UNAIDS PROGRAMME COORDINATING BOARD

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THIRTY-THIRD MEETING

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Venue: Executive Board Room, WHO, Geneva

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Agenda item 5

Coordination of HIV Technical Support in a rapidly changing environment

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Additional documents for this item: none

Action required at this meeting – the Programme Coordinating Board is invited to:

See decision in paragraph below

113. Welcome the paper on coordination of Technical Support in a rapidly changing environment and support UNAIDS in rapidly implementing the priority focus on technical support for the implementation of the Global Fund New Funding Model.

Cost implications for decisions: none
EXECUTIVE SUMMARY

Technical support helps strengthen national responses. Through focused technical support, UNAIDS has helped countries develop strategic plans and investment cases, mobilize critical resources, build robust health and community systems, address capacity constraints and overcome implementation bottlenecks. UNAIDS has consistently strived to align its technical support efforts with principles of country ownership, aid effectiveness and value for money.

As a result of important changes in the AIDS landscape, the demand for quality technical support continues to grow. In particular, a host of priority technical support needs have arisen as a result of the transition to the New Funding Model for the Global Fund to Fight AIDS, Tuberculosis and Malaria, which aims to enhance the strategic impact and sustainability of Global Fund investments. UNAIDS has already aligned its technical support efforts to assist countries in seizing new opportunities and navigating new requirements and processes associated with the new Funding Model, to support a number of successful early applicants.

In response to the impact of a changing AIDS landscape on countries’ technical support needs, the UNAIDS Secretariat and cosponsors have taken significant steps to enhance the quality, coherence and coordination of technical support services. These changes – which have been made at the country, regional and global levels – are already achieving results in diverse aspects of the response, including the prevention of new HIV infections in children, the scale-up of antiretroviral therapy, and enhanced service access for key populations.

As the epidemic and the response continue to evolve, additional efforts are needed to enhance the provision, coordination and effectiveness of technical support, especially in support of the roll-out at country level of the Global Fund New Funding Model. Specific steps are required to ensure that countries have the capacity to strengthen implementation at decentralized levels; strengthen data collection and analysis; enhance strategic investments; strengthen procurement and supply chain management systems; effectively address issues pertaining to human rights, gender equality and community mobilization; ensure the active and meaningful engagement and leadership of civil society; and introduce new health technologies in a timely and effective manner.

UNAIDS has made specific commitments to achieve these improvements and to strengthen the quality, timeliness, relevance and coordination of technical support, with a particular focus on country-driven approaches that enable countries to respond to rapid changes in the broader AIDS landscape.
INTRODUCTION AND BACKGROUND

1. Taking note of the changing AIDS landscape, the Programme Coordinating Board in June 2012 urged UNAIDS to ‘exercise its convening role to facilitate more strategic, country-driven and better coordinated technical support.’ The Board called on UNAIDS to explore the rationale and options for establishing a Virtual Steering Group on technical support based on lessons learned, including from experience with the Global Implementation Support Team (GIST). UNAIDS was requested to report to the Programme Coordinating Board at its 33rd meeting on progress made in strengthening the coordination of technical support and to provide interim progress reports to the Bureau.

2. Enhancing the quality, relevance and coordination of technical support requires taking account of important changes in the AIDS environment. In July 2013, UNAIDS convened a consultation meeting on ‘Connecting the Dots: Strengthening Country Access to HIV Technical Support in a Changing Environment’, which was attended by 60 participants from governments, civil society organizations, bilateral agencies, the Global Fund, technical support providers, and UNAIDS and its Cosponsors. The consultation had four objectives:

   - To understand the evolving technical support needs of countries to effectively and sustainably respond to HIV in a rapidly changing environment;
   - To review the current challenges that countries face in obtaining the technical support they require;
   - To conduct a mapping of technical support services that are available from a diverse variety of providers; and
   - To strengthen national AIDS programmes through better communication, coordination and collaboration mechanisms among HIV technical support providers at the country, regional and global levels.

3. The consultation concluded by offering specific recommendations for strengthening technical support coordination at the country, regional and global levels.

4. This report to the Programme Coordinating Board summarizes the evolution of efforts to strengthen technical support provision and coordination, and shows how these efforts are achieving results across different aspects of the AIDS response. The report specifically responds to the Board’s request that UNAIDS leverage its convening role to facilitate more strategic, country-driven and better-coordinated technical support. After describing important changes in the AIDS landscape and discussing how these changes are affecting the demand for technical support, the report examines recent examples of country, regional and country level efforts to strengthen the coordination of technical support in four key areas: implementation of the Global Fund’s New Funding Model, efforts to eliminate new infections among children and keep their mothers alive, scale-up of HIV treatment and enhanced service access for key populations. Future directions and plans for technical support coordination are summarized.

The evolving landscape for the response to HIV

5. Recent changes in the AIDS landscape have affected both the demand for technical support and the nature of the required support, underscoring the need to critically examine existing mechanisms for technical support coordination and to explore new
strategies to ensure that countries receive the support they need to leverage new opportunities and overcome new challenges.

6. **Accelerating support for 2015 targets**: In the 2011 Declaration on HIV/AIDS, countries endorsed a series of goals and targets to be achieved by December 2015, including eliminating new infections among children, reducing sexual and drug-related transmission by 50%, reaching 15 million people with antiretroviral therapy and closing the AIDS resource gap. Several of these targets are within reach, although progress on other commitments continues to lag. Even as efforts intensify to reach the 2015 targets, work is underway to link the AIDS response to the post-2015 agenda, with the ultimate aim of realizing the UNAIDS vision of zero new HIV infections, zero discrimination, zero AIDS-related deaths.

7. **Global Fund New Funding Model**: Effective stewardship of available resources is critically important for accelerated progress in the response. Towards that end, the Global Fund is implementing a New Funding Model that aims to enhance the strategic impact of investments. Under the New Funding Model, countries are charged with developing evidence-based national strategic plans and/or national investment cases. The model calls on countries to undertake a ‘Country Dialogue’ process to develop Concept Notes that describe proposed approaches for available funding. Under the New Funding Model, technical partners have an enhanced role in the development, review and implementation of funding proposals during an iterative process to formulate grants that simultaneously meet country needs and enhance the health returns on investment.

8. **Strategic Investment Approach**: As outlined in Investing for Results-Results for People, an investment approach to response enables countries to decide how best to allocate AIDS resources. The investment approach aims to ensure that countries respond to HIV in a manner that best fits their national and local contexts, and their unique epidemic patterns; help countries select interventions that will have the greatest impact; and assist countries to set priorities in resource allocation in accordance with national objectives to curb the epidemic.

9. These and other changes are affecting both the magnitude and spectrum of technical support needed by countries. As countries work to accelerate progress towards the 2015 targets, they often find that people and communities who do not currently receive services can often be difficult to reach. This underscores the need for focused technical support to help countries reach individuals who fall outside existing service systems. In addition, with roughly half of all people living with HIV unaware of their serostatus, the new treatment guidelines highlight the importance of technical support to strengthen national capacity to link testing services to individuals at a much earlier stage of infection. As countries explore innovative financing mechanisms to generate sustainable flows of domestic resources, they will require new types of technical support, including mechanisms that encourage them to learn from others through South-South collaboration.

PROVISION OF COUNTRY-DRIVEN COORDINATED TECHNICAL SUPPORT – EXPERIENCES AND CHALLENGES

Reviewing provision of strategic country-driven technical support

10. At the July 2013 ‘Connecting the Dots’ consultation, participants agreed that most countries know ‘what’ to do in responding to HIV, but require assistance regarding ‘how’ to lead, plan, manage and implement national AIDS responses and ensure
sustainability. In addition, the meeting addressed the overall availability and quality of technical support, and considered whether sufficient funding is currently being allocated to this important function. In particular, it was noted that civil society often experiences great difficulty in obtaining relevant technical support, or in being recognized as key providers of technical support. Capacity-building for technical support providers is also important to enhance their ability to respond to technical support requests in more cost-effective and context-specific ways. Effective technical support uses multiple approaches, including South-South collaboration, capacity development and twinning and mentoring, which needs to be recognized and supported. Further details are available in the consultation report.

11. While differences between specific countries and regions were noted during the consultation, there was general consensus that the following areas were technical support priorities for countries:

- **New Funding Model**: With the Global Fund providing the bedrock funding for many national responses, countries require assistance in navigating new processes and expectations for national funding proposals.
- **Implementation**: Technical support is required to assist countries in designing, planning, implementing and sustaining HIV services at the provincial, district and community levels.
- **Data collection and analysis**: Many countries require technical support for the collection, analysis and use of epidemiological data at the national and sub-national levels, with particular attention to HIV transmission patterns, as well as key geographic settings and populations with high HIV incidence and unmet needs for HIV services.
- **Strategic investments**: Countries often need support in navigating the analytical process that is required to identify a portfolio of prioritized, focused and fully-costed interventions to maximize the effectiveness, efficiency and sustainability of AIDS responses.
- **New technologies**: New HIV prevention and treatment tools continue to emerge, with experience highlighting the need for focused assistance to roll out new technologies in an effective and timely manner.
- **Procurement and supply chain management**: Technical support is needed to enable countries to ensure reliable supplies of HIV commodities at all levels.
- **Critical enablers**: Technical support is needed to address a range of human rights priorities, including eliminating stigma and discrimination, ending gender-based violence and promoting gender equality.

12. In addition to influencing the kinds of technical support needed by countries, recent changes in the AIDS environment also underscore the critical importance of effective coordination of technical support. As countries strive to achieve the 2015 targets, both the speed and quality of technical support will be essential. In the case of the global effort to eliminate new infections among children, for example, the pace of progress will need to double between now and December 2015 if the global target is to be reached. As new technical support needs emerge, such as countries’ explorations of new sources of domestic funding, countries need to be able to request and obtain that support quickly, and providers of technical support must have the capacity to provide the requested assistance speedily. Consistent with efforts to increase the strategic impact of the response, technical support needs to be effectively focused on geographic settings and populations where need is greatest. To ensure that technical support is relevant, effective and optimally strategic, clearer communications and coordination processes are required, and
roles and responsibilities of diverse technical support providers need to be better articulated.

**Review of coordination mechanisms**

13. Poorly coordinated technical support encourages duplication, reduces the likelihood that countries will receive the support they need and imposes unnecessary costs in terms of time, supervision and organizational resources. By contrast, effective coordination clarifies country needs, helps identify optimal sources of support and enhances the cost-effectiveness of technical support activities. Well-coordinated technical support also helps ensure that support services reflect the latest technical thinking and guidance, which is especially important in the current context of rapid changes in the AIDS landscape. Coordination relies on strong communication and partnership between countries and partners.

14. UNAIDS has undertaken specific initiatives to improve the global coordination of technical support. The Global Implementation Support Team (GIST) arose in response to concerns regarding the availability and quality of technical support to assist countries in addressing bottlenecks in programme implementation. Formed in 2005, the GIST was expanded in 2006 to include a number of non-UN partners. In response to the Global Task Team recommendation for the establishment of a joint Global Fund problem-solving team to address implementation bottlenecks, the GIST reformulated its Terms of Reference in 2007 to improve coordination, accountability and harmonization among participating partners. The GIST made important achievements, including the establishment of a forum for sharing real-time information among major technical support providers, development of a practical tool (the Coordinating AIDS Technical Support database) to help countries monitor technical support, improved the understanding of technical support needs and enhanced technical support to address key gaps, including support for civil society. However, lack of clarity regarding the GIST’s mandate, along with its resource-intensive nature, eventually led to it disbanding in 2009.

15. With respect to proposal development, UNAIDS, in collaboration with WHO, UNFPA, UNICEF, UNDP and other partners (including GIZ, the International HIV/AIDS Alliance, Global AIDS Alliance, PSI, Open Society Initiative and the Civil Society Action Team) established a working group (‘the 70% success group’) to promote information sharing and coordination on technical support provided to countries in the development of Global Fund proposals. That group provided peer review for proposals in Round 10 and during the Transitional Funding Process. The group no longer meets but could be revitalized if needed.

**UNAIDS technical support coordination: Current efforts**

16. In its efforts to strengthen technical support to partners, UNAIDS uses a number of mechanisms to enhance coordination of technical support provision at global, regional and country levels.

17. **UNAIDS Division of Labour**: UNAIDS implemented a Division of Labour among members of the Joint Programme. Drawing on each UNAIDS partner’s expertise, core competencies, mandates and comparative advantages, the Division of Labour designates convening agencies and UNAIDS partners in 15 thematic areas, with the aim of ensuring that the UN systems ‘delivers as one’ with respect to technical support for national responses. The 2012-2015 UNAIDS Budget, Results and
Accountability Framework (UBRAF) includes specific indicators regarding technical support within UBRAF outcomes.

18. **Joint UN Regional Teams**: Joint UN Regional Teams in some regions have developed Joint Technical Support Plans that provide for combined country support missions, reviews of national strategies and operational plans and other forms of technical support. In West and Central Africa, for example, the Joint UN Regional team includes both UN and non-UN actors, including the U.S. Agency for International Development, the French 5% Initiative, ECOWAS, ECCAS and international nongovernmental organizations. The regional team in West and Central Africa meets quarterly and stages an annual retreat, allowing partners to identify regional priorities and gaps, and to agree on joint action to improve the coordination and effectiveness of technical support.

19. **Joint UN Country Teams**: Joint UN Teams have enhanced the coordination, coherence and accountability of technical support. Serving as entry points for technical support, Joint UN Teams inform partners regarding sources of technical support and how to access them, and also provide, broker and coordinate direct technical support. Joint UN Teams help ensure the coherence, coordination and accountability of UN-brokered technical support.

20. **Other coordination mechanisms**: In addition to UNAIDS-specific coordination mechanisms, UNAIDS has joined with other international partners in various mechanisms to improve the coordination and effectiveness of technical support. These include a joint working group to coordinate country support on Global Fund issues, as well as a newly established informal working group on technical support for Global Fund grant implementation.

21. UNAIDS’ experience with technical support coordination has yielded a number of valuable lessons:

- The purpose of technical support coordination, as well as the work that is being coordinated, needs to be clearly defined and agreed to, by participants;
- Coordination can be resource-intensive, both in terms of funding and staff time;
- Civil society does not always have access to existing coordination mechanisms, which highlights the need for special efforts to enable effective participation;
- Different organizational mandates, operational structures, programming approaches and timeframes can complicate efforts to align diverse technical support efforts towards meeting the common objectives of coordination; and
- There may sometimes be a mismatch of supply and demand between countries and partners. Some partners may offer technical support that countries do not need, or they may lack the resources or capacity to effectively respond to country demands.

22. These lessons are especially pertinent in a context that has been changing rapidly in recent years. Section V, below, highlights future directions for heeding lessons learnt to date and for further strengthening the coordination, quality and timeliness of technical support.
TECHNICAL SUPPORT PROVISION AND COORDINATION IN SUPPORT OF THE GLOBAL FUND AND THE NEW FUNDING MODEL

Coordinating technical support for implementation of the New Funding Model

23. The Global Fund is a pillar of the AIDS response, accounting for approximately 20% of all international HIV assistance in 2012. In some countries that are especially reliant on external support for their AIDS response, the Global Fund represents the single-largest source of funding for HIV programmes. The New Funding Model aims to maintain the Global Fund as a vital source of financing for health programmes in low- and middle-income countries, while at the same time enhancing its strategic impact and reducing administrative requirements for countries. The New Funding Model will be fully implemented in 2014, with a representative sample of eligible countries piloting the model in 2013.

24. Global Fund support has given rise to a variety of technical assistance coordination strategies, which are even more important today as countries work to navigate the Fund’s new model. In response, UNAIDS has worked to coordinate related technical support at global, regional and country levels.

Country-level technical support provision and coordination

25. UNAIDS provides technical support at key stages of the application process under the New Funding Model. Joint UN Teams assist countries in developing strong national strategic plans and investment cases, leverage their role as a trusted party to convene the Country Dialogue, work with countries to translate the national strategic plan or investment case into a Concept Note and provide technical advice and country intelligence to the Technical Review Panel and Grant Approval Committee of the Global Fund. Joint Teams, through the Technical Support Facilities and other mechanisms, also support effective implementation, assessing and strengthening the capacity of Principal Recipients and Sub-Recipients, supporting effective risk management and enhancing the oversight of Country Coordinating Mechanisms. In 2013, Joint Teams have been supporting early and interim candidates, including favourably received early proposals under the New Funding Model from El Salvador, Myanmar and Zimbabwe.

26. By coordinating efforts at headquarters, regional and country levels, UNAIDS has helped coordinate technical support to the Democratic Republic of Congo (DRC) as an early applicant under the New Funding Model. Leveraging advocacy, its convening role and the coordination of technical support at each stage of the process, UNAIDS is supporting DRC’s process to develop a Concept Note for funding of US$130 million.

27. Focal points for UNAIDS Secretariat and Cosponsors work closely with National AIDS coordinating bodies and Country Coordinating Mechanisms to assess the demand for technical support and to work with the Joint UN Team to coordinate the provision of technical support.

Regional level

28. The Joint Programme has provided technical and financial support to the Eurasian Harm Reduction Network for the development of the Regional Funding Request Concept Note under the Global Fund New Funding Model. The programmatic focus
of this regional request is to reduce the HIV epidemic in Eastern Europe and Central Asia through improved advocacy for harm reduction.

29. Assisting in the coordination of efforts by the regional Technical Support Facility, the Joint UN Regional Team and country offices, the Regional Support Team in West and Central Africa provided coordinated technical support to Country Coordinating Mechanisms in Ghana, Niger, Nigeria and Togo for the development of an Interim Application to the Global Fund. These efforts generated additional resources of US$150 million from the Global Fund – US$15 million in Ghana, US$1 million in Niger, US$122 million in Nigeria and US$12 million in Togo. These new resources will it make it possible to provide life-saving HIV treatment to more than 60,000 people living with HIV in Ghana and to more than 50,000 of their peers in Togo. The resources will also support the delivery of antiretroviral medicines to nearly 50,000 pregnant women living with HIV in Nigeria.

30. In 2013, the Joint UN Regional Team in West and Central Africa convened a retreat with key providers of technical support, as well as representatives of the Global Fund and nongovernmental organizations, to develop strategies to strengthen technical support coordination in the region. Participants agreed to establish a platform to enhance coordination and to focus technical support on a limited number of key priorities (e.g., elimination of mother-to-child transmission, treatment scale-up, funding, human rights and key populations and strategic information).

31. In Eastern and Southern Africa, and in West and Central Africa, UNAIDS together with the Technical Support Facilities has sponsored regional workshops to build capacity to generate HIV investment cases under the New Funding Model. In addition, UNAIDS and PEPFAR in 2013 launched an initiative to assist Caribbean countries in using investment cases to enhance the sustainability of national responses. An investment case has already been developed for Jamaica, and coordinated technical support is assisting the development of investment cases in five other countries. The WHO network on HIV and Health in the Western Pacific Region is also helping coordinate technical support on the New Funding Model in that region.

Global level

32. UNAIDS, together with the Global Fund, is part of a recently established informal coordination group of bilateral funders (e.g., U.S., GIZ Backup, French 5% Initiative, DFID) that is focused on coordinating technical support for Global Fund grant implementation. The group has had one face-to-face meeting in March 2013 and convenes via teleconferences each month.

33. WHO, together with the Stop TB and Roll Back Malaria partnerships and the Global Fund, established a joint working group to share information and coordinate support to countries in 2007. Since then the group, which meets on a weekly basis, has been expanded to include UNAIDS, other UN agencies, Geneva-based diplomatic missions and civil society. The group seeks to promote synergies between the Global Fund’s three priority diseases, health systems strengthening, stronger coordination of policy guidance and normative work, harmonization of technical support to countries, and coordination and preparation of Global Fund meetings. A sub-committee on technical support was recently formed.

34. At the UNAIDS-convened consultation on strengthening country access to HIV technical support in 2013, participants emphasized the need to strengthen
coordination of technical support as a major priority. Participants called for efforts to improve the coherence and focus on technical support efforts, as well as additional steps to ensure that global coordination mechanisms support improved coordination of technical support at country and regional levels.

35. Twelve representatives of a broad range of United Nations agencies and constituencies currently participate in the Global Fund Harm Reduction Group, which was established in June 2013. Focusing on Indonesia, Kazakhstan, Kenya, Thailand, Ukraine and Viet Nam, the group will support development of sound Concept Notes under the Global Fund New Funding Model. The group will also work to strengthen the engagement of people who use drugs in relevant processes at country level.

36. The UNAIDS Secretariat and various Cosponsors (including UNFPA, WHO, UNDP and UN Women), as well as the Global Fund Gender Advisor, are supporting gender assessments in preparation for the New Funding Model. The efforts aims to ensure that Concept Notes reflect the depth and breadth of national contexts, including the epidemic’s differential impact on men and women and the role of unequal gender relations with respect to HIV risk, vulnerability, impact and service access. UNAIDS Cosponsors have developed a range of tools to support gender assessments and to build the capacity of national partners, including a roadmap for incorporating gender equality issues in national responses, programming guidance to address the links between HIV and violence against women, and a compendium of gender equality and HIV indicators to support enhanced data collection and analysis.

37. Given their pivotal roles in strategic planning, service delivery, community mobilization and advocacy, civil society organizations are both important as sources of technical support and as recipients of technical support services. The communities and nongovernmental organization delegations of the Global Fund Board are developing the Joint Civil Society Action Plan to achieve enhanced engagement of civil society and key communities. UNAIDS is part of the task team charged with developing this action plan, which will include technical support mapping and identification of providers and is scheduled for completion in November 2013.

Case studies: Brief review of coordinated technical support for early applicants under the Global Fund New Funding Model

38. The selected group of countries that have applied as early applicants under the New Funding Model provide opportunities to examine the effectiveness and outcomes of efforts to strengthen technical support coordination. This section reviews recent experiences in three countries – El Salvador, Myanmar and Zimbabwe. The latter has one of the highest HIV prevalence rates in the world, although the number of new HIV infections has fallen significantly in recent years. HIV prevalence is much lower in El Salvador and Myanmar, where HIV transmission primarily occurs among certain key populations.

El Salvador

39. The Global Fund approved funding of US$26.9 million for El Salvador. The country’s grant programme will improve access to HIV-related services, including HIV treatment, to key populations, such as men who have sex with men, transgender people and sex workers. Through this new multi-year grant, the country aims to achieve 90% service coverage among these key populations.
40. The UNAIDS family assisted and coordinated technical support to El Salvador on diverse aspects of the proposal development process. UNAIDS produced strategic information (disaggregated by key populations) that assisted in the situation analysis; supported networking, coordinating and partnerships among nongovernmental organizations working with key populations; and created scenarios for the multi-stakeholder Country Dialogue. UNDP played a critical role in building national capacity as outgoing Principal Recipient, and handed that role to the Ministry of Health and a local nongovernmental organization.

41. The cohesiveness and coordination of technical support for El Salvador’s efforts were especially evident during the process. Multilateral and bilateral agencies worked together to harmonize their technical support, with the Joint UN Team coordinating its efforts through adherence to the Division of Labour. UNAIDS, along with other external partners, participated in periodic meetings of the Country Coordinating Mechanism and worked in close coordination with the National Programme for HIV, providing technical support and technology transfers.

42. Experience with supporting El Salvador’s development of its Global Fund proposal yielded a number of insights and lessons learned. Effective technical support is an ever-evolving exercise, requiring UNAIDS to respond to changing needs of government, civil society and other partners. El Salvador’s successful application process underscores the critical importance of harmonization. The generation of high-quality data and capacity analyses played an especially important role in informing and strengthening El Salvador’s proposal development process.

43. Moving forward, UNAIDS aims to focus on empowering sub-commissions in the Country Coordinating Mechanism and the national AIDS coordinating body on monitoring and evaluation, strategic information and proposal design. Through focused and well-coordinated technical support, UNAIDS will assist El Salvador in completing its national research agenda. UNAIDS also plans to facilitate training opportunities for local personnel to enable them to develop capacity required to carry forward the research agenda.

Myanmar

44. The Global Fund approved US$315 million in funding for Myanmar over four years, with US$160 million allocated for HIV programmes.

45. UNAIDS Secretariat and Cosponsors collaborated to assist Myanmar’s successful application. Members of the UNAIDS family participated in the Technical Strategy Group and the drafting team for the Concept Note. UNAIDS helped ensure engagement of diverse stakeholders in the process, including people living with HIV and representatives of key populations.

46. For the development of the HIV Concept Note, a series of meetings were held, involving government, civil society, people living with HIV, local and international nongovernmental organizations, bilateral partners and United Nations agencies. In addition, necessary technical support for the development of the Concept Note was obtained almost exclusively from technical partners with a country presence in Myanmar. Representatives of networks of people who inject drugs, men who have sex with men and sex workers participated in the expanded Technical Support Group meetings, during which priorities and programmatic gaps were identified. Networks of key populations were directly consulted to identify priority needs for each group.
47. Discussions on priorities and programmatic gaps identified three areas of intervention: treatment, testing and prevention. Programme implementers identified challenges in scaling up too rapidly especially in the area of harm reduction for people who inject drugs.

48. A central focus of the country’s proposal was to move beyond current HIV treatment coverage (43% in 2012) to achieve universal access. Other priorities include expanding prevention and HIV testing for key affected populations to ensure early diagnosis and referral to HIV treatment and care services; community systems strengthening to support the role of networks in treatment and prevention; reducing incidence among people who inject drugs, including through needle and syringes exchange programme and opioid substitution therapy; strengthening TB/HIV collaborative interventions; and prevention of mother-to-child-transmission.

Zimbabwe

49. The Global Fund approved US$311 million in funding for HIV programmes in Zimbabwe. The country aims to use the new resources from the Global Fund to increase the number of people receiving antiretroviral therapy from 565 000 currently to over 893 000 by 2016.

50. UNAIDS, in collaboration with partners, played an important role in the application process. UNAIDS co-led the Country Dialogue process, which also involved communities and key populations. The Secretariat of the Country Coordinating Mechanism led the process of developing the application, with UNAIDS providing political and technical support. At the beginning of the drafting process, a multi-sectoral writing team identified the technical support needs and potential sources of support. New needs emerged as the proposal development process evolved, and these were incorporated. Throughout the process, the UNAIDS Secretariat and Cosponsors, along with other partners, provided technical input into the development of the application, focusing on such issues as results-based management, using a strategic investment approach to identify gaps and estimate investment impact, programming for key populations, and populating tools required under the New Funding Model. WHO provided technical support on the new WHO antiretroviral guidelines, while UNDP, through the Technical Support Facility, secured consulting support on costing and budgeting issues.

51. Zimbabwe’s successful experience offers several important lessons. Firstly, it confirmed the importance of national ownership and leadership, and highlighted the integral importance of technical support in achieving and sustaining such ownership. The experience also showed that the value of technical support is maximized if it is integrated into overall coordination efforts for the proposal development process. Inclusion of technical support providers as part of the writing team allowed on-site coordination, flexibility and rapid responses to emerging needs. As a trusted neutral partner, UNAIDS was able to play a key ‘backstopping’ role to play, providing a safety net of technical support coordination that reinforced confidence among stakeholders, expanded collaboration and enhanced coordination.

TECHNICAL SUPPORT COORDINATION IN PRIORITIES SELECTED FOCUS THEMATIC AREAS

52. To examine the various existing mechanisms for technical support coordination, and gauge their strengths and limitations, this section explores efforts to coordinate
technical support in three key areas. The discussion below describes coordination mechanisms at the global, regional and country levels.

**Global Plan towards the elimination of new HIV infections among children and keeping their mothers alive**

53. In 2012, 260,000 children were newly infected with HIV – 52% fewer than in 2001. Where services to prevent mother-to-child transmission have been brought to scale, sharp reductions in the transmission rate to newborns have been reported: in Ghana, for example, the risk of transmission from an HIV-positive pregnant woman to her newborn fell from 31% in 2009 to 9% in 2012.

54. The *Global Plan* was created in response to the pledge in the *2011 Political Declaration on HIV/AIDS* to eliminate new infections among children by 2015. With a focus on 22 priority countries, the Global Fund calls for concerted action to:

- Strengthen primary HIV prevention for women;
- Meet the unmet need for family planning among women living with HIV;
- Provide HIV testing, counselling and antiretroviral medicines in a timely manner to pregnant women living with HIV to prevent transmission; and
- Ensure proper and timely HIV care, treatment and support for women living with HIV, children living with HIV and their families.

55. The *Global Plan* has spurred the creation or strengthening of coordination mechanisms for technical support at global, regional and country levels.

**Country-level technical support provision and coordination**

56. Country focal points for the UNAIDS Secretariat and Cosponsors work closely with national AIDS coordinating bodies, health ministries and Country Coordinating Mechanisms to assess the demand for technical support related to prevention of mother-to-child transmission and to coordinate technical support provision. In South Africa, UNAIDS collaborated with UNICEF and other partners to host a consultation on advocacy, communications, community mobilization engagement and mobilization towards the elimination of new infections among children.

57. Since July 2012, the IATT has supported technical missions to eight countries in sub-Saharan Africa. Coordinated technical support by IATT partners has focused on strengthening planning, enhancing monitoring and evaluation, revision of national guidelines to reflect new evidence and operational plans to scale up Option B+. Requests for technical support from Global Fund countries are forwarded to the IATT Secretariat, which matches specific requests with resources available from IATT partners, thereby minimizing duplication and overlap and ensuring that technical support meets country need. IATT-coordinated technical support takes into account technical support that is available through existing mechanisms, donor agencies and implementing partners, which helps reduce duplication while maximizing impact.

**Regional level**

58. Regional workshops on prevention of mother-to-child transmission with countries and with providers of technical support have contributed to improved coordination of technical support efforts. In the Americas, the Pan-American Health Organization, UNAIDS and UNICEF are undertaking a regional elimination initiative that involves coordinated technical support towards the goal of reducing mother-to-child
transmission rates of HIV and syphilis to below 2% in Latin America and the Caribbean. In support of the regional initiative, the UNAIDS Regional Support Team in the Caribbean has prioritized community engagement on prevention of mother-to-child transmission, with a particular focus on encouraging early utilization of antenatal services and reducing the proportion of infants who are lost to follow-up.

Global-level coordination

59. A Global Task Team convened by UNAIDS used a consultative process to develop the Global Plan. Throughout the development of the Global Plan, the Global Task Team received extensive technical support from the Interagency Task Team on the Prevention and Treatment of HIV Infection in Pregnant Women, Mothers and Children (IATT). Established in 1998, the IATT unites 28 multilateral, governmental and nongovernmental organizations in a coordinated effort to address the HIV-related needs of women, mothers and children. The IATT provided a platform for coordinating technical support provided to the Global Task Team by individual IATT members for development of the Global Plan.

60. The IATT Community Engagement Working Group has developed guidelines to engage women living with HIV in efforts to implement the Global Plan and has conducted extensive mapping of civil society partners engaged in activities relating to prevention of mother-to-child transmission. The Working Group has also produced a toolkit to guide efforts to implement Option B+ of lifelong antiretroviral therapy for pregnant women living with HIV.

61. To enhance its effectiveness and the coordination of joint efforts to eliminate new infections among children and keep their mothers alive, the IATT took steps to strengthen and streamline its operations following the launch of the Global Plan. The IATT established a Secretariat with full-time professional staff. Working groups in place at the time of the launch of the Global Plan were evaluated and adapted to align them with the Global Plan’s mandates. Programmatic toolkits were prepared and disseminated, promising practices were documented and various communications mechanisms were established, including a website, a webinar series and other platforms to provide a knowledge gateway for stakeholders. Following the launch of the Global Plan, the IATT provided coordinated technical support to countries to help them develop and cost their country plans.

62. A Global Steering Group (GSG) was formed among key stakeholders, including the IATT, to oversee and direct Global Plan activities, including brokering technical support. At country level, the GSG has established country task teams to coordinate activities among diverse partners. In 2012, the GSG held its first accountability and progress review meeting. The GSC has also leveraged key meetings to promote coordination of technical support, including focal point progress review meetings (the next of which is scheduled for Cape Town prior to ICASA), annual meetings of the IATT (including the most recent in Addis Ababa in April 2013) and the 2012 International AIDS Conference in Washington. The GSG has also convened meetings on key substantive topics, including 2013 consultations on models of care and scaling up the engagement of faith-based organizations.

Treatment scale-up

63. In 2012, 9.7 million people in low- and middle-income countries were receiving antiretroviral therapy – a three-fold increase since 2005. Antiretroviral therapy averted an estimated 5.4 million deaths in low- and middle-income countries from
1995 to 2012. In addition to preventing illness and death among people living with HIV, antiretroviral therapy reduces the risk of HIV transmission by as much as 96%.

64. Although the number receiving HIV treatment in 2012 represented 61% of people eligible for treatment under the 2010 WHO HIV treatment guidelines, it amounts to only 34% of the number eligible under WHO’s 2013 treatment guidelines. HIV treatment coverage has sharply increased in most regions, but no such increase has been observed in Eastern Europe, Central Asia, Middle East and North Africa. In addition, men eligible for treatment under the 2010 WHO guidelines were significantly less likely than treatment-eligible women to receive antiretroviral therapy (57% vs. 73%), and many key populations have difficulty obtain access to appropriate treatment services. Moreover, when individuals obtain HIV treatment, many drop out of care at various points across the HIV treatment cascade; in sub-Saharan Africa, it is estimated that only 24% of people living with HIV have achieved viral suppression.

65. These persistent challenges highlight the continuing, urgent need for coordinated, high-quality technical support for accelerated, high-quality treatment scale-up. The push to provide antiretroviral therapy to at least 15 million people by 2015 encouraged the creation of numerous mechanisms to coordinate treatment-related technical support.

*Country-level technical support provision and coordination*

66. Country focal points for the UNAIDS Secretariat and Cosponsors work closely with national AIDS coordinating bodies, health ministries, Country Coordinating Mechanisms and civil society organizations to assess the demand for technical support and coordinate technical support provision. Annual programme reviews are used to identify key technical support needs for treatment scale-up.

67. Portuguese-speaking countries, under the umbrella of the Community of Portuguese Language Countries (CPLP), have taken steps to strengthen and coordinate country-to-country technical support. In particular, Brazil is an important provider of technical support for AIDS responses in other Portuguese-speaking countries.

*Regional level*

68. Inadequate laboratory capacity in many low- and middle-income countries is an important reason why key diagnostic tools have yet to be fully leveraged to maximize the public health impact of antiretroviral therapy. In response to this challenge, the African Society of Laboratory Medicine was launched in 2011, with financial support from PEPFAR and technical support from the U.S. Centers for Disease Control and Prevention. The African Society for Laboratory Medicine (with UNAIDS a founding member and present on the board of directors) strives to develop a strong regional network of national public health reference laboratories and of laboratory professionals to undertake essential diagnostic functions and thereby expand capacities to use key diagnostic tools to improve health outcomes against HIV, TB and malaria, as well as for other public health priorities.

69. Between July and September 2013, WHO conducted six regional workshops with countries and technical partners to disseminate the revised treatment guidelines. An additional three workshops are planned before the end of the year.
70. In June 2013, WHO released its consolidated antiretroviral guidelines. In addition to recommending much earlier initiation of therapy, the guidelines also call for countries to move towards a single, standard, simplified regimen and to accelerate the phase-out of stavudine (d4T). In its convening role for HIV treatment pursuant to the UNAIDS Division of Labour, WHO has coordinated UNAIDS efforts to build the capacity of technical support providers to assist countries in implementing the new guidelines.

71. In July 2013, UNAIDS joined with key partners – including African leaders, the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR), the Global Fund and WHO – to launch the Treatment 2015 initiative. Drawing on more than a decade of lessons learnt in the scale-up of HIV treatment, Treatment 2015 provides a framework for accelerated progress towards the 15 million target for 2015 and for the post-2015 aim of achieving universal access. Key themes of the Treatment 2015 approach include increasing the pace of the scale-up, encouraging innovation, focusing on key geographic areas and populations with the greatest unmet need for treatment, and helping ensure that treatment programmes are based on the latest, sound evidence. At the same time that countries are urged to put in place systems and frameworks to rapidly expand HIV testing and treatment services, Treatment 2015 also calls on global partners to enhance the availability and coordination of technical support for treatment scale-up. As part of Treatment 2015, UNAIDS and WHO have committed to monitor and intensify technical support for 30 countries that together represent 90% of people worldwide who are eligible for HIV treatment. Global stakeholders have embraced the coordination mandate in Treatment 2015, with UNAIDS joining with WHO, PEPFAR and the Global Fund in September 2013 to form an ‘HIV Treatment Community’ to deliver coordinated technical and financial support to countries for treatment scale-up.

72. In June 2013, the ILO and UNAIDS jointly launched the VCT@WORK Initiative to promote HIV testing for 5 million workers in high burden countries. The initiative aims to de-stigmatize HIV testing within the workplace and catalyze HIV testing among women and men workers in key economic sectors. The ILO and partners are providing technical support to actors in the world of work at the national level to scale up HIV testing.

Service access for key populations

73. Key populations at highest risk (including men who have sex with men, people who inject drugs and sex workers) experience HIV-related risks that are substantially greater than for the general population. Globally, for example, sex workers are estimated to be 13.5 times more likely than other women to acquire HIV, while people who inject drugs represent 0.2-0.5% of the global population but account for 5-10% of all people living with HIV. Men who have sex with men are estimated to be 19 times more likely to be living with HIV than the general population. HIV transmission among key populations are also driving epidemics throughout the world; epidemiological, for example, have determined men who have sex with men represent a substantial share of HIV incidence in Kenya and South Africa and account for one-third of new infections in the Dominican Republic and a majority of new infections in Peru.

74. Limited access to high-quality HIV prevention, treatment, care and support services is a critical barrier to an effective response for key populations. In part, access
challenges stem from the high prevalence of stigma towards key populations, reflected in documented high rates of discrimination and harassment experienced by key populations (including when seeking to access essential health services), and in punitive laws and policies that deter members of key populations from seeking HIV services. Inadequate financing is another factor, with international donors accounting for the overwhelming majority of spending on HIV services that is focused on key populations.

**Country-level technical support provision and coordination**

75. Focal points for the UNAIDS Secretariat and Cosponsors work closely with national AIDS coordinating bodies, health ministries and Country Coordinating Mechanisms to assess demand for technical support regarding responses for key populations and to coordinate technical support provision.

76. UNAIDS, UNESCO, UNFPA and UNICEF have provided coordinated technical and financial support to the Thai National AIDS Management Center in the development of a situation analysis on young people from key populations.

77. At the request of the Global Fund, UNDP has assumed the Principal Recipient role of Phase 2 of the Round 9 HIV Regional Programme covering Afghanistan, Bangladesh, Bhutan, India, Nepal, Pakistan and Sri Lanka. UNAIDS Cosponsors and Secretariat have provided numerous technical support services for the regional project, including efforts to implement recommendations for the Global Commission on HIV and the Law and to support countries in adhering to commitments under the UN ESCAP Resolution 67/9, which calls on countries to address discriminatory laws and combat stigma and discrimination.

**Regional level**

78. Since the Global Commission on HIV and the Law issued its formal recommendations, the UNAIDS Regional Support Team in the Caribbean has helped establish the Caribbean Coalition for Social Justice (CCSJ) to provide pro bono legal services in national and international legal tribunals for members of vulnerable groups who encounter barriers to accessing legal systems. CCSJ is presently reviewing cases of alleged legal violations based on gender, sexual orientation, HIV status and other groups.

79. UNESCO developed new training modules for programming with adolescents and young people from key populations for regional workshops in Asia and the Pacific, Eastern and Southern Africa, West and Central Africa and Latin America and the Caribbean. The workshops, aimed at UN staff, seek to promote joint strategic planning and coordination to enhance the effectiveness of programming for adolescents and young people.

80. At the regional level, ILO worked closely with the International Organization for Migration, WHO, the Southern Africa Development Community (SADC), the World Bank and other national partners to develop the SADC Guidelines on TB, HIV and Silicosis. The guidelines will be signed by the Council of Ministers (including Health and Labour) before being operationalized across the 15 countries in the SADC region, a sub-region that continues to experience the highest HIV prevalence in the world.
Global level

81. UNFPA, UNDP and UNODC host the Interagency Working Group on Key Populations, which includes representatives from bodies representing key populations, as well as the Global Fund. The Working Group provides a platform to coordinate technical support to strengthen the availability and quality of HIV services for key populations. To support effective and meaningful participation of women living with HIV in UNAIDS policy development, UNAIDS has created a dialogue platform for women living with HIV.

82. In 2012, UNESCO convened the first-ever United Nations consultation to address homophobic bullying in educational institutions. Bringing together experts from UN agencies, nongovernmental organizations, ministries of education and academia from more than 25 countries throughout the world, the consultation led to publication of an updated version of the Good Policy and Practice in HIV and Health Education, which addresses homophobic bullying and harassment.

83. UNODC, in the spirit of strengthening its partnership with the global and regional civil society organizations active in addressing HIV and drug use, established the UNODC–CSO group. The composition of the group, the profile of its membership, as well as a joint UNODC-CSO work plan was agreed jointly with the CSOs. The joint work plan clearly delineates roles and responsibilities, and provides for coordinated technical support in numerous aspects of the AIDS response for key populations, including HIV prevention programming, resource tracking, engaging law enforcement, promoting legal reform, generating technical guidance on programmes for highly vulnerable stimulant users, and ensuring robust harm reduction components of proposals to the Global Fund under the New Funding Model. The plan specifically addresses coordination at global, regional and country levels.

84. UNDP is the convening agency for the removal of punitive laws under the UNAIDS Division of Labour. Working with the Global Fund, PEPFAR and countries, UNAIDS advocates for the inclusion and implementation of key programmes to reduce stigma and discrimination, increase access to justice in national responses and increase access to and uptake of basic biomedical services. UNDP, together with other Cosponsors and the UNAIDS Secretariat, government and civil society partners, is supporting work in 82 countries related to follow-up of the findings and recommendations of the Global Commission on HIV and the Law.

ROADMAP FOR PROVISION OF STRATEGIC AND COORDINATED TECHNICAL SUPPORT IN RESPONSE TO COUNTRY NEEDS, IN PARTICULAR AS RELATED TO IMPLEMENTATION OF THE NEW FUNDING MODEL, AND KEY THEMATIC PRIORITIES

85. Re-focusing and strengthening technical support will be especially important with respect to the New Funding Model of the Global Fund, which involves new processes and requires new skills and competencies. Changes in the AIDS environment are not only increasing countries’ overall technical support needs but are also reshaping the nature of those needs. UNAIDS anticipates that over 70 countries will prepare requests for financing under the New Funding Model in 2014, which will contribute to the overall increase in technical support needs.
Six strategic directions for provision of technical support

86. As the previous discussion underscores, changes in the AIDS landscape are having a profound effect on the need for more strategic, country-driven and better-coordinated technical support. Moving forward, efforts should focus on ensuring that high-quality technical support is available to meet this shifting and increasing demand, and that technical support provision takes account of the continuing evolution of the epidemic and countries' responses.

a. Strengthening implementation at decentralized levels

87. Enhanced strategic information makes it possible to package and focus services more accurately and effectively, bringing them in line with localized realities and needs, and bolstering them with stronger involvement of affected communities. Achievements of the past few years show clearly that the success of HIV responses is determined increasingly by the effective, decentralized provision of services. Seizing these opportunities requires dealing with the implementation challenges that exist at decentralized levels of administration and programme implementation, and introducing the requisite enhancements and capacity strengthening. Those improvements need to link with broader endeavours to build stronger institutions and systems, and to enhance programme sustainability at decentralized levels.

88. As the July 2013 'Connecting the Dots' consultation noted, such improvements demand addressing a variety of technical support priorities, including those related to the design, planning, implementation and monitoring of HIV services. These are ongoing challenges, but the shift towards intensified programme delivery at decentralized levels means that these challenges are manifesting at new levels and in new ways.

b. Strengthening data collection and analysis

89. More countries are collecting and analysing more extensive and detailed data on their HIV epidemics. The data being collected cover epidemic trends and patterns, behaviours that put people at risk of HIV infection, sizes of key populations that are especially at risk, the provision and use of HIV services, and the legal and socioeconomic contexts in which HIV is being transmitted. Some countries are collecting and combining these data in innovative ways, including by integrating them with geographic mapping technologies, to produce more robust and comprehensive understanding of their epidemics, from the national level down to district and sub-district levels. However, the capacities of countries to collect, analyse and use these data still varies considerably.

90. These enhanced data collection and analysis exercises show that HIV tends to cluster not only in specific parts of regions and countries, but even in specific parts of districts or counties, cities and towns. The HIV epidemic, in other words, comprises layers of ‘hot spots’ where HIV transmission tends to be most concentrated.

91. The increasingly refined and detailed strategic information being generated presents countries with important new opportunities to reverse the HIV epidemic in very specific locations and among populations who are at higher risk of acquiring HIV. By identifying where and among which populations HIV services are needed most, HIV programmes can be focused more effectively, and services can be adapted to reach greater numbers of people in need.
92. A clearer understanding of HIV epidemics also enables countries to identify where HIV services are mismatched or insufficient, and to package and focus services more accurately and effectively. By focusing their HIV responses more sharply, countries can achieve a greater impact with minimal additional investment.

93. Taking full advantage of these opportunities requires that countries further enhance their HIV-related data collection and analysis systems. Several improvements are needed. Countries have to expand harmonization, as well as the use and linking of different data sources (including comparing data from HIV surveillance systems with other data that identify the factors that affect people’s vulnerability to HIV or that affect the availability and use of services). Moreover, increased efforts are needed to disaggregate data by gender and by key populations. A strong shift toward using electronic data systems is needed (which implies introducing and operating reliable information technology systems).

94. Systems and methodologies have to be adapted to analyse data at the lowest relevant, geographical and/or administrative levels. Affected communities and key populations need to be involved in these processes to achieve high-quality data and analysis, and to ensure that the information is used to their benefit (and not to their detriment). All these improvements entail potential technical support needs.

c. Enhancing Strategic Investments

95. The strategic investment approach promoted by UNAIDS facilitates decision making by countries to ensure that their HIV responses address the national and local contexts of their HIV epidemics, and to assist countries to set clear priorities in resource allocation. The investment approach distinguishes between basic programme activities that have a direct effect on HIV risk, transmission, morbidity and mortality; the critical enablers that are crucial to the success of HIV programmes; and synergies with development efforts.

96. Countries frequently require technical support when adopting this approach and designing fully costed packages of focused and sustainable HIV interventions. This need for support will increase as it becomes possible and necessary to develop and motivate for packages of services at an increased variety of levels, including highly localized levels.

d. New technologies

97. The African Union Roadmap on Shared Responsibility and Global Solidarity called for concerted action to ensure robust and sustainability pharmaceutical manufacturing capacity in Africa, with the aim of ensuring the ready availability of affordable future breakthrough health technologies. The Roadmap has brought together different players working on technological cooperation and has also catalyzed discussions on innovative models for financing health-related research and development. Technical support is often needed to manage such cooperation in reliable and consistent ways, and to introduce or maintain the systems that make the cooperation possible. Support is also needed to facilitate the sharing of the fruits of such cooperation.

e. Strengthening procurement and supply chain management systems

98. Technical support is needed to make procurement and supply chain management systems stronger to achieve reliable acquisition, supply and distribution of HIV
commodities. Further technical support is also needed to strengthen programme and financial management – and other governance and oversight mechanisms, including reliable monitoring and evaluation – at decentralized levels.

99. Technical support is often needed to integrate HIV interventions with other health, social service and development systems. In the context of increased integration of service delivery, this involves dealing with new challenges at programme management levels that often are hampered by chronic capacity and systems shortcomings.

100. Decentralized scale-up of service provision presupposes increased engagement with, and involvement by key populations and communities, and the strengthening of community systems – all of which involve potential technical support needs. Linked to this is the need to address a range of human rights priorities, including eliminating stigma and discrimination, ending gender-based violence and promoting gender equality.

f. Support to critical enablers – human rights, gender equality and community mobilization

101. Thematic areas that should benefit from increased and coordinated technical support include human rights, gender equality and community mobilization. Recent developments provide a robust policy base for scaled-up programming in these areas and for inclusion of such activities in HIV funding proposals: (a) the UNAIDS Strategy _Getting to Zero_, which made human rights and gender equality one of three pillars in the response, along with prevention and treatment; (b) the _2011 Political Declaration on HIV/AIDS_, in which States committed to roll out concrete programmes on stigma reduction, legal services and sensitization of police and health workers on human rights; and (c) the investment approach, which calls for critical enablers involving programmes such as stigma reduction, community mobilization, law reform, legal services and addressing gender inequality in the context of HIV.

102. As the Global Fund New Funding Model is implemented, concerted efforts are needed to integrate technical support in these priority areas. Towards this end, the UNAIDS Secretariat has promoted key programmes to support human rights in national responses, held workshops with national planners and programmers in four regions to promote integration of human rights into national responses, and introduced a costing tool to enable countries to budget for and manage such programmes. However, further support is needed, underscoring the importance of ongoing and well-resourced technical support.

**Next steps in implementing the strategic directions for strengthened technical support provision**

103. Strengthening technical support provision requires actions at country regional and global levels.

104. These efforts should be guided by three core principles:

- Country ownership and leadership is key to effective technical support provision and coordination at country level.

- Strong preference should be given to local providers of technical support or to providers in neighbouring countries. Where competency exists, consideration
should be given to the use of indigenous civil society organizations to provide specific technical support services.

- Based on needs identified in technical support plans, countries and partners should work together to identify potential sources of technical support through South-to-South collaboration and other mechanisms.

105. The following priority actions are needed at country level:

- Existing coordination bodies (e.g., national AIDS coordinating bodies, Country Coordinating Mechanisms, health ministries, partnership fora) should be used as the main mechanisms for coordination by countries and partners to identify and clearly articulate their technical support needs.

- Technical support needs should be reflected in national Technical Support Plans, which should be linked with the HIV investment case and National Strategic Plan.

- A Steering Committee or Technical Support Focal Point should be designated to oversee implementation of the technical support plan. The plan should be regarded as a living document that is revised or updated regularly.

- The Technical Support Steering Committee or Focal Point should develop systems for monitoring the quality of technical support services, as well as the overall management of technical support.

106. The following priority actions are needed at regional level:

- Existing regional technical support mechanisms should be strengthened and revitalized, with the overriding aim of supporting appropriate, high-quality technical support at country level.

- Effective regional platforms should exist to facilitate a market match between country demand and regional technical support providers. In this regard, the technical support coordination partnership facilitated by the UNAIDS West and Central Africa Regional Support Team and the WHO Network for HIV and Health offer potentially useful models for adaptation in other regions.

- Additional regional coordination fora should be explored as mechanisms for exchanging information on best practices, monitoring the quality of technical support and disseminating information on evolving global policies and strategies of bilateral and international partners, as well as evolving technical guidance on HIV prevention, treatment and care.

- Regional civil society organizations should work closely with regional technical support coordinating bodies and convene regional meetings on community systems strengthening as a means of sharing information and building networks of technical support providers.

107. The following priority actions are needed at global level:

- Given the roll-out of the Global Fund New Funding Model, additional efforts are needed to strengthen information sharing and technical support at the global level. In particular, efforts are needed to strengthen the coherence and focus of technical support among major bilateral (e.g, PEPFAR, FEI, GIZ, DFID) and
multilateral donors (e.g., Global Fund, World Bank), UNAIDS Secretariat and Cosponsors, and major international support providers, including international civil society organizations.

- The priorities for effective global coordination should be:
  - Identification of priority countries for joint technical support plans and activities;
  - Identification of the obstacles countries face in finding appropriate technical support services and solutions to problems;
  - Supporting regional and country technical support coordination mechanisms;
  - Strengthening the technical support marketplace to ensure a match between country demand and availability of technical support services;
  - Development of tools to monitor the quality of technical support; and
  - Dissemination of global policies, strategies and best practices to regional and country technical support coordination mechanisms.

- UNAIDS is currently exploring the feasibility of building on existing coordination mechanisms for enhanced technical support coordination around the New Funding Model, including for the planning and provision of support to specific priority countries.

UNAIDS’ future contributions to strengthened coordination and provision of technical support

108. UNAIDS will fully leverage its convening and brokering role to ensure that countries receive the technical support they need throughout the Global Fund New Funding Model process. Specifically, UNAIDS intends to undertake the following activities to strengthen technical support coordination and provision:

- UNAIDS will bring together governments, civil society organizations, people living with HIV, bilateral agencies, the private sector, the Global Fund and other stakeholders to strengthen the Country Dialogue process, Concept Note development and Global Fund grant implementation.

- UNAIDS will support countries to better understand their specific HIV epidemics, utilizing an investment approach and strengthening national AIDS strategic plans to facilitate the development of robust Global Fund Concept Notes and ensure that national responses are effective, efficient and sustainable.

- UNAIDS Country Coordinators will maintain ongoing communication and collaboration with Global Fund Portfolio Managers throughout the Country Dialogue, grant negotiation and grant implementation processes.

- UNAIDS will work with countries and partners to support the assessment of current capacities, identify gaps and facilitate the development of technical support and capacity development plans that clearly articulate capacity and system development needs for Global Fund grant implementation.

- UNAIDS will work with governments, civil society organizations and partners to identify potential providers of needed technical support, with a preference for using local technical support providers or through South-South collaboration, whenever possible.
UNAIDS will facilitate the provision of technical support to civil society organizations and, where capacity needs exist, promote the utilization of civil society organizations as technical support providers.

UNAIDS will work closely with countries and key national and international technical support providers to strengthen coordination and avoid duplication of technical support provision.

UNAIDS will support countries to identify obstacles for Global Fund grant implementation and facilitate deployment of technical support to overcome those obstacles.

UNAIDS will encourage external partners and funding mechanisms to invest in approaches that build sustainable national capacities, particularly among government, civil society and national institutions.

UNAIDS will support strengthened partner coordination to meet the priority actions outlined above, including for provision of focused support to specific priority countries.

CONCLUSION

109. Ultimately, the effectiveness of technical support coordination efforts undertaken at global and regional levels depends on whether countries are actually able to access appropriate, high-quality technical support in a timely manner. Technical support can be challenging, but experience confirms that it remains critically important. As the preceding discussion shows, numerous mechanisms for technical support coordination currently exist at country, regional and global levels. Many of these mechanisms are working well, as reflected in the three examples of successful country applications under the New Funding Model.

110. However, as technical support needs shift in constantly changing contexts, efforts to coordinate technical support will need to evolve accordingly. Informed in part by the UNAIDS-convened consultation on technical support coordination in July 2013, recommended action steps have been identified at country, regional and global levels to improve technical support coordination.

111. As the previous discussion underscores, technical support plays an important role in ensuring the quality, breadth and sustainability of country AIDS responses. UNAIDS has played an important role in brokering and providing technical support to strengthen national responses. Ensuring countries’ access to technical support remains a core function and priority for the Joint Programme.

112. As the epidemic and the response evolve, countries’ technical support needs are changing as well. New strategies will be needed to meet the increased demand for technical support and to ensure that technical support services address countries’ evolving needs. Recent experience with successful efforts by El Salvador, Myanmar and Zimbabwe to navigate the Global Fund New Funding Model demonstrates that thoughtful and committed action can meet new challenges posed by a changing AIDS landscape. Additional action steps are urgently needed to meet technical support needs in a time of change, challenge and historic opportunity.
RECOMMENDATION

113. The Programme Coordinating Board is invited to: *Welcome* the paper on coordination of Technical Support in a rapidly changing environment, and support UNAIDS in rapidly implementing the priority focus on technical support for the implementation of the Global Fund New Funding Model.
REFERENCES

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