



UNAIDS/PCB(18)06.6
12 May 2006

18th Meeting of the UNAIDS Programme Coordinating Board
Geneva, Switzerland
27–28 June 2006

Provisional agenda item 3:

Effectiveness of multilateral action on AIDS
Harmonized support to scaling up the national response

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¹ Not all Global Task Team recommendations match with the Three Ones since some of them address specific UN reform issues (under heading 3. Reform for a more effective multilateral response).

Introduction

This report to the UNAIDS Programme Coordinating Board provides a brief progress overview of the implementation of the “Three Ones” with a special focus on the multilateral contribution to the applying these principles, namely through the Global Task Team recommendations. The report identifies a number of challenges to achieve more harmonized, aligned support to national AIDS responses as they scale up towards universal access. It also focuses on technical support, division of labour and accountability issues. Finally the PCB is requested to endorse further actions to strengthen consolidated application on the “Three Ones” principles and the Global Task Team outcomes.

The “Three Ones” were developed as a set of guiding principles for improving coordination of national AIDS interventions. Country-level implementation has since been supported by UNAIDS and international partners. The global review meeting on 9 March 2005, entitled “Making the Money Work:

The “Three Ones” principles

One agreed AIDS action framework that provides the basis for coordinating the work of all partners.

One national AIDS coordinating authority, with a broad-based multisectoral mandate.

One agreed AIDS country-level monitoring and evaluation system.

The ‘Three Ones’ in Action”, initiated the Global Task Team process, which in turn produced a report in June 2005 with recommendations on how the United Nations, the Global Fund to Fight AIDS, Tuberculosis and Malaria, and other international partners can support realization of the “Three Ones” and improve implementation of donor-funded AIDS programmes. That report was the basis of implementation plans and a number of concrete actions described in this report. These processes are clearly linked to

general UN reform and Development Assistance Committee of the Organisation for Economic Co-operation and Development “Aid Effectiveness” processes. The Paris Declaration clearly expresses the commitment by developed and developing countries to take concrete and effective action to address the “insufficient integration of global programmes and initiatives into partner countries’ broader development agendas, including in critical areas such as HIV/AIDS”².

Furthermore, from the end of 2005 an extensive country, regional and global consultation and assessment process on scaling up towards universal access was undertaken—as reported on elsewhere during this PCB. With the “Three Ones”, the Global Task Team process and scaling up towards universal access, a robust framework now exists to guide alignment of all partners’ efforts with national ownership, needs and priorities. This framework for collaboration brings together national authorities, civil society, bilateral donors, the Global Fund and the UN system to achieve a real and lasting impact on the AIDS epidemic. Scaling up towards universal access refers to the objectives of the national response, with the “Three Ones” principles and the Global Task Team recommendations being the most effective way to support achievement of these objectives. The importance of community sector involvement in these processes has been recognized by the PCB³ and is currently the focus of guidelines under development by civil society organizations with support from UNAIDS.

² OECD/DAC (2005). *Paris Declaration on Aid Effectiveness*, Paris High Level Forum, p. 2.

³ *PCB Decision 11.1* (17th PCB meeting, June 2005).

The strongest endorsement of the “Three Ones” principles and the Global Task Team recommendations since the 2005 PCB meeting was made at the World Summit in New York in September 2005, where Heads of States and Government committed to “working actively to implement the ‘Three Ones’ principles in all countries” and stated that they “welcome and support the important recommendations of the Global Task Team on Improving AIDS Coordination among Multilateral Institutions and International Donors”.

Implementing the “Three Ones” and Global Task Team recommendations in Nigeria

Nigeria’s National Action Committee on AIDS (NACA) has significant influence over external resources for all major AIDS projects including the Global Fund and World Bank MAP grants. It is a Chair of the PEPFAR Advisory Committee and Administrator of the Nigerian Government’s AIDS fund. The authority has the mandate and capacity to report on the inputs of all sectors and partners relating to national strategies and policies. However, at the state level much remains to be done. Only 26 of 32 states have a coordinating authority, and a majority have insufficient technical capacity for overall coordination, resource mobilization and monitoring and evaluation. The impact of this lack of capacity is reflected in the fact that AIDS plans of 21 states are not the basis for funding contributions from all major partners. There is also a need to clarify the relationship between NACA, the state coordinating authorities and local government authorities.

The National Expanded Theme Group, which is chaired by NACA, went through a process of “domestication” of the Global Task Team recommendations. The first step in the consultations was to build a common understanding and define a process for a national discussion on implementation and commitment. The final product was a consensus report with an agreed implementation process that commits NACA, UN agencies and the Donor Coordination Group to specific actions.

International commitment has also been expressed in several other forums, including:

- The September 2005 “Fostering Country Ownership and Leadership: Implementation of the Three Ones” workshop hosted by Brazil, and co-organized with UNAIDS. Joint government and civil society delegations from 14 countries presented their efforts to make the “Three Ones” and the Global Task Team outcomes a reality. The Rio workshop also had participation from bilateral donors, the Global Fund and the UN system. The participating countries were: Algeria, Brazil, Guatemala, Guyana, Honduras, India, Kenya, Mali, Nigeria, Russian Federation, Senegal, Thailand, Ukraine and Zambia.
- The country, regional and global consultations on scaling up towards universal access, held between December 2005 and March 2006, have consistently called on international donors and partner countries to adhere to the “Three Ones” principles and implement the recommendations of the Global Task Team to ensure sustainability, predictability and effective use of resources.
- UNAIDS Cosponsors and the Global Fund have committed to the implementation of the Global Task Team’s vision of harmonization and alignment by endorsing its recommendations in their respective governing boards.⁴
- The resolution adopted by the UNAIDS Committee of Cosponsoring Organizations (CCO) on 27 October 2005, specifically affirms “the urgent need for joint programming and joint

⁴ This responds directly to the June 2005 PCB Decision 7.3 that “urges the governing bodies of UNAIDS Cosponsors and the Global Fund...to consider and endorse the Global Task Team recommendations”. Endorsements have taken place as follows: World Bank Executive Board (August 2005), UNDP/UNFPA (September 2005), UNICEF (September 2005), Global Fund Board (2005), WHO Executive Board (January 2006), UNHCR Standing Committee (March 2006), UNODC (March 2006), ILO (March 2006), UNESCO (April 2006) and WFP (June 2006).

teams on AIDS” emphasizing that “staff should clearly understand, implement and be held accountable for working together” and call for “a change in working culture, attitude and behaviour” to this effect. The resolution also reaffirms the UN Resident Coordinator’s ultimate responsibility for effective joint programming and implementation at country level.

1. The Three Ones in countries: from principles to implementation

1.1 One AIDS Action Framework

A UNAIDS survey from early 2006 shows that most countries now have national AIDS action frameworks, or National Strategic Plans (NSPs). The survey reports that 60% of the frameworks are costed and budgeted with 52% having been translated into an operational plan and/or annual priority action plan. Few countries have conducted a technical needs assessment or developed a technical support plan which could improve the pace and scale of implementation. In the countries in the Eastern Europe and Central Asia region, only about half of the National Strategic Plans are costed. The absence of costing, clear priorities and operational plans limits the value of the framework in providing the overall strategic and programmatic guidance for the response, reduces its power as the guiding point for interventions by various stakeholders, and often reflects a general need to improve management of the AIDS response. Without these elements, external partners may be inclined to continue with a projectized mode of aid delivery with vague references to the National Strategic Plans.

The “Three Ones” in Kenya

In Kenya, the National HIV/AIDS Control Council led a comprehensive and participatory process to develop the Kenya National HIV/AIDS Strategic Plan (KNASP 2006–2010). The KNASP is the overarching strategy for all AIDS interventions whether implemented by government, civil society, the private sector or development partners. Kenya has drafted a costed action plan, currently being refined to reflect all contributions. To enhance the coordination and exchange of information, two quarterly programme review meetings were held to ensure the programmes funded by the US President’s Emergency Plan for AIDS Relief (PEPFAR) complemented other national efforts. Kenya has also developed a monitoring and evaluation framework and is in the process of harmonizing it with the National HIV/AIDS Strategic Plan.

At the Rio “Three Ones” workshop several of the participating countries stressed the importance of regarding the National AIDS Action Framework as a “living document” that guides the national response and serves as the basis of an ‘annual review mechanism’, involving all partners, that assesses performance and results achieved and identifies progress and challenges for the following year. Ideally, this should result in a costed and prioritized action plan for the following year. The 2006 UNAIDS country survey revealed that in 76% of countries (80 responses) the development process of the National AIDS Action Framework included participatory reviews and updates.

Illustrative examples of AIDS frameworks developed in 2005 are Lao People’s Democratic Republic and Kenya (see box). In Lao People’s Democratic Republic, a new National Strategy and Action Plan on HIV/AIDS and STI was developed for 2006–2010. UNAIDS supported the government in a participatory exercise, leading to an overarching operational framework. The new plan prioritizes prevention and care activities both in terms of specific groups and communities, but also provinces and districts based on selected vulnerability criteria. It aims at a 90% reach for prevention interventions targeting vulnerable groups and nearly 100% coverage of treatment and care for people in need. The new plan is costed and was included in the draft of the 6th National Socio-Economic Development Plan.

1.2 One National Coordinating Authority

In the 2005 end-of-year reporting on follow-up to the 2001 Declaration of Commitment on HIV/AIDS, 85% of countries reported having one national coordinating authority for the AIDS response. While this is an important achievement, the functionality of this structure and partner alignment to it will define its role in achieving country-level results. Capacity constraints undermine the functioning of the AIDS authorities and inhibit their effectiveness. Another factor is the role of other AIDS coordinating entities at the country level. According to the UNAIDS survey, 81% of countries have additional coordinating mechanisms on AIDS. While providing much needed funding for the AIDS response, parallel mechanisms like the Global Fund Country Coordinating Mechanism (CCM) can lead to a confusion of roles when it comes to policymaking. In some countries the CCM makes *de-facto* policy decisions through funding decisions related to investment in some areas and not others. The UNAIDS survey also states that in 32% of the countries surveyed, the national AIDS authority does not play a significant role in the CCM.

In addition, scaling up towards universal access demands effective decentralization of the AIDS response. Extra capacity is needed for the delivery of services in the social sectors, the community sector and elsewhere. However, a “Three Ones” review for West and Central Africa shows that the capacity for coordination of a decentralized response is insufficient in most countries in the region. However, Ethiopia, India, Indonesia, Nigeria, and South Africa have started to strengthen the decentralization of the national AIDS response. The right balance between ensuring effective coordination and sustained commitment and avoiding excessive bureaucratic structures at decentralized levels remains a challenge. The capacity-building of these structures will also be an immense challenge that should be addressed as essential systemic needs to ensure effective scaling up of services.

Partnership forums are offering opportunities for dialogue and consensus building outside of the formal setting of the national AIDS authority, which often has very limited membership. These forums are usually open to involvement from all stakeholders but differ in function from country to country. Some forums focus on improving the involvement of specific groups, such as the Interfaith Forum set up in Bangladesh. This forum was the outcome of a dialogue between four faith groups and has paved the way among faith-based groups for opening up dialogue on issues relating to AIDS, and for reflection on the comparative advantages that they could bring to the AIDS response.

Working together in Somalia

In Somalia, three national coordination structures have been established for the northwest region of Somalia (Somaliland), the northeast region of Somalia (Puntland) and South Central Somalia respectively, and there is progress on a roadmap towards one Somali HIV/AIDS Coordination Authority. These authorities set up by legislative acts under the auspices of the respective Presidents of Somaliland and Puntland, is the only example of the three political entities working together on an issue. In review meetings, primary structures, roles and responsibilities of the Commission, secretariat and implementing bodies were delineated from policy functions, technical coordination, monitoring and evaluation and implementing responsibilities.

In some countries, a lack of understanding by the leadership of national AIDS authorities has led to minimal or tokenistic involvement of civil society in national AIDS authorities. In addition, civil society representatives are frequently invited directly by the leadership of the national authority. This may limit the credibility of the representatives, and compromise the possibility of effective consultation within the community sector to develop input into national coordination discussions.

In Mozambique a recent “Three Ones” assessment revealed that a large percentage of prevention and care activities are implemented by civil society, financed through government. However, civil society

representatives, even if capable of understanding and engaging in the discussions, frequently do not feel empowered to disagree with government or other partners' opinions in the multisectoral coordination meetings, as this may influence the process of selecting projects for financing.

In Eastern Europe and Central Asia, civil society in general appears well represented in the coordinating authority. This is particularly so for people living with HIV and AIDS service organizations, while groups most at risk are largely absent. This may be a reflection that these groups are still suffering stigma, discrimination and legal oppression, and (with the exception of men who have sex with men) have had difficulty organizing themselves and gaining a voice. Overall, there is often confusion about the role and position of civil society in the country response, and in particular on the national coordinating authority. This may reflect the short history of civil society in the region, and tensions arising from the fact that many donors prefer to fund nongovernmental organizations rather than government institutions.

1.3 One National Monitoring and Evaluation System

An overview of the current state of monitoring and evaluation at country level exists in the national reports on the 2001 UNGASS Declaration of Commitment on HIV/AIDS, based on the UNAIDS National Composite Policy Index questionnaire. The index circulated for the 2005 progress reports had a significant focus on monitoring and evaluation. The data show that both developing countries and international donors have placed greater priority on monitoring and evaluation since the 2001 General Assembly Special Session. A strengthening of international technical support for monitoring and evaluation in recent years appears to have resulted in countries reporting improved quality of assessment of AIDS programme performance. In 2006, 51% of countries report modest to considerable progress since 2003 in strengthening monitoring and evaluation of HIV-related programmes. Nevertheless, in 2005, 43% of countries rated national monitoring and evaluation efforts as average or below average.

The inclusive approach of Barbados

In Barbados, the inclusion of vulnerable groups into the National HIV and AIDS Commission (NHAC) has been particularly valuable, as stigmatization of men who have sex with men is still a problem in Barbadian society.

Half of countries surveyed by UNAIDS reported the existence of a national monitoring and evaluation plan, and in half of those, the plan was reported to have been developed in consultation with civil society and people living with HIV. Most countries have a dedicated monitoring and evaluation unit and budget, with funding secured in 78% of the cases. This represents important progress since 2003, when only 24% of countries reported having a monitoring and evaluation budget. About half (49%) of countries indicate there is a moderate to high level of sharing monitoring and evaluation results of UN agencies, bilateral agencies and other institution with the national AIDS authority. Although this represents improvement, much more progress on data-sharing is needed to maximize evidence-based decision-making.

A number of bilateral and multilateral institutions have deployed monitoring and evaluation technical staff in over 60 countries to strengthen local capacity and support the national monitoring and evaluation efforts. UNAIDS has placed 35 monitoring and evaluation officers in its country and regional offices since 2004. These professionals work directly with national monitoring and evaluation staff and support, among other things, harmonization and coordination of all stakeholders' monitoring and evaluation activities within countries. Another objective is to facilitate integration of the monitoring and evaluation systems that various partners maintain into a joint national system supported by a joint forum that includes all relevant stakeholders.

This is of particular importance since external funders continue to impose reporting requirements on countries with a limited resource base that when aggregated provide demands that are not possible to meet. St. Vincent—an Island state with a population of 117 000—was asked to monitor 191 indicators while Guyana was asked to report on 169 indicators. A positive step forward in the Caribbean has been an agreement reached in 2005 among regional and international organizations on a common approach for providing monitoring and evaluation technical assistance. At the country level, such as in Guyana, donors are adopting a common set of about 45–50 indicators.⁵

2. The multilateral contribution to the “Three Ones”—Implementing the Global Task Team recommendations

The Global Task Team recommendations were developed within the framework of the “Three Ones” to simplify and further harmonize procedures and practices of the multilateral system and other partners and better align their support to countries’ needs and priorities (see Annex 1). This section of the report details efforts to implement several key recommendations at global and country levels since their endorsement by the PCB and others. A table summarizing progress on all the recommendations can be found in **Annex 2**.

The Global Task Team made recommendations in four areas:

1. National leadership and ownership
2. Alignment and harmonization
3. Reform for a more effective multilateral response
4. Accountability and oversight

Making recommendations a reality in Indonesia

In Indonesia, the Global Task Team recommendations and related documents have been translated into the local language and widely disseminated by the UN. Implementation of the recommendations is being discussed regularly with the National AIDS Commission, CCM and donors. After a joint high-level mission by UNAIDS, World Bank, DFID and AusAID in December 2005, a Global Task Team implementation workplan was developed. A Joint UN Team is now active and the UNAIDS Technical Support Division of Labour has been adopted.

The final report of the Global Task Team has been widely distributed, and implementation plans have been developed by UNAIDS Cosponsors, the UNAIDS Secretariat and the Global Fund. In addition UNAIDS distributed a guidance note on implementation to all UNAIDS country staff, UN Theme Group Chairs, and the Cosponsors’ Global Coordinators on AIDS. WHO has developed a similar set of guidance for its staff, and UNFPA has sent clear instructions to country staff on Global Task Team implementation at country level, outlining the accountability aspects.

By end of February 2006, 80% of the UN Theme Groups surveyed by UNAIDS reported that the Global Task Team recommendations had been

discussed with country-level partners, while 73% reported that the recommendations have been used as input into the UN Theme Groups’ planning for 2006.

2.1 World Bank and Global Fund coordination

In consideration of the large amount of resources provided by the Global Fund and the World Bank, the Global Task Team gave considerable focus to improving coordination between these two institutions. In response they have progressed in a number of areas, such as alignment with country

⁵ DFID, WHO/PAHO, the Global Fund, UNAIDS and the World Bank (2005). *HIV/AIDS in the Caribbean Region: A multi-organization review*.

fiscal cycles. However, alignment with planning cycles and action plans are areas still needing improvement as are joint reviews.

The Global Fund and World Bank also commissioned a study on the AIDS Programmes of their organizations focusing on their comparative advantages, areas of overlap and complementarities. Among the many recommendations of the study⁶, the following are highlighted:

- Both organizations should make stronger efforts to support the “Three Ones” by working together on preparing, budgeting and implementing country-specific action plans in support to the national AIDS framework. A specific area of duplication they should examine is the demand for the existence of Country Coordinating Mechanisms separate from national AIDS coordinating authorities. The agencies are urged to move towards common requirements for procurement procedures and monitoring and evaluation.
- The Global Fund should clarify what it will and will not do. Its focus should be on direct financing of prevention and treatment, rather on the direct technical support and far-ranging and diverse systematic and multisectoral support provided by the World Bank, other UNAIDS Cosponsors and bilateral institutions. The Fund, including its agents and beneficiaries, should follow the country lead, use existing analyses and avoid different and unique funding channels. The Board of the Global Fund should ensure adaptation of its model to lessons learnt in its few years of country level implementation.
- The World Bank, in conjunction with other UN agencies, should focus on the systematic health sector capacity-building that is fundamental to progress against AIDS and other diseases. The Bank should link health sector capacity-building to broader macroeconomic and budgetary aims.

There continues to be a need for Country Coordinating Mechanism functioning to be more consistent with the national coordination authority. Global Fund staff members are presently in discussion with a number of countries on rationalizing coordinating structures to fit with both “Three Ones” and CCM requirements. This is welcome progress, but clear and consistent definition of National AIDS Coordinating Authority and Country Coordinating Mechanism roles will require stronger support from the Global Fund Board and more coherent inputs from members on the various governing boards of the multilateral system.

Making the money work in the Democratic Republic of the Congo

In the Democratic Republic of the Congo, an important development is the result of a dialogue between the Government, World Bank and Principal Recipient (UNDP) that has led to a Memorandum Of Understanding on harmonization. The Memorandum, between the implementers of the two major grants and the government, is explicitly within the framework of the “Three Ones” and outlines a process that should lead to harmonization around technical support, monitoring and evaluation and other areas.

2.2 Improving UNAIDS technical support

The Global Task Team underlined the need for UNAIDS to improve its delivery of technical support to countries, especially for the coordination, implementation, monitoring and evaluation of large-scale grants—or “make the money work”. This includes support to countries in programmatic areas (strategic planning, governance, financial planning, scaling up interventions, monitoring and evaluation), supportive mechanisms including the Global Joint Problem Solving Team (GIST),

⁶ Shakow A (2006). *Global Fund-World Bank HIV/AIDS Programs Comparative Advantage Study*, World Bank and Global Fund to fight AIDS, Tuberculosis and Malaria..

technical support networks including the Technical Support Facilities, the Knowledge Hubs, UNDP Sub regional Resource Facility and the World Bank's planned AIDS Strategy and Action Plan (ASAP) facility. Significant progress has been made in a number of areas, including:

- Establishment and effective functioning of the Global Joint Problem Solving Team (GIST) at the global level which has provided support to assist a significant number of countries resolve implementation bottlenecks. Similar mechanisms are being replicated effectively at the regional and country level.
- Operationalising the UNAIDS Technical Support Facilities in four regions and further strengthening of the WHO Knowledge Hubs, the International Centre for Technical Cooperation (Brazil) and other UN mechanisms for provision of quality technical assistance to country partners.
- Decentralization and streamlining of the UNAIDS Programme Acceleration Funds (PAF) has resulted in better regional prioritization and decision-making and faster disbursement of these catalytic funds.
- Significant reforms in UN functioning at country level including the establishment of the Joint UN Teams on AIDS with a joint support programme that better coordinate UN support at country level.
- The UN system division of labour with clear lead organizations and accountability mechanisms.
- UNAIDS facilitated broad public debates on scaling up towards universal access in over 100 low- and middle-income countries and seven regions. This process has enabled countries to identify their specific technical support needs⁷ towards reaching the goal of universal access.

2.2.1 The Division of Labour and Joint UN Teams on AIDS. The Technical Support Division of Labour was finalized in August 2005. Individual Cosponsors or the Secretariat are identified as Lead Organization within a particular UNAIDS technical support area. The Lead Organization acts as the single entry point for government and other country-level stakeholders requesting UN support, and facilitates coordination of the provision of UN support. The Lead Organization also plays a proactive leadership role by taking a lead in global policy discussions regarding the specific area.

In December 2005, the UN Secretary-General sent a letter to all UN Resident Coordinators instructing them to establish Joint UN Teams on AIDS with a joint UN country support programme. The Joint Teams on AIDS will further progress UN efforts on joint programming. The teams will consist of the operational level staff working on AIDS, including those currently working at the Technical Working Group. The UN Theme Groups in Argentina, Burkina Faso, Chile, China, Democratic Republic of the Congo, Dominican Republic, Ghana, Honduras, Lesotho, India, Indonesia, Malawi, Mozambique, Nicaragua, Nigeria Senegal, Ukraine, Zambia and Zimbabwe have established Joint UN Teams on AIDS that work to implement the annual work-plan in support of the national AIDS response. Within this context, a number of countries have adapted the UN Technical Support Division of Labour to the specific country context.

At the global level, UNDP, UNFPA and WFP have adapted their organizational structure around their technical support areas in the Division of Labour and strengthened their capacity in the areas where they have been designated lead organization. UNDP is mapping the AIDS-related activities of UN agencies in and the areas of governance, human rights and gender. UNICEF has taken similar

⁷ Specific recommendations from the Universal Access consultations include the need for strengthening country capacities in setting and supporting national priorities, predictable and sustainable financing, strengthening human resources and systems, affordable commodities, addressing stigma, discrimination, gender and human rights and accountability mechanisms.

steps on prevention of mother-to-child transmission of HIV and general advocacy for children and AIDS including launching the *Unite for Children, Unite Against AIDS* campaign with UNAIDS.

Procurement procedures are often *the* major bottleneck for the implementation of major grants and projects at country level. UNICEF, as lead organization in this area, has established a global-level Procurement and Supply Management Working Group, including the World Bank, the Global Fund and WHO. The working group has developed guidelines for assessing the quality of in-country procurement and supply-chain management, and focuses on strengthening and coordinating support to countries in this specific area.

In addition there are efforts to strengthen funding, capacity and collaboration among regional teams of the UNAIDS Cosponsors. The UNAIDS Secretariat has increased its professional staff at country level and established Regional Support Teams in seven regions to bolster the work of UNAIDS country offices. UNFPA has re-focused its resources for HIV prevention in Africa to ensure that country offices have the technical capacity to support national AIDS authorities and to strengthen its capacity in the 12 hardest-hit countries. Regional directors of Cosponsors and the Secretariat in the Eastern and Southern Africa region are in the process of establishing “one regional UN HIV/AIDS team and support programme”.

2.2.2 Technical Support Facilities. UNAIDS is establishing regional Technical Support Facilities (TSFs) to respond to the growing need for high quality, short-term technical and management assistance in strategic areas to help support the scale-up of responses to AIDS. In 2005, four TSFs became operational, covering Southern Africa, Eastern Africa, West and Central Africa and South-East Asia and the Pacific. Additionally, the International Centre for Technical Cooperation, established with UNAIDS support to the Brazilian Ministry of Health, covers the Latin America and Caribbean region. Specific priorities for technical support and capacity development—including strategic planning, organizational development, monitoring and evaluation, prevention, mainstreaming and resource tracking—have been identified in consultation with country partners including civil society.

The Technical Support Facility in Southern Africa has been fully functional since September 2005, and has received contracts for over 450 consultancy days from a broad range of clients, including national AIDS authorities, government ministries, the UN system, regional bodies, civil society and bilaterals. They are supporting country partners (e.g. the Uganda AIDS Commission) to develop technical assistance management plans that will strengthen their ability to identify, prioritize and better manage technical support needs. Client feedback indicates high levels of satisfaction regarding the quality and timeliness of services. The Technical Support Facilities also contribute to expanding the pool of local and regional expertise in priority areas. Use of regional consultants has also ensured substantial cost savings. The International Centre for Technical Cooperation in Brazil has been operational since January 2005 and has facilitated horizontal technical support to countries in the region. It has also expanded its support to Portuguese speaking countries in Africa.

2.2.3 Global Joint Problem Solving and Implementation Support Team. The Global Task Team recommended the establishment of the Global Joint Problem Solving and Implementation Support Team (GIST) as a global country-driven mechanism by which multilateral institutions and international partners could promote problem-solving and concerted action to enhance and accelerate the implementation of AIDS programmes at country level. In accordance with the Global Task Team recommendations, the GIST was established in July 2005 and has been meeting regularly. It brings together UNDP, WHO, UNICEF, UNFPA, UNAIDS Secretariat, the World Bank and the Global Fund Secretariat. The GIST has undertaken joint time-compressed analysis of key bottlenecks to implementation of large grants in more than 15 countries and has facilitated action to unblock such bottlenecks in nine countries and one region. The work of the GIST

complements other UNAIDS Secretariat and Cosponsor country and regional technical support efforts, including the Technical Support Facilities. GIST decisions regarding responsibilities for the provision of support are taken within the overall framework of the UN Division of Labour.

The GIST has initiated or facilitated a number of specific actions to unblock country-level bottlenecks in areas of procurement and supply management, governance, management capacity, coordination and harmonization, programme and technical needs, monitoring and evaluation, as well as systemic bottlenecks related to policies, procedures and practices of multilateral institutions and international partners. Examples of GIST action include:

- generating in-country dialogue among partners to address technical assistance needs (Bolivia, Comoros, Ecuador, Guinea Bissau, Niger, Nigeria, Nepal);
- ensuring emergency supplies to prevent a stock-out of antiretroviral drugs (Niger) or facilitating timely approval of antiretroviral treatment protocols (Guinea Bissau);
- resolution of governance and management problems related to CCM and Principal Recipient functioning and coordination between Global Fund- and World Bank-supported programmes (Ukraine, Guinea Bissau, Benin, Caribbean, Niger, Bolivia); and
- facilitating monitoring and evaluation, data analysis and other technical support to meet Phase 2 conditionalities of Global Fund grants (Honduras, Lesotho, Nigeria).

Despite the relatively short experience of the GIST, results obtained so far clearly indicate that a shared understanding and concerted action through a joint and harmonized approach among various multilateral partners can help more rapidly identify and address bottlenecks to “making the money work” for countries.

Some important questions and challenges still need to be addressed. The GIST needs to better define the range and limits of its action in order to maximize its contribution to international efforts to support countries “make the money work” and to facilitate links between country action and globally managed initiatives such as early alert and response systems. Ensuring that GIST short-term ‘fire-fighting’ measures addressing specific and immediate implementation bottlenecks are complemented by longer-term capacity-building support (to be provided through other mechanisms such as the Technical Support Facilities or technical support mechanisms of the Cosponsors) remains a challenge. The GIST can also strengthen its facilitating role to ensure adequate coordination between UN-provided technical support and other global technical assistance initiatives. Other areas of improvement include the GIST country identification process, reporting and monitoring, making sure adequate funding for GIST-supported action is available, and ensuring that GIST-like functions at country level are supported and monitored by the UN Country Teams, in collaboration with all relevant in-country partners.

2.2.4 Funding for technical support. As the Joint UN Programme on HIV/AIDS (UNAIDS) continues to improve the quality and quantity of technical support provided to countries, as called for by the Global Task Team, this paper explores several options for channelling additional funding to this effort and requests guidance from the Programme Coordinating Board (PCB) on a way forward.

Significant advancements have been made in strengthening country capacities to identify and prioritise technical assistance needs and in managing external technical support. In addition, there is increasing evidence of the effectiveness of UN system technical support in resolving implementation bottlenecks at country level. Two country level examples are:

- *Romania* - the UN system has advanced the harmonization of the Global Fund and national monitoring and evaluation frameworks. Assistance has been provided in scaling up prevention particularly among sex workers, Injecting Drug Users (UNICEF), development and scaling up of antiretroviral Therapy services (WHO), school AIDS education (UNFPA).
- *China* - Technical support was provided on strategic planning and capacity building, strengthening antiretroviral treatment and care (WHO) and on orphans and children affected by AIDS (UNICEF). It was also provided in:
 - Strengthening the linkage between the monitoring and evaluation components of the Global Fund projects, the UNGASS indicators, the national monitoring and evaluation framework and other aspects of the "Three Ones";
 - Development of a monitoring and evaluation guide book for Global Fund round 3 and joint monitoring and review missions of Global Fund round 3 and the China Comprehensive AIDS Response project.

The UN system can—and should—do more. As part of an initial response to the recommendations of the Global Task Team, and in the context of the Global Fund replenishment process, UNAIDS Secretariat and Cosponsors jointly developed the Consolidated UN Technical Support Plan for 2006 – 2007, which expressed a need for increased financing and a rapid and flexible funding mechanism for the UN system to deliver substantially increased technical assistance at country level. The cost of meeting the technical support requirements of 45 priority countries within the areas of UNAIDS' comparative advantage was estimated at US\$166.4million⁸ (0.9% of the estimated globally available HIV/AIDS funds during 2006-07). The plan was presented to the Global Fund Replenishment conference on 5-6 September 2005, emphasizing the need to scale up technical support alongside efforts to increase the financing available for AIDS programmes. Donors have expressed appreciation for the plan, which for the first time, presented a unified and consolidated UN-sourced technical support plan to address implementation bottlenecks. However, additional funding for this work has been limited⁹, prompting a reconsideration of how best to raise and deploy additional resources for technical support.

It is proposed that the Joint Programme continue to increase its technical support capacity in a phased manner, while further reallocating resources and streamlining existing mechanisms to better fulfil countries' needs. A range of complementary approaches on funding mechanisms and source of funding is presented below for consideration by the PCB.

The following principles should guide an improvement to the financing and delivery of technical support provided by the Joint Programme:

1. ***Country focus:*** Countries must be firmly in control of the process of identification of technical support needs, and country-level joint UN teams must be the primary managers of the resulting technical support. Whenever possible, funding needs should be identified through an inclusive country-driven process, and not supply driven by agencies' headquarters.
2. ***Rapid and flexible procedures:*** To be effective, additional technical support must be available rapidly and flexibly, using the most appropriate provider. The use of funds must not become

⁸ The appeal represents funds additional to those already reflected in the 2006-2007 UNAIDS Unified Budget and Workplan

⁹ To date US\$9.5million has been pledged.

tied down by inflexible procedures or a rigid compartmentalization of funding. Technical support should be available to both governmental and non-governmental institutions and service providers.

3. ***Primacy of country-level technical support providers:*** In order to better stimulate capacity building at country level, a hierarchy will be established regarding the selection of technical support providers. Local technical support providers will be prioritized. If none are present or available, a regional-level provider will be sought through UNAIDS Technical Support Facilities and similar regional networks. If none are present or available, an international provider will be identified.

Funding portfolio and sources. In order to retain flexibility and ability to respond to the different needs at country, regional and global level, the following range of complementary approaches is proposed:

- **Internal reallocation of HIV resources within each organisation,** which would follow new priorities and responsibilities as agreed through the Global Task Team and Division of Labour processes, and approved by the Committee of Cosponsoring Organizations.
- ***Further streamlining of UNAIDS technical support mechanisms:*** A number of mechanisms have been established at the global and country level that catalyze support to countries. These mechanisms would be further streamlined to better respond to country needs. For example, the UNAIDS Technical Support Facilities (TSFs) which are now established in four regions can scale up provision of technical assistance to country partners, upon receipt of additional funds. Similarly, Programme Acceleration Funds (PAF) provide catalytic funding to country partners. These funds can be used for supporting critical technical support needs at the country level.
- ***Country level resource mobilisation:*** UNAIDS Secretariat and Cosponsors have mobilized resources at the country and regional level to finance technical support needs of country partners. Technical support has been scaled up in many countries through this mechanism including support in implementing Global Fund grants. This would be further streamlined, and donors would be encouraged to contribute directly at the country level to support further scaling up of UN technical support to countries. Where they exist, the joint UN teams on AIDS would take a lead in coordinating and facilitating the provision of technical support. The joint UN team on AIDS and joint programme would be supported by a budget which would demonstrate the resources available to each cosponsor for its area of the integrated work programme, and can accommodate additional donor funds. Local arrangements may vary, but it is envisaged that the UN Resident Coordinator system would manage the fund with a minimal overhead fee, and technical and programmatic management would rest with the UNAIDS Country Coordinator.
- ***Global level funding:*** At the global level, UNAIDS Secretariat and Cosponsors would mobilize additional funds for scaling up the Joint Programme's provision of technical support at country level. This would include direct funding from donors and also follow up on commitments made by donors at the Global Fund replenishment meeting in September 2005. A sum equivalent to 1-2% of donors' total contribution to the Global Fund would be appropriate for ensuring provision of technical support to countries. While this approach has

not been done on a large scale to date¹⁰, there is evidence that such support has been effective. For example, the *GTZ back up* initiative funds UNAIDS Secretariat, WHO and ILO to support country partners in development of Global Fund proposals and to provide technical support for implementation. Similar mechanisms could be established for the UN system facilitating speedy and flexible technical support to country partners. These funds will be reflected in the next UBW in the interagency component through establishment of a new supplemental budget line for technical support.

Estimates of funding need for UN system technical support. The consolidated technical support plan (2005) identified the total funding gap for UN system technical assistance to country partners. Over the last year, it is clear that the technical assistance needs at the country level has grown significantly as has the provision of UN system technical support to country partners. The consultations on scaling up towards Universal Access have also clearly outlined specific technical assistance needs of country partners. Experience of UN system over the last year has also resulted in a number of lessons that highlight the need for a phased and strategic approach towards scaling up technical support.

In order to build on this momentum, it is proposed that UNAIDS mobilize an interim global amount of \$40 million for the current biennium for scaling up technical support to countries. Based on the calculations made during UNAIDS Secretariat and Cosponsors joint development of the consolidated technical support plan, this figure is a conservative estimate of the amount of additional funding the Joint Programme can programme from global level (not including the country-level resource mobilization). A revised estimate of the overall cost of UN system technical support to country partners will be developed by UNAIDS before the next PCB in December 2006. This will be based upon estimates of funding already available at country level for UN system provision of technical support, a road map for a phased scaling up of technical support and an analysis of funding gaps. This will also take into account the UN system's absorptive capacity to scale up quality technical assistance to countries using the different mechanisms highlighted above.

As recommended by the UNAIDS Committee of Cosponsoring Organizations at its meeting in October 2005, during the next biennium the Unified Budget and Workplan will be restructured so that it can serve as a catalyst for a true joint programme at country level. This will be achieved by reallocating funds to country level.

2.3 Accountability

Prerequisites for transparency and accountability are the availability, credibility and appropriateness of the information available. Much still needs to be done to improve data collection, analysis and presentation at country and global levels. In many cases, data may be shared only with those funding a specific activity, neglecting the needs of broader society and stakeholders.

Although important progress has been made in building national monitoring and evaluation capacities, gaps in national UNGASS reporting highlight the need for further improvement. Many countries still need to clearly identify the financial and human resources and infrastructure necessary to strengthen their national system. As elaborated in the Global Task Team recommendations, joint monitoring and evaluation country support teams, often linked to a monitoring and evaluation 'forum', need to help integrate the different existing data collection

¹⁰ The United States Congress in 2005 approved the US government to withhold up to 5% of US contributions to the Global Fund to provide direct technical assistance to recipient countries. There is growing consensus among donors on the need for increased funding for technical assistance to effective functioning of global financial initiatives

systems into one system, including the diverse types of data. This integration will increase the likelihood of data being used for programme and policy decision-making, such as in the joint review of the national AIDS framework and subsequent policy discussions at the national AIDS authority. One country informant reported that:

“Monitoring and evaluation of HIV and AIDS activities is an area that has lagged among the three components of the “Three Ones” principles, apparently because many agencies implementing various activities have no legal requirement to report to the National AIDS Council and multiple powerful donors require different monitoring and evaluation reports.”

The assessment tool for partner alignment was proposed by the Global Task Team to help address this situation. Currently under development by the UNAIDS Secretariat and the World Bank, the tool will primarily be used by national AIDS authorities to gauge the level of internal and external partner adherence to the “Three Ones” principles and international partners’ adherence to the commitments made at Monterey, Rome and Paris, and through the Global Task Team process. In its function as a “barometer” of the current status of harmonization and alignment at country level and identifying where real or perceived blockages lie, it will serve as an advocacy tool for focusing dialogue and driving progress. The working title of this scorecard is the Country Harmonization Assessment Tool (CHAT). A draft CHAT will be developed by mid 2006, and pilot testing in 10 countries will follow. As well as serving at country level as a gauge of the present status regarding harmonisation of the AIDS response, it is also proposed that the findings from the use of country CHATs as part of the joint review of the national AIDS response, could be discussed at thematic PCB sessions, with the intention of addressing institutional and practical barriers to effective harmonisation and alignment. Further details on progress on other Global Task Team recommendations are described in **Annex 2**.

However, more important than institutional accountability to boards and donors, is the need to strengthen accountability to communities and individuals. This raises questions relating to the legitimacy and effectiveness of current accountability mechanisms, and how best to ensure engagement with and responsiveness to communities and populations. It is hoped that promising new initiatives such as The African Monitor¹¹ will serve to improve accountability and hence accelerate progress, in the delivery of development promises. At a minimum, it is essential to ensure transparency and dialogue with national entities that have a legitimate mandate to represent the population including civil society, parliament and government. Improving accountability has been a focus of the scale-up towards universal access process, and it is expected that the 2006 High Level Meeting on AIDS will produce actionable commitments in this area.

2.4 Review of the functioning of the UNAIDS Committee of Cosponsoring Organizations

In recent years, the increase in the number of Cosponsors, the expansion of UNAIDS activities, the evolution of the Secretariat’s role and the changes in the course of the epidemic itself have modified the dynamics of interaction within UNAIDS, bringing about new challenges and creating the need for a re-examination of the functioning of the UNAIDS Committee of Cosponsoring Organizations (CCO), which serves as a standing committee of the PCB. This need was expressed by the Global Task Team in its recommendation number 3.3.

An external consulting firm (the Boston Consulting Group) conducted an independent review, and a reference group including PCB members, Cosponsors and civil society representation was

¹¹ <http://www.africanmonitor.org/theafricanconcept.htm>

established to provide advice and strategic guidance to the review team. The recommendations emerging from this exercise were considered by the Executive Heads of the Cosponsors at the 26th CCO meeting.¹² The discussions that followed led to the adoption of a resolution titled: “Review of the functioning of the UNAIDS Committee of Cosponsoring Organizations”. Key points in the resolution include:

- reaffirmation of the urgent need for joint programming and joint teams on AIDS at country level;
- reaffirmation of the UN Resident Coordinator’s ultimate responsibility for effective joint programming and implementation at country level;
- statement of the need for Cosponsors to further mainstream AIDS into their work;
- decision to develop a transition plan to progressively move UNAIDS Unified Budget and Workplan (UBW) funds to the country level. A draft transition plan will be submitted to the CCO at its fall 2006 session and presented to the PCB at its 19th meeting in December 2006;
- decision to conduct a review on how different Cosponsoring Organizations have utilized UBW funds to respond to the AIDS epidemic; and
- decision to pilot the use of regional structures to increase cohesiveness of action at regional level when feasible and practicable;

The Committee of Cosponsoring Organisations requested that the UNAIDS Executive Director lead the process of implementation of the resolution. To date a number of actions have been undertaken. For example, a working group chaired by the UN Office on Drugs and Crime (UNODC) was established to examine issues concerning the Cosponsors’ programmatic and financial mainstreaming of AIDS and provide guidance on the next steps. The working group will report to the CCO in October 2006. Additionally, a working group chaired by the World Food Programme (WFP) was established to make proposals on improving the cohesiveness of the regional support provided to country action by the UNAIDS family. The working group will report to the full CCO membership in October 2006¹³.

3. Improving harmonization and alignment

The key to successfully meeting the challenges of AIDS remains at country level. An overarching framework for a more effective national response has emerged in the “Three Ones principles”. The Global Task Team provided specific recommendations on how the multilateral system and other partners—national and international—can simplify and further harmonize procedures and practices and better align their support to countries’ needs and priorities. It is through commitment to these principles and processes that we can best ensure the most effective context for scaling up towards universal access.

Harmonization has become one of the highest priorities on the international development agenda. The Rome Declaration on Harmonization (2003) and the Paris Declaration on Aid Effectiveness (2005) are the clearest expressions of commitment by international development partners to lower transactions costs for partner countries, and align with their national strategies, objectives and processes. The harmonization and alignment agenda has been recognized as fundamental to achieve sustainable results and move more effectively towards halting the HIV epidemic.

¹² New York, 27 October, 2005.

¹³ Progress on the establishment of joint teams on AIDS was highlighted earlier in this report.

Many country-level partners have commented that the Global Task Team recommendations are heavily weighted towards the UN system and “are silent on bilateral partners who are also critical players in the national response”¹⁴. Consequently they do not address the full country reality which is often typified by a complex institutional landscape, fragmented flows of resources and information and diverse lines of accountability. A key challenge remains to ensure that the multilateral reforms at country level (which the Global Task Team commitments represent), synchronize effectively with the bilateral partner aid reforms in response to the “Aid Effectiveness” commitments made in Paris and Rome. The “Aid Effectiveness” discussions focus on National Development Plans and Poverty Reduction Strategy Papers (PRSPs) in relation to bilateral budget support. Strengthening the link between the AIDS strategic framework and national development plan, which has been taken forward by UNDP, World Bank and UNAIDS Secretariat, is an important effort to improve linkages among the different reform agendas.

Joint action against AIDS in Cambodia

Concrete results at country level can be reported, such as in Cambodia. Here UNAIDS works with both the National AIDS Authority and donors to strengthen donor harmonization and alignment with government priorities. Through administrative and technical support, UNAIDS assists the Joint Government-Development Partner Technical Working Group on HIV/AIDS to bring together the government, civil society and donors. The Working Group is responsible for setting joint monitoring indicators to measure progress in the AIDS response within the framework of Cambodia’s National Strategic Development Plan (2006–2010).

In the harmonization discussions on budget support, subsets of the national development plans may not get adequate focus, while precedence is often given to general governance, macroeconomics and public finance management issues. Consequently, practical progress on harmonization and alignment in sectors like health or education is difficult, and even more so in the multisectoral national AIDS response. Since many donors and other financial partners include AIDS among their highest priorities, the increased amount of funding available for the national AIDS response is still largely excluded from the main “Harmonization” and “Aid Effectiveness” discussions. For example, in Zambia, the donor community is not sufficiently committed to linking country-level discussions on AIDS harmonization to discussions around the Joint Assistance Strategy for development. A recent visit to Zambia by the AIDS ambassadors of the Netherlands, Norway and Sweden attempted to address this.

A recent UNAIDS survey of national AIDS frameworks found that that 61% served as the basis for the funding contributions of all major external partners, but that partner programme cycles were not often coherent with the national AIDS framework cycle. Partners may note they have often been involved in the development of the Framework, and therefore have a strong idea of the national priorities, which guide their proposals and contributions. However, this association is not a given. In one country, a UNAIDS review revealed that out of the 18 major partners, all were aware of the existence of the National Framework; however, six actually had a copy in their possession; only five claimed to refer to the framework to develop proposals.

Harmonization and alignment efforts by partners are to some extent hampered by capacity issues of the national AIDS authorities and their secretariats. The UNAIDS study on the implementation of the “Three Ones” principles in Western and Central Africa, found that in less than 50% of the national AIDS authorities (and their secretariats or equivalent) in the region are considered to have sufficient capacity to effectively coordinate the national response. Also national capacity is reported

¹⁴ National Expanded Theme Group on HIV/AIDS working document (2005), *Domestication of the Global Task Team recommendations in Nigeria*, pg.8.

to be often weak or lacking in monitoring and evaluation, resource mobilization and tracking, and strategic information collection and use. In some countries reasonable capacity is available, but the authority and its secretariat focus mainly on the implementation of major projects (mainly World Bank and Global Fund grants), which leaves insufficient capacity to coordinate the other partners in the national AIDS response.

4. The way forward—requested direction from the PCB

4.1 Scaling up at country level

Harmonizing for effectiveness. The world is now facing up to the challenge of scaling up towards universal access. This represents a global commitment to address blockages and strive towards reaching locally set targets for prevention, treatment, care and support. It is imperative that we effectively harness the considerable technical and financial resources this will require. We will only be successful if we ensure the most effective, harmonized and aligned use of those resources. Scaling up towards universal access represents the “what” in the AIDS response—it is the goal on which all our efforts must converge. We have the means to ensure we do that effectively: through our promises at Paris and Rome, and through our commitments to the “Three Ones” and the implementation of the Global Task Team recommendations. We must redouble our efforts to ensure these become a reality at country level.

Recommendation 1

- We ask the **PCB to endorse** more rigorous implementation of the “Three Ones” and Global Task Team recommendations at country level, to ensure smooth progress towards universal access.

Recommendation 2

- We ask that the **PCB endorse** the adaptation and implementation of the UNAIDS Technical Support Division of Labour at country level by the UN Theme Group and Joint Teams, to be used as a basis for providing UN technical support to the national AIDS response.

Three Ones and civil society. It is essential that civil society members on the national AIDS authority have the capacity to ensure that inputs from their constituencies are voiced and heard, as well as have the capacity to arrive at a consensus view within the constituency on the national AIDS framework and on the analysis of progress of the national response. To complement this, the leadership of the AIDS authority needs to appreciate the value of inputs from the different constituencies, specifically from people living with HIV and vulnerable groups (men who have sex with men, sex workers, injecting drug users, etc), and to be aware of the importance of a consensus on the comprehensive national AIDS response for reaching sustainable results.

Recommendation 3

- Given the consensus on the importance of civil society involvement, we **ask the PCB to task** UNAIDS to support the application of the community sector guidelines in countries to ensure strengthened national responses through more inclusive and coordinated stakeholder action.

Deeper harmonization and alignment of the international community. As an attempt to apply the principles of the Paris and Rome declarations, the Global Task Team embodies a powerful and dynamic response, which is ensuring a more harmonized and effective multilateral response. It is

evident that progress has been made in many areas, but that acceleration and deepening of action is still required to fully respond to the challenge of Global Task Team. Where further progress is also needed is in ensuring that the commitments of other international partners to the principles of Paris and Rome are translated into action at country level, specifically in relation to the AIDS response. In many countries we see this is not the case, and there is still weakness in ensuring harmonization of actors and alignment behind national strategies and plans, resulting in fragmentation and competing processes. Development partners need to improve their process and incentives for greater harmonization. The requirements needed to scale up towards universal access demand that this is resolved expediently.

Recommendation 4

- We ask that the **PCB call on** the UN Resident Coordinator and UNAIDS Country Coordinator to actively support the National AIDS Coordinating Authority in brokering frank and open dialogue on how harmonization can be improved, and explore how the mode of engagement of all external partners can be brought more in line with the recommendations and promises made in Paris and Rome.

4.2 Strengthening technical support to the national AIDS response

Technical and management support is a critical function of UNAIDS at the global, regional and country level. The Technical Support Facilities, including the Brazilian International Centre for Technical Cooperation, are an essential element of UNAIDS' strategy in responding to this demand. However, there is still a need to facilitate: a) the development of joint assessments of technical support needs of countries (both technical and management support needs) and b) the development of joint approaches to the provision of coordinated technical support through the Technical Support Facilities, the UN system and other partners (including technical and management support provided through bilateral initiatives).

Following the request of the Secretary-General, UN Country Teams should establish and strengthen technical support through the joint programmes and "Joint UN Teams on AIDS" to ensure coordinated support to the national response to AIDS.

Recommendation 5

- We ask that the **PCB provide guidance** on progressing the options proposed in this paper for the provision of additional resources to improve the quality and quantity of technical support to country AIDS response, as called for through the Global Task Team recommendations.

Recommendation 6

- We ask the **PCB to recommend** that all UN agencies participating in the GIST ensure their continued commitment and accountability for action at the global, regional and country levels to "make the money work" and ensure that the UNAIDS Secretariat and WHO receive full support from GIST partners for the effective and efficient running of the GIST secretariat.

Recommendation 7

- We ask the **PCB to recommend** that the Global Fund and UNAIDS work closely to strengthen links between Technical Support Facilities, technical support mechanisms of the Cosponsors, the GIST (including GIST-like mechanisms at country level) and the Global Fund Early Alert and Response system to ensure the provision of urgent technical support to unblock implementation obstacles to "making the money work" for countries, including

strengthening links among technical support initiatives of the UN System, bilateral donor agencies, private foundations and civil society organizations.

4.3 Improving Accountability – Assessing and brokering greater progress towards harmonization

In recent years national and international partners have developed and adopted a number of challenging commitments and recommendations, designed to ensure a more effective and scaled up response to the AIDS epidemic. A significant task for the immediate future is to comprehensively monitor and report on stakeholder adherence and performance relating to these commitments, and to address them at national, regional and global level, thus improving transparency and accountability. To assist this process and to promote more constructive and focussed dialogue on resolving blockages to effective scale-up, the Country Harmonisation Assessment Tool should become a standard tool for advocacy and gauging alignment and harmonization of national and international partners in support of the national response. The lessons learned from the use of this tool could also be used as part of a global review process, where partner governments, their bilateral and multilateral supporters, NGOs, civil society and the private sector would review progress towards the “Three Ones”. Through consideration of CHATs and other data, partners could discuss the challenges of harmonisation and alignment, and make commitments for moving forward.

Recommendation 8

- We ask the PCB to endorse the development and implementation of the Country Harmonization Assessment Tool, and the engagement of all partners in reporting frankly on progress and bottlenecks, and committing to working vigorously to removing the blockages identified.

Recommendation 9

- We ask the PCB to endorse the inclusion of multi-partner dialogue on the “Three Ones” as part of the thematic sessions of the PCB, where the lessons from CHATs and similar tools can be presented, challenges and actions for progress discussed, and agreements made for moving towards more harmonized and aligned practice at country level.

ANNEXES

Annex 1: The “Three Ones” Principles and the Global Task Team Recommendations¹⁵

“Three Ones” Principles	Global Task Team Recommendations
<p>One comprehensive national AIDS framework:</p> <ul style="list-style-type: none"> - fully costed (with work plan and budget) - negotiated and endorsed by key stakeholders 	<p><i>Recommendation 1.1</i> Countries develop annual priority AIDS action plans that drive implementation, improve oversight, emphasize results, and provide a solid basis for the alignment of multilateral institutions’ and international partners’ support; within related efforts to progressively strengthen national AIDS action frameworks and root them in broader development plans and planning processes.</p> <p><i>Recommendation 1.2</i> Countries ensure that their macroeconomic and public expenditure frameworks support and appropriately prioritize the implementation of national AIDS action frameworks and annual priority AIDS action plans. The Bretton Woods Institutions, UNDP, and the UNAIDS Secretariat commit to supporting these actions.</p> <p><i>Recommendation 2.2</i> In line with the Paris Declaration, the Global Fund, World Bank, other multilateral institutions, and international partners; (a) progressively shift from project to programme financing, based on costed, prioritized, evidence-based, and multisectoral national AIDS action frameworks and annual priority AIDS action plans that are linked to broader development processes such as Poverty Reduction Strategies; and (b) commit to harmonizing and better coordinating their programming, financing, and reporting.</p>
<p>One National AIDS Coordinating Authority:</p> <ul style="list-style-type: none"> - recognized by law - with broad-based multisectoral support - with full technical capacity for coordination, monitoring and evaluation, financial tracking and strategic information management 	<p><i>Recommendation 2.1</i> Multilateral institutions and international partners commit to working with national AIDS coordinating authorities to align their support to national strategies, policies, systems, cycles and annual priority action plans.</p> <p><i>Recommendation 2.1 (point 3)</i> Based on requests from countries, UNAIDS, the Global Fund, and the World Bank will support efforts at country-level to define problems in the relationship between the single national AIDS coordinating authority and the Country Coordinating Mechanism, clarify principles, and disseminate good practices.</p> <p><i>Recommendation 3.1 (point 2)</i> The joint UN team will, upon request, support national AIDS coordinating authorities to develop capacity to oversee implementation and to identify and solve problems, through whichever modality is most appropriate for national contexts</p> <p><i>Recommendation 3.2 (point 1)</i> Multilateral institutions and international partners will assist national stakeholders to convene, under the umbrella of the national AIDS coordinating authority, task-specific teams for problem-solving and concerted action on monitoring and evaluation, procurement and supply management, technical support needs, and human resource capacity development.</p> <p><i>Recommendation 4.2 (point 4)</i> National AIDS coordinating authorities, multilateral institutions and international partners to increase the role of civil society and academic institutions as implementers of monitoring and evaluation, including the collection of information from marginalized communities and the critical analysis of national data.</p>
<p>One National Monitoring and Evaluation System:</p> <ul style="list-style-type: none"> - integrated into the national AIDS framework - with standardized indicators endorsed by key stakeholders 	<p><i>Recommendation 4.1</i> Within existing participatory reviews of national AIDS programmes, UNAIDS assist national AIDS coordinating authorities to lead participatory reviews of the performance of multilateral institutions, international partners and national stakeholders that build upon existing OECD/DAC standards and criteria for alignment and harmonization.</p> <p><i>Recommendation 4.2</i> Multilateral institutions and international partners assist national AIDS coordinating authorities in the strengthening of their monitoring and evaluation mechanisms and structures that facilitate oversight of and problem-solving for national AIDS programmes.</p>

¹⁵ Not all Global Task Team recommendations match with the Three Ones since some of them address specific UN reform issues (under heading 3. Reform for a more effective multilateral response).

Annex 2: Progress on the Global Task Team recommendations

Progress on the Global Task Team recommendations, May 2006 update			
<i>1. Empowering inclusive national leadership and ownership</i>			
Recommendations and deliverables	Planned outcome	Institution	Progress reported by institution
1.1. Countries develop annual priority AIDS action plans that drive implementation, improve oversight, emphasize results and provide a solid basis for the alignment of multilateral institutions' and international partners' support; within related efforts to progressively strengthen national AIDS action frameworks and root them in broader development plans and planning processes.			
Develop "internationally recognized" standards and criteria for the establishment of annual AIDS action plans by December 2005	Analysis of existing action plans for best practice development and consensus of standards, criteria and scorecard-style tool	World Bank	Analysis completed World Bank (2005), Review of National HIV/AIDS Strategies for Countries Participating in the World Bank's Africa Multi-Country AIDS Program (MAP). Workshop of experts held January 2006 to develop business plan for AIDS Strategy and Action Plan facility
Provide support to the development of annual priority AIDS action plans in 5–10 countries in highly affected regions by December 2005	Establishment of ASAP (AIDS Strategy and Action Plan) facility and support to development of 2nd generation strategic AIDS frameworks	World Bank, UNDP and UNAIDS Secretariat	Development under way, but further progress pending additional funds
1. 2. Countries ensure that their macroeconomic and public expenditure frameworks support and appropriately prioritize the implementation of national AIDS action frameworks and annual priority AIDS action plans. The World Bank commits to working with the International Monetary Fund, UNDP and UNAIDS Secretariat to support these actions.			
Provide support on the integration of AIDS into PRSPs to four countries initially and then to all who are updating PRSPs	Mainstreaming tools and training workshop modules/guidelines; training workshops at regional and national level; support to preparation of 'second generation' PRSPs	UNDP	A joint UNDP, World Bank and UNAIDS initiative has been rolled-out in seven African countries. A review of mainstreaming guides and tools was undertaken, training materials developed, regional capacity building and country assessment missions and studies conducted. Initiative is providing technical and financial resources for implementation of country follow-up activities, and is being expanded to 10 additional countries in 2006
Gather evidence on economic consequences of AIDS to shape policies, reviews and country assistance. Report progress on a regular basis	Internal review; preparation of tools and training	World Bank	Pending progress update
<i>2. Alignment and harmonization</i>			
Recommendations and deliverables	Planned outcome	Institution	Progress reported by institution
2.1. Multilateral institutions and international partners commit to working with national AIDS coordinating authorities to align their support to national strategies, policies, systems, cycles and annual priority AIDS action plans			

The Global Fund and World Bank will identify approaches to improve alignment of financing with country cycles and AIDS action plans	Analysis, assessment and action	Global Fund	Work Ongoing: alignment with fiscal cycles largely in place; increased emphasis on reference to and alignment with country plans included in GF Round 6 proposal form. Strengthening of national credible and costed strategies and action plans, including through Global Task Team follow up under ASAP will be critical to strengthen linkages in proposal development and implementation
The Global Fund and the World Bank will participate in joint annual reviews and their primary evaluation	Identify countries and develop nationally owned annual reviews for GF/World Bank purposes in three countries	World Bank	Next steps and country (15) actions defined in 10/11 Jan 2006 Washington consultation meeting between the World Bank, Global Fund and USG (PEPFAR). Work Ongoing: Identification of potential countries for Joint Annual Reviews ongoing - use of same PR not considered essential as long as program wide review is undertaken. Joint reviews undertaken or planned in the Caribbean, Eritrea, Ethiopia, Rwanda and Mozambique to date
Clarify the relationship between the National AIDS Coordinating Authority and the Country Coordinating Mechanism	Analysis and action with report to PCB	Global Fund	Global Fund in discussions with a number of countries on rationalizing coordinating structures to fit "Three Ones" and Global Fund CCM requirements. No explicit request received from countries to date
<p>2.2. In line with the OECD/DAC Paris Declaration, Global Fund, World Bank, other multilateral institutions, and international partners; (a) progressively shift from project to programme financing, based on costed, prioritized, evidence-based, and multisectoral national AIDS action frameworks that are linked to broader development processes such as Poverty Reduction Strategies; and (b) further commit to harmonizing and better coordinating their programming, financing, and reporting.</p>			
Shift from project to programme financing	Strategies developed	Global Fund	As part of the Strategy development process for the Global Fund, the Policy and Strategy Committee is discussing options which will be presented for Board approval in November 2006
Pilot joint financial management and procurement assessments, and program and financial reporting	Analysis of joint action and feasibility for use of joint management unit; Consensus on Terms of Reference for audits and performance monitoring	World Bank and Global Fund	Assessments for Round 5 ongoing with Local Fund Agents strongly encouraged to use existing assessments. No countries identified that are in both World Bank appraisal and Global Fund assessment to allow simultaneous, coordinated assessment Assessments for Round 5 ongoing with LFAs strongly encouraged to use existing assessments. In countries where World Bank does an appraisal, Global Fund will not do a separate assessment.
Institute steps to assess status of and challenges to joint implementation processes and approaches	Improved communication with information sharing mechanisms	World Bank and Global Fund	Global Fund accepting joint reporting in SWAp in Mozambique (Finance and Program) and Malawi (Program for HIV, for Malaria), and emerging in Mali. Other cases in the process of being documented. Global Fund and World Bank staff adopting policy of notifying each other of country missions. GF-WB-USG Consultation meeting held on all three diseases in Washington, Jan 2006. Joint processes being used in varying degrees in Guyana, Mali, Malawi and Mozambique. Further analytical work to be done on obstacles and challenges, including on the role of LFAs in SWAp and Common Fund situations (initiated)
Progress on procurement and supply management bottlenecks	Identify 10 countries with delays, hold regional workshops, develop action plans; build consensus policies and procedures	UNICEF and Global Fund	Planning 7 December 2005; support has been initiated in four GIST countries requiring Procurement and Supply Management assistance; 2005 training activities ongoing. Training plan for 2006 has been drafted and finalized. WHO-WB-GF-UNICEF coordinated PSM workshops and technical support ongoing. Exploration of Joint procurement planning in a number of countries underway. Joint World Bank-PEPFAR-TGF Procurement Working Group established March 2006

3. Reform for a more effective multilateral response			
Recommendations and deliverables	Planned outcome	Institution	Progress reported by institution
3.1 The UN Secretary-General instruct the UN Resident Coordinator to establish, in collaboration with the UN Country Team, a Joint UN team on AIDS—facilitated by the UNAIDS Country Coordinator – that will develop a unified UN country support programme on AIDS within the national planning framework.			
The Secretary-General to communicate to UN Resident Coordinators on establishment of UN-team groups on AIDS; and UN Development Group to ensure joint teams with unified programmes are established	Letter from UN Secretary-General sent; best practice plans, guidelines and Terms of Reference for Joint UN Teams developed; unified programme in 10 countries	UNDGO	Letter sent to all UN Resident Coordinators 12/12/2005. Best Practice analysis of UN Theme Groups undertaken. UN-Implementation Support Plans reviewed and benchmarks developed. ToRs of joint teams developed. Comprehensive report on all aspects of joint planning being finalized. In 19 countries Joint UN Teams have been established
3.2 The multilateral system establish a joint UN system / Global Fund problem-solving team to support efforts to address implementation bottlenecks at country level.			
National task-specific teams for problem-solving and action on monitoring and evaluation, procurement and supply management	National task-specific teams for problem-solving established; best practices documented	UNAIDS Secretariat	Establishment of how GIST-like functions can effectively be undertaken at country level is ongoing. GIST guided by UN Country Team
Establish the Joint UN system-Global Fund Problem-Solving Team	GIST established with concept paper and TORs; meetings held monthly	UNAIDS Secretariat	GIST was established in early July 2005 and has since held regular meetings. Monthly meetings and consideration of countries facing challenges ongoing. Joint GIST missions made to Guinea-Bissau, Caribbean, Niger and Nigeria. Several other countries with ongoing GIST support
Good practices and lessons learnt disseminated to support country efforts	'Best practices and lessons learnt' report disseminated	UNAIDS Secretariat	Work in progress. Analysis of lessons learnt and communication strategy under development
3.3. UNAIDS Cosponsors and the Global Fund establish a more functional and clearer division of labour, based on their comparative advantages and complementarities, in order to more effectively support countries.			
UNAIDS to agree on UN system division of labour	Division of labour document developed, negotiated and disseminated; implemented via GIST and UN-country teams / theme groups	UNAIDS secretariat	To be endorsed at 18 th PCB. Agreed by co-sponsor organisations and being used by Cosponsors to reorient country support
CCO to consider recommendations from the independent review at October 2005 meeting	Consider review and any recommended changes to governance structure; implement any agreed changes in governance structure.	UNAIDS Secretariat	The Boston Consulting Group's (BCG) independent review of the CCO functioning was discussed at the 26 th CCO meeting and the relevant resolution was approved. The 27 th CCO meeting in Madrid, in April 2006, reviewed progress on the implementation of the resolution. Updates and outcomes will be presented to the 18th meeting of the UNAIDS Programme Coordinating Board (PCB) in June 2006

Global Fund and World Bank to lead a rapid process to evaluate and clarify areas of overlap and comparative advantages between the two	Consensus on independent report on overlap and actions needed	Global Fund and World Bank	Consultant report (by Alex Shakow) prepared and presented in January 2006 to Global Fund and World Bank and relevant governance structures for consideration. Action plan to be developed to address relevant recommendations
3.4 Financing for technical support be considerably increased, including expanding and refocusing UNAIDS Programme Acceleration Funds (PAF) so they enable the UN system and others to scale up the provision and facilitation of technical support, based on requests by countries.			
Agree on broadening of Programme Acceleration Funds	Agreement reached on new arrangements for Programme Acceleration Funds; PAF implemented	UNAIDS Secretariat	A paper for general agreement on new arrangements of PAF has been developed and implementation begun
Determine most effective way to finance expansion of the Programme Acceleration Funds	Agreement reached on financing the Technical Support Acceleration Funds	UNAIDS Secretariat	A concept paper on Technical Support Acceleration Funds has been developed. No agreement reached on financing
Intensify efforts to evaluate progress on building national capacity on procurement and supply chain management	Course materials reviewed and supply chain management / rational drug use added; nine regional courses and 30 national courses held	World Bank and WHO	UNICEF, lead agency in this area according to technical support division of labour—for progress, see 2.2. of this Annex

4. Accountability and oversight			
Recommendations and deliverables	Planned outcome	Institution	Progress reported by institution
4.1 Within existing participatory reviews of national AIDS programmes, UNAIDS assist national AIDS coordinating authorities to lead participatory reviews of the performance of multilateral institutions, international partners and national stakeholders that build upon existing OECD/DAC standards and criteria for alignment and harmonization.			
UNAIDS Secretariat lead on development of a scorecard-style accountability tool for partner participation and alignment	Scorecard-style accountability tool developed, tested and distributed	UNAIDS Secretariat and World Bank	The Country Harmonization Assessment Tool (CHAT) is currently being developed; Country consultations on preliminary draft started in April 2006. Five countries will be engaged in review/field testing. CHAT will build on existing data collection and harmonization assessment tools
UNAIDS to organize global level review of partner alignment and support and disseminate the results of national performance reviews	At least 10 countries reporting on implementation of scorecard with global review to be held	UNAIDS Secretariat	Awaiting finalization of CHAT. Once completed, a dissemination strategy will focus on orientation for use of the tool and to identify countries for application. In early 2007, findings from the assessment will be analyzed and used for reporting and possible refinement of CHAT
4.2 Multilateral institutions and international partners assist national AIDS coordinating authorities in the strengthening of their monitoring and evaluation mechanisms and structures that facilitate oversight of and problem-solving for national AIDS programmes.			

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Operationalize a Joint Monitoring and Evaluation Facility	Monitoring and Evaluation Technical Assistance and Training facility (METAT) functions expanded; review of monitoring and evaluation harmonization status in the Reference Group (MERG); Revise Global Fund monitoring and evaluation toolkit and improve harmonization of training efforts	UNAIDS Secretariat and World Bank	Initial e-workspace facility has been established. This facilitates country requests for relevant documentation, training, and technical assistance in monitoring and evaluation. MERG was convened 15–16 November 2005 in Geneva with two sub-working groups formed to review harmonization of monitoring and evaluation guidance and to foster coordinated evaluation studies at country level. Global Fund Toolkit revised and disseminated
Facilitate the establishment of the Monitoring and Evaluation Country Support Teams	Joint monitoring and evaluation programme launched; initiate second wave of countries	UNAIDS Secretariat and World Bank	Monitoring and evaluation country support teams to include UN and other international partners at country level. Set of 'Principles' for harmonizing and aligning work programs developed and being reconciled with TORs for Country Teams
Upon country request, place existing and planned UN system country monitoring and evaluation advisers in offices of the national AIDS authority	UN (HIV and AIDS) monitoring and evaluation staff placed in or close to national offices; logistical support organized; evaluate efforts to strengthen national M&E capacity	UNAIDS Secretariat and World Bank	Survey to be conducted by the Country and Regional Support Department with discussion of policy and resource support to follow. Work to be completed in 2006
Increased role of civil society and academic institutions as implementers of monitoring and evaluation, including the collection of information from marginalized communities and the critical analysis of national data	Capacity-building and involvement of civil society in-country in the AIDS-response including M&E activities; identify opportunities for greater use of civil society as data providers and analysers	UNAIDS Secretariat and World Bank	Following the establishment of the Civil Society Steering Committee in March 2005 the group provided input to new UNGASS Reporting. Core guidelines provided recommendations for civil society involvement, including data collection, vetting, and use of qualitative analysis of indicator results. Global Fund and Secretary-General Reports include CSO input.
Implement global information-sharing practices on commitments, disbursements and performance	Reach consensus on mechanism for information sharing to national authorities using harmonized format	Global Fund and World Bank	Global Fund website recognized as model for transparency and information sharing— all grants and disbursement requests as well as Grant Report Cards posted on website in real time. World Bank considering approaches to improve availability of similar information. AIDS Joint Partner data sharing meetings convened in June and December 2006 including UNAIDS, PEPFAR, World Bank, DFID, WHO