

# REPORT OF THE SPECIAL SESSION OF THE PROGRAMME COORDINATING BOARD

**Additional documents for this item:** N/A

**Action required at this meeting:** The Programme Coordinating Board is invited to:  
*Adopt* the report of the Special Session of Programme Coordinating Board held virtually on 6 October 2021.

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

## **1. Opening of the meeting and adoption of the agenda**

1. The UNAIDS Programme Coordinating Board (the Board or PCB) convened virtually for its Special Session on 6 October 2021.
2. The PCB Chair, Kalumbi Shangula, Minister of Health and Social Services, Namibia, welcomed participants to the meeting. The meeting observed a minute of silence in memory of everyone who had died of AIDS or COVID-19, recalling inequities that exacerbated both pandemics.
3. The Chair told the meeting he had presented the PCB report to the 75th meeting of the Economic and Social Council (ECOSOC) of the United Nations (UN). This had resulted in the adoption, by consensus, of a strong ECOSOC resolution on the Joint United Programme on HIV/AIDS. The Chair called on the meeting to work in that same spirit of diplomacy and multilateralism so that the Joint UN Programme on HIV/AIDS (UNAIDS) could continue its important work as the leader in the global HIV response.
4. The Chair then briefed the meeting on logistical arrangements and the conduct of the meeting.
5. The meeting adopted the agenda.

## **2. Consideration of the report of the 48th PCB meeting**

6. Introducing this agenda item, the Chair reminded the meeting that the report summarized statements delivered in the plenary and those submitted in advance, as agreed.
7. A representative of the Chair (who serves as the Chair's representative to the PCB Bureau) then briefed the meeting. He said that on September 28, further to comments received from a PCB member on the report of the 48th meeting, the PCB Bureau had considered the comments and agreed to issue a revised version of that report.
8. Subsequently, additional comments had been received, he continued. PCB Bureau had met on 4 October and had agreed to issue a second revised version, which had been posted on October 5. The PCB Bureau had met again on October 6 to discuss three additional proposed amendments with the aim of reaching adoption of the report by consensus. A further, revised version of the report had been posted on the morning of October 6.
9. The Chair assured the meeting that he and the PCB Bureau had been committed to reflect the key concerns of the member and felt that the changes were minor and supported the achievement of a balanced and accurate report.
10. One member, recalling the agenda items from the 48<sup>th</sup> PCB meeting, proposed that a Special Session of the PCB be arranged to review the impact of the COVID-19 pandemic on the HIV response and its implications for the post-COVID era. The meeting's attention was also drawn to the important issue of HIV and cervical cancer, and the need for expanded screening and related services. The need for comprehensive point-of-care screening for people on the move was noted.
11. The member also recalled its request to the Executive Director to shift the country from the UNAIDS region of the Middle East and North Africa to the Asia and Pacific region.

12. Winnie Byanyima, Executive Director of UNAIDS, responded to the request by the member and said a decision would be taken in the context of the ongoing alignment exercise.
13. A member recalled that regrettably the voting procedure had taken place at the 48<sup>th</sup> PCB meeting regarding the report of the Special Session held in March. The member reiterated its commitment to the PCB's practice of consensus decision making. The member expressed appreciation to the Secretariat and Chair for their constructive approach on the matter of the report of the 48th meeting of the PCB and expressed the hope that a similar, constructive approach would prevail in the future.

### **3. Unified Budget, Results and Accountability Framework 2022–2026 and the biennial workplan and budget 2022–2023**

14. The Chair introduced this agenda item, emphasizing the importance of UNAIDS' leadership for ending the AIDS pandemic.
15. Tim Martineau, Deputy Executive Director, Management and Governance a.i., UNAIDS, presented highlights from the Unified Budget, Results and Accountability Framework (UBRAF) 2022–2026 and the biennial Workplan and Budget 2022–2023.
16. He told the PCB that 2021 had already set historic milestones for the HIV response and had reaffirmed the critical role of the Joint Programme in leading the global HIV response and supporting countries to reach the 2025 targets, using an inequalities lens.
17. The Joint Programme would greatly intensify its work to ensure equitable access to HIV services, improve enabling legal environments, eliminate stigma and discrimination, promote gender equality, strengthen community-led responses, champion the empowerment of communities and people living with HIV, and advance more sustainable financing and systems, he told the Board. Those actions would be operationalized through the 2022–2026 UBRAF and the 2022-2023 Workplan and Budget.
18. Mr Martineau said the UBRAF had been developed through an iterative joint process, which he summarized. He thanked the UBRAF Working Group, which had convened five times since June 2021 and especially Jesper Sundewall for chairing the Working Group.
19. He then summarized the main features of the 2022–2026 UBRAF. These included a theory of change (which was more action-oriented and showed linkages to the results framework and Global AIDS Strategy), a results framework (also more action-oriented with a clarified results chain), and a division of labour (aligned with the Global AIDS Strategy and UBRAF results). Also featured were the five-year regional priorities (linked to the UBRAF results and high-level actions), key partnerships and detailed information on enhanced accountability within and beyond the scope of the UBRAF and reporting (including clarification on Joint Programme accountability and reporting timelines and overall formats).
20. Mr Martineau said the UBRAF was aligned with the Quadrennial Comprehensive Policy Review and many of its recommendations were imbedded in the new UBRAF. Linkages between the theory of change, the three nested theories of change, the outcomes and the ten result areas were aligned with the Global AIDS Strategy. The document also showed more

clearly which activities lie within UNAIDS's sphere of influence.

21. Mr Martineau reviewed the results framework and its linkages with biennial workplans and budgets. As recommended during the PCB pre-meeting session, specific Joint Programme outputs and related performance indicators in the 2022–2026 results framework would be clarified further and would be presented to the Board in December 2021.
22. He reminded the PCB that all aspects of UNAIDS work were based on the principle of country ownership and showed the UBRAF results chain, indicating where the Joint Programme results are defined (as part of the 2022-2023 Workplan and Budget and the 2022-2026 UBRAF). Mr Martineau then illustrated the results chain via the example of HIV prevention activities focusing on key populations, showing how the different levels of actions and results of the Joint Programme are organized and culminate in contributing to advancing the Sustainable Development Goals (SDGs) framework.
23. This was followed by a brief, high-level overview of the Joint Programme result areas and indicative high-level contributions to the SDGs. Mr Martineau emphasized the wide scope of unique multisectoral experience which the Joint Programme brings to bear. He then described how the UBRAF indicators will measure the performance of the Joint Programme's work against the UBRAF results while the Global AIDS Monitoring (GAM) system measures progress made in and by countries against the 2021 Political Declaration on HIV and AIDS and the Global AIDS Strategy and provides complementary information for the reporting.
24. He concluded by describing the main Joint Programme's evidence informed priorities and areas of interventions (deliverable) to address inequalities/gaps and challenges for 2022-2023 against each of the result areas, the Secretariat functions and the six UNAIDS regions. Support would be tailored to the context and needs of countries, he told the meeting.
25. George Farhat, Director of Planning, Finance and Accountability, UNAIDS, presented an overview of the UBRAF resource allocation model for 2022–2026. It built on the refined operating model, which was based on recommendations from the Global Review Panel and had been approved by the PCB in 2017.
26. The Joint Programme would be guided by three main objectives: deploying resources where they are needed most, reinvigorating country-level joint work and actions, and reinforcing accountability and results. The mobilization and resource allocation model of the new UBRAF was designed to adequately resource the Secretariat to fulfil its global role and support countries, and to allocate Cosponsors' allocation including country envelopes to leverage joint action in support of populations in greatest need and a fixed, flexible core funding allocation to each Cosponsor to fulfill their respective role in their engagement with the Joint Programme, including through jointly agreed global strategic initiatives to deliver in key areas.
27. In light of the Global AIDS Strategy and current income projections, the Joint Programme proposed to seek PCB approval of an annual core budget of US\$ 210 million (or a biennial US\$ 420 million core budget). Annual allocations would comprise US\$ 146 million to the Secretariat to deliver on its functions and to continue supporting countries, while US\$ 64 million would go to Cosponsors for core functions, global initiatives and country envelopes (annually US\$ 33 million to Cosponsors and US\$ 31 million to Cosponsors at

- country level in the form of country envelopes).
28. Comparing the 2021 and 2022 budgets, Mr Farhat said the US\$ 210 million envisaged for 2022 represented a US\$ 32 million (or 13%) decrease from the approved core budget of US\$ 242 million for 2021.
  29. Three funding scenarios had been considered due to the uncertain funding environment, he explained. Under scenario 1, US\$ 146 million would go to the Secretariat and US\$ 64 million to the Cosponsors. Scenario 2, which equated to the current US\$ 187-million funding level, entailed US\$ 140 million going to the Secretariat and US\$ 47 million to the Cosponsors. Scenario 3, which envisaged a funding level of US\$ 170-million, was more drastic and foresaw only US\$ 128 million for the Secretariat and US\$ 42 million for the Cosponsors.
  30. Based on requests from the pre-PCB meeting, Mr Farhat highlighted that the budget was built around ten result areas and five Secretariat core functions. He referred to the tables 2, 3, and 4 of the 2022-2023 UBRAF Workplan and Budget (UNAIDS/PCB (EM)/4.3 showing core and non-core allocations by result areas, organizations, and Secretariat functions.
  31. Mr Farhat then summarized the annual core budget allocations for scenarios 1 and 2. Responding to a request from the pre-PCB meeting, he compared the 2020–2021 and 2022–2023 biennia in terms of core and noncore funds. He drew the meeting's attention to slides showing the 2021 Secretariat core budget, expenses and encumbrances for January 1 to September 30, 2021, by core functions and disaggregated according to major expense categories.
  32. The annual financial report to the PCB (which is publicly available on the PCB webpage) contained all details of expenditure including by cost categories for all types of funds, while an annual performance report included details on major expenditure categories for the Secretariat and Cosponsors, Mr Farhat said in conclusion.
  33. Mr Martineau said the UBRAF built on 25 years of UNAIDS experience and, along with the Global AIDS Strategy and the 2021 Political Declaration on HIV and AIDS, came at a pivotal moment. It was a vital opportunity for the Joint Programme to refocus the global HIV response to reach the millions of people who were being left behind. Fully funding the Joint Programme was a critical investment for successful implementation of the Global AIDS Strategy, he said.
  34. Zsuzsanna Jakab, Deputy Director-General of WHO, said that Cosponsors' work had intensified and was focused on ensuring they can deliver to contribute to reaching the 2025 and 2030 targets. She reminded the meeting that the UBRAF was a unique tool in the UN system and that the core funds raised for the UBRAF have a transformative and catalytic impact. They help ensure accountability and allow Cosponsors to maintain the core, dedicated HIV capacities they need to leverage further resources to deliver on for HIV.
  35. Many of the challenges that existed in 1996, when the Joint Programme had been created, still remained, Ms Jakab said. Scientific evidence continued to be questioned, inequalities persisted, and civic space was shrinking. Multisectoral action for HIV was more critical than ever, she stressed. Adopting the UBRAF would ensure continuation of a strong and multisectoral Joint Programme that enables and supports delivery of the Global AIDS Strategy. She called upon PCB members to adopt the UBRAF and the Workplan and

Budget.

36. Jesper Sundewall, Chair of UBRAF Working Group, noted the hard work of the Working Group colleagues and the Secretariat in guiding the development of the UBRAF. The document struck a good balance between detail, overarching targets, theories of change, and aspirations, he told the PCB. In doing so, it reflected the HIV "ecosystem" and applied a relevant inequalities lens.
37. He reminded the meeting of the sense of urgency that had led to the creation of the Joint Programme 25 years earlier, but reminded the meeting that it had never been the intention that the Joint Programme would "do everything". Funding had to be catalytic. Perhaps even more important was the additional funding mobilized at country level by Cosponsors, he noted. The Working Group therefore had emphasized the importance of results, deliverables and outcomes, and of linking budgets to stakeholders and results to achieve accountability.
38. Mr Sundewall noted that the UBRAF framework results would continue to be honed for the duration of the UBRAF. As that work continues, the focus should be not only on Secretariat and Cosponsor results, but also on placing those results in the context of global, regional and national HIV responses, he said.
39. Major advances had been made in the 25 years of UNAIDS's existence, but much remained to be done to end AIDS by 2030, Mr Sundewall continued. A looming decline in HIV resources might reflect a decreased sense of urgency but did not reflect the reduced importance of the epidemic and ending AIDS. In a context of competing priorities, it was vital to ensure that the Joint Programme remained relevant. This could be done by positioning its work in relation to more comprehensive advances (e.g. achieving universal health coverage). Another option was to continuously revisit the division of labour and where each Cosponsor can contribute and to remind that each partner in the Joint Programme has a responsibility to mobilize resources to end AIDS.
40. Mr Sundewall reminded the PCB that the UBRAF was only a plan. No matter how good it was, it would require course corrections, tweaking and improvements. It was not a handbook of solutions. He concluded by stressing that it was time to focus on action.
41. Ms Byanyima said the UBRAF was the culmination of nine months of hard work. The AIDS epidemic was not over, she stressed, citing recent data on HIV incidence and AIDS-related deaths. An AIDS death every minute of every day was an emergency, she told the PCB. COVID had disrupted HIV services, leading to drops in diagnosis and referrals to treatment, and affecting prevention services. A resurgence of the AIDS crisis had to be prevented.
42. The world had to redouble its efforts to maintain and build on the gains made—and the UBRAF was vital for that, Ms Byanyima said. It would allow the Joint Programme to advance its critical work supporting countries and communities to achieve the Political Declaration and Global AIDS Strategy targets and goals, mitigate the impact of colliding HIV and COVID-19 pandemics, and be accountable for results.
43. Ms Byanyima reminded the meeting that the Joint Programme's funding shortfall continued. Funding cuts announced by a major donor had aggravated the financial situation, she noted.
44. Thus far US\$ 166 million in funding had been confirmed for the current year,

which was US\$ 21 million short of the budget that had been approved by the PCB. She encouraged the Board to approve the budget of US\$ 210 million as a reflection of commitment to have the Joint Programme coordinate the global efforts to end AIDS. PCB members had endorsed an ambitious Global AIDS Strategy and that similar ambition should be reflected in the budget for the Joint Programme, she said. A financing dialogue would be held on 15 November 2021, she announced.

45. The Secretariat was proceeding with organizational alignment in line with the new Strategy and to fit with a smaller budget, Ms Byanyima continued. Current Secretariat staff costs had to be managed. A new structure would include a major reduction in staffing costs, which would have a difficult impact on staff. It would mean reducing the staff "footprint" of the Secretariat, moving some staff to lower-cost duty stations, and other cost-cutting measures.
46. Ms Byanyima paid tribute and expressed her gratitude to Shannon Hader, Deputy Director, Programme, UNAIDS, who would leave UNAIDS when her contract expired in December 2021. She announced the appointment of Sihaka Tsemo as Director of the Liaison Office to the African Union, and of Anne Githuku Shongwe as the new Director for Eastern and Southern Africa Regional Support Team.
47. Several members and observers thanked and congratulated the Working Group, Secretariat and Cosponsors on the 2022–2026 UBRAF and the 2022–2023 Workplan and Budget. They commended UNAIDS for developing the UBRAF in an inclusive manner, in a very short period and under difficult circumstances.
48. The Joint Programme played a critical role in providing guidance, advocacy, technical support, strategic information and practical assistance to countries, some speakers reiterated.
49. Emphasizing that a strong Joint Programme was essential for achieving the global AIDS targets and ending AIDS as a public health threat by 2030, members and observers supported approval of the UBRAF framework and the core budget base of US \$187 million with a threshold of US\$ 210 million.
50. Several speakers said the new UBRAF framework was significantly improved compared to previous versions and it emphasized the vital elements of the HIV response (e.g. upholding human rights and reducing inequalities). It had a strong theory of change, risk mitigation and contingency planning elements, and an adapted division of labour. It also linked well with the SDGs and aligned to the 2021-2026 Global AIDS Strategy and 2021 Political Declaration on HIV/AIDS.
51. Some members felt that the current version was still lengthy and complex. A simplified version of the theory of change would be useful, perhaps by way of an UBRAF executive summary, which should be prepared in the first quarter of 2022.
52. Several members supported the emphasis on addressing inequalities, and commended the focus on community-led responses and marginalized groups. They drew the meeting's attention to the challenges and experiences of women, especially young women in Africa, and called for greater support for community-led organizations, especially women-led organizations.
53. Several speakers said they looked forward to receiving more information on



how the Joint Programme would foster actions at local level. They emphasized a need for transparency in scaling-up community-led responses and noted that community responses do not exist in isolation from health and social protection systems.

54. Some members also appreciated the emphasis on issues such as the elimination of vertical transmission and paediatric AIDS, as well as on the need to uphold human rights and tackle stigma and discrimination. Community-led responses were especially important for tackling stigma and discrimination, the meeting was told. Some speakers described how they were aligning their national HIV strategic plans with the Global AIDS Strategy, with a focus on young women and on addressing stigma and discrimination.
55. Strengthened health systems were crucial for universal health coverage and for responding to pandemics like COVID-19 and HIV, several speakers said. Better health outcomes for existing funding as well as more money for health was needed. The last mile is more difficult to achieve than the first, stressed a member. However, some members expressed some disappointment about the relatively low priority given to closing gaps in access and affordability of medicines, as well as supporting research, development and innovation in affected countries. The COVID-19 pandemic was underscoring the importance of diversified manufacturing, local production of vaccines, diagnostics and medicines, and technology transfers achieving sustainable health systems.
56. Members welcomed the ongoing work and additional proposals for enhancing accountability, as well as monitoring and reporting. There should be clear alignment and complementarities between the UBRAF indicators, which measure the Joint Programme performance, and the global HIV response indicators, they said. They also noted the importance of developing indicators and outputs that reflect the diversity of the AIDS epidemic in different regions and countries.
57. The accountability elements in the UBRAF document could be tightened further, speakers said. The indicators should make it possible to track progress against the UBRAF, the Joint Programme's contribution to implementing the Global AIDS Strategy, and should clearly show links between deliverables, targets and outcomes, they explained. Accountability mechanisms should also reflect work done at regional level, as well as Cosponsors' work (involving the use of UBRAF funds), they said.
58. The meeting was reminded that the 2020 Evaluation of the UN System response to AIDS had noted that the next UBRAF should show the contribution of the Secretariat and Cosponsors to global HIV outcomes more clearly. To achieve that, said members, the current results framework of the UBRAF still required refinement, including by incorporating clear outputs and indicators connected to the ten result areas so the contribution of the Joint Programme could be measured. Those same outputs and indicators should also be used to guide workplans.
59. Members asked that clear outputs and associated indicators for each of the ten UBRAF result areas be presented to the 49th meeting of the PCB in December 2021, as well as incorporating two-year targets and outputs in the 2022-2023 UBRAF workplan. This would enable the UBRAF to serve as a key tool to assist the Joint Programme in setting priorities and raising funds in an increasingly constrained resource environment. It was also important for measuring and monitoring whether inequalities were being reduced, some

members added. Several members said they hoped that the added value of the Joint Programme would be underscored, especially in relation to data gathering and policy advice, promoting human rights and gender-transformative approaches and awareness-raising.

60. The Joint Programme was asked to use all partnering opportunities, including with regional and subregional intergovernmental structures, to achieve greater synergy and collaboration for cross-border HIV programmes. This could also boost economies of scales, support peer learning, and increase access to medicines and diagnostics through pooled procurement.
61. Regarding the budget, there was agreement on the need to remain focused on the high ambitions of the Global AIDS Strategy. Several members reiterated the need for a fully-funded UBRAF and supported the US\$ 210 million scenario as a platform for reaching a fully-funded UBRAF. However, setting a realistic baseline below the US\$ 210 million baseline was also important to facilitate good planning, they added.
62. An ambitious strategy needed more ambitious levels of funding, speakers stressed. An underfunded UBRAF meant that UNAIDS was effectively operating with "one hand tied behind its back", while being required to deliver more. Members were urged to be part of the solution for the issues they raised, including by ensuring that the UBRAF is fully funded. Donor countries were urged to release their contributions to UNAIDS as soon as possible.
63. The challenge of sustainable funding had to be addressed at all levels, some speakers suggested. Cosponsors and partners were urged to help mobilize the resources needed to implement the global AIDS Strategy.
64. The meeting heard from the Chair of the CCO that each of the Cosponsor principals had noted that ending AIDS required the Cosponsors do more, not less, and that they had highlighted the importance of core, predictable funding for doing so. Such funding enabled Cosponsor to maintain core capacities and leverage further HIV resources. The principals had agreed on the need to maintain core funding for each Cosponsor at US\$ 2 million per year, and proposed that this be considered irrespective of levels of overall funding achieved. Several speakers also urged PCB members to work together on the governing boards of Cosponsors to ensure a coherent AIDS response across the UN.
65. Several speakers appreciated the three funding scenarios which had been presented. It was suggested that the funding scenarios could be integrated in the Workplans and Budgets that accompany the UBRAF document and could be used to guide the setting of clear priorities.
66. UNAIDS was asked to indicate how the envisaged outcomes would be affected if the UBRAF were not fully-funded. Whichever funding scenario turned out to be most accurate, the Joint Programme had to prioritize the defence of human rights, some members insisted. Some members and observers also emphasized the importance of UNAIDS having on-site presence via country offices; telephone calls and "virtual" meetings could not achieve the same impact, they said.
67. Several members welcomed the forthcoming financing dialogue.
68. Many members and observers expressed deep appreciation to Ms Hader for her excellent service, dedication and accomplished leadership, and praised

- her major contributions to the HIV response, including at country-level.
69. The Secretariat was asked to ensure that PCB documents are posted in a timely manner.
  70. One member said the UBRAF brought greater coherence to the Joint Programme, but emphasized that the funding shortfall was a major concern. The proposed budget was higher than current income, but was not an unreasonable target when measured against the challenge of ending the AIDS epidemic, he said.
  71. Meg Doherty, Director, Global HIV, Hepatitis and Sexually Transmitted Infections, WHO, speaking on behalf of the Cosponsors, welcomed the comments, committed to producing more detailed information on outputs, and agreed with the suggestion to add an executive summary.
  72. Andy Seale, Adviser, Global HIV, Hepatitis and Sexually Transmitted Infections, WHO, thanked speakers for their support and constructive comments. He noted the requests for greater detail in reporting on Cosponsor activities in relation to deliverables, and shared some examples of how that could be done.
  73. Mr Martineau, in reply, thanked the Working Group for meeting tight deadlines and thanked the Board for its positive feedback and recognition of progress and improvements made. He apologized for the delayed posting of the UBRAF documents, which was due to a very tight timeframe. He acknowledged the need for an executive summary of the UBRAF document, which would be a priority in the next few months.
  74. Regarding the content of the UBRAF, he reminded the meeting that the Global AIDS Strategy guided the development of the UBRAF (e.g. on human rights and gender equality, increased domestic financing and the need for global solidarity). He agreed with speakers that equitable access to medicines was fundamentally important, as shown again in COVID-19 crisis. He also agreed that partnering at regional level and with regional and subregional bodies was essential.
  75. Mr Martineau thanked speakers for their suggestions on enhancing accountability, and said it was possible to meet the December 2021 deadline for proposing additional Joint Programme output and related indicators. Regarding the financial scenarios and their implications, he said the scenarios would be used for planning and UNAIDS would be transparent about their implications.
  76. He noted that sustaining the same level of core funding for Cosponsors might be at risk if funding levels were not mobilized, but stressed that UNAIDS was determined to protect the country envelopes. He suggested that the most negative impact of insufficient funding would be on global strategic initiatives (e.g. the Global Partnership on stigma and discrimination, the Global Prevention Coalition, the Education Plus initiative etc.), even though the work was very important. Without sufficient funding, the Secretariat would have to either reduce its capacity on certain issues or reduce its "footprint" across the globe, he told the meeting.
  77. The Chair reminded the meeting that the Decision Points had been discussed in the drafting sessions and that agreement had been reached.
  78. A member thanked the Secretariat and Joint Programme for their work on the

UBRAF and budget. It said it had participated in discussions on those documents on a basis of transparency and objectivity, and had requested some additional financial details to be included. However, its proposal had not been addressed by the Secretariat.

79. Regarding the 2022–2023 Workplan and Budget, the member said the current format did not correspond to the best UN practices; the budget proposals did not include detailed information on planned expenses. The member proposed that the Secretariat indicate how much it would spend on staff, consultants, operational needs, contract services, etc. and clarify whether those projections represented increases or decreases compared to the previous period. This level of transparency was necessary so that the PCB could make decisions regarding the outcomes of the budget, the member said.
80. The member noted that it had disassociated itself from parts of the Global AIDS Strategy as it considered that its structural elements were of ambiguous character and introduced increased potential risks to the people's health. It further noted that since the UBRAF was a road map for implementation of the Global AIDS Strategy, the text contains the same elements as the Global AIDS Strategy, some of which, the member stressed, were not appropriate for some country contexts. Among these elements, the member marked out legalization and decriminalization of drug use and sex work, harm reduction programmes, and comprehensive sexuality education. The member stated that it would therefore disassociate itself from certain parts of the document as well as the decision points under agenda item 3. The member asked to include their statement in the text of the Report and make a relevant footnote to the decision points.
81. The Chair told the member that the statement had been noted.

#### **4. Any other business**

82. There was no other business raised.

#### **5. Closing of the meeting**

83. The Chair thanked the PCB Bureau, PCB members and observers, the Secretariat, support staff and translators.
84. Ms Byanyima presented the closing remarks. She thanked the PCB for approving the 2022–2026 UBRAF and the 2022–2023 Workplan and Budget, and for its comments and suggestions. She assured the meeting that more detailed indicators and tightened results for enhanced accountability would be presented to the December 2021 PCB meeting.
85. Adoption of the five-year UBRAF and the biennial Workplan and Budget would allow the Joint Programme to continue its critical work to support communities and countries to achieve the targets and goals in the 2021 Political Declaration on HIV and AIDS and the Global AIDS Strategy, and to fight on the two fronts of HIV and COVID-19, she said.
86. The Executive Director said she was encouraged by the clear desire to achieve a fully-funded UBRAF, at the level of US\$ 210 million, and for the support shown for fully-funded community-led services. UNAIDS' fundraising work would aim to mobilize the targeted amounts.
87. The Chair thanked Ms Hader for her immense contribution and tireless leadership to the AIDS response, including through the development of the

2021-2026 Global AIDS Strategy and her commitment to supporting countries to end AIDS by 2030.

88. The Special Session of the Board was closed.

*[Annexes follow]*

## PROGRAMME COORDINATING BOARD

UNAIDS/PCB (EM)/4.1

Issue date: 28 July 2021

### **Special Session of the PCB**

DATE: 6 October 2021

VENUE: Virtual

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## **Annotated agenda**

### **WEDNESDAY, 5 OCTOBER**

- 1. Opening of the meeting and adoption of the agenda**  
The Chair will provide the opening remarks to the PCB Special Session.  
*Document: UNAIDS/PCB (EM)/4.1*
- 2. Report of the 48th PCB meeting**  
*The report of the 48th Programme Coordinating Board meeting will be presented to the Board for adoption.*  
*Document: UNAIDS/PCB (48)/21.21*
- 3. Unified Budget, Results and Accountability Framework 2022–2026 and the biennial workplan and budget 2022–2023**  
The PCB will receive the final Unified Budget, Results and Accountability Framework 2022–2026 and the biennial workplan and budget 2022–2023 for consideration.  
*Document: UNAIDS/PCB (EM)/4.2; UNAIDS/PCB (EM)/4.3; UNAIDS/PCB (EM)/CRP1*
- 4. Any other business**
- 5. Closing of the meeting**

## **Virtual Special Session of the UNAIDS Programme Coordinating Board Geneva, Switzerland**

**10 October 2021**

### **Decisions**

The UNAIDS Programme Coordinating Board,  
Recalling that all aspects of UNAIDS work are directed by the following guiding principles:

- Aligned to national stakeholders' priorities;
- Based on the meaningful and measurable involvement of civil society, especially people living with HIV and populations most at risk of HIV infection;
- Based on human rights and gender equality;
- Based on the best available scientific evidence and technical knowledge;
- Promoting comprehensive responses to AIDS that integrate prevention, treatment, care and support; and
- Based on the principle of nondiscrimination;

#### *Intersessional Decisions:*

Recalling that, to cope with the specific circumstances due to the COVID-19 health crisis, it has decided through the intersessional procedure (see decisions in UNAIDS/PCB/(EM)/3.2):

- *Agrees* that the March Special Session of the Programme Coordinating Board will be held virtually on 24–25 March 2021;
- *Agrees* that the 48th meeting of the Programme Coordinating Board will include an additional day to the dates agreed in decision point 11.3 of the 43rd PCB meeting and will be held virtually on 29 June – 2 July 2021;
- *Agrees* that the PCB Bureau will determine if the 49th meeting of the Programme Coordinating Board will be virtual or in-person; and that if the meeting will be held virtually, it will exceptionally include an additional day and be held on 7–10 December 2021; and
- *Agrees* on the modalities and rules of procedure set out in the paper, Modalities and procedures for virtual 2021 UNAIDS PCB meetings (UNAIDS/PCB(EM)/3.2), for the virtual 2021 PCB meetings and their preparations.

#### **Agenda item 1: Opening of the meeting and adoption of the agenda**

1. *Adopts* the agenda;

#### **Agenda item 2: Report of the 48th Programme Coordinating Board meeting<sup>1</sup>**

2. *Adopts* the report of the 48th Programme Coordinating Board meeting;

#### **Agenda item 3: Unified Budget, Results and Accountability 2022–2026 Framework and 2022–2023 Workplan and Budget**

- 3.1 *Expresses* appreciation to the UBRAF Working Group, the Executive Director, and the Committee of Cosponsoring Organizations for their work to develop the

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<sup>1</sup> The Russian Federation disassociates itself from the decision points under agenda item 3.

Unified Budget Results Framework (UBRAF) and budget further to the 48th Programme Coordinating Board meeting;

- 3.2 *Approves* the 2022–2026 Unified Budget, Results and Accountability Framework (UBRAF) and requests the Joint Programme to provide clear outputs and associated indicators for the Joint Programme for each of the Results Areas for consideration at the 49th Programme Coordinating Board meeting;
- 3.3 Approves the core budget for 2022–2023 and the budget allocation of the Cosponsors and the Secretariat at a base of US\$187 million per annum up to a threshold of US\$210 million per annum with clear delineation of allocation of funds above the base;
- 3.4 *Welcomes* the 2022–2023 Workplan, and requests the Joint Programme to incorporate two-year targets and outputs for the Joint Programme for each of the 10 UBRAF Results Areas in the 2022–2023 UBRAF Workplan and present the revised version for approval at the 49th PCB meeting; and
- 3.5 *Encourages* donor governments to make multiyear contributions and to release as soon as possible their annual contributions towards a fully-funded 2022–2026 UBRAF at the annual level of US\$ 210 million.

*[End of document]*