

MANAGEMENT RESPONSE AND TRACKING	
Evaluation title	An Evaluation of the Work of the Joint United Nations Programme on HIV and Social Protection 2018-2022
Office/Region	Global level and six regions
Year of the report	2023
Overall response to the evaluation	<i>Please include an assessment of the process and outcomes of the evaluation, adequacy of evidence and concurrence with findings. Were there limitations in the process and/or outcomes? Are there any additional insights not articulated in the recommendations?</i> This evaluation provides a useful and rich documentation of the Joint program's social protection work between 2018 and 2022. Readers will need to understand that there was limited leadership in 2022/2023 as the organisation worked on recruiting a social protection lead at UNAIDS Secretariat global centre, who is on board. Regarding sampling, the report may have presented a different picture with inclusion of more countries from sub-Saharan Africa where social protection is required in the context of poverty and high HIV burden than the majority of settings included in the evaluation. It is also important to note the constrained resource environment including a current significant shortfall below minimum UBRAF budget. Full movement on recommendations depends on closing that gap and ultimately on full funding of the UBRAF's budget of \$210m per annum.
Planned use of evaluation	<i>Please describe the process to facilitate the intended use, focusing on how evaluation findings will affect the programme and contribute to evidence-based decision making</i> The evaluation report will be one of the key resources in designing the 2024-2025 social protection workplan in consultation with UCOs, RSTs, civil society and co-sponsors. recommendations of the report will be used to strategy with the UBRAF 2026 – 2030. Systems like the IATT and other regional bodies could be set up and feed into the development of a strategy. In the interim, a roadmap could be developed for 2024-25. This would also give more time to ensure that the strategy and SP work would include the leveraging of other platforms which will only get more important as time goes on and HIV-specific resources dwindle.

Recommendations and responses						Tracking	
No	Recommendation	Management response	Actions planned	Responsible	Timeframe	After six months (January - June 2024)	After one year (January - December 2024)
	<i>Please list the recommendation from the Evaluation Report</i>	<i>Please indicate if: - Accepted - Partially accepted (please report reasons) - Not accepted (please report reasons)</i>	<i>Please indicate the concrete actions planned by UNAIDS and partners to implement the recommendations</i>	<i>Please be specific and indicate who (Staff or Unit/office) in UNAIDS is responsible for the actions. If it is a joint response it should list who these are specifically</i>	<i>Please be specific and indicate a completion date (the overall timeframe is usually one year)</i>	<i>Please indicate status of implementation and actions taken. If an action is no longer relevant due to a changed context, please provide a justification and indicate if it should be cancelled or reformulated.</i>	<i>Please indicate status of implementation and actions taken</i>
	Global centre						
1	Clarify the future of the social protection position at the UNAIDS Secretariat and consider its inclusion in a broader area of work of the Secretariat, such as in eliminating stigma and discrimination, and its connection with the data department (Linked to conclusions I, II, IV, XI, XII and XIII).	accepted	The link with other areas which increases uptake of social protection is useful; show how role intersects with inequalities work (gender equality, discrimination, human rights, structural factors). cost effectiveness; design monitoring indicators;	UNAIDS secretariat	6 months (January - June 2024)	Social protection FP appointed; collaborated with Education plus Initiative to provide social protection for AGW;	Currently developing social protection for UHC agenda to influence sustainability planning.
2	Articulate a common understanding of HIV-sensitive social protection as an area of work of the Joint Programme, and reinforce the roles of the UNAIDS Secretariat and each of its Cosponsors in the implementation and evaluation of efforts in supporting all HIV-vulnerable groups through sustained linkage to available social protections (Linked to conclusions III, IV, VII, VIII, X, XI, XII and XIII).	partially accepted	Develop and share secretariat workplan. Revise IATT/reference group terms of reference;	IATT (UNAIDS, ILO, WFP, UNICEF, World Bank, UNESCO, UN Women, UNDP)	2 years (January 2024 - December 2025)	Draft workplan for the period for 2024-2025 developed with ILO, WFP, and UNAIDS. Under knowledge generation and management planned work, an article titled "Are people living with, at risk of, or affected by HIV accessing social protection programmes? Evidence from HIV and social protection assessments from low-and middle-income countries" was submitted to Plos Global in June 2024 and is under review. The paper aims to widely disseminate synthesised findings of HIV and social protection assessments. UNAIDS followed up on HIV sensitive social protection assessments in Africa to draw lessons on how to integrate recommendations in policy frameworks.	on planned advocacy work, UNAIDS continued supporting Zambia develop its education plus investment case which acts as advocacy material for school based social protection interventions. On knowledge generation and management, a UNAIDS study titled "Re-imagining barriers to social spending in developing countries: A review" was published in November 2024. It is intended use in advocacy for increased fiscal space and efficiencies in government spending for UNICEF has ongoing work on Public Health and inclusion surveys annually in which free access to ARVs through national health systems is tracked. In 2023, of the 49 countries surveyed (hosting refugees), over 90% of countries provided access to ARV (anti-retroviral therapy) through the national health system.
#	In collaboration with UCOs and national stakeholders, promote ownership of the monitoring of HIV-sensitive social protection, and the use of the related data for planning and monitoring actions at the country level. Identify and leverage existing survey mechanisms to extract or embed monitoring indicators; utilise these data to provide evidence of the Joint Programme's impact on HIV-sensitive social protection. Where possible, disaggregate data by key population and other priority populations. Disaggregation will provide insights into the inequalities faced by different groups and their level of access to different social protections. (Linked to conclusion VIII)	accepted	Harmonise data from multiple sources; strengthen effective and timely dissemination of social protection data to influence country planning/priority setting; Support UCOs to follow and review evidence base for use in advocacy;	IATT (UNAIDS, ILO, WFP, UNICEF, World Bank, UNESCO, UN Women, UNDP)	1 year (January - December 2024)		
#	the coverage of people living with HIV was not included in their social protection work. The way forward could be a collaboration of UN entities to commission a study on HIV-sensitive social protection, with data on coverage to inform advocacy work related to the ongoing reform of the social protection system and to strengthen the availability of data for key populations	partially accepted.	Commission HIV-sensitive social protection studies in outstanding countries and include coverage data	IATT (UNAIDS, ILO, WFP, UNICEF, World Bank, UNESCO, UN Women, UNDP)	2 years (January 2024 - December 2025)	Almost all agencies have highlighted how HIV is in their social protection work. In Colombia, UNHCR supported the socioeconomic inclusion of key populations and PLHIV, refugee, migrants, and host communities in order to enable better conditions for their health and wellbeing, prevention of risk behaviours and better treatment adherence for PLHIV. This initiative was done through training in entrepreneurship, employability, financial inclusion, and seed capital for small business start-ups. In Cameroon, the ILO supported the implementation of the KOFCA project (2021-2024) which aimed to empower women in refugee-affected regions together with other implementing agencies such as WFP, UNICEF and UNHCR and focused on the extension of social protection, GBV and HIV prevention services to the vulnerable women. As of 2023, the World Bank's social protection work related to jobs were valued at \$87 billion, reaching over 19 million beneficiaries—work that reduces HIV vulnerabilities, empowering people to protect themselves and access services. More than 20 World Bank-financed social protection programs integrate GBV prevention and response. UNAIDS Ongoing follow up study on use of HIV sensitive social protection assessments in influencing social protection and the national response.	
4	In collaboration across Joint Programme organisations, review the UNAIDS Social Protection Assessment Tool and revise guidance for its implementation to optimise efficiency, as well as guidance for data analysis and use. For the sake of sustainability and considering implementation challenges in the past, the review should consider integration in other tools designed and systematically applied by Joint Programme Cosponsors or more broadly across relevant UN agencies (Linked to conclusions VI, and IX).	accepted	IATT to convene and commission a study to assess scope of harmonisation/integration and facilitate a revision consultative workshop	IATT (UNAIDS, ILO, WFP, UNICEF, World Bank, UNESCO, UN Women, UNDP)	1 year (January - December 2024)		UNAIDS analysis of comparative tools in progress and will be completed by June 2025.
5	In collaboration with Regional Support Teams, establish geographic priorities for the work of the Joint Programme in HIV-sensitive social protection on the basis of challenges (e.g. high prevalence, criminalization) and opportunities (e.g., social protection reform and expansion). Enhance collaboration across Joint Programme agencies in those regions and/or countries.	accepted	Convene regional meetings/workshops to set priorities.	IATT, UNAIDS SP lead; UNAIDS and co-sponsor RSTs, ERA FPS	6 months (January - June 2024)		UNAIDS has work in progress, to be informed by the global HIV sensitive social protection report in progress and the report will be ready and published by June 2025.
6	The Joint Programme must explore all opportunities to engage with social protection programmes, policies, schemes, conferences, etc., to ensure that HIV concerns are highlighted. This recommendation is applicable at the global, regional and country levels.	accepted	Resume IATT Social Protection reference group quarterly meetings; To develop ToRs for same platform at regional and country levels. Its main objectives is to review co-sponsors' project reports; share emerging evidence and innovations; and identify ways of influencing projects planned by co-sponsors.	IATT (UNAIDS, ILO, WFP, UNICEF, World Bank, UNESCO, UN Women, UNDP), RSTs, UCOs	6 months (January - June 2024)	Joint program has been using Webinars. A social protection Cash Plus' model designed, implemented and evaluated in Tanzania was disseminated by UNICEF in a webinar May 2024. It provides new evidence to support further scale-up of Cash Plus models targeting adolescents. At ICASA 2023, UNFPA and UN partners disseminated an advocacy framework for Sex workers health and welfare titled: "Advancing Sex Workers' Health and Welfare Programming in East and Southern Africa: A Joint United Nations, Sex Workers and Civil Society Advocacy Framework"	UNAIDS has work in progress, to be informed by the global HIV sensitive social protection report in progress and the report will be ready and published by June 2025.
	Regional level						

7	Once concepts and tools have been revised, tap into opportunities at the regional level (facilitated by the Regional Support Teams) to provide training in HIV-sensitive social protection, with a view to strengthening existing HIV and social protection expertise at the country level among UCOs, CSOs, government and other partners, including the development of various skillsets required, and the matching of skills to contexts and programme aims	accepted	Disseminate revised assessment tool to regional offices together with guidelines and training. Using through workshops, regional civil society will be capacitated to use the data from these tools for advocacy.	IATT (UNAIDS, ILO, WFP, UNICEF, World Bank, UNESCO, UN Women, UNDP) UNAIDS SP lead; UNAIDS and co-sponsor RSTs. ERA FPs	2 years (January 2024 - December 2025)	UNAIDS and UNICEF initiated a capacity building project for government in Bangladesh. The process will be shared with other countries in region and other regions in cross learning and to generate demand for other countries. In Cameroon, Liberia and Uganda, UN Women supported organizations of women living with HIV in capacity building capacity of women to access financial services, such as banking, loans and saving schemes. UNICEF conducted a systematic review of bundled interventions for adolescents at risk of, or living with HIV, and how they can be further strengthened. The findings were published in early 2024. A compendium of knowledge products from the Zether & SRHR joint UN regional programme on SRHR-HIV integration in ID East and Southern African countries supported by the Government of Sweden and implemented by UNAIDS, UNFPA, UNICEF and WHO was published. The report provides lessons learned and ways forward for further integration and linkages of HIV within comprehensive SRHR services. UNFPA has continued to progress integration of HIV within broader SRH	
National level							
8	UCOs should concentrate efforts in advocacy on improved accessibility of social protection and provision of appropriate and adequate benefits and programmes for people living with, at risk of or affected by HIV, including key population groups (including sexual- and gender-minority populations, people who use or inject drugs, and youth), in connection with broader advocacy work on universal social protection (Linked to conclusions IV and VIII).	accepted	Global centre to capacitate UCOs to leverage on existing data sources; provide knowledge products covering emerging evidence, innovations and best practices. UCOs to communicate gaps in need of expertise, innovations, and best practices.	UNAIDS global centre lead, UCO focal person	1 year (January - December 2024)	In Zambia, the ILO in partnership with UNHCR and NSSF, developed a roadmap for integration of refugees and host communities including the most marginalized such as persons with disabilities, and persons living with HIV into the National Social Security Fund (NSSF) product for informal economy workers. UNHCR supported Rwanda to ensure that refugees are part of the 2023 submission for the Global Fund funding request for HIV, TB and malaria. A UNAIDS study on prioritization of social protection in national HIV strategies and GF funding requests in progress. It will inform gaps that countries need to prioritise as well as shared learning	
9	UCOs, in collaboration with Joint Programme agencies in country, should engage national social protection programmes and advocate for the voices of key and vulnerable populations to be included at all stages in the conceptualization, design, analysis, planning, implementation, monitoring and evaluation of social protection schemes at the country level (Linked to conclusion XIII).	accepted	Several countries are already engaging with stakeholders and co-sponsors. UCOs to engage stakeholders existing social protection national coordination mechanisms and platforms to avoid an isolated parallel, unsustainable workstream of HIV sensitive SP. UCOs to regularly share emerging evidence on gaps and successes for advocacy on these platforms.	UCO focal person	1 year (January - December 2024)	UNAIDS supported Gambia, Zimbabwe and Bangladesh in co-sponsor led social protection projects (WFP, UNICEF), currently working with Angola to explore ways of coordinating with UNICEF in Child healthcare investment case. In Indonesia, the support from ILO and UNAIDS to the Indonesia AIDS Coalition made a case for transgender persons to obtain identity cards (ID) cards for social protection programmes. The absence of ID cards served as a barrier to the uptake of the Social Protection services for trans persons from Indonesia.	UNICEF and partners in the Joint Programme continues to support governments to identify ways in which HIV services can be integrated into social protection programs, and how these programs can be used to strengthen the overall HIV response. In Zambia, the ILO through the JUNSPPS, is supporting the National Insurance Authority to extend coverage to poor and vulnerable households of people living with HIV and TB, including 16,000 households of people living with HIV with the aim to reach universal health coverage. UNAIDS study on prioritization of social protection in national HIV strategies and GF funding requests in progress. It will inform gaps that countries need to prioritise as well as shared learning;
#	UCOs, in collaboration with Joint Programme agencies in country, should engage representatives of key and other vulnerable populations, including groups that are most neglected in the country, to identify barriers to accessing available social protections and to collaborate in finding appropriate solutions (Linked to conclusions IV, V, XIII and XIV).	accepted	Several countries are already engaging with stakeholders and co-sponsors. UCOs to engage stakeholders existing social protection national coordination mechanisms and platforms to avoid an isolated parallel, unsustainable workstream of HIV sensitive SP. UCOs to regularly share emerging evidence on gaps and successes for advocacy on these platforms.	UCO focal person	1 year (January - December 2024)	UNFPA led the UN Family and regional level Sex Worker Partners to conclude and disseminate at ICASA December 2023 an advocacy framework for Sex workers health and welfare titled: "Advancing Sex Workers' Health and Welfare Programming in East and Southern Africa: A Joint United Nations, Sex Workers and Civil Society Advocacy Framework". The framework provides guidance on programming for sex worker inclusion in food security and social protection services, gender-responsive economic transformation programming, vocational and financial skills training, and strengthening the relationship between sex workers and organized labour.	
#	UCOs should provide technical support and other resources to CSOs to enhance their role in documenting coverage and access to social protection programmes and to removing barriers among community members across the life course (Linked to conclusions IV, V, VI and XIV).	accepted	Efforts are already underway in a number of countries using CLM. Other countries to strengthen CLM by supporting capacity building of community organisations. However, UCOs cite constraints of low staffing levels and financial resources and they require additional financial and technical assistance	Global centre lead; UCOs	1 year (January - December 2024)	UNDP working in partnership with the World Food Programme and civil society organizations, supported social protection programmes in Dominican Republic to ensure greater inclusion of key populations. In China, UNDP supported the Beijing LGBT Centre to train mental health professionals who work on sexuality and gender-related issues. UNAIDS is working with sex workers alliance in Africa to ensure their findings and recommendations align with country strategic plans. The social protection reports above will take into account the sex workers alliance recommendations.	ILO and UNAIDS in Zambia supported HIV support groups through income generation projects. The support groups are empowered to manage and overcome stigma and discrimination.