REVIEW, REFINE AND REINFORCE

BACKGROUND PAPER FOR THE GLOBAL REVIEW PANEL ON
THE FUTURE OF THE UNAIDS JOINT PROGRAMME
BUSINESS MODEL
“[...] we will reposition development at the centre of our work, and engage in a comprehensive reform of the United Nations development system, at Headquarters and country levels. This must involve leadership, coordination, delivery and accountability. [...] The United Nations needs to be nimble, efficient and effective. It must focus more on delivery and less on process; more on people and less on bureaucracy.”

António Guterres
United Nations Secretary-General
Remarks to the General Assembly upon taking the oath of office
SUMMARY

This paper is for the consideration of the Global Review Panel at its first meeting on 20 January 2017. At that meeting, as panel members begin their deliberations towards a strengthened business model for the Joint United Nations Programme on HIV/AIDS (UNAIDS), they will explore the avenues opened by a set of questions associated with three fundamental pillars of the Joint Programme: financing and accountability, joint working and governance.

This paper’s analysis of the Joint Programme finds:

- **An ambitious unfinished agenda to end the AIDS epidemic.** Based on the successes made against the Millennium Development Goals, the international community adopted an ambitious target within the 2030 Agenda for Sustainable Development to end the AIDS epidemic (2030 Agenda). To reach this target, a Fast–Track strategy for the AIDS response was adopted by the UNAIDS Programme Coordinating Board (PCB), and subsequently the United Nations General Assembly, followed by a successful replenishment of the Global Fund last year.

- **A funding crisis.** Shortly after the PCB adopted the Fast–Track strategy and a two-year budget, several major donors significantly reduced their contributions to the United Nations system, including the Joint Programme. The contributions to UNAIDS have fallen well short of the PCB-approved budget for 2016–2017, severely impacting the capacity of Cosponsors and the Secretariat to deliver the level of support described within the UNAIDS 2016–2021 Strategy. The severity of the crisis threatens the sustainability of the Joint Programme’s unique business model.

- **A changing context.** The interconnected and indivisible Sustainable Development Goals (SDGs) demand new approaches to development and new ways of working collaboratively within a rapidly changing world. Greater coordination among United Nations system agencies, more transparent governance, more effective use of resources and strengthened results-based management are being demanded by Member States. UNAIDS and the wider UN Development System must accelerate reform efforts to meet these challenges. New Secretary-General, António Guterres, and the leadership of the Joint Programme are committed to United Nations reform.

- **A need to refine and reinforce an innovative model.** Many of the reforms to the wider UN Development System called for by Member States are firmly embedded in the DNA of the Joint Programme. UNAIDS provides form to the vision of joint programming and integrated action at country level, engages civil society in its governance and brings together the core and non-core resources of the Joint Programme into a Unified Budget and Results and Accountability Framework (UBRAF). It will be important to reinforce these strengths as shortcomings are addressed.

- **A call to better demonstrate the clear added value of UNAIDS.** While the contribution of the Joint Programme within the AIDS ecosystem is widely acknowledged and appreciated—particularly its role in strategic information, political advocacy, country guidance on global norms and supporting civil society—the Joint Programme has been challenged in recent years to better demonstrate its catalytic role within the global AIDS response. Its ability to report meaningful country-level results against the resource allocations to individual Cosponsors has been called into question. The PCB has called on the Joint Programme to ensure there is a clear link between resources and results.

- **An opportunity to retain UNAIDS within the vanguard of United Nations reform.** The Global Review Panel will not focus on the what of the Joint Programme—UNAIDS’ role in the global AIDS response is well-reflected in the UNAIDS 2016–2021 Strategy—but rather the how or the modus operandi of governing, operating and accounting for the work of the Joint Programme. The review is an opportunity to maintain UNAIDS’ role as an incubator of innovation within the United Nations system and serve as an important contribution to the Secretary-General’s reform agenda.
Figure 1
The Joint Programme’s catalytic role in the global AIDS response
In the early 1990s, as escalating HIV infections and AIDS-related deaths exceeded all but the worst expectations, a fragmented international response to the epidemic frustrated both governments and civil society and particularly people living with HIV. Duplication of effort and territorial rivalries among United Nations system agencies threatened to weaken the global response to AIDS. (1)

In 1991, donor funding for the largest United Nations effort, the World Health Organization’s Global Programme on AIDS, declined for the first time, as did total contributions for HIV prevention and care in the developing world. (2) An independent review, completed in 1992, concluded that “no single agency is capable of responding to the totality of the problems posed by AIDS; [...] a cooperative effort, which is broadly based but guided by a shared sense of purpose, is essential”. (3)

From this crucible emerged the Joint United Nations Programme on HIV/AIDS (UNAIDS), a bold effort in coordinated United Nations action and broad stakeholder engagement focused on an urgent and complex global health and development challenge. Over the past 20 years, the Joint Programme has grown to become the foremost global authority on the HIV epidemic, its economics and politics and an influential advocate for a well-resourced, evidence-informed and rights-based response. UNAIDS played a central role in the achievement of the AIDS targets within the Millennium Development Goals.

By 2015, the growth of the epidemic had been halted and reversed by a combination of civil society activism, scientific advancement and shared responsibility among donor nations and countries most affected by AIDS. The tremendous progress inspired the inclusion within the 2030 Agenda of a bold global commitment to end the epidemic once and for all. A Fast–Track strategy for reaching a set of milestones by 2020 was approved by the PCB, as well as the UBRAF, for the Joint Programme’s critical supporting role in delivering the results within the strategy. The Fast–Track approach and 2020 milestones were later endorsed by the United Nations General Assembly within the 2016 Political Declaration on HIV and AIDS: On the Fast–Track to Accelerating the Fight against HIV and to Ending the AIDS Epidemic by 2030 (2016 Political Declaration).

However, this ambitious agenda is under threat. Resource mobilization for the Joint Programme has fallen significantly short of the PCB-approved budget for 2016 and 2017, severely impacting the capacity of Cosponsors and the Secretariat to deliver the level of support described within the UNAIDS 2016–2021 Strategy. The Joint Programme’s ways of working, and its ability to report clear country-level results against the resource allocations to individual Cosponsors, have been called into question. The disconnect between the global ambition on AIDS and the level of financing for UNAIDS threatens the sustainability of the Joint Programme’s unique business model. At the same time, the wider UN Development System is being challenged by Member States to take explicit steps to be more strategic, accountable, transparent, collaborative, efficient, effective and results-oriented and to focus its efforts on the implementation of the 2030 Agenda. (4)
“Despite our difficulties, the Joint Programme is united and confidence in its critical mission is strong, as evidenced by the recent financial pledges. [...] The longer-term viability of the Joint Programme requires strengthening the UNAIDS business model—from its joint working to its funding and accountability and governance mechanisms. We must now do this urgently.”

Michel Sidibé
Executive Director, UNAIDS
Speech to the 39th meeting of the UNAIDS Programme Coordinating Board

The leadership of the United Nations is resolved to squarely address these challenges. On his first day in office, the new United Nations Secretary-General, António Guterres, committed to lead a comprehensive reform of the UN Development System, from Headquarters to country level, focused on leadership, coordination, delivery and accountability. The Secretary-General placed particular emphasis on increasing the accountability of United Nations system entities to carry out their mandates and to more consistently deliver results. He noted that a strong culture of accountability requires “strong performance management” and “effective and independent evaluation mechanisms”. (5)

UNAIDS’ leadership is accelerating its efforts to reposition the Joint Programme in line with the UNAIDS 2016–2021 Strategy and the 2030 Agenda. UNAIDS Executive Director, Michel Sidibé, with the support of the heads of Cosponsoring agencies, called for the Joint Programme business model to be reviewed. Helen Clark, Administrator, United Nations Development Programme (UNDP) and Chair of the United Nations Development Group (UNDG), will co-convene the UNAIDS review with Mr Sidibé. The Co-Conveners have invited Awa Marie Coll-Seck, Minister of Health, Republic of Senegal, and Lennarth Hjelmåker, Ambassador for Global Health, Sweden, to serve as co-chairs. The Global Review Panel is an opportunity to maintain UNAIDS’ role as an incubator of innovation within the United Nations system and will serve as an important contribution to the Secretary-General’s reform agenda.
RETTAINING UNAIDS WITHIN THE VANGUARD OF UNITED NATIONS REFORM

The conclusion drawn in the early 1990s regarding United Nations action on AIDS remains valid a quarter century later: no single United Nations agency can tackle the epidemic; a cooperative effort is essential. The joint programming model of UNAIDS itself has withstood the test of time; recent discussions on United Nations reform have called for action in areas that are hardwired into UNAIDS: active coordination of United Nations entities, leveraging of evidence and strategic information in policy development and programming and multisectoral and multi-stakeholder approaches underpinned by the values of human rights, gender equality and sustainability.

The critical role UNAIDS plays in the AIDS response has not been called into question. At a 2016 financing dialogue for the Joint Programme, Member States and civil society representatives noted the importance of UNAIDS' leadership, its ability to bring affected communities to the centre of the response and its collection and dissemination of essential strategic information on the epidemic and response, among others (Figure 1), as functions and roles that cannot be replaced by other bilateral or multilateral entities.

Looking ahead to the post-2015 development agenda, the United Nations Economic and Social Council (ECOSOC) reaffirmed in a 2015 resolution that the "unique approach of the Joint Programme" [...] "offers the United Nations system a useful example, to be considered, as appropriate, of enhanced strategic coherence, coordination, results-based focus, inclusive governance and country-level impact, based on national contexts and priorities". (6)

However, the context surrounding the Joint Programme has changed considerably. Although the AIDS epidemic remains among the most severe global health challenges, in many parts of the world the AIDS response has transitioned from emergency action to stabilization to the cusp of epidemic control. The global health agenda has evolved from a predominant focus on primary health care and infectious disease control to a broader approach with greater attention to maternal and child health, non-communicable diseases and emergency outbreaks of disease. The considerable effort required to realize the ambition to end the AIDS epidemic thus gives impetus to take the AIDS response further out of isolation and to seek synergies within the framework of the interrelated SDGs and targets. This has consequences for the modus operandi of the Joint Programme and its relationship with other entities in the global health system.

Meanwhile, Member States and the multilateral system itself face unprecedented challenges within an evolving world order struggling to address environmental challenges, deepening income inequality, increasing numbers of people displaced by conflicts and natural disasters and rising anti-globalization sentiments. Partly in response to these challenges, several high-income countries that have traditionally provided the bulk of voluntary contributions to the UN
Development System have adjusted their development spending, including cuts to multilateral aid budgets. UNAIDS relies entirely on voluntary contributions. In late 2015, shortly after the PCB adopted the ambitious UNAIDS 2016–2021 Strategy and a 2016–2017 budget of US$ 485 million, several major donors drastically reduced their contributions to the Joint Programme. In December 2016, income against the core budget for the year was estimated at US$ 175 million, a shortfall of 28% compared to the PCB-approved budget, with a similar resource outlook for 2017. (7)

Navigating these challenges and delivering the 2030 Agenda requires a repositioning of both UNAIDS and the wider UN Development System. The 2016 Quadrennial Comprehensive Policy Review (QCPR) has undertaken a comprehensive rethinking of the UN Development System. Through the QCPR, Member States have called for a UN Development System that is more strategic, integrated, coherent, nimble, accountable and results-oriented.

A United Nations General Assembly Resolution passed in December 2016 stresses the need for greater coordination among United Nations system agencies, more joint programming and more integrated action at country level, more transparent governance that better engages civil society, further harmonization of United Nations systems and processes, more sustainable funding approaches, more effective use of resources, strengthened results-based management and higher accountability. Many of the attributes called for by Member States within the 2016 QCPR are traditional strengths of UNAIDS. The QCPR also highlights areas of reform where the Joint Programme could refine its practices (Table 1). In the light of the specific situation facing the Joint Programme and the wider context, the Global Review Panel is an opportunity to take a critical step towards retaining UNAIDS within the vanguard of United Nations reform.

“The ambitious and integrated nature of the 2030 Agenda demands adaptation and change from individual UN entities and the whole system. We have to move the bar on what we do together, to urge and incentivize a more joined-up UN development system which actually delivers together.”

Helen Clark
UNDG Chair and UNDP Administrator
Speech at the Operational Activities Segment of ECOSOC Dialogue with Heads of the UN Funds and Programmes
Table 1
Selected comparison between the resolution of the 2016 QCPR of the UN Development System and the UNAIDS Joint Programme

<table>
<thead>
<tr>
<th>QCPR</th>
<th>UNAIDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Underscores that there is no one-size-fits-all approach to</td>
<td>UNAIDS is a joint programme of 11 United Nations agencies and</td>
</tr>
<tr>
<td>development and calls upon the UN Development System to enhance</td>
<td>the Secretariat, described by ECOSOC as an example of enhanced</td>
</tr>
<tr>
<td>its efforts in a flexible, timely, coherent, coordinated and</td>
<td>strategic coherence, coordination, results-based focus, inclusive</td>
</tr>
<tr>
<td>integrated manner.</td>
<td>governance and country-level impact, based on national contexts</td>
</tr>
<tr>
<td></td>
<td>and priorities.</td>
</tr>
<tr>
<td>Stresses that the governance architecture of the UN Development</td>
<td>UNAIDS has a unique governance model that includes Member States,</td>
</tr>
<tr>
<td>System must be more efficient, transparent, accountable and</td>
<td>United Nations Cosponsor agencies and civil society. This inclusive</td>
</tr>
<tr>
<td>responsive to Member States and able to enhance coordination,</td>
<td>governance model has been described by ECOSOC as a lesson learned</td>
</tr>
<tr>
<td>for development.</td>
<td></td>
</tr>
<tr>
<td>Further stresses the need to enhance system-wide coherence and</td>
<td>The Committee of Cosponsoring Organizations (CCO) facilitates</td>
</tr>
<tr>
<td>efficiency, reduce duplication and build synergy across governing</td>
<td>the input of Cosponsors into the strategy, policies and operations of</td>
</tr>
<tr>
<td>bodies of the entities of the UN Development System.</td>
<td>the Joint Programme. The ability of the CCO to ensure policy</td>
</tr>
<tr>
<td></td>
<td>coherence between the PCB and the boards of the Cosponsors is</td>
</tr>
<tr>
<td></td>
<td>expected to be explored by the Global Review Panel.</td>
</tr>
<tr>
<td>Calls upon the entities of the UN Development System to mainstream</td>
<td>The UNAIDS 2006–2021 Strategy is aligned to the 2030 Agenda and</td>
</tr>
<tr>
<td>the SDGs in their strategic planning documents and their work at all</td>
<td>organized in relation to its SDGs, focused on achieving SDG Goal 3.</td>
</tr>
<tr>
<td>levels.</td>
<td>Target 3.3: By 2030, end the epidemics of AIDS, tuberculosis,</td>
</tr>
<tr>
<td></td>
<td>malaria and neglected tropical diseases and combat hepatitis,</td>
</tr>
<tr>
<td></td>
<td>water-borne diseases and other communicable diseases, as well as</td>
</tr>
<tr>
<td></td>
<td>contributing to the achievement of broader health, development,</td>
</tr>
<tr>
<td></td>
<td>human rights and gender outcomes of the SDGs.</td>
</tr>
<tr>
<td>Stresses that improvement of coordination and coherence at all levels</td>
<td>Stresses that improvement of coordination and coherence at all levels</td>
</tr>
<tr>
<td>of the UN Development System should be undertaken in a manner</td>
<td>of the UN Development System must be undertaken in a manner that</td>
</tr>
<tr>
<td>that recognizes their respective mandates and roles and enhances</td>
<td>recognizes their respective mandates and roles and enhances the</td>
</tr>
<tr>
<td>the effective utilization of their resources and their unique</td>
<td>effective utilization of their resources and their unique expertise.</td>
</tr>
<tr>
<td>expertise.</td>
<td></td>
</tr>
<tr>
<td>Underscores the importance of results-based management, within</td>
<td>The UBRAF includes the core and non-core resources of all 11</td>
</tr>
<tr>
<td>and across entities and at all levels of the UN Development System</td>
<td>Cosponsors and the Secretariat. However, UNAIDS’ ability to report</td>
</tr>
<tr>
<td>as an essential element of accountability.</td>
<td>meaningful country-level results against the resource allocations</td>
</tr>
<tr>
<td></td>
<td>to individual Cosponsors has been called into question. The PCB</td>
</tr>
<tr>
<td>Requests the United Nations funds, programmes and specialized</td>
<td>has challenged the Joint Programme to ensure there is a clear link</td>
</tr>
<tr>
<td>agencies, as appropriate, that have not already done so, to implement</td>
<td>between resources and results. In follow up, UNAIDS developed a</td>
</tr>
<tr>
<td>integrated results and resource frameworks aligned to their strategic</td>
<td>more detailed and prioritized results framework for 2016–2021 that</td>
</tr>
<tr>
<td>plans in order to strengthen results-based budgeting.</td>
<td>provides a complete results chain from inputs through to impact.</td>
</tr>
<tr>
<td>Notes the importance of the contribution of the UN Development</td>
<td>UNAIDS consistently amplifies the voice of the voiceless and works</td>
</tr>
<tr>
<td>System—with the aim of supporting government efforts to achieve</td>
<td>to advance the broader health, development and human rights</td>
</tr>
<tr>
<td>the SDGs based on full respect for human rights— and stresses in</td>
<td>agendas in order to truly ensure that no one is left behind.</td>
</tr>
<tr>
<td>this regard that all human rights are universal, indivisible</td>
<td></td>
</tr>
<tr>
<td>interdependent and interrelated.</td>
<td></td>
</tr>
<tr>
<td>Calls upon all entities of the UN Development System to continue to</td>
<td>The Secretariat Gender Action Plan is a comprehensive plan with</td>
</tr>
<tr>
<td>promote women’s empowerment and gender equality.</td>
<td>clear strategic areas of action and targets.</td>
</tr>
<tr>
<td>Encourages the UN Development System to intensify its collaboration</td>
<td>UNAIDS convenes transformative, inclusive partnerships to unite the</td>
</tr>
<tr>
<td>with results-oriented, innovative national, regional and global</td>
<td>United Nations system, governments, people living with HIV, civil</td>
</tr>
<tr>
<td>partnerships.</td>
<td>society, the private sector, major financing institutions,</td>
</tr>
<tr>
<td></td>
<td>academia, science, the media and influential public figures. These</td>
</tr>
<tr>
<td></td>
<td>partnerships aim to bring about systemic change on critical drivers</td>
</tr>
<tr>
<td></td>
<td>of the epidemic.</td>
</tr>
<tr>
<td>Urges the UN Development System to mobilize multiple funding</td>
<td>The Global Review Panel is expected to facilitate UNAIDS’ efforts to</td>
</tr>
<tr>
<td>sources and deepen partnerships with other relevant stakeholders,</td>
<td>broaden its resource mobilization modalities.</td>
</tr>
<tr>
<td>with a view to diversifying potential sources of funding.</td>
<td></td>
</tr>
<tr>
<td>Urges the entities of the UN Development System to further explore</td>
<td></td>
</tr>
<tr>
<td>innovative funding approaches to catalyse additional resources.</td>
<td></td>
</tr>
</tbody>
</table>
REFINING AND REINFORCING THREE FUNDAMENTAL PILLARS OF UNAIDS

This paper is for the consideration of the Global Review Panel at its first meeting on 20 January 2017.

The what of UNAIDS—the contribution of the Joint Programme within the AIDS ecosystem—is widely acknowledged and appreciated, particularly its role in strategic information, political advocacy, country guidance on global norms, giving voice to people living with and affected by HIV and supporting civil society. UNAIDS’ role was the subject of a consultative, multi-stakeholder process in 2015–2016 that resulted in the UNAIDS 2016–2021 Strategy.

The Global Review Panel has been tasked to focus on how UNAIDS works, specifically on three fundamental pillars of the Joint Programme: financing and accountability, joint working and governance. A clear review, aimed at reinforcing strengths and addressing shortcomings, is critical to ensuring that UNAIDS adapts to the current context so that it can continue to serve as a model to the United Nations system and more effectively play its critical supporting role to countries as they aim to end the AIDS epidemic.

KEY ISSUES WITHIN THREE FUNDAMENTAL PILLARS OF THE JOINT PROGRAMME

Financing and accountability

- Alignment between expected results and the resource envelope.
- Cosponsor-Secretariat funding relationship and allocation formula.
- The Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund)-UNAIDS funding relationship.
- Accountability for results.

Joint working

- Division of Labour and optimal use of Joint Programme resources at global, regional and country levels.
- Operational engagement of all key stakeholders in country responses.

Governance

- Policy and strategy coherence between the Joint Programme and Cosponsors.
- Policy and strategy engagement of all key stakeholder constituencies.
FINANCING AND ACCOUNTABILITY

Financing

Within the 2016 QCPR process, Member States have acknowledged that a critical mass of flexible core resources is required by the UN Development System and that pooled, thematic and joint funding mechanisms should be given priority within non-core contributions. (8) UNAIDS, which relies entirely on voluntary contributions, is a good example of the volatility in voluntary core funding experienced by the UN Development System in recent years. The UNAIDS UBRAF brings together the core and non-core AIDS budgets of 11 Cosponsor agencies and the Secretariat into a unified budget, work plan and accountability framework. For the better part of two decades, fundraising for the Joint Programme has matched the ambition and expectations of the PCB expressed within the UBRAF and its predecessor, the Unified Budget and Workplan. However, since 2010 a gap has emerged between the PCB-approved core budget and funding provided by donors. The Joint Programme undertook efficiency measures, including Secretariat staff reductions, that effectively capped the biennial budget at US$ 485 million over the last seven years. Despite these measures, the funding gap steadily widened from under 2% in 2010–2011 to 6% in 2012–2013 to 11% in 2014–2015. (9)

In late 2015, shortly after the PCB adopted the ambitious UNAIDS 2016–2021 Strategy and the 2016–2017 budget, several major donors further and dramatically reduced their contributions. By late 2016, the funding gap had widened to 28% and the projected funding shortfall for 2017 was similar. (10) Despite the welcome of new funding commitments made by several Member States at the 39th meeting of the PCB, 6–8 December 2016, funding for 2017 is still expected to fall significantly short of the budget.

The disconnect between the global ambition on AIDS and the level of financing for UNAIDS threatens the sustainability of the Joint Programme’s unique business model. The extent of the budget shortfall has also called into question the funding relationship between the Secretariat and Cosponsors. When UNAIDS was first established by ECOSOC, joint fundraising was envisioned only for global functions with Cosponsoring agencies expected to use their existing fundraising mechanisms for country-level activities. (11) However, over the next 20 years, fundraising by the Secretariat was sufficient to cover the core needs of the Secretariat and Cosponsors and was reflected in the PCB-approved budgets. In the light of the financial challenges now facing the Joint Programme, the amount of core funding to Cosponsors has been substantially reduced. Cosponsors with more robust and diversified financing mechanisms appear better able to adjust to the UBRAF cuts, while others with limited short-term options have been forced to make significant reductions in staffing levels and activity budgets. Under this difficult financial situation, a differentiated approach to resource allocation requires consideration.

In the meantime, the PCB encouraged Cosponsors to strengthen their resource mobilization efforts—a difficult assignment within a more general challenging funding climate for the United Nations. While stressing the importance of the flexible core UBRAF funds, Cosponsors reported limited capacity to reallocate any non-core HIV funding to core functions and deliverables. (12) A potential resource mobilization strategy could be the development of specific joint initiatives, modelled on the successful Global Plan to eliminate new HIV infections among children and keep their mothers alive. However, increasing the levels of non-core, earmarked funding could leave the Joint Programme’s financial situation unstable.

Delivering as One pilots have addressed the predominance of earmarked funding through the establishment of country-level One UN Funds, which have proven to be an important incentive for United Nations organizations to work together. (13)

“The Joint Programme is uniquely placed to continue to support conditions for health and wellbeing among the most marginalized—particularly at country level. In this context, our communities can neither understand nor accept that the global community endorses stirring language on the end of AIDS on one hand yet on the other fails to finance the Joint Programme which plays such a key role in the global response.”

Laurel Sprague
Regional Coordinator of GNP+NA, the North American affiliate of the Global Network of People Living With HIV
NGO Delegate, North America, UNAIDS Programme
Coordinating Board
Speaking at the UNAIDS Financing Dialogue
The UBRAF aims to maximize the coherence, impact and accountability of the United Nations system response to AIDS through the inclusion of the planning and performance monitoring of 11 Cosponsors and the Secretariat within a single joint framework. The Joint Programme Monitoring System web-based tool enables reporting against the UBRAF at country, regional, global, organizational, system and thematic levels to be captured in a timely and uniform way.

Previous UBRAFs and performance reporting has been viewed by some constituencies as overly long, complex and opaque. The United Kingdom included UNAIDS in a 2016 Multilateral Development Review of 38 multilateral institutions that the country funds through its Department for International Development. The assessment of UNAIDS, which was based on evidence collected up until the end of 2015, reconfirmed that UNAIDS plays a critical leadership and standard-setting role globally and praised its cost-cutting efforts to date. (15) The assessment also noted that the Joint Programme “clearly contributes to national and international efforts in-country”. However, it found limited documented evidence on the impact of UNAIDS’ work at country level—related, it said, to weaknesses in results management and reporting—with gaps in the evaluation function and lack of transparency in budget allocation and execution. (16) Particular criticism was levelled at UNAIDS’ reporting of the work of Cosponsors, stating it was “unclear why UNAIDS continues to provide core HIV funding to Cosponsors and what value this delivers”.

The PCB has challenged the Joint Programme to ensure there is a clear link between resources and results. In 2015, the PCB established a working group to review and guide further development of a more detailed results and accountability framework. The group found insufficient clarity on the roles and functions of the Secretariat and Cosponsors within the UBRAF. (17) It called for more prominent outputs and output descriptions, clearer explanation of the framework’s boundaries and limitations and strengthened reporting on the use of non-core funding. (40)

In 2016, the Secretariat and Cosponsors put in place a more detailed and prioritized UBRAF for 2016–2021 that provides a complete results chain from inputs through to impact. The working group praised the revised UBRAF for major improvements, including:

- A clearer and simpler structure.
- A stronger link between resources and results.
- Explicit criteria for the allocation of resources.
- Fewer and prioritized outputs (20 compared to 64 in the 2012–2015 UBRAF).
- Improved reflection of regional differences and priorities.
- More clarity on the roles and functions of the Cosponsors and the Secretariat.
- A theory of change linking UBRAF outputs to higher-level results, explaining how the Joint Programme contributes to outcomes and impact. (40)

An early test of the new UBRAF will be whether the end-2016 reporting—to be presented to the June 2017 PCB meeting—better demonstrates the collaborative results of the Joint Programme and clearly links those results to expenditures made against the unified budget.
The breadth of reporting to the PCB also requires consideration. Current reporting is focused on the core UBRAF resources mobilized by the Secretariat. However, the core budget of US$ 485 million is just 13% of the total HIV funds of the Cosponsors and the Secretariat. The overall total includes US$2.1 billion World Bank loans and grants, US$ 0.4 billion in Global Fund grants managed by UNDP in conflict, post-conflict situations or other challenging environments and US$ 670 million Cosponsors non-core budgets. Outside the United Nations system, there are considerable additional resources dedicated to the AIDS response. If the PCB is asked to play a broader role in policy discussion and oversight of the wider global response, its purview over these resources may also need to be considered.

**ILLUSTRATIVE QUESTIONS ON FINANCING AND ACCOUNTABILITY FOR CONSIDERATION BY THE PANEL:**

1.1. As a voluntarily funded joint programme, how do UNAIDS and the PCB better align the ambitious results demanded in the UBRAF with resource mobilization?

1.2. Could a differentiated approach to allocation to Cosponsors better ensure that the Joint Programme efficiently contributes to progress towards the commitments in the 2016 Political Declaration? How can the resource allocation model better respond to performance and the overall resource envelope? What criteria should be used to decide on the share of the core budget allocated to, and among, Cosponsors?

1.3. Should specific joint initiatives aligned with the UNAIDS 2016–2021 Strategy be developed to mobilize more non-core resources for Cosponsors?

1.4. As a critical partner to the Global Fund, following its successful replenishment, what opportunities exist to finance UNAIDS to play its unique role in the maximization of results against Global Fund investments, while protecting the intergovernmental nature of the Joint Programme?

1.5. How can results-based planning, management and reporting be used to further reinforce strong performance of the Joint Programme, incentivize joint work and reallocate resources to fill gaps in United Nations support?

1.6. Should the Joint Programme, individual Cosponsors and the Secretariat provide detailed reporting on all resources and all AIDS-related work—core as well as non-core—to the PCB? Equally, should the PCB consider the wider Joint Programme resource envelope in the context of the financing of the entire AIDS response?

**JOINT WORKING**

A step change in United Nations coordination is needed to tackle the integrated and indivisible nature of the SDGs and targets. Such an approach is consistent with efforts to bring AIDS further out of isolation, including through the inclusion of targets on tuberculosis and hepatitis in the 2016 Political Declaration and increasing attention to the linkages between HIV and cervical cancer, human papillomavirus, noncommunicable diseases and emerging and re-emerging diseases. The UNAIDS 2016–2021 Strategy is aligned to the SDGs, focused on achieving SDG Goal 3. Target 3.3: By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases—as well as contributing to the achievement of broader health, development, human rights, including sexual and reproductive health rights, and gender outcomes of the SDGs.
How to operationalize the step change needed to take the AIDS response further out of isolation and address the shared determinants of a range of health outcomes remains a key question. At headquarters level, dedicated AIDS units within Cosponsoring agencies have taken forward their lead areas and helped maintain commitment and engagement in the response over the past two decades. However, this approach may also limit opportunities to further integrate AIDS into other relevant work of the agencies.

A similar situation exists at country level. Joint UN Teams on AIDS are generally regarded as higher performing working groups within the Resident Coordinator System, reducing duplication of efforts and producing visible results. (18) Managing integration within UN Country Teams presents both opportunities and challenges. On one hand, Joint UN Teams on AIDS may need reorientation to support efforts to integrate AIDS-related activities within other health initiatives, as well as to ensure synergies and health system strengthening. On the other hand, integration of joint action on AIDS within sectoral coordination groups of UN Country Teams must find ways to retain the multisectoral nature of the AIDS response during this critical Fast–Track phase.

An agreed Division of Labour guides operational coherence at global, regional and country levels. However, the Division of Labour can sometimes serve as a barrier to the provision of United Nations technical support in key areas of the response if the lead Cosponsor does not have in–country presence or is unable to dedicate sufficient human and financial resources.

The existence of a dedicated secretariat at global, regional and country levels has facilitated more consistent coordination among the United Nations agencies within the Joint Programme. The need to adequately resource secretariats was identified as a principal lesson learned within broad review of global partnerships, including Gavi, The Vaccine Alliance, the Global Alliance for Improved Nutrition, the Global Water Partnership and UNAIDS (19) However, coordination and collaboration outside the sphere of Cosponsors has been mixed. The work of UNAIDS includes engagement of relevant sectors and civil society within the AIDS response with normative guidance, epidemiological and response data and technical support produced by the Joint Programme used by a number of partners, including the Global Fund and the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR). However, engagement with important entities with strong mandates in highly relevant areas—for example, the International Organization on Migration for human rights and migration—is limited. In addition, there are arguably many opportunities to scale up collaboration more systematically with the private sector beyond successful efforts such as drug pricing.

The potential of dynamic, multi-stakeholder partnerships is exemplified by the Global Plan to eliminate new HIV infections among children and keep their mothers alive. Co-led by UNAIDS and PEPFAR, the initiative included national AIDS responses from 21 countries that accounted for 90% of the global number of pregnant women living with HIV who were in need of services to prevent mother-to-child transmission of HIV. The remarkable progress made—including a 60% reduction in HIV infections among children—has been attributed to the initiative’s specific, time-limited plan; sense of urgency; focus on the most affected countries; national ownership; use of an inter-agency task team to coordinate the delivery of United Nations technical support; engagement of the private sector and other key partners; inclusive steering committee; strong leadership, and; results framework with clear targets and indicators.

Outside the Joint Programme, lessons on joint programming can be learned from the United Nations system’s Delivering as One pilot. An independent evaluation has found that transferring resources and authority for managing and allocating unearmarked funds to country level has allowed for a better and more flexible response to country needs and priorities. (20) Decisions on the allocation of the Joint Programme’s budget are made almost exclusively at headquarters level—a process that may limit opportunities for deeper and more flexible joint programming within Joint UN Teams on AIDS at country level.

United Nations joint programmes on gender equality also provide valuable lessons on joint working, including the importance of investing in performance management systems, the use of performance norms geared to coordination and the location of project coordinators in government ministries and departments. (21)
ILLUSTRATIVE QUESTIONS ON JOINT WORKING FOR CONSIDERATION BY THE PANEL

2.1. What incentives, tools and processes can be put in place to enhance joint United Nations work on AIDS and to integrate this work within Cosponsors’ specific mandates to deliver on the SDGs?

2.2. How can the Division of Labour among Cosponsors and the Secretariat be refined to strengthen joint work and accountability to deliver on the areas in which each organization leads?

2.3. How can Cosponsors and the Secretariat better coordinate the deployment of human resources to ensure UN Country Teams have sufficient capacity to address the specific challenges and gaps in ending AIDS, especially in Fast-Track countries?

2.4. How can United Nations entities and other partners outside the Joint Programme be systematically and more strategically engaged at all levels to deliver a more coherent and integrated response befitting Agenda 2030?

GOVERNANCE

The PCB is recognized as an early and still quite unique example of inclusive, multi-stakeholder governance. The PCB provides a platform for governments, civil society and United Nations organizations to debate, identify shared interests and provide strategic direction to the Joint Programme.

With nongovernmental organizations (NGOs) serving as formal, non-voting participants, the PCB provides a critical space for the incorporation of the voices of people most affected by the epidemic into Joint Programme policies and guidance for countries. However, this unique policy forum may be underutilized. There is no systematic discussion and oversight of the wider global AIDS response between United Nations General Assembly High-Level Meetings on AIDS, which occur every five years.

In addition, not all constituencies of the AIDS response have a consistent voice in PCB discussions. Key stakeholders with limited opportunities for interaction with the PCB include: the private sector, including corporations that produce the bulk of medicines and other commodities for the AIDS response; private foundations that provide significant financial resources to the response; the scientific community and research entities charged with developing cutting-edge tools and approaches; United Nations entities outside the Joint Programme, including key bilateral agencies, and; young people whose future is at stake. Some of these stakeholders have been invited to participate in PCB discussions on an ad hoc basis. Upon request, observer status in the PCB may be granted.

Another challenge is linkages between the policy discussions and decisions of the PCB and the boards of the Cosponsors. Member States do not always provide coherent policy direction within these forums. The CCO—comprised of Cosponsor heads of agencies and the Secretariat, or their specifically designated representatives—facilitates the input of Cosponsors into the strategy, policies and operations of the Joint Programme. The CCO was initially conceived as a standing committee of the PCB. In practice, however, the PCB Bureau 1 plays a role similar to a standing committee. In recent years, the PCB deliberations most often taken up by the CCO relate to strategy, budget and financing matters rather than in-depth strategy and policy debate related to the AIDS response. The ability of the CCO to ensure policy coherence between the PCB and the boards of the Cosponsors is limited. Within an SDG era that demands greater integration of efforts to achieve Agenda 2030, the functioning of the CCO within the wider UN Development System requires particular consideration.

1 The PCB Bureau is comprised of representatives of the officers of the PCB (Chairperson, Vice-Chairperson and Rapporteur), the Chair of the Committee of Cosponsoring Organizations and the UNAIDS PCB NGO delegation.
Experiences outside the Joint Programme suggest that most multi-stakeholder partnerships face challenges within their governance arrangements. A 2012 review of the governance of global partnerships identified the following challenges: ensuring there are appropriate strategies with realistic and attainable goals; ensuring that adequate resources are available for the appropriate strategies; putting accountability systems in place for the measurement and evaluation of performance and progress; ensuring that decision-making is efficient and to good effect; having roles and responsibilities that are clear and well understood, and; ensuring that the partnerships themselves are purposeful and predicated on clearly understood mutual accountabilities. (22)

The review identified a number of good governance practices for the governing boards of global partnerships, including: the importance of risk management as a shared responsibility of boards and management; transparency in decision-making and performance reporting; clear systems of accountability; a culture of commitment, collaboration, learning and accepting responsibility; published annual performance targets for boards; collective and individual objectives and work plans for board members and 360-degree annual appraisals, and; periodic external and independent reviews of governance. The review noted that many of these fundamental requirements for good governance have been lacking in global partnerships. (23)

**ILLUSTRATIVE QUESTIONS ON GOVERNANCE FOR CONSIDERATION BY THE PANEL:**

2.1. While the United Nations General Assembly periodically sets political direction through its High-Level Meetings on AIDS, how can the PCB provide appropriate policy guidance and oversight to the wider global AIDS response in support of the United Nations General Assembly’s commitments?

2.2. How can the CCO enhance the effectiveness and oversight of the Joint Programme through its greater integration into wider efforts by the United Nations system to deliver on the SDGs?

2.3. How can the PCB and the CCO better serve as a link between the PCB and the boards of Cosponsors in order to improve policy coherence within the UN Development System and addresses accountability concerns?

2.4. Several important stakeholders in the AIDS response are not represented on the PCB. How can these stakeholders be brought into PCB discussions in more structured and systematic ways?
This background paper is for the consideration of the Global Review Panel at its first meeting on 20 January 2017. At that meeting, panel members will deliberate on the fundamental pillars of the business model: financing and accountability, joint working and governance; in particular, the illustrative questions related to each. These questions will be refined and finalized for consultation.

The final set of questions will be the focus of a multi-stakeholder consultation including members of the panel, members of the PCB, civil society, implementers, the private sector and other global, regional and national leaders as well as representatives of the Secretariat and Cosponsors. This consultation will be conducted in online virtual sessions over a two-week period in early February, under the leadership of the panel Co-Chairs, Awa Marie Coll-Seck, Minister of Health, Republic of Senegal and Lennarth Hjelmåker, Ambassador for Global Health, Sweden.

The inputs of the online virtual consultations will serve as a primary input for the draft report of the Global Review Panel. The draft report, featuring draft recommendations of the panel, will be prepared by the Co-Chairs and shared with panel members ahead of its second meeting, scheduled for 15 March 2017. At the second meeting, panel members are tasked with achieving consensus on its final analysis and recommendations. The Co Chairs will then finalize the panel report and present it to the Co-Convenors, Michel Sidibé, UNAIDS Executive Director and Helen Clark, UNDP Administrator.

The Co-Convenors are charged with using the panel report as the basis for deliberations within the CCO on a revised operating model for the Joint Programme. This revised operating model will be informed by a second multi-stakeholder consultation, to be held in late April. Stakeholder inputs will be incorporated into a final proposed operating model and a 2018–2019 budget to be considered by the PCB at its June 2017 meeting.
The Joint United Nations Programme on HIV/AIDS (UNAIDS) leads and inspires the world to achieve its shared vision of zero new HIV infections, zero discrimination and zero AIDS-related deaths. UNAIDS unites the efforts of 11 UN organizations—UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, UN Women, ILO, UNESCO, WHO and the World Bank—and works closely with global and national partners towards ending the AIDS epidemic by 2030 as part of the Sustainable Development Goals. Learn more at unaids.org and connect with us on Facebook, Twitter, Instagram and YouTube.
REFERENCES


5. Secretary-General-designate António Guterres' remarks to the General Assembly on taking the oath of office. 12 December 2016


7. UNAIDS. UNAIDS Secretariat presentation to the 39th meeting of the Programme Coordinating Board Agenda item 5. Unified Budget, Result and Accountability Framework (UBRAF), December 2016.


16. Ibid.


23. Ibid.