

## WRITTEN COMMENTS FROM MEMBER STATES

JUNE 11, 2009

# Danish Comments to the Preliminary Findings of the Second Independent Evaluation of UNAIDS

## 1. METHODOLOGY

The Consultation Document (CD) contains little information about evaluation methodology, prompting several methodological questions. The Evaluation Team has informed the stakeholders that the final report will include a section on evaluation methodology. Based on the CD and the discussions during the Stakeholder Workshop 3-4 June, the following methodological issues have been identified:

- The CD suffers from a lack of transparency, including failure to indicate how respondent characteristics are taken into account in the analysis of web surveys. How does the analysis, for example, address the potential answer biases when UNAIDS Secretariat staff evaluate UNAIDS contributions in the web survey?

*The final report should describe how stakeholder input and web surveys are used in the analysis.*

- The CD provides limited access to background information. As a consequence, neither the strength of the conclusions in the country reports nor the analysis of evidence across countries can be assessed. It is recognised that access to information is restricted by the non-disclosure of transcripts promised before stakeholder interviews. This should not prevent a broader cross-cutting analysis of the trends emanating from these interviews. At this point in time only seven out of twelve country studies have been made available. And while they follow a common structure there are considerable variations in the quality of the reports (e.g. Kazakhstan vs. Vietnam) that must be taken into consideration when synthesizing information from all country studies.

*In order to improve insight into the robustness of evaluation findings, it is important that better access to background information be provided.*

- Most of the information in the CD is presented in a qualitative way, and the document does not consider the background and context of the evaluated performance. Country level differences in governance, the degree of implementation of the Paris Declaration and level of engagement of other HIV/AIDS organisations are, for example, not systematically included in the cross-country analyses.

*The final report should present key information about country specific background and context in a systematic manner and include relevant differences in the cross-country analyses.*

- The CD does not systematically analyse whether UNAIDS priorities and performance has changed over the five year period covered by the evaluation. An analysis of how UNAIDS has allocated its resources over time, as indicated in UNAIDS budgets, staffing and plans, would provide a valuable opportunity to assess how UNAIDS has reacted to the frequent and dramatic changes in the global environment.

*The final report should systematically include a chronological perspective to assess how UNAIDS has responded to change.*

Overall, these problems should be addressed to ensure the robustness and validity of the conclusions and recommendations presented in the final report.

## **2. CONTENT**

Although the CD is work-in-progress most of the answers provided to the twelve evaluation questions are formulated in precise and unambiguous terms. The overall assessment of the outcomes is positive on UNAIDS performance in regard to i) involvement of civil society, ii) human rights (especially at HQ level), and iii) greater involvement of People living with HIV/AIDS. At the other end, little or no progress is found for instance when it comes to UNAIDS' efforts to: i) strengthen health systems, ii) implement the Division of Labour and iii) administrate the joint programme. Specific comments regarding some of the 12 evaluation questions are as follows:

### **Evaluation Question 1: Response to the first five year evaluation of UNAIDS**

It is of considerable concern that only 50% of the recommendations of the first 5-year evaluation have been fully implemented. In particular, very few recommendations concerning governance have been put in place. The assessment of progress in the CD, however, seems to rely on an assessment of the status quo. To fully and fairly assess how

UNAIDS has responded to the first five year evaluation the final evaluation report needs to also consider past budgets, plans and initiatives.

In this context as well as under Evaluation Question 5 on Governance the CD raises serious questions regarding the functioning of the PCB. Denmark has, as a member of the Governing Board, raised this issue at previous PCB meetings as well as in talks with the Executive Director. The work of the PCB was also brought to the attention of the PCB during the Swedish chairmanship of the Board. The PCB then took some important decisions on both the role and the working methods of the PCB, but these decisions still remain to be implemented.

*The final report should devote more attention to the documentation of UNAIDS efforts to implement previous recommendations and to the PCB performance following the publication of the first five year evaluation.*

### **Evaluation Question 2: Responding to the context**

The CD analyses of the key relationships between UNAIDS and the Global Fund and especially PEPFAR as presented in the CD seem rather cursory (Ukraine, Indonesia, Kazakhstan and Peru cited on page 7 of the CD are, for example, not PEPFAR focus countries). The establishment of the GF and PEPFAR has radically changed the field of HIV/AIDS, and UNAIDS actions in relation to these two actors should be comprehensively analysed and mapped in the final evaluation report. In addition, a clear definition of what is meant by “responding to the context” is needed as considerable overlap with other evaluation issues such as technical support and inter agency cooperation and coordination in the CD is noted.

*The final report should decide what is included in “responding to the context” and devote more energy toward the analysis of the evolving relationships with key HIV/AIDS organisations (such as GF and PEPFAR) and associated changes in global HIV/AIDS funding.*

### **Evaluation Question 3: Strengthening health systems**

Although, the CD finds no significant added value of UNAIDS as a joint programme, the document does not substantiate this finding sufficiently. It should be made clear to what extent the Secretariat (and the co-sponsors) has addressed the growing concern for health systems malfunctions. It should distinguish clearly between health systems strengthening of preventive versus curative capacity, and it should point to characteristics of country differences identified in the case studies. Particular attention should be given to critical health systems elements such as human resources.

*The final report should analyse efforts of the Secretariat and of the co-sponsors respectively in health systems strengthening and undertake a systematic analysis of country level differences.*

#### **Evaluation Question 4: Delivering as One**

The CD should acknowledge that both the UN reform and the Paris Declaration are recent and very complex reforms. A recent OECD evaluation of the implementation of the Paris Declaration (Wood et al. 2008) consequently finds wide variations in country level usefulness, implementation and relevance of the Paris Declaration. The CD analysis does not, however, seem to take this into consideration per se, nor does it provide an overall assessment of UNAIDS contributions to country level harmonization and alignment, though this is implicit in the Three Ones.

The country report from Iran includes a graph (Fig 1) of how the issue of joint programming can be illustrated. This could be adapted more widely in the report.

*The final report should take country and institutional context into account when assessing whether UNAIDS has succeed in Delivering as One.*

#### **Evaluation Question 5: The governance of UNAIDS**

The CD relies mainly on stakeholder interviews and web surveys, resulting in discussion of how stakeholders want UNAIDS to evolve. More attention needs to be devoted to documenting how governance has evolved vis-à-vis identified strategies and plans. In addition, the CD does not present governance incentives (or the lack of these), resulting in few attempts to explain why, for example, increased reliance on global coordinators may represent a governance problem.

*The final report should differentiate between stakeholder expectations to UNAIDS governance and existing governance plans and objectives. See also comments to Question 1.*

#### **Evaluation Question 6: The Division of Labour (DoL) between the Secretariat, co-sponsors, agencies and countries**

Although the section in the CD regarding the DoL is extensive (11 pages long), it does not bring sufficient clarity to this issue. This question should be subject to sharper analysis and would benefit from drawing on the many useful inputs provided during the stakeholder workshop. Greater attention to the incentive structures and the inter-organisational division of labour is needed to explain limited progress.

In addition, one of the key issues related to this question, the substantial expansion of Secretariat staff, is addressed in at least two other chapters of the CD. Furthermore, the final report must seek to include additional documentation on the DoL challenges, keeping in mind that the DoL is still a relatively new concept (agreed to in August 2005).

*The final report should address the gaps and duplications of the CD. It is recommended to extensively rework the section on DoL, including identification of more tangible indicators of how the DoL is working.*

#### **Evaluation Question 7: The administration of the joint programme**

The CD adopts a forward-looking perspective to this question and discusses whether an improvement is likely by the end of 2010. Although, the inclusion of a forward looking perspective may not be according to the terms of reference, the implicit acknowledgement that changes occur slowly and that an understanding of current initiatives (sometimes) requires a forward-looking perspective should perhaps be expanded to the entire analysis.

*The evaluation team may consider whether a forward-looking perspective should be expanded to include the entire evaluation.*

#### **Evaluation Question 9: Gender dimensions of the epidemic**

The CD does not include an analysis of the extent to which UNAIDS support to address the gender dimensions of the epidemic has been accompanied by increased budget allocations to gender issues.

*It is suggested that the final report look at changes in gender budget allocations, which could provide an indication of whether a gap exists between gender rhetoric and gender related actions.*

#### **Evaluation Question 10: Technical support to national AIDS responses**

The CD devotes one page to the evaluation of UNAIDS support to national monitoring and evaluation (M&E) systems. However, given the importance of monitoring and evaluation as one of the Three Ones and in ensuring an effective use of available resources, the final report should consider a more extensive analysis of UNAIDS technical support for M&E. In this context, the final evaluation could analyse why UNAIDS has been more successful in its support to monitoring activities than in its support to evaluation activities.

*The final report should consider devoting more attention to the evaluation of UNAIDS technical support to enhance national M&E capacity.*

### **3. CONCLUSION**

The final evaluation report is expected to contain discussions and analyses of possible solutions to the problems identified. In order to ensure that recommendations presented are feasible and valid the two key methodological shortcomings of the CD must be addressed:

1. The final report must be as open and transparent as possible about the analytical methods and data used to arrive at the presented conclusions.
2. The final report should systematically present information about the background, context and not least the actions undertaken by various UNAIDS stakeholders, making it easier to attribute contributions to different organisations and stakeholders.

In terms of substance, particularly central points among those mentioned above are:

1. The issue of whether the problems and issues identified can be solved through the existing structure of UNAIDS, and
2. How UNAIDS governance has developed over the evaluation period.

The evaluation report must provide a thorough analysis of why and where progress has occurred/ not occurred and in particular what role the Secretariat, the co-sponsors and the PCB have played respectively.



*Department for Multilateral  
Development Cooperation*

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### Swedish comments on the

### Preliminary findings of the Second Independent Evaluation of UNAIDS

#### A. Introduction/General comments

- In general quite an interesting document that tackles the main issues without hesitation and this should be commended. The document is exemplary structured and easy to read. Many of the findings about the role, mandate and work of UNAIDS, especially the challenge of making a joint program a reality, are the same as member states and donors have highlighted previously.
- A problem though is that **it is not clear how compiled information has been put together and analysed**. The information coming from the web-based survey seems to be given too large a role in the preliminary findings. This implies a risk of **validity being questioned**. Even though that some explanations were given at the stakeholder consultation the methodological approach will have to be presented more thoroughly in the final report to be presented.
- Furthermore, there is in this document **limited access to background information, including the country case reports** of which only three of the twelve country studies are available at the time of writing. This means that the assessment of UNAIDS performance at the country level is not backed by a systematic analysis of the evidence derived from the country case studies
- The final report should be clearer in the **usage of key terms and definitions**. There is a mixture of how the terms “vulnerable groups” and “key populations” are used. Also, we strongly recommend that the term “sexual minorities” is changed to **“lesbian, gay, bisexual and transgender populations/LGBT-populations**.
- The document is uneven in terms of presentation of findings and recommendations (not so much on the latter). However, we take it that it is **a key task for the Evaluation Team to take the findings to concrete recommendations in the final report**.
- The **regional level** and the role of the UNAIDS at that level, including the Secretariat’s regional offices, is not highlighted in this document. This is something we expect to be part of the final report. .

## B. Recommendations from the Five year evaluation

- The reason for why so **many results from the first evaluation have not been implemented** should be analysed – they concern important areas such as objectives, governance and management. We do note, however, that recommendations under the control of the secretariat and for which resources were available have been implemented to a larger degree.
- One caveat is also that it has to be ascertained **whether recommendations from the first evaluation are still relevant**. It may be that the scene today is too different from what it was 7 years ago or that the decisions by the PCB in December, 2002 actually took care of the substance of the recommendations.
- Another reflection concerns the **recommendations on Governance presented by the first evaluation**. Those were considered by the PCB not to be acceptable, so the PCB organized a separate process on Governance during the spring of 2003. However, this process was not successful and led to very few results. Shortcomings in this field should therefore be attributed to member states, including the functioning of the PCB, but also the Boards of the co-sponsors.
- **Role of PCB Bureau**; The document says that governance has failed, but there is no mentioning of the PCB Bureau in the document and how the work of the Bureau might have made progress or not.

## C Responding to the context

Evolving role and priorities of UNAIDS.

- **There is a need to disaggregate and further contextualise the evaluation findings and recommendations**. This chapter is too general. The final report will have to take into consideration and build on the fact that the **world has to deal with at least two or three different types of epidemics**; concentrated, generalised and hyper epidemics. The report should therefore reflect on UNAIDS role and response in a more qualified and disaggregated manner, taking these different contexts into account. A clearer focus on the context should be included in all parts of the final report.
- The HIV situation in countries in southern Africa is indeed exceptional, which should have implications on the role and mandate of UNAIDS in this region. In our view, we would have **liked to see a critical analysis about UNAIDS mandate, work and relationships where this contextualisation is at the heart of the discussion**. What should be the role of UNAIDS, including the Secretariat, in the different contexts?
- As an example, **one question** that could be addressed is if it would be advisable that **the UNAIDS Secretariat and the UCC representation in countries with hyper epidemics should expand**, at the expense of staffing in countries with concentrated epidemics?
- **Another question** that could be addressed is **if it is appropriate to have such a large share of UNAIDS Secretariat staff at HQs in Geneva?**

- The document notes that UNAIDS has evolved in response to the changing patterns of global finance and has **generally been effective at developing relationships**, for example partnerships with PEFAR, Global Fund and others. On synergies the picture is more mixed even though some examples of synergy also can be found. Why does it look like that?
- On **evaluations**, there is a need to elaborate on why these, when they occur, **tend not to be planned systematically across the cosponsors**.
- UNADS **technical support role also needs to be clarified**, for example the balance between being proactive or responsive. A lack of coherence is recognized among co-sponsors to create a systematic approach. For example the roles of the secretariat, the World Bank and UNDP have not been clarified in supporting national planning processes. The final report should elaborate on how to improve the present situation in these areas.
- The final report should also try to clarify **why the relationship with the private sector is so weak**.
- It is noted in the document that **synergies** have been developed in the field of research and resource tracking, but also among development partners and organizations of vulnerable populations and people living with HIV and AIDS. **Any reasons for why these areas have been more successful?**
- While the document notes that there has been good support to develop national M&E capacity (see findings under Question J, Technical Support) the document also notes that there is **little evidence of a systematic and good quality approach to evaluate different interventions, policies and strategies implemented across many partners**.

#### Strengthening Health Systems

- The document elaborates extensively on HSS and notes that UNAIDS has not had a very substantial influence on HIV and HSS at country level. **In our view we are not convinced that this is an area where UNAIDS, in particular the Secretariat, should be that much involved in HSS**. This being said it is important that relevant co-sponsors within the UNAIDS family are part of the overall efforts for HSS. For example, WHO has used HIV-related issues as a platform to promote health sector reforms and to strengthen aspects of health systems such as human resources, laboratory services and drug resistance surveillance, and UNFPA has provided considerable support to strengthen convergence between HIV and sexual and reproductive health services.
- The document also notes that **UNAIDS approach to health systems strengthening and role vis-à-vis global initiatives is not clearly articulated**. An example on this is that the respective roles of the secretariat, WHO and the World Bank have not been defined and agreed. The comparative advantage of the secretariat is unclear and there is a perception that the secretariat has been cautious about engaging in the issue, since WHO considers health systems strengthening as falling within its mandate. How can this situation be improved? What can, and should, be done in reply to these findings?

- Furthermore it **would be interesting if the final report would elaborate on the fact that lack of a common position and objectives has limited the scope for UNAIDS** to influence major donors such as the Global Fund and PEPFAR. Would it be possible, and/or advisable, to articulate a clear joint position; to bridge the gap between health systems strengthening and AIDS exceptionalism advocates; to ensure cosponsor coherence, harmonise technical support and strengthen coordination at country level.
- The document notes that the **work on HSS is complicated by, i a the separation of responsibility for HIV and health systems within WHO. Also the World Bank**, which also has an institutional separation of responsibilities for health and HIV, has had limited engagement on the issue of HIV and health systems strengthening. Would it be possible to go one step further in the final report, in addition to note these facts?
- UNAIDS' participation (both the Secretariat and some co-sponsors) in the IHP+ process is most welcome. But it can be noted that this does not happen as a joint program. For example, the secretariat, WHO and UNICEF are involved in the IHP working group on validation of national health plans and the secretariat, UNICEF and UNFPA are represented on the IHP international financing task force for health. The secretariat supports WHO and World Bank work in this area and is a signatory to the IHP+ global compact, which brings together H8 agencies and others. **What this means for UNAIDS at country level is unclear.** In Ethiopia, for example, which is an IHP compact country, the UNAIDS Secretariat is a signatory to the compact, but the implications of this for the work of the secretariat or the joint team do not appear to have been defined.
- The document, rightly so, also notes that Health system issues are, by and large, included in national HIV strategies. In most of the countries visited for the evaluation, there are **links between HIV and health strategies**, and health systems issues are included in national HIV strategies and plans.
- The document holds a good discussion about the **relationships and challenges between National AIDS Councils (NAC) and Ministries of Health at country level.** It can be noted that the problem with health systems strengthening is partly with financial structures and funding modalities where GF, PEPFAR, WB are still in a project mode and do not support strategic plans. **A main problem is the disconnect between MoH, CCM and NAC.** There is no coherence and understanding between these institutions thereby hampering the closer relationship between health systems strengthening and HIV work and this should be highlighted in the report. This should be further elaborated in the final report.
- One question to be addressed is if “the three ones” actually complicate things and distanced the health ministries from the NACs? This being said, and as we see it, the success of UNAIDS strategy of implementing the **“three ones” principle (most countries have actually adopted this principle) is absolutely unique.** This is the single most effective way of implementing and moving the Paris agenda forward.

- **The document also identifies the need for strengthening systems also in other sectors.** It is important to recognise that the multisectoral response needs also to be context specific. HIV is not only a health concern, but actions made or not made in other sectors has an impact on people's health. To come to terms with these issues there are often structural problems which require political will to change. Here, UNAIDS role making advocacy around the need for a multi-sectoral response, is absolutely key.
- It is noted that, although the **evaluation design does not specifically refer to UNAIDS' role vis-à-vis a multisectoral response**, this issue was raised in relation to concerns about a shift towards a 'medicalised' response led by the health sector. Informants highlighted the need for **ongoing support for the engagement of non-health sectors and for UNAIDS to advocate for strengthening systems in sectors that also play a critical role in the HIV response such as education and social welfare**. The final report should elaborate on if concerns expressed during the evaluation that UNAIDS has not made a convincing case for a multisectoral response and that efforts to support mainstreaming, for example, through the World Bank MAP, have not been very effective. Related to this, UNAIDS needs to identify and focus on priority sectors rather than mainstreaming in general and to evaluate the added value of a multi-sectoral approach.

#### Delivering as One

- It can be noted that this is an **inborn UN problem and that UNAIDS alone cannot solve all aspects of this**.
- The document is quite clear in its wording about that neither UN reform nor the Paris declaration have significantly affected the way UNAIDS work, though some benefits have arisen through joint teams at country level. **This being said, this is an area where we consider the document and the findings too negative and maybe not really thorough enough.** In our view, the "three ones principle", and the follow up work done through the GTT process clearly show that UNAIDS has been doing quite a lot to adapt to Paris and Accra.
- However, the document also shows many of **the reasons for why progress has not been better. The fact that neither ECOSOC nor PSC can direct specialized agencies** is one important aspect of the problem. The situation vis a vi the four ExCOM agencies is quite different.
- The document makes it clear that **action in the field of HIV and AIDS must be seen in the broader context** and that member states in other processes, for example in informal consultations in the GA during 2008 have showed that fundamental reform of the UN in development is maybe not to be expected.
- For the regional and country levels the document is critical to the Regional Directors Team approach. According to the document little value is added to the effectiveness and coordination at country level thanks to the regional level. This is an area for further studies and analyses.
- In our view the **RDT was quite a failure as the cosponsors did not commit to the idea**. The report says that it was because RDT was not operational and inclusive of major organisations,

but in fact most UN organisations did not send senior officials to RDT meetings. Further, the document should have analysed more how the expansion of RSTs have affected UNAIDS work in countries.

- The **national level is an area where there has been some success stories**; joint themes, etc. The link to overall UN reform is, however, not clear. This is an area where we believe that HIV and AIDS, very much activities through UNAIDS, have been able to show that reform is possible. And also take the lead in the reform work.
- We support the documents call for **better incentives for reform**, and for working together. The role of the RC is crucial.
- The document is critical about **the link to Paris/Accra and the way UNAIDS works**. Following earlier comments this is an area where **we do not fully agree**; see our comments on the three ones, the GTT etc.
- There is a paragraph stating that UNAIDS role is particularly important in middle income countries. However, in line with the above, there **should be a more qualified discussion about UNAIDS role in different contexts**. What about UNAIDS role in West African and Central African countries e.g?

#### D. How UNAIDS Works

Governance oversight and PCB capacity and working

- The report states that PCB-members believe PCB is managed efficiently and that there is little interest in reforming the process. **Sweden questions this view and argues strongly that there is a need to continue the reform process in order to improve PCB as a governance institution**. In our view a lot can be done within the framework of the current mandate by the ECIOSOC. Sweden presented, and PCB agreed, on a number of proposals during the Swedish chairmanship 2006-07 – decisions that still stand to be implemented. Both the setting of the agenda of the PCB, and the working methods, needs to be improved.
- The fact that the EDs annual reports do not include follow up of the PCB decisions has to be acted upon. Also, **it is alarming that the cosponsors still do not sufficiently discuss PCB decisions at their Boards** even though member states and donors have asked for this.
- The document also notes that there is no way today to track performance of either the secretariat or the ED. This is an important conclusion that we would like the evaluation to **look further into and see how such a performance monitoring could be arranged within the UN framework**.
- Sweden **appreciates the clarity of the document on the matter of voting rights for NGO:s**. We think there are good arguments on this matter (cf also the statement by the Nordic coun-

tries, Switzerland and Austria on this issue at the PCB meeting in December, 2008). But less convincing are the rest of the arguments in that paragraph(s).

- We feel there are **reasons to be concerned about the fact that the CCO is given less attention and the little interest/involvement of Heads of agencies**. As much as we understand the reasons cited by the document, we think that the participation and commitment by Heads of agencies is something that should go hand in hand with the status as co-sponsor of UNAIDS.

Results based management of UNAIDS is lacking.

- Several of the findings in this chapter points to the fact that UNAIDS **still has a long way to go to be a results based managed “institution”**. Sweden believes it is absolutely key for UNAIDS to strengthen performance monitoring and results based management. This is something that the PCB has emphasized also.
- **UNAIDS failure to take the lead on prevention is not addressed** – and ought to be as we see it. It would have been appropriate, for example in the section on division of labour, to have some reflections on UNAIDS’ inability to take the lead on prevention during the evaluation period, i a enhancing programming consistency, resource allocation and mobilization of actors in the field.
- **Specialised agencies should be allocated resources depending on past performance** in a transparent manner through the UBW.

Neither UCCs role at country level nor the regional level/offices of the Secretariat are analysed and dwelled upon in sufficient manner

- At country level, the success of UNAIDS is highly dependent on the capacity of the UCC. The fact that the UCC does not hold the same status in the UNCT as heads of agencies has implications. **The role of the UCC should have been looked at in more depth.**
- Related to the role and mandate of the UCC is the question about **the UN HIV/AIDS Technical working groups – what is the merit of this system?** The role of UNAIDS at the regional level is also lacking. E.g. UNAIDS regional office in Johannesburg holds a key role towards regional economic communities, governments and UN country teams in this region. **As an example, the report should have analysed more how the expansion of RSTs have affected UNAIDS work in countries.**

UBW

- UBW is – or should be – an important tool for coordination, consistency etc. We **share many of the findings under this section and think that it should be possible to use them as an input to the further work in sharpening the UBW**, and, if necessary, creating another instrument to complement the UBW.

- It is of great **concern that UBW is still difficult to understand**, yet it is not functioning as an internal planning document for the specialised agencies. The document states, for example, that the **UBW does not influence the programming intentions of the co-sponsors**. If UBW could reflect all HIV/AIDS resources of the cosponsors a great improvement would be made. It is a fact that the UBW funding mechanism makes it difficult for UNAIDS to respond timely to new needs and changing environments.
- Some donors, like Sweden, have provided additional funding to UNAIDS **programmes that have not been able to accommodate within the UBW, despite being perceived as highly prioritised**. UNAIDS regional programme on prevention in southern Africa is a concrete example of this.

#### Division of labour.

- The document clearly shows that there is **still much to do on this matter**. In our view it is crucial that we see more progress in this area. This will inevitably demand a lot of coherence, not only on the part of agencies and secretariats but also member states. **The analyses and findings on DoL should be very helpful in the way forward work.**
- It is important to note about the **present system for performance monitoring and reporting that it doesn't pick up at the value added of having UNAIDS** as the joint program at global level.
- The document notes that there are positive signs of UN staff working effectively together at country level but, at the same time, that **there is no evidence from the case studies that this affects the staffing decisions across the agencies**. How will this finding be addressed?
- The document, rightly so, stresses the **role of the secretariat, in particular the ED in being the AIDS champion within the UN**. This fact should be supported.
- This sections also clearly shows that there is a need for **better incentives for making reform and joint working possible and effective**. Should be part of performance assessment of UN staff, at all levels.

#### Human Resources/Staffing

- The **expansion of UNAIDS staff over the last years has been immense and without proper oversight by the PCB or any other body** - what are the implications of this? Should the conclusion be to limit staff within the secretariat but increase for cosponsors?
- Coming back to the need for UNAIDS response and staffing to be contextualised, **it is hoped that the final report comes with clear recommendations about the set up and staffing of UNAIDS Secretariat in the different contexts**.

The administration of the Joint Programme.

- It can be noted that the **systems have improved, but also that there is still a long way to go.**
- The document highlights the **lack of operational strategies and planning and poorly developed HR management systems** are highlighted. Important facts, among others, that needs to be followed up.

#### E. Fulfilling the mandate

- The sections in this chapter are well analysed and the findings will be important for the future work of UNAIDS. It is important to note that **for cross cutting issues, such as gender and Human Rights, there is an important role to be played by the secretariat**, in addition to the lead agency, and others - to make sure that things happened.

Involving and working with civil society

- Positive wording about the role of UNAIDS, in particular the secretariat
- The disconnect between the secretariat rhetoric about the importance of civil society involvement and the human and **financial resources allocated to working with civil society at global and national levels.** Again, the evaluation has missed out on the regional level, where CBOs/NGOs form regional networks that form the basis for the networks at the global level.

Gender dimensions of the epidemic.

- The evaluation has picked up correctly about **the lateness of UNAIDS to respond to and deliver on gender issues.** The evaluation recommendations on this will be most welcomed.
- We share the preliminary assessments. There has also been separate consultations on how to strengthen the UNAIDS gender work, which by the way must mean much more than work for women and girls, **it has to do with relations between women and men, about power structures etc.** See further comments in the attached Swedish non-paper prepared for the gender consultations.
- **The role of UNDP, as the lead agency, and many others, including GCWA must be clarified. Important, for example, not to loose UNFPA.**

Technical support to national AIDS responses.

- There is a **tendency that UNAIDS to much is becoming a TA provider.** This should not be the case. In particular not the secretariat. The role of a broker, or somebody taking care of the market place” are possible roles.

## Human Rights

- On the issue of the Human rights work and the Human Rights Team at the Secretariat, we strongly **support this Team and the need for the Secretariat to keep up progress made in this area.**
- Important work being done by the **secretariat, and, not least, the ED. Important not to lose that work.**
- This work is important globally, but also, of course, at national levels. **Important that the secretariat and the co-sponsors dare to speak up at country level.**
- This is another area where it is critical that **the fact that there is a lead agency, in this case UNDP, does not mean that others should do nothing.**

## Involvement of PLHIV

- Another area where **UNAIDS, not least the secretariat, according to the document, has been doing quite well. We support this view.**