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## UBRAF thematic report: coordination, coherence and partnerships

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## Results

Partnership, coordination and coherence are in the DNA of UNAIDS. By its very nature, the Joint Programme pools expertise and resources of 11 Cosponsors and a Secretariat to convene transformative and inclusive partnerships to unite the UN system, governments, people living with HIV, civil society, the private sector, major financing institutions, academia, science, the media and influential public figures. These partnerships drive systemic change on critical drivers of the epidemic and ensure coherence across all key stakeholders in the global response to HIV.

At the country level, UNAIDS functions through Joint UN Teams and Joint Programmes of Support which promote coherent and effective UN action in support of an expanded national HIV response, under the leadership of the UN Resident Coordinator. UNAIDS is a miniature model of ‘Delivering as One’ and is fully involved in the development of the second generation of this UN-wide initiative to increase coordination and coherency at all levels.

Notable results include:

### Overcoming stigma and discrimination against people living with HIV

Through technical, political and financial partnerships and programmes, UNAIDS has accelerated changes in overturning the negative practices and attitudes towards people living with HIV. A key endeavour in this area for UNAIDS is the Stigma Index. Working with partners, the Stigma Index is implemented in 70 countries, providing comparable evidence and benchmarks for national AIDS programme managers to help them eliminate barriers to universal access to HIV services, such as antiretroviral treatment.

Another example is demonstrated by the support UNAIDS provided to the East Africa Legislative Assembly (EALA) in the development and subsequent passing of the East African Community HIV and AIDS Prevention and Management Bill in April 2012. This regional HIV bill seeks to protect and promote the human rights of people living with HIV and create a common, responsive legal framework for HIV in the region applying a rights-based approach. Upon ratification by the five governments, this regional law will take precedence over discriminatory and ineffective national provisions relating to HIV that still exist in many EALA member countries.

In 2013, the UNAIDS Secretariat, in partnership with the Global Network of People Living with HIV (GNP+), elaborated the Positive Health, Dignity and Prevention: Operational Guidelines. These guidelines demonstrate the Secretariat’s strong commitment to the application of the Greater Involvement of People Living with HIV (GIPA) principles and placing people living with HIV at the centre of decision making, policy design and programme implementation.

During 2012-13, the Secretariat, in collaboration with Ecumenical Advocacy Alliance (EAA), GNP+ and the International Network of Religious Leaders Living with and Affected by HIV (INERELA+), supported the development of *Framework for Dialogue between Religious Leaders and People Living with HIV* at the national level. The framework ensures that dialogue is grounded in evidence and aims to ensure that national stakeholders identify and work together on issues that face their communities. The exemplary results from its application in Ethiopia, Malawi and Myanmar will guide further expansion in other countries and regions.

The Secretariat was central to the establishment in 2012 of the Robert Carr Civil Society Network

Fund, which provides core funding to ensure the long term survival of HIV civil society networks, particularly networks of people living with HIV and key populations. With financial support from the governments of the UK, US, and Norway, and the Bill & Melinda Gates Foundation, 24 civil society networks supporting universal access were accepted for funding during the first year of this fund.

### **Country-owned, gender responsive, and human rights-based responses**

UNAIDS has invested heavily in building country capacity, including with civil society, to generate the strategic information essential to guide national AIDS responses. In the first six months of 2013, UNAIDS held 11 regional workshops with participants from 122 countries to train country partners in the latest modelling and statistical methodologies for producing national HIV estimates and projections.

Partnerships have also fostered progress in eliminating gender inequality and supporting women and girls to protect themselves from HIV. Nearly two thirds of countries have strengthened gender equality within their HIV responses, and more than 700 civil society organizations are implementing the UNAIDS operational plan on gender, entitled *Agenda for Accelerated Country Action for Women, Girls, Gender Equality and HIV*. UNAIDS worked with national AIDS coordinating authorities in 22 countries to integrate gender equality into HIV strategies, policies, laws, institutions, budgets and accountability frameworks. By the end of 2013, 19 countries also had completed a gender assessment of their national HIV epidemic, context and response, using the UNAIDS Gender Assessment Tool, their findings informing concept notes.

UNAIDS was involved in efforts to strengthen partnerships with civil society, including re-launching the Global Coalition on Women and AIDS (GCWA), scaling up treatment and engaging with religious leaders on human rights issues.

The Secretariat provided support and technical guidance in cases related to the forced or coerced sterilization of women living with HIV. This technical guidance was coupled with the advocacy of the GCWA, which issued a statement in solidarity and support of the International Community of Women with HIV/AIDS' (ICW) global efforts in relation to stopping the practice and appealing for justice for survivors of forced or coerced sterilization.

At the country level, the Secretariat works directly with ministries of health and justice, members of parliaments, people living with and affected by HIV, national AIDS bodies and other key partners, to ensure the development and implementation of laws and policies that support effective HIV responses and protect human rights. The Secretariat has provided official comments to draft legislation based on public health evidence and human rights principles, has convened stakeholder consultations on laws, and carried out advocacy targeted at key national stakeholders. Since 2010, the Secretariat has provided official comments to HIV legislation in 18 countries. In Congo, Gabon, Mongolia, Senegal and Togo, and these comments have been pivotal in informing the adoption of protective HIV-related laws.

### **Evidence-informed, costed national plans aligned to other sectoral processes**

UNAIDS agendas on evaluation, effectiveness, efficiency and sustainability of AIDS responses grew in strength during 2012 and 2013. UNAIDS data and estimates were the foundation for the Global Fund's HIV needs and projections, as well as a basis for PEPFAR's Blueprint on HIV prevalence,

incidence and scale-up of HIV services. Global HIV data is now updated annually, rather than biennially, using Global AIDS response progress reporting (GARPR) data submitted by counties. Improved strategic information on the costs, efficiency and financing of HIV responses was also made available in a number of UNAIDS case studies.

The Monitoring and Evaluation Reference Group (MERG) was reconvened and met three times in the biennium, with close collaboration with PEPFAR and the Global Fund. Global monitoring and evaluation priorities were set, with groups on indicators and evaluation. Position papers on aligning surveillance and programme data for key populations were developed.

In July 2013, the Secretariat and the UNAIDS Reference Group on Estimates, Modelling and Projections convened a consultation on geographic “hotspots” and key populations to review recent research on identifying such areas. A key recommendation from the consultation was for countries to collect and analyse data at the lowest relevant geographical level to enable more targeted programming. A collaborative, multi-disciplinary taskforce has been commissioned by UNAIDS with participation from PEPFAR, the Global Fund, WHO, World Bank, national AIDS commissions and other key partners to follow up on meeting recommendations and develop a short-, medium- and long-term strategy.

Maximizing the effectiveness of services and sustaining responses for people living with HIV demands the strategic integration of HIV services in other service systems and sectors. Progress has been made in the integration of service delivery in a number of key areas such as HIV and TB, the prevention of mother-to-child transmission of HIV, STIs and sexual and reproductive health and non-communicable diseases.

WHO’s guidance on strategic and operational planning for the health sector response to HIV was disseminated to all Member States as well as development partners and civil society organizations at global and regional levels. The World Bank and the Secretariat worked with finance and planning ministries to support zero allocative inefficiency, zero technical inefficiency and zero ineffectiveness.

UNAIDS’ guidance in the development of investment cases over the past two years has also supported countries in spearheading strategic investments, to identify and close programmatic gaps, and ultimately to ensure resources are targeted where they deliver the greatest impact. This approach has enhanced the efficiency and effectiveness of service delivery, with a particular focus on fostering greater national ownership and financing. The Secretariat’s global campaign on “Shared Responsibility and Global Solidarity” has helped to foster a renewed debate around reducing country dependence on external funders by implementing innovative AIDS financing measures. The UNAIDS-supported *Roadmap on Shared Responsibility and Global Solidarity for AIDS, TB and Malaria Response in Africa*, adopted by the African Union in 2012, is an example of an integrated, multisectoral approach to enhance sustainable responses to the three diseases, including through diversified financing.

### **Technical and policy support is demand driven and cost effective**

In 2012–2013, regional technical support facilities provided assistance in many countries in the form of inputs to Global Fund processes, including three regional proposals, strengthening national strategic plans and developing investment cases.

After international consultation, UNAIDS developed recommendations to strengthen the coherence,

effectiveness and relevance of technical support in a changing environment, presenting these to the Programme Coordinating Board in December 2013.

UNAIDS' experience in coordinating technical support has demonstrated:

- The purpose of technical support coordination, as well as the work that is being coordinated, needs to be clearly defined and agreed upon.
- Coordination can be resource-intensive, both in funding and staff time.
- Civil society does not always have access to coordination mechanisms, highlighting the need for efforts to enable effective participation.
- Different organizational mandates, operational structures, programming approaches and timeframes can complicate efforts to coordinate diverse technical support.
- A mismatch of supply and demand between countries and partners can occur. Some partners may offer technical support that countries do not need, or they may lack the resources or capacity to effectively respond to country demands.

## Constraints, challenges and lessons learned

UNAIDS supported mid-term reviews (stocktaking exercises) of national AIDS programmes in more than 100 countries, using the opportunity to renew commitments to HIV prevention, diagnosing gaps and fostering leadership, coherence and accountability at all levels of the response; advocating for effective evidence-based combination prevention; and seeking to integrate new prevention technologies in priority populations and geographic areas where new infections are occurring. Closing the AIDS resource gap was identified as a national priority in 99 of the 109 countries reporting results of mid-term reviews. Of those, 40% (39 out of 99) are not on track to reach their resource mobilization targets by 2015. At least US\$ 2.9–5.4 billion in additional annual funding must be generated to meet this 2015 target.

Increasing conservatism surrounding the links between HIV, sexual and reproductive health and rights (SRHR), gender-based violence (GBV), gender equality and diversity, and harmful gender norms and practices underlying the vulnerability of women and girls to HIV have resulted in difficult high-level negotiations at the Commission on the Status of Women, the International Conference on Population and Development and the Programme Coordinating Board. This has also hampered efforts to integrate gender equality, including prevention and management of GBV, and SRHR, with the HIV response.

Assistance over the past decade in HIV monitoring and evaluation system building has created the basis for much needed analytic studies on whether countries make the right HIV intervention choices; programme implementation is of sufficient quality and scale; and HIV interventions are effective and sustained. Monitoring and evaluation systems continue to encounter capacity challenges, however, especially at local level. Data are often constrained by service quality, coverage and scale, and equity of access. More examples of strategic data use, where empirical data influence the allocation of HIV funds, are required.

A close partnership between UNAIDS and the Global Fund has ensured that gender issues are recognized, aligned and resourced within new funding models and country investment cases, although the capacity for inclusion at country level is still limited. The arrival of UN Women as a new

Cosponsor in the biennium, coupled with existing UNDP and UNFPA capacity and increased Secretariat capacity at regional and country level for gender equality and human rights, will be central to UNAIDS' contribution to nationally-owned and -led gender transformative HIV responses.

## Key future interventions

- **Prioritizing country support:** Ensuring countries are supported to scale up and implement proven, effective and context-specific interventions and human rights-based approaches, and that technical and financial support are optimally aligned with priority areas, will be paramount in reaching the Millennium Development Goals and global AIDS targets. UNAIDS will expand support to global, regional and country-level partners in applying the Global Fund's new funding model, particularly technical guidance, as well as the new PEPFAR Blueprint.
- **Keeping communities at the centre of the response:** Another priority for UNAIDS is to increase community involvement and leadership to ensure access to services. UNAIDS will continue to work alongside civil society partners, supporting their engagement and leadership in the design, implementation, monitoring and evaluation, and decision-making phases of national responses. Intensifying this work will be essential to ensure the needs and human rights of key populations, including people who are most marginalized, are reflected when making strong cases for investment in robust national strategic plans, and in proposals to international donors and global financing mechanisms such as the Global Fund.
- **Improving the UN system-wide response to AIDS:** UNAIDS' work through Joint UN Teams and Joint Programmes of Support, will remain a priority to promote relevant, coherent and effective UN action to support national priorities and improve linkages between operational and normative activities. The Secretariat will use the experience of the Joint Programme to implement intergovernmental mandates, from the Programme Coordinating Board and the General Assembly, to the Security Council and Economic and Social Council (ECOSOC). UNAIDS will participate in interagency mechanisms, such as the UN System Chief Executives Board for Coordination (CEB), the High-level Committee on Management (HLCM), the High-level Committee on Programmes (HLCP) and the UNDG, with emphasis on achieving global AIDS targets, contributing to the post-2015 process, including the UN Secretary-General's "fitness for purpose" agenda, responding to the quadrennial comprehensive policy review (QCPR), and helping to develop the second generation of the Delivering as One initiative.

## Supporting documents

- *Treatment 2015*  
[http://www.unaids.org/en/media/unaids/contentassets/documents/unaidspublication/2013/JC2484\\_treatment-2015\\_en.pdf](http://www.unaids.org/en/media/unaids/contentassets/documents/unaidspublication/2013/JC2484_treatment-2015_en.pdf)
- *UNAIDS agenda for accelerated country action for women, girls, gender equality and HIV: mid-term review – final report (submitted to the 31<sup>st</sup> PCB meeting)*  
[http://www.unaids.org/en/media/unaids/contentassets/documents/pcb/2012/20121206\\_Final\\_Report\\_Mid\\_Term%20Review\\_UNAIDS\\_Agenda\\_for\\_Women\\_and\\_Girls.pdf](http://www.unaids.org/en/media/unaids/contentassets/documents/pcb/2012/20121206_Final_Report_Mid_Term%20Review_UNAIDS_Agenda_for_Women_and_Girls.pdf)
- *Efficient and sustainable HIV responses: case studies on country progress,*  
[http://www.unaids.org/en/media/unaids/contentassets/documents/unaidspublication/2013/JC2450\\_case-studies-country-progress\\_en.pdf](http://www.unaids.org/en/media/unaids/contentassets/documents/unaidspublication/2013/JC2450_case-studies-country-progress_en.pdf)
- *Assessing the financial sustainability of Jamaica's HIV program,* [http://www-wds.worldbank.org/external/default/WDSContentServer/WDSP/IB/2012/12/27/000333038\\_20121227000440/Rendered/PDF/NonAsciiFileName0.pdf](http://www-wds.worldbank.org/external/default/WDSContentServer/WDSP/IB/2012/12/27/000333038_20121227000440/Rendered/PDF/NonAsciiFileName0.pdf)
- *Coordination of HIV technical support in a rapidly changing environment (submitted to the 33<sup>rd</sup> PCB meeting)*  
[http://www.unaids.org/en/media/unaids/contentassets/documents/pcb/2013/pcb33/agendaitems/01-20131121\\_Coordination-technical-support.pdf](http://www.unaids.org/en/media/unaids/contentassets/documents/pcb/2013/pcb33/agendaitems/01-20131121_Coordination-technical-support.pdf)



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