PCB NGO DELEGATION’S COMMUNIQUE

JUNE 2018
# TABLE OF CONTENTS

CHAPEAU 4

AGENDA 1.3: REPORT OF THE EXECUTIVE DIRECTOR 6

AGENDA 1.4: REPORT OF THE CHAIR OF THE COMMITTEE OF COSPONSORING ORGANIZATIONS 7

AGENDA 2: UPDATE ON THE INDEPENDENT EXPERT PANEL ON PREVENTION OF AND RESPONSE TO HARASSMENT, INCLUDING SEXUAL HARASSMENT, BULLYING AND ABUSE OF POWER AT UNAIDS SECRETARIAT 8

AGENDA 4: STATEMENT BY THE REPRESENTATIVE OF THE UNAIDS SECRETARIAT STAFF ASSOCIATION 9

AGENDA 6: UNIFIED BUDGET, RESULTS, AND ACCOUNTABILITY FRAMEWORK (UBRAF) 11

AGENDA 8: FOLLOW-UP TO THE THEMATIC SEGMENT FROM THE 41ST PROGRAMME COORDINATING BOARD MEETING 12

AGENDA 10: THEMATIC SEGMENT: ENDING TUBERCULOSIS AND AIDS: A JOINT RESPONSE IN THE ERA OF THE SUSTAINABLE DEVELOPMENT GOALS 13

GLOBAL PARTNERSHIP TO ELIMINATE ALL FORMS OF STIGMA AND DISCRIMINATION 15
THE NGO DELEGATION IN ACTION AT THE 42\textsuperscript{ND} PCB
CHAPEAU

Marsha Martin, North American Delegate

The UNAIDS 42nd Programme Coordinating Board (PCB) Meeting took place in Geneva, Switzerland on June 26-28, 2018, under the leadership of its new chair, the Honorable Anne Wechsberg, Director, Policy Division, Department for International Development, United Kingdom. This PCB had a very full agenda and provided for updates on governance, administrative matters, and human resources, including the establishment of an Independent Expert Panel to examine past and current practices to address issues of unethical workplace behavior including bullying, abuse of power and sexual harassment. Additionally, this PCB supported a review of the progress to date on UBRAF and implementation of the new financing mechanism in support of continued resourcing of cosponsoring UN agencies, as agreed to in the new operating model; and, a review of the commitments and capacities of Member States to better monitor and report on HIV-related expenditures, policy changes and programmatic progress toward the 90-90-90 global targets. The Thematic segment on addressing TB within the context of the three zeros and achieving the 2030 end of AIDS provided PCB members and observers with first-hand experience of the challenges in addressing HIV and its related stigma. There was a call for renewed engagement on addressing HIV and TB and it was noted that the Dutch government will be convening a special session at The Hague on TB and the Africa Japan Forum will host a side meeting on a Human-Centered Approach to Tuberculosis for Healthier Cities at the HLM on TB July 2018.

The NGO Delegation actively participated during the meeting and encouraged the Joint Programme and Members States, to keep their commitments to better resource communities and civil society and to work toward ‘meaningful involvement of people living with HIV’ in all aspects of their country level programs and policy and planning work. We maintained our position that the UNAIDS we need must do things very differently, at headquarters and in the field, especially when it comes to addressing unethical workplace behaviors, including sexual harassment, bullying and abuse of power in the UNAIDS workplace.
Unique to this PCB was the media and global community attention given to the review of, discussion about, and myriad public and private responses to the allegations of sexual misconduct at UNAIDS. The NGO Delegation followed the issues raised and convened several consultations with civil society to solicit feedback, give voice to concerns and receive recommendations for the way forward, including identification of best practices for addressing sexual harassment and related workplace issues. Much of what the NGO Delegation learned was shared with the Member States in pre-meetings and at the board meeting itself including the need for UNAIDS to create a safe environment for those experiencing harassment to feel free to report. Additionally, two members of the NGO Delegation worked with and through the PCB Bureau to bring the voice and experiences of civil society to the discussions of the Independent Expert Panel, its charge and potential membership.

As in past meetings, the NGO Delegation was very busy with more than 28 side meetings with Member States, cosponsors and civil society observers to gain an understanding of outstanding issues and listen to potential opportunities for strengthening the role of communities and civil society in achieving the 2030 targets. As a follow up to the 42nd PCB meeting, the NGO Delegation is planning a special session at AIDS 2018. Join us.
AGENDA 1.3: REPORT OF THE EXECUTIVE DIRECTOR

Trevor Stratton, North American Delegate

Michel Sidibé reminded the PCB that while we have less than a thousand days remaining to the 2020 Fast-Track milestone, the financial resources available to UNAIDS fall short by about 27% and only about half of people living with HIV are accessing treatment.

Can we continue to believe that we will meet our targets for 2020 (which is just around the corner) with inadequate resources and Member States’ lack of responses to calls for enhancing partnerships and creating enabling environments for people living with HIV, people on the move, women, and key populations?

Where is the missing quarter for prevention to reduce new infections?
What is the real picture of how many with access to treatment are truly retained in care?

Where’s the funding for the UNAIDS we need?

For UNAIDS to continue working efficiently with limited resources, it needs to be able to expand its solidarity with the community response and reach out to wider groups of constituencies, particularly those who are left behind, such as people on the move, Indigenous Peoples and trans communities. We need to be able to follow the natural and rapid evolution of managing strategic information towards the use of technology that can better communicate UNAIDS’ work with specific populations such as young people, people who are living remotely, people with language barriers, etc.
AGENDA 1.4: REPORT OF THE CHAIR OF THE COMMITTEE OF COSPONSORING ORGANIZATIONS

Lumumba Musah, African Delegate

As with the previous meetings of the UNAIDS PCB, the Committee of the 11 Cosponsoring Organisations (CCO) presented a report through their chair, Mr. Filippo Grandi, of the United Nations High Commissioner for Refugees.

Mr. Filippo gave a synopsis of what the Joint Programme as whole has been able to achieve, highlighting some engagements, successes as well as gaps in the HIV response that required urgent attention. In addition, he shared that Executive heads of the cosponsors welcomed the discussion on sexual harassment, where they expressed the urgent need for everyone to invest their best efforts towards building zero tolerance to harassment and maximum accountability.

As the NGO Delegation, we emphasised that the HIV response was not just all about numbers, but actually people and lives. We noted the urgent need to change the narrative from people and communities who are left behind, to catch-up plans to ensure that their emerging needs and priorities are supported through a community-led response. We also emphasised the need for a people-oriented reporting that talks to quality of life indicators and impact of the interventions, rather than an output-oriented, politically motivated reporting, for numbers.
The NGO Delegation further stressed the need for cosponsors to consider needs of people most impacted at country level as well as their capacity to deliver on community support and human rights for people in emergencies, rather than their operational mandates.

AGENDA 2: UPDATE ON THE INDEPENDENT EXPERT PANEL ON PREVENTION OF AND RESPONSE TO HARASSMENT, INCLUDING SEXUAL HARASSMENT, BULLYING AND ABUSE OF POWER AT UNAIDS SECRETARIAT

Alessandra Nilo, Latin America and the Caribbean Delegate

Since February this year, various efforts were undertaken by UNAIDS to strengthen policies to prevent and manage the issues related to sexual exploitation, abuse, and harassment, including an internal plan of action. The UNAIDS Secretariat Staff Association (USSA) was also very much active as shown in their report (please refer to agenda 4 for the link to the report) for this PCB. Those themes were extensively discussed under agenda item 2 of the 42nd PCB.
The Independent Expert Panel – the first ever initiative by a UN entity – is currently being established. In order to ensure independence, the PCB Bureau is responsible for its oversight and management and UNAIDS is not involved in the process. The nominations to the Independent Panel were opened and accepted by Russel Reynolds, an executive search firm contracted to assemble the list of potential panelists – until 25 June 2018. At this stage, the Bureau will soon inform the selected candidate for the chair. The PCB NGO Delegation has been participating in this process, through our representatives in the PCB Bureau and we are looking forward to the report and recommendations of the Independent Panel at the 43rd PCB meeting in December. At this PCB, we demanded a comprehensive approach across all parts of UNAIDS, including programme design, human resources, finance, investigation, training, ethics, and evaluation; covering staff at all levels; and at both headquarter and field levels. We also stressed the importance of commitment – and investments – of UNAIDS to tackle sexual exploitation and abuse, abuse of power and sexual harassment, considering those are the same issues fueling the AIDS epidemic. We all stood and will remain together, demanding zero tolerance on this issue.

AGENDA 4: STATEMENT BY THE REPRESENTATIVE OF THE UNAIDS SECRETARIAT STAFF ASSOCIATION

Humphrey Ndondo, African Delegate

It is very encouraging that the UNAIDS Secretariat Staff Association (USSA) routinely collects data from staff to inform their internal advocacy. Use of evidence to inform decisions is encouraging and should be commended. However, it is very
disheartening that as a beacon of championing human rights, non-discrimination and a zero tolerance to harassment, including sexual harassment, bullying and abuse of power, USSA notes that there are reports of harassment still ongoing at UNAIDS. What is more disturbing is that reports include discrimination based on one’s HIV status.

The NGO Delegation welcomes the five-point action plan being implemented and will monitor closely the results of the work of the Independent Expert Panel on sexual harassment. It is our assertion that there is need for prudence in preventing and addressing harassment at the workplace, including a change of working culture that affirms and fosters tolerance for diversity and mitigates ALL forms of harassment, including sexual harassment, bullying and abuse of power. The Staff Association has committed to a goal of zero tolerance to harassment by 2020, and we would want to see a plan of action towards the achievement of this goal and regular reporting on this in their surveys with staff, and encourage that these surveys be repeated every six months to better monitor progress.

We applaud UNAIDS for being exemplary in its efforts at achieving gender parity. We encourage that these efforts be reflected in decision making and management positions throughout the joint programme. Furthermore, we encourage UNAIDS to be sensitive in its gender analysis and reflect the composition of trans diverse and gender non-conforming persons among their staff.

Lastly, we want to emphasize that addressing these and other human resource and operational issues be not viewed as peripheral to our efforts at ending AIDS, but central to the response to end AIDS and to the #UNAIDSWWeNeed. The link to the USSA report is here.
AGENDA 6: UNIFIED BUDGET, RESULTS, AND ACCOUNTABILITY FRAMEWORK (UBRAF)

Aditia Taslim, Asia and the Pacific Delegate

The Unified Budget, Results and Accountability Framework (UBRAF) is the core business of the PCB. At every June PCB meeting, UBRAF is a standing agenda item with three main reports presented: Performance (2016-2017), Financial Reporting (2016-2017), and the Implementation of the Joint Programme Action Plan. The reports focus on achievements, challenges and future plans of the 11 Cosponsors against the eight Strategy Result Areas; the UNAIDS Secretariat contributions on the five Strategic Result Areas; and overall results of the Joint Programme by the six UNAIDS regions; financial expenditures; and, the progress on the new Joint Programme Action Plan, known as country envelopes.

The NGO Delegation noted that despite the funding cuts, we have, for the first time, achieved more than half of PLHIV on treatment globally. However, it was also noted that progress has been lacking in the fast-track countries, where most of the funds went. The overly-exhaustive 600-page report made it difficult to understand the overall impact. Additionally, in many countries, key population and civil society organisations were not involved in the decision-making process of the country envelopes. Structural barriers remained a key challenge in the implementation of the Joint Programme, yet, investment in this area has not improved, similar to the missing quarter of investment that needs to go to prevention.

The NGO Delegation urged the Joint Programme and Member States to increase the investment in civil society and community-led initiatives and their involvement
in decision making. We also called on the UNAIDS Secretariat to communicate better on their performance for purposes of clarity, accountability and transparency, and as part of a monitoring mechanism involving civil society. We welcomed the launch of the Transparency Portal as a way forward.

AGENDA 8: FOLLOW-UP TO THE THEMATIC SEGMENT FROM THE 41ST PROGRAMME COORDINATING BOARD MEETING

Ferenc Bagyinszky. European Delegate

The 41st PCB Thematic Segment last December 14th, 2017 covered the topic of “Zero Discrimination in Health Care Settings”. As also shown in the report on Update on Actions to Reduce Stigma and Discrimination in All Its Forms” (Agenda item 5 of 41st PCB), discrimination and stigma are major barriers, especially in health care settings, to accessing HIV prevention, treatment and care services.

In our interventions, we focused on lived personal experiences of our communities to highlight the devastating impact of stigma and discrimination on key populations and how HIV-related stigma is a major issue in health care settings affecting also health care workers living with HIV.
As follow up to the Thematic Segment, this PCB approved several Decision Points (DPs), many of which were suggestions from the NGO Delegation, calling for, in line with DPs from previous PCB, establishing and improving existing measurements to check progress in this area, which should be routine in monitoring of AIDS responses, and requesting a report back on the progress at a future PCB meeting.


Sonal Mehta, Asia and the Pacific Delegate

HIV-associated TB presents a risk to achieving the Sustainable Development Goals, UNAIDS Fast Track Strategy and End TB Strategy Targets to end these two epidemics by 2030. The 2018 United Nations High-Level Meeting “United to End Tuberculosis: An Urgent Global Response to a Global Epidemic” provides a unique opportunity to elevate the importance of ending the TB epidemic and reflect on the contribution of HIV-associated TB. Without effective and sustained actions, the needs of the most vulnerable populations will not be met.

TB remains as the leading cause of hospitalization and death among people living with HIV, despite the existence of effective prevention and treatment
One in three HIV-related deaths were due to TB in 2016. While TB deaths overall decreased by 37% between 2000 and 2016, TB deaths among people living with HIV only declined by 23% during the same period. Multidrug-resistant TB remains a significant threat to people living with HIV and contributes to higher mortality rates.

Backed by almost 35 civil society advisory group members, the NGO Delegation contributed to the thematic background paper, good practice, case studies and sessions bringing voices of the community and civil society representatives for sessions.

We had four powerful speakers in three out of four sessions of the day. Our main objectives were to advocate for enhanced investment in and participation of people affected and living with HIV in response to TB; ensure political support and commitments for investment in civil society; ensure universal access to Isoniazid prophylaxis, latest diagnostic tools (like GeneXpert), research on vaccine and quality of treatment of TB for all including PLHIV; and, working towards identifying key populations (priority groups) for TB and HIV/TB co-infection, such as indigenous peoples’, miners, etc.,.

In our interventions, we highlighted the need to reach the unreached, since TB is the largest killer for our populations. We also raised the critical need to ensure investment in tolerable treatment options for people living with HIV.
GLOBAL PARTNERSHIP TO ELIMINATE ALL FORMS OF STIGMA AND DISCRIMINATION

Devanand Milton, Latin America and the Caribbean Delegate
Valeriia Rachynska, European Delegate

On June 29-30, 2018, the Global Network of People Living with HIV (GNP+), together with the NGO Delegation, held the first global civil society consultation in Geneva about how to accelerate the commitments signed by Member States towards eliminating all HIV-related stigma and discrimination.

Representatives from global key population networks, community groups, and civil society organisations met to discuss the ‘Global Compact to Eliminate All Forms of Stigma and Discrimination, a proposal that emerged from the 41st UNAIDS PCB, through the initiation of the NGO Delegation. The co-conveners of this proposal are UN Women, UNDP, UNAIDS, the PCB NGO Delegation and GNP+.

During the consultation, it was agreed that the objective of the Global Compact, which was proposed to be renamed as ‘Global Partnership’ is a call to Member States, UN agencies, bilateral and multilateral donors, non-governmental organisations, and communities to catalyze and accelerate translation of existing
political commitments and provide an evidence base for policy change and programmatic interventions to end all forms of HIV-related stigma and discrimination and support fast track efforts in countries to end AIDS as a public health threat by 2030.

The Global Partnership also intends to close the HIV-related stigma and discrimination data gap to inform policy and program implementation and promote accountability and demonstrate measurable progress towards reducing HIV related stigma and discrimination in all population.

HIV-related stigma and discrimination can manifest differently across settings and thus may require different approaches and considerations when intervening. The Global Partnership aims to engage with all players to reduce stigma and discrimination in all forms, especially in places where stigma and discrimination occurs, e.g., health-care settings, employment settings, education settings, and legal environment. Issues such as access to insurance and housing were also discussed. The next step for this initiative involves national consultations in selected countries. More information on this will be shared in the NGO Delegation’s website.