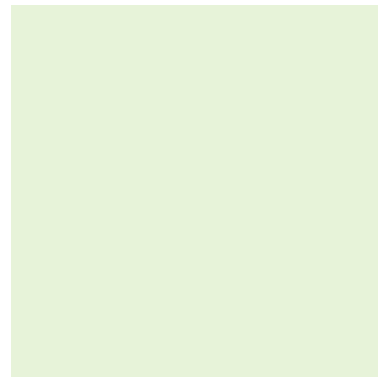


Independent Evaluation of UNAIDS Country Envelopes 2018-2022

Key Findings and Recommendations

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I: Introduction

Aim, Scope, Focus

Findings

Recommendations





Aim

To assess the country envelope (CE) from 2018-present

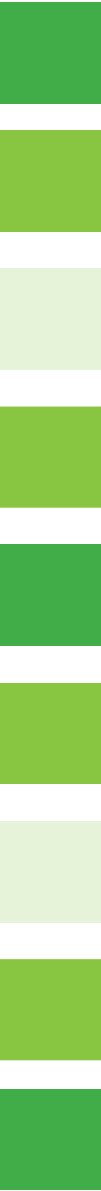
- as a mechanism to **allocate** and **disburse funds**
- the **use** and **results** of CE funds.

Use

- To generate evidence based **recommendations** to **improve programming, results** and **impact** under the current UNAIDS Unified Budget, Results and Accountability Framework (UBRAF) 2022-2026.



AIM & USE

- 
- Assess the global and country **allocation model** to ensure CE funds are reaching regions and countries **most in need**.
 - Assess the role of the CE in addressing **priority needs** of national responses.
 - Assess the role of CE in supporting more **strategic joint planning**.
 - Assess the **efficiency** and **effectiveness** of the CE including disbursements, implementation, and reporting.
 - Report and **assess the results** of CE funding.
 - Explore **alternative funding allocation models** for joint funds to inform recommendations.
 - The evaluation was **not tasked** with a wider assessment of core and non core funds and CE in relation to these funds.



SCOPE

APPROACH and METHODS

- Theory based approach using ToC
- Mainly qualitative methods
- Some quantitative analysis
- Triangulation of evidence

Global/regional
Key Informant
Interviews



35+

Global/regional
Document Review



40+

Global survey



578 responses

6 Country Studies

Cote D'Ivoire

India

Iran

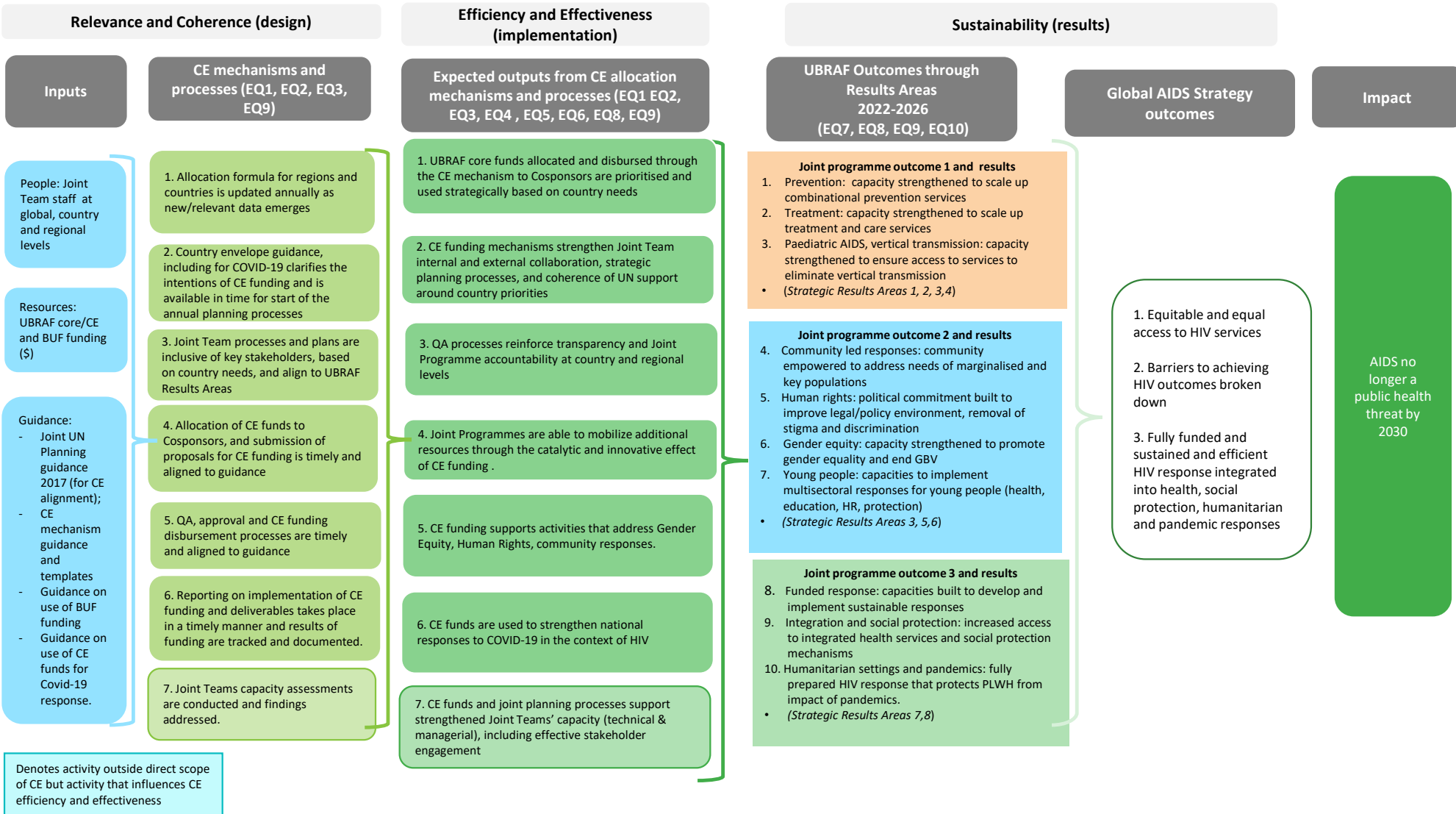
Kyrgyzstan

Andean Region:

Peru/Ecuador/Bolivia

Zambia

Theory of Change: Country Envelope (CE) Funding Model

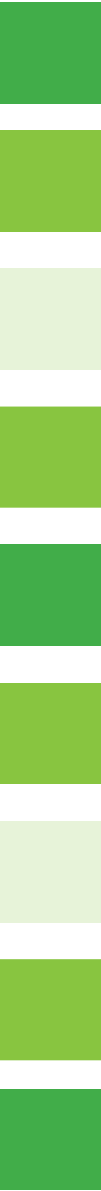


Limitations of evaluation

Limitations	Mitigations
Limited number and choice of case studies undertaken	<ul style="list-style-type: none">• Recognition of the context-specific nature of HIV responses.• Identification of critical factors influencing responses in different contexts.• Considered other CE findings from recent evaluations.
Time restrictions	<ul style="list-style-type: none">• Follow-up requests.• Triangulation.
Volume of CE activities since 2018	<ul style="list-style-type: none">• Deep dives.• Triangulation.
Use of Joint Programme Planning and Monitoring System (JPMS) data	<ul style="list-style-type: none">• Ensured caveats were included in the analysis of the financial data.• Followed up on data gaps and interpretation through interviews.
Lack of data or results at outcome level	<ul style="list-style-type: none">• Report is explicit about where evidence is strong or weak.

II Key Findings



- 
- There are **multiple objectives** in the design of the CE, and **high expectations** for what can be **achieved** in relation to **size of funds available**.
 - There is **no clear ownership structure** for overseeing the CE across the Joint Programme and this **limits opportunities** for broader **strategic discussion, oversight, learning**.
 - Differentiated allocations are **not accompanied by differentiated monitoring and reporting processes**, with implications for **transaction costs** which can be **high** for the level of funding received.



DESIGN

- The allocation model is designed for **equality** and balances this against **equity considerations**. The potential to achieve **results does not inform the allocation of resources**.
- The allocation model has resulted in a **small pot of money** being **spread across a wide set of countries**, many of which have received small allocations. This is **not conducive to incentivising results**.
- In-country allocation of CE funds is largely driven by fairness and a desire for **inclusiveness of Joint Programme partners**.



DESIGN

- CE funds have helped **maintain or re-energize Joint Teams** and are helping keep **HIV on the agenda** including within the UN.
- There is scope for **greater strategic orientation and prioritization** of plans, and **stronger oversight** during the **planning and proposal phases** for decisions on the use of funds.
- Roles and responsibilities for the **accountability and performance of CE funds** are ambiguous, and levels of monitoring and oversight are **variable**.
- There is **limited evidence** that CE are deploying **human resources** to where they are **needed most**, and CE funds are widely seen as **inflexible** in being able to support human resource capacity.
- The **planning timeframe** and often **late disbursement** of funds impacts on participatory planning, and the coherent and **strategic use of funds** and ability to do joint programming.



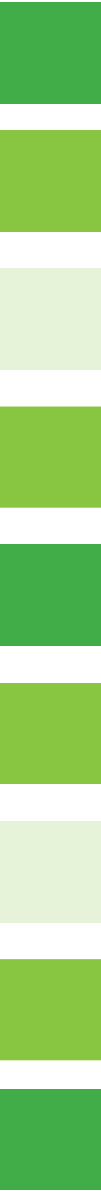
Implementation

Gender, Human Rights, Community Responses, COVID-19

- CE investment in **GE appears low**; HR and CR fare slightly better. **Note limitations of data.**
- CE funds **support mainstreamed** and **GE specific** approaches but unclear to what extent these tackle structural causes.
- **CE supports a lot** of **GE, HR and CR activities** (evidenced by the markers) but **unclear** if there is a **joint strategic focus linked to country priorities.**
- Markers can be **helpful** as an **intention** during activity **design**. They are **not reliable** as a **monitoring tool** or an accurate indicator of the extent to which an activity has contributed to GE, HR or CR.
- COVID-19 reprogramming was **timely, supported** by the Secretariat and **flexible.**

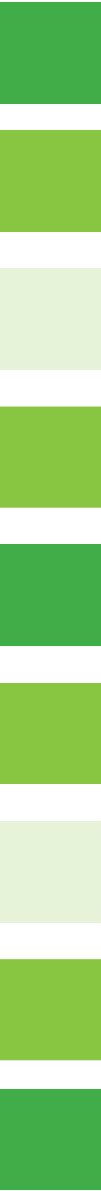


Implementation

- 
- 2018-2022 budgeted CE funds are focused on SRA/RAs supporting **Strategic Priority 1** – equitable and equal access to HIV services and solutions. *However, due to reporting system limitations this may not be a fully accurate reflection of CE activity.*
 - Across all regions **less CE funds** have been budgeted towards SRA/RAs targeting Global AIDS Strategy **Strategic Priorities 2 and 3** – breaking down barriers; fully fund and sustain efficient HIV responses and integrate into systems for health.
 - 56% of CE funds 2018-2022 were budgeted among **four Cosponsors**: WHO & WHO-PAHO, UNICEF, UNFPA. WB and IOM (not a cosponsor) received the least.



Use of Funds and Results

- 
- Evidence for what has been funded is widely available but evidence for what has been **achieved beyond outputs**, is much more **limited**.
 - There are some positive examples of use of CE funds with catalytic results. These seem most successful when focused on **'upstream' work**, where the **comparative strengths** of the Joint Programme are harnessed.
 - There is some limited evidence of CE funds having **leveraging additional resources** for national and Joint Programme responses.
 - CE funds are being used to support gaps in existing projects. In such cases, CE funds are **blended** with other sources making it difficult to **identify the catalytic component of results related to the CE**.
 - Despite efforts to report UBRAF results, the **JPMS does not** allow for **monitoring or assessing jointness** (i.e. working jointly on jointly planned CE initiatives) as a pathway to catalytic results.
 - There are **missed opportunities for strategic and cross country/cross learning** from use of CE.



Results

Helping factors - examples

Factors helping use and impact of CE funds

- **Balance of equality and equity considerations** in allocating funds is helping maintain global presence for the Joint Programme
- **Strong leadership**, commitment and engagement of UCO and Joint Team members to keep HIV on the agenda and to work collaboratively.
- **Strategic vision for use of CE funds**, including maximising uniqueness of Joint Programme in advocacy, policy, normative, strategic information and advice.
- **Participatory planning with wider stakeholders** improves the relevance of CE funds and UN response.
- **Predictability of funding** which can be useful and important for driving policy work which might have wider application/impact e.g. support to pilots, assessments, analyses.
- **Revised (extended two year) planning cycle** may help improve strategic focus and use of funds – unclear as yet.

Hindering factors - examples

Factors hindering use and impact of CE funds

- Lack of clear guidance and clear criteria for the allocation of funds to Cosponsors.
- Budget reductions and decreases in dedicated HIV staff, expertise, experience and seniority which can impact on ability to engage and nature of work undertaken (strategic, policy, activity...).
- Different agency funding mechanisms and processes adds complexity to joint implementation and joint reporting.
- Heavy architecture associated with CE - approvals up and down the hierarchy (country, regions, global), annual Letters of Agreement, different agency funding disbursement processes, short timeframe, all can delay implementation and add to transaction costs.
- Design of reporting systems and incomplete information make it difficult to track and differentiate the performance of CE/catalytic funds and results, from other sources of funds.
- Limited strategic discussions and stock taking of CE/BUF lessons learned and use of funds with key design elements not always implemented as intended.

III: CONCLUSIONS



Conclusions

Funding ringfenced for countries to support the priorities of national responses **continues to make sense** albeit with **improvements needed** to ensure resources are used for the right things in the right ways.

CEs have provided a relatively regular source of funding for Joint Teams, which has helped **galvanise Joint Team working and enabled HIV to remain a relevant area of work** for the United Nations and **kept HIV on the agenda** for some smaller agencies and countries.

CE have been designed with multiple intentions and expectations many of which are too big to address with the funds available and need to be scaled back. This lack of clarity makes it challenging to understand **what CE are trying to accomplish and the contribution and impact of the CE funds.**

The allocation model balances technical priorities with political priorities which has spread and fragmented funds. There is a need to **revisit UNAIDS priorities for allocating funds.** This will involve **difficult decisions and trade offs.** Ultimately this depends on what **purpose the CE funds are intended to serve.**

The use and **quality of programming of CE funds depends significantly on many factors** such as the leadership capacity of the UNAIDS country office (UCO) and/or the UNAIDS Country Director (UCD) in setting the strategic direction of Joint Plans.



Conclusions

There is scope to improve the strategic orientation, relevance, and results of the CE. This entails a funding model with a **clear rationale for allocation decisions** as well as **bolder decision making, more rigour and stronger Joint Plans** and a move from 'activity funding' to **strategic, policy focused work**, where the Joint Programme can make a difference.

There is evidence from across the Joint Programme that changes to the CE are desired. There is a clear case for course correction to strengthen the **prioritisation** and **focus** of Joint Programme resources, and to **rethink the principles, objectives, and operations of the CE**.

IV: Recommendations





Lessons from other agencies

- The cross-country allocation of scarce resources in global health is usually guided by a desire to maximise one or more of the following criteria:
 - Equality (equal access to resources)
 - Equity (prioritization of those countries most in need)
 - Return on investment (ROI; prioritization of those countries offering the greatest returns/results)
- While many organisations desire all three criteria to be met simultaneously, there are trade-offs between them. As such, **a pragmatic and balanced approach is required.**
- Lessons from pooled funds identify a number of success factors, including:
 - having a **clear objective** for a pooled fund which is shared and understood
 - having a **separate panel** or entity for reviewing proposals
 - having **unearmarked funds** to drive joint planning and programming
 - having a **clear governance and institutional structure** for the programme.

Options for CE in the future

Pros

Cons

Option 1 Status Quo – retain current CE model

- Allocation: Maintains decentralised decision making on in-country allocations.
- Responds to the concerns about the bandwidth constraints within UNAIDS currently.
- Allows preservation of the global Joint Programme by supporting countries with no other sources of funding to keep HIV on the agenda.

- Doesn't address findings of evaluation e.g.
- Funds spread thin over large number of countries.
- Fragmentation of funds through country allocation processes.
- Lack of clear institutional home, ownership and learning function.

Option 2 Refined CE Model

- Changed allocation to support greater equity and reduces number of eligible countries and increases volume of funds.
- Likely reduced transaction costs as fewer countries would receive funds.

- Reduces importance and visibility of Joint Programme in countries not receiving funds – risk to global HIV agenda and preservation of the Joint Programme.

Option 3 Regional model

- Allocation based on equity as above so fewer countries receive funds but volumes increase.
- Allocations made by regions and could be informed by return on investment/results.
- Governance: Strengthened accountability as regions play a stronger role in CE processes through decisions on allocations, monitoring and oversight of use of country funds.
- Potential regional capacity to fulfil the role. Builds on strengthened regional role in latest CE guidance.

- Reduces importance and visibility of Joint Programme in countries not receiving funds – risk to global HIV agenda and preservation of the Joint Programme

Option 4: Preferred Option Country Results Fund (CRF)

- Pillar 1 funds allocated to all countries enabling preservation of global programme and HIV stays on agenda in 90+ countries.
- Pillar 2 funds support strategic and thematic priorities to enable progress in country and global targets.
- Funds are less fragmented and more likely to support results.
- More funds empowers countries – credibility, visibility, leverage.
- Independent review potentially enables more strategic proposals anchored in theory of change.
- Could serve as an instrument for resource mobilisation.

- Requires some initial effort to set up (e.g., Technical Working Group) – independent panel, guidance, deciding on themes, proposal format).
- Challenging to make changes in the context of realignment as roles/ structures are still settling in and funding uncertainty.

Recommendations – all options

Recommendation 1: Have a strategic discussion between Secretariat and Cosponsor staff regarding the **positioning and support to CEs** in the wider context of **changing UBRAF budgets, funding, and resource mobilisation** efforts. Discussions should focus on:

- Scenario planning and assessing support for the continuation of CE
- Determine a clear purpose for CE – essentially what does UNAIDS want to achieve with these funds?
- Assess the options presented to remodel CE in conjunction with the purpose.
- Determine next steps

Recommendation 2: Retain CE funding. The evaluation team recommends keeping the CE in some form as findings given it is helping to reinvigorate Joint Team planning and working to some extent, having some funds available for use at country levels is helping keep HIV on the political agenda in countries where other sources of funding are not available., and there is some evidence that CE funded activities have been catalytic.

Recommendation 3: Determine a clear institutional home for CE. The evaluation found no clear ownership for CE. Placing CE within a clear institutional home (e.g., under the direction of the Deputy Director of Programmes in the UNAIDS Secretariat) will help increase responsibility, transparency and accountability for the performance of such funds.



Recommendations – all options

Recommendation 4: Ensure Joint Plans on HIV/AIDS are anchored in a theory of change (aligned with national strategic plans and local UNSDCF) and the UBRAF theory of change. This responds to the need to increase the strategic intent of Joint Plans and use of CE and would help Joint Teams coalesce around a Joint Vision for the longer term, and enable Joint Teams to identify specific areas/ opportunities where they can work together to leverage their comparative advantage.

Recommendation 5: Lengthen the planning timeframe, continue to promote two-year planning, and accompany this with two-year disbursements. Lengthening the planning timeframe will promote more meaningful analysis and more meaningful engagement with national partners on needs to be addressed. Aligning the disbursement period to the planning period (two years) will support longer-term, more strategic planning and implementation.

Recommendation 6: Ensure guidance for CE provide clear instructions and transparent information on how funds can be used. Definitions and examples of key principles and terms such as strategic, catalytic and tangible examples of the types of results expected from these funds should be included. Be clear how gender, human rights and community responses are expected to be addressed through these funds, including expectations for funds to address related structural causes.

Recommendations – all options

Recommendation 7: Assign clear roles to support the allocation, oversight and learning resulting from CE. The following roles could be envisaged for Joint Teams, regional Joint Team, global coordinators and UNAIDS global thematic leads:

- **Joint Team role:** strategic oversight of the development of plans to use the funds.
- **Joint Programme regional team role:** technical advisory support to country Joint Teams, quality assurance of reports, and identification of strategic learning, proactive dissemination of learning as needed.
- **Global coordinator's role:** work with the regions to determine which countries would be best placed to receive CE funds. Perform quality assurance of Joint Team reports for performance and accountability purposes.
- **UNAIDS Secretariat global thematic lead role:** lead discussion around how CE funds should be used and in which thematic areas, based on knowledge of key gaps in global targets and areas of Joint Programme comparative advantage; review implementation reports to identify learning themes and innovative examples that can be shared across countries and regions to promote learning and adaptation; and commission evaluations of CE funds, as appropriate.



Recommendations – all options

Recommendation 8: Update the JPMS to improve results reporting and strengthen accountability and learning.

- Being able to identify how CE funds are contributing to the wider Joint Programme and UBRAF results chains is important if these funds are to be results-oriented.
- In addition to the current Country Joint Reports, there is an opportunity for the reporting format to capture specific results achieved (as opposed to activities/deliverables) that **can be tagged to the UBRAF Results Framework 2022-2026** for the Joint Programme, at output and outcome levels. Planning and reporting should also allow Joint Teams to tag each entry (whether activity or deliverable) to several RAs if relevant. A proportional allocation would be required to avoid double-counting of budget amounts.
- Planning and reporting should also allow Joint Teams to tag each entry (whether activity or deliverable) to several strategic results areas if relevant. A proportional allocation would be required to avoid the double counting of budget amounts.

Recommendations – Country Results Fund

Recommendation 9: Establish a Country Results Fund (CRF) building on the existing structures, processes and guidance to minimize the burden associated with adapting the CE. It assumes the same level of CE funding available in 2022-2023.

- **The purpose of the Country Results Fund** is to demonstrate results to support the achievement of the Global AIDS Strategy and country priorities, through the comparative advantage of the Joint Programme. The design features reflect this purpose.
- The Country Results Fund will have **two pillars of financial support**:

Pillar 1: Provide a **fixed amount to all Joint Programme countries** on a “no regrets” basis to **strengthen Joint Team working** and the strategic intention of Joint Plans and enable HIV to remain on the agenda of Cosponsor agencies and countries (up to an indicative aggregate amount of US\$ 10 million).

- These funds would be used **to galvanise Joint Team working and support** including situational assessments as appropriate, participatory planning meetings, the development of the Joint Plan, and high-level policy and advocacy work.
- An indicative amount per country could be US\$ 100 000 over two years, which would total approximately US\$ 9.1 million over 91 countries.
- The current **t the development of stronger Joint Plans** disbursement mechanism could be retained or UNAIDS could identify the most efficient way that would allow all Cosponsors to receive an equal amount.

Recommendations – Country Results Fund

Pillar 2: Provide fund to accelerate results. Key features of the Pillar 2 grants include:

- a) **Support results-based proposals developed by country Joint Teams** with a floor of US\$ 1 million and ceiling of US\$ 3 million over two years. Using an estimated pot of US\$ 32.5 million envisaged for CE funds this would allow between 11-32 country grants over two years.
- b) **Focus proposals on one theme every two years to focus the achievement of results in specific/target areas.** The need to enhance results in a thematic area would be based on evidence and learning and would be identified and criteria defined by UNAIDS Secretariat global thematic leads, global coordinators and regional Joint Teams and other experts and networks as appropriate.
- c) **Enable flexibility in how funding can be used in proposals.** This would mean that countries could propose use funds for additional human resources if there is a strong rationale for doing so. Proposals would also be able to reprogramme funds easily, for maximum flexibility. Funds would be disbursed for a two-year period to align with two-year plans.
- d) **Establish a small independent panel to review and endorse proposals** based on clear and transparent criteria and guidance. The independent panel would comprise a select number of independent experts and draw on the technical expertise of the UNAIDS global thematic leads, regional teams and global coordinators.

Recommendations – Country Results Fund

- e) **Define roles to support the independent panel and the operationalization of Pillar 2** for the Joint and regional teams, global coordinator's role and UNAIDS Secretariat global thematic lead roles but would essentially build on existing roles and expertise (see full report recommendations for details).
- f) **Update the JPMS to improve results reporting and strengthen accountability and learning.** This would mean:
 - **Providing clear guidance on process steps required to ensure the annual joint reporting and reporting process is meaningful.** The JPMS could include questions that probe, for example, how the reports have been developed, how learning around successes and challenges has been compiled and shared, and the extent to which the gender equality/human rights/community response intention was achieved, in addition to output and outcomes reporting. This would incentivize joint analysis of implementation and encourage reflection and learning within Joint Teams.

Recommendation 10: Establish a temporary technical working group to fully scope the design of the Country Results Fund. Draw on and align with UNAIDS Joint Programme thinking to ensure complementarity.

The End

