



Summary of the PCB Bureau meeting of 25 October 2012

Present: Anna Marzec-Bogusławska (chairing), Joanna Glazewska (Poland). McIff Colin (US); Ebony Johnson and Ed Ngoksin (PCB NGOs), and Rosalia Rodriguez-Garcia (World Bank) joined by phone.

Absent: Lavanya Kumar (India)

UNAIDS Secretariat: Jan Beagle, Ussing Morten, Jacek Tyszko, Samia Lounnas

Consultant for the PCB NGO review: Sarah Middleton-Lee (joined by phone).

Meeting agenda:

- 1. Update, Regular Segment at 31st PCB meeting**
The Bureau will receive brief updates on key items of the Regular Segment of the upcoming Board meeting including Follow-up to the thematic segment of the 30th PCB (Combination prevention), Gender-sensitivity, Strategic Investment, review of PCB NGO participation in the Board and MERG.
- 2. Update, Thematic Segment at 31st PCB meeting (Non- Discrimination)**
The Bureau will receive a brief update on preparations for the thematic segment at the 31st PCB meeting.
- 3. Review of the proposed combined theme for the Thematic Segment, 33rd PCB meeting (December 2013)**
The Bureau will discuss and possibly agree on the revised theme to recommend to the PCB at the 31st meeting.
- 4. PCB Field Visit to Ukraine**
The Bureau will receive an update and feedback from the recent PCB field visit to Kiev, Ukraine (4-5 October).
- 5. Any other business**

The Chair welcomed the participants.

After adoption of the agenda, the Chair requested UNAIDS Secretariat to present updates for each agenda item for the regular segment of the upcoming PCB meeting which will be held in Geneva from 11 to 13 December 2012.

1. Update, Regular Segment at 31st PCB meeting

UNAIDS Secretariat provided the following updates:

(1) *Opening and Leadership in the AIDS response*

- The outline of the EXD report is expected around two weeks before the meeting as is customary; the EXD is currently exploring options for the speakers for the 'AIDS Leadership' item. The Bureau will be kept informed.

(2) *Combination Prevention: Follow-up to the thematic segment from the 30th Programme Coordinating Board meeting.*

- UNAIDS Secretariat provided a brief update as follows:
 - The summary report is finalized and the English and French versions are posted on the PCB web page.
 - The paper is a summary of the session itself followed by 6 main conclusions namely:
 - **Elements of combination prevention.**
 - **Compressing the divide between early-implementers and those with lagging responses.**
 - **The need for scale-up across the prevention-treatment continuum**
 - **Maximizing opportunities provided by antiretroviral based approaches to prevention.**
 - **How to influence and measure behavioural and social change.**
 - **Need for continued promotion and support of combination prevention.**
 - The proposed recommendations emerge from the discussion on the day and capture what was said on the day.

(3) *Strategic Investment: The Board will receive a report on progress toward enhanced strategic investment at the country level as requested at the 29th meeting.*

- UNAIDS Secretariat provided a brief update as follows:
 - The report has been presented to Senior Management for clearance.
 - The tool used to support countries is "Investing for results. Results for people. A people-centred investment tool towards ending AIDS".
 - "Shared Responsibility and Global Solidarity" is a guiding principle.
 - The report is based on strategic investment cases in 29 countries and it went through an inclusive consultation process with key partners (cosponsors, GF and other key donors).
 - A matrix with key findings for each country is presented as an annex to the report (among the 29 countries, 19 are High Impact Countries (HICs) and 15 are in sub-Saharan Africa). All regions are represented.
 - Countries are at various stages (steps) in terms of applying the investment approach.
 - Overall, most countries are moving ahead and driving the push on sustainability.
 - Countries are drawing on a large body of available strategic information on HIV including, national AIDS spending assessments (NASA), Modes of Transmission (MOT) studies, efficiencies studies, population size estimates.
 - Several countries are in process of undertaking a mid-term review or developing a new National Strategic Plan and are using this opportunity to apply the strategic investment model.

- Global Fund reprogramming is also an opportunity to use the Strategic Investment tool to prioritize interventions.
 - Some challenges have been noted including measurement of critical enablers, lack of rigorous data applied to gender and human rights activities. While CSOs are engaged in investment dialogue, they are facing some key challenges including funding and structural barriers.
 - All these elements are illustrated in the report by concrete country examples.
 - In addition to the main report, we will have two country case studies presented as conference room papers: Cambodia and South Africa.
- PCB NGOs requested more details on CSOs involvement in the development of the two case studies. The Secretariat will send the requested information by email.

(4) Gender-sensitivity of AIDS responses: *The Board will receive a mid-term review of implementation of the Agenda for Accelerated Country Action for Women, Girls, Gender Equality and HIV (2010–2014) as requested at the 28th meeting.*

- UNAIDS Secretariat provided a brief update as follows:
- The report is currently being finalized.
 - Delays in drafting the report were due to the request by several members of the external working group to include two additional country visits (Zambia and Djibouti). This delayed availability of the entire set of information, for triangulation and interpretation.
 - The methodology comprises :
 - ✓ A **stakeholder survey**, undertaken by participants from 107 countries,
 - ✓ A **joint country survey** completed by 80 countries.
 - ✓ Twenty-two **structured interviews** conducted with government, civil society and UN agencies from multiple regions.
 - ✓ **Desk research** of 169 documents
 - ✓ **Five country missions** to Cambodia, Djibouti, Guatemala, Rwanda and Zambia.
 - ✓ An **analysis of the UN accountabilities**, providing data on activities completed by UNAIDS family under the Agenda.
 - Key findings:
 - ✓ 90 out of the 99 countries, implementing the Agenda, have undertaken a national launch of the UNAIDS Agenda for Women and Girls, since March 2010. Using the event to reinforce political commitment and partnership, as well as increase visibility.
 - ✓ Implementation is tailored to the local context.
 - ✓ The accelerated country efforts on gender equality have successfully strengthened HIV responses, as demonstrated by the findings of the 2012 scorecard, in comparison with 2011 data.
 - ✓ UNAIDS priority countries are moving ahead.
 - ✓ Increasing range and number of partners have been involved in the different aspects of programming, specifically women living with HIV, and key populations.
 - ✓ Funding lags behind, in particular for women's networks and groups.
 - It is important to notice that the MTR is not an impact evaluation but rather measures and analyses process implementation for recommendations on accelerated action around gender equality and HIV.

(5) Review of NGO/Civil Society participation in the PCB: *The Board will receive a report on the NGO/Civil Society participation in the PCB (2007-2012) as requested at the 20th meeting.*

- The independent consultant, Sarah Middleton-Lee introduced her report as follows:
 - The review was based on the inception report that was provided by the Oversight Committee (OVC).
 - The review was undertaken in a very tight timeline.
 - Very good participation from all regions.
 - The review followed five themes.
 - 13 recommendations are proposed deriving from the key findings described in detail in the report
- All Bureau members commended the excellent report and thanked the consultant for the quality of the work in such a tight timeline.
- Before opening the floor for discussion on the content, the Chair reminded the members of the OVC that as this is an independent review, their observations and comments should be limited to:
 - Corrections of factual inconsistencies;
 - Further elaboration of unclear elements.
- The deadline for the OVC to send comments to the UNAIDS Secretariat is 1 November. The Secretariat will then consolidate all comments and send to the consultant for her consideration. The consultant will judge which comments will be integrated in the final report without compromising the independent nature of the review.
- The Chair has proposed the following next steps to help structure the discussion during the PCB meeting:
 - Final report by consultant will be published as a conference room paper;
 - The Bureau will make an attempt to group the recommendations into a limited number of decision points for PCB consideration. This would be presented to the meeting as the PCB document.

(6) Monitoring and Evaluation Reference Group (MERG): *The Board will receive a report on development concerning the Monitoring and Evaluation Reference Group (MERG) as requested at the 30th meeting.*

- UNAIDS Secretariat provided a brief update as follows:
 - The report has been presented to Senior Management for clearance.
 - The report was shared with interested Bureau members for comments before its finalisation.
 - It describes the process of establishment of the new MERG.
 - As a part of its introduction to the PCB there will be an oral presentation on the outcomes of the MERG meeting planned to be held 20-21 November as indicated in the document.

2. Update, Thematic Segment at 31st PCB meeting (Non-Discrimination)

- UNAIDS Secretariat, provided a brief update as follows:
 - Four working group meetings (July-October) were held to prepare the PCB Thematic segment on Non-Discrimination.
 - Background note has been prepared and published on UNAIDS website on Friday, 19 October.
 - Comments from a member of the working group were received on the same day as the last working group meeting after the deadline (7 October) had passed. The comments included a request to insert in the Background note a footnote which will indicate their disagreement with elements in it specifically the working definition of discrimination and reference to key populations.
 - A Draft agenda and format of the day are being finalized. It will be a plenary with key speakers for each session which are: Responses to HIV-related discrimination in different sectors *and Strategies for expanding programmes to reduce HIV-related discrimination in national AIDS responses*.
 - Invitations to speakers will be sent very soon.
 - The Bureau was informed on the plans related to the international Day of Human rights (10 December) which will be celebrated a day before the opening the PCB meeting.

3. Call for proposals for the Thematic Segment, 33rd PCB meeting (December 2013) *Proposals for the Thematic Segment, 33rd PCB meeting (December 2013)*.

- The Chair requested the UNAIDS Secretariat to present the options for the selection of the theme for the 33rd PCB meeting.
- UNAIDS Secretariat provided the following information:
 - As discussed at the previous meeting of the Bureau, we have received 11 proposals and 9 templates (consolidated matrix shared with Bureau).
 - Based on the feedback received from the Bureau at that meeting the Secretariat in collaboration with relevant Cosponsors made an attempt to combine Bureau's preferences into one theme under the title: "Maximizing the long-term prevention and treatment benefits for adolescents, young people living with or affected by HIV through the strategic use of ARVs".
 - The Secretariat reviewed all proposals in order to extract the relevant information pertaining to the three preferred themes.
 - With WHO and ILO (social protection dimension), the Secretariat explored options on how to combine the 3 themes.
 - WHO reviewed their initial submission, focusing on the strategic use of ARVs with young people, including aspects of social determinants of health for young people. WHO provided additional information on the specific needs and situations for young people accessing ARVs as well as treatment for prevention for this age category.
 - Based on the review of the content of related proposals and additional information received from WHO and ILO it was concluded that the three topics would be difficult to combine in one meaningful session and recommended that the themes be kept separate. There was particular concern that combining the themes could give a wrong message of prioritizing the needs of young people linked to treatment only.
- Based on the above, the following two options were proposed for Bureau's consideration:

Option 1: Keep the two themes that received most support from the Bureau (Young People and HIV and Strategic use of ARVs) separate, and split the Thematic segment in two separate half day sessions.

Option 2: Select the two themes; one for the 33rd PCB in December 2013 and the other for the 34th PCB meeting in June 2014.

- After discussion, all PCB Bureau members agreed that option 1 provides a better solution and requested the UNAIDS Secretariat to finalize paper accordingly.

2. Any other business

PCB field visit to Ukraine

UNAIDS Secretariat, Jan Beagle, and PCB Bureau chair gave a brief feedback from the PCB Field visit to Ukraine.

- These visits are part of UNAIDS efforts to increasingly connect country level realities of the AIDS response and the decision making in the PCB. It was a true privilege to be part of this delegation and our hosts really appreciated the insightful questions and the engagement from PCB members.
- The PCB field visit to Ukraine was the first visit of the UNAIDS governing body to the Eastern Europe and Central Asia region. It was an excellent opportunity to expose the delegation to the particular challenges of one of UNAIDS high impact countries and the most severe epidemic in Europe. The members of the delegation were also able to witness the critical role of UNAIDS in leading the Joint UN Team with the support of the Resident Coordinator and UN Country Team.
- The PCB delegation met with the Vice-Prime Minister and Minister of Health of Ukraine, Dr Raisa Bogatyryova, as well as with other government officials, development partners, civil society and community representatives—including members of national and regional networks of people living with HIV—and with the UN Country Team and the Joint Team on AIDS. The meeting with Dr Bogatyryova offered an opportunity to discuss the concept of shared responsibility and to explore ways in which domestic financing could be increased.
- Delegation and the Vice-Prime Minister talked about the need to scale up HIV prevention and treatment services as the current HIV treatment programme in the country is meeting the needs of only 25% of people eligible. They also highlighted the importance of creating an enabling environment to facilitate access to HIV services to key populations at higher risk of infection such as sex workers, people who use drugs and men who have sex with men.
- There was a lot of interaction with high level officials. The members of the Delegation had the opportunity to visit several health facilities to see the work being done on the ground. In the Kiev city AIDS clinic, for example, the government and civil society partners are providing services for people living with HIV and people who use drugs—including HIV and TB treatment, substitution maintenance therapy (SMT) and psychological support. Also in Kiev, the Lavra Clinic, is a specialised medical facility that provides clinical care to HIV-positive

patients, and has a drop-in community centre which offers HIV testing, prevention and care for people who use drugs, sex workers and transgender people.

- The delegation also interacted with women at the maternity clinic of the Kiev City Center of Reproductive Health and Perinatology, which provides services to stop new HIV infections among children as well as substitution maintenance therapy to pregnant women who also use drugs. They also talked to the service providers (medical professionals, psychologists, outreach and social workers, and volunteers) to learn more about their activities and challenges they face.
- Efforts to stop new HIV infections among children and keeping their mothers alive have yielded positive results in Ukraine where 96% of pregnant women living with HIV received antiretroviral prophylaxis in 2011. Mother-to-child transmission of HIV was reduced from 28% in 2001 to 4.7% in 2009.
- Throughout the visit, the delegation highlighted the key role played by civil society organizations in advocating for, and providing HIV services for key populations, care and support to people living with HIV, and in reducing stigma and discrimination towards affected communities. In Ukraine, key PR's of GFATM grants are NGOs and they have been instrumental in scaling up the response .
- All international partners emphasized that the current situation represents both opportunities but also some concerns in particular, regarding financing of the response as external financing is only assured until 2016. The long term sustainability of the response is even a further concern as the epidemic has the potential to become generalized
- The Resident Coordinator informed the delegation that HIV/AIDS was the area in which the UN system was coordinating most effectively in Ukraine.

Standard Footnote:

PCB Bureau agreed on the below standard footnote to be used in case of disassociation with a Decision Point.

[“County X disassociated itself from this decision point”](#) .

Next PCB Bureau Meeting:

- The PCB Bureau Chair announced that this is the last meeting of the Bureau before the PCB.
- She confirmed that Bureau will remain available, if there is need to discuss critical issues before the PCB meeting.
- She also announced that the last meeting of the current Bureau is planned during the 31st PCB meeting (12 December) and that she intended, if in agreement with India as the future PCB Chair, to conduct it with the newly (on the day) elected officers of the next PCB Bureau.

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