

**EG on HIV/AIDS  
Fifth Meeting  
Paris, France  
4-5 October 2006**

<b>Reference</b>	HIV/AIDS 5/5/1
<b>Title</b>	Summary of Partners' responses to the NDPHS Questionnaire
<b>Submitted by</b>	Secretariat
<b>Summary / Note</b>	This summary includes responses submitted by Partners as of 28 August 2006
<b>Requested action</b>	Discussion and comments

## **Introduction**

During a meeting in St. Petersburg in April 2006, the CSR noted that not all NDPHS partners had responded to the Questionnaire and, to that end, requested that the Secretariat approach the unresponsive partners to finalize the Questionnaire for submission to the next CSR meeting. Considering the fact that several of the issues addressed by the Partners in their responses are relevant to EG Chairs and ITAs / Coordinator activities, the Secretariat has decided to submit this Questionnaire Summary to the present meeting so those issues that are of direct relevance to the EGs might be discussed. The Secretariat will incorporate pertinent recommendations from the EG Chairs and ITAs, vis-à-vis the Questionnaire, into the final submission of the Summary document that will be presented at the next CSR Meeting.

Of the 17 responses received from the Partners, the Secretariat suggests the five following focal points for discussion: financing of the EGs; the role of the CSR vis-à-vis the EGs; correlating Mandates (Terms of Reference) for the EGs; the role of the EU/EC in the Partnership; and common goals for the EGs. These focal points constitute the Executive Summary. The subsequent topics presented in the Executive Summary (pp 1-2) are recurrent in the Partners' Questionnaire responses and are therefore being used as points for discussion during this first EG Chairs and ITAs Meeting. A more comprehensive Summary of the Partners' responses (pp 4-12), including graphs, follows the Executive Summary.

## **Executive Summary**

### Financing of the Expert Groups

Fifty-three percent of the respondents feel that the current means of financing the Partnership is unsatisfactory. Financing is top among the list of suggestions the Partners provide in response to Question #2d: "What activities need to be strengthened?" Some partners suggest developing a financial support base with the EC, WHO and other international organizations and NGOs, while building greater interest in the NDPHS within the private sector.

Funding of the Expert Groups is a recurrent concern in the Partners' responses, but there is no consensus on how this is to be accomplished or whether funding should occur at the local or

international level. The Secretariat recommends that the origins of monetary support for EG travel be clarified and addressed directly in the EG's Terms of Reference. Some EGs also need to clarify how they will fund their ITA (coordinator) and define what the country hosting a given EG meeting should be responsible for during a meeting.

Expert Group Chairs and ITAs should keep these questions in mind when considering how the NDPHS budget should be prepared and presented at the upcoming CSR 9 Meeting in Paris. This issue will also be discussed during this present meeting, in item 7.2 Financial matters.

### The Role of the CSR Vis-à-vis the Expert Groups

Among the Partners' comments on the CSR, one complaint is that the effectiveness of the Partnership is limited by requiring a consensus on proposals brought to the CSR Meetings. Given the different approaches by the Partners, this procedural approach has made progress difficult for the EGs.

The WHO remarked that the CSR meets too often, citing that an annual or bi-annual meeting would be sufficient. Funding being used to support CSR Meetings could have more of a long-range impact if allotted directly to the EGs.

It was also noted that the partner countries' representatives to the CSR should be in a position to express the views of their respective national governments.

### Correlating Mandates (Terms of Reference) for the Expert Groups

Of the 17 responses to the Questionnaire, only one Partner country (Latvia) finds the Terms of Reference (ToRs) to be sufficient. The ToRs differ drastically per each EG and Partners such as Sweden and the WHO feel that there must be more cross-fertilization between the EGs in order to develop more effective and concrete NDPHS projects. The first step to coordinating activities between the EGs is to streamline the existing ToRs, strengthening the commonalities of the EGs by developing structurally similar ToRs.

The Secretariat intends to develop a template for the ToRs and encourages the EGs to develop their ToRs to correspond to this layout. This issue will be discussed in Agenda Item 4 during this present Meeting.

### The Role of the EU/EC in the Partnership

There are variations in how the Partners perceive the role of the EC. The way in which the EU/EC supports the Partnership is unclear to some Partners. While nearly all of the Partners agree that EU/EC support is necessary, the Partners diverge on whether this support should be provided in the form of financing or political backing.

Finland and Lithuania suggest that the national governments of the Partners be the political spokespersons for the NDPHS in order to prepare and implement the new political declaration and framework policy document of the EU.

### Common Goals for the Expert Groups

A recurring concern in the Questionnaire is the lack of organization and cooperation between EGs. There is a consensus that the Partnership as a whole would be more successful in

implementing projects at the EU and international level if the EGs could focus on a few topics and develop strategies to execute these ideas on a broader scale. Funding from private donors and international organizations would also be better facilitated if the Partners had a more unified public presence promoting specific goals.

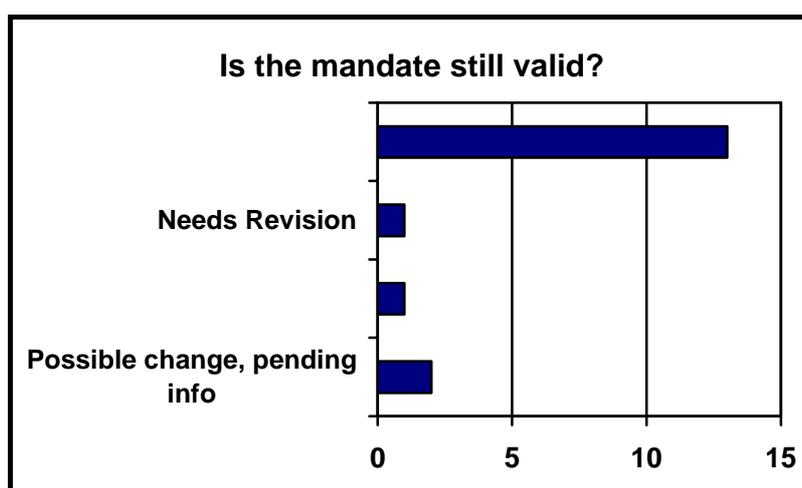
The role of the EGs, as well as possible collaboration / thematic development between the EGs, should be addressed in the ToRs. Another consideration for the EGs is whether they will develop their own projects or whether they will approach other parties to implement their projects.

Summary of Responses to the NDPHS Questionnaire Submitted by Partners

- 1. Do you support the overall objectives and mandate of the Partnership as stated in the Declaration? Does it remain valid or does it need to be updated?  
Please specify:**

1. Canada	No answer
2. Denmark	Still valid
3. Estonia	Still valid
4. Finland	Possibility for change, pending info
5. France	Still valid
6. Germany	Still valid
7. Iceland	Needs revision <sup>1</sup>
8. Latvia	Still valid
9. Lithuania	Possibility for change, pending info
10. Norway	Still valid
11. Poland	Still valid
12. Russian Federation	Still valid
13. Sweden	Still valid
14. International Labour Organization (ILO)	Still valid
15. The Nordic Council of Ministers	Still valid
16. UNAIDS	Still valid
17. World Health Organization (WHO)	Still valid

Still valid: 13  
Needs Revision: 1  
No answer: 1  
Possibility for change, pending info: 2



<sup>1</sup> Following is Iceland's response regarding revision: "Iceland supports the overall objectives and mandate of the Partnership. However, we think that it is time to start evaluating the Declaration and eventually revise it in light of the experience during the last three years."

**2. What do you think about the role and organisation of the Partnership? Please specify:**

- a. What factors make it functional/passive? Why?**
- b. Are the partners sufficiently involved in the cooperation? Yes? No? Other?**
- c. Have we achieved concrete results? Yes? No? Other?**
- d. What activities need to be strengthened?**

1. Canada:

- a) Functionality → NDPHS should initiate activities only on a limited basis
- b) Partner involvement → Unsure
- c) Concrete results → Limited
- d) Activity focus → Identify pertinent issues and plan activities

2. Denmark:

- a) Functionality: → NDPHS should assume an administrative / informational role
- b) Partner involvement → (no answer)
- c) Concrete results → Limited
- d) Activity focus → Database

3. Estonia:

- Functionality → NDPHS should be a political player; it is currently too project-oriented
- Partner involvement → Sufficient
- Concrete results → Yes
- Activity focus → Give thematic guidance to EGs to consolidate meeting priorities

4. Finland:

- Functionality → NDPHS should foster high-level political support
- Partner involvement → Insufficient
- Concrete results → Yes, especially the establishment of the Secretariat
- Activity focus → Database; Financing, More EU involvement

5. France

- Functionality → There is a greater need for collaboration on more practical projects
- Partner involvement → Sufficient
- Concrete results → Limited
- Activity focus → EG training on non-communicable diseases (i.e. alcohol addiction and mental health)

6. Germany:

- Functionality → NDPHS should support technical work, currently too structure-oriented
- Partner involvement → Sufficient
- Concrete results → Limited
- Activity focus → More EC involvement

7. Iceland:

- Functionality → NDPHS needs "To get things done"
- Partner involvement → Unsure
- Concrete results → Yes
- Activity focus → Unprepared to answer question

8. Latvia:
  - Functionality → The Partnership is useful when solving problems at the local level, but Partners are not united in their approach at the EU level
  - Partner involvement → (no answer)
  - Concrete results → No
  - Activity focus → Information exchange (Database)
9. Lithuania:
  - Functionality → NDPHS needs increased political commitment from the Partners
  - Partner involvement → Insufficient
  - Concrete results → Yes, especially the establishment of the Secretariat and EGs
  - Activity focus → Defining EG mandates; Financing
10. Norway:
  - Functionality → Role of the EGs is unclear, no consensus on priorities
  - Partner involvement → Insufficient
  - Concrete results → No
  - Activity focus → Financing of EGs; Database
11. Poland:
  - Functionality → Must develop relevant mechanisms and models (i.e. Database and financing mechanisms)
  - Partner involvement → Sufficient
  - Concrete results → Unsure
  - Activity focus → Financing; Database; Revitalization of EGs
12. Russian Federation:
  - Functionality → NDPHS needs increased funding for concrete projects
  - Partner involvement → Insufficient
  - Concrete results → Limited
  - Activity focus → Financing; Database
13. Sweden:
  - Functionality → NDPHS should foster high-level political support
  - Partner involvement → Insufficient
  - Concrete results → Yes
  - Activity focus → Financing; Database; Revitalization of EGs
14. International Labour Organization (ILO):
  - Functionality → NDPHS needs a long-term political strategy
  - Partner involvement → Insufficient
  - Concrete results → Limited
  - Activity focus → Concrete results from the EGs that can be presented to the CSR and PAC
15. The Nordic Council of Ministers:
  - Functionality → Coordination and strategic planning of activities
  - Partner involvement → Insufficient
  - Concrete results → Limited
  - Activity focus → More effective CSR meetings, provide documents well in advance

16. UNAIDS:

Functionality → Provides a forum for discussion, but EGs are not functional

Partner involvement → Insufficient

Concrete results → Yes, but questions whether the Partnership is directly responsible

Activity focus → "Thematic areas" of NDPHS

17. World Health Organization (WHO):

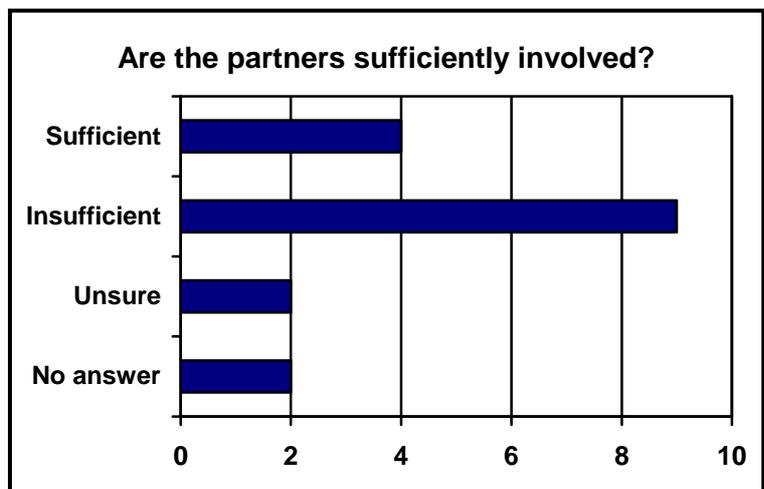
Functionality → CSR meets too often; too much traveling; need result-based initiatives

Partner involvement → Insufficient

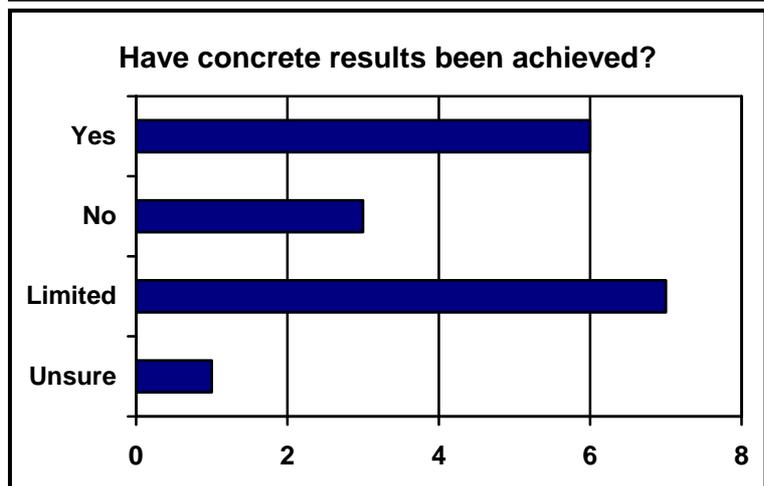
Concrete results → No

Activity focus → Database; Financing

Partner Involvement  
Sufficient: 4  
Insufficient: 9  
Unsure: 2  
No answer: 2



Concrete Results  
Yes: 6  
No: 3  
Limited: 7  
Unsure: 1



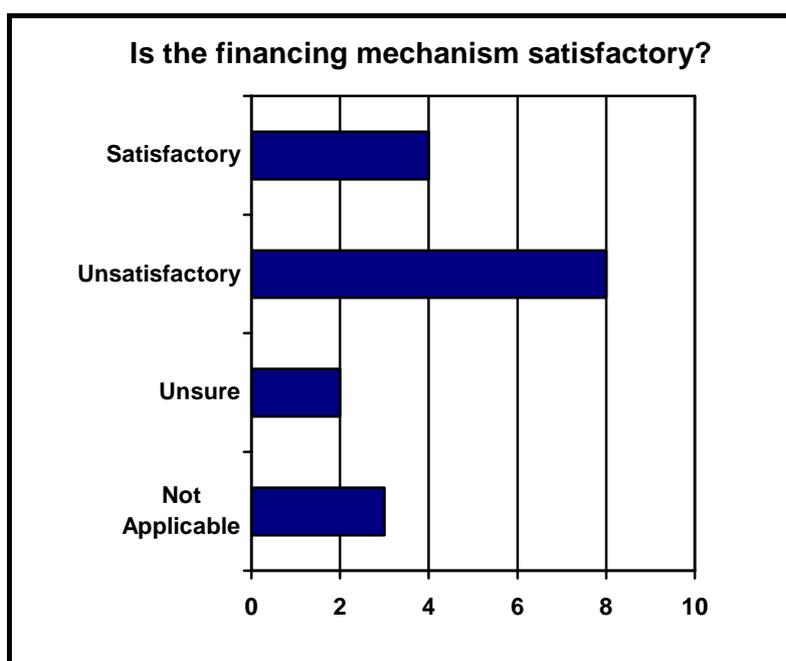
**3. What would you like to change in the organisation of the Partnership? What would you like to keep as before? (structure, role, aims, objectives, etc.) Please specify:**

1. Canada	Strengthened activity planning and execution
2. Denmark	NDPHS should coordinate activities, rather than participate in them
3. Estonia	Further develop EG Mandates
4. Finland	Continuous work on the Database and Voluntary Fund
5. France	The Partnership is too small and, therefore, ineffective – NDPHS should unite with one of the regional councils
6. Germany	Develop Project Pipeline
7. Iceland	No changes proposed
8. Latvia	No changes proposed
9. Lithuania	Expert groups must have an ITA and a concrete mandate
10. Norway	The Partnership needs to be restructured, as the decision to adopt proposals by consensus at the CSR Meetings keeps ambitious proposals from being realized
11. Poland	Develop Database
12. Russian Federation	No changes proposed
13. Sweden	No changes proposed
14. International Labour Organization (ILO)	No changes proposed
15. The Nordic Council of Ministers	Administration providing for the NDPHS, including the Secretariat, needs improvement
16. UNAIDS	No change proposed
17. World Health Organization (WHO)	Scope and purpose of NDPHS Meetings should be clearly stated advance and contain a focused agenda and follow-up mechanism (minutes, reports, etc.)

**4. How do you consider the way we have been financing the Partnership? Please specify:**

1. Canada	Satisfactory: The model is good
2. Denmark	Satisfactory: EG expenditures should continue to be covered by the Partners themselves
3. Estonia	Satisfactory: Work on EG Mandates
4. Finland	Satisfactory: Secretariat should continue to be funded by the Partners
5. France	Unsatisfactory: The yearly fee is unpredictable (i.e. the 50% increase)
6. Germany	Unsatisfactory: The Secretariat should be financed by overhead "taxes"
7. Iceland	Unsatisfactory: Iceland is too small a country to be paying so much
8. Latvia	Unsure
9. Lithuania	Unsatisfactory: Contributions should also come from EU sources
10. Norway	Unsatisfactory: Lack of financial commitment from the Partners
11. Poland	Unsure: The establishment of the Database will be a crucial factor for financial security
12. Russian Federation	Not applicable
13. Sweden	Unsatisfactory: The Partnership is underfinanced by the joint and voluntary fund
14. International Labour Organization (ILO)	Unsatisfactory: Partnership needs a stable budget to ensure long-term planning
15. The Nordic Council of Ministers	Not applicable
16. UNAIDS	Not applicable
17. World Health Organization (WHO)	Unsatisfactory

Satisfactory: 4  
 Unsatisfactory: 8  
 Unsure: 2  
 Not applicable: 3



**5. How do you consider the role and impact of National Governments of the partners? EU level? International organisations? Private sector? Please specify:**

1. Canada	International organizations do not play a visible role; local agents influence the agenda
2. Denmark	Local and regional Partners should be active in decision making
3. Estonia	The Partnership's influence should be mediated through the role of national governments, the EC and international organizations like the WHO
4. Finland	National governments of the Partners should be the political spokespersons for NDPHS in order to prepare and implement the new political declaration and framework policy document of the EU
5. France	Consortiums between the Partners should develop projects for the President country to present to the EC
6. Germany	No answer
7. Iceland	Not applicable
8. Latvia	No answer
9. Lithuania	National governments of the Partners should be the political spokespersons for NDPHS in order to prepare and implement the new political declaration and framework policy document of the EU; the Partnership should strive to get a separate allocation in the EU budget; the private sector should be approached for contributions
10. Norway	National governments are inactive / uncommitted
11. Poland	Support from national governments, the EU and international organizations like the WHO will have the greatest impact; the private sector should be approached for contributions
12. Russian Federation	Governmental support at the national level is insufficient, which negatively affects the realisation of the Partnership's goals
13. Sweden	Support from national governments, the EU and international organizations like the WHO will have the greatest impact
14. International Labour Organization (ILO)	As an international organization, ILO saw the benefits of working with the EG on SIHLWA
15. The Nordic Council of Ministers	Support from national governments, the EU and international organizations like the WHO will have the greatest impact; the private sector should be approached for contributions
16. UNAIDS	EU support is unclear; the Partnership has not engaged the private sector and NGOs
17. World Health Organization (WHO)	National governments do not assert enough political commitment; the private sector is not well-represented; the WHO would like to be a more committed partner

**6. What are your ideas about improving national coordination? Please specify:**

1. Canada	Establish a strategic planning group; install a permanent committee to give financing advice to the Secretariat
2. Denmark	No need for improvement
3. Estonia	The Partnership agenda should investigate health topics prioritized by other European organizations
4. Finland	Representatives of the Partner, especially at the CSR, should be supported by national orgs. and governments
5. France	No answer
6. Germany	No answer
7. Iceland	No answer
8. Latvia	No answer
9. Lithuania	Representatives of the Partner, especially at the CSR, should be supported by national orgs. and governments
10. Norway	Unsure
11. Poland	Promote the Partnership on Web sites of national institutions
12. Russian Federation	The EU should formulate a strategy for the Partnership to implement
13. Sweden	Representatives of the Partner, especially at the CSR, should be supported by national orgs. and governments
14. International Labour Organization (ILO)	No answer
15. The Nordic Council of Ministers	Unsure
16. UNAIDS	Unsure
17. World Health Organization (WHO)	WHO offices in Estonia, Latvia, Lithuania and Poland should be more involved; Partners should have clear Terms of Reference

<p>No need for improvement: 1          No answer / Unsure: 8          CSR Representatives supported by national governments and orgs: 3          Other: 5</p>
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**7. How do you consider the work of existing expert groups? Is their mandate sufficient? How do you consider expert groups impact on NDPHS activities in general? Please specify:**

1. Canada	Too soon to evaluate
2. Denmark	Role of the EGs is unclear
3. Estonia	Mandates are insufficient
4. Finland	Mandates are unclear
5. France	EGs need to produce more concrete projects
6. Germany	EGs need a more prominent role
7. Iceland	Too soon to evaluate
8. Latvia	Mandates are sufficient
9. Lithuania	EGs need more funding
10. Norway	EGs need more funding
11. Poland	Mandates must be modified to explain how the EG will be funded
12. Russian Federation	EGs need to produce more concrete projects
13. Sweden	EGs need to collaborate more with each other; EGs must strengthen relationships with organizations and donors in the project Partner country,
14. International Labour Organization (ILO)	ILO is working successfully with SILHWA
15. The Nordic Council of Ministers	The Nordic Council of Ministers met with SILHWA in Helsinki and suggests co-funded projects that include national partners and international organizations
16. UNAIDS	Mandates are insufficient
17. World Health Organization (WHO)	More cross-fertilization between EGs