



UNAIDS/PCB(20)/07.20
26 July 2007

**Report of the Twentieth Meeting of the UNAIDS
Programme Coordinating Board
Geneva, Switzerland
25–27 June 2007**

1. Opening

1.1 Opening of the meeting and adoption of the provisional agenda

The twentieth meeting of the UNAIDS Programme Coordinating Board (PCB) took place at the Geneva International Conference Centre (CICG) in Geneva, Switzerland, on 25–27 June 2007. The agenda for the meeting is attached as Annex 1.

Sweden as the outgoing Chair of the PCB opened the twentieth meeting of the PCB and welcomed all members and others in attendance. Ambassador Hjelmåker (Ambassador HIV and AIDS Matters, Sweden) on behalf of the Swedish Minister for International Development Cooperation, Gunilla Carlsson, expressed the honour and pleasure it had been for Sweden to serve as chair of the PCB. In recalling the various challenges and landmarks of 2006, the Chair referred to the High Level Meeting on AIDS in June 2006 and the importance of turning political commitments and promises into action on the ground. The *2007–2010 strategic framework for UNAIDS support to countries' efforts to move towards universal access*, endorsed at the 19th PCB in Lusaka, would provide guidance in this respect. Sweden stressed the importance of national ownership and priority setting, driven by government leadership and fully inclusive of civil society participation; the need to keep AIDS and security issues—on which an in-depth discussion was started in Lusaka at the 19th PCB meeting—high on the agenda; advocacy for tapping the full potential of civil society and the private sector in the response; and the continuing need to address women's vulnerability and sexual rights, as gender inequality remains a persistent driver of the epidemic.

The provisional agenda (UNAIDS/PCB(20)/07.1/Rev.1) was adopted without amendments.

1.2 Election of officers

In accordance with agreed procedures, Thailand, the previous Vice-Chair, was elected as the new chair of the PCB. The United States of America was elected as Vice-Chair and Senegal as Rapporteur.

The PCB also welcomed and approved the new NGO delegates of the PCB beginning 1 January 2008:

Africa: Cameroonian Network of Associations of People Living with HIV and AIDS (RECAP+), represented by Mr James Clovis Kayo, delegate; Southern African Network of AIDS Service Organizations (SANASO), represented by Ms Mercy Machiya, alternate delegate.

Asia Pacific: The 7 Sisters, Thailand, represented by Mr Vincent Crisostomo, delegate; AntiAIDS Association Kyrgyz Republic, represented by Ms Gulnara Kurmanova, alternate delegate.

Europe: Russian Harm Reduction Network, represented by Mr Vitaly Zhumagaliev, delegate; Action Against AIDS, Germany, represented by Dr Sonja Weinreich, alternate delegate.

Latin America and the Caribbean: Rede Latino-Americana de Redução de Danos (RELARD), represented by Ms Sandra F Batista, delegate; Bolivian Network of People Living with HIV/AIDS (REDBOL), represented by Ms Gracia Violeta Ross, alternate delegate.

North America: Interagency Coalition on AIDS and Development (ICAD), represented by Mr Michael O'Connor, delegate; International Women's Health Coalition, represented by Ms Zonibel Woods, alternate delegate.

In accepting the position of Chair, His Excellency Dr Mongkol na Sonkha (Minister of Public Health of Thailand) said that access to affordable drugs remains a promise that has fallen short of its target, and that many developing countries have fragile health systems that need strengthening, a challenge often worsened by loss of trained staff. He advocated the need to address the social dimensions of AIDS, in particular stigma, discrimination and gender inequalities and challenged the PCB to come up with unconventional and innovative, yet collective and constructive ways to respond to the epidemic.

1.3 Consideration of the reports of the 18th and 19th meetings

The PCB considered and approved the respective reports of the eighteenth (UNAIDS/PCB(18)06.18) and nineteenth (UNAIDS/PCB(19)06.19) meeting of the PCB.

1.4 Report by the Chairperson of the Committee of Cosponsoring Organizations

On behalf of Ms Josette Sheeran (Executive Director, World Food Programme), Ms Sheila Sisulu (Deputy Executive Director, WFP), represented the WFP as Chair of the CCO and presented its report to the PCB.

In terms of UN reform, UNAIDS has proven to be a leader in improving system-wide coherence at all levels. The proliferation of funding mechanisms and donors in the AIDS arena and the subsequent need for increased global coordination, harmonization and donor effectiveness underscored UNAIDS' role in this regard.

As the two critical areas for future delivery by the UNAIDS family, the CCO Chair stated there were two critical areas in which the UNAIDS family would need to deliver in the future. These were support to the scale-up of universal access and "making the money work", which were both firmly embedded in the 2008–2009 Unified Budget and Workplan (UBW). Developed through a consultative and transparent process, the new UBW has become more strategic, coherent, results-oriented, harmonized and accountable, allowing to better measure impact of UNAIDS support at country level. Focus areas would be capacity-building at the national level to lead the response; the drivers of the epidemic, such as gender and the position of vulnerable groups; and gaps in prevention, such as prevention of mother-to-child transmission. Overall, emphasis in the new UBW would be on country-level interventions in line with the "Three Ones" and the UNAIDS Strategic Framework.

With regard to the Global Task Team (GTT) recommendations on harmonization and alignment within the UN System, the Secretariat and Cosponsors have consistently supported their implementation, and progress continued to be made in terms of joint teams and joint programming as well as the division of labour. With respect to progress regarding national target-setting since the 2006 High Level Meeting on AIDS, the CCO chair highlighted expanded country support by cosponsors and the secretariat, but urged collaboration with the Global Fund to Fight AIDS, Tuberculosis and Malaria (the Global Fund) and the USA President's Emergency Plan for AIDS Relief (PEPFAR), and noted that the meaningful involvement of civil society would be critical to this process.

1.5 Report of the Executive Director

Dr Piot, Executive Director of UNAIDS, recalled a number of key political developments since the 19th PCB meeting that indicated renewed political commitment at the international level: the commitment to AIDS as a priority for the entire UN System as pledged by the new UN Secretary-General, Mr Ban Ki-Moon; and the election of Michel Kazatchkine as Executive Director of the Global Fund to Fight AIDS, Tuberculosis and Malaria.

Dr Piot emphasized that in spite of rising expenditures on AIDS in low- and middle-income countries in 2007, there is still a global shortfall of US\$ 8 billion, indicating the need for increased and alternative sources of funding. He commended the World Bank Multi Country HIV/AIDS Programmes for Africa, the Global Fund and PEPFAR as the main mechanisms in funding the response.

This was a period of consolidation for UNAIDS where the transition was being made from assistance to national target-setting to implementation of national plans and aligning of partners around this implementation. These processes are aided by the Technical Support Facilities that are now operational in 60 countries, and by concrete efforts to increase the meaningful involvement of civil society. In terms of results and accountability, the new 2008–2009 UBW was based on the agreed technical division of labour among the Cosponsors and included tools to better measure progress and impact at the country level: the budget reflected a maturity that should lead to better delivery on the ground.

Concrete initiatives led by UNFPA and the Secretariat have been taken to increase coherence in programming for young people, as requested by the PCB. Implementation coherence is achieved when Cosponsors deliver according to the agreed division of labour while the Secretariat focuses on its five core functions approved by the PCB. UN system-wide coherence as a core aspect of UN reform is illustrated by the continued creation of Joint UN Teams on AIDS, of which there are currently over 65, and joint programmes on AIDS, and UNAIDS was participating actively in six of the eight pilots of “One UN”.

Dr Piot highlighted HIV prevention as the area in need of increased action, and announced the release of guidelines on male circumcision, provider-initiated counselling and testing, as well as an internal UN guidance note on AIDS and sex workers. He emphasized the multisectoral nature of prevention and called for increased action on prevention, citing that for every person beginning antiretroviral treatment, six new people become infected with HIV. On the issue of treatment, Dr Piot cautioned that the current pace of scale-up would not enable sufficient progress towards the goal of universal access by 2010. He also emphasized the need to integrate treatment of HIV and tuberculosis (TB), as TB is the main cause of illness and death in people with HIV.

In looking at the future, Dr Piot reiterated his concerns on sustaining an effective long-term response to the epidemic and informed delegates about the AIDS 2031 initiative, whereby different institutions have agreed to work on seven critical issues, including modelling the epidemic, sustaining leadership and financing the response. He also noted that much has changed globally in terms of the epidemic and the response, and proposed a second independent evaluation of UNAIDS to assess its future role.

The PCB welcomed the reports of the CCO and the Executive Director and concurred with many of the challenges and achievements described by the Executive Director, echoing his call for consolidation. In response to the CCO report, the NGO delegation made mention of the first meeting held between the NGO delegation and the Global Coordinators, expressing the wish that this dialogue be continued to enable increased collaboration.

The PCB noted progress made at the country level with respect to UN system-wide coherence, and lauded UNAIDS as a leader of UN reform. At the same time, discrepancies were noted by delegates between policies agreed to and commitments made at the global level and implementation at the national level. This applied to both the UN family and the donor community, with instances of donors continuing to fund individual agency programmes rather than an agreed joint programme, and UN agencies continuing to design and implement programmes outside of agreed frameworks. The PCB called for improved collaboration and adherence in this respect on the part of all partners and queried whether monitoring and accountability mechanisms and incentives could be devised or improved.

The PCB expressed appreciation for the renewed emphasis on prevention and welcomed UNAIDS' leadership in this regard. However, some delegates expressed concern regarding the guidelines on male circumcision, cautioning that they may create confusion. It was felt some wording in the internal UN guidance note on AIDS and sex workers was inappropriate and that inadequate consultation of civil society and sex workers in particular, had taken place.

The PCB noted the importance of linking the AIDS agenda with the overall development agenda and the importance of stressing the synergies between the AIDS response and developmental goals. Several delegates also advocated the continued integration of HIV related services with sexual and reproductive health, family planning and sexually transmitted infection services.

The PCB strongly supported the work being done to reduce gender inequality and advocated continued focus on this and other drivers of the epidemic, in particular stigma and discrimination. The PCB also reiterated the importance of active and meaningful engagement of civil society in all aspects of the response. The PCB acknowledged the importance of the long-term response, including the need for sustainable and predictable funding. Finally, the PCB welcomed the suggestion by the Executive Director to initiate a second independent evaluation of the Joint Programme.

The PCB decisions and recommendations for this item are contained in Annex II "Decisions, Recommendations and Conclusions of the 20th Programme Coordinating Board Meeting", paragraphs 5.1–5.3.

1.6 Report by the NGO representatives

On behalf of the NGO delegation to the PCB, Ms Zonibel Woods (International Women's Health Coalition) presented the report of the NGO Representatives (UNAIDS/PCB(20)/07.2). The NGO delegation expressed concern about the process and scale of target-setting in many countries, with often limited involvement of civil society, and insufficient attention to prevention targets. The NGO delegation reminded

the PCB of commitments in the *2006 Political Declaration on HIV/AIDS* regarding prevention among youth who are disproportionately at risk of infection. It also observed the slow pace of scale-up in access to treatment and referred to commitments made at the Group of Eight (G8) Gleneagles summit. The NGO report highlighted gender inequality as a driving and perpetuating factor of the epidemic, often aggravated by gender-based violence. The report further noted the large gap in prevention of mother-to-child transmission coverage as a simple and effective means of HIV prevention, and requested that efforts be undertaken to bring national guidance on this issue to be in line with the WHO revised guidelines. The NGO report welcomed UNAIDS' commitment to tackling the related issues of TB and HIV and called for increased integration of TB and HIV prevention and treatment programmes.

The NGO delegation further observed that marginalized communities such as injecting drug users often did not benefit from comprehensive prevention and treatment programmes, including harm reduction, due to insufficient financial and political commitment. It also stated that the three pillars approach to sex workers represented a dilution from established rights based approaches, and recommended that the internal guideline on working with sex workers be revised. Lastly, the NGO delegation welcomed steps in certain countries towards decriminalization of homosexuality, yet observed that homophobia remained an important obstacle to comprehensive HIV programming.

The PCB thanked the NGO delegation for a highly informative and comprehensive report that highlighted crucial issues such as stigma and discrimination and illustrated once more the indispensable role of civil society in the response. Support was expressed for many of the recommendations in the NGO report but that most referred to other items on the PCB agenda and should be considered accordingly.

The PCB decisions and recommendations for this item are contained in Annex 2 "Decisions, Recommendations and Conclusions of the 20th Programme Coordinating Board Meeting", paragraph 6.1.

2. 2008–2009 Unified Budget and Workplan and Financial Report

Ms Debbie Landey (Deputy Executive Director, Management and External Relations, UNAIDS), together with Mr Michel Sidibe (Deputy Executive Director, Programmes, UNAIDS), Ms Robin Jackson (Chief, HIV/AIDS Service, WFP) and Dr Paul De Lay (Director of Evidence, Monitoring and Policy, UNAIDS) introduced the UNAIDS 2008–2009 Unified Budget and Workplan and Financial Report (UNAIDS/PCB(20)/07.3). The UBW was presented in four parts: overview, country implementation and partnership focus, thematic focus on prevention, and accountability.

In the overview, Ms Landey described how the UBW represents expected strategic results for the ten Cosponsors and the Secretariat that aim to contribute to achieving universal access by 2010 and realizing Millennium Development Goal 6 by 2015. The UBW has harmonized its taxonomy in line with OECD/DAC language and has been simplified by reducing the number of outcomes, outputs, activities and indicators. The UBW is fully embedded in terms of coherence by applying the technical division of labour throughout and emphasizing joint programming at the country level. Accountability has been strengthened by applying results-based budgeting and enhancing mechanisms such as the Performance Monitoring and Evaluation

Framework. In response to the call from the PCB to improve the flexibility of the UBW, a mid-term review has been introduced, as well as a contingency fund. In this respect, the PCB was also requested to approve a discretionary re-allocation of resources by the Executive Director between principal outcomes of 10% and the ability for the Executive Director to programme and disburse additional funds raised in excess of 10% of the approved budget.

Ms Landey described the strong relation between the UBW and the 2007–2010 Strategic Framework: all seven principal outcomes of the UBW, to which specific outputs and activities are attached, are directly linked to the five strategic directions of the framework. The Board was requested to approve the core budget of US\$ 468.8 million, with a proposed distribution as follows: US\$ 134.7 million for cosponsors, US\$ 182.4 for the secretariat, US\$ 146.7 for interagency activities and US\$ 5 million for contingency. The core budget is complemented by Cosponsors' own regional/global and supplemental resources totalling US\$ 432.4 million.

Mr Sidibe spoke of how the UBW focused on making the money work for countries in terms of effective programme implementation by continuing the rapid roll-out of the GTT recommendations. Among other things, prioritized and costed national plans, streamlined fund flows and strengthened mechanisms for implementation would support scaling up the national response. UN effectiveness would be enhanced through joint teams and joint programmes of support that adopt a division of labour suited to the local context. Partnership with funding mechanisms would be maximized by optimizing grant utilization and leveraging additional resources. Through instruments like the technical support facilities and the Global Implementation Support Team (GIST), the UBW underscored the role of UNAIDS as a provider and clearing house for technical support. Accountability and implementation oversight would be improved through tracking of resource mobilization and expenditure and by applying annual review mechanisms, including oversight and monitoring mechanisms for joint teams and programmes.

Ms Jackson described how HIV prevention was an integral part of the drive for universal access and was integrated into all levels of the UBW, structured around programmatic thinking on prevention. To measure progress on HIV prevention the UBW includes a number of outcome and output indicators that will be reported on annually. Quantitative sources will be supplemented by other sources such as in-depth assessments to provide a comprehensive picture of progress and lessons learnt.

Dr De Lay described how accountability within the UBW would be enhanced by the Performance Monitoring and Evaluation Framework, currently under development. The Framework would include an indicators matrix and financial tracking that will allow progress monitoring, while evaluations will assess impact achieved. The mid-term review will allow for redirection of resources within the UBW. As all outcomes, outputs, activities and indicators are linked, the coherence will improve. By reducing the number of indicators, as well as outcomes and outputs, the Framework and UBW will become leaner and more accessible. By directly linking indicators to budget items the UBW will have improved accountability and applicability. Target-setting in relation to indicators and results based management has been applied where appropriate. In describing the budget overview Dr De Lay indicated the specific financial and reporting accountability of Cosponsors and the Secretariat. The mechanisms for accountability include reports, such as the Annual Report to the PCB and mid-term review, governance forums, such as the PCB and the CCO, and actions, such as directing Programme Acceleration Funds

only to countries with joint plans. The Performance Monitoring and Evaluation Framework remained a work in progress and its finalization was expected by the end of 2007.

The PCB thanked UNAIDS for the clear presentation on the UBW and commended the advances made in terms of simplification, harmonization and coherence as well as the focus on prevention, consolidation and implementation. The PCB anticipated the finalized Performance Monitoring and Evaluation Framework as a means to further enhance accountability and its subsequent inclusion in the UBW, and welcomed the proposed mid-term review which would enable re-direction of resources.

The PCB was encouraged by increased specificity in outcomes but recommended that the results-based approach be strengthened, in order for the UBW to contain clear targets and results, with indicators being linked to financial inputs. Some delegates also remarked that the new UBW may lack comparability with previous UBWs due to the changes in structure and methodology, as well as the decreased numbers of outcomes and outputs.

In terms of UN reform and coherence, the PCB recommended that more clarity could be achieved on the division of labour e.g. a single Cosponsor responsible for a specific output. The PCB observed some degree of duplication of roles and queried whether in certain cases double funding for similar activities could occur. Delegates also requested increased accountability for Cosponsors in terms of activity performance, and clarity in accountability between Secretariat and Cosponsors. Some delegates requested that Cosponsor resources on AIDS at the country level be included in the UBW.

The PCB noted that certain principal outcomes appeared to receive disproportionate attention in terms of funding and Cosponsor engagement. The PCB also expressed some concern in terms of geographical allocation of resources, in accordance with the burden of disease. Some delegates queried to what extent resources allocated to countries translated into actual implementation and activities at country level. Clarification was requested on the proportion of resources allocated for the Secretariat and staff costs, both in Geneva and at country level. Some delegates suggested that the UBW may include efficiency targets, in order to further enhance accountability, while allowing for savings to be reinvested in the budget.

The PCB recommended that the outputs and indicators in terms of the social dimension of the epidemic be well specified, with some delegates expressing concern on how performance in terms of gender equality and human rights would be measured. Some suggestions were made in terms of reallocating funds towards gender, girls and prevention of mother-to-child transmission.

The suggestion was made by one delegate to have a UBW with a four-year cycle.

Ms Landey introduced the proposal to the PCB for new discretionary authority for the Executive Director with respect to the programming and disbursement of funds received over the approved level of the budget (UNAIDS/PCB(20)/07.15). The discretionary authority would allow the Executive Director to reallocate funds, not exceeding 10% of the approved budget, between principal outcomes, which would increase flexibility. The authority would be subject to agreed procedures and open for review by the PCB after three years.

The PCB approved the discretionary authority.

Finally, Ms Landey presented the interim financial management information for the 2006–2007 biennium and financial update as at 30 April 2007. In response to a question from one delegate Dr Piot clarified that extra budgetary money can be used to fund joint programmes in specific countries or can be channelled through the Secretariat and encouraged additional funding be directed to Cosponsors.

The PCB approved the interim financial management information for the 2006–2007 biennium and financial update.

The PCB decisions and recommendations for this item are contained in Annex 2 “Decisions, Recommendations and Conclusions of the 20th Programme Coordinating Board Meeting”, paragraphs 7.1–7.15

3. UN and governance reform

3.1 UNAIDS and UN reform

Dr Piot presented the report on UNAIDS and UN reform (UNAIDS/PCB(20)07.12). The report was requested by the PCB at its 19th meeting to reflect the experience and lessons learnt by UNAIDS. Dr Piot stated that achieving system-wide coherence and “Delivering as One” is possible, as demonstrated by UNAIDS, but requires sustained political commitment and investment. Equally important was to focus on results and not on processes and mandates, while continually reflecting on the substance of delivery—in the general, the Millennium Development Goals, and more specifically for UNAIDS, the move towards universal access.

Dr Piot highlighted the complementary and important roles of the PCB and the CCO in moving the reform process forward; the PCB by taking far-reaching decisions, and the CCO for internal progression and change management. However, UNAIDS can only be as coherent as the member states are, and that coherence *within* member states is equally important. UN coordination on AIDS can never be a substitute for national leadership and ownership and requires the involvement of civil society, the business sector, large private foundations and other players. Dr Piot provided the GTT as an example of the most advanced set of proposals in terms of coherence and reform, to which there has been buy-in from a range of constituencies.

Dr Piot cited the difference in administrative systems of UNICEF, WHO and UNDP as a practical example of obstacles to coherence efforts. He also observed how donor practice can sometimes simultaneously support and undermine coherence by globally supporting coherence on the one hand, while funding individual cosponsor projects in country on the other hand. Also, not enough attention is paid to incentives, as related to performance appraisal and other human resources and financial incentives.

Dr Piot acknowledged that system-wide coherence was more complex than coherence on AIDS alone. A potential risk would be to align the UNAIDS speed of reform to general coherence efforts, which could result in an unaffordable slow-down in light of the response to the epidemic. He emphasized that the current momentum and climate of

goodwill must be fully exploited, and that UNAIDS would actively play its part in “One UN” pilot countries and keep moving on all recommendations of GTT. As a leader in UN reform, UNAIDS has the opportunity to ensure better linkages between AIDS and overall development efforts, which would be crucial for the long-term sustainable response.

The PCB thanked Dr. Piot for his clear and frank presentation, and commended UNAIDS for the progress made to date in terms of coherence and effectiveness, noting that UNAIDS remains a pathfinder in terms of UN reform. In this regard, the PCB urged UNAIDS to actively share its experiences within the UN system, both the achievements and the obstacles, to enable learning from these experiences at all levels. At the same time, the PCB requested that UNAIDS continue playing an active role in UN reform, especially at the country level, such as in the “One UN” pilot countries. To keep moving forward and in line with the GTT recommendations, the PCB requested that the division of labour at country level, as well as clarity on responsibilities and accountability be further established and adhered to. It was reiterated that the UBW be used as a tool to improve accountability, the division of labour and governance. Some member states added that all parties have a responsibility in terms of accountability and delivering on commitments made, including countries, UN agencies and donors.

The PCB welcomed the focus on results, rather than process, and noted this as a marker of progress. Some delegates suggested that the UN, in its process of reform, would attain a more strategic role at country level and be reconfigured at regional level to better service the UN teams in countries. The challenge of avoiding having too many parallel coordination mechanisms within the “One UN” framework was mentioned. Some delegates also queried how Cosponsor and Secretariat activities at country level would be integrated into the one programme and one budget under the Resident Coordinator, and invited UNAIDS to inform the Board on this and other matters related to implementation of the “Delivering as One” principles at a future PCB meeting.

The PCB acknowledged that within the donor community, greater coherence was desirable in terms of funding, and a number of delegates supported the request to fund the UBW rather than individual agencies. The importance of greater harmonization and alignment at a practical level was also recognized, with country government officials still spending a large proportion of time on missions and varied reporting requirements.

The PCB welcomed the remarks by Dr Piot on incentives and suggested they be institutionalized and reflected in job descriptions and performance management. The challenge of different budgetary systems among Cosponsors was recognized, and one delegate suggested that reform in operational systems would increase efficiency, especially at country level.

Support was expressed for national ownership of the reform agenda and caution given that the reform process must not be used to introduce new conditionalities, and that no “one size fits all” approach be used in the process. A challenge was observed in terms of preserving specific technical added value of specialized agencies while at the same time ensuring their full engagement in the reform process. Appreciation was expressed for the importance UNAIDS attaches to the relationship with civil society and to their role in the response.

The PCB decisions and recommendations for this item are contained in Annex 2 “Decisions, Recommendations and Conclusions of the 20th Programme Coordinating Board Meeting”, paragraph 8.

3.2 Results of the review of NGO/civil society participation in the PCB

At the 15th PCB in June 2004, an independent review of NGO/civil society participation in the PCB had been proposed. A summary of the outcomes of the review was presented by Ms Sarah Middleton-Lee (Consultant) with recommendations on next steps presented by Mr Michael O’Connor (Interagency Coalition on AIDS and Development, NGO delegate North America).

The findings of the review centred around five themes: a) official structures and processes relating to civil society participation in the PCB, b) composition and selection processes for NGO delegates, c) systems for communication and accountability among the NGO delegation and with broader civil society, d) capacity and resources for participation in the PCB, e) greater involvement of people living with HIV and other marginalized groups.

Ms Middleton-Lee reported that though UNAIDS’ involvement of civil society in its governance structure was hailed as ground-breaking, the profile and nature of the PCB itself were not perceived as fully conducive to optimal engagement by civil society. It was observed that even though the NGO delegation plays a critical role in the PCB, the delegation has no voting and chairing rights. She also reported that selection processes for the NGO delegation were perceived as insufficiently transparent and that the NGO delegation lacked a code of conduct and self regulation mechanisms. In terms of communication, the finding was that more could be done in consulting with broader civil society, such as regional networks. Though the UNAIDS secretariat was praised for providing essential support, limitations were observed in terms of administrative and informational infrastructures available to the NGO delegation. It was also suggested the Board could establish a specific seat for people living with HIV.

Mr O’Connor introduced the recommendations formulated by the NGO Delegation in follow-up to the independent review, as reflected in document UNAIDS/PCB(20)07.6/Rev.1. He stated that many issues raised were internal to the NGO Delegation and had already received follow-up action, such as the selection processes for new NGO delegates and improving communication and consultation with a wider range of networks. Those recommendations that were beyond the competence of the delegation, because they had either financial or constitutional implications, were being presented to the PCB for consideration. These included those concerning full speaking, voting and chairing rights which would require a new or amended ECOSOC resolution. Permanent staff support from the Secretariat was also requested as well as the creation of an independent Communication and Consultation Facility (CF) to strengthen communication and consultation.

In accordance with the decision of the PCB, consideration of the substance of this item was taken in conjunction with agenda item 3.3.

The PCB decisions and recommendations for this item are contained in Annex 2 “Decisions, Recommendations and Conclusions of the 20th Programme Coordinating Board Meeting”, paragraphs 9.1–9.4.

3.3 UNAIDS’ role in strengthening global coordination on AIDS and development of the PCB

Ambassador Hjelmåker introduced document UNAIDS/PCB(20)/07.7 which had been prepared in response to a request by the 19th PCB and based on consultations with PCB members and observers. The report contained eleven main proposals for change related to the nature, number and venue of meetings; field trips; meeting documents and consultation processes; strengthening of the constituency system for member states; drafting group; coherence and accountability; implementation of PCB decisions; coordination at country level; and election processes, including the selection of officers.

On civil society participation, the PCB fully recognized and appreciated the important role the NGO delegation plays on the Board. The PCB endorsed the abandonment of a speaking protocol, as already initiated following the 19th PCB meeting. Board members faced difficulty with the recommendation by the NGO Delegation to bestow full voting and chairing rights upon the NGO delegates, as is the case on the Global Fund Board. The PCB stated that this comparison was not fully adequate, as the Global Fund is a public-private partnership, while the UN is governed by its member states. As UNAIDS is part of the UN system, a change of voting arrangements would require an amendment to the ECOSOC Resolution. This would also apply to the recommendation to allocate an additional seat on the Board to people living with HIV. Therefore, this was not a decision to be taken by the PCB and it was recommended that the issue be reviewed in the overall context of UN reform. It could also be considered within the context of the proposed independent evaluation of UNAIDS. The PCB suggested alternative ways of enhancing the meaningful involvement of civil society in the PCB, and some delegates welcomed the suggestion of including civil society representation and people living with HIV on their own delegations. Other delegates suggested that critical empowerment of civil society begins at country level by inclusion of civil society in national planning efforts and in country consultations before country positions are taken. The NGO Delegation stated its disappointment with the stance of the PCB, with the noted exception of member states Brazil and El Salvador.

The recommendation relating to the Communications and Consultation Facility was welcomed by the PCB though more clarity was requested on the purpose and scope of this facility, the cost implications for the UBW, and the added value of such an entity. The PCB requested that this facility should promote NGO effectiveness at the country level by improving communication with governments, the UN and other partners and networks, as well as enhance NGO effectiveness within the PCB. It was also queried whether a facility already in existence could perform or enhance this work, in order to avoid duplication or a proliferation of similar entities.

The PCB supported the request for a permanent staff position within the Secretariat in support of civil society participation, with a query regarding the cost implication of this to the Secretariat.

With regard to the recommendations on strengthening global coordination on AIDS and development of the PCB, there was consensus on meetings having a decision-making and thematic segment, with the advice that there be clear strategic and effective links between the segments. In doing so, the PCB could in effect take on the role of international policy forum. In this respect, inviting key partners to contribute to thematic segments was welcomed, with the understanding that they be well prepared and focused.

Much discussion ensued on the number of meetings per year and the venue. The increase to having two fixed meeting per year was questioned, considering cost implications and overall international meeting frequency. Some delegates suggested extending PCB meetings or planning them back-to-back with other meetings such as the World Health Assembly in order to reduce meeting frequency and reduce costs. There was no consensus on the proposal to only have PCB meetings in Geneva with some delegates highlighting the need to cut costs and reduce demands on Secretariat staff time, while others proposed a more holistic approach, citing the value added of having meetings elsewhere, for instance by strengthening political commitment and leadership on AIDS in host countries. The proposal of having field trips, separate from PCB meetings, was welcomed by most delegates as a way to enhance closer engagement with reality on the ground. Other delegates argued that this was the prime advantage of having PCB meetings in countries with a high burden of disease. The query was also raised as to who would finance these trips. Delegates suggested more information on cost and benefits of meetings in Geneva and other locations—as well as field trips—was needed before the PCB could make a decision on these issues.

The PCB welcomed the proposal to strengthen the constituency system for member states—for instance, through dedicated Secretariat support. On the proposals regarding meeting documents and consultation processes, delegates cautioned against creating additional bureaucratic layers or new mechanisms.

The PCB endorsed the suggestion to further develop the UBW as a means to strengthen coherence and accountability regarding implementation of PCB decisions by the Secretariat and Cosponsors. In terms of accountability, it was requested that member states display coherence through their membership of and participation in the governing bodies of other UN agencies, in particular the Cosponsors.

Preliminary discussion on the number and status of PCB members suggested support for reducing the number of Cosponsors on the Board, in line with “Delivering as One” principles. There was no immediate support for broadening Board membership.

The PCB decisions and recommendations for this item are contained in Annex 2 “Decisions, Recommendations and Conclusions of the 20th Programme Coordinating Board Meeting”, paragraph 10.

4. Follow-up to the 2006 Political Declaration on HIV/AIDS

4.1 Report on the progress on follow-up support to countries in their national target-setting towards universal access

In response to the request by the 19th PCB, a progress report on support to target-setting (UNAIDS/PCB(20)/07.8) was presented to the Board. Mr Michel Sidibe summarized the findings.

Mr Sidibe reported that out of the 94 countries that had finalized national targets, 58 countries had included these targets in their national AIDS plans, and costed them. Prevention targets lagged behind, and insufficient attention had been paid to disaggregation of data by sex. He said that in order to maintain the universal access momentum, support should now focus on implementation of national plans. He observed that civil society representation had increased in some countries, but could still be broadened in terms of planning, policy dialogue and financial support allocation. Mr Sidibe requested that the PCB endorse the development of accountability mechanisms for the UNAIDS Secretariat and the Cosponsors.

The PCB welcomed the report and the progress achieved in many countries. The PCB also recognized the ICASO community sector report and its observations regarding the target-setting process in countries. The PCB appreciated the emphasis placed on support to implementation but observed more national plans needed to be costed. The PCB urged that universal access targets be aligned with national plans and priorities, and that stronger links be established between targets and broader development efforts and sectoral plans. This would also enhance accountability in terms of donor harmonization according to the *2005 Paris Declaration on Aid Effectiveness*. Establishing a transparent in-country process to validate national plans and coordinate technical support was also urged.

The PCB observed that in order to “make the money work”, additional financing for capacity-building may be required, in terms of implementation capacity. In this regard, strengthening of health systems and infrastructure, human resource capacity and access to affordable drugs and commodities were also mentioned as prerequisites for achieving universal access. Concern was expressed regarding sustainable and predictable funding as fluctuating resource availability would jeopardize the response, and in particular affect treatment programmes.

With regard to technical assistance, some delegates requested clarification on the role of the Technical Support Facilities, and suggested their role could be expanded to become a “one stop shop” for technical assistance.

The PCB stressed the importance of the meaningful involvement of civil society in national universal access processes. Concerns were raised by the NGO delegation that insufficient awareness surrounding universal access existed in many countries, and that many national plans did not include targets nor resources for specific vulnerable groups or difficult thematic areas. While many civil society groups would receive funding through the Global Fund to Fight AIDS, Tuberculosis and Malaria, the importance of inclusive national plans was emphasized to reflect the contribution of civil society, including faith-based organizations, to the response.

The PCB decisions and recommendations for this item are contained in Annex 2 “Decisions, Recommendations and Conclusions of the 20th Programme Coordinating Board Meeting”, paragraphs 11.1–11.9.

4.2 Presentation of policy guidelines to address gender issues

Following the request by the 18th PCB, and drawing on gender assessments, policy guidelines on gender were developed (UNAIDS/PCB(20)07.11) for discussion by the PCB. Through a panel discussion, moderated by Dr Mariangela Simao (Director, National STD/AIDS Programme, Brazil) the issue of gender and HIV was reviewed from a government, civil society and UN perspective. Dr Simao introduced the panel members: Mrs Chou Bun Eng (Director General, Ministry of Women's Affairs, Cambodia), Dr Ravi Verma (Population Council, India), Ms Sisonke Msimang (Open Society Initiative for Southern Africa) and Dr Kristan Schoultz (UN Resident Coordinator, Botswana).

Mrs Chou Bun Eng's presentation to the PCB outlined how the government of Cambodia has been working to strengthen the gender dimension in national HIV programmes. Facing a range of challenges in respect of women and HIV, the Government of Cambodia had tasked the Ministry of Women's Affairs to lead the process of gender mainstreaming. The Ministry had developed a policy and a strategic plan on women, girls and HIV in consultation with other ministries and stakeholders, and initiated a programme to address social norms and reduce gender-based violence. Mrs Eng reported both progress and obstacles, but stated that high-level political commitment ensures that the issues remain high on the agenda.

Dr Verma spoke of the vital role of civil society in addressing gender in the national AIDS response, as governments need to work in partnership with those organizations that can address controversial issues and reach marginalized groups. He stressed that engaging with gender issues includes targeting men who have sex with men, and addressing notions of masculinity. Dr Verma said programmes can be designed to promote gender equity and indirectly benefit HIV work, or can be designed as HIV programmes that have gender mainstreamed throughout. For both, efficacy, impact and lessons learnt need to be demonstrated, while scale-up needs to be promoted with donor and government funding.

Ms Msimang reported on the Secretary-General's Task Force on women, girls and AIDS in Southern Africa, in terms of progress made at country level on HIV and gender. The review showed that thorough gender programming on HIV was mostly lacking and that it was crucial for national AIDS authorities to take on responsibility in this regard. In her presentation, Ms Msimang reported challenges for governments, civil society, the UN and donors, providing the PCB with an all-round overview of how all stakeholders could improve on their response. She urged that the country-level application of the "Three Ones" principles be critically reviewed to assess their sensitivity to gender issues.

Dr Schoultz presented a more in-depth view of the role the UN can play on HIV and gender at the country level. She suggested the UN build on its strengths by using its convening role to advocate action on controversial issues. She challenged the UN system to fully apply its mandate, by combining high-level advocacy and provision of gender expertise towards national planning processes with active leveraging of resources for specific activities such as campaigns. She recommended that the UN be strategic in its capacity-building efforts, and show internal commitment through adequate and senior staffing, creative resource allocation and sensitized leadership.

The PCB expressed its thanks to the moderator and the panellists for their excellent presentations which demonstrated the collective responsibility of all stakeholders. The PCB welcomed the focus on men and boys as well as girls and women and the challenge to transform gender and sexual norms that increase vulnerability to HIV infection.

The PCB concurred with the observation that national AIDS coordinating authorities be responsible and accountable for the inclusion of gender and HIV in national plans and strategies. One delegate suggested that to achieve this, national governments may require assistance with internal gender capacity, costing, budgeting and financing. The PCB also acknowledged the importance of connecting the agendas of the AIDS response with those of women's organizations, which may require capacity-building.

The PCB endorsed the guidelines but urged that existing knowledge and guidelines on gender be used and built upon, and that the guidelines be less descriptive, more concrete and practical, and adapted to country context. The guidelines could also provide entry points for dialogue, in particular on sexual and reproductive health, and place greater emphasis on the responsibilities of donors. Other delegates suggested the guidelines could be stronger on prevention and have more explicit wording on risky sexual practices and vulnerable groups. One delegate suggested that collaboration should be sought with bodies such as UNIFEM, the Division for the Advancement of Women and the OECD/DAC gender network.

The PCB agreed that adequate resources must be made available and commended the UBW for being strong on gender. One delegate suggested that gender-specific indicators be attached to each UBW outcome.

The PCB decisions and recommendations for this item are contained in Annex 2 "Decisions, Recommendations and Conclusions of the 20th Programme Coordinating Board Meeting", paragraphs 12.1–12.7.

4.3 Report of the Global Task Team Independent Assessment

The 19th PCB meeting had requested an independent assessment of the Global Task Team on improving AIDS coordination among multilateral institutions and international donors. Ambassador Hjelmåker (Special Ambassador on HIV/AIDS, Sweden) introduced the synthesis report (UNAIDS/PCB(20)/07.9) and informed the PCB of the process followed by the Reference Group.

Ms Dickinson (Consultant, HLSP) said the two major objectives of the assessment had been to estimate country level progress in implementing the GTT recommendations in terms of technical support provided to the national AIDS response as brokered by the UN system, and harmonization and alignment of international partners to rationalize and simplify management of development funding by national counterparts. Some main findings regarding technical support were the broad support for the division of labour and the progress made by Joint Teams in terms of promoting dialogue and coordination. Limited progress was reported on development of technical support plans and shifting from a provisional to a brokering role, though the technical support mechanisms (Technical support facilities, Global Implementation Support Team (GIST), AIDS Strategy Action Plans (ASAP) facilities) had increased the expertise available to

countries. Progress on harmonization and alignment illustrated a divide between global level support and facilitation and country level implementation and this applicable to both the UN system and the donor community. Collaboration between the Global Fund and the World Bank on financing, reporting and management structures was evident. Finally, strong country ownership was found to be a critical factor for progress.

Mr Sidibe welcomed the findings of the assessment and said that implementation of the GTT recommendations will remain a top priority for UNAIDS. He stated that UNAIDS was committed to address the reasons for slow progress in some areas. Following the assessment, action would be required from all partners, including the UN, bilateral donors, funds and countries. For the Secretariat, an estimate of extra costs involved had been done, and a time-scale had been developed to guide respective partners in their follow-up actions. Mr Sidibe emphasized synergies should be sought with many other issues discussed at the PCB, including coherence and accountability, coordination, UN reform and aid effectiveness. He informed the Board that UNAIDS will report back on the recommendations of the assessment as part of the regular reporting on GTT implementation. In addition, the UNAIDS web site will be used to publicize updates and evidence of progress. Mr Sidibe suggested the reference group temporarily continue to function to allow oversight of follow-up actions, including by non-UN partners. He proposed that a follow-up assessment would be done in 18 months to track progress.

The PCB thanked Ms Dickinson for the clear and frank report and Mr Sidibe for the presentation of the follow-up framework prepared by the Secretariat. The PCB recognized the assessment had taken place in an early stage of GTT implementation but stated it was useful to take stock and identify the areas for improvement. The PCB endorsed the recommendations as well as the framework for follow-up, with a number of remarks.

The PCB agreed to temporarily continue the functioning of the Reference Group to allow oversight of the follow-up, including among the non-UN partners. It was suggested membership of the group could be revised. The PCB agreed that the PCB Bureau and UNAIDS management should determine prioritization of further follow-up.

The PCB observed that a divide did often occur between policy statements at the global level and practice at the country level regarding harmonization and alignment. An investigation into drivers and obstacles to harmonization and alignment was requested, to be reported on at a future PCB meeting and its results to be shared with the Organisation for Economic Co-operation and Development.

On accountability, delegates agreed that the donor community would report to the PCB on harmonization progress. One constituency urged that the accountability of the Resident Coordinators for coordination of the UN at country level and the development of joint plans be observed. Overall, caution was expressed that at the country level, accountability of the process should be driven by national actors, with the involvement of civil society, and not by technical agencies.

The PCB requested more clarity on the coordination of technical assistance, and supported the use of the Country Harmonization and Alignment Tool (CHAT) to assess performance in terms of harmonization and alignment. It was suggested that CHAT could be broadened to assess the bilateral support to UN agencies at country level.

The Cosponsors were pleased to report that actions had already been taken in a number of the areas identified in the report, for instance the revision of the terms of reference of the GIST and the UBW based on the division of labour. They supported the need for improved accountability for all partners, and for themselves would establish a simple mechanism consistent with UN structures. Cosponsoring agencies would also report to their own governing bodies on progress made in terms of implementing the GTT recommendations.

The NGO delegation said that joint UN programmes should reflect national priorities and be aligned with the needs of those most affected. They advocated the increased involvement of civil society as a deliverer of technical assistance but also as the recipient of technical assistance, and observed that PAF funds for this purpose had remained underutilized.

The PCB decisions and recommendations for this item are contained in Annex 2 “Decisions, Recommendations and Conclusions of the 20th Programme Coordinating Board Meeting”, paragraphs 13.1–13.3.

4.4 UNAIDS collaboration with the Global Fund

Discussion of this item was based on document UNAIDS/PCB(20)/07.10. Dr Piot welcomed the renewed commitment to partnership, harmonization and alignment by the Global Fund leadership and the opportunity this would provide for enhanced collaboration. He suggested that the Memorandum of Understanding between the Global Fund and UNAIDS be amended to reflect clearly defined and complementary roles of the two bodies. Dr Piot stated that the AIDS response had entered a new phase and that the Global Fund’s budget was expected to increase further, which would subsequently expand the need for technical support from UNAIDS, which would in turn require additional resources for UNAIDS. Dr Piot commended the strong interconnectedness between the Cosponsors, the Secretariat and the Global Fund, with the World Bank as a Global Fund board member, UNDP acting as Principal Recipient for 17% of Global Fund grants on AIDS, and UNAIDS field staff spending up to 50% of their staff time on Global Fund-related work. This collaboration was also visible in terms of monitoring and evaluation. Dr Piot welcomed the initiative that national plans could be considered for international funding, pending the establishment of clear criteria and review mechanisms. This would also reorient Global Fund grants from projects to programmes, enhancing their strategic impact.

Dr Kazatchkine (Executive Director of the Global Fund to Fight AIDS, Tuberculosis and Malaria) expressed his pleasure at attending the PCB and reiterated Dr Piot’s commitment to work together. He stated that UNAIDS was a critical partner of the Global Fund, with UNAIDS providing technical support to the programmes funded by the Global Fund. Dr Kazatchkine concurred with the need to update the Memorandum of Understanding in light of shared objectives and continual developments in the response. He emphasized that in endorsing the Paris Declaration on Aid Effectiveness, the Fund had committed to harmonization and alignment with countries and partners. Dr Kazatchkine recognized UNAIDS’ contribution to capacity-building and tools development in terms of monitoring and evaluation which aided adherence to the Global Fund’s principle of performance-based funding. He welcomed UNAIDS’ leadership in developing methodologies to validate national strategic plans as funding instruments. Dr

Kazatchkine referred to the division of labour as the basis for collaboration on technical support, and commended the work of the Global Implementation Support Team (GIST). He advocated an improved continuum between short-term emergency assistance and longer-term capacity-building, and for ways to better assess the quality of technical assistance provided.

The PCB welcomed the statements by both executive directors and the renewed spirit of collaboration. The PCB expressed full support for an amended Memorandum of Understanding that would clearly delineate the complementary roles and responsibilities, including a shared follow-up system for accountability. The PCB agreed that the division of labour would guide the collaboration on technical support.

In line with the Global Task Team recommendations and the mandate of UNAIDS, the PCB encouraged UNAIDS to continue its leadership in terms of overall coordination and coherence of the response at all levels. Delegates observed that UNAIDS' presence at the country level allowed the Joint Programme to assist countries in terms of strategy and proposal development and identify gaps and imbalances in the response based on the actual situation.

The PCB acknowledged that the report's proposed decisions implied additional tasks for UNAIDS that would require resources, which needed to be reflected in the UBW.

The PCB welcomed the Global Fund board decision to enable funding for national strategic plans, and supported the development of criteria and procedures for the establishment of an independent review mechanism that would validate such plans as eligible for funding. The PCB welcomed an active role by UNAIDS in this process but requested clarity on its role in designing the review mechanism and in validating national plans, which it would have helped develop.

The PCB requested that UNAIDS provide, broker and coordinate high quality technical support based on needs assessment and focused on long-term capacity-building. It was suggested that the terms of reference of the Technical Support Facilities and GIST be reformulated to reflect this. Collaboration with the International Center for Technical Cooperation based in Brazil was encouraged. The PCB emphasized the need for a quality assurance mechanism for technical support.

Some delegates observed the need to improve links between Global Fund structures and national AIDS authorities. The experience with UNITAID was mentioned as a roadmap for cooperation with the Global Fund. It was also observed that middle income countries with high HIV prevalence were less successful in accessing Fund grants.

The PCB decisions and recommendations for this item are contained in Annex 2 "Decisions, Recommendations and Conclusions of the 20th Programme Coordinating Board Meeting", paragraphs 14.1–14.6.

5. Information items

5.1 Results of the Geneva and field staff survey and report on follow-up

Ms Landey summarized the results of the second UNAIDS staff survey (UNAIDS/PCB(20)/07.13) in follow-up to the request by the 18th PCB. Overall job satisfaction remained relatively high but stress levels and finding a work-family balance were noted as areas meriting further attention.

The PCB took note of the report.

5.2 Statement by the representative of the UN Secretariat Staff Association

The Chair of the UNAIDS Secretariat Staff Association (USSA), Mr Manuel Da Quinta introduced the USSA-PCB Liaison Officer, Mr Desmond Whyms, who made a brief presentation to the PCB. The full results of the Staff Opinion Survey showed a mixed picture of staff satisfaction. Mr Whyms reported that the USSA had continued its work on, inter alia, mobility and rotation, contract reform, work life balance policy, and the USSA initiative to enhance individual and corporate environmental awareness in the workplace. Lastly, he reported that the UN+ group had had a meeting with the UN Secretary-General and that as a group they continued to work on a range of issues.

The PCB thanked the USSA for its report and welcomed the open working relationship existing between staff and management. In particular, the work of UN+ and its impact was commended.

The PCB took note of the statement by the UNAIDS Secretariat Staff Association.

6. Any other business

6.1 Dates for PCB meetings in 2008

Dr Piot suggested that a short, focused PCB meeting be held before the end of the year in preparation of the independent evaluation and to review its terms of reference. This proposal was supported by the Board. The exact date for this 21st meeting would be decided on by the PCB Bureau shortly and all members would be duly informed.

The PCB decided that the 22nd meeting would be held in Geneva in mid 2008. The exact dates will be considered by the PCB Bureau in consultation with the Secretariat.

7. Adoption of decisions, recommendations and conclusions

The PCB adopted the final decisions, recommendations and conclusions for its 20th meeting, which are attached in Annex 2.

The meeting was adjourned.

19 June 2007



UNAIDS/PCB(20)/07.1/Rev.1

PROGRAMME COORDINATING BOARD

Twentieth meeting

Date: 25-27 June 2007

Venue: International Conference Centre, Geneva, Switzerland

Time of meeting: 09h00 - 12h30 and 14h00 - 18h00

Draft Annotated Provisional Agenda

Monday 25 June

1. Opening

- 1.1 Opening of the meeting and adoption of the provisional agenda**
The outgoing Chair will provide the opening remarks to the 20th Programme Coordinating Board meeting.
- 1.2 Election of Officers**
In accordance with the PCB procedures, the Board shall elect among its representatives a new PCB Vice-Chair, Rapporteur and NGO delegates.
- 1.3 Consideration of the reports of the eighteenth and nineteenth meetings**
The reports of the eighteenth and nineteenth PCB meetings will be presented to the Board for adoption.
Documents: UNAIDS/PCB(18)/06.18 and UNAIDS/PCB(19)/06.19
- 1.4 Report by the Chairperson of the Committee of Cosponsoring Organizations**
The CCO Chair will present an oral statement under this item. Highlights of the joint and specific Cosponsors' activities will be reflected in the UNAIDS Annual Report. Discussion of this item will be taken jointly with item 1.5.
- 1.5 Report of the Executive Director**
The Executive Director will present an oral statement under this item. The UNAIDS Annual Report, providing a comprehensive overview of UNAIDS' activities in 2006, will also be submitted to the PCB as a background document. It will include information on: UNAIDS' functions, a review of

activities in 2006, an update on the epidemic, reporting back on key milestones, reporting from Cosponsors, and financial information.

1.6 Report by the NGO representative

The report of the NGO representative will highlight civil society perspectives on the global response to AIDS.

Document: UNAIDS/PCB(20)/07.2

(lunch: 12.30-14.00)

2. 2008-2009 Unified Budget and Workplan and Financial Report¹

The draft Unified Budget and Workplan for the 2008-2009 biennium will be presented for adoption by the Board. The Board will also receive, for information, an interim financial management report for the 2006-2007 biennium and a financial update as at 30 April 2007.

Documents: UNAIDS/PCB(20)/07.3, UNAIDS/PCB(20)/07.4, UNAIDS/PCB(20)/07.15, UNAIDS/PCB(20)/CRP3 and UNAIDS/PCB(20)/CRP6

Tuesday 26 June

3. UN and governance reform

3.1 UNAIDS and UN reform

As requested at the 19th PCB meeting in December 2006 the Board will receive a report from the Executive Director on UNAIDS work as an example of UN reform in action. Document: UNAIDS/PCB(20)/07.12

3.2 Results of the Review of NGO/Civil Society participation in the Programme Coordinating Board

Further to recommendation 9.1 of the 15th PCB meeting in June 2004 the Board will receive the report of the Independent Review of NGO/Civil Society participation in the UNAIDS Programme Coordinating Board.

Discussion of this agenda item will be taken jointly with agenda item 3.3.

Document: UNAIDS/PCB(20)/07.6/Rev.1 and UNAIDS/PCB(20)/CRP5

(coffee break)

3.3 UNAIDS role in strengthening global coordination on AIDS and development of the Programme Coordinating Board

As requested by the 19th PCB meeting in December 2006 the Board will consider recommendations on how to elaborate further on the UNAIDS role in strengthening global coordination of AIDS and how to develop the PCB into a more effective policy-making Board.

Document: UNAIDS/PCB(20)/07.7

¹ Discussion of this agenda item will start at 14:00 on Monday 25th June. If not concluded in the morning session, will be rescheduled for after completion of item 2.

(lunch: 12.30-14.00)

4. Follow-up to the 2006 Political Declaration on HIV/AIDS

4.1 Report on the progress on follow-up support to countries in their national target setting towards universal access

As requested by the 19th PCB meeting in December 2006 the Board will receive a progress report on support to national target setting, in particular, the facilitation of coordinated strategies to overcome identified obstacles to scaling up and recognizing the continuing importance of ensuring that targets are gender disaggregated. The report will include recommendations for approval by the Board.

Document: UNAIDS/PCB(20)/07.8

(coffee break)

4.2 Presentation of policy guidelines to address gender issues

As requested by the 18th PCB meeting in June 2006 the Board will discuss policy guidelines to address gender issues in a practical way and which have been derived from the results of gender assessments, conducted in partnership with national governments, of national AIDS plans.

Document: UNAIDS/PCB(20)/07.11, UNAIDS/PCB(20)/CRP1 and UNAIDS/PCB(20)/CRP2

Wednesday 27 June

4.3 Report of the Global Task Team Independent Assessment

As requested by the 19th PCB meeting in December 2006 the Board will receive the report of the Independent Assessment of the Global Task Team on improving AIDS coordination among multilateral institutions and international donors.

Document: UNAIDS/PCB(20)/07.9 and UNAIDS/PCB(20)/CRP4

(coffee break)

4.4 UNAIDS Collaboration with the Global Fund to fight AIDS, Tuberculosis and Malaria

The PCB will receive a report on measures to address the need for coordinated technical assistance and harmonised support to countries in their efforts to scale up to universal access.

Document: UNAIDS/PCB(20)/07.10

(lunch: 12.30-14.00)

5. Information Items

5.1 Results of the Geneva and field staff survey and report on follow-up

Document: UNAIDS/PCB(20)/07.13

5.2 Statement by the representative of the UNAIDS Staff association

Document: UNAIDS/PCB(20)/07.16

6. Any other business

6.1 Dates for Programme Coordinating Board meetings in 2008

Due to scheduling conflicts with the 2008 General Assembly High-Level Meeting on AIDS and the ICASA conference in Dakar, the Board will be asked to reschedule the dates for the 21st and 22nd PCB meetings.

7. Adoption of decisions, recommendations and conclusions

The draft decisions, recommendations and conclusions prepared by the drafting group will be presented for adoption by the meeting plenary.



FINAL Rev.1

**20th Meeting of the UNAIDS Programme Coordinating Board
Geneva, Switzerland,
25-27 June 2007**

Decisions, Recommendations and Conclusions

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; and
- Promoting comprehensive responses to AIDS that integrate prevention, treatment, care and support.

Agenda item 1.1: Opening of the meeting and adoption of the provisional agenda

1. *Adopts* the agenda.

Agenda item 1.2: Election of Officers

2.1 *Elects* Thailand as Chair, the United States of America as Vice-Chair, and Senegal as Rapporteur; and

2.2 *Notes* the membership of the NGO delegation for 2008.

Agenda item 1.3: Consideration of the reports of the eighteenth and nineteenth meetings

3. *Adopts* the reports of the 18th and 19th meetings of the UNAIDS Programme Coordinating Board.

Agenda item 1.4: Report by the Chairperson of the Committee of Cosponsoring Organizations

4. *Takes note with appreciation* of the Report by the Chairperson of the Committee of Cosponsoring Organizations.

Agenda item 1.5: Report of the Executive Director

5. Taking note of the major trends in the epidemic, its impact and the response, including the key initiatives and achievements of UNAIDS over the last six months, as summarized in the Annual Report and Report of the Executive Director, the Programme Coordinating Board:

5.1 *Requests* that an independent evaluation of UNAIDS be carried out in order to reassess priorities, determine how to build on achievements and understand how UNAIDS can play a more effective role in the future in strengthening global coordination on HIV/AIDS and *requests* the Programme Coordinating Board Bureau, in consultation with the Programme Coordinating Board members, to formulate the process, the mechanisms and terms of reference for this independent evaluation for submission to the 21st Programme Coordinating Board meeting for approval;

5.2 *Requests* an independent assessment, building on existing studies, in consultation with UNAIDS, national stakeholders, the Global Fund to Fight AIDS, Tuberculosis and Malaria, and other partners, to review and assess the sustainability of HIV/AIDS financing, and to prepare this for consideration at the 22nd Programme Coordinating Board meeting; and

5.3 Acknowledging work being done by UNAIDS on a guidance note on HIV and sex work, *recommends* UNAIDS to continue consultation with relevant stakeholders, including affected groups, in developing this guidance.

Agenda item 1.6: Report by the NGO representative

6. *Takes note* of the Report by the NGO representatives and *adopts* the following recommendation contained therein:

6.1 Request UNAIDS and donors to support, and governments to incorporate, policies and resource programs that address the intersection between violence against women and HIV and AIDS as a component of their National AIDS Programs.

Agenda item 2: 2008-2009 Unified Budget and Workplan and Financial Report

7.1 *Endorses* the strategies and approaches contained in the 2008-2009 Unified Budget and Workplan;

7.2 *Approves* the 2008-2009 Unified Budget and Workplan and the proposed distribution of those resources as follows: US\$ 135 million to be shared among 10 Cosponsors; US\$ 182 million for the UNAIDS Secretariat; US\$ 147 million for interagency activities and US\$ 5 million for a contingency fund for unexpected expenditures linked to the Unified Budget and Workplan;

7.3 *Urges* all countries to fully fund the 2008-2009 Unified Budget and Workplan in accordance with the principle of burden sharing;

Annex 2

7.4 *Endorses* the establishment of a mid-term review of the Unified Budget and Workplan to increase the flexibility of the Unified Budget and Workplan as outlined in paragraph 41 of the Unified Budget and Workplan document²;

7.5 Taking note of the planned Cosponsor Core, Supplemental and global/regional budgets as outlined in the 2008-2009 UBW, and taking note that the Cosponsors will also raise an additional estimated US\$ 1.9 billion which is implemented by them at country level, *requests* greater transparency on these funding flows by reporting to the June 2009 Programme Coordinating Board meeting on what is being spent on HIV/AIDS at country level in the “One UN” pilot countries in support of the national response;

7.6 *Recommends* UNAIDS to integrate into the Performance Monitoring and Evaluation Framework indicators to measure how UNAIDS work contributes to strengthening the One UN pilots;

7.7 *Recommends* UNAIDS to provide greater clarity on the division of labour by demonstrating, in accordance with relevant actions contained in the Global Task Team Assessment Report, in the Unified Budget and Workplan mid-term review the complementarity of agencies’ activities in their support to the national response and when they are working for the same outputs;

7.8 *Approves* the authority of the Executive Director of UNAIDS to increase or decrease funds by up to 10% between Principal Outcomes of the Unified Budget and Workplan, subject to the conditions outlined in paragraph 41 of the Unified Budget and Workplan Document³;

7.9 *Decides* that the Executive Director be given the discretion to programme and disburse funds received by way of contributions over and above the level of the approved Unified Budget and Workplan, subject to the following conditions:

- a. The amount of funds to be programmed and disbursed under discretionary authority shall not exceed 10% of the approved budget;
- b. The funds shall be used only for activities in priority areas as set out in the Strategic Framework or for investments in, or support for, the Principal Outcomes and Key Outputs as identified in the Unified Budget and Workplan;

² Paragraph 41 includes the following relevant text: “A mid term review of the Unified Budget and Workplan will be carried out following the first year of operation of the biennium. The review will be coordinated by the Secretariat and will take into account developments since the Unified Budget and Workplan was approved by the Programme Coordination Board including emerging priority issues and actual and anticipated fundraising and implementation.

³ Paragraph 41 includes the following relevant text: “The Executive Director may increase or decrease resources between Principal Outcomes, subject to the following conditions:

- a. Transfers are allowed up to a maximum of 10 per cent of the amount budgeted for the Principal Outcome;
- b. Transfers exceeding 10 per cent should only occur following consultation with the Committee of Cosponsoring Organizations, and the Chair and Vice-Chair of the Programme Coordinating Board;
- c. Transfers may occur as part of a mid-term review exercise or as otherwise deemed necessary by the Executive Director.

Annex 2

- c. The Executive Director shall submit his proposal for the use of the funds to all Members of the Programme Coordinating Board through its Bureau, who will ensure its conformity with the above criteria. Any proposal shall be deemed approved if no written objection to the proposal is received by the Bureau within a period of 14 days from the date of notification of the proposal;
 - d. The use of the funds under the Executive Director's discretionary authority should be reported to the 22nd meeting of the Programme Coordinating Board; and
 - e. The Programme Coordinating Board will review the experience with this procedure at the end of three years.
- 7.10 *Takes note* of the interim financial management information for the 2006–2007 biennium and the financial update as at 30 April 2007;
- 7.11 *Encourages* donor governments and others to release their contributions towards the Unified Budget and Workplan for 2006–2007 as soon as possible, if they have not already done so;
- 7.12 *Requests* that the 2010-2011 Unified Budget and Workplan include stronger linkages between investment and results and that it is accompanied by a prospective Performance Monitoring and Evaluation Framework for the budgetary period;
- 7.13 *Further requests* mid-term progress reports on the implementation of the Unified Budget and Workplan and that the report be an item on the agenda of the Programme Coordinating Board meeting;
- 7.14 *Recommends* UNAIDS to identify potential efficiencies that may come from working in a more harmonized way, so that any savings made can be reinvested into the programme; and
- 7.15 *Requests* the UNAIDS Secretariat to report to the 22nd Programme Coordinating Board meeting on the case for and implications of moving to a four-year Unified Budget and Workplan.

Agenda item 3.1: UNAIDS and UN Reform

8. *Endorses* the recommendations of the paper “UNAIDS and UN Reform” (document UNAIDS/PCB(20)/07.12):
- a. Current coherence efforts should be informed by the UNAIDS experience;
 - b. The Global Task Team recommendations need to be accelerated and championed as a contribution to UN reform;
 - c. UNAIDS should have a full role in “one UN” country pilots;

- d. UNAIDS to urgently review accountability mechanisms and establish incentives to promote joint working, programming and participation in the One UN pilots;
- e. The integrity of UNAIDS must be maintained through the piloting of the UN reform process; and
- f. UNAIDS should continually document its contributions to greater UN coherence and contribute fully to the realization of delivering as one (One budget, One leader, One plan, One house) in the pilot countries where it has a presence, and provide a detailed report on its participation in the One UN country pilot for a Programme Coordinating Board meeting in 2008.

Agenda item 3.2: Results of the Review of NGO/Civil Society participation in the Programme Coordinating Board

9. *Takes note* of the Results of the Review of NGO/Civil Society participation in the Programme Coordinating Board and *adopts* the following recommendations contained therein:

- 9.1 *Endorses* the establishment of an independent communication and consultation facility (CF) to strengthen the NGO participation and support effectiveness of NGO country-level voices in the Programme Coordinating Board policy dialogue, and *requests* that the CF be supported by the UNAIDS Secretariat;
- 9.2 *Requests the* UNAIDS Secretariat to provide appropriate financial support towards the further development of the recommendations in the Review of NGO/Civil Society participation in the Programme Coordinating Board;
- 9.3 *Agrees* to review the participation of the NGO Programme Coordinating Board Delegation in the Programme Coordinating Board within no more than five years; and
- 9.4 *Decides* to discuss, at the 22nd Programme Coordinating Board meeting, the forward looking mechanisms for achieving increased involvement of civil society in the Programme Coordinating Board.

Agenda item 3.3: UNAIDS role in strengthening global coordination on AIDS and development of the Programme Coordinating Board

10. *Decides* that:

- a. Programme Coordinating Board meetings will consist of a decision making segment and a thematic segment;
- b. Requests the UNAIDS Secretariat to elaborate a paper, for the next Programme Coordinating Board meeting, on the format and potential resource needs of the thematic segment, including the possibility of enabling the segment to become an effective venue for policy debate, engaging all relevant key players, including, occasionally, high level participation in a way that avoids

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duplication with existing high level events;

c. Programme Coordinating Board meetings should be held twice a year in principle. However, the second meeting in the odd years should be held only when there is a substantive need and with the financial and administrative possibility to do so. In this regard, the Programme Coordinating Board may decide in an even year to cancel the second meeting during the following, odd, year;

d. Key partners will be invited to participate in the thematic segment in a well structured and recognized way. A meaningful and relevant discussion on critical thematic policy matters has to include all relevant partners, such as the Global Fund to Fight AIDS, Tuberculosis and Malaria, People living with HIV/AIDS, private sector, foundations, research and academia, etc;

e. Before a final decision on modalities for meetings outside Geneva, the UNAIDS Secretariat is requested to provide a thorough analysis of holding meetings in Geneva or outside of Geneva and present it to the 21st Programme Coordinating Board meeting;

f. Further development of informal networks will be explored to facilitate a better interaction in between Programme Coordinating Board meetings;

g. The constituency system for Member States should be strengthened to improve the quality of participation and representation at Board meetings. Recognizing that such improvement primarily rests with Member States, the Programme Coordinating Board Bureau will play an active role in this context;

h. The UNAIDS Secretariat will also facilitate support to constituencies and strengthen its outreach activities;

i. The Chair will play an active role in ensuring balanced representation in the drafting group;

j. A drafting group will not normally be held in parallel with the plenary;

k. The Unified Budget and Workplan will be further developed to enable it to be a strategic tool for division of responsibilities and other governance matters within UNAIDS, the Secretariat and the ten co-sponsors. The Unified Budget and Workplan should include incentives for action and collaboration;

l. Funds allocated to co-sponsors will be linked to specific outputs and a release of funds should be performance-based. The Unified Budget and Workplan should clearly identify expected results and responsible actors;

m. Programme Coordinating Board decisions will include clear language on who is responsible for their implementation, and also a time frame and identified reporting mechanisms;

n. Systematic coordination among relevant partners at country level needs to be strengthened - within UNAIDS (Secretariat and co-sponsors), with other UN

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agencies and with other development partners, multilateral and bilateral, and also with national authorities;

o. To synchronize with the ECOSOC process, the Chair/Vice-Chair will be elected for one calendar year, starting the term on 1 January of each year;

p. A long-term planning of the election of the officers of the Programme Coordinating Board is suggested;

q. Further ways should be explored to improve and streamline coordination between ECOSOC and the Programme Coordinating Board on relevant matters, including electoral matters and Cosponsor participation, in the spirit of 'One UN' initiatives; and

r. Furthermore:

- Interactive discussions will be encouraged rather than prepared statements and texts;
- A preliminary list of participants will be distributed prior to the meetings and updated just prior to and during the meetings; and
- More frequent briefing sessions and open consultation processes will be organized by the Secretariat.

Agenda item 4.1: Report on the progress on follow-up support to countries in their national target setting towards universal access

11.1 *Requests* the UNAIDS Secretariat, in collaboration with the Cosponsors, to develop and endorse an accountability and reporting mechanism for UNAIDS to deliver on the recommendations in the Universal Access Assessment Report and present a progress report on its utilization at the June 2008 Programme Coordinating Board;

11.2 *Requests* the UNAIDS Secretariat to monitor progress towards the goal of universal access by providing regular assessment of the status of countries' integrated plans and their financing as part of the annual monitoring of the epidemic;

11.3 *Agrees* that a transparent and inclusive in-country process to develop and validate national plans for scaling up towards universal access, building on existing sectoral processes, is needed. This process must be harmonized with, but not exclusive to, the Global Fund Independent Review Mechanism;

11.4 *Emphasizes* the importance of technical support in implementing national strategies, and supports UNAIDS' efforts to further define its role as a clearing house, building on its Technical Support Facilities, the Global Implementation Support Team, the Division of Labour and other mechanisms to bring more coherence to this process;

11.5 *Requests* that, in line with the Policy Guidance to address Gender Issues, UNAIDS includes addressing gender inequality as a fundamental requirement towards the goal of Universal Access;

11.6 *Requests* UNAIDS to provide clearer direction and awareness-raising on

universal access, and to support national processes that include civil society, especially key populations, to validate ambitious and comprehensive targets and incorporate them into costed national plans by the end of 2007;

11.7 *Requests* UNAIDS and Co-sponsors, as a matter of priority, to work at the national level to assist governments to bring Prevention of Mother to Child Transmission guidelines in line with the World Health Organization Revised Guidelines; and pay particular attention to the provision of sustained treatment to HIV positive mothers and members of their families;

11.8 *Requests* the international community to significantly increase investment in basic tuberculosis control programs in line with the World Health Organization and Stop TB Partnership as the key to preventing the further development and spread of drug-resistant tuberculosis, and dedicate considerable additional resources to fill the long-term global financing gaps for tuberculosis and HIV; and

11.9 *Further requests* the UNAIDS Secretariat and Cosponsors, as a matter of priority, to work at the national level to assist governments to scale up HIV prevention among injecting drug users, in line with the decisions of the Programme Coordinating Board on the UNAIDS Policy Position Paper on Intensifying HIV Prevention.

Agenda item 4.2: Presentation of policy guidance to address gender issues

12.1 *Urges* Governments, donors and UNAIDS to significantly expand efforts to address inequality and inequity between men and women, gender based violence including sexual and physical abuse of women, girls and boys, and harmful gender-based practices and social and cultural norms as major drivers of the HIV epidemic, including through increased and better coordinated funding to national programs and civil society partners;

12.2 *Welcomes* the findings of the gender assessments and requests UNAIDS to further develop and finalize the draft guidelines in consultation with Governments, donors, the UN system, global HIV initiatives, civil society and all relevant stakeholders, focusing on concrete actions to achieving gender equality and equity in national HIV responses;

12.3 *Requests* that the finalized guidelines be presented to the Programme Coordinating Board at its first meeting in 2008 with a costed action plan for their dissemination and implementation at the country level;

12.4 *Requests* UNAIDS to mainstream gender equality and equity targets and indicators into all programme planning and review tools, including the UBW performance monitoring and evaluation framework, the AIDS Strategy Action Plan Service Self-Assessment Tool, the guidance on Joint AIDS Programme Reviews and the Country Harmonization and Alignment Tool;

12.5 *Welcomes* the announcement to strengthen the gender capacity in the UNAIDS Secretariat and encourages the Cosponsors to have at least one dedicated gender and HIV officer at senior levels to achieve the gender related Unified Budget and Workplan outcomes;

12.6 *Requests* UNAIDS to clarify further the specific sectoral gender responsibilities of each cosponsor and the secretariat with a view to developing more coordinated and strategic technical support for national AIDS responses, and to report back to the Programme Coordinating Board at its first 2008 meeting; and

12.7 *Requests* UNAIDS to explore with donors and funding mechanisms the development of gender criteria by which to assess HIV proposals and encourage governments and civil society to include gender-related components.

Agenda item 4.3: Report of the Global Task Team Independent Assessment

13.1 *Adopts* the recommendations contained in the Report of the Global Task Team Independent Assessment (document UNAIDS/PCB(20)/07.9) and *acknowledges* their cost implications as outlined in the annex to the report;

13.2 *Requests* the UNAIDS family to take forward its management response to the recommendations in 13.1; and

13.3 *Requests* the Programme Coordinating Board Bureau to establish a reference group for oversight and implementation of the recommendations in 13.1.

Agenda item 4.4: UNAIDS Collaboration with the Global Fund to Fight AIDS, Tuberculosis and Malaria

14.1 *Requests* UNAIDS to work with the Global Fund to Fight AIDS, Tuberculosis and Malaria to revise and update their Memorandum of Understanding redefining and, in light of the changed landscape, updating the areas and modalities of their cooperation and present this to their respective boards for approval. Equally it will be essential that they develop a shared follow-up system for the purposes of accountability;

14.2 *Requests* the UNAIDS Secretariat, in collaboration with national stakeholders, Cosponsors, the Global Fund to Fight AIDS, Tuberculosis and Malaria, and other partners, to develop criteria and procedures for the establishment of an Independent Review Mechanism for national strategic plans that will validate plans as eligible for international funding;

14.3 *Requests* the UNAIDS Secretariat, in close collaboration with national AIDS authorities, the UNAIDS Cosponsors and other partners in the AIDS response, to intensify efforts as a clearing house for providing access to effective technical support to accelerate scaling-up;

14.4 *Requests* UNAIDS to facilitate the governance of Global Fund to Fight AIDS Tuberculosis and Malaria grants for the AIDS response through support to Country Coordinating Mechanisms, and alignment of these mechanisms with the overall coordination of the national response to AIDS;

14.5 *Requests* UNAIDS to report on concrete steps that it should take to increase the success rate of AIDS treatment, care and prevention proposals submitted to the Global Fund, to further the goal of universal access as well as the goal of increased

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resource mobilization and report back to the 23rd Programme Coordinating Board meeting; and

14.6 *Agrees* that quality of interventions for prevention, care and treatment, as well as quality of technical support, be a theme at a future Programme Coordinating Board meeting.

Agenda item 5.1: Results from the Geneva and field staff survey and report on follow-up

15. *Takes note* of the paper 'Results of the Geneva and field-based staff opinion survey and report on follow-up (document UNAIDS/PCB(20)/07.13).

Agenda item 5.2: Statement by the representative of the UNAIDS Secretariat Staff Association

16. *Takes note* of the statement by the UNAIDS Secretariat Staff Association.

Agenda item 6: Any other business

17.1 *Decides* that the 21st meeting of the Programme Coordinating Board will be held in Geneva in December 2007 to approve the process, mechanisms and terms of reference for the evaluation of UNAIDS; the exact date will be decided by the Programme Coordinating Board Bureau and communicated to the Programme Coordinating Board;

17.2 *Further decides* that the 22nd Programme Coordinating Board meeting will be held in Geneva in mid 2008, the exact date will be considered by the Programme Coordinating Board Bureau in consultation with the Secretariat; and

17.3 *Recommends* that prevention, diagnosis and treatment of tuberculosis among people living with HIV, and how UNAIDS can work with the TB communities, be included as one of the thematic issues at a future PCB.