United Nations Development Programme (UNDP)

2022 Organizational Report
HIV in UNDP’s mandate

UNDP works in 170 countries and territories to help eradicate poverty, reduce inequalities and exclusion, and build resilience. As the UN’s development agency, UNDP plays a critical role in helping countries achieve the SDGs and deliver on the pledge to leave no one behind. UNDP is one of the founding Cosponsors of UNAIDS and as such convenes work on supporting law, human rights and stigma and discrimination reduction to improve national HIV responses. UNDP co-convenes, together with UNFPA and the UN Office on Drugs and Crime (UNODC), the work on rights, access to justice and access to services for people living with HIV and for key populations most at risk of HIV. Together with the World Bank, UNDP co-convenes the work on improving efficiencies in HIV responses. UNDP is a principal recipient of Global Fund grants in challenging operational environments and a technical and policy support provider to the Global Fund.

Key UNDP strategy for HIV

UNDP’s work in HIV and health is guided by the 2030 Agenda for Sustainable Development, the 2021 Political Declaration on HIV and AIDS, the Global AIDS Strategy (2021–2026), the UNDP Strategic Plan (2022–2025), and, specifically, the UNDP HIV and Health Strategy (2022–2025).

The Strategic Plan and the HIV and Health Strategy commit UNDP to address the inequalities that drive pandemics and to strengthen governance and systems for health in order to regain ground lost against HIV, TB and malaria as a result of the COVID-19 pandemic, and to address emerging priorities such as noncommunicable diseases (NCDs), mental health and pandemic preparedness. UNDP’s work on HIV and health also contributes to the organization’s core mission of reducing poverty and inequalities, building resilience and helping to ensure that no one is left behind. UNDP’s activities in HIV and health for the period 2022–2025 encompass three action areas, each of which has three key policy and programming priorities. These three action areas are closely interrelated: work in one action area will often be dependent upon and contribute to progress in others.

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<th>Action area 1</th>
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<td>Reducing inequalities and exclusion that affect health and drive epidemics</td>
<td>Promoting effective and inclusive governance for health</td>
<td>Building resilient and sustainable systems for health</td>
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<td><strong>Key priorities</strong></td>
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<td><strong>1.1</strong> Promoting gender equality and empowering women and girls.</td>
<td><strong>2.1</strong> Enabling legal, policy and regulatory environments for HIV and health.</td>
<td><strong>3.1</strong> Implementation support and capacity development for large-scale health programmes.</td>
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<td><strong>2.2</strong> Strengthening governance, including to address NCDs,</td>
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1.2 Ensuring inclusion of key populations at risk of HIV and other excluded groups.
1.3 Strengthening inclusive social protection.

mental health and accelerate tobacco control.

2.3 Enhancing sustainable financing for HIV and health.

3.2 Planetary health, including climate, energy and health.
3.3 Pandemic preparedness.

Top results in 2022

150 countries supported on HIV and health. UNDP supported 104 countries on HIV, among them 45 countries through the UNDP-Global Fund partnership. UNDP supported 97 countries on HIV and TB-related rights, 69 countries to address gender equality and gender-based violence, 87 countries to work with and for key populations, 83 countries on LGBTI+ rights and inclusion, and 31 countries on HIV-sensitive social protection.

Over 1.6 million people received HIV treatment through the UNDP-Global Fund partnership. UNDP managed 29 Global Fund grants, covering 21 countries, and two regional programmes, covering an additional 11 countries, many of which in 2022 were affected by conflict, crises, sanctions and other risks. Despite these challenges, UNDP continued to deliver results at scale in support of the HIV, TB and malaria responses, including providing HIV tests to more than 3 million people and ART to 1.61 million people. UNDP-managed Global Fund grants supported the treatment of 98 000 people for TB.

Enabling legal, policy and regulatory environments for HIV and health. UNDP continued to lead and partner in supporting countries to advance the recommendations of the independent Global Commission on HIV and the Law. This work contributed to the decriminalization of HIV in Zimbabwe and the introduction of human rights-based drug legislation in Côte d’Ivoire. UNDP supported the Democratic Republic of the Congo to develop and implement the plan for the Global Partnership for action to eliminate all forms of HIV-related stigma and discrimination. UNDP also partnered with Parliamentarians for Global Action to update the Handbook for Parliamentarians on advancing the human rights and inclusion of LGBTI people, which was launched at the 145th Inter-Parliamentary Union Assembly in Kigali, Rwanda.

UNDP continued to assist regional judges’ fora in Africa, the Caribbean and eastern Europe. A judge who participated in the Caribbean judiciary forum delivered the 2022 court decision decriminalizing consensual same-sex sexual activity in Saint Kitts and Nevis. As part of a partnership with the Asia Pacific Forum of National Human Rights Institutions, UNDP expanded its work with national human rights institutions on LGBTI+ issues in Australia, Bangladesh, Fiji, India, Mongolia, Myanmar, Nepal, New Zealand, the Philippines, Sri Lanka, Thailand and Timor-Leste. UNDP addressed the issue of shrinking civic space, which is critical factor for community-led HIV responses, through an issue brief on safe and open civic spaces for HIV responses, a discussion paper on strengthening civic space and civil society engagement in the HIV response, as well as programmatic work at country level.

2 Strengthening civic space and civil society engagement in the HIV response. New York: UNDP; December 2022.
Support provided for rights and access to key populations to services and community-led responses. In the lead-up to World AIDS Day, UNDP launched “SCALE: Removing barriers to HIV services”, a two-year partnership with PEPFAR to expand key population-led approaches for countering discriminatory laws that block progress on HIV. In line with the 10–10–10 strategic targets of the Global AIDS Strategy, SCALE focuses on supporting efforts to decriminalize HIV transmission, exposure and nondisclosure, as well as key populations. It involves identifying and scaling up effective approaches, strengthening the capacity and leadership of key populations, and supporting South–South learning. In India, thanks to UNDP support, the National Network of Transgender Persons was formed and support was provided to the transgender community through advocacy, skills building and livelihood development. In Zimbabwe, UNDP assisted the Zimbabwe National Key Populations Forum to contribute to the Global Fund’s proposal and to the mid-term review of the Zimbabwe National HIV and AIDS Strategic Plan. UNDP’s #WeBelongAfrica programme aims to promote an inclusive approach to sexual and gender diversity that advances the SDGs and the 2030 Agenda in sub-Saharan Africa. UNDP engaged and partnered in 83 countries on LGBTI+ rights and inclusion, including on countering homophobic and transphobic bills and other attempts to limit the rights and access of LGBTI+ people to services. In 2022, UNDP piloted the LGBTI Inclusion Index in Angola, the Dominican Republic, Ecuador, Georgia, Guyana, New Zealand, Pakistan and Viet Nam.

Gender and service access of young women and girls addressed. UNDP assisted the Central African Republic in revising its Family Code, the country’s key legislation on gender equality. In China, UNDP supported a series of youth leadership development convenings on gender and health for LGBTI+ youth and people living with HIV to advocate for HIV, mental health, transgender health and gender-based violence services. UNDP supported Liberia’s Ministry of Health to address the barriers that women face in accessing HIV and TB services and support related to reproductive health and gender-based violence. In South Sudan, UNDP worked with UNFPA and community organizations, including National Empowerment of Positive Women United, to deliver community-based HIV prevention, including addressing sexual and gender-based violence for sex workers. In Sudan, UNDP partnered to build capacity for civil society organizations to tackle gender-based violence, leading to the development of a national action plan to address gender-based violence and improve access to shelters, women’s organizations, helplines and other support services. In Kazakhstan, UNDP supported the Union of People Living with HIV in developing its strategic plan for 2023–2027 and the capacity-building of women living with HIV and nongovernmental organizations for preventing gender-based violence. In South Africa, UNDP assistance enabled led to the provision of single-gender accommodation for victims of floods in KwaZulu-Natal province.

Access to medicines and other health technologies enabled. UNDP aids countries to increase access to PrEP for the most vulnerable communities. In Pakistan, with support from the Global Fund, UNDP partnered with local community-based organizations, government, the UNAIDS Secretariat and WHO to launch PrEP delivery through networks of peer outreach workers and drop-in centres. It did so by working closely with key populations and by training government health workers at existing ART centres. In Colombia, UNDP assisted

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3 Less than 10% of countries have punitive legal and policy environment that deny or limit access to services, less than 10% of people living with HIV and key population experience stigma and discrimination, less than 10% women and girls, people living with HIV and key population will experience gender inequalities and violence.
the government in introducing a digital solution to scale up PrEP: the PrEP-Colombia.org platform, which combined with training on combination prevention strategies, reached more than 20,300 people. UNDP published "Using competition law to promote access to health technologies", which provides further policy guidance on strategies to improve access to health technologies, particularly through recent examples of the use of competition law. In response to evidence that people living with HIV are more likely to have type 2 diabetes than people without HIV, UNDP published a working paper titled "A competition law approach to promoting access to insulin" to draw attention to the potential relevance of competition law as a tool to increase access to insulin. UNDP partnered with the governments of Malawi, Kazakhstan and the United Republic of Tanzania to support various aspects of national legislation and policy reform to increase access to medicines, opportunities for domestic production and technology transfer.

Promoting efficiencies in HIV responses. Commissioning NGOs to deliver HIV and health services via social contracting arrangements can be an effective way for countries to support community-led responses. UNDP developed a model for assessing the social return on investment from social contracting and used this to develop guidance on contracting NGOs to provide services for key populations and vulnerable groups. UNDP supported Algeria, Kazakhstan, Kyrgyzstan, Moldova, Morocco, Tajikistan, Tunisia and Ukraine to develop social contracting guidelines.

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5 A competition law approach to promoting access to insulin: a working paper. New York: UNDP; 2022.