

Joint United Nations Programme on HIV/AIDS

PROGRAMME COORDINATING BOARD

Fourth meeting Geneva, 7-9 April 1997

Provisional agenda item 9

Progress Report on the UNAIDS Coordinated Appeal for Supplemental Funded Activities

EXECUTIVE SUMMARY

This Report has been prepared in order to: (i) further clarify for the PCB the rationale for the UNAIDS Coordinated Appeal for Supplemental Funded Activities and the process for its preparation; (ii) inform the PCB on the status of the 1996-1997 Coordinated Appeal and on its current funding; and (iii) advise the PCB on the status of preparation of the Coordinated Appeal for the 1998-1999 biennium.

Greater supplemental funding is urgently required by the Cosponsors to augment those core resources which they have been able to allocate, so that they can more effectively respond to the increasing requests for technical assistance from within their country operations. Out of the total US\$ 18 million requested for the 1996-1997 Coordinated Appeal, only US\$ 4.8 million have been received or pledged. Of that total, US\$ 1.8 million is being provided by three donor agencies, while US\$ 3 million of the total is being financed from the UNAIDS core budget.

This Report also describes the process for preparing the 1998-1999 Coordinated Appeal, which is anticipated to be "launched" at the end of June 1997. In advance of the finalization of the full proposals, a preview of proposed activities for inclusion within the 1998-1999 Coordinated Appeal has been prepared by each Cosponsor.

ACTION REQUIRED AT THIS MEETING

- The PCB is invited to take note of this Report.
- The Executive Director requests the assistance of the PCB to mobilize donor agencies to urgently finance unfunded activities, at global and regional level, included in the 1996-1997 Coordinated Appeal, critical to strengthening the UN system response to the epidemic.



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I. Introduction

This Progress Report on the UNAIDS Coordinated Appeal for Supplemental Funded Activities has been prepared in order to:

- further clarify for the PCB the rationale for the UNAIDS Coordinated Appeal and the process for its preparation;
- inform the PCB on the status of the 1996-1997 UNAIDS Coordinated Appeal and on its current funding; and
- advise the PCB on the status of preparation of the UNAIDS Coordinated Appeal for the 1998-1999 biennium.

At its June 1996 meeting, the PCB emphasized (UNAIDS/PCB(3)/96/Rec. 23) the importance of making further progress as soon as possible in the development of an integrated workplan among UNAIDS and its Cosponsors, and that presentation should be structured in four categories of activities, namely:

- 1. the activities included within the UNAIDS Workplan and Budget;
- 2. those activities in the UNAIDS Workplan to be implemented by Cosponsors or other organizations;
- 3. HIV/AIDS-related activities of the Cosponsors, which will be funded from their core budgets; and
- 4. HIV/AIDS-related activities of the Cosponsors, which will require supplemental funding and are included in the Coordinated Appeal.

Notwithstanding time constraints, significant efforts have been made to prepare the UNAIDS Coordinated Appeal for 1998-1999 in parallel with that of the UNAIDS Proposed Programme Budget and Workplan and of the budget processes of Cosponsors for the same period. Advantages of this approach include:

- providing the PCB with "the full picture" for the 1998-1999 biennium, including the planned activities of the Cosponsors requiring supplemental resources, as included in the Coordinated Appeal;
- submitting the Coordinated Appeal for 1998-1999 to donors earlier to enable Cosponsors to identify supplemental resources in advance of the next biennium, and therefore to make the fundraising more successful; and
- juxtaposing the timeline of these planning processes with the budget preparations of the Cosponsors to enable more effective integration between the activities of the Cosponsors and the UNAIDS Secretariat, and to better inform efforts within the individual governing bodies to support Cosponsor regular budget allocations for HIV/AIDS-related activities.

Although there has been significant progress towards completing the preparation of the Coordinated Appeal for the next biennium, further work is required in order to finalize a number of individual proposals. Consequently, this Report has been provided to update the PCB on status and to provide an early indication of the HIV/AIDS-related efforts of the Cosponsors which are likely to require supplemental resources.

The development of the UNAIDS Coordinated Appeal has served as one of the major processes for harmonization of programme approaches among the Cosponsors. Further strengthening of the process will

be required in identifying priorities, gaps and opportunities in programming. Its funding by donor contributions is critical for strengthening cosponsorship of the Programme at this critical juncture.

II. Continuing challenges

Increasingly, the UNAIDS Cosponsors are expanding the diversity and intensity of their HIV/AIDS-related activities at country level. While this programme acceleration is most welcomed, the increasing financial constraints and staff reductions within the Cosponsors are, in many instances, limiting their technical capacities at global and regional level required to support this intensified programming thrust. Greater supplemental funding is urgently required by the Cosponsors to augment those core resources which they have been able to allocate, so that they can more effectively respond to the increasing requests for technical assistance from within their country operations.

In order to continue to improve the quality of future rounds of the Coordinated Appeal, the Cosponsors and the UNAIDS Secretariat have already initiated a series of actions which will continue in the future. They include:

- continuing to address issues of approach, role and responsibilities among the Cosponsors and with the UNAIDS Secretariat where there is not yet a common understanding;
- continuing to work together to assure that the essential technical and managerial capacities required within the Cosponsors to support their programming are maintained and strengthened; and
- continuing to commit the time and resources required to support the Coordinated Appeal process, including facilitating the communications and other functions of the Inter-Agency Reference/Working Groups.

III. Rationale of the Coordinated Appeal process

By prior agreement of the Cosponsors, all HIV/AIDS-related activities of the Cosponsoring Organizations at global, and to the extent possible regional level, requiring supplemental funds are to be included within the UNAIDS Coordinated Appeal. Prior to inclusion within the Appeal, proposed activities are first jointly reviewed and agreed to by the Cosponsors and the UNAIDS Secretariat. This approach is consistent with the recommendations of ECOSOC and the PCB, and is reflected in the UNAIDS Memorandum of Understanding signed by all Cosponsors.

The UNAIDS Coordinated Appeal is prepared by the Cosponsors and the UNAIDS Secretariat under the aegis of the Committee of Cosponsoring Organizations (CCO). The purpose of the inter-agency peer review process, which forms the basis for the Coordinated Appeal, is to promote the harmonization of Cosponsors' activities; identify gaps in the UN system response; promote a more cohesive, synergistic and expanded response to the epidemic; and to assure that there is no duplication of effort or conflicting approaches within Cosponsors' programme activities.

The primary focus of the UNAIDS Coordinated Appeal process is:

- to organize individual Cosponsor proposals within mutually agreed to programme components which parallel those defined within the UNAIDS Workplan, so that they could be reviewed and rationalized in tandem with the UNAIDS Workplan;
- to critique the existing and newly proposed programme efforts of each of the Cosponsors and to provide broad guidance on the reformulation or description of proposals where required;
- to identify in which thematic areas the planning of the UN system response would be substantially facilitated by the establishment of Inter-Agency Working Groups;
- to identify which Cosponsors should be included as members of the thematic Inter-Agency Reference Groups constituted for each of the programme components; and
- to identify critical gaps where urgent programme development is required, and to encourage appropriate Cosponsors to take responsibility for that programme development.

Though the distinction between Inter-Agency Working Groups and Inter-Agency Reference Groups is sometimes blurred, in general, Working Groups are convened only in those thematic areas where more intensive inter-agency planning, policy harmonization and strategic monitoring efforts are required to strengthen the UN system response. In contrast, Reference Groups are established in all thematic areas to provide a ready, though more passive, set of reference points within the UN system. These reference points are intended to facilitate the work of usually one, but often several, of the cosponsors involved in the particular thematic area.

It is understood that individual Cosponsors will not seek to raise funds for activities directly related to HIV/AIDS at global or regional level unless they have been appropriately reviewed within the Coordinated Appeal process. While the final responsibility for financing a particular activity rests with the Cosponsor who proposes it, the UNAIDS Secretariat and the Cosponsors collectively will encourage interested donors to fully finance all the proposed activities included within the Coordinated Appeal.

IV. Progress on the 1996-1997 Coordinated Appeal and lessons learned

The preparation of the first UNAIDS Coordinated Appeal for the current biennium proceeded over a number of months, involving a review by the Cosponsors and the UNAIDS Secretariat of the content of specific proposals and their presentation, institutional comparative advantages and respective roles, and the relative priority and urgency of efforts in the various programme components.

At its June 1996 meeting, the PCB welcomed the Coordinated Appeal for 1996-1997, noting the progress achieved by the Cosponsors and UNAIDS in establishing the processes required to develop it (UNAIDS/PCB(3)/96/Rec. 22). It was subsequently presented to donor agencies by the UNAIDS Secretariat. Proposed activities were organized within 18 programme area categories to parallel those within the UNAIDS Workplan, containing 32 separate proposals requiring approximately US\$ 18 million in financial resources (including some US\$ 4 million of undesignated funds). Virtually all the activities within this first Appeal were at global level, since information on regional projects was, in most cases, not ready for inclusion at that time.

Notwithstanding the very substantial and difficult efforts of the Cosponsors and the UNAIDS Secretariat in preparing the current Coordinated Appeal and its significant contribution to clarifying roles and harmonizing programme approaches among the Cosponsors and the Secretariat, it has been far from successful in

mobilizing the essential resources required by the Cosponsors to strengthen their efforts at global and regional level required to strategically guide and technically support their expanding HIV/AIDS-related portfolios at country level. Out of the total US\$ 18 million requested for the current Coordinated Appeal, only US\$ 4.8 million have been received or pledged. Of that total, US\$ 1.8 million is being provided by three donor agencies, while US\$ 3 million of the total is being financed from the UNAIDS core budget (see Annex).

Following its review of the status of the Coordinated Appeal at its October 1996 meeting, the CCO encouraged the review of the process with the objective of identifying and addressing those issues which were impeding the success of the Appeal. Subsequently, the CCO Working Group met for two days in December 1996 to examine the status and process of the Coordinated Appeal and to determine further steps required to prepare the next Appeal. The Working Group discussed a number of conceptual and operational problems that emerged from its early experience. Most significant among the conceptual impediments was the continuing lack of a common understanding of the function of a "Cosponsored Programme" and the importance of the Coordinated Appeal to support critical HIV/AIDS-related activities to be implemented by the Cosponsors. Other difficulties accompanied the introduction of a new and somewhat complex "peer review" process in an inter-institutional setting.

Operationally, that the first Coordinated Appeal was not finalized and launched until six months into the current biennium was viewed as having had major negative consequences on the ability of the Cosponsors to raise adequate funding for their planned activities. With six notable exceptions where Inter-Agency Working Groups have been established, the Inter-Agency Reference Groups identified in each of the programme components had not yet become operational. Stronger advocacy efforts and more aggressive marketing was recommended, both from within the UNAIDS Secretariat and as a part of the Cosponsors' regular dialogue with donors. In addition, a more rigorous monitoring and follow-up of the status of the Appeal was suggested.

V. Overview of current process for preparation of the Coordinated Appeal for the 1998 - 1999 biennium

Following its review of past experience, the CCO Working Group agreed to make a number of changes in the process of developing the 1998-1999 Coordinated Appeal. This includes steps to assure the completion of its preparation a full year earlier in the programme cycle than was possible for the current Appeal; the "activation" of Inter-Agency Reference Groups in priority areas where they have not yet been functional; a more effective effort to promote an understanding of the Coordinated Appeal process within the respective agencies; and more intensive marketing of specific proposals with the donor community by the Cosponsors and the UNAIDS Secretariat.

The Cosponsors reinforced the importance of preparing the Coordinated Appeal and the UNAIDS Proposed Programme Budget and Workplan in parallel and of submitting them simultaneously to the PCB. In order to assist Board members and donors to better relate the Coordinated Appeal and the UNAIDS Budget and Workplan with one another, agreement was reached on those common programme components to be used throughout.

It was further agreed that, in those areas where Inter-Agency Working Groups had been established, work would proceed towards more detailed proposals to be ready early in 1997. It was recognized that,

in those areas without a Working Group, the process would be more difficult and require serious early attention. Due to tight deadlines, it was agreed that a document broadly outlining the proposed Cosponsors' activities for 1998-1999 would be submitted to the PCB.

The complete and detailed proposals would be further developed and technically reviewed by the respective Reference/Working Groups and subsequently prioritized by the CCO Working Group or its designated Inter-Agency Proposal Review Group, in May 1997. The "launching" of the final Appeal would take place at the end of June 1997. The necessity of further review by an Inter-Agency Proposal Review Group able to independently go over the full range of proposals for strategic priorities and funding levels, was recognized. Draft Terms of Reference are currently being discussed among the Cosponsors and the UNAIDS Secretariat.

Criteria for inclusion of proposals in the Coordinated Appeal

The Cosponsors agreed that the following general criteria should be applied for including specific Cosponsors' activities in the Coordinated Appeal:

- relevance to the priority needs in the UN response to the epidemic;
- potential contribution to strengthening national responses;
- agreement among UNAIDS and its Cosponsors on the relative priority of new and continuing activities in relationship to agreed-upon UNAIDS Workplan priorities;
- specific comparative advantage of each Cosponsor; and
- clear outputs and clear monitoring and evaluation plan.

Proposals to strengthen the capacities of Cosponsors to further develop and integrate HIV/AIDS-specific components into other programme areas would continue to be considered on a transitional basis. These proposals should include a specific plan for sustaining the activities, within the Cosponsor, following the transitional period. Costs associated with the core liaison and coordination functions of the Cosponsors, as well as those related to General Service staff support, will not be eligible for inclusion within the Coordinated Appeal.

Ceiling for the 1998-1999 Coordinated Appeal

The *status quo* of up to US\$ 20 million was agreed upon for the ceiling of global activities. It was further recommended that, for the time being, approximately the same distribution among the programme components would be maintained as in the current Appeal. It was confirmed that, to the extent possible, regional activities would also be included in the Coordinated Appeal. It was decided that a separate indicative ceiling would be established for regional projects following further study.

VI. Preview of proposed Cosponsors' activities for the 1998-1999 Coordinated Appeal

In advance of the finalization of the full proposals to be included within the UNAIDS 1998-1999 Coordinated Appeal, the following overviews have been provided by each of the Cosponsors. While these overviews will most likely be modified as a consequence of the inter-agency review described

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above, they nevertheless provide the PCB with a preliminary indication of the areas where the Cosponsors propose to strengthen their efforts.

A. UNICEF

The continuing efforts of UNICEF in the area of HIV/AIDS primarily focus on programmes to reduce transmission among women and children, including young people; information and communication to promote informed and responsible behaviour; promotion of improved reproductive health services of women and youth; protection of children from sexual exploitation; reduction of mother-to-child transmission and creative community-based approaches to provide the support and social services required by children orphaned by AIDS and families affected by the epidemic. It is expected that, throughout the 1998-1999 biennium, UNICEF will continue to implement HIV/AIDS-related activities using this approach and in support of the Convention on the Rights of the Child.

The five main areas of activities which UNICEF will focus on are:

- Communication for Behaviour Changes related to HIV/AIDS. Efforts will be on distilling and
 promoting best practice experiences, mobilizing partners and organizing information and peer
 review processes, supporting regional communication vehicles/products and facilitating technical
 networks;
- Taking to Scale Life Skills/AIDS School Programmes. Activities will range from providing technical assistance to regional networks, developing training materials on life skills to supporting countries "going-to-scale" and to evaluate programme impact;
- Strategies for Children and Families Affected by HIV/AIDS. Activities will range from providing technical assistance to regional networks, facilitating inter-country support, capacity building and distilling best practices;
- Preventing HIV/AIDS by Promoting the Health and Development of Young People. Efforts
 will focus on strengthening capacity for measuring young people's health and development;
 protecting young people's rights to access to information and services; identifying and developing
 resources to support country programmes; and improving the flow of information and ideas within
 UNICEF and with other partners; and
- Strengthen Strategies and Policies to Reduce Mother-to-Child Transmission of HIV. Efforts will focus on providing technical guidance in the development of programming approaches to reducing mother-to-child HIV transmission. Specific activities will include participating in the review of technical research and identifying technical information for dissemination. UNICEF will also focus on reviewing and disseminating policies and guidelines on HIV and infant feeding, including counselling for women.

B. UNDP

The challenges posed by the HIV/AIDS epidemic to human well-being and development require collaborative and complementary action, across sectors, institutions and disciplines and between and amongst governmental and non-governmental players. Consequently, within the UN system, different agencies and organizations have different and complementary contributions to make. As a Cosponsor of UNAIDS, UNDP works collaboratively with UNAIDS and other Cosponsoring Organizations to contribute to the overall goals of this collaborative initiative. UNDP's comparative advantage in the global

response to the epidemic, within the context of its support for effective national development and poverty eradication, is reflected in its mission statement. The work of UNDP is fully integrated into the consolidated approach of UNAIDS and its UN system Cosponsors and associated organizations.

Future work will build on collaborative programme development with governmental and non-governmental partners, and will reflect a focus on the following:

- strengthening national capacity to learn, analyze, plan and evaluate multi-sectoral and multidimensional responses and to use research to better understand the socio-economic dimensions of the epidemic;
- identifying and supporting initiatives to minimize the adverse socio-economic impact of the epidemic on households and communities, production systems, public and private sector institutions, social welfare systems, etc.; and
- supporting community responses aimed at improving understanding and skills needed for policy and programme development and building effective partnerships between governmental and nongovernmental organizations.

Legal, ethical, and human rights dimensions, as well as gender and the active participation of those affected by the epidemic, will be addressed as an integral part of overall policy and programme development initiatives.

C. UNFPA

UNFPA intends to submit two proposals for inclusion in the 1998-1999 Coordinated Appeal. One is related to country-level activities, and the other relates to the impact and consequences of the epidemic on all major aspects of development.

Country-level activities

In 1996, UNFPA funded more than US\$ 20 million on HIV/AIDS prevention activities. The vast majority of this support (approximately 95 per cent) was provided to countries. HIV/AIDS prevention activities were supported in the context of reproductive health information and service delivery programmes at primary health care level, and in line with national AIDS prevention and control policies and programmes, in close cooperation with all other UN system partners and other organizations active in HIV/AIDS prevention and control.

Support was provided in four main areas: (i) supply and distribution of condoms; (ii) in school and out-of-school education activities on HIV/AIDS; (iii) awareness creation activities on HIV/AIDS as part of population and reproductive health IEC programmes; and, (iv) training of reproductive health information and service providers on HIV/AIDS. UNFPA expects such support to continue and possibly expand during 1997.

UNFPA's support for HIV/AIDS prevention is small in comparison with the vast needs of countries. There is thus a need to expand the availability of resources at country level, particularly in those countries which may experience difficulties in attracting external funding. UNFPA thus intends to submit, as part of the 1998-1999 Coordinated Appeal, a series of HIV/AIDS prevention country projects. The funding of

these projects through the Appeal would enable equivalent core funds to be allocated for HIV/AIDS prevention activities in other priority countries.

Inter-regional activities

The HIV/AIDS epidemic is having far-reaching consequences on all aspects of development and in all sectors such as population, health, education, economic development, housing, and agriculture. UNFPA proposes the joint development of a methodology for assisting countries to study and assess the impact and consequences of the HIV/AIDS epidemic.

D. UNESCO

The UNESCO's programme in the field of the struggle against AIDS focuses on two main areas: Preventive Education and Basic Research.

Bearing in mind the Organization's mandate, which is to organize international cooperation in intellectual activities designed to promote human rights, help to establish a just and lasting system of peace and further general welfare of mankind through its fields of competence – education, science, culture and communication – the ethical imperative is essential to UNESCO's programme. In this framework, the UNESCO's proposals to the 1998-1999 Coordinated Appeal can be grouped under six major headings: Education; Natural Sciences; Communication; Social Sciences (Youth); Culture; and Human Rights and Ethics. The proposed activities will be developed in the framework of an integrated transdisciplinary approach.

- 1. Regarding AIDS prevention, UNESCO's aim is to encourage at global and regional level the development of effective educational strategies adapted to various socio-cultural contexts, which would help young people to adopt attitudes and behaviours as to avoid HIV infection. To this end, UNESCO's activities will be focused on the mobilization of: educational decision-makers to integrate HIV/AIDS prevention in school curricula through provision of technical support to improve country programmes in developing countries; and of educational policy planners to institutionalize HIV/AIDS preventive education.
- 2. Regarding AIDS research as a component of the problem of access to treatments, UNESCO's activities are focused on support to national capacity building in basic research in developing countries. The main priorities are to encourage basic research to set up trials and identify appropriate treatments for developing countries in accordance with the legal advice of the International Bioethics Committee. In addition, basic research to produce candidate vaccines will be encouraged. To this end, UNESCO will continue to assist research in 1998-1999 through its Network "Men Against Virus" concerned with molecular and cell biology and microbiology, and through the World Foundation for AIDS Research and Prevention created by Professor Luc Montagnier and the Director-General in 1993.
- 3. Regarding the general context of AIDS prevention by communication, women's programme and social science, particularly youth and culture, UNESCO uses its comparative advantage to integrate AIDS into these different activities, as well as investigative journalism, integration of AIDS dimension in journalism training, sensitization of high-level decision-makers, mobilization of

youth leaders through a Festival of documentary video-films on HIV/AIDS. Further to the recommendation adopted by the UNESCO/WHO International Conference on Culture and Health held in Chiang Mai (Thailand) on 27-31 May 1996, the coordination for the World Decade for Cultural Development should promote activities to mobilize religious, spiritual leaders and authorities in collaboration with UNAIDS.

E. WHO

Within WHO, over 20 Programmes and Divisions have activities in HIV/AIDS and STDs, or the potential for integrating such activities into their work. "Mainstreaming" these activities is at the core of the WHO's response to the epidemic, ensuring skills and knowledge are available to countries. An inventory of activities at headquarters has been compiled which, combined with similar inventories in regional offices, provides country offices with a clear, concise description of resources available throughout the Organization in support of HIV/AIDS-related and STD activities. Informal inter-divisional working groups in the areas of surveillance, provision of care, infant feeding, STDs, access to drugs, and infectious disease control and universal precautions, have been established to enhance internal coordination and promotion of activities in these areas.

Taking into account the responsibilities and the technical capacities of WHO, priority activity areas for the Organization are:

- prevention, detection and treatment of STDs;
- prevention of sexual transmission of HIV;
- prevention of HIV transmission through blood;
- reduction of transmission associated with substance use;
- prevention of perinatal transmission of HIV;
- care and support of persons or groups affected by HIV/AIDS based on strengthening of health care systems; and
- promotion of adequate and appropriate societal responses to HIV/AIDS.

The proposals for consideration in the 1998-1999 Coordinated Appeal reflect the continuous need to strengthen and expand capacities in the area of WHO's role in the health sector, with a focus on technical and normative guidance with regard to HIV/AIDS and STD. In the area of care, counselling and health system strengthening, the proposals reflect the need for updating guidelines and validating implementation in a number of areas such as care for HIV-positive women and newborns; improvement of access to voluntary testing and counselling for pregnant women; updating of model prescribing information on HIV/AIDS and STDs; recruitment of safe blood donors, field guides for occupational exposures in the workplace, revised STD case management guidelines; and improved integral management of TB and other HIV-related illnesses.

In the area of health system activities, it is proposed to focus on strengthening the capacity of health systems to provide a continuum of care for HIV/AIDS between hospital and home and on developing planning tools to better integrate HIV/AIDS/STD/TB interventions into overall health plans and budgets. WHO's proposals in the areas of school-based services and difficult-to-reach vulnerable populations reflect the need to develop tools and interventions in access to and quality of health services for adolescents, to address sexual behaviour patterns of substance users, and to develop further interventions to promote safe injecting drug use.

Proposals in the area of surveillance of infection and disease address the maintenance of quality control of diagnostic test kits and maintenance of a database for monitoring STD, HIV and AIDS.

F. The World Bank

The World Bank believes that HIV/AIDS is not just a health problem, but also a development problem. This epidemic threatens the economic and social growth of many nations. The majority of World Bank's financing is provided to countries for the development of strategies and services on the ground. However, the World Bank is also committed to learning how best to curb the HIV/AIDS epidemic. To this end, the World Bank has provided funding for experts from around the world, as well as its own staff and consultants to undertake a variety of research projects.

During the second meeting of the PCB, Member States urged the World Bank and UNDP to work on the economic impact of the HIV/AIDS epidemic and its consequences on development. These are issues that require a coordinated effort of not only the Cosponsoring Organizations, but all the major players such as government, bilateral and multilateral donors, and other main partners in the field. Using its comparative advantage, the World Bank will work closely with UNAIDS and other Cosponsors to use the Coordinated Appeal mechanism to initiate and coordinate comprehensive studies on the economic impact of the epidemic and the cost-effectiveness of different interventions. To this end, the World Bank intends to submit two proposals for the 1998-1999 Coordinated Appeal on the economic impact of the HIV/AIDS epidemic, and its consequences on development and cost-effective interventions.

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Annex UNAIDS Coordinated Appeal for Supplemental Funded Activities (1996-1997): Status of contributions (pledged or received) as at 13 March 1997

COSPONSORS	TITLE OF PROPOSALS	ADDITIONAL RESOURCES REQUIRED			CONTRIBUTIONS	
		ACTIVITIES (US\$)	PERSONNEL (PM = professional months) (FTE = full- time equivalent)	TOTAL (US\$)	UNAIDS (US\$)	DONORS (US\$)
UNICEF	7.1 Expanded Programme Partnerships with Communication Organizations	700,000	12 PM		220,000	Norway - 65,000 ¹
	10.3 School-Based Interventions for Preventing HIV/AIDS: a Focus on	500,000	4 PM		170,000	Norway - 105,000 ¹
	11.1 Strategies for Children and Families Affected by HIV/AIDS	500,000	12 PM		165,000	Norway - 75,000 ¹
	12.2 Preventing HIV/AIDS by Promoting the Health and Development of Young People in	450,000	4 PM		145,000	Norway - 55,000 ¹
	18.1 Information Technologies Development	To be determined	To be determined			
	TOTAL	2,150,000	32 PM (1.3 FTE)	2,590,000	700,000	Norway - 300,000
UNDP	1.1 Programme Support/Capacity	400,000	24 PM		100,000	
	2.1 Community Mobilization and NGO Networking	300,000	12 PM		130,000	
	4.1 Socio-Economic Dimension of the Epidemic	400,000	24 PM		100,000	
	6.1 National/Regional Networks on Ethics. Law and HIV	300,000	12 PM		100,000	
	11.2 Community Action and Social Support Systems	800,000	36 PM		270,000	
	TOTAL	2,200,000	108 PM	3,685,000	700,000	

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Estimated breakdown to finance ongoing activities. The total amount of US\$ 300,000 was received directly by UNICEF headquarters, New York.

COSPONSORS	TITLE OF PROPOSALS	ADDITION	AL RESOURCES RE	EQUIRED	CONTRIBUTIONS	
		ACTIVITIES (US\$)	PERSONNEL (PM = professional months) (FTE = full- time equivalent)	TOTAL (US\$)	UNAIDS (US\$)	DONORS (US\$)
			(4.5 FTE)			
UNFPA	8.1 Social and Behavioural Research	300,000			80,000	
	8.2 Condom Logistics	300,000	6 PM		80,000	
	10.2 School Education	500,000			140,000	
	TOTAL	1,100,000	6 PM (0.25 FTE)	1,182,500	300,000 ²	
UNESCO	10.1 Regional Seminars on HIV/AIDS and Education within the School System	300,000	24 PM		150,000	
	TOTAL	300,000	24 PM (1 FTE)	630,000	150,000	
WHO	3.1 HIV/AIDS Epidemiological Surveillance	46,600	24 PM			
	3.2 STD Surveillance	200,000	1 PM			
	5.1 Strengthening of Health Systems and Responses	600,000	24 PM		300,000	
	10.4 Enhancing the Quality and Improving the Accessibility of Sexual and Reproductive Health Services to Young People in School	156,300	1 PM			
	10.5 Strengthen School-Based Interventions to Prevent HIV/AIDS/STD Using Existing WHO Networks at Global and Regional Level	720,000	24 PM		50,000	

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This UNAIDS's allocation of US\$ 300,000 will now be used for a co-financed project on integrating STD prevention and management into reproductive health programmes at primary health care level.

COSPONSORS	TITLE OF PROPOSALS	ADDITIONAL RESOURCES REQUIRED			CONTRIBUTIONS	
		ACTIVITIES (US\$)	PERSONNEL (PM = professional months) (FTE = full- time equivalent)	TOTAL (US\$)	UNAIDS (US\$)	DONORS (US\$)
	12.1 Use of Injectable Drugs, Alcohol, and other Psychoactive Substances	450,000	12 PM		100,000	
WHO (continued)	13.1 Improved Prevention and Treatment of STDs	505,000	30 PM		200,000	
	14.1 Mental Health Services for HIV Infected and Affected People in Four Countries	To be determined	To be determined		100,000	
	14.2 HIV/AIDS and Quality of Life	To be determined	To be determined			
	16.1 Tuberculosis	500,000	24 PM		200,000	
	17.1 Improving Blood Safety	500,000	12 PM		100,000	
	TOTAL	3,677,900	152 PM (6.3 FTE)	5,767,900	1,050,000	Japan - 1,000,000
WORLD BANK	4.2 Policy Research Report	320,275			50,000	
	18.2 Electronic HIV/AIDS Network for Economists	30,000			50,000	
	TOTAL	350,275		350,275	100,000	
	GRAND TOTAL	9,778,175		14,205,675	3,000,000	1,840,541 ³

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Including an additional US\$ 540,541 from Netherlands received by UNAIDS to be allocated to Cosponsors' activities included in the Coordinated Appeal.