
2014 UBRAF thematic report

Support for multisectoral national AIDS plans

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ACHIEVEMENTS

To support countries in developing better HIV strategic plans and implement them more efficiently, UNAIDS Secretariat and its Cosponsors have embarked on the joint efforts outlined below.

New generation guidance and better analytical tools for better strategic plans and implementation

The World Bank and UNAIDS Secretariat developed and launched the third generation National HIV Strategies for Impact: A Guidance Note for Getting to Zero.

The World Bank worked with partners and used several tools, including Optima, the HIV optimization and analysis tool, to support HIV allocative efficiency, epidemic scenario and financial commitment analyses. Working with the Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund) and the United States Government, UNAIDS supported the implementation of financial sustainability and allocative efficiency analyses for national HIV responses in several countries in East Asia, Eastern Europe and Central Asia (EECA) and Africa. There are plans for this work to be expanded to Latin America, the Caribbean and South Asia. Altogether, these activities led to improvements in national strategies focusing on high-impact programmes to minimize new infections and deaths. In particular, in the Sudan this study led to almost doubling HIV resource allocations, including treatment, to high priority programmes for key populations.

Through the global HIV/AIDS Economic Reference Group, the World Bank produced an inventory of HIV allocative efficiency tools, which provides guidance to countries on which allocative efficiency tools to use in which context.

The World Bank, working with the International Monetary Fund, also developed an HIV fiscal liability analysis framework and conducted financial sustainability analyses in Côte d'Ivoire, Indonesia, Kenya, Swaziland and Zambia.

UNAIDS Secretariat, the United Nations Development Programme (UNDP), the World Bank and the Global Fund also convened a regional consultation to advocate for an investment approach to national AIDS responses in the EECA region. Following this, seven countries in the region began developing HIV investment cases and a strong partnership between UNDP, the World Health Organization (WHO), the World Bank and the Global Fund was established to provide financial and technical support to the countries in this process. An HIV investment case has been developed in Tajikistan, while modelling of epidemiological impact and cost effectiveness of various investment scenarios is being finalized elsewhere. UNAIDS and its partners have also supported the development of HIV investment cases in 20 other countries globally.

The United Nations Children's Fund (UNICEF), the United Nations Population Fund (UNFPA), WHO, the International Planned Parenthood Federation (IPPF) and other partners continued to support countries to strengthen linkages between sexual and

reproductive health and rights (SRHR) and HIV in national strategic planning. Building on linkage assessments completed in over 50 countries, an HIV SRHR country snapshot template was developed. An index in 50 countries and compendium of indicators and assessment tools measuring progress in linking sexual reproductive health and HIV at national and sub-national levels was also developed. Through the memoranda of understanding (MOU) between Global Fund and UNFPA covering 13 countries, the HIV SRHR linkages agenda has been strengthened in grants.

Technical support for more effective HIV strategic planning

UNICEF, UNDP, UNFPA, the United Nations Educational, Scientific and Cultural Organization (UNESCO) WHO, UNAIDS Secretariat, Save the Children, and the Global Network for and by People Living with HIV (GNP+) supported an analysis of young key populations at higher risk of HIV exposure in national strategic plans on AIDS in the Asia and Pacific region.

The International Labour Organization (ILO) supported 28 countries, including 21 high-impact countries, in the development of national strategic plans that include scaling up HIV workplace programmes to meet the needs of vulnerable workers. This includes support to the National AIDS Control Organisation (NACO) to strengthen the private response in India, support towards the implementation of the National Strategic Plan (2010–2015) and HIV workplace programmes in Cambodia and providing good practices on addressing HIV among migrant workers and reflecting these in China's National AIDS Strategy document.

The World Food Programme (WFP) provided technical assistance to advocate for the inclusion of a food and nutrition component in national strategic plans, national protocols, as well as Global Fund grants for HIV-associated tuberculosis in 17 countries.

The World Bank supported countries to better integrate HIV financing requirements into universal health coverage schemes and provided the actuarial support needed to realize these areas of support.

The World Bank supported efforts to improve the programmatic and technical efficiency of HIV programmes by conducting analyses in Kenya, Lesotho, Ukraine and Zambia. These analyses led to the identification of areas where countries could deliver the same programmes for lower cost. For example, the Ukraine analyses showed up to 30% lower cost.

UNDP worked closely with UNICEF, WHO, UNAIDS Secretariat and other United Nations agencies to support the AIDS commissions in Somalia to develop costing guidelines for an HIV strategy for 2015–2019, forming the basis for their new Global Fund proposal, which was approved in August 2014. The Global Fund grant (approximately \$22 million) will provide 70% of the funding required to support the HIV response in Somalia from 2015–2017.

Better data for better HIV strategic planning results

UNDP and its academic partners published an innovative approach to cross-sectoral financing of structural interventions. The study demonstrates that conventional silo budgeting can lead to under-investments in action on social determinants, even though such investments are cost-effective when examining health and development impacts together. To operationalize the approach, UNDP convened an inter-agency advisory group and developed training materials with the Economic Policy Research Institute to introduce the cross-sectoral financing approach to policy-makers in sub-Saharan Africa and to demonstrate its applicability to HIV programmes.

The first respondent-driven sampling study of young men who have sex with men in Myanmar was supported by UNESCO and a national situation analysis on young key populations was produced with support from UNICEF, UNFPA, UNESCO and UNAIDS Secretariat.

In South Sudan, UNESCO ensured that the recently developed national HIV strategy stipulated the role of the education sector to deliver comprehensive sexuality education and to also provide education on prevention and care. As a result, there was a planned development of an education sector strategy on comprehensive sexuality education.

The World Bank supported multiple multisectoral national AIDS plans and responses. It initiated a regional TB/HIV in the mines initiative in the southern African mining sector and activities have been undertaken in Zimbabwe to develop tools and gather data to support HIV and sexual reproductive health service integration. Knowledge products were also developed highlighting the success of Kenya and Namibia in implementing a multisectoral HIV response.

In sub-Saharan Africa, UNDP supported governments and civil society in using environmental and social impact assessment regulations and guidelines as a way to release funding from capital projects for HIV prevention, care and treatment. Seven countries used, adapted and domesticated the guidelines in practical ways across ministries and through public-private partnerships.

MAJOR CHALLENGES AND HOW THESE WERE ADDRESSED

Translating strategies into full-scale implementation at the desired coverage levels is the biggest challenge. For this reason, the World Bank is supporting countries with HIV implementation efficiency studies and technical support to ensure that countries can better focus on the scaled implementation of services at lowest cost. Country studies were undertaken in Lesotho, Swaziland, Ukraine and Zambia. Integrated methods are needed that combine programme and technical efficiency analyses to better understand mechanics of implementation.

Funding reallocations remain a challenge. Longer-term technical support is needed to help

countries realize, on the ground, the HIV programme funding reallocations that are needed for maximum impact. The World Bank works with United Nations and other partners to realize this longer-term technical support to facilitate funding reallocations, thus ensuring that analytical work follows through in terms of actual changes facilitated on the ground.

The rapid decentralization and devolution in many countries means that both programme and financial authority is now at the sub-national level. National strategic frameworks will remain important guiding documents but operationalization and implementation will require strong local capacity and governance.

Dependency on external funding and the transition to domestic financing mechanisms remains a challenge. UNDP, The World Bank, UNAIDS Secretariat and other partners provide critical inputs to countries in this transition. UNDP, for example, has provided countries with a comprehensive review of legislative and regulatory frameworks for antiretroviral medicines, including updated statistics of patents, licensing and registration and benchmark prices. Based on this, UNDP provided advice on antiretroviral medicine procurement processes and efficiency gains.

Important questions remain in terms of translating the co-financing approach to practice, including political acceptance, feasibility, opportunities for co-financing and co-financing models. Intersectoral dialogue has been initiated to ensure action across sectors.

KEY FUTURE INTERVENTIONS

The World Bank will:

- continue to support multisectoral approaches in national AIDS responses, including providing technical assistance to best implement such plans;
- continue to support HIV allocative efficiency analyses in 2015 and post-2015 as part of Global Fund concept notes and other HIV strategic plans;
- continue to work with partners to support HIV technical efficiency improvements and support for programmatic sustainability and transition planning;
- support countries in universal health coverage and HIV programme financing integration; and
- continue to provide relevant information for the World Bank's Systematic Country Diagnostic and advocate for the inclusion of HIV as a priority area of funding in World Bank country assistance strategies for high priority countries.

UNDP will:

- continue its work with partners to develop AIDS response investment cases;
- deliver an initial capacity building course for policymakers on co-financing; and
- provide technical follow-up support to course participants in operationalizing the approach at country level, refine the complete package of training materials based on course feedback and take steps to extend the course to include potentially new themes and countries.

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