



UNAIDS/PCB(25)/09.19
30 October 2009

25th Meeting of the UNAIDS Programme Coordinating Board
Geneva, Switzerland
8-10 December 2009

**UNAIDS Response to the Report of the
Second Independent Evaluation of UNAIDS**

Additional documents for this item: *none*

Action required at this meeting - The Programme Coordinating Board is invited to:
consider the recommendations contained in paragraphs 15, 18, 25, 29, 34, 38, 43, 48, 53, 60, 65, 70, 74, 78, 83, 88, 94, 100, 104, 107, 110, 114, 117 and 121 of this paper

Cost implications for decisions: *see paragraph 129*

I. INTRODUCTION

1. UNAIDS welcomes the Report of the Evaluation Team for the Second Independent Evaluation of UNAIDS (SIE) (2002-2008). Having carefully reviewed the SIE report, UNAIDS finds the overall methodology to be robust and a majority of the findings and recommendations to be evidence-based and credible.
2. UNAIDS is pleased and gratified that the SIE recognizes the important role and contribution of the Joint Programme to the AIDS response. The SIE endorses the historic UNAIDS mandate to coordinate and catalyze a stronger, more effective response to the epidemic at global, regional and country levels.
3. UNAIDS especially welcomes the SIE recommendation for *“increased attention to strengthening country responses and to helping countries to implement financially sustainable approaches and to prioritize evidence-based prevention programming”*. The Joint Programme shares the finding of the SIE that *“country-level support should remain central to UNAIDS’ work”* (Recommendation 11.3).
4. The importance of the issues raised by the SIE has been recognized by UNAIDS. A number of the SIE recommendations are already being addressed through initiatives and processes implemented in 2009, a period beyond the scope of the SIE. UNAIDS welcomes the opportunity provided by the SIE to resolve numerous challenges that have sometimes impeded the Joint Programme’s optimal effectiveness.
5. As the SIE report observes, the First Independent Evaluation of UNAIDS played an important role in the Joint Programme’s evolution during the period assessed by the SIE. UNAIDS is certain that the SIE will play a similar role in the future development of the Joint Programme, providing valuable guidance to maximize the impact of UNAIDS’ future actions with partners at global, regional and country levels.
6. This document sets forth UNAIDS’ response to the SIE report. Section II responds to each of the 24 recommendations in the SIE report. UNAIDS believes that its proposed responses will enable the Joint Programme to reposition itself within the changing demands of existing and future national, regional and global circumstances. In order to achieve further progress, it is essential to take steps to address specific gaps in the response to the epidemic as well as the social, political and structural constraints that limit results. Progress requires that UNAIDS and other partners need to protect and build on the gains already made and make use of the opportunities for linking specific action and broader agendas for achieving the Millennium Development Goals.
7. Section III describes UNAIDS’ plans to ensure coherence and coordination of the various processes that will be initiated to respond to individual recommendations. Given the relatively brief period since the SIE report was released, the UNAIDS responses to individual recommendations of the SIE often focus on the process for implementing the recommendation, rather than proposing agreed solutions to issues raised.

8. UNAIDS intends to accelerate the process of implementing the recommendations of the SIE. To this end Section III also includes a timeline for implementation of the recommendations, including dates for reporting to the Programme Coordinating Board on outcomes. It should be noted that UNAIDS is committed to delivering the majority of the recommendations by the end of 2010 with the two related to the Unified Budget and Workplan (18 and 19) being presented for discussion at the Board at its meeting in June 2011. Under the leadership of the Executive Director, and building on work already begun under his tenure, all recommendations will be implemented in a cohesive manner with the aim of delivering a strengthened and more focused UN response with greater accountability for results.

II. RECOMMENDATIONS

9. The Secretariat and Cosponsors have collaborated in carefully reviewing the findings and recommendations of the SIE. The Joint Programme's responses to each of the SIE recommendations are summarized below.

Recommendation area 1: Improve the focus of UNAIDS

10. **SIE recommendation 1 - to PCB: To develop a new mission statement with measurable and time-bound objectives supported by a new strategic plan which clarifies how the joint programme will position itself to re-focus support at regional and country level to reflect the epidemic context and country needs.**
11. In light of the evolving challenges in the AIDS response, UNAIDS agrees on the value of developing an updated mission statement accompanied by a new strategic plan that includes measurable and time-bound objectives. The mission statement and strategic plan will be grounded in the ECOSOC mandate and core objectives, and will build on and draw from *Joint Action for Results: UNAIDS Outcome Framework 2009-2011* and from the *2007-2011 Strategic Framework for UNAIDS Support to Countries' Efforts to Move Towards Universal Access to HIV Prevention, Treatment, Care and Support*. Covering the years 2011-2015, the new strategic plan will institutionalize the Joint Programme's implementation of the SIE recommendations and guide UNAIDS' efforts to catalyze action at global, regional and country levels to link the AIDS response to the implementation of the Millennium Development Goals.
12. The strategic plan will also seek to shift the focus of UNAIDS from process to delivery of results by translating the agenda of the Joint Programme into specific actions with indicators for success, and by which accountability will be ensured. The growing need for political brokering within the AIDS response will also be addressed.
13. The mission statement and strategic plan will be developed through a consultative process involving governments, civil society and other partners. This process will help ensure that the updated mission statement and new strategic plan take account of the role of UNAIDS in the evolving global response context, country priorities and diversity of epidemics, the importance of multisectoral approaches, and acceleration of prevention efforts alongside treatment, care and support.

14. In developing the strategic plan UNAIDS will incorporate important elements that were referred to in the SIE report but which were not the subject of findings, such as, the need to strengthen its work on prevention, as well as elements that were not referred to at all, e.g. co-infection and co-morbidities. UNAIDS recognizes that, in its continuous efforts to support all countries to halt and reverse the epidemic, address its drivers and mount an effective response, major relevant strategies for combination HIV prevention must be strengthened, brought to scale and extended to meet the particular needs of all those at risk, including people on the move and people in emergency settings. The Joint Programme plan will also leverage new and emerging technologies and developments in the response.

15. Therefore, UNAIDS invites the Programme Coordinating Board to adopt recommendation 1 as set out in the SIE Report.

Recommendation area 2: Be more strategic in approach

16. **SIE recommendation 2 - to UNAIDS Executive Director: the secretariat to work with cosponsors to develop an overarching partnership strategy with clear and measurable objectives, including explicit provisions for working in partnership with the Global Fund and PEPFAR.**

Subsidiary recommendations are:

- **To develop a shared vision of the potential and expected benefits from civil society and PLHIV involvement, a clear set of objectives and a more systematic approach to documenting outcomes.**
- **To develop a common approach across the secretariat and cosponsors to engagement with and capacity -building support for civil society and PLHIV organisations.**
- **To increase support at global and country levels for empowerment and participation of key populations¹.**
- **To strengthen efforts to engage with the private sector, including addressing the respective roles of the secretariat and ILO.**

17. The SIE recognizes that partnerships are a core value and operating approach of the Joint Programme. Recognizing that the joint and cosponsored UNAIDS Programme constitutes a partnership in itself, UNAIDS considers building and brokering partnerships to be central to an effective AIDS response at all levels. UNAIDS will develop an overarching partnership strategy to expand prevention efforts alongside treatment, care and support. Whilst recognizing the need to have the broadest possible base of stakeholders involved in its work the strategy will prioritize key

¹ UNAIDS definition of key populations: Children and orphans, Indigenous people, Men who have sex with men, Migrants and mobile workers, People in prison settings, People in the education sector, People in the health sector, People living with HIV, People who are using injecting drugs, Refugees and Internally Displaced People, Rural communities, Sex workers and clients, Uniformed services, Women and girls, Workplace, Young people.

partnerships to ensure a strategic focus for a more effective response. Explicit provisions in the overarching partnership strategy will focus on working in partnership with key institutions, such as the Global Fund to fight AIDS, Tuberculosis and Malaria, and PEPFAR (the U.S. President's Emergency Plan for AIDS Relief), and with key constituencies, including civil society and people living with HIV, and strengthen and harmonize its engagement with the private sector.

18. Therefore, UNAIDS invites the Programme Coordinating Board to adopt recommendation 2 as set out in the SIE Report.

19. SIE recommendation 3 - to CCO²: To convene a time-limited working group with relevant cosponsors and the Global Fund, supported by the secretariat, to clarify an 'operational division of labour regarding the provision and financing of technical support for health systems strengthening' to be put forward for endorsement by the governing boards of the relevant agencies.

20. The AIDS response has highlighted the importance of strong, sustainable national capacity in health and other national sectors. Strengthening of health systems and integration of HIV with national health systems play an important role in achieving results in several areas of the *UNAIDS Outcome Framework 2009-2011* – reducing sexual transmission of HIV, preventing mothers from dying and babies from becoming infected with HIV, ensuring that people living with HIV receive treatment, preventing people living with HIV from dying of tuberculosis, protecting drug users from becoming infected, and enhancing social protection for persons affected by HIV. Strong health systems will be critical to accelerated progress towards achievement of the Millennium Development Goals. Using the AIDS response to strengthen health systems represents a key opportunity to take HIV out of isolation and ensure sustainability and long-term impact.

21. The Joint Programme has taken several steps in 2009 to enhance its work in strengthening health systems. The Secretariat has convened a working group of co-sponsor focal points on health systems strengthening (HSS), with the aim of delineating comparative advantages within the Joint Programme and defining a common, coherent approach. UNAIDS has intensified its engagement with the Global Fund to fight AIDS, Tuberculosis and Malaria on health systems strengthening, and has also undertaken to engage with other key partners, including the International Health Partnership and the Health-8 (H8) group³, to integrate HIV within the global health architecture. Significant work to strengthen the evidence base and guidance on AIDS and health systems strengthening has been completed or is underway. Briefings and orientations of UN Country Teams are planned to promote country-level action on HIV and health systems strengthening.

22. UNAIDS will establish a Working Group to: (a) build on the already established co-sponsor HSS working group and the significant ongoing work by individual co-

² Committee of Cosponsoring Organizations

³ Health 8 is an informal group of eight health-related organisations – WHO, UNICEF, UNFPA, UNAIDS, Global Fund to fight AIDS, Tuberculosis and Malaria, GAVI, Bill & Melinda Gates Foundation, and the World Bank – created in mid-2007 to stimulate a global sense of urgency for reaching the health-related Millennium Development Goals.

sponsors; (b) focus on relevant issues pertaining to health systems strengthening; (c) expand to include other key IHP+ partners beyond Cosponsors and the Global Fund, and (d) clarify and strengthen collaboration on HIV and health systems strengthening. UNAIDS will link these discussions regarding health systems strengthening with efforts focused on strengthening other systems and sectors.

23. The working group on health systems strengthening will consider a range of HIV-related HSS issues, including human resources for health, contributions of AIDS responses to health governance, procurement and supply management, (integrated) service delivery models, as well as health information systems. Working within the broader range of partners, the group may also serve as a key vehicle for discussing health financing to ensure financial risk protection for people with AIDS, strategize on community participation and systems strengthening, and develop guidance for the appropriate prioritization of HIV-specific health outcomes within national health strategies, or plans for health sector reform.
24. In addition to focusing on health systems UNAIDS will continue to address broader strengthening of other systems, such as education, that contribute to positive health outcomes. Efforts to link HIV and health sector responses should also take into account relevant intersections with others sectors that can influence health outcomes. In addition to the new working group, health systems strengthening should be addressed by other existing mechanisms, such as UNAIDS Inter-Agency Task Teams.

25. Therefore, UNAIDS invites the Programme Coordinating Board to adopt the following reworded text for recommendation 3: to CCO: *to convene a time-limited working group with relevant Cosponsors, the Global Fund to fight AIDS, Tuberculosis and Malaria, and other key stakeholders, supported by the Secretariat, to strengthen collaboration and develop a joint agenda on health systems strengthening, including a joint position statement and a work plan with clear deliverables.*

26. **SIE recommendation 4 - to UNAIDS Secretariat and Cosponsors:** The secretariat and cosponsors should bring to the 2010 meeting of the CCO, and then the December 2010 PCB meeting, a concrete proposal on how they will resolve overlaps and duplication (including but not restricted to support to: national planning and strategy development; human rights; gender; key populations; M&E at country level; operations research; and surveillance). This should include:

- How the lead agency concept can be better operationalized at global level; and
- The degree to which these issues can be resolved using the IATT approach.

Subsidiary recommendation to the PCB: To instruct the secretariat and cosponsors to develop a *modus operandi* for IATTs, drawing on the experience of other mechanisms such as the MERG and Task Team on Travel Restrictions, with requirements for lead agencies to set task-based, time-

bound objectives to manage their work with regular reporting back to the PCB on performance.

27. The UNAIDS Division of Labour for the Provision of Technical Support was established in response to the Global Task Team recommendations to improve the efficiency and effectiveness of multilateral organizations. The Division of Labour has had an important impact on the functioning of the Joint Programme, especially at country level, clarifying roles within the UNAIDS family and taking account of the respective comparative advantages of each Cosponsor and the Secretariat. The Division of Labour improves the coherence and transparency of UNAIDS by identifying lead agencies in key thematic areas of work.
28. UNAIDS agrees on the need to review the Division of Labour with a view to further clarifying roles and strengthening its operationalization. UNAIDS is committed to the implementation of a credible review process, without pre-judgment of outcome, that will include structured consultation with relevant stakeholders, recognizing that decisions on the Division of Labour rest with the CCO. Such a review, coupled with more effective working with partners, ranging from People living with HIV and other sections of civil society, to more formal institutional partners like the Global Fund to fight AIDS, Tuberculosis and Malaria, PEPFAR and bilateral donors, will enable better integration of the work of UNAIDS at all levels. The review process will therefore focus on how to strengthen the overall work of the Joint Programme, with particular emphasis on the operationalization of cross-cutting issues and clearer definitions of roles and responsibilities. Decisions will be reported to the PCB.
29. **Therefore, UNAIDS invites the Programme Coordinating Board to adopt recommendation 4 as set out in the SIE Report.**
30. **SIE recommendation 5 - to UNAIDS Executive Director: to adjust the size, staffing and organizational arrangement of Secretariat offices at country level to reflect national needs and the implications of recommendation 1.**
31. UNAIDS agrees on the importance of ensuring that the size, staffing and organizational arrangement of Secretariat offices at country level reflect national needs. Work is already underway to thoroughly map current Secretariat human resource deployment at regional and country level, with an eye towards rationalizing staffing patterns.
32. To implement Recommendation 5, the Secretariat will work with Cosponsors to develop and implement a capacity needs assessment and mapping of human resources at all levels, building upon current work. Noting the inter-relationship with recommendations 20 and 21 the terms of reference for this work will include the content of all three recommendations (5, 20 and 21).
33. This capacity assessment will, therefore, extend beyond the Secretariat and focus on the capacity of the Joint Programme as a whole. The Joint Programme will develop a set of human resource recommendations, providing for different regional needs of the epidemic and a clarification of the roles of the Secretariat and the Cosponsors. It will then develop a process to optimally deploy staff based upon these

recommendations. This capacity assessment will take into account a range of relevant factors, including but not limited to national HIV prevalence, epidemiological trends, and national needs for technical support.

34. Therefore, UNAIDS invites the Programme Coordinating Board to adopt recommendation 5 as set out in the SIE Report.

35. SIE recommendation 6 - to UNAIDS Executive Director: To make proposals to UNDG to develop revised joint team guidelines that are based on principles and support country- or regionally-determined approaches that reflect the needs of the epidemic.

36. Joint country-level action on AIDS both reflects and supports the UN reform agenda and is essential to improving the coherence and effectiveness of UN partners. The impetus for joint country-level action was further galvanized in December 2005, when the former Secretary-General Kofi Annan directed UN Resident Coordinators to support the development of joint teams and joint programmes on AIDS to strengthen UN support to national programmes. As of October 2009, Joint UN Teams on AIDS had been established in 83 countries, with Joint Programmes of Support in 20 countries.

37. As the scope of the SIE extended through 2008, it was unable to take account of the impact of the promulgation of the *Second Guidance Paper: Joint UN programmes and teams on AIDS*. Consistent with Recommendation 6, these revised guidelines explicitly take into account support for country and regionally determined approaches that reflect the needs of the epidemic. To support the implementation of these guidelines and to further the aims of Recommendation 6, UNAIDS will explore the barriers and bottlenecks that impede the implementation for the Joint Team and joint programming concept at country level, to support the implementation of the revised guidelines.

38. Therefore, UNAIDS invites the Programme Coordinating Board to adopt the following reworded text for recommendation 6: to UNAIDS Executive Director: Recognizing the promulgation of guidelines for Joint UN Programmes and Teams on AIDS in 2008 that advance and support country- and regionally-determined approaches, UNAIDS to review Joint Team performance to assess barriers and bottlenecks that impede the effective implementation of the Joint Team concept at country level.

39. SIE recommendation 7 - to Member States: Work with colleagues within their own governments to introduce decisions in the governing bodies of all the cosponsors that performance appraisal of heads of agency at country level include performance of the joint team, and support from the agency, where relevant.

40. UNAIDS fully supports the intent of Recommendation 7 to increase the accountability of the joint UN response on HIV at country level. The *Second Guidance Paper: Joint*

UN programmes and teams on AIDS, the Joint Programme's extensive efforts to promote greater coherence and effectiveness at country level, and the implementation of mechanisms for results-based disbursement of funds under the UNAIDS Unified Budget and Workplan exhibit strong Organizational commitment to improved accountability across the Joint Programme. In many countries, the performance appraisal process for technical staff already includes a review of their performance related to Joint Teams on AIDS.

41. However, UNAIDS believes Recommendation 7 would have been better directed to the UN Development Group (UNDG) rather than member states, as it pertains to internal performance assessment and management processes of Cosponsor agencies. Instead of introducing decisions in the governing bodies of all Cosponsors, as proposed, a more effective approach would be to work through the UNDG and the CCO to focus on the full implementation of Decision 5.1 from the December 2006 PCB which stated that "*Agency representatives in country should be provided with appropriate incentives, including performance assessments to ensure joint UN programming including harmonization and alignment around HIV and AIDS*".
42. The push for improved accountability within the Joint Programme at country level would be accelerated by building on existing mechanisms of staff and joint team appraisals. For example, the UNDG has mechanisms in place for appraising the contribution of Heads of Agency to UN Country Teams. UNDG should consider incorporation in existing appraisal mechanisms of specific reference to the support of Heads of Agency to Joint UN Teams on AIDS. In addition, existing performance appraisal mechanisms for technical staff should be reinforced and further sharpened to focus on joint HIV-related country-level work.

43. Therefore, UNAIDS invites the Programme Coordinating Board to adopt the following reworded text for recommendation 7: to UNAIDS Executive Director: To request UNDG to provide appropriate incentives, including through performance assessments, to ensure joint UN programming, including harmonization and alignment on HIV.

44. **SIE recommendation 8 - to Member States: To channel funding of HIV work by the UN at country level to support the joint teams rather than being managed bilaterally through individual cosponsors or the secretariat country office.**
45. The Paris Declaration on Aid Effectiveness reflects a strong global consensus, including within the UN system, in favour of the harmonization and alignment of efforts to support national aims and strategic plans. In the AIDS response, the spirit of the Paris Declaration is reflected in the Three Ones principles of country-level action. UNAIDS has focused considerable efforts towards supporting and monitoring adherence to the *Three Ones* principles. As documented in the *UNAIDS 2008 Global report on the AIDS epidemic*, significant progress has been achieved in translating the *Three Ones* principles into action, although key gaps remain.
46. Although UNAIDS fully supports the intent of Recommendation 8, the channeling of funding for HIV work by the UN exclusively to UN Joint Teams may not be feasible. Joint Teams are not administrative entities capable of receiving funding, nor should

the UNAIDS Secretariat become an administrative fiscal agent at country level. UNAIDS proposes instead to use lessons learnt from experience with Joint Programmes of Support and in One UN Pilot countries to inform future action. Incentives should be developed, and disincentives eliminated, to ensure quality joint programming on AIDS. Joint Programmes of Support must in all cases advance National Plans, respond to epidemic realities, and include clear activities, budgets and implementing partners, including UN agencies, to enable funders to provide support to those responsible for implementation.

47. When addressing the channeling of funding, it is important to note that UNAIDS support to countries also relies on input from global and regional levels of the Joint Programme, including the development and promotion of global normative guidance, capacity building and adaptation of global guidance at regional level, and direct technical assistance to national programmes at country level. Therefore, a balance needs to be achieved in funding both joint teams for joint work and individual cosponsors. Bilateral funding to individual cosponsors, including through the Unified Budget and Workplan, will continue to be required to ensure the efficient and effective provision of such support.

48. Therefore, UNAIDS invites the Programme Coordinating Board to adopt the following reworded text for recommendation 8: to CCO: **Using lessons learnt from existing Joint Programmes of Support and in pilot One UN countries, implement incentives and eliminate disincentives for quality joint programming. CCO members should support their respective agency's participation in Joint Teams, with strengthened capacity, including development, implementation, and monitoring and evaluation of Joint Programmes of Support. Mechanisms for funding UN HIV work at country level should ensure the most efficient and effective engagement of cosponsors in joint programming around the national response.**

Recommendation area 3: Be more flexible and responsive

49. **SIE recommendation 9** - to UNAIDS Secretariat and Cosponsors: to strengthen joint work on research, resource tracking and knowledge management, with particular emphasis on information to support the 'know your epidemic' approach and improve evidence-based decision-making at country level.
50. Strategic use of information is vital to achievement of universal access to HIV prevention, treatment, care and support, as well as the Millennium Development Goals. Countries require accurate and timely information to guide national responses and assess the impact, efficiency and equity of national efforts. Strategic information enables countries to respond to the social, economic cultural and structural determinants of national epidemics.
51. Recent modes-of-transmission studies and HIV prevention syntheses in numerous countries in Africa and Latin America, conducted by the Joint Programme in collaboration with national partners and released in 2009, illustrate the critical importance of knowing one's epidemic and response in the development of national

AIDS efforts. These initiatives have characterized the magnitude and distribution of new HIV infections, compared epidemiological patterns with national prevention priorities and tracked resources allocated to those priorities. Countries are also using findings from these exercises to revise national programmes to respond to documented national needs.

52. To implement Recommendation 9, UNAIDS will develop and approve action plans to ensure that all countries regularly perform 'know your epidemic' and 'know your response' studies to guide implementation. UNAIDS will also support stewardship of a joint 'Essential HIV Research Agenda to achieve the MDGs', with global and regional versions and resource mobilization plans. UNAIDS will continue to actively monitor emerging scientific information with relevance for policy and programming and develop guidance for implementation in countries of novel evidence-based programmes.

53. Therefore, UNAIDS invites the Programme Coordinating Board to adopt recommendation 9 as set out in the SIE Report.

54. **SIE recommendation 10 - to UNAIDS Secretariat: To strengthen evaluation at global and country levels. Specifically:**

- **To convene a working group (possibly under the auspices of the MERG) of relevant HIV and evaluation staff from the secretariat, cosponsors and the Global Fund to develop a coherent joint global evaluation plan structured around the priority areas of the epidemic.**
- **To plan, manage and budget evaluations jointly at country level, under the auspices of the joint team and working in collaboration with the Global Fund, other donors and national partners in accordance with the Paris Declaration commitments.**
- **To cease further investment in or continuation of CRIS beyond its current use as a format for reporting.**
- **To make adequate provision for reporting on, dissemination of and policy engagement concerning evaluation findings.**

55. Although important progress has been made with respect to monitoring HIV epidemics, Recommendation 10 recognizes that evaluation studies have not been systematically used to the same extent. While monitoring indicates the occurrence of trends, evaluation studies provide insight as to why such trends have occurred. Focused evaluations also facilitate improved understanding of the effectiveness of particular strategies, including identification of factors that need to be addressed to improve strategic impact. Evaluations not only have a critical role to play with respect to the health sector, but are also other relevant for other sectors that are important for achievement of Universal Access and the MDGs.

56. UNAIDS has exhibited strong and consistent support for improved evaluation efforts. Since it was formally adopted as UNAIDS policy in 2004, the Joint Programme has focused extensive efforts towards development of the 'Third One' in countries – a single national HIV monitoring and evaluation system. In 2009, the UNAIDS

Secretariat hosted a “*Think Tank on Evaluation Methods for HIV Prevention*” to identify and support expert consensus in the field on best practices in evaluating HIV prevention programmes.

57. In accordance with Recommendation 10, UNAIDS will convene a working group of relevant evaluation staff from the Secretariat, Cosponsors, and the Global Fund to fight AIDS, Tuberculosis and Malaria – to develop a coherent, joint global evaluation plan structured around the priorities areas of the epidemic, with particular emphasis on the nine priorities in the *UNAIDS Outcome Framework 2009-2011*. The working group may consist of the Cosponsor Evaluation Working Group (CEWG), working in collaboration with the Monitoring and Evaluation Reference Group (MERG), or could be a subgroup of the MERG.
58. Within the context of the ‘*Third One*’, UNAIDS, Global Fund and country professionals working on strategic information will be encouraged to spend increased effort on evaluating as well as monitoring the impact of programs and services. Joint Teams will play a particularly prominent role in encouraging and supporting country-level collaboration to strengthen evaluation efforts. In some settings, such efforts may require the development of relevant country-level information systems, as well as the mobilization of resources required for such evaluation studies. Information obtained through such evaluations will be published, disseminated to relevant stakeholders, and acted upon. Building country capacity to implement evaluation activities and to translate these into improved programmatic interventions will be essential.
59. UNAIDS will discontinue developing further CRIS versions beyond CRIS3. Continued support will be provided to countries that have implemented version 3, and will continue to be provided for the foreseeable future. An evaluation of the use of CRIS3 in countries will be performed in September 2010, following which the future of CRIS3 will be re-assessed.

60. Therefore, UNAIDS invites the Programme Coordinating Board to adopt the recommendation 10 as set out in the SIE report with the deletion of the reference to the MERG from the first bullet. The revised text to read as follows: *To convene a working group (~~possibly under the auspices of the MERG~~) of relevant HIV and evaluation staff from the secretariat, cosponsors and the Global Fund to develop a coherent joint global evaluation plan structured around the priority areas of the epidemic.*

- 61. SIE recommendation 11 - to UNAIDS Secretariat and Cosponsors: To strengthen arrangements for technical support through finalization and implementation of an updated Technical Support Strategy. Specifically:**

- **To clarify the comparative advantages and respective roles of the UN, UNAIDS-related technical support mechanisms and other technical support providers in provision of short-term technical support and of longer-term capacity building support at country level.**
- **To determine the role of UNAIDS in Global Fund-related technical support.**
- **To strengthen planning and coordination of UNAIDS technical support at country level, including ensuring that this reflects country needs and priorities rather than the agendas and mandates of UN agencies.**
- **To rationalize support for M&E between the UNAIDS Secretariat, World Bank GAMET and WHO.**
- **To consolidate technical support mechanisms established by UNAIDS as joint programme providers.**
- **To introduce systematic monitoring and evaluation of technical support provided by UNAIDS and UNAIDS-related technical support providers at country level.**

62. The facilitation and delivery of high-quality, accessible technical support to national partners has long been a core UNAIDS priority. The Joint Programme has a range of technical support mechanisms covering the broad spectrum of HIV programme areas, such as Technical Support Facilities, Knowledge Hubs, ASAP, and GIST, as well as individual cosponsor facilities such as the ILO's Technical Support Network. Technical Support Facilities have been established in 4 regions (Eastern and Southern Africa, Western and Central Africa, Asia, and Latin America), and the magnitude and quality of UNAIDS-brokered technical support has significantly increased in recent years. As recognized by the SIE, country partners highly value the technical support provided by or through the Joint Programme.

63. In December 2008, the Programme Coordinating Board recommended that UNAIDS develop and/or update its Technical Support Strategy. To implement this Board recommendation, UNAIDS has established an inter-agency working group on the Technical Support Strategy. A draft strategy has been developed through a broad-based, consultative process involving diverse group of technical support recipients and providers. The draft Technical Support Strategy focuses on improving the efficiency and effectiveness of HIV investments, enhancing sustainability, strengthening country-level capacities and institutional systems, as well as improving coordination and accountability among technical assistance providers.

64. The Strategy builds on existing experience on technical support planning, such as the development of evidence-informed, costed national technical support plans.

65. Therefore, UNAIDS invites the Programme Coordinating Board to adopt recommendation 11 as set out in the SIE Report.

66. **SIE recommendation 12 - to PCB and UNAIDS Executive Director: To continue the PAF facility and improve current operational practice. Changes would include:**

- Regular reporting on outcomes from utilization of PAF funds to the PCB; and
- Proposals by the Executive Director and cosponsor heads of agencies at the December 2010 PCB to achieve cost-reducing efficiency gains in the transmission of funds by the cosponsor agencies.

67. UNAIDS Programme Accelerating Funds (PAF) have served as an important source of catalytic funding to accelerate inter-agency collaboration in implementing national responses. However, processing and administering the relatively small amounts of funding available through PAF involve considerable transaction costs within the Secretariat and Cosponsors.

68. To implement Recommendation 12, UNAIDS will revise the PAF Guidance to strengthen efficiency, inter-agency collaboration, prioritization with links to the UNAIDS Outcome Framework, monitoring and reporting. This revision will aim to decentralize decision-making to the country level, linking PAF funding more closely to the *UNAIDS Outcome Framework 2009-2011*, Joint Programmes of Support, and national priorities.

69. Revised PAF Guidance will be presented to the Programme Coordinating Board. Regular reporting on PAF, highlighting outcomes and utilization, will be included in regular reporting to the Board under the Unified Budget and Workplan.

70. **Therefore, UNAIDS invites the Programme Coordinating Board to adopt recommendation 12 as set out in the SIE Report with additional text to the first bullet as follows: *Regular reporting on outcomes from utilization of PAF funds to the PCB through regular reporting mechanisms of the Unified Budget and Workplan; and***

71. **SIE recommendation 13 - to UNAIDS Executive Director: The RSTs should be tasked to (i) ensure that HIV is included in the deliberations of the developing Regional Directors Teams; (ii) focus on supporting development of UN capacity at country level that reflects a tailored response to the epidemic; (iii) build on the experience of the RST ESA and promote the use of gap analysis and 'know your epidemic'; and (iv) be configured to support all Cosponsors, not just the Secretariat.**

72. In several regions, significant strides have been made in strengthening regional collaboration on HIV, which has in turn enhanced the quality and impact of support to national partners. There are a number of examples of effective collaboration between Regional Support Teams (RSTs) and the regional teams of Cosponsors or with other mechanisms, such as knowledge hubs and collaborating centres.

73. Fully endorsing Recommendation 13, UNAIDS will communicate with Regional Directors Teams (RDTs) requesting their increased engagement and accountability in supporting the operationalization at country level of the UNAIDS Outcome Framework and overseeing the work of UN Joint Country Teams (particularly quality assurance of Joint Programmes of Support) and regional inter-agency AIDS teams. The RST will focus on identifying gaps in the national AIDS responses and support necessary capacity building. Implementation of this recommendation will require the strengthening of functional linkages across the regional mechanisms of the Cosponsors and a consideration of the political role played by the regional offices.

74. Therefore, UNAIDS invites the Programme Coordinating Board to adopt recommendation 13 set out in the SIE Report.

75. SIE recommendation 14 - to PCB: To task UNAIDS with strengthening its focus on gender and human rights. Specifically:

- **To review the division of labour concerning cross-cutting issues of gender and human rights with a view to the secretariat taking the lead role in coordination in these areas across the joint programme.**
- **To clarify the respective roles of UNIFEM and GCWA with regards to work on HIV and gender.**
- **To strengthen the capacity of UN staff in HIV and gender and HIV and human rights.**
- **To support UNDP to take forward its lead role in work on MSM and transgender populations.**
- **To strengthen global leadership and advocacy with regards to key populations and convene an inter-agency task force involving UNODC, UNDP and UNFPA to ensure policy and programming coherence and effective coordination of work with key populations.**
- **To determine clear overarching global objectives for work on HIV and gender, human rights and key populations and ensure that these objectives are included as a core component of joint team work at country level; gender and human rights analysis should be integral to 'knowing your epidemic' and to joint programmes of support for national responses.**
- **To focus UNAIDS' support for countries on translating frameworks and guidance into practical HIV and gender and HIV and human rights programming.**

76. UNAIDS is strongly committed to continuing to strengthen gender-equality and human rights-related outcomes and impacts of the AIDS response. Issues of human rights and gender equality lie at the core of UNAIDS work and extend across the full breadth of the Joint Programme. As described in the response to Recommendation 4, UNAIDS agrees on the need for a credible process to review the Division of Labour, including clarification of roles and responsibilities with respect to cross-cutting issues such as human rights and gender. Particularly in light of recent epidemiological studies that have shed additional light on the disproportionate risk of HIV experienced by key populations, intensification of effort is merited to ensure

policy and programmatic coherence, coordination and effectiveness. UNAIDS agrees that Joint UN Teams at the country-level will be supported to develop concrete components on human rights and gender including for key populations in Joint Programmes of Support.

77. In 2009, a formal decision was made to establish a new UN entity focusing on gender equality and empowerment of women. The creation of this new entity will inevitably affect the work on gender and human rights of the Joint Programme, including the Global Coalition on Women and AIDS, as well as UNIFEM. Although the nature of the new gender entity is under discussion, it is anticipated that the new entity will be a key partner in intensifying and strengthening the UN system's work on gender and HIV.

78. Therefore, UNAIDS invites the Programme Coordinating Board to adopt the recommendation 14 as set out in the SIE report with a revised first bullet. The revised text to read as follows: *To review the division of labour concerning all cross-cutting issues of gender and human rights with a view to the secretariat taking the lead role in coordination in these areas across the joint programme strengthening the work of the Joint Programme.*

Recommendation area 4: Improve accountability and governance

79. **SIE recommendation 15 - to UNAIDS Executive Director, PCB, and all UNAIDS Cosponsor Heads of Agency:** To revitalize the role of the CCO, with one regular formal CCO meeting per annum, supported by:
- Revision of the CCO *modus operandi* to reflect the de facto greater role for the global coordinators.
 - Greater investment by the global coordinators and secretariat in preparing the CCO agenda and background briefing material to ensure that deliberations of the heads of agencies are focused on (i) key decisions of the PCB that need to be discussed with the governing boards of cosponsor agencies and (ii) progress towards the implementation of the new strategy and lessons for division of labour at country level.
 - Strengthening accountability within the individual cosponsors by revising the CCO MOU to state that the cosponsors will, to the extent practicable, ensure that the relevant objectives and indicators agreed in UNAIDS global level results frameworks are incorporated in the corporate results framework, or equivalent, of each cosponsor.
 - Building on the solid progress that has been made to ensure that HIV is part of the regular agenda for most cosponsor agencies. The PCB should work with the Executive Director and cosponsors to ensure, where possible, that these deliberations consistently include discussion of key PCB decisions.
80. UNAIDS believes that a robust CCO is a pre-requisite to a strong, coordinated UN response to HIV. An effectively functioning CCO helps ensure that the HIV response remains a prominent part of the ongoing agenda, workplans and strategic plans of all

Cosponsor Agencies. Three groups of actors have central roles to play in the prioritization and coordination of the HIV response across the Joint Programme – Executive Heads of Agency, who oversee the comprehensive programme of each Cosponsor; Global Coordinators, who spearhead HIV policies and programming within their respective agency and across agencies, and Focal Points, who support the work of the Global Coordinators and coordination within and among Cosponsors and the Secretariat.

81. To ensure prioritization of HIV programmes throughout the Joint Programme, regular meetings at all 3 levels (Executive Heads, Global Coordinators and Focal Points) are required. Currently, Global Coordinators and Focal Points meet frequently, including by video or teleconference. While the SIE report recommends at least one annual meeting of Executive Heads, UNAIDS proposes at least two annual face-to-face meetings of Executive Heads to shape the common agenda of the Joint Programme and ensure its implementation. Such meetings should focus on key strategic issues, including those under discussion by the PCB.
82. The issue of reciprocity also needs to be considered, where the UNAIDS strategic framework takes into consideration and harmonizes with the frameworks of the Cosponsors. Likewise, the Programme Coordinating Board needs to take into consideration the decisions and resolutions of the governing bodies of the Cosponsors.

83. Therefore, UNAIDS invites the Programme Coordinating Board to adopt recommendation 15 as set out in the SIE report with the following revision to the text of the chapeau: *To revitalize the role of the CCO, with at least two regular formal CCO meeting per annum, supported by:*

84. **SIE recommendation 16 - to PCB: To take effective responsibility for oversight of UNAIDS, the PCB should refocus its work on ensuring:**
- **Cosponsor and secretariat plans for provision of support at country level are based on epidemic priorities and the comparative advantages of the UN.**
 - **Decisions of the Executive Director on the allocation of UBW money between the 11 organizations (ten cosponsors and Secretariat) are based on epidemic priorities and the comparative advantages of the UN.**
 - **Future plans reflect the previous performance of the secretariat and cosponsors.**
 - **Commitments made by the 11 organizations on building relevant UN capacity at country level are met and taken into account in considering future roles and funding allocations.**

- **The Secretariat does not assume roles that could be carried out by a cosponsor.**
- **The efficiency and effectiveness of the Secretariat.**

85. UNAIDS welcomes the recommendation to the Programme Coordinating Board to refocus its work and working practices to ensure a strong strategic vision and effective oversight of the Joint Programme. Consistent with the findings of the SIE, UNAIDS agrees that provision of support at country level should be based on epidemic priorities (such as those set out in the *Joint Action for Results: UNAIDS Outcome Framework 2009-2011*) and on the comparative advantages of the UN and of respective UN partners.

86. The evolution of the UNAIDS Unified Budget and Workplan reflects the Joint Programme's commitment to results-based management. Each Unified Budget and Workplan is the result of a careful peer review process, and the Unified Budget and Workplan provides for a mid-term review and performance-based disbursement of funds. As reflected in the evolution of the UBW, budgeting and workplan development is an iterative process that aims for continual improvement to maximize the impact, accountability and transparency of the Joint Programme.

87. UNAIDS fully supports the goal of maximizing the efficiency and effectiveness of the Secretariat. Determining the optimal role of the Secretariat requires a clear definition of the role of coordination in the Joint Programme. The SIE specifically applauds the Secretariat's leadership in such areas as advocacy, partnership development, and social mobilization. In light of the SIE findings, UNAIDS assumes that implicit in Recommendation 16 is the expectation that such functions should continue within the Secretariat and that they fall within the category of coordination.

88. Therefore, UNAIDS invites the Programme Coordinating Board to adopt recommendation 16 as set out in the SIE Report.

89. SIE recommendation 17 - to PCB: To take effective responsibility for oversight of UNAIDS, the PCB should revise its working practices to improve the effectiveness of its meetings. Changes would include the following:

- **Maintain the role of the PCB Bureau strictly as a coordination body and examine lessons from previous experience with inter-sessional working groups, as a precursor for increasing the use of such groups.**
- **Review the present 'hub and spoke' model by which the secretariat briefs separate constituencies before PCB meetings, with a view to greater investment in forging links and communication between constituencies before PCB meetings.**
- **Revise the current PCB modus operandi to formalise how PCB meetings are chaired and, while maintaining adequate voice across all major groups of participants, focus meetings on rapid and effective decision making.**
- **At the December 2010 PCB meeting, assess the effectiveness of the 2008 changes in the PCB modus operandi, and identify further modifications that will strengthen the efficiency and effectiveness of working practices. In**

particular this should assess the effectiveness of changes in how the Drafting Group operates.

90. UNAIDS welcomes the SIE's recognition of the Programme Coordinating Board as a "reasonably effective example of a UN governing body". UNAIDS particularly agrees that the inclusion of non-governmental organizations as members of the Programme Coordinating Board strengthens the Joint Programme, improves the Board's deliberations, and reflects an innovative approach within the UN system.
91. Consistent with Recommendation 17, UNAIDS agrees that the PCB Bureau and the Secretariat should ensure that Programme Coordinating Board agendas remain focused at a strategic level. The refocusing of the Board on high-level strategic issues suggests that it will no longer focus on reviewing technical guidance. UNAIDS also believes that the working group should work with the aim of positioning the Board as a platform for global governance of the AIDS response.
92. The recently established ad interim Working Group on "Working methods of the PCB" should incorporate the issues identified in Recommendation 17 into its Terms of Reference and report back to the Board by December 2010. UNAIDS requests that the Secretariat and Cosponsors should be full members of this Working Group to facilitate the ability of the Secretariat to support the working of the Programme Coordinating Board to the greatest extent feasible. The Secretariat will provide logistical and legal support to the Working Group.
93. In addition, UNAIDS suggests that the working group a.i. consider an annual meeting of Chairs of the Programme Coordinating Board and the 10 Cosponsor Boards to discuss activities and priorities of the Joint Programme as this would ensure ongoing linkage and common understanding between the respective Boards.

94. Therefore, UNAIDS invites the Programme Coordinating Board to adopt recommendation 17 as set out in the SIE report with the following reworded chapeau text and the addition of a new bullet: ***To take effective responsibility for oversight of UNAIDS, the PCB should revise its working practices to improve the effectiveness of its meetings. Consideration of the changes listed below should be delegated to the Working Group a.i. on Working Methods of the PCB for inclusion in the terms of reference for that group:***
- ***Convene an annual meeting of the Chairs of the PCB and the 10 Cosponsor Boards to UNAIDS activities and programmes.***

95. **SIE recommendation 18 - to PCB:** The PCB should hold the Executive Director accountable for the allocation of funds raised by the secretariat between the secretariat and the individual cosponsors. This would mean:

- **Future allocation of inter-agency funding should explicitly show the distribution among the Secretariat and Cosponsors.**
 - **Allocation of UBW funding raised through the Secretariat should no longer be based on entitlement and pro-rata increases, but on epidemic priorities, the performance of the Cosponsors, and the funds that individual Cosponsors raise at global and regional levels.**
 - **Consideration by the major funders of the UN's response at global level of: (i) whether funding through UNAIDS could increase in response to a shift to performance-based allocations; and (ii) the degree to which the Executive Director should take the lead in raising resources for the UN at global level or whether fund-raising should increasingly be a cosponsor responsibility.**
 - **Secretariat and Cosponsor performance should be defined around commitments made on development of UN capacity at country level; this is what the PCB should hold the global coordinators, as the main representatives of their organizations, and the Executive Director (in his or her capacity as head of the secretariat) accountable for and hence should be what is reported against on an annual basis.**
96. UNAIDS endorses the aim of Recommendation 18 to increase the accountability related to the allocation of funds. Improvements in the UNAIDS Unified Budget and Workplan reflect the Joint Programme's commitment to improved accountability and transparency with respect to funding allocations. Under the 2010-2011 Unified Budget and Workplan, the Secretariat is tasked with managing interagency activities, with Cosponsor components of interagency activities reflected in each Cosponsor's individual allocations.
97. UNAIDS agrees that allocations should not be made on the basis of entitlement. Within planning for the 2012-2015 Unified Budget and Workplan and the 2012-2013 biennial budget, UNAIDS will define epidemic priorities and criteria for the measurement of performance. Development of the 2012-2015 Unified Budget and Workplan will be informed by actions taken in response to the SIE, including the development of a new strategic plan.
98. The Secretariat and Cosponsors agree that a core function of the UNAIDS Executive Director continues to be resource mobilization for the Joint Programme, with emphasis on the core budget within the Unified Budget and Workplan. Cosponsors remain responsible for ensuring the mobilization of their global, regional and supplemental resources as defined within the Unified Budget and Workplan. In this regard, UNAIDS notes that, as an example, table 5 on page 58 of the SIE is misleading, in that the column depicting Cosponsor core funding in 2008-2009 reflects only 2008 figures, giving the false impression that Cosponsor contributions have dramatically declined.
99. Ensuring fulfillment of commitments made on the development of UN capacity at country level includes strategic inputs and support at the global and regional levels, as well as specific actions at country level to support Joint Teams. Necessary actions

include strengthened recruitment and competencies of UNAIDS Country Coordinators and Cosponsor country staff working on HIV. While Cosponsors will continue to submit financial and performance reports to the Programme Coordinating Board, they also remain accountable for their overall capacity and performance to their respective governing bodies, including in the area of HIV

100. Therefore, UNAIDS invites the Programme Coordinating Board to adopt recommendation 18 as set out in the SIE Report.

101. SIE recommendation 19 - to PCB, UNAIDS Secretariat and Cosponsors: The role and contents of the UBW need to be revised from 2012 onwards to:

- **Focus on: (i) showing what capacity individual cosponsors and the secretariat intend to have at country level and (ii) the allocation of funding to ensure that planned capacity is in place.**
- **Include funding to evaluate the degree to which UN capacity established at country level is making a relevant, effective and efficient contribution to the national HIV response.**

102. Country-level capacity and the efficient functioning of Joint Teams are priorities of the Joint Programme. Strong capacity and programmes at country level also depend on sufficient capacity and support at global and regional levels. UNAIDS fully supports the goal of improved simplification, transparency and accountability of the UNAIDS Unified Budget and Workplan, including with respect to Secretariat and Cosponsor country capacity. UNAIDS notes, however, that support for UN country-level capacity is often complimentary to the support included within the parameters of the Unified Budget and Workplan.

103. In furtherance of its efforts to continually improve the Unified Budget and Workplan, UNAIDS will implement Recommendation 19, while maintaining the role of the UBW at global and regional levels. The development of the 2012-2015 Unified Budget and Workplan will incorporate capacity and funding requirements of Cosponsors and the Secretariat, including staffing at all levels, as well as funding needed to evaluate UN capacity at country level. Action on this recommendation will be influenced by the results of the staffing assessment across the Joint Programme, outlined below in response to Recommendation 20.

104. Therefore, UNAIDS invites the Programme Coordinating Board to adopt recommendation 19 as set out in the SIE Report.

Recommendation area 5: Greater efficiency

105. SIE recommendation 20 - to PCB: To initiate a capacity needs assessment with the aim of taking stock and producing recommendations across the whole joint programme - Secretariat and all cosponsors - for a collective rationalization of staff at global, regional country and levels linked to the

strategy from Recommendation 1, taking account of the different regional needs of the epidemic.

106. See response to Recommendation 5 above in paragraphs 31 to 33.

107. Therefore, UNAIDS invites the Programme Coordinating Board to adopt recommendation 20 as set out in the SIE Report.

108. **SIE recommendation 21 - to PCB: While affirming the role of the secretariat as providing coordination support within the joint programme, and possibly the organization to fill gaps that cannot be filled by the cosponsors, task the Executive Director with presenting recommendations on what the roles and staff complement should be over the medium term and how this would be delivered, at the June 2010 PCB.**

109. See response to Recommendation 5 above in paragraphs 31 to 33.

110. Therefore, UNAIDS invites the Programme Coordinating Board to adopt recommendation 21 as set out in the SIE Report.

111. **SIE recommendation 22 - to UNAIDS Executive Director: Assuming that the WHO enterprise system is fully functional by end 2010, commission a review in early 2011 on the costs and benefits of moving to using the ERP of either UNDP or WHO for all administration across the organization.**

112. UNAIDS fully agrees with the SIE that the Secretariat's reliance on two administrative systems creates administrative challenges. In keeping with Recommendation 22, UNAIDS is fully committed to working towards a single administrative system for the entire Organization. Being managed by two different systems with separate rules and regulations is no longer the most efficient and cost-effective way to administer the UNAIDS Secretariat, and it contributes to confused lines of accountability across WHO, UNDP and UNAIDS. UNAIDS notes that the assumption in the SIE that the Enterprise Resource Planning (ERP) system will be fully functional by the end of 2010 may not be valid, although it fully agrees that the recommended cost-benefit review is required. This recommendation provides UNAIDS with an opportunity to clearly define the services that the Secretariat requires and the related standards of performance from service providers.

113. In 2009, the UNAIDS Secretariat began analysing the differences in the human resource rules and regulations of WHO, UNDP and UNAIDS, as well as the costs for services provided by WHO and UNDP, as a basis for a complete analysis of the cost

- benefits of its administration systems. By the second quarter of 2010, the Secretariat will complete an effectiveness review of WHO and UNDP administrative support systems with a view to moving to a single administrative system.

114. **Therefore, UNAIDS invites the Programme Coordinating Board to adopt the following reworded text for recommendation 22: Commission a review in early 2011 on the costs and benefits of moving to using the ERP of either UNDP or WHO for all administration across the UNAIDS Secretariat.**

115. **SIE recommendation 23 - to PCB: Task the Executive Director to present a report to the PCB at the December 2010 meeting presenting evidence of the extent to which financial and HR systems and policies have (i) been fully developed; (ii) are operational; and (iii) are being consistently and effectively used as intended by managers across the organization.**

116. UNAIDS is fully committed to having financial and human resource systems of the highest quality, as well-managed systems optimize efficiency and maximize the effectiveness of the Joint Programme. UNAIDS will fully implement Recommendation 23, which is in line with ongoing work and workplans of human resource, finance and administrative units of the UNAIDS Secretariat. In the current biennium, key policies, procedures, and guidance have been developed to strengthen and streamline the Secretariat's human resources, finance and administration management, although additional work remains to be done. As these policies and systems are finalized, a communication strategy will also be developed to ensure that staff understand and can comply with them.

117. **Therefore, UNAIDS invites the Programme Coordinating Board to adopt recommendation 23 as set out in the SIE Report.**

118. **SIE recommendation 24 - to PCB: Request that the Executive Director: (i) work to clarify a robust competency framework for these roles; (ii) ensure that all present staff are assessed against the competency framework; and (iii) report back to the PCB at its December 2010 meeting with detailed actions to ensure that the cadre of country staff have the required competencies.**

119. The UNAIDS Secretariat's most important strength is its people. UNAIDS is committed to having the highest quality staff, with the depth and breadth of competencies that reflect the organization's critical role in the AIDS response. The Secretariat is committed to an improved alignment of staff competencies with the roles and functions of Secretariat staff, as well as to rigorous, ongoing staff development.

120. The Secretariat began developing a competency framework in April 2009, referencing the competency frameworks of four cosponsors, the Global Fund to fight AIDS, Tuberculosis and Malaria, and the UN Secretariat. The framework will be completed in the first quarter of 2010, incorporating the relevant results from the staffing reviews ongoing at country, regional and headquarter levels. The framework

will guide recruitment and reassignment of staff, assessment of staff performance, and focused development of staff competencies for particular functions.

121. Therefore, UNAIDS invites the Programme Coordinating Board to adopt recommendation 24 as set out in the SIE Report.

III. IMPLEMENTATION OF DECISIONS ARISING FROM THE SECOND INDEPENDENT EVALUATION OF UNAIDS

122. Subsequent to the consideration of the report of, and responses to, the Second Independent Evaluation of UNAIDS, it is expected that the Programme Coordinating Board will provide guidance and make decisions for implementation. The responses to a number of recommendations, as previously noted, require a process to be followed rather than an immediate solution. UNAIDS is committed to a process for implementation of all the recommendations that will move the work of the Joint Programme forward in as expeditious a manner as possible.
123. It is important that the follow-up mechanism to the Evaluation include an umbrella framework that will oversee the implementation of all recommendations in as comprehensive, rigorous, inclusive and cohesive a manner as possible. For this reason the creation of an oversight group is proposed.
124. The oversight group will manage the complex dependencies and linkages between the recommendations and an overall timeline for implementation that should ideally be concluded by the end of 2010 for the majority of work arising from the Evaluation. The group will provide a consultative opportunity for consideration of the implementation of individual recommendations, whilst recognizing that decision-making may sit elsewhere e.g. with the CCO or Programme Coordinating Board.
125. The group will oversee that actions are implemented in a coherent and effective way, in line with Programme Coordinating Board decisions relating to the Second Independent Evaluation, as well as other decisions, in particular those relating to UN reform. The group will oversee the reporting requirements of all identified, relevant stakeholders, (as identified in the decisions of the Programme Coordinating Board meeting) without duplicating existing mechanisms.
126. The oversight group will be inclusive and representative of the Board. It will be co-chaired at the Assistant Secretary General level. Terms of reference will be developed for the oversight group and invitations for participation sent out by the end of January 2010.
127. Regular updates on the progress of implementation will be provided to each Programme Coordinating Board meeting. The Executive Director will dissolve the group at a time when it is no longer deemed an appropriate instrument, but it is envisaged that the life of the group would not go beyond the Programme Coordinating Board meeting schedule for June 2011 and will conclude its work with the presentation of the report of the follow up to the implementation of the decisions

of the Board related to the Second Independent Evaluation at the Board meeting at the end of 2011.

128. The following table indicates the proposed timeline for implementation of the SIE recommendations. It should be noted that UNAIDS intends to deliver all but three of the recommendations by the end of 2010. Recommendation 22 will be completed in the first quarter of 2011 and the two remaining recommendations (18 and 19), which relate specifically to the next Unified Budget and Workplan, will go to the Programme Coordinating Board at its meeting in June 2011.

Implementation Date	Decision Body	Recommendation(s)
1 st quarter 2010	Joint Programme	- Mission statement (1)
2 nd quarter 2010	Spring CCO Joint Programme 26 th PCB meeting	- Division of Labour (4, 14), Health Systems Strengthening (3), Technical Support Strategy (11), Joint Teams funding (8) - Regional Support Teams (13) - Joint teams (6), Technical Support Strategy (11), Programme Acceleration Funds (12), Knowledge management (9, 10 evaluation plan)
3 rd quarter 2010	Joint Programme	- Knowledge management (10 CRIS evaluation)
4 th quarter 2010	Autumn CCO 27 th PCB meeting	- Heads of Agency appraisals (7) - Strategic Plan (1), partnerships (2), governance (15, 16, 17), organizational issues (5, 20, 21), Secretariat issues (22, 23, 24)
1 st quarter 2011		
2 nd quarter 2011	28 th PCB meeting	- UBW for 2012-2013 (18, 19)

129. With respect to the funding required for implementation of the SIE recommendations as approved by the Programme Coordinating Board at its meeting in December 2009, funding is expected to be found from within the agreed Unified Budget and Workplan for 2010-2011 for managing the implementation process. The Secretariat will provide the Board meeting in June 2010 with a proposed budget and workplan for implementation of the decisions taken by the Board in December 2009 in respect of the SIE recommendations for agreement by the Board.

[End of document]