

PCB Working Group to Review and Further Develop the Results and Accountability Framework of the 2016-2021 UBRAF

At its 37th meeting 26-28 October, the UNAIDS Programme Coordinating Board (PCB) approved the 2016-2021 Unified Budget, Results and Accountability Framework (UBRAF), taking into account the views expressed by the Board. The PCB recalled decision point 7.2 of the 36th meeting of the PCB – establishing a Working Group on the UBRAF – and noted that it *'looks forward to the presentation of a revised Results and Accountability Framework for approval at the 38th meeting of the PCB'*.

Meeting 2-3 March, Montreux Note for the Record

Introduction

Following a first face-to-face meeting of the PCB Working Group on 14-15 December 2015, a second face-to-face meeting took place on 2-3 March 2016. The Working Group concluded that considerable progress had been made towards a *final, more detailed and prioritized 2016-2021 UBRAF*. Four technical experts nominated by member states, two technical experts nominated by the PCB NGO delegation and two Cosponsors representatives in addition to UNAIDS Secretariat staff participated in the meeting (see list of participants attached as an Annex).

Discussions during the meeting focused on ways of explaining better what the UBRAF can and cannot be given inherent complexities related to the Joint Programme, how to address gaps and shortcomings in the UBRAF, refinements needed to finalize the UBRAF indicators, and ways of improving the presentation of the 2016-2021 UBRAF further.

Summary of discussions on a more detailed and prioritised UBRAF

- **Definition of outputs and attribution.** The UBRAF presents a list of country outputs – what the Joint Programme wants to achieve at country level and what it wants to be measured against. Such outputs could have been defined as lower level results, fully attributable to the Joint Programme. However, the choice has been to define broader outputs/intermediate outcomes at country level to which UNAIDS makes a contribution jointly with Governments, donors and other partners. This provides more relevant information about the Joint Programme, but requires clearly articulated theories of change for the outputs in the UBRAF.
- **Role and functions of the Joint Programme.** While recognizing that the work of the Cosponsors is captured in the UBRAF results matrix, a section which describes the core functions of the Cosponsors was requested to be included in the UBRAF. The key actions in Annex 1 of the UBRAF should be reviewed with core functions mapped against them to provide a better picture of what Cosponsors do.
- **Definition of core and non-core resources.** The difference between core and non-core funds should be explained in more detail. A proposed definition for non-core resources is *resources that contribute to the achievement of UBRAF outputs and which are or can be measured through UBRAF indicators*. Cosponsors are not, in a strict sense, accountable to the PCB for non-core funds, but reporting on the non-core funds to the PCB is valuable and desirable.
- **Resource allocation process.** More clarity is needed on the programming and resource allocation process for the Cosponsors and a profile for each Cosponsor included in the UBRAF.

- **Regional dimensions.** The regional summaries should be finalized with maps to indicate the presence of the Joint Programme and core budget allocations and estimates of non-core resources by region. Updated profiles should be prepared every two years to take into account epidemiological and other changes.
- **A broad range of M&E tools, including independent evaluations.** The revised UBRAF offers a broad range of monitoring and evaluation tools that together provide a more comprehensive and valid picture than any single method or source of information would do. The section on independent evaluation still needs to be strengthened to i) show evaluation as a fundamental part of a robust performance measurement system; ii) provide more detail on the role and evaluation; and iii) explain limitations in terms of resources for monitoring and evaluation.
- **Data collection and reporting.** A reporting pyramid could be used to explain different methods and reporting at different levels. It is recommended that external partners be invited to participate in the validation of JPMS data. Ratings or performance assessments, e.g., a dashboard on programmatic performance could be considered to flag where and when there are issues in achieving results. Data should be made publicly available through the International AID Transparency Initiative (IATI).
- **Role and contribution of civil society and other partners.** The role and resourcing of civil society and engagement with the private sector and other partners should be more clearly reflected in the UBRAF.
- **Reporting and targets to be adjusted to funding levels.** The overall risk of not being able to deliver on the outputs due to a shortfall in funding should be reflected in the UBRAF.
- **Consultations with key donors and other PCB members.** Key constituencies should be briefed to ensure that the final, more detailed and prioritized 2016-2021 UBRAF is well received and approved at the 38th PCB in June.

Summary of discussions on UBRAF indicators

- **Finalisation of indicators.** The UBRAF indicators were finalised and concrete measurements proposed. The Working Group prioritized measurement questions under each indicator (where possible, to no more than four questions covering major contributions of the Joint Programme). Questions were made specific, easy to answer with: 'Yes'/'No' or 'Not Relevant'. UBRAF outputs indicators measure elements that are *plausible results of the work of the Joint Programme at country level*. An indicator should be considered as met only if the answer to all questions under the indicator is a 'Yes' (excluding cases of where the answer is 'Not relevant'). The approach is meant to avoid scoring formulas that are difficult to interpret.
- **Qualitative and quantitative information.** The UBRAF indicators capture quantitative information - while qualitative information is collected through JPMS progress reports under each output, therefore no additional text/narrative will be collected with the indicators.
- **Measurement of engagement with civil society.** In order to account for and measure UN Joint Team contributions to strengthen civil society engagement in the national response, the following was proposed and agreed with civil society representatives:
 - Under each result area, an indicator was selected and a question on "*engagement of specific population groups*" added to the measurement questions. This is in line with UNAIDS guidance that calls for meaningful engagement with civil society to be incorporated into all areas of the Joint Programme's work;
 - Under the output that refers to countries having developed a sustainability plan (7.1) - a measurement question was introduced checking if the HIV sustainability plan covers

- financial contributions to and participation of civil society, including for human rights;
 - An indicator was developed to measure UNAIDS Secretariat performance in supporting civil society with *resource mobilization*;
 - Additional information on strengthening of civil society at country level will be collected through the JPMS narrative/qualitative reports.
- **Establishment of baselines and targets.** The process will be led by the Secretariat as a matter of priority between mid-March and mid-April 2016.

Conclusions

- ❖ The revised UBRAF represents a significant improvement on the 2016-2021 UBRAF presented to the October 2015 PCB in several respects:
 - More information about the role and functions of the Joint Programme
 - Fewer outputs (a reduction from 22 to 20) and prioritisation
 - Inclusion of a theory of change to explain assumptions and risks
 - Significantly strengthened indicators to measure contribution and performance
 - Use of more sources and triangulation of data and evaluations to measure results
 - External validation of data
- ❖ A number of key features at the heart of the UBRAF need to be explained more clearly:
 - Measurement of outputs at country level and the contribution of the Joint Programme to these - explaining that full attribution is not possible
 - Focus on intermediate outcomes/outputs linked to the results in the Strategy over more narrowly defined outputs - explaining the advantages of this approach
 - The need for a package of monitoring and evaluation tools to measure the performance of the Joint Programme - indicators are not used in isolation.

Timeline of next steps

Dates (2016)	Focus	Scope
Mid March	Online work	Finalization of output indicators and Secretariat performance indicators
End March	JPMS (country offices)	UNAIDS Secretariat to initiate testing of indicators; collection of baselines and setting of milestones and targets
Mid March	Email exchanges and online work	UNAIDS Secretariat and Cosponsors to initiate the development of a more detailed and prioritised UBRAF, based on Working Group recommendations
Mid/End April	Email exchange and webinar(s) as necessary	Endorsement by the Working Group of the revised Results and Accountability Framework
Mid/End April	Email exchange	Report of the PCB Working Group to be circulated for comments and finalized for the PCB
Mid/End April		Briefing of Member States and Civil Society
Mid May 2016	Document production	Editing and translation of 1) the revised UBRAF and 2) the Report of the PCB Working Group for presentation to the 38th PCB in June 2016

ANNEX

List of participants

Independent experts nominated by member states

Dr. Brigitte Jordan-Harder (Germany): Dr. Jordan-Harder is a physician with background in international public health, communicable diseases control and sexual and reproductive health with emphasis on HIV and AIDS. Her qualifications include, among others: programming, implementation and monitoring of HIV prevention, care and treatment and sexual and reproductive health programmes; support to multi sectoral responses to HIV; policy and strategy development; programme planning, evaluation and review; design and management of results oriented monitoring systems. In addition, she has experience as a member of past advisory groups related to UBRAF monitoring systems and good knowledge of UN organizations.

Mr. Stein Erik Kruse (Norway): Mr. Kruse is a Senior Consultant with the Nordic Consulting Group. He has experience of programme evaluations, design of M&E systems, project and programme development and sector/ country programming, organisational development and research, including with multilateral organizations and on public health. Mr. Kruse reviewed the 2012-15 UBRAF and his recommendations contributed to the development of the 2016-21 UBRAF.

Dr. Juliana Givisiez (Brazil): Dr Givisiez is an epidemiologist with background in public health for over ten years. She has been working in the Department of STIs, AIDS and Viral Hepatitis in Brazil since 2009, most of that period in the Monitoring & Evaluation team. Her main activities were focused on strategic information, especially the development and monitoring of indicators and projects and the elaboration of national and international reports. She has recently been assigned as the coordinator of the Department's International Cooperation.

Mr. Raymond Yekeye (Zimbabwe): Mr. Yekeye is Programme Director at the National AIDS Council in Zimbabwe. He also serves as the Co-Chair of the Indicators Working Group of MERG (Monitoring and Evaluation Reference Group) since its establishment. He has a solid background and country experience in monitoring and evaluation as well as on programmatic HIV issues from the East and Southern Africa region. Currently he is also the chair of the organizing committee of the 2015 International AIDS Conference for Africa (ICASA).

Independent experts nominated by the PCB NGO delegation

Ms. Luisa Orza (ATHENA network). Luisa Orza is Programmes Director for the ATHENA Network as well as a Salamander Trust Associate, and STOPAIDS Trustee. Prior to this, she was M&E Officer for ICW from 2004 - 2009. Over the past ten years Luisa's work has focused primarily on the sexual and reproductive health and rights of women living with HIV; strengthening the leadership and participation of women living with HIV, including young women living with and most affected by HIV; and on preventing and addressing violence against women in the context of and response to HIV.

Dr. Michael Arnold (Center for Sexuality and Health Disparities). Dr. Arnold is a researcher with over 15 years of experience in programme evaluation, behavioral and psychosocial health research, and social policy analysis. Research topics include the influence of programme, policy, and environmental factors on the well-being of marginalized and disadvantaged groups. His experience with qualitative methods and using data to promote social justice is particularly relevant to the working group.

Cosponsor Representatives

Ms. Ariana Stahmer, Division for Teaching, Learning and Content, Education Sector, UNESCO

Mr. Kerry A. Kutch, HIV Department, WHO

Representatives of UNAIDS Secretariat

Mr. Vinay Saldanha, Director, Regional Support Team, Eastern Europe and Central Asia

Ms. Mary Mahy, Chief, Strategic Information and Monitoring

Secretariat of the Working Group

Mr. Joel Rehnstrom, Director, Planning, Finance and Accountability

Ms. Elisabetta Pegurri, Senior Adviser, Planning, Finance and Accountability

Ms. Abigail David, Senior Planning and Monitoring Adviser

Ms. Samia Lounnas, Senior Adviser, Governance and Multilateral Affairs Division