

UNAIDS/PCB(21)/07.2 6 December 2007

# 21<sup>st</sup> Meeting of the UNAIDS Programme Coordinating Board Geneva, Switzerland

Geneva, Switzerland 17-18 December 2007

Provisional agenda item 2:

**Independent Evaluation of UNAIDS** 

**Document prepared by the Programme Coordinating Board Bureau** 

**Additional information documents for this item:** Economic and Social Council resolutions 1994/24, 1995/2 and 1995/223

Action required at this meeting - the Programme Coordinating Board is requested to: See decision paragraphs as follows:

- 14 questions to be addressed by the Evaluation
- 15 scope of the Evaluation
- 16 process to be followed
- 17 terms of reference for the Evaluation Team
- 18 methodologies to be followed
- 20 establishment of an Oversight Committee
- 23 terms of reference for the Oversight Committee
- 24 process for the establishment of an Oversight Committee
- 26 timeline for the Evaluation
- 28 budget for the Oversight Committee
- 29 budget for the Evaluation team
- 31 number of, and budget for, country visits

**Cost implications for decisions:** costs are dependant on decisions taken in the document and provisional budgets are shown in section XII Budget.

#### I INTRODUCTION – WHY THE NEED FOR AN EVALUATION

- 1. In 1994 the Economic and Social Council (ECOSOC) resolved that the challenges presented by the AIDS epidemic called for a significantly strengthened and expanded response by the United Nations. Through ECOSOC Resolution 1994/24 it created the Joint and Cosponsored United Nations Programme on HIV/AIDS (UNAIDS). The resolution brought together six agencies, UNDP, UNICEF, UNFPA, WHO, UNESCO and the World Bank as Cosponsors. In the years that followed, four more agencies, WFP, ILO, UNHCR and UNODC have joined the Programme. UNAIDS was established to draw on the experience and strengths of the cosponsoring organizations in developing coherent strategies and policies and mobilizing political and social support for action to prevent and respond to AIDS, while involving a wide range of sectors and institutions at national level.
- 2. The Joint United Nations Programme on HIV/AIDS was launched in January of 1996 and at its seventh meeting in December 1998, the Programme Coordinating Board endorsed the framework and plan for monitoring and evaluating the Joint Programme five years after its establishment. The Final Report of the Five Year Evaluation was submitted to the Programme Coordinating Board in December 2002. It determined that while the Organization's advocacy and resource mobilization role at the global level was extremely successful, more attention was required to address the epidemic at country level. The Evaluation report included 29 recommendations for action (Annex 1).
- 3. In June 2007, the Executive Director of UNAIDS proposed to the Programme Coordinating Board that a Second Independent Evaluation of UNAIDS, covering the period 2002-2008, should begin in 2008. The Programme Coordinating Board subsequently requested that:
  - "5.1 Requests that an independent evaluation of UNAIDS be carried out in order to reassess priorities, determine how to build on achievement and understand how UNAIDS can play a more effective role in the future in strengthening global coordination on HIV/AIDS" and requests the Programme Coordinating Board Bureau to prepare the process and mechanisms, including terms of reference, for the independent evaluation and submit these for approval to the 21<sup>st</sup> PCB (recommendation 5.1)."
- 4. The Second Independent Evaluation will cover a period (2002-2008) in which the AIDS epidemic, and the global response to it, has changed considerably. The pessimism that faced the world during the first twenty years of the epidemic has diminished somewhat in the face of much improved treatment and signs that prevention efforts are beginning to have an impact, even in some of the hardest-hit regions of the world. Meanwhile, the response by the international community has been strengthened and financial and human resources allocated to this response have increased significantly. The number of interested parties, stakeholders and groups responding to the challenge has expanded and major new "actors" have appeared, including the Global Fund to Fight AIDS, Tuberculosis and Malaria, the U.S. President's Emergency Plan For AIDS Relief (PEPFAR), the Bill and Melinda Gates Foundation, the William H Clinton Foundation, UNITAID and other key partners. There is also the new dimension, since the last evaluation, which relates to efforts towards UN reform. Despite these developments, the threat posed by the pandemic remains as large, if not larger, today than it was in 2000.

- 5. Following the Programme Coordinating Board 20<sup>th</sup> meeting in June 2007 two consultants were hired to assist the Programme Coordinating Board Bureau in meeting its obligation under decision 5.1. Preparation of the paper involved a number of key steps, including: (a) a review of the 1994 ECOSOC Resolution and the Cosponsored structure of the Joint Programme; (b) a review of the Five Year Evaluation published in 2002, its recommendations and the response by the UNAIDS Executive Director; (c) a review of the Institute of Medicine's Evaluation of PEPFAR and the Independent Evaluation of WHO's '3 by 5' Programme; (d) a review of the United Kingdom Department for International Development (DfID) evaluation of UNAIDS; (e) preparation of a questionnaire and interview schedule of a survey of relevant stakeholders; (f) a combination of face-to-face and telephone interviews with selected stakeholders and group discussions with others plus self-completion of questionnaires; and (g) a compilation and review of selected documents deemed relevant to the history of the AIDS response and the work of UNAIDS.
- 6. A preparatory survey was undertaken on behalf of the Programme Coordinating Board Bureau. Group consultations with stakeholders were productive and in addition to verbal responses to the questionnaire during discussions, many participants also completed the electronic questionnaire which had been sent to them. (Annex 2 provides a summary of the input received and Annex 3 the groups, individuals and country representatives consulted.)

#### II TERMS OF REFERENCE FOR THE EVALUATION

- 7. As requested by the Programme Coordinating Board this paper proposes the elements of a draft terms of reference for the Second Independent Evaluation. The Terms of Reference will form the basis of a Request for Proposal (tender) for the Evaluation Team and will comprise the text agreed by the Program Coordinating Board as contained in this document (an outline for the Terms of Reference is shown in Annex 4).
- 8. Once approved by the Programme Coordinating Board this Board document will also be the basis for the Chair of the Program Coordinating Board to invite nominations for membership of the Oversight Committee. The timeline for both activities is covered in section XI of this paper.

### **III CONTEXT OF THE EVALUATION**

- 9. The Evaluation will be carried out within the wider context of a number of activities in the global development agenda. These relationships can be defined as follows:
  - UNAIDS 5 year evaluation: the Second Independent Evaluation will build upon the findings of the previous evaluation and will review the implementation of the recommendations (see Annex 1) as its starting point. This work is also identified as a question to be addressed by the Evaluation in paragraph 14(c) below;
  - UN reform: the role of UNAIDS in the broader efforts on UN reform was identified during the consultation process as a necessary element of the Evaluation and is covered in paragraph 14(f);
  - Millennium Development Goals/UNGASS/Paris Declaration on Harmonization and Alignment: the Evaluation will be restricted to a review of the role of

- UNAIDS in achieving Universal Access by 2010, as indicated by the UNGASS process within the context of achieving the MDGs by 2015; and
- Other related evaluations: the UNAIDS Evaluation will take into account work already undertaken by key partners e.g. Global Fund and PEPFAR, and will build upon the outcomes of the evaluation of these respective programmes in terms of their relationships with UNAIDS and the role of UNAIDS in strengthening global coordination on AIDS.

# **IV GUIDING PRINCIPLES**

- 10. An independent evaluation of any organization is an extremely important exercise. Not only are the strengths and weaknesses assessed, but it allows for a review of performance and contributes to strategic planning for the future.
- 11. The UNAIDS Executive Director has proposed the following key principles to guide the implementation of this Second Independent Evaluation. The Evaluation should:
  - assess the effectiveness of all components of UNAIDS, including the Secretariat and all 10 Cosponsors in combating AIDS;
  - review UNAIDS' effectiveness in implementing its mandate as conferred by ECOSOC:
  - determine the extent and degree of success with which UNAIDS responded to the recommendations of the first evaluation;
  - examine UNAIDS' current strengths and weaknesses and propose how it can improve itself;
  - reflect on UNAIDS' place in the world, its relationship to other major organizations, especially organizations like the Global Fund to Fight AIDS, Tuberculosis and Malaria, bilateral programmes and new funding mechanisms, and its role in the response;
  - link any proposed revisions in UNAIDS to UN reform;
  - consider UNAIDS' business (working) practices and how they can be improved;
  - engage and utilize the evaluation expertise of partners, including member states and civil society; and
  - be independent and managed by the Programme Coordinating Board with a firewall between the process and UNAIDS.

#### V QUESTIONS TO BE ADDRESSED

- 12. The Program Coordinating Board requested that the Evaluation look principally at three main concerns: the need to reassess priorities; determine how to build on achievement; and understand how UNAIDS can play a more effective role in the future in strengthening global coordination on HIV/AIDS. These three criteria will underpin the specific questions to be addressed by the Evaluation, at country, regional and global levels.
- 13. Preparing the Second Independent Evaluation will necessarily involve a number of key decisions concerning what areas or themes will be evaluated. In implementing the Second Independent Evaluation, the Programme Coordinating Board will first have to agree the range of thematic issues that should be taken forward for consideration by the Evaluation. These issues have emerged over the course of the

past five years and were also identified in the recently conducted preparatory survey. This decision will have a bearing on the scope, cost and management of the Second Independent Evaluation. The Evaluation should address all elements of the Joint Programme, i.e. Secretariat and all ten Cosponsors, relationships with donors and governments and should include evaluations at country, regional and global levels.

- 14. It is recommended that the Second Independent Evaluation include the following questions to be addressed by the Evaluation. The Programme Coordinating Board is therefore invited to agree that the Second Independent Evaluation address the questions of:
  - a) The evolving role of UNAIDS within a changing environment Given the changing global, regional and country environments, the evolving role and priorities of the Joint Programme needs to be clearly defined, especially concerning working relationships with institutions like the Global Fund, PEPFAR, UNITAID, bilateral donors and others, all of which have grown in importance since the Five Year Evaluation.

### b) Governance of UNAIDS

This evaluation should involve a review of the governance structures of UNAIDS (Program Coordinating Board, Committee of Cosponsoring Organizations and the Unified Budget and Workplan), and its relationships with the Cosponsors and other UN bodies on a wide range of issues, especially given the organization's expansion, the entry of new partners into the field, and the growing range of activities being undertaken.

c) The response to the Five Year Evaluation of UNAIDS Assessing the extent to which UNAIDS has been able to respond to the recommendations and proposed activities that emerged from the Five Year Evaluation is important. It is also necessary to identify any factors, which may have facilitated or limited UNAIDS' implementation of these recommendations. Implementation will also have to be evaluated at headquarters, regional and country levels to determine the overall effectiveness, efficiency, equity and acceptability of the Programme.

# d) The interaction between Secretariat, Cosponsors, Agencies and Countries

The components of UNAIDS, and the operational relationships between Secretariat, Cosponsors and other institutions, like the Global Fund, at headquarters, regional and country levels need to be reviewed. This should also involve evaluating the efficiency of UNAIDS in terms of coordination, consistency and compatibility of activities and programmatic strategies and, how the 'Division of Labour' has affected working relationships in country and taking into account the perspective of national governments. Does UNAIDS fulfill its global coordination role on AIDS?

# e) The administration of the Joint Programme

This involves evaluating how the administration and business practice of the UNAIDS Secretariat has evolved since its creation, including its institutional relationships with WHO and UNDP, and whether it has been flexible and creative enough to keep up with the changing pace and types of demands

that have emerged over time, including transfer of resources to countries. Patterns and processes of staff deployment and management will need to be addressed.

# f) The Impact of UN Reform - Delivering as One

The impact of UN Reform on delivering the mandate of UNAIDS especially in countries, how it is viewed by countries, Cosponsors, donors and staff, and how this should influence the future should all be assessed. Also the impact which UNAIDS has had on UN reform at country, regional and global levels.

# g) Working with civil society

The extent to which UNAIDS has been able to provide leadership to, support, include, engage and incorporate in a meaningful way the concerns and capacities of civil society, including the private sector, and what types of functional relationships and partnerships have evolved at different operational levels should be reviewed.

# h) Gender dimensions of the epidemic

The extent to which UNAIDS has supported countries in their efforts to address the gender dimensions of the epidemic, including promoting leadership, access to information and services, and the extent to which these issues have been incorporated in national strategies and actions.

#### VI SCOPE

- 15. The Programme Coordinating Board is requested to agree that: the Second Independent Evaluation should focus on UNAIDS and its performance as a whole. This includes the Secretariat and the HIV-related work of all 10 Cosponsors. In particular it should focus on:
  - a. UNAIDS as an organizational and administrative entity in terms of its ability to deliver its agreed upon workplan (Unified Budget and Workplan);
  - b. the Secretariat's roles within UNAIDS; and
  - c. a selection of key areas (e.g. civil society engagement, GIPA, gender, and human rights), and activities of the Secretariat and Cosponsors at headquarters, regional and country levels, chosen according to their importance and prominence as defined by their impact, potential or real, on the AIDS epidemic. These may include impact on health systems strengthening, AIDS funding within the context of multisectoral services, efficacy of new institutional structures created as part of the AIDS response, country capacity to scale-up and implement AIDS plans, and logistical issues related to procurement and distribution of relevant interventions.

### **VII PROCESS**

16. Preparing the Second Independent Evaluation will necessarily require a number of key decisions concerning who exactly conducts the Evaluation. The suggestions that emerged in the preparatory survey have a direct bearing on the cost and overall management of the Second Independent Evaluation. Since the operation of the Evaluation will be technically complex and there are a number of questions with respect to the composition and background of the Evaluation Team (contractor), the Programme Coordinating Board is requested to agree that:

- a. the Second Independent Evaluation should be contracted by one or more teams that demonstrate competence, experience and sensitivity to the complexity of the process, its geographic scope and its many underlying components such as administration, financing, international relations, public health, civil society engagement, gender or human rights;
- b. the Second Independent Evaluation should be contracted to private or public sector teams, or a mix of both provided they are external to the UN system, have the capacity to work together and share responsibilities according to capacity and expertise. To the extent possible the team should have gender and geographical balance; and
- c. those involved in the Evaluation should represent organizations from different regions and constituencies, to ensure that all relevant regions and stakeholder groups, including persons living with HIV, are part of the Evaluation.

# 17. The Programme Coordinating Board is further requested to agree the Terms of Reference for the Evaluation Team as follows:

a. The Evaluation Team should be headed by a Team Leader, employed full-time for 18 months who is independent of the UNAIDS Secretariat and Cosponsors. The remainder of the Evaluation Team would comprise support staff for the Team Leader and a minimum of 10 short-term consultants for 5-7 months each. This choice is dependent upon the agreed scope of the evaluation and the number of country visits undertaken (see options under section XII on the estimated Budget).

#### b. Key responsibilities:

Team Leader: Design the overall evaluation methodology and manage a team of between 10-12 short-term consultants working on various aspects of the Evaluation. Produce quarterly reports for the Oversight Committee, a mid- year progress report for the Programme Coordinating Board and the final report according to timelines established. Direct and manage all interactions with the Oversight Committee and other administrative mechanisms. Liaise with country and regional offices to organize field visit as needed. Support for the Team Leader will be required and an administrative assistant as well as other part-time support staff are suggested.

Short-term Consultants: Under the supervision of the Evaluation Team Leader, undertake various aspects of the Evaluation. This will include reviewing all relevant documents received from the Secretariat, Cosponsors or other organizations; designing the methodology for specific country visits including rationale for choice of country; preparing and carrying out country visits according to agreed methodology; and writing up country reports. Assist in the preparation of any reports and summaries.

c. <u>Areas of Expertise</u>: one part of the Evaluation relates to assessing the various aspects of UNAIDS, and therefore requires social science and public health expertise. The disciplines considered appropriate for membership in the Evaluation Team include public health, such as epidemiology, behavioral sciences, demography and operations research, specialists in evaluation, program management, management information systems and subject matter specialists in HIV (such as, women, youth, children, Injecting Drug Users, men who have sex with men), and related public health issues. The Team is also expected to have knowledge of existing AIDS programming globally and of the international health and aid architecture in which this programming occurs.

Another aspect of the Evaluation may include an administrative evaluation of UNAIDS/WHO and UNDP procedures in support of UNAIDS. The latter would include a summary of yearly audits, a social audit and an information audit and may require the involvement of accounting firms, which have developed expertise in managerial and administrative audits.

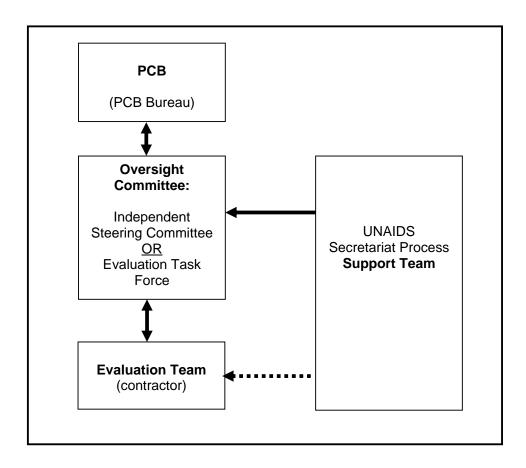
#### **VIII METHODOLOGIES**

- 18. It is recommended that the implementation of the Second Independent Evaluation should involve a variety of methodologies. With respect to these methodologies the Programme Coordinating Board is invited to agree that:
  - a. the Second Independent Evaluation comprise site visits and observations, interviews and discussion groups, desk based research and review of existing reports, such as the Unified Budget and Workplan Performance Monitoring and Evaluation Framework. The Evaluation should be performed using proven methods in standardized formats and carried out in such a way that no single methodology eclipses others;
  - b. the timing of these different methods be staggered so as to benefit from those activities that can be implemented immediately and promote efficiency regardless of location, i.e. headquarters, regions or countries;
  - the Second Independent Evaluation should draw on the expertise and experience of partners, member states and civil society and other evaluations like WHO's "3 by 5" Evaluation, Global Fund Evaluation and the Institute of Medicine's Evaluation of PEPFAR;
  - d. the results of the Evaluation should be presented as global, regional, and country analyses, including specific country case studies that highlight best practice and lessons learned. The quality of information obtained as part of these exercises also needs to be assessed and commented on; and
  - e. While the specific input from UNAIDS will be identified, based on the experience of other evaluations e.g. the Global Fund and PEPFAR, it will be very difficult, if not impossible, to attribute specific changes within countries to the work of an individual organization.

#### IX OVERSIGHT MECHANISMS

19. The role of the oversight mechanism for the Second Independent Evaluation is to ensure the independence of the Evaluation and the quality of the work performed by the Evaluation Team, through:

- Providing technical and policy advice and oversight on the work produced by the Evaluation Team;
- Identifying and working with the contracted Evaluation Team to establish priorities;
- Reviewing and providing feedback on the progress of the Evaluation;
- Management of timelines and advising the Programme Coordinating Board on strategies for dealing with time slippages;
- Managing communication between the Evaluation Team and its interlocutors;
   and
- Serving as a mediator should conflicts or questions arise between the Evaluation Team and interlocutors.
- 20. The Programme Coordinating Board is requested to decide which of the following two options should be implemented as the Oversight Committee for the Evaluation:
  - a. either an Independent Steering Committee composed of technical experts be established by the Programme Coordinating Board to guide and oversee the Evaluation. These experts would be drawn from government, academia, business, and NGO sectors, and include persons living with HIV. This model is similar to that used during the Five Year Evaluation; or
  - b. an Oversight Committee should be created from within the Programme Coordinating Board to oversee the Evaluation. This would consist of a balanced cross section of representatives of governments, Cosponsors and civil society, ensuring appropriate participation of persons living with HIV and other stakeholders. In order to broaden the technical expertise available to the Committee selected experts who are not members of the Programme Coordinating Board should be included, and in order to ensure independence, the Committee Chair should not be a member of the Board.
- 21. With respect to Option a) this would provide the widest possible population from which to select experts with the best technical knowledge and expertise. It would also strengthen the independent nature of the Evaluation. However, the selected experts may potentially have a lesser knowledge of UNAIDS itself. This would not be the case with Option B given that nominations are to be drawn from within the Programme Coordinating Board, though this option can also include relevant experts as members. However, the composition of the Board is not constant and would provide a much restricted base from which to nominate Committee members.
- 22. For both options it will be essential that the independence of the Evaluating Team and the Oversight mechanism be sustained and that each should report only and directly to the Programme Coordinating Board at regular intervals and through established channels, such as through the Programme Coordinating Board Bureau, a special Programme Coordinating Board Task Force or some other mechanism to be determined by the Board. The Secretariat will act as the contractor for the Evaluation team for the purposes of financial due diligence only. The Secretariat will also support the Chair of the Oversight Committee for logistical purposes only, including administration of the Oversight Committee's budget. The proposed structure is shown diagrammatically below:



# 23. The Programme Coordinating Board requested to agree the Terms of Reference for the Oversight Committee as follows:

- a. Membership of the Oversight Committee. For the first option the Membership of the Oversight Committee should include a range of public health practitioners, academics and other relevant technical people. For the second option, Membership of the Oversight Committee should include representatives of donor and recipient countries, UNAIDS stakeholders, including Cosponsors, Member States, civil society, while ensuring appropriate representation of people living with HIV, and relevant non-PCB experts.
- b. <u>Accountability</u>. The Oversight Committee will report directly to the Programme Coordinating Board, either via the Programme Coordinating Board Chair or the Programme Coordinating Board Bureau. It will inform the Board of any changes in scope, activities, or budget that may be required due to a change in the agreed evaluation procedures.
- c. <u>Required Expertise</u>. The members of the Oversight Committee should be characterized by high levels of credibility and relevant experience in the areas of monitoring and evaluation and data collection at the field level. In addition, they must have extensive knowledge of AIDS, including issues related to prevention and treatment interventions, as well as good knowledge

of issues surrounding UNAIDS and the United Nations in general. The disciplines considered appropriate for membership in the Oversight Committee include: quantitative and qualitative disciplines from public health such as epidemiology, biostatistics, behavioral sciences, demography and operations research, specialists in program management, management information systems, management under harsh circumstances and subject matter specialists in AIDS and related public health issues, gender, human rights and civil society engagement.

- d. Membership Selection. Based on nominations received the Programme Coordinating Board Bureau will agree the Chair and composition of the Oversight Committee. A vice chair shall be elected by members of the Committee from among its membership. Individual members should not have any conflict of interest and there should be appropriate gender and geographical representation. Committee members should have the time and commitment to participate in all meetings.
- e. <u>Tenure of Membership</u>. The members of the Oversight Committee shall serve for the period of the Evaluation i.e. from early 2008 2009.
- f. <u>Logistic Support</u>. The Chair of the Oversight Committee will be supported by dedicated members of the Secretariat. In addition, support will be available from the Secretariat to organize meetings and arrange travel and accommodation for Committee members.

# 24. The Programme Coordinating Board is requested to agree the following process for the establishment of the Oversight Committee:

DATE	ACTION
17-18 December 2007	21 <sup>st</sup> PCB meeting approves TOR for the Evaluation
21 December 2007	Email sent from Chair of the PCB to all PCB participants inviting nominations to the Oversight Committee.  Nominations must include full CV and names of two referees demonstrating eligibility against the criteria established in the TOR (see below).
11 January 2008	Deadline for submission of nominations
14-25 January 2008	Secretariat to collate and verify nominations and establish consolidated matrix of nominations, against criteria, for consideration by PCB Bureau. This will be a purely logistical exercise and will not rank nominations in any way.
31 January 2008	PCB Bureau meeting to agree Chair and composition of the Oversight Committee
1 February 2008	PCB Chair to inform PCB by electronic means of composition of Committee.

#### **Criteria for nomination to Oversight Committee**

Paragraph 23(c) suggests the required expertise for membership and this is further expanded in the membership selection criteria in paragraph 23(d). Taken together both paragraphs would suggest the following criteria:

CRITERIA	DEFINITION	
1. Technical expertise	<ul> <li>High level of credibility and relevant experience in M&amp;E and data collection at the field level</li> <li>Extensive knowledge of AIDS, including prevention and treatment interventions</li> <li>Good knowledge of issues surrounding UNAIDS and UN</li> <li>Membership of at least one of the following disciplines:         <ul> <li>Public health</li> <li>Program management</li> <li>AIDS and related public health issues e.g. gender, human rights and civil society engagement</li> </ul> </li> </ul>	
2. Gender	Self-explanatory	
Geographical distribution	Based on UNAIDS regional groups	
4. Category of stakeholder	For option 20(a) these are defined as:  Government  Academia  Business  Civil Society including PLHIV  For option 20(b) these are defined as:  Members of the PCB including governments, Cosponsors and Civil Society including PLHIV  Selected experts from outside the PCB	

The matrix produced by the Secretariat, to facilitate discussion by the PCB Bureau, would only include information as above on each nomination. The PCB Bureau would seek to establish an Oversight Committee that is either equitable in terms of the above criteria, or respecting any weighting of criteria agreed by the PCB at its 21<sup>st</sup> meeting.

# **Composition of the Oversight Committee**

The paper suggests an optimum membership of the Committee of 10 (para.28). It is suggested that, when considering all nominations received, the PCB Bureau may revise this figure up or downwards, on the understanding that it will provide justification for such a decision in the communication of the PCB Chair to the PCB of 1 February 2008.

#### X ROLE OF THE SECRETARIAT IN THE EVALUATION

25. Given the complexities of the above activities in terms of timing and organization, dedicated members of the Secretariat should be identified to provide the Evaluation Team and Oversight Committee with appropriate logistic support, such as organizing meetings, travel and accommodation, as necessary. To ensure the independence of this process the Secretariat will not be directly involved in the Evaluation itself.

### XI TIMELINE

26. The Second Independent Evaluation will be conducted in 2008 with completion by the end of 2009. Final reporting is planned to the fall meeting of the PCB in 2009. The Programme Coordinating Board is invited to agree the following timeline:

DATE	MILESTONE/DELIVERABLE	RESPONSIBLE PARTY
PREPARATION OF THE TENDER		
PCB 21 <sup>st</sup> meeting: 17-18 December 2007	Draft Terms of Reference for Second Independent Evaluation is presented for approval by the PCB	PCB Bureau
21 December 2007	Call for nominations, through the PCB Chair, for membership of the Oversight Committee	PCB Chair
11 January 2008	Deadline for submission of nominations for membership of Oversight Committee	PCB Chair
15 January 2008	Draft tender is finalized including criteria and methods for evaluating the bids	PCB Bureau with logistics support from the Secretariat
28 January 2008	Chair and members of the Oversight Committee are identified and appointed	PCB Bureau
15 February 2008	Tender for the Evaluation Team presented to the PCB, through the PCB Chair, for approval by electronic means	Oversight Committee

DATE	MILESTONE/DELIVERABLE	RESPONSIBLE PARTY
TENDER PROCESS	3	
7 March 2008	Tender disseminated: deadline for receipt of bids on 4 April 2008	Oversight Committee
11 April 2008	Summaries of the bids provided to PCB Chair and PCB Bureau for review	Oversight Committee
PCB 22nd meeting: 23-25 April 2008	Recommendation on the bids presented with a view to deciding on the winning bid	PCB Chair in conjunction with Oversight Committee

DATE	MILESTONE/DELIVERABLE	RESPONSIBLE PARTY
EVALUATION PRO	CESS	
15 June 2008	Detailed plan of work for the Evaluation delivered to the Oversight Committee	Winning bidder (Evaluation Team)
1 July 2008	Core parts of the evaluation (selection, compilation and content analysis of selected documents) begins	Evaluation Team

30 August 2008	All methodological and logistical aspects of the Evaluation completed and reported to the Oversight Committee	Evaluation Team
From 1 October 2008	Regular bi-weekly reporting to the Oversight Committee on progress, delays and any problems encountered	Evaluation Team
PCB 23 <sup>rd</sup> meeting: 15-17 December 2008	Mid year progress report on the Evaluation presented	Evaluation Team
10 May 2009	First drafts of selected parts of Evaluation report submitted to Oversight Committee	Evaluation Team
31 May 2009	Draft Evaluation report submitted to the PCB Bureau	Evaluation Team
PCB 24 <sup>th</sup> meeting: June 2009	Draft Evaluation Report presented	Evaluation Team
PCB 25 <sup>th</sup> meeting: December 2009	Final Report of the Second Independent Evaluation presented	Evaluation Team
PCB 26 <sup>th</sup> meeting: June 2010	Presentation of UNAIDS response to the Evaluation to the PCB with recommendations for decision by the Board	Executive Director

#### XII BUDGET

- 27. The following estimates are based on the First Evaluation of UNAIDS, the recent WHO-sponsored 3x5 Evaluation and the evaluation of the Global Fund (USD 1.7 million, USD 2.1 million and USD 17 million respectively). The estimated range for the total cost of the Evaluation is USD 1,700,800 USD 2,563,600.
- 28. The proposed budget assumes that a 10-person Oversight Committee will meet four times during the course of the Second Independent Evaluation. The Programme Coordinating Board is requested to approve the budget for the Oversight Committee as shown below:

OVERSIGHT COMMITTEE:	Estimated Cost (USD)
Meeting costs – room rental, interpretation, report writing, technical support e.g. microphones	100,000
Travel (10 people for 4 meetings – flights only @ \$3,000 flight per person)	120,000
Per diem (10 people, 4 meetings of 2 days each @ \$300 per day)	48,000
Support costs – short term consultant to provide technical assistance	80,000
Unforeseen	40,000
Publication, translation and dissemination costs	100,000
TOTAL:	488,000

29. The Programme Coordinating Board is further requested to approve the infrastructure budget for the Evaluation Team as shown below (to this the costs of country visits needs to be added):

EVALUATION TEAM:	Estimated Cost (USD)
Evaluation Team Leader full time 18 months	180,000 – 250,000
Support staff for Team Leader and Team	200,000 - 300,000
Travel <sup>1</sup> (8 missions – flights only @ \$3,000 flight per person)	24,000
Per diem (8 missions of 2 days each @ \$300 per day)	96,000
TOTAL:	500,000 - 650,000

- 30. As referred to in the methodologies section the Evaluation will include a number of country visits. These should provide adequate representation throughout the different regions with an emphasis on strategic choice, and should be representative of generalized and concentrated epidemics, high and low prevalence countries, humanitarian settings, have geographical variation and include at least one "One UN" pilot country.
- 31. The Programme Coordinating Board is requested to decide how many country visits should be included and agree the related budget. Three options are costed below for 8, 12 or 16 country visits, respectively:

8 country visits:	Estimated Cost (USD)
Short term consultants (10 persons)	300,000
Travel (3 people for 14 days @ \$300 per day + \$3,000 flight per person – USD 21,600 per country visit)	172,800
In-country costs (USD 30,000 per trip)	240,000
TOTAL:	712,800
12 country visits:	Estimated Cost (USD)
Short term consultants (15 persons)	450,000
Travel (as above)	259,200
In-country costs (USD 30,000 per trip)	360,000
TOTAL:	1,069,200

<sup>&</sup>lt;sup>1</sup> Travel is foreseen for stakeholder interviews, attendance at meetings e.g. the Programme Coordinating Board, and others, as necessary.

16 country visits:	Estimated Cost (USD)
Short term consultants (20 persons)	600,000
Travel (as above)	345,600
In-country costs (USD 30,000 per trip)	480,000
TOTAL:	1,425,600

[Annex 1 follows]

### ANNEX 1

# Conclusions and summary of recommendations of the Five Year Evaluation of UNAIDS<sup>2</sup>

- Evaluation against any objectives begs the question how realistic those objectives are? The ECOSOC objectives are loosely worded as activities and there is no sense of the time-scale involved. That said, the Joint United Nations Programme on HIV/AIDS has been fully successful in one of the six ECOSOC objectives and made progress towards all the others. It is probably realistic that achievements have been greatest at global level and in those areas under the direct influence of the Secretariat. With support from the UN system, countries have developed multisectoral programmes and achieved broad-based political and social mobilization. There has been less progress in formulating a joint response by the cosponsors to help countries develop capacity and implement their strategies.
- Conclusions are presented firstly, against the ECOSOC objectives, secondly, by UNAIDS functional areas and thirdly, in the context of expectations of the joint programme. A summary of recommendations follow, with full details in Chapter 8.

# Progress towards the ECOSOC goals

23 Six goals were set out in ECOSOC resolution 1994/24. The performance of UNAIDS is summarized against each of these in turn.

To provide global leadership in response to the epidemic. <u>Successful</u>. A broad constituency of stakeholders find leadership in UNAIDS. The personal performance of the Executive Director, response by development agencies to the global strategy and endorsement by political and business leaders after UNGASS, all support this judgement.

To achieve and promote global consensus on policy and programme approaches. Mostly successful. Advocacy about the need to strengthen and increase response has been effective. The global strategy framework is widely accepted outside the UN agencies. But more work is needed to clarify the operational meaning of an expanded response, over the handling of issues such as MTCT and ART and to tackle sensitive issues such as MSM and IDU.

To strengthen the capacity to monitor trends and ensure that appropriate and effective policies and strategies are implemented at the country level. Partly successful. Good progress has been made with statistics of prevalence, but much less on behavioral change and knowing what interventions work and under what circumstances. A new system to monitor country response shows potential, but it needs developing to provide objective measures of the nature and scale of response.

To strengthen the capacity of national governments to develop comprehensive national strategies and implement effective HIV/AIDS activities. Partly successful. National level strategies have been developed, but their translation into meaningful plans at sectoral and sub-national level needs more attention. The diverse and often

<sup>&</sup>lt;sup>2</sup> "Five-year Evaluation of UNAIDS – Final Report of 8 October 2002" http://www.unaids.org/en/AboutUNAIDS/Governance/13th\_PCB\_meeting\_Lisbon\_20021211-12.asp

sensitive nature of the changes that HIV/AIDS mainstreaming involves, and the difficulty of budgeting for such fluid changes, have been underestimated. Where new institutional structures were created specifically to deal with HIV/AIDS the process has been complex, and therefore slow. The UN does not yet demonstrate added value in this role. Integrated work plans reveal a lack of clarity about the UN support role alongside that of OECD donors.

To promote broad-based political and social mobilization to prevent and respond to HIV/AIDS. Partly successful, although this process is one that needs continual emphasis and renewal. The work of UNAIDS to bring civil society, PLWHA and the private sector into dialogue with government has been an outstanding achievement. Efforts to support social mobilization of important groups such as the churches have only recently started.

To advocate greater political commitment at the global and country levels including the mobilization and allocation of adequate resources. Mostly successful at global and partly successful at country levels. Advocacy has been a strength of the Secretariat in particular. Global commitment has come via UNGASS and the UN Security Council. Commitment at national levels can be fragile and needs constant renewal. Tangible examples of local good practice have helped, and can be promoted more. A substantial commitment of global resources has been achieved, possibly sevenfold on previous levels, but mainly during the past eighteen months. This has the potential to re-establish spending per HIV-infected person at levels not seen since the 1980s but depends, crucially, on country capacity to scale-up and implement.

#### Relevance of ECOSOC goals

In general the ECOSOC goals remain relevant. But their structure and phrasing are counter-productive to efforts to improve performance and accountability. The goal should be revised, to create a simple, clear and measurable objective that will drive the work of the programme and towards which roles and functions can be defined. A proposed new wording forms the first recommendation from this evaluation.

#### Achievements in the functional areas

- The advocacy work of UNAIDS has been innovative, flexible and adaptive. New types of partnerships have been formed, horizontal learning has been developed into a powerful tool and diverse groups such as PLWHA, Civil society and businessmen have been brought into the process. Success at consolidating and presenting the epidemiology of the disease underpinned a strong policy narrative about the scale and threat to development. Relatively little emphasis has been given to sponsor research to evaluate the relevance and effectiveness of HIV/AIDS interventions. Prevention and control efforts are constrained by lack of evidence of effectiveness of interventions.
- The Best Practice Collection of information about HIV/AIDS has extensive visibility and 'name recognition' around the world. Good though the material is, there remain limitations in language availability and the logistics of distribution hinder dissemination. Users would like more texts that tackle the response from a 'how to' perspective, in ways that will support scaling up. The programme has not yet met the challenge of understanding and disseminating how to stimulate behaviour change and develop effective implementation. Prevention programmes face the very difficult challenge of having to change sexual behaviour. Why such programmes rarely succeed is not well understood. This is a major area for work in the future.

- Direct technical support to countries is criticized as less accessible than under the GPA. Capacity building has a strong 'project' orientation and the evidence is that it has been hard to extend to a wider audience. Support for national strategic planning is more visible than to help country implementation. Because so much implementation hinges on the skills and resources of grass-roots organizations, clear analysis during formulation of UNDAF or integrated workplans is needed to understand how UNAIDS can give support at that level. This will become an over-arching priority as the newly committed funds become available to scale-up the response. A challenge for UNAIDS is to find a new balance between its advocacy role and its functions in information provision, capacity building and technical support.
- Coordination activities of the Secretariat at global level have been effective and were instrumental in bringing consensus over policy and programming. At country level the influence of the UNAIDS Secretariat is less, is dependent on the talent of the CPA and his or her colleagues in the UNAIDS country office, and the disposition of the cosponsors' representatives. In this setting, coordination has been less effective. A number of institutional features contribute to this judgment: the uncertain accountability of the theme groups, both as UN entities and in their expanded form; the absence of objectively monitorable targets for the theme groups; the limited influence of the PROGRAMME COORDINATING BOARD over country-level activities and the lack of any incentives for the cosponsors to develop a genuinely integrated approach.

#### Meeting expectations

- An indication of expectations can be gained from the results of a WHO-led working group to examine the creation of the joint programme, reported in 1993. The driving imperative behind the creation of UNAIDS was to reinforce national capacity to respond to the epidemic. Expectations were that the joint programme would:
  - a) reduce duplication of effort and ensure consistency among organizations of the UN system, with regard to strategic, policy and technical matters. The assessment is that duplication of effort is being overcome and consistency among organizations of the UN system has greatly improved. Yet the negotiating approach of the present arrangements is not effective. Greater coherence is still to be achieved through better integration with the expanded response at country level.
  - b) provide governments with a clearer, more comprehensive view of the financial and technical support available from UN organizations.

    Very little progress has been made towards a clearer view of support available from the UN. The mechanisms that do exist, the Integrated Workplan and UN Development Assistance Framework, are judged to lack strategic perspective and are not responsive to country needs. Financial information is opaque and very difficult to access. But visibility of financial assistance was found to have improved in countries that participate in the Multi-Country AIDS Programme (MAP).
  - c) strengthen national capability to determine and coordinate a multisectoral response.
     National capability to coordinate a multisectoral response has been strengthened. However the difficulty of strengthening capability across sectors requires more attention.
  - assist governments to coordinate the activities and support of bilateral agencies, which would probably follow the technical and policy consensus of the UN system.
    - The extent to which governments and OECD bilateral donors look to the UN to provide coordination varies among countries. Donors do welcome national

- HIV/AIDS strategies as an organizing framework for their support, and governments acknowledge UN facilitation in their preparation. Governments prefer their own forums for donor relations, and so do donors.
- e) ensure the joint formulation of and resource mobilization for a single global appeal and coordinated fund-raising at country level.

  The institutional structure set up for UNAIDS prescribed fund-raising at country level to be undertaken by existing fund-raising mechanisms of the cosponsors.

### Summary of recommendations

The recommendations made by the evaluation are set out in full in Chapter 8. Each recommendation includes a brief preamble to explain the context and for most there is a cross reference to the analysis in the main report. All are directed to the PROGRAMME COORDINATING BOARD, with specific mention when addressed to other parties. They are grouped under a number of headings dealing with strategic vision, governance and functions.

# Strategic vision

- Four recommendations deal with high level issues concerning the overall role of the programme.
  - To replace the six current ECOSOC objectives by a single goal
  - To redefine the roles of the programme with more specific allocation of responsibility
  - To establish a clear relationship with the Global Fund to Fight AIDS, TB and Malaria
  - For the UN Secretary General and UNDG to build on the lessons of UNAIDS when framing proposals for further UN reform

#### Governance

- 32 Five recommendations deal with issues of governance. Two are major:
  - For the Programme Coordinating Board to examine proposals in Annex 7 to this evaluation for a model of 'expanded governance' and implement proposals, particularly changes to transform the CCO into a management board
  - To draw up a new Memorandum of Understanding for the Secretariat and cosponsors with clear and monitorable objectives for each party
- 33 Three deal with procedural aspects concerning Programme Coordinating BOARD operations, including the voting status of Civil society, links to the governing bodies of cosponsors, and Programme Coordinating Board meetings.

### Functional aspects – global advocacy, strategy and resource mobilisation

- Five recommendations address functions at the global level. One is to maintain the essential and successful role of UNAIDS in global advocacy. A second is a major expansion of emphasis:
  - For the Secretariat to expand current work on information management as part of its core coordination service to all actors dealing with HIV/AIDS
- 35 The other three deal with features to support the information role: to promote more evaluation and research studies into behavioral change and impact; to develop the Country Response Information System to more closely match the elements of an

expanded response and to continue to develop the UBW, with improved data about plans at country level.

### Functional aspects – regional and cross border

One recommendation is given to continue to support regional initiatives that are demand-driven by the needs of countries in the region.

# Functional aspects – country humanitarian response, management of UNAIDS and capacity building

- 37 Shifting the focus of effort onto the country level is the primary message from this evaluation. Thirteen recommendations are constructed to help this change. The first is to recognize the crisis levels of infection being reached in some countries and start to prepare for a humanitarian response under which the UN may be able to give more effective support. Four recommendations deal with complementary issues of financial management:
  - For the cosponsors to adopt high standards of transparency and reporting for budgets and expenditure to set a standard for government and help all stakeholders engage in policy debate
  - For HIV/AIDS to be reviewed under medium-term expenditure frameworks
  - For a more explicit link by both OECD bilateral spending and that of the cosponsors to the national strategic plan
  - To continue with the PAF facility
- Three recommendations support the continuation of the CPAs and expanded theme groups. Two recommendations are designed to foster more and better evaluations at country level, including the idea of holding joint reviews that look at performance in terms of national outcome objectives.
- To support the substantive work of the programme three recommendations argue for expanded advocacy, adoption of a more facilitatory role in capacity building and increased support to help countries plan for and implement scaling-up.

# Future evaluation

One final objective is addressed to the MERG to develop a programme of evaluation studies as part of a structured process leading to a second evaluation of UNAIDS after five years.

### **ANNEX 2**

# SURVEY FINDINGS AND IMPLICATIONS FOR THE SECOND INDEPENDENT EVALUATION

**Joint Programme**. The Joint Programme must be viewed as a single operational entity composed of Secretariat (Geneva, Regional Offices and, Country level) and Cosponsors. However, for the purposes of the evaluation there must also be an attempt to disaggregate entities and inter-relationships.

Role of Joint UNAIDS Programme in 2000. Overall, the perceived role of the Joint UNAIDS Programme in 2000 was (a) coordination, (b) advocacy, (c) leadership in policy formulation, (d) identification of new directions, and (e) promotion of new norms and standards. There was general agreement that the decision by the secretariat to engage in country-level activities has added work to initially defined responsibilities.

Role of Joint UNAIDS Programme in 2007. There was agreement that major changes have occurred in the "landscape" of HIV/AIDS since 2000 with implications for the function of the Joint UNAIDS Programme. New actors, including the Global Fund, PEPFAR and Gates Foundation, national and international NGOs have introduced new options but also challenges such as scope for duplication and increased "transaction" costs.

**ECOSOC Resolution.** There was agreement that the ECOSOC Resolution creating the Joint UNAIDS Programme should be "revisited" and assessed for its relevance in the current environment of new partners and changed responses.

**Intensity of the HIV threat.** Most respondents felt that the threat posed by the pandemic is possibly greater today than it was in 2000, but that the nature of it has possibly changed. There was a feeling that even more resources are needed, especially, but not only in view of the capacity and demand for anti retroviral treatment. The link to TB and malaria was highlighted.

**Timing.** Although a decision has been taken by the Programme Coordinating Board that the Second Independent Evaluation should be conducted in 2008, a number of questions and suggestions were made with respect to the specific timing of the evaluation in 2008. The fact that the Global Fund evaluation is on-going and will have interim reports available by early 2008 (May) prompted suggestions that the Second Independent Evaluation wait until those reports are available.

**Focus of the evaluation.** There was a desire to see the relationship of the Joint Programme to other "actors" addressed, including the interaction between Cosponsors themselves. Headquarters, regional and country levels were highlighted by most people and there was also considerable agreement that the operational and administrative functions of the Joint Programme be addressed including issues such as staff assignments and functions, and internal communication efficiency.

**Administrative Evaluation.** The administrative issues are essentially those of the yearly financial audit plus those other administrative activities that affect daily life of workers in an organization. Interviews and observations indicate that administration is

going to be an important element in this overall effort and will have potentially tremendous impact on future functioning.

**Other areas of particular interest.** The "internal efficiency" of the Joint Programme was raised together with the value added of the current form and function of the Joint Programme in light of other new actors. Issues of coordination, consistency and compatibility of Cosponsors were highlighted together with concerns about duplication of "core support" to the Joint Programme as well to the Cosponsors at country level.

**Joint Programme performance since the first evaluation.** How the Joint Programme has been able to respond to the recommendations of the first evaluation needs to be addressed. It is also necessary to determine what the facilitating factors and obstacles were to implementing the actions proposed and hence the success of the Joint Programme since 2002.

**Success stories in scaling up and moving the response.** Describing how the Joint Programme has been able to scale up its work, its mobilization and the global response to the pandemic will be important and will provide an important insight into the types of actions that have led to changes in how the pandemic and its implications are viewed.

**Joint Programme and Civil Society.** Civil society, including the private sector has become increasingly committed to the fight against AIDS and has developed a valuable body of expertise. It will be important to determine how and to what extent the Joint Programme has engaged civil society, supported its participation and involved it as an equal partner.

**Keeping the evaluation independent.** This emerged as a major concern and options were proposed, including establishment of a Steering Committee made up of people not in the UN, not involved with UNAIDS directly or indirectly. Quality assurance at the field level was stressed. Suggestions were made on reporting structures and procedures.

**Conduct of the evaluation.** There was agreement that the evaluation will require a mix of methods including country and regional offices visits, face-to-face interviews, reviews of published and un-published reports, and case studies.

Who should be invited to participate. There was a desire to see the Second Independent Evaluation be as broad as possible and in keeping with the mandate of a process or formative evaluation we believe that the target population or denominator for those judging the UNAIDS process include all individuals at the Secretariat, regional, and national level who have had contact or worked with UNAIDS and are impacted by their activities e. g. national level managers of HIV-AIDS intervention programs, Civil society and private sector entities working in the HIV-AIDS area, bilateral organizations working at the international and local levels and members of the UN community over a five-year time frame.

What should come out of the evaluation. The most consistent theme to emerge with respect to the final outcome was the need for greater clarity as to the role of the Joint Programme in a changed environment in which approaches to the disease have changed but in which the amount and type of resources have grown and more actors become involved. The need for recommendations that can guide the Joint Programme in the coming years are essential, and these should address priorities and relationships with other actors, especially but not only, the Cosponsors.

#### **ANNEX 3**

# **Consultations, Group and Individual Interviews**

#### **Programme Coordinating Board Bureau Meeting**

Prangtip Kanchanahattakij, Representing PCB Chair, Mission of Thailand David Hohman, Representing PCB Vice-Chair, Mission of the USA Mamadou Seck, Representing PCB Rapporteur, Mission of Senegal Paul Spiegel, Representing Co-sponsors, Head of HIV Unit, UNHCR Zonibel Woods, Representing Civil society, NGO Alternate for North America

#### **NGOs**

Mary Balikungeri, Rwanda Kusum Bhawani Shanker, India James Clovis Kayo, Cameroon Mercy Machiya, Zimbabwe Rachel Ong, China Paulo Vieira, Portugal Zonibel Woods, USA Sandra F. Batista, Brazil
Vincent Crisostomo, Thailand
Gulnara Kurmanova, Kyrgyzstan
Michael O'Connor, Canada
Gracia Violeta Ross Quiroga, Bolivia
Sonja Weinreich, Germany

Vitaly Zhumagaliev, Russian Federation

#### Cosponsors

Monica Beg, UNODC Christopher Castle, UNESCO Kevin M. Decock, WHO Robin Jackson, WFP Jimmy Kolker, UNICEF Christian Kroll, UNODC Susan Leather, ILO Imadeldin Osman-Salih, WFP Nadia Rasheed, UNDP Elizabeth Benomar, UNFPA
Thilly De Bodt, UNICEF
Julian Fleet, UNDP
Sophia Kisting, ILO
Steve Kraus, UNFPA
Kerry Kutch, WHO
Elizabeth Mziray, The World Bank
Gebrewold Petros, UNHCR
Paul Spiegel, UNHCR

# **Country Representatives Interviewed:**

Cote d'Ivoire, Rwanda, Uganda, Cambodia, Canada, Croatia, Chad, Netherlands, Norway, Sweden, United Kingdom, United States of America

### **Persons and Affiliations Interviewed:**

Paul Bekkers, AIDS, Netherlands Mark Dybul, OGAC, USA Michel Kazatchkine, Global Fund Purnima Mane, UNFPA, New York Sigrun Mogedal, MFA, Norway Angela Spilsbury, DFID, UK Richard Burzynski, ICASO, USA Lena Ekroth, SIDA, Sweden Debbie Landey, UNAIDS, Geneva Bhatupe Mhango, UNAIDS, Geneva B. Schwartlander, Global Fund, Geneva Ken Yamashita/Kent Hill, USAID, USA

Diakhoumba Gassama, African Union Commission

#### **Permanent Missions in Geneva:**

Algeria Angola Argentina
Australia Austria Belgium
Belize Bosnia-Herzegovina Burkina Faso
Canada Chile Colombia
Cote d'Ivoire Czech Republic Denmark

Djibouti El Salvador European Commission

Finland France Gabon
Germany Greece Guatemala

Holy See Indonesia Iran Ireland Israel Italy Japan Kazakhstan Libya Morocco Luxemburg Mexico Mozambique Nepal Monaco New Zealand Netherlands Norway Panama **Philippines** Poland

Portugal Republic of Congo Republic of Guinea
Republic of Korea Romania Saudi Arabia
Senegal Singapore Slovakia
South Africa Sweden Switzerland
Thailand Turkey Ukraine

United Kingdom United States of America Zimbabwe

#### **ANNEX 4**

# Outline of the Terms of Reference for the Second Independent Evaluation of UNAIDS<sup>3</sup>

# I. Background

UNAIDS is a joint and cosponsored programme bringing together ten organizations in the UN family: UNICEF, UNDP, UNFPA, UNDCP, UNESCO, WHO, the World Bank, UNHCR, UNODC and WFP. The Cosponsors are coordinated through the assistance of a Secretariat, based in Geneva. UNAIDS is governed by a Programme Coordinating Board (PCB), with representatives of 22 governments from all geographical regions, five representatives of nongovernmental organizations including people living with HIV/AIDS, and the ten Cosponsors. The Cosponsors also meet separately as a Committee of Cosponsoring Organizations (CCO). At national levels, UNAIDS Theme Groups oversee the Programme, with the assistance of a UNAIDS Country Coordinator (UCC) in approximately 85 countries.

The Second Independent Evaluation will cover a period (2002-2008) in which the AIDS epidemic, and the global response to it, has changed considerably. The pessimism that faced the world during the first twenty years of the epidemic has diminished somewhat in the face of much improved treatment and signs that prevention efforts are beginning to have an impact, even in some of the hardest-hit regions of the world. Meanwhile, the response by the international community has been strengthened and financial and human resources allocated to this response have increased significantly. The number of interested parties, stakeholders and groups responding to the challenge has expanded and major new "actors" have appeared, including the Global Fund to Fight AIDS, Tuberculosis and Malaria, the U.S. President's Emergency Plan For AIDS Relief (PEPFAR), the Bill and Melinda Gates Foundation, the William H Clinton Foundation, UNITAID and other key partners. There is also the new dimension, since the last evaluation, which relates to efforts towards UN reform. Despite these developments, the threat posed by the pandemic remains as large, if not larger, today than it was in 2000.

#### II. Purpose

The purpose of this Evaluation is to assess whether UNAIDS has met expectations in terms of increasing attention to the social, economic and developmental issues associated with the spread of AIDS and strengthening interagency collaboration in response to the challenge. The Evaluation will examine the following specific questions<sup>4</sup>:

- The evolving role of UNAIDS within a changing environment
- Governance of UNAIDS
- The response to the Five Year Evaluation of UNAIDS
- The interaction between Secretariat, Cosponsors, Agencies and Countries
- The administration of the Joint Programme
- The impact of UN Reform Delivering as One
- Working with civil society
- Gender dimensions of the epidemic

<sup>&</sup>lt;sup>3</sup> This text is intended to be indicative only and may change

<sup>&</sup>lt;sup>4</sup> Questions to be addressed by the Evaluation are contained in paragraph 14 of the PCB document and are for decision by the Board before inclusion in the TOR

#### III. Scope

The Evaluation will cover global, regional and country levels, and will address its conclusions at global level. While country-specific conclusions may be made as part of individual country studies, the Evaluation will identify lessons and conclusions that are of value to UNAIDS as a whole. Specifically, the evaluation will focus on: [text to be taken from PCB document – paragraph 15]

#### IV. Client

The PCB is the body mandated to act upon the results of the Evaluation and initiates the Evaluation and receives its results. The PCB has formal responsibility for mandating the Oversight Committee and the Evaluation Team, reviewing the process of the Evaluation, receiving and disseminating the results of the Evaluation, and carrying out follow-up actions as it sees fit.

### V. Impartiality and Independence

The Evaluation should to be independent and impartial while providing opportunities for the involvement of key stakeholders within a simple and clear organizational framework. The management arrangements are intended to ensure transparency, impartiality and credibility, while simultaneously fostering a learning environment in which the Evaluation findings will be linked to future policy and programme development within UNAIDS at all levels.

# VI. Organizational arrangements

The Evaluation will be overseen by an oversight mechanism the structure, composition and role of which will be discussed by the PCB with reference to paragraphs 19-24 of the PCB document.

#### VII. Process

The process to be adopted by the Evaluation Team will be determined by a decision of the PCB on the methodologies to be followed (paragraph 18), including site visits, use of experts, references to other evaluation reports, interviews with stakeholders, and the number and type of country visits to be undertaken (paragraphs 30 and 31 of the PCB document).

#### VIII. Outputs, Reporting and Dissemination

Outputs will include: inception report, dissemination and follow-up plan, evaluation report and, a short, separate evaluation summary written for broader, non-technical audiences.

#### IX. Indicative Timetable

A proposed timetable for the Evaluation is shown in paragraph 26 of the PCB document and will be inserted subjected to agreement by the Board.

# X. Personnel Specification

The composition and required expertise of the Evaluation Team is suggested in paragraph 17 of the PCB document and will be inserted subjected to agreement by the Board.

#### XI. Risks and Assumptions

These will include: action on follow-up to evaluation outcomes; willingness of stakeholders to participate; dispute resolution; shared understanding on scope and depth of evaluation; availability of data; and, time delays. All risks will be agreed and monitored by the Oversight Committee.

# XII. Resources (Provisional Estimates)

A range of budget options is presented in paragraphs 27-29 and 31 in the PCB document and are subject to agreement by the Board. The PCB may agree to review and approve the total budget submitted by the Oversight Committee, to a maximum not exceeding [USD 2,563,600]

Figure 1.. Management structure for the Evaluation [to be taken from PCB document]

Attachments: background documents as necessary, to include: ECOSOC Resolution 1994/24 and Five-year Evaluations of UNAIDS Final Report of 8 October 2002