whole towards another global evaluation of UNAIDS five years from now.

127. Currently, the MERG operates as an advisory body to the Executive Director who appoints its members. Some modification of its standing and **modus operandi** may serve the purpose of supporting the external evaluation function. This might include the Chair or Co-Chair of the MERG being appointed by the PCB, who might also serve as the Chair of an evaluation and monitoring subcommittee of the PCB if this path is pursued. A substantive role for such a chair could be envisioned with respect to the appointment of MERG members. The PCB may also want to consider hiring a staff member reporting directly to the subcommittee and/or MERG Chair with the specific responsibility for managing the implementation of the external evaluation function. Maintaining the independence and transparency of the external evaluation function serves the interests of the governance and the management of the Programme as well as that of the major stakeholders. The current deliberations provide a valuable opportunity to strengthen this function for the future.
Section V. Managing Change

128. The Report of the Five-Year Evaluation of UNAIDS has provided a valuable opportunity for the Programme to take stock of its progress and to realign itself in order to maximize its potential in facing the challenges that will be posed by HIV/AIDS in coming years. In order to face these challenges, we must first ask ourselves what the Programme needs to become, rather than what we can accomplish within the design of eight years ago.

129. UNAIDS is not unique in needing to change the prioritization of specific programme objectives over time, to reflect changing needs, opportunities and resource constraints. However, it is unique in terms of the speed at which such change has happened and needs to continue to happen if we wish to keep pace with the expanding epidemic. Strong measures need to be taken if we are to make the most of this opportunity for change. In the face of this epidemic, it would be much more dangerous to be too modest in our plans than too ambitious.

130. The following set of measures is proposed to ensure that the actions decided upon by the PCB are made operational as soon as possible:

- firstly, the submission to the next regular session of the PCB of an updated Unified Budget and Workplan (UBW) that reflects the programmatic changes and resource implications of the actions recommended by the PCB;
- secondly, the submission to the next regular session of the PCB of the mid-term update to the 2001–2005 UN System Strategic Plan that reflects the directional changes signalled by the actions recommended by the PCB; and
- thirdly, inclusion within the next Report of the Executive Director to the PCB of a section reporting progress made in following up the actions recommended by the PCB. Particular attention will be given to actions at country level and their relation to the UN reform process, and a timeline will be given for implementation of any outstanding actions that have not been addressed in the UBW and/or UNSSP.

131. The implementation of these proposed actions will require a reprioritization of UNAIDS work in the upcoming UBW submission. It has significant implications for the numbers and types of skills required of staff among the UNAIDS Cosponsors and within the Secretariat at country, regional and global levels. An overall increase in resource requirements in the range of 30–40% will likely be required. The major share of this increase will need to be in high prevalence and other countries, while the balance will be focused directly on support to those countries. To better inform the PCB distribution on the Evaluation, a Conference Room Paper will be prepared to provide preliminary estimates on the cost implications of the proposed actions.
Annex 1. Planning and Preparation for the Evaluation

A. History of the evaluation

1. Under the guidance of the Programme Coordinating Board (PCB) Working Group on Indicators and Evaluation, and later the UNAIDS Monitoring and Evaluation Reference Group (MERG), the UNAIDS Secretariat developed a framework and a plan for monitoring and evaluation of UNAIDS. At its seventh meeting in December 1998 in New Delhi, the PCB endorsed the approach and priorities described in the Plan (UNAIDS/PCB(7)/98.4). The Plan envisaged an evaluation of UNAIDS in the year 2001, five years after its establishment.

2. At the enlarged meeting of the MERG held in Lausanne on 13–15 September 2000, recipient and donor countries, representatives of bilateral and Co-sponsor evaluation offices, and independent evaluation experts discussed extensively the purpose, scope and management of the Evaluation. Participants proposed a management structure for supervision and implementation. An independent Evaluation Supervisory Panel (ESP), in charge of the overall supervision of the Evaluation, would be assisted by a small Management Support Team (MST), with the UNAIDS Secretariat providing additional administrative support. The ESP would have overall responsibility for identifying, according to specific criteria, the composition and responsibilities of the Evaluation Team that would implement the Evaluation.

3. The meeting also defined the process for selecting the ESP. A small Search Committee would be established, its membership made up of participants of this meeting and chaired by the Chair of the MERG. The role of the Search Committee would be to review nominations for membership of the ESP against the agreed criteria and to present lists of potential members and Chair of the ESP to the PCB Chair. The final decision on the composition of the ESP would be taken by the PCB Chair, following consultations with his immediate predecessor and the PCB Vice-Chair and with inputs from the MERG Chair.

4. MERG participants also agreed at that time that the PCB should first endorse the mandate for the Five-Year Evaluation of UNAIDS, and subsequently initiate the Evaluation by giving the mandate to the ESP.

5. At the extraordinary meeting of the PCB on 27 October 2000 in Geneva, the mandate for the Evaluation, which had been prepared by the MERG, was discussed and endorsed. The meeting also clarified and endorsed the criteria for ESP membership. It recommended that the ESP be composed of 5–7 members meeting specific criteria, and balanced in terms of sex, geographical representation and diversity of skills. The PCB also clarified the role and structure of the Search Committee.

6. The Chair of the MERG communicated the composition of the Search Committee to the PCB on 27 November 2000. A total of 51 valid nominations were received. The PCB Chair, in consultation with the former PCB Chair, the PCB Vice-Chair and the Chair of the MERG, nominated the ESP Chair on 5 December and the other ESP members on 8 December (in consultation with the newly appointed ESP Chair), as follows:
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- Mr Euclides Castilho, Brazil (Chair)
- Ms Torild Skard, Norway
- Dr Andrew Arkutu, Ghana
- Dr Anita Hardon, the Netherlands
- Dr Konglai Zhang, China
- Mr Princeton Lyman, USA
- Professor V. Ramalingaswami, India (deceased)

7. At its tenth meeting in Rio de Janeiro on 14–15 December 2000, the PCB took note of the composition of the ESP and requested that the ESP proceed with the Evaluation as per the approved mandate. The PCB Chair also invited expressions of interest from delegations for in-kind support to the Evaluation process and, in particular, to the MST. The Governments of Canada and the United Kingdom responded, providing initial resources in January 2001 to assist the ESP Chair in preparing for the first ESP meeting, as well as proposing candidates for the MST to the ESP Chair. An ‘interim MST’ met several times in January 2001 to develop an agenda and background papers for the first ESP meeting, with assistance from the UNAIDS Secretariat.

8. The ESP held its first meeting on 30–31 January 2001 in Geneva. In accordance with the Mandate (Annex 1 to PCB document UNAIDS/PCB(10)/00.4), the ESP reviewed its terms of reference and selected its Vice-Chair (Ms Torild Skard). It further defined the roles and responsibilities of the MST, and endorsed proposed candidates. The MST would be composed as follows: the Team Leader (financed by Canada), one member (financed by the United Kingdom), and an Administrative Assistant seconded by the UNAIDS Secretariat. The MST also benefited from ad hoc expertise in the area of evaluation made available subsequently by the Government of Norway. The UNAIDS Secretariat would also provide office space and communications facilities. Finally, the ESP set criteria for the Evaluation Team at this meeting.

9. In accordance with the mandate for the Evaluation, the Evaluation Team was selected by open international tender. The United Nations Office for Project Services (UNOPS) was contracted by the UNAIDS Secretariat, on behalf of the ESP/MST, to provide advisory legal and administrative services for the identification and selection of an evaluation team according to UN standards for international competitive bidding. The selection process was launched in February 2001 through a wide call for expressions of interest from potential bidders. A panel consisting of the ESP Chair, the MST and UNOPS contracting experts assessed the expressions of interest and drew up a shortlist of prospective bidders. A Request for Proposal was issued through UNOPS services in March 2001 to 14 companies/consortia, with a submission deadline of early April. The Evaluation Team—a consortium of ITAD (Information, Training and Development) from the United Kingdom, the London School of Hygiene and Tropical Medicine, and KIT Health from the Netherlands—was contracted in May 2001. It began its work immediately by first preparing an Inception Report for the Evaluation, outlining its design and programme. The Inception Report was finalized on the basis of stakeholder consultations organized over the summer of 2001 (including a workshop held in Geneva on 13 July) and approved by the ESP in early September 2001.
B. Implementation of the Evaluation and interaction with UNAIDS

10. At its first meeting, the ESP agreed that the initial schedule for completion of the Evaluation by the May 2002 PCB (as indicated in the Mandate) was too ambitious, given the complexity of the Evaluation and the need for consultations with stakeholders. At its eleventh meeting on 30 May–1 June 2001 in Geneva, the PCB agreed to a six-month extension of the original timeframe for the completion of the Evaluation, with the final Report to be completed by early October 2002, for discussion at a PCB meeting to be held in late 2002.

11. Implementation of the Evaluation started in September 2001. As per the work programme contained in the Inception Report, the Evaluation Team met with each UNAIDS Cosponsor at least once, and visited the Secretariat five times. Nine country studies were also undertaken (in Argentina, Burkina Faso, Eritrea, India, Indonesia, Mozambique, Namibia, Trinidad and Tobago, and Ukraine) and completed by mid-March 2002. In addition, the Evaluation Team met with a number of government representatives, NGOs and other UN agencies.

12. In early August 2002, the draft Final Report was circulated to key stakeholders. Consultations were organized over the summer, and consisted of solicitation of written comments (with a deadline of 20 September) and a Stakeholder Workshop on 12–13 September in Geneva with ESP and ET members in attendance. This two-day Workshop was attended by 115 participants, comprising 59 representatives of 33 governments, 34 representatives of UNAIDS Cosponsors and the Secretariat, and 22 representatives of other UN agencies and civil society. The Cosponsors and the Secretariat participated actively in the workshop, and provided further written consolidated comments, of a substantive and technical nature, to the Evaluation Team on the draft Final Report.

C. Consultations on the Final Report of the Evaluation Team

13. After the release of the Final Evaluation Report on 8 October 2002, a series of consultations among the Cosponsors and the Secretariat played a pivotal role in mapping out the proposed actions within this paper for a future direction for UNAIDS.

14. Discussions were held at the twentieth meeting of the Committee of Cosponsoring Organizations (CCO) held on 15–16 October in Washington, DC. In late October, the Executive Director of UNAIDS met with executive heads of the Cosponsoring Organizations in order to make a number of proposals and obtain feedback regarding necessary reforms for the Programme’s enhanced performance in the future.

15. Within the UNAIDS Secretariat, a number of discussions and retreats were also organized in September and October to reach consensus about how the recommendations made in the Evaluation Report could best be applied to the UNAIDS Programme. In addition, consultations among the relevant departments and staff took place around a number of key issues to develop and strengthen recommendations for change in these areas.

16. In late October, the UNAIDS Secretariat, together with the United Nations Development Group (UNDG) organized a consultation in New York to review the
country-level UN response to HIV/AIDS. The purpose of the Consultation was to develop collectively with key stakeholders—both within and outside the UN system—practical options for improved UN support to national responses to HIV/AIDS. Participants included directors of programmes and policy development from development institutions of all stakeholder groups, e.g., developing country governments, UNDG members, UNAIDS Cosponsors, national and international NGOs, bilateral development agencies and donor governments.

17. In addition, several external discussions were organized by interested partners and held in early November in order to solicit feedback from specific stakeholder groups on the issues of international governance and civil society engagement. The consultations included participants with expertise in international governance and civil society issues from academia, Member States, civil society, the private sector and the UN system.

18. This series of consultations facilitated our response to the Evaluation’s findings and recommendations and helped to identify consensus approaches, both within the Programme and with outside partners, on the most effective actions to propose in order to take us forward. Each of the consultations played a crucial role in developing options for the strengthening of the Programme required to meet the challenges posed by a complex and rapidly changing environment.
## Annex 2: Functions of UNAIDS

<table>
<thead>
<tr>
<th>Level</th>
<th>Functions</th>
</tr>
</thead>
<tbody>
<tr>
<td>All levels</td>
<td><strong>Five cross-cutting functional areas</strong>&lt;br&gt;• leadership and advocacy for effective action on the epidemic;&lt;br&gt;• strategic information required to guide the efforts of partners;&lt;br&gt;• tracking, monitoring and evaluation of the epidemic and actions responding to it;&lt;br&gt;• civil society engagement and partnership development; and&lt;br&gt;• financial, technical and political resource mobilization.</td>
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<tr>
<td>Global</td>
<td>• continued advocacy for political and resource commitments;&lt;br&gt;• information services and research to support policy development and on the ramifications of HIV/AIDS for social and economic development;&lt;br&gt;• harmonization of roles and resources of the UN system agencies under the leadership of the UNAIDS Secretariat;&lt;br&gt;• coordination support and services to all parties involved in responding to HIV/AIDS.</td>
</tr>
<tr>
<td>Regional</td>
<td>• coordination and facilitation through existing regional entities on HIV/AIDS priorities;&lt;br&gt;• policy support to countries to tackle cross-border and transnational issues;&lt;br&gt;• identify and promote high-quality national and international technical resources from and through Cosponsors and other programme partners;&lt;br&gt;• support strengthening of monitoring and evaluation in countries;&lt;br&gt;• support regional leadership and partnership development activities; and&lt;br&gt;• support training and reorientation on HIV/AIDS within the UN system and with key programme partners in priority countries.</td>
</tr>
<tr>
<td>Country</td>
<td>• direct support to National AIDS Councils’ capacity development;&lt;br&gt;• advocacy with special emphasis on political and resource commitment, the inclusion of women and marginalized groups, development of partnerships, and horizontal learning;&lt;br&gt;• assessing needs and brokering technical assistance;&lt;br&gt;• support to national policies, strategy and legislation to promote an expanded response;&lt;br&gt;• support for evaluation and analysis to support an expanded response;&lt;br&gt;• programme support to help mainstream and scale up HIV/AIDS approaches at national and decentralized levels of the State; and&lt;br&gt;• provision of norms and standards and a technical link between government and the international community.</td>
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UNAIDS Strategic Vision

1. Recommendation 1 The current ECOSOC objectives should be replaced by a single goal supported by specific roles. This will need to be determined by ECOSOC, but the following statement is proposed:

**Goal of UNAIDS**

“To achieve the adoption of an expanded response appropriate to the state of the epidemic in all member countries through nationally-led provision of adequate and satisfactory services for reduction of risk, reduction of vulnerability, and reduction of impact of the disease.”

2. Recommendation 2 The roles of the programme need to be redefined, with specific allocation of responsibility. All roles should be supported by functions with objectively verifiable indicators and targets. This recommendation is addressed to the PCB. The following statements are proposed. In a subsequent recommendation, a new MOU would require that Cosponsors specify outcome objectives for their contribution to these roles.

3. Recommendation 3 UNAIDS, working at country level through the theme group, should support the Global Fund in a number of practical ways: monitoring trends in the national response and advising on how applications to the fund can be designed to conform with an expanded response and align with the national strategy; advising how expenditure under the fund can support scaling-up; promoting learning from the experience of expanded theme groups by promoting joint membership of eligible parties on both the expanded theme group and CCM; monitoring funds made available through the Global Fund to determine whether they are in addition to other committed national and international funding; and providing guidance and technical support for monitoring and evaluation of Global Fund programmes.

4. Recommendation 4 That the Secretary-General and UNDG take note of UNAIDS’ experience and promote reforms that: denote clear and visible lines of management authority with objectives and measurable indicators; create personnel and financial incentives for agencies to programme jointly; and shift the accountability of the country team to a demand-driven service to meet the needs of national stakeholders.

UNAIDS governance

5. Recommendation 5 That the PCB review and adopt an expanded model of governance, drawing on the scenario in Annex 7 of the Evaluation Report, in order to focus all actors on boosting the complementarity of their actions to supporting the expanded global response. Most significant, at global level, is to replace the CCO by a Management Board with wider representation than the current Cosponsors. The PCB is urged to implement a rapid process, similar to the creation of the GFATM, in order to accomplish the change within a short period.

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2 From Section 8, pages 45–58 of the Evaluation Team’s Final Report.
6. **Recommendation 6** A new **Memorandum of Understanding** should be drawn up for all the Cosponsors. It should state clearly the goal and roles of UNAIDS (the subject of Recommendations 1 and 2); it should set out the obligations of each Cosponsor, the obligations of the Secretariat, and set objectives and indicators for the Secretariat and each Cosponsor, both in terms of substantive progress towards the UNAIDS goal, and process objectives of being a member of the joint programme at global and national levels.

7. **Recommendation 7** That the status of NGO members of the PCB be changed to that of full voting members.

8. **Recommendation 8** That a direct link be created between the PCB and governing bodies of the Cosponsors, by changing the representation of each Cosponsor at the PCB to be a member of the Cosponsor’s governing body. If this change is made, the status of the Cosponsor could be changed to that of full voting membership.

9. **Recommendation 9** a) that the PCB change the meeting agenda to allocate time for substantive discussion; and b) that the PCB delegate the roles of budget scrutiny and performance assessment to the Management Board or designated subcommittees.

**Global-level work of the Programme**

10. **Recommendation 10** That UNAIDS, through the work of the Secretariat and all cosponsors, maintain global advocacy, with particular emphasis on political and resource commitments. Opportunities need to be taken to advocate a gendered response and to promote the successful techniques of partnerships and horizontal learning.

11. **Recommendation 11** That the Secretariat expand current **work on information** into a substantial functional area to support the roles of coordination, advocacy and capacity building.

12. **Recommendation 12** The Secretariat should work with Cosponsors to develop a strategy and workplan to promote **evaluations and research** into impact at national and regional levels, with the aim of generating data to inform national responses. Priority should be given to studies of behavioural change and contextual factors, including gender, stigma and poverty (Chapter 5).

13. **Recommendation 13** Develop CRIS with objectively measurable indicators of an expanded response at country level, and report annually, in a published and publicly available format (paragraph 5.11).

14. **Recommendation 14** The good work done in the UBW to bring together all planned expenditure on HIV/AIDS by the Cosponsors at global and regional levels should be continued and expanded to reflect all country-level expenditure as well.

**Regional and inter-country work in support of countries**

15. **Recommendation 15** UNAIDS should continue to support **regional initiatives** that are demand-driven by the needs of countries in the region and, where possible, linked to existing institutions. Opportunities should be taken to develop new services such as regional skill-building workshops. The resources of the Secretariat through the Inter-Country Teams should not be used for coordination among regional offices of the Cosponsors.
Country level

16. **Recommendation 16** A contingency plan for a *humanitarian response* at country level should be prepared under the direction of the PCB.

17. **Recommendation 17** The Cosponsors should promote high standards of transparency and reporting by publishing and making publicly available all Cosponsor country and regional budgets and the annual out-turn. This will address an original expectation that UNAIDS would provide governments with a clearer, more comprehensive view of the financial and technical support available from UN organizations. Improved information will enable all stakeholders to interact in support of the expanded response. This recommendation is challenging, as complications of budgetary cycles and mainstreaming of activities make identification of HIV/AIDS expenditure and allocation of staff resources difficult. As noted above, this is a challenge to be overcome and not a reason for procrastination.

18. **Recommendation 18.** In view of the importance of multisectoral expenditure towards an expanded response, *Recommendation 18* is that, in those countries where a medium-term expenditure framework and public expenditure review process is underway, HIV/AIDS be treated as a specific crosscutting topic for monitoring and reporting. This is an important role for all Cosponsors, but especially the World Bank, in view of its convening power with ministries of finance.

19. **Recommendation 19** OECD donors should link their own bilateral country programmes to national HIV/AIDS strategies and make financial contributions to HIV/AIDS work by the Cosponsors conditional on demonstrated integration and joint programming, reflecting the comparative advantage of the Cosponsors at country level.

20. **Recommendation 20** is to continue with and expand the PAF facility, especially to support monitoring and evaluation, if current initiatives by the Secretariat can be shown to improve the allocation process, utilization and speed of processing. Alternative procedures should be examined to improve effectiveness.

21. **Recommendation 21** is to endorse the work of the Secretariat and for the PCB to keep total numbers of CPA under review and, as appropriate, authorize and fund an expansion to enable deployment to additional countries as information about the evolving state of the disease changes.

22. **Recommendation 22** The UN Theme Group on HIV/AIDS and its associated Technical Working Group provides a service as a technical secretariat to the national response. In this role, all theme groups should have clear objectives with monitorable indicators of both substantive change and process contributions to the national strategy. It must be clear that the chair of the theme group is accountable for the joint programme of the Cosponsors being aligned to the national strategy and to reflect the comparative advantages of the UN system agencies in that country.

23. **Recommendation 23** Where circumstances permit, expanded theme groups should evolve into partnership forums, led by government, in line with the scenario set out in Annex 7 of the Evaluation Report. In such cases, theme groups may then revert to UN-only membership. In any event, as theme group expansion occurs, the CPA and UNTWG should report to the UN Country Team on HIV/AIDS issues.
24. **Recommendation 24**: UNAIDS at country level should expand and strengthen national systems to monitor and evaluate interventions, and analyse surveillance data, building on the methods and tools developed by the programme. Countries with severe generalized epidemics should be supported in conducting repeated national surveys on high-risk behaviours. This will require funding and is therefore directed at both UNAIDS and donors.

25. **Recommendation 25**: That a programme of joint reviews led by national governments be launched, building on current practices for mid-term reviews and rapid impact assessments among development organizations. Reviews should be programmed according to priority outcome objectives in national strategies, and examine both the effectiveness of interventions and the supporting performance of institutions, including national AIDS programmes and UNAIDS (Secretariat and Cosponsors). They should be conducted by teams drawn from government, civil society, UNAIDS and OECD donors. This will require funding and is therefore directed at UNAIDS, donors and national governments.

26. **Recommendation 26**: To maintain and expand the successful work of advocacy, the UN system at country level must take a strategic view of implementation of national policies and strategies and exploit opportunities for synergy between the sectors. Capacity of national actors must come ‘from the heart’ and not fail to include gender competence. Since the aim is to get incremental processes going, the UN role is mostly that of an enabler, helping to create good examples where none exist, and reinforcing good examples where they do.

27. **Recommendation 27**: As a service to national governments, partner donors, the private sector and NGOs to act as brokers of good practice for local-level efforts that are designed for horizontal learning and replication, and that comprise the combined principles of good practice identified in the Global Strategy Framework and in the UNGASS Declaration. In this, to give particular emphasis to the interface of local services and community response (Theme Groups, Secretariat and Cosponsors).

28. **Recommendation 28**: Increase support for scaling up by developing strategies as a service both to national governments and to partner donors. These strategies should build in horizontal learning and be linked to information derived from monitoring and evaluation (Secretariat).

29. **Recommendation 29**: The MERG should develop a programme of evaluation studies to look at issues of performance for the programme as a whole, as a set of building blocks to contribute to a global evaluation of UNAIDS five years after this study is presented to the PCB, in 2007 (PCB, MERG and donors for financing).