

# **UNAIDS PCB Bureau**

## **MEETING SUMMARY**

DATE: Wednesday, 3 February 2016

# PARTICIPANTS

Ms Nadia Isler (Switzerland: chairing); Ms Laila Heward-Mills (Ghana); Ms Monica Martinez (Ecuador), Ms Sasha Volgina (PCB NGO Delegation); M. Martin Bloom and Ms Fatiha Terki (WFP: Representing UNAIDS Cosponsors).

**UNAIDS Secretariat:** Ms Jan Beagle (DXD), M. Joel Rehnstrom (PFA), M. Morten Ussing (GMA), Ms Samia Lounnas (GMA)

# **MEETING AGENDA**

## 1. Preparation for the 38th PCB meeting

The Bureau will consider possible agenda items for the 38th PCB meeting taking into account decisions from the 37th and previous meetings

## 2. Update on the UBRAF working group

The Bureau will receive an update on the work and meetings of the UBRAF working group

## 3. Preparation for the thematic segment of the 38th PCB meeting

The Bureau will receive an update on preparation for the thematic segment on role of communities in ending AIDS by 2030

**4.** Update on preparations of the UN General Assembly Special Session (UNGASS) on the World Drug Problem in April 2016 and the 2016 High Level Meeting (HLM) on AIDS The Bureau will receive an update on the UN General Assembly Special Session (UNGASS) on the World Drug Problem in April 2016 and the 2016 HLM on AIDS

## 5. Any other business

## SUMMARY

Ms Isler welcomed the new PCB Bureau members for 2016; the Vice-Chair and Rapporteur of the PCB, the representatives of the PCB NGO Delegation, as well as WFP.

Ms Isler indicated that while 2015 was a monumental year with the adoption of the Sustainable Development Goals and the 2016-2021 UNAIDS Strategy and UBRAF, 2016 is not less important. We are looking forward to the United Nations General Assembly High Level Meeting on AIDS (HLM) that would establish the global commitments for the fast track period to end AIDS by 2030. She emphasized that the new Political Declaration, the key outcome of the 2016

HLM on AIDS, should be bold and ambitious and should reflect the fast track approach set out in the UNAIDS 2016-2021 Strategy. This would spur strategic investments in the response.

On behalf of UNAIDS, Ms. Beagle, welcomed the new PCB Bureau members. Ms Beagle emphasized that 2016 is a key year for UNAIDS with the HLM on AIDS, 8-10 June in New York. She stressed that the role of this Bureau will be fundamental to advocate for the timely engagement of all stakeholders in preparation of the HLM. Ms Beagle informed that the Ambassadors of Switzerland and Zambia in New York are the co-facilitators, nominated by the President of the General Assembly, for the 2016 HLM. Ms Beagle also emphasized that it is critical that the new Political Declaration on AIDS builds on the pillars and targets of the 2016-2021 UNAIDS Strategy and its strong linkages with the Sustainable Development Goals (SDGs), specifically SDG3 (Good-health and well-being), SDG5 (Gender equality), SDG10 (Reduced inequalities), SDG16 (Peace, justice and strong institutions) and SDG17 (Partnerships for the Goals). Finally, she said that it will be important to ensure that countries commit to the fast track approach as the only way to envisage the response to AIDS in the coming 5 years if the world wants to achieve the goal of ending AIDS by 2030.

After adoption of the agenda, the Secretariat presented the possible agenda items for the 38th Programme Coordinating Board meeting, which will be held in Geneva from 28-30 June. The presentation of the proposed agenda items for the 38th Board meeting was based on the enclosed table in annex 1.

# 1. Preparation for the 38th PCB meeting

UNAIDS Secretariat explained the content of the table of possible items for the 38th PCB meeting (in annex1) capturing all decision points and specific requests made by the PCB at previous PCB meetings. The table was used to inform the discussion of Bureau members on agenda items for the 38th PCB meeting. The Secretariat presented the possible agenda items for the 38th PCB meeting and Bureau decided as follows:

# Standing agenda items

The Secretariat presented the standing agenda items from the 38th PCB meeting and Bureau decided as follows:

• Report of the 37th PCB meeting: <u>Confirmed</u> for the 38th PCB meeting.

**EXD report**: <u>Confirmed</u> for the 38th PCB meeting. The report will include a report back on the UNGA HLM on AIDS. Bureau members noted that it is essential that the 38th PCB meeting provides the opportunity and the space to discuss the outcomes of the UNGA HLM on AIDS.

- CCO report: <u>Confirmed</u> for the 38th PCB meeting.
- PCB NGO report: <u>Confirmed</u> for the 38th PCB meeting.
- Leadership in the AIDS response: <u>Confirmed</u> for the 38th PCB meeting
- Follow-up to the thematic segment from the 37th PCB meeting on Shared responsibility and Global Solidarity for an effective, equitable and sustainable HIV response for the post-2015 agenda: <u>Confirmed</u> for the 38th PCB meeting

• UBRAF: Performance monitoring report 2012-2015 and financial reports 2014-2015 and the revised 2016-2021 UBRAF: <u>Confirmed</u> for the 38th PCB meeting

With three sub-items:

- Financial reports
- Performance reports
- Revised 2016-2021 UBRAF
- Annual update on strategic human resources issues: <u>Confirmed</u> for the 38th PCB meeting.
- UNAIDS Secretariat Staff Association (USSA) report: <u>Confirmed</u> for the 38th PCB meeting.
- **Thematic Segment:** The role of communities in ending AIDS by 2030: <u>Confirmed</u> for the 38th PCB meeting

# Requests with no specific timeframe in 2016

The Secretariat presented the decision points of the PCB for agenda items with no specific timeframe in 2016 and the Bureau decided as follows:

- [Gap analysis on paediatric HIV treatment, care and support]

Decision point 8.6 from the 35th PCB meeting: *Requests UNAIDS to gather evidence and analyze the effects of stigma, discrimination and structural barriers on mothers' and children's health, and the need for psycho-social support for children and affected families, in partnership with children and adolescents living with HIV and their caregivers; and to report back at a future Programme Coordinating Board.* 

Decision point 8.9 from the 35th PCB meeting: *Requests UNAIDS to provide to a future PCB an updated gap analysis on paediatric HIV prevention, treatment, care and support.* 

The Bureau agreed that follow-up to the report on gap analysis on paediatric HIV prevention, treatment; care and support, presented to the PCB in December 2014 would be considered by the PCB at the 39th PCB meeting in December 2016.

- Decision point 8.8 from the 35th PCB meeting: **Requests UNAIDS to provide regular** reporting through the UBRAF on concrete actions taken and progress made by countries towards reaching the 90-90-90 targets for children.

The Bureau agreed that reporting on progress on treatment for children would continue to be integrated in the UBRAF reporting in the UBRAF 2016-2021.

- [Update on actions to reduce stigma and discrimination in all its forms] Decision point from the 35<sup>th</sup> PCB meeting: *Requests the Joint Programme to support Member States and civil society in accelerating efforts to ensure enabling legal and social environments where everyone, including key populations and other* 

# marginalized populations, can access HIV services; and provide a report at a future meeting of the PCB.

The Bureau agreed that UNAIDS strategy 2016-2021 includes a section on enabling legal and social environments to access HIV services. This would constitute a baseline for identifying gaps and technical support needs of countries for which UNAIDS would provide support and report back **to the Board on actions in June 2017**.

[Report by the NGO representative]
 Decision point 4.1 from the 35th PCB meeting; Requests the Joint Programme, working with relevant partners, to produce a synthesis report of existing research and literature on intellectual property (IP)-related and other factors impacting the availability, affordability, and accessibility of treatment and diagnostics for HIV and co-infections in low and middle-income countries, including the following provisions in articles 71a and b of the 2011 Political Declaration, which state:

a. The use, to the full, of existing flexibilities under the Agreement on Trade-Related Aspects of Intellectual Property Rights specifically geared to promoting access to and trade in medicines, and, while recognizing the importance of the intellectual property rights regime in contributing to a more effective AIDS response, ensure that intellectual property rights provisions in trade agreements do not undermine these existing flexibilities, as confirmed in the Doha Declaration on the TRIPS Agreement and Public Health, and call for early acceptance of the amendment to article 31 of the TRIPS Agreement adopted by the General Council of the World Trade Organization in its decision of 6 December 2005;

b. Addressing barriers, regulations, policies and practices that prevent access to affordable HIV treatment by promoting generic competition in order to help to reduce costs associated with life-long chronic care and by encouraging all States to apply measures and procedures for enforcing intellectual property rights in such a manner as to avoid creating barriers to the legitimate trade in medicines, and to provide for safeguards against the abuse of such measures and procedures;

and present it to the Programme Coordinating Board in 2015 for its consideration.

Bureau members agreed that this is an important discussion which should build on the outcomes of the HLM on AIDS 2016, the Durban International AIDS Conference and the report of the UN Secretary General's High-Level Panel (HLP) on Access to Medicines. The Bureau decided that these decision points would be addressed at **the 39th PCB meeting in December 2016.** 

# Requests with no timeframe

# [HIV in prisons and other closed settings]

Decision 7.2 from the 37th PCB meeting: **Requests the Joint Programme to support** member states and civil society in strengthening a human rights and public health approach to prison health and accelerating efforts to increase access to knowledge and evidence based HIV prevention, treatment and care services for people of all ages in prisons and other closed settings, including for women and girls, people living with HIV and other key populations, in line with the UNAIDS Strategy 2016-2021: On the Fast-Track to end AIDS, and in line with the revised United Nations Standard Minimum Rules for the

# treatment of Prisoners and report on concrete actions taken at a future meeting of the Programme Coordinating Board.

The Secretariat informed the Bureau that they had consulted UNODC on the best timing for the reporting on this agenda item and they had indicated that it would be June next year (2017) at the 40th PCB. This would give a year and a half to report on the implementation of concrete actions taken by the Joint Programme to support countries and CSOs in strengthening a human rights and public health approach to HIV in prisons, as well as accelerating efforts to increase access to knowledge and evidence based HIV prevention, treatment and care services for people of all ages in prisons and other closed settings. It would also allow the reflection of the outcome of the UNGASS on the World Drug Problem which will be held in April 2016. The Bureau agreed that this agenda item would be considered at the **40th PCB meeting in June 2017**.

Following the presentation of the possible agenda items, the Chair requested the Secretariat to prepare an annotated agenda of the 38th PCB meeting based on the agenda items that were discussed and agreed by the Bureau and to circulate it for electronic approval by the Bureau and subsequent posting on the UNAIDS website.

# 2. Update on the UBRAF Working Group

The Secretariat provided the Bureau with the following updates:

A note for the record of the first meeting of the PCB working group on the UBRAF was shared with the Bureau ahead of the meeting (annex 2). At the meeting agreement had been reached on a number of issues, including that the boundaries and limitations of the UBRAF – what the UBRAF is and what it isn't – needed to be explained along with the use of the UBRAF, e.g., for prioritization and work planning – and principles for resource allocation and staff deployment needed to be more explicit.

The Working Group had made concrete recommendations to restructure and produce a more detailed and prioritized UBRAF– as requested by the 37th PCB meeting in October 2015.

The Secretariat is currently working closely with the working group members and the group would meet for a second face-to-face meeting on 2-3 March 2016 to agree on the structure and presentation of a more detailed and prioritized UBRAF and agree on the full set of UBRAF indicators.

Following the second meeting, the UNAIDS Secretariat and Cosponsors will complete the development of a more detailed and prioritized UBRAF, indicators will be tested, baselines, milestones and targets set, and the UBRAF 2016-2021 documents will be finalized for the 38th PCB (with additional review and/or inputs from the working group electronically and through webinars, as necessary).

## 3. Preparation for the thematic segment of the 38th PCB meeting

The Secretariat informed the Bureau that a draft outline of the Background Note is currently being drafted. The proposed timeline is as follows:

**During the second week of February**: Inputs from UNAIDS Cosponsors on the draft outline of the background note

**By end February**: Invitation to express interest to be part of the PCB Working Group (WG) sent to all PCB constituencies with Terms of Reference (ToRs) and draft outline of the background note.

By the second week of March: First Working Group (WG) meeting (discussion on the draft outline, timeline and preparations for the background note).

By the third week of March: Call for submission of country best practices on successful programmes to respond to the theme

By the first week of April: First draft of Background Note shared with WG (by email) By the second week of April: Second WG meeting (discussion on the first draft Background Note).

By the third week of April: Deadline for the WG members to send additional written inputs on the draft Background Note.

**By end April**: Secretariat to share the revised draft Background Note with WG members **First week of May**: Background Note finalized and cleared – sent for Translation **By Second week of May**: Third meeting of the WG (discussion on draft agenda, format of the day and inputs for suggested speakers).

# 4. Update on preparations of the UN General Assembly Special Session (UNGASS) on the World Drug Problem in 19-21 April 2016 and the 2016 HLM

# UNGASS) on the World Drug Problem in 19-21 April 2016

The Secretariat informed that UNAIDS is actively involved in the preparations of the UNGASS on the World Drug Problem, for which UNODC is the lead organisation. The UNAIDS position paper *A Public Health and Rights Approach to Drugs* has been shared during principal level Missions' briefing, New York, 20 November 2015. The paper promotes a people-centred health and rights approach to the World Drug Problem to be incorporated in the Outcome Document of the UNGASS on the World Drug problem (19-21 April 2016). The Paper has been shared with Missions in Geneva, as well as Civil Society Organisations and is published on the UNAIDS and the special UNGASS websites.

The UNAIDS Secretariat indicated that it expects to be engaged in related meetings, as follows:

- 'Trilogy' of high-level multi-stakeholder events on UNGASS "Focus on people, public health and human rights" hosted by Switzerland and Colombia, in Geneva (21 October 2015), Vienna (9 December 2015), New York (9 February).
- Wilton Park retreat (November 2015)
- CND/intersessional (December '15)
- Briefing to European Union Horizontal Working Party on Drugs (January 2016)
- Statement at the WHO Executive Board meeting (January 2016)

# HLM on AIDS, New York 8-10 June 2016

The Secretariat provided the following information:

- The United Nations General Assembly High Level Meeting (HLM) on AIDS is confirmed for the 8-10 June in New York. It will be informed by the report of the United Nations Secretary General report.
- The Ambassadors of Switzerland and Zambia in New York have been appointed by the President of the General Assembly as Co-facilitators.

- The modalities resolution (A/RES/70/228) sets out the structure of plenary and possible 5 panels.
- The opening plenary will feature the President of the General Assembly, the UN Secretary General, the UNAIDS Executive Director, an eminent person and a person living with HIV.

# 5. Any other business

The Secretariat advised that:

ECOSOC agreed on Tuesday 2 February that Norway will replace Denmark in one of the WEOG seats in the PCB.

The PCB NGOs will introduce the request to the Chair to use the inter-sessional decision making process for the approval of the nomination of the PCB NGO delegate representing the Latin American and Caribbean region.

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#### Annex 1: Table of follow-up items from PCB meetings - for possible inclusion in the agenda of the 38th PCB Meeting

#### AGENDA ITEMS FOR THE 38th PCB MEETING (28-30 June 2016):

Standing items	Agenda items
	Report of the 37th PCB meeting
	Executive Director (EXD) report
	Report by the Chair of the Committee of Cosponsoring Organisations (CCO)
	Report by the NGOs representative : [not presented at the 37th PCB meeting and postponed by the Board to the 38th PCB meeting Topic: Sexual Rights, Sexual Health, Reproductive Rights and Reproductive Health of People Most-Affected by HIV: The Right to Development
	Leadership in the AIDS Response
	[UBRAF 2016-2021] Decision 6.1(37th PCB): Approves the 2016-2021 Unified Budget, Results and Accountability Framework, taking into account the views expressed by the Board, recalls decision point 7.2 of the 36th meeting of the Programme Coordinating Board and looks forward to the presentation of a revised Results and Accountability Framework for approval at the 38th meeting of the Programme Coordinating Board
	[UBRAF 2016-2021] Decision 6.2(37th PCB):Approves US\$ 485 million as the core budget for 2016-2017 and the budget allocations of the Cosponsors and the Secretariat and looks forward to a clear link between results and resources as set out in the final, prioritized and more detailed Results and Accountability Framework to be presented at the 38th meeting of the Programme Coordinating Board
	[UBRAF 2016-2021] Decision 6.3(37th PCB): Requests UNAIDS to report back annually to the Programme Coordinating Board on the implementation of the 2016-2021 Unified Budget, Results and Accountability Framework demonstrating clearly the link between resources and results, cost and value consciousness, and accountability
	[UBRAF 2016-2021] Decision 6.7(37th): Looks forward to a second Financing Dialogue, aimed at ensuring predictable and full funding for the implementation of the 2016-2021 UBRAF, to be held before the 38th meeting of the Programme Coordinating Board
	Follow up to the thematic segment from the 37th PCB meetingShared responsibility and global solidarity for an effective, equitable and sustainable HIV response for the post-2015 agenda: Summary report)
	Update on Strategic human resources management issues
	Statement by the representative of the UNAIDS Staff Association

Possible items 38th PCB meeting	Dec. no.	Agenda items			
35th	8.6	[Gap analysis on paediatric HIV treatment, care and support] Requests UNAIDS to gather evidence and analyze the effects of stigma, discrimination and structural barriers on mothers' and children's health, and the need for psycho-social support for children and affected families, in partnership with children and adolescents living with HIV and their caregivers; and to report back at a future Programme Coordinating Board.			
35th	8.8	[Gap analysis on paediatric HIV treatment, care and support] WNAIDS to provide regular reporting through the UBRAF on concrete actions taken and progress made by countries towards reaching the 90-90-90 targets for children.			
35th	8.9	[Gap analysis on paediatric HIV treatment, care and support] Requests UNAIDS to provide to a future PCB an updated gap analysis on paediatric HIV prevention, treatment, care and support			
35th	9.2	[Update on actions to reduce stigma and discrimination in all its forms] Requests the Joint Programme to support Member States and civil society in accelerating efforts to ensure enabling legal and social environments where everyone, including key populations and other marginalized populations, can access HIV services; and provide a report at a future meeting of the Programme Coordinating Board.			
35th	4.1	[Report by the NGO representative] Requests the Joint Programme, working with relevant partners, to produce a synthesis report of existing research and literature on intellectual property (IP)-related and other factors impacting the availability, affordability, and accessibility of treatment and diagnostics for HIV and co-infections in low and middle-income countries, including the following provisions in articles 71 a and b of the 2011 Political Declaration, which state: existing flexibilities under the Agreement on Trade-Related Aspects of Intellectual Property Rights specifically geared to promoting access to and trade in medicines, and, while recognizing the importance of the intellectual property rights regime in contributing to a more effective AIDS response, ensure that intellectual property rights provisions in trade agreements do not undermine these existing flexibilities, as confirmed in the Doha Declaration on the TRIPS Agreement and Public Health, and call for early acceptance of the amendment to article 31 of the TRIPS Agreement adopted by the General Council of the World Trade Organization in its decision of 6 December 2005; policies and practices that prevent access to affordable HIV treatment by promoting generic competition in order to help to reduce costs associated with life-long chronic care and by encouraging all States to apply measures and procedures for enforcing intellectual property rights in such a manner as to avoid creating barriers to the legitimate trade in medicines, and to provide for safeguards against the abuse of such measures and procedures; and present it to the Programme Coordinating Board in 2015 for its consideration.			
37th	9.1 a	Thematic Segment : The role of communities in ending AIDS by 2030.           Agrees that the theme for the 37th PCB meeting be The role of communities in ending AIDS by 2030.			

Requests with no timeframe					
37th	7.2	[HIV in prisons and other closed settings] Requests the Joint Programme to support member states and civil society in strengthening a human rights and public health approach to prison health and accelerating efforts to increase access to knowledg and evidence based HIV prevention, treatment and care services for people of all ages in prisons and other closed settings, including for women and girls, people living with HIV and other key populations, in line with the UNAIDS Strategy 2016-2021: On the Fast-Track to end AIDS, and in line with the revised United Nations Standard Minimum Rules for the treatment Prisoners and report on concrete actions taken at a future meeting of the Programme Coordinating Board.			



# PCB Working Group to review and further develop the Results and Accountability Framework of the 2016-2021 UBRAF

At its 37th meeting 26-28 October, the UNAIDS Programme Coordinating Board (PCB) approved the 2016-2021 Unified Budget, Results and Accountability Framework (UBRAF), taking into account the views expressed by the Board. The PCB also recalled decision point 7.2 of the 36th meeting of the PCB – establishing a Working Group on the UBRAF – and noted that it *'looks forward to the presentation of a revised Results and Accountability Framework for approval at the 38th meeting of the Programme Coordinated Board'.* 

# Meeting 14-15 December 2015, Geneva Note for the Record

Following a webinar on 27 November, a face-to-face meeting of the PCB Working Group on the UBRAF took place on 14 and 15 December in Geneva. Four technical experts nominated by member states, two technical experts nominated by the PCB NGO delegation and three Cosponsor representatives in addition to UNAIDS Secretariat staff participated in the meeting (see list of participants in the annex).

The meeting was very productive with discussion focusing on 1. ways of improving the structure and presentation of the UBRAF, as well as reporting on the UBRAF, and; 2. ways of refining the indicators in the UBRAF. The Working Group agreed that considerable progress had been made since the 2016-2021 UBRAF was approved by the PCB at the end of October 2015 and that additional work was needed by the Group to be able to meet the expectations of a more detailed and prioritised UBRAF to be presented to the 38th PCB in June 2016.

The Working Group therefore agreed to continue working virtually and electronically through January and February 2016 and meet for a second face-to-face at the beginning of March 2016 to agree on a more detailed and prioritised UBRAF to be finalized in March-April, and presented to the 38th PCB in June 2016.

## Summary of discussions and recommendations on a more detailed and prioritised UBRAF

The Working Group reviewed Part I and Part II of the 2016-2021 UBRAF and discussed options for a revised and more detailed UBRAF.

Consensus was reached on adding the following to the current 2016-2021 UBRAF document:

- boundaries and limitations of the UBRAF what the UBRAF is and what is not;
- an explanation on how the UBRAF is used *e.g., for prioritisation and work planning*;
- principles for resource allocation and staff deployment.

Proposals were made on ways to restructure the UBRAF document, for instance, by giving more prominence to the current Annex with outputs and output descriptions. Additional suggestions from members of the Working Group include the following:

- Make the roles of the Secretariat and Cosponsors more explicit, including global roles and the work of the Joint Programme in different regions;
- Further articulate the Theory of Change that underlines expected results/outputs;
- Review financial tables in order to retain only essential information and move some of the more detailed figures in Annexes or possibly the Web Portal;
- Add information about the allocation of resources and improve reporting on resources spent at country level to strengthen accountability;
- Provide more clarity on non-core resources and linkages to Secretariat and Cosponsors work plans;
- Explore options for differentiated reporting formats, i.e., different kinds of reporting serving different purposes;
- Consider ways of bringing a more rigorous external perspective in the UBRAF, e.g., a Technical Review Panel; and strengthen the Evaluation function of the Joint Programme.

# Summary of discussions and recommendations on UBRAF indicators

A number of UBRAF indicators were assessed for validity and reliability, and concrete indicators and measurement methods proposed. In particular, the analysis of indicators focused on the following:

- if the outputs relate well to the result areas in the Strategy;
- if the indicators are appropriate proxy measures for the outputs;
- if the indicators measure elements that are plausible results of the work of the Joint Programme at country level (attributable to the work of the Joint Programme, at least by proxy).

The Working Group recommended prioritizing measurement questions under each indicator and to limit them to the extent possible. Questions should be specific: easy to answer with: *Yes/No* or *Not Relevant*. The indicators should be considered as met only if answers to all questions under the indicators are a *Yes* (excluding the cases of non-relevance). This approach is meant to avoid scoring formulas that are difficult to interpret, and to improve data quality assurance.

# Summary of next steps

Actions	Time line
<ul> <li>Additional details and options of presenting the UBRAF and reporting to be shared with Working Group members by UNAIDS Secretariat</li> <li>Working Group refine indicators (including measurement questions and interpretation) through electronic exchanges</li> <li>UNAIDS Secretariat to share the revised set of indicators for review a feedback</li> </ul>	
<ul> <li>Working Group to consider options of presenting the UBRAF and reporting on the UBRAF</li> </ul>	By end February 2016

٠	Working Group to finalise the indicator review	
•	Second face- to-face meeting of the Working Group to (1) agree on the structure and presentation of a more detailed and prioritised UBRAF and (2) validate the full set of UBRAF indicators	By early March 2016
•	UNAIDS Secretariat and Cosponsors to complete the development of a more detailed and prioritised UBRAF UNAIDS Secretariat to coordinate testing of indicators; collection of baselines and setting of milestones and targets	By end March 2016
٠	Finalisation of UBRAF 2016-2021 documents for the 38th PCB (with additional review and/or inputs from the Working Group by email or webinars, as necessary)	By mid April 2016

# ANNEX

# **List of participants**

# Independent experts nominated by member states

**Dr. Brigitte Jordan-Harder (Germany)**: Dr. Jordan-Harder is a physician with background in international public health, communicable diseases control and sexual and reproductive health with emphasis on HIV and AIDS. Her qualifications include, among others: programming, implementation and monitoring of HIV prevention, care and treatment and sexual and reproductive health programmes; support to multi sectoral responses to HIV; policy and strategy development; programme planning, evaluation and review; design and management of results oriented monitoring systems. In addition, she has experience as a member of past advisory groups related to UBRAF monitoring systems and good knowledge of UN organizations.

**Mr. Stein Erik Kruse (Norway):** Mr. Kruse is a Senior Consultant with the Nordic Consulting Group. He has experience of programme evaluations, design of M&E systems, project and programme development and sector/ country programming, organisational development and research, including with multilateral organizations and on public health. Mr. Kruse reviewed the 2012-15 UBRAF and his recommendations contributed to the development of the 2016-21 UBRAF.

**Dr Juliana Givisiez (Brazil):** Dr Givisiez is an epidemiologist with background in public health for over ten years. She has been working in the Department of STIs, AIDS and Viral Hepatitis in Brazil since 2009, most of that period in the Monitoring & Evaluation team. Her main activities were focused on strategic information, especially the development and monitoring of indicators and projects and the elaboration of national and international reports. She has recently been assigned as the coordinator of the Department's International Cooperation.

**Mr. Raymond Yekeye (Zimbabwe):** Mr. Yekeye is Programme Director at the National AIDS Council in Zimbabwe. He also serves as the Co-Chair of the Indicators Working Group of MERG (Monitoring and Evaluation Reference Group) since its establishment. He has a solid background and country experience in monitoring and evaluation as well as on programmatic HIV issues from the East and Southern Africa region. Currently he is also the chair of the organizing committee of the 2015 International AIDS Conference for Africa (ICASA).

# Technical experts nominated by the PCB NGO delegation

**Ms. Luisa Orza (ATHENA network).** Luisa Orza is Programmes Director for the ATHENA Network as well as a Salamander Trust Associate, and STOPAIDS Trustee. Prior to this, she was M&E Officer for ICW from 2004 - 2009. Over the past ten years Luisa's work has focused primarily on the sexual and reproductive health and rights of women living with HIV; strengthening the leadership and participation of women living with HIV; nicluding young women living with and most affected by HIV; and on preventing and addressing violence against women in the context of and response to HIV.

**Dr. Michael Arnold (Center for Sexuality and Health Disparities).** Dr. Arnold is a researcher with over 15 years of experience in programme evaluation, behavioral and psychosocial health research, and social policy analysis. Research topics include the influence of programme, policy, and environmental factors on the well-being of marginalized and disadvantaged groups. His experience with qualitative methods and using data to promote social justice is particularly relevant to the working group.

## **Cosponsor Representatives**

Mr. Chris Castle, Chief of Section, Division for Teaching, Learning and Content, Education Sector, UNESCO

Ms. Adriana Stahmer, Division for Teaching, Learning and Content, Education Sector, UNESCO

Mr. Kerry A. Kutch, HIV Department, WHO

# **Representatives of UNAIDS Secretariat**

Mr. Vinay Saldanha, Director, Regional Support Team, Eastern Europe and Central Asia

Ms. Mary Mahy, Chief, Strategic Information and Monitoring

# Secretariat of the Working Group

Mr. Joel Rehnstrom, Director, Planning, Finance and Accountability

Mr. Morten Ussing, Chief, Governance and Multilateral Affairs

Ms. Elisabetta Pegurri, Senior Adviser, Planning, Finance and Accountability

Ms. Abigail David, Senior Planning and Monitoring Adviser