## Performance Reporting

**30**<sup>th</sup> Meeting of the UNAIDS Programme Coordinating Board Geneva, Switzerland, 5-7 June 2012

Agenda item 3.1



## **UNAIDS 2010-2011 performance report**

- 1. Presents UNAIDS contributions the achievement of the "three zeros" and the 2011 High Level Meeting targets
- 2. Focuses on results against priority areas and includes snapshots of results at country and regional level
- Provides a summary of expenditures against the core UBW and Cosponsors' own resources
- Looks ahead towards the new 2012-2015 UBRAF and includes links to reporting by the Cosponsors



## **2010-2011** Highlights

- June 2011 UN High Level Meeting and Political Declaration
- Strengthened country capacity to track and measure progress in the response
- Mobilizing and leveraging funding for AIDS responses at country level
- Contributions to broader health, development and human rights goals



#### 2010-2011 selected achievements

#### **Zero new infections**

New HIV infections now 21 per cent lower than their peak

#### **UNAIDS** contributions

 Launch and support to the implementation of the Global Plan towards the elimination of new HIV infections among children by 2015 and Keeping Their Mothers Alive and Joint Strategic Action Framework to accelerate the scale-up of voluntary male medical circumcision

#### 2010-2011 selected achievements

#### **Zero discrimination**

Countries or territories with HIV-related restrictions on entry, stay and residence down from 63 to 47

#### **UNAIDS** contributions

 Advocacy, information and analysis to enable removal of travel restrictions and adoption of UN Security Council resolution 1983 recognizing the link between HIV and violence against women in conflict and post-conflict settings



#### 2010-2011 selected achievements

#### **Zero AIDS-related deaths**

AIDS deaths are down from a peak of 2.2 million per year to 1.8 million

#### **UNAIDS** contributions

 Normative guidance and technical support to accelerate access to treatment through which an estimated 1.35 million more people access treatment in low- and middleincome countries



## Challenges in reporting

- Considerable amount of information to synthesize and tight timeframe to complete reporting
- Capturing the diverse work of the Joint Programme at country level through agency-specific reporting
- Managing the interface between different reporting systems and Cosponsors' own information needs



## Monitoring the 2012-2015 UBRAF

- Stronger and more consistent reporting to ensure accountability and to inform efforts at all levels
- Focus on country level action and results in line with national strategic and operational plans
- UN Joint Teams on AIDS at country level key in monitoring results and contributions of the Joint Programme



## Key elements of 2012-2015 UBRAF monitoring

- On-line monitoring tool developed to enable reporting on achievements through a common IT platform
- Existing monitoring and evaluation tools to be used to minimize additional data collection
- Intensive process to refine indicator definitions, identify benchmarks and establish targets where necessary



## Finalization of UBRAF indicator definitions

#### **Definition**

Indicator UBRAF B3.1.1	National capacity to implement and scale up HIV-sensitive social protection and HIV and child-sensitive social protection strengthened
Numerator	Support provided to development of HIV-sensitive and HIV child-sensitive social protection policies and programmes
Method of measurement	Annual assessment and reporting of capacity strengthening by UN Joint Teams on AIDS
Source	UN Joint Team Report

## Calculation / measurement

Capacity strengthened in past 12 months	Joint team report by country
Normative guidance	Yes
Technical assistance	No
Training	No
Resource mobilization	No
Advocacy	Yes



## Measuring progress against global AIDS targets

Capacity building – countries supported to develop policies and programmes

Capacity strengthened (12 months)	Target group: children	Other vulnerable groups
Normative guidance	29	15
Technical assistance	11	10
Training	14	7
Resource mobilization	12	10
Advocacy	15	8



Access to care





## Quality assurance of UBRAF monitoring

- UNAIDS Monitoring and Evaluation Reference Group established in 1999 to provide expert advice to UNAIDS on all aspects of M&E
- New 15-member structure proposed to bring together experts and partners in the global AIDS M&E arena in an independent global forum
- New approach focused on independence and transparency with input from Cosponsors and key partners as ex officio members

## UBW case study 1 Enhancing the national AIDS response: United Republic of Tanzania

## Dr. Albéric Kacou UN Resident Coordinator





## **UNDAP:** What is different?

UNDAF 2007-10	UNDAP 2011-15
A framework for UN agencies to operate within Tanzania	A business plan for UN agencies in Tanzania
2. Echoes Tanzania's development priorities to which the UN contributes	Articulates the contribution of UN to national priorities
3. Cycle aligned to calendar year with limited use of Government Systems	3. Aligned to GoT fiscal cycle (July- June); promotes use of GoT systems
<ol> <li>Agencies developed individual plans using UNDAF as the overarching framework (out of these, 9 Joint Programmes developed)</li> </ol>	4. UNDAP is the plan for all UN agencies in Tanzania
<ol> <li>Only Joint Programme reports reviewed annually (performance based fund allocations)</li> </ol>	5. Entire UN Programme reviewed annually (performance based fund allocations)

## **UNDAP:** Joint Programming

responsive to national development frameworks, strategy and vision

strategic and results-based, with clear outcomes and priorities

building on national analysis and reflecting UN's added value in country

drawing upon entire range of UN services & expertise, including NRAs'

effectively delivering a multi-sectoral approach to development and humanitarian needs, with due attention to crosscutting issues

## **UNDAP:** Results and Accountability

#### Collective Accountability

Member states

8 MDGs & IADGs

GoT and Development Partners

16 MKUKUTA

(Mainland PRS)

+ 14 MKUZA (Zanzibar PRS)

UN and Implementing Partners

58 Programme Outcomes

+ 10 Delivering as One Outcomes

Agency(s) and Implementing Partners

182 Programme Outputs

+ 38 Delivering as One Outputs

Individual agency

369 Programme Key Actions

+ 74 Delivering as One Key Actions



## **UNDAP:** Planning, Monitoring & Reporting

UNDAP

Annual Work Plans

Common Biannual Review Process

One UN Report

Lessons Learnt

Enhances transparency and aid predictability Extends DPs traditional areas of interest

Allocations are guided by Government, strengthening national ownership

Strengthens UN and Government collaboration around additional matters

Unearmarked funds enable allocations according to national priorities

Lowers transaction costs

Single Budgetary Framework

One UN Fund



## Delivering as One: Benefits and Challenges

Empowered Country Management Team...

Coherence In implementation & Engagement ...

Mainstreaming Of Key Programming Principles...

RBM and Reporting, Performance-Based Allocations

Streamlining Management & Joint Implementation

Adapting To Emerging Needs



## **UNDAP results: HIV & AIDS Programming 2011-12**

## UNDP

- •Civil society participation & coordination
- •Mainstreaming Human Rights & Gender
- Coordination, leadership, oversight & accountability

#### UNICEF

- Prevention interventions inc. Youth and Adolescents
- •Behavioural Change Communication
- •PMTCT and treatment of women & children

#### UNFPA

- •Social Behavioural Communication, Life skills-based SRH and HIV education
- •FBO engagement, Integration of SRH and HIV prevention
- •Gender Operational Plan and Advocacy for MVC

#### **WHO**

**UNAIDS** 

- •Proposals for AIDS, TB & Malaria and other communicable diseases, Medical Male Circumcision
- •Quality HIV/AIDS Care & treatment services, Anti-Retro Virus pharmaco-vigilance
- •HIV drug resistance surveillance, Collaborative TB/HIV activities.

#### •R

- •Civil society coordination and policy involvement, strengthened M&E systems including PMTCT coordination
- •Research/programs on Key Populations and main drivers, Resource mobilization
- •Development of HIV/AIDS Laws (mainland & Zanzibar)

# UBW case study 2 Harm reduction in EECA: Focus on Moldova

Dr. Viorel Soltan

Director

Center for Health Policies and Studies

Chisinau, Moldova



#### **HIV and AIDS in EECA**

- Most recent and rapidly expanding concentrated epidemic, especially among people who inject drugs
- Intensified support from UNAIDS to countries in the region, principally HIV prevention among key populations
- Needle and syringe programmes with opioid substitution therapy expanded three-fold between 2000-2009
- An 8-country study demonstrated needle and syringe programmes averted an estimated 10-40% of HIV infections



## Moldova in the region

- Moldova subscribed to the 2015 global AIDS target
   Reducing transmission of HIV among people who inject
   drugs by 50% by 2015 in June 2011
- 16.4% prevalence among people who inject drugs
- Phase 1: Piloting and legalization
- Phase 2: Scale-up of activities
- Phase 3: Maintenance and sustainability



## Moldova: good practice

- Legal framework
- Scale-up: including in Transnistria
- Twenty six out of 60 localities covered by harm reduction
- Needle and syringe programmes in nine penitentiaries of the national penitentiary system
- Methadone substitution treatment is provided in both public and penitentiary sectors

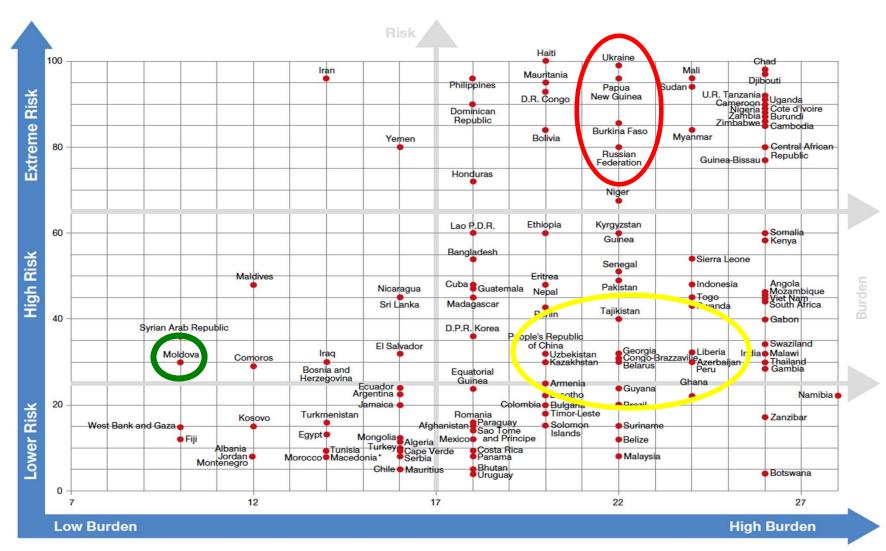


## Moldova generates evidence

- Needle and Syringe Programmes cost-effective strategy: Approximately 3,049 HIV infections, 3,081 HCV infections and minimum 146 HIV-related deaths were averted during 2000-2009
- Needle and Syringe Programmes cost-saving strategy: Estimated US\$192,969 to 221,300 in HIV-related health costs have already been saved due to NSPs in Moldova during the period 2000-2010. Lifetime savings of US\$6,257,658 to 7,002,058 are expected.



## SCATTER-PLOT OF THE RISK-BURDEN MATRIX USED BY THE HIGH-LEVEL, INDEPENDENT PANEL TO CHOOSE A REPRESENTATIVE SAMPLES OF COUNTRIES THAT HAVE RECEIVED GRANTS FROM THE GLOBAL FUND



Idea: Dumitru Laticevschi, FPM, TGF

## Financial Reporting

**30**<sup>th</sup> Meeting of the UNAIDS Programme Coordinating Board Geneva, Switzerland, 5-7 June 2012

Agenda item 3.2



## Enhanced transparency and accountability

International Public Sector Accounting Standards (IPSAS):

- Provide more comprehensive information for resource management, decision making and governance
- Improve consistency, comparability and reliability of financial information over time and across organizations
- Enhance overall confidence of external and internal users in the financial information provided



## **Highlights**

- Financial situation remains solid with the 2010-2011 Unified Budget and Workplan almost fully funded
- A financial implementation rate of 99% was achieved against the 2010-2011 UBW
- The external auditors provided an unqualified opinion "clean audit" – and internal audits intensified



#### Internal audits in 2010-2011

China

India

Indonesia

Brazil

Uganda

Ethiopia

Country Office audit: average of 20 days

West & Central Africa

Asia Pacific

East & Southern Africa

Regional Support Team audit: average of 25 days

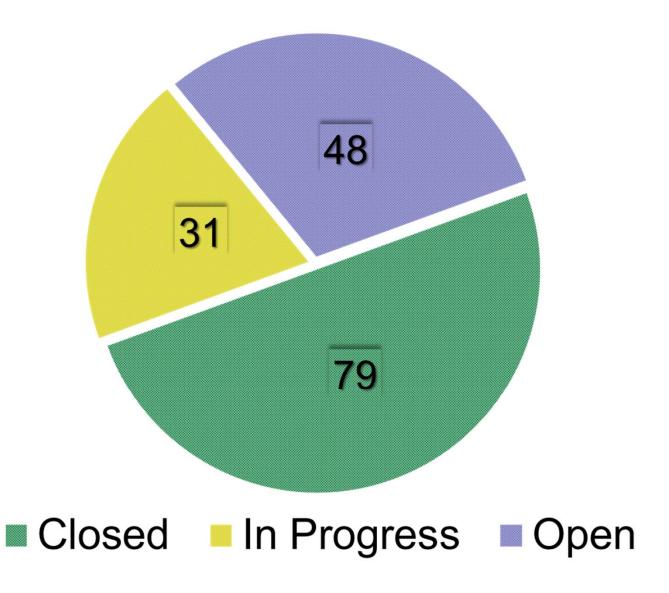
Procurement / HQ

Recruitment /HQ

HQ audit: average of 30 days



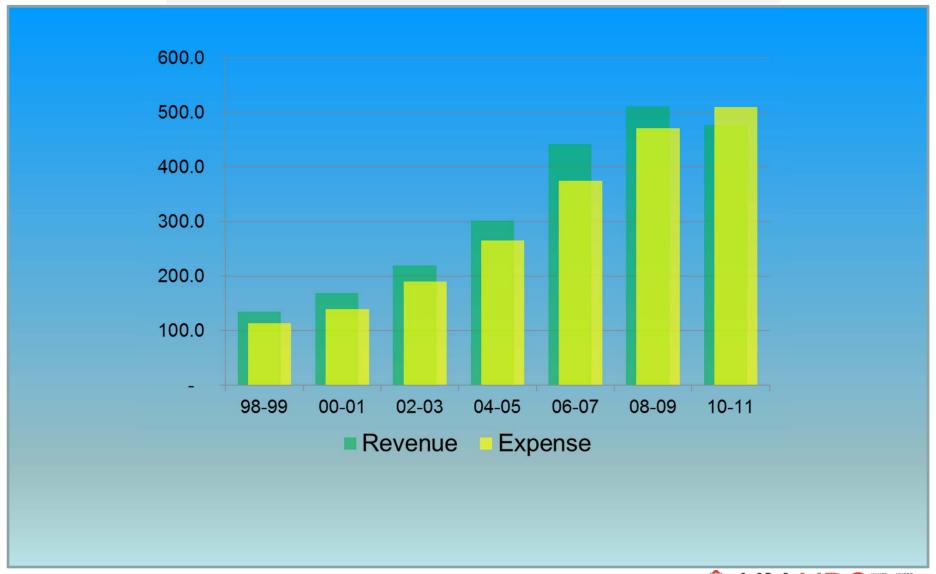
## Implementation of audit recommendations





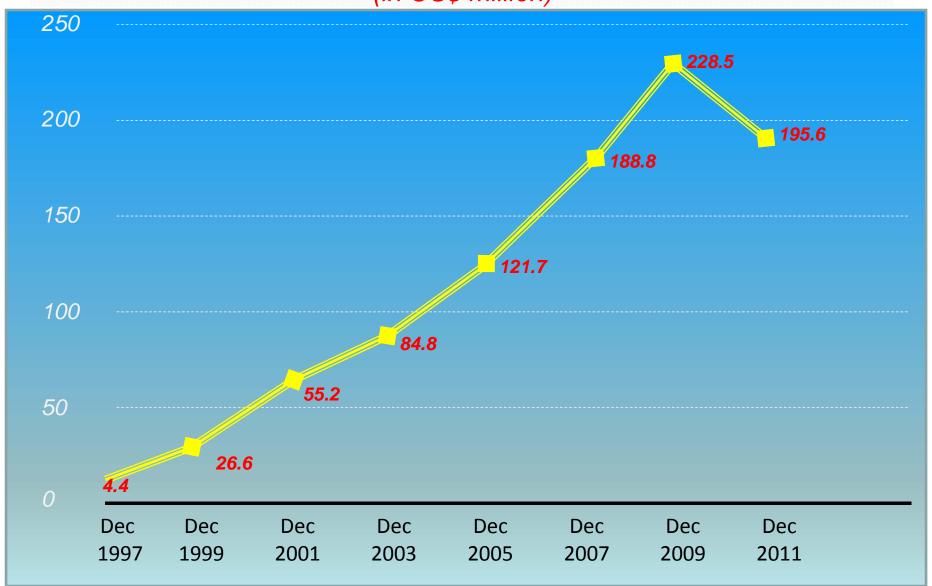
## Revenue and expense trends

(in US\$ million against UBW)



## Evolution of fund balance

(in US\$ million)





## Management of liabilities

#### Staff-related liabilities

- UNAIDS total staff-related liabilities amount to US\$87 million, out of which US\$49 million are unfunded
- An initial amount of US\$20 million is proposed to be funded in 2012 from the fund balance
- The remaining amount is proposed to be covered over 5 years or less depending on the availability of funds



## Anticipating future costs

#### **Building renovation fund**

- UNAIDS building was completed in November 2006 at a cost of US\$25.6 million to UNAIDS
- While the building is currently in good condition, no provision has been made for major repairs or renovations
- Establishment of a building renovation fund with an initial amount of US\$2.6 million is proposed
- Annual replenishments of the fund equivalent to the amount of the depreciation of the building are proposed



## Developments in 2012

- Income and expenditures in 2012 are broadly in line with trends in previous biennia
- US\$135 million has been mobilized against the UBRAF which represents 28% of the core budget in 2012-2013
- US\$190 million or 39% has been expensed and encumbered against the UBRAF 2012-2013 budget
- Implementation of UNAIDS Secretariat realignment to lower salary and other operating costs
- Uncertainties regarding the future of the Euro zone and the global economic outlook



## Dealing with currency fluctuations

- Currency fluctuations are inherent in all multi-currency environments
- Options to mitigate the impact of currency fluctuations:
  - Annual budget re-costing mechanisms
  - Setting up a currency equalization reserve
  - Hedging foreign exchange exposure through forward purchasing
  - Receiving and recording pledges from donors in more than one currency
- In addition containing costs, increasing cost-effectiveness and efficiency through better planning, prioritization and utilization of resources.

## Key decisions

#### The PCB is requested to

- 1. Accept the principle of fully funding staff-related liabilities and approve an initial amount of US\$ 20 million to fund liabilities and funding the remaining shortfall over 5 years
- 2. Endorse the establishment of a building renovation fund with an initial amount of US\$ 2.6 million followed by annual replenishments
- 3. Provide guidance on ways to deal with the impact of currency fluctuations and encourage donors to continue to support UNAIDS at current or increased levels

