
UBRAF thematic report: leadership and advocacy

Contents

Results	3
Constraints, challenges and lessons learned	6
Key future interventions	6
Supporting documents	7

Results

The Joint Programme has worked to keep AIDS high on the global agenda, seeking renewed and expanded political commitment to the HIV response with particular focus on the post-2015 development framework.

Joining with the medical journal *The Lancet*, the UNAIDS Secretariat convened a panel of global experts to analyse the place of the HIV response and global health in the post-2015 agenda and to bring this debate to the global arena. A range of UNAIDS documents made the case for continued prioritization of the HIV response beyond 2015, notably through the UNAIDS and Lancet Commission and its more than 30 commissioners—renowned global thought leaders in their respective fields.

UNAIDS communications efforts supported the Joint Programme's advocacy aims. UNAIDS launched its new website, generated more than 5,000 headlines from the *Results 2012* report and published two editions of its flagship *Global report on the AIDS epidemic*. The Secretariat made use of social media tools and platforms, with more than 96,000 Facebook fans and 91,000 Twitter followers as of December 2013.

UNAIDS assisted the African Union in developing its roadmap on shared responsibility and global solidarity, providing a platform for African-sourced solutions and increased investments to the response to AIDS, TB and malaria. Building on the momentum generated by the call for shared responsibility, a greater number of countries have stepped up efforts to assume greater financing of their national responses. In 2012, more than two thirds of countries increased domestic spending on HIV, with several, including Chad, Guinea, Kyrgyzstan and Sierra Leone, doubling domestic contributions.

In 2012, US\$ 18.7 billion was available for HIV activities in low- and middle-income countries, a 10% increase from 2011. UNAIDS advocacy supported increased investments, including encouraging international donors to sustain their contributions. UNAIDS prioritized advocacy to ensure strong pledges at the third replenishment meeting for the Global Fund, which contributed to a 30% increase in pledges compared with the previous three-year period.

Through engagement with more than 40 governments and 20 foundations, and with parliamentarians, nongovernmental organizations (NGOs), emerging economies, the private sector and individuals, UNAIDS mobilized almost 95% of the approved core budget (US\$ 458 million, but slightly less than US\$ 477 million raised in 2010-2011). Several donors, including Finland, Norway, Switzerland and the UK, increased their contributions to UNAIDS in 2012–2013—signifying donor confidence in the Joint Programme despite a challenging financial environment. UNAIDS also welcomed contributions to its core budget from Côte d'Ivoire (which committed US\$ 1 million, meaning that this was the first time an African country was among UNAIDS top 20 donors), Congo and Senegal.

The Secretariat focused substantial energy in forging new partnerships to leverage cooperation on HIV for larger health and development goals. A new Memorandum of Understanding (MoU) between UNAIDS and the Commonwealth of Independent States (CIS) brought greater focus to the importance of strengthening cooperation between governments and civil society in the CIS region. A MoU between UNAIDS and the Organization of American States (OAS) reaffirmed commitment to increase HIV outreach activities, such as information and education campaigns, policy roundtables, forums, lectures and scholarships programmes aimed at reducing new HIV infections, expanding

access to antiretroviral treatment and supporting people living with HIV.

The Executive Director and other senior UNAIDS officials had prominent roles at the 2012 International AIDS Conference, the 2013 International Conference on AIDS and Sexually Transmitted Infections in Africa (ICASA), and the Abuja +12 meeting of the African Union. These and other international and regional conferences provided UNAIDS platforms to articulate progress in the AIDS response, as well as to highlight challenges and opportunities. At the World Economic Forum in Davos in 2013, UNAIDS joined with the UN Secretary-General and other world leaders to emphasize the need for action to improve the health and well-being of women and children affected by HIV. At the 10th World Council of Churches, its governing body committed to creating a safe space for dialogue with the churches on human sexuality and prevention of mother-to-child HIV transmission.

The Executive Director visited 54 countries in 2012–2013 to reinforce HIV leadership, and the Deputy Executive Directors visited 17 countries, including multiple visits to High Impact Countries (HICs) like Nigeria and South Africa. Such high-level visits by UNAIDS executives generate visibility around key issues in national AIDS responses and encourage all stakeholders to sustain and accelerate gains in the AIDS response.

Other notable results include:

Effectiveness in national HIV responses

More than 30 countries pledged to work with UNAIDS to develop investment approaches over the next two years, with at least 12 either completing or launching such processes by December 2013. Several middle-income countries, including Belarus, Jamaica, Thailand and Ukraine, pledged to assume 100% responsibility for financing their response.

UNAIDS helped more than 20 countries revise or update their national strategic plans (NSPs) to reflect the three zeros and to take action to meet the 10 global AIDS targets, with 36 additional countries in the process of doing so. Epidemiological and economic analyses by the World Bank helped develop NSPs, increasing understanding of national HIV epidemics and the health and economic effects of different response scenarios.

The Secretariat supported more than 100 countries in midterm reviews of progress towards the 10 targets of the 2011 Political Declaration. The Secretariat reviewed data for more than 100 indicators from 172 countries, with results summarized in the 2013 *Global report on the AIDS epidemic* and the interactive AIDSInfo system. The UNAIDS infographic, *AIDS by the numbers*, provided an easy-to-understand summary of strategic information on the response. UNAIDS also helped the UN Secretary-General prepare annual reports on HIV progress to the General Assembly in 2012 and 2013.

Inclusion of AIDS into global health, human rights, gender and development agendas

UNAIDS led global efforts to repeal punitive laws that undermine national responses, including HIV criminalization laws and policies violating the rights of key populations. UNAIDS joined with other UN partners in a statement calling for the elimination of coercive treatment detention centres for people who use drugs. UNDP has led UNAIDS efforts in more than 80 countries to implement recommendations of the Commission on HIV and the Law, including the development of a judicial handbook on HIV, human rights and law to assist and guide judges and other legal professionals in

HIV-related work.

The recommendations of the Global Commission on HIV and Law were published in July 2012 offering guidance to governments and international bodies in shaping laws and legal practices that are science based, pragmatic, humane and just.

UNAIDS published a major report, *Women Out Loud*, that focused on the critical role of women living with HIV in the response and summarized progress towards the 10 targets for women and girls. UN Women has led training and advocacy globally, regionally and in numerous countries to strengthen the role of women living with and affected by HIV.

In 2012, for the first time, WHO and UNDP brought together experts from tuberculosis control and care with those working in the social determinants of health financing, showcasing examples of HIV cash transfer pilots. Reports and further meetings are helping define the key issues in broader policy terms for government ministries and funders.

Positive movement on key issues and drivers of the epidemic

The Secretariat continues to be the “go-to” organization for strategic information, providing authoritative information on the status and trends in the global AIDS epidemic and supporting partners in the collection, synthesis and use of strategic information. The Secretariat’s AIDSInfo platform, which is now updated annually rather than biennially, provides readily available and up-to-date global and country information. The system uses data submitted by countries through the Global AIDS Response Progress Reporting (GARPR) system as well as updated HIV estimates.

In 2013, the Secretariat joined with WHO, the United States President’s Emergency Plan for AIDS Relief (PEPFAR) and the Global Fund to launch the Treatment 2015 framework in Abuja, Nigeria, prioritizing advocacy and technical support for accelerated treatment scale-up in 30 priority countries that together account for 90% of the unmet need for HIV treatment.

With the support of UNAIDS, countries such as South Africa and Swaziland achieved substantial savings in antiretroviral drug costs through innovative and proactive drug tender processes. Uganda was among the countries that took steps to ensure a reliable supply of affordable commodities by strengthening local pharmaceutical manufacturing capacity.

UNAIDS has played an important leadership role in accelerating progress towards the elimination of mother to child transmission. UNAIDS co-chairs with PEPFAR the Global Plan towards the elimination of new HIV infections among children by 2015 and keeping their mothers alive, and issued a second progress report, aiding Malawi in deploying Option B+ and encouraging other countries to implement this approach. The Secretariat has worked in partnership with women living with HIV to ensure that the implementation of the Global Plan promotes the Plan’s four programmatic prongs, placing the well-being and rights of women at its core. This has included the development of a video led by women living with HIV, as part of the “Believe it, Do it” campaign. Ultimately, the Global Plan has united the international community around this vital effort, resulting in considerable progress in the 22 countries included the plan.

Constraints, challenges and lessons learned

In both donor and low- and middle-income countries, other needs compete with AIDS for finite funding. Nevertheless, increases in total resources for the response are encouraging, although a considerable global AIDS resource gap persists.

Behaviour change interventions will be more sustainable if they are developed and owned by the communities they target. Unfortunately, countries continue to cite social, cultural and legal barriers as impediments to enhanced scale-up. Continued weak linkages between HIV programmes and other reproductive health services are also reported as hampering progress. Change in many of these areas does not happen overnight and requires sustained advocacy and education over time.

Marginalization and punitive legal environments mean it is often difficult to obtain data on key populations, which hinders programming and the overall coverage, quality and accessibility of programmes for key populations.

Supporting increased actions and budgets for women and girls in national AIDS plans requires long-term engagement to increase awareness and understanding of a 'gender transformative' HIV response, necessitating on-going engagement with networks of women living with HIV and promoting strategies to reduce discrimination. Increasing women's awareness of their rights and improving legal literacy, particularly on women's property and inheritance rights, is a tangible bottom-up way of ensuring more equitable approaches and, in the medium- to long-term, increasing participation.

Indicators alone cannot provide a full picture of the Joint Programme's multifaceted contributions, and require triangulation with other data sources. Many of the indicators remain 'a work in progress' and further revisions will need to be made in planning for the post-2015 period.

Strengthening a global response to noncommunicable diseases (NCDs) is critical for a sustained response to AIDS, as the interest in NCDs could help retain health generally on the global development agenda, with important spill-over effects for AIDS. Additionally, both AIDS and NCDs require a strong multi-sectoral approach, one that addresses the social and economic determinants of health.

Key future interventions

- **Providing leadership and strategic direction:** UNAIDS will support country and global partners to deliver results in a united, strategic and strengthened way by: uniting all stakeholders; speaking out to engage people living with and most affected by HIV; mobilizing political, technical, scientific and financial resources; empowering change through innovation and strategic information to guide the AIDS response and resource allocation for maximum impact; and supporting inclusive country leadership for an optimally effective, focused and sustainable response, integrated with national health, human rights, peace and development efforts. UNAIDS will also continue to promote shared responsibility and global solidarity as a central element of ending AIDS.
- **Supporting focused responses:** UNAIDS will advocate and support countries, including the HICs, to maximize impact and cost-efficiency to reach global AIDS targets, with particular focus on innovative HIV prevention, prevention of mother to child transmission, HIV treatment, key

populations, gender and human rights. Young people's involvement will also be galvanized in shaping the post-2015 era. UNAIDS will remain equally focused on broader UN initiatives such as security and AIDS and the response to NCDs.

- **Supporting transformational response:** UNAIDS will continue to support countries to apply investment thinking to nationally-led planning processes, to better prioritize resources and improve the cost-effectiveness and impact of national HIV responses. These investment approaches will inform and support efforts by the Global Fund and PEPFAR to enhance the strategic impact of investments. UNAIDS will also work with governments, and research and implementing partners, to refine methods to assess the impact of behaviour-change programming for the greatest impact and value for money.
- **Mapping the way forward post-2015:** A priority for UNAIDS will be charting the future of the AIDS response within the post-2015 framework, in collaboration with governments, civil society, including networks of people living with HIV, the broader UN system and other partners.

Supporting documents

- *2013 Global report on the AIDS epidemic*
http://www.unaids.org/en/media/unaids/contentassets/documents/epidemiology/2013/gr2013/UNAIDS_Global_Report_2013_en.pdf
- *Women out loud: how women living with HIV will help the world end AIDS*
http://www.unaids.org/en/media/unaids/contentassets/documents/unaidspublication/2012/20121211_Women_Out_Loud_en.pdf
- *Smart investments*
http://www.unaids.org/en/media/unaids/contentassets/documents/unaidspublication/2013/20131130_smart-investments_en.pdf
- *How UNAIDS supported Kenya in the Global Fund grant process*
http://www.unaids.org/en/media/unaids/contentassets/documents/unaidspublication/2013/JC2592_CaseStudyKenya_en.pdf
- *Update on the AIDS response in the post-2015 development agenda (submitted to the 33rd PCB meeting)*
http://www.unaids.org/en/media/unaids/contentassets/documents/pcb/2013/pcb33/agendaitems/01-20131113_AIDS%20update%20in%20post%202015.pdf

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