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**UNAIDS Unified Budget, Results and Accountability Framework
2016–2021 (Part II)**

2016-2017 Budget, Results and Accountability Matrix

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1. INTRODUCTION

1. The 2016-2021 Unified Budget, Results and Accountability Framework (UBRAF) has been developed as an instrument that translates the UNAIDS 2016-2021 Strategy into action and captures the contributions of UNAIDS Cosponsors and Secretariat towards the achievement of targets and strategic milestones in the Strategy, with a vision of achieving zero new infections, zero AIDS-related deaths and zero discrimination.
2. The UBRAF outlines 27 high level outputs; 22 of which capture the contribution of the Joint Programme to specific results in the UNAIDS 2016-2021 Strategy; and, five which relate to the core functions of the UNAIDS Secretariat. By achieving the 27 outputs in the UBRAF, UNAIDS maximizes progress towards the targets and strategic milestones in the UNAIDS 2016-2021 Strategy.
3. The 2016-2017 Budget, Results and Accountability Matrix (UBRAF Part II) presents the 27 outputs along with associated budgets, indicators and linkages to the results in UNAIDS 2016-2021 Strategy. The document also explains the Joint Programme's approach to performance monitoring. The 2016-2021 UBRAF indicators presented in this document are provisional and the final set of indicators, baselines and targets will be presented to the 38th PCB in 2016.
4. The 2016-2021 UBRAF indicators will be developed and finalised through a consultative process, including independent advice provided by the working group to review and revise the results and accountability matrix, which the Programme Coordinating Board (PCB) at its 36th meeting requested to be established (decision 7.2). Indicators for 2016-2021 will build on the 2012-2015 indicator set, experience gained using the indicators as well as feedback from stakeholders as part of - and following - the mid-term review of the 2012-2015 UBRAF presented at the 34th PCB meeting.¹

WHAT'S NEW?

At its core the UBRAF remains an instrument to catalyze country level action against AIDS, which is aligned with the 2030 Sustainable Development Agenda. Compared to the 2012-2015 UBRAF, the 2016-2021 UBRAF is more clearly aligned to the UNAIDS Strategy, and it has a simpler structure, fewer outputs (27 compared to 64 previously), a stronger link between resources and results, and improved reflection of regional differences and priorities.

The budget, results and accountability matrix builds on experience gained in implementing the 2012-2015 UBRAF as well as feedback from stakeholders on the UBRAF reporting. The indicators used in the 2012-2015 UBRAF have been reviewed, refined, where possible and necessary, and used as the basis for the 2016-2021 budget, results and accountability matrix. The number of indicators has been limited with a shift from monitoring areas where the Joint Programme provides some form of support at country level to monitoring progress at country level which is attributable (directly or by proxy) to support provided by the Joint Programme.

¹ 2012-2015 Unified Budget, Results and Accountability Framework Mid-term review. 34th UNAIDS Programme Coordinating Board, 1-3 July 2014 documents UNAIDS/PCB(34)/14.6 and UNAIDS/PCB(34)/14.10

2. PARAMETERS AND PRINCIPLES

5. The PCB has identified a number of parameters and principles to guide UNAIDS performance monitoring, reporting and accountability:
 - measure progress against the UBRAF;
 - report annually to the PCB focusing on results at country level;
 - demonstrate links between resources and results;
 - highlight joint achievements as well as individual contributions, and;
 - align UNAIDS performance monitoring with Cosponsors' own results reporting.
6. Since the introduction of the first 2012-2015 UBRAF, performance monitoring, accountability tools and mechanisms have been developed and continue to be refined based on experience, lessons learned and stakeholder feedback. The Joint Programme has developed a participatory approach to performance monitoring whereby a common understanding is established and shared amongst all UNAIDS constituencies, which ensures that the Joint Programme is delivering and reporting based on expressed needs of UNAIDS constituencies.
7. The main purpose of performance monitoring is to track progress and adjust plans and activities, as necessary, and to demonstrate the accountability, effectiveness and value of the Joint Programme. A practical and integrated approach is used to collect data and feedback in order to optimize reporting, reduce the reporting burden and ensure a streamlined approach to performance monitoring. For example, at country level, the Joint Programme uses the national framework as the reference point for the UBRAF reporting, which ensures alignment with national priorities and country ownership.
8. The nature of UNAIDS as a joint and cosponsored programme makes inferring causation especially challenging because there can be several organisations and more than one initiative designed to support a particular outcome. It is also important to note that many of the activities of the Joint Programme are carried out over extended periods of time in complex social environments, aiming at achieving sustained commitment to the response to AIDS, and changes in policies, legislation and behaviours, which makes it difficult to demonstrate results in a short time frame and direct causal relationships. The performance monitoring of the Joint Programme is largely premised on contribution to collective results.

PEOPLE-CENTRED AND PROGRESSIVE APPROACH TO PERFORMANCE MONITORING

- Involvement of stakeholders in performance monitoring - a common understanding of the indicators to be measured and the way they will be measured.
- Regular dialogue and opportunities for feedback - through multi-stakeholder consultations at global, regional and country levels.
- Need for flexibility - metrics evolving to remain relevant, reflect lessons learned and measure what counts and is actionable.
- Fair attribution - focus on the most essential and only include what is material; there will be many outcomes but the UBRAF cannot account for all of them.

3. PERFORMANCE MONITORING

9. The success of the Joint Programme is ultimately linked to measurable progress in the AIDS response against the goals and targets in UNAIDS 2016-2021 Strategy. This means that the UNAIDS 2016-2021 Strategy and the 2016-2021 UBRAF need to be monitored and reported on in parallel.

Linking to overall progress in the AIDS response

10. The UNAIDS 2016-2021 Strategy targets and results provide key yardsticks to measure global achievements in the AIDS response. A set of indicators to monitor the AIDS response and measure progress towards the Fast-Track targets for 2020 and the SDGs is undergoing review and validation.
11. Progress against the indicators that track the global AIDS response provides the context against which to triangulate and analyse UBRAF indicator data. Triangulation with global indicators also aims to minimize the reporting burden at the country level, and allow for aggregation and interpretation of information across different countries.

Measuring the achievements of the Joint Programme

12. Joint Programme inputs (financial, physical and human resources) generate outputs that contribute to the achievement of the milestones and targets in UNAIDS 2016-2021 Strategy and progress towards UNAIDS vision of three zeros.
13. A set of core output indicators has been developed for 2016-2021 to capture progress at country level that can be attributed (directly or as a proxy) to Joint Programme interventions. The proposed indicators for 2016-2021 are relatively simple, practical and do not make excessive demands on data collection. They build on and represent, where possible, an improvement on the 2012-2015 UBRAF indicators. Every indicator will have a baseline, milestones (2017 and 2019) and targets (2021). The baseline for each indicator will be established based on information collected as part of the 2015 reporting on the current UBRAF.
14. Guidance providing detailed information required for data collection will be developed through a collaborative and consultative process, promoting a common understanding and reducing the reporting burden.²

² This will include numerators, denominators, data types, required disaggregation categories, data sources, recommended cumulation types, frequency of reporting, analyses and interpretation of the reported data and references to technical guidance.

PRINCIPLES FOR UBRAF INDICATOR SELECTION

- Use of the 2012-2015 UBRAF indicators to allow for comparison across periods where appropriate
- Measure progress in countries associated to Joint Programme contributions
- Focus on priority elements of Joint Programme support
- Ensure measurability and ease of reporting
- Focus on indicators that are within the scope of the Joint Programme
- Use indicators that reflect the activities of more than one Cosponsor, and complement rather than replicate individual Cosponsor results frameworks (to the extent possible)
- Replace indicators that have previously reached consistently high levels of achievement
- Identify and modify indicators that can be clearly interpreted as performing or underperforming against targets

2016-2021 UBRAF indicator set

15. The 2012-2015 UBRAF originally included 122 indicators. As part of the midterm review of the UBRAF, the original set of indicators was reviewed and 32 core indicators were identified to be used for the second biennium of the UBRAF (2014-2015). In the 2016-2021 UBRAF, the number of UBRAF indicators has been limited further, in most cases to one per output. To the extent possible indicators are based on the core set of 32 indicators in the 2012-2015 UBRAF to be able to monitor trends over time. Indicators are usually shared, i.e., refer to joint actions by the Joint Programme.
16. Some of the indicators cover multiple variables that are related, and usually very specific. This allows for more granular data collection and analysis, which can help with: a) data collection and entry (it is often easier to answer a number of basic questions than to synthesize extensive information into one consolidated response); b) comparing data and relationships over time for sub-components of the indicator; and c) revising sub-components, if necessary, to ensure the relevance of the indicator over time. It may, for instance, become clear after a few years that all countries are implementing a certain aspect of an indicator (e.g., guidance on treatment), at which point this sub-component could be excluded from the indicator definition without having to abandon the entire indicator.
17. The core set of indicators includes civil society related indicators, such as a civil society engagement indicator, which has been developed through a consultative process involving UNAIDS Secretariat and Cosponsors, representatives of civil society as well as external experts. The new civil society engagement indicator was field-tested with the help of 10 UN Joint Teams on AIDS across six regions with encouraging results.
18. Indicators to measure progress in the UNAIDS Strategy are disaggregated by gender, age, key population and other variables, as appropriate. Consequently, the achievements of the Joint Programme will be measured against global results that are disaggregated. Supporting countries to collect and analyse disaggregated data is a key role of the Joint Programme, which is monitored through the UBRAF. Wherever possible, the UBRAF indicators are also disaggregated by age and gender.

19. All UBRAF indicators will be reviewed as part of the annual reviews of progress in order to ensure that the indicators are robust, appropriate and remain relevant. The full engagement of external stakeholders, in particular national governments and civil society as well as UN Country Teams and UN Joint Teams on AIDS in the annual review process, is key.
20. The indicator set in the UBRAF represents the Joint Programme's best efforts to capture credible and high-quality data reflecting progress against each of the UBRAF outputs. However, it is recognized that indicators alone cannot provide a full picture of the Joint Programme's multi-faceted contributions, requiring the use of other data sources as well.

Qualitative data

21. The Joint Programme draws on a range of performance metrics and sources of monitoring information. During the analysis of performance, quantitative and qualitative sources, including those specific to particular organizations, regions and countries are used for the collection and reporting of data. Indicators are not the only data source for reporting, and require triangulation with other sources such as narrative and financial reporting to give a comprehensive picture of the work of the Joint Programme.
22. In addition to the indicator set, the Joint Programme collects qualitative information annually on progress, key achievements and challenges against each of the 27 UBRAF outputs. Qualitative information is also critical for capturing the Joint Programme's contribution to the five core aspects of the response, identified in the UNAIDS 2016-2021 Strategy - information, investment, inclusion, integration and innovation - which may not be fully reflected in the reporting against the indicators.
23. Qualitative information is particularly important for understanding enablers and barriers as well as comparative advantages and areas for improvement of the Joint Programme. Qualitative information may be collected through focus groups, surveys, or interviews with stakeholders; as well as through open-ended response options in the Joint Programme Monitoring System (JPMS) and other data collection systems.
24. Evaluations and assessments are important to demonstrate accountability for results and added value, and also useful for learning, knowledge development and catalysing change. Case studies, in-depth reviews and evaluations will be carried out systematically to complement indicator reporting.

Data collection

25. As specified in the UBRAF Business Plan, the JPMS, a web-based tool for collecting, collating and analysing performance information, is the principal tool for data collection. Since its introduction in 2012, the JPMS has undergone several refinements and enhancements.

26. The JPMS enables collection of quantitative data as well as qualitative information at country, regional and global levels. It facilitates collective and individual organizational reporting, which stimulates collaboration among Joint Teams on AIDS and thematic, reference and working groups. The JPMS provides customised reporting functionality that enables the generation of fully shareable data across the Joint Programme from data entry to final reporting.

Understanding performance

27. Linking UBRAF and Strategy indicators allows parallel consideration of the progress and results at the country and regional level and across the Joint Programme activities by output area, region, or country grouping. Figure 1 below presents a framework to be used to monitor progress in implementing the Strategy and how the UBRAF contributes to the achievement of the results in the Strategy.

UBRAF INDICATOR	STRATEGY INDICATOR	DATA USE AND ANALYSIS
Meeting targets	Meeting targets	<ul style="list-style-type: none"> Analyse activities of the Joint Programme to understand what has contributed to achieving Strategy targets Identify what has worked with UNAIDS approach in country and document lessons learned Determine if continued UNAIDS support is still required in the area or if resources can be shifted to other activities
Meeting targets	Underperforming	<ul style="list-style-type: none"> Determine whether focus is appropriate to achieve results or if alternative focus is required Identify additional support or enablers to translate Joint Programme successes into national-level results Review appropriateness of UBRAF indicator for measuring progress in output area
Underperforming	Meeting targets	<ul style="list-style-type: none"> Review appropriateness of UBRAF indicator for measuring progress in output area Leverage resources to areas that are underperforming at the national level Determine whether focus is appropriate to achieve results or if alternative focus is required
Underperforming	Underperforming	<ul style="list-style-type: none"> Analyse activities of the Joint Programme to understand whether approach is appropriate for the context Identify barriers to achieving Joint Programme results Identify barriers to achieving national results Determine if continued UNAIDS support can be effective in context based on other factors

Figure 1: Understanding performance under the UBRAF

Operationalizing performance

28. Progress made in the implementation of the UBRAF is considered annually, with Joint Programme reviews conducted by Cosponsors and the Secretariat, which take place at country, regional and global levels that contribute to a Performance Monitoring Report and accompanying papers to the PCB each year. Reviews identify achievements by the Joint Programme, expenditures against budgets, and areas where progress is not being achieved as expected, and provide the basis for future budget allocations.

29. Assessments are based on the achievement of results, progress against indicators and resource utilisation. The added value of the Joint Programme is also assessed from a qualitative perspective based on:
- relevance and scope of technical expertise and core functions, including capacity, strategic partnerships and influence in priority areas and in countries to fast-track the response;
 - role in supporting implementation of evidence-informed AIDS strategies in particular countries while meeting standards with regard to quality and cost effectiveness; and
 - role in driving technical, normative and advocacy work at global and regional levels in areas where such work is a clear priority and influences country responses and affects policies, programmes and outcomes.
30. Regular external participation is built into the planning, implementation and reporting cycle of the UBRAF, including performance reviews. A multi-stakeholder mid-term review of the UBRAF is envisaged to take place in 2018 to assess progress and to make adjustments to the 2016-2021 UBRAF, as necessary.
31. After a piloting period to test the ability of the framework to appropriately measure performance and accountability of the UBRAF, the following matrix is expected to be used to interpret performance under the 2016-2021 UBRAF.

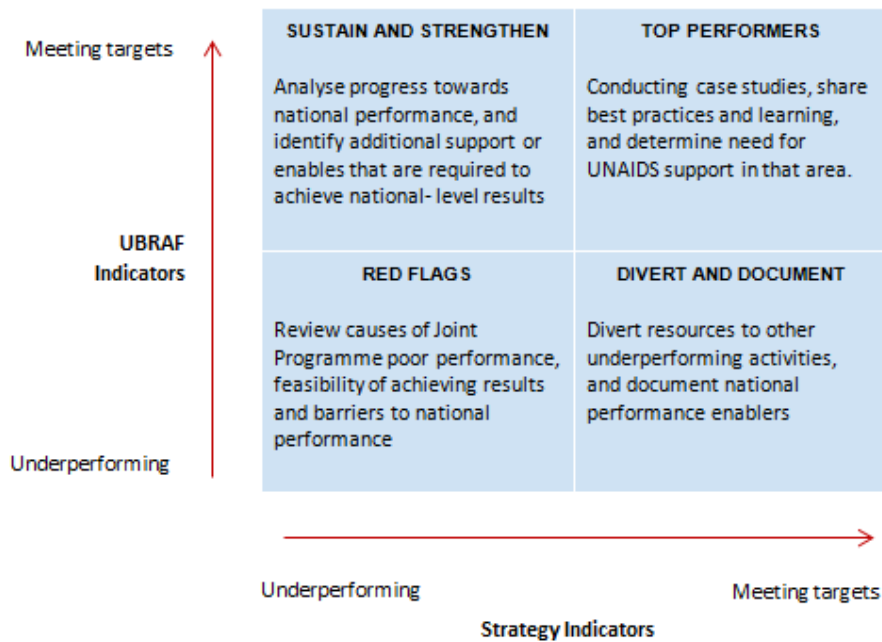


Figure 2: Enhancing UBRAF performance

4. MATRIX

How to read the matrix

32. The 2016-2017 budget, results and accountability matrix elaborates further the result structure outlined the UBRAF business plan (Part I). For each output, the expected level and focus of effort is shown by indicating core UBRAF resources at the global and regional level as well as planned investments in fast-track countries.
33. The format of the matrix facilitates understanding the link between resources and results. Core resources represent the essential needs of the Joint Programme to support the achievement of outputs in the UBRAF. Other funds (or non-core resources) that are available or expected to be mobilized in 2016-2017 are also presented in detail at the level of result areas.
34. By showing how outputs in the UBRAF contribute to results and result areas in the Strategy, the matrix presents a clear link between the UNAIDS 2016-2021 Strategy and UBRAF. Once the indicators for the Strategy have been finalized, these will be used to determine overall progress in the response to AIDS while the UBRAF indicators in the corresponding result areas will be used to measure the contribution of the Joint Programme to these areas.
35. Finally, the matrix features the data source, baseline and targets and milestones for the output indicators that will measure progress in implementing the UBRAF. This conference room paper contains provisional indicators that will serve as a starting point for the consultative process of reviewing and refining the results and accountability matrix for the 38th PCB as per decision 7.2 of the 36th PCB meeting.

BUDGET, RESULTS AND ACCOUNTABILITY MATRIX

ENSURE HEALTHY LIVES AND PROMOTE WELL- BEING FOR ALL AT ALL AGES [SDG 3]									
STRATEGY RESULT AREA 1 – Children, adolescents and adults living with HIV access testing, know their status and are immediately offered and sustained on affordable quality treatment									
Strategy Target 1: 90 90 90									
STRATEGY RESULTS [global/outcome level]									
<ul style="list-style-type: none"> Voluntary HIV testing services accessible for people at risk of HIV infection Early infant diagnostic services accessible to all children exposed to HIV, and all children under 5 years living with HIV on treatment 									
Output 1.1 Innovative and targeted HIV testing and counselling programmes introduced									
Indicator		Data source			Baseline		Targets and milestones		
Percentage of countries adopting WHO HIV testing related guidance and innovative approaches <i>[composite indicator reflecting types of innovative HCT approaches being implemented and stage of implementation]</i>		Joint Teams assessments in country (through JPMS)			TBD by end 2015		2017: 2019: 2021: 100% of countries		
CORE RESOURCES									
Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
UNICEF	143 494	88 388	44 386	24 842	73 338	37 654	18 016	49 884	480 000
WFP	451 166	256 900	28 800		160 300	28 800		129 500	1 055 466
ILO	915 600	1 087 200	70 300		82 800	45 800		51 800	2 253 500
WHO	1 120 000	1 184 000	280 000	200 000	200 000	165 000	140 000	225 000	3 514 000
World Bank	107 800	733 040	13 860	9 240	30 800	10 780		15 400	920 920
Subtotal Output 1.1	2 738 060	3 349 528	437 346	234 082	547 238	288 034	158 016	471 584	8 223 886
STRATEGY RESULTS [global/outcome level]									
<ul style="list-style-type: none"> All adults, adolescents and children offered ART and linked to treatment services upon HIV diagnosis People on treatment supported and monitored regularly, including scaled up viral load monitoring, and treatment literacy and nutritional support Accessibility, affordability and quality of treatment improved, including through community delivery systems 									
Output 1.2 Country capacity, policies and systems for access to HIV treatment cascade enhanced									
Indicator		Data Source			Baseline		Targets and milestones		
Percentage of countries that implement latest WHO treatment guidelines. [Proposed elements for assessment: CD4 threshold/eligibility criteria; ART protocols; others TBD]		Joint Teams assessments in country (through JPMS)			TBD by end 2015		2017: 2019: 2021: 100% of countries		

CORE RESOURCES									
Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
UNICEF	717 470	441 940	221 930	124 210	366 690	188 270	90 080	249 420	2 400 000
WFP	863 108	993 116	40 300		281 400	58 800		231 200	2 467 924
UNDP	156 000	258 000	20 000	25 000	15 000	20 000	30 000	15 000	539 000
UNODC	103 500	69 000	60 375	51 750	34 500	8 625	12 075	5 175	345 000
UN Women	200 000	250 000	100 000		100 000				650 000
WHO	1 330 000	1 320 000	400 000	320 000	275 000	150 000	180 000	320 000	4 295 000
World Bank	77 000	523 600	34 650	23 100	61 600	26 950	15 400	38 500	800 800
Subtotal Output 1.2	3 447 078	3 855 656	877 255	544 060	1 134 190	452 645	327 555	859 295	11 497 724
Output 1.3 Systems that enable children and adolescents to meet 90-90-90 targets strengthened									
Indicator		Data Source		Baseline		Targets and milestones			
<p>Percentage of countries adopting Global Standards for quality health care services for adolescents (elements for assessment: provision of a comprehensive package of services, confidentiality, age of consent, equity, participation, reorganization of services to make them welcoming for adolescents)</p> <p>Percentage of countries with case finding strategies for identification of HIV-infected infants and children [EID, Targeted family testing, active tracing, adequate age of consent...]</p>		<p>Joint Teams assessments in country (through JPMS)</p>		<p>TBD by end 2015</p>		<p>2017: 2019: 2021: 100% of countries</p>			
CORE RESOURCES									
Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
UNICEF	2 152 410	1 325 820	665 790	372 630	1 100 070	564 810	270 240	748 260	7 200 000
WFP	96 100	954 850			50 000				1 100 950
UNESCO	225 120	343 385	134 989	60 026	86 653	75 641	8 000	58 185	991 999
WHO	950 000	860 000	120 000	120 000	220 000	80 000	80 000	180 000	2 610 000
World Bank	30 800	209 440	13 860	9 240	12 320	10 780	6 160	15 400	308 000
Subtotal Output 1.3	3 454 430	3 693 495	934 639	561 896	1 469 043	731 231	364 400	1 001 845	12 210 949

STRATEGY RESULTS [global/outcome level]
 • HIV services scaled up and adapted to local contexts including in cities, fragile communities and humanitarian emergencies

Output 1.4 High-burden cities fast-track HIV services

Indicator	Data Source	Baseline	Targets and milestones
Percentage of high burden cities that have set ambitious targets in line with 90-90-90.	Joint Teams assessments in country (through JPMS)	TBD by end 2015	2017: 2019: 2021: 100% of high burden cities

CORE RESOURCES

Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
UNICEF	143 494	88 388	44 386	24 842	73 338	37 654	18 016	49 884	480 000
UNDP	412 000	967 000	82 500	57 500	41 500	75 000	57 500	44 000	1 737 000
UNFPA	150 000	255 754	147 139	205 412	78 743			30 199	867 247
UNODC	241 500	161 000	140 875	120 750	80 500	20 125	28 175	12 075	805 000
World Bank	77 000	523 600	69 300	41 580	18 480	37 730	15 400	61 600	844 690
Subtotal Output 1.4	1 023 994	1 995 742	484 200	450 084	292 561	170 509	119 091	197 758	4 733 937

Output 1.5 Mechanisms developed to provide HIV-related services in humanitarian emergencies

Indicator	Data Source	Baseline	Targets and milestones
Contribution of UN Joint Teams to the provision of HIV prevention, treatment and care for emergency affected populations (disaggregated by support area)	Joint Teams assessments in country (through JPMS)	TBD by end 2015	2017: 2019: 2021: 100% of humanitarian emergencies (where appropriate)

CORE RESOURCES

Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
UNHCR	318 814	2 945 034	62 054		411 375	28 349	1 481 339	318 088	5 565 053
UNICEF	179 368	110 485	55 483	31 053	91 673	47 068	22 520	62 355	600 000
WFP	176 085		35 217	35 217	140 867			316 952	704 338
UNFPA		98 572		112 045	31 497		248 799		490 913
UNODC	103 500	69 000	60 375	51 750	34 500	8 625	12 075	5 175	345 000
Subtotal Output 1.5	777 767	3 223 091	213 129	230 065	709 912	84 042	1 764 733	702 570	7 705 304

STRATEGY RESULTS [global/outcome level]									
<ul style="list-style-type: none"> Adequate investments made in R&D for better diagnostics, ARVs, prevention commodities, monitoring tools, vaccines and cure 									
Output 1.6 Mechanisms to ensure access to medicines and commodities strengthened									
Indicator			Data Source		Baseline		Target and milestones		
Contribution of UN Joint Teams to strengthen mechanisms to ensure access to medicines and commodities in countries.			Joint Teams assessments in country (through JPMS)		TBD by end 2015		2017: 2019: 2021: 100% of countries		
CORE RESOURCES									
Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
UNICEF	179 368	110 485	55 483	31 053	91 673	47 068	22 520	62 355	600 000
WFP	65 000								65 000
UNDP	648 000	700 000	45 000	50 000	25 000	55 000	65 000	27 500	1 615 500
UNFPA		30 893		48 853		123 572			203 318
WHO	853 000	880 000	264 000	165 000	150 000	140 000	160 000	150 000	2 762 000
World Bank	123 200	837 760	69 300	46 200	49 280	59 290	33 880	69 300	1 288 210
Subtotal Output 1.6	1 868 568	2 559 138	433 783	341 106	315 953	424 930	281 400	309 155	6 534 028
Subtotal Result Area 1	13 309 897	18 676 650	3 380 352	2 361 293	4 468 897	2 151 391	3 015 195	3 542 207	50 905 800

STRATEGY RESULT AREA 2 - New HIV infection among children eliminated and their mothers' health and well-being is sustained			
Strategy Target 2. Zero new HIV infections among children, and mothers are alive and well			
STRATEGY RESULTS [global/outcome level]			
<ul style="list-style-type: none"> Immediate treatment accessible to all pregnant women living with HIV (option B+) HIV, SRH including family planning, TB and maternal and child health services integrated and accessible for women, particularly women living with HIV HIV prevention services for male partners promoted including testing and treatment 			
Output 2.1 Access and quality of comprehensive eMTCT services improved			
Indicator		Data Source	Baseline
Percentage of countries adopting latest eMTCT guidance [Proposed elements for assessment: Option B+, feeding options; others TBD] and where eMTCT services are integrated.		Joint Teams assessments in country (through JPMS) GARPR/NCPI	TBD by end 2015
			2017: 2019: 2021: 100% of countries

CORE RESOURCES									
Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
UNICEF	1 327 320	817 589	410 571	229 789	678 377	348 300	166 648	461 427	4 440 000
WFP		493 900	9 800		41 900	9 800		34 600	590 000
UNFPA	150 000	202 465			68 801	48 174		60 397	529 837
WHO	1 160 000	1 130 000	285 000	260 000	225 000	180 000	240 000	220 000	3 700 000
Subtotal Output 2.1	2 637 320	2 643 954	705 371	489 789	1 014 078	586 274	406 648	776 424	9 259 837
Subtotal Result Area 2	2 637 320	2 643 954	705 371	489 789	1 014 078	586 274	406 648	776 424	9 259 800

REDUCE INEQUALITY IN ACCESS TO SERVICES AND COMMODITIES [SDG 10]

STRATEGY RESULT AREA 3 - Young people, especially young women and adolescent girls, access combination prevention services and are empowered to protect themselves from HIV

Strategy Target 3. 90% of young people are empowered with the skills, knowledge and capability to protect themselves from HIV
 Strategy Target 4. 90% of women and men, especially young people and those in high prevalence settings, have access to HIV combination prevention and sexual and reproductive health services
 Strategy Target 5. 27 million additional men in high-prevalence settings are voluntarily medically circumcised, as part of integrated SRH services for men

- STRATEGY RESULTS [global/outcome level]**
- All people, especially young people reduce HIV-related risk behaviour and access HIV combination prevention services , including primary prevention, and SRH services
 - 20 billion condoms available annually in low-and-middle-income countries for people of all ages
 - Additional 27 million men in high-prevalence settings voluntarily medically circumcised as part of access to integrated SRH services for men
 - Information accessed, awareness raised and demand created through traditional and new forms of communication and outreach

Output 3.1 Targeted combination prevention programmes defined and implemented

Indicator	Data Source	Baseline	Targets and milestones
Percentage of countries with targeted combination prevention programmes in place [Proposed elements for assessment: % resources, national platform, use of location/population approach]	Joint Teams assessments in country (through JPMS) GARPR/NASA	TBD by end 2015	2017: 2019: 2021: 100% of countries

CORE RESOURCES

Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
UNICEF	717 470	441 940	221 930	124 210	366 690	188 270	90 080	249 420	2 400 000
UNDP	300 000	516 000	50 000	35 000	20 000	40 000	35 000	20 000	1 016 000
UNFPA	1 500 000	1 558 957	33 410		771 682	317 949		90 596	4 272 594
ILO	784 800	932 000	42 500		74 100	39 200		46 300	1 918 900

UNESCO	900 480	1 373 540	539 957	240 105	346 613	302 564	32 000	232 741	3 968 000
WHO	920 000	750 000	245 000	180 000	210 000	80 000	160 000	250 000	2 795 000
World Bank	277 200	1 884 960	55 440	36 960	123 200	70 070	15 400	100 100	2 563 330
Subtotal Output 3.1	5 399 950	7 457 397	1 188 237	616 275	1 912 285	1 038 053	332 480	989 157	18 933 824

STRATEGY RESULTS [global/outcome level]

- Youth-friendly HIV, SRH and harm reduction information and services accessed independently and equally by young women and men
- Quality comprehensive sexuality education accessed by all adolescent and young people
- Young people meaningfully engaged in the response to ensure effectiveness and sustainability

Output 3.2 Country capacity to meet the HIV-related health and education needs of young people and adolescents strengthened

Indicator	Data Source	Baseline	Targets and milestones
Contribution of UN Joint Teams to strengthen national capacity among key stakeholders for the design and implementation of quality, comprehensive age-appropriate sexuality education in policy and curricula	Joint Teams assessments in country (through JPMS)	TBD by end 2015	2017: 2019: 2021: 100% of countries
Engagement of adolescent girls and boys in the national response with respect to: policy development, planning, budgeting, implementation of services and interventions, monitoring and evaluation (GARPR 2016/NCPI)	GARPR/NCPI		

CORE RESOURCES

Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
UNICEF	143 494	88 388	44 386	24 842	73 338	37 654	18 016	49 884	480 000
WFP	200 000								200 000
UNFPA	872 362	694 911			188 983	618 467	248,799	181 193	2 804 715
UNODC	172 500	115 000	100 625	86 250	57 500	14 375	20 125	8 625	575 000
UN Women	100 000	150 000	110 000		130 000	75 000			565 000
UNESCO	787 920	1 201 847	472 463	210 092	303 286	264 744	28 000	203 648	3 472 000
WHO	70 000	70 000	10 000	10 000	25 000	10 000	30 000	25 000	250 000
World Bank	30 800	209 440	13 860	9 240	12 320	10 780	6 160	15 400	308 000
Subtotal Output 3.2	2 377 076	2 529 586	751 334	340 424	790 427	1 031 020	351 100	483 750	8 654 715
Subtotal Result Area 3	7 777 026	9 986 983	1 939 571	956 699	2 702 712	2 069 073	683 580	1 472 907	27 588 500

STRATEGY RESULT AREA 4 - Tailored HIV combination prevention services are accessible for key populations, including sex workers, men who have sex with men, people who inject drugs, transgender people, and prisoners, as well as migrants

Strategy Target 6. 90% of key populations, including sex workers, men who have sex with men, people who inject drugs, transgender people, and prisoners, as well as migrants have access to HIV combination prevention services

STRATEGY RESULTS [global/outcome level]

- Combination prevention services, adequately resourced and available, tailored to populations, locations and interventions with maximum impact
- Outreach and new media inform and create demand for use of traditional and new prevention technologies, including condoms and PrEP
- 3 million people on PrEP annually, focused particularly on key populations and people at high risk in high prevalence settings
- Migrants, refugees, and crisis affected populations have access to HIV-related services
- People living with HIV and other key populations meaningfully engaged in decision-making and implementation of HIV prevention programmes

Output 4.1 Evidence-based HIV services for key populations implemented

Indicator	Data Source	Baseline	Targets and milestones
Percentage of countries implementing evidence-informed HIV services for key populations. [Proposed elements for assessment: Availability of size and prevalence estimates for key populations, defined packages of services for key populations, disaggregated reporting on HIV prevention and treatment services among key populations]	Joint Teams assessments in country (through JPMS)	TBD by end 2015	2017: 2019: 2021: 100% of countries
Engagement of national priority population groups in the national AIDS response with respect to: policy development, planning, budgeting, implementation of services and interventions, monitoring and evaluation	GARPR/NCPI		

CORE RESOURCES

Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
UNHCR	146 341	819 191	34 085		219 232	14 839	320 990	119 794	1 674 472
UNICEF	143 494	88 388	44 386	24 842	73 338	37 654	18 016	49 884	480 000
UNDP	620 000	750 000	55 000	80 000	27 500	62 600	80 000	25 000	1 700 100
UNFPA	1 500 000	1 453 705	892 516	1 650 000	409 464	197 134	500 000	271 789	6 874 608
UNODC	517 500	345 000	301 875	258 750	172 500	43 125	60 375	25 875	1 725 000
ILO	697 600	828 400	67 000		61 100	34 900	43 600	38 200	1 770 800
UNESCO	281 400	429 231	168 737	75 033	108 317	94 551	10 000	72 731	1 240 000
WHO	1 040 000	980 000	530 000	240 000	120 000	80 000	190 000	100 000	3 280 000
World Bank	77 000	523 600	55 440	41 580	18 480	32 340	15 400	61 600	825 440
Subtotal Output 4.1	5 023 335	6 217 515	2 149 039	2 370 205	1 209 931	597 143	1 238 381	764 873	19 570 420

STRATEGY RESULTS [global/outcome level]									
<ul style="list-style-type: none"> People who inject drugs access clean needles and syringes, as well as opioid substitution therapy and other evidence-informed drug dependence treatment 									
Output 4.2 Comprehensive package of harm reduction services established for people who inject drugs									
CORE RESOURCES									
Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
UNODC	1 380 000	920 000	805 000	690 000	460 000	115 000	161 000	69 000	4 600 000
WHO	750 000	955 000	540 000	340 000			150 000		2 735 000
World Bank	77 000	523 600	55 440	41 580	18 480	32 340	15 400	61 600	825 440
Subtotal Output 4.2	2 207 000	2 398 600	1 400 440	1 071 580	478 480	147 340	326 400	130 600	8 160 440
Subtotal Result Area 4	7 230 335	8 616 115	3 549 479	3 441 785	1 688 411	744 483	1 564 781	895 473	27 730 900

ACHIEVE GENDER EQUALITY AND EMPOWER WOMEN AND GIRLS [SDG 5]
STRATEGY RESULT AREA 5 - Women and men practice and promote healthy gender norms and work together to end gender-based, sexual and intimate partner violence to mitigate risk and impact of HIV
Strategy Target 7. 90% of women and girls live free from gender inequality and gender-based violence to mitigate risk and impact of HIV
STRATEGY RESULTS [global/outcome level] <ul style="list-style-type: none"> Laws, policies and practices enable women and girls to protect themselves from HIV and access HIV-related services, including by upholding their rights and autonomy Sexual and reproductive <u>health and rights</u> needs fully met to prevent HIV transmission Young women in high prevalence settings access economic empowerment initiatives

Output 5.1 Structural and social change interventions to transform unequal gender norms and systemic barriers defined and implemented			
Indicator	Data Source	Baseline	Targets and milestones
Contribution of UN Joint Teams to promoting gender equality, including engaging men and boys, within the HIV context. [Composite with checklists of various areas of support, including civil society capacity development, GBV interventions, male engagement, others TBD]	Joint Teams assessments in country (through JPMS)	TBD by end 2015	2017: 2019: 2021: 100% of countries

CORE RESOURCES									
Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
UNICEF	143 494	88 388	44 386	24 842	73 338	37 654	18 016	49 884	480 000
UNDP	400 000	688 000	45 000	55 000	35 000	50 000	40 000	30 000	1 343 000
UNFPA		347 793			62 995	57 809		196 292	664 889
UN Women	300 000	410 000	300 000	220 000	300 000	350 000	130 000	110 000	2 120 000
ILO	566 800	673 100	39 200		87 200	28 300		54 500	1 449 100
WHO	50 000	55 000	5 000	5 000	25 000	5 000	30 000	25 000	200 000
Subtotal Output 5.1	1 460 294	2 262 281	433 586	304 842	583 533	528 763	218 016	465 676	6 256 989

STRATEGY RESULTS [global/outcome level]									
<ul style="list-style-type: none"> Women meaningfully engaged in decision-making and implementation of the AIDS response 									
Output 5.2 Strategic actions for women and girls included and resourced in AIDS responses									
Indicator	Data Source	Baseline	Targets and milestones						
Contribution of UN Joint Teams to include and resource strategic actions for women and girls in the AIDS response.	Joint Teams assessments in country (through JPMS)	TBD by end 2015	2017: 2019: 2021: 100% of countries						
Engagement of women living with HIV in the national response: policy development, planning, budgeting, implementation of services and interventions, monitoring and evaluation	GARPR/NCPI								
CORE RESOURCES									
Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
UNICEF	143 494	88 388	44 386	24 842	73 338	37 654	18 016	49 884	480 000
UNDP	272 000	430 000	37 500	35 000	15 000	30 000	35 000	20 000	874 500
UNFPA	-	153 243	26 728	-	-	-	-	135 894	315 865
UN Women	300 000	400 000	325 000	330 000	320 000	380 000	195 000	125 000	2 375 000
WHO	80 000	80 000	19 000	16 000	30 000	15 000	30 000	30 000	300 000
World Bank	30 800	209 440	13 860	9 240	12 320	10 780	15 400	15 400	317 240
Subtotal Output 5.2	826 294	1 361 071	466 474	415 082	450 658	473 434	293 416	376 178	4 662 605

STRATEGY RESULTS [global/outcome level]
<ul style="list-style-type: none"> Women and girls and men and boys engaged and empowered to prevent gender-based, sexual and intimate partner violence, and promote healthy gender norms and behaviour
Output 5.3 Actions to address and prevent all forms of gender-based violence implemented

Indicator		Data Source	Baseline	Targets and milestones					
Contribution of UN Joint Teams to the review or development of legislation and/or policies addressing gender-based violence against women and gender equality		Joint Teams assessments in country (through JPMS)	TBD by end 2015	2017: 2019: 2021: 100% of countries (where relevant/need)					
Revised/new laws or policies to prevent and address issues of violence against women and gender-based violence		GARPR/NCPI							
CORE RESOURCES									
Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
UNHCR	26 132	454 242	17 012	28 908	56 401	4 173	514 901	5 869	1 107 638
UNICEF	143 494	88 388	44 386	24 842	73 338	37 654	18 016	49 884	480 000
UNDP	360 000	602 000	50 000	45 000	25 000	55 000	40 000	25 000	1 202 000
UNFPA		239 128	86 865	48 853	62 995	192 697		60 397	690 935
UNODC	345 000	230 000	201 250	172 500	115 000	28 750	40 250	17 250	1 150 000
UN Women	150 000	200 000	200 000	60 000	140 000	150 000		90 000	990 000
UNESCO	281 400	429 231	168 737	75 033	108 317	94 551	10 000	72 731	1 240 000
WHO	50 000	55 000	5 000	5 000	25 000	5 000	30 000	25 000	200 000
Subtotal Output 5.3	1 356 026	2 297 989	773 250	460 136	606 051	567 825	653 167	346 131	7 060 573
Subtotal Result Area 5	3 642 614	5 921 341	1 673 310	1 180 060	1 640 242	1 570 022	1 164 599	1 187 985	17 980 200

PROMOTE INCLUSIVE SOCIETIES FOR SUSTAINABLE DEVELOPMENT [SDG 16]			
STRATEGY RESULT AREA 6 - Punitive laws, policies, practices, stigma and discrimination that block effective responses to HIV are removed			
Strategy Target 8: 90% of people living with, at risk of and affected by HIV report no discrimination, especially in health, educational and workplace settings			
STRATEGY RESULTS [global/outcome level]			
<ul style="list-style-type: none"> Punitive laws, policies and practices removed including overly broad criminalization of HIV transmission, travel restrictions, mandatory testing and those that block key populations' access to services 			
Output 6.1 HIV-related legal and policy reforms catalysed and supported			
Indicator	Data Source	Baseline	Targets and milestones
Countries that revised laws and/or policies presenting barriers to delivery of HIV prevention, testing and treatment services or accessibility to these services (disaggregated by type)	Joint Teams assessments in country (through JPMS)	TBD by end 2015	2017: 2019: 2021: 100% of countries with punitive laws/policies
Countries where discriminatory HIV-related travel restrictions were removed	GARPR/NCPI		

CORE RESOURCES									
Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
UNHCR	31 359	417 530	12 472	119 696	213 709	43 702	413 440	200 928	1 452 836
UNDP	270 000	602 000	54 000	45 000	25 000	48 000	45 000	30 000	1 119 000
UNFPA		10 856	53 455	50,000					114 311
UNODC	241 500	161 000	140 875	120 750	80 500	20 125	28 175	12 075	805 000
ILO	741 200	880 200	49 100	0	69 800	37 100	65 400	43 600	1 886 400
Subtotal Output 6.1	1 284 059	2 071 586	309 902	335 446	389 009	148 927	552 015	286 603	5 377 547

STRATEGY RESULTS [global/outcome level]

- People living with, at risk of and affected by HIV know their rights, and are able to access legal services and challenge violations of human rights
- Laws, policies and programmes to prevent and address violence against key populations issued and implemented

Output 6.2 National capacity to promote legal literacy, access to justice and enforcement of rights expanded

Indicator	Data Source	Baseline	Targets and milestones
Contribution of UN Joint Teams to national capacity to promote legal literacy and access to justice	Joint Teams assessments in country (through JPMS)	TBD by end 2015	2017: 2019: 2021: 100% of countries

CORE RESOURCES

Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
UNDP	400 000	688 000	50 000	60 000	30 000	55 000	60 000	26 000	1 369 000
UNFPA			66 819						66 819
UNODC	345 000	230 000	201 250	172 500	115 000	28 750	40 250	17 250	1 150 000
UN Women	200 000	300 000	200 000		140 000	60 000			900 000
UNESCO	168 840	257 539	101 242	45 020	64 990	56 731	6 000	43 639	744 001
Subtotal Output 6.2	1 113 840	1 475 539	619 311	277 520	349 990	200 481	106 250	86 889	4 229 820

STRATEGY RESULTS [global/outcome level]

- HIV-related stigma and discrimination eliminated among service providers in health care, workplace and educational settings

Output 6.3 Constituencies mobilized to eliminate HIV-related stigma and discrimination in health care

Indicator	Data Source	Baseline	Targets and milestones
Percentage of countries with an up to date PLHIV Stigma Index study, inclusive of HIV related discrimination in health care, and actionable, agreed recommendations	Joint Teams assessments in country (through JPMS)	TBD by end 2015	2017: 2019: 2021: 100% of countries

CORE RESOURCES									
Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
UNDP	362 000	430 000	34 000	30 000	15 000	35 000	30 000	18 000	954 000
UNFPA			140 320	50 000					190 320
WHO	860 000	924 000	130 000	90 000	65 000	60 000	80 000	80 000	2 289 000
Subtotal Output 6.3	1 222 000	1 354 000	304 320	170 000	80 000	95 000	110 000	98 000	3 433 320
Subtotal Result Area 6	3 619 899	4 901 125	1 233 533	782 966	818 999	444 408	768 265	471 492	13 040 700

STRENGTHEN THE MEANS OF IMPLEMENTATION [SDG 17]

STRATEGY RESULT AREA 7 - AIDS response is fully funded and efficiently implemented based on reliable strategic information

Strategy Target 9: Overall financial investments for the AIDS response in low-and-middle-income countries reach at least US\$30 billion, with continued increase from the current levels of domestic public sources

- STRATEGY RESULTS [global/outcome level]**
- Investments of at least \$31.1 billion available for the global AIDS response annually in 2020 in low and middle-income countries, with one-quarter invested in prevention globally
 - Low-income countries mobilize at least an average 12% of country resource needs; lower-middle income mobilize 45%, and; upper-middle income countries mobilize 95% from domestic sources
 - International investments for the AIDS response reach \$12.7 billion
 - Financial sustainability transition plans and country compacts implemented
 - Investment and support to civil society, including networks of people living with, at risk of and affected by HIV, scaled up to enhance their essential role in the response

Output 7.1 AIDS response sustainability and transitions strengthened

Indicator	Data Source	Baseline	Targets and milestones
Number of countries transiting into middle income, that have a transitional plan developed	Joint Teams assessments in country (through JPMS)	TBD by end 2015	2017: 2019: 2021: 100% of countries (where applicable)
Degree to which countries' AIDS responses are domestically funded	GARPR/NASA		

CORE RESOURCES

Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
UNDP	400 000	1 042 000	90 000	87 600	45 000	82 500	60 000	42 500	1 849 600
World Bank	154 000	1 047 200	83 160	55 440	61 600	70 070	58 520	84 700	1 614 690
Subtotal Output 7.1	554 000	2 089 200	173 160	143 040	106 600	152 570	118 520	127 200	3 464 290

STRATEGY RESULTS [global/outcome level]										
<ul style="list-style-type: none"> Countries use timely, appropriate and reliable strategic information to prioritize resource allocation, evaluate responses and inform accountability processes Allocative and productive efficiency gains fully exploited and commodity costs reduced in countries of all income levels, including by overcoming restrictive intellectual property and trade barriers 										
Output 7.2 Efficiency and effectiveness of national AIDS responses improved										
Indicator										
Data Source										
Baseline										
Targets and milestones										
Percentage of countries with up to date HIV Investment cases (or similar assessing allocative efficiency)			Joint Teams assessments in country (through JPMS)			TBD by end 2015		2017: 2019: 2021: 100% of countries		
CORE RESOURCES										
Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL	
World Bank	154 000	1 047 200	62 370	41 580	61 600	53 900	30 800	53 900	1 505 350	
Subtotal Output 7.2	154 000	1 047 200	62 370	41 580	61 600	53 900	30 800	53 900	1 505 350	

STRATEGY RESULTS [global/outcome level]										
<ul style="list-style-type: none"> Country capacity built including through technology transfer arrangements 										
Output 7.3 Technological, service delivery and mHealth innovations fostered										
Indicator										
Data Source										
Baseline										
Targets and milestones										
Contribution of UN Joint Teams to strengthen scale-up of new and emerging technologies or service delivery models (open-ended list of technologies)			Joint Teams assessments in country (through JPMS)			TBD by end 2015		2017: 2019: 2021: 100% of countries		
CORE RESOURCES										
Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL	
UNICEF	179 368	110 485	55 483	31 053	91 673	47 068	22 520	62 355	600 000	
WFP	73 327		14 665	14 665	58 662			131 989	293 308	
WHO	1 980 000	875 000	250 000	180 000	180 000	80 000	116 000	150 000	3 811 000	
World Bank	123 200	837 760	55 440	36 960	49 280	43 120	24 640	61 600	1 232 000	
Subtotal Output 7.3	2 355 895	1 823 245	375 588	262 678	379 615	170 188	163 160	405 944	5 936 308	
Subtotal Result Area 7	3 063 895	4 959 645	611 118	447 298	547 815	376 658	312 480	587 044	10 905 900	

STRATEGY RESULT AREA 8 - People-centred HIV and health services are integrated in the context of stronger systems for health

Strategy Target 10: 75% of people living with, at risk of and affected by HIV, who are in need, benefit from HIV-sensitive social protection

- STRATEGY RESULTS [global/outcome level]**
- HIV-sensitive UHC schemes implemented
 - People living with, at risk of and affected by HIV access integrated services including for HIV, TB, SRH, MNCH, hepatitis, drug dependence, food and nutrition support and NCDs, especially at the community level
 - Comprehensive systems for health strengthened through integration of community service delivery with formal health systems
 - Human resources for health trained, capacitated and retained to deliver integrated health and HIV services
 - Stock-outs prevented through strengthened procurement and supply chain systems

Output 8.1 Decentralization and integration of HIV related services strengthened

Indicator	Data Source	Baseline	Targets and milestones
Percentage of countries with national policies and/or strategies on availability and accessibility of treatment for HIV/TB co-infection; treatment for HIV/hepatitis B and C co-infection; and on integration of HIV with other health services (disaggregated by type: SRH, nutrition, GBV ...)	Joint Teams assessments in country (through JPMS) GARPR/NCPI	TBD by end 2015	2017: 2019: 2021: 100% of countries

CORE RESOURCES

Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
UNICEF	358 735	220 970	110 965	62 105	183 345	94 135	45 040	124 710	1 200 000
WFP	174 496	816 450	20 200		159 300	35 200		118 850	1 324 496
UNDP	360 000	602 000	40 000	45 000	20 000	50 000	45 000	25 000	1 187 000
UNFPA	1 000 000	551 070	564 782	97 706	188 983	171 749	248 799	90 596	2 913 685
UNESCO	168 840	257 539	101 242	45 020	64 990	56 731	6 000	43 639	744 001
WHO	1 020 000	540 000	100 000	100 000	166 000	65 000	130 000	138 000	2 259 000
World Bank	77 000	523 600	41 580	23 100	36 960	26 950	30 800	53 900	813 890
Subtotal Output 8.1	3 159 071	3 511 629	978 769	372 931	819 578	499 765	505 639	594 695	10 442 072

- STRATEGY RESULTS [global/outcome level]**
- People living with, at risk of and affected by HIV empowered through HIV-sensitive national social protection programmes, including cash transfers

Output 8.2 HIV sensitive social protection and social protection programmes for vulnerable populations, including orphans and vulnerable children strengthened

Indicator	Data Source	Baseline	Targets and milestones
Percentage of countries with social protection strategies in place which explicitly address HIV and include orphans and vulnerable children	Joint Teams assessments in country (through JPMS)	TBD by end 2015	2017: 2019: 2021: 100% of countries

CORE RESOURCES									
Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
UNICEF	358 735	220 970	110 965	62 105	183 345	94 135	45 040	124 710	1 200 000
WFP	400 718	764 800	80 700		397 100	80 700		274 500	1 998 518
UNDP	200 000	344 000	32 700	25 000	22 600	30 000	30 000	10 000	694 300
ILO	654 000	776 600	58 900		61 000	32 700		38 100	1 621 300
World Bank	123 200	837 760	55 440	36 960	49 280	43 120	24 640	61 600	1 232 000
Subtotal Output 8.2	1 736 653	2 944 130	338 705	124 065	713 325	280 655	99 680	508 910	6 746 118
Subtotal Result Area 8	4 895 724	6 455 759	1 317 474	496 996	1 532 903	780 420	605 319	1 103 605	17 188 200
Grand Total	46 176 710	62 161 572	14 410 208	10 156 886	14 414 057	8 722 729	8 520 867	10 037 137	174 600 000

LEADERSHIP, COORDINATION AND ACCOUNTABILITY

S.1 Leadership, advocacy and communication to fast track the AIDS response

Indicator	Data Source	Baseline	Targets and milestones
<p>Enhanced response in fast-track countries:</p> <ul style="list-style-type: none"> Percentage of countries committing to achieving fast track targets Percentage of fast track countries that mobilize XX per cent of estimated resources needed for the HIV response 	<p>Joint Teams assessments in country (through JPMS)</p> <p>National strategic plans or equivalent plans, AIDS spending assessments</p>	TBD by end 2015	<p>2017:</p> <p>2019:</p> <p>2021: 100% of countries and fast track countries</p>

CORE RESOURCES

Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
Secretariat	45 561 000	15 241 000	3 956 000	2 096 000	3 948 000	4 260 000	2 856 000	5 525 000	83 443 000
Subtotal Output S.1	45 561 000	15 241 000	3 956 000	2 096 000	3 948 000	4 260 000	2 856 000	5 525 000	83 443 000

S.2 Effective and inclusive partnerships for impact and sustainability

Indicator	Data Source	Baseline	Targets and milestones
<p>Partnerships at country, regional and global</p> <ul style="list-style-type: none"> Contribution of Joint Programme to engagement of civil society in the AIDS response (indicator developed with PCB NGOs) 	<p>Joint Teams assessments in country (through JPMS)</p>	TBD by end 2015	<p>2017:</p> <p>2019:</p> <p>2021: 100% of countries</p>

CORE RESOURCES									
Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
Secretariat	33 551 000	4 453 000	3 980 000	3 022 000	1 100 000	4 392 000	1 678 000	3 621 000	55 797 000
Subtotal Output S.2	33 551 000	4 453 000	3 980 000	3 022 000	1 100 000	4 392 000	1 678 000	3 621 000	55 797 000

S.3 Strategic information for an evidence informed response and global political agenda

Indicator	Data Source	Baseline	Targets and milestones
Generation and use of strategic information <ul style="list-style-type: none"> Percentage of countries that generate and use disaggregated data of acceptable quality for policy, resource allocation and programming (by age, gender, location, population) Global AIDS Response Progress Reporting (GARPR) completion rates and quality of data 	Joint Teams assessments in country (through JPMS) GARPR (secondary data analysis)	TBD by end 2015	2017: 2019: 2021: 100% of countries

CORE RESOURCES

Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
Secretariat	16 118 000	14 491 000	3 484 000	2 031 000	3 945 000	4 388 000	1 055 000	3 756 000	49 268 000
Subtotal Output S.3	16 118 000	14 491 000	3 484 000	2 031 000	3 945 000	4 388 000	1 055 000	3 756 000	49 268 000

S.4 Coordination, coherence and convening

Indicator	Data Source	Baseline	Targets and milestones
Stakeholder assessments <ul style="list-style-type: none"> External reviews and assessments (e.g., MOPAN, DfID, etc.) as well as IPSOS or similar surveys conducted at country, regional and global level Performance of Joint Teams in providing support to national plans, mobilizing technical support, and using country systems for reporting 	Independent evaluations and surveys	TBD by end 2015	2017: 2019: 2021:

CORE RESOURCES

Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
Secretariat	11 310 000	28 837 000	4 949 000	2 175 000	2 247 000	3 328 000	2 908 000	4 250 000	60 004 000
Subtotal Output S.4	11 310 000	28 837 000	4 949 000	2 175 000	2 247 000	3 328 000	2 908 000	4 250 000	60 004 000

S.5 Mutual accountability									
Indicator			Data Source		Baseline		Targets and milestones		
Set of key performance indicators in different areas: <ul style="list-style-type: none"> - UBRAF implementation (Implementation of core UBRAF; Unqualified audited financial statements; Performance-based disbursement of funds) - Operational efficiency (Programme-wide efficiency measures; Technology and innovation; Greenhouse Gas Inventory) - Risk management (Implementation of Enterprise Risk Management (ERM) (ISO compliance)) - Gender mainstreaming (Performance in UN-SWAP annual survey; Implementation of the Secretariat gender action plan) - Staff development (Staff training, career development and performance management) - Quadrennial Comprehensive Policy Review (Implementation of QCPR recommendations) 			PCB and ECOSOC documents Joint Teams assessments in country (through JPMS)		TBD by end 2015		2017: 2019: 2021: Set of targets, such as: ERM mature threshold; exceeds all performance indicators of UN-SWAP etc.		
CORE RESOURCES									
Organization	Global	Fast track countries	AP	EECA	ESA	LA/CAR	MENA	WCA	TOTAL
Secretariat	45 155 000	8 042 000	1 866 000	1 030 000	1 252 000	1 863 000	1 025 000	1 475 000	61 708 000
Subtotal Output S.5	45 155 000	8 042 000	1 866 000	1 030 000	1 252 000	1 863 000	1 025 000	1 475 000	61 708 000
Total Secretariat Core Function	151 695 000	71 064 000	18 235 000	10 354 000	12 492 000	18 231 000	9 522 000	18 627 000	310 220 000

SUMMARY: 2016-2017 JOINT PROGRAMME BUDGET

STRATEGY RESULT AREA/ CORE FUNCTION	CORE FUNDS	OTHER AIDS FUNDS	TOTAL
STRATEGY RESULT AREA 1 : HIV testing and treatment			
UNHCR	5,565,053	48,537,013	54,102,066
UNICEF	11,760,000	98,000,000	109,760,000
WFP	5,393,678	15,000,906	20,394,584
UNDP	3,891,500	150,000,000	153,891,500
UNFPA	1,561,478	-	1,561,478
UNODC	1,495,000	3,640,000	5,135,000
UN Women	650,000	409,000	1,059,000
ILO	2,253,500	3,048,750	5,302,250
UNESCO	991,999	900,206	1,892,205
WHO	13,181,000	41,393,000	54,574,000
World Bank	4,162,620	347,386,050	351,548,670
Subtotal Strategy Result Area 1	50,905,800	708,315,000	759,221,000
STRATEGY RESULT AREA 2 : Elimination of mother- to- child-transmission			
UNICEF	4,440,000	37,000,005	41,440,005
WFP	590,000	9,139,922	9,729,922
UNFPA	529,837		529,837
WHO	3,700,000	11,620,000	15,320,000
World Bank	-	128,987,250	128,987,250
Subtotal Strategy Result Area 2	9,259,800	186,747,200	196,007,000
STRATEGY RESULT AREA 3 : HIV prevention among young people			
UNICEF	2,880,000	23,999,994	26,879,994
WFP	200,000	5,000,301	5,200,301
UNDP	1,016,000	85,350,000	86,366,000
UNFPA	7,077,309	54,712,345	61,789,654
UNODC	575,000	1,400,000	1,975,000
UN Women	565,000	2,745,000	3,310,000
ILO	1,918,900	2,589,750	4,508,650
UNESCO	7,440,000	18,269,719	25,709,719
WHO	3,045,000	9,555,000	12,600,000
World Bank	2,871,330	302,739,300	305,610,630
Subtotal Strategy Result Area 3	27,588,500	506,361,400	533,949,900
STRATEGY RESULT AREA 4 : HIV prevention among key populations			
UNHCR	1,674,472	13,857,486	15,531,958
UNICEF	480,000	3,999,999	4,479,999
UNDP	1,700,100	62,900,000	64,600,100

STRATEGY RESULT AREA/ CORE FUNCTION	CORE FUNDS	OTHER AIDS FUNDS	TOTAL
UNFPA	6,874,608	7,949,492	14,824,100
UNODC	6,325,000	15,400,000	21,725,000
ILO	1,770,800	2,491,500	4,262,300
UNESCO	1,240,000	948,682	2,188,682
WHO	6,015,000	18,890,000	24,905,000
World Bank	1,650,880	345,993,200	347,644,080
Subtotal Strategy Result Area 4	27,730,900	472,430,400	500,161,200
STRATEGY RESULT AREA 5 : Gender inequality and GBV			
UNHCR	1,107,638	10,266,221	11,373,859
UNICEF	1,440,000	11,999,995	13,439,995
WFP		930,000	930,000
UNDP	3,419,500	52,000,000	55,419,500
UNFPA	1,671,689	14,251,330	15,923,019
UNODC	1,150,000	2,800,000	3,950,000
UN Women	5,485,000	19,590,000	25,075,000
ILO	1,449,100	1,984,500	3,433,600
UNESCO	1,240,000	13,550,747	14,790,747
WHO	700,000	2,197,000	2,897,000
World Bank	317,240	124,881,300	125,198,540
Subtotal Strategy Result Area 5	17,980,200	254,451,100	272,431,300
STRATEGY RESULT AREA 6: Human rights, stigma and discrimination			
UNHCR	1,452,836	10,539,086	11,991,922
UNDP	3,442,000	50,000,000	53,442,000
UNFPA	371,450	1,565,825	1,937,275
UNODC	1,955,000	4,760,000	6,715,000
UN Women	900,000	3,965,000	4,865,000
ILO	1,886,400	2,686,500	4,572,900
UNESCO	744,001	833,447	1,577,448
WHO	2,289,000	7,185,000	9,474,000
Subtotal Strategy Result Area 6	13,040,700	81,534,900	94,575,500
STRATEGY RESULT AREA 7: Investment and efficiency			
UNICEF	600,000	5,000,012	5,600,012
WFP	293,308		293,308
UNDP	1,849,600	14,500,000	16,349,600
WHO	3,811,000	11,966,000	15,777,000
World Bank	4,352,040	395,420,800	399,772,840
Subtotal Strategy Result Area 7	10,905,900	426,886,800	437,792,700
STRATEGY RESULT AREA 8: HIV and health services integration			

STRATEGY RESULT AREA/ CORE FUNCTION	CORE FUNDS	OTHER AIDS FUNDS	TOTAL
UNICEF	2,400,000	19,999,995	22,399,995
WFP	3,323,014	25,442,893	28,765,907
UNDP	1,881,300	75,250,000	77,131,300
ILO	1,621,300	2,199,000	3,820,300
UNFPA	2,913,685	32,228,157	35,141,842
UNESCO	744,001	1,137,698	1,881,699
WHO	2,259,000	7,094,000	9,353,000
World Bank	2,045,890	358,755,600	360,801,490
Subtotal Strategy Result Area 8	17,188,200	522,107,300	539,295,500
CORE FUNCTIONS: Leadership, coordination and accountability			
Secretariat	310,220,000	60,000,000	370,220,000
Subtotal Core Functions	310,220,000	60,000,000	370,220,000
GRAND TOTAL	484,820,000	3,218,834,000	3,703,654,000

UBRAF 2016-2021 OUTPUTS AND CONTRIBUTING ORGANIZATIONS

UBRAF 2016-2021 OUTPUTS		CONTRIBUTING ORGANIZATIONS
1.1	Innovative and targeted HIV testing and counselling programmes introduced	UNICEF, WFP, UNODC, ILO, WHO, World Bank
1.2	Country capacity, policies and systems for access to HIV treatment cascade enhanced	UNHCR, UNICEF, WFP, UNDP, UNODC, UN Women, WHO, World Bank
1.3	Systems that enable children and adolescents to meet 90-90-90 targets strengthened	UNICEF, WFP, UNESCO, WHO, World Bank
1.4	High-burden cities fast-track HIV services	UNICEF, UNDP, UNFPA, UNODC, World Bank
1.5	Mechanisms developed to provide HIV-related services in humanitarian emergencies	UNHCR, UNICEF, WFP, UNFPA, UNODC
1.6	Mechanisms to ensure access to medicines and commodities strengthened	UNICEF, WFP, UNDP, UNFPA, WHO, World Bank
2.1	Access and quality of comprehensive eMTCT services improved	UNICEF, WFP, UNFPA, WHO
3.1	Targeted combination prevention programmes defined and implemented	UNICEF, UNDP, UNFPA, UNODC, ILO, UNESCO, WHO, World Bank
3.2	Country capacity to meet the HIV-related health and education needs of young people and adolescents strengthened	UNICEF, WFP, UNFPA, UNODC, UN Women, UNESCO, WHO, World Bank
4.1	Evidence-based HIV services for key populations implemented	<u>UNHCR</u> , UNICEF, UNDP, UNFPA, UNODC, ILO, UNESCO, WHO, World Bank
4.2	Comprehensive package of harm reduction services established for people who inject drugs	UNODC, WHO, World Bank
5.1	Structural and social change interventions to transform unequal gender norms and systemic barriers defined and implemented	UNICEF, UNDP, UNFPA, UNODC, UN Women, ILO, WHO
5.2	Strategic actions for women and girls included and resourced in AIDS responses	UNICEF, UNDP, UNFPA, UN Women, WHO, World Bank
5.3	Actions to address and prevent all forms of gender-based violence implemented	UNHCR, UNICEF, UNDP, UNFPA, UNODC, UN Women, UNESCO, WHO
6.1	HIV-related legal and policy reforms catalysed and supported	UNHCR, UNDP, UNFPA, UNODC, ILO
6.2	National capacity to promote legal literacy, access to justice and enforcement of rights expanded	UNDP, UNFPA, UNODC, UN Women, UNESCO
6.3	Constituencies mobilized to eliminate HIV-related stigma and discrimination in health care	UNDP, UNFPA, WHO
7.1	AIDS response sustainability and transitions strengthened	UNDP, World Bank
7.2	Efficiency and effectiveness of national AIDS responses improved	World Bank
7.3	Technological, service delivery and mHealth innovations fostered	UNICEF, WFP, UNFPA, WHO, World Bank
8.1	Decentralization and integration of HIV related services strengthened	UNICEF, WFP, UNDP, UNFPA, UNODC, UNESCO, WHO, World Bank
8.2	HIV sensitive social protection and social protection programmes for vulnerable populations, including orphans and vulnerable children strengthened	UNICEF, WFP, UNDP, ILO, World Bank
S.1	Leadership, advocacy and communication to fast track the AIDS response	UNAIDS Secretariat
S.2	Effective and inclusive partnerships for impact and sustainability	UNAIDS Secretariat
S.3	Strategic information for an evidence informed response and global political agenda	UNAIDS Secretariat
S.4	Coordination, coherence and convening	UNAIDS Secretariat
S.5	Mutual accountability	UNAIDS Secretariat