



GLOBAL REVIEW PANEL REPORT ON THE MULTISTAKEHOLDER VIRTUAL CONSULTATION

30 JANUARY - 15 FEBRUARY 2017

**This report was prepared by Global Review Panel's Co-Chairs:
Awa Marie Coll-Seck, Minister of Health, Republic of Senegal
Lennarth Hjelmaker, Special Ambassador for Global Health,
Sweden**

EXECUTIVE SUMMARY

The Global Review Panel on the future of the Joint Programme model is tasked with formulating recommendations on how to make the Joint United Nations Programme on HIV/AIDS (UNAIDS) sustainable and fit for purpose. It focuses on refining and reinforcing how UNAIDS works so it can better support countries to achieve their global commitments to end the AIDS epidemic.

The panel Co-Chairs held a stakeholder virtual consultation on 30 January–15 February 2017 to engage as many stakeholders as

possible in the Global Review Panel's work. The virtual consultation was open to everyone, inviting participants to respond to questions on fundamental pillars of the Joint Programme as well as providing opportunities for general discussion.

The virtual consultation received over 400 comments, in six languages, from every UNAIDS region.

GENERAL DISCUSSION

Participants were asked to share their opinions on where they think UNAIDS adds value to the AIDS response and how UNAIDS can work better to deliver results and support

communities and countries to end the AIDS epidemic. Notable responses are shown below.

UNAIDS has added value through political advocacy and setting the global agenda for the AIDS response.



However, UNAIDS has sent mixed signals by suggesting the end of AIDS is near. UNAIDS communications should focus less on sloganeering and more on showing how the epidemic is still a major threat.

The UNAIDS convening and coordinating roles are strengths that have built partnerships across sectors and stakeholder groups.



However, UNAIDS should use these strengths to improve coordination between sectors to ensure all result areas of the UNAIDS 2016–2021 Strategy can be implemented.

Country-level strengths include technical support, comprehensive data collection and sharing of best practices.



However, UNAIDS needs to ensure consistent high-quality support across all countries, direct a greater proportion of its resources to community-level responses and focus more on data, delivery and accountability.

FINANCING AND ACCOUNTABILITY

Under financing, participants were asked how UNAIDS can best raise sufficient financial resources and more dynamically allocate those resources among Cosponsor agencies and the Secretariat.

For accountability, participants were asked how UNAIDS can best report on the results of its work and demonstrate how this work adds value to the global AIDS response.

Notable responses are shown below.

The changing funding environment requires UNAIDS to develop different scenarios for fully funded, projected and minimum funding levels so that the Joint Programme can quickly adapt to shifts in the availability of financing.



Cosponsors must assume greater fundraising responsibilities and there should be joint fundraising campaigns with donors and private sector partners.

UNAIDS' fund allocation was challenged by participants who described it as static and overly based on historical precedent and entitlement.



Fund allocation should be to be linked to Cosponsors' delivery of results, the epidemiological situation and gaps in the response.

A lack of accountability among Cosponsors was highlighted as a key weakness of the Joint Programme.



Cosponsors should consistently report how they use both core and non-core resources. Results reporting should be disaggregated to better show individual Cosponsor and Secretariat results.

UNAIDS needs to do a better job of demonstrating and communicating that its approaches are stimulating more effective AIDS responses and greater impact.



UNAIDS should provide more evidence in a more compelling and appealing manner to show the impact of its results.

JOINT WORKING

Under the joint working pillar, participants were asked to discuss how UNAIDS Cosponsors and the Secretariat can work together more effectively. They were also asked how UNAIDS can take

AIDS further out of isolation and better engage stakeholders and partners.

Notable responses are shown below.

The Joint Programme's structure and ability to coordinate United Nations support is an important approach that is consistent with United Nations reform efforts and the integrated nature of the 2030 Agenda.



However, Cosponsors and the Secretariat often act independently, leading to unnecessary duplication.

The existence of a dedicated Secretariat was recognized as critical to a joint United Nations approach. However, some expressed concern that the Secretariat has grown too large and encroaches on Cosponsors' areas of work.



Some advocated for a stronger and more focused coordination role for the Secretariat, especially regarding the allocation of financial resources to Cosponsors, holding them accountable for achieving results.

The formal Division of Labour (DoL) between Cosponsors and the Secretariat was lauded as an important element of the Joint Programme. However, emerging issues, such as migration, are reflected in the UNAIDS 2016–2021 Strategy, but not in the DoL.



The UNAIDS DoL should be revised to better align it to the priorities of the UNAIDS 2016–2021 Strategy and the 2030 Agenda as well as the mandates and strengths of each Cosponsor as they review their own strategies for achieving the Sustainable Development Goals (SDGs).

Because AIDS touches upon so many diverse issues, the Joint Programme should increase its range of partnerships with other movements to take AIDS out of isolation and raise awareness within additional sectors concerning HIV-related concerns.



The UNAIDS mandate should be expanded to engage in global health advocacy more generally, positioning HIV as a part of a global campaign for universal health coverage and the social determinants of health. Human rights and gender should remain central to the work of the Joint Programme.

GOVERNANCE

Participants were asked to consider if, and how, the Programme Coordinating Board (PCB) can help guide the wider AIDS response and how key stakeholders can be given a more consistent voice in PCB discussions.

Participants were also asked how policy coherence can be improved between the PCB and Cosponsor boards. Notable responses are shown below.

The UNAIDS governance structure was recognized as a leading example of inclusiveness and civil society participation. Participants challenged UNAIDS to build on this strength.



To do this, participants suggested UNAIDS invites additional stakeholders to PCB meetings, either through expanding the PCB or on an ad hoc basis. Civil society, Member States and private sector representation were all discussed.

Participants stated that UNAIDS' role as a provider of global guidance, leadership and coordination has weakened, with UNAIDS less engaged in global debates on related issues.



Participants suggested this could be reversed by making the PCB a venue for oversight of the wider global AIDS response. Others called on the PCB to more consistently debate and respond to developments and recommendations on key policy issues affecting the HIV response, including recommendations from bodies such as the human rights mechanisms of the United Nations.

Participants highlighted a need for better communication and coordination between the PCB and governing bodies of Cosponsors to improve policy coherence across the AIDS ecosystem.



Participants called for PCB discussions to focus more on high-level strategic issues, rather than overly detailed instruction. They also suggested Member States take more responsibility for ensuring policy coherence across the boards they sit on and that PCB Co-Chairs should present PCB decisions to Cosponsor boards.

The views expressed within the virtual consultation will be carefully considered by the Global Review Panel as it develops its analysis and recommendations.

INTRODUCTION

The Global Review Panel on the future of the Joint Programme model is tasked with making recommendations for a sustainable and fit for purpose Joint United Nations Programme on HIV/AIDS (UNAIDS), with a particular focus on three fundamental pillars of the Joint Programme:

- Financing and accountability
- Joint working
- Governance

The panel—requested by the PCB—is co-convened by Helen Clark, Administrator, United Nations Development Programme and Chair of the United Nations Development Group and Michel Sidibé, Executive Director, UNAIDS. The panel Co-Chairs are Awa Marie Coll-Seck, Minister of Health, Republic of Senegal and Lennarth Hjelmåker, Special Ambassador for Global Health, Sweden. Please refer to the [Global Review Panel terms of reference](#) for more information.

To ensure that all stakeholders have a say in the work of the Global Review Panel, the Co-Chairs held a virtual consultation on 30 January–15 February 2017. The virtual consultation was open to everyone and invited participants to respond to a set of guiding questions framed around the three fundamental pillars. The questions were initially proposed in a [Background Paper](#) written for the Global Review Panel, discussed and debated among the panel members at their first meeting on 20 January 2017 and refined for the virtual consultation. There was also a general discussion forum that enables participants to share broader suggestions.

This report summarizes the views expressed by the participants of the virtual consultation. An effort was made to include as many views as possible regarding the core of the Global Review Panel's work to recommend ways to improve how UNAIDS works in order to make it more sustainable and fit for purpose. Inputs that

strayed away from this mandate and the questions posed may not have been included in the report. However, all comments posted on the website (<http://globalreviewpanel.blogspot.ch>) will remain online and visible for everyone to read for the duration of the Global Review Panel's work and through the 40th meeting of the PCB.

PARTICIPATION

The virtual consultation website was visited by 1763 users from 139 countries and received over 400 comments. There were 88 named participants who contributed over 250 comments, with the remainder of comments posted anonymously.

In addition to the comments made on the virtual consultation website, six inputs were received by email.

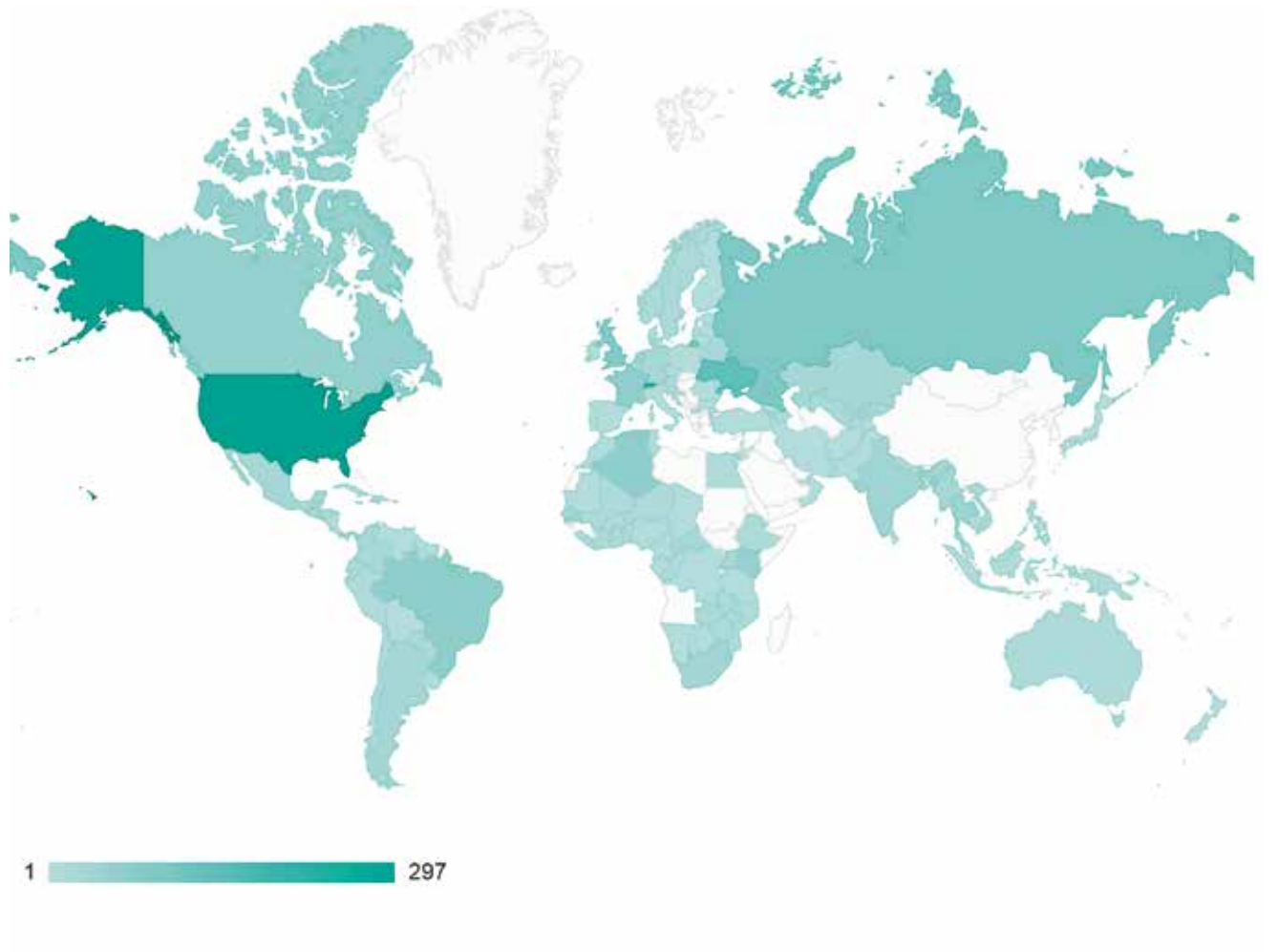
Multiple stakeholder networks achieved even wider engagement by consulting with their constituencies and submitting comments on their behalf. These included human rights and harm reduction advocates, civil society groups and networks of people living with HIV and key populations, including young people, people who inject drugs and men who have sex with men.

Several Member States submitted formal inputs. Cosponsors also participated, with submissions received from representatives of UN Women, the United Nations Educational, Scientific and Cultural Organization (UNESCO) and the United Nations Development Programme (UNDP).

The online platform was visited by users from all over the world (Figure 1). The countries with the largest proportion of users participating in the virtual consultation were the United States of America (13.1%), Switzerland (5.4%), Ukraine (4.5%) and the Russian Federation (3.9%).¹ Submissions were received in six languages and from every UNAIDS region.

¹Annex 1: Methodology and analytics.

Figure 1. Map portraying number of unique users of the online platform, by country





GENERAL DISCUSSION

QUESTIONS POSED ON THE VIRTUAL CONSULTATION WEBSITE

- In what areas does UNAIDS excel and add particular value to the AIDS response—globally, regionally and at country level?
- How can UNAIDS work better as a joint programme to support communities, countries and partners to end the AIDS epidemic?
- How can UNAIDS improve the quality of the way it works across the United Nations and the AIDS ecosystem to deliver results for people in the era of the 2030 Agenda?



Many participants identified UNAIDS’ coordinating role as a value-adding contribution to the AIDS response, with one participant referring to UNAIDS as a “best practice of working as one” in the United Nations system. Participants also recognized UNAIDS’ success in convening a diversity of stakeholders and building broad partnerships as essential to the Joint Programme’s support to country priorities.

Political advocacy was identified as one of UNAIDS’ strengths in setting the global agenda for the AIDS response and influencing national policy and legislation towards rights-based approaches.

One example cited was the advocacy undertaken by the Secretariat regarding women, girls and sexual and reproductive health and rights and services.

UNAIDS’ leadership on human rights issues was widely commended. Human rights advocates called for human rights to remain central to the Joint Programme’s work, noting that every political declaration on HIV/AIDS calls for the full realization of human rights for all as “an essential element in the global response to the HIV epidemic, including in the areas of prevention, treatment, care and support” and that fulfilling the human rights of people living with HIV and key populations at higher risk of infection was critical to the achievement of the global target to end the AIDS epidemic by 2030.

Participants highlighted UNAIDS’ contribution in ensuring that marginalized communities and key populations—including gay men and other men who have sex with men, people who inject drugs, prisoners, sex workers and transgender people—have a voice in the leadership and direction of the AIDS response, along with building their capacity to do so.

“UNAIDS carries out its advocacy role very effectively, from the political leadership to the communities directly affected by the epidemic.”

Participants recognized UNAIDS’ provision of country-level technical support, comprehensive and high-quality data collection and sharing of best practices across countries as strengths; they also praised UNAIDS for operating on a foundation of the latest science and evidence.

Discussing ways in which UNAIDS could work better, some participants voiced the opinion that UNAIDS should focus less on talk and more on action. Others suggested that UNAIDS needs to place less emphasis on high-profile figures and events and more on hard-hitting, evidence-based advocacy and on supporting community-level responses that complement public and private health-care delivery.

Some called for more of the Joint Programme's resources to be focused on countries and for UNAIDS to press countries to make greater domestic investments in community-based and community-led responses. A need to take additional steps to ensure that communities participate in global and country-level meetings was also expressed; The Global Fund to Fight AIDS, Tuberculosis and Malaria's (Global Fund) Country Coordinating Mechanisms was highlighted as a useful model to emulate.

"UNAIDS needs to focus more on the affected communities rather than on big jamborees with first ladies and queens."

Participants also called on UNAIDS to work more creatively and innovatively on integrated, strategic and cost-effective approaches and to increase focus on data, delivery and accountability. As an example, some participants suggested that UNAIDS should strengthen coordination between the various sectors within each country to ensure implementation of all the result areas in the UNAIDS 2016–2021 Strategy. Others identified a need for additional steps to ensure the accuracy of data that countries report to UNAIDS, to hold countries accountable for achieving global targets and to strengthen the tracking of resources to ensure they are being used efficiently and appropriately. Some participants described UNAIDS' country-level work as inconsistent, calling for systems to be put in place to ensure consistent, high-quality support across all countries.

Participants also stated that UNAIDS should improve its planning of campaigns and initiatives and how they are communicated to the field, as slow unclear or inconsistent efforts greatly diminish the potential impact.

Some participants called for fragile states and countries with a higher disease burden to be prioritized, suggesting reductions in staff or closure of UNAIDS offices in low-prevalence countries.

"UNAIDS is very good at creating new initiatives that powerfully communicate priority areas

of action and associated messages. Yet communication between the Secretariat and the field on such initiatives can be slow, unclear or inconsistent. In such cases, the potentially high impact of such initiatives is greatly diminished."

Communications was cited as an area in need of improvement. Several participants pointed out that messaging, such as "Ending AIDS", sends the wrong signal to donors. These participants stressed that UNAIDS communications should focus less on sloganeering and more on disseminating evidence that informs the public that the epidemic is still a major threat to health and social development, highlighting specific gaps and mobilizing resources to fill them.

Other issues raised include:

- A call to strengthen the capacity of civil society organizations and key populations to work with national health systems, especially regarding transgender people.
- A suggestion to forge strategic partnerships with faith-based organizations.
- Specific advice regarding the Joint Programme's areas of work in particular countries, with India being given as an example.
- A proposal that UNAIDS adopts a public health approach, instead of a disease-specific one, as AIDS is one of many health issues facing community members and health systems.
- Calls for the Joint Programme to give greater focus to harm reduction for people who inject drugs, male involvement in sexual and reproductive health, simplified treatment regimens and HIV services for migrants and people affected by humanitarian emergencies.
- A suggestion that UNAIDS should engage more in efforts to ensure access to affordable and good quality medicines and biologicals for HIV, hepatitis C and tuberculosis; for example, through the full use of flexibilities in the World Trade Organization Doha Declaration on the TRIPS agreement and public health.
- A call to provide additional support to countries with high HIV burden that are classified as middle-income by the World Bank—and have lower eligibility for multilateral grants—as well as to fragile states.



JOINT WORKING

QUESTIONS POSED ON THE VIRTUAL CONSULTATION WEBSITE

- How can UNAIDS Cosponsors and the Secretariat work together more effectively? How can UNAIDS Cosponsors and the Secretariat refine the DoL and ensure optimal allocation of human and financial resources in countries?
- How can the multisectoral nature of the Joint Programme be leveraged better to take AIDS further out of isolation and maintain the response as a global priority?
- How can UNAIDS engage the required range of stakeholders better, including new partners, to deliver on its 2016–2021 Strategy?



Many participants stressed that UNAIDS must make the best use of the comparative advantages and specific technical expertise of each Cosponsor.

Several participants noted that more emphasis should be given to the joint nature of the Joint Programme.

Other participants praised the structure of the Joint Programme and its ability to coordinate across the United Nations as an important approach that is consistent with United Nations reform efforts

and the integrated nature of the 2030 Agenda. The existence of a dedicated Secretariat was recognized as critical to the effectiveness of this joint United Nations approach.

The UNAIDS DoL was lauded as an important element to the Joint Programme partnership. Several participants suggested that it should be revised to align it better to the priorities of the UNAIDS 2016–2021 Strategy and the 2030 Agenda, as well as the mandates and strengths of each Cosponsor, as they review their own strategies for achieving the SDGs. It was proposed that the DoL designate one Cosponsor per output area of the UNAIDS 2016–2021 Strategy with overall responsibility and accountability.

Other participants stated that UNAIDS should demonstrate stronger leadership by adopting its own location–population approach and adjust the DoL at country level to fit local needs. Cosponsors with mandates that are critical to the local or regional epidemic, such as harm reduction in Eastern Europe, would have priority in the allocation of resources. Some suggested the DoL should be revised to focus more specifically on results within each strategic area or to be organized around the emerging issues that are reflected in the UNAIDS 2016–2021 Strategy.

“We should make the best use of the comparative advantage of each member of the Joint Programme. Each agency brings a different strength and value to the programme which should be strongly communicated to stakeholders.”

Some participants contended that the Cosponsors and Secretariat often act independently and do not communicate adequately among themselves in a way that would enhance rational use of scarce resources and avoid unnecessary duplication.

Some participants reported that the work of individual entities within the Joint Programme often overlaps when they compete for the same funds. With core resources dwindling, participants noted that several Cosponsors are struggling to raise funds and so cannot properly perform their functions in the DoL. Another suggested that the Joint Programme no longer exists in practice in some countries as only Secretariat staff are fully engaged with partners in the AIDS response.

“The SDGs do offer an opportunity for us to revisit the Division of Labour and it would be helpful if the narrative we build around this evolution continues to give appropriate emphasis to leveraging across the United Nations system to address the considerable and complex challenges of HIV.”

In countries or regions where some Cosponsors are absent or have little capacity, one participant remarked that the Secretariat is all the more crucial to ensuring that areas of the AIDS response often neglected by countries are included in grant proposals and national plans. Others expressed concern that the Secretariat has grown too large and should be scaled back. Some cautioned that the Secretariat should be careful to not run alone in a field that is a Cosponsor’s mandate, described by one participant as stepping on toes. One specific suggestion was for the Joint Programme to transform into a partnership programme—such as the Stop TB Partnership and the Roll Back Malaria Partnership—with a small secretariat in Geneva and current Secretariat staff absorbed by Cosponsors to reinforce the Joint Programme’s capacity at country level.

“Cosponsors’ roles are quite well-defined. Often it is the Secretariat that steps on toes. Also, not attributing Cosponsors’ successes and appropriating them without adequate recognition of Cosponsors’ contributions is a practice UNAIDS needs to stop.”

The Secretariat’s coordination and accountability functions within the DoL were also discussed. Some participants proposed that the Secretariat’s role should be limited to advocacy, coordination, resource mobilization and strategic information, leaving all technical work to the Cosponsors. One participant said the Secretariat should more consistently ensure that requests for technical support are referred to relevant Cosponsors. Some

advocated for a stronger role for the Secretariat, suggesting it takes more responsibility for ensuring that all Cosponsors and stakeholders mainstream HIV work into relevant programmes.

Some participants suggested that the Secretariat should play a more prominent role at the global level in the allocation of funding and the oversight of its use, dispersing Cosponsors budget allocations for specific HIV-related results and holding them accountable for achieving those results. Similarly, at country level, participants proposed that a stronger Secretariat more focused on coordination of Cosponsors’ responsibilities would lead to a more efficient Joint Programme, enhancing UNAIDS’ ability to make more efficient use of human and financial resources.

Some participants suggested that the Secretariat should exercise more technical leadership, including the generation, compilation, analysis and dissemination of data and new knowledge across the United Nations system as many Cosponsors do not have access to the type and quality of data on HIV that the Secretariat does.

Participants also drew attention to the need for the Joint Programme to adapt to the changing political and demographic environments in which it is working. For example, some participants suggested that refugees and economic migrants represent a population whose needs in terms of HIV may be currently neglected. Such emerging issues are reflected in the UNAIDS 2016–2021 Strategy, but not in the DoL.

Some participants specifically called for UNAIDS to take additional measures to ensure that the HIV response is integrated into humanitarian efforts. Others said that coordinating mechanisms designed at global level often have little relevance to country context and that strategies should be reoriented to focus from the ground up.

“In some regions and countries, the Joint Programme no longer exists in practice. UNAIDS staff and offices are the only United Nations representation on HIV left at the regional and country levels that is fully engaged with partners, with little meaningful engagement from the UNAIDS Cosponsors.”

Many participants emphasized that because AIDS touches upon so many diverse issues, the Joint Programme should look at increasing the range of its partnerships with other movements to take AIDS out of isolation and raise awareness within additional sectors regarding HIV-related concerns. Some respondents suggested that the UNAIDS mandate could be expanded to engage

in global health advocacy more generally, positioning HIV as part of a global campaign for universal health coverage and the social determinants of health.

Several participants emphasized the need for human rights and gender to be central to the work of the Joint Programme. It was noted, for example, that the Joint Programme's multifaceted, multilayered structure can enable attention to human rights and other structural drivers of HIV, such as gender inequality, where a single entity might find it more challenging. Although it is the responsibility of the United Nations resident coordinator to raise HIV-related human rights issues at country level, it was noted that multiple competing considerations at play in United Nations engagement at country level can create constraints in the resident coordinator's ability to do so, while the Secretariat and some Cosponsors may be in a better position to raise those concerns with national authorities.

Some participants suggested that UNAIDS should engage and collaborate more closely with organizations that have a rights and/or gender equality focus as many of the issues that these organizations work on, including gender-based violence, child marriage and discrimination against women, are also issues at the heart of the HIV response. They reasoned that if UNAIDS increases its work with such organizations and bridges sectors, the HIV, human rights and gender equality responses would all be strengthened. Some participants further suggested that UNAIDS could explore engaging other United Nations agencies, for example through an associate member status. The Secretariat's partnership with the Office of the High Commissioner for Human Rights was cited as an example.

Some participants also called for better recognition of non-health sector contributions to the AIDS response. A specific example given was how the education sector, by improving enrolment and completion rates among girls, can address one of the key determinants for HIV transmission. Participants also suggested that working with other actors, such as professional associations of physicians and other health care workers, would bring UNAIDS' message to new audiences.

Another recurring suggestion was for HIV to be better integrated and mainstreamed into Cosponsors' own strategic frameworks, their major global initiatives and their core areas of work, such as education, social protection or food security. Participants suggested that this approach would ensure a broader United Nations contribution to the AIDS response in any country. However, some

participants voiced concerns about the mainstreaming approach, noting that the achievements brought about by being very focused on HIV, in particular regarding the needs of the populations most affected by the epidemic, should not be forgotten.

“UNAIDS should invest in reaching out to new constituencies, listening to different voices and different people. It should democratize its approach towards working with communities. Country civil society platforms must be strengthened and should be the point of interaction for UNAIDS.”

When discussing how to engage stakeholders and partners better, several participants proposed that UNAIDS should first identify the problem areas in the AIDS response and then identify the most strategic partners for each area. Others stated that UNAIDS should do more to support civil society, including working with countries to engage with their respective civil society representatives, and to strengthen local civil society platforms. It was suggested that UNAIDS does not take over civil society spaces. One participant stated that there should be more opportunity to form multi-stakeholder advisory groups on specific issues. Finally, there were calls for UNAIDS to better disseminate the lessons it has learned about meaningful engagement of affected communities.

Other issues raised include:

- UNAIDS should work with all major stakeholders to take stock and map technical, financial and human resources gaps and determine the most effective way that these needs can be addressed, either by members of the Joint UN Teams on AIDS or other entities.
- Some participants stated that it would be difficult to expand the membership of UNAIDS to other Cosponsors given the current funding restrictions. Coordination between the existing agencies is considered challenging and therefore adding more partners would complicate this further.
- A call for the Joint Programme to emphasize human rights as it prioritizes its work, including protection of the rights of young people, eliminating stigma and discrimination faced by key populations, addressing gender inequality and gender-based violence, challenging the criminalization of sex work, drug use and same-sex relationships and achieving universal access to HIV treatment.

- One participant suggested that there should be improved opportunities for secondments or short-term staff exchanges between the Secretariat and Cosponsors as this would result in a greater understanding and overall strengthening of the Joint Programme.
- One participant drew attention to the Strategic Advisory Group to the UN on HIV and Injecting Drug Use as a model for joint working on key issues within the AIDS response and advocated it be strengthened and given a more active and systematic role in overseeing the AIDS response for people who inject drugs. It comprises staff from UNAIDS, the United Nations Office on Drugs and Crime (UNODC) and the World Health Organization (WHO), alongside representatives from governments, civil society and academia.
- Another participant stated that an AIDS programme pivot should be developed, highlighting Lesotho as a good example of multisectoral country planning and financing of the AIDS response.



GOVERNANCE

QUESTIONS POSED ON THE VIRTUAL CONSULTATION WEBSITE

- How can the PCB help guide the wider global AIDS response?
 - How can important stakeholders be given a more consistent voice in PCB discussions?
 - How can the Committee of Cosponsoring Organizations (CCO) improve policy coherence between UNAIDS and Cosponsor boards and better integrate efforts to deliver on the SDGs, including at country level?
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UNAIDS' governance was recognized as a leading example of inclusiveness and civil society participation. Many participants called on UNAIDS to build on that strength and invite additional stakeholders to participate in PCB meetings.

One participant specifically suggested that UNAIDS should engage the pharmaceutical sector more proactively as it plays a clear role in the AIDS response.

Others suggested that the private sector should have a seat on the PCB. However, several others expressed concerns regarding private sector representation, stating that it will be important for the Global Review Panel to consider carefully the potential for undue influence on UNAIDS priorities and positions, as well as

ways to manage potential or real conflicts of interest that would arise in the PCB decision-making.

Respondents contended that expanding the PCB to include more members would make achieving consensus more difficult and that other stakeholder groups should instead be invited to participate on an ad hoc basis in discussions of particular relevance to their constituencies.

Others proposed that the number of Member States on the PCB should be increased to encourage more sharing of experiences from different parts of the world that are supported by the Joint Programme. Increasing civil society participation in the PCB was a recurring suggestion, as was providing nongovernmental organization (NGO) delegations with a formal vote. Participants suggested that the former could be achieved by encouraging Member States to include civil society representatives within their delegations. Several participants stressed that civil society representatives should be chosen by the communities they represent, perhaps through public selection procedures. Some participants suggested there should be dedicated PCB seats for people living with HIV, women, youth and key populations, with some specifically calling for increased engagement with harm reduction advocates and service providers.

“It is important for the Joint Programme to hear the perspectives of a broad range of stakeholders, including a broader range of community and civil society groups, industry and other stakeholders. This could be accomplished in part by inviting representatives of stakeholder groups to participate on an ad hoc basis in discussions of particular relevance to their constituencies.”

Concerns were expressed that UNAIDS' role as a provider of global guidance, leadership and coordination has diminished in recent years and that the Joint Programme was not sufficiently engaged in global debates on related issues, such as universal health coverage. It was suggested that this trend could be reversed by making the PCB the venue for discussion and oversight of the wider global AIDS response in between United Nations General Assembly High-Level Meetings on AIDS. However, the PCB's thematic segments were described as resource intensive and rarely resulting in decisions. Participants questioned their value to the management of the Joint Programme or for providing strategic guidance to the wider AIDS response and suggested separating these thematic segments from PCB meetings to allow more scope for decision-making at the PCB. Other participants suggested that PCB discussions and decision points should focus more on high-level strategic issues and less on providing overly detailed instruction.

“In the current political climate, we need a UNAIDS that is brave and bold, engages on critical issues and provides guidance in areas that others will not touch.”

It was suggested that the PCB should more consistently respond to developments and recommendations on key policy issues affecting the HIV response, including recommendations from bodies such as the Global Commission on HIV and the Law, the Global Commission on Drug Policy, the United Nations Secretary-General's High-level Panel on Access to Medicines and the human rights mechanisms of the United Nations, from the United Nations Human Rights Council—including its Universal Periodic Review process—to human rights treaty bodies and special procedures. Some participants suggested that the PCB should work with the governance structure of entities outside the United Nations system. The newly established International Partnership on Religion and Sustainable Development, in which UNAIDS is a co-founder, was cited as an example. Such an approach would be consistent with the 2030 Agenda. Other participants suggested that there should be improved linkages between UNAIDS governance and existing civil society platforms, with one participant specifically citing the Eastern Partnership Civil Society Forum as an example.

Participants called for more effective communication and coordination between the PCB and the governing bodies of Cosponsors on decisions affecting the global AIDS response. This would help ensure policy coherence within the UN Development System. A specific proposal was for the PCB Chair and Vice-Chair

to attend the board meetings of the Cosponsors and present PCB decisions. Other participants suggested that Member States, as members of the PCB and of other governing boards, should ensure policy coherence across the AIDS ecosystem, including Cosponsors, UNITAID and the Global Fund.

The role of the CCO also elicited wide discussion. Some participants proposed that the UNAIDS Cosponsor heads of agencies meetings should continue as a standing committee of the PCB and that global coordinators should continue to provide day-to-day coordination. Others suggested that the CCO should work together to jointly allocate an appropriate level of resources against the prescribed budget ceiling to joint teams in each country. Another proposal was for the CCO to carry out policy reviews to ensure PCB policies match Cosponsoring board policies and support the attainment of the SDGs

Other issues raised include:

- The UNAIDS Executive Director's role should be expanded to ensure that HIV is considered within the context of its social determinants and more clearly recognized across the UN Development System for its impact on development.
- Regarding the 2030 Agenda, one network emphasized that the CCO should prioritize mainstreaming the three-lens approach of engaging with young people as beneficiaries, partners and leaders of the HIV response across the work of all Cosponsors.
- Some participants highlighted the challenges for communities and civil society organizations to build the expertise needed to participate meaningfully in PCB meetings. One participant specifically called for all volunteer members of the NGO delegation to receive support so they can communicate and consult with their constituencies adequately, as well as funded opportunities for capacity and skills building.
- One participant specifically called for the PCB to give more attention to prisoners as a key population.
- A suggestion to reduce the frequency of PCB meetings from twice a year to once a year, arguing that semi-annual meetings place a large financial and human resource burden on the Secretariat, Cosponsors, civil society representatives and Member States.



FINANCING AND ACCOUNTABILITY

QUESTIONS POSED ON THE CONSULTATION WEBSITE

- How can UNAIDS raise sufficient resources to deliver against its strategy and workplan? How can its unique supporting role to the Global Fund be consistently financed?
- How can the allocation of financial resources among Cosponsors and the Secretariat respond to performance and best reflect the needs of countries?
- How can UNAIDS best report on the results of its work and how this work adds value to the global AIDS response?



FINANCING

Many participants engaged in the discussion on financing, both in relation to resource mobilization and allocation across the Joint Programme.

Several respondents called for Cosponsors to take a greater share of the burden of fundraising for the Joint Programme by increasing allocation of their own core resources to the AIDS response. Some suggested that UNAIDS should work more closely with the Global Fund and other donors, such as the U.S.

President's Emergency Plan for AIDS Relief (PEPFAR) and the Clinton Health Access Initiative, to raise resources, including through joint fundraising campaigns and the establishment of innovative financing mechanisms. One participant said that UNAIDS should select AIDS ambassadors who can better connect with local populations and engage them in fundraising for UNAIDS. Another suggestion was for UNAIDS to develop public-private partnerships in order to leverage much larger private sector resources.

Given the extensive support provided through UNAIDS to Global Fund processes, participants stressed that it is important for UNAIDS to communicate its added value better at both global and country levels so as to receive complementary funding for this work. One participant suggested that a new funding partnership should be developed between UNAIDS and the Global Fund, whereby at least 5% of all Global Fund donations for HIV should be given to UNAIDS to support its overall advocacy and technical support specific to Global Fund grants in countries and regions.

Many participants stressed that priority setting, fund allocation and reporting of results within the Joint Programme should be more clearly bound to the UNAIDS 2016–2021 Strategy and the SDGs. Several called for fund allocation to Cosponsors to be linked to performance and delivery of results, rather than based on historical precedent or perceived entitlement. Some called for the Secretariat's headquarters budget to be cut and reallocated to country offices.

“As long as Cosponsors are granted the same core funding each year, regardless of their contribution to strategic objectives and irrespective of their commitment to transparency standards, UNAIDS will lack the ability to incentivize and track performance at the country level.”

Many participants asserted that decisions regarding allocation of human and financial resources in countries should be aligned with the epidemiological situation and respond to objectively identified needs and gaps. For example, if a programming gap in a country is in a Cosponsor’s mandated area, that Cosponsor should receive a larger share of the UNAIDS resources allocated to that country. Human rights advocates called for financing that would be used to ensure sufficient capacity within the Cosponsors and the Secretariat on human rights. One participant specifically proposed that United Nations support to HIV services for key populations should receive a larger share of Joint Programme resources because many governments do not adequately invest in these programmes. This was reiterated by other participants who referred to a funding crisis for harm reduction for people who inject drugs in many countries. Several participants said that decision-making on fund allocation should include communities and networks at the local, regional and global levels.

“Decisions regarding allocation of human and financial resources in countries should be aligned with the epidemiological situation and respond to identified needs and gaps in countries.”

Recognizing the changing funding environment, several participants suggested that UNAIDS develop different scenarios for fully funded, projected and minimum funding levels. This would help UNAIDS create transition plans and prioritization strategies for each funding scenario and enable the Joint Programme to quickly adapt to shifts in the availability of financing. Another participant called for a bottom-up approach to resource allocation, where Joint UN Teams on AIDS in countries meet during the second half of the year to agree on joint priorities and programmes. These plans would then be sent to regional and headquarters levels for review. Fast-Track countries would have priority, beyond that the plans with the greatest potential for impact would receive more resources. There was also a call for allocations to not be overly rigid, cautioning that some flexibility is required so that the Secretariat and Cosponsors can respond to unforeseen needs and emerging priorities. One participant called for each Cosponsor to receive a small minimum allocation and for all remaining funds to be programmed to respond to priorities and gaps.

ACCOUNTABILITY

The accountability mechanisms utilized by UNAIDS, such as the Joint Programme Monitoring System, were described by several participants as excellent tools that allow Cosponsors to report to headquarters on ongoing projects within the context of the UNAIDS 2016–2021 Strategy. However, participants highlighted several weaknesses in results reporting, including a need for greater transparency in the Joint Programme’s use of funding and a lack of accountability among Cosponsors at country level. There was a strong call for Cosponsors to consistently report how they are using both UNAIDS core resources and the additional funding raised by each Cosponsor and to ensure the PCB has more information on how Joint Programme investments and results at country level reflect both the UNAIDS 2016–2021 Strategy and identified investment needs and response gaps. It was suggested that this information could be published on the UNAIDS website.

Participants demanded that UNAIDS does a better job of demonstrating and communicating that its approaches are stimulating more effective AIDS responses and greater impact. For example, one participant stated that UNAIDS should produce better evidence showing how addressing HIV through a rights-based approach yields better results and is thus more efficient. Several participants stated that UNAIDS struggles to communicate its own results and suggested that reporting about its work should be done in a much more compelling and appealing manner, including through social media. Calls were made for UNAIDS performance reports to be readily available to national AIDS programmes and the general public, a transparency measure that both the Global Fund and PEPFAR routinely undertake. One specific suggestion involved developing a report that measures the negative impact of failing to fully finance the UNAIDS budget and what this would mean for specific programmes and key populations; for example, people who inject drugs.

“It needs to be clear to donors what they are buying when they invest in UNAIDS.”

Others called for additional systems to hold Joint Programme staff at country level accountable for specific results. Some suggested that there should be a more consistent follow-up mechanism on country-level funds disbursed to different projects and programmes. Several participants also called for independent evaluations to give more confidence to donors that the work of the Joint Programme adds value and contributes to outcome-level results and impact.

Participants stressed that people living with HIV and key populations should be part of these independent reviews and other efforts to strengthen accountability as they are the beneficiaries that the AIDS response is striving to support. A specific suggestion was to put in place 360° reviews of UNAIDS country directors.

Some participants asserted that current reporting by UNAIDS to its PCB does not adequately recognize Cosponsors' contributions. The participants proposed that UNAIDS reports should be more clearly disaggregated to show the results of individual Cosponsors, reasoning that this would increase understanding of results and achievements of Cosponsors and the Secretariat individually and jointly, recognizing the added value that each brings. Participants further stressed that reporting needs to go beyond biomedical interventions and include, for example, Cosponsors' work to address the social determinants of vulnerability to HIV. Other issues raised included:

- A suggestion for the UNAIDS budget and workplan to contain a cost assessment of the funding needs for civil society.
- A call for UNAIDS to more actively help countries make the transition to domestic funding. This could include working in collaboration with political institutions, such as the African Union, the African Development Bank, the Economic Community of West African States and the Organisation of African First Ladies against HIV/AIDS.

- To ensure that the Secretariat and Cosponsors are accountable for mobilizing resources for the Joint Programme and delivering results, a specific suggestion was for formulas to be developed for both resource mobilization and allocation. A resource mobilization formula would be based on each agency's size and budget. The resource allocation formula would be based on the resource mobilization formula in addition to a weighted score of each agency's role in the Joint Programme and the specific result for which they are accountable.

CONCLUSIONS

The Co-Chairs of the Global Review Panel greatly appreciate all individuals and stakeholder groups who took the time to participate in the virtual consultation. The submissions are vital to the Global Review Panel process to review, refine and reinforce the Joint Programme. Our gratitude also goes out to everyone who made this virtual consultation possible. In particular, we would like to thank those who supported the inclusivity of the process by spreading word of the virtual consultation through their networks and encouraging others to participate, from Secretariat staff members and regional coordinators, to Cosponsors, panel members and other stakeholders.

The report of the virtual consultation will be carefully considered by the Global Review Panel as it develops its final recommendations at its second meeting, to be held on 17 March 2017. The panel will subsequently submit its report to the Co-Conveners.

ANNEX 1: METHODOLOGY & ANALYTICS

This annex presents an overview of the steps taken to develop the online virtual platform and to ensure proper communication and outreach on the virtual consultation. It also provides statistics on participation in the virtual consultation.

OVERVIEW

As part of the process of the Global Review Panel on the future of the UNAIDS business model, a virtual consultation was held on 30 January–15 February. The virtual consultation focused on three fundamental pillars of the Joint Programme: financing and accountability, joint working and governance.

Questions surrounding each pillar were discussed during the first meeting of the Global Review Panel and finalized by the Co-Chairs. A general discussion section was included in the online platform to ensure that the consultation provided a better understanding of how UNAIDS is perceived based on individual experiences. Each discussion topic included three guiding questions, resulting in a total of 12 questions presented to the participants.

APPROACH

The aim of the virtual consultation process was to engage with a diverse range of partners and networks so as to generate a debate on specific questions and collect suggestions for the panel to consider in their recommendations for refinement of the Joint

Programme model. The virtual consultation encouraged open discussion and gathered meaningful inputs from a number of stakeholder groups. These consisted of Member States, Cosponsors, human rights and harm reduction advocates, civil society groups and networks of people living with HIV and key populations.

COMMUNICATION AND OUTREACH

Information on the virtual consultation was shared through the PCB's electronic mailing list, as well as with over 50 separate networks. In this instance, The PACT network was considered as one overarching network; however, it should be noted that it is made up of 26 separate networks. These networks were reached through electronic mailing lists and social media platforms such as Facebook, Twitter and LinkedIn.

Networks included individuals belonging to faith-based communities, civil society, LGBT networks, harm reduction advocates, UNAIDS country directors, UNAIDS regional support teams, international AIDS organizations, youth, gender and human rights organizations.

The information note was shared via both the UNAIDS official Facebook page—which has over 231 000 followers—and the UNAIDS Google+ account—which has over 293 000 followers. In addition, Secretariat and Cosponsor staff, as well as panel members, drew attention to the virtual consultation via Twitter.

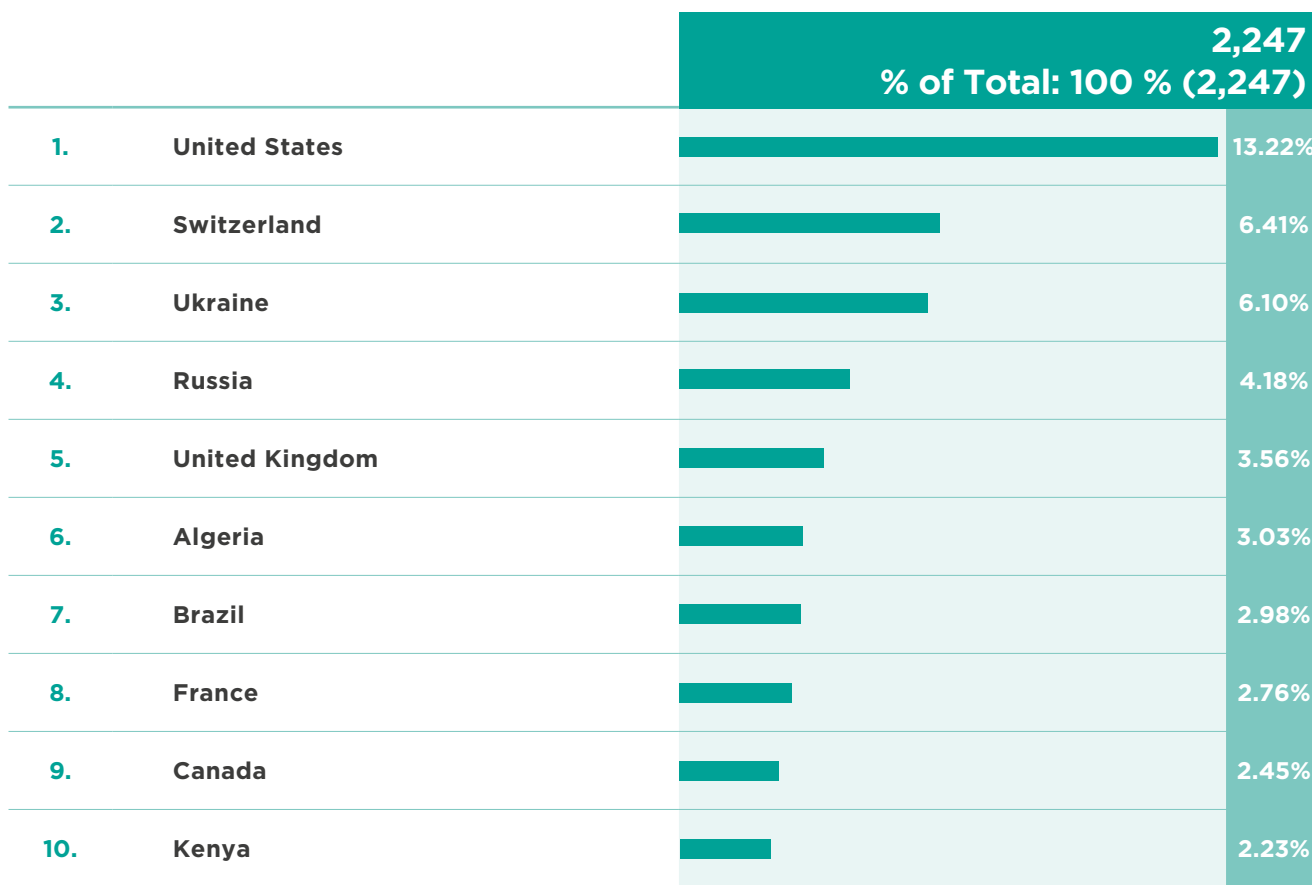
PARTICIPATION IN THE VIRTUAL CONSULTATION

The virtual consultation was visited by 1763 users from 139 countries, across all regions of the world and received over 400 comments in six different languages. A Google Translate option

on the online platform allowed for the content to be translated into 104 languages. The platform received 2247 sessions—the period of time a user is on the website—with Individual sessions ranging from one minute to four hours.

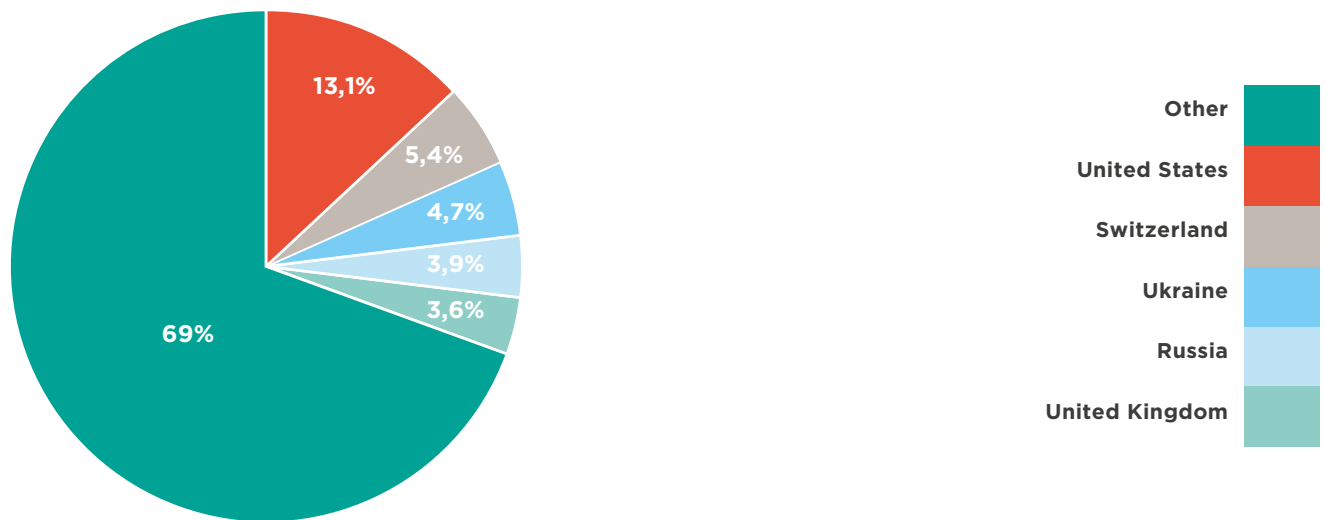
The countries with the most sessions were the United States (13.2%), Switzerland (6.4%) and Ukraine (6.1%). (Figure 2).

Figure 2. Top 10 country sessions by percentage on platform



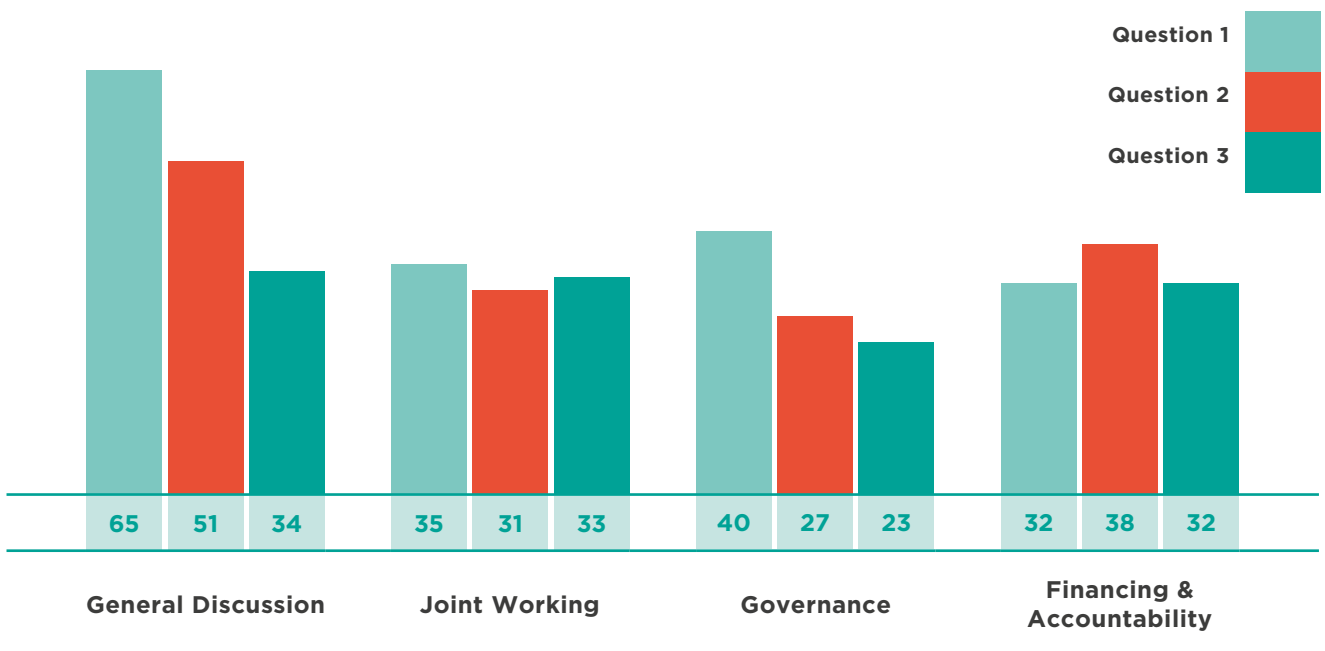
The countries with the largest proportion of users participating in the virtual consultation were the United States of America (13.1%), Switzerland (5.4%), Ukraine (4.5%) and the Russian Federation (3.9%) (Figure 3)

Figure 3. Percentage of users on the online platform by country



All 12 questions received comments from participants in the virtual consultation. Figure 4 shows the number of comments for each of the 12 questions

Figure 4. Number of comments received on the platform per question and per discussion topic and question



UNAIDS

The Joint United Nations Programme on HIV/AIDS (UNAIDS) leads and inspires the world to achieve its shared vision of zero new HIV infections, zero discrimination and zero AIDS-related deaths. UNAIDS unites the efforts of 11 UN organizations—UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, UN Women,

ILO, UNESCO, WHO and the World Bank—and works closely with global and national partners towards ending the AIDS epidemic by 2030 as part of the SDGs. Learn more at [unaids.org](https://www.unaids.org) and connect with us on Facebook, Twitter, Instagram and YouTube.

UNAIDS
Joint United Nations
Programme on HIV/AIDS

20 Avenue Appia
1211 Geneva 27
Switzerland
+41 22 791 3666

unaids.org