



Minutes of the
18th Executive Board Meeting
12 - 13 December 2013

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1. Executive Summary

- ❖ The UNITAID Executive Board Meeting (EB18) was held 6th-7th June 2013 at the WHO Headquarters in Geneva, Switzerland. The meeting commenced at 09.30 on 6th June 2013 and finished at 15.45 on 7th June 2013.
- ❖ The CHAIR OF THE EXECUTIVE BOARD thanked UNITAID's Executive Board members and the Secretariat for their hard work in preparing for the Executive Board Meeting.
- ❖ The EXECUTIVE BOARD went into restricted session and re-elected Mr Philippe Douste-Blazy as the Chair of the Executive Board (Resolution N° 1).
- ❖ The EXECUTIVE BOARD adopted the agenda after the order of agenda items on the second day had been modified, and approved the minutes of the last meeting of the Executive Board (EB17).
- ❖ The CHAIR OF THE EXECUTIVE BOARD and the EXECUTIVE DIRECTOR of UNITAID updated the Executive Board on progress since EB17.
- ❖ The CHAIR OF THE FINANCE AND ACCOUNTABILITY COMMITTEE (FAC) presented his report. The EXECUTIVE BOARD approved the UNITAID Audited Financial Statements for the year ended December 31, 2012 (Resolution N° 2), the 2013 Revised Budget (Resolution N° 3) and the Risk Management Policy (Resolution N° 4).
- ❖ The new CHAIR OF THE POLICY AND STRATEGY COMMITTEE (PSC), Mr Philippe Meunier replaced Ms Mireille Guigaz, who is now Vice Chair of the Global Fund. The PSC CHAIR reported on the implementation of the new Strategy; issues related to the Quality Assurance Framework; and possibilities for collaboration with the Global Fund. The Advisory Group on Funding Priorities (AGFP) will be dismantled and the Proposal Review Committee (PRC) restructured.
- ❖ The implementation plan for the Strategy for 2013-2016 and the management responses to the Five Year Evaluation (5YE) were discussed.
- ❖ The SECRETARIAT outlined an initiative to support the new WHO recommendations for first line adult antiretroviral (ARV) therapy (ART). The EXECUTIVE BOARD agreed, in principle, to consider funding the intervention, as described in the Board document, to a ceiling of US\$77 million in collaboration with other key stakeholders (Resolution N° 6).
- ❖ The UNITED KINGDOM was re-elected as the Chair of the Finance and Accountability Committee and France as the Chair of the Policy and Strategy Committee (Resolution N° 7).
- ❖ The creation of a Steering Group on Governance Issues was agreed upon (Resolution N° 8).
- ❖ The evolution of the Proposal Review Committee was discussed and Resolution N° 9 was approved as the methodology for this process to take place.
- ❖ The proposal from CHAI and PFSCM entitled *Innovation in paediatric market access* was reviewed with interest. The EXECUTIVE BOARD instructed the

Secretariat to secure further information on the key concerns raised by the Proposal Review Committee and to present proposals for a funding decision at the next Board session. The EXECUTIVE BOARD wished to underline its strong commitment to avoiding any risk of stockouts for countries remaining within the CHAI Paediatric ARV Project, pending transition. The EXECUTIVE BOARD therefore asked the Secretariat to assess the need for any extension of the Project into 2014; an Executive Board decision can be taken by e-vote before the next Board session, if necessary. Resolution N° 10, which summarised these actions, was approved.

- ❖ An update on Operations was provided by the SECRETARIAT.
- ❖ Updates on UNITAID's relationships with PEPFAR, the Global Fund and the Medicines Patent Pool, as well as UNITAID's recent communication activities and the UNITAID in country consultation in Mozambique, were provided to the Executive Board.
- ❖ The calendar for Executive Board meetings in 2013 and 2014 and other events, such as the Consultative Forum, was discussed. The CHAIR OF THE EXECUTIVE BOARD requested that the Secretariat present proposals and budgets for the forthcoming meetings to the Executive Board by electronic means.
- ❖ The CHAIR OF THE EXECUTIVE BOARD thanked the FAC and PSC Chairs and the other Executive Board members for their constructive contributions. HE also thanked the Secretariat for organising the meeting. The 18th Session of the UNITAID Executive Board closed at 15.45 on Friday 7th June 2013.

2. Welcome and opening of the session

The CHAIR OF THE UNITAID EXECUTIVE BOARD, Mr Philippe Douste-Blazy, welcomed the participants to the 18th Executive Board meeting (EB18), which was held 6th-7th June 2013 at the WHO Headquarters in Geneva, Switzerland. The meeting commenced at 09.30 on 6th June 2013.

The CHAIR OF THE EXECUTIVE BOARD thanked UNITAID's Board members and the SECRETARIAT for their hard work in preparing for the Executive Board Meeting.

The CHAIR OF THE EXECUTIVE BOARD sent the meeting's condolences to Nelson Otwoma, a representative of the COMMUNITIES LIVING WITH THE DISEASES, and wished him and his family the strength to cope with the tragedy that they had recently experienced.

Election of the Chair of the Executive Board

The EXECUTIVE BOARD went into restricted session, which was chaired by the VICE-CHAIR OF THE EXECUTIVE BOARD, and re-elected Mr Philippe Douste-Blazy as the CHAIR OF THE EXECUTIVE BOARD, following the election process that was adopted in 2010 (Resolution N° 1). His term of office will commence upon the adjournment of the 18th Session of the EXECUTIVE BOARD and shall end upon the adjournment of the first regular EXECUTIVE BOARD meeting in 2016.

DECISION

**Mr Philippe Douste-Blazy was re-elected as
the CHAIR OF THE EXECUTIVE BOARD (Resolution N° 1).**

The meeting of the EXECUTIVE BOARD went into open session after the election.

Adoption of the agenda

The agenda for the EXECUTIVE BOARD meeting was adopted after the order of agenda items on the second day had been modified.

DECISION

**The EXECUTIVE BOARD adopted the agenda for EB18 after the order of agenda items
on the second day had been modified.**

Minutes of EB17

The EXECUTIVE BOARD approved the minutes of the last meeting of the EXECUTIVE BOARD (EB17). NORWAY requested that the papers for each EXECUTIVE BOARD meeting should be sent to the attendees at least two weeks before the meeting, as per the agreed Board Operating Procedures (BOPs), so that they have time to prepare for the meeting. This was not achieved for some documents for EB18. The CHAIR OF THE EXECUTIVE BOARD agreed that background papers should be sent out at least two weeks before the meeting.

DECISION

The EXECUTIVE BOARD approved the minutes of the EB17

Overview of progress since EB17

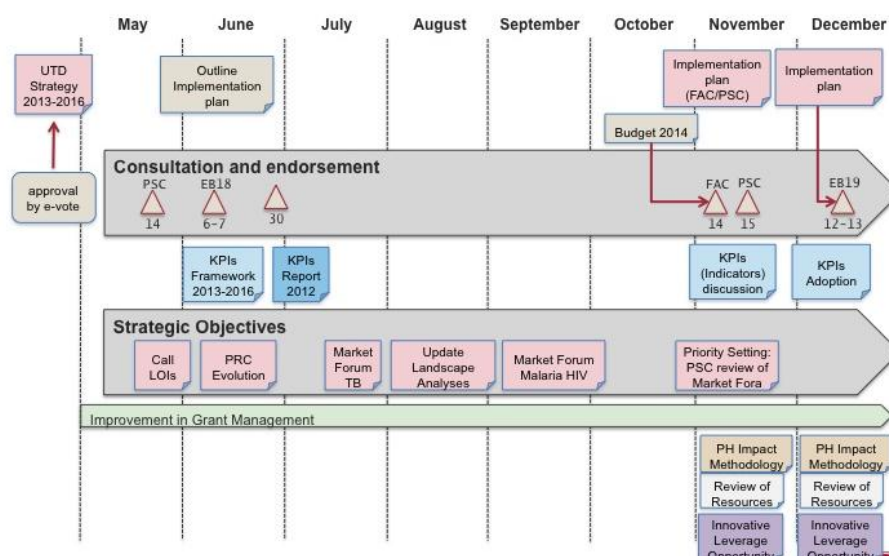
The CHAIR OF THE EXECUTIVE BOARD updated the EXECUTIVE BOARD on his activities since EB17. He said that he saw his role as publicising the sustainable and predictable role of innovative financing in raising money for healthcare and development on a global scale. He holds meetings with heads of state and other interested parties in order to encourage countries to support UNITAID via innovative financing. He also helps to build relationships with UNITAID's partners, such as the Global Fund, the President's Emergency Plan for AIDS Relief (PEPFAR), Roll Back Malaria, the World Health Organisation (WHO), etc. He stressed the need for regular meetings with the SECRETARIAT and praised their hard work in developing the UNITAID Strategy for 2013-2016.

The EXECUTIVE DIRECTOR of UNITAID presented a report on the Secretariat's activities since the last Executive Board meeting. He congratulated the Chair of the Executive Board on his re-election. He stressed the Secretariat's commitment to good governance and efficiency. The EXECUTIVE DIRECTOR thanked the Executive Board for their interactions with the Secretariat and their input during the process of developing the updated Strategy. HE expressed his pleasure that the updated Strategy had been approved by the Executive Board and noted that it was now being implemented. Memoranda of understanding (MOU) have been signed for all of the grants approved at EB17 except for one (TB Alliance; signature is expected before the end of June). A more streamlined way of working on grants has been developed and it is intended that deadlines will be met in a shorter time frame in the future. Discussions about the reform of the Proposal Review Committee (PRC) and the revised Key Performance Indicators (KPIs) are in progress. The EXECUTIVE DIRECTOR expressed the hope that the draft KPIs as well as the governance issues will be reviewed during an Executive Board retreat. The Executive Board was requested to vote for a Steering Committee on Governance at this session. Preliminary discussions on the measurement of public health impact are underway with partners and academic institutions.

The SECRETARIAT is improving its working practices so that it can work more efficiently and more quickly in the future. The aim is to reduce bureaucracy and improve financial procedures. The current Director for Operations, Raquel Child, will retire at the end of July 2013 and the new Coordinator for Operations will start work on 17th June 2013, so the handover of responsibilities will be smooth. The SECRETARIAT is developing closer relationships with its partners and donors, as well as improving its presence on social media and the Internet.

The EXECUTIVE DIRECTOR reported that the Secretariat has received a proposal from a private sector supporter to sponsor a tour of various African countries in a plane, which would be decorated with UNITAID's colours. The plans for the implementation of the updated Strategy are progressing well (Figure 1). Discussions are taking place about the evolution of the PRC and planning is in progress for the Market Fora and the Consultative Forum. The revised UNITAID budget includes a zero growth allocation for Secretariat expenditure.

Figure 1: Implementation of UNITAID Strategy 2013-2016



Discussion

- ❖ NORWAY commented that the document “Summary of Actions following Executive Board Resolutions” was very useful and requested that its update by the Executive Director becomes a regular agenda item at meetings of the Executive Board.
- ❖ The UNITED KINGDOM reminded the meeting that, during the recent PSC, it was agreed that a two page, condensed version of the Strategy Framework would be made available. The UNITED KINGDOM accepted that the implementation plan was quite ambitious but called for it to be submitted to the Executive Board before the next Executive Board meeting. More detail on the 2014 budget is required before mid December so that informed decisions can be made in a timely fashion. The UNITED KINGDOM requested more information on the objectives for the Pre Qualification programme to ensure that it is aligned with UNITAID’s Strategic Objectives. The CHAIR OF THE EXECUTIVE BOARD agreed with the United Kingdom.

The EXECUTIVE DIRECTOR replied that the Strategy is already being implemented but said that certain items, such as measuring public health impact, would require more research, which will take a few months, before they can be finalised. He agreed that the Secretariat could develop the implementation plan and budget more quickly than described in Figure 1. The EXECUTIVE DIRECTOR agreed with the United Kingdom about the Pre Qualification programme and said that he had taken note of the need for the two page summary of the Strategy.

DECISION

The EXECUTIVE BOARD took note of the progress report from the Secretariat.

3. Report of the Finance and Accountability Committee

The CHAIR OF THE FINANCE AND ACCOUNTABILITY COMMITTEE (FAC) reported on the recent productive meeting of the committee. The FAC had endorsed the 2012 audited financial statements, a proposed increase of US\$24.7 million in the 2013 expense budget and the risk management policy. These recommendations were submitted to the Board for approval.

The FAC report also included information on the following items: grant financial performance; resource mobilisation; the funding ceiling for 2013 (US\$144 million); financial management policies and guidelines; quality management of grants; fraud awareness and prevention; internal and external audit status; activity reports from the Chair and Civil Society Delegation; results of two benchmarking exercises concerning the Office of the Chair and UNITAID's travel policy; the FAC workplan and feedback on the FAC self-assessment.

Discussion

- ❖ The NGOs expressed concern that Stakeholder Conflict of Interest was not being handled in a formal way. The routine implementation of the Conflict of Interest provisions outlined in the UNITAID policy (2007) was requested.
- ❖ The COMMUNITIES LIVING WITH THE DISEASES (the COMMUNITIES) suggested that this policy and its enforcement should be reviewed by an Ethics Committee .
- ❖ SPAIN confirmed the country's ongoing commitment to UNITAID and thanked the Board for maintaining SPAIN's seat despite its inability to make contributions recently. SPAIN explained that the country is unlikely to be in a position to make contributions in the near future because it is still in a period of economic crisis.

In response to the CHAIR's suggestion that the Spanish government could consider raising funds through innovative financing with the introduction of a one euro tax on airline tickets, SPAIN said that the government had already rejected this idea as it could jeopardise Spain's valuable tourist industry. FRANCE reassured SPAIN that, despite initial fears, the airline tax had had no impact on its own tourism industry. It was agreed that the Chair should write to the Spanish Ministry of Foreign Affairs to suggest that an airline tax could be a solution for fund raising in the future.

- ❖ THE COMMUNITIES emphasised their readiness to provide practical support on the ground for mobilising resources across all countries including Member States.

DECISIONS

The EXECUTIVE BOARD approved the following Resolutions:

UNITAID Audited Financial Statements for the year ended December 31, 2012 (Resolution N° 2)

2013 Revised Budget (Resolution N° 3)

Risk Management Policy (Resolution N° 4).

4. Report of the Policy and Strategy Committee

The new CHAIR OF THE POLICY AND STRATEGY COMMITTEE (PSC), Mr Philippe Meunier recognised the valuable contribution of his predecessor, Ms Mireille Guigaz, who has taken up the position of Vice Chair of the Global Fund.

The PSC report focused on Operations, Quality Assurance, Strategy implementation and a possible collaboration with the Global Fund.

At the end of May, 18 grants were under management with a further six grants awaiting imminent signature. Problems and delays had occurred in finalising the PSI grant; the 'lessons learned' had led to a revision of the grant management process. Mid-term and end of project reviews were discussed; the Secretariat was asked to reconsider the project evaluation strategy for the next meeting.

The Secretariat is in the process of implementing the new Strategy. This includes dismantling the Advisory Board for Funding Priorities (AGFP); restructuring the Proposal Review Committee (PRC); issuing a Call for Proposals based on the new strategic objectives; and updating the Key Performance Indicators (KPIs). Work is also ongoing on market landscapes and preparation of the market fora.

The PSC recommended that the Executive Board examine an opportunity to collaborate with the Global Fund on a project to switch patients to a new first-line HIV regimen in line with WHO guidelines.

Discussion

- ❖ There were no comments or questions on the PSC report.

DECISION

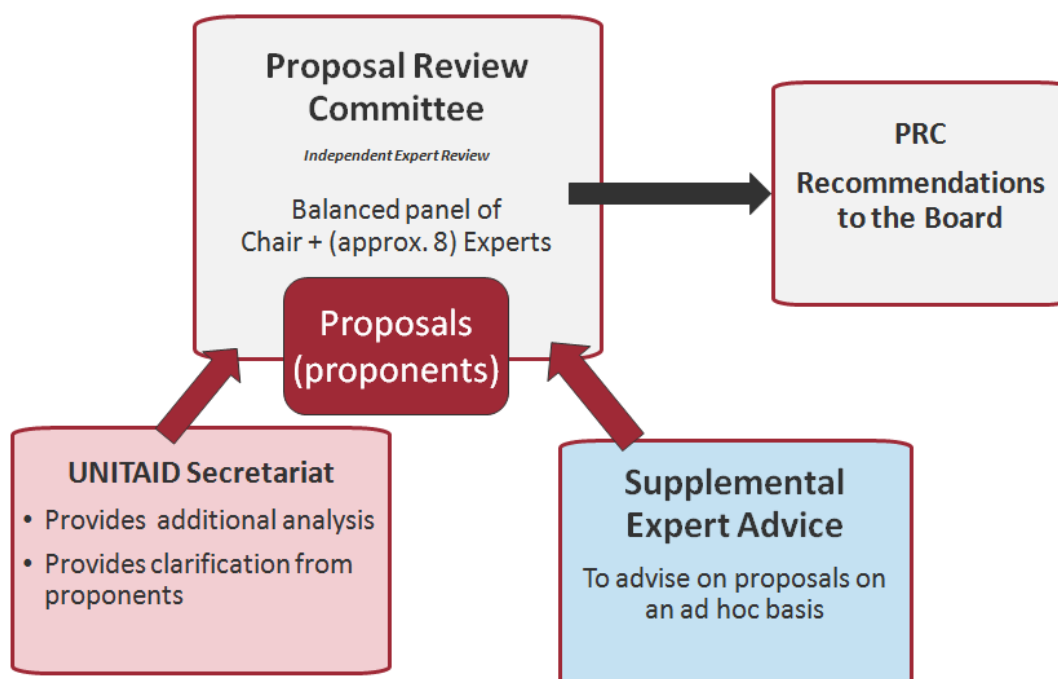
The EXECUTIVE BOARD took note of the PSC report.

5. Evolution of Expert Groups: Proposal Review Committee

The DEPUTY EXECUTIVE DIRECTOR began his presentation by stressing that the changes to the PRC represented an 'evolution and not a revolution' that would optimise the process of proposal review.

The new PRC will be a smaller group composed of the current chairman plus 8-12 experts. Its role will continue to be to provide in-depth, independent reviews of proposals to the Board. PRC members should possess solid knowledge of one of the three diseases and have both country and global health experience. Additional external expertise can be sought by the PRC as required. Information, analysis and support will also be available from the SECRETARIAT.

Figure 2: The new Proposal Review Committee



The CHAIR OF THE PRC explained that the PRC had to ensure that it was able to access broad expertise and the latest pertinent information. He welcomed the greater involvement of the Secretariat but emphasised that the Executive Board would always receive a totally independent review. The PRC CHAIR confirmed his willingness to continue in the role of Chair. He stressed that the recruitment process for both the PRC members and the ad hoc experts should be flexible and transparent. Eight core PRC members would, in his opinion, be an absolute minimum because there might be conflicts of interest that would prevent some PRC members from contributing to certain proposal reviews. He would therefore prefer the upper limit of the acceptable number (10-12). The PRC CHAIR reassured the Executive Board that, although the mandate of the current Committee finishes at the end of October, there would be sufficient time to review proposals from the Call that was issued in May 2013.

The PRC Chair and the Secretariat will work with the PSC to compile a shortlist of potential PRC members for approval at EB19. The current PRC will remain intact until the new PRC becomes operational in 2014.

Discussion

- ❖ The EXECUTIVE BOARD praised the high quality reviews produced by the current PRC. Nevertheless, the EXECUTIVE BOARD understood the need for restructuring to improve efficiency and supported the proposed changes.
- ❖ The UNITED KINGDOM recommended that eight should be the maximum number of PRC members because the Committee would be able to access to external experts as well. Job descriptions and Terms of Reference (ToRs) would be required for PRC members, as well as contracts for the external experts. The SECRETARIAT informed the Executive Board that it is already working with the WHO on these documents.
- ❖ The NGOs were supportive of a PRC composed of approximately 10 experts. They offered to assist with the selection of PRC members.
- ❖ The CHAIR OF THE PRC reiterated that eight experts is the absolute minimum to ensure that the PRC can cover all of the diseases and relevant issues. He pointed out that if there is a conflict of interest or if one or two PRC members are unable to attend the meeting, the committee will not be able to function effectively. He would prefer the upper limit of the acceptable number (10-12) and not the lower limit (8).
- ❖ The COMMUNITIES emphasised the importance of transparency in the selection process for new PRC members and urged for adherence to the Conflict of Interest policy. The CHAIR OF THE PSC proposed that the PSC could review the nominations instead of setting up a special Nomination Sub-Committee for this task.
- ❖ The NGOs suggested that the PRC should have the option of approving any ad hoc advisors without Board approval.
- ❖ The UNITED KINGDOM recommended that, as for the other Committees, the PRC should be obliged to undergo a self-assessment process.

DECISION

**The EXECUTIVE BOARD approved resolution N°9:
Approval of the evolution of the Proposal Review Committee.**

6. KPIs Framework

The SECRETARIAT presented the framework for revised KPIs to reflect the new UNITAID Strategy 2013-16. The framework is based on the following principles:

- Maintain consistency in measurement – key indicators related to financial and grant performance show trends and progress over time
- Update terminology to be consistent with UNITAID Monitoring and Evaluation (M & E) – areas become ‘outcomes’ and actions become ‘outputs’
- Keep three ‘Areas’ in the KPIs to provide consistency
- Monitor Strategic Objectives and Core Areas

Each outcome is linked to the Strategy in terms of objectives, core action areas, as well as grant management and performance.

Following Executive Board approval of the KPI Framework, the SECRETARIAT proposed that the indicators should be reviewed by the FAC and PSC in November 2013, and then submitted to the Board in December 2013 for approval.

Discussion

- ❖ Several EXECUTIVE BOARD MEMBERS expressed concern about the timelines for developing the revised KPIs. The GATES FOUNDATION asked whether a first draft of the KPIs could be presented at the Board retreat in September. This proposal was supported by all of the Executive Board.
- ❖ The SECRETARIAT confirmed that it would be possible to accelerate the KPI revision for review at the Executive Board retreat; however, external support would be welcomed because of the Secretariat’s heavy workload over the summer months.
- ❖ The COMMUNITIES underlined the importance of including impact assessment, whilst BRAZIL wanted to ensure that the recommendations from the 5YE would be taken into consideration.
- ❖ The NGOs observed that cross-cutting activities should be included in the evaluation.

DECISION

**The Executive Board endorsed the KPI framework.
The Secretariat will present updated KPIs to the Board in September 2013.**

7. Strategy 2013-2016

Strategy implementation update

The DEPUTY EXECUTIVE DIRECTOR provided an update on the Strategy implementation plan (Figure 1). He explained that a considerable amount of work has already been done on implementing the Strategy: a call for proposals was issued in May 2013 and an electronic submission process is being used for the first time. The PRC will meet in November 2013 to review the proposals submitted between May and September 2013. The Market Landscapes are being updated and three Market Fora are planned for 2013. Changes to the PRC will be implemented in late 2013. The 2012 report on KPIs will be ready on 30 June 2013 and the update of the KPIs will be available in September 2013. A number of policies are being developed: Quality Assurance; an Evaluation Policy review; and revision of the FAC guidelines. A Governance Review will take place and the risk management process will be updated. Quality management is ongoing: new grant development tools are being implemented to improve the grant management process. Information on these tools was presented to the FAC and PSC in May 2013.

Methodologies to improve the KPIs for 2013-2016 and to measure the public health impact of UNITAID's projects are being developed. The DEPUTY EXECUTIVE DIRECTOR acknowledged the useful input from the PSC in March and May 2013. Work on the Resource Mobilisation Plan and the Country Engagement Plan is in progress.

The human resource plan for the Secretariat is being updated to reflect the changing roles and skills required to implement the Strategy and to improve its efficiency. Priorities will be revised, depending on the outcome of the Market Fora. The Innovative Grant Process is being developed so that proposals in innovative areas or from new partners can be encouraged. A Work Plan for the five core action areas is in progress. The Secretariat intends to present the full implementation plan for 2014 and 2015 to the PSC, FAC and EXECUTIVE BOARD in December 2013.

Discussion

- ❖ There were no questions or comments on the report from the Deputy Executive Director.

DECISION

The Executive Board took note of the report on the implementation of the Strategy 2013-2016.

Management response to the recommendations of the 5YE

The EXECUTIVE DIRECTOR provided a summary of the management response to the 17 recommendations made in the report on the Five Year Evaluation (5YE); a detailed response has been provided to the EXECUTIVE BOARD. The SECRETARIAT'S responses are integrated into the Strategy 2013-2016 and the EXECUTIVE DIRECTOR said that all of the recommendations are being followed. The three main areas covered are funding and resource mobilisation; engagement with country stakeholders and partners; and improving UNITAID's operations. The aim is to maintain and improve UNITAID's current business model.

Discussion

- ❖ The UNITED KINGDOM expressed satisfaction that the 5YE recommendations are being followed. However, he considered that some responses are less well developed than others; for example, the response to the recommendation on stakeholder consultations describes only activities rather than a theory-based approach. The UNITED KINGDOM called for better integration between the management responses and the implementation of the Strategy. He suggested that the revised human resource plan is needed sooner than mid-2014 because it has implications for the 2014 budget. The UNITED KINGDOM said that he wished to consult with the DFID evaluation team before agreeing with the management response to the 5YE. NORWAY agreed with the UNITED KINGDOM about the need for more time to evaluate the management response: she noted that a Norwegian multi lateral review of UNITAID had given the organisation a low score on monitoring and evaluation and wished to explore this issue in more detail. The GATES FOUNDATION concurred with the UNITED KINGDOM and NORWAY about the need for more time to review the document. BRAZIL supported the view of the UNITED KINGDOM that the human resource plan should be finalised before mid-2014. The EXECUTIVE DIRECTOR agreed that more time is needed for the EXECUTIVE BOARD to comment on the document. He added that it would be useful to have feedback from the EXECUTIVE BOARD. The human resource plan will be accelerated.
- ❖ The COMMUNITIES thanked the SECRETARIAT for describing them as strong partners. The terms of reference (TOR) for the community support team are currently being updated. The COMMUNITIES noted that middle income countries were not mentioned in the response and asked that this be remedied since working proactively with middle income countries can generate significant market impact. BRAZIL concurred with the COMMUNITIES about the need to work with middle income countries. The EXECUTIVE DIRECTOR agreed about the importance of middle income countries and explained that this is articulated in the Strategy 2013-2016 rather than in the response to the 5YE. The SECRETARIAT is working hard to engage middle income countries on suitable projects.
- ❖ BRAZIL congratulated the SECRETARIAT on its work on the KPIs. Links between the response to the 5YE and the implementation of the Strategy are essential.
- ❖ The GATES FOUNDATION stressed the need to work on the Resource Mobilisation Plan and called for a strategy in this area to be developed before the end of 2013. The EXECUTIVE DIRECTOR concurred: the SECRETARIAT plans to deliver a draft strategy on resource mobilisation to the EXECUTIVE BOARD at the Board Retreat in September 2013.
- ❖ The NGOs noted that they were generally in agreement with the management response to the 5YE. However, they requested a timeline for the open and targeted calls in relation to the Strategic Objectives. Although they considered that the Monitoring and Evaluation (M&E) function should remain within the Operations department, they would appreciate a review of M&E's role before the next 5YE. The NGOs requested more information on who, within UNITAID, would engage with national authorities in order to lobby for policy changes. They suggested that Civil Society Organisations are the best placed to advocate

for change at the country level. The EXECUTIVE DIRECTOR explained that the M&E Unit monitors the projects but the evaluations are carried out by independent evaluators, under the guidance of the M&E Unit. Independent evaluations of the projects are carried out mid term and at project completion.

DECISION

The EXECUTIVE BOARD took note of the Management Response to the recommendations of the 5 Year Evaluation.

8. Proposal from CHAI and PFSCM: Innovation in paediatric market access (IPMA)

The proposal from CHAI and PFSCM entitled *Innovation in paediatric market access* was reviewed with interest. The PRC CHAIR explained that the Proposal Review Committee had had serious concerns about the feasibility of the proposal unless there was a major shift in the Global Fund's approach to the voluntary pooled procurement of paediatric ARVs and recommended that it should not be funded. The PROPOSAL REVIEW COMMITTEE was, however, unwilling to jeopardise the gains achieved via UNITAID's support for the fragile paediatric ARV market. The existing mechanism for supporting the paediatric ARV market will be in place until the end of 2013.

The EXECUTIVE BOARD instructed the Secretariat to secure further information on the key concerns raised by the Proposal Review Committee and to present proposals for a funding decision at the next Board session.

The EXECUTIVE BOARD wished to underline its strong commitment to avoiding any risk of stockouts for countries remaining within the CHAI Paediatric ARV Project, pending transition. The EXECUTIVE BOARD therefore asked the Secretariat to assess the need for any extension of the Project into 2014; an Executive Board decision can be taken by e-vote before the next Board session, if necessary.

Discussion

- ❖ The CHAIR suggested that discussions be held on the paediatric ARVs with the Global Fund in order to establish a collaborative solution to this issue. FRANCE was supportive of this proposal.
- ❖ The GATES FOUNDATION asked how the Global Fund's market shaping strategy on paediatric ARVs interacted with the CHAI/PFSCM proposal. The GATES FOUNDATION suggested that most of the PRC's concerns could be resolved if favourable responses were obtained from the Global Fund, and the committee could then recommend funding for the project in an expedited manner.
- ❖ The DEPUTY EXECUTIVE DIRECTOR explained that the Secretariat has been working with the Global Fund and CHAI on paediatric ARV supply for several years. Only three countries have been unable to transition from the UNITAID project to alternative sources of funding. There is a need to regulate the paediatric ARV market. The Global Fund is reforming its procurement policies and this might provide an opportunity for UNITAID to influence the situation with respect to paediatric ARVs.
- ❖ The NGOs expressed their frustration about the lack of resolution to this issue. Although they acknowledged some unease about imposing central procurement, the paediatric market is so fragile that central purchasing appears to be the only option to protect it. The NGOs would be prepared to support an extension to the existing UNITAID paediatric ARV project if necessary.

DECISION

The EXECUTIVE BOARD approved Resolution N° 10 in relation to paediatric ARVs.

9. Executive Session

DECISION

**The EXECUTIVE BOARD approved a resolution on Secretariat management
(Resolution N° 5).**

10. Update on Partnerships: the Global Fund and PEPFAR

Report from PEPFAR

MR MICHAEL JOHNSON (GLOBAL FUND Attaché, United States Mission to the UN) explained that PEPFAR had not been originally designed to work in partnership with other organisations or to create sustainable solutions because it was seen as an emergency response to the AIDS epidemic. During the past five years, the need to work in partnership has created a new perspective within PEPFAR and relationships are being built with host governments and multilateral organisations, such as the Global Fund and UNITAID. The aim is to increase the level of interactions with UNITAID and meetings are being held with the Secretariat to establish efficient ways of working together that leverage the gains from both organisations' projects. In particular, PEPFAR would like to collaborate with the Secretariat on defining the public health impact of projects. PEPFAR is very optimistic about the opportunity to work more closely with UNITAID in the future.

Report from the Global Fund

MR CHRISTOPHER GAME (Chief Procurement Officer, Global Fund) explained that the Global Fund had been set up to work in a collaborative manner. The recent reorganisation has provided an opportunity to build better partnerships, including with UNITAID. The GLOBAL FUND regards UNITAID as a key partner in many of its projects. Since the start of 2013, working groups have been set up in HIV, TB and malaria. The GLOBAL FUND is transforming its procurement approach and wants to work more closely with UNITAID, DFID and PEPFAR, especially in setting up joint negotiations with manufacturers so that the organisations can gain leverage each other's projects. The GLOBAL FUND considers that future collaborations with UNITAID will lead to a more effective and rapid delivery of UNITAID-funded products to the populations in need of them.

Discussion

- ❖ The CHAIR thanked all of the presenters and said that UNITAID is enthusiastic about building closer collaborative relationships with their partners.
- ❖ The NGOs said that the relationships between UNITAID, PEPFAR and the Global Fund are critical: UNITAID can assist both PEPFAR and the Global Fund because of its market shaping activities. The NGOs were enthusiastic about the success of joint projects, such as increasing access to GeneXpert, but expressed concern about management of the paediatric ARV market. They suggested that UNITAID, PEPFAR and the Global Fund should work together to ensure that procurement of paediatric ARVs is coordinated and the efficiency of the market is improved. The CHAIR agreed that long term support from its partners is critical to the success of the CHAI proposal and would affect the Executive Board's decision about whether or not to fund the project.
- ❖ PEPFAR acknowledged the fragile and uncoordinated nature of the paediatric ARV market and noted that there is a Coordinated Procurement Group for

paediatric ARVs that meets regularly. PEPFAR suggested that UNITAID consult this Group about methods of improving the paediatric ARV market.

- ❖ The GLOBAL FUND said that they were keen to work urgently with UNITAID on this issue.
- ❖ The UNITED KINGDOM and FRANCE expressed support for collaboration between the Global Fund and UNITAID in this area. They both looked forward to more collaborative projects between the Global Fund, PEPFAR and UNITAID. The CHAIR agreed with this concept and suggested that this was a unique moment to establish partnerships to build healthy markets in the three diseases.

DECISION

The EXECUTIVE BOARD took note of presentations by key UNITAID partners.

11. Support to improve HIV first line treatments

The new WHO guidelines (due end of June 2013) are expected to recommend a switch to tenofovir as a backbone NRTI, preferably as part of a fixed dose combination (FDC). The advantages of tenofovir-based regimens, compared to existing regimens, include: less toxicity than other NRTIs, such as d4T (stavudine); increased robustness; and simplicity of dosing. The EXECUTIVE DIRECTOR explained that switching to tenofovir will have a major public health impact but it will be more expensive than current NRTIs. Even though the WHO has recommended discontinuing the use of d4T since 2006, a significant number of people are still taking the NRTI. The EXECUTIVE DIRECTOR sought approval from the Executive Board to develop a proposal to support the improvement of first line treatments for HIV infection.

The SECRETARIAT (COORDINATOR MARKET DYNAMICS) explained the technical background to the proposal. The new (2013) tenofovir regimens are 2.7 times more expensive than the 2006 d4T-based regimens. FDCs are now preferred over individual drugs but this increases the price by 50%, e.g. the two pill tenofovir/FTC/efavirenz regimen costs US\$ 118 but the one pill FDC costs US\$ 158. Global supply shortages of tenofovir have led to delivery delays and in country stockouts. The global demand for tenofovir is unpredictable and more information is needed about the supply and demand of the drug.

The SECRETARIAT has developed a market intervention to improve the tenofovir market. The key actions are (i) Volume aggregation by combining the demand from the Global Fund and PEPFAR; (ii) Price negotiation on behalf of collaborating organisations; (iii) Targeted price subsidy for all patients who are currently taking d4T purchased with Global Fund monies; (iv) market management; and (v) Demand creation and in-country support. The subsidy would pay the difference between the price of d4T and the negotiated price for tenofovir. The targeted price subsidy would initially be for the full cost of the tenofovir regimen (US\$ 130/patient); in Year 2, it would cover the difference between the price of the d4T regimen price and that of the tenofovir regimen (the premium); and in Year 3, UNITAID would pay 50% of the premium. The current estimate of the maximum cost of this project is US\$ 77 million. The PRC will carry out an independent review of the proposal in an expedited manner.

Discussion

- ❖ The COMMUNITIES were very supportive of the proposal: they want patients to have access to the best anti-HIV therapies. They believe that governments should take responsibility for the healthcare of their citizens and wish to lobby for policy changes to ensure that governments purchase the best drugs available. The COMMUNITIES pointed out that CHAI does not work with communities and suggested that UNITAID could consider funding community activities in future. They expressed concern about the limited competition between manufacturers in the tenofovir market and called for stimulation of competition in this area. The COMMUNITIES sought clarity about the countries that were not included in the proposal. They offered help to ensure the success of this project.

- ❖ The CHAIR OF THE EXECUTIVE BOARD commented that national governments need to educate patients and healthcare workers about the need to switch from d4T. He added that UNITAID must work on the cultural and religious aspects of patient management, as well as the technical issues.
- ❖ BRAZIL, the NGOs, and the GATES FOUNDATION strongly supported the proposal and praised the involvement of multiple stakeholders. Anticipating the 2013 WHO guidelines and encouraging their prompt adoption was viewed very positively. The NGOs sought assurances that the API supplies for tenofovir production will be sufficient and said that it will be necessary to encourage the communities in all 22 countries to lobby for the switch away from d4T. The GATES FOUNDATION called for collaboration with PEPFAR and the Global Fund in the implementation of this project.
- ❖ The GATES FOUNDATION said that the project appeared to have both public health and market impact, although US\$ 77 million seemed a high price for the number of patients to be switched to tenofovir-based regimens. She expressed the hope that the intervention would have a long standing and positive effect on the tenofovir market and called for due diligence to ensure value for money. The GATES FOUNDATION noted that supporting the tenofovir market was marked as a low priority in the Strategy 2013-2016 and so committing US\$ 77 to a low priority issue might appear inappropriate. The COORDINATOR MARKET DYNAMICS explained that improving first line adult antiretroviral therapy is now classed as a medium-high short term priority because of the new WHO guidelines. She noted that the priorities change constantly as new data become available but that it is a challenge to keep the dashboard up to date.
- ❖ The GATES FOUNDATION noted that the Secretariat submitting a concept to the Executive Board was a new approach for UNITAID. She suggested that guidelines should be set up to regulate this approach to ensure proper governance. The UNITED KINGDOM agreed about the need for due process and emphasised the role of the PRC in reviewing the proposal critically.
- ❖ The UNITED KINGDOM was enthusiastic about the proposal but cautioned that there are many aspects of this treatment switch that have not been addressed; for example, the need for diagnostics, updating of national guidelines, pre qualification of a greater number of tenofovir manufacturers, etc. The COORDINATOR MARKET DYNAMICS replied that the Secretariat has good relationships with the WHO Pre Qualification Department; tenofovir and tenofovir-containing FDC pre qualification has been prioritised.
- ❖ The WHO explained that the WHO and its partners are already discussing the implications of the 2013 WHO guidelines at country level with governments. Approximately 26.7 million people will become eligible for therapy once the new guidelines are adopted: at present, approximately 9 million are on therapy. The WHO has an important role in advocating for policy changes, and is particularly keen to work with UNITAID on this aspect of the project.
- ❖ The PRC CHAIR stated that the PRC is available to carry out an expedited and thorough review of the proposal. He noted that there is a sub set of patients who cannot tolerate tenofovir and so alternative regimens must be made

available for these individuals. He also highlighted the potential of the forthcoming WHO study on low dose d4T and said that if the results of this study are positive, there might be a resurgence of demand for d4T. The PRC CHAIR added that there is an important role for d4T in the treatment of children, and d4T supplies must be maintained for this group of patients. He cautioned that country level updating of guidelines is a lengthy process. The PRC CHAIR said that the PRC would carefully evaluate the feasibility of the subsidy, the sustainability of the intervention, and the proposed budgets. He added that, although Mylan has 100% of the market for tenofovir that is purchased by the Global Fund, there are several generic manufacturers of tenofovir that do not supply the Global Fund but do supply national governments, such as South Africa. Gilead has not sought extensive patent protection for tenofovir and so the intellectual property barriers are lower for this drug than for many other antiretrovirals. The COORDINATOR MARKET DYNAMICS thanked the PRC Chair for his comments and said that the proposal would be updated when new information has been received from the Global Fund. She noted that South Africa is using a different tenofovir-based regimen (tenofovir/FTC/efavirenz) from that funded by the donor community (tenofovir/3TC/efavirenz). She expressed the hope that it will be possible to work with South Africa in order to obtain leverage.

- ❖ The COORDINATOR MARKET DYNAMICS explained that most of the d4T is used where the governments are purchasing antiretrovirals from their domestic funds. She noted that it is a challenge to capture data on the entire d4T market. The project is based on the assumption that most governments that adopt the new WHO guidelines will decide to initiate new patients on tenofovir and maintain patients who are already taking d4T on the same drug. One aim of the project would be to encourage governments to switch all d4T-treated patients to tenofovir by minimising the financial burden associated with this change. The UNITAID project should accelerate the expected price reductions and market expansion for tenofovir.
- ❖ PEPFAR noted that switching away from d4T usage had been more challenging than expected at the programme level. It had taken time to ensure adequate drug supply; to train healthcare workers; to update guidelines; and to resolve technical issues.

DECISION

The EXECUTIVE BOARD approved Resolution N° 6 for support to improve HIV first line treatments

12. Update on Operations

The DEPUTY EXECUTIVE DIRECTOR and the DIRECTOR OF OPERATIONS, updated the Executive Board on UNITAID Operations. The DEPUTY EXECUTIVE DIRECTOR explained that a Core Working Group has been set up to provide oversight on project development and management. Lessons learned have been incorporated to improve working practices. Eleven projects have been initiated within the past eight months: this represents 50% of all of the projects that UNITAID has ever implemented. The target of 120 days between Board approval and signature of the MOU has been achieved for 5/6 of the projects approved in December 2012. Signature for the sixth project is expected in mid June 2013.

The DIRECTOR OF OPERATIONS, announced her retirement, which will be effective from July 2013. She described her experience at UNITAID as tremendous and amazing, and expressed the hope that she will continue to support UNITAID in her retirement.

The DIRECTOR OF OPERATIONS, reported that 50% of the current grants (n=11) are classed as robust/acceptable; the remaining 50% are new grants (n=11) and it is too soon to assess them. Twelve mid term and four end of project evaluations have been completed and four more end of project evaluations are in progress. A work plan has been prepared to align the KPIs with the 2013-2016 Strategy. The results for the 2012 KPIs will be available on 30th June 2013.

Discussion

- ❖ The CHAIR commented that it is important to receive regular updates on Operations.
- ❖ The NGOs stated that they are keen to support additional interventions in the malaria market. The DEPUTY EXECUTIVE DIRECTOR responded that follow up activities to the AMFm are under consideration: the Secretariat is landscaping this issue. More intelligence on the ACT market is needed.
- ❖ The NGOs expressed concern that Africa might be disadvantaged because Cepheid is prioritising the supply of cartridges to Asia and India. They sought reassurance that this scenario would not be allowed to develop. The DEPUTY EXECUTIVE DIRECTOR replied that there had been a manufacturing quality issue and the Secretariat is monitoring the situation closely to ensure that the project is not jeopardised.
- ❖ The NGOs enquired about the introduction of the TB line probe assay that UNITAID funded. The DEPUTY EXECUTIVE DIRECTOR expressed disappointment about the substantial increase in price that the manufacturer of the assay has implemented. The Secretariat is following this issue carefully.
- ❖ The NGOs accepted that the current organisation of the strategic rotating stockpile for MDR TB drugs is not ideal, but said that the supply of these drugs still needs to be supported. The DEPUTY EXECUTIVE DIRECTOR explained that it is not within UNITAID's business model to fund a stockpile long term. The Secretariat is discussing the situation with the Global Fund and a review by the Global Fund Strategy, Investment and Impact Committee (SIIC) is expected in July 2013.

- ❖ The NGOs enquired about progress in relation to the validation of the early market entry projects that were approved at EB17.
- ❖ The UNITED KINGDOM commented that the 5YE had highlighted the need to incorporate lessons learned into the grant management process.
- ❖ The UNITED KINGDOM expressed concern that the existence of the rotating stockpile for MDR TB drugs is a disincentive for governments to perform demand forecasting for these drugs. He suggested that the stockpile should become the responsibility of another organisation.
- ❖ The CHAIR OF THE FAC was apprehensive about the budget implications of the CHAI and first line ARV projects since they have not been factored into the project funding ceiling. The DEPUTY EXECUTIVE DIRECTOR reassured the Chair of the FAC that only Phase 1 of the CHAI/UNICEF project has been funded: the design of Phase 2 is still under discussion and no financial commitments have been made.
- ❖ BRAZIL congratulated the Secretariat on the progress it has made in terms of grant development, management and evaluation.
- ❖ The COMMUNITIES expressed the hope that UNITAID will work in Latin America in the future. She asked about the status of a number of projects that were listed as being complete in December 2012 but were still shown as active projects. She also said that transition mechanisms must be clarified. The SECRETARIAT explained that the projects were technically complete but resources were still allocated for end of project activities, e.g. monitoring, and so they were classed as active in this respect. All implementers are aware of the planned completion date of their projects and work towards transition of funding to national governments or other donors.

DECISION

The EXECUTIVE BOARD took note of the update on Operations.

13. Update on the Medicine Patent Pool

MR GREG PERRY (Executive Director, Medicine Patent Pool [MPP]) presented an update on the activities of the Medicine Patent Pool in 2012-2013. In 2012, in licensing activities included: amendment of the Gilead licence agreement, waiving royalties for MPP; having executed licences on 22% (27% with NIH licence) of the portfolio in 2012 (target was 25%); holding negotiations with several other patent holders in 2013; and being awarded the Deal of Distinction by the Licensing Executive Society. Out licensing activities have included: finalising contracts with four new sub-licensees (Aurobindo, Emcure, Hetero, and Laurus); ensuring that generic manufactures are on track to develop the latest FDCs (the Quad pill); quarterly reviews of sub-licensees as part of the License Management Process; and facilitation of technology transfers for elvitegravir and cobicistat.

Twenty new countries have benefited from generic competition for tenofovir and tenofovir-based regimens by purchasing from MPP licensees. The current average price of tenofovir from MPP's sub-licensees is US\$ 50 per patient per year, which is 34% less than the lowest generic price of US\$ 76 in July 2011. MPP sub-licensees have recently received approval from the FDA for tenofovir-containing FDCs.

The ARV Priority List was updated in September 2012 in accordance with the WHO guidelines, and it will be revised again after the 2013 WHO guidelines have been issued. The MPP is developing a strategy to work with middle income countries.

Governance of the MPP has been strengthened and a formal consultative mechanism has been set up with Civil Society and People living with HIV (PLHIV). The MPP passed the full budget audit for 2012 and executed 79% of its 2012 budget.

During the first half of 2013, a licence agreement on paediatric abacavir and a MOU on future paediatric collaborations were signed with ViiV. Negotiations were either initiated or ongoing with Gilead, Roche, BMS, ViiV and Boehringer Ingelheim. Discussions were held with AbbVie, Johnson and Johnson, and Merck. Negotiations about sub-licensing tenofovir were held with two generic companies. Technology transfers were facilitated for the Quad pill and an improved process for emtricitabine (FTC) that will reduce API costs. An evaluation framework has been developed for new and future sub-licensees.

In future, the MPP will focus on building partnerships with companies, government, international donor organisations and Civil Society. UNITAID is carrying out an operational review of the MPP; the results will be presented to the December 2013 meeting of the Executive Board (EB19).

Discussion

- ❖ The NGOs suggested that the MPP be involved in the proposed First Line ARV project. They proposed that the MPP explore the possibilities of in licensing the new anti-hepatitis C drugs and dolutegravir. The NGOs considered that the EXECUTIVE BOARD should work with the pharmaceutical companies to ensure that the licence agreements with the MPP are favourable. The CHAIR OF THE EXECUTIVE BOARD agreed that the MPP should be involved in the First Line ARV project. He accepted that the new anti-hepatitis C drugs are important but cautioned against extending the mandate of the MPP too far. The MPP agreed

that it is important to expand the geographical range of its licences as much as possible. He said that he would be willing to work with all stakeholders in order to achieve this. The terms of reference for the MPP are restricted to anti-HIV drugs at present; he acknowledged that the anti-hepatitis C drugs are extremely interesting and it will be important to increase access to them in resource limited countries.

- ❖ BRAZIL congratulated the MPP on its progress and on achieving its milestones. He stressed the need for partnerships with the middle income countries in order to increase access to anti-HIV drugs. The MPP responded that the organisation is now focusing on technology transfers, including facilitating API supply, as well as licensing agreements. The MPP is keen to establish partnerships with governments or the WHO in order to set up demonstration projects, e.g. the production of paediatric ARVs.
- ❖ FRANCE asked whether new methods of funding the MPP were being sought. The MPP has not yet looked for new sources of funding but this will have to be addressed in the next year. Self funding of the MPP via royalties was considered, but there was concern about potential conflicts of interest and the amount raised would be minimal. Alternative funding scenarios are under consideration.

DECISION

The EXECUTIVE BOARD took note of the update on the Medicines Patent Pool.

14. Election of PSC and FAC Chairs and Governance Issues

Election of the PSC and FAC Chairs

The BOARD re-elected FRANCE as the CHAIR OF THE PSC and the UNITED KINGDOM as the CHAIR OF THE FAC. Both mandates are for a two year period from June 2013.

DECISION

The EXECUTIVE BOARD approved Resolution N°7: Election of PSC and FAC Chairs.

Creation of a Steering Group on Governance Issues

There was consensus that a Steering Group should be established to review issues related to governance and make recommendations to the Executive Board . The group will comprise the Chairs and Vice-Chairs of the Executive Board , the PSC and the FAC. The Secretariat and the legal department of the WHO will support the Steering Group.

Discussion

- ❖ The NGOs observed that they would welcome an opportunity to express an opinion on governance matters.

DECISION

The EXECUTIVE BOARD approved Resolution N°8: Establishment of a Steering Group on Governance.

Location of EB19 and Consultative Forum 2013

During EB17, the CHAIR OF THE AGFP had suggested that the next meeting of the Executive Board (EB19) should be held in Cape Town, South Africa to coincide with the International Conference on AIDS and STIs in Africa (ICASA). The REPRESENTATIVE OF AFRICAN COUNTRIES (SOUTH AFRICA) welcomed the idea of an EB19 in Cape Town. The SECRETARIAT assured the Executive Board that this would not entail an additional financial burden compared to holding the meeting in Geneva were the forthcoming Consultative Forum also be held in South Africa: holding both events in South Africa would increase the cost-effectiveness of these meetings.

Discussion

- ❖ The EXECUTIVE BOARD agreed that EB19 should be held in Cape Town, provided that it could be combined with other meetings and activities to raise awareness of UNITAID and to encourage resource mobilisation in South Africa.
- ❖ The EXECUTIVE BOARD discussed the cost benefit ratio of holding a Consultative Forum in South Africa. Concern was also expressed as to whether the Secretariat would have capacity to organise the Consultative Forum, in addition to its work on Strategy implementation.
- ❖ The UNITED KINGDOM pointed out that the 5 Year Evaluation (5YE) had questioned the necessity of having Consultative Fora when UNITAID already

holds frequent consultations with stakeholders, including three market fora and regular country visits.

- ❖ The Chair concluded that the future of the Consultative Fora was a governance issue, which should be referred to the new Steering Group.
- ❖ In addition to setting up high level political meetings in South Africa, the CHAIR recommended using the trip to arrange meetings with other African countries by enlisting the help of Joy Phumaphi, Executive Secretary of ALMA.

DECISION

The EXECUTIVE BOARD requested the Secretariat to examine the opportunities of holding the Consultative Forum in South Africa and to reconsider if needed the location of EB19.

Calendar of Board meetings for 2013 and 2014 and other events requiring Board members

Dates for the second half of 2013 were confirmed as follows:

- FAC: 14th November
- PSC: 15th November
- EB19: 12th-13th December

The SECRETARIAT is awaiting confirmation of meeting dates from other organisations before finalising the UNITAID dates for 2014.

Discussion

- ❖ It was suggested that the September 2013 Board Retreat could take place via video-conference to reduce the burden of travel. KPIs and governance issues will be discussed.
- ❖ Concern was also expressed on certain dates of the Executive Board meeting in 2014 and the need for a special session in March 2014.

DECISION

The EXECUTIVE BOARD requested the secretariat to follow up to finalise the dates for the Board and the Committees meetings .

15. Update on Communications

The SECRETARIAT, COMMUNICATIONS OFFICER, updated the Executive Board on current communications activities. The UNITAID 2012 Annual Report was launched recently in Paris, during the visit of President Clinton, and the release of the Japanese version was timed to coincide with the Tokyo International Conference on African Development (TICAD). The UK launch of the Annual Report will take place in London in July, and will be supported by presentations to all-party parliamentary groups. A short version of the Annual Report will soon be available in additional languages and on line.

The format of the report is a combination of clear, straightforward messages with simple graphic representation to communicate concepts. Selected stories are used to illustrate how UNITAID delivers results in terms of Public Health impact and how it ensures value for money for its contributors. This editorial approach and design style help to differentiate UNITAID from other Global Health players and will be the basis for all future communications.

The COMMUNICATIONS OFFICER observed that the UNITAID website is fully functioning in both English and French, and that there are frequent communications on social media.

Discussion

- ❖ The EXECUTIVE BOARD congratulated the Secretariat on the 2012 UNITAID annual report. The approach and new house style used for the Annual Report were appreciated.
- ❖ The UNITED KINGDOM encouraged the Secretariat to ensure that communications evolve in a consistent way, showing how UNITAID results are reflected by the KPIs.
- ❖ The GATES FOUNDATION stressed the importance of linking communications with the strategy for Resource Mobilisation. Regular updates to the Executive Board were requested.
- ❖ The CHAIR suggested that original articles on topics such as epidemiology or treatment in resource limited settings could be of interest to scientific journals such as the New England Journal of Medicine or the Lancet. Journal publications would increase UNITAID's credibility with the medical community. Similarly, UNITAID's novel market led approach could attract the attention of the economic press (The Wall Street Journal, Les Echos, Financial Times...). Organising events, such as round table meetings with economists or press conferences, would raise awareness of UNITAID and the concept of innovative financing, thereby creating new further opportunities for resource mobilisation. The SECRETARIAT responded that several initiatives were already being developed along these lines, including activities involving the Medicines Patent Pool.

DECISION

The EXECUTIVE BOARD took note of the Communications Update.

16. In country consultations: Mozambique, March 2013

The SECRETARIAT TECHNICAL OFFICER, EXECUTIVE OFFICE, presented a country visit to Mozambique which had been organised by the Secretariat in March 2013. This was an opportunity for the Chair of the Executive Board, the Deputy Executive Director, a Technical Officer and the NGOs liaison officer to see projects in action and to talk to implementers at a country level. Meetings were organised with the Ministries of Health and Finance, various health institutions and Civil Society.

Health facilities and the general infrastructure are poor in Mozambique, with small overcrowded hospitals, few doctors and inadequately trained health workers. The Government of Mozambique is heavily reliant on support from implementers to set up projects that save lives, particularly in rural locations.

Discussion

- ❖ NORWAY welcomed the country report and the perspective it offered. It was proposed that Executive Board Members should be invited to participate in future in country visits.
- ❖ The COMMUNITIES stressed the importance of engaging with the Communities on the ground to ensure that products reach patients. The Board was urged to consider 'long-term investment in Community empowerment.'

DECISION

The EXECUTIVE BOARD took note of the report on the Mozambique in country consultation.

17. Any other business

There were no other items to discuss.

18. Closure of the meeting

The CHAIR of the UNITAID Executive Board thanked the FAC and PSC Chairs and the other Executive Board Members for their constructive contributions.

On behalf of the Executive Board, the CHAIR expressed gratitude and best wishes to Ms Raquel Child, Director, Market Dynamics and Operations, who was retiring from UNITAID, and also to Ms Kim Nichols, who has completed her two year mandate as Executive Board Member representing the NGOs.

The 18th Session of the Executive Board closed at 15.45 on Friday 7th June 2013.

Annex 1 - List of Participants

BOARD MEMBERS / REPRESENTATIVES

CHAIR	– Philippe Douste-Blazy
<u>VICE-CHAIR</u> CHILE	– <u>Alt.:</u> Guy Fones
AFRICAN COUNTRIES	– Tilana Grobbelaar
ASIAN COUNTRIES	– Dukhyoung Lee
BRAZIL	– Jorge Bermudez
COMMUNITIES	– <u>Alt.:</u> Gracia Violeta Ross Quiroga
FRANCE	– Philippe Meunier
FOUNDATIONS	– Blair Hanewall – <u>Alt.:</u> Susan Nazzaro
NGOs	– Kim Nichols – <u>Alt.:</u> Tido von Schoen-Angerer
NORWAY	– Kari Marjatta Kolstrøm Hoel
SPAIN	– José Luis Solano Gadea – <u>Alt.:</u> Miguel Casado Gómez
UNITED KINGDOM	– Carlton Evans – <u>Alt.:</u> Samrita Sidhu
WORLD HEALTH ORGANIZATION	– Hiroki Nakatani

ADDITIONAL MEMBERS OF DELEGATIONS

ASIAN COUNTRIES (REPUBLIC OF KOREA)	– Yeseung Lee
BRAZIL	– José Roberto de Andrade Filho

CIVIL SOCIETY DELEGATION

- Brook Baker
- Kenly Sikwese
- Joel Oluwamayoma
- Mercy Annapoorani
- Liudmyla Maistat
- Roger Paul Kamugasha
- Mohga Kamal-Yanni
- Mandy Slutsker
- David Ruiz
- David Deakin
- Esther Tallah
- Leila Zadeh (Liaison officer)

FRANCE

- Stéphane Renaudin
- Margot Nauleau

FOUNDATIONS

- Andrew Jones
(Global Access and Market Dynamics - TB)

NORWAY

- Bjørg Sandkjær

UNITED KINGDOM

- Donal Brown (DFID)
- Jason Lane (DFID)

WORLD HEALTH ORGANIZATION

- Issa Matta

PROPOSAL REVIEW COMMITTEE

- Andy Gray
(Chair, Policy Review Committee)

OBSERVERS

- PARTNERS

MEDICINES PATENT POOL

- Greg Perry
- Chan Park

PEPFAR

- Michael Johnson

ROLL BACK MALARIA PARTNERSHIP

- Jan Van Erps

STOP TB PARTNERSHIP

- Lucica Ditiu

THE GLOBAL FUND

- Christopher Game

- RUSSIAN DELEGATION

- Grigory Ustinov
- Ekaterina Saitgarieva
- Dimitry Kishnyankin

- OTHERS

- Laurence Thurion (office of the Chair)
- Sharon Saacks (FIND)

UNITAID SECRETARIAT

- Denis Broun (Executive Director)
- Philippe Duneton
(Deputy Executive Director)
- Raquel Child (Head, Operations)
- Brigitte Laude
(Head, Finance and Administration)
- Brenda Waning
(Head, Market Dynamics)
- Sophie Genay-Diliautas
(Board Relations Officer)
- Emma Hannay
(Technical Officer, Market Dynamics)
- Catherine Kirorei Corsini
(Assistant, Board Relations)