

44th Executive Board Meeting
18-19 June 2024
The Forum, Global Health Campus
Geneva, Switzerland

### Agenda item 4

# 2023-2027 Strategy – Key Performance Indicator report (June 2024)

For Information □	For Review and Advice □	For Approval
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### Introduction

This document summarizes Unitaid's Key Performance Indicators (KPIs) results over the last year.

KPI reporting is one element of performance reporting by Unitaid and complements the Strategy Implementation Progress Report (UNITAID/EB44/2024/4) and the Programmatic Priorities update (UNITAID/EB44/2024/6). There is also a specific Annex attached to this report, which provides more details and insights on some of the KPIs (UNITAID/EB44/2024/5/Annex1).

This year, the KPI reporting focuses on the KPIs related to the Strategic Objectives and Organizational KPIs. Impact-level KPI reporting will first occur at the mid-point of the Strategic period, in June 2025.

### Recap – Unitaid's Performance Framework and Key Performance Indicators

A revised performance framework was approved by the Executive Board in June 2022 to support the implementation of the 2023-2027 Strategy. The performance framework is the set of systems, processes & plans that translate organizational goals into results by making use of qualitative and quantitative performance information to support the performance management of Unitaid over time, e.g., using KPIs.

The framework assists framing how Unitaid:

- <u>Defines performance</u> i.e., what does success look like for Unitaid, measured through key performance indicators and targets reflective of Unitaid's 2023-2027 Strategy
- <u>Measures performance</u> i.e., what performance information (both qualitative & quantitative) is needed, and how should this information be analysed to support performance management
- Manages performance i.e., what forward-looking actions should be taken to deliver performance improvement over time for Unitaid considering formal performance assessments

At the 43<sup>rd</sup> session of the Executive Board in November 2023, some aspects of the KPI framework were updated (formalized through Resolution <u>UNITAID EB43 2023 R1 Revisions to KPI framework (1).pdf)</u> following a review process coordinated through the Policy and Strategy Committee (PSC) and Finance and Accountability Committee (FAC) (the latter for Organizational KPI A). Specifically, some revisions were made to KPIs or targets to either be i) more precise in the definition of an indicator or in setting targets, ii) to refresh KPIs with a review period in 2023 and iii) to set targets for some KPIs after setting baseline performance. Finally, Organizational KPI A was updated to add additional indicators to assess Secretariat Efficiency. All changes to the KPI framework have been reflected in the reporting of performance for this cycle of reporting.

Figure 1, below, summarizes the structure of the 2023-2027 performance framework, which has five levels, laid out in a hierarchy from Vision/Mission-level (Level 1) downwards, covering the 2023-2027 Strategic objectives (Level 2), specific objectives related to the portfolio of investments, the 'programmatic priorities' (Level 3), Executive Board-facing organizational objectives, defined here as 'Key operational areas' (Level 4) and internal organizational objectives linked to annual workplans (Level 5).

In respect of <u>KPIs</u>, there are Executive Board-approved KPIs for levels 1 (**Vision/Mission-level**), 2 (**Strategic Objectives**) and 4 (**Key operational areas**) of the Performance Framework (the latter herein referred to as the 'Organizational KPIs').

Levels 1 and 2 comprise thirteen KPIs. At the Vision/Mission-level, there are four impact KPIs, covering the additional public health impact, economic impact, the return on investment of Unitaid, and the extent to which Unitaid accelerates the global health response (Impact indicators 1-4). These KPIs will be formally assessed at two points of the strategic period (the mid-point (in 2025) and end of strategic period). The remaining nine KPIs span across the three strategic objectives of the 2023-2027 Strategy.

This year there are sixteen Organizational KPIs mapped across the four organizational objectives to i) 'Ensure organizational efficiency', ii) 'Secure sufficient and stable resources', iii) 'Manage our portfolio efficiently and effectively', and iv) 'Foster staff engagement and ensure staff wellbeing'.

Unitaid Unitaid's Performance Framework Strategic Framework level ilitable Access to health innovations to ensure healthy lives & promote well being for all We expand the reach of the best health products for those who need them most Vision/Mission 4 Impact-level KPIs Accelerate the introduction and adoption of key health products 9 KPIs Strategic objectives Create systemic conditions for sustainable, Foster inclusive and demand-driven partnerships for innovation TB - Enable 20 programmatic Programmatic priorities priority reports high-risk groups 16 KPIs Secretariat-facing objectives (and Key Performance Indicators) Annual workplans Unitaid Performance and Results

Figure 1 – Unitaid 2023-2027 Strategy Performance Framework

### **Strategic Objective KPIs - results**

This section summarizes Unitaid's performance over the last year against its Strategic Objectives.

## Strategic Objective 1 – Accelerate the introduction and adoption of key health products

Strategic Objective 1 focuses on how Unitaid <u>boosts the development of fit-for-purpose health products</u>. This includes reformulations of products to increase their scalability or accessibility, and new or innovative delivery systems that will aid wider adoption for people and contexts in low- and middle-income countries. This typically involves testing to determine safety and efficacy in resource-constrained settings, as well as advocacy to increase knowledge and awareness and to build trust in

new products. It is guided by community-led approaches, in the identification of needs, the creation of demand, and the delivery of services, notably for marginalized and at-risk people.

Beyond identifying and investing in promising products, Unitaid focuses on creating <u>healthy supply conditions</u> and <u>demand</u>, through market shaping and securing access conditions. That means ensuring <u>quality</u> and reach of products (e.g., addressing intellectual property and regulatory issues, quality assurance processes), <u>affordability</u> (e.g., through pricing agreements, intellectual property interventions and demonstration of cost-effectiveness), and establishing strong <u>supply and delivery</u> conditions (e.g., through product forecasting, incentives, and more effective access conditions). In relation to the latter, the work that Unitaid does — e.g., forecasting demand — increases manufacturer confidence of the viable market, thus strengthening supply.

Even when a product is available on the market and in the place where it is needed, Unitaid recognizes the need to support <u>product introduction</u>, <u>adoption</u>, <u>demand</u>, <u>and scale-up</u>. Unitaid also supports the development and introduction of <u>simple</u>, <u>effective models of care</u> to ensure delivery of those products.

Three KPIs support Strategic Objective 1. These KPIs capture the full lifecycle from when Unitaid invests in new products (KPI 1.1 – Portfolio Evolution), as part of our objective to support 30 products by 2030 (the '30 x 30' objective), an assessment of portfolio health, linked to progress towards target access conditions for key health products (KPI 1.2 (a)) and target equity conditions associated with these products (KPI 1.2 (b)). Finally, KPI 1.3 (Product Uptake) summarizes, in a dashboard, the extent to which Unitaid supported products are being scaled up by countries, and supported by major scale funders, such as the President's Malaria Initiative (PMI), PEPFAR and The Global Fund.

To frame this assessment, a mapping of health products across the lifecycle, from pre-investment, through early and mature implementation, and scale-up is presented in Figure 2, below. Progress is being made towards Unitaid's 30 x 30 objective shows good progress, with 11 products in scope of the 30 x 30 already being scaled, with a diverse range of investments capturing the majority of the 30 product areas (with multiple products in some areas, such as malaria chemoprevention). In addition, several new investments areas are in the pipeline. Unitaid has a recently concluded a proposal review process for Triple Elimination and monoclonal antibodies and has several grants under development in the areas of antimalarial drug resistance and optimization of vector control tools. Therefore, it is expected that health products in scope of the 30 x 30 objectives will increase over the coming year.

Figure 2 – Mapping of health products – 30 x 30

Unit	Pre-Investment pipeline*	Early implementation	Mature implementation	Scale-up
HIV & co- infections	Point-of-Care Screen-and- Treat for Other STIs	New tools to test, treat, and prevent main opportunistic infections (CrAg SQ, Histo LFA, Itraconazole) HCV prevention (Long-acting buprenorphine) HCV prevention (Low dead space syringes)	Long-Acting PrEP (LA-CAB) Long-Acting HIV treatment (LA-TLD) Long-Acting HCV treatment (LA-G/P) True point-of-care HPV screening (Screening, Self Sampling) HCV rapid tests (HCV self-tests) HIV Prevention (daphirine vaginal ring) HIV medicines for children (pDRV/r, pALD, pTAF)	opportunistic infections - (L-AmB and
(uberculosis		New point-of-care TB tests (Point of Care, near Point of Care molecular diagnostics, 3rd generation LAM)	TB preventive treatment (LA-HP, 1HP) Pediatric formulations for MDR-TB (BSQ, CFZ, LFX, LZD, MFX, DLM) Shorter DS/DR-TB (BDQ, DLM) Next-generation sequencing Medical imaging (Portable X-rays, CAD, CRP)	Flucytosine - SFQ  TB preventive treatment (3HP)
Malaria	Anemia diagnostics and tools     New malaria treatments, including non-artemisinin based drugs		Vector Control (Spatial Repellents)  Vector Control (Ivermectin)  Vector Control (LA-Ivermectin)  Chemoprevention (IPTi)  Single-dase radical cure for P. vivax (Tafenoquine (TQ))	Malaria vaccines (RTS,s)  Next-Gen LLINs (Dual-Al Nets)  Chemoprevention (CIPTp)
Women & Idren's health	Tools to detect pre-eclampsia / eclampsia	<ul> <li>Better medicines for prevention and treatment of post-partum haemorrhage (Heat-stable carbetocin, TXA, Misoprostol)</li> </ul>		
ঙ	Monoclonal Antibodies		COVID-19 therapeutics (antivirals - nirmatrelvir, ritanavir)	<ul> <li>Increase access to oxygen therapy (Bubble CPAP, O2 Blender)</li> </ul>
Respond to global health emergencies	* New diagnostics and treatments for nec	natal sepsis not in the 30 x 30 pipeline yet	Antigen RDTs (COVID-19) (antigen RDTs)	Increase access to axygen therapy (Pub. Oximeters)

#### Annual performance assessment:

Over the last year, Unitaid has expanded its portfolio to include three innovative products designed to enhance the treatment and diagnosis of Advanced HIV Disease (AHD). This takes the total number of new products supported since the start of the strategic period to twelve, with nine new products across HCV, post-partum haemorrhage, and Tuberculosis supported last year.

The additions to Unitaid's portfolio are the CrAg Semi-Quantitative lateral flow assay (CrAg SQ), which facilitates faster diagnosis of cryptococcal meningitis; the Histoplasmosis lateral flow assay (Histo LFA), providing quick differentiation between TB and histoplasmosis; and Itraconazole, an antifungal therapy proven to reduce mortality in Histoplasmosis cases. Support to these products is part of Unitaid's ongoing commitment to optimize and enable scale of AHD packages of care, in line with the 30 x 30 objective, as detailed in Table 1 below.

Table 1 – KPI 1.1: Portfolio Evolution – new products supported over the last year

Investment Area	Product Name	Target Population	Context and Value Add
Optimize and enable scale of AHD (Advanced HIV Disease) packages of care	CrAg Semi- Quantitative lateral flow assay (CrAg SQ)	People with Advanced HIV disease at risk of cryptococcal meningitis	<ul> <li>Cryptococcal meningitis (CM) is a common opportunistic infection associated with Advanced HIV disease and the second leading cause of death among people living with HIV.</li> <li>Although programs have increased cryptococcal antigen (CrAg) screening, many individuals are either not screened, or when they are screened, they encounter delays in linkage to treatment due to obstacles with the performance of diagnostic lumbar punctures (LP) which is a standard confirmatory test for CM.</li> <li>The introduction of the semi-quantitative CrAg test will enable more accurate diagnosis, faster linkage to treatment, and potentially avoid the need for the diagnostic lumbar punctures.</li> <li>A new CrAg test is being developed and available in 2024.</li> <li>Unlike the CrAg lateral flow test, this semi-quantitative test can also give an estimate of how much antigen is present in a test, supporting monitoring disease progression or treatment effectiveness.</li> <li>However, more research is needed before WHO issues guidance on CrAg SQ testing with simplified care.</li> <li>In addition, the test needs to secure regulatory approval, have price parity with the CrAg lateral flow test, and an adequate supply base.</li> </ul>
	Histoplasmosis lateral flow assay (Histo LFA)	People with Advanced HIV disease at risk of histoplasmosis	<ul> <li>Untreated, histoplasmosis in people with Advanced HIV Disease is nearly 100% fatal, so diagnosis to access life-saving treatment.</li> <li>Histoplasmosis screening programs are found to be a cost-effective strategy and could potentially avert 17% of deaths¹. These tests provide results in only 40 minutes, enabling quicker diagnosis of Histoplasmosis. Enables differentiation of TB and Histoplasmosis diagnosis, facilitating optimization of therapy and reduction in mortality.</li> <li>There is currently one CE marked urine-based histoplasmosis lateral flow assay (LFA) test available, although it is not currently regulatory approved and too costly for many programs. A second manufacturer is in the process of developing a test that is expected to enter the market in 2024. As more of these products become available at lower prices than existing, lab-based testing options, programmes will be able to rapidly expand access.</li> </ul>
	Itraconazole	People with Advanced HIV disease at risk of histoplasmosis	<ul> <li>For severe histoplasmosis, treatment involves two weeks of amphotericin followed by 12 months of itraconazole. Antifungal therapy with Itraconazole and Amphotericin B has reduced 30-day mortality associated with Histoplasmosis.</li> <li>Itraconazole treats various fungal infections, including histoplasmosis. There are more than 20 brands available of varying quality. Local procurement often involves distributor markups, hindering access, making it crucial to identify local distributors.</li> <li>Itraconazole cost varies significantly across regions, averaging \$1,262 for 12 months.</li> <li>Itraconazole is normally only available through out-of-pocket payments, as most HIV programs procure other treatments such as fluconazole.</li> <li>Market shaping activities aim to standardize quality and set price ceilings.</li> </ul>

<sup>&</sup>lt;sup>1</sup> Rajasingham R, Medina N, Mousquer GT, Caceres DH, Jordan A, Nacher M, et al. (2023) Cost-effectiveness evaluation of routine histoplasmosis screening among people living with advanced HIV disease in Latin America and the Caribbean. PLOS Glob Public Health 3(8): e0001861. https://doi.org/10.1371/journal.pgph.0001861

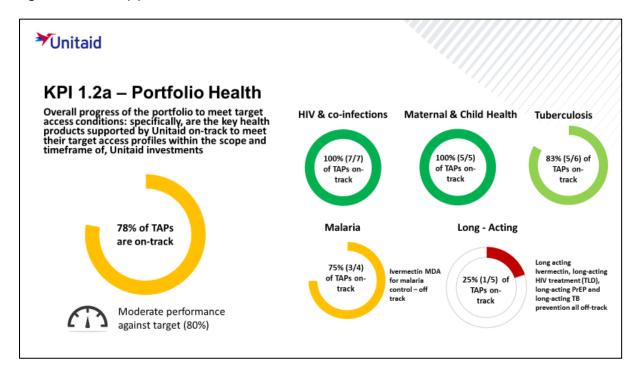
For KPIs 1.2 (a) and (b), assess the health of Unitaid's product portfolio through 'Target Access Profiles' (for 1.2 (a)) and related 'Target Equity Conditions' (for 1.2 (b)).

A Target Access Profile outlines, for a product or product class, the desired profile or conditions that are necessary for the product to become readily accessible (i.e., equitably, fit-for-purpose, affordably and rapidly) for people and communities who need it most. Last year, an initial set of twelve (12) Target Access Profiles were developed. This set of Target Access Profiles has been expanded to cover 27 products or product classes in Unitaid's portfolio. The latest assessment of portfolio health is that 21 out of 27 product/product classes are on track to meet their Target Access Profile (78%, against a target of 80%).

These results are summarized in figure 3, below. The Target Access Profiles assessed as off-track mainly come from the long-acting portfolio (HIV treatment, HIV prevention, and TB prevention). One further long-acting product, for HCV treatment, was assessed as being on-track. One product, ivermectin, is assessed as off-track, both for the standard product (supported by a separate grant) and the long-acting version.

Whilst programmatic progress within the current long-acting investments is mostly on track, the final assessments reflect the overall level of risk associated with some long-acting investments; in particular, high scalability risk. For example, the inherent uncertainties linked with upstream development of new products, which can significantly affect the time and expected cost to market entry of health products. For these long-acting products, a critical risk is the possibility that regulatory authorities request additional clinical evidence to support regulatory approval beyond the evidence being generated in the current investments. In addition, the assessment also reflects the evolving landscape for other (competing) health products in respective health categories, such as emerging pipeline tuberculosis vaccines and long-acting HIV treatments (injectables), which could impact the scalability and uptake of Unitaid-supported long-acting products in the future.

Figure 3 - KPI 1.2 (a) results

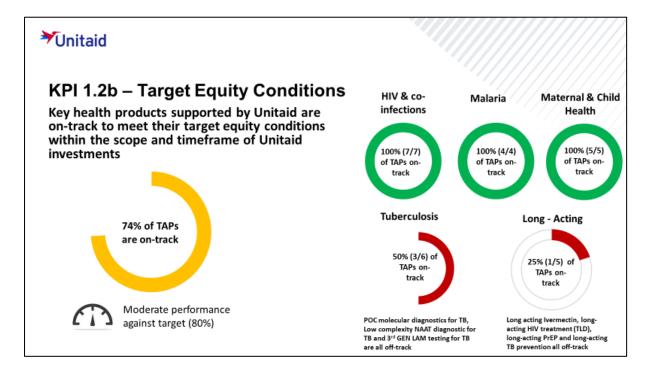


KPI 1.2 (b) assesses specific 'Target Equity Conditions'. Target Equity Conditions are contained within each Target Access Profile and are barriers particularly important to overcome to ensure equitable access. KPI 1.2(b) assesses the proportion of products on track to meet these specific conditions within each Target Access Profile. This year, 20 of 27 (74%) products or product classes were on track to meet their target equity conditions, against a target of 80%.

Similar to KPI 1.2 (a), this result is mainly driven by equity conditions for several long-acting technologies being assessed as off-track. This assessment reflects the current level of uncertainty around critical evidence needed to demonstrate that certain long-acting products work as intended. For example, to prevent malaria (ivermectin), cure HCV, treat HIV, and prevent Tuberculosis. As with KPI 1.2 (a), an important element of this year's assessment is the high level of uncertainty on whether phase 1 data being generated through the projects will be sufficient to secure regulatory approval.

A further three (of six) Target Equity Conditions are off-track for a sub-set of Tuberculosis products. In high TB burden countries, accessing drug susceptibility testing is a major challenge. Targeted next-generation sequencing (tNGS) holds promise for rapid resistance detection and could benefit underserved populations, especially in rural areas. However, its implementation is only partially on track due to delays in pilot programs in Brazil, Indonesia, and South Africa. Additionally, modelling work to determine optimal placement of next-generation sequencing in Brazil is pending. Furthermore, current TB diagnostic methods in resource-limited settings, like sputum smear microscopy and bacterial culture, are inadequate, particularly for vulnerable groups such as children, people living with HIV/AIDS, and those with drug-resistant TB. Work to develop a new point-of-care molecular test that meets WHO performance targets is partially on track but faces issues with laboratory verification and potentially high costs. Progress towards demonstrating the utility of third-generation LAM tests is also off-track due to laboratory verification challenges. See Figure 4, below.

Figure 4 -KPIs 1.2 (b) results



Finally, KPI 1.3 assesses the extent to which Unitaid enables the successful scale-up of health products. This is summarized using a product dashboard, which covers disease-specific and aggregate-level analysis and includes a range of historic investment areas of Unitaid.

The methodology focuses on tracking and evaluating the extent to which Unitaid enables the successful scale-up of key health products in coordination with countries and scale funders. The dashboard assesses scale-up progress across three dimensions: 'Magnitude', 'Speed', and 'Equity'. 'Magnitude' explores data on procurement volumes and/or market share of the product or product class, including baseline, current status and, where available, forward-looking projections. 'Speed' assesses information on how quickly scale-up occurred after the initial investment by Unitaid, as well as the state of product adoption globally, and at the country level. Finally, 'Equity' of scale-up aims to determine the extent to which scale up is occurring in an equitable manner across geographies and populations groups. More details on the scale-up dashboard are provided in the Annex that supports this KPI report.

This year, the scale-up dashboard contains **24 health products or product classes** across HIV and coinfections, TB, malaria, maternal and child health that are being scaled up. Just over half (54%) of all product classes in scope have 'Good' to 'Strong' scale up. This set of health products captures a combination of track record products supported by Unitaid in the past, such as HIV Self-Testing, Injectable Artesunate and childhood TB treatment, alongside products more recently moving to scale that are in scope of the 30 x 30 objectives for this strategic period.

In aggregate, more than **100 countries** are procuring and providing access to Unitaid-supported products, which reach **approximately 300 million people** each year, including more than **50 million children**. This estimate of people reached is an increase on last year's estimate of 170 million people and is mainly driven by the scale-up of four health products, i) optimal HIV treatment (dolutegravir), ii) HIV self-testing, iii) Seasonal Malaria Chemoprevention, and iv) dual-active ingredient bed nets (see Figure 5, below). This year's increase is due to recent news that dual-active ingredient bed nets ('new nets') will be scaled up faster than previously expected; The Global Fund plans to invest around 60% of their next bed net procurement round (for 2024-2026) on new nets.

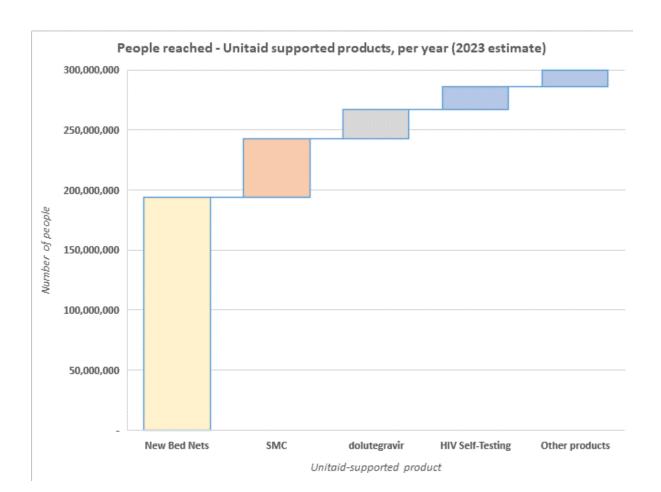


Figure 5 – People reached (per year) with Unitaid-supported products

There are also a number of new products included in this year's dashboard including thermal ablation devices to treat precancerous lesions in women at risk of cervical cancer, and darunavir (DRV/r), a 2<sup>nd</sup>-line adult HIV treatment. Whilst the scale-up of thermal ablation remains moderate, with 5,000 devices procured in 2022 (the latest available data), overall access to thermal ablation is now available across 32 countries in Africa, Asia and Latin America. Equally, whilst initial uptake has been slow to date for DRV/r, there has been an increase in the number of countries procuring DRV/r over the last year (from 2 countries to 12 countries), with 20 countries adopting DRV/r as the preferred 2<sup>nd</sup>-line treatment option for adults and adolescents.

As noted above, the uptake of new, dual-active ingredient bed nets for malaria will scale faster than previously expected. Here, it is estimated that over 100 million nets per year, on average, will be procured over the next three years, in the process protecting around 200 million people per year. There is also increased procured of the malaria vaccine, RTS,s, with 18 million doses secured by Gavi, the vaccine alliance for 2023-2025. Finally, uptake of shorter preventive treatment for Tuberculosis, 3HP, continues to increase, with 5.5 million treatment courses procured in 2023, with 78 countries implementing 3HP. Figure 6, below, summarizes the top line results on scale-up for 2023.

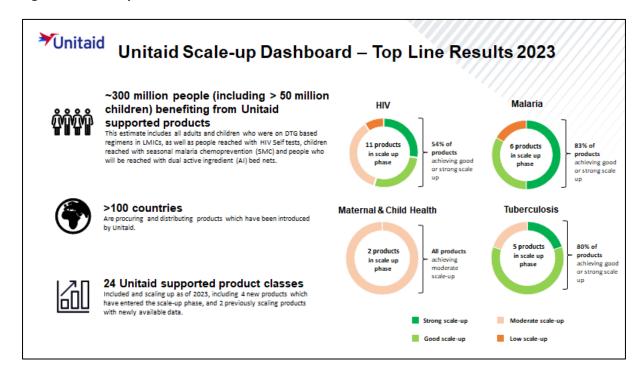


Figure 6 – Scale-up dashboard: headlines

### Strategic Objective 2 – Create systemic conditions for sustainable, equitable access

To ensure that the products Unitaid supports are truly available to all, Unitaid's Strategy calls for the <u>creation of systemic conditions for equitable and sustainable access</u>. This is reflected as Strategic Objective 2. While support for product access has long been a part of Unitaid's work, the 2023-2027 Strategy further emphasizes the work needed on access independent of a specific product.

There are two KPIs associated with Strategic Objective 2. KPI 2.1 (Creating systemic conditions for sustainable, equitable access) places emphasis on a range of pathways for Unitaid to create such conditions. This includes taking forward work as a 'Pathfinder', 'Investor' and 'Influencer' in well-established areas of interest to Unitaid, including intellectual property and regulatory approaches, alongside emerging areas such as supporting the development and deployment of innovative supply models. Secondly, KPI 2.2 focuses on the dissemination of evidence of equitable access, measured through the extent to which peer reviewed publications funded by Unitaid support equitable access, with emphasis on evidence generated at a disaggregated level.

For KPI 2.1, revised targets were put in place in November 2023 for the topic areas associated to the strategic initiatives, specifically Regional Manufacturing, Climate and Health, and Pandemic Prevention, Preparedness and Response. These targets, and a progress update, are summarized in Table 2, below, and are complemented by a more detailed pre-read (UNITAID/EB44/2024/7).

Table 2 – Strategic Initiatives progress update

Strategic Initiative	Target(s)	Performance update			
Regional Manufacturing	<ul> <li>Secure Executive Board endorsement of Unitaid's Regional Manufacturing Initiative for equitable and sustainable access, by early 2024,</li> <li>Advance progress on the implementation of the Regional Manufacturing Initiative, by mid-2025, leveraging Unitaid's role as an influencer, pathfinder and investor to establish viable business cases and interventions for the local production of cost-competitive, quality health products in select low- and middle-income regions.</li> </ul>	<ul> <li>"Regional Manufacturing for Equitable Access" (RMEA) Area for Intervention presented to the PSC in April 2024, and submitted to the Executive Board for approval during the 44<sup>th</sup> Board meeting</li> <li>Secured a €7million funding contribution from the European Commission to strengthen regional manufacturing of PPH products in Africa.</li> <li>Development of business cases for seven proxy products within the priority categories: HIV medicines for children, next-generation LLINs, long-acting HIV treatment, new malaria treatments, including non-artemisinin-based drugs, HCV rapid test, Malaria vaccines, and best medicines for the prevention and treatment of PPH.</li> <li>Expanded engagement with governments (including Nigeria, Kenya, South Africa), regional economic communities (such as the SADC Secretariat, EAC, and WAHO) Continental institutions (such as AUDA NEPAD, African Development Bank, and Africa CDC), and global stakeholders (IFC, the Global Fund)</li> <li>Advocacy piece on regional manufacturing of antimalarials in Africa was published on World Malaria Day 2024</li> </ul>			
Climate and Health	<ul> <li>Secure Executive Board endorsement approval of a Climate and Health Strategy, by end 2023</li> <li>Advance progress on Climate and Health strategic framework, by mid-2025</li> </ul>	<ul> <li>Climate &amp; Health strategy approved by Executive Board in November 2023</li> <li>Strategy launched at COP28 at the French Pavilion</li> <li>Key report published ("milligrams to megatons"), featured at COP28 and in numerous media &amp; journals</li> <li>Progressive integration of climate-related components in broader investments</li> <li>Partnership signed with the Climate Action Accelerator</li> <li>Unitaid core member of the WHO-led Alliance for Transformative Action in Climate and Health (ATACH) – incl. Supply Chain Working Group</li> <li>Engagement with numerous partners &amp; donors</li> </ul>			
Pandemic Prevention, Preparedness and Response	<ul> <li>Document and publicize Unitaid's vision on Access for PPPR to shape the evolving global PPPR landscape, including R&amp;D, and nascent initiatives, by May 2024</li> <li>Advance work in investments related to new business/supply models for therapeutics (small molecules, antibodies) and diagnostics that can enable equity needs in low- and middle-income countries for key countermeasures in the case of a pandemic, by 2025</li> </ul>	<ul> <li>Proposal review completed for the call 'Establish viable business models for access to monoclonal antibodies in low- and middle-income countries</li> <li>'Access is not an afterthought' published</li> <li>Dedicated efforts with G20 (1st Health working group and side-meetings: April), G7 and WHO-led iMCM Net Roadmap for therapeutics for pandemic published, with the 100 Days Mission</li> </ul>			

In summary, strong progress has been made against the targets for Regional Manufacturing, Climate and Health, and Pandemic Prevention, Preparedness and Response.

KPI 2.1, also incorporates targets for Unitaid's work on Intellectual Property (IP) and Regulation. Surrounding IP, focus on been placed on selecting, developing, and securing Executive Board approval (in December 2023) for a new set of TRIPS flexibilities projects. In addition, the Medicines Patent Pool (MPP) continues to make strong progress in securing voluntary licenses of critical health products. In the last few months, Unitaid has helped to negotiate a Memorandum of Understanding (MOU) between Ferring Pharmaceuticals and the MPP for Ferring's heat-stable carbetocin product, an important product for the management of post-partum hemorrhage (PPH). This MOU requires Ferring to enter into a license for heat-stable carbetocin with MPP in the event of certain trigger events occurring. Not only does this reflect the first outcome of Unitaid's investment into PPH, it is expected to improve product supply security and will be instrumental in enabling access to heat-stable carbetocin across different settings. The development of heat-stable products is also well aligned to Unitaid's objective to facilitate equitable access to climate-smart products.

Surrounding the topic of Regulation, Unitaid continues to support the WHO Prequalification programme, and is an active participant in the development of the next WHO RPQ Strategy. This process is expected to be complete in 2025.

Overall, more than 1,700 products have been prequalified to date, with progress in the last year leading to new products being prequalified, including 29 finished pharmaceutical products (FPPs); 7 active pharmaceutical ingredients (APIs) including the first bedaquiline API; 4 vector control products (VCPs), including broflanilide, a new active ingredient, which adds a new mode of action to combat pyrethroid insecticide resistance; 5 in-vitro diagnostics (IVDs) across HIV, HCV, and HPV; and, support to global pandemic/emergency response continued with 5 IVDs listed using the Emergency Use Listing (EUL) procedure. In addition, the Collaborative Registration Procedure (CRP) has been expanded to vector control products late 2023, with representatives from nine African countries and eight industry partners.

**KPI 2.2** is focused on dissemination of evidence of equitable access, with particular emphasis on disaggregation of data and evidence. In practice, this is measured through the extent to which peer reviewed published studies funded by Unitaid share evidence to support equitable access, with emphasis on evidence generated at a disaggregated level (e.g., by age, gender, socioeconomic status, disability, or another context specific category), as relevant.

For calendar year 2023, a search process identified **97 peer reviewed publications** supported by Unitaid funding. The majority of the 97 papers identified **(87%)** present original research and new evidence. Within this group, 63 publications **(65%)** had some form of gender-disaggregated data. Studies not including any disaggregation include economic or costing studies and pharmacokinetic studies where such disaggregation may not always be expected. Other dimensions of evidence disaggregation included country, age, and socioeconomic variables. This includes research and evidence generated in more than 25 countries across four continents - Asia, Africa, South America and Europe. The largest single country contributors to evidence were Brazil (26 studies) and South Africa (8 studies).

More than 40% of the studies focused on the **highest-risk and marginalized populations**. This year, this includes a large body of evidence on the use of HIV prevention (PrEP) by adolescent girls and young women, men who have sex with men, and transgender women in South Africa and Brazil. Another quarter (25%) of the studies were primarily focused on infants and children, covering diagnosis and prevention of pediatric tuberculosis, and several malaria interventions including bed nets, rectal artesunate and the malaria vaccine.

Implementation research, clinical research and health outcome analysis are the most common research type with particular emphasis this year on human experience including acceptability, preferences, awareness and attitudes to health products and implementation models (33% of studies). A further one fifth of studies, respectively, were focused on substantiating WHO guidelines or recommendations, for example trial studies generating data to support policy recommendations and assessment of operational feasibility of the provision of new health products

This year, there are a larger number of studies focused on **economic, costing and cost-effectiveness research** (10% of studies) to guide funding decisions and promote equitable access. This includes economic studies exploring the implementation of long acting cabotegravir in Brazil, HIV self-testing in South Africa, diagnosis and preventive TB therapy in 9 sub-Saharan African countries, and rectal artesunate in sub-Saharan Africa.

This body of evidence contributes an important input to global normative guidance and implementation tools supported by the World Health Organization (WHO). This is supported by a strong and strategic partnership between Unitaid and the WHO, which includes Unitaid investment into 'Enabler' grants across several disease areas including HIV, TB, and malaria. Based on analysis, first presented in 2023, since 2017, WHO has facilitated the design and delivery of more than **160 Unitaid-funded studies**. This critical research has underpinned **more than 60 updates** to health guidelines and implementation tools. National health programs and global scale-up partners then implement vital interventions that are critical in advancing the care for people affected by or at risk of HIV, TB, malaria, cervical cancer, hepatitis C and COVID-19. Some highlights from this partnership are laid out in Figure 7, below.

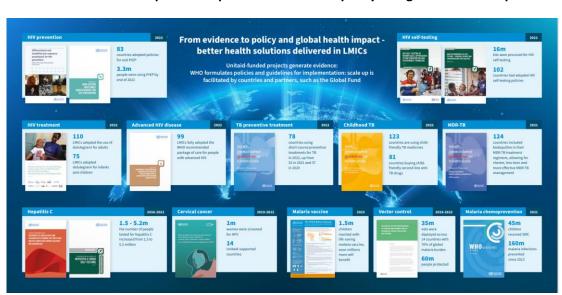


Figure 7 – Unitaid and WHO partnership: from evidence to policy and global health impact

Source: Better Health Solutions (WHO and Unitaid, May 2023) Better-health-solutions.pdf (unitaid.org)

### Strategic Objective 3 – Foster inclusive and demand-driven partnerships for innovation

Strategic objective 3 recognizes that <u>diversity</u>, <u>equity</u>, <u>and inclusion</u> are central to Unitaid's mission and that integrating those values in every intervention will always yield better outcomes. Acting on this recognition means increasing engagement with everyone, from implementing partners to communities, country stakeholders (governments, civil society, for example) and scale funders, to invest and build better, more sustainable country- and community-driven programmes and products. It means the starting point for every health product that Unitaid supports will be seeking out underrepresented voices and diverse implementing partners and working with all stakeholders to shift decision-making towards the people and places facing the greatest health inequities. People are at the centre of the 2023-2027 Strategy. People and their communities have driven the identification and implementation of the Programmatic Priorities that realize this Objective.

Alliances will help amplify our work to reach further and do more. The goal of all Unitaid's alliances and partnerships is to scale-up good products and treatments so that they are available to anybody with a need, anywhere in the world. Unitaid will work at all levels to further develop those alliances

There are three KPIs associated with the third Strategic Objective to measure progress over time. The first, KPI 3.1 – Partner Satisfaction, focuses on findings from a multi-partner survey (baseline survey in 2023, next survey early 2025) to be administered every two years. The survey assesses the extent to which Unitaid fosters inclusive, demand-driven partnerships for innovation that ultimately delivers impact. The next Partner Survey will be administered in early 2025. KPI 3.2 - Effective engagement with Communities and Civil Society assesses the degree of engagement with communities and civil society as part of identifying new investment areas, reviewing proposals, developing grants, and implementing grants. Finally, KPI 3.3 - Effective Country stakeholder engagement assesses the extent to which there is effective engagement with low and middle-income countries. For example, to align with country stakeholder needs and priorities, to spur local ownership and fit-for-purpose innovations. In addition, to increase the use of, and strengthen, local health services, systems, research institutions and manufacturers. Finally, to accelerate the buy-in, adoption and scale-up of better health products, improve sustainability and resilience, and strengthen partnerships with Ministries of Health and regional bodies.

To recap on the baseline performance from first Partner Survey results from last year, for KPI 3.1, the performance assessment focus on one survey question, 'To what extent does Unitaid help foster inclusive demand-driven partnerships for innovation that deliver impact?'. Last year, 57% (27/47) respondents indicated positively (i.e., 'To a large extent' or 'To a very large extent') that Unitaid fostered inclusive and demand-driven partnerships. Furthermore, 28% (13/47) respondents found that Unitaid achieved this 'To a moderate extent', 13% (6/47) assessed this as being 'To a limited extent', and 2% (1/47) 'To a very limited extent'. The ongoing work on partnerships is intended to strengthen Unitaid's positioning and impact with a range of key stakeholders, and this will be assessed in more detail through the next iteration of the Partner Survey in early 2025.

KPI 3.2 measures the percentage of Programmatic Priorities (PPs) with a demonstrated engagement with Communities and Civil Society across the operating model, with 2022 activities as a baseline.

This assessment has been updated with respect to the 2023 portfolio to establish the investment areas were demonstrated engagement with Communities and Civil Society (CCSE) was occurring, with reference to the following criteria:

- 1) Early engagement with Communities & Civil Society Organizations for better grant design
- 2) Ensuring Community voices are heard
- 3) Programmatic priority has a CCSE activity plan and budget
- 4) Establishing and supporting CCSE mechanisms that build capacity and ownership
- 5) Programmatic priority recognizes specific Community and Civil Society contributions to results.

These criteria aim to highlight the importance of engaging with Communities and Civil Society across all key stages of Unitaid's investments and programming, i.e., during early investment planning scoping, creation of Areas for Intervention, Calls for Proposals, Grant Agreement Development, during and project implementation and scale-up phases. The KPI 3.2 result for 2023 is that **75%** of programmatic priorities have 'strong' or 'good' engagement with communities and/or civil society, an increase from the 2022 baseline result of 40%. In addition, a further 5% have made some 'Moderate' efforts, a further 5% 'Weak' engagement, 5% with a 'Poor' engagement and 10% 'No engagement'. On the latter, this is mainly as Community and Civil Society Engagement was not considered for these investments (e.g., in areas such as UnitaidExplore investments and WHO PQ), which pre-date the current strategic period.

The improvement of the scores for multiple Programmatic Priorities is explained by:

- Effective engagement and consultations with communities' representatives and Civil Society
  Organizations during the initial grant inception phases (covering scoping, Areas for
  Intervention, Calls for Proposals, and grant development) over the last year,
- Projects proactively ensuring that community voices are heard through participation in conferences/events and sharing their stories and testimonials,
- Projects adopting effective Community and Civil Society Engagement models, like Community Advisory Boards and/or small grants,
- Generation of evidence from multiple portfolio evaluations completed in 2023 on effectiveness of Community and Civil Society Engagement. In particular, where communities and Civil Society Organizations contributed to project results and the subsequent scale-up of Unitaid-supported products, e.g., in the HIV treatment (Optimal) portfolio, the New Nets Project, HIV Self-testing and PrEP portfolios.

This result represents good progress towards 100% of programmatic priorities having a demonstrated engagement with communities and civil society by the end of the strategic period.

Related to this, and as a means of triangulating performance, the 2024 Implementers Survey (a separate survey linked to the Organizational KPIs) also asked questions related to Community and Civil Society engagement. Here, 87% of respondents said that 'Unitaid, through its grants, engages with country-level civil society and local communities', an increase on 6% from last year's survey. A further 56% of respondents feel that 'National communities, including beneficiaries, and civil society

organizations are engaged in your grant project design and/or implementation', which fell by 6% from last year's survey, and 61% believe that 'Engagement with communities, including beneficiaries, and civil society organizations contribute to achieving your grant project outcomes.', an increase of 4% from last year's survey. Finally, 37% of respondents believe that 'Unitaid facilitates introduction to and/or collaboration with country stakeholders and in-country partners, including communities.', which is a decline on last year of 27% (with most of the decline – 20% - to the response 'Neither agree nor Disagree').

In November 2023, revised targets were put in place for KPI 3.3 – Effective Country Engagement. Specifically, to ensure demonstrable progress in advancing effective engagement with country stakeholders that leads to better alignment with country stakeholder needs and priorities for next investment cycles, additional partner agreements with Ministers of Health and Regional Bodies, and increased investments through low- and middle-income country institutions and manufacturers.

#### This includes:

- At least one (and up to four) country agreement(s) (Memorandum of Understanding) by mid-2025
- At least one (and up to two) flagship country visit(s), bringing together key stakeholders, by mid-2025
- Increased investment in low- and middle-income country organizations (e.g., captured through diversification of the implementer base, linked to Organizational KPI F, and increased focus on regional manufacturing)

Overall, there has been good progress over the last year towards meeting these targets, and the broader objectives of Strategic Objective 3. A strategic collaboration framework was signed with ANRS Emerging Infectious Diseases (ANRS MIE) in April 2024. This alliance aims to expedite the translation of scientific breakthroughs into tangible health solutions, with a focus on safeguarding vulnerable populations from infectious diseases in low- and middle-income countries. The signing ceremony took place at the research and coordination center within Yaoundé Central Hospital, the hosting institution for ANRS MIE's partner site in Cameroon. A regional agreement, with the Pan American Health Organization (PAHO) was signed during the World Health Assembly in May 2024. Cooperative agreements are under development with the Governments of Nigeria and South Africa. Furthermore, an existing agreement with the Government of Kenya is being updated. A strategic framework is also being finalized with The Global Fund.

A Partners Forum was held in Kenya, which included local implementers from 12 Unitaid projects. In early May 2024, an Industry Forum, co-convened by the African Development Bank (AfDB), the International Finance Corporation (IFC), and Unitaid in association with Nigeria's Presidential Initiative on Unlocking Healthcare Value Chains (PVAC), took place. More than 300 participants attended the forum that sought to accelerate equitable access to urgently needed health products through collaborative partnerships, and to facilitate investment opportunities as interventions to expand local pharmaceutical manufacturing.

Analysis from the Organizational KPIs, for Implementer Diversity (KPI F), shows an increase in the proportion of lead implementers from the Global South, which stood at 21% at the end of 2023. Grants

under development this year include a vector control grant with The Centre for Research in Infectious Diseases (CRID), a Cameroon research institute.

Finally, an Executive Board delegation visited Kenya in February 2024 to strengthen ties with a range of stakeholders including the Government of Kenya, and the pharmaceutical industry, in line with Unitaid's objectives for regional manufacturing.

As noted above, more detailed information is presented in the Executive Board pre-read 'Functional Review Update' - UNITAID/EB44/2024/7 – for several topics in scope of the Strategic Objectives. Summary performance against the Strategic Objective KPIs is presented in Figure 8, below.

Figure 8 – Strategic Objective KPI results 2023

### **Y**Unitaid Summary table − Strategic Objective KPI results

		КРІ	Description, definition	Target	Results 2022	Results 2023
Strategic Objective 1: Accelerate the		1.1 - Portfolio evolution	Total number of new health products supported by Unitaid over the previous 12 months	N/A	9 new products supported (HCV, PPH, TB)	3 new products supported (AHD)
	<b>(</b>	1.2(a) - Overall Portfolio Health	% of key health products on track to meet their target access profiles	80% Target Access Profiles (TAP) on track	83% (10/12) TAPs on track*	78% (21/27) TAPs on track*
and adoption of key health products	×.	1.2(b) - Target Equity Conditions	% of key health products on track to meet their target equity conditions	80% Target Equity Conditions (TEC) on track	75% (9/12) TEC on track*	74% (20/27) TEO on track*
	<sub>M</sub> P	1.3 - Product uptake	Extent to which Unitaid enables the successful scale-up of health products	18 (2022) to 24 (2023) Unitaid-supported product dasses scaling-up; >100 countries procuring products reaching = 170 M (2022) to =300M (2023) People/		
Strategic Objective 2: Create systemic	9	2.1 - Creating systemic conditions for sustainable, equitable access	Demonstrated progress in devising plans, and where appropriate making investments, in areas intended to Strategic Objective 2	On track to meet expectations of SI's	N/A	Strong progress overall
conditions for sustainable, equitable access	*	2.2 - Dissemination of evidence on equitable access	Summary of progress in generating evidence to support equitable access in previous calendar year	N/A	64 papers, 69% w/gender-disagg data	95 papers, 65% w/gender-disagg data
Strategic Objective 3:	<b>7</b>	3.1 - Partner Satisfaction	% of positive responses - 'To what extent has your partnership with Unitald fostered inclusive and demand- driven partnerships for innovation that has advanced equitable access to key health products?'	75% positive, per stakeholder group, by 2027 Partner Survey	57% (27/47) positive responses	N/A
Foster inclusive and demand- driven partnerships for	‰	3.2 - Effective engagement with Communities and Civil Society	Extent to which there is effective engagement with affected communities and civil society and responsiveness to address needs	100% demonstrated engagement by the end of the Strategy.	40% of PP* have 'strong/good' CCS engagement	75% of PP* have 'strong/good' CCS engagement
innovation	<b>@</b>	3.3 - Effective Country stakeholder engagement	with low and middle-income countries	At least 1 country agreement(s) (MoU) by mid-2025 • At least 1 flagship country visit• Increased invt in LMICs		Strong progress, on track to meet targets

### **Organizational KPIs**

This section summarizes Unitaid's Organizational KPI results. Organizational KPIs support four headline objectives set by Unitaid's Executive Board: 1) Ensure organizational efficiency; 2) Secure sufficient and stable resources; 3) Manage our portfolio efficiently and effectively; and 4) Foster staff engagement and ensure staff wellbeing. The 2023 results are presented below for each area.

### Ensure organizational efficiency (KPIs A & B)

Organizational efficiency reflects how well Unitaid's delivers upon its overall objectives, within agreed resource parameters. Two KPIs, one KPI on 'Secretariat Efficiency' (KPI A), the second (KPI B) a measure of progress towards meeting target reductions in carbon footprint of the Secretariat over time, are used to assess organizational efficiency.

Following a review process, KPI A has been updated to capture four dimensions of organizational efficiency, with new definitions and targets approved by at the 43<sup>rd</sup> session of the Executive Board in November 2023 –

- A.1 Budget Implementation Rate (target 95% per annum)
- A.2 Staff Cost Allocation
- A.3 Investment Commitment Ratio, and
- A.4 Investment Disbursement Ratio

However, for this round of reporting the pre-existing KPI A (Secretariat Efficiency) has been retained and reported. In future, this metric will no longer be used in the KPI framework but will be reported to the Finance and Accountability Committee annually within the audited financial statements.

The result for KPI A, for calendar year 2023, is **1.72%.** Specifically, Secretariat costs as a proportion of the value of Unitaid's portfolio (on 31 December 2023), was within the target of 2%.

For KPI A.1, the final budget implementation rate was 92% in 2023. At this level of implementation, there is a difference of US \$845K in budget, relative to a level of budget spend at an implementation rate of 95%. This difference between actual and target implementation is driven by underspend on staff costs, attributed to recruitment delays for positions associated with the Strategic Initiatives and two senior-level posts being vacant during 2023. In some cases, delays were linked to securing WHO approval for the abolition of some positions and the hiring of new positions after the functional review process.

In respect of KPI A.2, in 2023, the allocation of core staff costs was as follows: Investment (57%), Management (19%), Business development (13%) and Support function (10%).

Finally, for KPI A.3 and KPI A.4., the Investment Commitment and Investment Disbursement ratios have been calculated at 13.3 and 13.1 respectively. These ratios can be interpreted as showing that for every US\$ of cost of investment staff, these staff members support US\$ 13 of commitments and US\$ 13 of disbursement annually.

For KPI B, the target is to deliver a 40% reduction in the Unitaid Secretariat carbon footprint by 2025. There is **no specific target** for 2023. However, an analysis of progress has been undertaken which shows that the Secretariat is currently not on track to meet its 2025 target. The largest carbon emission areas for the Secretariat are linked to "procurement of goods and services" and "work travel". On the latter, it is estimated that travel emissions have rebounded from the covid pandemic years and are now higher than their 2019 level, due to an increase in travel from the Secretariat and from related parties attending in-person meetings organized by the Secretariat (including the Executive Board, Joint Review Committee, and implementers' meetings/forum...). The emissions from the area of "procurement of goods and services" is estimated to have lowered, mainly reflecting changes in the global economic landscape (e.g., inflation) and sectoral trends. This area should continue to be closely monitored. To put the Secretariat back on track to achieve its 2025 targets, substantial efforts should be stepped up, with a particular emphasis on travel emissions.

### Secure sufficient and stable resources (KPI C)

A core objective for Unitaid is to ensure that the organization has sufficient and stable financial resources to implement its 2023-2027 Strategy. The objective of securing sufficient and stable resources is assessed from three dimensions – 1) the total, cumulative resources committed (in US\$) over the 2023-2027 strategic period (KPI C.1) against an overall funding target of US\$ 1.5 billion by the end of the strategic period, 2) the proportion (%) of funds secured against multi-year agreements (in value), in a given year, with a target of 70% of funds in a given year connected to multi-year agreements (KPI C.2), and 3) the number of new donors over the strategic period who are directly supporting the 2023-2027 Strategy, with a target of three new donors over the strategic period (KPI C.3).

By the point in time of reporting (31 May 2024, the total cumulative resources (in US\$) committed to date for the strategic period (i.e., from January 1, 2023) amount to **US\$ 429 million** (KPI **C.1**), in relation to a target of US\$ 1.5 billion by the end of 2027. This is calculated using all the contributions received since the start of 2023 and all commitments and multi-year commitments made for 2024 and future years. For the calendar year 2023, **65%** of funds received in this period were tied to multi-year commitments, from the Government of France and the Gates Foundation (KPI **C.2**). In addition to the multi-year agreement secured from the Gates Foundation, Norway has made a multi-year commitment for 2024 and 2025, which will be reflected in future year's KPI reporting. Similarly, discussions on a multi-year agreement for 2024-2026 are being finalized with Spain.

There are **4 new donors**<sup>2</sup> in this strategic period (KPI C.3). As reported last year, the Government of Canada transitioned its ACT-A pledge of CA<sup>3</sup>D 25 million in 2023 to support Unitaid's new strategy – where oxygen is playing a key role. Earlier this year, the European Commission has committed EUR 20 million to support Unitaid and UNFPA to partner with African authorities to strengthen health systems

3

<sup>&</sup>lt;sup>2</sup> "New donor" being defined in UNITAID/EB40/2022/7 ANNEX B as donors who are not part of the "baseline list of 10 donors who contributed to the 2017-2021 Strategy: France, the United Kingdom, the Bill & Melinda Gates Foundation, Brazil, the Republic of Korea, Norway, Chile, Spain, Japan, The Global Fund".

in Africa and to accelerate access to life-saving medicines to end preventable maternal deaths. Finally, contributions were received from Portugal (US\$ 270,000) and the WHO Foundation (US\$ 125,000)<sup>4</sup>.

Unitaid remains active in a complex funding environment where predictability and flexibility of funding is declining. In this context, meeting Unitaid resource mobilization goals for the new Strategy requires increased focus on advocacy, communication, partnerships, and donor outreach to maintain and expand the donor base, reinforce the need for core or flexible funding directed towards Unitaid Investment Plan and strengthen funding predictability through multi-year agreements. This has been outlined further in the pre-read 'RM and Communications update' - please refer to UNITAID/EB44/2024/8 for more information.

### Manage our portfolio efficiently and effectively (KPIs D, E & F)

A central component of Unitaid's work is ensuring that its portfolio of grants is managed in an efficient and effective manner. This is assessed against three KPIs, 1) Speed of Grant Development (KPI D), 2) Implementers Satisfaction (KPI E) and 3) Implementers Diversity (KPI F).

For KPI D – Speed of Grant Development – in 2023, there were five grant agreement development (GAD) processes finalized and submitted to the Executive Board. Overall, the **average time taken was 5.3 months** (KPI D.1), with a **median time taken of 5.4 months** (KPI D.2). The target is six months on average for KPI D.1. Therefore, speed of grant development was faster than target for 2023. This result is also the fastest average time since this KPI was introduced in 2017. This is a marked improvement on performance over the last few years, where speed of grant development took 7.6 months in 2020, 8.4 months in 2021, and 8.2 months on average in 2022. The range of time taken was between 5.2 months, for the set of Advanced HIV disease grants (CHAI and The Aurum Institute), and 5.4 months for the set of intellectual property grants (ITPC, TWN and Wemos).

A new KPI incorporated into the Organizational KPIs last year emanates from the annual grant implementer survey. Specifically, to assess the overall level of Implementer Satisfaction (KPI E), based on the question 'How would you rate your overall experience with Unitaid?'. This question has been a part of the annual implementer survey for several years. The survey was administered in March-April 2023 by an external supplier (IPSOS). 2023 performance for KPI E was the highest to date, with 100% positive scores (the combination of 'Positive' and 'Very positive' responses). This exceeds the target of 75%.

The full implementer survey contains a broad set of topics, with several factors providing some insight into this positive result, alongside some areas for reflection and improvement. For example, most implementers are satisfied with the quality of communication and responsiveness of Unitaid, showing a clear improvement compared to last year's survey. Specifically, effective communication, collaboration and flexibility in grant management and operations are good practices by Unitaid that were identified by implementers.

A majority of implementers say that Unitaid's investments accelerate equitable access to innovation and feel the most valuable aspects of partnering with Unitaid remain as: 1) the ability to support scale-

<sup>&</sup>lt;sup>4</sup> Portugal made a core contribution to Unitaid. The funds from the WHO Foundation were related to COVIDwork.

up, 2) bringing more visibility to implementers and projects, and 3) opening doors to new partners and stakeholders. Unitaid's key areas of strength include: 1) strategic engagement and convening power, 2) thought leadership and innovation, 3) flexibility in funding, 4) technical expertise, 5) enabling scale-up of products.

Potential areas of improvement include increased engagement by Unitaid to potential scale-up funders, and to allow implementers more time and financial flexibility to implement projects. Reporting requirements are said to be more complex/challenging compared to those required by other organizations that fund their work. Suggestions made in open-ended comments include the potential for Unitaid to simplify its processes and templates, e.g., template design and the functionality of proposal templates, Grant Agreement Development documents and project reporting.

As noted in more detail in the 'Functional Review update' (UNITAID/EB44/2024/7), a Grant Agreement Development optimization process was undertaken last year, which led to several actions that have now been mainstreamed into Unitaid's core processes, and which are expected to streamline the workload associated with grant agreement development. These changes came into effect since mid-2023, so their impacts may only start to measurable from next year's implementer survey.

KPI F – Implementer Diversity – assesses the progress being made by Unitaid to increase the diversity of its lead implementers and represents a meaningful commitment from Unitaid towards increasing implementers diversity and related to building stronger relationships with South-based implementers. Last year, the baseline performance was calculated, with 16% of grants being led by a South-based implementer. The target for this KPI is to increase this proportion to 40% of all grants by the end of the strategic period. This is an ambitious target, which requires adaptation to the way Unitaid approaches calls for proposals, as well as adjustments to grant management approaches. Based on the portfolio at the end of 2023, 12 of 57 (21%) eligible grants had a lead implementer with a headquarters in a low- or middle-income country (specifically, one or multiple implementers in Brazil, Malaysia, Senegal, and South Africa). This progress from the baseline reflects the outcome of last year's grant development processes, where three of the five grants approved by the Executive Board having a lead implementer headquartered in the global south. As the portfolio evolves, a similar level of progress will be needed to meet the target of 40% by the end of the strategic period.

### Foster staff engagement and ensure staff wellbeing (KPIs G & H)

An important complement to the other organizational objectives is ensuring that Unitaid Secretariat staff engagement and staff wellbeing are maintained at a high standard. This is now reflected across three KPIs to support the objective of fostering staff engagement and ensuring staff wellbeing.

KPI G, 'Gender Equality', is defined as the percentage of women in management positions at Unitaid. Management positions are defined as UN P5-level or above. The target is a range around "parity", which is defined as between 45-55% of women in management positions. Based on staffing at the end of 2023, 40% of women were in management positions (8 out of 20), so the gender equality ratio was below the minimum level of 45%. This result is partly explained by staff turnover and vacancies. However, the Secretariat remains focused on securing equality and diversity and will continue to work to make sure that all staff and prospective applicants to Unitaid get equal treatment and opportunities.

KPI H contains two distinct indicators. The first, KPI H.1 – 'Level of Staff Satisfaction' is a continuation of measuring staff satisfaction in the KPI framework. For the 2023-2027 Strategic period, this is measured as the average performance of a composite of five questions assessed during the annual staff survey<sup>5</sup>. The target is 75% overall, based on the average of positive responses ('agree' or 'strongly agree') to each question. The latest staff survey was completed at the end of 2023 by IPSOS. The survey results found the average level of **staff satisfaction to be 75% overall**, on target. Within the set of questions, the range of positive responses varied between 61% (for the integration and onboarding of new staff) to 89% (pride in telling friends and family about my work at Unitaid) (see Figure 9, below).

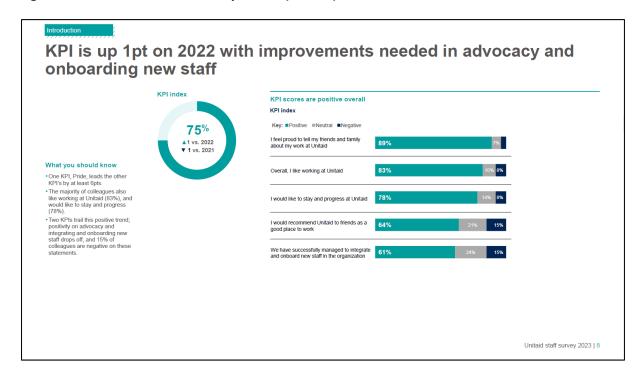


Figure 9 – 2023 Unitaid Staff Survey results (KPI H.1)

Source: IPSOS

The second KPI under KPI H assesses staff wellbeing, once more using data generated during the staff survey, which was implemented by IPSOS in December 2023. Here, KPI H.2 assesses the ability of staff to manage their work-life balance. Once more, there is a target of 75% positive responses, i.e., 'agree' or 'strongly agree' to the question "I am generally able to balance my work and my personal responsibilities while maintaining a healthy lifestyle." The 2022 staff survey result was 71% positive, four percentage points below the target of 75%. Ongoing staff engagement activities and the implementation of the findings of the functional review, that is looking at ensuring that the organization is properly resourced, will likely have an impact on the overall staff satisfaction.

The summary of the 2023 results for the Organizational KPIs is provided in Figure 10, below.

<sup>&</sup>lt;sup>5</sup> - I feel proud to tell my friends and family about my work at Unitaid

<sup>-</sup> Overall, I like working at Unitaid

<sup>-</sup> I would recommend Unitaid to friends as a good place to work

<sup>-</sup> We have successfully managed to integrate and onboard new staff in the organization

<sup>-</sup> I would like to stay and progress at Unitaid

Figure 10 – Organizational KPIs – 2023 results

### **→**Unitaid Summary – 2023/2024 Organizational KPI results

Key areas	KPI		Description, definition	Target	2022	2023
Ensure organizational efficiency	<b>©</b> °	A- Secretariat efficiency	KPI A.0 - Secretariat efficiency (2022-2023 only) KPI A.1 - Budget implementation rate KPI A.2 - Staff cost allocation KPI A.3 - Investment commitment ratio KPI A.4 - Investment disbursement ratio	KPI A.0: % KPI A.1: 95% KPI A.2: na KPI A.3: na KPI A.4: na	1.77%	1.72% 92% na 13.3 13.1
		B- Secretariat carbon footprint	% reduction of the Unitaid Secretariat carbon footprint compared to 2019 baseline	40% reduction by 2025, on track to meet 50% by 2030	Strengthen efforts	Not on track
Secure sufficient and stable resources		C- Resource Mobilization	KPI C.1 - Total cumulated US\$ resources committed over strategic period KPI C.2 - % funds secured against multi-year agreements (in value) KPI C.3 – No. of new donors over the strategic period (cumulative)	KPI C.1: USD 1.5 bn KPI C.2: 70% KPI C.3: 3 new donors	USD 313m 52% 1	USD 429 65% 4
Manage our portfolio efficiently and effectively	<u>©</u>	D- Speed of grant development	KPI D.1 - Average time taken from GAD kick-off to GAD submission to the Executive Board KPI D.2 - median time from GAD kick-off to submission	KPI D.1: 6 months KPI D.2: no target	8.4.m 8.2m	5.3 months 5.4 months
	<b>iiii</b>	E- Implementers satisfaction	Level of implementers satisfaction reported in the implementers' survey, through 1 question "How would you rate your overall experience with Unitaid?"	75%	90%	100%
		F- Implementers diversity	% of grants with a lead implementer that is from the Global South (LICs $&$ MICs)	40% by end of the strategy	16%	21%
Foster staff engagement and ensure staff wellbeing	(1)	G- Secretariat gender equality	Percentage of women in management positions (P5 and above)	45-55%	45%	40%
		H- Staff satisfaction & wellbeing	KPI H.1 - Level of staff satisfaction, as reported in the staff survey, through 5 questions KPI H.2 - Ability for staff to manage their work-life balance, as reported in the staff survey, through 1 question "I am generally able to balance my work and my personal responsibilities while maintaining a healthy lifestyle."	KPI H.1: 75% KPI H.2: 75%	74% 69%	75% 71%

### **Summary**

Unitaid's performance against its Key Performance Indicators can be summarized as follows, with reference to the three main purposes of Unitaid's performance management – i) Accountability, ii) Learning and iii) Promotion.

### Accountability:

Unitaid has delivered good progress in several areas, at both a strategic and organizational level. The organization continues to expand its list of health products supported towards meeting the 30 products by 2030 objective and Strategic Objective 1. In most investment areas, portfolio health (assessed through Target Access Profiles) is good, but in a sub-set of areas, notably long-acting technologies, there is a need to undertake a thorough assessment of progress and risk appetite to determine appropriate actions for this portfolio to take forward. Of note is the good progress of scale up of track record products and mature products in Unitaid's portfolio. This year, it is estimated that approximately 300 million people are benefiting from Unitaid-supported products, including more than 50 million children.

Surrounding Strategic Objectives 2 and 3, there has been clear progress to implement the strategic initiatives in areas such as Regional Manufacturing, Climate and Health, Pandemic Prevention, Preparedness and Response and Partnerships. This includes highlights such as the production of strategy documents, other communications, signing of partnership frameworks and activities at several high-level fora. In addition, Unitaid's portfolio has strengthened its 'demonstrated engagement' with Communities and Civil Society, with an increase in this assessment from 40% in 2022 to 75% in 2023. Over the next year, it will be critical to consolidate these gains into further progress (including building on efforts that secured funding for Regional Manufacturing from the European Commission) and to see how much progress is being made on partnerships (which will be measured through the 2025 Partner Survey).

From an organizational perspective, there is strong performance against the objective to 'Manage the portfolio efficiently and effectively', with each KPI either exceeding its target or demonstrating good progress towards future targets. In other areas, some targets are off track, or require increased efforts to meet future targets. For example, against the objectives for the Secretariat carbon footprint, resource mobilization, gender equality and staff wellbeing.

#### Learning:

The performance framework is supporting the strengthening of the learning agenda with the Unitaid Secretariat. Later this year, a Learning Framework will be developed and piloted. This is intended to create a more structured and systematic approach to learning, which will be applied to both the portfolio of investments and organizational matters. In advance of this Executive Board meeting, the overall performance of the last year was discussed during three staff meetings in May 2024. This helped to calibrate performance assessment, and generated internal alignment on performance, to help set forward management actions. This was particularly useful when reviewing certain portfolios that have been assessed as off-track, such as the long-acting portfolio, and to also capture systematic points such as the overall assessment of scalability risk.

#### Promotion:

The annual performance assessment process generates a wide body of analysis and insights that can be used for the external promotion of Unitaid's work. Highlights from this report, such as the estimate of people reached, where approximately 300 million people are benefiting from Unitaid-supported products each year, are useful inputs to the expanding suite of communications materials being developed by the Secretariat. Specific plans for after the Executive Board meeting include plans to the develop summary results materials, followed by the production of a corporate report with a strong emphasis on results and impact towards the end of 2024. In addition, the analysis presented here will be used to support specific reporting requirements of a number of Unitaid donors, including the Governments of Japan, the United Kingdom and the Gates Foundation.