



**THE NGO DELEGATION'S COMMUNIQUE  
FOR THE 40<sup>TH</sup> PROGRAMME COORDINATING BOARD (PCB) MEETING  
JULY 2017**

## CHAPEAU



#TheUNAIDSWeNeed is embracing the new realities of the global HIV architecture, is adjusting to new ideas and is facing the challenges of change. This was evident at the 40<sup>th</sup> UNAIDS Programme Coordinating Board (PCB) meeting held in Geneva, Switzerland, June 27-June

29, 2017, under the chairpersonship of Hon. Kwaku Agyeman-Manu, Minister of Health for Ghana.

The 40<sup>th</sup> PCB meeting took place during a time of great expectations and anticipation following a spring season of internal and external reviews, uncertainty of mission, vision, resources, and a keen interest among all stakeholders in a revised operating model, one that was prepared to balance its budget against continuing unmet needs with adjustment to the myriad changes confronting the global HIV community. As UNAIDS Executive Director Michel Sidibe stated in his [report](#), “The world is in flux, we must all connect the dots, do some audacious thinking, confront obstacles with innovation and transformation, leaving no one behind”. Mr. Sidibe did acknowledge that tough decisions were to be made and the next steps in the change process would be the repositioning of the UNAIDS Secretariat. He stressed maintenance of capacity to remain relevant and continue to focus on human rights, support for civil society and ensuring continuity of work with all partners such as the Global Fund, PEPFAR, Co-sponsors and national governments.

To that end, the 40<sup>th</sup> PCB meeting reviewed the recommendations for changes in governance; financing and accountability; and jointing working from the Global Review Panel and undertook to further flesh out the recommended [Action Plan](#) for moving forward.

The agenda for the 40<sup>th</sup> PCB reflected the need to review the administration and operations of the Joint Programme and the Secretariat; to take action on the recommendations from the Global Review Panel; to review the Unified Budget, Results and Accountability Framework (UBRAF) performance and financial targets; to launch the Global Coalition on HIV Prevention and to revisit and strengthen the role of HIV Prevention in the 2020 goals. The NGO Delegation actively participated in all aspects of the PCB meeting. As this meeting was focused on the ‘business’ of administering and managing the Joint Programme, much of the work of the NGO Delegation was to make certain that the Joint Programme maintain capacity to work in the field/in country with and among key populations and persons living with HIV; to make certain the resource allocation framework was fair and appropriate to address needs in the field/in country; and to address staffing and resource mobilization issues, so no region or communities are left behind without UNAIDS support.



A bright spot on the agenda was a message from Lorena Castillo de Varela, First Lady of Panama, following the Executive Director’s report about her experiences and global efforts to bring about changes in the area of discrimination and stigma. Using the symbol of a butterfly, she strongly

encouraged PCB members to transform ourselves and become like the butterfly, to become the change we want to see in the world.



## EXECUTIVE DIRECTOR'S REPORT



The NGO Delegation welcomed UNAIDS Executive Director Michel Sidibe's [report](#), which not only focused on gains in the HIV response, but also expounded on the challenges and new opportunities, as well as an update on the proposed refined operating model of the Joint Programme.

The report noted that it would be very difficult to address any global health issues, including ending AIDS in a rapidly changing and unpredictable world, without understanding the geopolitical, environmental, socioeconomic and demographic megatrends that would frame better actions. It also highlighted that if underlying causes of migration were not addressed, we will have more migrants and fragile communities with fragmented health services.



As more countries embrace the 90–90–90 targets, Michel shared that Uganda's President launched the first presidential Fast-Track initiative. In addition, he announced the Global HIV Prevention Coalition meeting in October in Nairobi, Kenya, hence the need for a movement around the right to prevention.



In response to the ED Report, the NGO Delegations' interventions

emphasized the need to maintain civil society as an independent and key actor in the AIDS response. We highlighted the need for coordinated communication across the Joint Programme, including transparency on the impact of the budget cuts on the work on ground especially for and with communities. We also called for a clear engagement strategy across the Joint Programme for communities including people living with HIV, young women and girls and key populations.

## REFLECTIONS ON THE GLOBAL REVIEW PANEL AND THE REFINED OPERATING MODEL



The 40th PCB meeting was very complex. With the reduction of financial resources, the Joint Programme was required to adopt a refined operation and processes that will reorganize UNAIDS to become a more efficient and accountable institution.

This meeting placed great emphasis on the results of the Global Review Panel, whose final report provided recommendations that were subsequently consolidated by UNAIDS Secretariat and the Co-sponsors in the form of [Action Plan](#) submitted for the PCB approval.



For the NGO Delegation, this current situation of UNAIDS is extremely worrisome. First, the goals defined require a much more structured Joint Programme, including and especially at the country level, with a greater capacity to respond to the epidemic. The bet played, therefore, had very high stakes: to require UNAIDS to do

more, with less resources.

Second, at each PCB, the tensions between the Secretariat and the Co-sponsors remain evident, and if both are serious about their commitment to maintaining UNAIDS afloat, they need to find

a way to redefine themselves, communicate with each other better and show efficiency for the work they were hired for. Therefore, we welcomed the recommendation to put in place external monitoring and evaluation mechanisms that allow the verification of performance of the Joint Programme and its management at national, regional, and global levels.

Another crystal-clear challenge is that the UNAIDS Secretariat, in turn, needs to do a much better coordination job: both from the internal point of view, with its own staff at the headquarters and in the field, and with regard to the co-sponsors' coordination. This is the Secretariat's responsibility, which will require many adjustments and new management processes, with monitoring and follow-up of decisions and plans. Managing and coordinating efficiently can even help UNAIDS to ensure the necessary space in the context of the Sustainable Development Goals (SDGs), since, at this stage, it is still practically invisible in this arena.

From a global perspective, the NGO Delegation relayed the message from our civil society constituencies that UNAIDS is experiencing a credibility crisis in its ability to respond to the current demands of the epidemic –not only because of the lack of funds, but also because its [communication](#) about its work has been ineffective. Thus, it has not translated the important messages, focusing instead on slogans without substance, which confuse rather than help in strengthening the message that UNAIDS continues to be critical, because there is still so much to do to control HIV, and that, in fact, that we are still far from ending AIDS.

The NGO Delegation also sent a clear message to Member States: [stop saying there is no money](#). Stop continuing to use the financial crisis as an excuse for the lack of investment in health and in the response to HIV, which are basic rights that need to be guaranteed by all States. In this regard, we applauded both Ghana's donation and Germany's announcement that it will double its contribution to UNAIDS.

Meanwhile, civil society's main challenge is to guarantee that, in a such context where funds are lacking, the prioritization of the still available resources will be made through meaningful consultation processes at all levels, involving the key populations, communities and affected groups.

To achieve #TheUNAIDSWeNeed, much remains to be done. Let's continue to monitor and follow up the processes, so one day, we will get there.



## UNIFIED BUDGET, RESULTS AND ACCOUNTABILITY FRAMEWORK (UBRAF)



At the 39<sup>th</sup> PCB meeting, UNAIDS was tasked to set up the Global Review Panel (GRP), organize consultations, and use the final report to draw up a refined operating model for the Joint Programme. The 40<sup>th</sup> PCB Meeting approved a [Joint Action Plan](#) resulting from the GRP final report. The Action Plan places strong

emphasis on flexibility, differentiation, prioritization and inclusiveness. It is guided by three overarching objectives: to deploy human and financial resources where they are needed most; to reinvigorate country-level joint work and collaborative action; and to reinforce accountability and results for people.

The Secretariat also presented a report on the Unified Budget, Results and Accountability Framework (UBRAF) performance and expenditures.



The NGO Delegation appreciated the UBRAF report, which provided details of expenditure and spending regionally, as well as providing clarity on core and non-core expenditures. It also provided information on activities through Co-sponsor reporting. However, we expressed concern about the lack of clear, interpretable and

accountable effect on the impact of the budget cuts at the community level, its impact on services and the long-term outcome of the same. We also made a request to UNAIDS to provide a simple report which can be understood by the community and used as a tool for advocacy to fully fund the UNAIDS Joint Programme.

The most important concern of the NGO Delegation was the lack of a concrete resource mobilization plan in the Joint Action Plan. While Germany promised to double their contribution to the UNAIDS, which was very welcomed by everyone including the NGO Delegation, UNAIDS cannot continue to rely on national contributions alone. The NGO Delegation also called on the PCB members to [stop talking about lack of resources](#) and set the priorities right. Rather than investing in prosecution and drug control, the resources need to be invested in upholding human rights, ensuring affordable treatment and prevention education for all.

Finally, we are convinced that there is an important homework to be done by UNAIDS: moving and working in an innovative way, reviewing and modernizing its strategies for mobilizing the additional resources needed. But, if it continues to depend only on philanthropic donations from governments to reach the funding level of the past, it is unsustainable, and this strategic and pioneering Joint Programme will fail. Therefore, the NGO Delegation proposed a decision point ([see decision 6.10](#)) that at the upcoming 41st PCB meeting, UNAIDS must present a joint plan for mobilizing resources. This was one of our major contributions at the 40<sup>th</sup> PCB meeting.

**FOLLOW UP TO THE THEMATIC SEGMENT FROM THE 39<sup>TH</sup>  
PROGRAMME COORDINATING BOARD MEETING: HIV AND AGEING**



The 39<sup>th</sup> PCB Thematic Segment last December 8, 2016 covered the topic of HIV and ageing. At the 40<sup>th</sup> PCB meeting, the PCB welcomed both the [report](#) and the [background note](#) that covered the medical and social aspects of ageing with HIV. Both documents highlighted the need to prepare health and social services, so that they can provide prevention, treatment and care services for people over 50 living with or at risk of HIV without discrimination.

In our intervention, we [called for bigger attention to young people living with or at risk of HIV](#) as part of looking at ageing as a lifecycle approach. The prevention, treatment and care needs of young people should include differentiated interventions and individual solutions adjusted to the needs of the individual, based on a rights-based approach. The NGO Delegation also [highlighted](#) that while an ageing population of people living with HIV is a success, we also

have to admit that every life lost is a failure. Globally more than half of people living with HIV do not have access to medication, and some regional figures are even worse. People are still dying every day due to legal, structural and financial barriers to universal access.

The PCB approved several Decision Points (DPs) ([see decisions 7.1 – 7.3](#)) after long hours of intense negotiations, including strengthening and reforming health systems to support people over 50 living with HIV or at risk of HIV to access prevention, treatment and care services without stigma and discrimination. During the negotiations, we pushed for inclusion of community-based services when strengthening health services and access to comprehensive sexuality education. The final approved language of the DP noted the need for “comprehensive information on HIV prevention and other STIs, including sexual education.”

## STRATEGIC HUMAN RESOURCES MANAGEMENT ISSUES AND STATEMENT BY THE REPRESENTATIVE OF THE UNAIDS STAFF ASSOCIATION



The central theme of the [strategic human resource management issues](#) and the [statement by the representative of the UNAIDS Staff Association](#) centered around the repositioning of and realignment of the UNAIDS Secretariat staff, in light of the changing political and financial landscape that UNAIDS faces, as well as the implementation

of the Gender Action Plan adopted in 2013. This includes the rollout of the UN for All training on diversity and inclusion, the repositioning exercise to close the gender gap within the Secretariat, and the development of UNAIDS Secretariat's junior staff through their Junior Professional Officer Development Program. Member States and the NGO Delegation recognized the Secretariat on their commitment towards gender equality through the Gender Action Plan, with some Member States requesting future updates on its implementation.





The NGO Delegation raised the [issue of the impact of the repositioning exercise](#) of UNAIDS on communities, in line with the issues raised by the UNAIDS Staff Association in their statement. Our Delegation asked if there were clear criteria for the repositioning exercise or if perspectives of key population and communities were considered;

for instance, the dissolution of the Senior Expert on Treatment post within UNAIDS that focuses on intellectual property issues. Two examples highlighted were the Philippines and Venezuela, where UNAIDS presence and efforts must be strengthened. The Secretariat responded from the floor and committed to look into both countries and find ways to ensure that necessary steps are expedited. The Delegation requested clear information about future repositioning processes and the results and impact produced by this exercise.

## THEMATIC SEGMENT: HIV PREVENTION 2020: A GLOBAL PARTNERSHIP FOR DELIVERY



The Thematic Segment on Prevention was a sorely needed session at the UNAIDS PCB. Only five years ago at the 30<sup>th</sup> PCB, the Thematic Segment focused on Combination Prevention, yet the DPs then were rather vague and difficult to measure. Since then, HIV prevention spending has not kept pace with spending for treatment and other HIV responses. The target of “a quarter for HIV prevention” has not been realized and, in fact, overall spending for prevention has declined. Member states support and approve recommendations, but for many, it does not translate to implementation and political

will.

The truth and courage in the words of civil society speakers from the Thematic are still ringing in everybody’s ears. Keynote speaker, Ms. Kyendikuwa Allen Namayanja, Program Manager at the Uganda Youth Coalition on Adolescent SRHR and HIV insisted that Member States and

organizations include, involve, and engage young women and adolescent girls in the design, development and implementation of programs to ensure that they speak to their realities, experiences and real needs. Dr. Laurel Sprague, Executive Director of the Global Network of People living with HIV (GNP+), talked about how HIV prevention cannot just be understood as a phenomenon at the individual level, but that it's about larger structures and state responsibility. Mr. Jose Yac, Political Scientist and International Relations Specialist from IDEI Association (Research Development, and Global Education) in Guatemala, talked about the principle of free, prior and informed consent when working with Indigenous Peoples, as it is enshrined within the ILO Convention 169 and the UN Declaration on the Rights of Indigenous Peoples.

A recurring theme in the Thematic was “the right to prevention”.



The Delegation noted that #TheUNAIDSWeNeed should develop easy to understand prevention campaigns in similar stature to the 90-90-90 treatment targets, so that we can reach the target of investing “a quarter for prevention”.

## CIVIL SOCIETY ENGAGEMENT AT THE 40<sup>TH</sup> PCB MEETING



As in previous PCB meetings, communities of people living with HIV (PLHIV) and key populations attended and participated as ‘NGO Observers’ (also referred to as CS Observers) in the 40th PCB meeting. Most came from Eastern and Western Europe, North America and sub-Saharan Africa. A number of the interventions focused on the situation of young people, especially adolescent girls and children born with HIV; there were also interventions focusing on the situation of people who use drugs in Eastern Europe. There was a concerted effort to bring attention on the humanitarian situation in Venezuela and its implication on the AIDS response.



The NGO Delegation held debriefing sessions with our CS colleagues after the end of each of the two days of the PCB meeting – 27 and 28 June. A key issue that they raised was the lack of a sense of urgency at the PCB, given the challenging situation that UNAIDS was facing. There was concern that despite the challenges and

questions around the operationalization of the refined operating model (ROM), neither States nor Cosponsors seemed to be pushing seriously to discuss the ROM in any greater detail.



In the debrief sessions, we discussed the role that communities and civil society should be playing in response to the crises that UNAIDS was going through, especially given the diversity of civil society actors, the lack of common perspective on the role and importance of UNAIDS and consequently, the need to engage robustly in efforts to address the crises. The discussions noted the absence of community-level support and advocacy for UNAIDS and the need for the NGO Delegation to be more accountable to communities impacted by HIV/AIDS. The following were agreed as immediate steps:

- a. Ensure that the NGO Delegation's post-PCB Communique was circulated widely and shared with communities, including key population networks and networks of PLHIV;
- b. Develop an advocacy statement with 10 key messages about the value of UNAIDS in the global AIDS; popularize these among communities and reflect these in the December 2017 progress report;
- c. Send a communique to the UNAIDS Secretariat expressing its credibility challenges with communities and discuss practical ways to remedy this.



## EASTERN EUROPE CENTRAL ASIA CIVIL SOCIETY PARTICIPATION AT THE 40<sup>TH</sup> PCB MEETING





The 40th PCB Meeting was important for the Eastern Europe and Central Asia (EECA) region because of the participation of the Belarus Republic Delegation. Belarus became a new member of the PCB and was very active during this meeting. Although community representatives from Belarus were not able to attend this meeting,

colleagues and CS observers from other countries in the EECA region raised the issues that were listed by the Belarus community as most important in their interventions. In several interventions, the Deputy Minister of Health of Belarus acknowledged that if all the necessary efforts had been made in the past, it would have helped to avoid deaths and the spread of the epidemic. During the Thematic Segment on Prevention, interventions from the EECA region focused on the issue of the transition from international financing to domestic, wherein budget advocacy and overcoming barriers to prevent communities from receiving state fund to support their work on the ground are needed. Maria Godlevskaya from Russia spoke about results of community monitoring of prevention – showing that only 5% of budgets were spent on work with key populations and on the listed barriers. Ilya Lapin proposed a dialogue with the Russian government on the use of OST. During side negotiations with the Russian Federation representative, our Europe Delegate and EECA CS Observers suggested joint work and negotiations between the Ministry of Health and the community on prevention. Representatives



from Ukrainian CSOs addressed the barriers in prevention faced by communities. One intervention brought the perspective of youth and the right of teenagers to testing and accessing condoms, while another intervention focused on countries' transition – challenges and good practices – such as successful budget advocacy campaign that

resulted into full funding of OST from the side of the Ministry of Health in Ukraine. The NGO Delegation called for decriminalization of key populations and stressed the need to reduce ART costs, so that more funds can be spent on prevention.

## HIV CRISIS IN VENEZUELA: A CALL TO ACTION



The NGO Delegation to the UNAIDS PCB had a specific task this year: to respond to the situation the Venezuelan HIV organizations face due to the humanitarian crises in their country that is affecting thousands of lives, with particular impact on people living with HIV. On behalf of the Delegation, Alessandra Nilo, Latin American and the Caribbean Delegate, called on the Joint Programme and all its global partners to take immediate action and play a crucial role in addressing the Venezuelan situation from a humanitarian and human rights perspective and not a political one, and to work with civil society and communities on the ground.

After 30 years of significant gains in the fight against HIV, Venezuela finds itself in a public health crisis as it runs low on HIV essentials. Antiretroviral medicines, vaccines, surgical and basic medical supplies including reagents for diagnostics are at critical levels throughout the entire country. These shortages are directly affecting the 77,000 persons living with HIV who

suffer from frequent interruptions of antiretroviral treatment and face the permanent shortage of diagnostics for CD4 and viral load. Local NGOs and community groups inform that thousands are currently living without their medications.

When Mary Ann Torres, Director of the International Council of AIDS Service Organizations (ICASO), made an intervention, the NGO delegation and NGO Observers stood up in solidarity, holding cards with a very specific message: #SOS Venezuela.



Michel Sidibe and UNAIDS Deputy Executive Director, Luiz Loures, assured all present that UNAIDS will heighten its response to the situation in Venezuela and will continue to dialogue with civil society and communities in planning and implementing mitigating actions in support of the Venezuelan people.

NOTE: Photos were culled from [Google Photos](#):