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**Second Independent Evaluation 2002-2008
Short Summary**

Second Independent Evaluation of UNAIDS

Short Summary

This report presents the findings, conclusions and recommendations of the Second Independent Evaluation of the United Nations Joint Programme on HIV/AIDS (UNAIDS). UNAIDS is a joint programme cosponsored by ten UN agencies and governed by a Programme Coordinating Board (PCB).¹ Covering the period 2002 to 2008, the evaluation examines efficacy, effectiveness and outcomes. It is organised around 12 sets of questions designed to assess the performance of the UNAIDS Secretariat, cosponsors and the PCB. The evaluation was based on a review of documentation; interviews with joint programme staff and a wide range of global stakeholders; meetings with regional staff; and visits to 12 countries in different regions of the world including meetings with national government and civil society stakeholders.

Main conclusions

UNAIDS has responded to some aspects of the changing context but has been less successful at managing changes in the governance and management of the joint programme. Whilst it has a low level of efficiency in the way accountability and performance are managed, UNAIDS remains highly relevant and has been effective in some key areas of its mandate.

UNAIDS has been *successful* in working towards its original ECOSOC objectives of global leadership and broad-based political and social mobilisation. It has been *mostly successful* in advocating greater political commitment at global and country level; and *partly successful* in promoting and achieving global consensus in policy and programmes and in strengthening capacity at country level.

Findings from the evaluation

The joint programme has adapted to the emergence of new development partners and changes in funding sources and resources available for HIV and AIDS over the evaluation period; it has forged working partnerships with new bodies such as the Global Fund to Fight AIDS, TB and Malaria; and exploited synergies with partners.

Capacity within UNAIDS has increased markedly through expansion of secretariat and cosponsor staff. Initiatives to create a division of labour to reduce duplication and overlap show signs of promise at country level, but have had limited impact globally. In the early days of UNAIDS there were high ambitions for the joint programme to lead the way on UN reform. Efforts to improve effectiveness of the joint programme are held back by incentive structures for accountability and management of funding within the UN that militate against joint working. Little further progress will be seen towards efficient and effective joint programmes at country level without more fundamental reforms in financing and accountability, and recognition of joint working in individuals' performance assessments.

The PCB is an innovative body that has successfully provided an opportunity for civil society to influence the work of the joint programme. But it has not developed the necessary linkages with the governing bodies of the cosponsors to ensure effective joint working. A forward-looking orientation in the work of the PCB has left performance and accountability of the cosponsors and secretariat poorly defined and monitored. Management systems in the secretariat have not kept pace with the expansion of staff, and inefficiencies remain, such as having two separate administrative systems linked to WHO and UNDP.

¹ The ten cosponsors are UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, ILO, UNESCO, WHO and World Bank

Increasing involvement of civil society and people living with HIV (PLHIV) has been a key achievement and is a unique feature of UNAIDS. Civil society influence at global level is clear, but it is harder to find good examples at country level. The Executive Director and secretariat have provided good leadership on HIV and human rights and have spoken out on issues of gender and HIV. But in all these areas there has been a lack of consensus and a common approach across the secretariat and cosponsors.

UNAIDS' leadership and support for effective HIV prevention policies and programmes has been inadequate. Debates have been characterised by ideology and differing perspectives between donors, UN agencies and civil society organisations. HIV prevention is acknowledged to be complex, but evidence of what works has not been comprehensively applied and much expenditure has been directed towards prevention activities that are not well targeted. More recently, UNAIDS has recognised the need for better evidence and to ensure that this evidence informs country decisions about prevention policies and programmes.

Provision of technical support is highly valued by recipient countries and there are examples of excellent work. But there is scope for better coordination to reduce duplication.

Looking forward

A number of issues concerning future directions for the programme are explored in the report. The concept of AIDS 'exceptionalism' is still valid, given the specific factors that drive the epidemic and influence the response, and the impact of HIV in some regions, but a more nuanced approach is required that recognises the diversity of epidemics and configures support to country circumstances.

The continuing epidemic shows that UNAIDS' work is far from over but a fresh approach is needed to match UN support more closely to country needs and to improve the cost effectiveness of support by the secretariat at all levels. UNAIDS needs a leaner secretariat, better governance and a clearer direction in view of the diversifying epidemic and changing aid architecture. More measurable objectives for the secretariat and cosponsors should be supported by effective oversight by the PCB.

The current global financial crisis appears likely to affect countries' abilities to sustain and expand treatment services and increase coverage with prevention services. But it may also bring opportunities to examine efficiency and effectiveness. An important role for UNAIDS will be to work with countries and donors to ensure that prevention efforts are well targeted and to ensure an appropriate balance of resource allocation between prevention, treatment, care and support.

There is recognition of the need to strengthen health systems to deliver HIV treatment, but UNAIDS will need to maintain leadership and advocacy for a multisectoral approach that involves relevant sectors in HIV prevention. The report also highlights the need for the programme to provide stronger global leadership and coordination on human rights and gender.

A total of 24 recommendations grouped in five categories are designed to make UNAIDS more focused, more strategic, more flexible and responsive, more accountable and more efficient. The first is an overarching recommendation to the PCB: To develop a new mission statement with measurable and time-bound objectives supported by a new strategic plan which clarifies how the joint programme will position itself to re-focus support at regional and country level to reflect the epidemic context and country needs.