24th Meeting of the UNAIDS Programme Coordinating Board
Geneva, Switzerland
22-24 June 2009

2010-2011 Performance Monitoring Framework
Additional documents for this item: 2010-2011 Performance Monitoring Matrix (UNAIDS/PCB(24)/09.CRP.1)

Action required at this meeting - the Programme Coordinating Board is invited to: review and endorse UNAIDS 2010-2011 Performance Monitoring Framework.

Cost implications of the decision: none
I. Introduction

1. At its 20th meeting in June 2007, when the UNAIDS Programme Coordinating Board approved the current Unified Budget and Workplan, the Board requested that a Performance Monitoring Framework be submitted together with future Budgets and Workplans for approval by the Programme Coordinating Board. The Programme Coordinating Board also called for increased attention to results-based management and accountability, requested that the release of Unified Budget and Workplan funds be performance-based, and asked that mid-term reports and final performance reports on the Unified Budget and Workplan implementation be agenda items at future Programme Coordinating Board meetings.

2. The 2010-2011 Unified Budget and Workplan Performance Monitoring Framework responds to the request of the Programme Coordinating Board for improving results-based management and accountability, and tracking of linkages between financial investments and programmatic results. The Framework is designed to serve as a tool for monitoring and assessment of the results of the efforts of UNAIDS and incorporates a mid-term review of the Unified Budget and Workplan – also requested by the Programme Coordinating Board – to enable allocation of funds based on performance, and enhance learning across the Cosponsors and the Secretariat.

3. The Framework has been developed through a collaborative process involving UNAIDS Cosponsors and Secretariat, with monitoring and evaluation experts of the Cosponsors participating actively in consultations. Efforts focused on the identification, review and validation of indicators, the identification and agreement on baseline information; definition of the source of monitoring information; the scope and periodicity of reporting; assignment of responsibilities and roles; and agreement on coordination mechanisms.

4. The 2010-2011 Unified Budget and Workplan Performance Monitoring Framework builds on lessons learnt through monitoring and evaluation of previous Unified Budget and Workplans. In particular, prior experience suggests that the following elements are essential for the successful monitoring of the Unified Budget and Workplan:
   - simplicity and functionality;
   - monitoring not only activities, but more importantly outputs and outcomes;
   - strengthening both joint and individual accountability;
   - clear identification of data sources and data collection systems and protocols;
   - harmonization of individual agency systems with the Unified Budget and Workplan performance monitoring.

5. As a result, the 2010-2011 Performance Monitoring Framework seeks to improve performance monitoring in UNAIDS in the following ways:
   - The focus of performance monitoring efforts will be at the country-level, with the majority of the indicators assessing progress at country level;
   - Both quantitative and qualitative indicators will be used to improve the quality and scope of performance monitoring information;
   - Data sources for indicators have been clearly defined, with baselines established, as appropriate, to permit tracking of progress;
   - Indicator monitoring data will be supplemented by targeted in-depth evaluations, qualitative assessments and case studies;
▪ The tracking of expenditures and linking of financial investments with results will be further strengthened;
▪ The structure of performance monitoring reports will be improved, focus on results but also include information on the implementation of activities and expenditures;
▪ Reports will be produced annually and presented to the Programme Coordinating Board as an agenda item and complement other reports, including the report of UNAIDS Executive Director to the Board.

6. A combination of different ways to monitor performance will be essential to measure progress against the 2010-2011 Unified Budget and Workplan as a whole and the eight priority areas in particular – since these cover a range of strategies, actions and interventions. No single indicator can therefore capture the full scope of progress in any of the priority areas. In order to measure progress and monitor success or failure, multiple sources of data and methodologies must be used. A mix of relevant indicators, composite indices and specific qualitative assessments will need to be used. Information needs to be synthesized to be able to determine whether progress is truly being made and where bottlenecks are impeding progress. Ultimately, what matters is whether UNAIDS efforts achieve measurable impact on the number of new infections, and the life expectancy and quality of life of people.

II. Objectives and rationale

7. The overarching objective of the 2010-2011 Unified Budget and Workplan is to support countries to achieve universal access to HIV prevention, treatment, care and support, as set forth in the 2001 Declaration of Commitment on HIV/AIDS and the 2006 Political Declaration on HIV/AIDS. Accordingly, the Performance Monitoring Framework is closely linked to the goals and targets of the Declaration of Commitment, as well as the goals and targets of the Millennium Development Declaration, in particular the target on AIDS under Millennium Development Goal 6 (MDG 6). The monitoring of UNAIDS activities within broader global efforts is situated to measure the results of global and national commitments and actions.

8. In line with the effort to position the Unified Budget and Workplan within the broader AIDS response, the Performance Monitoring Framework links the monitoring of efforts of UNAIDS to the achievement of progress in the AIDS response. Thus, for principal outcomes, progress will be measured through country-level data used to measure progress against indicators for the Declaration of Commitment. By monitoring the support provided by UNAIDS to countries, the Framework will yield information regarding the specific contributions of UNAIDS during the 2010-2011 biennium.\(^2\)

---

1 Millennium Development Goal 6: Combat HIV/AIDS, malaria and other diseases includes the following target: to have halted by 2015 and begun to reverse the spread of HIV/AIDS and the following indicators:
   - HIV prevalence among pregnant women aged 15–24 years
   - Condom use rate
   - Percentage of population aged 15-24 with comprehensive correct knowledge of HIV/AIDS
   - Ratio of school attendance of orphans to school attendance of non-orphans aged 10–14 years.

In 2005, a target was added to achieve universal access to treatment for HIV for all those who need it by 2010, i.e., the proportion of the population with advanced HIV infection with access to antiretroviral drugs.

2 The Framework aims to identify contributions of UNAIDS to the global response rather than attributions of specific outcomes to UNAIDS activities. The Framework is also not designed to collect comprehensive information on all achievements and activities by Cosponsors and the Secretariat at country level, but rather to generate information needed to assess progress towards the principal outcomes and priority areas identified in the Unified Budget and Workplan.
9. As shown in Figure 1, the work of UNAIDS, as reflected in Unified Budget and Workplan outcomes and outputs, constitutes an integral part of global efforts to halt and reverse AIDS. With MDG 6 and the time-bound commitments in the Declaration of Commitment on HIV/AIDS in mind, UNAIDS seeks to produce a number of outputs in 2010-2011, which in turn will contribute to the achievement of priorities and outcomes agreed to. Figure 1 includes examples of outcomes, outputs and broad activities from the 2010-2011 Unified Budget and Workplan.

Figure 1: The 2010-2011 Unified Budget and Workplan as part of the global AIDS response

<table>
<thead>
<tr>
<th>Goal</th>
<th>MDG 6, Target 7</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Halt and reverse the AIDS epidemic and increase quality and life expectancy of persons with AIDS</td>
</tr>
<tr>
<td>Impact</td>
<td>Decrease in HIV prevalence, infections averted, longer survival on antiretroviral therapy</td>
</tr>
</tbody>
</table>

Example:

**2010-2011 Unified Budget and Workplan**

**Principal Outcome**

National capacities for scaling-up HIV prevention, treatment, care and support are enhanced.

**Key Output**

Prevention of sexual transmission of HIV and STI strengthened including through sexual and reproductive health policy, programmes and service linkage.

**Activity**

Scale up HIV prevention through combination approaches, including comprehensive education on sex, relationships and HIV/STIs, with emphasis on young people.

10. The 2010-2011 Unified Budget and Workplan Performance Monitoring Framework will generate information regarding:

- outcomes in priority areas to which UNAIDS contributes;
- delivery of key outputs against defined indicators;
- implementation of broad activities by Cosponsors and the Secretariat;
- expenditures incurred against outputs and outcomes.
III. Core principles

11. Performance monitoring of the Unified Budget and Workplan is guided by the principles outlined in the UN Evaluation Group paper on Evaluation Norms and Standards\textsuperscript{3}, principles for evaluation established by the Development Assistance Committee of the Organisation for Economic Co-Operation and Development (OECD/DAC), and other evaluation policies and guidelines adopted in the UN system. Principles identified in these documents include credibility, impartiality, independence, cost-effectiveness, transparency, consultation, and ensuring that evaluation findings contribute to organizational learning.

12. Given the unique cosponsored nature of UNAIDS as a Joint Programme, the following key considerations have also influenced the development of the Performance Monitoring Framework:

- **UN collaboration and harmonization.** While drawing on the monitoring and evaluation efforts of the 10 Cosponsors and Secretariat, performance monitoring of the Unified Budget and Workplan should also contribute to further harmonization of monitoring and evaluation processes across the UN system, in line with UN reform.

- **Results orientation and performance management.** A strengthened performance monitoring culture contributes to improved design of results-oriented programmes, while the generation of monitoring and evaluation information supports informed management and decision-making for strategic planning and programming.

- **Focus on contributions of individual and collaborative efforts.** In assessing the progress of ten UN agencies and one Secretariat towards common goals in the response to the AIDS epidemic, it is understood that attribution—establishing a causal relationship between results or observed changes and individual interventions—may not always be feasible. However, whenever possible, links between activities and results of efforts of UNAIDS and global progress in curbing and reversing the AIDS epidemic will be established to illustrate UNAIDS’ specific contributions.

- **Collective accountability.** The Unified Budget and Workplan is a unique tool in the UN system for both programming and operations, unifying in a single two-year framework the coordinated HIV-related activities of 10 Cosponsors and the UNAIDS Secretariat, with the aim of fostering joint programming and collaborative implementation. The joint programming model is reflected in the Framework, which uses common principal outcomes and key outputs to measure contributions by the Joint Programme as a whole. Key outputs are defined as results of cumulative and collaborative efforts of several Cosponsors and the Secretariat. Principal outcomes are defined as changes in the AIDS response to which UNAIDS key outputs contribute. This collaborative model of work translates into the principle of collective accountability for joint delivery of key outputs and achievement of principal outcomes. This approach is in line with the UN reform principle of “delivering as one”.

\textsuperscript{3} UN Evaluation Group Norms and Standards for Evaluation in the UN system, April 2005, at [www.uneval.org](http://www.uneval.org).
IV. Structure and key elements

13. The 2010-2011 Performance Monitoring Framework has been designed to mirror and support the evolving content, priorities and architecture of the Unified Budget and Workplan. At the same time, every attempt has been made to maintain consistency of indicators to allow for trend analyses over time.

14. The 2010-2011 Unified Budget and Workplan reflects greater clarity and simplicity in the articulation and presentation of outcomes and outputs. To promote harmonization with other instruments in the development field, the 2010-2011 Unified Budget and Workplan has adopted the nomenclature of the Development Assistance Committee of the Organisation for Economic Co-operation and Development (OECD/DAC), presenting the Unified Budget and Workplan according to principal outcomes and key outputs. The 2010-2011 Unified Budget and Workplan structure is schematically presented in Figure 2.

Figure 2: The structure of the 2010-2011 Unified Budget and Workplan

- Outcomes:
  Setting common, high-level objectives, involving all stakeholders in the AIDS response

- Outputs:
  Delivered jointly by and attributed to Cosponsors and the Secretariat

- Broad activities: Individual Cosponsor, Secretariat and interagency efforts, in line with an established division of labour and areas of responsibility

15. Under the 2010-2011 Unified Budget and Workplan, the number of indicators used in the past to track outcomes and outputs has been reviewed and refined. Annex 1 shows the indicators that have been identified to monitor progress against the eight priority areas. Annex 2 contains a full list of indicators for principal outcomes and key outputs in the 2010-2011 Unified Budget and Workplan. Given the Unified Budget and Workplan emphasis on supporting efforts of countries towards universal access to HIV prevention, treatment, care and support, the indicators cover both UNAIDS actions as well as changes in the epidemic and the response to the epidemic.

---

16. Indicators which have been identified in the Framework have been aligned with those used by Cosponsors in their own agency-specific monitoring and evaluation efforts to ensure harmonisation, coherence and consistency within and across UN agencies and in tracking progress towards the different Millennium Development Goals.

17. In selecting indicators, the following considerations were taken into account:
   - consistency in data collection (retaining indicators used in 2008–09, as appropriate);
   - success of particular indicators in monitoring UNAIDS performance;
   - cost of collecting data;
   - source of data;
   - links to programmatic priorities;
   - links with other global monitoring efforts (e.g. Declaration of Commitment, Global Task Team on Improving AIDS Coordination, and Universal Access);

18. Reporting on the principal outcome indicators will rely on standard data sources, including reports from countries on indicators for monitoring the Declaration of Commitment on HIV/AIDS, reports on the National Composite Policy Index, the Country Harmonization and Alignment Tool, UNAIDS country reports, and Cosponsor reports, such as data collected by UNHCR on emergency situations, or WHO data on AIDS treatment access, etc.
19. Output-level indicators track progress in delivery of UNAIDS goods and services, such as production and dissemination of guidelines, advocacy efforts and provision of technical and operational support. Most of the output indicators can be defined as “common” or “generic”, in the sense that they are formulated with a level of specificity that enables several agencies to report against them.

20. Several output indicators (such as one on joint programmes of support) expressly aim to measure the collective efforts of UNAIDS as a Joint Programme, particularly at country level. To enhance understanding and assessment of the specific contributions by individual Cosponsors and the Secretariat, the Unified Budget and Workplan identifies broad activities that each member of the UNAIDS family will undertake in 2010-2011. Although activities themselves have no specified performance indicators, reporting on output indicators will generate information on the specific contributions of individual Cosponsors and the Secretariat.

21. The monitoring data from Cosponsors and the Secretariat on key outputs will permit aggregation of information for UNAIDS-wide reports.

- Baselines and Targets

22. For each of the principal outcomes, baselines have been established where possible. In some cases, the baselines for output indicators will technically be zero, as no relevant products, services or goods will have been produced before the start of the 2010-2011 biennium. However, where outputs are expected to build on prior efforts, monitoring will compare UNAIDS efforts in 2010-2011 with baselines from the previous biennium (e.g. number of joint UN programmes on AIDS, number of technical support person-days, etc.).

23. Global targets have already been established for certain outcome indicators (e.g., scale-up of antiretroviral therapy). Where global targets exist, these have been incorporated in the 2010-2011 Framework. Most outcome indicators mirror core indicators for monitoring the Declaration of Commitment on HIV/AIDS. For such outcome indicators, targets will be nationally rather than globally determined, in accordance with the emphasis on national target-setting for Universal Access, as endorsed in the Political Declaration on HIV/AIDS.

24. At the level of key outputs, Cosponsors and the Secretariat have targets within their individual plans and strategies. For example, Cosponsors may establish a target to support a certain number of countries in a specific area.

- Financial reporting

25. Cosponsors and the Secretariat will report on expenditures against each broad activity in line with budget allocations in the 2010-2011 Unified Budget and Workplan. Initial, interim and final financial reports will cover all three budget categories for Cosponsors: the core budget mobilized by the Secretariat; the supplemental budget mobilized by Cosponsors; and the internal resources of Cosponsors that are dedicated to AIDS-related work. For the Secretariat and for the interagency component of the Unified Budget and Workplan, financial reports will cover the core budget and any other resources mobilized by the Secretariat. Cosponsors will submit financial reports annually, in accordance with the established Unified Budget and Workplan reporting cycle.
26. Cosponsors’ country-level efforts are supported by voluntary contributions and each Cosponsor’s regular budget. Although such funds are not formally part of the Unified Budget and Workplan, the Programme Coordinating Board at its 20th meeting “requested greater transparency on these funding flows by reporting on what is being spent on AIDS at country level in One UN Pilot countries in support of national response” (decision 7.5). Accordingly, the Performance Monitoring Framework includes a particular indicator for this purpose.

27. Monitoring the link between investments and results will be strengthened through new web-based resource management and information tools. A Unified Budget and Workplan information system has been developed which – along with the Enterprise Resource Planning systems of the Cosponsors and Secretariat – will facilitate tracking the amount of money spent on different activities and the results which these funds have delivered or contributed to at country level. The systems will enable monitoring commitments and expenditures for each Cosponsor, the Secretariat and Interagency activities by outputs and outcomes and make it possible to determine the extent to which UNAIDS is delivering results in accordance with the Unified Budget and Workplan.

V. Components and building blocks

28. The ultimate aim of the Performance Monitoring Framework is to permit an ongoing, accurate and comprehensive review of UNAIDS. To achieve this end, the Framework relies on three interconnected components:

a) monitoring the collective effort of UNAIDS towards the achievement of principal outcomes and key outputs outlined in the 2010-2011 Unified Budget and Workplan, through the use of a performance monitoring matrix with a limited number of carefully selected indicators;

b) individual performance monitoring by Cosponsors and the Secretariat of their specific individual contributions towards key outputs, supported by reports on the implementation of broad activities and expenditures incurred; and

c) mid-term and end-of-biennium reviews, qualitative assessments and in-depth studies focusing on the priority areas and cross-cutting strategies as well as analyses and syntheses of Cosponsor reviews and evaluations which include AIDS and other areas.

- Building block 1: monitoring the collective efforts of UNAIDS

29. Under the Framework, the collective efforts of the Joint Programme are measured against outcome and output indicators formulated for the principal outcomes and key outputs of the 2010-2011 Unified Budget and Workplan.

30. The Performance Monitoring Matrix aims to collect as broad an array of relevant information as possible, while being realistic in its scope and content and avoiding development of new systems or processes for data collection. Where possible, the Performance Monitoring Matrix has incorporated core indicators for monitoring the Declaration of Commitment on HIV/AIDS. As illustrated in Conference Room Paper 1, the periodic reporting from countries (including governments and nongovernmental organizations) that already occurs with respect to the implementation of the Declaration of
Commitment will serve as a central data source for UNAIDS monitoring in the 2010-2011 biennium.

31. Annual country reports from UN Joint Teams will provide an additional source of information for UNAIDS performance monitoring under the 2010-2011 Framework. Cosponsors will also provide monitoring data in specific areas, for example, WHO will supply information from progress reports on access to HIV antiretroviral therapy on the percentage of adults and children with advanced HIV receiving antiretroviral therapy.

32. Working primarily with members of the Cosponsor Evaluation Working Group, the UNAIDS Secretariat is responsible for ensuring necessary efforts and consultations to collect and analyse information on UNAIDS' collective achievements and progress. In particular, the group will support:

- validation of information collected and conducting necessary analyses;
- identification of benchmarks and additional sources of data, as necessary;
- production of synthesis reports and providing inputs to UNAIDS overall reports.

33. In accordance with the agreed division of labour for technical support, Cosponsors will support such efforts in distinct thematic areas. The UNAIDS Interagency Task Teams and Working Groups, which are established to support coordination of UNAIDS efforts in priority areas (e.g. on HIV prevention of mother-to-child transmission, and young people) will also be involved in the monitoring and evaluation efforts in their respective areas.

- **Building block 2: individual monitoring and accountability of the Cosponsors and the Secretariat**

34. Monitoring of progress in implementing activities by individual Cosponsors and the Secretariat will be conducted through each agency’s own institutional monitoring and expenditure tracking systems. The timeline for monitoring and reporting will depend on the respective cycles of the Cosponsors and the Secretariat, but shall occur at least annually.

35. Each Cosponsor and the Secretariat will report against relevant output indicators. Each individual member of the Joint Programme is responsible for verifying baseline information, selecting the means of verification, and reporting on these indicators.

36. Reports on implementation of broad activities by individual UNAIDS members will be supplemented by reports from specific countries, subregions, regions or on thematic areas. Reporting under the 2010-2011 Performance Monitoring Framework will be further supplemented by evaluation studies, wherever possible. Financial reporting by individual Cosponsors and the Secretariat will cover core, supplemental and internal agency resources, as shown in figure 4 below:
Figure 4: Reporting on Cosponsor, Secretariat and Interagency activities

- Building block 3: mid-term and end of biennium reviews, qualitative assessments, in-depth reviews and case studies

37. The Performance Monitoring Framework provides for a mid-term review – as requested by the Programme Coordinating Board – an end of biennium review, qualitative assessments and in-depth reviews and case studies related to the eight priority areas and cross-cutting strategies.

38. The mid-term review, which is expected to take place in early 2011, will be the key mechanism to ensure the release of funds against results. Two criteria are proposed to be used to determine the release of funds: (i) achievements and progress against indicators, and (ii) the financial implementation rate. At the mid-term review, budget allocations included in the Unified Budget and Workplan will be reviewed against these criteria and funds for the second year will be released based on achievement against these criteria.

39. Coordinated by the Secretariat, the mid-term review will take account of developments that have occurred since the Unified Budget and Workplan was approved by the Programme Coordinating Board, including dynamics of the epidemic, the outcome of the second independent evaluation, emerging priority issues, available and anticipated resources, and progress in implementing broad activities and delivering key outputs. Performance information on the implementation of the broad activities and progress against key outputs, generated through the Performance Monitoring Matrix, will inform the mid-term review.

40. The Programme Coordinating Board will be informed on the mid-term review process and outcomes through an annual performance report. The mid-term review will focus on the achievement of outputs, but also consider the appropriateness of indicators used and propose adjustments, as necessary. Especially where individual Cosponsors or the Secretariat have expanded or refocused their activities in response to emerging
issues or important developments, activities and reporting will need to be adapted to capture such developments.

41. Specific qualitative assessments will be carried out in the eight priority areas to complement information that can be generated through composite indices or quantitative indicators (see Annex 1). The common dimensions of capacity, coverage, quality, equity and efficiency will need to be considered to assess progress – country by country and to enable comparability across countries.

42. A limited number of in-depth studies will also be considered to generate evidence relevant to the development or revision of strategies in priority areas, and to contribute to the refinement of targets. Reviews may be conducted for specific areas, but may also focus on a region or subregion or a sample of countries, and will include both assessments of performance as well as structures and management systems. In-depth studies are expected to focus on issues of concern to several agencies, including:

- why results were or were not achieved;
- causal attributions of UNAIDS' efforts to results;
- lessons learnt for improving the Unified Budget and Workplan as an instrument to operationalize UNAIDS priorities, e.g. an assessment of effectiveness of activities

43. The Cosponsor Evaluation Working Group will play a key role in planning, prioritizing and overseeing the implementation of qualitative assessments and in-depth studies. During the 2010-2011 biennium, UNAIDS may also consider follow up studies or analyses to the second independent evaluation.

VI. Reporting and information resources

44. Reporting to the Programme Coordinating Board will occur annually, with a mid-term progress report to be submitted in 2011 on progress made in 2010. A more comprehensive report covering the achievements over the two-year period will be submitted to the Programme Coordinating Board in 2012. A limited number of carefully selected indicators, which form the cornerstone of the Performance Monitoring Framework, are expected to improve and simplify reporting, promote transparency and facilitate access to information on progress in achieving the objectives of UNAIDS.

45. The annual reports will draw from individual progress reports prepared by each Cosponsor and the Secretariat. In addition to reporting on output and outcome indicators, reports will include summaries of qualitative assessments, case studies, and results from in-depth reviews undertaken during the relevant period.

46. Reports by individual Cosponsors and the Secretariat will be made available on the UNAIDS website, as will the joint progress reports for UNAIDS. These web-based reports will include “hyperlinks” to the monitoring and evaluation sites of all 10 Cosponsors and the Secretariat. A review of the results will be a standing agenda item for the Cosponsor Evaluation Working Group, which will, where appropriate, recommend future corrective actions to enhance reporting on the Unified Budget and Workplan.

47. To support collecting and sharing of Unified Budget and Workplan performance monitoring information, a web-based information system has been developed where all relevant information will be stored. The information system is set up to generate progress
and performance reports for the Cosponsors, Secretariat and Interagency activities, and enable easy search across principal outcomes and key outputs.

48. To further improve information management, UNAIDS has expanded the scope and technical capabilities of the Country Response Information System, which supports monitoring and evaluation of national responses to HIV and facilitates the collection, access, analysis and use of country-level information on the progress in implementing the 2001 Declaration of Commitment on HIV/AIDS.

49. Another improvement in UNAIDS information management has been the introduction of the electronic platform—the UNAIDS Information Dashboard—that enables UNAIDS annual reporting from countries to be performed online. The UNAIDS Information Dashboard is a website and reporting tool that shares strategic information among UNAIDS staff working in country offices, Regional Support Teams and headquarters. This tool serves three major functions:

1. annual programmatic reporting from country offices and Regional Support Teams;
2. ad hoc surveys of country offices;
3. online access to country and regional documents

50. In implementing the 2010-2011 Unified Budget and Workplan Performance Monitoring Framework, UNAIDS will draw upon a wide range of resources, including:

- the Cosponsor Evaluation Working Group;
- Interagency Task Teams and Interagency Working Groups in priority areas\(^5\);
- the UNAIDS Monitoring and Evaluation Reference Group;
- the Global HIV/AIDS Monitoring and Evaluation Support Team;
- the monitoring and evaluation experts of UNAIDS Cosponsors; and
- the UNAIDS monitoring and evaluation experts stationed in over 50 countries.

51. The Performance Monitoring Framework brings together the tools and resources described above and is expected to take results-based management and accountability in UNAIDS to a new level without imposing new or undue reporting requirements on staff working at country level. However, this will require continued attention of the Secretariat and Cosponsors at all levels – as well as advice and guidance from the Programme Coordinating Board – for the 2010-2011 Performance Monitoring Framework to be successfully implemented.

\(^5\) E.g., such as young people, education, prevention of mother-to-child transmission of HIV.
2010-2011 Unified Budget and Workplan
Priority Areas and Indicators

1. Preventing mothers from dying and babies becoming infected with HIV

**Outcome Indicators**

1. Percentage of HIV-infected pregnant women who receive antiretrovirals to reduce the risk of mother-to-child transmission [UNGASS core indicator #5]
2. Percentage of infants born to HIV-infected women who receive an HIV test within 12 months [UNGASS additional indicator #8]

**Output Indicators**

1. Number of countries with interventions for prevention of HIV transmission within health care and occupational settings in line with international guidelines supported by UNAIDS.
2. Number of countries supported to develop and implement PMTCT guidelines and strategies for scale up of PMTCT.
3. Number of countries supported through joint missions to review PMTCT and paediatric HIV care and treatment programmes.

2. Ensuring people living with HIV receive treatment

**Outcome Indicators**

1. Percentage of adults and children with advanced HIV infection receiving antiretroviral therapy [UNGASS core indicator #4]
2. Percentage of adults and children with HIV still alive and known to be on treatment 12 months after initiation of antiretroviral therapy [UNGASS core indicator #24]
3. Number of countries that have a policy to ensure equal access, between women and men, to prevention, treatment and care [Other Unified Budget and Workplan indicator]

**Output Indicators**

1. Number of countries supported to develop/strengthen national systems for procurement and supply management, and/or legislation to facilitate access to affordable quality HIV medicines, diagnostics, condoms, and other essential HIV commodities.
2. Number of countries supported to scale up provision of AIDS treatment and care services, including antiretroviral therapy.

3. Preventing people living with HIV from dying of tuberculosis

**Outcome Indicators**

1. Percentage of estimated HIV-positive TB cases that received treatment for TB and HIV [UNGASS core indicator #6]
2. Percentage of TB patients who had an HIV test result recorded in the TB register [UNGASS additional indicator #6]

**Output Indicators**

1. Number of countries supported to scale up joint HIV and TB planning, training, procurement and delivery of harmonized HIV and TB services.

---

6 to measure what UNAIDS efforts contribute to.
7 to measure the direct results of UNAIDS efforts.
4. **Protecting drug users from becoming infected with HIV**

**Outcome Indicators**
1. Percentage of most-at-risk populations (IDU, MSM, SW) who are HIV-infected [UNGASS core indicator #23]
2. Percentage of most-at-risk populations (IDU, MSM, SW) reached with HIV-prevention programmes [UNGASS core indicator #9]
3. Percentage of most-at-risk populations (IDU, MSM, SW) who both correctly identify ways of preventing the sexual transmission of HIV and who reject major misconceptions about HIV transmission [UNGASS core indicator #14]

**Output Indicators**
1. Number of countries supported to implement policy guidance and other information that address the vulnerabilities and most-at-risk populations—disaggregated by population group.
2. Number of countries supported to develop and/or implement programmes to scale up provision of HIV prevention, treatment, care and support services to people engaging in injecting drug use, sex between men, sex work, including in prison settings—disaggregated by population group.

5. **Removing punitive laws, policies and practices, stigma and discrimination that block effective responses to AIDS**

**Outcome Indicators**
1. Number of countries that report progress in the development and implementation of national level HIV/AIDS policies and strategies including on human rights; stigma and discrimination, and most-at-risk populations [UNGASS core indicator #2 (NCPI)]
2. Number of countries that have laws and regulations that protect people living with HIV against discrimination [Other Unified Budget and Workplan indicator]

**Output Indicators**
1. Number of countries supported to retain or develop an enabling legal environment and/or access to justice services related to HIV.
2. Number of countries supported to address stigma and social determinants of vulnerability of people with HIV and most-at-risk and vulnerable populations in national AIDS plans, sector strategies or development policies.
3. Number of countries supported to enhance human rights protection and service access for sex workers and clients; men who have sex with men, transgender people or sexual minorities; injecting drug users; other key populations—disaggregated by population group.

6. **Stopping violence against women and girls**

**Outcome Indicators**
1. Number of countries that report progress in the development and implementation of national level HIV and AIDS policies and strategies on political support; prevention; treatment, care and support; human rights; stigma and discrimination, civil society involvement; gender and most-at-risk populations [UNGASS core indicator #2 (NCPI)]
2. Number of countries that have a policy to ensure equal access between women and men to prevention, treatment, care and support [Other Unified Budget and Workplan indicator]
**Output Indicators**

1. Number of countries supported to develop and/or implement HIV-related policies that specifically address gender-based violence; engagement of men and boys; and/or other actions promoting gender equality—disaggregated by programmatic area.
2. Number of countries supported to design, implement or evaluate prevention, treatment, care and support programmes specifically intended to empower women and girls.

7. **Empowering young people to protect themselves from HIV**

**Outcome Indicators**

1. Percentage of young people aged 15-24 (15-19, 20-24) who are HIV-infected [UNGASS core indicator #22]
2. Percentage of schools that provide life skills-based HIV education (at primary and/or secondary level) [UNGASS core indicator #11]
3. Percentage of young women and men aged 15–24 (15-19, 20-24) who both correctly identify ways of preventing the sexual transmission of HIV and who reject major misconceptions about HIV transmission [UNGASS core indicator #13]

**Output Indicators**

1. Number of countries supported to strengthen their capacity to provide essential HIV prevention services, including prevention of sexual transmission and development of new prevention technologies—disaggregated by programmatic area.
2. Number of countries supported to provide protection, care and support for children and young people affected by HIV or AIDS.
3. Number of countries supported to develop and implement programmes for most-at-risk young people.

8. **Enhancing social protection for people affected by HIV**

**Outcome Indicators**

1. Number of countries that report progress in the development and implementation of national level HIV and AIDS policies and strategies on political support; prevention; treatment, care and support; human rights; stigma and discrimination; civil society involvement; gender and most-at-risk populations [UNGASS core indicator #2 (NCPI)]
2. Percentage of children under the age of 18 (under 5, 5-9, 10-14, 15-17) who are maternal, paternal or double orphans [UNGASS additional indicator #15]
3. Current school attendance among orphans and non-orphans aged 10-14 [UNGASS core indicator #12]

**Output Indicators**

1. Number of countries with human resource strategies integrated into national AIDS plans with support from UNAIDS.
2. Number of countries supported to provide workplace HIV prevention and information on treatment, care and support services to workers.
3. Number of countries supported to integrate and implement HIV/AIDS policies and programmes for populations affected by humanitarian crises.
### 2010-2011 Unified Budget and Workplan Principal Outcome and Key Output Indicators

<table>
<thead>
<tr>
<th>Principal Outcomes</th>
<th>Related Principal Outcome Indicators</th>
<th>Key Outputs</th>
<th>Related Key Output Indicators</th>
</tr>
</thead>
</table>
| **Principal Outcome 1**  
Leadership and resource mobilization for a broadbased HIV response at country, regional and global levels are strengthened. | 1. Number of countries that report annually on the established targets for universal access on prevention, treatment, care and support  
2. Estimated international funding for prevention, treatment and care, social mitigation and support |  
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. |  
1. Number and type of global policies, standards and guidelines issued by UNAIDS — disaggregated by agency and by programmatic area  
1. Number of sets of recommendations and declarations from major forums on AIDS in priority areas, with UNAIDS support — reported by agency  
1. Amount of funding spent at country level in support of the national AIDS responses in “One UN” pilot countries — disaggregated by agency |
| **Principal Outcome 2**  
Strategic information strengthened and available to support knowing your epidemic, guiding an evidence informed response and improving accountability. | 1. Number of countries that produce standard and up-to-date HIV surveillance data that measure prevalence trends, risk behaviours |  
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 the response. |  
1. Number of countries supported to strengthen national M&E capacities — disaggregated by agency  
1. UNAIDS global reports, AIDS epidemic fact sheets, estimates and projections produced  
2. Number of National AIDS Spending (NASA) or similar processes on tracking AIDS resources conducted  
1. Number of countries reporting implementation of research agendas with support from UNAIDS |
| **Principal Outcome 3**  
Human resources and systems of government and civil society enhanced to develop, implement and scale up evidence informed comprehensive HIV responses. | 1. Number of countries that report having national AIDS strategies that are multisectoral with clear strategic priorities with action plans that are costed and budgeted |  
Key Output 1: Capacity of national AIDS authorities to lead and coordinate an inclusive and broadbased 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 |  
1. Number of countries supported to conduct joint reviews of AIDS action plans implementation — disaggregated by agency  
1. Number of countries supported to develop evidence-informed and costed AIDS strategies and action plans — disaggregated by agency  
1. Number of countries with one national HIV monitoring and evaluation plan with indicators linked to a national strategic plan  
1. Number of countries with people living with HIV, most-at-risk and vulnerable groups involved in the development and implementation of the national HIV strategic plans with support from UNAIDS  
1. Number of countries with human resource strategies integrated into national AIDS plans with support from UNAIDS  
1. Number of socioeconomic studies, assessments of AIDS impact supported at national, sector and/or community levels — disaggregated by agency |

---

* Definitions of prevention, treatment and care and social mitigation and support are available in UNAIDS Resource needs for an expanded response to AIDS in low-and-middle income countries, August 2005.
### 2010-2011 Unified Budget and Workplan Principal Outcome and Key Output Indicators

<table>
<thead>
<tr>
<th>Principal Outcomes</th>
<th>Related Principal Outcome Indicators</th>
<th>Key Outputs</th>
<th>Related Key Output Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Principal Outcome 1</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Human rights based and gender responsive policies and approaches to reduce stigma and discrimination are strengthened, including as appropriate focused efforts on sex work, drug use, incarceration and sexual diversity.</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Key Output 7:</strong> 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.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Number of countries with a comprehensive procurement, supply management and distribution plan for HIV medicines, diagnostics, condoms and other essential HIV commodities developed with UNAIDS support</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>1. Number of countries that have laws and regulations that protect people living with HIV against discrimination</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Key Output 1:</strong> Human rights based policies and programmes are coordinated and promoted in all settings, and vulnerability to HIV reduced through an enabling legal environment and access to justice for those affected.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Number of countries supported to retain or develop an enabling legal environment and/or access to justice services related to HIV</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>2. Number of countries that have a policy to ensure equal access, between women and men, to prevention, treatment and care</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Key Output 2:</strong> Stigma, discrimination and other key social determinants of vulnerability addressed in HIV policies and programmes.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Number of countries supported to address stigma and social determinants of vulnerability of people with HIV and most-at-risk and vulnerable populations in national AIDS plans, sector strategies or development policies</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Key Output 3:</strong> Gender inequality, gender-based violence and discrimination against women and girls are more effectively addressed, including through the engagement of men and boys.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Number of countries supported to develop and/or implement HIV-related policies or actions addressing gender equality in national AIDS programmes</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Key Output 4:</strong> Human rights of most-at-risk populations are promoted and protected, including equitable access to services.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Number of countries supported to enhance human rights protection and service access for sex workers and clients; men who have sex with men, transgender people or sexual minorities; injecting drug users; other key populations — disaggregated by population group</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Principal Outcome 2</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Prevention of sexual transmission of HIV and STI</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Key Output 1:</strong> Prevention of sexual transmission of HIV and STI strengthened including through sexual and reproductive health policy, programmes and service linkage.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Number of countries supported to strengthen their capacity on provision of essential HIV prevention services, including prevention of sexual transmission and development of new HIV prevention technologies — disaggregated by agency and programmatic area</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>1. Percentage of adults and children with advanced HIV infection receiving antiretroviral combination therapy — by region</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Key Output 2:</strong> Comprehensive programmes for the prevention of mother-to-child transmission scaled up.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Number of countries supported to develop and implement PMTCT guidelines and strategies for scale up of PMTCT — disaggregated by agency</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>2. Percentage of HIV-positive pregnant women provided antiretrovirals to reduce the risk of mother-to-child transmission — by region.</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Key Output 3:</strong> Interventions for the prevention of HIV transmission within health care and occupational settings (including blood safety, safe injection practices, universal precautions, occupational health standards, PBFP) scaled up.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Number of countries supported through Joint Missions to review PMTCT and paediatric HIV care and treatment programmes</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>3. Condom use at last sex with non-regular partner</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Key Output 4:</strong> Comprehensive HIV-related treatment and care services scaled up.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Number of countries with interventions for prevention of HIV transmission within health care and occupational settings in line with international guidelines supported by UNAIDS</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Key Output 5:</strong> Equitable access and uptake of HIV testing and counselling ensuring confidentiality, informed consent, counselling and appropriate referrals.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Key Output 6:</strong> Scaled up and harmonised joint HIV/TB planning, training, procurement and delivery of HVTB services.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Number of countries supported by UNAIDS to scale up provision of AIDS treatment and care services, including antiretroviral therapy — disaggregated by agency</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>1. Condom use at last sex with non-regular partner</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Key Output 1:</strong> Evidence-informed policies and practices, and improved coordination and harmonization of approaches for HIV prevention, treatment and care for injecting drug users, sex workers, men who have sex with men and transgender people.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Number of countries supported to implement policy guidance and other information that address the vulnerabilities and most-at-risk populations — disaggregated by population group</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

9 For this and other similar indicators the following definition of the support is used here: a.) financial support; b.) trainings at country or regional level; c.) technical support through a consultancy; and d.) technical support through a mission.
<table>
<thead>
<tr>
<th>Principal Outcomes</th>
<th>Related Principal Outcome Indicators</th>
<th>Key Outputs</th>
<th>Related Key Output Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Percentage of total national AIDS spending for most-at-risk populations — disaggregated by population groups</td>
<td>Key Output 2: 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.</td>
<td>1. Number of countries supported to develop and/or implement programmes to scale up provision of HIV prevention, treatment, care and support services to people engaging in injecting drug use, sex between men, sex work, including in prison settings — disaggregated by population group</td>
<td></td>
</tr>
</tbody>
</table>
| 1. Percentage of young women and men aged 15-24 who both correctly identify ways of preventing the sexual transmission of HIV and who reject major misconceptions about HIV transmission — disaggregated by sex | Key Output 1: Protection, care and support for children affected by AIDS are provided.  
Key Output 2: Policies, programs and services for young people, particularly those most at risk, are implemented.  
Key Output 3: HIV transmission and impact on women and girls are reduced through gender responsive service delivery and access to commodities | 1. Number of countries supported to provide protection, care and support for children affected by AIDS — disaggregated by agency  
1. Number of countries supported to develop and implement programmes for most-at-risk young people — disaggregated by agency  
2. Number of countries that have developed and implemented programmes focusing on universal access targets (tracking UNGASS core indicators and for most-at-risk young people) supported by UNAIDS | |
| 2. Number of countries in that have integrated and implemented HIV and AIDS programmes for populations affected by humanitarian crisis | Key Output 4: HIV policies and programmes implemented for populations affected by humanitarian crisis.  
Key Output 5: Equitable access to comprehensive HIV prevention, treatment and care services through the workplace and for mobile populations. | 1. Number of countries supported to integrate and implement HIV and AIDS policies and programmes for populations affected by humanitarian crisis  
1. Number of countries supported to provide workplace HIV prevention and information on treatment, care and support services to workers — disaggregated by agency  
2. Number of countries supported to implement HIV and AIDS programmes for uniformed personnel, male and female ex-combatants, women associated with armed groups and armed forces, and/or mobile populations — disaggregated by programme area | |
| Principal Outcome 7 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. | Key Output 6: UN system support coordinated and harmonised to strengthen the HIV response at global, regional and country levels. | 1. Number of countries supported to integrate HIV into Poverty Reduction Strategy Papers, national development plans, national budgets, Medium-Term Expenditure Frameworks, and sectoral plans — disaggregated by agency  
1. Number of technical support person-days provided by UNAIDS Technical Support Facilities and other technical support mechanisms  
2. Number of countries that use the Country Harmonisation and Alignment Tool (CHAT)  
3. Number of proposals funded by the Global Fund and other funding mechanisms that received UNAIDS support in their development | |
| Principal Outcome 8 Coordination, alignment and harmonization strengthened across the HIV response. | Key Output 7: UNAIDS/PCB(24)/09.4 | 1. Number of “One UN” pilot countries where the Joint UN Programmes of Support on AIDS are integrated into “Delivering as One”, i.e. into “One Programme” and “One Budget”  
2. Number of Joint Programmes on AIDS in operation, i.e. used as basis for joint planning, resource mobilization, implementation assessment and reporting | |