

# INDICATOR SCORECARD

## 2022 PERFORMANCE MONITORING REPORT

**Additional documents for this item:**

- i. UNAIDS Performance Monitoring Report 2022: Executive summary (UNAIDS/PCB (52)/23.7)
- ii. UNAIDS Performance Monitoring Report 2022: Results report (UNAIDS/PCB (52)/2387)
- iii. UNAIDS Performance Monitoring Report 2022: Results by region (UNAIDS/PCB (52)/23.9)
- iv. UNAIDS Performance Monitoring Report 2022: Results by organizations (UNAIDS/PCB (52)/23.10)
- v. 2022 Performance Monitoring Report: Joint Programme and Quadrennial Comprehensive Policy Review (QCPR) (UNAIDS/PCB (52)/CRP2)

**Action required at this meeting:**

The Programme Coordinating Board is invited to:

- *take note*, with appreciation, of the 2022 Performance Monitoring Report, including its scope and depth;
- *encourage* all constituencies to use UNAIDS's annual performance monitoring reports to meet their reporting needs

**Cost implications for implementation of decisions:** *none*



UBRAF  
Indicator scorecard  
**2022**

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# INTRODUCTION

1. The Joint Programme's work and results towards the 2022–2026 Unified Budget, Results and Accountability Framework (UBRAF) are measured through the UBRAF indicator matrix which, complemented by other quantitative and qualitative information, informs the annual performance monitoring reports to the PCB. The UBRAF indicator matrix was developed and finalized through an intense, collaborative and consultative process, including external advice provided by the Programme Coordinating Board (PCB) and the UBRAF Working Group,<sup>1</sup> and it was finalized taking into account the PCB feedback. At its 50th meeting in June 2020, the PCB took note of the indicator matrix for the 2022–2026 UBRAF and the indicators, milestones, targets and data sources for the 2022–2023 Workplan and Budget. It requested the UNAIDS Executive Director to add the annex to the 2022–2026 UBRAF and the 2022–2023 Workplan and Budget.<sup>2</sup>
2. The UBRAF indicators enhance the Joint Programme's transparency and accountability and enable it to monitor progress and adapt as needed. The [2022–2026 UBRAF Indicator Matrix](#) fully describes the monitoring of the Joint Programme's performance through the indicators and it demonstrates its accountability across the results chain. The latter is composed of three outcomes, ten result areas and five Secretariat functions and related specific outputs, all of which are aligned with the 2021–2026 Global AIDS Strategy and highlight the added value of the Joint Programme and Secretariat, respectively. The indicator matrix also includes key definitions and, for each indicator, a baseline, milestones by end-2023 and end-2025, targets by 2026, and data sources.
3. As agreed with the PCB, the UBRAF indicators are selective. They are not meant to capture all aspects of the Joint Programme's work, but focus on some of the most important areas where progress is needed and measurable. They show the Joint Programme's added value and indicate what will be monitored and reported on systematically throughout the UBRAF cycle. The indicators present the Joint Programme's best efforts to capture credible and high-quality data that reflect progress against each of the UBRAF outcomes and specific outputs. It incorporates the use of multiple data sources and reporting mechanisms to attempt to provide a full picture of the Joint Programme's multifaceted contributions.
4. The diagram shown in Figure 1 provides an overview of the 45 UBRAF indicators, which measure performance for the specific outputs (27 of which measure the Joint Programme's performance, while 17 measure the work of the UNAIDS Secretariat) and 17 outcome-level indicators. Moreover, the internal [2022–2026 UBRAF Indicator Guidelines](#), jointly developed by the Joint Programme, complement the indicator matrix and guide the monitoring and reporting, at all levels, through more detailed methodological information. They include more specific definitions and methods of measurement to ensure common understanding, as well as consistent reporting and monitoring across the Joint Programme over time, and they may be updated as needed.

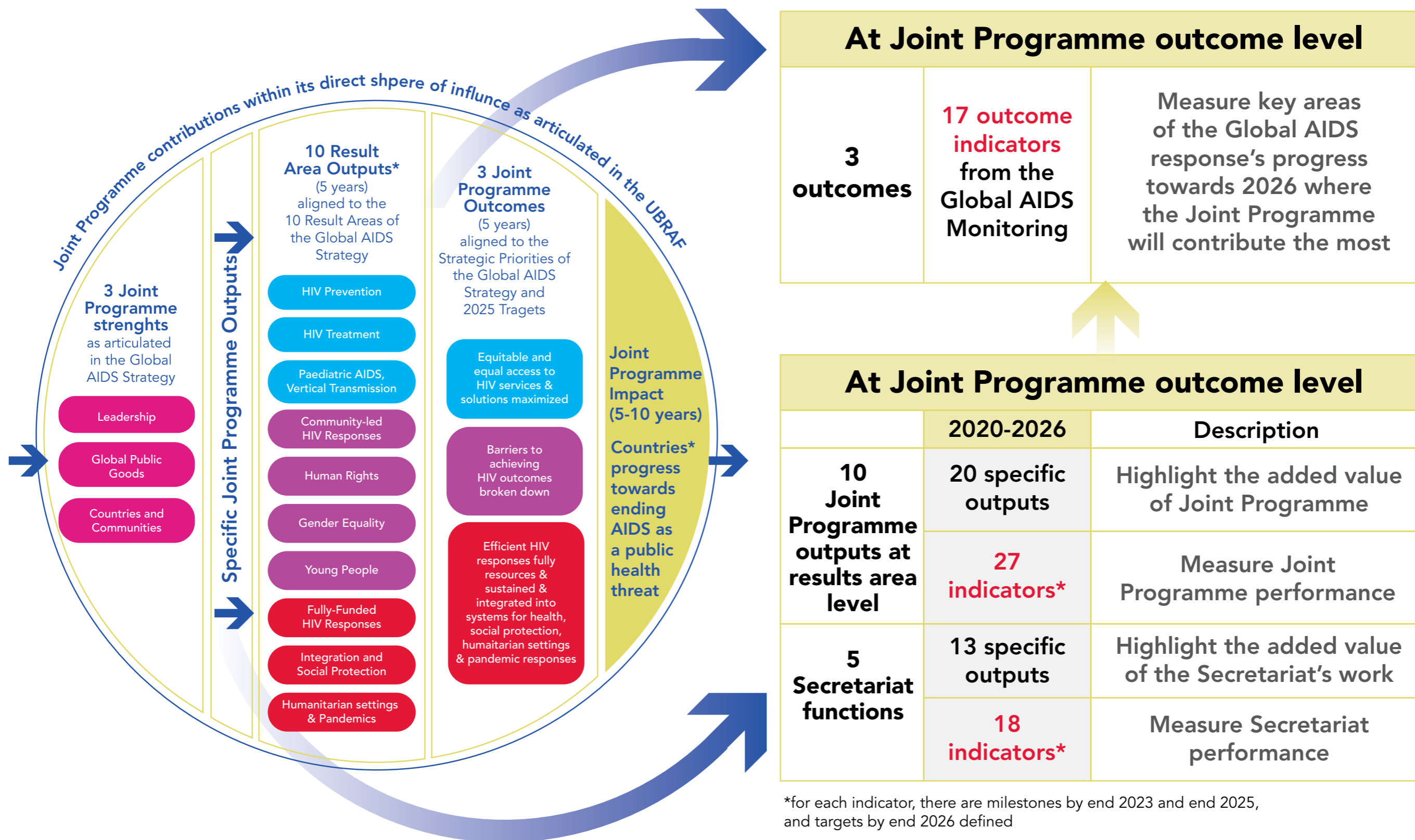
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<sup>1</sup> For more information on the external UBRAF Working Group, see: <https://www.unaids.org/en/aboutunaids/unaidsprogrammecoordinatingboard/pcbsubcommittee>

<sup>2</sup> Decision from PCB 50th meeting available at: [https://www.unaids.org/sites/default/files/media\\_asset/PCB50\\_Decisions\\_EN.pdf](https://www.unaids.org/sites/default/files/media_asset/PCB50_Decisions_EN.pdf)

5. This conference room paper, which accompanies the 2022 Performance Monitoring Report (PMR) package, provides complete information against the 45 UBRAF output level indicators. It includes the indicators' 2022 progress data and their respective status in relation to the 2023 milestones. The 2026 targets for each of the indicators are also included for easier reference. Two other documents of the 2022 PMR package feature indicator data in varying levels of granularity: Annex 1 of the executive summary presents an overview of the 45 indicators; and the results report highlights the most significant indicator information via text boxes that are inserted into each result area and Secretariat function section thereby complementing the narrative descriptions of progress.
6. Progress data against most of these indicators were collected through the web-based internal Joint Programme Planning, Monitoring and Reporting System (JPMS) tool during the Joint Programme reporting exercise, as well as through parallel Secretariat global reporting. Quality assurance and validation were also duly applied, including through the review of data completeness, consistency, comparison and triangulation, using other data sources where possible.
7. The UBRAF indicators are distinct from, but complementary to and closely linked with the Global AIDS Monitoring (GAM) system, which tracks countries' progress towards the global AIDS targets. Due to the different reporting timeline for the GAM, in cases where GAM or National Commitments and Policy Instruments (NCPI) are used as data sources for reporting against UBRAF indicators, the previous year's data will only be available after submission of the annual PMR to the PCB. In those cases, the latest available validated data were used.
8. Indicators' progress status for 2022 is rated against the 2023 milestones, using a binary rating system which simply marks each indicator as being "On track" or showing "Slow progress". As this is the first reporting round under the 2022–2026 UBRAF, the status of the indicators will inform the review and possible recalibration of 2025 milestones and 2026 targets for these indicators. That will be reflected in the 2024–2025 UBRAF Workplan and Budget paper, which will be presented to the PCB at its 52nd meeting in June 2023.

**FIGURE 1. OVERVIEW OF THE UBRAF 2022–2026 INDICATORS**



# OUTCOME 1: Equitable and equal access to HIV services and solutions maximized

## Result Area 1: HIV prevention

Indicator 1.1.1. Number of countries supported by the Joint Programme in improving national policies and/or strategies for combination HIV prevention with key populations and other populations at risk of HIV infections		
2022 Progress	2023 Milestone	2026 Target
<b>On track: 88 countries</b>	40 countries	40 countries
<p>In 2022, <b>88 countries</b> received support from the Joint Programme in improving national policies and/or strategies for combination HIV prevention with key populations and other populations at risk of HIV infections. In most of those countries, the Joint Programme's support focused primarily on the following populations: sex workers (<b>79 countries</b>); gay men and other men who have sex with men (<b>78 countries</b>); adolescent girls and young women (<b>79 countries</b>).</p>		

Indicator 1.2.1. Number of countries where the Joint Programme provided technical and/or implementation support to scale up combination HIV prevention programmes		
2022 Progress	2023 Milestone	2026 Target
<b>On track: 89 countries</b>	40 countries	45 countries
<p>In <b>89 countries</b>, the Joint Programme provided specific technical or implementation support to scale up combination HIV prevention programmes. This included support provided to community-based organizations for the promotion of access to or delivery of HIV prevention or testing services, development of standard operating procedures, mapping of prevention services and gaps, capacity building to better organize services delivery or their access for key populations or piloting of innovative prevention services. The Joint Programme support was aimed at scaling up HIV prevention for the following population groups: gay men and other men who have sex with men (in <b>80 countries</b>); sex workers (<b>79 countries</b>); adolescent girls and young women (<b>75 countries</b>); adolescent boys and young men (<b>70 countries</b>); transgender people (<b>57 countries</b>); people in prisons and other closed settings (<b>50 countries</b>); and people who inject drugs (<b>44 countries</b>) and other groups (e.g. refugees and migrants, internally displaced people, indigenous people, people with disability, long distance drivers etc.) (<b>31 countries</b>).</p>		

## Result Area 2: HIV prevention

Indicator 2.1.1. Number of countries supported by the Joint Programme that have implemented innovations to optimize access to integrated HIV and comorbidity / coinfection services (i.e. adopted at least two key recommendations from the guidance for integrated service delivery of HIV and comorbidities)		
2022 Progress	2023 Milestone	2026 Target
<b>On track: WHO is developing the guidance for integrated service delivery and framework for collaborative action in 2023</b>	<p>Guidance developed to support integrated service delivery of HIV and comorbidities by 2023.</p> <p>Framework for collaborative action on TB and comorbidities developed, and guidelines and operational handbook for TB/ HIV and other TB comorbidities updated through review of evidence and consultation with experts by 2023.</p>	50 countries adopt at least 2 key recommendations from the guidance by 2026.
<p>WHO will develop a measurement that will be mapped to GAM reporting, with additional data efforts to track this area implemented directly with countries from end-2023. This will provide reporting for 2024 for intermediate reporting towards the 2026 target.</p>		



**Indicator 2.2.1. Number of countries supported by the Joint Programme that have updated and implemented the following three components as part of their national recommendations on HIV testing, treatment and service delivery in alignment with the 2021 WHO Consolidated guidelines on HIV prevention, testing, treatment, service delivery and monitoring: (a) first- and second-line antiretroviral therapy (ART); (b) differentiated service delivery; (c) advanced HIV disease.**

2022 Progress	2023 Milestone	2026 Target
<b>Data will be available in July 2023</b>	30 countries supported by the Joint Programme update and implement the 3 components of their national recommendations on HIV testing, treatment and service delivery in alignment with the 2021 WHO Consolidated guidelines on HIV prevention, testing, treatment, service delivery and monitoring by 2023.	60 countries have update and implement the 3 components of their national recommendations on HIV testing, treatment and service delivery in alignment with the 2021 WHO Consolidated guidelines on HIV prevention, testing, treatment, service delivery and monitoring by 2026.
Implementation of the 2021 Guidelines will be measured based on 2022 data, which are being collected and validated as part of the GAM at the time of this reporting and will only be available in July 2023. On this basis, the Joint Programme will report on the indicator in the next report and provide further measurement, as necessary.		

**Indicator 2.2.2. Number of countries that implement recommended WHO-preferred first-line antiretroviral regimen for treatment initiation in their national guidelines, based on the recommendations in the 2021 WHO Consolidated guidelines on HIV prevention, testing, treatment, service delivery and monitoring for: (a) adults and adolescents; (b) women of child-bearing age; (c) pregnant and/or breast-feeding women**

2022 Progress	2023 Milestone	2026 Target
<b>Data will be available in July 2023</b>	40 countries supported by the Joint Programme implement recommended WHO-preferred first-line antiretroviral (ARV) regimen for treatment initiation in their national guidelines, based on the recommendations in the 2021 WHO Consolidated guidelines on HIV prevention, testing, treatment, service delivery and monitoring for adults and adolescents, women of child-bearing age and pregnant and/or breast-feeding women by 2023.	At least 60 countries supported by the Joint Programme implement recommended WHO-preferred first-line ARV regimen for treatment initiation in their national guidelines, based on the recommendations in the 2021 WHO Consolidated guidelines on HIV prevention, testing, treatment, service delivery and monitoring for adults and adolescents, women of child-bearing age and pregnant and/or breast-feeding women by 2026.
Implementation of the 2021 Guidelines will be measured in 2022 data, which are being collected as part of the GAM at the time for this reporting and will thus only be available in July 2023. On this basis, the Joint Programme will report on the indicator in the next report and provide further measurement as necessary.		

**Indicator 2.2.3. Number of countries where the Joint Programme operates, which have adopted shorter rifamycin-based regimens for TB preventive treatment (TPT) for people living with HIV**

2022 Progress	2023 Milestone	2026 Target
<b>Data will be available in July 2023</b>	At least 15 countries supported by the Joint Programme adopt shorter rifamycin-based regimens for TPT for people living with HIV by 2023.	40 countries supported by the Joint Programme adopt shorter rifamycin-based regimens for TPT for people living with HIV by 2026.
The 2022 data are not yet available at the time of this reporting; they will be available in July 2023. Progress toward this indicator will be available in the next report.		

## Result Area 3: Paediatric AIDS, vertical transmission

Indicator 3.1.1 Number of countries supported by the Joint Programme that have a national plan for the elimination of vertical transmission of HIV and implement the treat all policy for pregnant and breast-feeding women		
2022 Progress	2023 Milestone	2026 Target
<p><b>On track: 79 countries (87% of countries supported by the Joint Programme)</b></p>	<p>80%* of countries supported by the Joint Programme have a national plan for the elimination of vertical transmission of HIV (EMTCT) and implement the “treat- all” policy for pregnant and breast-feeding women by 2023.</p> <p><i>* Based on the 2022 data, 91 countries are supported by the Joint Programme in 2022, therefore at the start of the UBRAF this milestone refers to approximately <b>73 countries</b></i></p>	<p>95%* of countries supported by the Joint Programme have a national plan for the elimination of vertical transmission of HIV and implement the “treat-all” policy for pregnant and breast-feeding women by 2026.</p> <p><i>* Based on the 2022 data, 91 countries are supported by the Joint Programme in 2022, therefore at the start of the UBRAF this milestone refers to approximately <b>86 countries</b></i></p>
<p>In 2022, the number of countries with a national plan for EMTCT of HIV was 80, while the number of countries implementing a “treat-all” policy for pregnant and breast-feeding women living with HIV was 90, and the number of countries with both was at <b>79, or 87%</b> – far exceeding the 2023 milestone. Among the 81 countries supported by UBRAF that are rolling out their national EMTCT plans and “treat-all” policies, many are shifting from vertical programming to integrated programming, including producing Maternal, Newborn Child and Adolescent Health (MNCAH) integration guidance in Indonesia, Sierra Leone, Haiti and Dominican Republic, and integration into primary health care in Tajikistan. In the MENA region, UNICEF, WHO, IOM and the UNAIDS Secretariat started an assessment of the MNCH and community health platforms to deliver quality integrated prevention of mother-to-child transmission of HIV, syphilis and hepatitis B services in emergency and humanitarian contexts. Under South-to-South collaboration with Thailand, Iran developed a PMTCT comprehensive package for all parts of HIV cascade to use in various levels of the health-care system. In other countries, EMTCT fast-tracking strategies are implemented, such the one led by the National AIDS Control Organization in India.</p>		

Indicator 3.2.1 Number of countries supported by the Joint Programme to develop a national validation report to be submitted to the Global Validation Advisory Committee (GVAC)		
2022 Progress	2023 Milestone	2026 Target
<p><b>On track: 1 additional partner country</b></p>	<p>Two additional partner countries who joined the Global Alliance to End AIDS in Children submit their validation report to GVAC by 2023.</p>	<p>Five additional partner countries who joined the Global Alliance to End AIDS in Children develop a national validation report to be submitted to the GVAC by 2026</p>
<p>In 2022, Oman submitted a report and was validated as the first country in the WHO Eastern Mediterranean Region to have successfully eliminated mother-to-child transmission of HIV and syphilis.</p>		

Indicator 3.2.2 Number of countries supported by the Joint Programme which have HIV services for children integrated into at least 50% of primary health care sites		
2022 Progress	2023 Milestone	2026 Target
<p><b>On track: 63 countries</b></p>	<p>15 partner countries join the Global Alliance to end AIDS in children and provide services for children with HIV that are integrated into primary health care by 2023.</p>	<p>An additional 15 partner countries join the Global Alliance to end AIDS in children and provide services for children with HIV that are integrated into primary health care by 2026.</p>
<p>In 2022, <u>72 countries</u> had HIV services for children integrated into facilities providing primary health care and the Joint Programme supported the integration of these services in primary health care sites in <b>63 countries</b>. Of those, the following were part of the Global Alliance to end AIDS in children at the end of 2022: Angola, Cameroon, Côte d’Ivoire, the Democratic Republic of the Congo, Kenya, Mozambique, Nigeria, South Africa, Uganda, United Republic of Tanzania, Zambia and Zimbabwe. In addition, in 2022, Indonesia and India expressed interest in joining the Coalition.</p>		

# OUTCOME 2: Barriers to achieving HIV outcomes broken down

## Result Area 4: Community-led responses

Indicator 4.1.1. Number of countries where the Joint Programme provides technical support for community-led HIV responses		
2022 Progress	2023 Milestone	2026 Target
<p><b>On track: 2 guidance documents on the new definition of community-led responses and community-led organizations developed and expected to be launched in mid-2023.</b></p> <p><b>77 countries where Joint Programme provided technical support and guidance for community-led organizations from at least 3 of the most significantly affected communities in the country.</b></p>	<p>At least 2 normative guidance documents developed and promoted.</p>	<p>In at least 30 countries, Joint Programme provided technical support and guidance for community-led organizations from at least 3 of the most significantly affected communities in the country.</p>
<p>The Secretariat initiated development of guidance focused on the new definitions of community-led responses and community-led organizations. The publication, expected to be launched mid-2023, aims to foster a shared understanding of the nature and benefits of community-led responses among key stakeholders and to support them to play their part in advancing the role of communities in the HIV response.</p> <p>In <u>85 countries</u>, the Joint Programme provided technical support to community-led organizations in the HIV responses. Among them, in <b>77 countries</b> it provided support to 3 or more affected communities through community-led organizations. Most commonly these organizations led by: people living with HIV (<u>80 countries</u>); women living with HIV or women from key populations (<u>67 countries</u>); gay men and other men who have sex with men (<u>62 countries</u>); young people living with HIV or young key populations (<u>62 countries</u>); sex workers (<u>62 countries</u>); adolescent girls and young women (<u>57 countries</u>); transgender people (<u>44 countries</u>); people who use drugs (<u>39 countries</u>); and people with disabilities (<u>11 countries</u>). Support to other community-led organizations was reported to be directed towards communities of indigenous people, people in prisons, or refugees and migrants living with HIV (<u>34 countries</u>).</p> <p><u>75 countries</u> received support through the Joint Programme for community-led monitoring.</p>		

Indicator 4.2.1 Number of countries where the Joint Programme provides support to national and/or subnational government and other stakeholders for the incorporation and expansion of community-led HIV responses		
2022 Progress	2023 Milestone	2026 Target
<p><b>On track: 84 countries</b></p>	<p>20 countries</p>	<p>30 countries</p>
<p><b>84 countries</b> received support from the Joint Programme to national and/or subnational governments and/or other stakeholders for the incorporation and expansion of community-led HIV responses. This included different areas, but was most commonly for the incorporation and expansion of community-led HIV advocacy (<u>71 countries</u>); the incorporation and expansion of community-led HIV service delivery (<u>70 countries</u>); engagement in HIV-related decision-making (<u>66 countries</u>); and community-led HIV monitoring and research (<u>56 countries</u>). Forty-three countries received support in all 4 areas covered by the reporting categories.</p>		

## Result Area 5: Human rights

Indicator 5.1.1 Number of countries supported by the Joint Programme in activities to remove or amend punitive and discriminatory laws and policies, and/or develop protective ones affecting the HIV response.		
2022 Progress	2023 Milestone	2026 Target
<b>On track: 60 countries</b>	At least 30 countries	At least 50 countries
<p>In 2022, <b>60 countries</b> were supported by the Joint Programme to amend or remove punitive and discriminatory laws and policies and/or to develop protective ones. The types of support provided included: technical assistance (<b>48 countries</b>); advocacy and communications (<b>47 countries</b>); policy guidance (<b>39 countries</b>); capacity building (<b>33 countries</b>); strategic information generation and use (<b>32 countries</b>); financial support (<b>28 countries</b>); and sharing of good practices and facilitating cross-country cooperation (<b>26 countries</b>).</p> <p>The Joint Programme supported the removal of the following laws and policies: criminalization of exposure and/or transmission to HIV and nondisclosure of HIV status (<b>23 countries</b>); criminalization of an aspect of sex work (<b>16 countries</b>); policies relating to the age of consent for health services (<b>16 countries</b>); criminalization of same-sex sexual activity (<b>13 countries</b>); criminalization of drug use (<b>14 countries</b>); criminal laws targeting trans-and other gender diverse persons (<b>10 countries</b>); and travel restrictions for people living with HIV (in <b>5 countries</b>).</p> <p>In 13 of the supported countries, at least one punitive and/or discriminator law and/or policies were amended, prevented and/or protective ones developed.</p> <p>Beyond those, the Joint Programme provided support to the development of protective policies for: gender identity laws and anti-discriminatory laws (e.g. in health-care settings) (<b>28 countries</b>); adolescent girls and young women (<b>18 countries</b>); and other protective laws and policies (<b>26 countries</b>).</p>		

Indicator 5.2.1 Number of countries supported by the Joint Programme for actions to reduce stigma and discrimination in any of the six settings defined under the Global Partnership for action to end all forms of HIV-related stigma and discrimination		
2022 Progress	2023 Milestone	2026 Target
<b>On track: 77 countries supported in at least 2 of 6 settings.</b>	At least 25 countries supported in at least 2 of the 6 settings	At least 40 countries supported in at least 3 of the 6 settings
<p>In 2022, <b>77 countries</b> were supported by the Joint Programme to reduce stigma and discrimination in at least 2 of the 6 settings defined under the Global Partnerships for action to end all forms of HIV-related stigma and discrimination. The Joint Programme supported these countries in the following settings: health care (<b>82 countries</b>); education (<b>55 countries</b>); workplace (<b>46 countries</b>); legal and justice systems (<b>52 countries</b>); individual households and communities (<b>66 countries</b>); and emergency and humanitarian settings (<b>43 countries</b>). The most common types of support were technical assistance (<b>71 countries</b>); advocacy (<b>70 countries</b>); capacity building (<b>66 countries</b>); and strategic information (<b>61 countries</b>).</p>		

## Result Area 6: Gender equality

Indicator 6.1.1 Number of countries where the Joint Programme contributed to strengthened gender expertise and capacity to further integrate gender equality into the national HIV response, and meaningfully engage women in all their diversity together with men.		
2022 Progress	2023 Milestone	2026 Target
<b>On track: 41 countries</b>	At least 30 countries	At least 50 countries
<p>In <b>41 countries</b>, the Joint Programme contributed to strengthening gender expertise and capacity to further integrate gender equality into the national HIV response and meaningfully engage women in all their diversity, together with "men". In these countries, the Joint Programme contributed to at least 3 of the following 5 "areas of support":</p> <p>(i) Conducting gender assessment of HIV response to distil gender equality issues hindering the HIV response (<b>28 countries</b>);</p> <p>(ii) Applying the findings of gender assessment or other similar analyses to include gender-transformative actions that address unequal gender norms into the national HIV plan, programme or strategy or the Global Fund funding request (<b>34 countries</b>);</p> <p>(iii) Costing and allocating budgets for gender-transformative actions that address unequal gender norms in the national HIV plan, programme or strategy or the Global Fund funding request (<b>32 countries</b>);</p> <p>(iv) Including gender-responsive indicators to measure progress in implementing gender-transformative actions into the monitoring and evaluation framework of the national HIV plan, programme or strategy or the Global Fund funding request (<b>46 countries</b>);</p> <p>(v) Facilitating participation of women's organizations, including networks of women living with HIV, organizations of young women and adolescent girls (<b>73 countries</b>).</p>		

Indicator 6.2.1 Number of countries where the Joint Programme provided policy and advocacy support and contributed to mobilizing partnerships to implement gender-responsive HIV prevention, treatment, care and support services free of gender-based discrimination and violence.		
2022 Progress	2023 Milestone	2026 Target
On track: 33 countries	27 countries	53 countries
<p>In <b>33 countries</b>, the Joint Programme provided policy and advocacy support and contributed to mobilizing partnerships to implement gender-responsive HIV prevention, treatment, care and support services that are free of gender-based discrimination and violence. In those countries, the Joint Programme implemented all three areas of support:</p> <p>(i) Supporting advocacy for understanding and addressing the impact of unequal gender norms for HIV prevention, treatment, care and support services that are free of gender-based discrimination and violence (<u>69 countries</u>);</p> <p>(ii) Supporting advocacy for increased financing for gender-transformative actions towards HIV services that are free of gender-based discrimination and violence (<u>47 countries</u>);</p> <p>(iii) Mobilizing strategic partners, including creating space for the meaningful participation of women in all their diversity, to address unequal gender norms for an HIV response that is free of gender-based discrimination and violence (<u>59 countries</u>).</p>		

## Result Area 7: Young people

Indicator 7.1.1. Number of countries supported to scale-up multisectoral interventions that align with ministerial commitments to increase access to youth-friendly sexual and reproductive health (SRH) services, including comprehensive sexuality education (CSE), to improve young people's well-being		
2022 Progress	2023 Milestone	2026 Target
On track: 51 countries	At least 35 countries	54 countries
<p>In 2022, the Joint Programme supported <b>51 countries</b> in scaling up multisectoral interventions that align with their ministerial commitments to increase access to youth-friendly sexual and reproductive health SRH services, including CSE to improve young people's well-being.</p> <p>In most of these countries, types of support provided by the Joint Programme included: policy guidance (<u>55 countries</u>); capacity building (<u>68 countries</u>); strategic information / evidence generation and use (<u>54 countries</u>); technical support (<u>64 countries</u>); advocacy / communication support (<u>63 countries</u>); financial support (<u>42 countries</u>); and sharing good practices and facilitating cross-country cooperation (<u>40 countries</u>).</p>		

Indicator 7.2.1. Number of countries where the Joint Programme provided support to develop and implement costed plans to expand and institutionalize youth-led HIV responses.		
2022 Progress	2023 Milestone	2026 Target
On track: 26 countries	At least 10 countries	At least 30 countries
<p>In 2022, the Joint Programme supported <b>26 countries</b> in developing and implementing costed plans to expand and institutionalize youth-led HIV responses.</p> <p>Types of support provided by the Joint Programme included: policy guidance (<u>20 countries</u>); capacity building (<u>23 countries</u>); strategic information / evidence generation and use (<u>17 countries</u>); technical support (<u>26 countries</u>); advocacy / communication support (<u>24 countries</u>); financial support (<u>17 countries</u>); and sharing good practices and facilitating cross-country cooperation (<u>10 countries</u>).</p>		

# OUTCOME 3: Efficient HIV response fully resourced and sustained

## Result Area 8: Fully funded, sustainable HIV response

Indicator 8.1.1. Number of countries supported by the Joint Programme that have developed and report implementation of measures advancing full and sustainable HIV financing		
2022 Progress	2023 Milestone	2026 Target
<b>On track: 36 countries</b>	37 countries [baseline 32 countries plus 5 additional countries]	44 countries [baseline 32 countries plus additional countries: • 5 (2023) • 5 (2025) • 2 (2026)]
<p>The Joint Programme provided support and guidance to <b>36 countries</b> to identify HIV financing trends (such as National AIDS Spending Assessments or national health accounts), as well as gaps and opportunities.</p> <p>The support and/or guidance provided by the Joint Programme included: HIV sustainability and/or transition plans (<u>26 countries</u>); HIV financing assessments, i.e. financing vulnerabilities, funding landscape assessments (<u>21 countries</u>); HIV financing integration into domestic budgets (<u>20 countries</u>); and community-led response financing and/or social contracting (<u>23 countries</u>).</p>		

Indicator 8.1.2 Number of countries where the Joint Programme operates that submit their reports via GAM on government earmarked budgets and expenditures on HIV to UNAIDS.		
2022 Progress	2023 Milestone	2026 Target
<b>Slow progress: 20 countries</b>	5 additional countries report to GAM on the indicators 8.1 and 8.3.	<ul style="list-style-type: none"> <li>2 additional countries report to GAM on the indicators 8.1 and 8.3</li> </ul>
<p>For the current GAM 2022 data reporting round, as of 25 April 2023, 20 of 91 countries where the Joint Programme operates submitted both domestic HIV budgets (GAM Indicator 8.1) and expenditures (GAM Indicator 8.3) to UNAIDS. Individually, 26 countries submitted domestic budgets for HIV, which is slightly fewer than the 24 countries that submitted HIV domestic budget by May 2021.<sup>3</sup></p>		

<sup>3</sup> More complete reporting against these GAM indicators may be expected by June 2023 after the submission of this report and the June 2023 PCB. This is part of the normal reporting cycle where reporting of financial indicators is delayed due to different fiscal year-ends in many countries.

Indicator 8.2.1 Number of countries having conducted studies to improve allocative efficiency, address implementation bottlenecks, or other analytical exercises to improve resource use efficiency, multisectoral financing, impact and equity; and/or with recent HIV Investment cases (in the past three years) that are being used		
2022 Progress	2023 Milestone	2026 Target
<b>On track: 48 countries</b>	45 countries	45 countries
<p>In 2022, <b>48 countries</b> were supported by the Joint Programme to conduct / develop/ studies to improve allocative efficiency (<b>15 countries</b>); address implementation bottlenecks (<b>20 countries</b>); recent HIV investment cases (last 3 years) that are currently being used (<b>22 countries</b>); or other analytical exercises to improve resource use efficiency, multisectoral financing, impact and equity (<b>21 countries</b>).</p> <p>Examples of similar analytical exercises supported included: conceptual framework for sustainability of funding for HIV and TB responses (Belarus); feasibility study on social contracting (Philippines); study on HIV expenditures to better analyse HIV commodity supply costs in Sierra Leone; a review of the AIDS Trust Fund Resource Mobilization Strategy to improve its overall structure and financing mechanism to increase domestic funding (United Republic of Tanzania).</p>		

Indicator 8.2.2 Number of countries supported by the Joint Programme for evidence-informed HIV investments across their Global Fund to Fight AIDS, TB and Malaria grant cycle		
2022 Progress	2023 Milestone	2026 Target
<b>On track: 79 countries<sup>4</sup></b>	At least 50 countries benefit from Joint Programme's support for evidence-informed HIV investments across their Global Fund grant cycle.	At least 50 countries benefit from Joint Programme's support for evidence-informed HIV investments across their Global Fund grant cycle.
<p><b>82 countries</b> benefitted from Global Fund investments for HIV, TB/HIV or other grants with HIV components (such as COVID-19 and other special initiatives that include some HIV components). The Joint Programme supported <b>79 of these countries</b> for evidence-informed HIV investments across their Global Fund grant cycle.</p> <p>Types of support provided by the Joint Programme included: guidance and technical support (<b>71 countries</b>); strategic information generation and use, including for national strategic plans, investment cases, costing, transition and sustainability (<b>67 countries</b>); coordination and facilitation (e.g. for effective and inclusive country dialogue, country coordinating mechanisms or other fora to optimize Global Fund investments) (<b>68 countries</b>); support through UNDP serving as interim "principal recipient" for the Global Fund (<b>17 countries</b>).</p>		

## Result Area 9: Integrated systems for health and social protection

Indicator 9.1.1 Number of countries supported by the Joint Programme to have HIV antiretroviral services, for both treatment and prevention purposes, organized and financed as part of overall health systems, including through primary health care		
2022 Progress	2023 Milestone	2026 Target
<b>On track: 67 countries</b>	46 countries	60 countries
<p>In 2022, the Joint Programme supported <b>67 countries</b> to establish HIV ART services organized and financed as part of the overall systems. The following services are included in the primary health care services in these countries:</p> <p>(i) combination ART for line treatment of HIV. One of the following combinations individually for concomitant use or in fixed-dose combination: efavirenz + emtricitabine + tenofovir disoproxil fumarate or efavirenz + lamivudine + tenofovir disoproxil fumarate (<b>50 countries</b>);</p> <p>(ii) pre-exposure prophylaxis for HIV (PrEP) (<b>52 countries</b>);</p> <p>(iii) post-exposure prophylaxis for HIV (<b>44 countries</b>);</p> <p>(iv) HIV drug sensitivity testing (<b>19 countries</b>).</p>		

<sup>4</sup> The large number of countries supported by the Joint Programme resulted from high demand during the development of funding proposals for the Global Fund grant cycle in 2022 and 2023 after the successful replenishment conference. It is expected that demands for support will decrease in coming years.

Indicator 9.1.2. Number of countries supported by the Joint Programme, that have included cervical cancer screening and treatment for women living with HIV in the national strategies, policies, plans or guidelines for HIV, cancer, cervical cancer, noncommunicable diseases or other health areas		
2022 Progress	2023 Milestone	2026 Target
<b>On track: 48 countries</b>	40 countries	At least 80 countries
<p>In 2022, <b>48 countries</b> received support from the Joint Programme to include cervical cancer screening and treatment for women living with HIV in national strategies, policies, guidelines and/or plans for HIV, cervical cancer, noncommunicable diseases or other health areas. In these countries, cervical cancer is included into one or more of the following:</p> <ul style="list-style-type: none"> <li>(i) the national strategy, policy, plan or guidelines for cancer (including any cervical cancer specific ones) (<u>49 countries</u>);</li> <li>(ii) the broader response to noncommunicable diseases (in <u>35 countries</u>);</li> <li>(iii) the national strategic plan governing the HIV response (in <u>41 countries</u>);</li> <li>(iv) the national HIV treatment and/or testing guidelines (in <u>43 countries</u>).</li> </ul> <p>In addition, further to the integration of cervical cancer-HIV indicators as part of the 2022 GAM, <u>80 countries</u> reported data in 2022, setting a baseline for tracking progress toward achieving the 2025 global HIV integration targets and the 2030 global cervical elimination targets.</p>		

Indicator 9.2.1 Number of countries supported by the Joint Programme to generate data and evidence or revise social protection policies or programmes to enhance comprehensiveness and adequacy for the inclusion of people living with, at risk of and affected by HIV.		
2022 Progress	2023 Milestone	2026 Target
<b>On track: 44 countries</b>	10 countries supported by the Joint Programme to generate data and evidence or revise social protection policies or programmes to enhance comprehensiveness and adequacy for the inclusion of people living with, at risk of and affected by HIV.	At least 25 countries supported by the Joint Programme should have social protection systems which adequately cover people living with, at risk of, and affected by HIV.
<p><b>44 countries</b> were supported by the Joint Programme to generate data and evidence or revise social protection policies or programmes to enhance the comprehensiveness and adequacy for the inclusion of people living with, at risk of and affected by HIV.</p> <p>Among those, in <u>59 countries</u> the support focused on generating data and/or evidence on barriers of people living with, at risk of, and affected by HIV in accessing social protection services. In <u>45 countries</u>, the support focused on revising social protection policies or programmes to ensure their comprehensiveness and adequacy for the inclusion of people living with, at risk of, and affected by HIV.</p>		



## Result Area 10: Humanitarian settings and pandemics

Indicator 10.1.1. Number of countries where the Joint Programme operates, that implement interventions/services for key populations in humanitarian settings		
2022 Progress	2023 Milestone	2026 Target
<b>On track: 42 countries</b>	25 countries	25 countries
<p>In 2022, <b>48 countries</b> where the Joint Programme operated were considered to have a humanitarian setting, having met one or more of the following criteria: more than 30 000 refugees or asylum seekers or internally displaced population; more than 30 000 nondisplaced conflict affected populations; or a natural or climate-induced disaster affecting at least 30 000 people within the past 2 years.</p> <p>Of those, <b>42 countries</b> received support from the Joint Programme for implementing at least 5 of the following services for key populations: HIV testing services (<a href="#">43 countries</a>); HIV treatment and care (<a href="#">41 countries</a>); condoms and water-based lubricants (<a href="#">37 countries</a>); contraceptive services (<a href="#">34 countries</a>); gender-based violence referral pathways (<a href="#">34 countries</a>); nutritional support (<a href="#">34 countries</a>); treatment of STIs (<a href="#">35 countries</a>).</p>		

Indicator 10.1.2 Number of countries supported by the Joint Programme with specific measures in place for vulnerable persons living with HIV and HIV/TB in humanitarian settings to promote health and well-being, including food and nutrition security.		
2022 Progress	2023 Milestone	2026 Target
<b>On track: 35 countries</b>	10 countries	20 countries
<p>The Joint Programme supported <b>35 of the 48 countries with a humanitarian setting(s)</b> to have specific measures in place for vulnerable persons living with HIV and HIV/TB to promote health and well-being, including food and nutrition security. These instruments, transfer modalities or support services included at least one of the following: in-kind, food assistance (<a href="#">31 countries</a>); cash-based transfers (<a href="#">28 countries</a>); integration into national social safety nets (<a href="#">21 countries</a>); and support for livelihoods and/or economic empowerment (<a href="#">24 countries</a>).</p>		

Indicator 10.2.1 Number of countries supported by the Joint Programme that report the inclusion of priority HIV services according to the country context, in national pandemic preparedness and response plans or frameworks.		
2022 Progress	2023 Milestone	2026 Target
<b>On track: 53 countries</b>	30 countries	At least 60 countries
<p>In 2022, <b>64 countries</b> included priority HIV services in the country context in national pandemic preparedness and response plans or frameworks. The top priority HIV services were: condoms distribution (<a href="#">56 countries</a>); ART for adults and children (<a href="#">56 countries</a>); HIV prevention among key populations (<a href="#">50 countries</a>); HIV testing in pregnant women (<a href="#">50 countries</a>); and multmonth dispensing of ARV medicines (<a href="#">49 countries</a>).</p> <p>Of these <b>64 countries</b>, <b>53 countries</b> received support from the Joint Programme for inclusion of these HIV priority services in their pandemic preparedness and response plans or frameworks.</p>		

# SECRETARIAT FUNCTIONS

## SF1: Leadership, advocacy and communications

Indicator S1.1.1 Number of high-level political meetings related to HIV and AIDS where the Secretariat informed/influenced the outcome documents		
2022 Progress	2023 Milestone	2026 Target
<p><b>On track: 18 high-level political meeting outcome documents reflecting HIV and AIDS.</b></p>	<p>At least 15 high-level political meeting outcome documents reflecting HIV and AIDS. Decision taken by the UN General Assembly to convene the next High-Level Meeting on HIV/AIDS in 2026. Development of the next Global AIDS Strategy commenced.</p>	<p>Next Global AIDS Strategy developed and adopted by PCB. UN General Assembly High-Level Meeting on HIV/AIDS convened in 2026, with adoption of new Political Declaration on HIV and AIDS. Lessons from the HIV response to reduce inequalities including human rights and gender and community leadership approaches inform new Political Declaration on HIV and AIDS and broader SDG learning and global commitments by 2030.</p>
<p>The UNAIDS Secretariat, together with Cosponsors, contributed to a total of <b>18 high-level political meeting outcome documents</b> to support the ending of AIDS by 2030 and the implementation of the Global AIDS Strategy.</p> <p>The Secretariat leveraged the work of the Joint Programme and the discussions at the PCB meetings to inform the <a href="#">General Assembly's Annual Review of HIV/AIDS and report</a>, the <a href="#">High-Level Political Forum on Sustainable Development</a> and the <a href="#">UNGA Transforming Education Summit, its outcome document and Youth Declaration</a>, spotlighting evidence on the intersections of HIV, health, education and other SDGs.</p> <p>In 2022, the outcome documents for the <a href="#">66th Commission on the Status of Women</a>, the <a href="#">UN Human Rights Council</a>, and the <a href="#">General Assembly Omnibus Resolution on Drugs</a>, as well as the <a href="#">65th Commission on Narcotic Drugs</a>, highlighted the need to tackle human rights issues, including stigma and discrimination, as well as disparities in treatment access, all of which continue to fuel the HIV epidemic. Discussed at the margins of the Human Rights Council, the <a href="#">Human rights and HIV AIDS report</a>, supported by the Secretariat, recommended actions to achieve the targets, particularly in relation to key populations, adolescent girls and young women, and law reform. Furthermore, the Secretariat shared lessons learned from the HIV response to inform the pandemic treaty and global architecture for future pandemics, including during the <a href="#">World Health Assembly</a>. It also served as a primary partner for the biennial <a href="#">International AIDS Conference</a> held in Canada, including shaping its agenda, facilitating participation of nongovernmental organizations, convened a women's networking zone and a symposium to share experiences on successful efforts to reform criminal laws.</p> <p>Decisions of the <a href="#">PCB</a> in 2022 focused on education as an access point for addressing HIV-related stigma and discrimination, strategies to scale-up and support community-led HIV responses, and the accountability and sustainability of the Joint Programme.</p> <p>UNAIDS Secretariat also supported the 2022 <a href="#">Fast-Track Cities conference</a>, which saw the launch of the <a href="#">Sevilla Declaration</a> on the centrality of communities in urban HIV responses, led by the Fast-Track Cities Initiative.</p>		

Indicator S1.1.2 Number of countries where the Joint Programme operates, that are supported to review, assess and/or update the country's National Strategic Plan (NSP) on HIV (or equivalent plans or frameworks)		
2022 Progress	2023 Milestone	2026 Target
<b>On track: 83 countries (including 30 countries with dedicated multidisciplinary technical expertise and peer review)</b>	40 countries per year where the Joint Programme operates receive support to review, assess and/or update their NSPs on HIV (or equivalent plans or frameworks) by 2023.	50 countries where the Joint Programme operates receive some support, including 25 countries that receive dedicated support, per year, to review, assess and/or update their NSPs on HIV (or equivalent plans or frameworks) by 2026.
<p><b>83 countries</b> where the Joint Programme operated, were supported to review, assess and/or update their NSPs on HIV (or equivalent plans or frameworks). NSPs are critical for shaping national HIV responses and leveraging sustainable investments, including Global Fund and PEPFAR investments. Over 40 countries received support for the development of new NSPs and for their monitoring and evaluation frameworks. Other countries were supported for modelling impact and setting new targets (38 countries), and for costing NSPs (35 countries) or mid-term reviews (31 countries). In over 30 countries, the Secretariat provided dedicated multidisciplinary technical expertise and peer review support. This led to better-quality NSPs that are closely aligned to the Global AIDS Strategy and that focus on innovative and multisectoral approaches.</p> <p>Sustaining and enhancing political commitments to end AIDS, NSPs are also informed by national HIV prevention road maps or frameworks (in line with the Global HIV Prevention 2025 Road Map) (5 countries); national action plans to reduce gender-related discrimination (4 countries); gender assessments and related advocacy tools (6 countries); sustainable financing analysis (3 countries); the ongoing piloting of the framework and toolkit for understanding and addressing HIV-related inequalities (5 countries); and the development of prioritized action plans under the Global Alliance to end AIDS in children (12 countries).</p>		

Indicator S1.2.1 Number of countries that have received Secretariat support for meaningful engagement between people living with HIV, key populations, affected women and girls and young people etc. and government institutions for information-sharing and decision-making on HIV priorities.		
2022 Progress	2023 Milestone	2026 Target
<b>On track: 99%</b>	At least 90% of countries where the Secretariat operates report having advocated for and supported meaningful engagement between networks of people living with HIV, key populations, affected women and girls, and young people, and government institutions and other stakeholders, as relevant in the country HIV epidemic context, in information-sharing and decision-making.	At least 90% of countries where the Secretariat operates, report having advocated for and supported meaningful engagement between networks of people living with HIV, key populations, affected women and girls, and young people, and government institutions and other stakeholders, as relevant in the country HIV epidemic context, in information-sharing and decision-making.  Annual key global events convened by the Secretariat systematically include and promote meaningful engagement and leadership of communities.
<p>In 2022, <b>89 of 90 countries (99%)</b> received support for meaningful engagement between people living with HIV, key populations, affected women and girls and young people and government institutions for information-sharing and decision-making on HIV priorities. Those networks of populations include in almost all those countries people living with HIV (87 countries), as well as key populations (85 countries). Young people at risk of and affected by HIV were supported in 71 countries; women and girls at risk of and affected by HIV in 66 countries; and people living with disabilities in 30 countries. Most of the support was in the form of advocacy support (84 countries) and convening of stakeholders and/or facilitating dialogues (74 countries). Other support included organizing consultations or capacity building workshops or activities (68 countries) or financial support (57 countries). Such direct, in-country support was complemented by a large variety of support to strengthen the meaningful engagement of community networks at global and regional levels, such as the International Community of Women Living With HIV (to document cases on coerced sterilization) and the International Network of People Who Use Drugs and Harm Reduction International (for activities on decriminalization); and facilitating the representation of networks of people living with HIV and members of key populations and young people in planning structures and the development of city-level activities in 15 Fast-Track cities. Furthermore, through the USAID grant for the Robert Carr Fund, the Secretariat provided important core and activity funds to over 20 global and regional networks and consortia of networks, totalling a record 82 individual civil society and community networks.</p>		

## SF2: Partnership, mobilization and innovation

Indicator S2.1.1. Number of countries in sub-Saharan Africa that join the Education Plus initiative and have an implementation plan		
2022 Progress	2023 Milestone	2026 Target
<p><b>On track: 13 countries joined</b></p> <p><b>7 countries have an implementation plan</b></p>	At least 5 countries that joined Education Plus are implementing operational plans by end-2023.	<p>10 countries that previously joined Education Plus initiative continue implementing operational plans for the Education Plus package.</p> <p>Final report of Education Plus initiative available by end of 2026.</p>
<p>In 2022, the Education Plus initiative included 13 countries, including 8 new members, of which 7 had an implementation plan. The initiative supported important policy shifts in 7 countries, accelerating actions and investments to prevent HIV through the empowerment of adolescent girls and young women in sub-Saharan Africa through secondary education; management and prevention of pregnancies in learners in 4 countries; inclusive education policies and curricula review for out-of-school children and adolescents in 2 countries; and starting the integration of Education Plus interventions into education sector plans in 3 countries. About 11 000 adolescent girls and young women from 4 countries have been engaged in co-creating the initiative and its accountability framework and 18 intergenerational dialogues and advocacy events took place. The initiative also piloted the development of an investment case for Education Plus, to build evidence and support resource mobilization in Lesotho and it supported 8 countries to develop investment cases.</p>		

Indicator S2.1.2. Number of countries that complete a People Living with HIV Stigma Index 2.0		
2022 Progress	2023 Milestone	2026 Target
<p><b>On track: 8 countries</b></p>	10 countries where the Secretariat operates complete a People Living with HIV Stigma Index per year.	12 countries where the Secretariat operates complete a People Living with HIV Stigma Index per year.
<p><b>8 countries</b> (Belarus, Côte d'Ivoire, Iran, Kazakhstan, Kyrgyzstan, Mauritania, Morocco, Nepal) reported that they have completed a new PLHIV Stigma Index 2.0 in 2022 (<a href="https://www.stigmaindex.org/">https://www.stigmaindex.org/</a>), bringing critical information for advocacy, policies/legal frameworks and programmes to end HIV-related stigma and discrimination as part of efforts to reach the 10–10–10 targets. In these countries, as well as the other countries that are currently in the process of implementing the Stigma Index, the UNAIDS Secretariat at global, regional and national levels supported the research through technical support, quality assurance, contribution to the steering committee leading the Stigma Index implementation, capacity building, and support for engaging government and other national stakeholders. In several countries, networks of people living with HIV led advocacy campaigns and/or discussions with government stakeholders, based on the results from the Stigma Index.</p> <p><i>Note: While the number of countries that completed a PLHIV Stigma Index in 2022 is slightly below the yearly milestone, this indicator is still "on track", as there are 16 countries in the process of finalizing their surveys in 2023, 10 of which are among the 91 countries where the Joint Programme operates.</i></p>		

Indicator S2.1.3. Number of countries that join the Global Partnership for action to eliminate all forms of HIV-related stigma and discrimination (Global Partnership) and implement operational plans		
2022 Progress	2023 Milestone	2026 Target
<p><b>On track: 34 countries joined the Global Partnership</b></p> <p><b>16 countries implementing operational plans</b></p>	5 additional countries join the Global Partnership for action to eliminate all forms of HIV-related stigma and discrimination, and 16 countries are implementing operational plans.	<p>40 countries join the Global Partnership for action to eliminate all forms of HIV-related stigma and discrimination.</p> <p>At least 20 of the total number of countries having joined the Global Partnership, implement action plans, jointly developed with strong community leadership on addressing stigma and discrimination in at least two of the six settings.</p>
<p>In 2022, <b>33 countries</b> were part of the Global Partnership for action to eliminate all forms of HIV-related stigma and discrimination. Six countries joined the Partnership, adding to the 28 members in 2021. They included Luxembourg, the first European Union country to join. 16 countries have developed and are implementing costed action plans, while 3 are finalizing their plans. The action plans are being operationalized with key interventions also integrated into Global Fund funding proposals and PEPFAR operational plans.</p>		

Indicator S2.2.1 Number of communities of practice supported by UNAIDS Secretariat for the sharing of information, knowledge, experiences, with increased engagement of governments, communities and partners, as part of the UNAIDS Knowledge Management Strategy		
2022 Progress	2023 Milestone	2026 Target
<p><b>On track: Knowledge management strategy in place and started implementation.</b></p> <p><b>7 communities of practice</b></p>	<p>Knowledge management strategy in place and started implementation by end-2023.</p> <p>Community of practice initiated by the Secretariat in each of the 4 UNAIDS practice areas by end-2023.</p>	<p>External stakeholders from 25 countries, including governments, communities and partners, participate and/or engage in at least one of the 4 communities of practice.</p>
<p>UNAIDS Secretariat Knowledge Management Strategy 2022–2026 was launched at the end of 2022. It defines 9 priority areas for action, and implementation has started, with four priority actions underway. Four communities of practice have been initiated in each of the 4 UNAIDS practice areas, with e-discussions involving almost 500 staff across all regions. Engagement with key stakeholders were initiated through 2 digital platforms on issues such as gender-based violence in eastern and southern Africa (#Whatwomenwant) and stigma and discrimination in Asia and Pacific (<a href="#">SparkBlue</a>). The Global HIV Prevention Coalition community of practice with national AIDS commission managers continued to facilitate learning, knowledge exchange and peer mentoring for effective HIV prevention.</p>		

### SF3: Strategic information

Indicator S3.1.1 Monitoring framework corresponding to the Global AIDS Strategy 2021–2026 and the 2021 Political Declaration on HIV/AIDS developed, shared with countries and partners, and updated by the Monitoring Technical Advisory Group (MTAG)		
2022 Progress	2023 Milestone	2026 Target
<p><b>On track: Developed and shared GAM Framework 2021–2026 and GAM indicator guidance for 2022 and 2023</b></p>	<p>UNAIDS GAM framework for the 2021 Global AIDS Strategy and Political Declaration on HIV and AIDS developed and shared with all countries and partners.</p> <p>GAM indicator guidance for 2023 and 2024 reporting developed, guided by the MTAG, and shared with all countries and partners.</p>	<p>Updated GAM framework for the 2021 Global AIDS Strategy and Political Declaration on HIV and AIDS shared with all countries and partners.</p> <p>Draft of Global AIDS Framework for the post 2026 Global AIDS Strategy and Political Declaration on HIV and AIDS.</p>
<p>The updated Global AIDS Strategy 2021–2026 Monitoring framework (GAM), developed with guidance from the Monitoring Technical Advisory Group, was widely shared, together with the related guidance (available in 4 UN languages for 2022 and 2023 reporting) and an online reporting tool. It includes 74 quantitative GAM indicators and two sets of questionnaires on laws and policies, totally about 200 and 85 questions, respectively (National Commitments and Policy Instrument, NCPI) which are used in alternate years. To further align to the Global AIDS Strategy, and identify and improve understandings of inequalities, the framework disaggregates indicators by geographic locations, age, gender and key populations, as well as service delivery source (where relevant). Additionally, the UNAIDS Secretariat partnered with WHO and others to develop a set of cervical cancer-HIV integration indicators, endorsed as part of the 2022 GAM.</p>		

Indicator S3.2.1 Number of countries supported by the Secretariat to provide quality and timely reporting against new GAM indicators and to complete the HIV estimates process		
2022 Progress	2023 Milestone	2026 Target
<p><b>HIV estimates were developed in 172 countries, including 139 which were supported directly.</b></p> <p><b>39 countries were supported in community-led monitoring, with dedicated technical support from the Secretariat.</b></p> <p><b>155 countries were supported to report against GAM indicators.</b></p>	<p>150 countries supported for developing HIV estimates.</p> <p>Community-led monitoring supported in 15 countries.</p> <p>n/a</p>	<p>170 countries supported for developing HIV estimates.</p> <p>Community-led monitoring supported in 35 countries.</p> <p>n/a</p>
<p>In 2022, the UNAIDS Secretariat, with support from its partners, provided direct support to <b>139 countries</b> to develop their national HIV estimates. Overall, in <b>172 countries</b>, representing 99% of the world's population, HIV estimates were produced, of which <b>141 countries</b> agreed to publish the results. Thirty-nine countries also developed subnational HIV estimates that allow for granular target-setting and monitoring by geographic location, as well as age and sex subpopulations. National technical leaders and their partners capacities to develop estimates and identify inequalities are stronger thanks to workshops and virtual trainings held in 2022.</p> <p><b>155 countries</b> were supported to provide quality and timely reporting against new GAM indicators through the related updated online reporting tool.</p> <p>In 75 countries, the Joint Programme provided support towards community-led monitoring (see indicator 4.1.1). Among those, the Secretariat, through noncore funding support, strengthened community-led monitoring in <b>39 countries</b>. This dedicated technical support included areas such as planning, data-collection, programme management and data-related queries, as well as coordination, tracking progress and problem-solving, all done with communities.</p>		

Indicator S3.3.1 Global AIDS update reports, other flagship reports and annual updates to AIDSinfo produced and disseminated, highlighting progress and inequality gaps, and giving examples of data use by countries, communities and partners to improve programmes		
2022 Progress	2023 Milestone	2026 Target
<p><b>On track: reports available</b></p>	<p>Global AIDS update reports and annual updates to AIDSinfo produced.</p>	<p>Global AIDS update reports and annual updates to AIDSinfo produced.</p>
<p>Analysing data provided through global AIDS reporting and HIV estimates from countries and other sources, the Secretariat contributed to <a href="#">2022 Report of the UN Secretary-General on the Implementation of the Declaration of Commitment on HIV/AIDS and the Political Declarations on HIV and AIDS (Seventy-sixth session of the General Assembly)</a> and published In Danger: <a href="#">Global AIDS Update 2022</a>, and the <a href="#">Dangerous inequalities: World AIDS Day report 2022</a>.</p> <p>A comprehensive databook and analyses were also published and were available through UNAIDS AIDSinfo platform <a href="#">AIDSinfo   UNAIDS</a>. The sections of the platform include: Epidemic and Response, Inequalities, the Key Populations Atlas, the HIV Financial Dashboard, and Laws and Policies Analytics. These data have been used widely globally, regionally and in countries for resource mobilization and advocacy, as well as for setting targets and monitoring progress.</p>		

## SF4: Coordination, convening and country implementation support

Indicator S4.1.1. Number of countries where the Secretariat operates which have a UN Sustainable Development Cooperation Framework (UNSDCF) that integrate priorities on ending HIV-related inequalities and ending AIDS		
2022 Progress	2023 Milestone	2026 Target
<b>On track: 87 countries</b>	80 countries where the Secretariat operates with the UNSDCF or equivalent that integrate priorities on ending HIV-related inequalities and ending AIDS.	In all countries where the Secretariat operates, the UNSDCF or equivalent integrate priorities on ending HIV-related inequalities and ending AIDS.
<p>In 2022, <b>87 countries</b> where the Secretariat operates<sup>5</sup> had a UN Sustainable Development Cooperation Framework (UNSDCF) that integrates priorities on ending HIV-related inequalities and ending AIDS. Priorities on ending HIV-related inequalities and ending AIDS are captured at results output level in <u>67 countries</u> and at results outcome level in <u>39 countries</u>. Furthermore, UNSDCFs also captured priorities on ending HIV-related inequalities at the indicator level (in <u>76 countries</u>) and target level in (<u>59 countries</u>). HIV indicators were also included in the new UNSDG Output Indicator Framework for measuring the UN contribution towards the SDGs in all countries.</p> <p>The UNAIDS Secretariat is signatory to the UNSCDF or equivalent in 81 countries.</p>		

Indicator S4.1.2 Number of country-level UN Joint Teams on HIV and AIDS implementing a Joint UN Plan on HIV to support national HIV response as a part of and contributing to the UN Sustainable Development Cooperation Frameworks (UNSDCF) or equivalent.		
2022 Progress	2023 Milestone	2026 Target
<b>On track: 91 countries</b>	At least 85 country-level UN Joint Teams on AIDS implement a Joint UN Plan on HIV to support national HIV response as a part of and contributing to the UNSDCF or equivalent.	At least 85 country-level UN Joint Teams on AIDS implement a Joint UN Plan on HIV to support national HIV response as a part of and contributing to the UNSDCF or equivalent.
<p>In <b>91 countries</b>, UN Joint Teams on AIDS, led by the Secretariat with Cosponsors<sup>6</sup> at the country level, developed and implemented a Joint UN Plan on HIV that effectively supports the national HIV response in a well-coordinated manner and as part of and contributing to the UNSDCF, thereby further leveraging broader UN system support for HIV and fostering synergies between HIV and other SDGs. In 2022, the UNAIDS country envelope provided a total of US\$ 25 million to partially fund joint work within those 91 Joint UN Plans on HIV's selected priorities across all regions.</p>		

<sup>5</sup> Where the Secretariat was present via a (multi) Country Office, i.e. 87 countries reporting through JPMS in 2022.

<sup>6</sup> The Joint Teams on AIDS in these 91 countries are led mostly by the UNAIDS Secretariat, except for at least four countries, where the teams are led by Cosponsors (since the UNAIDS Secretariat is either not currently present or soon will not be present)

Indicator S4.2.1 Number of countries where Joint Programme support is provided to promote and apply an inequalities lens to the HIV response, including through a new HIV inequalities framework and toolkit and other available tools.		
2022 Progress	2023 Milestone	2026 Target
<b>Slow Progress: Framework and toolkit on HIV-related inequalities developed and disseminated, and piloted in 5 countries</b>	<p>Normative guide to address Inequalities for ending AIDS (framework and toolkit on HIV-related inequalities) developed and disseminated.</p> <p>HIV-related inequalities framework and toolkit piloted in 12 countries with lessons from gender assessments and Stigma Index surveys which inform the refinement of the documents and are incorporated in the roll-out.</p>	<p>At least 10 countries supported by the Joint Programme to apply an inequalities lens to the HIV response, guided by the HIV inequalities framework and toolkit and other available tools.</p> <p>Toolkit and framework refined and published and disseminated as an updated version in several languages.</p> <p>Consultation(s) undertaken by the Joint Programme in 2025 to identify high-level indicators for tracking progress on HIV-related inequalities based on the lessons learned (2025–2026).</p>
<p>The framework and toolkit for understanding and addressing HIV-related Inequalities was developed by the Joint Programme and launched in 2022. The new, related toolkit is also available and, pilot use began in 5 countries (Brazil, Cambodia, Ghana, Moldova and South Africa) at end-2022, guided by a multistakeholder team led by UNAIDS's Country Office and a lead Cosponsor. While integrating the findings of Stigma Index surveys and gender assessments, as well as GAM data and other studies, these pilots aim to identify, interrogate and highlight key inequalities that are driving the epidemic, as well as recommendations to reduce or eliminate those inequalities. The pilots also inform NSP reviews; domestic and international investments; including Global Fund funding requests; and UNSDCFs in those five countries.</p>		

## SF5: Governance and mutual accountability

Indicator S5.1.1 Number of meetings with constituency inclusive engagement facilitated to support the governance of the Joint Programme, including by transparent and effective decision-making per the PCB modus operandi		
2022 Progress	2023 Milestone	2026 Target
<b>On track: 27 meetings</b>	<p>A minimum of 14 meetings per year held across UNAIDS primary governance mechanisms (PCB, PCB Bureau, ECOSOC, CCO, NGO Delegation) to support effective governance and inclusive stakeholder engagement.</p>	<p>A minimum of 14 meetings per year held across UNAIDS primary governance mechanisms (PCB, PCB Bureau, ECOSOC, CCO, NGO Delegation) to support effective governance and inclusive stakeholder engagement.</p>
<p>UNAIDS delivered on its commitment to effective governance and inclusive stakeholder engagement by holding over 27 meetings with its primary governance mechanisms (PCB, PCB Bureau, ECOSOC, CCO, NGO Delegation). Among others, the PCB Bureau reviewed the Evaluation Plan and the work of the Independent External Oversight Advisory Committee, and the Cosponsoring Organizations discussed key priorities for the Joint Programme. Additionally, the Secretariat provided increased support to the NGO Delegation, including pre-meeting sessions and retreats. The dedicated support, opportunities and space for PCB stakeholders to engage have increased the Joint Programme's accountability.</p> <p>In response to the PCB's request, an informal <a href="#">Multistakeholder Task Team</a> was convened. It met four times to provide the PCB Bureau with recommendations on UNAIDS's funding situation. Those recommendations informed a PCB Bureau report on solutions to mitigate the risk of the UBRAF funding shortfall and an ambitious Joint Programme <a href="#">2022–2026 Resource Mobilization Strategy, which was</a> discussed at the 51th PCB meeting in December 2022. These efforts demonstrate UNAIDS's responsible and inclusive governance, greater transparency and proactive risk management.</p>		



Indicator S5.2.1 Annual performance monitoring, financial and organizational oversight reports (i.e. reports of the auditors, Ethics Office, and UNAIDS Independent External Oversight Advisory Committee) submitted to the PCB for consideration and Results and Transparency Portal updated.		
2022 Progress	2023 Milestone	2026 Target
<p><b>On track:</b></p> <p><b>Reports submitted</b></p> <p><b>Portal updated</b></p>	<p>Annual performance monitoring reporting, financial reporting, and organizational oversight reports submitted and considered by PCB.</p> <p>Results and Transparency Portal updated with latest information</p>	<p>Performance monitoring reporting and Transparency Portal demonstrate effective and transparent accountability of the Joint Programme.</p> <p>Oversight reports, management responses and the related PCB decisions demonstrate effective and transparent accountability and compliance by the Secretariat.</p>
<p>The PCB, at its 50th session in June 2022, reviewed and considered the annual Performance Monitoring Report package, financial reports, human resources management report, ethics report, reports of internal and external auditors and related management responses, as well as the first annual report of the Independent External Oversight Advisory Committee. At its 51st session in December 2022, the PCB considered the annual report on evaluation and the report of the PCB Bureau, further strengthening accountability and transparency mechanisms for the Joint Programme. The 2020–2021 Performance Monitoring Report package summarized the Joint Programme’s results and financial expenditures, including reporting against all UBRAF indicators for 2016–2021 (Results   Portal (<a href="https://unaids.org">unaids.org</a>)).</p> <p>Transparency mechanisms were therefore strong, including through the constantly updated Results and Transparency Portal, with a dedicated page on the UBRAF 2022–2026; UNAIDS results, including in 96 countries; and other UN System-wide reports and information on donor contributions and UNAIDS’s submission to the <a href="#">International Aid Transparency Initiative</a>.</p> <p>The Multilateral Organization Performance Network (MOPAN), which brings together Member States that fund the multilateral system, is currently assessing the UNAIDS Secretariat. The assessment began in late 2021, the inception report was completed at the end of 2022, and the final report is due in mid-2023.</p>		

Indicator S5.2.2 Number of meetings of the Independent External Oversight Advisory Committee (IEOAC) held and the submission of its annual oversight report to the PCB, that are effectively supported by the Secretariat in order for the IEOAC to fulfil its role as per its final terms of reference/mandate		
2022 Progress	2023 Milestone	2026 Target
<p><b>On track:</b></p> <p><b>7 meetings</b></p> <p><b>Annual report submitted</b></p>	<p>IEOAC supported by the Secretariat to fulfil its terms of reference, measured by a minimum of 4 meetings per year and submission of its annual report to the PCB.</p>	<p>IEOAC supported by the Secretariat to fulfil its terms of reference, measured by a minimum of 4 meetings per year and submission of its annual report to the PCB.</p>
<p>The IEOAC was formally established and held a total of 7 meetings during its first year. These sessions included dialogue with senior management, as well as with the PCB Bureau. In accordance with past PCB decisions, the IEOAC prioritized risk management and UNAIDS’s current financial situation in its initial plan of work. Through dialogue and its first <a href="#">report</a> to the PCB, in June 2022, the IEOAC provided expert advice to the PCB and the UNAIDS Executive Director to further strengthen governance and oversight.</p>		

**Indicator S5.3.1 Mandatory UNAIDS reporting relating to Quadrennial Comprehensive Policy Report (QCPR), UN Funding Compact and UN System-Wide Action Plan on gender equality and women empowerment, completed indicating progress towards compliance with recommendations and integration with UN system-wide tools.**

2022 Progress	2023 Milestone	2026 Target
<b>On track: Reports completed</b>	Annual QCPR, UN Funding Compact and UN SWAP report completed.	Annual QCPR, UN Funding Compact and UN SWAP report completed.
<p>In 2022, UNAIDS Secretariat submitted UN System-wide reports that showed a very high commitment and compliance with the SDG and UN Reform priorities, recommendations, and requirements, as well as integration with UN System-wide tools. These included submission of the 2021 and 2022 annual survey for the UN Quadrennial Comprehensive Policy Review (QCPR), as well as 2021 and 2022 progress reports against the QCPR and the UN Funding Compact commitments to the PCB (conference room papers). The progress report was also presented during the PCB Structured Funding Dialogue in 2022. The 2022 UN-System-Wide Action Plan 2.0 on gender equality and women’s empowerment is a framework for holding UN agencies accountable for promoting gender equality and women’s empowerment in all aspects of their work. The UNAIDS Secretariat’s 2022 report shows high compliance with and ranking against the UN’s ambitious targets for gender equality and women empowerment with, among the 16 applicable indicators, 9 achieved, 5 exceeded and 2 approached. The UNAIDS Secretariat contributed to other UN-wide reports, such as the Youth 2030 progress report 2022, the Greening the Blue report 2022, and The Sustainable Development Goals report 2022, as well as other system-wide surveys, such as the UN Disability and Inclusion Strategy, the 2021 UNAIDS report and the Survey on Civil Society Engagement in the Work of the UN (reports can be found on the <a href="#">Results and Transparency Portal</a>, under UN-wide reporting).</p>		

**Indicator S5.4.1 Percentage of UNAIDS evaluations, as per the PCB-approved Evaluation Plan, implemented, and tracking of the follow-up on related recommendations**

2022 Progress	2023 Milestone	2026 Target
<p><b>On track: 83%</b></p> <p><b>2021 and 2022 recommendations tracked</b></p> <p><b>2024–2025 evaluation plan to be developed in the second half of 2023</b></p>	<p>At least 80% of the evaluations (as per the evaluation plan for 2022–2023) implemented.</p> <p>Follow-up on recommendations from evaluations in 2021 and 2022 tracked.</p> <p>Evaluation plan for 2024–2025 approved by the PCB.</p>	<p>At least 80% of the evaluation (as per the evaluation plan for 2026–2027) implemented.</p> <p>Follow-up on recommendations from evaluations in 2024 and 2025 tracked.</p>
<p>Two Joint Programme evaluations were completed (on key populations and on efficient and sustainable financing) and one UNAIDS Secretariat evaluation was conducted (on the regional data hubs). All evaluations were externally assessed to assure their quality and are available on the <a href="#">UNAIDS Evaluation Office</a> website. The Evaluation Office tracked implementation of evaluation recommendations and actively participated in the UN Evaluation Group, a professional network of more than 40 UN evaluation offices. Two virtual meetings of the UNAIDS Expert Advisory Committee on Evaluation were held, focusing on improving the value, credibility, independence and resourcing of the evaluation function.</p> <p>The PCB received an annual evaluation report in December 2022 (UNAIDS/PCB (51)/22.34). It welcomed efforts to conduct joint evaluations and urged that evaluation findings be disseminated widely to reveal past challenges and achievements, and to provide guidance for future actions. Several common themes in the evaluation recommendations were highlighted, including the strong recognition of UNAIDS’s importance and value, as well as the need to integrate HIV services into universal health coverage and to ensure that these services are effective for key populations and other affected groups.</p>		

