First meeting of the subcommittee ad interim of UNAIDS Programme Coordinating Board
Geneva, Switzerland
25 February 2009

Report of the first meeting on the preparation of the 2010-2011 Unified Budget and Workplan
Agenda item 1. Adoption of the agenda for the meeting (Annex 1)

The chair of the meeting welcomed all participants and the agenda for the meeting was adopted.

Agenda item 2. Mandate of the subcommittee ad interim for the preparation of the 2010-2011 Unified Budget and Workplan (UBW) (Annex 2)

The Secretariat introduced the mandate of the subcommittee as adopted by the Programme Coordinating Board (PCB) in December 2008. It was stressed that the subcommittee would not replace the consultation process with member states that is already established for the Unified Budget and Workplan (UBW), but serve as a forum for PCB members for in-depth discussions on the UBW. A report by the subcommittee is expected at the June 2009 PCB at which the 2010-2011 UBW will be presented. The temporary nature of the subcommittee was also highlighted and a decision on the continuation of the subcommittee is expected to be taken at the December 2009 PCB when the second independent evaluation will be discussed. The subcommittee took note of the mandate.

Agenda item 3. Overall context, approach and principles of the 2010-2011 UBW (Annex 3)

There was substantial discussion around financial flows for the AIDS response globally and the fact that the UBW is a minor part of overall AIDS funding. The subcommittee requested more information on global funding from different sources compared to the UBW. It also requested information on different sources of funding at country level. The Secretariat will provide the latest funding figures to the subcommittee.

It was emphasized that the UBW supports activities aimed at ensuring a more coordinated response to AIDS as well as advocacy, brokering and convening, but also strategic information, normative guidance and standard setting. It is not designed as an instrument to fund operations at country level. It is, however, used by UNAIDS to help leverage other resources for country level operations. It was reiterated that the UBW investments were geared towards achieving results at the country level rather than directly flowing to country level operations.

The Secretariat will provide figures to the subcommittee on how much each Cosponsor spends at country level from its own (regular or extra-budgetary) resources.

The current financial crisis was discussed and it was suggested that a risk management strategy would be useful in order to plan for less than expected funding of the UBW and to ensure appropriate prioritization of activities. The Secretariat agreed that this would be outlined at the next subcommittee meeting.

It was noted that changes, such as those envisaged related to technical guidance on treatment protocols would also have a financial impact by increasing global costs of treatment.

The subcommittee requested that the Secretariat provide a breakdown of UBW funds by region. A request was also made to inform the subcommittee how much of the UBW was to be dedicated to civil society. Other breakdowns may also be included for the next subcommittee meeting.
Agenda item 4. Structure of the 2010-2011 UBW: principal outcomes and key outputs (Annex 4)

The new UBW structure was commended for its clarity and logic. The presentation did not contain any broad activities attached to key outputs as it is expected that the broad activities will be finalized by the Cosponsors and Secretariat the first week of March and can thereafter be sent to the subcommittee in advance of the next meeting. The broad activities will reflect the division of labor among the different Cosponsors and provide greater clarity to roles and responsibilities among the 10 Cosponsors and the Secretariat.

Some key outputs are clearly associated with specific agency mandates, whereas other key outputs are spread across several agencies. There is a need to make sure that there at the broad activity level is the appropriate allocation of activities among the Cosponsors. It was pointed out that the division of labor covers three cross-cutting areas: functions, interventions and populations. This is one of the reasons that a number of Cosponsors will be engaged in different activities that relate to the same subject, for example gender.

There was an in-depth discussion on terminology, particularly concerning sexual minorities such as transgender populations, and most at risk populations. It was suggested that language and terminology that is accepted and well understood should be used in the UBW, but that the PCB, if there is consensus, should look into ways of introducing new language or terminology (e.g., related to sexual diversity or key affected populations) where current language is not appropriate or satisfactory, by proposing improvements to the UN General Assembly. In terms of language related to prevention, it was noted that more explicit and clearer language would be needed to re-emphasize prevention and that prevention should be understood as a combination of programmes and interventions.

A number of specific comments were made on the UBW including:

- Women and girls have other roles than being mothers and this needs to be reflected;
- HIV co-infection with hepatitis C needs to be mentioned;
- What human trafficking specifically refers to should be clarified;
- What gender-sensitive means should be explained;
- Men and boys are missing as an area of focus;
- There needs to be better focus on young people and prevention including comprehensive sexuality education;
- There should be specific reference to the Global Fund and the UNAIDS MOU with the Fund;
- Work on prevention must reflect not only bio-medical or socio-economic research, responses and interventions, but also programmes that are part of a comprehensive prevention approach, such as communication, advocacy and training;
- Issues such as the safety, toxicity, appropriateness and availability of generic drugs need to be included;
- Follow-up to decisions on travel restrictions should be monitored.

The Secretariat took note and offered a number of solutions for clarity and inclusion in the UBW through broad activities. These specific comments will be brought to the next meeting with the Cosponsors to be incorporated in the UBW.
There was a request that more detail be given on performance-based disbursement of UBW resources and the Secretariat agreed to provide this at the next meeting.

The question of where the response is lagging and how the UBW will strengthen these areas was brought up. It is expected that the review of the 2008-2009 UBW will help in determining where progress is lagging and where the UBW should prioritize UNAIDS efforts.

**Agenda item 5. Progress in the development of a performance monitoring framework (Annex 5)**

There was a request to see how to link indicators at all levels and to match this to levels of effort by different Cosponsors. There was also a reminder that at the December 2008 PCB it was requested that the next performance monitoring framework take into account gender equity across many indicators. There was a discussion on the current set of indicators and a request to make the indicators as useful as possible, without coming up with many new indicators which burden countries’ reporting systems. Subcommittee members were asked to advise on other indicators currently used that they think would be useful for the UBW. The issue of baselines was brought up and what the Secretariat was doing to ensure that baselines existed for all indicators. The Secretariat agreed to review this issue at the next meeting of the subcommittee, with the expectation that for almost all indicators there will be baseline data.

**Agenda item 6. Process for finalizing the 2010-2011 UBW (Annex 6)**

It was agreed that the current timeline for finalizing the UBW was very tight. It was requested that the report of the meeting be sent out rapidly and posted on the UNAIDS website in order to engage other member states in the UBW dialogue.

All subcommittee members were asked to provide comments, suggestions or changes concerning the UBW to the Secretariat, and PCB members were encouraged to provide inputs to their representatives on the subcommittee as soon as possible so that all concerns can be taken into account.

**Agenda item 7. Agenda and date of the next meeting and any other business**

The next meeting will take place in Geneva on April 16, 2009 at 10:00. The meeting will include a particular focus on performance monitoring and accountability, including links between indicators, outputs and outcomes and performance-based criteria for resource allocations. Other issues raised at the meeting and reflected in this report will also be covered.

**Attachment:**

- **Preparation of the 2010-2011 Unified Budget and Workplan**
  
  *Background document for the First Meeting of the PCB Subcommittee ad interim for the 2010-2011 UBW*
First meeting of the subcommittee ad interim of UNAIDS Programme Coordinating Board
Geneva, Switzerland
25 February 2009

Preparation of the 2010-2011 Unified Budget and Workplan
Attachment

Additional documents for this item:

i) 2007-2011 Strategic Framework for UNAIDS support to countries’ efforts to move towards Universal Access to HIV prevention, treatment, care and support (UNAIDS/PCB(23)/08.27) – see http://data.unaids.org/pub/InformationNote/2008/20081031_strategicframework_final_en.pdf


Action required at this meeting - the Subcommittee ad interim of the Programme Coordinating Board is invited to:

1. Review progress in the formulation of the 2010-2011 Unified Budget and Workplan and take note of the context, approach and principles guiding the development of the 2010-2011 UBW.

2. Review and discuss the proposed structure, principal outcomes and key outputs of the 2010-2011 UBW.

3. Review and take note of progress made in the development of a performance monitoring framework to accompany the 2010-2011 UBW and the process for finalizing the 2010-2011 UBW.

Annexes:

1. Decisions, recommendations and conclusions of the 23rd meeting of the PCB (5.9- 5.13)
2. Decisions, recommendations and conclusions of the PCB related to the UBW (2001-2008)
3. Strategic directions and proposed outcomes and outputs of the 2010-2011 UBW
4. Key dates in the finalization of the 2010-2011 UBW
INTRODUCTION

1. The 2010-2011 Unified Budget and Workplan (UBW) is scheduled to be presented to the Programme Coordinating Board (PCB) at its 24th meeting in June 2009. This paper presents the context, approach and key principles which guide the development of the 2010-2011 UBW, the proposed structure and the process for the finalization of the 2010-2011 UBW. The subcommittee ad interim of the PCB for the preparation of the 2010-2011 UBW is requested to consider these as part of its mandate to "review in a general manner and make recommendations to the 24th Programme Coordinating Board meeting on:
   a. the overall priorities, scope and structure of the UNAIDS Budget and Workplan;
   b. the expected results and broad activities of the Unified Budget and Workplan;
   c. the performance monitoring framework, indicators, targets and financial implementation reports; and
   d. follow-up on implementation of the previous decisions on the Unified Budget and Workplan" – see annex 1 and 2.

2. As requested by the PCB in April 2008, the UBW is being developed based on an updated Strategic Framework for UNAIDS for the period 2007-2011, which the PCB in December 2008 took note of “as the principal guide to global, regional and country-level planning, budgeting, implementation and monitoring progress of UNAIDS support to countries efforts to move towards the goal of universal access”.

3. As the overall priority for UNAIDS, strengthening countries' efforts to move towards universal access to HIV prevention, treatment, care and support guides the development of the 2010-2011 UBW. To deliver on universal access, renewed attention is needed to the way UNAIDS works in relation to its Cosponsors and partners, and to inspire a dynamic and sustained response. Major efforts need to be made to overcome inefficiencies related to fragmentation, competing priorities, duplication, mission creep and imbalances in capacities and resource allocation, in order to accelerate country results.

4. Given the global economic crisis, a key challenge for UNAIDS will be to keep AIDS on national agendas, to develop alliances with and position the AIDS response within health systems and the development sector more broadly. This includes better alignment between the “Three Ones” and the International Health Partnership as well as the Accra and Paris models for aid effectiveness at country level and the role of UNAIDS in UN reform. UNAIDS will also need to show the benefits of investments in HIV prevention, treatment, care and support, and to demonstrate the value of continued support to UNAIDS through the UBW.

5. The 2010-2011 UBW is expected to be a more strategic instrument than the current one, highlighting a limited number of areas that the Cosponsors and the Secretariat focus on and take responsibility for – with clearly identified leads, allocation of resources, accountability, and links between investments and results. The 2010-2011 UBW is, however, modelled and developed based on the current one – without radical changes or shifts – given that the second independent evaluation of UNAIDS, which is currently underway, could recommend significant changes to UNAIDS planning and budgeting in the future.

CONTEXT

6. The 2001 UN Declaration of Commitment on HIV/AIDS and the 2006 UN Political Declaration on HIV/AIDS provide the overall policy direction, mandate, and mission of UNAIDS. Moving towards universal access by 2010 was reconfirmed at the June 2008 High Level Meeting on AIDS in New York as a key objective and an important step on the road to achievement of the Millennium Development Goals by 2015.
7. Although some countries report having achieved some universal access targets, most developing countries and emerging economies have indicated that they do not have the human or financial resources to meet these targets by 2010. Efforts should therefore be redoubled to speed up progress towards universal access.

8. Refocusing and scaling up towards universal access is expected to protect and build on gains already made, unveil important localized social drivers of the AIDS epidemic and pave the way for actions to address specific strategic gaps, social, political and structural issues that now limit results. Ten key areas have been identified by UNAIDS to achieve the universal access goals:

   1. Deliver results country by country - by setting ambitious targets.
   2. Promote the human rights of people living with and affected by HIV - by ending laws that impede delivery and use of AIDS related services.
   3. Support political demand for universal access - by strengthening links with civil society and community groups.
   4. Invest in research and apply the evidence - by continued investment in pre-exposure prophylaxis, microbicides and vaccines.
   5. Prioritize prevention efforts - by making pediatric AIDS history and giving young people skills to protect themselves from HIV and violence.
   6. Mobilize the resources countries need - including fully funding the Global Fund.
   7. Optimize and expand partnerships - by expanding the partnership platform to bring new partners together.
   8. Leverage AIDS responses to deliver broader results for people - revitalize health systems to ensure that people living with HIV do not die of TB and have access to primary health care.
   9. Monitor progress - country by country and donor by donor - by ensuring transparency and accountability at all levels.
  10. Plan to sustain the gains - by empowering and restoring dignity to communities and families affected by HIV and ensuring sustainable and predictable financing.

9. According to the most recent estimates US$ 25 billion will be required for the global AIDS response in 2010 to reach country-defined universal access targets for HIV prevention, treatment, care and support in low- and middle-income countries. One third of this investment is expected to come from domestic sources, with investments from multilateral and bilateral sources needed for the remaining two thirds.

10. Of the total investments required, approximately one third is envisaged for activities addressing behavioural change, social drivers of the epidemic, social mitigation and other services that are managed outside of the health sector through multisectoral programmes. Another one third is aimed at strengthening health systems, where weaknesses are a major obstacle to scaling up to universal access to prevention, treatment, care and support. The remaining one third is expected to go towards HIV specific health services, such as programmes to reduce mother-to-child HIV transmission, blood safety, and provision of antiretroviral therapy for those in need.

APPROACH

11. An effective AIDS response requires taking full advantage of strategic opportunities. To that end, UNAIDS has a key role in enabling partners to make full use of their comparative advantages and supporting countries in turning resources into results. In inspiring and driving joint action and optimal contributions from all partners, four key principles will serve to focus UNAIDS work:
Standing by people living with and communities affected by AIDS
Mobilizing greater resources and taking all possible steps to increase their impact
Renewing accountability and focusing on country results
Putting science, technology and data to work

12. In developing and implementing the UBW, priority will be given to the following:

- optimizing partnerships with and between UNAIDS Cosponsors, Secretariat and other relevant UN entities, with effective use of resources for universal access results as the main point of reference, seeking optimal use of country level UN competencies and capacities and making universal access priorities at country level drive resource allocation and management;
- achieving agreement and clarity with regard to UNAIDS role in relation to key partners in terms of technical assistance, advocacy, brokering and convening, and mutual accountability for making money and assistance work for results;
- convening broader alliances for linking the AIDS response, health and development action, focusing on critical gaps and where progress is lagging, and building mutual accountability to universal access goals, and;
- strengthening relationships with networks of people living with HIV and with civil society in ways that builds a social movement and alignment for universal access results and at the same time respects diversity.

13. It will also be critical that realities in countries inform priorities for action and partnerships at all levels, with the focus on UNAIDS strategic strengths. It is at the country level where opportunities are present in the most concrete ways, in terms of:

a) creating positive synergies where the AIDS response can bridge gaps and drive results.¹
b) analyzing and appropriately focusing collaboration and action on critical country level barriers that e.g., hinder equal access to HIV prevention, treatment, care and support.
c) applying financial and human resources within the current UN country level collaborative framework to where progress is lagging.

14. Another priority will be reviewing the support of UNAIDS, in particular of the Secretariat, towards universal access, refining the roles and relations of Cosponsors and the Secretariat for the UN response to be better fit for the purpose of serving countries, and advancing the UN reform agenda. Of equal importance will be efforts to broker partnerships with civil society, development partners, funding institutions and foundations, using universal access as a common platform of action to boost AIDS responses across the world.

15. In making universal access by 2010 its priority, UNAIDS Secretariat has adopted the following modus operandi:

- focus work on driving action towards results and accountability for results across partners and stakeholders, at national, regional and global levels;
- assist countries to identify policy, resource-related, and programmatic gaps in their move towards universal access;
- concentrate energies where progress is lagging, through advocacy, brokering and convening to address financial, social, political, legal and structural barriers that now limit effectiveness of the response, and monitor progress;

¹ Examples include, scaling up prevention of mother-to-child transmission; ensuring effective integrated delivery of AIDS and tuberculosis services; accelerating health systems development, through skilled and equipped health workers, access to drugs, revitalized primary health care systems, and mainstreaming the HIV response into broader development efforts, and; countering stigma and discrimination and delivering on the wider human rights agenda.
work to bring the AIDS response out of isolation without losing specificity, linking and achieving positive synergies with action for results vis-à-vis the Millennium Development Goals, Primary Health Care values and sustainable health systems;

demonstrate UN reform in practice, making it relevant and responsive to an effective national AIDS response, social movements and the aspirations and energies of young people;

put science and data to work, and assist countries to translate strategic data into evidence informed policies and action, and;

make alignment and alliance with people and communities living with or vulnerable to HIV integral to its values and identity.

PRINCIPLES AND PROPOSED STRUCTURE

16. Over the last few years, the PCB has requested increased attention to performance monitoring and accountability, and a stronger emphasis on the UBW as an accountability framework. A performance monitoring framework is therefore developed in parallel with the UBW with a particular focus on the measurement of UNAIDS achievements at country level as part of efforts to monitor progress against the 2001 Declaration of Commitment, the 2006 Political Declaration and the Millennium Development Goals.

17. In December 2008, the PCB agreed that the process to develop the Unified Budget and Workplan for 2010-2011 should focus on the linkages between investments and results, a reduction of indicators as appropriate, and information on the impact of activities. The PCB also agreed that future planning and reporting should take into account obstacles encountered and lessons learned – see annex 2.

18. Since 2000 when UNAIDS first introduced a Unified Budget and Workplan, global funding for AIDS programmes has increased ten-fold reaching US$ 13.7 billion last year. The UBW was never designed as an instrument to channel funding to national AIDS programmes and UNAIDS budget has therefore always been rather modest. Between 2000 and 2008 the UBW increased from US$ 70 million to US$ 234 million per year – a three-fold increase – with all funds raised through voluntary contributions and member states contributing over 90 per cent of the budget.

19. Originally, the UBW was designed to fund the activities of UNAIDS Secretariat at global, regional and country levels as well as (some of the) global and regional level activities of the Cosponsors. In 2006-2007 support to the Cosponsors through the UBW amounting to US$ 120 million was complemented by US$640 million mobilized by the Cosponsors internally or through other sources, i.e., almost five times the amount provided through the UBW. This figure does not include Cosponsors’ country-level resources, which have remained formally outside the UBW as it has been considered impractical if not impossible to bring together the plans of all the Cosponsors for activities in over 100 countries into one document.

20. Resource needs identified by UNAIDS Cosponsors and Secretariat as part of the planning and budget process have consistently exceeded the final budget eventually proposed to and approved by the PCB. In determining the level of the UBW to be presented to the PCB, funds raised in the past has been an important factor. In 2008, UNAIDS Secretariat mobilized almost exactly half of the PCB approved budget of US$ 468 million for 2008-2009. Based on this it is suggested that the 2010-2011 UBW should remain around the current level, and only increased in areas where there is a very clear need for additional funding, and to take into account increases in salaries and operating costs, etc.

21. Funding provided through the UBW is expected to focus on activities with clear links and measurable targets to achieve universal access, initiatives that bring or require the UN
agencies to work together to achieve results as well as activities which mobilize additional resources for UN system support to the response to AIDS. In terms of presentation, the budget is expected to be presented in a number of different ways, including:

i. Resources for priority areas and activities to achieve universal access
ii. Resources allocated for the Secretariat, Cosponsor and Interagency activities
iii. Resources broken down by global, regional and country level

22. The UBW is proposed to be organized and presented around the five strategic directions of the 2007-2011 Strategic Framework:

i. Guiding the global agenda, increasing involvement and monitoring global progress;
ii. Technical support and capacity building to ‘make the money work’ for Universal Access;
iii. Human rights, gender equality and reduced vulnerability of most-at-risk populations;
iv. Re-emphasizing HIV prevention alongside treatment, care and support; and
v. Strengthening harmonization and alignment with national priorities.

23. Under each of the strategic directions, principal outcomes have been identified, which UNAIDS Cosponsors and Secretariat support the achievement of as well as key outputs, which the Cosponsors and Secretariat commit to deliver, and broad activities which will be carried out to achieve the expected results. This is also the structure of the current UBW.

The major change to the structure of the 2010-2011 UBW is a direct alignment of the principal outcomes and key outputs with the five strategic directions of the Strategic Framework – see annex 3.

24. The principal outcomes are higher order results which the efforts of the Cosponsors and Secretariat contribute to. Key outputs, on the other hand, are specific to UNAIDS and define the contributions and accountability of each Cosponsor and the Secretariat. Broad activities describe in some more detail what everyone is going to do.

PROCESS

25. The development of the 2010-2011 UBW was initiated in May 2008 with a review of UNAIDS Strategic Framework as a basis for the UBW. Deliberations at the High Level Meeting of the UN General Assembly in July 2008 informed the process of updating the Strategic Framework, which was finalized taking into account trends in the epidemic and the response to AIDS, the need to scale up efforts towards universal access – and to ensure an exceptional long-term response.²

26. In December 2008 agreement was reached between the Cosponsors’ Global Coordinators and the Secretariat on the principal outcomes and key outputs of the 2010-2011 UBW. Following this, the development of broad activities and corresponding budgets has been initiated.

27. In March 2008, a peer review of the 2010-2011 UBW by the Cosponsors and the Secretariat is scheduled to take place following which the draft UBW will be presented to the Committee of Cosponsoring Organizations ahead of a meeting of the PCB subcommittee in April before the UBW, including the performance monitoring framework, is finalized for the consideration of the PCB in June 2009 – see annex 4.

² The Strategic Framework acknowledges the heterogeneity of the HIV epidemic, the importance of enabling legal environments, the changing financial architecture and the role of the United Nations in a changing world and highlights the need for: supporting countries to develop prioritized strategies and action plans grounded in evidence – knowing one’s epidemic as well as the status of the response in each country – addressing the needs of most-at-risk and vulnerable populations, and improving country-level programme implementation.
Annex 1

23rd Meeting of UNAIDS Programme Coordinating Board
Geneva, Switzerland, 15-17 December 2008
Decisions, Recommendations and Conclusions

The UNAIDS Programme Coordinating Board

Agenda item 2: The Unified Budget and Workplan: Monitoring implementation and planning for the future

5.9 Agrees to the establishment of a subcommittee ad interim of the Programme Coordinating Board for the preparation of the 2010-2011 Unified Budget and Workplan with the mandate to review in a general manner and make recommendations to the 24th Programme Coordinating Board meeting on:

a. the overall priorities, scope and structure of the UNAIDS Budget and Workplan;
b. the expected results and broad activities of the Unified Budget and Workplan;
c. the performance monitoring framework, indicators, targets and financial implementation reports; and
d. follow-up on implementation of the previous decisions on the Unified Budget and Workplan;

5.10 Agrees that the subcommittee shall be comprised of a maximum of ten member states (two per geographical region), two NGOs, two Cosponsors and the UNAIDS Secretariat, and that the reports of the subcommittee meetings be posted on the UNAIDS website;

5.11 Agrees the process for establishment of the subcommittee as follows:

- By the deadline of 9 January 2009 the Chair of the Programme Coordinating Board to invite proposals for membership from each (Member State) region and constituency (NGOs and CCO); each group should present consensus nominees if possible;
- Each constituency will be requested to submit the exact number of nominations to fill the number of places on the subcommittee for that particular constituency;
- If the number of nominations exceeds or is less than the number of places on the subcommittee for a particular constituency, the Chair of the Programme Coordinating Board will contact all members of that constituency represented on the Board for further discussion and agreement;
- Once the subcommittee is established the PCB Bureau will communicate the names of the members to all Member States, PCB NGOs and Cosponsors; and
- The PCB Bureau shall propose, for agreement by the Programme Coordinating Board using the inter-sessional decision making process, a Chair from within the membership of the subcommittee;

5.12 Further agrees that the budget for the operations of the subcommittee shall be a maximum of USD 114,000 to cover two meetings of the subcommittee;

5.13 Agrees that a decision on the continuation of the subcommittee will be taken at the 25th Programme Coordinating Board meeting in light of the outcomes of the Second Independent Evaluation;
Annex 2


23rd Meeting of the UNAIDS Programme Coordinating Board
Geneva, Switzerland, 15-17 December 2008

Agenda item 2: The Unified Budget and Workplan: Monitoring implementation and planning for the future

5.2 Agrees that future planning and reporting should: focus on results, take into account lessons and obstacles; include indicators that relate to wider development; aim to simplify data; include information on the impact of activities, qualitative and quantitative reporting, cross-cutting issues such as gender equality and human rights; and data disaggregated to the extent possible by categories such as country, Cosponsor, age and sex;

5.3 Supports continued focus on the measurement of UNAIDS achievements at country level as part of efforts to monitor progress against the Declaration of Commitment of the UN General Assembly Special Session on HIV/AIDS, the 2006 Political Declaration and the Millennium Development Goals;

5.4 Encourages additional emphasis on performance monitoring and evaluation to further improve reporting and to enhance accountability at all levels and across the Joint Programme;

5.5 Further agrees, that the process to develop the Unified Budget and Workplan for 2010-2011 should include clarity on the division of labour, a reduction of indicators as appropriate, and a focus on the linkages between investments and results;

5.8 Takes note of the updated Strategic Framework for 2007-2011 as the principal guide to global, regional and country-level planning, budgeting, implementation and monitoring progress of UNAIDS support to countries efforts to move towards the goal of Universal Access;

22nd Meeting of the UNAIDS Programme Coordinating Board
Chiang Mai, Thailand 23-25 April 2008

Agenda item 7: Cycle of the UNAIDS Unified Budget and Workplan

12. Endorses the development of the next Unified Budget and Workplan based on a review and extension of the UNAIDS 2007–2010 Strategic Framework to 2011, and confirms a 4-year planning framework and a 2-year budget cycle and for the Unified Budget and Workplan;

Agenda item 8.2: Financial Reports

14.3 Endorses the Executive Director’s proposal for the utilization of 16 million USD of the available fund balance to cover priorities and investments that are not included in the 2008-2009 Unified Budget and Workplan, and requests that these expenditures be included in the Unified Budget and Workplan;

21st Meeting of the UNAIDS Programme Coordinating Board
Geneva, Switzerland, 17-18 December 2007

Agenda item 3: Programme Performance Monitoring Framework

5.1 Endorses the Performance Monitoring and Evaluation Framework for the 2008-2009 Unified Budget and Workplan;

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

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

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

7.4 **Endorses** the establishment of a mid-term review of the Unified Budget and Workplan to increase the flexibility of the Unified Budget and Workplan as outlined in paragraph 41 of the Unified Budget and Workplan document³;

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

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

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

7.8 **Approves** the authority of the Executive Director of UNAIDS to increase or decrease funds by up to 10% between Principal Outcomes of the Unified Budget and Workplan, subject to the conditions outlined in paragraph 41 of the Unified Budget and Workplan document⁴;

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

³ Paragraph 41 includes the following relevant text: “A mid term review of the Unified Budget and Workplan will be carried out following the first year of operation of the biennium. The review will be coordinated by the Secretariat and will take into account developments since the Unified Budget and Workplan was approved by the Programme Coordination Board including emerging priority issues and actual and anticipated fundraising and implementation.

⁴ Paragraph 41 includes the following relevant text: “The Executive Director may increase or decrease resources between Principal Outcomes, subject to the following conditions:

a. Transfers are allowed up to a maximum of 10 per cent of the amount budgeted for the Principal Outcome;

b. Transfers exceeding 10 per cent should only occur following consultation with the Committee of Cosponsoring Organizations, and the Chair and Vice-Chair of the Programme Coordinating Board;

c. Transfers may occur as part of a mid-term review exercise or as otherwise deemed necessary by the Executive Director.
a. The amount of funds to be programmed and disbursed under discretionary authority shall not exceed 10% of the approved budget;
b. The funds shall be used only for activities in priority areas as set out in the Strategic Framework or for investments in, or support for, the Principal Outcomes and Key Outputs as identified in the Unified Budget and Workplan;
c. The Executive Director shall submit his proposal for the use of the funds to all Members of the Programme Coordinating Board through its Bureau, who will ensure its conformity with the above criteria. Any proposal shall be deemed approved if no written objection to the proposal is received by the Bureau within a period of 14 days from the date of notification of the proposal;
d. The use of the funds under the Executive Director’s discretionary authority should be reported to the 22nd meeting of the Programme Coordinating Board; and
e. The Programme Coordinating Board will review the experience with this procedure at the end of three years.

7.10 Takes note of the interim financial management information for the 2006–2007 biennium and the financial update as at 30 April 2007;
7.11 Encourages donor governments and others to release their contributions towards the Unified Budget and Workplan for 2006–2007 as soon as possible, if they have not already done so;
7.12 Requests that the 2010-2011 Unified Budget and Workplan include stronger linkages between investment and results and that it is accompanied by a prospective Performance Monitoring and Evaluation Framework for the budgetary period;
7.13 Further requests mid-term progress reports on the implementation of the Unified Budget and Workplan and that the report be an item on the agenda of the Programme Coordinating Board meeting;
7.14 Recommends UNAIDS to identify potential efficiencies that may come from working in a more harmonized way, so that any savings made can be reinvested into the programme.

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

10. Decides that
k. The Unified Budget and Workplan will be further developed to enable it to be a strategic tool for division of responsibilities and other governance matters within UNAIDS, the Secretariat and the ten co-sponsors. The Unified Budget and Workplan should include incentives for action and collaboration;
l. Funds allocated to co-sponsors will be linked to specific outputs and a release of funds should be performance-based. The Unified Budget and Workplan should clearly identify expected results and responsible actors;

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

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

17th Meeting of the UNAIDS Programme Coordinating Board
Agenda item 4: UNAIDS Unified Budget and Workplan 2006-2007

9. The Programme Coordinating Board:

9.1 expresses its satisfaction with the success of the Secretariat and Cosponsors in responding fully to the decisions of the Programme Coordinating Board and further improving the Unified Budget and Workplan 2006-2007, by setting out clearly the contributions of UNAIDS to the global response and bringing further strategic coherence to work planning and budgeting;

9.2 commends UNAIDS for strengthening the results-based management framework of the Unified Budget and Workplan 2006-2007, making it a more user-friendly and transparent document and a better tool for accountability, and notes with satisfaction the inclusion of results and corresponding indicators of achievement at the level of the Joint Programme as a whole and at the level of individual Cosponsors and the Secretariat;

9.3 recognizes that the Unified Budget and Workplan 2006-2007 is a prime example of United Nations' reform in action;

9.4 requests UNAIDS to take further steps to strengthen the Unified Budget and Workplan as an instrument for UN system coherence to capture country level financing and harmonization with a strengthened results-based management approach, and that UNAIDS report to the Programme Coordinating Board on these steps in June 2006;

9.5 urges UNAIDS Secretariat to establish a process aimed at aligning the Unified Budget and Workplan with the recommendations of the Global Task Team and to identify their financial implications;

9.6 notes with satisfaction the increases in the Cosponsors’ own resources for global, regional and country level activities, all of which are tangible expressions of their increased capacity, commitment and action to fight the AIDS epidemic and its consequences;

9.7 requests UNAIDS to respond to Decision 8.2 of the 15th Programme Coordinating Board to present a harmonized report to Cosponsors' governing bodies; the 2006-2007 Unified Budget and Workplan provides an opportunity to present to the Programme Coordinating Board a summary report on country-level spending, including the use of Unified Budget and Workplan funds at the country level; in all cases duplicative reporting should be avoided; Programme Coordinating Board members also acknowledge their responsibility to ensure coherence as members of Cosponsors’ governing bodies;

9.8 endorses the strategies and approaches contained in the Unified Budget and Workplan 2006-2007, in particular its emphasis on enabling countries to scale up the national response to the AIDS epidemic;

9.9 mindful that some regions or subregions bear a disproportionate share of the AIDS burden, often compounded, as in the case of sub-Saharan Africa, by very high levels of poverty and, underlining the importance of allocating funds to reflect this situation, requests the UNAIDS Secretariat to prepare an additional table in the Unified Budget and Workplan to show more clearly the regional distribution of resources;

9.10 urges UNAIDS Secretariat to examine and propose ways and means to the 18th Programme Coordinating Board to increase the flexibility of the Unified Budget and Workplan, including the possible establishment of a contingency fund and a mid-term review;

9.11 approves the core budget of US$ 320.5 million and the proposed distribution of those resources as follows: US$ 120.7 million for the Cosponsors; US$ 115.4 million for the Secretariat; and US$ 84.4 million for interagency activities; and

9.12 urges all countries to fully fund the Unified Budget and Workplan 2006-2007 in accordance with the principle of burden sharing.
Fourteenth meeting of the Programme Coordinating Board
Geneva, 26–27 June 2003

Agenda item 2: UNAIDS Unified Budget and Workplan 2004-2005

19. The PCB commends the Secretariat and Cosponsors for their presentation of the 2004-
2005 UBW, which responds fully to the decisions of the PCB following the external evaluation of
UNAIDS and is now a more user-friendly and transparent document. The PCB takes note of the
use of thematic and regional consultations to sharpen the strategic focus of the 2004-2005
UBW and to promote coordinated action by UNAIDS.

20. The PCB endorses the strategies and approaches contained in the 2004-2005 UBW, in
particular its strategic thrust to enable countries to scale up their national response to the
epidemic;

21. The PCB approves the core budget of US$250.5 million and the proposed distribution of
those resources as follows: US$85.7 million for Cosponsors; US$91.2 million for the Secretariat;
and US$73.6 million for interagency activities;

22. The PCB approves the additional interagency core budget of US$20 million, subject to
availability of funding beyond the $250.5 million core budget;

23. The PCB recognizes that the approval of this UBW implies a moral responsibility for all
countries to fully fund it, in accordance with the principle of burden-sharing.

24. The PCB notes with satisfaction the increases in the Cosponsors’ own resources and takes
note of the supplemental budgets for HIV/AIDS contained in the UBW which is a tangible
expression of their increased capacity, commitment and concrete action to fight HIV/AIDS; and
encourages the Cosponsors to continue to expand their action in this area and to report to their
Governing Bodies on an annual basis.

25. The PCB encourages the Cosponsors to include in the UBW report information on their
country level spending for HIV/AIDS activities.

26. The PCB encourages UNAIDS to further integrate a results-based management framework
into the next UBW and to explicitly link the desired results with the different comparative
advantages of the Cosponsors.

27. The PCB encourages the Secretariat and Cosponsors to continue to strengthen
performance monitoring of the implementation of the UBW.

28. The PCB encourages UNAIDS to review periodically the allocation of funds and the balance
between the various regions and areas of work.

Eleventh meeting of the Programme Coordinating Board
Geneva, 30 May - 1 June 2001

Agenda item 3 – UNAIDS Unified Budget and Workplan for 2002-2003

22. The PCB commended the Cosponsors and the Secretariat on the development of a second
UNAIDS unified budget and workplan and its close link with the UN System Strategic Plan. The
PCB endorsed its principles, structure and overall level, and approved:
22.1 the overall level of the core component of the UNAIDS unified budget and workplan for 2002-2003 of US$190 million, as set out in approval table 1 of document UNAIDS/PCB(11)/01.4;

22.2 the distribution of the core component of the unified budget and workplan for 2002-2003 by area of work as set out in approval table 2;

22.3 the global and regional distribution of the core component of the unified budget and workplan for 2002-2003 by UNAIDS Cosponsor and Secretariat as set out in revised approval table 3a;

22.4 the overall level and distribution of the supplemental component of the unified budget and workplan for 2002-2003 as set out in approval table 4.

23. Consistent with previous decisions (UNAIDS/PCB(6)/98.12/ paragraph 19), the PCB authorized the Executive Director to increase or decrease resources up to a maximum of 25 per cent of the amount budgeted for each area of work in approval table 2, as part of periodic reprogramming exercises. Transfers exceeding 25 per cent should only take place following consultation with the CCO, the PCB Chairperson and Vice-Chairperson.

24. The PCB also authorized the Secretariat to transfer resources in advance of the new biennium, as available, to Cosponsors on finalization of workplans to enable early and urgent implementation of the 2002-2003 unified budget and workplan activities.

25. The PCB encouraged further efforts at clarifying the roles and comparative advantages of the different Cosponsors and the Secretariat.

26. The PCB encouraged the Cosponsors and Secretariat to further review, harmonize and refine budget outputs, particularly at thematic and sub-regional level. The PCB also encouraged the Cosponsors and Secretariat to continue refining and sharpening indicators, including qualitative indicators, where appropriate, and establishing baselines.

27. The PCB noted the regular budget/general resource contributions of the Cosponsors to the UBW, and encouraged them to increase these levels. The PCB also encouraged the Cosponsors to continue improving financial reporting on HIV/AIDS-related activities financed from their regular budgets/general resources, including estimates of country level expenditures. The PCB also encouraged the Secretariat to continue working with the Cosponsors and other partners on improving methodologies for estimating HIV/AIDS-related expenditures and on mapping the UN system country level resources.

28. The PCB urged the Secretariat and the Cosponsors to coordinate their fundraising efforts for the unified budget and workplan, to dialogue with donors in these efforts, including on the recommendations of the financing study and to report to the PCB on progress in this respect. The Secretariat shall have the primary responsibility for raising the core component of the UBW; the Cosponsors will have the primary responsibility for raising the supplemental component. Shortfalls within the core budget should be accommodated through reductions in the activities of the Cosponsors and the Secretariat agreed to through the CCO mechanism.

29. The PCB decided that the core component of the unified budget and workplan be funded as a priority and thereafter funds should be mobilized for additional activities included in the supplemental component of the unified budget and workplan.
### Annex 3

**Strategic directions and proposed outcomes and outputs of the 2010-2011 UBW**

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<thead>
<tr>
<th>Strategic Directions</th>
<th>Principal Outcomes</th>
<th>Key Outputs</th>
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| **Strategic Direction 1**  
Guiding the global agenda, monitoring global progress | **Principal Outcome 1a**  
Leadership and resource mobilization for a broadbased HIV response at country, regional and global levels are strengthened. | Key Output 1: Global agenda for an effective, comprehensive HIV response clearly defined and supported by global policies, standards and guidelines.  
Key Output 2: Political commitment and leadership among government, civil society, private sector, and other stakeholders at all levels galvanized to ensure inclusive, multisectoral and sustainable HIV responses.  
Key Output 3: Financial resources mobilized and leveraged in a timely, predictable and effective manner to match projected resource needs for a scaled up response.  
Key Output 4: Capacity of people living with HIV, civil society and community-based organizations is strengthened to meaningfully engage in HIV responses at all levels. |
| | **Principal Outcome 1b**  
Strategic information strengthened and available to support knowing your epidemic, guiding evidence informed response and improving accountability. | Key Output 1 HIV monitoring and evaluation approaches and systems are better coordinated and harmonized  
Key Output 2: Reliable and timely data, information and analyses on global, regional and national trends are available and used, and the estimation of global and country HIV resource needs and tracking of financial flows are improved.  
Key Output 3: Biomedical, socio-economic, behavioural, operational research and evaluation agendas developed and promoted to scale up of the response. |
| **Strategic Direction 2**  
Technical support and capacity building to “make the money work” for Universal Access | **Principal Outcome 2**  
Human resources and systems of government and civil society enhanced to develop, implement and scale up evidence informed comprehensive HIV responses | Key Output 1: Capacity of national AIDS authorities to lead and coordinate an inclusive and broad based multisectoral response on AIDS is strengthened.  
Key Output 2: National AIDS Strategies and Action Plans are costed, inclusive, multisectoral, sustainable, prioritized and informed by scientific evidence, reflecting social and epidemiological data.  
Key Output 3: National strategic information and accountability systems, including one agreed monitoring and evaluation framework for HIV, are developed and implemented  
Key Output 4: Community systems strengthened through capacity building and inclusion of people living with HIV, most-at-risk, affected and vulnerable groups in national responses.  
Key Output 5: National human resource planning, training, compensation, and retention measures in all sectors relevant to the response are improved.  
Key Output 6: Sustainable programmes to mitigate the socio-economic impact of AIDS are developed and implemented through strengthened capacity of country partners.  
Key Output 7: National systems for procurement and supply management, and legislation to facilitate access to quality affordable HIV medicines, diagnostics, condoms, and other essential HIV commodities are strengthened. |
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<td><strong>Strategic Direction 3</strong>&lt;br&gt;Human rights, gender equality and reduced vulnerability of most-at-risk populations</td>
<td>Principal Outcome 3&lt;br&gt;Human rights-based and gender-responsive policies and approaches to reduce stigma and discrimination are strengthened and address the vulnerability and impact associated with sex work, drug use, incarceration, and sex between men.</td>
<td>Key Output 1: Human rights-based, gender-responsive and equitable HIV policies and programmes are coordinated and promoted in all settings, including through government adherence to human rights treaties and other related international obligations. Key Output 2: HIV-related stigma, discrimination and human rights issues are improved, especially in relation to most-at-risk and vulnerable populations. Key Output 3: Legal and policy barriers impeding equitable access to HIV prevention, treatment, care and support services and commodities, including those designed specifically for vulnerable and most-at-risk populations, are addressed. Key Output 4: Gender inequality, gender-based violence, human trafficking and discrimination against women and girls are more effectively addressed, including through the engagement of men and boys.</td>
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<td><strong>Strategic Direction 4</strong>&lt;br&gt;Re-emphasizing HIV prevention alongside treatment, care and support</td>
<td>Principal Outcome 4a&lt;br&gt;National capacities for scaling-up HIV prevention, treatment, care and support are enhanced.</td>
<td>Key Output 1: Prevention of sexual transmission of HIV and STI strengthened including through sexual and reproductive health policy, programmes and service linkage. Key Output 2: Comprehensive integrated programmes for the prevention of mother-to-child transmission scaled up. Key Output 3: Interventions for the prevention of HIV transmission within health care and occupational settings (including blood safety, safe injection practices, universal precautions; occupational health standards, PEP) scaled up. Key Output 4: Comprehensive HIV-related treatment and care services scaled up. Key Output 5: Equitable access and uptake of HIV testing and counseling ensuring confidentiality, informed consent, counseling and appropriate referrals. Key Output 6: Scaled up and harmonized joint HIV/TB planning, training, procurement and delivery of HIV/TB services.</td>
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<td>Principal Outcome 4b&lt;br&gt;Coverage and sustainability of programmes for HIV prevention, treatment, care and support are increased and address the vulnerability and impact associated with sex work, drug use, incarceration and sex between men.</td>
<td>Key Output 1: HIV prevention, treatment, care and support services scaled up with, by and for those engaging in injecting drug use, sex between men, sex work, and including those in prisons and other at-risk settings. Key Output 2: Evidence-informed policies and practices, and improved coordination and harmonization of approaches, are implemented to address the vulnerabilities and needs of most-at-risk populations.</td>
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<td>Principal Outcome 4c&lt;br&gt;Increased coverage and sustainability of programmes including to address the vulnerability of, and impact on women and girls, young people, children, populations affected by humanitarian crisis and mobile populations.</td>
<td>Key Output 1: Protection, treatment, care and support for children affected by HIV are provided. Key Output 2: Policies, programs and services for young people, particularly those most at risk, are implemented. Key Output 3: Transmission of HIV, vulnerability and impact among women and girls is reduced. Key Output 4: HIV policies and programmes implemented for populations affected by humanitarian crisis.</td>
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<td><strong>Key Output 5</strong>: Equitable access to comprehensive HIV prevention, treatment and care services through the workplace and for mobile populations.</td>
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<td><strong>Strategic Direction 5</strong></td>
<td><strong>Principal Outcome 5</strong></td>
<td><strong>Key Output 1</strong>: HIV responses integrated into broader development and sectoral plans in line with National AIDS Strategies and Annual Action Plans.</td>
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<td>Strengthening harmonization and alignment of national priorities</td>
<td>Coordination, alignment and harmonization strengthened across the HIV response.</td>
<td><strong>Key Output 2</strong>: Coordinated technical and financial support involving governments, multilaterals, bilateral donors, the private sector and civil society.</td>
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<td><strong>Key Output 3</strong>: UN system support coordinated and harmonized to strengthen the HIV response at global, regional and country levels.</td>
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Annex 4

Key dates in the development of the 2010-2011 UBW

January-February
Finalization of principal outcomes/key outputs and development of UBW activities and budgets.

February 25
First meeting of the PCB subcommittee.

March 3-4
Peer review of the UBW by the Global Coordinators and the Secretariat in Washington.

April 3
Review of the UBW by the Committee of Cosponsoring Organizations in Paris.

Mid April (tbc)
Second meeting of the PCB subcommittee.

June 23
Presentation of the UBW including the performance monitoring framework to the PCB.

In addition, briefings for member states and civil society as well as consultations with key donors on the funding of the UBW will take place.