

UNAIDS 2020

The Secretariat functions report

Unified Budget Results and Accountability Framework
(UBRAF) 2016-2021

Organizational report 2018-2019

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S1. Leadership, advocacy and communication: maintaining the AIDS response on the agenda, positioned as an integral part of the SDGs

The Joint Programme remained the core catalytic force in the HIV response, keeping HIV on the political agenda and leveraging global leadership, country focus, strategic partnerships and strategic information for effective HIV response that drives the ending AIDS agenda and advances equitable development for all people, everywhere.

To strengthen strategic leadership in the response, the Secretariat reached heads of state and government, engaged policymakers and decision-makers, partnered with civil society and activists, and listened to communities and supported their voice.

Political and policy leadership of the Secretariat and Cosponsors was affirmed in key political fora (General Assembly), governance fora (Global Fund Board, Stop TB Partnership Board, World Health Assembly, EWEC/ H6, GHAP) as well as scientific fora (International AIDS Conference) and multilateral and bilateral financing platforms (the Global Fund funding cycles, PEPFAR COP).

Strategic aspects and lessons of the HIV response featured prominently in global policy dialogues such as the 2019 High-Level Political Forum on Sustainable Development on “Empowering people and ensuring inclusiveness and equality”; operationalization of the 2030 Agenda promise of leaving no one behind; Voluntary National Reviews; and the UN High-Level Meeting on Universal Health Coverage. A side-event on civil society and UHC during that High-Level Meeting focused on the need for community engagement to achieve accountability.

The Secretariat and Cosponsors leveraged the platform and power of international and regional processes—including the Human Rights Council, the Commission on the Status of Women, the Nairobi Summit on ICPD25, the African Commission on Human and Peoples’ Rights, Southern African Development Community and the European Union—to advance inclusive, integrated, human rights based, gender-transformative HIV responses that place communities at the centre and leave no-one behind.

The Secretariat was instrumental in linking science, practice and human. The expert consensus statement on the science of HIV in the context of criminal law, based on robust evidence and authored by 20 of the world’s leading scientists, encouraged the use of science by criminal justice system, and offered guidance to those providing expert opinion evidence in individual criminal cases. The Secretariat and UNDP continued to provide important support to efforts led by the International Commission of Jurists to develop human rights principles to limit the harmful use of criminal laws.

The PCB continued to serve as a platform for global programmatic leadership. The thematic session on Ending Tuberculosis and AIDS: A Joint Response in the Era of the Sustainable Development Goals (42nd PCB meeting) fed into the UN High-level Meeting on Tuberculosis and influenced PEPFAR decision to prioritize the prevention, diagnosis and treatment of TB among people living with HIV. Linkages between mental health and HIV were the focus of the thematic segment at the 43rd PCB meeting. This led to the PEPFAR decision to establish a new technical area on mental health and HIV in the 2019 Country Operational Plan Guidance. The UHC Thematic Segment during the 44th PCB meeting placed UHC in the context of Joint Programme work and promoted a coherent understanding of the links between actions to end the AIDS epidemic and achieve UHC. The thematic segment at 45th PCB meeting was dedicated to reducing the impact of AIDS on children and youth.

The first-ever Joint Programme “Way Forward to Achieving Sustainable AIDS Results”, approved by the PCB in December 2018, provides guidance for coherent, people-centred approaches to achieve the Fast-Track targets, and for sustainable solutions towards ending AIDS as public health threat and achieving the SDGs, including UHC. The PCB-recommended approach guided the development of the SADC Sustainability Roadmap for HIV and Health Response, which SADC Ministers of Health endorsed in June 2019.

UNAIDS’ communications products reached more than 50 million people in the biennium. The UNAIDS website attracted more than 4 million visitors during 2018–2019, which amounted to increases in traffic of 22% and 37% in 2018 and 2019, respectively.

Campaigns highlighted various and intersecting elements of the HIV response by making strategic use of reports, infographics, social media posts, special web pages, op-eds and articles placed in regional and national media and other communications products. UNAIDS leveraged World AIDS Day, International Women’s Day, World Tuberculosis Day and Zero Discrimination Day to deliver key messaging on the power of communities, the importance of knowing your HIV status, the vulnerability of women and girls to HIV, the links between TB and HIV, and the urgency of eliminating discrimination faced by people living with HIV and key populations. In 2019, a series of web stories, press releases and interviews in the media highlighted the critical issues faced by women and girls.

The Secretariat launched and has been leading an inclusive process for establishing 2025 targets. The targets and the corresponding epidemiological impact and resource needs will feed into the new UNAIDS strategy and inform partner organizations’ strategies as well as a possible 2021 High-Level Meeting.

Challenges and future actions

The world is not on-track to achieve most of the 2020 Fast-Track targets. To strengthen advocacy and leadership that can put the world on-track to end the epidemic, the Secretariat will:

- deliver and promote new targets to guide the response beyond 2020;
- intensify engagement in key international events and platforms;
- further strengthen work to mobilize communities on key issues relating to women, girls and HIV (e.g. HIV and sexual and reproductive health and rights, eliminating gender-based violence); scale up country efforts to end HIV-related stigma and discrimination;
- and strengthen advocacy with partners and stakeholders in sub-Saharan Africa.

S2. Partnerships, mobilization and innovation: fostering partnerships for effective, equitable, sustainable response

The Secretariat and Cosponsors worked to strengthen strategic partnerships with governments, intergovernmental and regional bodies, parliamentarians and other policy makers, corporations and foundations, civil society and communities for an effective, equitable, sustainable and fully-funded HIV response.

In June 2019, UNAIDS Secretariat and the Global Fund signed a new Memorandum of Understanding. The agreement aims to enhance collaboration on a wide spectrum of policy, technical and programmatic areas within a broad context of supporting resilient and sustainable systems for health. The particular areas for enhanced collaboration include:

- global strategic information,
- sustainable country responses,
- gender, right and community engagement,
- prevention, access & community service delivery, and
- acceleration in western and central Africa.

The Global HIV Prevention Coalition, co-convened by the Secretariat and UNFPA, supported the global effort to accelerate HIV prevention. In all 28 Global Prevention Coalition countries,

implementation of the HIV Prevention 2020 Road Map moved from political commitments to scaling up HIV prevention programmes on the ground.

Under the Fast-Track Cities Initiative, more than 300 cities across all the regions have signed the Paris Declaration and are working to address gaps in the HIV response and achieve the agreed targets. At the first Fast-Track Cities conference, organized by the International Association of Providers of AIDS Care, more than 700 participants from cities across the world shared progress, experiences and lessons learned.

The Global Partnership for action to end all forms of HIV-related stigma and discrimination responds to the call of civil society organizations to strengthen the UNAIDS ZERO Discrimination agenda. Co-convened by the Secretariat, UN Women, UNDP, GNP+, with the strategic leadership of the PCB NGO delegation, the Global Partnership brought together 24 civil society organizations and 10 UN agencies in a working group that will support countries to implement evidence-based interventions to eliminate stigma and discrimination.

A new strategic framework for engagement with the private sector led to the launch of a new business strategy for the Secretariat, with accompanying guides to support efforts to engage businesses in HIV responses. Specific efforts focused on strengthening partnerships with faith communities, including through the rollout of the UNAIDS-PEPFAR faith initiatives.

The HIV responses in sub-Saharan Africa received strong attention. The Secretariat promoted and monitored the African Union "Free to Shine" campaign, a joint continental initiative to end childhood AIDS and keep mothers healthy, with the African First Ladies for Development and partners. In partnership with WHO, UNIDO, RECs and AUDA-NEPAD, the Secretariat advocated for increased access to medicines through support for the African Medicines Regulatory Harmonization, including local pharmaceutical production. The Secretariat, Cosponsors and other partners supported development of the African Union roadmap on health financing under the leadership of President Kagame of Rwanda. The Secretariat partnered with AIDS Watch Africa, to raise awareness and commitment on catch-up plans in western and central Africa, health financing and mapping of the regional rollout of community health workers. The Secretariat as a co-founder joined forces with PEPFAR, the George W. Bush Institute and Merck in the "Go Further" partnership to end AIDS and cervical cancer among women living with HIV in Africa. As a result, cervical cancer screening and treatment have been integrated into HIV treatment services and significantly scaled up for women receiving ART in Botswana, Eswatini, Lesotho, Malawi, Mozambique, Namibia, Zambia and Zimbabwe.

A platform for meaningful engagement of civil society for impact was established in western and central Africa, a region where progress in the HIV response has been slower than needed. Through a set of catalytic activities at global, regional and country levels, the Secretariat built confidence among key local civil society leaders, fostered new partnerships

and facilitated the establishment of a Civil Society Institute, which will develop civil society engagement and capacity to respond to the epidemic. In less than a year, the Civil Society Institute has become the main interlocutor of key actors, including the Global Fund, PEPFAR, the Government of France and the Grand Duchy of Luxembourg.

Partnerships with civil society organizations and communities grew stronger around drug policy, paediatric HIV, prevention, SRHR and human rights. The #BeTeamWomen initiative, created in 2018 by the Secretariat, UN Women and civil society partners, serves as a global platform to mobilise and unify diverse partners and stakeholders on the empowerment of women and girls and gender equality; its bimonthly live digital discussions have engaged more than 150 000 people. The Secretariat and Cosponsors worked to empower communities at country level and remained vocal advocates for fully-funded, community-led responses to achieve sustainable health outcomes.

The partnership with the European Union focused on analysing and strengthening responses to the expanding HIV epidemic among gay men and men who have sex with men in eastern and south-eastern Europe (European Union and border countries). The Joint Programme has positioned itself in the European Union dialogue as a stakeholder in humanitarian responses.

Challenges and future actions

To further strengthen strategic partnerships for results, the Secretariat will:

- intensify its support for effective responses in Africa (including through expanded support for the Africa CDC);
- strengthen its dialogue with donors to maintain the global HIV response as a priority;
- effectively develop a strategic relationship with the European Union;
- support the scale up of country efforts to end and effectively monitor stigma and discrimination;
- develop a global vision for the future of strategic information;
- intensify the cultivation of strategic partnerships to end AIDS;
- explore establishment of a channel for investments for women entrepreneurs;
- and further mobilize and engage women and girls in all their diversity in the HIV response.

S3. Strategic information: strategic information for decision-making and implementation

An impressive 173 countries reported data through the UNAIDS Global AIDS Monitoring system, including data from health-care facilities, household surveys and special studies of key populations. Countries also reported epidemiological estimates of new HIV infections, AIDS-related deaths and numbers of people living with HIV, HIV-related expenditures and budgets and the prices of ARV medicines.

The Secretariat supported 140 countries to produce epidemiological and financing estimates and to report key programme data, including data disaggregated by sex, age, sub-population and geographic area. Estimates for an additional 31 countries were developed to contribute to regional and global estimates. Country programme data were validated in collaboration with WHO and UNICEF, and then made publicly available on the AIDSinfo website (<http://aidsinfo.unaids.org/>).

Detailed analyses of the epidemic and response were presented in the global AIDS update reports, *Miles to go* (2018) and *Communities at the Centre* (2019), other flagship publications and reports to the General Assembly and the PCB.

The Secretariat led or participated in numerous other initiatives to improve country, regional and global generation of strategic information, including the launch of data visualization and analytics platforms (Health Situation Rooms) in Côte d'Ivoire, Lesotho, Uganda and Zambia. These innovative digital platforms merge multiple national data sources (DHIS, LMIS, community data, etc) and enable decision-makers and programme managers to easily view and analyse key indicators.

The Secretariat supported countries in using data to identify and address programmatic gaps (especially for testing and treatment) and adjust their activities. Innovations introduced in 2018 included the use of a geospatial model in 10 countries, the incorporation of district-level estimates into DHIS-2 and development of a Secretariat-commissioned model to identify the optimal mix of HIV testing modalities in Fast-Track countries to reach the first "90".

The Secretariat collected data on HIV programme expenditure from countries and donors, and estimated funding gaps for low- and middle-income countries in all regions. These and other financial data are publicly available on a Financial Dashboard (<http://hivfinancial.unaids.org/hivfinancialdashboards.html>) accessible via AIDSinfo. The data show that an estimated US\$ 20.6 billion (in constant 2016 US dollars) was available in 2017—about 80% of the 2020 target.

UNAIDS trained and supported national staff and international and national consultants working in 40 countries for in-depth HIV resource tracking through National AIDS Spending

Assessments. These expenditure analyses inform national investment and sustainability plans; efficiency and sustainability analyses; budgeting of national strategic and annual operational plans; the development of global and regional estimates and projections of resource availability; and funding gaps that support advocacy and resource mobilization efforts.

Working with technical partners, the Secretariat models for generating estimates on the basis of case surveillance and vital registration data, enabling more geographically specific estimates and generating key population size estimates.

A new model integrated into the Spectrum estimates package more accurately captures recent trends in incidence for countries with generalized epidemics. The refined results were used for the PEPFAR Country Operational Plans, which guide the programming of about US\$ 1.2 billion to national AIDS responses.

New metrics for the epidemic transition were finalized in 2018, while country, regional and global values were published on AIDSinfo and in the *Miles to go* report. A special collection of articles was prepared for the journal *PLoS Medicine*, describing the background and functions of the measures used.

The introduction of new statistical methods and models should permit publication of sex-disaggregated data for the "three 90s". UNAIDS and WHO also began a process to improve the use of data in the rollout of PrEP programmes in countries.

The Secretariat also calculated the economic returns of ending the AIDS epidemic as a public health threat, finding that HIV investments yield returns that are 6.4 times greater than amounts invested.¹

Challenges and future actions

As the deadline for the Fast-Track targets approaches, the Secretariat convened a diverse set of stakeholders to begin the process of developing a proposed set of programmatic targets for 2025 as well as new estimates of resource needs for 2021–2030. As the need for a more granular approach to target setting has become increasingly apparent, this process will need to balance the importance of global-level targets with an emphasis on focusing interventions on locations and populations in greatest need. Agreement on a new set of targets will require revision of the AIDSInfo analytics capabilities.

In the 2020–2021 biennium, the Secretariat will develop a global vision for the future of strategic information, taking account of important changes in the HIV epidemic and the fields

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¹ Lamontagne E, Over M, Stover J. The economic returns of ending the AIDS epidemic as a public health threat. *Health Policy*, 2019;123(1).

of epidemiology and health information systems. Steps will be taken to improve strategic information on key populations and to incorporate such data into generalized epidemic models. The improvement of strategic information for key populations will need to confront the currently inadequate political will to finance robust surveys of stigmatized populations and ensure that data are collected in ways that avoid human rights violations. Further actions will be aimed at improving the capacity to measure stigma and discrimination and for community-led monitoring. The Secretariat will publish guidance on ethical considerations in HIV prevention trials, as well as estimates of the economic benefits of HIV integration.

The framework for National AIDS Spending Assessments will be updated, and capacity-building support will be provided to institutionalize annual, in-depth HIV resource tracking. As health systems and disease responses become integrated (in part through momentum towards UHC), discerning HIV programme specificities within more integrated responses is likely to become more challenging, underscoring the importance of strengthening capacities to collect, analyse and report spending data at country, regional and global levels.

S4. Coordination, convening and country implementation support: accelerating the momentum, closing the major response gaps, and advancing inclusion, gender equality and human rights

Making an impact on people's lives remained central to the Joint Programme's work. The Secretariat and Cosponsors jointly supported Member States to fulfil the Fast-Track commitments, ensure sustainability of the HIV response, and advance the national SDG agenda. The refined operating model implemented since 2018 enabled the Joint Programme to focus on results for people and country impact.

Under the refined operating model, in 95 countries,² the Joint UN Teams on AIDS supported strategic solutions to remove barriers and bottlenecks hampering achievement of the Fast-Track commitments. The standardized Joint UN Plans, which are focused on priority national targets, guided the collaborative effort. The country envelopes financed a proportion of the Joint Plan priorities in 71 countries. The Regional Joint UN Teams on AIDS coordinated quality assurance and supported implementation of country plans. The Secretariat led the Joint UN Teams on AIDS at country and regional levels and ensured linkages with the global Joint Programme processes and headquarter teams. The Joint Teams worked to ensure that:

- HIV remains high on national agenda;

² In two countries, Eritrea and Turkmenistan, the work of the Joint UN Teams on AIDS was interrupted in 2019. Steps are being taken to reconfigure the Joint Programme's capacities and resume country-level support.

- decision-making and implementation is inclusive;
- the needs of all people, including women, girls and key populations are understood, voices heard, and their human rights upheld; and
- strategic investments from the Global Fund, PEPFAR, other bilateral programmes, as well as domestic resources have the maximum impact at country and community levels while also contributing to progress across the 2030 Agenda.

During the biennium, more than 20 countries reviewed or newly developed the national HIV strategic plans. Seven countries developed or updated the investment cases, and 16 countries took steps to transition to greater sustainability on a domestic funding. A number of countries worked towards removing user fees for HIV and other health services. Cameroon already endorsed a roadmap to operationalize the removal of user fees for HIV and maternal care services, and allocated domestic funding against a dedicated budget line to replace user fees in 2020.

In 85 countries, the Joint Teams engaged to make the Global Fund resources work for people, including special initiatives, such as the US\$ 77.3 million Breaking Down Barriers initiative in 20 countries. The Secretariat is an active member of the Country Coordinating Mechanism in 69 countries and serves on the Oversight Committee in 55 countries. The Secretariat also co-chairs the oversight group for the Middle East Response Grant.

The Global Fund HIV Situation Room, which the Secretariat co-chairs with PEPFAR and WHO, addressed the country-level matters. Over the biennium, the HIV Situation Room discussed challenges in 21 countries and cross-cutting issues, such as portfolio optimization of the Global Fund grants, strategic initiative funding, shortage of key programme commodities across different regions, and transition to dolutegravir.

The UNAIDS Technical Support Mechanism was instrumental in delivering timely, quality-assured assistance to scale up national HIV responses and reach with services those underserved by the HIV response in the eastern and southern Africa, western and central Africa, and the Asia and Pacific regions. During the biennium, the Technical Support Mechanism delivered US\$ 10.45 million in technical assistance in support to 296 requests from 75 countries.

The HIV prevention agenda gained momentum at country level. The 28 Global Prevention Coalition Member States adopted HIV prevention strategies. Eight countries put in place service packages for key population groups,³ and 13 countries introduced combination prevention packages for adolescent girls and young women and their male partners in

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³ The five key population groups include sex workers, gay men and other men who have sex with men, transgender people, people who use drugs and prisoners.

locations with high HIV incidence. The Coalition's approaches and tools, including integrated voluntary medical male circumcision and SRH programming and state-of-the-art condom programming tools, were taken on-board in countries in and beyond the Coalition.

The Global Partnership for action to eliminate all forms of HIV-related stigma and discrimination was rolled out to 30 priority countries. Sixteen governments have formally pledged to end discrimination. Updated technical guidance from the Global Partnership informed the Global Fund Breaking Down Barriers initiative and the PEPAR COP/ ROP guidelines. A package of tools supports the design and implementation of the national strategic plans and donor funding requests for the 2020 cycle.

Achievement of 90–90–90 was prioritized across the regions. In more than 30 countries, the Joint Teams played an important role in taking to scale innovative testing approaches and differentiated service models and facilitated transitioning to dolutegravir. The Secretariat facilitated dialogue with civil society and communities across the regions and ensured that women living with HIV had access to quality, science-based information.

Twenty fragile countries developed and implemented context-specific preparedness, contingency and response plans on HIV in emergencies. The plans are based on the principles of gender equity, inclusiveness and human rights, and incorporate actions on SRHR and sexual and gender-based violence.

Engaging and empowering civil society and communities remained a top priority. In 50 countries, community-led responses and community monitoring gained greater prominence. Communities in at least 53 countries were engaged in the Stigma Index. Civil society consultations held in 12 countries helped amplify civil society and community voices in the 2019 High-Level Meeting on Universal Health Coverage.

The Secretariat and Cosponsors offered advice and hands-on support to national stakeholders in more than 30 countries. The Secretariat worked with civil society during arrests related to sexual orientation and gender identity; provided expert advice in law reform processes on HIV criminalization; criminalization of same-sex sexual activity; travel restrictions; mandatory testing; and access to medicines; and successfully supported strategic litigation efforts against discriminatory laws.

The Secretariat equipped countries with evidence-based tools to advance gender equality and women's empowerment. The tools included an updated Gender Assessment Tool, the checklist on SRHR of women living with HIV, and the ALIVHE Framework to address violence against women and girls. The Joint Teams assist countries in using these and other tools.

The Secretariat and Cosponsors actively supported Resident Coordinators and UN Country Teams to ensure that people-centred approaches—based on principles of inclusion, equity

and social justice—are firmly reflected in the new UN Sustainable Development Cooperation Frameworks. In 26 countries, the Joint Teams directly participate in the Common Country Analysis and the design of Cooperation Frameworks. The Secretariat and Cosponsors further contribute to the country processes through regional Peer Support Groups.

Challenges and future action

New and innovative approaches will be required to reach and engage the people who are being left the furthest behind. Investments in scaled-up community-based strategies, and expanded engagement of communities, will be key to meeting this challenge.

Structural barriers, systems failures and implementation bottlenecks are causing the slow progress and suboptimal health and development outcomes. These barriers and bottlenecks are likely to be common for a range of development areas and could be addressed more effectively through integrated SDG approaches.

The reduction, as of 2016, of the Joint Programme funding resulted in reduction of in-country and regional-level expertise for several Cosponsors. In the regions and countries affected, this is having a negative impact on the Joint Programme's ability to provide leadership and deliver the required support. The process of developing the new UNAIDS Strategy is an opportunity for the Joint Programme to assess the sustainability of its efforts at regional and country levels, update and expand approaches to maintain expertise and deliver support, and explore alternatives for areas where collective efforts may prove difficult to sustain.

Perceptions of country envelopes continue to vary. Overall, Joint Programme stakeholders are highly appreciative of the opportunities the country envelope funds provide. At the same time, in a number of countries the Joint Teams are experiencing a fragmentation of the envelope funding, which leads to an increase in transaction costs that the global Cosponsor teams are noting. Besides, as a result of tightening HIV budgets, the share of country envelope funds allocated to regular (rather than innovative catalytic) activities has increased. The Joint Programme will review the country envelope processes with a view to increase their catalytic impact and to reduce transaction costs.

S5. Governance and mutual accountability: effectively responding to fast-changing context and evolving demands

The Joint Programme updated its Division of Labour in 2018 to better align the Joint Programme's priorities and operating modalities with the 2030 Agenda for Sustainable Development and UN reform. The Division of Labour reaffirmed the value of the UNAIDS partnership; reasserted the Joint Programme as a forerunner and champion of UN reform;

and confirmed the centrality of achieving results for people. Implementation of the refined operating model resulted in improved planning and resource allocation, as well as improved UBRAF reporting to link country epidemiology, programmatic progress and desired results with UBRAF funds distribution and utilization.

The Executive Director reported to ECOSOC in 2019. The Council's subsequent Resolution on the Joint Programme, co-facilitated by the then-Chair and Vice-chair of the PCB (China and the United States, respectively), reaffirmed the pivotal role of the Joint Programme in galvanizing and supporting multisectoral HIV responses in the context of broader efforts to reach the SDG. The Resolution cited the Joint Programme's Cosponsor and governance model as a useful example of strategic coherence and responsiveness to national contexts and priorities. In unanimously adopting the Resolution, Member States emphasized the importance of a strong UNAIDS and urged implementation of the Strategy and full funding of the Joint Programme.

The Secretariat facilitated the work of the PCB, including its work on strategic and often challenging issues and processes. In response to a request of the Executive Director, the PCB in 2018 established an Independent Expert Panel to provide recommendations for addressing and preventing harassment within the Secretariat. The Secretariat supported a PCB Working Group tasked with considering the recommendations of the Independent Expert Panel and ensured that the Working Group's recommendations informed and guided the Secretariat-driven processes to strengthen the Management Action Plan to address harassment and enhance a positive organizational culture at the Secretariat.

The Joint Inspection Unit's review of UNAIDS management and governance was presented to the PCB at its 45th Meeting, along with the management response from the Secretariat. The PCB established a Working Group to follow up on the Unit's report and to present recommendations for their implementation to the Board.

In 2018–2019, the Secretariat mobilized more than US\$ 363 million in core funds from governments and US\$ 75 million in non-core funds in support to a number of global, regional and country activities, designated for specific countries or purposes.

The Secretariat finalized and implemented a structured Accountability Framework that sets the performance, accountability and transparency standards and procedures for all aspects of the organization's operations. In both 2018 and 2019, the Secretariat received an unqualified audit opinion, for the 7th and 8th consecutive year since the adoption of IPSAS.

In 2019, the Secretariat expanded the online platform to enhance accountability across the organization. The JPMS further evolved, to include a planning module, align the Secretariat UCO workplans with the Joint UN Plans, and enable country-level reporting against the Fast-Track commitments. The Gender Equality Marker and Civil Society Engagement Marker

enable the Joint Teams and the Secretariat to plan and monitor investment in gender equality, women's empowerment and community mobilization.

In 2018 and 2019, the Joint Programme's Performance Monitoring Reports were presented to the UNAIDS PCB, following the internal and external peer reviews. The 44th PCB meeting noted improvement in the quality of the PMR. The Secretariat continued to regularly report to the International Aid Transparency Initiative (IATI). The new Transparency Portal (<https://open.unaids.org>) places in the public domain the Joint Programme reports from all levels, as well as IATI data, financial data and data on donor contributions and funding trends.

Consistent with the Multilateral Organization Performance Assessment Network and external reviews of UNAIDS, the Secretariat strengthened its focus on evaluation. A stand-alone Evaluation Office was established, and a Cosponsor Evaluation Group was constituted to draw on and leverage Cosponsor resources on evaluation. A new evaluation policy, developed through consultations with Member States, Cosponsors and civil society, was approved by the PCB in June 2019. In its 2019 review of UNAIDS, the Joint Inspection Unit commended the way the evaluation policy had been moved forward. In December 2019, the Board approved the UNAIDS 2020–2021 Evaluation Plan, developed through a consultative process that engaged the Cosponsors and the Secretariat as well as the Expert Advisory Committee.

Challenges and future actions

Resource mobilization for the Joint Programme and advocacy to maintain AIDS on the global agenda both face important challenges. Those challenges are heightened by the COVID-19 pandemic, the Joint Programme's continued dependence on a comparatively small group of donors, substantial accountability and transparency requirements associated with donor funding, and delays in donor funding disbursements—all of which potentially affect the provision of timely funding to Cosponsors and the Secretariat.

With its independent evaluation function formalized only in mid-2019, the UNAIDS Evaluation Office still has to establish itself as an agent of change vis-à-vis the Board, the Executive Director, senior management of the Secretariat and Cosponsors, and other stakeholders.

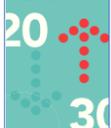
In 2020–2021, the Secretariat will continue to support implementation of the Division of Labour; reaffirm implementation of the refined operating model, with its strategic focus on needs-based support and country impact and integration across the SDGs (including aligning Joint UN Plans to the United Nations Sustainable Development Cooperation Frameworks); and review allocation and implementation of the country envelope funds.

The Secretariat and Cosponsors will use the findings of the UN system's 2016–2018 response to AIDS evaluation to improve the 2020–2021 actions; and prioritize development of

a robust, visionary and results-focused UNAIDS Strategy. The latter will serve as the basis for a new Political Declaration, which will be put to the UN General Assembly for adoption at the envisaged High-Level Meeting on AIDS.

The Secretariat will continue the strategic engagement with government donors, the European Union, foundations, high net-worth individuals, and private and political partnerships, and will work to diversify its donor base. The change agenda of the new UNAIDS Executive Director will serve as a basis to negotiate improved multiyear agreements with long-standing government donors, while paying additional attention to cultivating new relationships with donors, governments and the private sector.

Knowledge products

	<p>Global AIDS update 2019 — Communities at the centre</p> <p>Defending rights, breaking barriers, reaching people with HIV services</p> <p>This report showed that community leadership in the AIDS response helps ensure that HIV services are relevant to, and reach, the people who need them the most.</p>
	<p>World AIDS Day 2019 — Communities make the difference</p> <p>Communities make an invaluable contribution to the AIDS response. Communities of people living with HIV, of key populations—gay men and other men who have sex with men, people who use drugs, sex workers, transgender people and prisoners—and of women and young people lead and support the delivery of HIV services, defend human rights, support their peers. Communities are the lifeblood of an effective AIDS response and an important pillar of support.</p>
	<p>Power to the people</p> <p>This report showed that where people and communities living with and affected by HIV are engaged in decision-making and HIV service delivery, new infections tend to decline and more people living with HIV gain access to treatment. When people have the power to choose, to know, to thrive, to demand and to work together, lives are saved, injustices are prevented, and dignity is restored.</p>
	<p>AIDS by the numbers</p> <p>This report described the progress made by 2018. It showed that 54% of new HIV infections were among key populations and their sexual partners; there had been a 40% decrease in new HIV infections since the peak in 1997; and 37.9 million people were living with HIV in the world, including 1.7 million children (under 15 years).</p>
	<p>Cities on the road to success — Good practices in the Fast-Track cities initiative to end AIDS</p> <p>This report described the efforts of the many partners in the Fast-Track Cities initiative to accelerate the HIV response and deliver on the goals of the Paris Declaration. Urban leaders have shown commitment and political will, and cities across the globe have developed strategic action plans with ambitious targets and bold implementation strategies.</p>

	<p>UNAIDS Data 2019</p> <p>This edition of UNAIDS data documented key achievements in the HIV response, as well as remaining challenges. It featured the latest data on the world's response to HIV, consolidating a small part of the huge volume of data collected, analysed and refined by UNAIDS over the years. The full data set of information for 1990 to 2018 is available on aidsinfo.unaids.org.</p>
	<p>Miles to go—closing gaps, breaking barriers, righting injustices</p> <p>The global update showed that the global HIV response was at a precarious point—partial success in saving lives and stopping new HIV infections is giving way to complacency. At the halfway point to the 2020 targets, the pace of progress is not matching the global ambition. The report was an influential "wake-up call" that timely action was essential.</p>
	<p>Knowledge is power—Know your status, know your viral load</p> <p>People who may have been exposed to HIV need the knowledge to make informed decisions about their future. An HIV test is a serious event with potentially serious outcomes. But no matter the result, the test provides vital information. For people living with HIV, it is a necessary first step towards a long and healthy life.</p>

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