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# 42<sup>nd</sup> Meeting of UNAIDS Programme Coordinating Board

Agenda Item 6: Unified Budget,  
Results and Accountability  
Framework (UBRAF)

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# Structure of 2016-2021 UBRAF



reminder

## VISION

Zero New HIV infection, Zero Discrimination and Zero AIDS Related Deaths

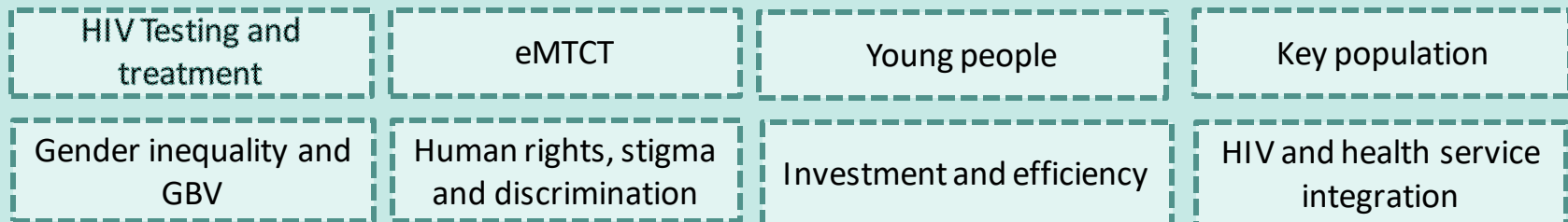
## SDG AIDS Target for 2030

End the AIDS Epidemic

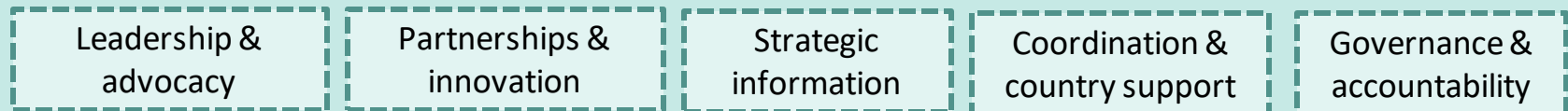
## UNAIDS 2020 Strategic Milestones and Targets

End the AIDS Epidemic

## 2016-2021 Result Areas and Outputs

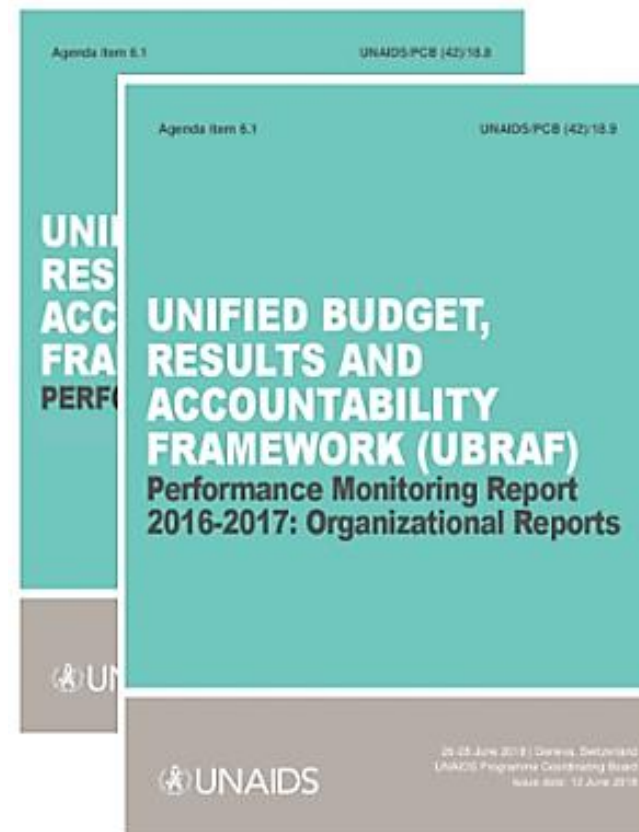


## Secretariat Functions



# Main features of performance monitoring report

Part I	Part II
<ul style="list-style-type: none"><li>▪ Collective achievements against Strategy Result Areas</li><li>▪ Progress against indicators</li><li>▪ Challenges and key future actions</li><li>▪ Regional reports</li><li>▪ Financial information</li></ul>	<ul style="list-style-type: none"><li>▪ Cosponsors and Secretariat organizational reports (case studies, progress against UBRAF outputs and knowledge products)</li><li>▪ Agencies' expenditures and encumbrances</li></ul>



# Effective strategic data collection through the JPMS



JPMS is a web-based tool that allows Joint Programme to report UBRAF implementation from countries, regions and headquarters/global levels in a structured and transparent way



## Reporting target achieved!

- 100% (96 countries) with either UNAIDS Secretariat presence, Joint UN Team on AIDS or both, including 33 Fast-Track countries
- All 6 regions of the Joint Programme submitted their reports in JPMS
- HQ level analysis and submissions: 8 strategic result areas, 20 UBRAF outputs and 5 Secretariat functions

# UBRAF implementation review

## Regional



- Captured progress in AIDS response in the regions
- Insights and feedbacks informed the global peer review / UBRAF external review

## Global



- Multistakeholder consultation
- An opportunity to review progress and reaffirm priorities
- Future planning

## OUTCOMES

- Key achievements against three zeros and challenges identified.
- Recommendations to further improve performance reporting (e.g. indicators, JPMS reporting)
- Future actions in the context of the new operating model

# Innovation and transparency in communicating results

THE [JOINT UNITED NATIONS PROGRAMME ON HIV/AIDS](#)

## Transparency Portal

This portal aims to strengthen transparency and accountability around the work we do, the results we achieve and the resources we use.

[UNAIDS TOP CONTRIBUTORS](#) | [INTERNATIONAL AID TRANSPARENCY INITIATIVE](#) | [JOINT PROGRAMME RESULTS](#)

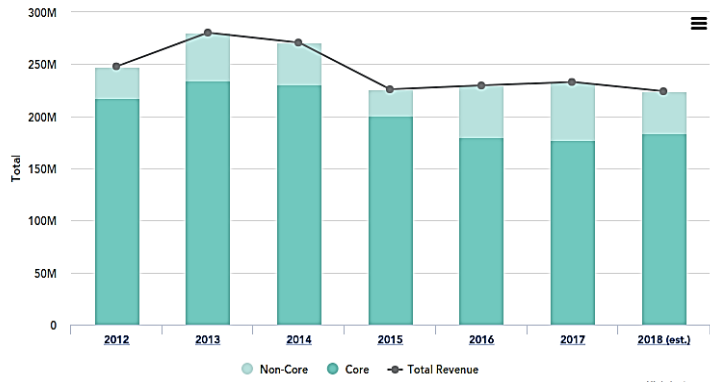




# What to look for in the Transparency Portal

## UNAIDS REVENUE IN 2017

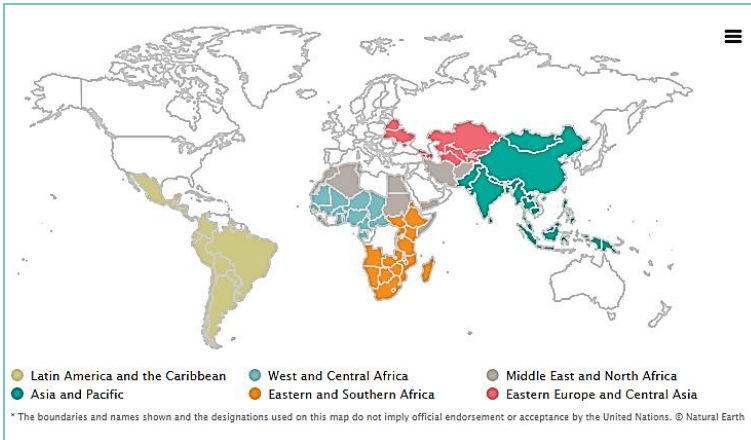
US\$ 232,937,912



## FLOW OF JOINT PROGRAMME RESOURCES 2016 - 2017 BY THEMATIC AREA



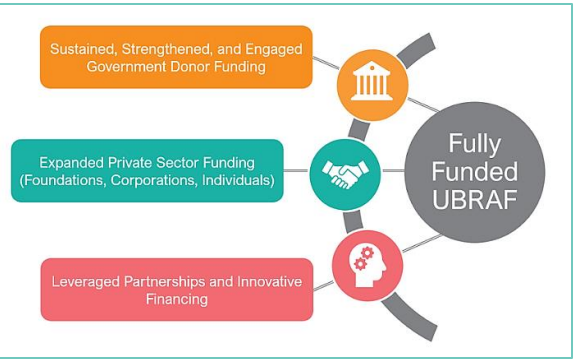
## Country and regional progress reports



## Link to UNAIDS IATI files

The screenshot shows the IATI portal interface with search results for 99 datasets found. The results list the Joint United Nations Programme on HIV and AIDS (UNAIDS) Secretariat Activities, including IATI data updated dates and download links.

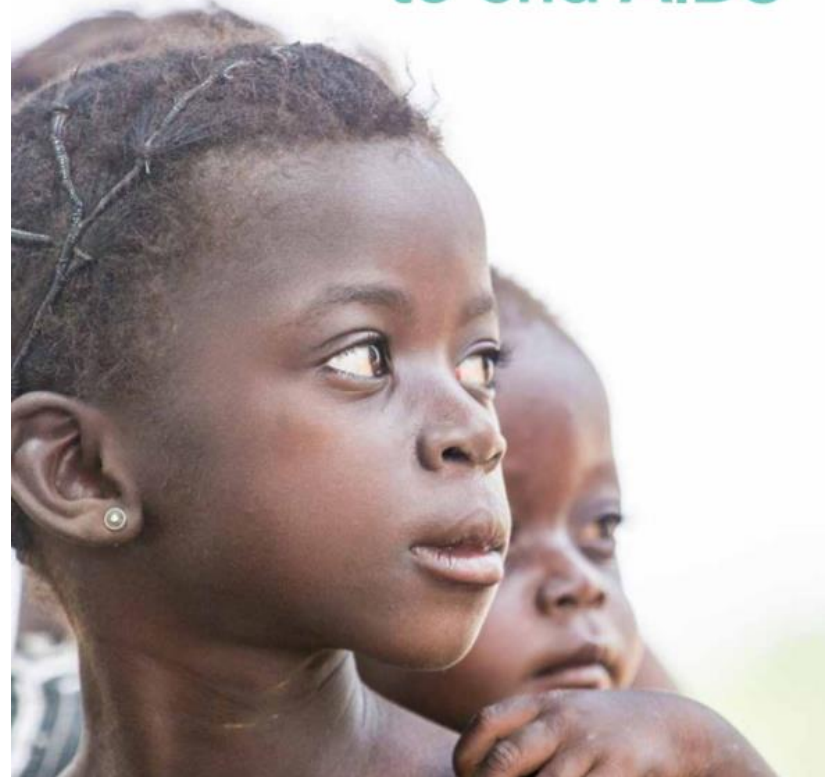
## Donors contributions



Joint Programme key  
achievements against  
Strategy Result Areas  
(SRAs)

UNAIDS | 2016–2021 Strategy

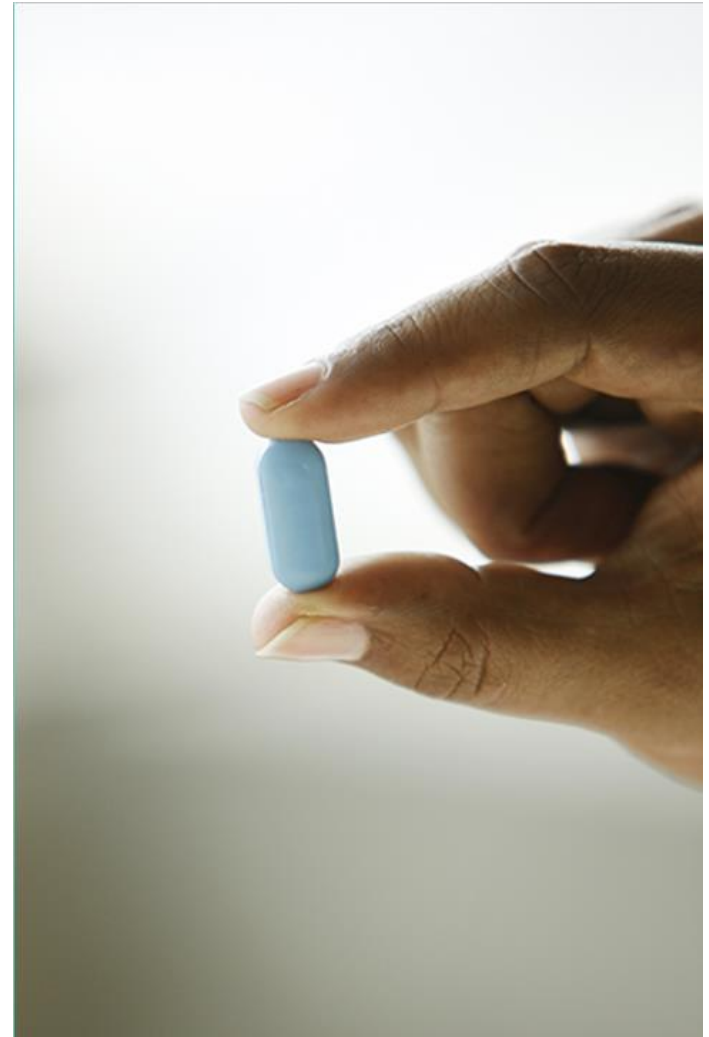
On the  
Fast-Track  
to end AIDS



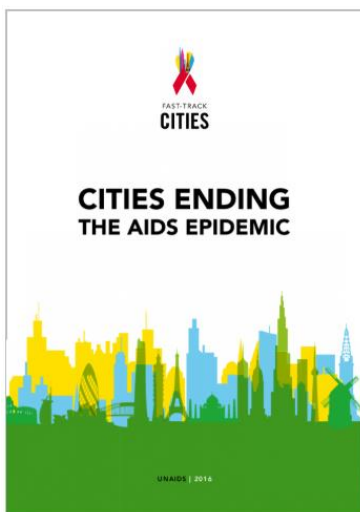


# SRA 1: HIV testing and treatment

- ❖ More than half of all people living with HIV (53%) had access to HIV treatment putting the world on track to reach 30 million people on treatment by 2020.
- ❖ AIDS related deaths reduced from 1.9 million in 2005 to 1 million in 2016
- ❖ HIV self-testing (HIVST) and partner notification are two key innovative strategies to increase access to testing.



# SRA 1: HIV testing and treatment



## ***Fast-tracking HIV services in high-burden cities***

- ❖ Continued advocacy and mobilization of political commitment in 2017 resulted in more than 250 cities and municipalities signing the Paris Declaration since its launch in 2014.

## ***HIV services in humanitarian emergencies***

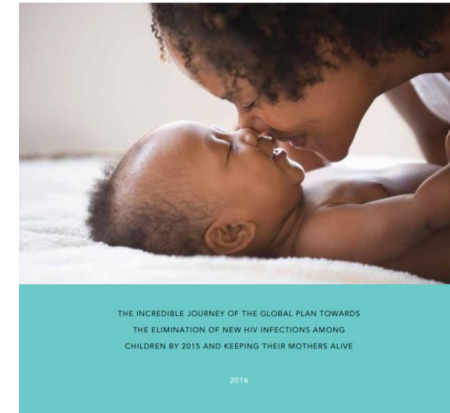
- ❖ In 2017, 82% of 96 countries with Joint Programme presence (including 26 Fast-track countries) offered HIV-related services for populations affected by humanitarian emergencies
- ❖ Greater attention needed to ensuring comprehensive, quality services with appropriate attention to human rights and gender equality esp. in internally displaced populations.



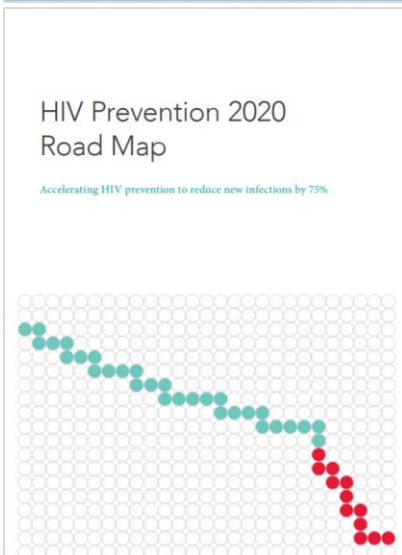
# SRA 2: Elimination of mother-to-child transmission

- ❖ The scale-up of prevention of mother-to-child (PMTCT) services is one of the greatest global public health achievements of the last decade.
- ❖ In 2016, 76% of pregnant women living with HIV received effective antiretroviral medicines (ARVs), up from 74% in 2015 and from a baseline of 36% in 2009.
- ❖ Transition to the *Start Free Stay Free AIDS Free* framework created pathways to ensure: all pregnant women can access ARVs and are retained in treatment and care;
- ❖ In November 2017, the Joint Programme and AIDS Free partners launched a global action plan to accelerate development of paediatric formulations.

ON THE FAST-TRACK TO  
AN AIDS FREE GENERATION



# SRA 3: HIV prevention among young people



2030 | Ending the AIDS epidemic

- ❖ The Joint Programme led several landmark initiatives to revitalize the prevention agenda:
  - more responsive to the needs of adolescents and young people esp. adolescent girls and young women.
- ❖ Newly launched Global HIV Prevention Coalition and the HIV Prevention 2020 Road Map; 25 countries adopted the road map and developed 100-day action plans.
- ❖ Publication of the revised UN International Technical Guidance on Sexuality Education will support countries to scale-up the education sector response to HIV. Efforts underway to support implementation, and develop guidance for CSE in out-of-school settings.
- ❖ In 2017, 91% of Fast-Track countries have supportive adolescent and youth sexual and reproductive health policies in place.

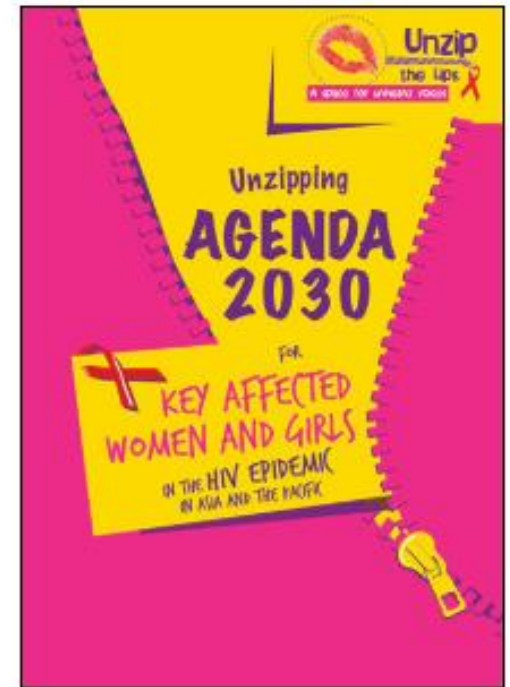
## SRA 4: HIV prevention among key populations



- ❖ 73% of 96 countries with Joint Programme presence, of which 23 are Fast-Track countries have comprehensive packages of services for men who have sex with men and sex workers defined and included in national strategies.
- ❖ 62% of 34 countries with a significant HIV epidemic among people who inject drugs (13 of which are Fast-track countries implement the four components of the PWID package (NSP, OST, HTS and ART) in combination.
- ❖ Punitive laws, policies and widespread violence and discrimination against key populations continue to hamper efforts e.g. Average HIV prevalence amongst sex workers in 16 countries in sub-Saharan Africa is 37%

## SRA 5: Gender inequality and gender-based violence

- ❖ While new HIV infections have declined among women over the last 15 years, women and girls remain highly vulnerable to HIV.
- ❖ To support country efforts to integrate gender equality priorities in national HIV strategies and GFATM Concept Notes, the Joint Programme developed and piloted tools and guidance notes.
- ❖ Women in Uganda successfully advocated for integration of gender equality issues into design of the PEPFAR 2017 Country Operational Plan and review of the 2018-2025 HIV Prevention Roadmap for Uganda.
- ❖ With Joint Programme Support, women living with HIV contributed to country reporting on Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW).



## SRA 6: Human rights, stigma and discrimination



- ❖ Discrimination against people living with and affected by HIV remains a significant barrier to mounting an effective response
- ❖ Political Declaration on HIV by UN Member States stated the importance of all human rights as an objective and means to ending AIDS.
- ❖ 42 % of 96 countries with Joint Programme presence have shown progress in addressing at least one law or policy that presents a barrier to delivering HIV services
- ❖ The Joint Programme targeted discrimination in health-care settings; the Agenda for Zero Discrimination in Health-Care Settings was launched in 2016, guiding collective advocacy, leadership, accountability and the implementation of evidence-informed interventions



# SRA 7: Investment and efficiency

- ❖ UNAIDS estimates that the Fast-Track AIDS response will cost an estimated US\$ 31.1 billion in 2020 and US\$ 29.3 billion in 2030.
- ❖ The Joint Programme has kept a strong emphasis on support for investment cases and optimal allocation of resources that prioritize high-impact locations, populations, and programmes.
- ❖ The Joint Programme pursued innovative mobile, or m-health strategies and developed several new tools to improve the efficiency of the response.
- ❖ Further and sustained domestic investment is needed



A screenshot of the U-Report website. At the top left is the 'U-Report' logo with the tagline 'VOICE MATTERS'. To the right is a navigation menu with links for 'About', 'Polls', 'Stories', 'U-Reporters', and 'Join &amp; Engage'. Below the navigation is a main content area with a dark background. It features a 'Message Us' button, a 'Follow @UReportGlobal' button, and a text box stating: 'U-Report is a social messaging tool that is free to everyone, wherever you are in the world, to speak out on development issues, support child rights and improve our communities'. To the right of this text is a white box with the text 'All U-Report members' and '5,126,315'. Below this is a 'CURRENT POLL' section with the text: 'Barriers for girls and women to get their first job - (Yo! Fest - a youth-led festival bringing young people and decision-makers together)'. At the bottom of the poll section is a link that says 'View Full Results --&gt;'. The background of the website features a group of young people.



# SRA 8: HIV and health service integration



- ❖ The Joint Programme worked to ensure universal access to integrated services, including for HIV, tuberculosis (TB), sexual and reproductive health, cervical cancer, harm reduction, and food and nutrition support.
- ❖ With partners, it strengthened the integration of HIV in the programmes of other sectors, including humanitarian responses, education and human rights initiatives.
- ❖ 63% of 96 countries with Joint Programme presence (of which 23 are Fast-Track countries) have been delivering services in an integrated manner, i.e., a client can receive services in one facility (in a single visit) for multiple interventions such as:
  - HIV, sexual and reproductive health, and gender-based violence services
  - HIV and TB
  - HIV and antenatal care
- ❖ Further integration of HIV with other programs and services remains important for achieving the SDG 2030 agenda, including achieving universal health coverage.

# SRA 8: HIV and health service integration



## *Social protection*

- ❖ 48% of 96 countries with UNAIDS presence (of which 14 are Fast-Track countries) have social protection strategies and systems in place that address HIV/AIDS which cover the following:
  - People living with HIV and affected by HIV
  - Orphans and vulnerable children
- ❖ 49% of these countries (including 17 FT countries) have national health insurance (and social health insurance where distinct), life or critical illness insurance that cover PLHIV.
- ❖ Social protection programmes, such as safety nets and livelihood interventions, are provided to men and women living with HIV and affected by HIV in 52 countries (of which 23 are FT countries)

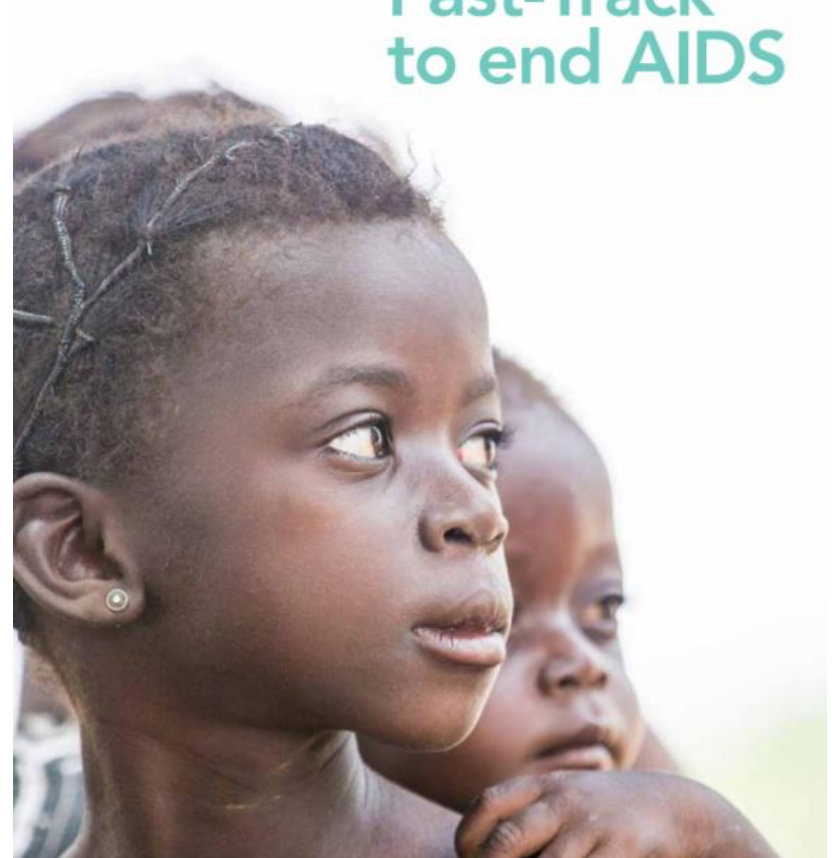
# Cross cutting challenges

1. Shrinking space for civil society
  - Civil society pivotal to the AIDS response
2. Gaps in data and the ability to disaggregate data
  - Knowledge of disparities in access and outcomes needed to inform action.
  - 2030 Agenda provides an opportunity
3. Insufficient attention to social and structural barriers
  - The need to demonstrate results favours biomedical interventions
  - Change to social and cultural norms, laws and policies takes time

# Key achievements against Secretariat Functions

UNAIDS | 2016–2021 Strategy

## On the Fast-Track to end AIDS



# UNAIDS Secretariat Functions

- Leadership, advocacy and communication
- Partnership, mobilization and innovation
- Strategic Information
- Coordination, convening and country implementation support
- Governance and mutual accountability

# Leadership, advocacy and communication

- The UN Member States endorsed the **2016 Political Declaration on Ending AIDS**
- The Declaration incorporated the **specific commitments and targets** as the milestones on the way to ending AIDS
- The Joint Programme convened the **Global Review Panel** to provide recommendations on refining and reinforcing its model
- The **Action Plan** in response to the recommendations of the Global Review Panel is under implementation worldwide



# Leadership, advocacy and communication

## ***Leveraging global agenda***

### **❖ Setting strategic agenda**

PCB thematic segments on HIV prevention and stigma in healthcare settings

### **❖ UN Reform discussion**

ECOSOC Resolution

### **❖ Human Rights Movement**

HIV segment of Human Rights Council Social Forum

### **❖ Media outreach and communication**

Promoting HIV in the global health and development landscape



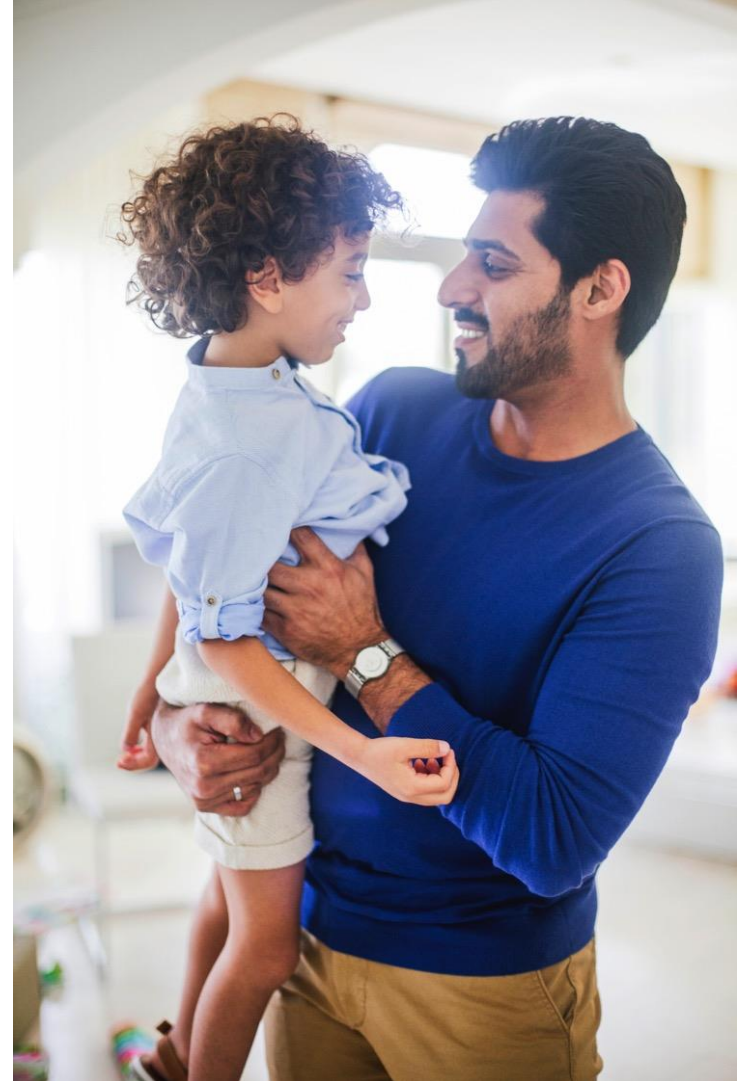
## *Example: HIV, the law and human rights in the African human rights system*





# Partnerships, mobilization and innovation

- ❖ During 2016-2017 biennium a total of US\$ 357 million was mobilized towards the approved budget of US\$ 485 million
  - 2016 : US\$ 180 million
  - 2017 : US\$ 177 million
- ❖ This represents 74% of the approved 2016-2017 core budget mobilized
- ❖ 2016-2017 total UBRAF core expenditure and encumbrances amounted to US\$ 356 million (74% implementation)
- ❖ The Secretariat allocated funds to support civil society in 2106-2017:
  - Core: US\$ 4.4 million [*18% of total core Programme funds or 2% of total core spending*]
  - Non-core: US\$28 million [*32% of total non-core funds*]



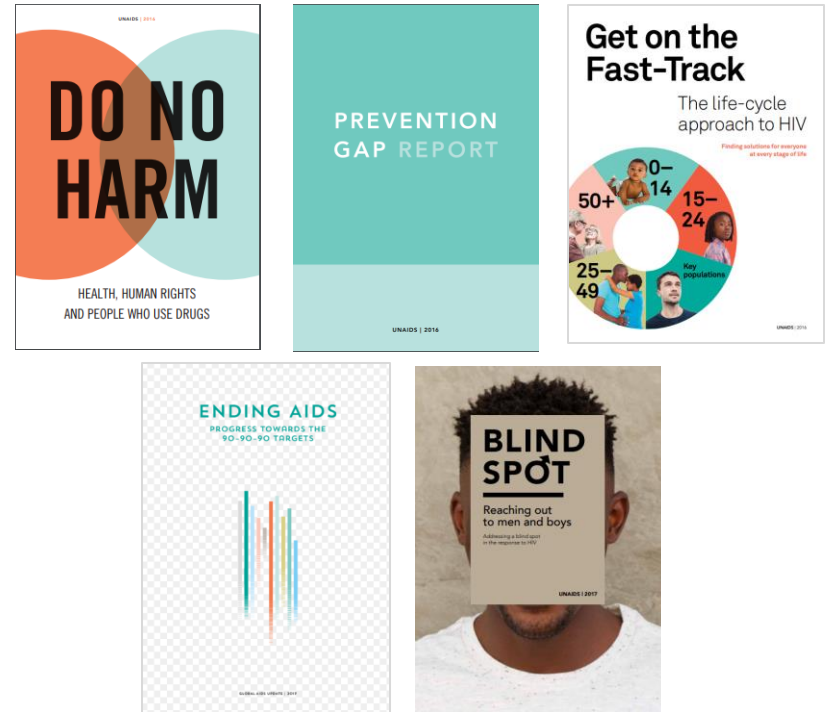
# Partnerships, mobilization and innovation

- Making the money work – amplifying the impact of funding Global Fund and PEPFAR through data and guidance
- Through PEPFAR funding, supported more than half of the 2017–2019 cycle of the Global Fund country applications facilitating access to approximately US\$ 2.5 billion in grants to accelerate the HIV and TB response
  - **14 new national strategic plans and investment cases** to reach prevention and treatment targets
  - 17 countries' concept notes
  - 27 recipients strengthening capacities for operational and financial management of grants
  - **52 countries implementing investment frameworks**, many developing stand-alone investment cases or using frameworks to inform their national strategic plans

# Strategic information

## ❖ Country data into policy recommendations

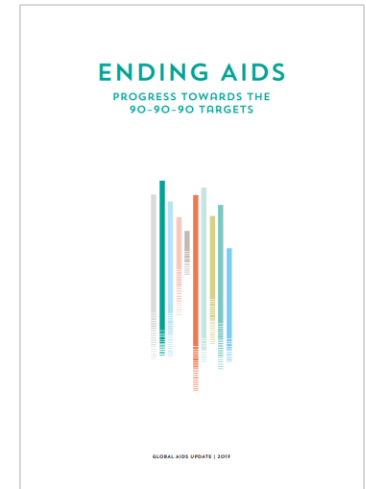
- Do no harm report, 2016
  - Prevention Gap report, 2016
  - Life Cycle report, 2016
  - Ending AIDS report, 2017
  - Blind Spot report, 2017
- Special economic and epidemiological analyses, including studies on the level of homophobia in more than 160 countries



# Strategic information

## Global AIDS Monitoring System

- 174 Member States (90%) reporting in 2017
- trained over 500 country-based individuals on how to use estimation and projection software to better understand their epidemic
- novel model to develop district level age and sex specific estimates of HIV burden for 10 high-burden countries



## Health Situation Room visualization tool developed for 8 countries (Kenya, Cote d'Ivoire, Lesotho, Mozambique, Namibia, Uganda, Zambia and Zimbabwe)

- collect real-time data from sub-national level
- guide responses using a location-population approach that focuses human and financial resources on the geographic locations and populations in greatest need



# Coordination, convening and country implementation support

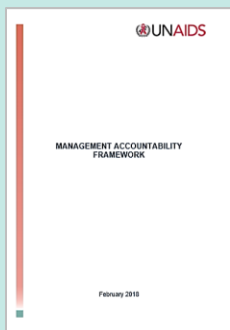
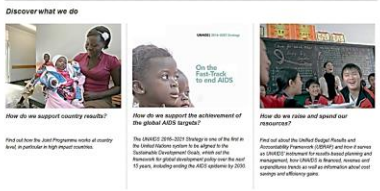
- Refined operating model:
  - **prioritized country targets** = corporate deliverables
  - new funding model
  - **integrated approach** (country capacity assessment, Joint UN Plans, country envelopes)
  - accountability for **results for people**
- 97 Joint UN Teams on AIDS are implementing the **integrated approach**
- 71 Joint Teams (in eligible countries) are working to utilize the **US\$ 22** million of core UBRAF allocation to country (country envelope)
- Regional Joint UN Teams on AIDS are engaged as effective quality assurance and country support mechanism

# Governance and mutual accountability

UNAIDS is now an IATI publisher !



UNAIDS Portal Investing for results



- ❖ In 2016, the Secretariat achieved the target of becoming International Aid Transparency Initiative (IATI) compliant and Secretariat data is published online.
- ❖ IATI and UBRAF –related programmatic and financial data are available online on the UNAIDS web portal
- ❖ Enhancement of the Internal Control Framework is an integral part of efforts initiated to strengthen risk management and accountability at the Secretariat.
- ❖ An evaluation guidance to complement the existing UNAIDS Evaluation Policy for human rights and gender responsive evaluation within UNAIDS has been developed.

*Agenda item 6.2*

*Financial Reporting*

# Overview of the financial situation

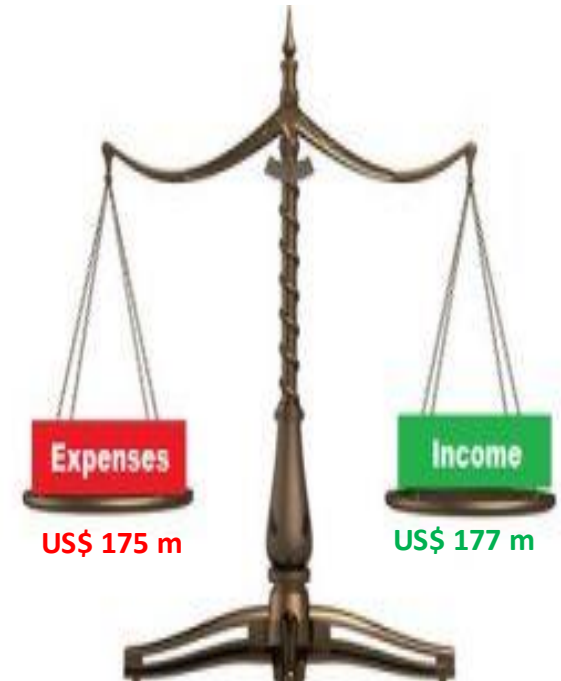
- Sixth set of financial statements prepared according to **IPSAS** accounting standards
- **Unmodified audit** opinion provided by the external auditors
- All recommendations of the **external audit** conducted in 2017 implemented
- Financial situation **stabilized** during 2017 – but remains tight
- US\$ 177 million raised – **73% of resource mobilization** target of US\$ 242 million)





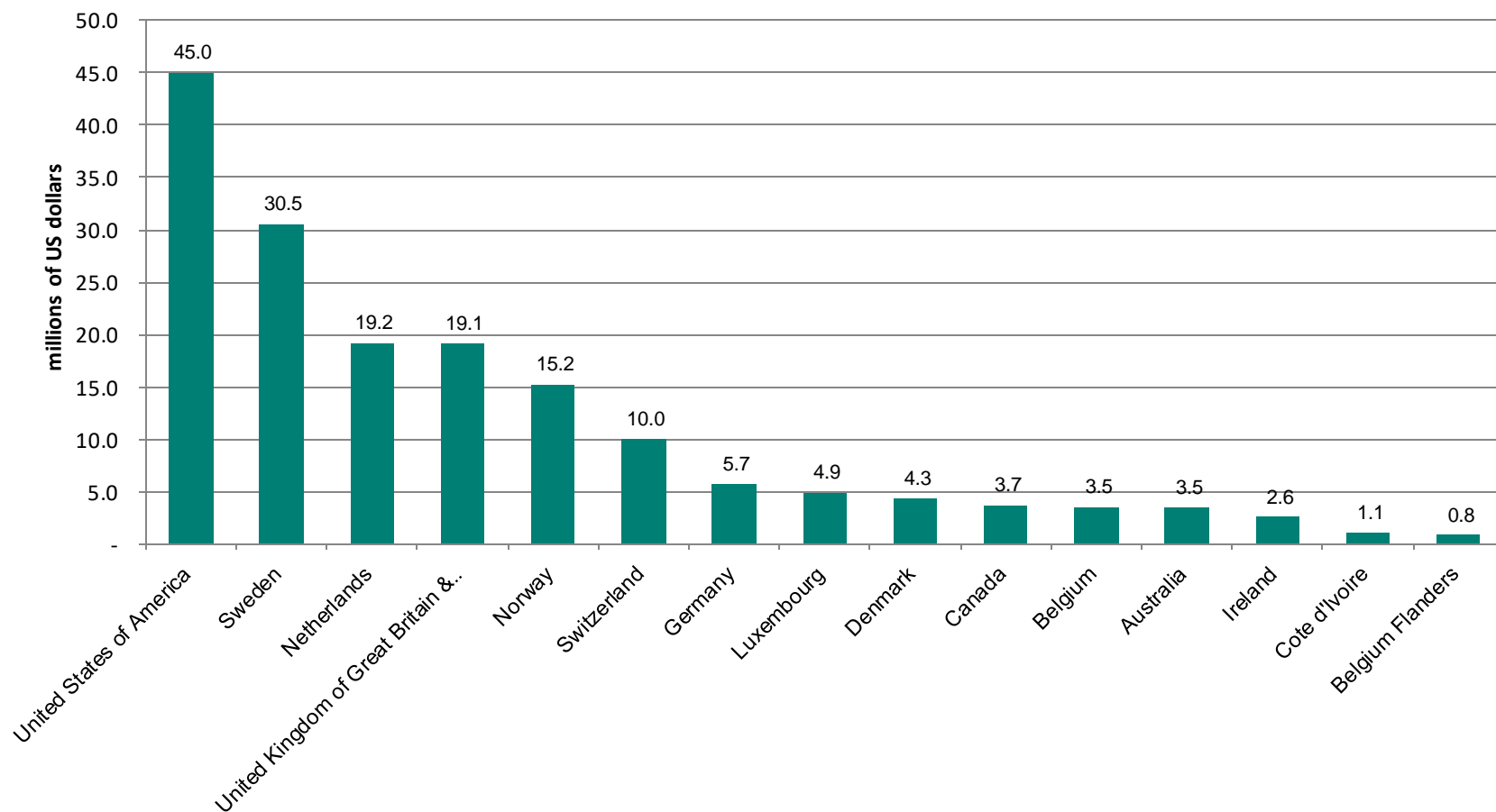
# Income and expenditures in 2017

- Core **income** totaling **US\$ 177 million** mobilized in 2017 compared to **US\$ 180 million** in 2016 and **US\$ 201 million** in 2015
- Total core **expenditures** (expenses and encumbrances) amounted to **US\$ 175 million** (compared to US\$ 184 million in 2016)
- Income and expenses **aligned**
- The net **fund balance** on 31 December 2017 stood at **US\$ 82 million** (compared to US\$ 80 million by the end of 2016)



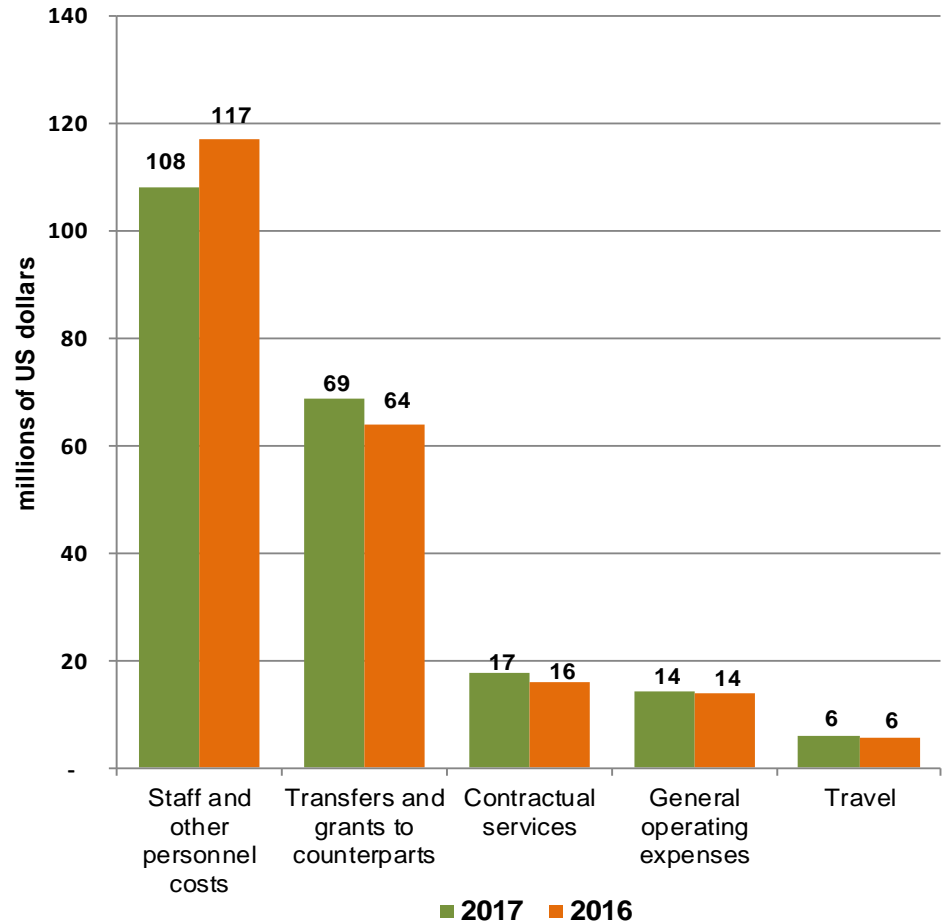
# 2017 core contributions from top donors

(in US dollars)



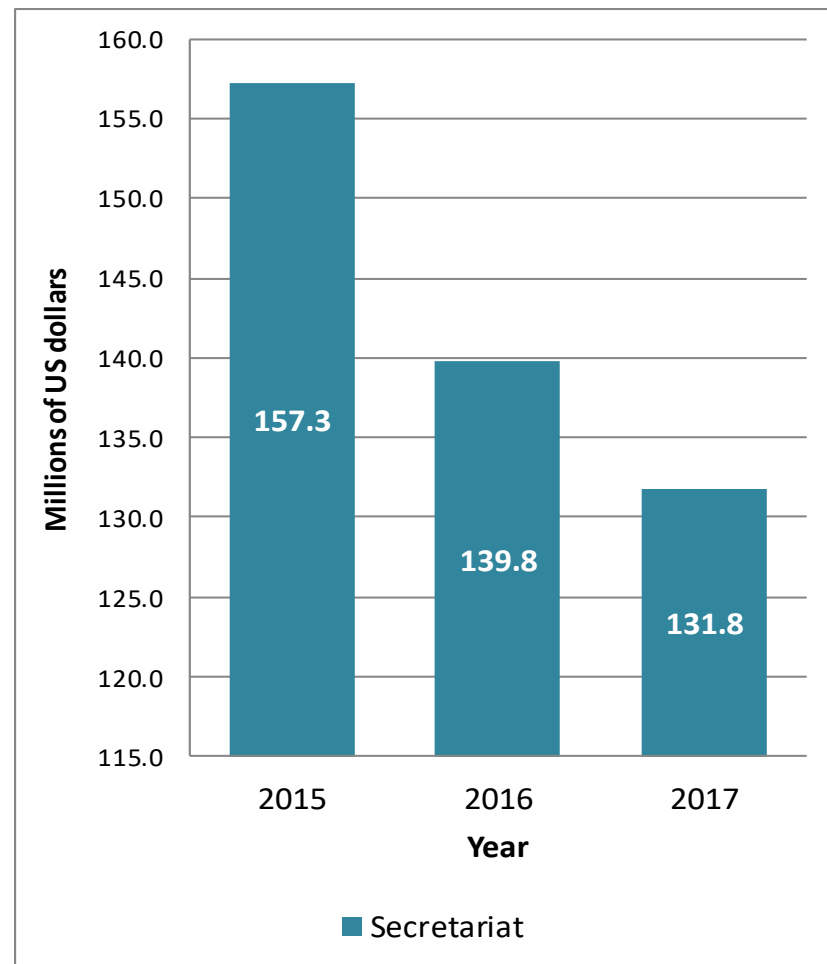
# Cost savings and efficiency gains

- Continued emphasis on **cost effectiveness** and **cost containment**
- Overall level of expenditure under major expense categories in 2017, **in line** with 2016 expense.
- Savings were mainly generated under **staff costs**

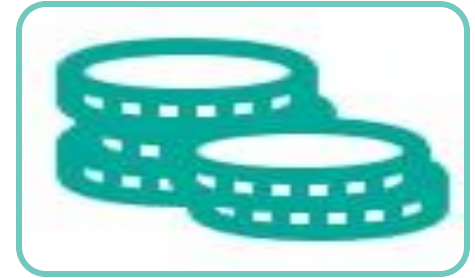


# UBRAF Core Secretariat expenditures 2015 - 2017

- Secretariat core UBRAF expense for 2015 amounted to **US\$ 157.3 million**
- Secretariat core UBRAF expense for 2016 amounted to **US\$ 139.8 million**
- Secretariat core UBRAF expense reduced by **15% or US\$ 23 million** against the approved budget of US\$ 155 million
- Secretariat 2017 expense of **US\$ 132 million** represented a reduction of **US\$ 8 million** when compared to 2016 (US\$ 140 million).



# Moving forward: implementing the Joint Programme Action Plan



**1** Recommendations of the Global Review panel

**2** UNAIDS response to panel recommendations: Joint Programme Action Plan

**3** 2018-2019 Budget Paper built on Action Plan

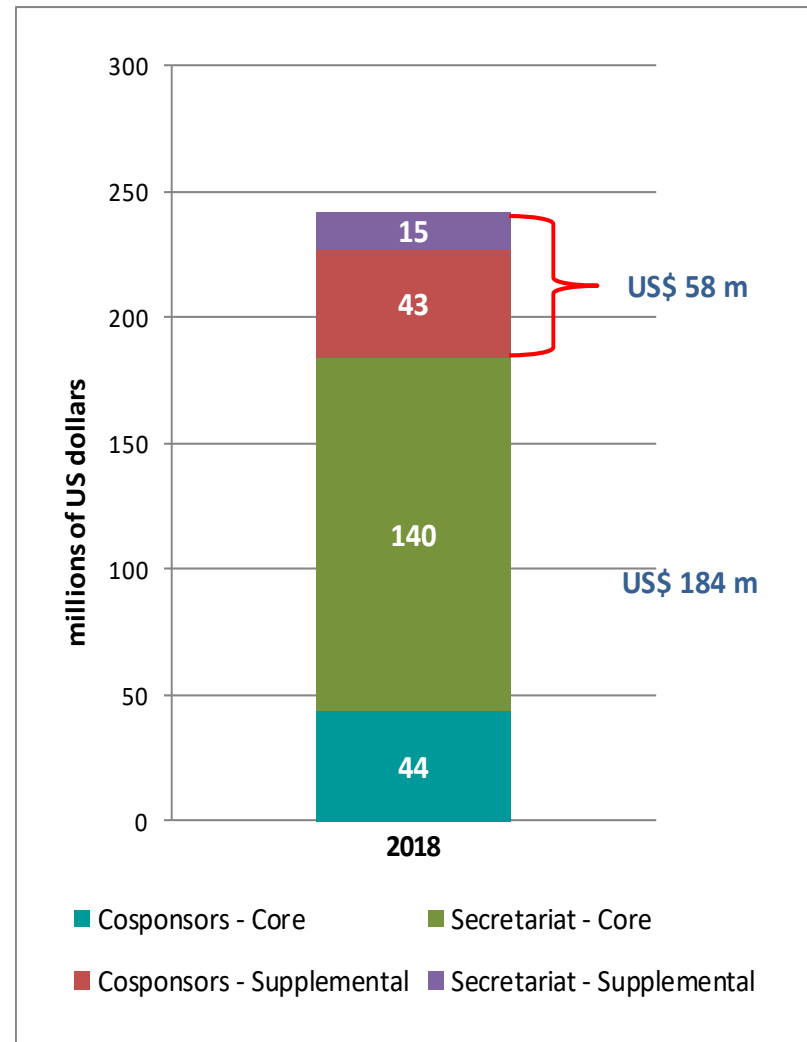


**5** New operating model being integrated into standard planning/reporting process

**4** Joint UN plans developed & country envelopes defined

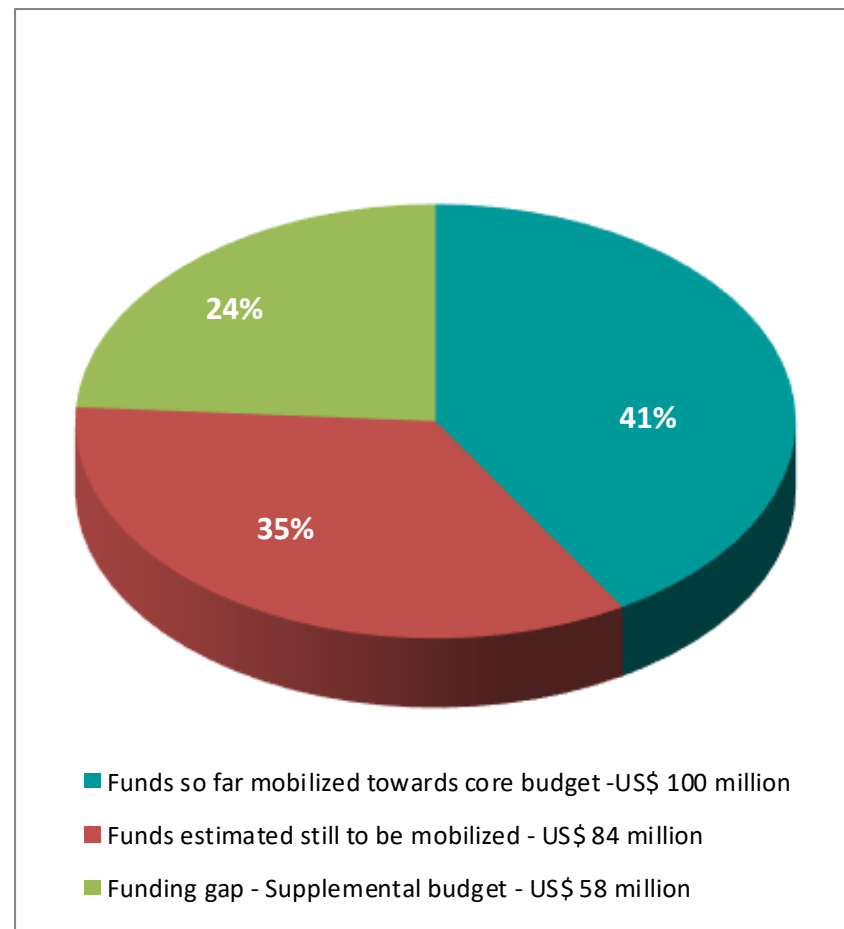
# 2018 Approved Budget

- UNAIDS is entering the first year of the 2018-2019 biennium with a revised approved annual core budget of **US\$ 184 million**: **US\$ 140 million** for the Secretariat and **US\$ 44 million** for the Cosponsors
- Cosponsors Budget of **US\$ 44 million**: Allocation of **US\$ 22 million** to be distributed among the eleven Cosponsors and a further allocation of **US\$ 22 million** to Cosponsors at country level in the form of country envelopes
- And a Supplemental Budget of **US \$ 58 million** (**US\$ 43 million** for the Cosponsors and **US\$ 15 million** for the Secretariat) totaling the **US\$ 242 million** approved by the PCB



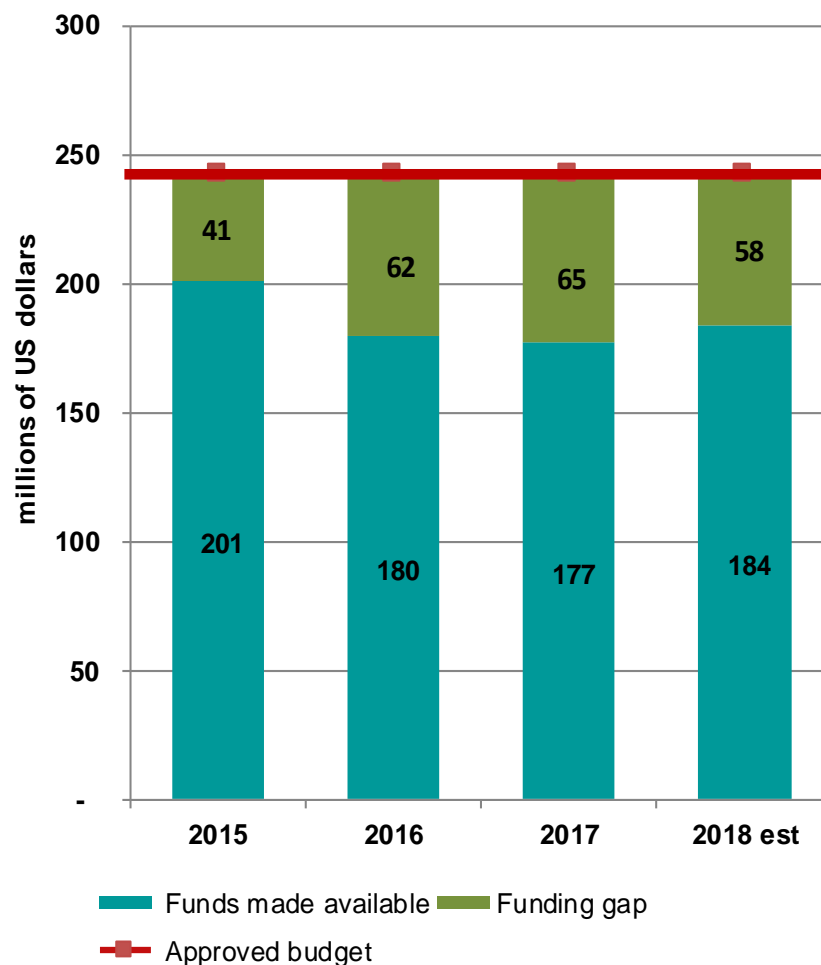
## Developments in 2018 - Income

- So far in 2018 a total of **US\$ 100 million** has been mobilized against the core budget of **US\$ 184 million**
- Resource outlook for the core budget is projected at the **US\$ 184 million** (i.e. fully fund the core budget).
- Additional contributions of **US\$ 58 million are urgently needed** to fully fund the UBRAF budget to its full PCB approved level of **US\$ 242 million**



## Income trend 2015 - 2018

- In 2015 core funding totalling **US\$ 201 million** was mobilized.
- In 2016 core funding totalling **US\$ 180 million** was mobilized;
- In 2017 core funding totalling **US\$ 177 million** was mobilized.
- In 2018 it is projected to mobilize **US\$ 184 million** – i.e. fully fund the 2018 core budget





# Developments in 2018 - Expenditure

- Core expenditure and encumbrances as at 31 May 2018 amounted to **US\$ 96 million**.
- The Cosponsors share of the **2018 core budget of US\$ 44 million** has been fully transferred to the respective Cosponsors.
- Secretariat core expenditure and encumbrances amounted to **US\$ 52 million**.



# 2018 External audit recommendations

Areas identified by the external auditors where **financial management and governance** of resources could be improved:

1. Enhance policies and procedures of **Direct Financial contributions**/Grants and strengthen internal mechanism for monitoring
2. Strengthen **travel management** system with respect to travel claims
3. Continue efforts to strengthen policies and procedures for **consultancy services** and enforce completion of performance evaluation reports
4. Enhance the **internal control self- assessment check list** and develop a review, feedback, and collaboration mechanism on the ICF Self-Assessment activity to ensure compliance



# 2017 Internal Audit Overall Recommendations

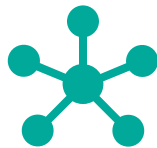
## Areas that require strengthening:

- Strengthen internal coordination between HQ, RST and CO
- Completion of recruitment for key positions
- Enhance compliance with procurement policies and procedures
- Regular review of user access rights to ERP Management System



# 2017 Internal Audit: Good Practices

- The Resource Mobilization Strategy is a positive step
- Relationships with Governments reinforces the work of the Organization
- Contract database that captures important data for monitoring contracts.
- Proactive workplan implementation monitoring on a regular basis.
- Technical support to Governments led to cost savings in procurement of retroviral medication.



THANK  
YOU!