Administrative Reform in International Organizations: the case of the Joint United Nations Programme on HIV/AIDS

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Summary:
This paper focuses on the causal factors, organizational processes, and side effects of administrative reforms launched within the United Nations system, in the field of HIV and AIDS. It is based on an empirical analysis of the UNAIDS Programme, an interorganizational system bringing together ten UN agencies to combat the worldwide epidemic, with the support of a Secretariat.
Firstly, the paper argues that the administrative reform of UNAIDS was unlikely to have come from the UN organizations themselves, although the Programme was expected to lead these organizations to better coordinate and harmonize their AIDS strategies. Secondly, it identifies three external factors that have led UN organizations to reform their governance mechanisms and procedures. Thirdly, it explores the conditions under which the reform of UNAIDS has been implemented since 2005, with particular attention to the Secretariat that has become involved as an active “reform entrepreneur.” Finally, it identifies some of the unexpected effects of the reform, with a particular emphasis on competition among UN agencies, organizational complexity, and bureaucratization.
The concluding remarks argue that when analyzing administrative reforms within international organizations, one should investigate the interrelations between the external pressures that drive reforms and the activity of reform entrepreneurs.

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The content of this paper is based on personal empirical research and direct observation. It does not represent the views of any organization to which the author has been affiliated.
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In recent years, social scientists working on international public policies have paid greater attention to the reform of the “global architecture” for development. This renewed interest among scholars and researchers has stemmed to a great extent from political discussions of aid effectiveness begun in the wake of the adoption of the Millennium Development Goals (MDGs). The failure of multilateral responses to major challenges of development and poverty eradication have encouraged key international political and financial partners to thoroughly address the issue of “global governance” mechanisms through which international programmes for development are set up and implemented in the developing world. During international high-level conferences in the early 2000s, world political leaders, policy-makers, and experts urged bilateral and multilateral organizations, and to a certain extent actors from the private sector and civil society, to carry out in-depth reform of their procedures in order to meet specific challenges: harmonization and alignment of international programmes, greater inclusiveness, better ownership by the governments of host countries, multi-sectoral approaches to development challenges, and efficient management.

The renewed interest of researchers in global governance mechanisms is also driven by observation of large-scale transformations that have affected most of the international regimes bringing development actors together. In the context of globalization, a higher number of public and private actors with various resources and statuses cooperate at different levels through multiple and interdependent policy networks, discussion arenas, and deliberation processes. Major transformations have recently reshaped global public policy networks in the field of development, including the increasing role of international NGOs in development programmes, the participation of the private sector in funding and in development assistance, the creation of innovative multilateral funding mechanisms, the normative influence of civil society organizations (CSOs), the growing role of foundations, universities, think tanks, and private consultants in the provision of policy expertise, and growing demands from the governments of developing countries to play a larger role in international financial institutions. Not only do these changes result in a more complex landscape, they contribute to a constant redefinition of norms, rules, and procedures through which development policies are designed and monitored at international, regional, and country levels. Convergent governance challenges may be found in most fields of development: a higher degree of complexity, coordination problems, lack of visibility and predictability, and potentially overlapping, competing, and even conflicting activities. Each international regime contains a diversity of multilevel and embedded arenas, actors, and processes, constantly changing and open to new forms of public-private partnerships.

In this new international landscape, the UN system is no longer in a position of leadership when it comes to designing and implementing international development policies. The General Assembly, the Economic and Social Council (ECOSOC), and the Secretariat General, as well as specialized agencies, funds, and programmes, no longer play a central role at country level, although they remain important global negotiation arenas in which the

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legitimacy of international policies is reinforced. The main decisions are made by IFIs, bilateral donors, and, to a great extent, directly by the top world leaders at the G8 summits. In this international context, UN organizations are challenged to urgently reform their internal procedures and to work more cohesively with the aim of increasing their efficiency and accountability.

The challenge of reforming multilateral organizations preceded the era of globalization. In the late 1960s, the bureaucratization of UN organizations and the proliferation of agencies, subsidiary bodies, departments, programmes, and funds were already viewed as organizational challenges that might undermine the United Nations’ main missions. For instance, the Jackson report (1969) identified the UN system as a “prehistoric monster.” It addressed various organizational challenges repeatedly pointed out in various books on the UN (Pitt and Weiss, 1986, Chadwick, 1998, Bhatta, 2000, Knight, 2000, Fomerand and Dijkzeul, 2007). Over the last four decades, each new Secretary-General was elected with the task of reforming the UN bureaucracy to avoid duplication of programmes, simplify the institutional architecture, reduce transaction costs among the various bodies, strengthen accountability and transparency, and improve the capacity to react swiftly to emerging policy issues (Krasno, 2004).

Despite reforms, the multilateral system is far from providing an efficient response to the organizational challenges that weaken multilateral efforts to address poverty reduction and human development. The donor community has recently placed international organizations (IOs) under scrutiny, in particular the UN system. IOs have been urged to reform their internal management and improve their coordination in order to deliver efficiently. In this context, all IOs have included administrative reform as a key objective on their agendas and increased the resources dedicated to bureaucratic change. “Modernization of the administration” has become a leitmotiv for all IOs.

The global response to HIV and AIDS as a case study

This paper does not address the system-wide reform experienced by UN organizations during the last decade. Instead, it provides an empirical analysis of efforts made by UN organizations to improve the multilateral response to HIV and AIDS, which offers valuable insights into broader UN reform.

For a number of reasons, the pressure to reform the UN system has been intense in the field of HIV and AIDS. The multilateral response to the epidemic was put high on the UN agenda with the establishment of the “Joint UN Programme on HIV/AIDS” in 1994-1996, better known as UNAIDS. It was followed by the recognition of the epidemic as a major issue for development (MDGs, 2000), by the adoption of global and measurable objectives at a Special Session of the UN General Assembly (UNGASS, 2001), and by unparalleled financial

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4 The MDGs form the major ideological corpus to which all development actors refer. They were adopted during a UN summit.
5 Including the IMF and the World Bank.
6 These include the 19 members of the Paris Club, and the 23 members of the OECD Development Assistance Committee (DAC), including the EU.
7 Examples include organizational complexity, lack of coordination with development partners, and the need for a better information system and improved UN management. See UNDP, 1969, A Study of the Capacity of the United Nations Development System (Geneva: UN, 2 vols., DP/5, No. E.70.1.10).
resources pledged by donor countries and private foundations in the 2000s. In the UN system, member states had high expectations of the various UN programmes on HIV/AIDS. However, in the mid-2000s the low impact of this multilateral response on the state of the epidemic in various regions of the world\(^8\), as well as policy gaps, overlapping projects, and sometimes competition among multilateral organizations, provoked major criticisms of the UN’s “deadly inertia.” These criticisms came from major donors, civil society organizations (CSOs), and some recipient countries.

This paper concentrates on the reform of UNAIDS. It focuses on the efforts that have been made to improve the governance of the UNAIDS Programme, which brings several UN agencies and a Secretariat together. It pays particular attention to “managerial reforms,” defined as the various intentional actions taken by governing bodies, on one or several occasions, to change the formal rules and mechanisms of the organizations over which they have authority. These reforms aim at influencing decision-making and regulation processes regarding power distribution, resource allocation (such as financing and budgeting), human resources (such as staff distribution, recruitment, and career paths), and policy-making (planning, implementation, monitoring, and evaluation)\(^9\).

Reform of public administrations is always grounded in a normative vision. Reform is usually two-pronged: on the one hand, the immediate improvement of organizational performance, and on the other, promoting “public goods” in the longer term, which generally relates to the promotion of social justice. In the context of the neoliberal turn of the 1980s, reforms are usually intended to provide the best public service at the lowest cost to the users, but they may pursue a whole range of intermediate targets (changing bureaucratic behavior, reducing politicization of the administration, dismantling the public sector, fighting against corruption, etc.).

**Analytical framework**

Various studies of public administrations lay emphasis on factors that may or may not lead to bureaucratic reform. In this paper, I suggest that understanding the managerial reforms initiated within UNAIDS requires investigating both the macro-level factors that lead UN actors to commit themselves to change bureaucratic rules, and the factors associated with the intentions and activities of “policy entrepreneurs” who promote and drive reform processes within UNAIDS.

Holistic approaches focusing on the circulation of administrative solutions among organizations, sectors, and countries usually concentrate on external factors that encourage or influence reform within bureaucracies. They pay greater attention to the relations between each bureaucracy and its immediate environment (comprising other administrations, some “constituencies”, political organizations, civil society organizations, financial and technical

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\(^8\) Especially in sub-Saharan Africa, Eastern Europe, and Asia.

\(^9\) Therefore, this paper does not concentrate on “institutional reforms,” which not only relate to decision-making and regulation within organizations, but also involve intentional change in the whole structure of an organizational system. Institutional reforms aim at setting new “constitutive rules” or at least profoundly changing the existing ones. They usually look for an extensive, multi-layered reorganization of a bureaucratic structure (units, departments, sectors, agencies, etc.). On an organizational scale they relate to what Theodore Lowi has called “institutional policies.” Both managerial and institutional reforms are intended to change governance mechanisms, but this is a merely theoretical distinction:: empirically, some managerial reforms may be so extensive as to result in institutional reform.
partners, the private sector, the media, etc.). They concentrate on macrosocial factors (institutions, cultural norms, social and economic structures) that explain the processes by which technical procedures, organizational solutions, rules, and patterns of behavior can circulate from one organization to others (e.g. processes of “diffusion,” “dissemination,” “transfer,” “imitation,” and “convergence”). Some researchers focus on material elements such as competition among organizations for the control of public resources, external shocks (e.g., wars, economic crisis, civil conflict, social mobilizations), and long-term mutations (e.g., the development of new communication technologies, new policy instruments, demographic or social change). Others focus on symbolic or cultural elements that relate to representations, ideology, and legitimacy, such as the success of a normative vision associated with a party or a political leader’s electoral success, the pressure from “epistemic communities” (e.g., the influence of scientific communities) or advocacy coalitions and social movements (e.g., networks of activist organizations), and long-term change in representations (e.g., the diffusion of norms such as human rights or gender conceptions). The new institutionalist perspective on organizations addresses both aspects (Powell and DiMaggio, 1983; Meyer and Scott, 1992; Scott and Christensen, 1995). It lays the emphasis on the tendency of organizations, in a particular “interorganizational field,” to import the cultural norms and institutional standards that are prevalent in their environment – a process known as “institutional isomorphism”\footnote{For instance, this perspective may lead to drawing attention to emerging ideas and new mechanisms set up in the organizations’ environment, and the process by which these organizations seek to copy and disseminate concepts, ideas, rules, and procedures that may appear more effective or legitimate in their environment.}

The study of external factors also leads to an examination of the competitive relations through which IOs and other development actors seek to control the flow of resources that help minimize reliance on rival organizations and, whenever possible, to extend its control over them. Such a strategic perspective can focus on the impact of transactions, debates, balance of power, and proactive behaviors that may encourage or impede internal reforms. In the international public health governance sector, for instance, the relations between donors, funding organizations, NGOs, activists, and the private sector, along with IOs, gives an idea of the continuous and complex transactions that can have an impact on the internal activities of UN bureaucracies.

In this regard, studies focusing on external factors do not always give priority to a macrosocial analysis. They are also likely to stress the importance of decision-makers, viewed as rational actors who have intentions and promote innovative solutions. They may investigate the role of individuals or small groups who may be identified as “reform entrepreneurs” (Christensen et al., 2007; Le Lidec and Bezes, 2009). The latter may be defined as a kind of policy entrepreneur (as conceptualized by Kingdon\footnote{See also Nancy and King (1991), Weissert (1991), and McCown (2005).}, 1984) who promote innovations in organizational structures. Reform entrepreneurs thus contribute to persuade decision-makers leading organizations to change institutional mechanisms and public policies’ rules and procedures. They convey social/institutional interests and are equipped with the social skills needed to engage and push for reforms. Depending on the context, politicians, agents of IFIs, agents of regulatory agencies, management consultants, and also constituencies’ representatives, lobbyists, and social activists may act as reform entrepreneurs.
Scholars may also investigate the role of actors working at the intersection of several organizations, whose position as “marginal-secant” (Jamous, 1969; Crozier and Friedberg, 1980), policy broker (Sabatier and Jenkins-Smith, 1993; Nay and Smith, 2002), policy transfer entrepreneur (Dolowitz and Marsh, 1996), and relay (Friedberg, 1997) may influence change – or resistance – within an organization. In contrast, other research programmes primarily focus on internal factors that contribute to administrative reforms. They analyze bureaucratic change by concentrating on the bureaucratic system itself. They may focus, for instance, on the internal arrangements established to adapt rules and set up new policy-oriented instruments. Most of the time, they draw attention to the interplay between specific sub-units within organizations. They may also highlight internal competition for power, resource, and prestige, principal/agent relations, policy entrepreneurship, leadership, the activity of veto players, and even the role of bureaucratic culture and professional socialization in the shaping of staff behavior. These approaches often focus on internal processes and, to a large extent, on the individual behavior that drives change, or resistance to change.

This distinction between external and internal factors is a conceptual one. It does not reflect the actual processes through which bureaucratic organizations change; it merely provides some analytical tools and useful concepts of particular relevance for building a consistent and intelligible analytical framework. But such a framework should by no means pre-empt the empirical study. Choosing one perspective and excluding the other would mean maintaining a “blind spot” in the explanation. Following Bauer and Knill (2007, 20), I argue that analyzing organizational reforms calls for an investigation of the interrelations between external and internal factors that affect the functioning of IOs. We should keep in mind that the decisions leading to managerial reforms within bureaucratic organizations are often imposed or encouraged, and sometimes immediately affected, by direct incentives and structural transformations in the global environment. Conversely, reforms within organizations may influence the partners and stakeholders in their immediate environment. Only an empirical approach can describe the complexity of interrelated factors, intentional or unintentional, internal or external, that can contribute to promoting change within IOs.

In this paper, I argue that the increasing commitment of the UNAIDS Secretariat, acting as a “policy entrepreneur” pushing for the managerial reform of UNAIDS, has been made possible only in a context characterized by wide international diffusion of “new public management” (NPM) rules and growing pressure by key donors for in-depth reform of the UN bureaucracy.

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12 As Le Lidec and Bezès (2009) argue, the activity of reform entrepreneurs should not be viewed as a “heroic activity.” It always takes place in an environment that generates both incentives and resistance to change. Their intentions and their strategic choices may be influenced by institutional constraints, other actors or social movements, the structure of the interaction games within the local context they are involved in, and even by structural features of economic and social life.

13 In UN bureaucracies this can include secretariats, departments, executive bodies, top-level bureaucrats, diplomats, oversight committees, and evaluation teams.

14 In the concluding chapter of the book edited by Bauer and Knill (2007), the two authors review both external and internal factors that may trigger or, conversely, hamper management reforms in international organizations.

15 In a book on national post-NPM reforms, Christensen and Lægreid (2007, 4) argue that “institutional dynamics of reform can best be interpreted as a complex combination of environmental pressure, polity features and historical institutional context”.
The launch of the reforms is both the consequence of external constraints and the result of entrepreneurial strategies for change.

The paper is divided into four parts. Part 1 argues that managerial reforms within UNAIDS could not possibly come from UN organizations themselves, although they have been urged to combine the various UN policies into a coordinated and comprehensive response to the epidemic. Part 2 identifies the external factors that have driven UN organizations to reform the UNAIDS governance mechanisms and procedures. Part 3 analyzes the conditions through which the reform of UNAIDS has been conducted, with particular attention to the role of the UNAIDS Secretariat that has been an active conveyor of reform. Part 4 elaborates on some unexpected effects of managerial reform, with particular emphasis on competition between UN agencies, organizational complexity, and bureaucratization.

1. UNAIDS: groundbreaking partnership or disunited alliance?

UNAIDS is an innovative institutional mechanism aiming at strengthening the commitment of UN organizations to respond to HIV and AIDS. It brings together the efforts and resources of ten UN organizations involved in the response to the epidemic: the Office of the United Nations High Commissioner for Refugees (UNHCR), the United Nations Children's Fund (UNICEF), the World Food Programme (WFP), the United Nations Development Programme (UNDP), the United Nations Population Fund (UNFPA), the United Nations Office on Drugs and Crime (UNODC), the International Labour Organization (ILO); the United Nations Educational, Scientific and Cultural Organization (UNESCO), the World Health Organization (WHO), and the World Bank. These ten IOs have the status of “Cosponsoring organizations,” better known as “Cosponsors.”

UNAIDS was created in 1994 by the UN Economic and Social Council (ECOSOC). It began its activities in 1996. From the outset, it was viewed as a groundbreaking system, for two main reasons. First, it had been given the task of improving UN governance by transcending organizational barriers between agencies, with a view to coming up with an integrated and massive response to one of the most critical challenges for development. According to its mandate, it was dedicated to strengthening interagency collaboration within the UN system and contributing to a more efficient and cohesive multilateral system. From this perspective, the creation of UNAIDS was seen as an important institutional experiment, highlighting the aspiration to establish new governance mechanisms in the UN system at global level.

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16 I do not analyze the circulation of policy ideas that might have nurtured the UNAIDS Programme during the first decade of the Joint Programme through processes such as transfer, diffusion, imitation, and copying. This is discussed elsewhere (Nay, 2009).

17 At the outset, UNAIDS brought together six UN organizations (in fact one member, the World Bank, is a Bretton Woods system organization). In the late 1990s and early 2000s, four new UN entities joined the “UNAIDS family”.

18 As mentioned in the ECOSOC resolution: « The Programme will draw upon the experience and strengths of the six Cosponsors to develop its strategies and policies, which will be incorporated in turn into their programmes and activities. The Cosponsors will share responsibility for the development of the Programme, contribute equally to its strategic direction and receive from it policy and technical guidance relating to the implementation of their HIV/AIDS activities. In this way, the Programme will also serve to harmonize the HIV/AIDS activities of the Cosponsors. » The resolution also states: « at country level […] , the participation in
Second, UNAIDS was the first UN Programme to introduce the formal representation of civil society on its governing board, with consultative status. This situation is still unique in the UN as of 2009. In 1994-1996, the ECOSOC decision to include CSOs in the governance of UNAIDS was a major step. It acknowledged the key role of these organizations in the development of the global response to the epidemic, based on the assumption that they can provide useful information and expertise because of their grass roots activity and connection to vulnerable populations. From its early days, UNAIDS has been perceived as a unique system dedicated to building broad, long-term partnerships with networks of activists, groups of people living with HIV and AIDS (PLWH), international NGOs, and a wide range of civil and faith-based organizations.

1.1. UNAIDS: a pioneering interagency mechanism in the United Nations system

Within UNAIDS the Cosponsors operate under the authority of a governing board called the Programme Coordinating Board (PCB). They are assisted by a Secretariat, whose role and activities have incrementally broadened over the years. The UNAIDS Secretariat’s task is twofold: it is mandated to raise funds targeting the HIV/AIDS epidemic and to distribute them among the Cosponsors; it also assists the Cosponsors in various ways, including through the promotion of coordinated and scaled up efforts to respond the epidemic. It is also expected to provide strategic information about the epidemic, mobilize technical resources, and engage with governments and civil society. It is to a large extent a “secretariat of UN secretariats”.

In 1994, the ECOSOC assigned UNAIDS a very ambitious role in the long run, as the Joint UN Programme was officially established to build global consensus on policy responses to AIDS. Through UNAIDS, governments from the North and South, the UN system, and international partners from civil society were asked to agree on a global framework to combat a scourge that was jeopardizing years of effort in development, especially in sub-Saharan Africa. However, in contrast to other UN programmes whose main objective is to coordinate the Programme of six organizations of the UN system will ensure the provision of technical and financial assistance to national activities in a coordinated multisectoral manner. This will strengthen intersectoral coordination of HIV/AIDS activities and will facilitate further incorporation of these activities in national programme and planning processes » (ECOSOC, Resolution 1994/24).

The executive board comprises 22 member states, the ten Cosponsors, and five representatives of NGOs, including associations of people living with HIV.

At the time, this decision was not only pioneering but also courageous, as many governments were reluctant to even acknowledge AIDS, and activist organizations were conducting loud demonstrations, using symbolic violence to denounce the sluggishness of the Northern countries, the UN, and governments in the developing world in combating the epidemic worldwide.

At the PCB, Cosponsors have full rights, except for the right to vote.

There are two kinds of international secretariat. Firstly, the secretariats of UN funds, programmes, and specialized agencies comprise a few hundred to several thousand civil servants and contractual agents. They are often based at the headquarters of UN bodies. Many of them play an important role in the production of policy ideas and of norms promoted in development programmes, and in the provision of technical support to developing countries. Secondly, other secretariats are set up to ensure the implementation of international conventions and treaties resulting from multilateral negotiations (for instance those in charge of supporting the implementation of environmental conventions). They are much smaller (the number of staff employees is frequently less than 100). Their mandate remains modest: they play the role of facilitator and provide technical support for the preparation and follow-up of international meetings. They are also interesting locations for analyzing bureaucratic activities, and their influence on global public policies may not be insignificant (Bauer, 2006).
the efforts of State actors, the creation of UNAIDS was first and foremost a response to internal UN organizational challenges. The ECOSOC decision to create UNAIDS took place in the context of the early nineties, when harsh criticism was focused on the capacity of the UN system to provide an efficient response to the epidemic under WHO leadership. Through UNAIDS, the Cosponsors were given the mandate of developing a multi-sectoral and integrated response to HIV and AIDS, by harmonizing their goals and objectives, constructing common tools and instruments, sharing knowledge and technical expertise, speaking “with one voice,” and, finally, jointly delivering at country level. Interagency cooperation was expected to bring about a swift, reactive, and large-scale commitment by the UN to affected countries in the areas of prevention, impact mitigation, and access to treatment.  

From a broader perspective, as an interorganizational mechanism UNAIDS is expected to ensure the convergence – and, wherever possible, a close match – of policy goals and priorities within the UN system. It is also mandated to facilitate the elaboration of common management standards and work agreements in the various policy sectors associated with the response to HIV and AIDS. A system such as UNAIDS challenges the Cosponsors to connect and better integrate their activities, even though they are complex organizational systems driven by different mandates, particular policy agendas, specific knowledge and norms, distinct technical expertise, and, last but not least, internal management procedures and bureaucratic routines. It also aims to reduce competition in fund-raising and fragmentation in decision-making, as well as overlap and duplication of effort in the provision of technical assistance to governments and key stakeholders in developing countries.  

\[\text{Diagram of UNAIDS structure and stakeholders}\]

\[\text{23 Until the mid-2000s, one of the major obstacles to efficient programmes remained the absence of interconnection between prevention, care, support, and treatment policies, both at the programmatic and operational levels. At country level, this situation has led to national AIDS strategies focusing primarily on public health issues, generally driven by the Ministries of Health, without a clear understanding of the multi-sectoral aspects – social, educational, cultural, political, economic, and judicial – which should be incorporated into a comprehensive approach.}\]
At first sight, the functioning of the UNAIDS system provides a noteworthy example of the restructuring efforts that have been tried out to better coordinate the many UN programmes and activities dedicated to development and poverty alleviation. To a great extent, when it was started in 1996 UNAIDS was a forerunner of the UN system-wide reform policy launched by Secretary-General Kofi Annan in the 2000s. Within the UN system, UNAIDS was the first Programme dedicated to building a multi-sectoral response combining the efforts of various agencies. Not only was it a *sui generis* partnership system within the UN architecture, it was viewed as an innovative system intended not to do “business as usual” in the UN.

UNAIDS is thus a good example of the main organizational reforms the UN system has sought to set in motion in recent years. Both the progress made in interagency coordination and partnership in the last decade, and the large number of obstacles that still continue to impede progress toward a unified UN response to HIV and AIDS, offer significant illustrations of the challenges that go with reform activity in the UN system. Looking at the first ten years of the Programme, I argue that neither the Secretariat nor the Cosponsors and member states could have effectively launched the reforms they were invited to initiate in 1996.

1.2. The inertia of the multilateral system: “Everybody wants coordination, but nobody wants to be coordinated”

During the first decade of the Programme, the UNAIDS Secretariat mainly acted as an interagency coordination body within the UN system. It provided technical support to UNAIDS meetings (the governing board, the committee of UN agencies’ executive directors, and many other technical meetings). At this top-management level, it certainly helped develop a policy dialogue and share information about Cosponsors’ ongoing HIV/AIDS projects. But at a lower level its activity did not really provide the opportunity to build sustainable interagency technical partnerships to tackle the epidemic, despite a number of forums where AIDS specialists could exchange policy options and ideas.

The Secretariat faced not only limitations in financial and human capacity, but also discrepancies between Cosponsors’ key policy priorities and objectives. In the first years of UNAIDS, the absence of standard rules and mechanisms for interagency coordination, the low level of funding devoted to HIV/AIDS in most agencies’ programmes (except for WHO), the lack of interagency funds in the UNAIDS budget, and even the mistrust between top-level management teams (for example between WHO and the Secretariat), made the partnership

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24 For instance, at country level, through the Resident Coordinator system and the development of joint UN programmes at country level.

25 In parallel, the Secretariat also started to build partnerships with civil society, with the goal of moving towards a global advocacy coalition (at a time when relations between CSOs and UN organizations were still marked by suspicion). It also sought to mobilize political leadership, as the “denial” of AIDS was high among political leaders in the developing world.

26 The UNAIDS Interagency Tasks Teams (IATTs) were created with this objective. They are expected to encourage the experts of several agencies to share ideas and expertise on crosscutting policy issues that require information exchange, mutual understanding, and combined objectives. Nevertheless, most of them have remained simple discussion forums and have not come up with major outcomes (with the exception of the IATT on Education and HIV/AIDS).
less than consistent with the ambitious objectives set in 1996. The policy dialogue between organizations led to cautious resolutions, most of which could hardly satisfy CSOs and networks of people living with HIV and AIDS, whose expectations of UNAIDS were very high at the start of the Joint Programme. The Secretariat was largely confined to collecting information on the Cosponsors’ scattered activities and helping formalize resolutions and policy guidelines, presented after the fact as a Joint UN Programme. Its capacity to give impetus to the technical partnerships among Cosponsors, to elaborate joint management rules, to match Cosponsors’ programmes, or to flag new policy issues on HIV/AIDS remained low. We will argue, in Parts 3 and 4, that the Secretariat’s capacity to bring about change gradually broadened in the 2000s with a substantial scaling up after 2005-2006.

In the late nineties, there was very little chance that a change in UNAIDS governance would be initiated by the Cosponsors themselves. Despite regular declarations of goodwill and resolutions stated by their executive directors, senior UN policy-makers had not pushed the HIV/AIDS agenda for years. Their low commitment may have resulted from a lack of funding and human resources, a lack of expertise and/or a lack of interest on HIV and AIDS. Another obstacle was the lack of incentives, both funding inducements and executive binding decisions, to persuade Cosponsors to effectively engage in interagency partnerships. The lack of commitment of the donor community kept the UNAIDS budget at a level that could not meet the basic requirements for a scaled-up response. Moreover, during the first years of the Joint UN Programme, the absence of interagency funds (dedicated to joint activities) meant that collaboration at a technical level was highly unlikely.

In general, without such incentives, Cosponsors’ senior policy-makers were generally worried about losing margins of autonomy within a new coordination system, which might increase the risk of cross-checks and mutual surveillance of financial expenses, policy targets and objectives, implementation effectiveness, and ethical issues. Although UN policy-makers publicly disapproved of interagency divisions and compartmentalization as a hindrance to a joint response to the epidemic, each Cosponsor could expect to lose part of its influence by being involved in an integrated UN partnership system. This was especially true for the “big four” agencies cosponsoring UNAIDS (WHO, the World Bank, UNICEF, and UNDP), whose senior specialists would be concerned about accountability for their actions in coordination mechanisms involving “smaller” agencies with limited field capacities and/or less developed expertise (such as UNESCO, UNFPA, and UNODC). An overview of the resolutions adopted in the first ten years by the Cosponsors’ executive directors clearly illustrates the lack of a shared vision of policy priorities in the field of HIV and AIDS. This exemplifies the popular saying among international bureaucrats, “Everybody wants coordination, but nobody wants to be coordinated.”

27 For instance, in UNESCO – one of the founding organizations of UNAIDS in 1994-1996 – the first strategic document on the epidemic was officially adopted in 2002, when the executive director realized that nothing had been done since 1996. The executive director tasked a senior director with coordinating the drafting of a strategy and bringing on board the various sub-units that could be – or should be – involved in the educational response to the epidemic.

28 In 1996, only US$200 million was devoted to the global fight against HIV and AIDS, which was far from matching the level of the epidemiological threat.

29 The budget is associated with a policy framework, and is known as the Unified and Budget Workplan (UBW).
From a “principal-agent” perspective, one might easily see that organizational reforms should have come from the UNAIDS governing board (the PCB). On this board 22 member states, together with the ten Cosponsors and the five organizations representing the civil society, are tasked with establishing policy priorities for the Joint UN Programme. Although full members of the governing board, CSOs’ representatives have never had much influence on the development of the programme. They take the floor on behalf of the populations who are affected, at risk, or vulnerable. They use direct language and do not hesitate to raise controversial issues. But not only do they not have the right to vote, they do not weigh heavily in the deliberation processes. Their voices do not count as the state representatives’ do. Today, the governing board’s resolutions still primarily reflect member states’ agreements.

The member states of the governing board include both OECD countries – the bilateral donors – and a range of developing countries confronted with the epidemic. All of them have a direct interest in a more efficient UN Programme on HIV and AIDS. Nevertheless, during the first decade they did not come up with any high-profile resolutions that could have given real impetus to reforming the UNAIDS governance system30. The first reason for this was the lack of commitment from various governments participating in the governing board. Despite clear warnings from the scientific community, many donor countries did not adapt the level of funding to the intensity of the epidemic. In parallel, some governments of the developing world (including sub-Saharan African countries) were not keen to acknowledge their vulnerability to AIDS in the late 1990s31.

The second reason relates to the institutional architecture of UNAIDS. Its governing board has not demonstrated strong authority over the Cosponsors. Its resolutions are binding decisions, but to be effective they have to be legally endorsed by the governing boards of the Cosponsors so as to be incorporated into their regular programmes. Such a system, requiring a “two-step endorsement” by two distinct governing bodies, has been an obstacle to UN responsiveness to the changing course of the epidemic. It has reduced the UNAIDS governing board’s authority, which does not have the full resources to compel Cosponsors’ top-level managers to systematically connect their AIDS strategies and their micro-management to the rest of the UNAIDS family. It gives too much power in each UN agency to the “gate-keepers” who control the information flows between the UNAIDS Programme on the one hand and each Cosponsor on the other. It increases the number of bureaucrats horizontally involved in the decision processes leading to the endorsement of each UNAIDS resolution.

Last but not least, the UNAIDS governing board’s authority over the ten Cosponsors has been impeded by two additional factors: the lack of financial incentives dedicated to the

30 The first independent evaluation of UNAIDS mentioned, in 2002, that the governing board “was established to exercise a governance role in relation to all work of the Cosponsors and Secretariat in respect of HIV/AIDS. In practice, however, this oversight role has been limited to the programme activities included in the budget and workplan … It has no real authority beyond its moral stature over cosponsoring organizations or their boards. Nor does [it] maintain direct formal communication channels with Cosponsors’ boards.” (UNAIDS/PCB(13)/02.2 – 11 November 2002, 10.)

31 The denial by some government officials who were not keen to admit the looming health crisis threatening their populations, as well as lack of information and misconceptions among some affected countries, such as South Africa, were important obstacles to appropriate responses to the epidemic at an early stage.
enforcement of resolutions (in particular interagency funds), and the insufficient commitment of the Cosponsors’ executive directors, who were initially expected, in accordance with the status of UNAIDS, to ensure the link between UNAIDS and their own governing board.

In this context, one could hardly expect that UNAIDS governance reform would be initiated by its internal bodies, whether they are in the position of principals or agents. I would argue rather that the reform of UNAIDS has been resulting from external factors. We ought thus to investigate institutional change in the environment of UNAIDS and the processes by which such change has contributed to make reform a priority on the agenda of all Cosponsors.

2. The UNAIDS bureaucracy in a changing global environment

In recent years, three sets of external factors have led to the launch of reforms within UNAIDS: structural change in global AIDS governance, the recognition of the epidemic as a major challenge for development, and UN system-wide reform.

2.1. The new international AIDS regime

In a globalized world, global AIDS responses illustrate how an international regime has become a pluralistic and complex governance system in less than 15 years. In the early nineties, such policies were initiated by few UN organizations, with the support of a limited number of donors. The recognition of AIDS as a major challenge for development and the setting up of new mechanisms and organizations dedicated to the AIDS response, as well as the dramatic increase in flows of public and private funds targeting the epidemic, have led to a proliferation of forums, arenas, bodies, and networks in which a large number of stakeholders interact.

Today the international AIDS regime is characterized by a complex architecture involving a whole range of actors with different statuses and roles, including innovative financial mechanisms\textsuperscript{32}, bilateral agencies\textsuperscript{33}, financial institutions\textsuperscript{34}, foundations\textsuperscript{35}, the private sector\textsuperscript{36}, field-based and international NGOs working in the health and social sectors, associations and networks of people living with HIV, community-based and faith-based organizations, and even a wide range of celebrities from business, sport, and culture\textsuperscript{37}. Other actors of varying and unequal status, representing various constituencies, are both partners and competitors in

\textsuperscript{32} Such as the Global Fund against AIDS, Tuberculosis and Malaria, or UNAIDS.
\textsuperscript{33} For instance, USAID is implementing the US President’s Emergency Plan for AIDS Relief (PEPFAR). With US$15 billion in 2003-2007, and a new pledge of $48 billion for 2008-2012, it is the largest bilateral programme responding to HIV and AIDS.
\textsuperscript{34} In addition to the World Bank, the African and Asian Banks for Development have developed partnerships in the field of HIV and AIDS.
\textsuperscript{35} Such as the Clinton Foundation (created in 1997), the Nelson Mandela Foundation (1999), and the Bill and Melinda Gates Foundation (2000).
\textsuperscript{36} Such as the Global Business Coalition on HIV/AIDS, TB, and Malaria.
\textsuperscript{37} For instance Bono, Jackie Chan, Julia Roberts, Giorgio Armani, and Roger Moore.
partnerships for development, calling for international funding, building expertise and knowledge, and providing assistance to developing countries and vulnerable populations.

These changes may be seen as both positive and negative. The positive aspect is the emergence of a new global AIDS governance within which different voices can be heard, leading to a more open and inclusive international community. In this new environment, all the actors, whatever their status, are challenged to provide the best possible service. The IOs, for instance, are called on to deliver with greater efficiency and accountability. They are also encouraged to build public-private partnerships with the private sector and CSOs, as they are less and less capable of developing new policy norms and ideas without external support.

The negative aspect has to do with the many risks associated with more complex decision-making mechanisms and the dispersal of discussion forums in the field of HIV and AIDS: fragmentation of programmes, duplication of projects, policy gaps, competition for funding, inconsistency and discrepancies with respect to policy goals set by different organizations, lack of accountability of private actors, proliferation of policy rules and mechanisms, and the risk of lack of focus and stability of international policies. For instance, in September 2007 the British Department for International Development (DfID) noted that the health sector was facing important coordination and harmonization challenges at the global level, with more than 40 bilateral donors, 26 UN agencies, 20 global and regional funds, and 90 global health initiatives. As ever, the reality is a mix of these positive and negative aspects.

In this polymorphous world, UN organizations’ leading role can no longer be taken for granted. They have neither the resources nor the legitimacy to act as independent organizations. Their individual visibility is lower, especially at country level where bilateral organizations and financial partners are often more influential in policy-making mechanisms of development. In some countries and in specific policy areas, they are likely to be sidelined by host governments who may choose to work with other development actors, including non-state actors (e.g. international NGOs, private foundations, or multinational companies). Nowadays they are “development partners,” competing in a polyarchic system, rather than leading organizations. Of course they still have the mandate to disseminate global policy guidance and provide technical assistance in specific areas, but they are increasingly challenged by other state or non-state actors to deliver jointly, with greater efficiency and accountability.

In the field of HIV-AIDS, the donor countries who have been supporting the UNAIDS Programme for years – the Nordic countries, for example – have constantly argued that the strengthening of the multilateral response to the epidemic is a “burning necessity.” For some years now, the UNAIDS Secretariat and the Cosponsors have had a sword of Damocles hanging above their heads: either they embark on thorough reform of governance, in such a way that the UN can “speak with one voice” within the international system and deliver jointly at the country level, or they may be sidelined by donors and by host governments at country level.

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38 DfID, Press release, September 5th, 2007. This observation justified the launch of an “International Health Partnership” (IHP).
2.2. The global commitment to fighting AIDS (2000-2001)

Over the last decade, several declarations of commitment by top world leaders to combating AIDS have become a second source for reform within UNAIDS. The “Millennium Declaration” adopted by the General Assembly on September 18th, 2000 affirmed the need to halt and reverse the spread of HIV and AIDS as a top priority. In 2001, the UNGASS Declaration of Commitment on HIV/AIDS laid down clear policy objectives and targets to be achieved in a limited period of time, putting UN organizations with their backs to the wall. At the same time, two major non-profit organizations, the Clinton Foundation and the Gates Foundation, became actively involved in new advocacy strategies aiming at reducing the cost of antiretroviral treatments (ART).

On the one hand, this favorable context gave greater international visibility to the UNAIDS Programme, as Cosponsors obtained new financial support to strengthen their AIDS programmes. On the other hand, it also revealed how little progress had been made by UNAIDS since its creation in 1996. Summoned by the UN General Assembly to build a comprehensive response connecting various policy areas for the prevention and mitigation of the epidemic, the UNAIDS partners had no other choice than to demonstrate their capacity to better coordinate their many programmes. The establishment of results to be achieved by 2005 and 2010, and the commitment to undertaking periodic and systematic reviews to measure and assess progress, created the conditions for reforming the UNAIDS system.

2.3. UN system-wide reform

The acceleration of UN system-wide reform is the third factor to have stimulated efforts to improve UNAIDS governance. In recent years, the many UN specialized agencies, funds, and programmes have been challenged by governments of OECD countries to improve their internal management. This call has resulted from two different factors: the US government’s wish to reduce the influence of the UN system by reducing its budget39, and the shared perception by other OECD donors that in an international landscape in which UN organizations are “smaller players” in financial terms, reforms might help them retain relevance40. During the 2000s broad consultations were undertaken, leading to a series of high-level meetings on the mechanisms of development assistance, such as the Monterrey Conference (2002), the Rome Forum on Harmonization (2003), the Marrakech Round Table on Results-Based Management (2004), the Paris Declaration on Aid Effectiveness (2005), the 2005 UN World Summit, and, more recently, the Accra High-Level Forum on Aid Effectiveness (2008). These meetings were clearly intended to introduce NPM rules and instruments into IOs, attesting to the globalization of the neoliberal paradigm already in place.

39 Major criticism came from the US government, particularly the US Government Accountability Office (GAO, 2004). The Independent Inquiry Committee (IIC), in its evaluation of the Oil for Food programme, pointed out the political, management, and ethical weaknesses of UN administrations.

40 In recent years, nearly all donors have provided input for reforming the UN. The Nordic countries, through the “Utstein group,” called for swift and immediate change in the functioning of the UN. The speech given in 2004 by the Norwegian Minister of International Development, Hilde F. Johnson, to the UN Secretary-General and executive heads of UN organizations, stressed long-term challenges and urgent need for organizational change (Johnson, 2004).
in the 1990s (Common, 1998). They resulted in the adoption of resolutions enjoining multilateral organizations to pool resources, undertake joint programming, establish common databases, build knowledge networks, coordinate the provision of technical support, simplify legal procedures, evaluate their results on a regular basis, and align their programmes with government development plans.

The pressures for organizational restructuring became very high during Kofi Annan’s tenure as UN Secretary-General. In 1997 and again in 2002, the Secretariat General launched a vast series of management reforms aimed at making the UN system more transparent and accountable. The UN General Assembly assigned the executive heads of agencies, funds, and programmes considerable obligations to reform their management rules and standard procedures. In recent years, several reports have addressed UN organizational challenges. Four executive committees have offered the chance to better coordinate the activities of thirty UN programmes. The UN Development Group (UNDG), together with the Chief Executives Board (CEB), has helped define general guidance to bring the programmes and management systems of the various UN organizations closer together. An independent High-Level Panel on UN System-Wide Coherence has been assigned to address organizational problems and provide a set of reform proposals to the UN Secretary-General.

Better UN coordination at country level has also been a constantly renewed target. UN organizations have been prompted to act jointly in the field through the establishment of new programming and monitoring mechanisms under the responsibility of the “UN Resident Coordinator,” the setting up of “UN Country Teams” and “UN Theme Groups,” the preparation of a multi-year “UN Development Assistance Framework” (UNDAF) and regular “Country Common Assessments” (CCA). The “One UN” Initiative, launched in 2007 in a limited number of pilot countries, is a recent illustration of the reforming process the UN system is being urged to carry out.

All these new mechanisms, as well as perpetual pleas for reform, are far from putting an end to the organizational fragmentation of the UN system. Nevertheless, they do create a series of obligations for UN organizations to connect and combine their activities. The commitment to reform has been so high on the agenda of the Secretariat General and various UN bodies that it gives substance to the idea that “reforming the organization” has become not only an objective of the UN but a modus operandi that structures all its activities at every stage.

The call for UN system-wide reform created a momentum that immediately affected UNAIDS. In 2003-2004, just after the release of an independent evaluation of UNAIDS, member states representing donor countries started to criticize the weaknesses of the Joint UN

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41 See, for instance, the reports One United Nations (United Nations, 2005a), In Larger Freedom (United Nations, 2005b), and Delivering as One (United Nations, 2006a).

42 Peace and Security; Economic and Social; Development; Humanitarian Affairs.

43 The CEB holds regular meetings bringing together Executive Directors of UN funds, programmes, and specialized agencies, under the chairmanship of the UN Secretary-General.

44 See the report Investing in the UN (United Nations, 2006b).
Programme and the lack of accountability of the Cosponsors. As in many other fields of development, it was noted that the functioning of the UNAIDS system was unsatisfactory: Cosponsors did not deliver responsive technical assistance in the field; programmes were fragmented and not coordinated; implementation was inefficient; and there were rivalries and jealousies among agencies. Moreover, it was observed that many Cosponsors were acting in parallel with independent agendas, and therefore burdened the national administrations of developing countries.

The flaws, obstacles, and other impediments to an integrated and efficient programme were remarkably visible, as UNAIDS was supposed to be a groundbreaking programme tasked with dedicating resources to overcoming traditional organizational challenges and increasing coherence through interagency coordination. In 2005, as the donors’ warnings were not leading to noticeable and swift improvements, at the instigation of the British government some OECD governments took the initiative of setting up a Global Task Team (known as the “GTT”) on improving AIDS coordination among multilateral institutions and international donors. Following the Paris Declaration on Aid Effectiveness (OECD-DAC, 2005), the GTT made recommendations for the governance of the multilateral response to AIDS (Global Task Team, 2005). It urged the Cosponsors and the Secretariat to better coordinate in order to improve the coherence of the Joint Programme. It called for a reform of their management rules with tangible results that could be assessed and measured. The UN General Assembly subsequently endorsed its recommendations during the 2005 World Summit.

3. Management, harmonization, and coordination: the three faces of UNAIDS governance reform

This section identifies the major steps through which UNAIDS organizations have recently engaged in efforts to set up new performance-based managerial instruments (3.1) and to strengthen interorganizational coordination procedures in order to reduce policy gaps, fragmentation or duplication of efforts, and competition within the UN system (3.2). It pays particular attention to the activities of the UNAIDS Secretariat, which has taken advantage of the pressure for bureaucratic reform to play a greater role in the introduction of new institutional arrangements. The Secretariat has demonstrated an ability to function as a “reform broker.” Not only has it made every effort to convey various demands and inputs from the environment of the UN system – especially from the donor community – to UNAIDS, but over the years it has developed an increasing capacity to play the role of facilitator among the Cosponsors.

3.1. The dissemination of NPM instruments

45 13th PCB meeting, Lisbon, December 11th-12th, 2002 (UNAIDS/PCB(13)/02.2).
46 The Global Task Team brought together leaders from governments, civil society, UN agencies, and other multilateral and international institutions. They met in London in June 2005 to review the global response to AIDS under the theme “Making the Money Work.”
At the start of the Joint UN Programme, following the ECOSOC recommendations, the UNAIDS governing board established a set of joint coordination rules that made exchanges among Cosponsors possible at the highest level. A steering committee\(^{47}\) was established to give an opportunity for the Cosponsors’ executive directors to meet twice a year, with a requirement to report to the executive board on efforts undertaken by each UN agency contributing to the UNAIDS Programme. However, by deciding that consensus should be the basis for all decisions within the Programme, the executive board granted the Cosponsors full responsibility for developing interagency partnerships. As in any organizational system that is not yet stabilized, the agents representing each Cosponsor made some ad hoc agreements during the first meetings; these agreements set precedents for the following meetings and gradually became general rules. The “rule of the precedent” thus initially played an important part in exchanges within UNAIDS.

Throughout the early years, coordination and partnership rules were thus set up and institutionalized. At a technical level, the increasing number of workshops led to the setting up of new discussion forums in policy areas that seemed critical for improving the response to the epidemic. For instance, UNAIDS Interagency Task Teams (IATTs) were established to encourage UN experts on AIDS to hold regular discussions on cross-cutting issues of particular interest to several Cosponsors (such as education, children, youth, gender, and injecting drug use). These new teams were expected to bring UN staff and external partners\(^{48}\) together to share and improve evidence-based knowledge on general aspects of the response to the epidemic, with the opportunity to produce general policy guidance and discuss fundraising strategies. However, the IATTs’ outcomes have been uneven so far, mainly because of a high turnover of staff, lack of commitment, and lack of resources.

Up to the early 2000s, the technical partnerships within UNAIDS were still dependent on voluntary initiatives by the Cosponsors and relied on many ad hoc mechanisms established in a limited number of policy areas. The Secretariat had neither the influence nor the mandate to compel Cosponsors to hold a policy dialogue on cross-cutting issues in order to combine expertise and knowledge. In addition, no institutionalized mechanisms existed to facilitate information-sharing between Cosponsors on joint initiatives that could move the UNAIDS Programme forward, nor the pledging of financial resources in support of the Programme, nor on policy results at country level. The coordination role of the Secretariat was twofold: firstly, to assist the Cosponsors in their AIDS-related activities (such as providing technical and logistic support to UNAIDS meetings, encouraging Cosponsors to jointly participate in international forums, and disseminating updated information inside and outside the UN); secondly, every six months, to gather information sent by Cosponsors – often very general, seldom quantified – and to format this information so that it could be adopted through resolutions submitted for the approval of the steering committee (CCO) and then the executive board.

The mid-2000s marked a shift. The partnership’s conditions suddenly changed when managerial reforms were undertaken. In addition to the three external factors that stimulated these reforms (see part 2), one internal change also contributed to the need for new rules and

\(47\) The Committee of Cosponsoring Organizations (CCO).
\(48\) Such as representatives of bilateral organizations, members of NGOs, academics, and experts.
procedures for UNAIDS. Between 1999 and 2003, four new UN organizations joined UNAIDS: ILO, UNODC, WFP, and UNHCR. This growth of the UNAIDS Programme from six to ten actors resulted in a greater need for new regulations for internal governance, as the potential risk of dispute within a larger interagency system was higher. New initiatives on AIDS could not be sustainable without formal rules producing more transparency and accountability among Cosponsors. In short, the integration of new members into UNAIDS, along with the three external factors, opened a window of opportunity for the Secretariat to act as a broker of reform.

A first shift took place in 2005 during a closed-door session of a meeting that brought together the Cosponsors’ heads of AIDS programmes. The objective was to share out the 2006-2007 UNAIDS funding resources (the “UBW”49) among the ten Cosponsors. Up until then, the distribution had been based on previous years’ decisions, not on a performance review. At this meeting, participants adopted informal criteria to assess the quality and scope of each Cosponsor’s programme, and then voted (by secret ballot) for a sharing out of the funds. The meeting was an authentic psychodrama. Nevertheless, for the first time, UBW funds were allocated according to the mutual assessment of Cosponsors’ strategies and results. Even if no standard procedure was established, the allocation was explicitly linked to policy results.

Since the adoption of the GTT recommendations in 2005, the Secretariat has sought to introduce new principles and instruments aimed at improving the managerial performance of UNAIDS. It has been highly involved in setting standards regarding finance and policy development. It has contributed to the dissemination of new regulations covering budget management and accounting procedures, using a results-based management (RBM) approach. It has held several consultation meetings with Cosponsors to come up with measurable policy objectives. It has supported the establishment of performance indicators and benchmarks to help monitor and assess the UNAIDS Programme. It has also contributed to the adoption of budget control procedures, aimed at reinforcing the transparency of budget appropriations, setting tracking procedures to assess the use of funds (e.g., through the adoption of implementation rates), and constructing the relevant indicators needed to measure the impact of Cosponsors’ AIDS programmes. In 2007, such a multi-agency results-based budget was unique within the UN system.

Since 2006-2007, the Cosponsors have agreed to shift towards result-assessment procedures. They have been invited to design their own programmes using these procedures, to tie all their sub-units that use UBW funds (including field offices) to the selection of quantified indicators, and to be held accountable for the results. The objective of this in-depth transformation is to avoid the situation that prevailed during the first decade of UNAIDS: an absence of formal rules for the allocation of UBW funds to Cosponsors, complemented by a lack of tracking of the use of the funds, of results-based indicators, and of independent oversight procedures, and a general trend among the Cosponsors to expend financial resources on scattered and non-coordinated small projects.

49 The UBW has three components: one is allotted to the Cosponsors, a second to the Secretariat, and a third to “interagency activities.”
3.2. The challenge of policy harmonization and coordination among UN agencies

In 2005, the conjunction of the Declaration of Paris and the GTT recommendations offered an opportunity for the Secretariat to reform the governance of UNAIDS in two directions: policy harmonization and interagency coordination. These two dimensions emerged between 2003 and 2005, within the larger context of UN system-wide reform and international efforts to improve aid effectiveness. They are clearly interrelated, as joint programming requires efficient collaboration mechanisms. They aim to improve the effectiveness of the UN response to the epidemic by preventing agencies from developing independent, duplicate, and inconsistent strategies.

Streamlining strategies

The Secretariat gave major support to the first direction. It convened a series of meetings aiming at streamlining and simplifying the policy objectives set by Cosponsors under the UNAIDS Programme. Efforts for harmonization within the multilateral system were undertaken at the global level. One of the significant modifications of the UNAIDS budget was a systematic link with a limited number of joint strategic objectives. The 2006-2007 UBW was the first budget to be built on a results-based structure, identifying 16 “Principal Results” for UNAIDS as a whole and 49 “Key Results” for the more specific activities performed by Cosponsors and the Secretariat. In parallel, at the request of the UN General Assembly, the Secretariat organized consultation meetings at country and regional levels to build a joint policy framework that could be endorsed by all UNAIDS partners and also conceived as worldwide guidance for internationally recognized policy standards and key objectives. Called “Towards Universal Access,” this framework seeks to connect the various sectoral responses that might lead to greater access to HIV/AIDS prevention, treatment, care, and support. It clearly put the emphasis on country-led responses to AIDS, which are to be multi-sectoral and participatory. The UN General Assembly endorsed this framework in June 2006, leading to the setting of national targets and a revision of national AIDS strategies in most of 123 countries. This process is expected to prevent any public or private partner from engaging in a strategy inconsistent with international standards and objectives.

The effect of this programmatic shift on Cosponsors’ programme has been uneven. On the one hand, Cosponsors have paid particular attention to these expected results when it came to providing the UNAIDS Governing Board with key data and information on progress. They have had to align their performance indicators to the key results. Greater effort and resources have been dedicated to conducting various assessments, reviews, and evaluation of UNAIDS efforts in selected areas of activities, resulting in the publication of public reports. On the other hand, Cosponsors continue to base their global strategies on their own priorities, and

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50 Achievement indicators were identified for each level of results. In addition, the 49 Key Results contained details on specific deliverables, elements of the strategies to be used, and partners to engage with.

51 In 2005, the UN General Assembly adopted a resolution requesting UNAIDS to assist in “facilitating inclusive, country-driven processes, including consultations with relevant stakeholders, … for scaling up HIV prevention, treatment, care, and support with the aim of coming as close as possible to the goal of universal access to treatment by 2010.”

52 UN General Assembly, 2006, Political Declaration on HIV and AIDS, June 2nd (A/RES/60/262).

their programmes and communication plans scarcely reflect UNAIDS as a family and do not focus on the expected “key results.” Policy harmonization seems to be more effective in most reports to the governing board and to donors, but remains much less visible in advocacy and communication activities (addressed to external partners and stakeholders).

Division of Labor

Policy harmonization may appear irrelevant without a clear identification of the UN agencies’ respective jurisdictions with regard to the epidemic. Thus, in 2005, the GTT enjoined the Cosponsors to make substantial efforts to clarify their mandates, a prerequisite for improving interagency collaboration. The UNAIDS family was, in a sense, invited to put an end to major flaws in the UN system: competition among agencies, programmatic fragmentation, policy overlaps and gaps, and lack of accountability. Under pressure, the Secretariat took the initiative to elaborate a “UNAIDS Division of Labor” with the aim of specifying which policy areas each Cosponsor was responsible for. Within this Division of Labor, 17 “technical support areas” were identified; within each area a “Lead Organization” and some “Main Partners” were designated, according to their mandate and to their ongoing field programmes. From now on, each Cosponsor is responsible for one (or several) specific policy area(s), depending on its mandate and its “comparative advantage” in the field. For instance, UNICEF is responsible for the support of orphans and vulnerable children, UNESCO for HIV prevention education in educational institutions, UNFPA for prevention activities among key populations, and UNHCR for all activity related to refugees and internally displaced people.

A division of Labor may help UN agencies to clarify the scope of their mandates and hence reduce potential conflicts in policy-making and in fund-raising. But clarifying responsibilities at a global level is not sufficient to elaborate consistent and harmonious strategic planning and policy-making at country level. Also, it may not be adapted to the real capacity of each agency in the field. Thus, shifting from a global approach to a field-based perspective, the GTT recommended improved articulation among UN strategies in all countries. As a follow-up, in December 2005 the UN Secretary-General wrote to UN country representatives directing them to establish in each country “Joint UN Teams on AIDS” and to elaborate “Joint UN Programmes of Support on AIDS.” It is also expected to constitute an entry point for national stakeholders to access technical assistance from the UN system.

54 In each technical support area, the Lead Organization is expected to be the main gatekeeper for governments and CSOs who request technical assistance from the UN system. It is in charge of coordination between UNAIDS and the main stakeholders in the area. At country level, it acts as a liaison between UNAIDS and other providers of technical support in the area. The Lead Organization at the global level also has the responsibility of supporting the identified lead agency at country level and overseeing the technical area at the regional and country levels. Finally, it is expected to encourage global policy discussions regarding the technical support area, help establish global and regional support mechanisms for the delivery of assistance at country level, identify gaps in the provision of support, and advise country-level stakeholders.

55 In each country, the UN Resident Coordinators are the designated representatives of the UN Secretary-General for development operations. They are expected to bring together the different UN agencies to better coordinate and improve the efficiency of UN activities. In each country, they lead the “UN Country Team” (the committee that brings together all the heads of UN country offices, with the task of coordinating UN activities and building a multi-year UN programme in the field of development). They are funded and managed by UNDP.

56 The Joint UN Team on AIDS brings together the directors of UN country offices. It is expected to promote a coherent UN country programme in support of the national response to the epidemic. The Joint UN Programme of Support on AIDS describes UN strategic support for the national response to AIDS.
Coordinating activities

Collaborative action is decisive for policy-making, as a steady flow of strategic information and dissemination of knowledge among UN bodies is essential for integrating their sectoral approaches and therefore developing coherent policy guidance. Above all, coordination is crucial in the provision of technical assistance in the field of HIV and AIDS. With the active support of the Secretariat, new mechanisms were created to channel UN assistance to a variety of beneficiaries (such as the National AIDS Councils, national ministries, CSOs, the private sector, and sometimes bilateral organizations and other UN agencies). For instance, new offices funded by UNAIDS (the “Technical Support Facilities”, TSF) – were established in nearly 60 countries. They were tasked with helping identify and contact the relevant experts and consultants who can assist national authorities or stakeholders in the design of programmes and in problem-solving in various areas: management, communication, strategic planning, resource mobilization, monitoring and evaluation. In 2006, UNAIDS also established a permanent forum (called the Global Implementation Support Team, GIST) bringing together a limited number of UN agencies, funding organizations, bilateral donors, and NGOs to build rapid and coordinated technical responses to requests from governments. The same year, another service (called the AIDS Strategy and Action Plan service, ASAP) was created to complement existing options for country assistance. Hosted by the World Bank on behalf of UNAIDS, its secretariat has been mandated to offer advice and channel technical support for strategic and action planning. It acts as a liaison office between country actors and Cosponsors, the UNAIDS Secretariat, and consultants around the world.

Nobody can challenge the fact that UNAIDS pledged an increasing amount of resources to improve UN governance in the field of HIV and AIDS. Cosponsors engaged in an in-depth reform of their in-house management and policy-making mechanisms, which could have created new internal and interagency tensions. Nevertheless, as often demonstrated in the scientific literature on public organizations, actual bureaucratic change hardly reflects the intentions of the reformers (see for instance Eymeri-Douzans, 2009). Any reform has hidden costs and unanticipated side-effects that should always be questioned.

4. Why are bureaucratic reforms falling short?

We can draw several conclusions about the bureaucratic reforms initiated within UNAIDS in the last four years. Firstly, the reform of UNAIDS governance has become one of the major objectives of UN agencies, to such an extent that it is now turning out to be a permanent activity for UNAIDS partners. In the context of UN system-wide reform and the GTT recommendations, the issue of managerial reform has been placed very high on the UNAIDS agenda. Since 2005, the UNAIDS governing board, at each meeting, has requested that the

57 UN organizations can ensure transfer of expertise, knowledge, and skills to support governments and national stakeholders in implementing AIDS responses (planning, budgeting, monitoring, and evaluating) in various fields (such as public health, education, the economy and finance, and agriculture). They also contribute to capacity development in countries where the public sector has weak capacities to respond to the epidemic. They participate in the development of results-focused, evidence-informed, and cost-effective strategies, as well as in the review of existing action plans.
Secretariat and the Cosponsors report on progress made. In 2007, a regional consultation on “Africa’s agenda in a reforming UN system” was held in Brazzaville by UNAIDS and UNDP. In June 2008, an independent evaluation was initiated, with a view to assessing the efficiency and accountability of the UNAIDS programme.

Secondly, as has often been observed in bureaucratic systems, the implementation of reforms does not systematically lead to the outcomes expected by the reformers. On the one hand, the dissemination of new managerial techniques has improved the transparency and accountability of the whole UNAIDS organizational system. UNAIDS was in a situation of managerial opacity, characterized by ad hoc agreements between Cosponsors, micro-management, self-assessment procedures, lack of tracking methods, weak monitoring, evaluations focusing on activities rather than results, and policy agendas focusing on global issues rather than key national challenges. In the new managerial governance of UNAIDS, Cosponsors are requested to develop joint objectives and demonstrate the achievement of policy results, both individually and collectively. They are expected to concentrate their policy and financial efforts on country-level strategies. They have to go through streamlined reporting and evaluation procedures, to allow for better external control. In a word, serious improvements were made in the management of UNAIDS at both global and country levels.

At the same time, the reforms have not solved some of the major weaknesses identified in the early 2000s: competition among agencies, organizational complexity that maintains opacity in the organizational system, and a tendency to bureaucratization with increased difficulty in policy coordination.

4.1. Competition

In the early 2000s, various Cosponsors brought up international initiatives without much prior consultation of their partners. Some Cosponsors also used the vague argument of “comparative advantage” to strengthen their activities in policy areas covered by the mandate of other UN organizations. This situation not only raised tensions within the UNAIDS family, it also increased the risk of having a disunited UNAIDS system with competitive and disorganized programmes.

In 2005, the official UNAIDS Division of Labor was adopted with the aim of reducing competition among UN partners. But today, when it comes to translating and implementing this formal and binding framework at the country level, competition still undermines the capacity to act jointly. The Cosponsors still compete to mobilize resources from bilateral organizations, mainly because of a lack of donor coordination. They also work to expand the scope of their activities while at the same time they have to align with national priorities. The

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58 All the UN Resident Coordinators for sub-Saharan Africa and the UNDP administrator focused on country-level actions to progress on “delivering as one” and move UN reform forward.

59 “Comparative advantage” is a notion often used by some organizations as a rhetorical device to defend their legitimacy to develop country-focused activities outside their official mandate. In making this argument they usually claim that their country presence is the most effective because of their resources, expertise, successful (past and ongoing) projects, and/or connections to government or other national stakeholders.
UN country offices with the greatest capacity\textsuperscript{60} and those with ongoing programmes on HIV and AIDS are not keen to give up their activities because of some formal principles adopted at the global level. Their top management finds ways to adapt the Division of Labor to “the local reality” and to defend the projects they have been implementing up to now\textsuperscript{61}. Thus in many countries dissension has arisen between Cosponsors’ representatives when it comes to implementing the Division of Labor, taking into account the “comparative advantage” of each Cosponsor in the field of HIV and AIDS. The UN Joint Teams on AIDS have to agree on how to adapt the distribution of tasks among UN agencies for the provision of technical support, especially between agencies who have weak capacities at country level, but are considered a “Lead Organization” according to the formal Division of Labor, and those with stronger capacities who are officially reduced to the status of “Main Partner.”

For instance, despite the Division of Labor, the programmes and activities carried out by the World Bank, UNICEF, UNESCO, and UNFPA in the field of education and HIV/AIDS do not always appear to be specialized and differentiated on the ground. All these four UNAIDS Cosponsors have been supporting national or local educational projects targeting vulnerable populations, particularly women and young people. UNESCO and the World Bank are also developing competing training programmes for professionals and government officials. UNDP, the World Bank, and the Secretariat are still building overlapping country-level strategies aimed at providing technical support to reform national governance mechanisms in the field of HIV and AIDS\textsuperscript{62}. UNFPA and UNDP elaborate overlapping projects in the field of gender equality and AIDS-related discrimination towards women and girls. DfID noted another example of competition in an evaluation report (Drew and Attawell\textsuperscript{63}, 2007): “In Zimbabwe, there are concerns about UN capacity, ability to engage in policy dialogue, diversion from core roles, and poor coordination. Some steps have been taken to developing one UN team and programme on AIDS, but this is currently an aggregation of individual agency plans. Practical obstacles to developing a truly unified team and programme include competition between UN agencies, separate locations and organizational systems, overlap of responsibilities in some areas e.g., prevention of mother to child transmission and young people …”

4.2. Organizational complexity

The reforms launched after 2005 in UNAIDS had clear objectives: simplifying mechanisms, streamlining strategies, combining activities. They also expected clear outputs: a reduction of transaction costs and an increase in the efficiency of bureaucratic activity. However, reforms

\textsuperscript{60} For various reasons (historical, political, structural), some UN country offices may have more resources (funds, expertise, human resources, privileged access to national officials, linkages to CSOs and the media, etc.) than others.

\textsuperscript{61} As a senior UN official told in Vietnam: “such a formal agreement [the division of labour] adopted in a global meeting is not going to make us stop our programmes that respond efficiently to the needs of those who are vulnerable on the ground. We’ve got the support of donors. We’ve got the support of the government. We are well equipped. We have not only the expertise, but also legitimacy in the country. So what? Are we going to stop because of global meetings? I don’t think so!”

\textsuperscript{62} This situation was mentioned by some member states at the 23\textsuperscript{rd} UNAIDS executive board meeting in December 2008.

\textsuperscript{63} Annex 5, p. A79.
may sometimes increase organizational complexity for one key reason: reformers frequently introduce new bodies, policy instruments, and procedures, without having the capacity or legitimacy – or sometimes the courage – to remove the old ones.

Coordination mechanisms are supposed to reduce compartmentalization and competition in interorganizational systems; to some extent, they help develop a comprehensive and integrated policy approach. But at the same time they may also lead to bureaucratization by multiplying the horizontal and vertical channels through which managers and policy actors are expected to interact. While such mechanisms seek to reduce the waste of resources, they may add new transaction costs for all the partners who have to adapt to multiple channels or entities without abandoning their regular organization’s standard procedures.

A good example within UNAIDS is the creation of the three new interagency UN mechanisms to channel the provision of technical assistance (the TSF, ASAP, and GIST), which have generated new opacity while trying to simplify UN procedures. Firstly, the division of Labor between these bodies remains unclear to the many country-level recipients and stakeholders who are expected to ask for technical support. Secondly, these mechanisms also interfere with the recognition of Cosponsors, in the 2005 Division of Labor, as “Lead Organizations” and “Main Partners,” each being responsible for the provision of technical support in the specific policy areas covered by their mandate. Thirdly, these mechanisms also have to connect with the UN Theme Groups on HIV/AIDS (country-level committees bringing together UN technical staff, which operate under the authority of the UN Joint Teams on HIV/AIDS). Fourthly, they have to find added value in each country where 40 other technical support providers may intervene, ranging from bilateral and multilateral agencies to private foundations and civil society organizations. If the ASAP is presented as a “one-stop shop,” what is the TSF supposed to do in alignment with ASAP? How does the ASAP Secretariat (based at the World Bank) fully harmonize and streamline its activities with the 60 offices implementing the TSF (located in UNAIDS offices)? Both mechanisms propose overlapping technical support, such as peer reviews, strategic and operational planning, costing and budgeting, financial management, monitoring and evaluation tools for HIV/AIDS programmes, and resource mobilization.

The GIST also developed some grass-roots operational activities aimed at providing technical assistance to host governments and other stakeholders. Its original mandate was to establish country-level implementation support teams (CISTs). The GIST did not have an easy start, as it was confronted with interagency tensions, with some agencies not inclined to participate for various reasons: lack of clarity and a shift in its mandate; uncertainty about governance and accountability; lack of capacity; costly meetings; slow responses; low profile among stakeholders; and insufficient information flow and linkages between GIST and the regional and country offices of UN agencies. It was then found to duplicate efforts at country level and, subsequently, its mandate was thoroughly reformulated, shifting it from an operational entity to a global policy forum.

64 For a list of these providers, see the policy guidebook GTZ, 2007, Accelerating action: a technical support guide to develop capacity and to benefit from global health financing, Annex 1 (3-29).
4.3. Bureaucratization

Bureaucratization can be defined as a process by which an organizational system takes on the characteristics of a Weberian bureaucracy. It is a process of institutional change, which relates to a number of transformations: the relationships within the organizational system are increasingly driven by a complex of formal, rigid norms; staff members are specialized in narrowly-defined tasks; professional positions and roles are shaped according to impersonal rules; decision-making follows rational procedures rather than the personal feelings of individuals; command and power relations are distributed according to a division of Labor based on hierarchy. As Weber pointed out, bureaucratization goes along with a process of rationalization of activity, as an organizational system becomes broader, more complex, and permanent. Central to this process is the formalization, standardization, and depersonalization of rules, as is the increase in the number of bureaus and levels of decision.

From this perspective, bureaucratization goes along with greater complexity of mechanisms and procedures, proliferation of decision-making bodies, and higher risk of internal compartmentalization and competition. For this reason, it is most often regarded as a negative process, even a “pathology” of public organizations, as administrative growth may be driven by internal forces rather than external policy demands from populations, constituencies, and/or political representatives’ choice (Barnett and Finnemore, 2004, 34-41).

Within the UN system, recent reforms have aimed at reducing the negative effects of bureaucratization. Better management is likely to develop cost-effective public activity by improving accountability and reducing transaction costs. Better coordination is likely to improve the effectiveness of public policy by stimulating information flows, encouraging joint policy planning, and developing integrated implementation activity. But an in-depth reform process also requires additional human resources, technical capacities, funding sources, new coordinating bodies, and co-management instruments. For these reasons, it may end by adding new layers of bureaucracy.

Within UNAIDS, these arguments can be borne out both by Cosponsors’ internal activity on AIDS and by the Secretariat’s expansion. During the 2000s, Cosponsors were seriously encouraged to strengthen their commitment to responding the epidemic. Global mobilization against HIV and AIDS produced an increase in funding for IOs and therefore led to a scaling up of UN capacity. But at the same time both the context of UN reform and the donors’ criticism of the multilateral response to AIDS drove the Cosponsors to turn much of their attention and resources to governance challenges, tackling especially the issues of efficiency (“make the money work”) and UN coordination (“delivering as one”). Since 2005, this focus on governance has even been perceived by UN managers as a survival strategy in a competitive and polyarchic global AIDS governance in which many state and non-state actors are challenging the UN system. In response to repeated requests from the UNAIDS governing  

66 Since 1982, the French experience of decentralization provides many examples of the bureaucratization that goes along with reforms attempting to improve management and coordination. The experience of intermunicipal cooperation provides one of the best examples. Whereas such cooperation met the needs of municipalities to pool their resources and streamline their policies, it led to the structuring of a fourth level of local government in France, in addition to municipalities, departments, and regions. The emergence of intermunicipal governance was no doubt necessary for multiple reasons, but it added more complexity to the local bureaucratic system.
board, Cosponsors have been concentrating on tracking funds, drafting reports, gathering statistics, developing monitoring and evaluation procedures, with the desire to demonstrate their capacity to deliver and their aptitude to work jointly. This has led Cosponsors to recruit officers assigned to management and coordination tasks rather than policy experts. It has pushed them to secure more funds to ensure that in-house management and interagency coordination comply with donor requests. It has led to a growing number of coordinators and gatekeepers at every stage – called “global coordinators,” “regional advisors,” or “focal points” – whose main task is to support coordination mechanisms, moderate tensions (between agencies and/or within departments and units in each agency), and report on activities at all levels. Not only might this change be distracting attention from policy substance and field activities, it could also be increasing organizational costs.

The analysis of the UNAIDS Secretariat provides a critical example on how a size-limited coordination body can become a bureaucratic entity in a few years. As already mentioned, the Secretariat has first and foremost a facilitating role, with the task of supporting the Cosponsors in the establishment of a Joint UN Programme. Like any international secretariat, it had no mandate to exert leadership or participate in policy development. Nevertheless the Secretariat’s activities gradually expanded during the first ten years of the Programme, with a substantial scaling up in recent years. The Secretariat has gained influence in two directions: it has played a increasing role in the dissemination of innovative policy ideas and evidence-based knowledge about HIV/AIDS (cognitive influence); and as mentioned above, in the context of UN reform it has been given an opportunity to play a larger role in the establishment of management and coordination rules (prescriptive influence).

This development of the Secretariat as a “policy entrepreneur” has contributed to strengthening its bureaucratic capacities. The number of staff based in Geneva, initially 100, nearly doubled over the first decade. In addition to the liaison office based in New York City, two new offices were created in Washington and in Brussels to liaise with the US Congress and the EU Commission. More recently, seven UNAIDS “Regional Support Teams” were established to provide assistance to UNAIDS Country Offices, while working with regional partners to participate in programming and technical support for national stakeholders. Finally, the Secretariat brought the number of its “UNAIDS Country Coordinators” from originally 50 up to more than 80 in 2007. In parallel, while the UNAIDS country offices were originally represented by one staff person, they have expanded in recent years, recruiting managers, officers, and experts, including 60 “Partnership Officers” and “Focal Points.” The teams working as Technical Support Facilities (TSF) have also been located in these offices. Until the mid-2000s, most UCCs had a medium profile: they were “programme officers” (level P4-P5 in the UN ranking). In recent years, their status has changed in a number of countries, as some of them became heads of larger offices and were involved as full members.

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67 In UNESCO, for instance, the team working on AIDS in headquarters went from 3 professionals in 2003 to 15 people in 2007. It has become one of the largest “sections” in the Organization. In 2008, four regional advisors were appointed to coordinate activities carried out by nearly 50 country focal points.

68 The literature on policy transfer provides a valuable analytical framework for the analysis of international bureaucracies’ activities, especially when one concentrates on information and knowledge. Thus international secretariats are involved in many activities that ensure the transfer of ideas – whether scientific or programmatic – from one organizational setting to another one. For an analysis of the role of the UNAIDS Secretariat as a “policy entrepreneur” that contributes to policy transfer, see: Nay, 2009.
of UN Country Teams\textsuperscript{69}. More UNAIDS Country Coordinators have since been recruited at a director level (level D1) and named “UNAIDS Country Directors,” in order to allow them to function as equals with other country directors. In general, the Secretariat seized the GTT’s recommendations and the UN Secretary-General’s decisions as windows of opportunities to strengthen its field representation. It could thus participate in the promotion of country-led UN reform in the field of HIV and AIDS, although it had initially no specific mandate at this level. In Vietnam, UNAIDS was one of the seven UN country offices to initiate the reform movement towards the “One UN,” whereas other offices such as FAO and UNESCO (a cofounding agency of UNAIDS!) had not yet become involved\textsuperscript{70}.

The increasing activity of the Secretariat goes along with the progressive bureaucratization of UNAIDS: increase in number of staff, recruitment of experts and consultants, appointment of country-level UNAIDS representatives, development of field-based offices, and increasing participation in official partnership and decision-making bodies inside and outside the UN at global, regional, and country levels. The UNAIDS Secretariat is more and more present in the host countries where Cosponsors are implementing programmes. Its staff often stand for the whole “UNAIDS family” but at the same time also more and more often represent the UNAIDS Secretariat as a UN entity. Thus the Secretariat does not appear only as a “platform” or a “policy facilitator” through which UN agencies interact. It is slowly shifting to a more structured organization with increasing roles and wider responsibilities. We might even consider that by engaging in policy development the Secretariat tends to become the “11th Cosponsor” of UNAIDS.

5. Conclusions

This empirical study of UNAIDS offers insights into understanding the causal factors, processes, and possible consequences of managerial reforms undertaken within IOs. I suggest five concluding remarks.

First, despite declarations of goodwill from high-level bureaucrats and a common analysis of the governance challenges that have impeded the multilateral response to AIDS, UN bureaucracies are not likely to enter into a process of managerial reform without strong incentives coming from their environment. In the UNAIDS case, UN organizations have embarked on a reform process because of the growing pressure from the OECD governments (the key principals of UN agencies)\textsuperscript{71}, the diffusion of NPM ideas throughout IOs, the development of non-UN initiatives to respond to the epidemic, including the competing

\textsuperscript{69} In each country, the UNCT is composed of the heads of the UN agencies. Chaired by the UN Resident Coordinators (RC), they play a critical role in planning and coordinating the country activities of UN agencies.

\textsuperscript{70} The “Delivering as One” pilot initiative in eight countries is testing how UN agencies can deliver in a more coordinated way at country level (Albania, Cape Verde, Mozambique, Pakistan, Rwanda, Tanzania, Uruguay, and Vietnam). This initiative was recommended by the Secretary-General's High-Level Panel on UN System-wide Coherence (2006). The pilot countries have agreed to work towards a common UN presence in the country. They are trying out different models to deliver as “One,” looking at common elements, such as “One Programme,” “One Budgetary Framework,” “One Leader,” and “One Office.”

\textsuperscript{71} Many new institutionalist analyses in the sociology of organizations, as well as studies of policy transfer, argue that external change is a powerful incentive for reforming rules and practices internal to organizations.
activities of non-state actors in the global AIDS governance. International institutions tend to be path-dependent, and only external inducements may have encouraged them to opt for change.

Second, UN Cosponsors have embarked on managerial reform with regard to their AIDS programmes. UN top-level authorities, such as the UN Secretary-General and the UN Development Group who have been specifically mandated to push reforms throughout the UN system, have urged this change. But reforming activity in the UNAIDS system has also been conveyed by the Secretariat. Acting as a “reform entrepreneur,” the Secretariat has used the opportunity of the pressure from outside the UN to gradually broaden its influence as a coordinator and facilitator, despite a limited mandate and low resources. It has demonstrated an ability to import, adapt, and disseminate neo-managerial rules and procedures within UNAIDS, both at the global and country levels. It has been involved in the creation of new coordination mechanisms. It has thus functioned as a conveyor of reform, by contributing to the stabilization of new organizational mechanisms within UNAIDS, both formal and informal. It has had an unparalleled opportunity to strengthen its position as a brokering institution. However, it has also encountered some criticisms from the Cosponsors because of the risk that it may shift in the long term from the situation of a restricted coordination body to a new bureaucratic structure.

Third, the process of administrative reform in international bureaucracies has been driven by both coercion and opportunities. In the UNAIDS case, there has been considerable pressure on the UN system from donors. Expectations for reform of UN procedures for improving coordination, efficiency, and accountability in the field of HIV and AIDS have never been so high. But at the same time, the UNAIDS Secretariat has seized these requests as opportunities to promote organizational change within the UNAIDS system. As a weak actor in the system, it has had a strong interest in promoting reform, so as to expand its role of facilitator and thus justify its mandate. Thus, when expectations, pressures, and incentives for reform are high enough in the environment of an organizational system such as UNAIDS, they are likely to be swiftly incorporated in the anticipations and strategies of managers in charge of interagency coordination.

Four, the reformers have not proved to be able to anticipate and control the various effects of the new situation they have initiated. Of course, one should acknowledge that reformers, thanks to their experience and lessons learned, have contributed to some improvements – such as strengthening financial accountability and transparency thanks to new budgeting procedures, and contributing to the elaboration of a global multi-sectoral policy framework. But there are unexpected effects that may hamper the scope of the reforms, due to behavioral resistance from bureaucrats, contextualized interpretations of the rules, specific power relations among UN organizations at country level, and institutional routines that generate path-dependent processes. The reform objectives may generate tensions with some organizational interests (e.g., pooling financial resources at country level may worry

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72 Promoting change was also the aim of Cosponsors (such as WFP and UNODC) who joined UNAIDS in the early 2000s. By contrast, the founding agencies had an interest in being more “conservative” and keeping management procedures as they were.
organizations who usually raise significant extra-budgetary funds); objectives may be confronted with the weight of institutionalized norms and routines (e.g., creating horizontal coordination mechanisms may lessen vertical control procedures); they may not be adapted to social, organizational, and historical situations at country level (e.g., some efficient country level coordination mechanisms may differ from the Division of Labor elaborated at global level).

Last but not least, in the 2000s the growing attention of donors to the issue of global governance has had an impact on the work of multilateral organizations, especially UN partners: bureaucratic change becomes an end in itself, as UN organizations have turned their primary attention to management and coordination challenges. This may be seen as a step forward in the field of HIV and AIDS, since it has surely helped UN agencies to move away from years of mismanagement, competition, and fragmentation of agency plans associated with a vast and muddled multilateral system. Nevertheless, the focus on governance issues may well result in a reallocation of resources (human, financial, technical) towards improving the UN architecture rather than focusing on the assistance needed by governments and key populations at the implementation level. It could thus encourage UN professionals working on HIV/AIDS to concentrate primarily on institutional processes instead of paying greater attention to policy development. Gathering statistics that meet requirements set by new indicators and benchmarks, or setting new coordinating mechanisms at all levels, may have partly satisfied donors and other financial partners. But it took a lot of energy, time, and money, which may have diverted the attention of UN experts from the urgent challenges they ought to be taking up, or at least weakened their responsiveness to the epidemic.

Administrative reforms, however well-intentioned, generally create as their immediate result confusion, anxiety, and the diversion of resources to management and organizational procedures. The real benefits should be measured over a longer time period. They should be gauged at a policy level, not a bureaucratic level, through an assessment of policy outcomes. This challenge is a primary one for both researchers and evaluators, as major resources need to be engaged to study the correlation between administrative reforms and the multilateral response to the AIDS epidemic. Unfortunately this still remains a “blind spot.”
Acronyms

AIDS: Acquired immunodeficiency syndrome
ART: Antiretroviral treatment
CCA: Common Country Assessment
CCO: UNAIDS Committee of Cosponsoring Organizations
  ⇒ The CCO serves as a standing committee that is convened on a biannual basis. It is a forum where UN executive directors discuss matters of major importance to UNAIDS, and to provide strategic guidance for UN policies and strategies against HIV and AIDS.
CEB: Chief executives board
CSOs: Civil society organizations
Cabinet Office: Executive Director, UNAIDS
EU: European Union
GIPA: Greater Involvement of People Living with HIV and AIDS
GTT: Global Task Team
HIV: Human immunodeficiency virus
IATTs: UNAIDS Interagency Task Teams
IDPs: Internally displaced persons
IFIs: International financial institutions
ILO: International Labour Organization
MDGs: Millennium Development Goals
NGOs: Non-Governmental Organizations
NPM: New Public Management
PCB: UNAIDS Programme Coordinating Board
  ⇒ The PCB is the UNAIDS executive board, bringing together representatives of 22 governments, the 10 Cosponsors, and 5 representatives of NGOs, including associations of people living with HIV and AIDS.
PLWH: People living with HIV and AIDS
PMTCT: Prevention of mother-to-child Transmission
RBM: Result-based management
UBW: Unified Budget and Workplan
UN: United Nations
UNAIDS: Joint UN Programme on HIV and AIDS
UNCT: UN Country Team
UNDAF: UN Development Assistance Framework
UNDG: UN Development Group
UNDP: United Nations Development Programme
UNESCO: United Nations Educational, Scientific and Cultural Organization
UNFPA: United Nations Population Fund
UNGASS: United Nations General Assembly
UNHCR: United Nations High Commissioner for Refugees
UNICEF: United Nations Children's Fund
UNODC: United Nations Office on Drugs and Crime
USAID: United States Agency for International Development
WFP: World Food Programme
WHO: World Health Organization
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