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HUMAN IMMUNODEFICIENCY VIRUS/ACQUIRED IMMUNE DEFICIENCY SYNDROME (HIV/AIDS) PROGRAMME

SUMMARY

The present document contains the report by the Director-General of the World Health Organization (WHO) on a study of a joint and co-sponsored United Nations programme on HIV/AIDS (EB93/27) prepared in response to resolution WHA46.37 adopted by the World Health Assembly at its forty-sixth session in May 1993 (see annex I).

In addition, the document also contains the text of a resolution on a joint and co-sponsored United Nations programme on HIV/AIDS (EB93.R5) adopted by the Executive Board of WHO at its ninety-third session in January 1994 (see annex II).

The document has been prepared at the request of the Executive Board of WHO and in context of decision 1994/R.1/8 adopted by the UNICEF Executive Board at its first regular session in February 1994 requesting UNICEF to work towards a recommendation of a joint co-sponsored programme on HIV/AIDS to the Economic and Social Council no later than July 1994.

It should be read in conjunction with document E/ICEF/1994/L.14 on the same subject.



**World Health Organization
Organisation mondiale de la Santé**

**EXECUTIVE BOARD
Ninety-third Session**

Provisional agenda item 9

**EB93/27
23 December 1993**

Study of a joint and cosponsored United Nations programme on HIV/AIDS

Report by the Director-General

This report is prepared in response to resolution WHA46.37 (1993) which requested the Director-General to study the "feasibility and practicability" of establishing a joint and cosponsored United Nations programme on HIV/AIDS, in close consultation with the executive heads of UNDP, UNICEF, UNFPA, UNESCO and the World Bank. The resolution requested that the study be submitted to the ninety-third session of the Executive Board in January 1994. The full text of the study prepared by the six organizations cited in the resolution is provided in document EB93/INF.DOC./5.

This report summarizes the background to and the events which led up to the adoption of resolution WHA46.37, the methodology used by the six organizations to carry out the study, the preferred option (option A) for a joint and cosponsored United Nations programme on HIV/AIDS (options B and C are described in document EB93/INF.DOC./5), and the implications of the preferred option for Member States and WHO.

The Executive Board is invited to consider the establishment of a joint and cosponsored United Nations programme on HIV/AIDS in accordance with the preferred option and the measures proposed to launch it.

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I. INTRODUCTION

1. In response to the expanding health, social and economic impact of the HIV/AIDS pandemic (see section I of document EB93/26), the number of actors involved at national, regional and global levels has increased dramatically. They include other organizations of the United Nations system, intergovernmental organizations, bilateral agencies and nongovernmental organizations.¹ Some of them have clear areas of specialization; others are involved in financing - or implementing - a wide range of activities. In addition, the impact of the HIV/AIDS pandemic on socioeconomic development, which has become increasingly clear, has greatly expanded the kinds of activities that are necessary to ensure a comprehensive, effective response at all levels.
2. United Nations General Assembly resolution 42/8, adopted in 1987, recognized the "established leadership and essential global directing and coordinating role" of WHO in AIDS prevention, control and education. The resolution further encouraged WHO to continue to "direct and coordinate" the urgent global battle against AIDS and urged all appropriate organizations of the United Nations system to support AIDS control efforts worldwide in conformity with the global AIDS strategy.
3. At present, the organizations of the United Nations system are undertaking HIV/AIDS-related activities in a number of areas. For example, WHO continues to provide technical, policy and strategic guidance at global, regional and country levels, and to support and coordinate a wide range of research related to HIV/AIDS. UNDP has substantive responsibility within the United Nations system in the area of social and economic development and provides a mechanism for the coordination of programming within the United Nations system at country level. UNICEF supports prevention and care programmes using a multisectoral approach focused on youth, women and children. UNFPA integrates HIV/AIDS-related prevention and care into mother and child health/family planning services. UNESCO focuses on educational activities, particularly the development of curricula for school AIDS education. The World Bank provides substantial loans for HIV/AIDS-related activities, and for HIV/AIDS components of broader health loans.
4. In the late 1980s the Inter-Agency Advisory Group on AIDS was established to help coordinate activities of United Nations organizations at global level. The WHO/UNDP Alliance to Combat AIDS was formed in 1987 in order to facilitate coordination at country level. In addition, the Management Committee of the Global Programme on AIDS established a 12-member Task Force on HIV/AIDS Coordination in November 1992, comprising equal representation from donor governments, governments cooperating with external support agencies, organizations of the United Nations system and nongovernmental organizations.
5. Progress in improving coordination within the United Nations system has been evident. At global level it has included the development and revision of the global AIDS strategy, framing of common operational and personnel policies on HIV/AIDS, establishment of the Management Committee's Task Force on HIV/AIDS Coordination, and successful collaboration in specific programme areas (e.g., training of United Nations staff on HIV/AIDS in the workplace; condom supplies). At country level, organizations of the United Nations system, along with a wide range of groups and organizations (including other external support agencies and nongovernmental organizations), are participating jointly in the formulation of medium-term plans and emphasizing the importance of a broad-based multisectoral response. In some countries, the Resident Coordinators have formed a coordination committee related to HIV/AIDS with representation from organizations of the United Nations system.
6. Notwithstanding these examples, concern about the lack of consistent or effective coordination among organizations of the United Nations system has been expressed by developing country and donor governments in various bodies and evaluation reports during the past few years. They cite a number of problems occurring with varying degrees of severity. These include: ineffective links between accepted

¹ The term "nongovernmental organizations" includes community-based organizations and groups representing people living with HIV/AIDS.

global policies and strategies and action at country level; provision of conflicting technical advice to countries; different interpretation of the mandates and areas of expertise of the various organizations; an insufficient multisectoral response to the pandemic; and competition for financial resources. There is agreement that these shortcomings have resulted in the need for improved coordination in response to the pandemic from the United Nations system.

7. Quite apart from these problems, a number of substantive matters related to HIV/AIDS make coordinated action imperative. These include:

- continuing widespread complacency about and denial of the pandemic's current and expected magnitude;
- the disproportionate effect of HIV/AIDS among more vulnerable populations;
- the growing and deleterious impact of HIV/AIDS on women;
- the multifaceted problems faced by persons with HIV/AIDS, including discrimination and violation of their human rights;
- the overwhelming burden of AIDS on health care systems;
- the demographic, social and economic impact of the pandemic; and
- the unlikelihood of a cure or vaccine in the near future, thus placing even greater importance on the need to change behaviours and practices.

II. WORLD HEALTH ASSEMBLY RESOLUTION WHA46.37

8. In May 1993 the Health Assembly adopted resolution WHA46.37, which requested the Director-General of WHO to study the "feasibility and practicability" of establishing a joint and cosponsored United Nations programme on HIV/AIDS, in close consultation with the executive heads of UNDP, UNICEF, UNFPA, UNESCO and the World Bank. The resolution requested the Director-General of WHO to submit the study to the ninety-third session of the Executive Board in January 1994. According to resolution WHA46.37, the objectives of this programme should be to:

- provide the cosponsoring agencies with technical, strategic and policy direction;
- collaborate with other organizations of the United Nations system, governments and nongovernmental organizations on matters related to HIV and AIDS; and
- strengthen governments' capacity to coordinate HIV/AIDS activities at country level.

9. In July 1993 the Economic and Social Council adopted resolution 1993/51 fully supporting resolution WHA46.37 and calling upon the executive heads of the six above-mentioned organizations to cooperate fully in the consultative process described therein.

10. As the initial resolution emanated from the World Health Assembly, WHO was designated by the other organizations as the "coordinator" of the consultative process. It was understood, however, that all the cosponsoring organizations were equal partners in this process, the end result of which would ideally be a proposal fully supported by all the organizations. In accordance with resolution WHA46.37, the Management Committee's Task Force on HIV/AIDS Coordination was involved throughout the process, together with the organizations cited in the resolution, other appropriate international organizations, nongovernmental organizations, and Member States.

III. METHODOLOGY

11. The Director-General took a number of steps to carry out the requested study, including an assessment of HIV/AIDS coordination, a comprehensive analysis of existing joint programmes and cosponsorship arrangements within the United Nations system, and organization of a series of consultations attended by representatives from the six potential cosponsors.

Review of joint programmes and cosponsorship arrangements

12. The structure, function and governance of a number of joint programmes and cosponsorship arrangements within the United Nations system were reviewed, including all those related to WHO. Twelve were considered in detail.¹ Although none had all the requirements, many had features of relevance for the proposed joint and cosponsored United Nations programme on HIV/AIDS. These features were incorporated in the options put forward for consideration.

13. Some conclusions that can be drawn from this review are that:

- (i) the proposed United Nations programme on HIV/AIDS would have more than the average number of cosponsors, compared to existing arrangements;
- (ii) the relationship of current cosponsorship arrangements to WHO varies considerably. Where the arrangements directly concern a health-related issue, however, WHO is either the executing or administering agency, or otherwise hosts the programme or arrangement;
- (iii) the more operational a programme or arrangement, the larger and more substantial the secretariat required;
- (iv) for any arrangement, the secretariat must have clear authority and sufficient resources to plan and execute activities at various levels;
- (v) most of the arrangements have their own governing bodies with ultimate decision-making authority on programmatic matters. To the extent that these bodies report to others, reporting is usually done either by the cosponsors to their respective governing bodies, or by the executing agency when it reports to its governing body on activities in executing its programme.

Interagency consultations

14. The first meeting of representatives from each of the six organizations cited in resolution WHA46.37 was held in May 1993. At this meeting, the organizations reviewed the several studies already conducted on coordination in the United Nations system related to HIV/AIDS and agreed to work together to undertake the current study and eventually to formulate options, based on the study findings, for a joint and cosponsored United Nations programme on HIV/AIDS, according to the guidelines set out in the resolution. From May to November 1993, seven interagency meetings were held.

15. The need to understand more fully the factors affecting coordination of the United Nations system was recognized from the outset of the interagency consultations. There was considerable discussion on the problems perceived by donors and host governments, as well as on the adequacy of current coordination mechanisms at global and country levels. Although it was agreed not to prejudge the outcome of the study, the following points were recognized as underlying the interagency discussions:

¹ See document EB93/INF.DOC./5.

(i) options for a joint and cosponsored United Nations programme on HIV/AIDS should build on the gains made thus far and reinforce already existing working relationships among the cosponsors. At the same time, they should address continuing gaps in knowledge and action;

(ii) in addition to the six organizations cited in resolution WHA46.37, any United Nations programme on HIV/AIDS should involve all organizations of the system in an active, meaningful way;

(iii) the support and cooperation of bilateral agencies, other international organizations and nongovernmental organizations in consultative arrangements at all levels are essential. Even when considered in total, the technical and financial support of the United Nations system accounts for a small proportion of external assistance in many countries;

(iv) staff in each body must be convinced that effective assistance offered by any organization of the United Nations system reflects well on the system as a whole, and that conflict and duplication within any part of the system weakens the effectiveness of each member. Although no structure can substitute for this fundamental orientation, some structural arrangements can facilitate and sustain collaborative relationships better than others. Structural arrangements need to be identified that are conducive to the long-term strengthening and effectiveness of coordination in the United Nations system related to HIV/AIDS;

(v) the most important objective of a joint and cosponsored United Nations programme on HIV/AIDS must be to reinforce national capacity to respond to the epidemic, especially through the provision of reliable advice on technical and policy matters as requested by governments. In doing so, it must remain accountable to people and communities affected by the pandemic and make the most effective use of resources available. Innovation is essential in HIV/AIDS, given the imperfect knowledge in many areas. A joint and cosponsored United Nations programme must serve to stimulate such innovation, while ensuring maximum exchange of information and experience at all levels and coordinating the search for an application of new knowledge in ways that strengthen national responses to the epidemic.

16. In addition to these consultations, the Secretary-General of the United Nations convened a meeting of the executive heads of the six potential cosponsors in late October 1993 to discuss the study in order to ensure the support and participation of the most senior levels of these organizations.

IV. THE PREFERRED OPTION

17. The study resulted in the formulation of three options for a joint and cosponsored United Nations programme on HIV/AIDS. All contain approaches for achieving consensus on important policy and strategic matters, governance, coordinated fund-raising, and assurance of accountability. They differ in the extent to which activities are conducted by a centralized secretariat or directly by one of the cosponsors.

18. At this time it is difficult to specify the costs of each option, and to compare them with either the status quo or each other. Proceeding with any of the options would involve both "start-up" costs (for activities and measures leading up to the establishment of a cosponsored programme) and recurrent costs for its operation. Although foreseeing and eventually quantifying these costs is an important exercise, the results must be viewed in the light of the potential benefits of establishing a joint and cosponsored United Nations programme on HIV/AIDS. It is believed that any of the three proposed options could be implemented under the existing level of resources available to the cosponsors.

19. It should be recognized, however, that existing resources are grossly inadequate to meet current needs, and that the resources required by the United Nations system will increase substantially as the pandemic evolves during the next several years. A joint and cosponsored United Nations programme on HIV/AIDS would ensure that resources required are used more efficiently; it would not diminish the total amount of

support required. In fact, it is hoped that clear demonstration of greater efficiency will result in increased financial support for activities of the United Nations system related to HIV/AIDS.

20. As a result of the consultation process, a consensus was reached among the secretariats of five of the organizations in favour of option A. The World Bank, however, has expressed the view that this option should be further developed and improved, taking into account its suggestions, in particular with regard to mechanisms for ensuring technical consensus, a more detailed analysis of relative costs and other administrative arrangements.

21. Detailed descriptions of all three options are available to the Executive Board in document EB93/INF.DOC./5. The following paragraphs describe only option A, which is also the option preferred by the Director-General, for the reasons described in paragraphs 31 to 42.

Global level

22. Under the preferred option, the activities of the cosponsors at global level would be largely undertaken by a unified secretariat administered by WHO. Individual cosponsors may retain the personnel needed to convey to their staff at all levels, the advice and guidance provided by the programme's secretariat, and to ensure that HIV/AIDS-related matters are integrated into the broader health and socioeconomic problems with which their organizations are concerned. They would also carry out specific global and regional activities on behalf of the programme and as indicated in the global programme budget (see paragraph 25). Consensus among the cosponsors on policy, strategic and technical matters would be reached primarily through the management structure of the programme. The current functions and resources of the WHO Global Programme on AIDS would be subsumed under the new arrangements.

23. A director would be appointed to head the programme, selected through consultation among the cosponsors. The Director-General of WHO would propose this nominee, so selected, to the Secretary-General of the United Nations, who would appoint the programme director. The appointment process would be effected by the Director-General of WHO.

24. A programme coordinating board, consisting of representation from donor governments, governments receiving cosponsors' funds and services, nongovernmental organizations and the cosponsors, would govern the programme and report to the Economic and Social Council. In addition, the HIV/AIDS activities of each cosponsor and of the joint and cosponsored United Nations programme on HIV/AIDS would be reviewed by the governing body of each cosponsor.

25. To raise resources, a single global programme budget would be drawn up on behalf of all cosponsors. It would be formulated through a participatory process in which the programme's secretariat would agree on both overall programmatic directions and specific activities. The programme budget would include the costs of the programme's staff, and selected activities at global and regional levels. The activities of individual cosponsors would also be included in the global budget, under appropriate programme areas. All cosponsors would assist in fund-raising to meet the global programme budget.

26. The global programme budget would further include financing for specific country activities. This would be used for three purposes. First, funds would be provided for the administrative and operational costs of the programme's country staff (see paragraph 28). Second, funds would be allocated for selected aspects of medium-term plans that remain unfunded and are agreed upon as priorities by the programme. Activities eligible for such financing would include those carried out by ministries other than ministries of health. Third, financial and technical support currently provided by the WHO Global Programme on AIDS to ministries of health would be channelled through the programme.

Country level

27. At country level, the basic structure of the programme would be consistent with the arrangements set out in United Nations General Assembly resolutions 44/211 and 47/199. It relies on the coordination "mandate" of the United Nations Resident Coordinator; the establishment of a committee (or theme group) on HIV/AIDS, composed of the cosponsors and other organizations of the United Nations system; and the designation of one of the cosponsors in each country to chair the committee and coordinate United Nations activities related to HIV/AIDS (see paragraph 40).

28. A country staff member of the programme would be placed in most countries, with supervisory arrangements established by the Resident Coordinator. The primary function of the programme's country staff member would be to assist in coordinating United Nations support to the national response and to act as secretariat to the committee (or theme group) on HIV/AIDS described above.

29. In some countries, governments may request technical support (e.g., consultants, staff) in specific areas related to the epidemic. The committee on HIV/AIDS would provide a forum in which to discuss these requests, in order to ensure an efficient and rational response from the United Nations system. If the organization requested were unable to provide such assistance, the committee would consider two alternatives, namely, financing by another body or by the headquarters of the United Nations programme on HIV/AIDS. The programme would always respond to technical support requested by ministries of health, since all functions and resources of the WHO Global Programme on AIDS would be subsumed under the new arrangements. WHO staff at all levels would be involved in providing this support.

30. The committee established by the Resident Coordinator would assist the government to produce a medium-term plan describing the national response, including all planned activities and the financial requirements for their implementation. The document would reflect the objectives, priorities and activities of the national response, and would include financial support for specific ministries or sectors. Its preparation and distribution would be coordinated whenever possible with the process established to finance other sectors and development plans, such as sectoral consultations and round-tables. All organizations of the United Nations system would support the medium-term plan as the jointly agreed assessment of national needs related to the epidemic. The organizations of the United Nations system in each country would work together to ensure that all aspects of the national response receive adequate funding. Each organization would maintain its own contacts with donors, however, and may fund-raise individually, as long as the activities for which it seeks support are included in the medium-term plan.

V. IMPLICATIONS OF THE PREFERRED OPTION

31. The preferred option builds upon the existing structure of the WHO Global Programme on AIDS and the knowledge and experience of the six organizations in responding to the HIV/AIDS pandemic. At the same time, it recognizes HIV/AIDS as a health problem with major multisectoral consequences, and seeks to ensure a comprehensive response from the United Nations system to the pandemic through the creation of a unified secretariat. The principal implications are set out below according to their relevance to Member States and to WHO.

For Member States

32. A joint and cosponsored United Nations programme on HIV/AIDS, as proposed under the preferred option, ensures a unified response that would reduce duplication of effort and ensure consistency among organizations of the United Nations system with regard to strategic, policy and technical matters. This would be of great benefit in ensuring an appropriate national response to the pandemic.

33. Under such an arrangement, achieving consensus on important policy and strategic matters would be a continuing process that is fully integrated into the management structure of the programme, which would

include representation from all cosponsors. As such, this arrangement ensures day-to-day interaction and a more fundamental integration of ideas and approaches. It would also serve to coordinate more fully the evaluation of new approaches, thus minimizing the confusion faced by governments receiving conflicting technical and policy advice. The close link established between the headquarters and country staff would also help to ensure the implementation of more consistent and coordinated policies and strategies among the cosponsors.

34. The effective functioning of a committee (or theme group) on HIV/AIDS would provide governments with a clearer, more comprehensive view of the financial and technical support available from United Nations organizations. A major objective of the committee on HIV/AIDS would be to strengthen national capability to determine and coordinate a multisectoral response to the epidemic. Organizations of the United Nations system operating at country level would be united in this effort.

35. A combined effort of the United Nations system would also assist governments to coordinate the activities and support of bilateral agencies, which would probably follow the technical and policy consensus of the United Nations system. This may reduce the pressure on national AIDS programmes to adjust planning, evaluation and reporting activities to the demands of individual donors.

36. The preferred option ensures the joint formulation of and resource mobilization for a single global appeal and coordinated fund-raising at country level to meet the needs of medium-term plans. Stronger, more universal support for the medium-term plan would facilitate overall fund-raising and would minimize confusion over country needs and priorities.

37. All the above efforts should accelerate national responses to the epidemic and ensure the appropriate scope and effectiveness of those responses.

For WHO

38. The preferred option builds upon the knowledge and experience of the Global Programme on AIDS. By administering a cosponsored United Nations programme on HIV/AIDS, WHO would also maintain high visibility and global leadership for this significant global health problem.

39. Under this option, WHO would maintain all its current functions, in addition to administering a secretariat which would assume overall responsibility for policy and technical guidance for the United Nations system. Under the other two options, many of the policy and coordination functions of the Global Programme would be transferred to an interagency secretariat; the Programme would maintain only its current health-related, technical functions.

40. By ensuring consistency with United Nations General Assembly resolution 47/199, which reinforces the coordination mandate of the Resident Coordinator, the United Nations programme would be in line with the general direction of reform of the United Nations system. It is expected that, in most countries, the chair of the committee on HIV/AIDS established by the Resident Coordinator would be the WHO Representative, which would strengthen the role played by WHO in relation to both the national government and to other organizations of the United Nations system.

41. The current relationship of WHO to ministries of health, including financial and technical support, is fully incorporated into the United Nations programme. This should reinforce the role of the ministry of health as a key actor in development and coordination of the national response, even as the emergence of more multisectoral national AIDS programmes ensures the involvement of other ministries. This in turn should benefit ministries of health in other health-related areas requiring multisectoral action.

42. Current activities of the Global Programme related to research and product development would continue in the context of a United Nations programme, ensuring that they would remain of high priority and relevance both globally and at country level, as the pandemic evolves.

VI. LAUNCHING THE JOINT AND COSPONSORED UNITED NATIONS PROGRAMME ON HIV/AIDS

43. It is proposed to establish mechanisms to execute the preferred option, as described in paragraphs 17 to 30. They would include an interagency working group with representation from the six organizations which prepared the study (see document EB93/INF.DOC./5). Other groups, such as the Management Committee's Task Force on HIV/AIDS Coordination, would be involved at key points in the process, as they were in producing the study report. The concerns expressed by the World Bank (see paragraph 20) will be discussed in depth by the interagency working group, with a view to resolving them and to obtaining the World Bank's agreement to become a cosponsor. The Director-General believes that full participation of the World Bank is important, given its substantial investment in HIV/AIDS and its influence and prestige in the social sectors.

44. The knowledge and experience of WHO regional and country offices would be used to the fullest extent possible in the process of making the programme operational. The Director-General has indicated his intention to set up a working group for this purpose. The challenge facing WHO is to administer a United Nations programme on HIV/AIDS that is "co-owned" by organizations that have significantly different regional and country structures. As the administering agency, WHO must build upon its own mechanisms while accommodating the operating procedures of the other cosponsors.

45. The governance structure proposed for the programme is very similar to that of other cosponsored programmes administered (or executed) by WHO (e.g., the Special Programme for Research and Training in Tropical Diseases, or the Special Programme of Research, Development and Research Training in Human Reproduction). The proposed programme coordinating board will have balanced representation from developing countries. In addition, the Executive Board and the Health Assembly would review the programme and advise on the role of WHO both as a cosponsor and as the administering agency.

46. It is estimated that the programme could begin operations in mid-1995 and be fully under way by the 1996-1997 biennium. The Director-General could report on progress made in this regard to the Executive Board at its ninety-fifth session in January 1995.

VII. ACTION BY THE EXECUTIVE BOARD

47. The Executive Board is invited to consider the establishment of a joint and cosponsored United Nations programme on HIV/AIDS in accordance with the preferred option and the measures proposed to launch the programme during 1994. Its recommendations will be shared with the governing bodies of the other cosponsors, and will provide the basis for further discussions on the structure and operation of the programme.



世界衛生組織執行委員會決議

قرار المجلس التنفيذي لمنظمة الصحة العالمية

RESOLUTION OF THE EXECUTIVE BOARD OF THE WHO
RÉSOLUTION DU CONSEIL EXÉCUTIF DE L'OMS
РЕЗОЛЮЦИЯ ИСПОЛНИТЕЛЬНОГО КОМИТЕТА ВОЗ
RESOLUCION DEL CONSEJO EJECUTIVO DE LA OMS

Annex II

Ninety-third Session

EB93.R5

Agenda item 9

21 January 1994

Joint and cosponsored United Nations programme on HIV/AIDS

The Executive Board,

Taking into account resolution WHA46.37 adopted by the Forty-sixth World Health Assembly in May 1993 calling for a study on a joint and cosponsored United Nations programme on HIV/AIDS to provide for global coordination of policies, approaches and funding;

Having reviewed the resulting study¹ and the Director-General's comments on that study;²

Welcoming the emerging consensus which supports a United Nations programme on HIV/AIDS designed in accordance with option A as set forth in documents EB93/27 and EB93/INF.DOC./5 (hereinafter referred to as the consensus option);

Recognizing the need for improved coordination and better use of internal and external resources in providing a multisectoral as well as a unified response to the AIDS pandemic;

Reaffirming WHO's constitutional mandate to act as the directing and coordinating authority for international health work;

Stressing the importance of the government's role as principal coordinator of national response to the HIV/AIDS epidemic, including the institutional role of the ministries responsible for health in the programming, implementation and evaluation of health measures,

1. RECOMMENDS the development and eventual establishment of a joint and cosponsored United Nations programme on HIV/AIDS, to be administered by WHO, in accordance with the consensus option;

2. REQUESTS the Director-General:

(1) to explore with the Secretary-General of the United Nations and the executive heads of the United Nations Children's Fund, United Nations Development Programme, United Nations Population Fund, United Nations Educational, Scientific and Cultural Organization, and the World Bank ways and means to facilitate the further development of this consensus option actively involving the Task Force on HIV/AIDS Coordination of the Management Committee of the WHO Global Programme on AIDS in this process;

¹ Document EB93/INF.DOC./5.

² Document EB93/27.

- (2) to bring this resolution to the attention of the executive heads encouraging them to invite their governing bodies at their meetings in 1994, to join the WHO Executive Board in recommending the establishment of a joint and cosponsored United Nations programme on HIV/AIDS and to have their organizations become cosponsors in accordance with the consensus option;
 - (3) to report on this resolution to the World Health Assembly in May 1994;
3. REQUESTS the Director-General to invite the Secretary-General to recommend to the Economic and Social Council that it endorse the establishment of this programme at its 1994 session.

Eighth meeting, 21 January 1994
EB93/SR/8
