

# ANNUAL REPORT ON EVALUATION

## Independent Evaluation Office

**Additional documents for this item:** Independent evaluation of the UN system response to AIDS in 2016–2019 (UNAIDS/PCB (47)/20.32), Annexes to the Independent evaluation of the UN system response (UNAIDS/PCB (47)/20.33), and the management response to the independent evaluation of the UN system response to AIDS in 2016–2019 (UNAIDS/PCB (47)/20.34).

**Action required at this meeting—the Programme Coordinating Board is invited to:**

See draft decision points in paragraph 79 below:

*recall* decisions 6.6 of the 44th session and decision 11 of the 45th session of the Programme Coordinating Board approving UNAIDS Evaluation Policy and 2020–2021 Evaluation Plan;

*welcome* progress in the implementation of the Evaluation Policy and Evaluation Plan and look forward to the next annual report on evaluation to be presented to the Programme Coordinating Board;

*request* the Executive Director to ensure that the evaluation function remains adequately resourced and staffed in accordance with the Evaluation Policy.

**Cost implications for the implementation of the decisions:** none

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## Executive Summary

1. At its 45th meeting in December 2019, the Joint UN Programme on HIV/AIDS (UNAIDS) Programme Coordinating Board approved the UNAIDS 2020–2021 Evaluation Plan and requested annual reporting on implementation by the UNAIDS Evaluation Office (Decision Point 11). This report presents progress in implementing the Evaluation Plan, in accordance with the UNAIDS Evaluation Policy, which was approved by the PCB at its 44th meeting in June 2019 (Decision Point 6.6).
2. The report describes several evaluations of the Joint Programme, as well as Secretariat-specific evaluations carried out in 2020 and related management responses.
  - *An independent evaluation of the UN system response to AIDS*, a joint evaluation of the role and contributions of UNAIDS towards the achievement of the goals and targets in the UNAIDS 2016–2021 Strategy and the Unified Budget, Results and Accountability Framework.
  - *An evaluation of the collaboration between UNAIDS Secretariat and the US Centres for Disease Control* to support health systems, civil society and other stakeholders to collect and analyse data on the HIV epidemic and response, and to use those data to improve HIV programmes.
  - *An evaluation of the UNAIDS Secretariat Technical Support Mechanism* to take stock of its performance in delivering rapid, high-quality technical support and to identify operational streamlining opportunities to increase the amount of technical support without compromising quality or results.
  - *An evaluation of UNAIDS Secretariat situation rooms* to assess the support provided to countries in collating, analysing, visualizing and using data obtained from different sources.
  - *A review of the Fast-Track cities project* to take stock of progress and challenges in responding to HIV in 15 Fast-Track cities to inform forward-looking planning of activities during the remaining period of the project.
  - *Evaluations of the work of the Joint Programme in Mozambique and Viet Nam* to assess the contributions and role of the UN system in the HIV response as a basis for recommendations for future actions of the Joint Programme as part of new UN Sustainable Development Cooperation Frameworks.
3. Additionally, the report presents the efforts of the UNAIDS Evaluation Office to strengthen the independence, credibility and utility of evaluations, drawing on the expertise of the Cosponsor Evaluation Group, the UN Evaluation Group and the Expert Advisory Committee, as well as ongoing efforts to enhance evaluation capacity, quality and communication about evaluation.
4. The report provides an overview of the budget implementation in the first year of the biennium, the impact of the COVID-19 pandemic on evaluation, and measures taken to mitigate its impact. It also describes evaluations and other activities scheduled for 2021.
5. In order to maintain the momentum on evaluation and further enhance the role of evaluation in organizational learning and decision-making, the Programme Coordinating Board is asked to ensure that the evaluation function remains adequately resourced and staffed in accordance with UNAIDS Evaluation Policy.

## Introduction

6. At its 45th meeting in December 2019 the UNAIDS Programme Coordinating Board (PCB) approved the UNAIDS 2020–2021 Evaluation Plan and requested annual reporting on implementation by the UNAIDS Evaluation Office (Decision Point 11).<sup>1</sup>
7. The Evaluation Plan is based on UNAIDS Evaluation Policy, which was approved by the PCB at its 44th meeting in June 2019. This formalized the establishment of the UNAIDS Evaluation Office as a structurally and functionally independent unit of the UNAIDS Secretariat, which is positioned independently from management functions.<sup>2</sup>
8. The 2020–2021 Evaluation Plan was developed drawing on input from the UNAIDS Secretariat, Cosponsors, and key stakeholders. A draft of the Evaluation Plan was shared with the Directors of Evaluation of UNAIDS Cosponsors for review and further prioritization. The draft plan was then reviewed by UNAIDS Evaluation Expert Advisory Committee before it was presented for approval to the 45th session of the PCB in December 2019.
9. In developing the Evaluation Plan, several issues were considered when identifying and agreeing on evaluations to be included, such as:
  - strategic significance of the topic, levels of investment, potential risks, and need for evidence for decision-making;
  - importance of the knowledge gap to be filled, potential for staff or institutional learning, innovation, replication and scaling-up; and
  - organizational requirements and feasibility of implementing the evaluation.
10. The Evaluation Plan has two main sections: *Joint Programme evaluations*, which are system-wide or joint evaluations undertaken in collaboration with the Cosponsors, and *UNAIDS Secretariat-specific evaluations*. The UNAIDS Evaluation Office is responsible for the implementation and quality of all evaluations and for ensuring a participatory and consultative process is maintained through all phases of an evaluation. Evaluations are primarily carried out by external consultants.
11. Concerned managers are required to prepare a management response within three months following the completion of an evaluation and are responsible for the implementation of the recommendations. Management responses to Joint Programme evaluations are prepared jointly by UNAIDS Cosponsors and Secretariat. The UNAIDS Evaluation Office facilitates the development and tracking of management responses and monitors follow up to recommendations.
12. All evaluation reports and management responses are published on the UNAIDS and the UN Evaluation Group websites. Evaluations of strategic significance are presented to the PCB and the PCB is expected to draw on the findings, conclusions, and recommendations of evaluations, as well as on evaluation syntheses for the purposes of governing the organization. As a rule, evaluation reports are not presented to the PCB for approval.

## Evaluations carried out in 2020

13. Table 1 provides a summary of the Joint Programme and Secretariat evaluations carried out in 2020 and associated budgets. Evaluations of the work of the Joint Programme at country level are carried out as part of evaluations of UN Development Assistance Frameworks to inform new UN Sustainable Development Cooperation Frameworks. Planned evaluations of the work of UNAIDS Secretariat at regional, intercountry and country level were deferred due to the COVID-19 pandemic.

**Table 1: Evaluations carried out in 2020**

Topic	Budget (USD)
<b>Joint Programme evaluations</b>	
Evaluation of the UN system response to AIDS in 2016–2019*	234 000
Evaluation of the Joint Programme's work on violence against women and girls**	165 000
Evaluations of the work of the Joint Programme at country level	34 000
<b>Total Joint Programme evaluations</b>	<b>433 000</b>
<b>UNAIDS Secretariat evaluations</b>	
Evaluation of UNAIDS Secretariat cooperation with the US CDC	68 000
Evaluation of UNAIDS Secretariat technical support mechanism*	17 000
Evaluation of UNAIDS Secretariat support to situation rooms	176 000
Review of UNAIDS Secretariat support to fast-track the HIV response in cities	31 000
Evaluations of UNAIDS Secretariat country, intercountry and regional work***	72 000
<b>Total Secretariat evaluations</b>	<b>364 000</b>
<b>TOTAL</b>	<b>797 000</b>

\* initiated in 2019—budgets refer to 2020 components.

\*\* initiated in 2020—budget refers to 2020; to be completed in 2021.

\*\*\* initiation postponed until 2021 due to COVID-19; no expenditures incurred.

14. Evaluations are primarily funded from UNAIDS Secretariat core resources. However, noncore resources are used to fund evaluations of programmes that are funded with noncore resources. Cosponsor contributions are primarily in-kind, in the form of technical expertise and participation in management and reference groups of evaluations. In 2020, financial contributions from Cosponsors as cost-sharing towards evaluations include a total of USD 55 000 from the UN Population Fund (UNFPA) and the International Labour Organization (ILO) towards the joint evaluation of the work of the Joint Programme on preventing and responding to violence against women and girls. In 2019, UNFPA and the UN Children's Fund (UNICEF) contributed USD 70 000 to the independent evaluation of the UN system response to HIV in 2016–2019.
15. The section below and Table 2 provide an overview of the implementation status of each evaluation in the 2020–2021 Evaluation Plan, as well as the status of relevant management responses.

### **Evaluation of the UN system response to AIDS in 2016–2019**

16. The design of the evaluation of the UN system response to HIV in 2016–2019 actively involved all stakeholders. It included country and regional consultations, as well as a global multi-stakeholder consultation and input from the Cosponsor Evaluation Group. A reference group was established to ensure participation and ownership by the UNAIDS Secretariat and Cosponsors, as well as the PCB NGO delegation. A management group consisting of senior evaluation advisers of the World Health Organization (WHO), UNFPA, UNICEF and the UN Development Programme (UNDP) provided oversight and quality assurance of the evaluation. A competitive bidding process was conducted to select a consultancy company to carry out the evaluation.
17. The evaluation was initially envisaged as a mid-term evaluation of the 2016–2021 Unified Budget, Results and Accountability Framework (UBRAF) and evolved during the inception phase into a comprehensive and forward-looking evaluation of the UN system response to AIDS in 2016–2019 to inform the development of the next UNAIDS Strategy, as well as the successor to the UBRAF. The evaluation included a review of more than 600 documents, over 460 key informant interviews, 12 country visits and more than 1 100 web survey responses from stakeholders operating at the country-,

regional- and global levels. The evaluation report is presented to the Board in document UNAIDS/PCB (47)/20.30, and the management response to the evaluation is presented in document UNAIDS/PCB (47)/20.31.

18. The evaluation concluded that the structure and design of the UBRAF have been a success in several ways. It is needs-based, inclusive and participatory and it provides a comprehensive rationale for interventions that address gender equality and women's empowerment. But despite demonstrating the potential for UN reform at country level, the UBRAF has proved unable to achieve a consistent division of labour among Cosponsors and Secretariat. In addition, it neither guides the prioritization of actions nor is it an effective tool for allocating resources.
19. In implementing the UBRAF, UNAIDS has been most successful at engaging with and bringing together civil society with other sectors. In contrast, while collaboration across the Joint Programme generally works well at country level, it is under stress at the global level, where Cosponsors are increasingly unable to provide technical skills and leadership. Mobilization of resources and allocation across the programme is recognized to be weak, with poor accountability and falling effectiveness. The contribution of the UN system to country and global change is poorly recognized and insufficiently evaluated.
20. The evaluation notes that the UBRAF has the potential to play a continued useful role as an instrument for the Joint Programme. However, for this to be the case the UBRAF needs to have a fully articulated "theory of change" which is fully aligned with a modified results framework that includes output-level performance indicators which are attributable to the UN system.
21. Despite shortcomings in operationalization and measurement, evidence suggests that several UBRAF milestones for *results* were being met or exceeded in 2019, although with wide variation among countries. The Joint Programme clearly contributes to country-level outcomes, though the relative performances of the Cosponsors and Secretariat cannot be identified. Overall, the Joint Programme contributes to stronger systems and capacities to sustain national and local HIV responses.
22. Looking ahead, the sustainability of the results achieved by the Joint Programme will depend critically on: (a) continued core funding of UNAIDS; (b) continued Cosponsor engagement; and (c) increased alignment with national priorities and associated domestic commitments. In the current environment, none of those factors are guaranteed.
23. The evaluation has provided the Joint Programme with an important opportunity for organizational learning and for a dialogue that will help shape UNAIDS' transformation and discussions on the Joint Programme's future and efforts to end AIDS as part of the broader 2030 Agenda. A Joint Programme steering group was established to lead the development of a management response, and inputs from all levels of the Joint Programme were solicited.
24. The UNAIDS management response outlines the Joint Programme's responses and a proposed action plan in relation to each of the eight core recommendations and related sub-recommendations, with timelines and the designation of responsibilities. The steering group ensured that all the recommendations were reviewed in a broad perspective, considering the expertise and experience across the entire Joint Programme. An interim management response was provided with the evaluation report as a background document for a multi-stakeholder consultation in September 2020 on the next UNAIDS Strategy.

### **Evaluation of UNAIDS Secretariat collaboration with the US CDC**

25. In 2016 UNAIDS and the US Centers for Disease Control and Prevention (CDC) signed a five-year (2016–2021) cooperative agreement on strengthening public health capacity and strategic information systems. The agreement leverages the comparative strengths of UNAIDS and CDC at country and global levels. It covers nine Fast-Track countries to support health systems, civil society and other stakeholders to collect and analyse granular data on the HIV epidemic and response, and to use those data to identify gaps and invest resources in the most effective HIV strategies, with a focus on the populations and locations in greatest need.
26. The UNAIDS Evaluation Office, in collaboration with the Strategic Information Department, commissioned an external evaluation which was carried out by a team of independent experts. A reference group of the evaluation which comprised CDC/Division of Global HIV and TB and UNAIDS staff provided advice and guidance on the scope and content of the evaluation, as well as reviews, technical inputs and quality assurance throughout the evaluation process.
27. The evaluation focused on UNAIDS' strategic information work within the scope of the cooperative agreement and in the context of broader country HIV strategic information work. The evaluation was designed with accountability for results and organizational learning in mind. Evaluation methods were mainly qualitative, including document reviews and synthesis and in-depth interviews with close to 100 key informants (individually or in a group), including but not limited to relevant US CDC, UNAIDS and national counterpart staff. Country visits to Côte d'Ivoire, India and Zambia, allowed for on-site observation and interviews with a wide range of stakeholders, including from civil society. An online survey solicited written submissions from non-case study country stakeholders.
28. Open and iterative discussions with stakeholders on findings allowed evaluators to develop pertinent and useful recommendations. The main limitation of the evaluation is that the COVID-19 pandemic made it difficult to interview some stakeholders at country level. Therefore, perspectives from government stakeholders are limited to five countries: the three case study countries (Côte d'Ivoire, India and Zambia) as well as the Democratic Republic of the Congo and Namibia (from survey responses). Due to limited triangulation with national counterparts' views, evidence corroborating the evaluation's assessment of responsiveness and sustainability is less robust.
29. The evaluation found that several important achievements put the cooperative agreement well on-track towards short- and medium-term outcomes. However, although various country activities are generally responsive and effective, there is limited coherence and synergy across the broader cooperative agreement portfolio. Support to countries for generating and using HIV subnational estimates is the largest and arguably the most effective component of the cooperative agreement, yet there is no overarching and specific capacity building strategy.
30. An important outcome of the UNAIDS and US CDC collaboration is the strengthened national level partnerships on strategic information. The cooperative agreement has assisted several useful activities in support of HIV services for key populations. But it made limited progress in strengthening HIV estimates for key populations or including community-based services into routine programme monitoring. The cooperative agreement supports several countries to strengthen case-based surveillance and introduce unique identifiers, but there is limited involvement of people living with HIV and key populations in those processes.



31. Overall, the cooperative agreement implementation is efficient, recognizing that the UNAIDS and US CDC collaboration involves various countries in a staggered fashion and requires alignment of multiple stakeholders, priorities and administrative systems. Delays in implementation are partly due to the need to engage multiple national counterparts and stakeholders. Given the funding levels associated with the cooperative agreement, the administrative burden is relatively high for CDC country teams, as well as for UNAIDS Country Offices and Headquarters. Important lessons are learnt at country level, but there is limited opportunity for cross-country learning in the cooperative agreement design.
32. Based on the conclusions, the evaluation provides actionable recommendations to UNAIDS and CDC for improving the implementation of the next phases of cooperation and future planning. The Strategic Information Department, in collaboration with CDC and in consultation with regions and countries, led the development of a management response to the recommendations. Planning for year five of the current Cooperative Agreement and drafting of the proposed Notice of Funding Opportunity for the next Agreement are well under way. Therefore, introducing the recommendations to these processes was key to achieve prompt follow-up and inclusion of learning. Findings and conclusions will also contribute to UNAIDS' broader work on strategic information at global and country levels, and will benefit HIV stakeholders at the country level, especially those working on information systems.

### **Evaluation of UNAIDS Secretariat Technical Support Mechanism**

33. A new UNAIDS Technical Support Mechanism (TSM) model was introduced in May 2018 to provide technical support and strategic learning to strengthen the HIV response. The UNAIDS Evaluation Office, in collaboration with the Fast-Track Department, commissioned an external evaluation, which was carried out by two independent consultants. The evaluation was intended to assess the performance of the TSM in delivering rapid, high-quality technical support, identify any operational streamlining and improvement options to increase technical support without compromising quality or results, and strengthen its strategic learning component. The evaluation focused on the UNAIDS-Oxford Policy Management (OPM) mechanism, not all UNAIDS technical support.
34. Evaluators analysed organizational documents and tools and triangulated the observations available in documents with 43 key informant interviews from 7 stakeholder groups that interact with the TSM across 3 regions and with an online survey among UNAIDS staff members and consultants who provide technical support. Evaluation questions were framed by the 5 key criteria of efficiency, relevance, coherence, effectiveness and collaboration. The process of document review, interviews and group discussions was efficient in generating a balanced and well-informed understanding of the issues.
35. The evaluation concluded that the TSM is providing a valued service and represents value for money. The TSM delivered over 300 assignments across over 50 countries within 20 months, despite the challenge of developing a new centralized technical support model involving a partnership with a new provider (OPM). The regions appear to have different strengths and appear to be functioning well overall. The TSM is widely regarded as necessary, useful and effective at meeting important technical support needs.
36. Although the partnership model is conceptually strong and has enabled flexibility and responsiveness, it needs greater clarity and definition to achieve the added value anticipated. There is strong engagement and investment of efforts from everyone

working with the TSM and a deep desire to do things better. However, there are many opportunities to improve "value for money" further ahead of new and additional volumes of funding. There is a clear rationale for extending the OPM contract to ensure that institutional knowledge, experience and relationships are not lost.

37. The recommendations leverage existing systems and resources and require additional investments in certain areas. For instance, no satisfactory systematic knowledge management and strategic learning process is currently in place. Strengthening the monitoring, evaluation and learning system will ensure that the TSM provides more meaningful data to fulfil expectations and learning to benefit the wider HIV response sector. Processes and collaboration mechanisms have evolved somewhat organically over the past 20 months. However, there is now a call for clarity and stability, as well as for strengthening the pool of consultants and for improved communication around TSM functions and process steps.
38. The UNAIDS Secretariat Fast-Track Implementation Department and OPM welcomed the findings of the evaluation. The evaluation provided valuable insights, reached sound conclusions and made useful recommendations to improve the TSM's performance. In addition, thanks to a participatory approach to the evaluation, the senior contract management teams of UNAIDS and OPM have consulted extensively on the findings, and the operational TSM teams of UNAIDS and OPM have already initiated operational and organizational changes, based on consultation and collaborative work planning. A six-month management response was finalized, with agreed actions, timelines and responsibilities for each of the main and the sub-recommendations.

#### **Evaluation of UNAIDS Secretariat support to situation rooms**

39. Improving the collection and use of strategic information is essential for achieving the efficiencies required to Fast-Track the HIV response. The UNAIDS Country Health Situation Room programme is aimed at providing the means, expertise and technology solutions so countries can harness different health data sources at national level to articulate their status and impact. The software platform provides interactive and dynamic visualizations which allow for near-real-time monitoring of disaggregated health data that is population- and location-specific and that is age- and sex-disaggregated. UNAIDS engages with country and regional stakeholders (decision makers and programme managers) to promote national ownership, utilization of data and the capacity for remedial action.
40. After five years of implementation, UNAIDS commissioned an evaluation to assess the initiative and gather evidence to make informed decisions for the future. The evaluation covers global, regional, national and subnational levels across the nine countries in which the health situation rooms have been established, with an enhanced focus on Kenya, Malawi, Uganda and Zimbabwe. The evaluation used a mixed-methods approach of qualitative and quantitative data. It addressed gender and key populations as a central tenet of the evaluation focus in terms of the data that are being processed and used for decision making. Although the evaluation took place at the onset of COVID-19 pandemic, it was carried out without major delays.

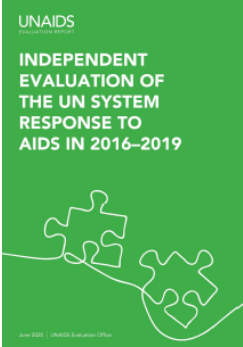
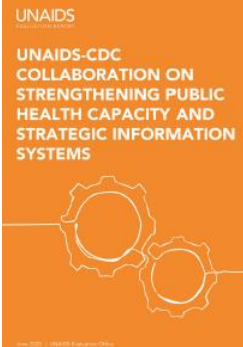
### **Review of UNAIDS Secretariat support to fast-track the HIV response in cities**

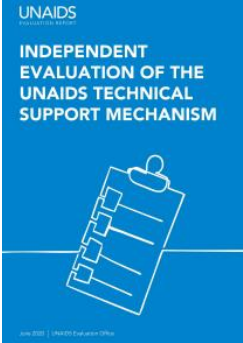
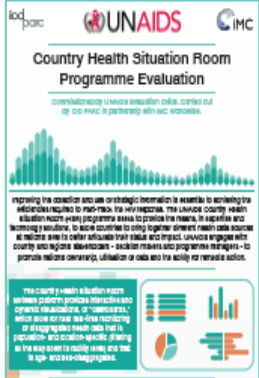
41. The Fast-Track Cities Initiative recognizes the critical role that cities play in the HIV response and ending AIDS by 2030. The Joint UNAIDS-International Association of Providers of AIDS Care (IAPAC) Fast-Track Cities project is supported by the US government (PEPFAR/USAID). It aims to provide essential technical support to 15 high-burden priority cities to accelerate their HIV responses towards achieving key Fast-Track targets and delivering on the commitments of the Paris Declaration on Fast-Track cities ending AIDS. Together those cities are home to almost three million people living with HIV.
42. Given that the project had been extended to January 2022 and following discussions with stakeholders, it was decided to conduct a rapid review, in collaboration with the UNAIDS Fast-Track Implementation Department and IAPAC, rather than a full-fledged evaluation as originally planned. The aims of the review were: (a) to take stock of progress and challenges overall and by project objective in each of the 15 cities; and (b) to provide forward-looking recommendations to inform the planning of activities within the remaining period of the project. In the context of newly emerging challenges including COVID-19 and its possible aftermath, the review also assessed the strategies that have been put in place by UNAIDS and IAPAC to mitigate the impact of COVID-19 on project implementation to inform additional activities and/or necessary adjustments to activities.
43. Since the review was primarily designed for forward planning and to ensure that work plans in cities are tailored to current needs and situations, the review took the form of a rapid assessment. An external independent evaluation is still being considered after the end of the project and will partly depend on the scope and outlook for the project's continuation.

### **Evaluations of the work of the Joint Programme at country level**

44. Two country evaluations were carried out in 2020 in close collaboration with UNAIDS Country Offices and Joint UN Teams on AIDS: evaluations of the UN Joint Programme on HIV in Mozambique and in Viet Nam. These were also intended as basis for the development of standardized tools and methods to be used in other countries in the future. The evaluations assessed the contributions and role of the UN system in the HIV response at the country level. They also analysed whether UNAIDS Cosponsors and Secretariat are providing the right things in the right ways and are producing the right results in countries, thereby providing actionable recommendations to the UNAIDS Secretariat and Cosponsors for planning purposes.
45. The evaluations were designed to complement evaluations of the UN Development Assistance Framework, inform Country Common Analyses and feed into the development of new UN Sustainable Development Cooperation Frameworks in the Mozambique and Viet Nam. Since UN Development Assistance Framework evaluations cover the work of all UN agencies across all development areas, it was not possible to perform a detailed assessment of HIV-related issues without commissioning a specific evaluation. The evaluations assessed the relevance, efficiency, effectiveness and sustainability of the work of the Joint Programme in order to inform future planning and the development of the new UN Cooperation Frameworks. The evaluations of the Joint Programme at country level also provided analyses that will benefit key national partners by informing and optimizing UN support to the national strategies aiming at ending AIDS as a public health threat by 2030.

Table 2: Status of evaluations carried out in 2020

Evaluation	Status	Management response	Use of evaluation
 <p>UNAIDS INDEPENDENT EVALUATION OF THE UN SYSTEM RESPONSE TO AIDS IN 2016-2019</p>	Completed (available on UNAIDS Evaluation Office webpage)	Available	Strong—Feeding into development of next UNAIDS Strategy and UBRAF, informing the discussion on role and functions of the Joint Programme
<p>Evaluation of the Joint Programme's work to prevent and respond to violence against women and girls <i>Inception Report</i></p>	On-track—Evaluation to be completed by June 2021	Expected by September 2021	—
<p>Evaluations of the work of the Joint Programme at country level <i>Mozambique</i> <i>Viet Nam</i></p>	On-track—Both Mozambique and Viet Nam evaluations completed (available on UNAIDS Evaluation Office webpage by end February)	Expected February 2021—As part of the development of the UN Sustainable Development Cooperation Framework and positioning of the UN response to HIV at country level	Strong—Feeding into Sustainable Development Cooperation Frameworks at country level
 <p>UNAIDS UNAIDS-CDC COLLABORATION ON STRENGTHENING PUBLIC HEALTH CAPACITY AND STRATEGIC INFORMATION SYSTEMS</p>	Completed (available on UNAIDS Evaluation Office webpage)	Available	Strong—Feeding into next planning phase for the Cooperative Agreement with US CDC

	Completed (available on UNAIDS Evaluation Office webpage)	Available	Strong—Feeding into next planning phase for UNAIDS technical support
	On-track—Evaluation completed (available on UNAIDS Evaluation Office webpage by March 2021)	Expected by March 2021	Strong—Informing UNAIDS work on strategic information and shaping the next phases of the health situation rooms in countries
<p>Review of UNAIDS Secretariat support to Fast-Track the HIV response in cities</p>	On-track – Scope changed to internal review completed (available on UNAIDS transparency portal by February)	Expected by February 2021	Strong—Feeding into 2021–2022 project planning and workplans in cities
<p>Evaluations of UNAIDS Secretariat country, inter-country and regional work</p>	Postponed due to COVID-19	To be determined	To be determined

## Other activities carried out in 2020

### Interagency collaboration

46. UNAIDS Cosponsor Evaluation Group brings together representatives of the evaluation offices of UNAIDS Cosponsors. This enables leveraging of Cosponsor capacities and resources on evaluation, as well as knowledge and experience sharing. Dialogue with the Cosponsor Evaluation Group was important to determine the feasibility and enhance the utility of the independent evaluations of the UN system response to HIV in 2016–2019 and the work of the Joint Programme on preventing and responding to violence against women and girls. As indicated earlier, the evaluation offices of the Cosponsors also allocated staff time and financial resources for the joint evaluations. The opportunities for exploring evaluation methods and approaches were very useful.
47. Throughout the year the UNAIDS Evaluation Office contributed to increased coherence and collaboration on evaluation across the UN system. The Office engaged with other UN agencies through the UN Evaluation Group (UNEG) and contributed to the development and implementation of the UNEG workplan. The Office participated actively in the work of UNEG and interest groups on the evaluation of policy support as well as joint and system-wide evaluations. The Office contributed to discussions on the repositioning of the UN Development System and advocated for a strong role for evaluation and the development of a system-wide evaluation policy. To increase accessibility of evaluations, the Evaluation Office made UNAIDS evaluations available on the UNEG website.
48. The Evaluation Office engaged with other international organizations in joint evaluations in areas of strategic importance. In 2019, the Global Action Plan for Healthy Lives and Well-being for All (SDG-3 GAP) was agreed to by 12 global organizations to advance the targets of the health-related Sustainable Development Goals (SDGs). A joint assessment of the Global Action Plan was conducted in 2020 to determine the evaluability of the Plan and to suggest ways to improve it, foster early learning and help improve coordination, collaboration and overall management toward results in the partnership. UNAIDS was an active member of the steering group of the assessment, with WHO acting as lead agency. The broad-based nature of the collaboration bodes well for future collaboration. The 12 Principals, including the UNAIDS Executive Director, met to discuss the report and endorsed a draft joint management response.

### Expert Advisory Committee

49. In approving the UNAIDS Evaluation Policy in June 2019, the PCB approved the establishment of an Expert Advisory Committee on evaluation. The Committee was set up as an independent, external body to provide advice and guidance on evaluation. According to the Committee's terms of reference, it should comprise up to 7 members, to be nominated by Member States (5), PCB NGO delegation (1) and the Cosponsors (1). The Committee was formally constituted in October 2019 through an intersessional decision of the PCB. The structure and composition of the Committee are presented in Annex 1, below.
50. During a virtual meeting on 16–17 March 2020 (originally planned as a face-to-face retreat), discussions of the Expert Advisory Committee focused on how to strengthen the utility, credibility and independence of evaluations in UNAIDS. It was agreed that the Committee has an important role in providing guidance and advice on evaluation in UNAIDS and ensuring the independence of the evaluation function.

51. It was suggested that the Committee should play a strategic role and ways to engage with UNAIDS Board, Executive Director and Senior Management would be explored further. It was also suggested that strategic evaluations could benefit from a review by members of the Committee before being presented to the PCB (the independent evaluation of the UN system response to AIDS in 2016–2019 was mentioned as an example in that regard).
52. Accordingly, a qualitative assessment of the independent evaluation of the UN system response to AIDS in 2016–2019 was carried out by the Expert Advisory Committee. The criteria used for the assessment were based on the mandate of the Committee, which include strengthening evaluation in UNAIDS in terms of independence, credibility and utility. In addition, the Committee assessed the extent to which the evaluation promotes other key principles of evaluation in UNAIDS, namely: human rights and gender equality, participation, and innovation. A summary of the assessment and recommendations of the Committee is included in Annex 2, below.

### **Capacity development**

53. As per UNAIDS Evaluation Policy, in addition to ensuring the quality of evaluations throughout the entire evaluation cycle, the UNAIDS Evaluation Office carries out a quality assessment that takes place after an evaluation is completed (ex post). The Office developed an evaluation assessment checklist, which the UNAIDS Expert Advisory Committee on Evaluation reviewed. The checklist is based on standard UNEG checklists and quality criteria which, if met, signal confidence in an evaluation's quality. The checklist includes criteria for gender equality and empowerment of women that are aligned with the revised UN System-wide Action Plan (UN-SWAP) on Gender Equality and the Empowerment of Women Evaluation Performance Indicator. To ensure independence, external assessors were recruited to review and score the evaluations carried out in 2020, with the aim of improving overall quality of evaluations overtime. These assessments will become routine practice for all future evaluations.
54. As part of efforts to strengthen evaluation culture and capacity, the Evaluation Office promoted and supported reviews and assessments by different UNAIDS Secretariat units. This included contributing to the development of terms of reference and identification of suitable consultants, reviewing methods and reports, and advising on follow up to recommendations. Long-term agreements were established with individual consultants, consortia, companies and institutions. These were identified and selected through a request for proposals to expand the pool, diversity and speed of recruitment of consultants for the Evaluation Office, but also for assessments and reviews initiated by other departments and offices of UNAIDS Secretariat.
55. For improved communication about evaluation, a separate page on evaluation was created on the UNAIDS webpage. That page is regularly updated with evaluation reports and management responses, as well as with guidance and reference documents. The Evaluation Office provides briefings on key evaluations to Member States and other stakeholders, as required. It also organizes webinars for regional and Country Offices to share findings of evaluations, in collaboration with relevant programme units. With the increasing volume of evaluation work, the Office is aiming at identifying and highlighting recurring, systemic or crosscutting issues that may be relevant to the UNAIDS Secretariat and the Joint Programme.

### **Impact of COVID-19**

56. In response to the uncertainty surrounding the COVID-19 pandemic, the UNAIDS Evaluation Office adjusted evaluation approaches and methods so it could perform the evaluations included in the Evaluation Plan. Particular attention was paid to minimize the potential impact of evaluations on national health systems, health workers and staff of Ministries of Health, national AIDS councils and national programmes. Taking COVID-19 into account also required adapting to response measures, restrictions on travel and physical contact to ensure the health and wellbeing of staff and external contractual partners.
57. All evaluations that were expected to be finalized in 2020 were completed with minimal delays. In addition, one evaluation that was not included in the original plan (of the UNAIDS TSM) was completed. Support and guidance were provided to develop management responses to the evaluations once those were completed.
58. The most direct impact of the COVID-19 pandemic was on evaluations of UNAIDS country, intercountry and regional work, which could not be initiated. Activities to strengthen the evaluation function, culture and capacity were also hampered. This is most clearly illustrated through the limited opportunities the Expert Advisory Committee had to take forward its agenda. The planned face-to-face retreat was held online and was shortened due to the fact some members were already fully engaged in the COVID-19 responses in their respective countries at the time. Engagement in the work of the UN Evaluation Group, however, was largely unaffected.
59. For all evaluations that were initiated since the COVID-19 outbreak, an iterative approach was adopted to regularly identify and confirm the feasibility and risks of each subsequent stage of an evaluation. In practice, most activities were conducted remotely, using national consultants and virtual communication technologies. In-person meetings and interviews were transposed to virtual interactions. Site visits were conducted virtually and/or with the support of national consultants. Feedback presentations, analysis workshops and reporting were converted to online sessions, with additional materials prepared and shared in advance. The evaluations also explored how the UNAIDS Secretariat and Joint Programme were supporting countries' COVID-19 responses and their attempts to mitigate the pandemic's impact on the HIV response.

### **Budget implementation**

60. Approximately USD 2 million per year has been budgeted for the implementation of UNAIDS Evaluation Plan in 2020–2021. This is based on the UNAIDS Evaluation Policy, approved by the PCB in June 2019, which established that 1% of annual expenditures of resources mobilized by UNAIDS Secretariat should be allocated to evaluation.
61. Staff costs of the Evaluation Office—envisaged as a unit with three staff—represent approximately 40% of the budget for evaluation. Evaluations identified during the development of the Evaluation Plan represent another 40% of the budget. Activities to strengthen evaluation culture and capacity, stakeholder engagement, professionalization of evaluation, participation in the work of the UN Evaluation Group and operating costs represent approximately 10% of the total budget. At the time of the development of the Evaluation Plan, 10% was kept as a reserve for evaluations that could not be envisaged at the time and for other possible emerging needs.



**Table 3: Projected expenditures against the budget in 2020**

Main categories	Budget (USD)	Expenditures (USD)*	Implementation
Staff costs	782 000	643 559	82%
Evaluations	797 000	693 896	87%
Activities**	397 000	6 645	2%
<b>Total</b>	<b>1 976 000</b>	<b>1 344 100</b>	<b>68%</b>

\* Includes actual expenses and encumbrances (firm commitments) as of 15 November 2020.

\*\* Includes strengthening of evaluation culture and funding for emerging needs, such as evaluations that were not planned and unanticipated costs.

62. As shown in Table 3, staff costs have been somewhat lower than projected. This is because the Evaluation Office has been functioning with two professional staff against three budgeted staff positions. Expenditures against the budget for evaluations are in line with expectations. The unspent balance reflects country, intercountry and regional evaluations that could not be conducted. Funds kept in reserve for possible emerging needs were not used during the year. This, together with the postponement of activities for strengthening the evaluation culture, capacity and professionalization (due to COVID-19) explain the low implementation rate against the budget for activities.

### Evaluations planned in 2021

#### Joint Programme evaluations

63. Evaluation of the work of the Joint Programme on preventing and responding to violence against women and girls. This evaluation is a major opportunity to learn, improve implementation, and strengthen the accountability of the UNAIDS Joint Programme in the context of achieving the SDGs.
64. This evaluation is focused on the country level. Learning will extend beyond the Joint Programme, since ending gender-based violence is a system-wide mandated area of work for all UN entities. Communities of women and girls living with and most affected by HIV, in all their diversity, report that gender-based violence is a common violation of their rights. Reducing the violence is thus a major priority for effective HIV responses. Two evaluation groups were created and they are actively engaged in the evaluation: a management group (composed of senior evaluation officers from UNFPA, UNESCO, UNHCR and ILO), and a reference group (composed of Cosponsors' Global AIDS Coordinators and gender-based violence experts, UNAIDS Secretariat staff and the UNAIDS PCB Civil Society Delegation). An independent team of consultants was selected through a competitive process, which included a review of the 26 high-quality proposals.
65. Evaluation of the Joint Programme's work on key populations. Over half of new HIV infections globally are among key populations and their sexual partners. Despite the Agenda 2030 focus on people left behind, key populations still lack adequate access to HIV services. A joint evaluation of the Joint Programme's work in relation to key populations is part of broader efforts to appraise the significance, worth and quality of the Joint Programme's work in the context of broader country responses to HIV and key populations.
66. While the Joint Programme has contributed to community engagement, advocacy and addressing barriers for key populations' access to services, there has been limited support to strengthen systems for service delivery to key populations at scale. The

evaluation will help ascertain whether UN agencies at country, regional and global levels are adequately equipped in terms of human and financial resources to provide the needed support. The evaluation can also provide insights on what drives effective UN support to scale up of programmes

67. Evaluation of the Joint Programme's role on efficiency and sustainability. In 2018 the UNAIDS PCB endorsed the Joint Programme framework for sustainability of the HIV response. Next year (2021) is an opportune point for a forward-looking assessment, given that the new HIV response targets and resource needs will be adopted in 2021. The evaluation will examine efficiency, integration and innovation. Equitable domestic spending for the AIDS response is highly dependable on political choices. The Joint Programme is well-positioned to influence choices, but it needs a clear assessment of its own comparative advantage and potential for action. The evaluation should help examine the implications for a sustainable response. While efficiency and sustainability are recognized as critical, there is still a lack evidence in terms of increasing efficiency of delivery, equitable integration of services and financing into government systems. Learning from the evaluation will benefit scale up of future country-tailored solutions.
68. Evaluations of the work of the Joint Programme at the country level. Based on the learning from the evaluations in Mozambique and Viet Nam carried out in 2020, the Evaluation Office will review and revise evaluation tools and methods to promote three or four other country Joint Programme evaluations that can feed into larger UN Development Cooperation Framework evaluations and help the strategic positioning of HIV and the Joint Programme in new UN Sustainable Development Cooperation Frameworks. In countries where evaluability assessments of UN Sustainable Development Cooperation Frameworks will be carried out, UNAIDS will also participate in the assessments.

### **UNAIDS Secretariat evaluations**

69. Evaluation of the UNAIDS- Global Fund collaboration. The Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund) is a key partner in the HIV response. The global community is unlikely to reach Fast-Track targets and end AIDS without Global Fund investments. UNAIDS is a key partner in ensuring that Global Fund resources are used effectively at country level. The evaluation will cover the implementation of the Global Fund and UNAIDS 2019–2022 Memorandum of Understanding (MOU) and assess progress made and identify opportunities to strengthen cooperation and collaboration further.
70. The evaluation is expected to draw on but not be limited to the current MOU between UNAIDS and the Global Fund. The MOU identifies specific areas of collaboration and includes a result matrix that should help to measure progress. The result matrix and indicators on the MOU (in the annexes) contribute to evaluability and provide a baseline for the evaluation. The evaluation is expected to be managed jointly with the Global Fund, which should also contribute to stronger collaboration on evaluation between the two organizations.
71. Evaluation of the UNAIDS Secretariat Gender Action Plan 2018–2023. Gender equality is at the core of the 2030 Agenda. It is both a goal and a critical enabler for progress across that entire agenda. Monitoring activities are ongoing to ensure the evaluability of the Plan: every three months an update on progress and challenges is made available to all UNAIDS staff. The midterm evaluation of the Secretariat Gender Action Plan will assess the progress and trends in key targets and, given the trajectory of change, assess the chances of achieving the targets by 2020. It will also explore whether the Gender Action Plan is relevant to the UNAIDS Secretariat workforce and what needs to be

changed in the remaining period up to 2023. The evaluation should provide an unbiased assessment on whether the investments delivered are on the targets, while working towards "exceeds requirements" under the UN-SWAP Performance Indicator framework on Evaluation, that was endorsed by the Chief Executive Board. The UN-SWAP commitment requires an independent evaluation of an entity's gender action plan to be conducted (every five to eight years).

72. Evaluation of UNAIDS Secretariat's work on advocacy and communication. This evaluation is postponed. To ensure alignment with the new global AIDS Strategy, a new advocacy and communication strategy for UNAIDS Secretariat is now planned for 2021. The evaluation is therefore moved to 2022. The Evaluation Office is currently soliciting suggestions for an alternative evaluation topic to be carried out in 2021, such as the UNAIDS response to COVID-19 or the role of UNAIDS Secretariat in community systems strengthening and monitoring.
73. Regional, intercountry and country evaluations. The Evaluation Office will consult with Country Offices and Regional Support Teams to identify needs for specific evaluations of the country, intercountry or regional work of UNAIDS Secretariat, as well as the form of the support needed, which may vary by country. That will be in addition to the UN Development Assistance Framework evaluations and evaluability assessments of UN Sustainable Development Cooperation Frameworks, described above.

#### Other activities planned for 2021

74. Enhancing evaluation coherence in the United Nations system: UNAIDS Cosponsor Evaluation Group, UN Evaluation Group (UNEG). The Office plans to engage actively with the Cosponsor Evaluation Group in 2021 to ensure sharing of lessons of past joint evaluations and continuous engagement in ongoing ones. In mid-2021, the Group will be mobilized for the development of UNAIDS next biennial Evaluation Plan. UNAIDS will remain an active member of the UNEG and will participate regularly in its meetings of heads of evaluation offices, its various task forces and, in particular, in the working/interest groups on joint and system-wide evaluations, COVID-19 evaluations, and evaluations of policy advocacy.
75. Resourcing of the evaluation function. The UNAIDS Evaluation Office is currently staffed by a director and a senior evaluation adviser, against a plan for three staff. Both Secretariat and Joint Programme evaluations are supported by external expertise, including from a roster of prequalified evaluation experts with whom the Office has established long term agreements in 2020. However, to ensure the full implementation of the Evaluation Plan, including country, inter-country and regional evaluations, the provision of adequate resources and staff remains key.

#### Conclusion

76. Until 2019, an effective and independent evaluation function was a missing piece in UNAIDS' efforts to strengthen accountability, transparency and organizational learning. This was highlighted by UNAIDS Board, as well as in the Multilateral Organisation Performance Assessment and in the United Kingdom Department for International Development (DFID) and other external reviews of UNAIDS. Over the past two years, considerable efforts have been made to establish an independent evaluation function as a structurally and functionally separate unit of UNAIDS Secretariat that reports to the Board. Those efforts have been acknowledged and commended by the United Nations Joint Inspection Unit (JIU/REP/2019/7).<sup>3</sup>

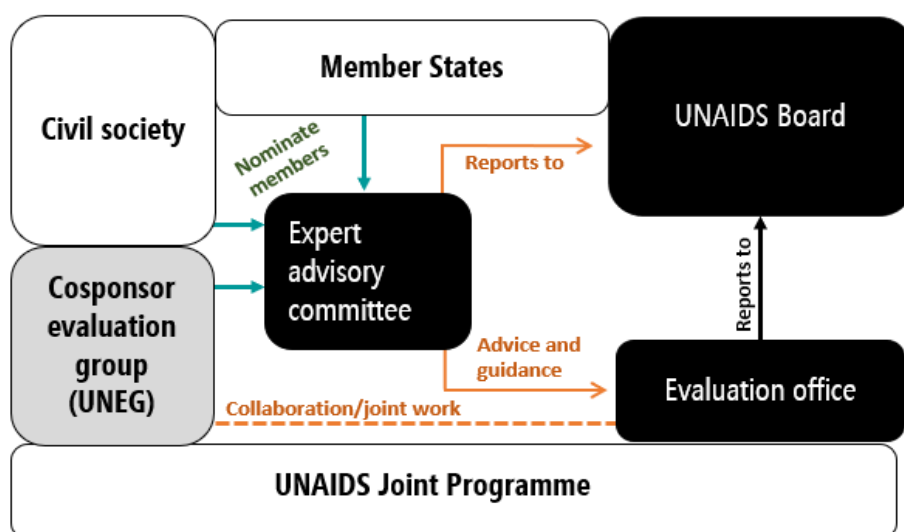
77. In 2020, the institutional architecture of the evaluation function has been put in place (see Annex 1) and the UNAIDS Evaluation Office has designed and carried out several joint and Secretariat-specific evaluations in accordance with the 2020–2021 Evaluation Plan. The Office has also ensured follow-up to the evaluations. More time and effort are required to strengthen evaluation capacities and promote continuous improvement, organizational change and learning through evaluations. The communication and dissemination of evaluation findings, conclusions and recommendations will require additional attention.
78. To maintain the momentum and allow the evaluation function to serve the knowledge management and accountability needs of UNAIDS Secretariat and the Joint Programme, while also contributing to UN system-wide and joint evaluations, the UNAIDS Evaluation Office needs to remain adequately resourced and staffed in accordance with the Evaluation Policy.

### Proposed Decision Points

79. The Programme Coordinating Board is invited to:
- *recall* decisions 6.6 of the 44th session and decision 11 of the 45th session of the Programme Coordinating Board approving UNAIDS Evaluation Policy and 2020–2021 Evaluation Plan;
  - *welcome* progress in the implementation of the Evaluation Policy and Evaluation Plan and look forward to the next annual report on evaluation to be presented to the Programme Coordinating Board;
  - *request* the Executive Director to ensure that the evaluation function remains adequately resourced and staffed in accordance with the Evaluation Policy.

[Annexes follow]

## Annex 1: Overview of the UNAIDS evaluation function



### Programme Coordinating Board

Approves the Evaluation Policy, Evaluation Plan and budget, considers annual reports on implementation and draws on evaluations for decisions.

### Cosponsor Evaluation Group

Brings together and leverages the resources of the Cosponsor evaluation offices for HIV-related evaluations and promotes system-wide and joint evaluations related to HIV.

### Expert Advisory Committee

External body which provides advice on evaluation consisting of 7 members, nominated by Member States (5), NGO delegation of UNAIDS Board (1) and Cosponsor evaluation offices (1). Expert advisory committee members are appointed for two years and cannot be reappointed more than once. The committee currently comprises:

1. **Dr. Elizabeth Moreira dos Santos**, researcher and independent consultant (Latin America and Caribbean), Chair;
2. **Mr. Raymond Yekeye**, Chair of the National AIDS Council of Zimbabwe (Africa);
3. **Dr. Zunyou Wu**, Chief Epidemiologist, Chinese Centre for Disease Control and Prevention (Asia-Pacific);
4. **Dr. Tamara Svetahor**, Head of Prevention Department HIV-infection and Parenteral Viral Hepatitis, Belarus (Eastern Europe);
5. **Professor Till Bärnighausen**, Director of the Heidelberg Institute of Global Health (Western European and Other Countries);
6. **Ms. San Patten**, independent research and evaluation consultant (NGO Delegation);
7. **Mr. Marco Segone**, Director of the UNFPA Evaluation Office (Cosponsor Evaluation Group).

## Annex 2: Assessment of the evaluation of the UN system response to AIDS

### Assessment and recommendations of UNAIDS Expert Advisory Committee

- The evaluation report reflects what can be characterized as a comprehensive, thorough, relevant and useful exercise. Overall, the report is based on evidence and the result of a large amount of work, an impressive number of interviews and a huge achievement mobilizing UNAIDS Cosponsors, Secretariat and other stakeholders.
- The report and "theory of change" are both logical and clear. The methodology and data sources—which included a review of a very large number of documents—are appropriate. There is a good balance between positive and negative findings, and the way in which the strength of evidence is rated is good.
- A theory of change (unlike a fixed mental model) presupposes the possibility of building a plausible sequence of successive effects, adapted along the trajectory of an intervention, in this case an evaluation. The question of representing the theory of interventions to make them understandable and subject to monitoring and evaluation is not only a challenging academic problem. Management of efficiency, effectiveness and policy sustainability matters require flexible and modulated strategies and interventions, which pose complicated monitoring and evaluation questions and responses, particularly on how to model actionable evaluations.
- It is not easy to establish the relations of an "intervention system" (complex strategies) with its maturation in time and place. In other words, it is challenging to describe the interactions between strategies, the organizational and operational (meso or middle) level and the situational context in which these are located (see Blue Marble Evaluation: Premises and Principles [Patton, Michael Quinn], 2019).
- A clear chronology of planning and implementation of the UBRAF, both at global and country level, would have been useful. Such a timeline would have allowed associating the specific activities of an intervention with the context of its planning and implementation. This has major importance in implementation analysis studies, given that the context influences the execution processes. Especially in unstable political environments, the trajectory of an intervention is always considered a "work in progress", involving an important element of conflict and uncertainty which may require new solutions and which may even generate them. It is assumed that the timeline of the intervention is the compass that leads to exploring the critical factors that may influence the intervention in the epidemiological, social or organizational context. It may register those events that modify the course of a strategy, either by delays, acceleration or interruption. A well-described strategy timeline allows for "flashing up" moments, locations and specific actors that require deep exploration and analysis, of which there is very little evidence in the evaluation. The evaluation process utilized verifiable and legitimate sources of evidence; however, they are not systematized in ways that make them easy to fully grasp, neither at global nor country level.
- The sequence-of-effects representation may limit the cause-and-consequence assumptions between immediate, intermediate and final effects. Most of these evaluation representations are biased towards services and community effects, as opposed to governance effects. Governance effects require alternative or complementary causative chains, whether intertwined and interacting at various points, (i.e. a "complex mind" model of change). In terms of a strategic appraisal of this evaluation, several chains of the "if" and "then" statements are missing, accounting for the several hypotheses presented. Moreover, there is very little mention or close analysis of controversies or divergences among partners, Cosponsors or countries.

- The report could have established more clearly the relationship among the evaluation dimensions, domains, evaluation questions and evaluation findings, rather than merely the available evidence for each domain or evaluation dimension (see below). A summary of the logical rationality would have facilitated communication and articulation of the recommendations, taking in consideration the competencies of the Joint Programme.

Domains	Evaluation dimensions		
	Effectiveness	Efficiency	Sustainability
Effects at the governance level	Assumptions, evaluation questions and findings	Assumptions, evaluation questions and findings	Assumptions, evaluation questions and findings
Effects at the service level			
Effects at the community level			

- To assess the overall quality of the evaluation and give it more legitimacy, it would be necessary to examine more closely the rationale behind the hypotheses, the data collected and the results of the evaluation.
- A more detailed rationale for the hypotheses and how they were selected would have been useful. Data and evidence could have been more prominent in the presentation of the findings. There are data presented in the report, but it is not possible to verify whether the conclusions are based on the data from interviews and the online survey.
- It should be recognized that it is difficult for evaluations of this kind to achieve scientific standards because of the diversity of empirical situations. However, by making raw data available the evaluation can move closer towards scientific standards, meet expectations (in terms of rigour and transparency), and enable validation of the recommendations (for example, whether they emerged empirically from the data). In future and to the extent possible, UNAIDS should provide open access to raw data in an anonymized form.
- Among the criteria developed for the assessment, it is difficult to assess which were related to independence without additional information (such as the affiliations of the evaluators). The fact that the evaluators are not “HIV insiders” could enhance their independence. A brief statement on the independence of the evaluation team and any potential conflicts of interest would be useful in the report.
- The assessment of the Joint Programme’s effectiveness and efficiency (related to governance and results) could have shown more clearly the strategic contributions of the Joint Programme, value for money, adaptive management, and challenges adjusting to an environment of constrained resources.
- An important finding is the challenge which the Joint Programme faces in adapting to an environment of human and financial resource constraints. The report presents some of the issues related to the operationalization of the Joint Programme at the country level. Despite the diversity of country contexts, the UBRAF has been useful. It has allowed the Joint Programme to develop joint plans and support countries, even if most stakeholders at country level do not seem to be aware of the UBRAF as the overall framework for the Joint Programme.

- More detail on the case studies could have been provided. In light of what was presented, it seems that the case studies were based mainly on interviews and focus group discussions with stakeholders in capital cities—and could have involved more affected communities and key population groups.
- Gender and human rights are reflected in the questions and analysis, but less so in the presentation of the methodology (which, for example, lacks disaggregation of respondents by gender). It would have been useful in the country case studies to show how methods considered gender balance among respondents, confidentiality and meaningful participation of communities and key population groups.
- Adequate detail is provided on the participation of civil society, but there is no disaggregation by gender or clarity on what sectors the civil society respondents represent. Ensuring equitable participation and representation of key population groups in the survey and in interviews is important.
- While some of the conclusions are somewhat generic, the tangible nature and high level of the recommendations make them useful for governance and UNAIDS operations at the global level. However, for Joint Programme work at the country level, the recommendations are considerably less concrete and useful.
- Many of the recommendations flow from findings and conclusions that are based on perceptions; it is important to ensure that the findings are based on a sufficient amount of data. Organizing the recommendations by type (such as governance, policies, programme delivery etc.) could be useful in future evaluations. This would also be a way to ensure clarity on who is responsible for addressing the recommendations.



## Endnotes

1. UNAIDS Evaluation Plan. 2019. UNAIDS/PCB (45)/19.32.  
([https://www.unaids.org/en/resources/documents/2019/PCB45\\_Evaluation\\_Plan](https://www.unaids.org/en/resources/documents/2019/PCB45_Evaluation_Plan)).
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