

03 July 2014

**34<sup>th</sup> Meeting of the UNAIDS Programme Coordinating Board  
Geneva, Switzerland  
1-3 July 2014**

**Decisions**

The UNAIDS Programme Coordinating Board,

*Recalling* that all aspects of UNAIDS work are directed by the following guiding principles:

- Aligned to national stakeholders' priorities;
- Based on the meaningful and measurable involvement of civil society, especially people living with HIV and populations most at risk of HIV infection;
- Based on human rights and gender equality;
- Based on the best available scientific evidence and technical knowledge;
- Promoting comprehensive responses to AIDS that integrate prevention, treatment, care and support; and
- Based on the principle of non-discrimination;

**Agenda item 1.1: Opening of the meeting and adoption of the agenda**

1. *Adopts* the agenda;

**Agenda item 1.2: Consideration of the report of the thirty-third meeting**

- 2.1 *Adopts* the report of the 33rd meeting of the UNAIDS Programme Coordinating Board;
- 2.2 *Elects* El Salvador as Rapporteur for 2014;

**Agenda item 1.3: Report of the Executive Director**

3. *Takes note* of the report of the Executive Director;

**Agenda item 1.4: Report by the Chair of the Committee of Cosponsoring Organisations (CCO)**

4. *Takes note* of the report of the Chair of the Committee of Cosponsoring Organisations (CCO);

### **Agenda item 3: Update on the AIDS response in the post-2015 development agenda**

- 5.1 Welcomes the update on the AIDS response in the post-2015 development agenda and;
- 5.2 Takes note of the decision of the UNAIDS Programme Coordinating Board at its 32<sup>nd</sup> meeting on the post-2015 development agenda, in particular:
  - a. Stresses the importance of ensuring that HIV and AIDS are central to the post-2015 UN development agenda and of advocating for the inclusion of targets under relevant goals towards achieving zero new HIV infections, zero AIDS-related deaths and zero discrimination; and
  - b. Builds on the lessons learned from the HIV and AIDS response in addressing other complex health and development challenges in the post-2015 era;
- 5.3 Takes note of the ECOSOC Resolution E/RES/2013/11, in particular:
  - a. Recognizes the value of the lessons learned from the global HIV and AIDS response for the post-2015 development agenda, including the lessons learned from the unique approach of the Joint Programme and that the Joint Programme offers the United Nations a useful example to be considered, as appropriate, as a way to enhance strategic coherence, coordination, results-based focus and country-level impact, based on national contexts and priorities;
- 5.4 Takes note of the ongoing work of the Open Working Group on Sustainable Development Goals and its explicit inclusion of language on “ending the epidemics of AIDS, tuberculosis and malaria”;
- 5.5 Calls on member states and the UN Joint Programme to pursue, in line with our common vision of the three zeros, a clear commitment in the post-2015 development agenda to ending the AIDS epidemic as a public health threat and an obstacle for overall sustainable development by 2030, provisionally defined as the rapid reduction of new HIV infections, stigma and discrimination experienced by people living with HIV and vulnerable populations and key populations<sup>1</sup>, and AIDS-related deaths by 90% of 2010 levels, through evidence based interventions to include universal access to HIV prevention, treatment, care, and support, such that AIDS no longer represents a major threat to any population or country;
- 5.6 Encourages the UN Joint Programme and member states to pursue HIV-sensitive indicators under several goal areas, including, but not limited to, health, gender, education, partnership, and youth, to ensure policy coherence and joined-up action to address the social, political, economic and environmental determinants of HIV, poor health, poverty and inequality (at community, national and global levels); and strengthened inclusive accountability mechanisms to enable broad participation and ownership in implementing and monitoring the post-2015 agenda;

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<sup>1</sup> As defined in the UNAIDS 2011-2015 Strategy ‘Getting to Zero’, footnote n. 41: ‘Key populations, or key populations at higher risk, are groups of people who are more likely to be exposed to HIV or to transmit it and whose engagement is critical to a successful HIV response. In all countries, key populations include people living with HIV. In most settings, men who have sex with men, transgender people, people who inject drugs and sex workers and their clients are at higher risk of exposure to HIV than other groups. However, each country should define the specific populations that are key to their epidemic and response based on the epidemiological and social context’.

## **Agenda item 4: Follow-up to the thematic segment from the 33<sup>rd</sup> Programme**

### **Coordinating Board meeting: HIV, adolescents and youth**

- 6.1 *Takes note* with appreciation of the summary report of the Thematic Session on HIV, adolescents and youth;
- 6.2 *Recognizes* with great concern that globally young women aged 15-24 have HIV infection rates twice as high as young men, and that there is a persistent and significant gap between antiretroviral treatment coverage rates for adult vs. adolescents and children;
- 6.3 *Encourages* member states to urgently scale up evidence informed, gender-responsive, youth-friendly HIV prevention, increase access to paediatric HIV treatment, scale up care and support programmes and to empower youth-led associations in order to ensure their participation throughout the HIV programming cycle including design, implementation and monitoring and evaluation;
- 6.4 *Urges* member states to strengthen initiatives that would increase the capacities of young women and adolescent girls to protect themselves from HIV infection;
- 6.5 *Requests* the Joint Programme to support countries, upon request, in reviewing their HIV testing, counselling and treatment policies and address age- and gender related legal, regulatory and social barriers to HIV testing, prevention treatment, care and support faced by adolescents;
- 6.6 *Encourages* member states and the Joint Programme to follow up on decision points 8.5 and 8.9 from the 24th Programme Coordinating Board with respect to comprehensive programming for adolescents and youth who inject drugs;
- 6.7 *Further requests* the Joint Programme to support countries to improve systematic and coordinated collection, dissemination and analysis of sex- by age disaggregated data at the national and sub-national level;
- 6.8 Recognizing the contribution of young people through the full programme cycle and within decision-making processes, *requests* UNAIDS to develop indicators to monitor youth participation within the AIDS response;

## **Agenda item 5: UNAIDS 2012-2015 Unified Budget, Results and Accountability Framework**

### **Agenda item 5.1: Mid-term review**

- 7.1 *Takes note* of the report; expresses appreciation for the role that the Joint Programme has played in the response to AIDS; and urges acceleration of UNAIDS efforts to support countries achieve the global AIDS targets adopted by the UN General Assembly in 2011;
- 7.2 *Decides* to extend the duration of the existing strategy for two years through 2017, requesting UNAIDS to update the goals in the current strategy and to present on that basis an updated UBRAF for 2016-2017 at the 36th meeting of the Programme Coordinating Board, taking into account the lessons learned from the Mid-term

review of the UBRAF and the ongoing consultative process of improving the UBRAF, including the need for a clear results-chain linking outputs to outcomes and impact intended for the Joint Programme;

- 7.3 *Requests* UNAIDS to develop the next phase strategy (starting 2018), results framework and budget for consideration of the Programme Coordinating Board at its 40th meeting, building on the current strategy and our common three zero vision, aligned with the resolution on the Quadrennial Comprehensive Policy Review (QCPR) of operational activities for development and taking into account lessons learned from the implementation of the QCPR and the UBRAF;

#### **Agenda item 5.2: Performance reporting**

- 7.4 *Takes note* of the report (Performance Monitoring Report) and *requests* UNAIDS to provide a consolidated Performance Monitoring Report to the 36<sup>th</sup> Programme Coordinating Board that captures progress against core indicators as well as expenditures; shows the link to outcomes, goals and targets; distinguishes cosponsor, Secretariat and joint results; and, using the UBRAF structure, showcase country performance;
- 7.5 *Requests* the Secretariat to prepare a conference room paper for the 35<sup>th</sup> Programme Coordinating Board meeting on concrete actions taken to address and implement the previous decision points approved by the Programme Coordinating Board that relate to civil society;

#### **Agenda item 5.3: Financial reporting**

- 7.6 *Accepts* the financial report and audited financial statements for the year ended 31 December 2013;
- 7.7 *Takes note* of the interim financial management update for the 2014–2015 biennium for the period 1 January 2014 to 31 March 2014, including the partial funding of staff-related liabilities and the replenishment of the Building Renovation Fund;
- 7.8 *Encourages* donor governments to release their contributions towards the 2012–2015 Unified Budget, Results and Accountability Framework as soon as possible;
- 7.9 *Requests* UNAIDS to do an analysis to determine the appropriate lower-limit threshold for the net fund reserve and report back at the 36th Programme Coordinating Board meeting;
- 7.10 *Requests* UNAIDS to hold a Financing Dialogue aimed at ensuring predictable and sustained funding, the efficient management of funds and transparency for effective implementation of the UBRAF within the overall AIDS response. The Financing Dialogue should take place before the end of 2014 to discuss programmatic and financial accountability and reporting, to review the distribution of core and non-core funds and to provide monitoring information on trends in funding and expenditures in relation to strategic directions and functions;

**Agenda item 6: Update on strategic human resources management issues**

8. *Takes note* of the update on strategic human resources management issues;

**Agenda item 7: Statement by the representative of the UNAIDS Staff Association**

9. *Takes note* of the statement by the representative of the UNAIDS Secretariat Staff Association .

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