UNAIDS
EVALUATION REPORT

REGIONAL DATA HUBS EVALUATION

Report
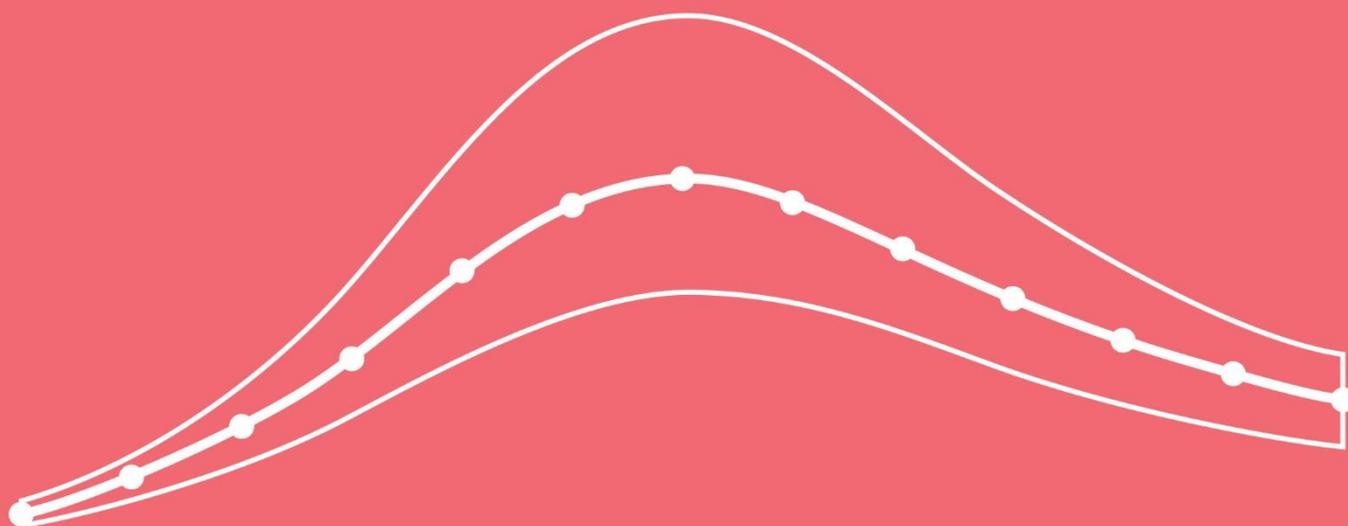
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List of acronyms and abbreviations

Africa CDC	Africa Centres for Disease Control and Prevention
AIDS	Acquired immune deficiency syndrome
AIDSinfo	Website with global data on HIV, managed by UNAIDS
ADB	Asian Development Bank
AP	Asia and Pacific Region
EECA	Eastern Europe and Central Asia
ERG	Evaluation reference group
ESA	Eastern and Southern Africa
GBV	Gender-based violence
HIV	Human immunodeficiency viruses
GLOBAL CENTRE	Headquarters
ICT	Information and communications technology
IT	Information technology
KP	Key Populations
LAC	Latin America and Caribbean
M&E	Monitoring and evaluation
MENA	Middle East and North Africa
NGO	Nongovernmental organisation
OECD DAC	Organisation for Economic Cooperation and Development, Development Assistance Cooperation
PEPFAR	President's Emergency Plan for AIDS Relief (USA)
RSTAP	Regional Support Team Asia Pacific
RST	Regional Support Team
SDGs	Sustainable Development Goals
SGBV	Sexual and gender-based violence
SI	Strategic Information
UN Women	United Nations Entity for Gender Equality and the Empowerment of Women
UNAIDS	Joint United Nations Programme on HIV and AIDS
UNEG	United Nations Evaluation Group
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
WCA	West and Central Africa
WFP	World Food Programme
WHO	World Health Organization

Executive Summary

About this Evaluation

UNAIDS Independent Evaluation Office requested an evaluation of the regional Data Hubs in order to understand and explore:

- History of the creation and implementation of the regional Data Hubs.
- The existing programmatic and technical design and implementation of the Data Hubs.
- The implicit theory of change, i.e., how the Data Hubs are intended to support and link to UNAIDS larger Mission and Global Strategy.
- Recommendations for the future of the Data Hubs.

Using the OECD DAC criteria and key evaluation questions, the evaluation team used the following sources of information to inform its findings:

- The Data Hubs websites, including review of documents posted.
- Key Informant Interviews.
- Document review of internal UNAIDS documents related to the Data Hubs.
- Google Analytics of the Data Hubs.
- Comparative analysis of other websites and search results.

Audience for this Document

The primary audience of this evaluation is UNAIDS at all levels (Global Centre, regional, country), plus selected co-sponsors, and other key stakeholders. The intended use is for UNAIDS leadership to use the evaluation as a guide for future investments and prioritization around tools such as the Data Hubs to improve data for decision making and knowledge management.

Description of the Regional Data Hubs

The UNAIDS Data Hubs are publicly accessible web-based knowledge platforms hosted by the Global Centre. Each Data Hub contains regionally specific information, organised around themes determined by the regional Data Hub staff. The Data Hubs are intended to help UN, governments, community and advocacy organisations, and other partners understand the key issues in the region's HIV epidemic to act on them.

The Asia Pacific (AP) Data Hub was launched in 2005 after several years of discussion and planning with local UN and other partners. UNAIDS took ownership of the AP Data Hub in 2012. In 2016, Global Centre decided to replicate the AP Data Hub in other regions, rolling out the Data Hubs in other regions in 2018.

As of the time of the evaluation, there are five active Data Hubs across the six UNAIDS regions, at the following URLs.

- Asia Pacific: https://www.aidsdatahub.org/
  - Data dashboard: https://aphub.unaids.org/
- Eastern Europe and Central Asia: http://eecahub.unaids.org/
- Latin American and the Caribbean: http://lachub.unaids.org/
- Eastern and Southern Africa: https://esahub.unaids.org/
- West and Central Africa: http://wcahub.unaids.org/
- Middle East and North Africa - currently offline.

Key Evaluation Findings

Relevance and coherence: The right things and right players (design issues)

Who are the intended users of the Data Hubs in different regions?

As outlined in the following table, the intended users of the hubs are the key stakeholders in the HIV programming in the region, including UNAIDS and other UN staff, host country governments, other donors, and community and advocacy groups. These groups need the information for programming, accountability, and advocacy.

User group	Advocacy for policy /programming approaches	Performance analysis and impact	Design and implementation approaches	Up to date data and status info
UNAIDS RST	X	X	X	X
UNAIDS Country office	X	X	X	X
UN regional/country offices	X	X	X	X
National governments	X	X		X
NGOs/CBOs	X	X	X	X
Academia		X		X
Other donors	X	X	X	X

Are the information needs of the intended users fulfilled by the Data Hubs? What is the extent of the use of the Data Hubs outside UNAIDS?

The Asia Pacific Hub shows significant usage by the target audiences to meet a variety of needs. Outside of Asia Pacific, there is no evidence of usage of the Data Hubs, based on Google Analytics and interviews. The evaluation team performed a Google Analytics comparison between sites from January 1, 2022, to August 30, 2022, with the following results:

Item	What measuring?	AIDSInfo	AP (data dashboard) only	EECA	ESA (data only)	LAC	WCA
Total users	Number of users to the site	118,233	5,761	113	115	60	19
Sessions	How many sessions on the site	160,059	7,524	144	146	105	26

What are the available data sources for the Data Hubs and what does the ecosystem look like (e.g., other Data Hubs)?

The Data Hubs pull filtered data from the AIDSinfo to generate tables and graphs. The hubs also host documents uploaded by the regional Data Hub staff (Data Analysts). The Asia Pacific Data Hub has up to date information from a wide range of sources. Other Data Hubs do not have the full range of non UNAIDS documents nor are the UNAIDS documents up to date.

Effectiveness: The Right Results (Implementation Issues)

To which extent have the Data Hubs achieved their intended objectives?

Other than the Asia Pacific (AP) Hub, Data Hubs have not achieved their intended objectives.

What are the key conditions that have made the Data Hub in the Asia Pacific achieve its results – and how do they apply to other regions?

The AP Hub had the following conditions:

1. The creation of the AP Data Hub sprang from collective needs across many key regional actors.
2. Unlike the other Hubs, the AP Hub defines itself first as data analysts and secondly, the website.
3. The UNAIDS Regional Support Team has integrated the use of data analysis into the way the region does its business, and then shares the analytical products.

Efficiency: The Right Way

How do the resources and capacity expected post-UNAIDS alignment match the requirements of the Data Hubs?

There is a mismatch between the needs of the Data Hub and the resources in place. Most non-AP Data Hub's mentioned challenges in staffing - missing Strategic Information advisors or insufficient data analysts. In addition, some interviewees mentioned limitations in the software, leaving it unable to meet their needs. AP hosts a separate website outside of the Data Hub to manage their content.

How should the Data Hub model be adapted in different regions to account for organisational priorities and resources?

Both Asia Pacific successes and challenges faced by other regional Hubs can provide good insights into how different regions can provide more targeted information to improve decision making. The following are lessons learned from Asia Pacific:

- Know target audience's data needs.
- Prioritize and resource analytical services to those users.
- Integrate analysis and data use into Regional Support Teams (RST) programmes, and
- Include data analytics capacity building investments for host country partners.

Sustainability

Note: sustainability defined as regional autonomy, also considering governance of the initiative (resources, structure).

Sustainability metric	AP	EECA	ESA	LAC	MENA	WCA
Ownership: the Hub is seen as a regional product that is core to the mandate of the RST	Yes	Unclear	Unclear	Unclear	Yes	No
Leadership: the Hub is prioritized by RST leadership	Yes	No	No	No	Unclear	No
Investment: the Hub has generated investment and resource mobilisation from UNAIDS staff and/or co-sponsors	Yes – co sponsorship plus investment in technology	No	Somewhat – an attempt to invest in external technology	No	No	No
Delivery: the Hub routinely meets content and data management requirements	Yes	No	No	No	N/A	No
Performance monitoring: the Hub routinely reviews its performance to improve its delivery of services	Ad hoc	No	No	No	No	No

How can linkages with other existing data platforms be improved (e.g., Health Situation Rooms, COVID-19 portal and AIDSinfo)?

UNAIDS needs to look at a more holistic use of its various documents and data products, allowing for more targeted use. The recommendations provide more details on how UNAIDS can achieve this.

Equity: Data and users

Are gender and human rights consistently considered and how do Data Hubs contribute to or draw on efforts to strengthen monitoring of inequalities and community-led monitoring?

While the software allows for these considerations, outside of AP, these considerations are not routinely seen in the Data Hubs.

Recommendations

Immediate Term: Recommendation 1: Decommission the Regional Data Hub Websites

As the regional Data Hubs, other than that of Asia Pacific, are not performing as intended, it is recommended that UNAIDS decommission the existing, non AP, regional Data Hubs.

Medium Term: Recommendation 2. Improve Data Usage Skills Within Data for Impact and UNAIDS as a whole.

A major reason that the regional Data Hubs were unsuccessful was due to a misunderstanding of what made the AP regional Data Hub successful; the key to its success has not been the software but rather the following:

- The strategic buy-in (and accompanying investment) by the UNAIDS RST, regional co-sponsors and partners, and academic institutions.
- Focus – and sufficient staff time – on addressing the information needs of different audiences.

UNAIDS is in a unique position in understanding the complex ecosystem in which HIV programming exists around the world. UNAIDS knows more about different actors, their roles, their needs, and their challenges to fight HIV than any other group; they have been and continue to parlay this knowledge into targeted knowledge products and approaches to influence these audiences. By starting with a thorough understanding of these audiences, UNAIDS can create a human centred behaviour change approach to the development of Data for Impact products.

Medium Term: Recommendation 3: Build in Theories of Change and Metrics into Data for Impact Hubs.

The evaluation team found that there were many valuable aspects of the UNAIDS regional Data Hubs programme, particularly the experience of the Asia Pacific Data Hub. The high-level goals of the regional Data Hubs have been in alignment with UNAIDS mandate and of recognized need to fight the epidemic using **targeted granular data and analysis products for programmatic design, accountability, and advocacy**.

As outlined by this evaluation, UNAIDS as a whole and specific regions struggle with how to execute on this overall goal, which has led to an overreliance on technology solutions and underestimating the human elements required in improving the creation, usage, and uptake of granular data.

Long Term: Recommendation 4. Make Strategic Investments in UNAIDS Information Management Systems.

UNAIDS needs to make strategic investments in UNAIDS information management systems with targeted improvements for information reuse across different information repositories and locations.

One way is to invest in a central metadata catalogue/ data mesh system that can make data and content products more accessible and reusable in automated ways. Once the data is more available, UNAIDS could invest in technology that allows different presentations to different audiences, based on the work of the Data for Impact team's understanding of the different information needs by different audiences. Finally, it is recommended to partner these and other technology investments with specific implementation plans, including specific theories of change and performance metrics to measure usage and impact.

Introduction

Evaluation Purpose

UNAIDS Independent Evaluation Office requested an evaluation of the regional Data Hubs to understand and explore:

- History of the creation and implementation of the regional Data Hubs.
- The existing programmatic and technical design and implementation of the Data Hubs.
- The implicit theory of change, i.e., how the Data Hubs are intended to support and link to UNAIDS larger Mission and Global Strategy.
- Recommendations for the future of the Data Hubs, especially considering recent strategic changes at UNAIDS.

Methodology Used

Technical Approach

This rapid assessment uses mixed methods – both qualitative and quantitative – to answer the documentation and key evaluation questions outlined below. The research approach for interviewing and document review was purposive sampling; individuals and documents were identified by both UNAIDS, and the evaluation team based on relevance and specificity.

Documentation Questions

The evaluation team used the following questions for the documentation portion of the evaluation.

1. What is the history of the regional Data Hubs, from conception of the AP Hub to the evaluation period? What lessons from this history are relevant to performance?
2. What is the current design of the Data Hubs (technology, management, content, and data)? How does this design impact how the Data Hubs are managed and performed?
3. What is the implicit Data Hubs theory of change (based on the AP success) to support the UNAIDS mission? How do the individual Data Hubs measure against this theory of head?

Key Evaluation Questions

The following are the key evaluation questions used to frame the assessment.

OECD DAC criteria	Evaluation questions
Relevance and coherence *The right things & right players (design issues)*	Who are the intended users of the Data Hubs in different regions and are their information needs fulfilled by the Data Hubs? What is the extent of the use of the Data Hubs outside UNAIDS? What are the available data sources for the Data Hubs and what does the ecosystem look like (e.g., co-sponsors Data Hubs)?
Effectiveness *The right results (implementation issues)*	To which extent have the Data Hubs achieved their intended objectives? What are the key conditions that have made the Data Hub in the Asia Pacific achieve its results – and how do they apply to other regions?
Efficiency *The right way*	How do the resources and capacity expected post-UNAIDS alignment match the requirements of the Data Hubs? How should the Data Hub model be adapted in different regions to account for organisational priorities and resources?
Sustainability	What form and role should the Data Hubs take to make them serve UNAIDS best and secure sustainable organisational investments?

	How can linkages with other existing data platforms be improved (e.g., Health Situation Rooms, COVID-19 portal and AIDS info)? Note: sustainability defined as regional autonomy, also considering governance of the initiative (resources, structure)
Equity *Data and users*	Are gender and human rights consistently considered in data collection and the analysis, presentation, and dissemination of information products? How do Data Hubs contribute to or draw on efforts to strengthen monitoring of inequalities and community-led monitoring?

Research Sources

The team used the following sources of information to inform its findings:

- The Data Hubs websites, including review of documents posted;
- Key Informant Interviews;
- Document review of internal and public UNAIDS documents related to the Data Hubs;
- Google Analytics of the Data Hubs;
- Google search analysis, including comparative analysis of similar websites.

Inception Report

The team performed preliminary research as part of the inception phase. UNAIDS Evaluation office and reference group worked with the evaluation team to provide the necessary context and prioritisation to create the methodology. The Inception Report provides additional detailed information on the methodology, and tools used.

Expected users and intended use.

The primary audience of this evaluation is UNAIDS at all levels (Global Centre, regional, country), plus co-sponsors, and other key stakeholders. The intended use is for UNAIDS leadership to use the evaluation as a guide for future investments and prioritizations around using tools such as the Data Hubs to improve data for decision making and knowledge management.

Relevant Context

Role of Strategic Information and Knowledge Management in UNAIDS Mission and Global Strategy

The Global AIDS Strategy 2021-2026 - End Inequalities, End AIDS lists – among priorities actions – the need to leverage information to achieve transformative AIDS results. The key strategic goals, equitable access, breaking through traditional barriers, and fully resourcing HIV programming, will in part rely on differentiated approaches, up to date information on what is working and where gaps remain, and compelling arguments for advocacy.

As stated in one of the cross-cutting results of the Strategy: *Data, science, research and innovation: data, science, research, and innovation are critically important across all areas of the Strategy to inform, guide and reduce HIV related inequalities and accelerate the development and use of HIV services and programmes. Page 17* (UNAIDS, 2021)

Objective four explicitly states: *UNAIDS is a knowledge driven secretariat that optimises its world-wide expertise and staff through the use of digital technologies in its work.* (UNAIDS, 2021)**.**

A Knowledge Management Needs Assessment carried out by UNAIDS in 2022 specifically states, achieving the above objective will: *facilitate a more effective, agile and empowering workplace where unnecessary hierarchies and organisational barriers to the free flow of knowledge and*

experience are removed and where knowledge is harnessed to deliver effectively on UNAIDS mission page 1 (UNAIDS, 2022)

The strategy (as well as several senior leadership staff charged with its implementation and interviewed as part of this evaluation) also describes how disaggregated, microplanning level of data on different populations, regions, and other information continues to be critical to address inequalities in differentiated ways. This information will be used for planning, performance monitoring, and advocacy for policies, approaches, and resources. In particular, the inequalities agenda requires sufficient quality disaggregated data being available to planners and decision makers, particularly around marginalised communities such as key populations and refugees / internally displaced persons.

The 2022–2026 UNAIDS Budget and Results Accountability Framework (UBRAF) outlines how the Joint Programme is prioritising strategic information to help translate findings from monitoring and from community-led monitoring into policies and laws that protect the rights of and advance the health and well-being of people most affected by HIV, including people living with HIV, key populations and women and girls. (UNAIDS, 2021)

Relevant Changes at UNAIDS

During the period of this evaluation, UNAIDS went through a reorganisation and a range of changes. The first highlighted by the UNAIDS interviewees is **delocalization** (moving some key positions to regional headquarters). The existing project leadership currently based in Geneva is leaving UNAIDS or possibly changing roles as the responsibility for the Data Hubs is moving to Nairobi. Other operational changes related to delocalization within UNAIDS mean the Data Hubs are likely to face new policies, practices, and processes by individuals and offices unfamiliar with the history of the Data Hubs. These changes along with the minimal formal documentation of the Data Hubs histories, practices, and lessons learned mean this evaluation is intended to capture key information needed by this new management.

In addition, the new UNAIDS strategy includes explicit building of **knowledge management** capacity within UNAIDS to execute its traditional strengths (advocacy, policy, research). A detailed Knowledge Management Needs Assessment was performed in May 2022 to identify key areas for UNAIDS to address. The Needs Assessment highlighted the key elements in Knowledge Management - Creation and Capture, Sharing and Dissemination, Applying and Using - all of which are essential in building a knowledge driven organization.

Another change at UNAIDS is strengthening its **matrix style of organization**, where information will be organized by region and by theme, such as mother to child transmission or key populations. Currently, tools such as the regional Data Hub are primarily organized by region, with themes identified by each region. However, the newer approach is to promote theme expertise across different countries and regions; as outlined in the Knowledge Management Needs Assessment, "… currently in UNAIDS the most common way to access knowledge is direct contact with a small group of experts who receive a significant number of questions or requests and who are overwhelmed by these." (page 8) (UNAIDS, 2022). UNAIDS is planning on strengthening and making these themes more explicit through communities of practice and linking of expertise across different parts of the world.

Potential Role of the UNAIDS Data Hubs

While the Data Hubs are not explicitly mentioned within the new global strategy, the alignment documentation, nor the Knowledge Management Needs Assessment[1], as a major (potential and actual) repository of the current and recent history of HIV/AIDS, part of the purpose of this

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[1] As of the drafting of the final report, the responsibilities for the regional Data Hubs are also not explicitly mentioned in the TORs of Senior Regional Advisers and Strategic Information staff.

evaluation is to capture the experience of the regional Data Hubs (particularly the success of Asia Pacific and the challenges of expanding that success) in order to provide concrete lessons for Knowledge Management implementation, particularly in how to approach the staffing, content creation, and technology elements.

Findings

History of the Data Hubs

The Beginning: the Asia Pacific Data Hub

Between 2001-2004, UNAIDS Asia Pacific (AP) regional office, along with UNICEF, Asia Development Bank (ADB) and World Health Organization (WHO), identified a gap in HIV data specific to the Asia Pacific region. UNAIDS and its partners needed a way to promote data use for evidence-informed actions and advocacy in the region and a centralised place for this range of data and information.

Out of this recognized need, the AP Data Hub was conceptualised in 2004 and conceived in 2005, hosted by Mahidol University in Thailand, with original partners from UNICEF, ADB, UNAIDS, WHO, Mahidol and Chulalongkorn University in Thailand; financial support came from UNAIDS, ADB and UNICEF. The Data Hub moved to UNICEF in 2007, with an official launch at the ADB Manila office in 2008. The Hub moved to UNAIDS by the end of 2011 based on the recommendations from the independent management review of the Data Hub. The AP Data Hub has been financially and operationally managed by UNAIDS (both AP and the Global Centre) from 2012 to the time of this evaluation (September 2022).

AIDSinfo

Concurrently with the building of the AP Data Hub, UNAIDS globally increased its investment in Monitoring and Evaluation (M&E) and strategic information (SI), with the aim to support and provide higher quality, consistent data across all countries. During this period, the UNAIDS M&E cadre expanded to 40 national programme officers to improve strategic information across UNAIDS. UNAIDS SI officers use the Global AIDS Monitoring (GAM) process to collect and validate AIDS data at the country level. SI advisers, who are a mix of international and national staff, are based at the country level, within UNAIDS country and regional offices.

GAMs data, along with other sources, is housed on a UNAIDS managed data repository and interactive tool, AIDSinfo. At the V4 version, AIDSinfo started publishing cleaned and validated data publicly on a web application (AIDSinfo.unaids.org). AIDSinfo hosts validated quantitative data on core indicators, visualisations, and data sheets, as well as links to UNAIDS.org content on relevant laws and policies, fact sheets, and financial data on the HIV response. AIDSinfo also provides easy links to the Key Population Atlas, a centralised tool to provide local level data on Key Populations.

Regional Data Hubs

In approximately 2014, the UNAIDS Executive Director identified the AP Data Hub as a model for other regions to support local and regionally focused usage of data for better decision making. As a result, the AP Data Hub needed to be expanded to all UNAIDS regions. (KII, Global Centre Data Hub Staff, 2022) By 2016, UNAIDS Global Centre funded and placed data analysts in the other regions to support the building of their Data Hubs. The Concept Note on the Regional SI Hubs outlines UNAIDS investments in an MS Access Database and revised website with user interface directed at the key users of the Hubs. (UNAIDS Strategic Information, 2016)

Starting between 2017/2018, a small group within the Headquarters Strategic Information Department (now the Data for Impact) team provided support to these non-AP Data Hubs in the form of technical software development, plus the training, capacity building and other institutional support needed to build and maintain the Data Hubs. This support is still provided as of the date of this evaluation report (end September 2022). (KII, Global Centre Data Hub Staff, 2022)

Since September 2018, the different regional Data Hubs have had different amounts of design and content added to them, despite the same level of support from the Global Centre offered. (KII, Global Centre Data Hub Staff, 2022)

Data Hub Design and Implementation

About the Data Hubs

The UNAIDS Data Hubs are publicly accessible web-based knowledge platforms at the following URLs. Each Data Hub contains regionally specific information, organised around themes determined by the regional Data Hub management staff.

- Asia Pacific: https://www.aidsdatahub.org
  - Data dashboard: https://aphub.unaids.org
- Eastern Europe and Central Asia: http://eecahub.unaids.org
- Latin American and the Caribbean: http://lachub.unaids.org
- Eastern and Southern Africa: https://esahub.unaids.org
- West and Central Africa: http://wcahub.unaids.org
- Middle East and North Africa - currently offline.

Purpose of the Data Hubs

Purpose at creation

As stated in an unpublished report on the AP Data Hub: Guided by its motto, "Evidence for action", the Data Hub collects, verifies, analyses and then packages vital HIV information to help governments, civil society and other partners understand the key issues in the region's HIV epidemic and act on them. (UNAIDS Asia Pacific Regional Office, unknown)

The Concept Note, *Establishment of Strategic Information Hubs in RSTs, Strategic Priorities, Expected Functions and Associated Budget*, outlined the purpose and goals of the (then called) Strategic Information Hubs within the regions. "These Data Hubs would replicate the good practice of RSTAP and create similar structures (functions) within other Regional Support Team (RST) to facilitate proper monitoring of the Fast Track commitments and provide evidence for action at country and regional levels". page 1 (UNAIDS Data for Impact, 2016).

Citing the experience of the Asia Pacific Data Hub, the document specifically identifies the key value of these hubs to be able to generate unique and needed data analysis, identifying gaps, data quality issues, new perspectives on progress and values and associated recommendations, messages, and approaches based on this analysis. The Data Hubs are meant to perform routine data analysis, perform, and publish original research, and generate both routine and special strategic information products to be hosted on the regional Data Hub.

As an example, the Concept Note states that "UNAIDS RSTAP and the Data Hub team, working with a host of partners in development and UN agencies, academic institutions and civil society organisations, have managed to focus attention on a number of strategic regional areas for accelerated response." Page 2 (UNAIDS Data for Impact, 2016).

Current strategic role

As of the date of this evaluation, the regional Data Hubs are still intended to play an important role in the overarching UNAIDS Strategic Information ecosystem. UNAIDS website can only contain data that is published by UNAIDS and meets certain content and branding standards. AIDSinfo also contains officially UNAIDS sanctioned data (like data collected through the GAM process) that meets specific data quality and review standards.

However, there is other strategic information (including reports, policy documents, locally sourced data) that is important for regional and country-based decision making but cannot be hosted on the official UNAIDS sites. The regional Data Hubs, according to the preliminary interviews, provides the space for both local analysis from UNAIDS partners, as well as supplementary UNAIDS data and analysis that meets the standards of the UNAIDS regional office.

Data Hub Structure

The regional Data Hubs are designed to provide regionally specific information on the HIV epidemic, predominantly via a Global Centre provided contact management system (CMS) that also pulls in regional indicator data from AIDSinfo. The regional Data Hubs teams provide all the content and additional data and can customise the presentation of this information by editing the CMS templates and/or providing their own CMS.

Responsibilities of global centre

UNAIDS Data for Impact (DFI) practice area at UNAIDS Global Centre (formerly called the Strategic Information Department) provides central support, technology infrastructure (including the CMS), management of and access to the AIDSinfo database, training and technical support to the regional offices, and funding for data analysts who sit in the regional offices. They also designed an excel spreadsheet that, when updated with recent data, provides generated graphics and images.

The CMS software is managed by an outside contractor named Assyst (Asia Hub uses a different vendor with their own hosting for their own content management). The UNAIDS IT department only provides hosting and backups for the overarching server environment. Each Hub can request both customization of the central CMS as well as provide their own software, as AP does.

Responsibilities per Hub

Each regional office has the responsibility to design and implement the regional Data Hub to reflect the needs of the region, including customising the user interface provided by Global Centre to reflect the themes of the region. Most importantly, the Data Hub team has a large content sourcing and sharing obligation, as outlined in the original concept note, where it was anticipated that the analyst would: *… collates and synthesises available data from country cross-sectional surveys, prevalence studies, behavioural surveillance and other national and global reports, encompassing five key domains: vulnerability, risk behaviours, HIV infection/disease prevalence, HIV expenditure and national response. (UNAIDS Data for Impact, 2016) page 2.*

Leadership of the Hubs

In the Asia Pacific RST, the senior SI advisor is the manager of Data Hub. In other regions, the Director of the Regional Support Teams (RSTs) has the ultimate responsibility (often supported by the senior SI advisor) and assigns staff (usually data analysts) to design and manage the Data Hubs content and information architecture in collaboration with UNAIDS Global Centre. Quality assurance and security/sensitivity for all content and data on the regional Data Hubs is the responsibility of the regional office, usually the SI Advisor, with extensive support from the data analysts.

Governance of the regional Data Hubs are not explicitly mentioned in the TORs for the senior staff in the regional support teams. However, the data analysts do have the Data Hubs included in their TORs.

Content and data on the Hubs

The regional Data Hubs house both qualitative and quantitative data, in the form of reports, fact sheets, infographics, charts, as well as data tables on specific indicators (automatically pulled from AIDSinfo). The CMS can also host data and content not sourced by UNAIDS, as well as UNAIDS content that would not meet the publication criteria for the official UNAIDS website.

Each regional Data Hub has common content areas, including:

- Regional data (from AIDSinfo, filtered by region)
- Country profiles for the countries in the region
- Thematic areas relevant to the region (such as regional information on stigma and discrimination, eMTCT, SGBV, or key populations)
- Library of different media, such as presentations, country reports, and images, filtered by country and/or thematic areas.

Technical design

The UNAIDS Data Hubs technical architecture provides central support for key software and databases, using APIs to pull official UNAIDS data from AIDSinfo while also allowing for freedom of design, content, and additional data on a regionally focused CMS instance.

Figure 1: Simplified Technical Diagram of the UNAIDS Data Hubs (source: DT Global Team)
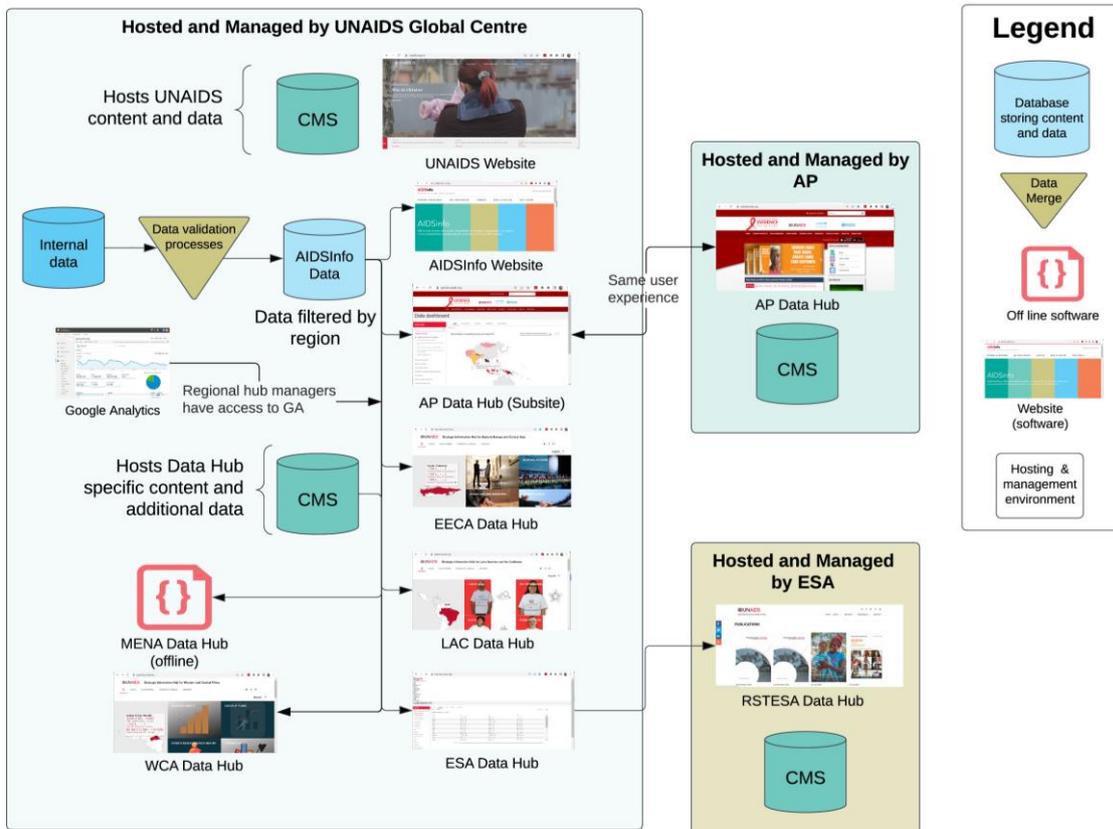
System structure for Data Hubs

The following is the detailed system structure as outlined in the Handover Notes - Regional SI Hubs (2020). The hosting of the software and the databases is managed by Global Centre's IT team. The web CMS has been developed by an external vendor.

Figure 2: Technical Diagram of Data Hub structure (Dy, 2020)
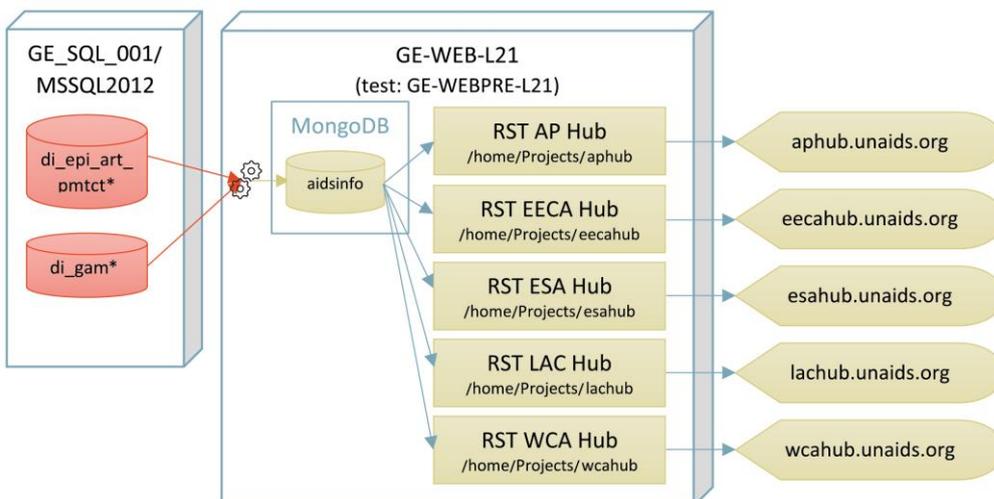
Functionality

Content Management

The CMS supports unique configurations per Data Hub instance through a web interface, the "Regional Data Hub Admin Dashboard". (Frescura, 2018)

Regional Data Hub Administrators can create, edit, add or remove thematic areas, including the order of presentation and related image. They can also add or edit countries and flags (most are preloaded). Admins can also add resource types (aka PDFs, Presentations, Publication, Image, etc.).

In addition to managing the content areas, the admins have full control over uploading, updating, removing, and/or managing documents. They can create short descriptions, source information, sort order, thumbnail, and accurate title. They also can tag the document by the categories listed above (themes, countries, resource type).

Figure 1: Screenshot of Regional Data Hub Admin Dashboard (source: Frescura, 2018)
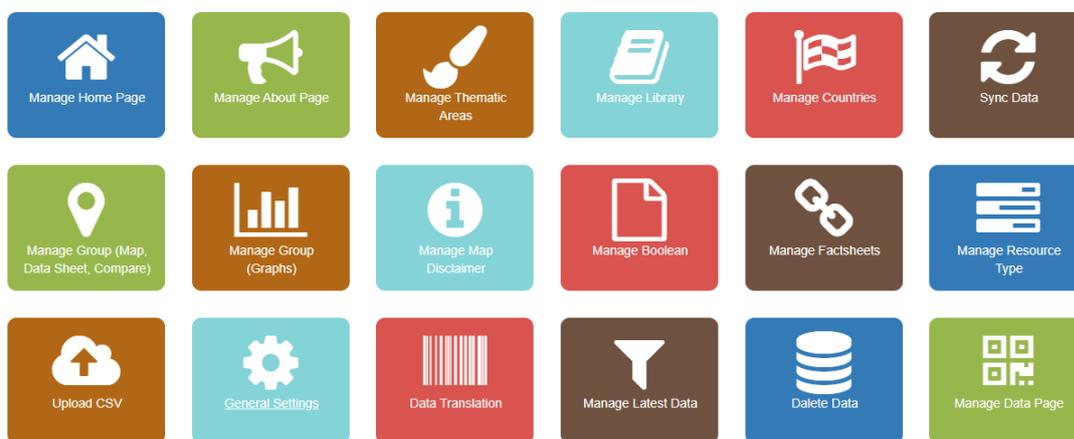
Data Presentation

The Data Hubs source data automatically from the AIDSinfo database, as outlined above. When data is added to AIDSinfo, the Global Centre team automatically updates the regional Hub data sets.

However, through the Regional Data Hub Admin Dashboard, the administrators can select which indicators to include on maps, graphs, datasheets or comparisons on the site. The site is pre-loaded with default indicators, such as "people living with HIV" at regional and national levels. These default indicators can be edited, deleted, or added to via the web interface.

Figure 2: Add new Indicator interface for the Regional Data Hub Admin Dashboard (source: Frescura, 2018)

Customization

Before the creation of the above, AP created their own content management system (CMS) to manage their own data and content. Their current Data Hub mixes two different websites into one common web interface, using some of the software and data tools provided by UNAIDS Global Centre as well as software and database AP manages and hosts. Eastern and Southern Africa have attempted a similar approach, but, as of now, for unknown reasons, it is not currently online.

The regional offices have the ability to request software changes from the Global Centre's software vendor, for which both are paid for by either the Global Centre or the regional budgets. So far, the only customization performed was to support tagging documents in additional languages (Russian, Spanish, etc.).

Day to day management

Across all interviews, with the exception of Asia Pacific, the management of the Data Hubs is the responsibility of the data analysts. Using the content management tools, they can add/edit themes and other classification elements in the Data Hub. They update the "snapshot" spreadsheet, identify and/or create content, upload documents and images, and receive monthly reports on the google analytics of the sites.

In theory, the data analysts are overseen by the SI advisor or similar who provides the overarching vision (themes, topics to address, identify gaps, etc.), as well as supports sourcing of content, use of the site with partners, etc.

Skills needed

Based on a mix of review of documentation, interviews, analysis of the content management system, and the intended content and performance of the Data Hubs, the evaluation team identified the following key skills needed to perform their duties.

The data analysts need to have the following skills to perform their duties:

- Strategic Information / M & E data management (mid-level)
- HIV research & analysis (mid-level)
- Web content management (mid-level)
- Graphics / excel generated graphs (mid-level)
- User interface design (mid-level)
- HTML (basic)
- Google analytics (basic)

The Data Hub supervisors (SI advisors or similar) need to have the following skills to perform their duties:

- Regional expertise in HIV status, data ecosystem, and stakeholder needs (advanced)
- Communications and Knowledge management strategy (mid-level)
- Strategic Information / M & E data management (mid-level)
- HIV research & analysis (mid-level)
- Web content management (mid-level)
- Website user engagement approaches – such as public outreach, user interface design, information architecture, and linkage to social media (basic)
- Google analytics (basic)

Theory of Change Assessment

At the start of the evaluation, it was found Regional Data Hubs do not have an explicit theory of change nor associated monitoring and evaluation or performance metrics. During the inception period, the evaluation team identified an implicit theory of change via a review of existing documentation and key informant interviews.

During the evaluation, the team adapted and validated the implicit theory of change with Data Analysts and SI Advisors to help provide a way to measure performance of the Data Hubs, based on what UNAIDS generally assumed they would do. The team both presented the TOC during interviews as well as sent out a survey to Data Hub staff for feedback.

The implicit theory of change was determined to be a close match to what individuals felt were the purpose, goals and approach they were instructed on for the Data Hubs.

Implicit Theory of Change

Purpose of the Data Hubs: The programmatic purpose of the UNAIDS regional Data Hubs is to provide regionally focused programmatic and advocacy data and related information to UNAIDS, UN partners, and other regional stakeholders in order to promote data generation, analysis and use. The Data Hubs provide a publicly available space to publish and share information from UNAIDS and non-UNAIDS sources, such as government policy documents and partner reports, as well as regionally developed analysis, locally collected and sourced data.

UNAIDS goal: Precision Public Health. As part of UNAIDS's overarching mission, the regional Data Hubs will improve equity and outcomes for those impacted by HIV by using granular data to identify and address the characteristics that lead to inequalities in HIV programming.

Programme goal: The regional Data Hubs programmatic goal is to improve the local use of data for decision-making by customising information to regional priorities, themes, and/or audiences.

Outcomes: The following are the intended outcomes for the regional Data Hub programme.

Outcome 1: Increase the capacity for UNAIDS and partners to create timely, customised, and targeted SI data products in alignment with key decisions, regional priorities, themes, and audience needs.

Outcome 2: Improve the access for locally generated data, information products, policy documents that impact HIV programming.

Outcome 3: Demonstrate and promote the use of data and information products for specific decisions.

Outcome 4: Overcome language, literacy, and other barriers to needed information by different HIV stakeholders.

Outcome 5: Provide technical support to co-sponsors, country teams and regional community networks to generate, analyse, and use data in their work.[2]

Outputs: The current outputs of the AP Data Hub (which is intended as the model for all Data Hubs) are:

- **Regionally specific SI products created by UNAIDS regional & country offices.**

The key output of the regional Data Hub is the creation of SI products specifically related to the priorities, concerns, and emerging trends of HIV epidemic and response in the region. These SI products are context driven data analysis, with varying formats and levels of complexity, intended to meet specific data needs by different users. These products add value to the existing data and information products already available, as well as demonstrate the culture of data use and/or lead the way of contextualised inequality analysis.

- **Curated repository of internally and externally sourced content relevant to the region.**

These SI products and others sourced externally make up the content of a curated repository for sharing and analysis. The repository requires a regionally defined set of priorities, types, and standards for publication (i.e., what gaps in information products or data need to be filled as a priority, as well as what are the UNAIDS regional offices standards for publication of UNAIDS and non-UNAIDS sourced products, as well as informal vs formal translations.)

- **Self-service interactive data analytics tools via a web platform**

A web-based interactive platform will allow a range of users to access the repository as well as engage interactively with the data and SI products. This platform should allow UNAIDS to support a wide range of users to access and use the information and data they need, when they need it. This

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[2] Only for Asia Data Hub

tool should also be able to perform standard data analysis visualisations as well as manage the repository more easily for the content managers.

- **Provision of technical support to local stakeholders**

UNAIDS Data Hubs enable and provide technical support to partners, co-sponsors and community networks to create their own SI products, produce their own analysis, and use data from a variety of sources for their own decision making. [3]

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[3] Only for Asia Pacific Data Hub

Figure 5: Proposed Implicit Theory of Change, based on inception report findings
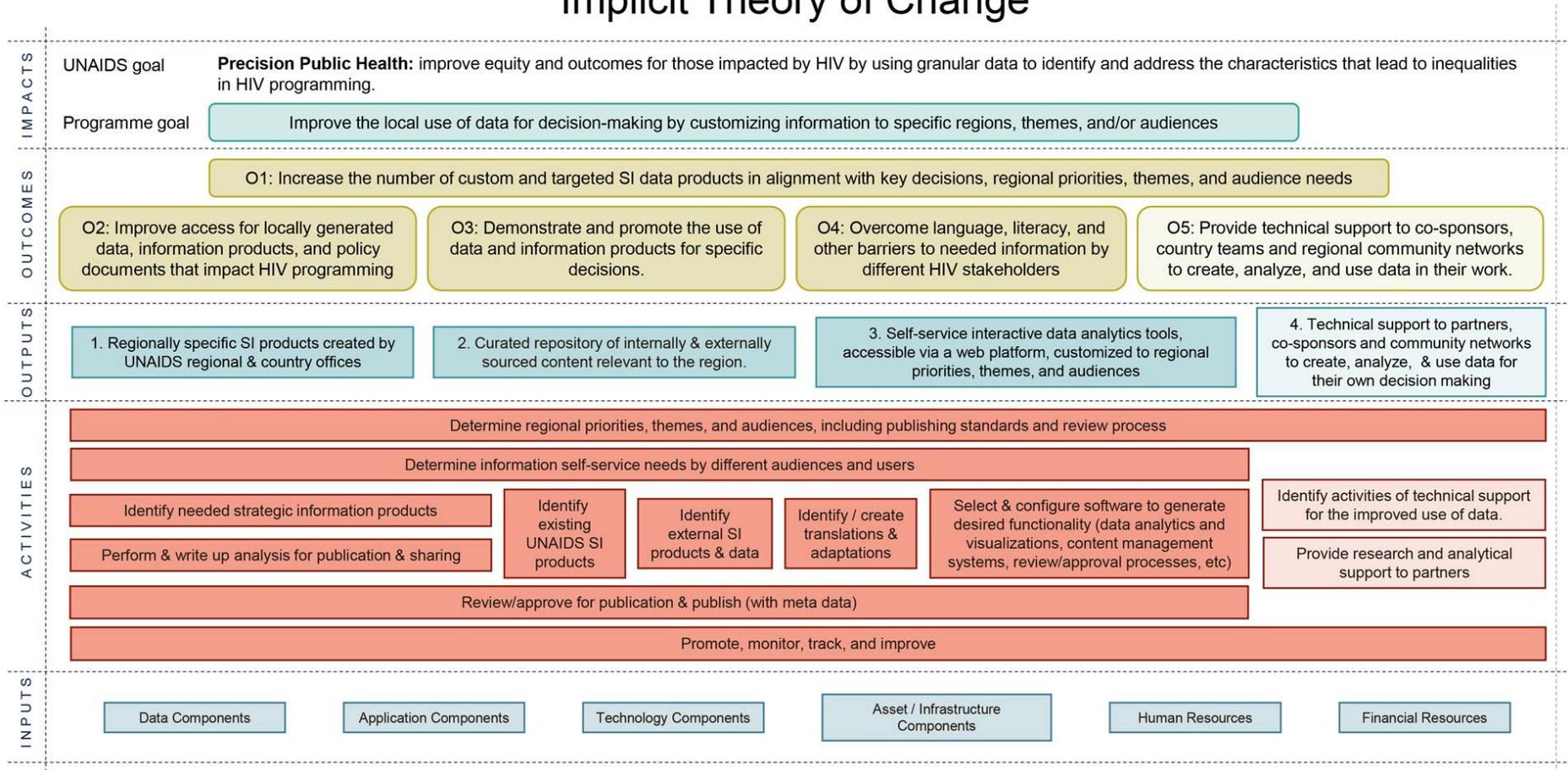
Lighter elements indicate only for Asia Hub. Other Data Hubs did not see this as part of their role.

Activities: Each of the above outputs has specific activities, some of which overlap.

Cross cutting Design and Planning activities (supporting all four outputs)

Each regional Data Hub must:

- Determine regional priorities, themes, and audiences, including publishing standards and review process.
- Determine information self-service needs by different audiences and users.

These designs and planning activities will give key guidance to the other activities.

Creation of Custom Strategic Information Products (supporting output 1)

The key activities include:

1. Identify needed strategic information products, including data sources and analytical approaches.
2. Perform and write up the analysis for publication/sharing, including applying the standards for quality control.

Content management of the curated repository (supporting output 2)

There are activities related to day-to-day content management:

- Identify existing regionally or country specific information products created by UNAIDS staff.
- Identify external SI products, such as locally sourced analysis, grey literature, or data.
- Identify or create local language documents, data and other information products.

Develop and maintain a web-based repository and analytics tool (supporting output 3)

UNAIDS Global Centre and regional Data Hubs should work together to develop and maintain web-based repository and analytics tool that can support the needs of the different users and key stakeholders. Flexible website design is needed to create and build user experience (UX) and information architecture (IA) for the different versions of the regional Data Hubs. Each Data Hub will need to create and maintain its own version of common taxonomies to use for locally sourced and hosted data and information products (especially those in non-UN languages). Software needs to be selected and configured to support these design decisions to generate the presentation of data, including visualisations.

Review, Approval and Publish (supporting output 1, 2, and 3)

The regional Data Hubs need to apply the review, approval and publication process they established during the design and planning phase.

Provision of technical support to local partners4 (supporting output 4)

Using the Data Hub staff as key providers of the technical support, two main activities under this output/outcome 5 are to 1) identify activities of technical support for the improved use of data and 2) provide research and analytical support to partners in an ad hoc manner.

Monitoring and Evaluation of the regional Data Hubs (supporting all outputs)

For all outputs, promoting, monitoring, tracking, and improving the regional Data Hub based on this data is a key activity. Key elements to monitor are:

- What products are hosted, who is accessing them and how are they used?
- Who of the intended users are not using the products and why?
- Are there gaps in themes, countries or audiences served?
- Are there barriers or new opportunities to address to improve performance?

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[4] Only Asia Hub identified these activities as a core part of the theory of change.

Theory of Change Assumptions and Risks

The following have been identified during the inception phase as key assumptions for the theory of change to produce the outcomes desired and support the programmatic and UNAIDS overarching goals.

Assumptions

- Improved access to better information products will lead to better programming.
  - Access to targeted information products by relevant stakeholders is difficult/missing; therefore, programme performance can be improved by better access to targeted information products.
  - Relevant stakeholders will have the capacity, power, and resources to apply these information products into better programming, advocacy, and accountability actions.
- Different stakeholders have different information needs, which may change over time.
  - Proactive monitoring of usage and changes in user behaviour will address these changing needs to keep usage at anticipated levels.
- UNAIDS is in a unique position to provide a regionally focused information platform.
  - A capable alternative tool does not already exist.
  - Other sponsors, donors, or actors are unable or unwilling to lead in a similar activity.
  - Other sponsors, donors or actors are willing to support and contribute to UNAIDS efforts.
- UNAIDS senior management (at Global Centre and regional level) provide support for the Regional Data Hubs, including:
  - Prioritising and using the Data Hubs in their own work.
  - Monitoring the performance of the Data Hubs and providing encouragement as needed.
  - Provide and protect central funding for technology, capacity building, staffing support.
  - Ensuring regional staff have what they need to support the Data Hubs.
- UNAIDS regional and country staff have:
  - Resources (finances, staffing, time) to perform the different activities in the theory of change.
  - Ability and skills to learn and determine the needs of the different stakeholders for these information products.
  - Skills and tools to monitor and track the usage of the sites to improve performance.
  - Motivation to create, update, monitor, and improve their regional Data Hub on a routine basis.

Risks

- Low use of the regional Data Hubs linked to poor content, poor promotion, and competing sites.
- Inflated expectations on the impact of the regional Data Hubs on measurable immediate outcomes.
- Uneven performance of regional Data Hubs undermines all hubs.
- Information products published that are not in alignment with overall UNAIDS publication or policy standards, which causes misunderstanding or political complexity.
- Data and information product sources refuse to allow their information to be published on the site.

Regional Data Hub Comparisons

The evaluation team compared all regions and their Data Hubs based on regional context and perspectives, the history and structure of the Data Hub, a summary of content, focus areas and usage with a final SWOT analysis per region. The full comparative analysis can be found at Annex D.

Findings on the Comparisons

Histories

The histories of the five non-Asia Hubs are remarkably similar. The hub software was rolled out to local RST staff in 2018, with the SI Advisors assumed to be taking the lead, with support from Data Analysts. Significant effort was put into establishing the Data Hubs, including uploading documents and deciding on key themes. All Data Hubs mentioned challenges with staffing during the rollout and post rollout period, which significantly hindered the investment in the Data Hubs after the initial rollout, as evidenced in the content status (next section).

Current Data Hub status

Latest Content Updates

There are two types of content on the Data Hubs: Data and Documents (which are sometimes subdivided into Publications and Analysis/SI Products).

Data. The Data Hubs automatically pull data updates from AIDSinfo on a routine basis, primarily utilising Automated Programmer Interfaces (APIs). This fact means that the Data Hubs are as up to date as the UNAIDS AIDSinfo site, with key indicators and automatically generated graphs.

Figure 6: Screenshot from WCA Hub key indicators

Publications. Other than AP, none of the other Data Hubs have had publication updates since 2018.

AP	EECA	ESA	LAC	MENA	WCA
October 2022	2018	None (hosted on rstesa.unaids.org)	2018	n/a	2018

When asked, data analysts mentioned that adding documents and other content was labour intensive, duplicative (most documents existed on other UNAIDS sites), and/or not a top priority for their office. ESA stores all its documents on https://rstesa.unaids.org/publications.

Language

The CMS offers different language translations for the global navigation elements.

Navigation. One differentiator between Data Hubs is the provision of language options for the navigation. Note, this only changes the navigation elements, such as global menu, headers, and footer language. It does not translate documents nor other content.

Language	AP	EECA	ESA	LAC	WCA
English	X	X	X	X	X
French					X
Russian		X			
Spanish				X	

Figure 7: Screenshot of EECA home page in Russian
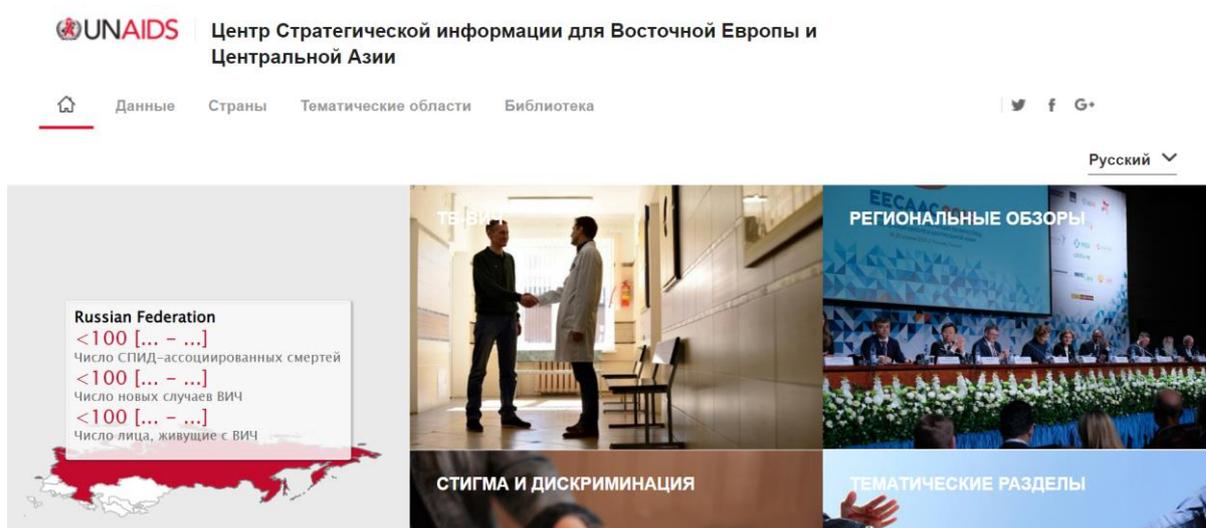
Publications. Many of the Data Hubs offer translations of UNAIDS documents; ECCA has a large Russian language document repository, WCA has documents in French, and LAC has a lot of Spanish language content. AP staff mentioned that they have documents in local language on the AP site, but there is no easy way to find them using the standard site search tools.

Themes

The following shows the range of themes (or sub navigation titles) of the four Data Hubs that have them. The ESA site does not contain themes. Please note, the following table does not show the hierarchy of these themes, only if these themes were present on the site.

Theme	AP	EECA	LAC	WCA
Gender-based violence and HIV	X			X
PrEP and HIV testing innovations	X			
Treatment/ART	X	X		
Sex work and HIV	X			
TB-HIV	X	X		X
Economics of AIDS	X			
Stigma and discrimination	X	X	X	X
eMTCT	X			X

Regional Cooperation Programme		X		
Data Availability/Latest data	X	X	X	
HIV and People who inject drugs	X	X		
Key Populations	X	X		X
Combination prevention			X	
Fast-Track cities			X	
Financing, Investing for results / Sustainability		X	X	X
Youth/ Young Populations	X		X	
Catch Up Plans				X

The AP Data Hub has additional content areas, including more in-depth information on key populations, thematic areas, EMTCT triple elimination webpage, links to satellite pages (such as Malaysia - http://www.mysdatahub.org), and a What's New page with updated content (as of June 2022).

The ESA site menu sends users to https://rstesa.unaids.org.

Regional perspectives and focus

AP is very different from the other existing Hubs. The AP Data Hub has more resources than the other Hubs, and it seems to serve a stronger role for data presentation and advocacy within the RST. Beyond the RST, the site has a strong presence in other regional communities such as UN, development partners, community regional and national stakeholders. In addition, the most recent senior regional strategic information advisor in AP has reported that the AP regional office has a culture of data driven decision making, meaning that the resources on the AP Data Hub are proactively used to drive and explore regional discussions and advocacy efforts. The Hub data and resources are used as a basis for original analysis, to be used for specific programmatic and advocacy SI products. These products are often then re-posted on the AP site. All staff in the region are aware of the expectation to use data for analysis to inform various decisions.

Role of Data Hub in other regions. Across the other Data Hubs, there was a broad awareness of the value of something like the AP Data Hub but a frustration that the level of effort needed to build and sustain such a tool was underestimated. Buy in from senior management, co-sponsors, government partners, and other key stakeholders was noted as a possibility, but this buy in doesn't already exist in a format that would easily support the Data Hubs. Those data analysts and SI advisors who saw the potential of the Data Hubs acknowledged that a lot of effort was needed to build what AP already had in terms of relationships with content sources as well as the ability to generate analytical products – and the technology elements (i.e., the website) was not the biggest challenge (ref. 3.5.2.2).

Comparative Analysis Outside UNAIDS

The evaluation team reviewed 18 websites from 13 organisations working in HIV, including donors (US CDC, Global Fund, NIH, WHO, USAID, and World Bank) and research organisations, such as NAM, Kaiser Family foundation, and amfAR. The full analysis can be found in Annex E.

The team discovered that there was no clear competitor to the regional Data Hubs in terms of provision of targeted regional content. Most sites either are central databases or only provide information on their own programmes and resources. This finding was reinforced in interviews with regional data analysts who acknowledged the value in having a regionally oriented HIV site to aggregate and curate analysis and data, as they currently also used a wide range of sources, many not available to the general public.

Findings on Key Evaluation Questions

Relevance and Coherence: The Right Things and Right Players (Design Issues)

Who are the intended users of the Data Hubs in different regions?

The team determined the intended users of the Data Hubs through interviews and document review of strategy and implementation documents. The following represents a consensus across all interviewees of the intended users and usage of the Data Hubs. Please note, AP was oversampled in terms of interviews with actual users as none of the other Data Hubs could provide contact information for theirs.

Summary of usage of content

The document review and interviews showed that needs of users include more granular data and analysis (i.e., subnational, subpopulation, time series), as well as more holistic information than is commonly available on many HIV websites managed by partners.

Common expectations around usage of the content included

- Advocacy for particular policy / programming approaches through statistics on need, evidence of impact, and examples from other countries
- Analysis on performance and impact across different countries or themes
- Design and implementation approaches to address key themes
- Status information for reporting (such as existing country policies related to HIV, statistics on different populations, etc.)

Summary of User Needs

Usage of the site

Due to the limitations of interviewees as mentioned above, the following primarily (although not exclusively) represents the views of AP users and staff.

Place to find and share latest quality HIV data and analysis. Several interviewees mentioned that they appreciated how the AP site provides up to date data and analysis, both sourced from within UNAIDS as well as externally. They appreciate how the data presentations are up to date, as well as how new analysis is posted regularly. Two users also mentioned how they reached out to the AP Data Hub staff if they could not find the type of data or analysis they were looking for and often the Data Hub staff would produce the data they needed.

Targeted information, different presentations. Interviewed users appreciated the specific quality data and associated analysis on target populations, including infection rates, subnational geographic location, potential impact on economic and health goals, etc. They also appreciated the different presentations of the same analysis, based on the priorities of the users. For example, when promoting policy changes to decriminalize sex work, users mentioned that they needed different types of arguments for the same policy – some focused on health impact, some focused on human rights/gender, and many focused on cost comparisons/impact of not changing the policy.

Central repository for non UNAIDS regional HIV Data. Users mentioned the usefulness of finding country and partner documents on the Hub, rather than having to go hunting on the internet. Other UN staff said they appreciated the fact that all of their country and regional reports related to HIV would appear on the Hub, making it a "one stop shop". The ability to find government policies and community-based organisation reports and data was also highlighted as being very useful. Translations were also commented on as being very useful, both translating documents to/from English into both UN and local languages, as well as having a repository of non-English versions in a central location.

Space to build partnership and regional engagement. Several users mentioned that the regional Data Hubs can be very useful at helping governments, academics, and others share their findings more broadly and build consensus around approaches, based on the latest evidence. However, one Data Hub staff member mentioned the need for a place for private coordination and collaboration across different stakeholders (donors, governments, NGOs, UN agencies) – something that the current regional Data Hub does not support.

Different Intended Users

Some regions, such as ESA and WCA, had very limited ideas of who the users of the regional Hubs could be while others (Global Centre, MENA, AP, LAC) had very clear ideas.

However, only AP and Global Centre included UNAIDS (RST, Country offices) as potential audiences for the regional hubs.

User group	Advocacy for policy/programming approaches	Performance analysis and impact	Design and implementation approaches	Up to date data and status info
UNAIDS RST	X	X	X	X
UNAIDS Country office	X	X	X	X
UN regional/country offices	X	X	X	X
National governments	X	X		X
NGOs/CBOs	X	X	X	X
Academia		X		X
Donors/ Partners	X	X	X	X

UNAIDS Regional Support Teams

The desired usage by these teams includes using the information on the Data Hubs to advocate for resources, policy changes, and action; identify analysis and information gaps and shortfalls; and provide accountability of programming. In particular, the Data Hubs can allow for sub-regional data (such as the Mekong Delta in the AP region) to promote cross border analysis, as well as comparisons across different countries or subregions.

Other UN regional and country offices

Within the UN regional and country offices, there are different sub audiences, such as senior leadership, thematic staff, and analysts. The desired usage by these individuals includes using the information on the Data Hubs to inform their programming, advocacy programming, and other analysis so that HIV programming and advocacy messages are consistent across different UN programmes. programming. Users in the Asia Pacific region mentioned how they use the AP site in their work - mainly in helping with advocacy and designing of programming by finding the latest information, statistics, and best practices to address specific HIV challenges in their work. The Data Hubs are seen by several interviewees as a potential useful collaboration tool across different UN Agencies for support of "One UN."

UNAIDS country offices

Within UNAIDS country offices, national directors and programme managers are intended to use the Data Hubs to access country and regional data for their programming needs, to compare across the region and between countries. The Data Hubs are also able to store policies and laws per country in an accessible location (especially in multiple languages), as well as relevant country or subnational reports and data for access and sharing. In addition, as there are countries with no or light UNAIDS SI presence, the Data Hub is a way to provide distance support.

Regional and country partners (governments, local NGOs)

Other regional country partners, such as government staff in different ministries and at different levels, as well as regional organisations, donors, community organisations and NGOs, are also intended users of the regional Data Hubs, to support their advocacy, policy, and programmatic needs.

Other partners (donors, regional organisations)

It is also intended that other global and regional partners may also be supported via the regional Data Hubs. In particular, co-sponsor agencies like UNICEF and partners such as PEPFAR and Global Fund, as well as bilateral donors, can be supported by the provision of regionally based Data Hubs for their programming, advocacy, policy making and resource mobilisation work. International NGOs and regional bodies could also be supported in the same way. Current comparative analysis of these partner websites shows that many do not support the same type of information as UNAIDS regional Data Hubs (see Annex E for more information).

Finding 1: Intended users and their needs are generally well understood.

Are their information needs fulfilled by the Data Hubs?

Once the evaluation team determined the intended uses by the Data Hubs, the team then researched whether their needs were being met. As none of the Data Hubs are explicitly measuring usage, the team used the following to provide a broad assessment of usage.

- Interviews with Data Hub staff as well as existing users, identified by Hub staff, to determine needs vs actual usage.
- Google analytics (measuring number of visitors to the Hubs, compared to AP and AIDSinfo)
- Google search results (measuring relevance of the sites in the search engine algorithm).

Findings from interviews. The team asked each Data Hub to provide a list of users outside the regional hub core staff to interview, as well as provide examples of usage by their regional partners. Interestingly, only AP could provide names of users or examples. This inability to provide recommendations was particularly surprising when different Data Hub staff could articulate clearly who potential users could be, and even sometimes gave examples of engagement needs with regional collaboration stakeholders. This inability to refer specific users to the evaluation team or provide relevant examples is considered a finding; the fact that none were able to easily provide individuals who they know actually use the site tells the evaluation team that there is low usage by these core audiences.

Findings from Google Analytics. The UNAIDS Global Centre has a Google Analytics account for the different regional Data Hubs.

Google analytics shows major disparities between the control (AIDSinfo), the ideal (AP), and other Data Hubs, as demonstrated below.

In the Evaluation Inception Report, the team provided a quick review of the users[5] across the 6 Hubs plus AIDSinfo from September 2018 to May 10, 2022 (Google Analytics, 2022) shows clear disparity.

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[5] Google Analytics defines a user as " A person who interacts with an app or site whose activities you measure with Google Analytics." This number does not break out unique users vs repeat users but it does combine multiple page visits by the same individual during the same session into one user visit. (Google, 2022)

Users reported In UNAIDS Google Analytics report (Google Analytics, 2022)

Website	Users	Notes
AIDSinfo	1,239,131	Only for the data dashboards - not including UNAIDS.org or other subsites
AP	24,100 (data dashboard only) 597,233 (Analytics)	Because AP has two sites, there are two sets of statistics - one just for the data dashboard and one for the main Data Hub.
EECA	883	0 users up to late 2019
ESA	451	0 users up to mid-2019
LAC	315	0 users up to late 2018
MENA	0	not online
WCA	63	0 users up to early 2020

The team performed an updated comparison between sites from January 1, 2022 to August 30, 2022 with the following results. More detailed findings can be found in Annex A.

Item	What's being measured?	AIDSInfo	AP (data dashboard)	EECA	ESA	LAC	WCA
Total users	number of users to the site	118,233	5,761	113	115	60	19
Sessions	how many sessions on the site	160,059	7,524	144	146	105	26

Google Analytics shows that the regional Hubs outside of AP are rarely visited.

Findings from Google Search Analysis. Google search engine results are a good proxy indicator of usage of information as Google optimises results based on popularity of the page/website, perceived quality, and relevance to the search terms. (Google, 2022) Focusing on improving search results is also an important way to engage audiences as more and more people use Google as their first tool to find information they need, vs going to a specific website.

The team entered the following keywords into Google to determine whether UNAIDS and/or the regional Hubs appeared on the first page of results, what number they appeared as, and any other references to UNAIDS within the first 10 results. The team also noted if any other results referenced UNAIDS or the regional Hub in their work, again, as a measure of usage of UNAIDS information.

Key words	UNAIDS	Hub	Notes
HIV Asia	3	AP 6	1 was Wikipedia article on HIV/AIDS in Asia which referenced at least six UNAIDS documents Number 5 (OECD) cited UNAIDS within the first paragraph
HIV Asia pacific	1	AP 2	3 was a NIH article which was co-written by 2 UNAIDS staff from AP. 4 was a Lancet article which referenced UNAIDS main website.
HIV Africa	5	none	The Wikipedia article "AIDS in Africa" references UNAIDS 9 times (no mention of the regional Hubs). 9 references UNAIDS 2 times
HIV West Africa	2	none	7 was a UNICEF article co-written by 2 UNAIDS staff
HIV Southern Africa	2 (South Africa)	none	Very little on southern Africa, all responses were about South Africa
HIV Eastern Africa	3	none	

HIV Central Africa	0	none	First result was UNAIDS's pages on the Central African Republic
HIV Latin America	6	none	2nd result was the Wikipedia page AIDS in Latin America, which had 2 UNAIDS citations. 10th was for a Lancet Article which cited UNAIDS 2 times.
HIV Eastern Europe	1	none	4 was a Lancet Article that referenced the UNAIDS Global Report
HIV Middle East	2	none	X was a Lancet article which referenced the 2021 Global AIDS update, the Global AIDS strategy 2021-2026, and 2 other UNAIDS documents
Global HIV/AIDS Statistics	1	none	

Google search engine results shows that UNAIDS main site and its work, as well as AP are well referenced, but the other regional Hubs are not, meaning they are not being searched on or linked to by other sites or references.

What is the extent of the use of the Data Hubs outside UNAIDS?

For AP, based on review of documents and preliminary interviews, current users of the AP site include other UN regional staff (such as UNICEF and UNDP), advocacy organisations, implementing partners, government policy makers, and other key decision makers in both the region and in specific countries. AP regional Data Hub also offers a subsite for the government of Malaysia to allow them a space to host their own data and documents related to HIV programming in their country. Other than AP, as outlined in the previous section, there is no evidence of usage by users outside of UNAIDS.

Finding 2: Outside of AP, there is minimal usage of the regional Hubs by UNAIDS or those outside of UNAIDS. Therefore, user information needs are not being met.

What are the available data sources for the Data Hubs?

Existing information sources

The regional Data Hubs have the technical capacity to host a range of types of content, from datasets to documents. There are two main categories of data sources: Those provided by UNAIDS Global Centre automatically, and those uploaded by the regional Hub staff.

Centrally provided: The Global Centre provides data from AIDSinfo, filtered by region and country. None of the documents hosted on other UNAIDS sites, such as the policy documents, are automatically filtered or available on the regional Hubs.

Regionally provided: Data provided by regional Hub staff include:

- Research papers/reports from partners
- Surveys and programmatic data collected by country programmes
- Legislation and government policies
- Translations and local language documents
- UNAIDS global report
- Other UN/partner documents on themes, policies.

Each regional Data Hub has a great deal of control over how they organise the information and what content they provide on their Data Hub. However, this content is manually uploaded and can be very time consuming, especially as some of the documents already exist on other UNAIDS sites.

Potential limitations on content

Outside of AP, some data analysts stated it was hard to find appropriate content for posting and that the work to find or create this content would be significant. There was a concern about the regional Hubs overpromising when the information was hard to find.

Finding 3: There is automated data (from AIDSinfo) as well as labour intensive manual uploads of data and documents. Content creation and sourcing is also labour intensive and a major barrier.

What does the ecosystem look like (e.g., other co-sponsors Data Hubs)?

No co-sponsors other than for Asia Pacific. Other than AP, the team found no evidence of existing co-sponsorship or investment by partners for any regional Data Hubs. The team did attempt to interview other UN Agencies and UNAIDS partners such as PEPFAR but, outside of AP, was unable to find anyone who could speak either to existing or potential partnership or investment into the regional Data Hubs.

No solid competition. The evaluation team performed a comparative analysis based on google searches and personal knowledge. The team did ask interviewees for other sites they routinely visited, but none jumped out as comparable to the regional Data Hubs in terms of scope and content. The comparative analysis confirmed this finding – please see Annex E for the full analysis.

Looking at key players in HIV, no other organisation is offering a similar comprehensive "one stop shop" for HIV, looking regionally and/or thematically.

Capacity building around translating data and analysis into programming is popular. Both interviews and google searches of KM for HIV revealed a broad desire for increased application of data analysis for programming, recognizing the need for granular, targeted data that can be applied to specific needs and audiences.

Finding 4: There is a clear continued need and interest in addressing the HIV pandemic through targeted and timely strategic information analysis, where UNAIDS has a clear lead role.

While there is currently no co-sponsorship of the regional Data Hubs outside of AP, the experience in AP as well as the lack of solid competition may mean that co-sponsor and partners interest is possible. The increased focus on the need for granular data and analysis, combined with UNAIDS specific "brand" as a central trusted convener and collaborator across different partners makes it feasible for co-sponsorship to be potentially found.

Effectiveness: The Right Results (Implementation Issues)

To which extent have the Data Hubs achieved their intended objectives?

Comparison of results to Implicit theory of change

Intended Outcome	Result
Outcome 1: Create and publish custom and targeted SI data products in alignment with regional priorities, themes, and audience needs.	Other than AP, none of the regional Data Hubs routinely created and/or published SI data products to the Data Hub.

Outcome 2: Concretely demonstrate and promote the use of data and information products for specific decisions.	Other than AP, the Data Hubs are not routinely used by UNAIDS staff or other partners to inform decisions.
Outcome 3: Improve access for locally generated data, information products, policy documents that impact HIV programming.	Other than AP, the Data Hubs do not contain nor support the usage of this type of content.
Outcome 4: Overcome language, literacy, and other barriers to needed information by different HIV stakeholders.	One success point of the Data Hubs has been hosting of non-English documents (such as Russian, Spanish, or French) on the sites.
Outcome 5: Provide technical support to co-sponsors, country teams and regional community networks to create, analyse, and use data in their work (*AP only*)	AP was able to provide evidence, including hosting government data, of providing technical support to local stakeholders and improve the use of data for decision making

Finding 5: Other than AP, the regional Data Hubs have not achieved their objectives.

Based on the implicit theory of change, the only regional Data Hub that has achieved the intended objectives are AP. However, as the implicit theory of change is based on AP's success, this measure is somewhat biased. However, the evaluation team did request feedback on the implicit theory of change as it would apply to their regional Data Hub, and most found it applicable, even if they admitted they did not achieve its aims.

What are the key conditions that have made the Data Hub in the Asia Pacific achieve its results?

There were several lessons from AP that can be used for similar types of initiatives. The team also asked the other regional Hub staff about whether they also had these practices in the deployment and management of their regional Hubs as a comparison.

AP regional Data Hub was designed to solve strategic goals by broad coalition of partners. From its beginning, the AP Data Hub was a response to a commonly agreed upon need for better information and data to address gaps in the current knowledge landscape. For example, similarly to other regions, those in AP found it difficult to get data on Key Populations as there are political and cultural barriers to this information. Different countries also had different policies and attitudes towards Key Populations, making it important to differentiate and compare results by country or by community.

As a result, the Data Hub was designed from the start to be a major activity by UNAIDS and its partners to fight the epidemic by supporting the finding and sharing of information about these subpopulations.

The **other regional Data Hub** staff expressed that the concept of the Data Hubs was thrust upon them vs arising as a tool to address strategic goals or support tangible needs in the region. There was no partnership requirement for the regional Hubs.

Senior leadership and UNAIDS co-sponsors invested in use of the AP Data Hubs. Supporting the design of the Data Hubs was investment by co-sponsors and UNAIDS regional office in the form of funding and time to build and maintain the Data Hub. UNAIDS has been able to mobilise much of the resourcing it needs from the Global Centre and from co-sponsors for staffing, content analysis, and technology support.

For the **other Data Hubs**, while there is acknowledgement that the Hubs could be useful to address specific needs, there was a lack of ownership and investment by both UNAIDS RST as well as co-sponsors in the region. It is also important to understand that the implementation of the Data Hubs

was focused on SI advisors and data analysts; however, to get buy-in from co-sponsors, the RST director would need to prioritise the Hub in the work of the region to gain equivalent success as AP.

In Asia Pacific, Data Analysts ARE the Data Hub. The AP Data Hub is not predominantly the website; instead, the AP Data Hub is seen by users as the team who identify and generate content and analysis that is then shared via the website. This distinction is important, as the website is therefore a means to a specific end, rather than the entire point of their work.

For the **other** regions, most data analysts saw the Data Hub as distracting from their main work and did not see its usefulness as a repository of information or a way to share content.

In Asia Pacific, Data Analysts are charged with creating and sourcing knowledge. The AP Data Analysts are both responsive and proactive in creating and sourcing knowledge on themes and topics of interest to a variety of users. Much of the content they produce for internal purposes ends up on the Data Hub website as a location to store and share with others, as appropriate. They also see the need to store external information (such as copies of government policies or other UN documents related to HIV in the region) on the site to make it easier for users to find again.

The Data Analysts in **other regions** were creating and sourcing knowledge for the RSTs and country teams, but many commented that they found posting it onto the regional Data Hub to be very time consuming, duplicative, and not a good use of their time. There was also some concern that they were spending too much time finding information in their regions versus posting content. Finally, the lack of sufficient staffing and leadership direction undermined the ability of many data analysts to invest in the regional Data Hub.

Partnerships and capacity building to build content. The AP Data Hub team maintains strong partnerships with valid data sources, such as governments, NGOs, academics, UN partners, and other donor agencies so that they are notified about new documents or data that they can use and share. In addition, the Data Hub is part of the local capacity building activities of the RST UNAIDS office. The AP Data Hub website offers a way for governments to store and/or access data for their own purposes, as well as provides resources for programme teams to apply to in-country programming. For example, the Asia Pacific Data Hub hosts a [Satellite Page of Malaysia](), hosting indicator data, key messages, and snapshot of country responses.

While many of the **other regions** did report strong existing and potential partnerships with valid data sources, the UNAIDS teams faced questions about what could be publicly posted, and issues of quality review and approval. There was a request for a private online collaboration space for UNAIDS and its partners as a first step to address these concerns, which is not currently available via the regional Data Hub CMS. These complications increased the barriers to engaging with content creators to republish their content on the Data Hub.

Data Analysts are not capacity builders or partnership developers. In AP, the Data Analysts, while they support capacity building and partnerships, are not responsible for the design or management of this work. The SI Advisor, RST Director, and thematic leads are the ones who create these partnerships and capacity building programmes, and the Data Analysts provide tactical support.

In the **other Hubs**, many Data Hub teams were understaffed and under-supported by leadership, meaning that capacity building and partnership development for content creation or usage was not being addressed by any of the regional Data Hub staff outside of AP.

AP Data Hub web application was designed because of identified AP needs. The first Data Hub was designed by the community of partners (including UNAIDS) as an output of the defined regional needs. A few different iterations of the web technology were implemented over the years, allowing the platform to respond to evolving understanding of those needs.

For the **other Hubs**, the Global Centre team hired a firm to design and deploy a content management system that followed the basic layout of the AP site, allowing content configuration and management to be managed by the local data analyst. However, several data analysts mentioned they would have preferred to have been consulted in the design and functionality of the Hubs. For example, many of

the documents they are asked to upload are already housed on UNAIDS websites. The workflow to upload a document or update the data files is cumbersome and time consuming. Some regions also wanted additional functionality, such as private online collaboration spaces to support capacity building and group analysis efforts.

Finding 6: AP success came from determining the needs first, then proposing solutions.

How do these lessons apply to other regions?

Regional Data Hubs imposed vs owned. Many of the interviewees from the regional Data Hubs mentioned that they felt the Data Hubs were imposed on them without a regard for the local needs. This resulted in a lack of ownership and investment by senior leaders since it was not clearly tied to regional team priorities.

Lack of buy in undermined Hubs. The lack of prioritisation by leadership and lack of buy-in from co-sponsors led to a lack of resources - funding and staffing - which resulted in an inability for each region to customise the software or hire sufficient staff.

Emphasis on web technology vs data analysis. In addition, as the Global Centre team defined the Data Hubs as a technology solution, the amount of time and processes for Data Analysts to generate and source content for the site was not well understood nor resourced for. The Data Analysts, by and large, lacked the guidance or support to integrate the Data Hubs into their day-to-day work or to connect support to the Data Hub to larger strategic goals.

Web technology doesn't meet regional needs. Several Data Analysts commented that uploading documents was very cumbersome and felt like a waste of time as those documents were already on other UNAIDS sites. In addition, collaboration functionality - a major need identified by several regions - is not currently available.

Finding 7: Imposing a technology solution without understanding users' needs and a lack of resourcing to implement will fail.

Efficiency: The Right Way

Overview of findings on efficiency

Insufficient staffing. Appropriate staffing was a major issue, with many regions noting that the SI advisor was meant to provide that strategic leadership for how to use the regional Data Hub to meet regional goals; however, when the SI advisor role was unfilled, or the SI Advisor was also filling other roles, the Data Analysts lacked this guidance and deprioritized the Data Hub compared to other priorities. Even in those regions where there was a clear strategic role for the Data Hub, the lack of sufficient staffing was a major barrier to building and maintaining the sites.

Conflation of people, content, and technology. When investigating the success of AP, users highlighted the quality support from the Data Hub staff and the content they provide. The Data Hub staff were seen as a cross between librarians and research analysts; the value of their role is seen as supporting the knowledge needs of different audiences including finding documents and providing unique analysis of existing data. The web technology was not prioritised by these users; many AP users defined the Data Hub as the staff rather than the website. While they all used the AP website, any usability issues with it were overcome by the usefulness and completeness of the content and the supportiveness of the staff if they could not find the information they were looking for.

When the regional Data Hubs were rolled out to the rest of the Regions, the web technology was prioritised and not the need for these staff to play the librarian/research analyst roles. While the data analysts in the regions are already providing some of these services to the regions and countries, the website was not integrated into the workflow of existing staff, making it an "add on" vs a core part of their jobs.

Insufficient leadership. A key element of AP's success was the investment and prioritisation of the AP Hub by both UNAIDS and key partners from its creation. This leadership investment focused on the strategic needs of the Data Hub and has resulted in the AP Hub to be integrated into how the AP region "does business" - i.e., into the workflow of how it delivers on the UNAIDS mandate in Asia Pacific. In addition, local governments were supportive of the AP, in some cases creating subsites off of the UNAIDS site, as well as relying on the Data Hub for their own advocacy and programming.

This leadership and buy-in was lacking in other regions. No other region had co-sponsors investing in the regional Hub to the same extent as AP. While there was a need for collaboration environments in several regions (notably MENA and LAC) with governments, UNAIDS co-sponsors, partners, and other stakeholders, the web platform technology was not easily adapted to that usage.

> *Finding 8: Implementation outside the Asia Pacific region was focused on technology and not on the non-technical aspects (leadership, staffing, etc.).*

How do the resources and capacity expected post-UNAIDS alignment match the requirements of the Data Hubs?

Based on conversations with senior leadership at UNAIDS, there are some good synergies with the new strategic direction and lessons from the Data Hubs. From the knowledge needs assessment report, there were three major sections that link to the regional Data Hubs.

Knowledge capture/creation

Capture existing knowledge products. Experience from AP has shown that the AP Data Hub was a driver for capturing existing knowledge products (including datasets, analysis, reports, policy documents, and other evidence) across both the UNAIDS country programmes as well as with partner organisations. The AP Hub provides a central curated repository of key knowledge products and constituent elements (raw data, information from different sources) that can be translated into better programming and advocacy by different users in the ecosystem.

Drive the creation of new knowledge products. In addition, the AP Data Hub staff routinely created new knowledge products from both UNAIDS and non-UNAIDS sources for the RST and other key partners, which they then posted on the Hub for further usage. This creation of knowledge products was part of how AP RST and associated programmes performed their work; other UN agency users mentioned using the AP Data Hub was part of how they designed programmes, wrote concept notes, and provided evidence for advocacy and policy design.

Build a culture of evidence usage. There is also a virtuous cycle that the AP Data Hub team has created. By requiring that evidence be provided for decision making, senior leadership will prioritise investment in the ability to provide that evidence through analysis and sourcing of information. But, as found through discussions with non-AP data analysts, barriers to finding and applying evidence for decision making undermines the ability to demand and normalise its use.

Knowledge sharing and dissemination

Easy way to share and disseminate. AP Data Hub staff were routinely sharing their own learning with others in the region on a routine basis, encouraging others to do the same. They also acted as de facto librarians/researchers on the topic of HIV in the AP region, providing a broad resource for

UNAIDS and beyond to source existing data and documents, as well as possibly influence future analysis.

Building a culture of sharing. AP also has a culture of sharing data within and outside of UNAIDS. The strategic investment of both financing and manpower by partners, co-sponsors and other regional actors means that they have a sense of co-ownership in the Hub, resulting in a requirement for sharing of data, analysis, and other knowledge products. Having these relationships with data and information sources makes both capturing their information and, more importantly, sharing it onwards, much more streamlined.

Building knowledge ecosystems in regions. As a counter example, one data analyst outside of AP said that he could not provide the sort of data analysis that AP does because his region doesn't have sufficient quality data. However, in fact, there is data in the region, but it is buried and hard to access without focused attention and relationships with partners, particularly governments and donors. Another data analyst mentioned that he could (but did not currently) use the Hub as a focal point for different partners to share their information with UNAIDS.

Technology could go farther to streamline sharing. The current linkage between the AIDSinfo site and the knowledge Hubs is a great example of how data can be repurposed and repackaged for different modes of presentation for different audiences and users. However, the UNAIDS documents housed on the site are often duplicative of those hosted on other UNAIDS websites. With a better central taxonomy and enforcement of metadata standards, regional and thematic sites could easily be auto populated with core information, ready to be added onto by theme or regional leads.

Knowledge acquisition and application

One stop shop. One of the main benefits of the AP regional Hub is that it provides a centralised curated repository of information from both UNAIDS and beyond on the HIV epidemic in the region, organised by themes, countries, populations, etc. Bolstered by the UNAIDS reputation for being non-partisan, evidence driven, and collaborative, the AP Hub offers a "one stop shop" for HIV programming staff, policy makers, advocates and others who need to link evidence to decision making.

Targeted, granular information. Much of this information is more targeted than many other information sources; UNAIDS AP regional Hub is able to provide information on subpopulations or specific subnational locations, critical information needed for UNAIDS to meet its equity goals. It also offers a range of presentations of the same information, supporting different types of influence and communication needs.

Understanding of the knowledge needs of the user ecosystem. The AP Hub provides evidence on the knowledge needs and how to serve them of both UNAIDS staff and their key counterparts at other UN Agencies, academia, governments, NGOs, advocacy groups, etc. This awareness of these needs should be validated with the other regions (based on the small sampling this evaluation was able to do) and built into the knowledge management approach.

> UNAIDS understands how decision making occurs around HIV programming – *Data Hub staff person*.

> *Finding 9: Evidence of the success and challenges from the regional Data Hubs provides good insights for new Data for Impact initiatives envisioned by UNAIDS.*

How should the Data Hub model be adapted in different regions to account for organisational priorities and resources?

Please see the recommendations section for options for the next iteration of the Data Hubs.

Sustainability

Overview on sustainability

Based on interviews and review of the Data Hubs, the evaluation team has provided the following assessment of the sustainability of the different hubs.

Sustainability metric	AP	EECA	ESA	LAC	MENA	WCA
Ownership: the Hub is seen as a regional product that is core to the mandate of the RST	Yes	Unclear	Unclear	Unclear	Yes	no
Leadership: the Hub is prioritized by RST leadership	yes	No	No	No	unclear	No
Investment: the Hub has generated investment and resource mobilization from UNAIDS staff and/or co-sponsors	Yes – co sponsorship plus investment in technology	No	Somewhat – an attempt to invest in external technology	No	No	No
Delivery: the Hub routinely meets content and data management requirements	Yes	No	No	No	N/A	No
Performance monitoring: the Hub routinely reviews its performance to improve its delivery of services	Ad hoc	No	No	No	No	No

Finding 10: Regional Data Hubs, other than AP, are not sustainable, based on the metrics of ownership, leadership, investment, delivery, and performance monitoring.

What form and role should the Data Hubs take to make them serve UNAIDS best and secure sustainable organisational investments?

Please see the recommendations section for options for the next iteration of the Data Hubs.

How can linkages with other existing data platforms be improved (e.g., Health Situation Rooms, COVID-19 portal and AIDSinfo)?

Please see the recommendations section for options for the next iteration of the Data Hubs.

Equity: Data and Users

Are gender and human rights consistently considered in data collection and the analysis, presentation, and dissemination of information products?

The regional Data Hubs do not provide direct data collection, but they are meant to provide analysis, presentation and dissemination of information products. The regional Data Hubs are designed to promote different products around subpopulations, especially marginalised and underserved groups. The design of the regional Hubs provides the RSTs the ability to focus on specific priority subpopulations for that region, and upload analysis and information products to support that programming.

Finding 11: The design of the Data Hubs supports gender and human rights; however, the content uploaded is at the discretion of the regional Hub team.

How do Data Hubs contribute to or draw on efforts to strengthen monitoring of inequalities and community-led monitoring?

Monitoring of inequalities

As stated above, the Hubs provide space for reporting on the monitoring of inequalities, through publication of data products and analysis. The AP Hub provides data on different inequalities and challenges in HIV programming in the region.

Community-led monitoring

No evidence of community-led monitoring using the regional Hubs was discovered. However, the design of the regional Data Hub supports upload of data sourced outside of UNAIDS and the AP Data Hub has engaged with community organisations.

Finding 12: the design of the Data Hubs supports monitoring of inequalities and community-led monitoring; but minimal or none is occurring.

Conclusions

Goals/Objectives of Data Hubs are in Alignment with UNAIDS Mandate

Conclusion 1: UNAIDS has a unique role to address a crucial information gap in different regions, as evidenced by the successes of AP (based on findings 4, 6, 11, 12).

Finding 4: There is a clear need and interest in addressing the HIV pandemic through data for impact where UNAIDS has a clear potential role.

The team's analysis found that there was no similar type of HIV portal which provided the detailed, targeted types of information and data that the AP Data Hub provides. In addition, there is a well acknowledged need for evidence-based decision making by those interviewed, something that UNAIDS is in a good position to coordinate and curate.

Finding 6: AP success came from determining the needs first, then proposing solutions.

Success from Asia Pacific Data Hub was based on broad consensus with regional actors on the information needs, and corresponding investments in leadership, people, and technology solutions.

Finding 11: The design of the Data Hubs supports gender and human rights; however, the content uploaded is at the discretion of the regional Hub team.

Finding 12: The design of the Data Hubs supports monitoring of inequalities and community-led monitoring; but minimal or none is occurring.

The design of the existing Data Hubs provides support for gender, human rights, monitoring inequalities, and community led monitoring, and allows UNAIDS to provide different types of information products and targeted analysis on those topics.

Conclusion 2: The Data Hub experience provides valuable insights into how UNAIDS can deliver on its mandate through data for impact (based on findings 1, 9).

Finding 1: Intended users and their needs are generally well understood.

As the table lays out, the regional Hub activity helped identify the key stakeholders in the HIV ecosystem who need information and data for decision making. The AP Hub in particular shows good evidence on how to influence these users through provision of information and knowledge.

User group	Advocacy for policy/programming approaches	Performance analysis and impact	Design and implementation approaches	Up to date data and status info
UNAIDS RST	X	X	X	X
UNAIDS Country office	X	X	X	X
UN regional/country offices	X	X	X	X
National governments	X	X		X
NGOs/CBOs	X	X	X	X
Academia		X		X
Donors	X	X	X	X

Another element of this finding is that while there is a lot of overlap between the needs of these different user groups, the presentation, focus, and/or language of the knowledge product may differ by these different groups, necessitating the need for more customization of knowledge products to different user types.

Finding 9: Evidence of the success and challenges from the regional Data Hubs provides good insights for the data for impact initiatives envisioned by UNAIDS.

The AP regional Hub offers successes around knowledge capture and creation, sharing and dissemination, and knowledge acquisition and application, including the value of having local data curation and analysis within the region and subnational, granular data for direct programme application. The challenges faced by the other regions also show the dangers in not connecting the knowledge products to the work of the office as well as ensuring that the technology is used to streamline and reduce workload for UNAIDS staff.

Known Reasons for the Lack of Success

Conclusion 3: Other than AP, the regional Data Hubs have not met their objectives (based on findings 2, 10).

Finding 5: Other than AP, the regional Data Hubs have not achieved their objectives.

Intended Outcome	Result
Outcome 1: Increase the number of custom and targeted SI data products in alignment with key decisions, regional priorities, themes, and audience needs.	Other than AP, none of the regional Data Hubs routinely created and/or published SI data products to the Data Hub.
Outcome 2: Concretely demonstrate and promote the use of data and information products for specific decisions.	Other than AP, the Data Hubs are not routinely used by UNAIDS staff or other partners to inform decisions.
Outcome 3: Improve access for locally generated data, information products, policy documents that impact HIV programming.	Other than AP, the Data Hubs do not contain nor support the usage of this type of content.
Outcome 4: Overcome language, literacy, and other barriers to needed information by different HIV stakeholders.	One success point of the Data Hubs has been hosting of non-English documents (such as Russian, Spanish, or French) on the sites.
Outcome 5: Provide technical support to co-sponsors, country teams and regional community networks to create, analyse, and use data in their work (*AP only*)	AP was able to provide evidence, including hosting government data, of providing technical support to local stakeholders and improve the use of data for decision making

Finding 2: Outside of AP, there is minimal usage of the regional Hubs by UNAIDS or those outside of UNAIDS. Therefore, user information needs are not being met.

There is no evidence of any substantial usage of the non-AP regional Data Hubs by UNAIDS and non-UNAIDS users, as evidenced in findings 2.

Finding 10: Regional Data Hubs, other than AP, are not sustainable, based on the metrics of ownership, leadership, investment, delivery, and performance monitoring.

The regional Hubs are not sustainable outside of AP.

Conclusion 4: The success of the AP regional Data Hub was based on elements beyond the technology investment (based on findings 3, 7, 8).

Finding 3: There is automated data as well as labour intensive manual uploads of data and documents. Content creation and sourcing is also labour intensive and a major barrier.

While the software provides automated connections to AIDSinfo data sets, the software requires manual uploads of documents. Content creation and sourcing was cited as a major barrier by interviewees as well. The understaffing of regional Hub teams, along with the lack of prioritisation from leadership exacerbated this challenge.

Finding 7: Imposing a technology solution without understanding the needs or having the resourcing to implement will fail.

When the regional Data Hubs were rolled out to the different regions, major decisions around content requirements, user interface, and functionality had already been decided, based on what AP had designed. However, AP's design was based on an evolved understanding of the needs of the Data Hub staff; the other regional Hub teams did not get that opportunity to be involved in the design of their own Hubs.

Finding 8: Implementation was focused on technology and not on the non-technical aspects (leadership, staffing, etc.).

When the regional Data Hubs were rolled out to the regions, training focused on how to create themes, upload documents, and other similar types of content management. However, less emphasis was placed on how the Hubs linked to the larger needs of the RST, who the users were of the regional Hubs, and how to integrate the Hub into the workflow of the regional office. As a result, they were seen as unfunded mandates, leading to low supplemental staffing and low prioritisation by existing staff. Existing staffing gaps within many RSTs exacerbated this issue. Misunderstanding of what capacity would be needed was also a factor; in addition to SI and research skills, the data analysts also needed skills in user interface or human centred design to identify and create products for specific audiences via the Data Hub.

Recommendations: Future of UNAIDS Data Hubs

Immediate

Recommendation 1: Decommission the regional Data Hub Websites

As the regional Data Hubs, other than that of Asia Pacific, are not performing as intended, it is recommended that UNAIDS decommission the existing, non-AP, regional Data Hubs.

Medium Term

Recommendation 2. Improve Data Usage Skills Within Data for Impact and UNAIDS as a whole.

A major reason that the regional Data Hubs were unsuccessful was due to a misunderstanding of what made the AP regional Data Hub successful; the key to its success has not been the software but rather the following:

- The strategic buy-in (and accompanying investment) by the UNAIDS RST, regional co-sponsors and partners, and academic institutions.

- Focus – and sufficient staff time – on addressing the information needs of different audiences.

UNAIDS is in a unique position in understanding the complex ecosystem in which HIV programming exists around the world. UNAIDS knows more about different actors, their roles, their needs, and their challenges to fight HIV than any other group; they can (and have been) parlay this knowledge into targeted knowledge products and approaches to influence these audiences. By starting with a thorough understanding of these audiences, UNAIDS can create a human centred design, behaviour change approach to the development of Data for Impact products.

Rec 2.1 Build internal capacity within the Data for Impact team on behaviour change analysis mixed with human centred design skills.

Behaviour change analysis starts with understanding whose behaviour needs to be changed in what way to affect change. UNAIDS uses these approaches in designing and analysing programming for different populations; understanding how these populations make decisions and how they can be influenced is a core component.

This same analysis approach can be applied to Data for Impact. As outlined in this evaluation, UNAIDS is very aware of how different stakeholders make decisions and how to influence them using analysis, data, and other types of information. By making this knowledge more explicit and tied to specific decisions and metrics, the Data for Impact team will have a framework for the design and measuring of impact.

Common audiences for behaviour change through UNAIDS strategic information.

- Internal UNAIDS staff (global centre, regional, country)
- UN partner organisations at all levels
- Bi-lateral donors and INGOs
- Governments (national, ministry, district, facility)
- Academic institutions
- Community based organisations and advocacy groups
- Media

Types of behaviour change through UNAIDS strategic information.

- Advocacy for policy/programming approaches.
- Improved performance analysis and impact.
- Evidence supported design and implementation approaches.
- Up to date data and status information for accountability and transparency.

Rec. 2.2 Build frameworks within UNAIDS on Human Centred Design.

Human-centred design is an approach to interactive systems development that aims to make systems usable and useful by focusing on the users, their needs and requirements, and by applying human factors/ergonomics, and usability knowledge and techniques. This approach enhances effectiveness and efficiency, improves human well-being, user satisfaction, accessibility, and sustainability; and counteracts possible adverse effects of use on human health, safety and performance. — ISO 9241-210:2019(E)

Behaviour change analysis usually leads to **Human Centred Design**, i.e., an approach that centres the needs, context, barriers, etc. of the specific humans who are to be influenced. Again, UNAIDS uses these approaches in much of its programming work. Applying these skills specific to Data for Impact products, such as thematic hubs, new databases, or specific pieces of analysis will help ensure that the different products resonate with these specific audiences. Human centred design also includes a lot of testing with prospective users in order to iterate and customise based on specific and challenging contexts.

Rec. 2.3 Build capacity within UNAID countries and regions on Human Centred Design.

Human centred design works best the more specific it can be. The UNAIDS regions and country offices already understand how these different audiences currently make decisions, what type of strategic information products are impactful, how to present the information in ways that positively influence the decisions, etc.

For example, one user of the AP Hub mentioned that it is very hard to get many governments to support changing policies towards key populations. In addition, with different parts of government, different arguments and approaches are needed. Some are swayed by "value for money" analysis – i.e., that discrimination causes programmes to be less successful and waste money. Others are more open to hearing about the linkage between policies and health outcomes. And some are more influenced by political factors such as neighbouring countries' policies. The interviewee mentioned that they appreciated how the AP Hub offered multiple different analytical products for the same policy position, allowing the staff to present different approaches based on the same base facts and data.

The more regional and country level data analysts and other strategic information advisors are able to create information products to meet these specific needs, the more impactful they can be.

Recommendation 3: Build in Theories of Change and Metrics into Data for Impact Hubs

The evaluation team found that there were many valuable aspects of the UNAIDS regional Data Hubs programme, particularly the experience of Asia Pacific Data Hub. As identified in the conclusions, the high-level goals of the regional Data Hubs have been in alignment with UNAIDS mandate and of recognized need to fight the pandemic through the **use of targeted granular data and analysis products for programmatic design, accountability, and advocacy**.

As outlined by this evaluation, UNAIDS as a whole and specific regions struggle with how to execute on this overall goal, which has led to an overreliance on technology solutions and underestimating the human elements required in improving the creation, usage, and uptake of granular data.

Rec 3.1 Data for impact activities must include a resourced local capacity building and collaboration component for all aspects of data management (from collection to application/usage).

A major barrier faced by many regional Data Hubs was a lack of staff working in environments where government or community counterparts didn't have a lot of capacity around data management or strategic information. AP Hub included explicit capacity building and collaboration activities in their work in order to help build demand and expertise in using data for key decisions.

It needs to be noted that capacity building and collaboration are highly time intensive and require special skills (as well as leadership support) not often held by data analysts. The capacity building elements need to be explicitly designed and budgeted to reflect this reality.

Rec 3.2 Data for impact products must be able to be more granularly focused with customised theories of change.

The Data for Impact team – and regional teams - already build and support different strategic information products, from AIDSinfo, KP database, policy database, etc and have discussed building thematic versus regional Hubs or similar products. The information and products that UNAIDS has are considered highly valuable and have not been replicated by other organisations.

However, as the example of the regional Data Hubs shows, not all of these products have an explicit theory of change or specific metrics. This lack can lead to the issues faced by the regional Data Hubs, where the design missed many crucial elements that undermined its ability for success.

Proposed theory of change

Assuming that UNAIDS decides to reinvest in regional or thematic Data Hubs managed by Data for Impact), the team has designed a proposed theory of change for such activities (called DfI Hubs) based on the findings of this evaluation. This theory of change explicitly includes the missing elements identified in the evaluation, especially the capacity building components that are so highly valuable in the AP Hub experience. *The following theory of change should be adapted and customised for each activity and/or focus area, with specific priorities and objectives, allowing it to address more granular needs and contexts.*

UNAIDS Goal: Precision public health. As part of UNAIDS's overarching mission, the DfI Data Hubs will improve equity and positive outcomes for those impacted by HIV *by supporting the generation, analysis, and use of granular data and information products* to identify and address the characteristics that lead to inequalities in HIV programming.

Programme goal: The DiF Data Hub's programmatic goal is to improve *the local generation, analysis, and* use of data for decision-making *by providing and building local capacity* to customise strategic information to specific regions, themes, and/or audiences.

Outcomes

The following are the revised intended outcomes for the UNAIDS DfI Data Hub programme:

Outcome 1: Different key audiences are provided with targeted evidenced-based information on characteristics that lead to inequalities in HIV programming and outcomes.

Outcome 2: Technical support is provided to co-sponsors and partners, local governments, country teams, and regional community networks to create/source, analyse, and use evidenced-based information in their work.

Outcome 3: Information products are measurably used by different audiences for more impactful and equitable advocacy, programming, accountability, and resource mobilisation.

Outcome 4: Different audiences have improved access to locally generated data, information products, and policy documents that impact equitable HIV programming and outcomes.

Outcome 5: Different HIV stakeholders are able to overcome language, literacy, and other barriers to needed information.

Outputs

The following are proposed outputs for the new theory of change.

Regionally and/or thematically specific knowledge products created by UNAIDS global centre, regional and country offices

UNAIDS routinely creates different data for impact products, based on the understanding of key audiences, how they use information, and apply data for decision-making.

Technical support to partners, co-sponsors and community networks to create, analyse, & use data for their own decision making

Building on existing work in countries and regions, UNAIDS supports the local creation, analysis and usage of data and information for decision-making by providing technical support to partners, co-sponsors, local governments, and community networks.

Curated repository of internally & externally sourced relevant content accessible to different audiences

UNAIDS curates a repository of internally and externally sourced content using standard meta data and stores on publicly accessible repositories.

Self-service interactive knowledge tools, accessible via a web platform, customized to regions, themes, and target communities accessible by different audiences

UNAIDS invests in self-service interactive knowledge tools that allow different types of audiences to identify and engage with data and content in ways that work for them. These tools may include customised search, language support, data analytics and visualisation tools, and audio/video content.

Rec 3.3 Establish standard performance metrics for engagement with information products.

One of the findings from the evaluation was that Google Analytics and other data sources were not routinely used to monitor performance and the capacity of data analysts to understand how to apply the feedback they got was limited. The Data for Impact team could establish standard performance metrics for engagement and provide guidance on how to use different data sources to measure uptake and usage of data and information products.

Longer Term

Recommendation 4. Make Strategic Investments in UNAIDS Information Management Systems

Rec 4.1 Review existing UNAIDS information management systems for targeted improvements for reuse.

UNAIDS currently generates and manages critical data on the HIV pandemic, made publicly available via AIDSinfo website, as well as other investments such as the Key Population Atlas, HIV Finance Dashboard, UNAIDS publication database, and the other information products generated by UNAIDS.

This data (qualitative and quantitative) can be reused in different ways to allow for differentiated data presentation, as evidenced by the regional Data Hubs. The technology management of the AIDSinfo database, for example, may need to be updated to manage the growing demand for the data, reflecting its importance.

However, as also evidenced by the regional Data Hubs publications and document experience, the current process is highly labour intensive.

However, technology alone won't be sufficient. Investing in better metadata, master data management systems, and ways for content and analysis to be repurposed while streamlining the work of data analysts and other staff will allow improved access and more customization of data for different types of decisions.

Rec 4.2 Invest in a data mesh technology.

There are several emerging technologies that allow organisations like UNAIDS to address its currently siloed data systems without an overwhelming amount of manual labour. One investment is in data mesh technology, which allows for more of a "self-serve" design to access data. This technology makes it easier to combine data from different servers and sources in more automated ways.

Rec 4.3 Invest in a central data cataloguing system.

Once the data is more easily available across different locations, UNAIDS can create a **central metadata catalogue,** which makes it easier to discover, inventory, tag, and create semantic relationships across these different data sources within the data mesh. The recent explosion in Artificial intelligence tools now can also remove much of the manual labour of tagging and inventorying data, again, making the process much more affordable and feasible. This work can be done alongside and/or fit into any existing master data management work by UNAIDS or WHO.

Rec 4.4 Invest in technology that allows different presentations to different audiences.

With organised data available by API in a data mesh, UNAIDS then has increased ability to create an unlimited number of websites and data portals organised by themes, regions, or other topics, pulling across all the different data sources for unique presentation of the data for different audiences.

Figure 8: Recommended Technical Diagram for UNAIDS Data for Impact (simplified)
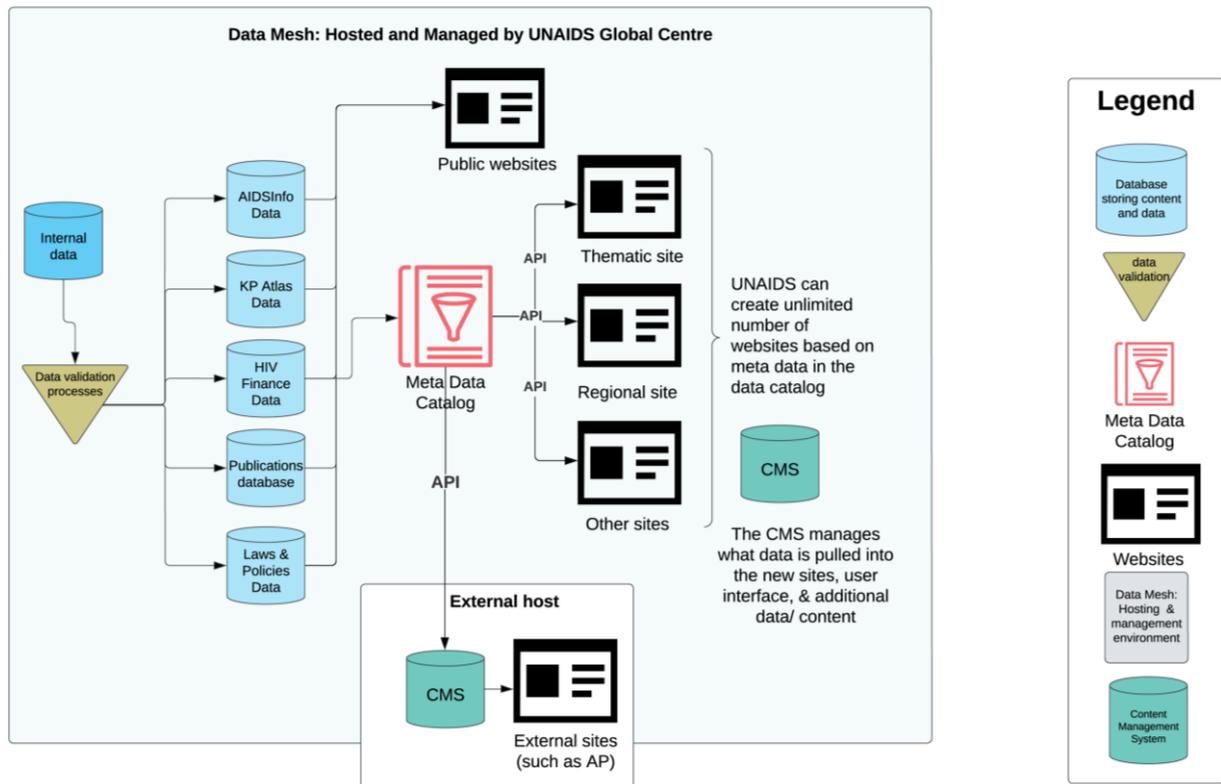
Rec 4.5 Partner these technology investments with specific implementation plans.

As evidenced from the regional Data Hubs activity, the technology can only play a supportive role. Without the stakeholder investment, focus on potential users, and capacity to design information products for different audiences, the technology investments are unlikely to result in the impact intended.

Annex A: Google Analytics

The evaluation team performed detailed Google Analytics across all regional Hubs, compared to AIDSinfo. The following tables compare Audience, Geography. Devices used, and Source of user from January 1, 2022, to August 30, 2022.

Item	What measuring?	AIDSinfo	AP6	EECA	ESA	LAC	WCA
Audience							
Total users	number of users to the site	118,233	5761	113	115	60	19
Sessions	how many sessions on the site	160,059	7,524	144	146	105	26
sessions per user	sessions per user	1.35	1.31	1.27	1.27	1.75	1.37
page views	pageviews	873,256	11,667	176	216	230	32
pages per session	number of pages viewed per session	5	1,55	1.22	1.48	2.19	1.23
av session duration	average session in min:seconds	2:22	2:23	1:48	2:30	5:36	0:47
Bounce Rate	A *bounce* is a single-page session on your site	62.50%	9.93%	7.50%	3.42%	58.10%	80.77%
Audience Analysis: AIDSinfo and AP receive significantly more users and more page views than the other Data Hubs. The other data (average session duration, bounce rates) are likely to be non-representative of user patterns due to the low number of users.							
Geography							
User composition by locations	Top location	Americas 31.76%	Asia - 66%	Europe 64.35%	Americas 32.76%	Asian 41.27%	Africa - 52.63%
	Second	Asia 22.66%	Americas 11.63%	Asia 20%	Africa 31.9%	Europe 28.57%	Asia - 21.05%
	third	Europe 21.88%	Europe 10.22%	Americas 8.7%	Europe 18.97%	Americas 22.22%	Americas - 15.79%
	fourth	Africa 21.01%	Africa 6.26	Africa 3.48%	Asia 15.52%	Africa 6.35%	Europe - 10.53%
	Fifths	Oceania 2.61%	Oceania 5.61%	Oceania 2.61%	Oceania 0.56%	Oceania 1.59%	none
Geography Analysis: AIDSinfo and AP both show regional distributions in alignment with their intended user base. The other four show some discrepancies but with the sample sizes, they may be non-representative of usage.							
Technology							
Popular browsers	First		Chrome 72.27%	Chrome 69.03%	Chrome 57.39%	Chrome 65%	Chrome 68.42%
	Second		Safari 9.44%	Safari 12.39	Edge 31.30%	Firefox 15%	Edge 21.05%

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[6] Only the Data Hub component of the AP site - estimated to be about 4% of total usage (or total usage is estimated at 24x data usage). However, as the team did not have access to the AP data analytics, and the number of usages was still very stark, the team is only displaying the subsection data.

Item	What measuring?	AIDSinfo	AP6	EECA	ESA	LAC	WCA
	third		Edge 8.56%	Edge 7.96%	Safari 5.52%	Edge 11.67%	Android WebView 5.26%
	fourth		Firefox 2.95%	Firefox 2.65%	Firefox 4.35%	Safari 3.33%	Safari 5.26%
Technology Analysis: Chrome is the most popular browser across all sites							
Devices Used							
desk	Users accessing the website from desktop/laptop	67.09%	61.73%	83.19%	93.04%	91.67%	84.21%
mobile	Users accessing the website from mobile devices	32.06%	36.92%	15.93%	6.96%	8.33%	15.79%
tablet	Users accessing the website from a tablet	0.86	1.35%	0.88	0	0	0
Device Used Analysis: There is a significant usage of AIDSinfo and AP by mobile users, making investment in accessible user interface worthwhile.							
Acquisition							
Direct	Bookmarked or typed directly into a browser	117895	5011	89	107	50	16
Organic	Use of Search engine to find the site	149	266	29	8	6	2
Referral	Links from other sites	287	724	3	1	6	2
Acquisition Analysis: A highly significant number of visits to AIDSinfo and AP are direct, meaning that users are bookmarking the site to visit it. However, the Google Analytics may be undercounting referrals.							
Language							
language usage	First	English	English Majority	English majority	English	English	Us English
	Second	Chinese	Chinese	Chinese proper	French	Spanish	Russian
	Third	French	French	French		French	
	fourth	Spanish		Spanish		Mexican	
Language Analysis: English is the majority language across all sites with Chinese second, which aligns with the population of speakers. However, it is surprising that EECA does not have any Russian speakers in the top 4 visitors, but WCA does. As mentioned before, the data may be unreliable due to the small sample size.							

Other notes on Google Analytics

The sites are not optimised for Google Analytics to track the most popular pages, as the page names and redirects are not logged with sufficient information to track usage of the site. In addition, no custom reports were created or stored in the Google Analytics platform, meaning that the analytics are not being proactively used for performance monitoring or analysis.

Annex B: Key Informant List

Name	Organisation	Data Hub	Title
Sanele Sophie Masuku	UNAIDS	ESA Data Hub	Technical Officer, Programme monitoring
Gatien Ekanmian	UNAIDS	ESA Data Hub	Strategic Information Adviser
Abdrahamane Diawara	UNAIDS	ESA Data Hub	Data analyst
Khin Cho Win Htin	UNAIDS	AP Data Hub	Country level - UCD Cambodia (used to work on the Data Hub in the RST, plus the country perspective)
Ye Yu Shwe	UNAIDS	AP Data Hub	Data analyst
Desire Tarwireyi Rwodzi	UNAIDS	AP Data Hub	Data analyst
Luis Renato Tapia Vazquez	UNAIDS	LAC Data Hub	Data analyst and Strategic Information adviser
Rangaiyan Gurumurthy	UNAIDS	MENA Data Hub	
Kow Nenyi Essel	UNAIDS	WCA Data Hub	Technical Officer, Data Analysis and Synthesis
Lev Zohrabyan	UNAIDS	EECA Data Hub	Strategic Information Adviser
Eltayeb Elamin	UNAIDS	MENA Data Hub	Regional Programme Adviser
Eamonn Murphy	UNAIDS	Global Centre	Deputy Executive Director, a.i.
Wenyuan Yin	National Center for AIDS/STD Control and Prevention in China	The Division of Comprehensive HIV Prevention, Treatment and Policy	Deputy Director
Salwa AlEryani	UNICEF	East Asia and Pacific Regional Office	Health Specialist
Kathryn Johnson	United Nations Development Programme (UNDP)	Bangkok Regional Hub,	Policy Specialist
Mary Mahy	UNAIDS	Data for Impact	Director a.i.
Kim Henderson	UNAIDS	Knowledge Generation, and Management	Lead
Matthew Kavanagh	UNAIDS	Global Centre	Deputy Executive Director a.i.

Annex C. Document Review List

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Annex D: Regional Hub Comparison

The team performed detailed reviews of each of the regional Data Hubs so that each Data Hub could be compared with the others. The source of the data came from

1. Site /content reviews using a standard checklist.
2. Review of UNAIDS provided documents (where available)
3. Interviews with key stakeholders using semi structured questionnaires.
4. Survey of data analysts.
5. Google Analytics.

Asia Pacific Data Hub

Regional Context

The Asia Pacific region has recognized the impact of inequality on the ability of governments and other stakeholders to fight HIV. In 2021, ASEAN states pledged to improve financing, address inequalities and strengthen community lead responses. Governments in the region traditionally have had a range of responses to programmes addressing traditionally marginalised populations; some are on the forefront of addressing stigma and discrimination while others are reluctant. Coordination and collaboration across governments and key partners are major approaches to addressing HIV in AP.

Regional Data Hub Perspective

History of the Data Hub

The Asia Pacific Data Hub formally started in 2007 and was initially hosted by UNICEF. At the end of 2011 a management review was done to determine where the Data Hub should belong, and it was decided that it should belong with UNAIDS. In 2012 the Data Hub was moved to the UNAIDS regional office in Asia Pacific. The Data Hub initially experienced sustainability issues as people did not yet see the value of the Data Hub.

Since then, the culture of data use has changed as people started to realise the value and influence quality data can have on HIV programmes.

This regional Data Hub initially digitised (scanned) hundreds of copies of public information related to HIV and transcribed it into the Excel versions needed to get the data into the Data Hub. This information provided the regional Data Hub with a solid data foundation to build on.

Specific regional goals, outcomes and priorities linked to the themes, stakeholders, content/data

The team has specific regional goals, outcomes and priorities linked to the Data Hubs, summarised as direct support to UNAIDS staff and counterparts, and general support to regional actors. The main priority for this initiative is to contribute to and build the capacity of national partners, governments and other agencies to utilise quality and accurate HIV information.

Current / Recent Data Hub

Governance and Operations.

The Regional Strategic Information Advisor is responsible for providing oversight and direction for this regional Data Hub in close collaboration with a highly skilled and dedicated team. A key factor for the AP Data Hub is that the definition of the Data Hub is NOT just the website (and its content/data) but rather the staff who are able to generate analysis on an ongoing basis. The website is seen as a dissemination tool to supplement and support the work of the AP Data Hub analytics work.

The team provides both direct and general support for the information needs of the region.

Direct support means the staff can reach out to Data Hub staff to source or create data analytics products for specific needs, often based on data or content already published on the AP Data Hub, as well as information sourced outside of UNAIDS. As stated by former regional senior management, the analytics staff supporting the Data Hub is seen as a key component in the region's ability to plan, programme, and perform advocacy. For example, in preparation for meetings with key country or regional staff will request bespoke and/or up to date analysis products to support the goals of the team. Copies or variants of these products are often then posted on the Data Hub site.

Data Hub staff provide support to other UN agency staff and other key partners to source documents or provide guidance on data analytics from a UNAIDS perspective. UN staff interviewed mentioned that the Data Hub staff can find rare policy information or local language versions of documents, as well as guide them on where to find niche data or understand the validity of UNAIDS data sets.

Direct support also includes hosting the satellite page for Malaysia, helping that country partner provide up to date information in a sustainable way. The Data Hub staff worked with the Malaysian country partner to design and host the satellite page, but the content and data belongs to the country.

General support is provided by the website. The main goal of the regional Data Hub website is to serve as a one-stop shop for HIV related information for all countries in the Asia Pacific region and to make the information accessible to anyone.

The Data Hub routinely collects and makes sense of complex HIV-related data for practical use. After verifying the data to ensure it is accurate and trustworthy, the team analyses and then packages it into strategic information that government ministries, funders, civil society organisations, development partners and UN agencies use for advocacy, designing HIV programmes, formulating policies, raising funds and tracking progress. The Data Hub staff keep the site updated with this new analysis and documents, created by UNAIDS as well as key partners (such as other UN agencies) that meet UNAIDS AP publication guidelines.

Estimated resources expended versus needed

Interviewees mentioned that, due to the prioritisation by senior management, the AP regional Hub has sufficient financial and human resources to successfully manage and maintain the programme. However, interviewees mentioned they do require additional data specialist resources for the capturing of HIV data into AIDSinfo and uploading data into the AP content database, as well as to produce more information products. They also require additional resources to revamp website to improve user interface and accessibility to HIV data and analyses available in the Data Hub web platform.\

Current & desired technology investments

The AP site has two components – the content site and the data dashboard. The content site is at www.aidsdatahub.com and the data dashboard of the Data Hub: https://aphub.unaids.org

The content site is managed through a content management system that is sourced and managed by AP through a vendor they selected and pay for. This content site is based on the original investments by UNAIDS and other partners since the beginning of the activity and has gone through rounds of improvements and added functionality.

The data site is provided by UNAIDS Global Centre, similarly to the other regional Data Hubs. The user interface is consistent between the two components, with the same global navigation and footer information. Users are able to move back and forth between the components without realising they are on different sites.

As mentioned above, the team wishes to improve the user interface and create more "self-service" tools to engage with the data in different ways. Connecting document uploads to the existing UNAIDS sites such as the policy site should also be investigated, as this could save the team time and

add relevant documents to the site. Looking at how to more concretely connect the data dashboards to the content site was also suggested. Finally, if there is to be a revamp of the entire UNAIDS Data Hubs, bringing in the lessons from how the AP Hub was designed, iterated through, and currently managed will be essential to ensure the systems are usable and useful.

Content summary

The content site has a tremendous amount of information, such as country profiles on 27 countries, information on seven different population groups and ten thematic areas (see list below), and a resource library of hundreds of fact sheets, guidelines, laws and policies, tools, publications, presentations, and videos. AP Data Hub has another standalone database that contains HIV surveys, surveillance and programme data that is unconnected to the data dashboards.

The AP site also has a satellite page for Malaysia, which allows the Hub to create custom pages for a single country in partnership with the country. Finally, the AP site offers an app in both Android and iOS; however, when the team tried to download the Android app, there was an error, and they were unable to access it.

The data dashboard consists of interactive maps, graphs, comparisons, and fact sheets for a number of HIV related indicators, with the same structure as the other Data Hubs.

The following are the content areas by population, thematic areas, and data dashboards available on AP.

Content populations & thematic areas	Data dashboard (each topic has multiple dashboards for different indicators)
Population: Key Populations	Key populations (Sex workers, Men who have sex with men, People who inject drugs, prisoners, transgender people)
Population: Women and men at risk	
Population: People living with HIV	People living with HIV
Population: Key affected women and girls	Gender
Population: Young people	
Population: Women and men	
Population: Children	
Thematic: Gender based violence and HIV	
Thematic: Sex work and HIV	
Thematic: TB and HIV	TB and HIV
Thematic: Treatment	
Thematic: Regional reviews	
Thematic: Data availability	
Thematic: Stigma and discrimination	Stigma and discrimination
Thematic: Economics of HIV	
Thematic: Elimination of parent to child transmission	Elimination of vertical transmission
Thematic: PrEP and HIV Innovations	
	Progress towards the 95-95-95 targets (i.e. epidemic metrics)
	New HIV infections
	AIDS related deaths
	HIV expenditure
	Cervical cancer and HIV

Usage Analysis
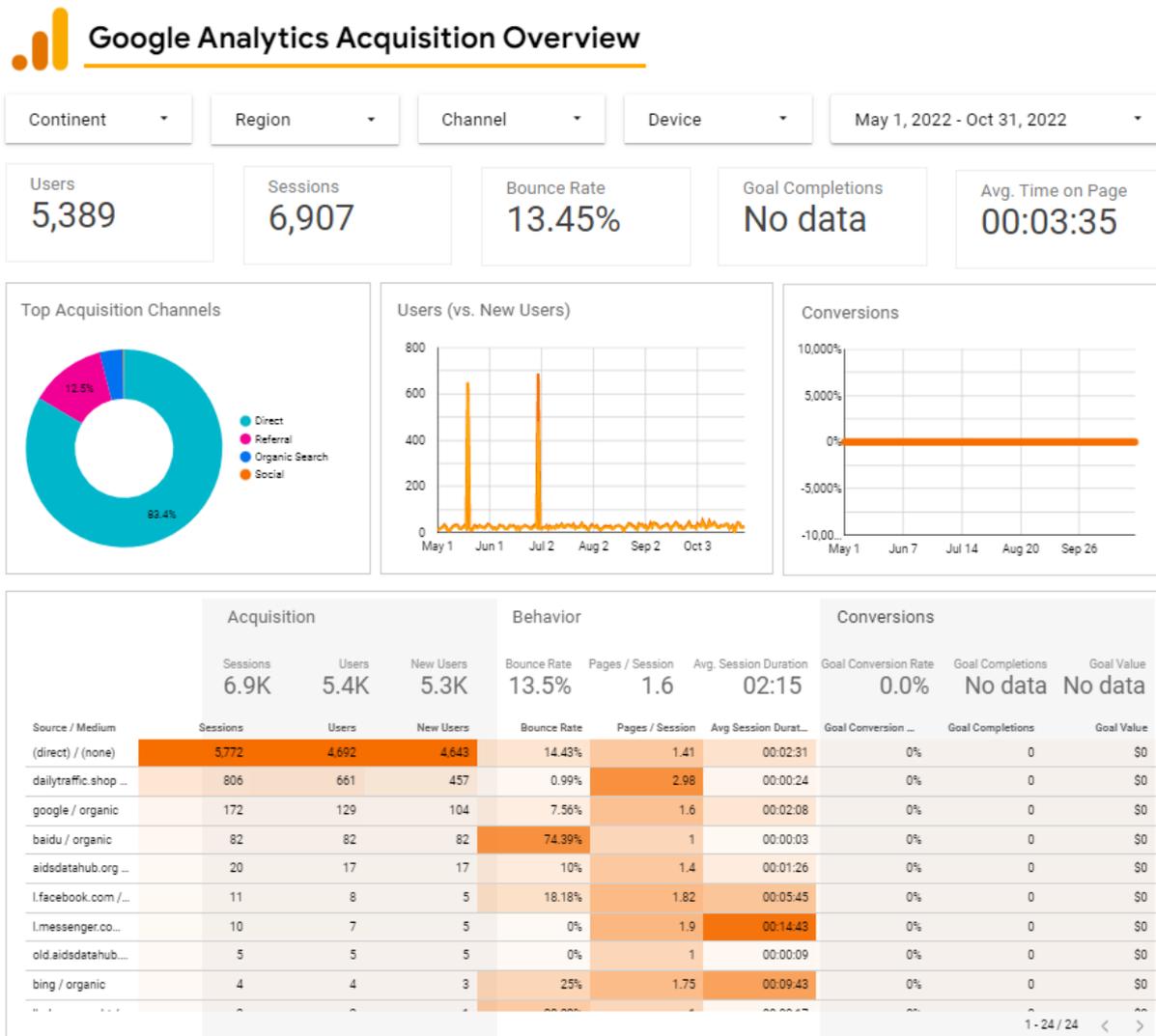
According to Google Analytics, the regional Data Hub had the highest usage of all Hubs during the period of this analysis (May - October 2022). Please note that this data is only for the data portion of the Hub; the other sections of the AP Data Hub have different google analytics statistics.

Region	Sessions	Users	New users
AP	6,500	5,400	5,300

This regional Hub regularly receives and reviews the Google Analytics data for the content site for number of users, site visits, page clicks and information product usage. The team receives usage feedback from meetings and conferences they attend as well as receive feedback directly from partners about the usage of information products. However, it is not clear whether they use the data dashboard Google Analytics data (this is provided on a period basis by Global Centre staff. They do not have specific indicators or a metrics framework to assess their performance.

Data Hub SWOT Analysis

Strengths

The AP Hub is a proven use case for how support for data and content through staffing of experts, plus management of a curated repository of information available online can support the fight

against HIV. The AP staff know the needs of the region very well and where capacity exists, where it lacks, what these actors use the data for, and ways to potentially improve that uptake of data. Specific strengths include:

- Strong partnerships with most data providers in the region.
- Broadly respected by key HIV actors in the region for trusted data and information.
- Comprehensive sets of HIV related data and strategic information stretching as far back as 2007.
- A dedicated, well skilled technical team able to directly support the analytics needs of users.
- A dedicated senior leadership supporting the continuous improvement to the Data Hub.
- Needs of their users are well understood.
- Well defined goals/objectives for the Data Hub.
- Well defined processes for the collection and verification of data, as well as the production of quality, user centric information products.

Weaknesses

There were only a few weaknesses identified by the team

- There is no formal monitoring and evaluation framework or processes in place to monitor the effectiveness of the Data Hub.
- Due to time constraints, some latest survey data are not yet reflected in the AP content site database.
- The extraction of data from PDFs into the required Excel format is time-consuming.
- Having two sites means that the management of each site is doubled.
- Content from other UNAIDS sites are not automatically uploaded to the AP site.
- The App is not working.
- There could be some user interface improvements, especially with integrating data into the content of the site.

Opportunities

- Since AP is a proven use case for building capacity in the region for better data uptake, more formal metrics and documentation of investment can possibly be shared with other UNAIDS regions and more broadly. This evaluation can be a starting point for that analysis.
- Expanding on the Data Hub direct support elements, based on this experience, may continue to contribute to the overarching goal of increased use of granular and targeted data and content for HIV programming.

Threats

- Some countries do have their own national websites with HIV related information, but in their own languages.
- Some countries, like Afghanistan, are not willing to share programmatic data. The latest data is for 2012.

East and Southern Africa Data Hub

Regional Context

HIV remains high on the political, development and health agenda across the donor and government communities. As a result, key global, regional and national HIV commitments are being funded and implemented. Country planning, programming and decision making should be based on high quality strategic information, especially to make sure that everyone has equitable access to comprehensive HIV services and that countries have sustainable resources for their HIV response.

Both HIV response and data management capacities range considerably in the countries in the ESA region; countries like Uganda and Kenya have long histories of HIV programming investment as well as existing IT and data infrastructure to support data analytics. Other countries, especially the non-Anglophone ones and those which are poorer, struggle with basic data collection and implementation of core programming. Stigma and discrimination are also major challenges in the region, with many countries still criminalising homosexuality and transgender people.

There are many actors in the region working on HIV and related health issues at country and regional level, particularly PEPFAR, Global Fund, and the UN Agencies, as well as NGOs and foundations. These actors are not always well coordinated, especially regionally, and key regional actors, such as Africa CDC, lack capacity and sometimes political support, to provide that coordination or collaboration guidance. Southern African Development Community (SADC) countries have benefited from their political commitment to share data and work collaboratively on HIV; however, not all countries in the ESA region belong to SADC, and not all SADC countries are taking advantage of this collaboration opportunity.

Regional Data Hub Perspective

History of the Data Hub

The UNAIDS Regional Support Team (RST) for Eastern and Southern Africa (ESA) is based in Johannesburg, South Africa, and supports 21 country offices in the ESA region. The regional Data Hub was rolled out in 2018 along with the other Data Hubs. However, similarly to AP, the ESA has an additional website for its work, https://rstesa.unaids.org/ which links to the data dashboards on the Global Centre managed site. The RSTESA site is implemented in Joomla, an open-source content management system. The site seems to have been launched in 2019 and has seen updates as recently as 2022.

Unfortunately, the key actors in the development of RSTESA were unavailable to the team, so a detailed history of this site was not captured. However, it is known that a key strategic information staff person in ESA had come from AP and was looking to reproduce much of the functionality of that site, as well as the services provided to the region. It is presumed that this RSTESA site is a result of that work.

Specific regional goals, outcomes and priorities linked to the Themes, stakeholders, content/data

There are no clearly defined goals for this regional Data Hub, except for the annual update of data in July. The team in South Africa did not see the ESA Data Hub as directly linked to their work in the region.

Current / Recent Data Hub

The following mainly relates to the ESA Data Hub, as minimal information was collected on the RSTESA site outside a review of the site itself.

Governance and Operations

The senior regional data advisor is responsible for oversight and direction on the ESA Data Hub. This oversight is achieved in close collaboration with his team and is synchronised with requirements from UNAIDS headquarters.

There is currently only one data analyst employed for this region, who spends roughly about 20% of his time on the Data Hub. Publications to be published on the site are reviewed internally and then sent to UNAIDS headquarters for their review and final approval.

Estimated resources expended versus needed

Financial resources within the RST are stretched to its limits, putting a real constraint on the expansion of the Data Hub. It is unclear what the cost of supporting the RSTESA site is.

Current and desired Technology Investments

The current ESA site's user interface is broken. As shown in the below screenshot, the webpage's global navigation is not displaying correctly. It is presumed that the global navigation should mirror the look and feel of the RSTESA site (with the menu items displaying horizontally vs vertically) as it has the same menu items and links to the same pages. This error was reported to Global Centre staff in June 2022; this screenshot is from December 2022.

Screenshot of ESA home page
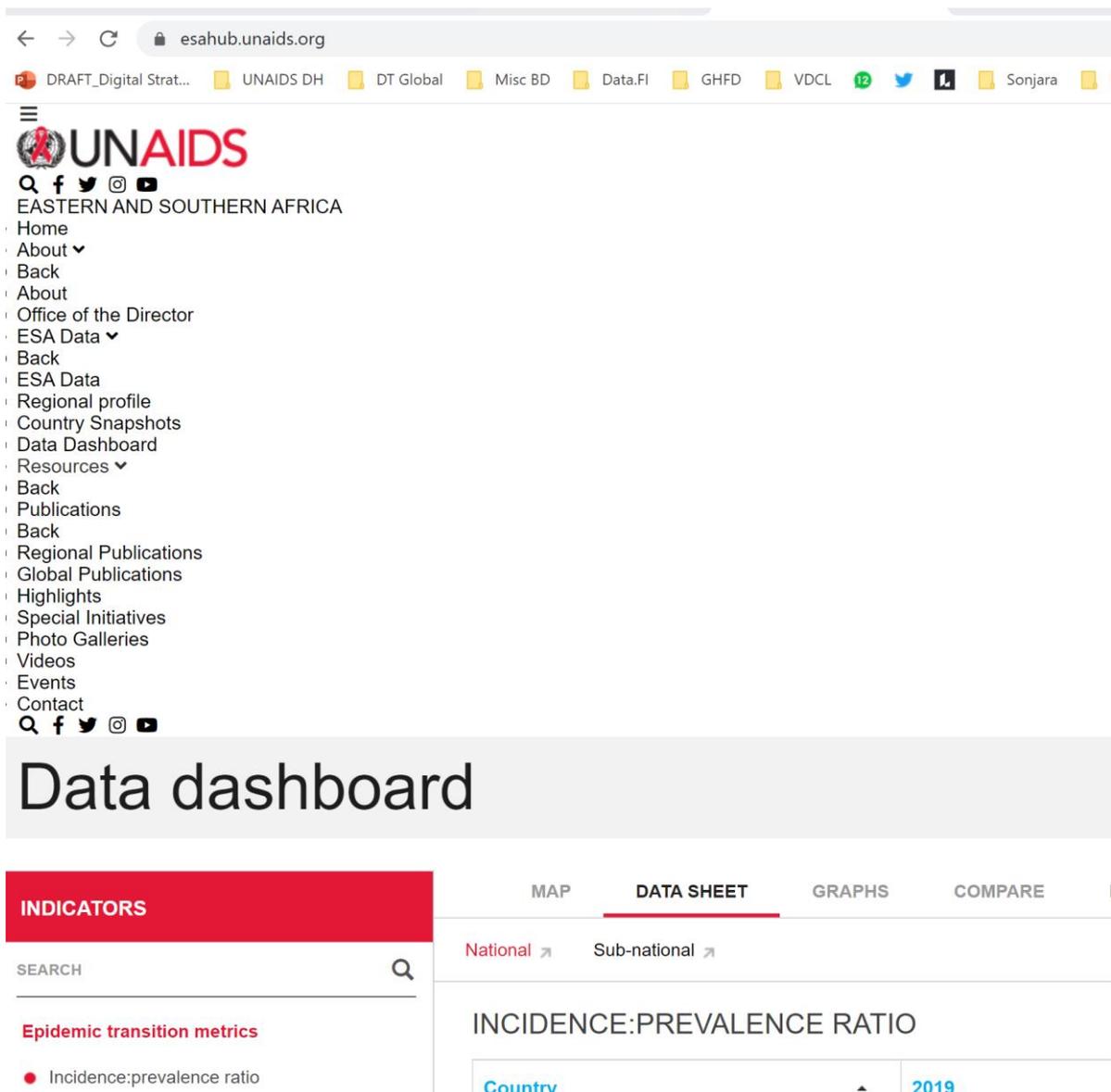
In addition to fixes to the Hub, there is a definite need for additional data analytical and graphical representation tools and staff to assist with the publication of data.

Content Summary

The majority of the content is on the RSTESA site, with the following information:

- About the regional office and the director
- 40 regional and global publications
- 80 highlight articles of achievements and programmes
- 6 descriptions on special initiatives in the region
- A photo gallery with 65 images organised by different themes
- 3 videos (hosted on YouTube and embedded into the website).
- Contact page

There are also additional data presentation and infographics not housed on the ESA Data Hub under the ESA Data Menu Item:

- ESA Data (UNAIDS 2021 estimates)
  - ART Coverage
  - Testing and Treatment
  - Gender disparities
  - Laws and Policies
  - Map
- Regional profile (this page has a "coming soon" message)
- Country snapshots, i.e. Two-page fact sheets on HIV from 20 countries (UNAIDS 2020)

Within the ESA Data menu item is also a link to the ESA Data Hub, called the Data Dashboard: https://esahub.unaids.org.

The Data Dashboard consists of interactive maps, graphs, comparisons, and fact sheets for a number of HIV related indicators such as:

- Epidemic transition metrics
- People living with HIV
- New HIV infections
- AIDS related deaths
- Sex workers
- Men who have sex with men, People who inject drugs
- Prisoners
- Gender
- Young People
- HIV Expenditure
- Combination prevention
- Stigma and discrimination
- TB and HIV.

Swaziland's name was not updated on the ESA Data Hub to Eswatini, but it is updated on the RSTESA site for the country's snapshots.

Usage Analysis
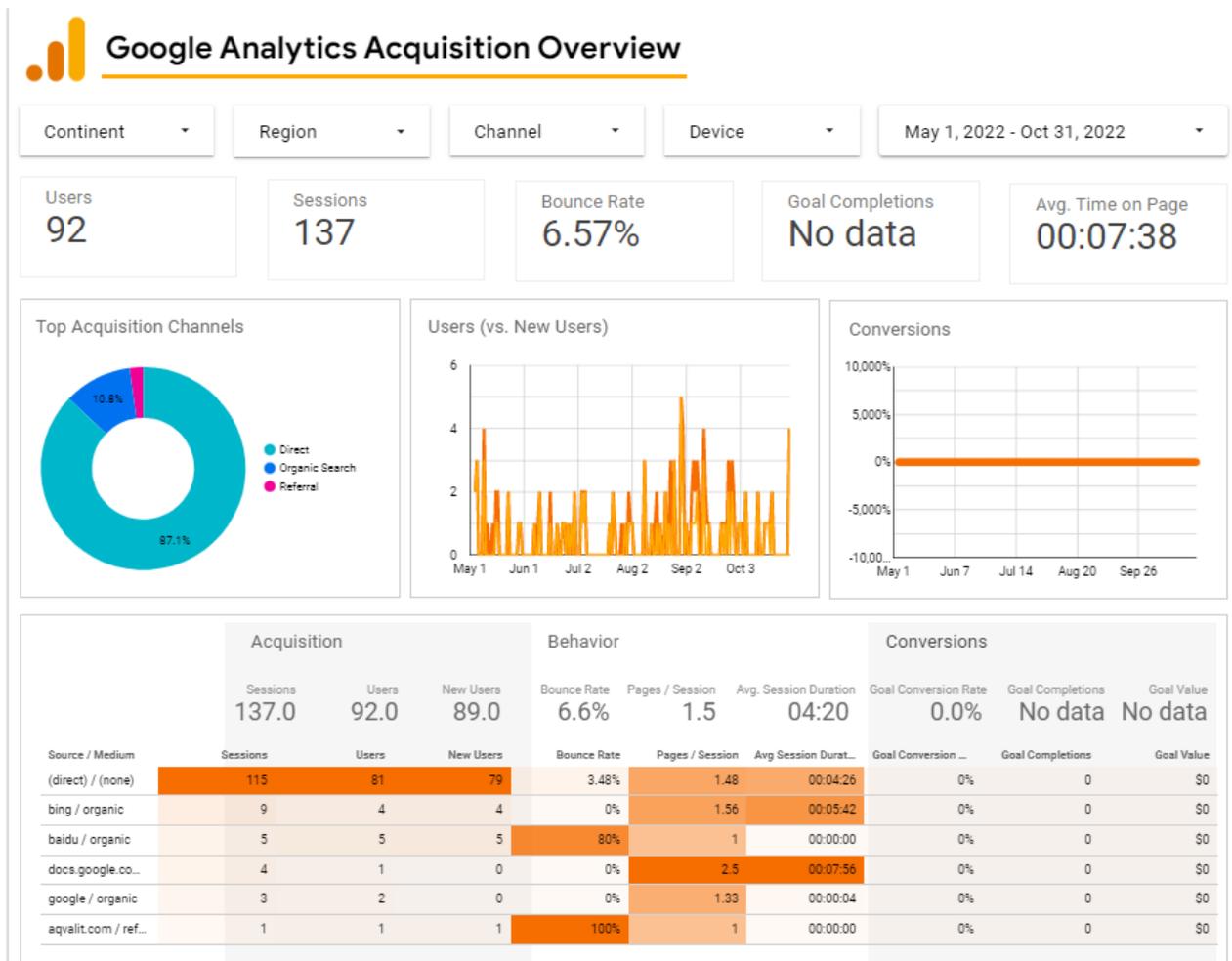
According to Google Analytics, the regional Data Hub had very low usage during the period of this analysis (May - October 2022). For comparison, the team includes the AP site for the same period.

Region	Sessions	Users	New users
ESA	137	92	89
AP	6,500	5,400	5,300

The Google Analytics data on the ESA Data Hub is received from time to time, but no one at the regional Hub said they understand how to interpret the data. There is no formal feedback mechanism in place other than word of mouth or e-mails received of appreciation for data shared. There are no other metrics in place to measure usage of the various Data Hub information products.

Data Hub SWOT Analysis

Strengths

The following were seen as strengths.

- The regional Data Hub is considered as a high priority under management, and especially with the senior regional data advisor.
- The RSTESA site is clearly routinely supported as there are up to date documents and other content materials on the site.
- The user interface for the RSTESA site is engaging, with some use of infographics and images connected to publications.

- The RST has strong relationships with some data providers in the region based on their other work.
- The RST has invested in its own content management system to publish documents and data in the formats it needs.

Weaknesses

The following are the weaknesses identified by the team:

- The regional Data Hub is under-resourced in terms of funding, technological tools and skilled human resources.
- Having two sites increases the amount of work to maintain each site.
- The ESA Data Hub is clearly not routinely visited; the user experience error is not prioritised to be fixed.
- There is no internal initiative to drive the expansion of the Data Hub. There is a dependency on guidance from UNAIDS headquarters i.e. 'show us how and we will do it' kind of approach.
- Limited feedback mechanisms and processes to accurately determine the users of the Data Hub and which information products they access the most.

Opportunities

- UNAIDS is well respected in the region and has good relationships with potential users and content providers.
- UNAIDS understands the data needs and existing capacity of the key actors in the region and in specific countries.
- UNAIDS has previously worked with specific countries in the region on capacity building via data and information products, via the Country Health situation room activity. This experience can be built on and expanded.
- This regional Data Hub is not the only source of HIV related information in the region. There are other online resources that provide quality and up to date HIV information. UNAIDS would be able to collaborate with these other sources to leverage and build on their work, making the ESA Data Hub supportive rather than compete with those sites.
- With proper funding and additional data analysts dedicated to the Data Hub, the number of information products can be increased to serve the needs of the users.
- With proper feedback mechanisms and processes the needs of users can be better assessed and information products can then be designed to serve those needs.

Threats

- Lack of financial or strategic investment by UNAIDS partner organisations or country partners would expand the RSTESA for the ESA.
- It may make more sense for UNAIDS to invest in one of the other regional sites focusing on HIV rather than recreating their work.

Eastern Europe and Central Asia Data Hub

Regional Context

Global shocks such as COVID and war in Ukraine have impacted the spread of HIV from disruptions to supply chains, reprioritization of funding, and migration and refugee crises which change the population profiles of those in need. HIV rates are rising rapidly, with a 48% rise in 11 years, and death rates rising as well. Prioritisation of community led, people centric services, as well as addressing stigma, criminalization, and discrimination are key activities, along with advocating for continued sustainable financing. Up to date data tracking these changes, impacts of the global shocks on HIV, as well as approaches to addressing these challenges are very important for the region to be able to fight HIV. [7]

Regional Data Hub Perspective

History of the Data Hub

This regional Hub started around 2017/2018 with one resource, the Regional Strategic Information advisor who was part of the original Data Hub project in the region. Because of COVID related lockdowns and restrictions the number of strategic information advisors shrunk dramatically in the region. Currently there is only one strategic information advisor in the region.

The region represents 12 countries in the old Russia (before the formation of the Russian Federation). The region originally represented 15 countries, but 3 countries joined the European Union, effectively leaving this regional grouping.

Specific regional goals, outcomes and priorities linked to the Themes, stakeholders, content/data

The goals for this regional Data Hub is not clearly stated, but by default the overall goal is to share all available data collected in the region through the Data Hub.

Current / Recent Data Hub

Governance and operations

The senior regional data advisor for this region has been in this position for the last 3 to 4 years. It is his responsibility to provide oversight and direction on the Data Hub in close collaboration with colleagues from UNAIDS headquarters.

The senior regional data advisor requests data from the countries in the region through the country specific UNAIDS offices, as well as new publications from host governments. Once received he uses standard operating procedures to upload the information to the Data Hub.

Estimated resources expended versus needed

There is currently only one resource looking after the Data Hub namely, the Senior Regional Strategic Information Advisor. He spends 50% of his time on knowledge management and the other 50% on various activities such as uploading data to the Data Hub, HIV estimates, GAM reporting, Global reporting, other data analysis and technical support to countries etc. Marketing of this regional hub is done through Mail Chimp to create awareness.

Interviewees stated that financial resources are stretched to their limits, putting a real constraint on the expansion of the Data Hub. The Senior Regional Data Advisor expressed a real need for additional skilled resources in this region such as a resource with IT technical skills to manage the IT part of the Data Hub; a resource with HIV and related technical skills to sort through publications and to collaborate with partners in the region.

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[7] https://www.unaids.org/en/resources/presscentre/featurestories/2022/october/20221027_eastern-europe-central-asia

Current and desired technology Investments

The site has the basic functionality of the Global Centre managed Data Hubs. The site navigation and HTML content is also offered in Russian.

There is a need for additional data analytical and graphical representation tools to assist with the publication of data. In addition, the user interface for uploading documents is labour intensive and duplicative.

Content summary

The regional Data Hub can be accessed at: https://eecahub.unaids.org/

Data. The data dashboard consists of interactive maps, graphs, comparisons, and fact sheets for several HIV related indicators such as:

- Epidemic transition metrics
- People living with HIV
- New HIV infections
- AIDS related deaths
- Key populations (sex workers, Men who have sex with men, people who inject drugs, prisoners)
- Combination prevention
- Gender
- Young people
- HIV expenditure
- TB and HIV
- Hepatitis and HIV
- Cervical cancer and HIV

Themes. The Data Hub is organised by the following thematic areas:

- TB / HIV
- Regional Reviews
- AIDS Financing
- Stigma & Discrimination
- ART
- HIV & PWID
- Regional Cooperation Programme
- Data Availability

Documents. There are 88 documents uploaded to the Data Hub, most dated to 2018 or 2019. These documents are in English and Russian.

Usage analysis
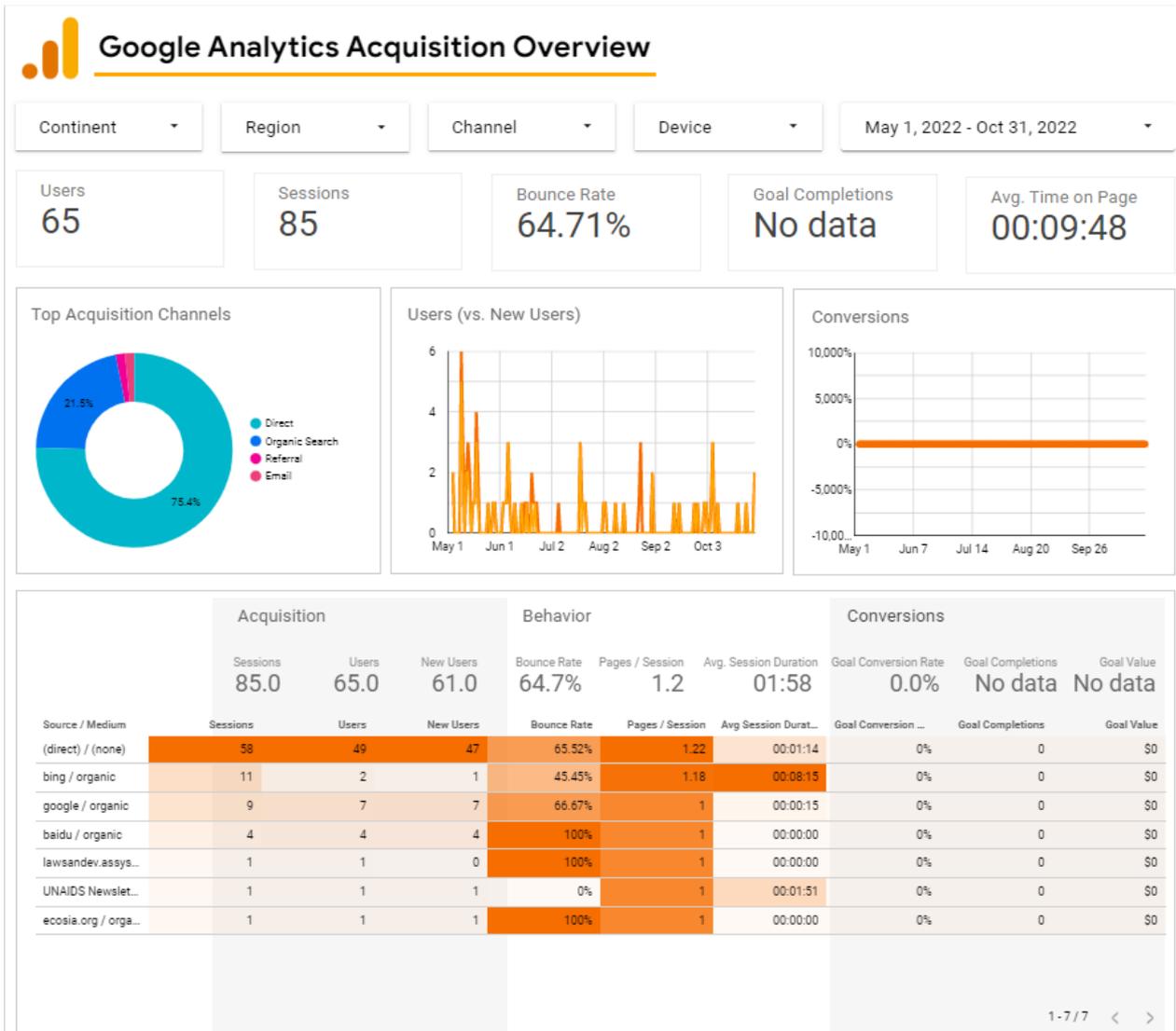
According to Google Analytics, the regional Data Hub had very low usage during the period of this analysis (May - October 2022). For comparison, the team includes the AP site for the same period.

Region	Sessions	Users	New users
EECA	85	65	61
AP	6,500	5,400	5,300

Google analytics are not directly available to the regional Data Hub. The Global Centre says they share monthly reports on the hub activities to Data Hub points of contact, the interviewees say they do not receive them.

There is no formal feedback mechanism in place other than word of mouth or e-mails received of appreciation for data shared.

There are no other metrics in place to measure usage or impact of the various Data Hub information products.

Data Hub SWOT Analysis

The following were noted by both interviewees and by the team:

Strengths

- The Data Hub contains different information than other HIV online resources such as www.pubmed.gov
- EECA Data Hub has a large repository of Russian language materials on HIV, serving an underserved community.
- EECA has strong relationships with some data providers in the region and is very aware of how key regional stakeholders use data and information for HIV programming.
- Key population data by UNAIDS is some of the best and most up to date available.

Weaknesses

- There is only one resource responsible for this regional Hub - the senior regional data advisor - who considers the Data Hub as medium priority.
- Most publications received are in English and need to be translated into Russian.
- The publications are not up to date (latest one published 2019).
- RST awareness of data and information needs by regional stakeholders is not reflected in targeted products on the site.

Opportunities

- With additional funding and the right technical resources, this regional Data Hub can be expanded and grown into a reputable source of HIV related information, especially on politically sensitive but crucial topics.
- By expanding and building on the current data provider relationships, more data sources can be identified and utilised to contribute to the information products of the regional Hub.
- UNAIDS will need to be in alignment with other HIV related online resources in the region such as www.pubmed.gov or Journals from the Lancet or the Jades websites.

Threats

- Geopolitical issues in the region and the mass movement of refugees means that money is not spent on HIV prevention and treatment.

Collection of key population data is very difficult as most countries within the region do not tolerate the idea of key populations.

Latin America and Caribbean Data Hub

Regional Context

Like other parts of the world, COVID has exacerbated the existing challenge LAC nations have faced to respond to HIV, such as service disruption and worker, financial, and supply chain shortfalls. After years of strong performance against the 90-90-90 targets as well as improving protections for LGBTQ and other marginalised communities, LAC countries had some stagnation due to COVID and related issues.

There are a number of regional and country-based stakeholders (from governments, academia, and other donors) who want to share data and analysis, coordinate approaches, and possibly collaborate on HIV programming; UNAIDS LAC has been working with these different stakeholders through the RST and country programmes.

Regional Data Hub Perspective

History of the Data Hub

When the concept of the LAC regional Data Hub was first introduced in 2018, there was excitement from the RST and local co-sponsors that this platform would support their collaboration needs. In particular, they wanted to link platforms together to avoid duplication of effort, and provide shared links to documents, collaboration spaces, etc.

However, when the Hub was rolled out, the LAC Hub staff were disappointed that the tool did not include functionality they wanted. In particular, the co-sponsors need a space to access and edit their own investments, as well as share information to coordinate on their work. As one interviewee stated, "AP was used as a benchmark but did not take into account LACs needs".

The team was still hopeful that the Data Hub as it was would still be helpful, so they invested time in the beginning to make the Hub work for them. However, in addition to the lack of above functionality, they also found the labour to update the Hub was very task intensive and did not provide a lot of added value for the RST. All the documents already existed on the RST website and there were no automatic connections between the two sites. They stopped prioritising the site due to a lack of sufficient staff and other needs.

Specific regional goals, outcomes and priorities linked to the Themes, stakeholders, content/data

Some of the goals for the site is to make information more accessible, especially for non-English speakers and those not familiar with AIDSinfo. In particular, there is a desire to provide information products for civil society so they can "self-serve" when it comes to information products. There are major challenges with data literacy within the region.

There needs to be a central access point for all different systems and information. All information needs to be in one place, especially pulling from different donors.

There needs to be training of UNAIDS country staff and civil society on how to use AIDSinfo and data analysis tools.

Key users include:

- National AIDS commissions
- UNAIDS staff
- Co-sponsors, such as Global Fund, PEPFAR

Usage goals include:

- Using the data to inform programming and for decision making.

Current / Recent Data Hub

Governance and operations

The LAC Data Hub is supposed to be managed by the SI advisor, supported by 2 data analysts. The tasks of the Hub are separate from day to day tasks of the regional support team. It takes an estimated 10% of a data analyst time to keep the site updated on a regular basis.

Estimated resources expended versus needed

There have been significant staffing gaps within the RST. Both data analysts left, leaving a gap in the management of the steam. There was also a gap in staffing the SI advisor position, meaning a new data analyst was also performing the role of the Data Hub SI advisor, who also manages financial, IATI and other strategic information for the region.

The interviewees stated that this lack of staff plus lack of support from multi-agency sponsors is preventing the regional Data Hub from being able to meet the need.

Current and desired technology Investments

The following functionality was identified as needed:

1. More self-serve tools to meet knowledge needs.
2. Comprehensive country profiles including budget, budgets, proposals from co-sponsors.
3. Pull data and documents automatically from different sources.
4. Increased information on gender and equity
   - Key populations, women, etc.
   - Different languages
5. Private collaboration space where NAC, national government, co-sponsors and other partners can share information.
6. Ability for other producers to create/add content to the site.

Content summary

Content dates back to 2018 and has not been updated recently. The library consisted of 5 documents that were provided for each thematic area and data on individual countries consisted of a "country snapshot" from 2018. The data on the snapshots was presented graphically. The snapshots presented the same indicators in the same way, but some countries did not have data for every indicator. The resources in the library are only shared in English.

Thematic areas

Theme	Content available (from Library)	Notes
Key Populations	1 presentation – only in English. When you select "Espanol" as the language to view the website, the title of the presentation changes, but the pdf is still in English.	
Human Rights, stigma, and discrimination	▪ "The benefits of knowing your HIV status" World AIDS Day, 2018	
Combination Prevention	4 publications – all in English; the first three titles do not change to Spanish even when Spanish is selected as the language to view the website in.	
Fast Track Cities		
Investing for results/Sustainability	▪ "Miles to go - The response to HIV in the Caribbean".	
Economics of AIDS	▪ "Miles to go - The response to HIV in Latin America".	
Latest Data	▪ "Knowledge is power - Know your status, know your viral load".	
Youth		
eMTCT		

Women and girls/ Gender Based Violence	▪ Live life positively - Know your HIV status "/"Vive la vida positivamente - Conoce tu estado serológico" World AIDS Day, 2018. Same 5 documents for all themes No other documents or information listed for the themes. Just links to the library with the 5 documents.

Data

Presented at a country level on fact sheets (countries had varying levels of data available but all snapshots were from 2018)

Tools/presentation	Content available	Notes
Home Page Map	13 indicators and sub indicators at country level. Some sub indicators can be viewed at the subnational level.	Some indicators and countries are missing data which causes some maps to be incomplete

Countries

Countries	Content available	Notes
Antigua and Barbuda	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and incomplete data
Argentina	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and more complete data
Bahamas	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and incomplete data
Barbados	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and incomplete data
Belize	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and more complete data
Bolivia	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and more complete data
Brazil	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and more complete data
Chile	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and more complete data
Colombia	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAI	All in English and more complete data
Costa Rica	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and more complete data
Cuba	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and more complete data

Countries	Content available	Notes
Dominica	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and incomplete data
Dominican Republic	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and more complete data
Ecuador	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and more complete data
El Salvador	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and more complete data
Grenada	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAI	All in English and incomplete data
Guatemala	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and more complete data
Guyana	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and incomplete data
Haiti	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and incomplete data
Honduras	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAI	All in English and incomplete data
Jamaica	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and more complete data
Mexico	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and more complete data
Nicaragua	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and more complete data
Panama	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and more complete data
Paraguay	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and more complete data
Peru	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and incomplete data
Saint Kitts and Nevis	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and incomplete data
Saint Lucia	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and incomplete data

| Countries	Content available	Notes
Saint Vincent and the Grenadines	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and incomplete data
Suriname	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and incomplete data
Trinidad and Tobago	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and incomplete data
Uruguay	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAIDS	All in English and incomplete data
Venezuela	Country Snapshot (2018) Source: Global AIDS Response Progress Reporting 2018, UNAI	All in English and incomplete data

Library

Includes the 1 presentation, four publications, and country factsheets.

Usage analysis

Google Analytics Acquisition Overview

| Continent | Region | Channel | Device | May 1, 2022 - Oct 31, 2022 |

Users	Sessions	Bounce Rate	Goal Completions	Avg. Time on Page
47	65	64.62%	No data	00:10:42

Top Acquisition Channels
- Direct 74.5%
- Organic Search 12.8%
- Referral 12.8%

Users (vs. New Users)

Conversions

	Acquisition			Behavior			Conversions		
	Sessions 65.0	Users 47.0	New Users 44.0	Bounce Rate 64.6%	Pages / Session 1.3	Avg. Session Duration 04:00	Goal Conversion Rate 0.0%	Goal Completions No data	Goal Value No data
Source / Medium	Sessions	Users	New Users	Bounce Rate	Pages / Session	Avg Session Durat...	Goal Conversion ...	Goal Completions	Goal Value
(direct) / (none)	50	35	33	62%	1.28	00:04:31	0%	0	$0
bing / organic	4	1	1	25%	2.75	00:07:40	0%	0	$0
google / organic	3	3	3	66.67%	1.33	00:01:00	0%	0	$0
baidu / organic	2	2	2	100%	1	00:00:00	0%	0	$0
lawsandev.assys...	2	2	1	100%	1	00:00:00	0%	0	$0
statics.teams.cd...	1	1	1	100%	1	00:00:00	0%	0	$0
yescan.xyz / refe...	1	1	1	100%	1	00:00:00	0%	0	$0
aqvalit.com / ref...	1	1	1	100%	1	00:00:00	0%	0	$0
ncpiuat.assyst.in...	1	1	1	100%	1	00:00:00	0%	0	$0

1 - 9 / 9

According to Google Analytics, the regional Data Hub had very low usage during the period of this analysis (May - October 2022). For comparison, the team includes the AP site for the same period.

Region	Sessions	Users	New users
LAC	65	47	44
AP	6,500	5,400	5,300

Google analytics are not directly available to the regional Data Hub. The Global Centre says they share monthly reports on the Hub activities to Data Hub points of contact, the interviewees say they do not receive them.

There is no formal feedback mechanism in place other than word of mouth or e-mails received of appreciation for data shared.

There are no other metrics in place to measure usage or impact of the various Data Hub information products.

Data Hub SWOT Analysis

Strengths

- The LAC team is aware of the needs of the region and how data is turned into decisions.
- Good relationships with key stakeholders, including data providers and analysts.
- Other donors are interested in data analytics for the region, particularly on gender, key populations, and equity themes.

Weaknesses

- Lack of staffing has limited the ability of the LAC RST to use the site strategically.
- Content has not been updated since 2018.
- Minimal content in Spanish.

Opportunities

- With targeted investment, LAC could build a collaborative space.
- Huge demand for data and analytics by a wide range of users.

Threats

- Need to have dedicated resources to build and sustain a system.

Middle East and North Africa Data Hub

Regional Context

Despite having relatively lower numbers than other regions, the Middle East and North Africa region has seen substantial increases in HIV infections in the last 10 years. Causes include COVID as well as ongoing conflict in Syria and other regional unsettlement, which disrupt services and create internally displaced people and refugees.[8] Also, negative culture norms and government policy on HIV, sexual minorities, sex work, and intravenous drug usage makes it difficult to both capture accurate population data, create inclusive programming, and promote destigmatizing policies and laws. Ignorance and reluctance to use HIV services are major factors in the growing epidemic; inequality is a significant underlying cause[9]

Regional Data Hub Perspective

History of the Data Hub

There is no current MENA website. However, the MENA team wants to build one and share information on what they would like.

Specific regional goals, outcomes and priorities linked to the Themes, stakeholders, content/data.

The role of UNAIDS is to promote accountability and transparency of governments, and support equity and ethics. Latest global aids update shows under counting and less information on key populations where infections are rising. The infection is driven by inequality, especially within KPs.

There are major information gaps in SI in the region. There is currently not one central place to find information in MENA on HIV. Existing information needs better dissemination. There needs to be additional context for data from AIDSinfo as well as translation of documents into Arabic. The information also needs to be user friendly.

The site also needs to be a place to promote collaboration across other UN agencies and other partners, academics, etc. The site can host content and data from these other partners. For example, WHO, Global fund, IOM and Doha academics share data via a regional working group on SI. There is also a need to build capacity within community networks.

Desired outcomes

- More countries use evidence to drive policy decisions.
- Partnerships are able to come together on a Data Hub.
- Use of data for advocacy, policy, and programme changes.

Identified users

- National AIDS programme
- Ministry of Health
- Community networks
- NGO/global fund

Content needed

- Policy/legal environment
- Quantitative data on HIV in the region
- Financing of HIV programming

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[8] https://pubmed.ncbi.nlm.nih.gov/33525959/

[9] https://www.bbc.com/news/world-middle-east-63821977

Country governments are very interested in:

- Population size
- Financial data
- Available technical support
- Capacity development
- Political advocacy for KP

Current / Recent Data Hub

Governance structure

The intended governance structure includes the RST lead, input from the regional SI working group and national AIDS programmes.

Resources needed

It is expected that the SI advisor would need to devote about 50% time to the Hub. Global Fund has said they would support the hiring of additional staff, and other donors may also be able to contribute. Other challenges to be addressed include:

1. Capacity issues in the region for data (collection, usage)
2. Sensitivity around HIV/KP data - need to build trust with government.
3. Quality control
4. Limited footprint vs WHO/UNICEF

Desired functionality

Desired functionality includes the following:

- Both public and private access
- Present differences between countries
- Support intercompany engagement and regional initiatives.
- Need to highlight data gaps.
- Need to highlight existing policy.

Data Hub SWOT Analysis

Strengths

The team understands the needs of the key stakeholders well and has already negotiated partnerships to help gather key data and analysis into a Data Hub.

Weaknesses

There is no Data Hub at the moment.

Opportunities

The MENA team has built strong partnerships with other donors.

Threats

The region faces big challenges related to data collection, especially for key populations.

West and Central Africa Data Hub

Regional Context

The West and Central Africa region face high rates of mother to child transmission, as well as infection in adolescent girls and sexual and gender-based violence. The region has also seen a rise in civil unrest, such as in DR Congo, undermining service delivery and exacerbating other social conditions that can spread HIV.

Regional Data Hub Perspectives

History of the Data Hub

West Africa was rolled out at the same time as the other regional Data Hubs. The team populated the site with content and themes. They had hoped to use it as a document repository for documents not found on other sites, especially in non-English languages.

However, due to staffing challenges and other priorities, the WCA Data Hub did not get much attention beyond the initial launch.

Another challenge has been the amount of labour it takes to gather quality information from the region, as local government capacity is often lacking in this area.

Specific regional goals, outcomes and priorities linked to the Data Hubs

In the beginning, the WCA region saw the Data Hub as a potentially useful tool, predominantly as a repository for documents from the region, especially those in French, Portuguese, and Spanish. However, issues with the document uploads and lack of staff meant that this goal was not attained.

In addition, the Data Hub was not seen as an activity to build local / regional capacity for data quality and analytics but rather an additional task that was on top of other regional priorities. It was seen as a bit premature as the data analysis was not readily available to share on the Data Hub; "Opening the shop will not create products", as one interviewee stated.

Current / Recent Data Hub

Governance

The Regional SI advisor was meant to be leading the Data Hub. However, this position was open during the launch and start of the Data Hub and as a result delayed much of the work on the Data Hub. This position is now filled, however.

Estimated resources expended versus needed

A major challenge facing WCA has been insufficient staffing to face the needs for data and analysis. There are not enough people either at government/local partners or at UNAIDS to capture quality data (including applying standards), produce analytics, or to upload and share those products onto the Hub.

Current and desired technology Investments

WCA has a French version of the site (user interface and documents). No other investments have been made.

WCA would like to have improved content management, including automated linkages with other document repositories. In 2020, the documents they had uploaded were lost and were not found; as a result, the team decided that uploading documents was too cumbersome and risky to prioritise over other tasks.

Content Summary

Thematic areas

Theme	Content available
Gender Based Violence and HIV	All country snapshots "Plan d'assistance humanitaire d'urgence dans les régions du Nord-Ouest et Sud-Ouest 2018-2019" "Etude sur les violences basées sur le genre en lien avec le VIH et la stigmatisation/discrimination"
eMTCT	All country snapshots 11 other resources, country level almost all of them are only available in French
Catch Up Plans	All country snapshots Cameroon – French and Englsh Equatorial Guinea - Spanish Gabon – French Cote d'Ivoire - French Sierra Leone – English Nigeria – English Gambia – English Ghana – English (costed support plan) République de Guinée - French Liberia – English Niger – French Chad – French Burundi – French Mali – French DRC – French Mauritanie – French Senegal – French Central Africa Republic – French
Stigma and Discrimination	All country snapshots 1 report in English 3 reports in French on Benin
Regional Reviews	All country snapshots "Action, innovation and solidarity Building on momentum to close the gaps and leave no one behind in western and central Africa" - just in English
TB-HIV	All country snapshots No unique reports, the 4 catch up plan reports (2 Cameroon), DRC, CAR)
HIV Financing and Sustainability	All country snapshots Appears that all "catch up plans" are also under this section.

Data

Map, Data sheets, Graphs, Factsheets.

▪ Same 13 indicators and sub indicators as the other Data Hubs
▪ The maps, graphs, and factsheets loaded

Countries

Countries	Content available
Benin	Country Snapshot 15 reports, majority in French
Burkina Faso	Country Snapshot 7 reports in French 2 English reports on WCA Africa generally
Burundi	Country Snapshot 1 report in French (catch up plan)
Cabo Verde	Country Snapshot General reports
Cameroon	Country Snapshot 11 unique Cameroon reports
Central African Republic	Country snapshot 1 unique report (catch up plan)
Chad	Country snapshot 1 unique report (catch up plan)
Congo	Country snapshot 1 unique report (catch up plan)
Côte D'Ivoire	Country snapshot 1 unique report (catch up plan)
Democratic Republic of the Congo	Country snapshot 1 unique report (catch up plan)
Equatorial Guinea	Country snapshot 1 unique report (catch up plan)
Gabon	Country snapshot 1 unique report (catch up plan)
Gambia	Country snapshot 1 unique report (catch up plan)
Ghana	Country snapshot 2 unique reports UN Sustainable Development Partnership Framework with Ghana 2018-2022 Costed support plan for fast tracking HIV prevention programmes in Ghana
Guinea	Country snapshot 1 unique report (catch up plan)
Guinea-Bissau	Country snapshot
Liberia	Country snapshot 1 unique report (catch up plan)
Mali	Country snapshot 1 unique report (catch up plan)
Mauritania	Country snapshot 1 unique report (catch up plan)
Niger	Country snapshot 2 unique report (catch up plan) and "Fast tracking treatment and PMTCT programmes in Nigeria"
Nigeria	Country Snapshot Fast tracking treatment and PMTCT programmes in Nigeria
Sao Tome and Principe	No snapshot or unique reports
Senegal	Country snapshot 1 unique report (catch up plan)

| Countries	Content available
Sierra Leone	Country snapshot 1 unique report (catch up plan)
Togo	Country Snapshot

Library

All documents catalogued based on thematic area and country.

General Notes:

▪ The following reports were included under each country's tab:

1. Action, innovation and solidarity Building on momentum to close the gaps and leave no one behind in western and central Africa.
2. UNAIDS in West and Central Africa (same report in English)
3. L'ONUSIDA en Afrique de l'Ouest et du Centre (same report in French)
4. HIV The Law and Human Rights in the African Human Rights System

HIV The Law and Human Rights in the African Human Rights System (same report appearing twice)

Usage analysis
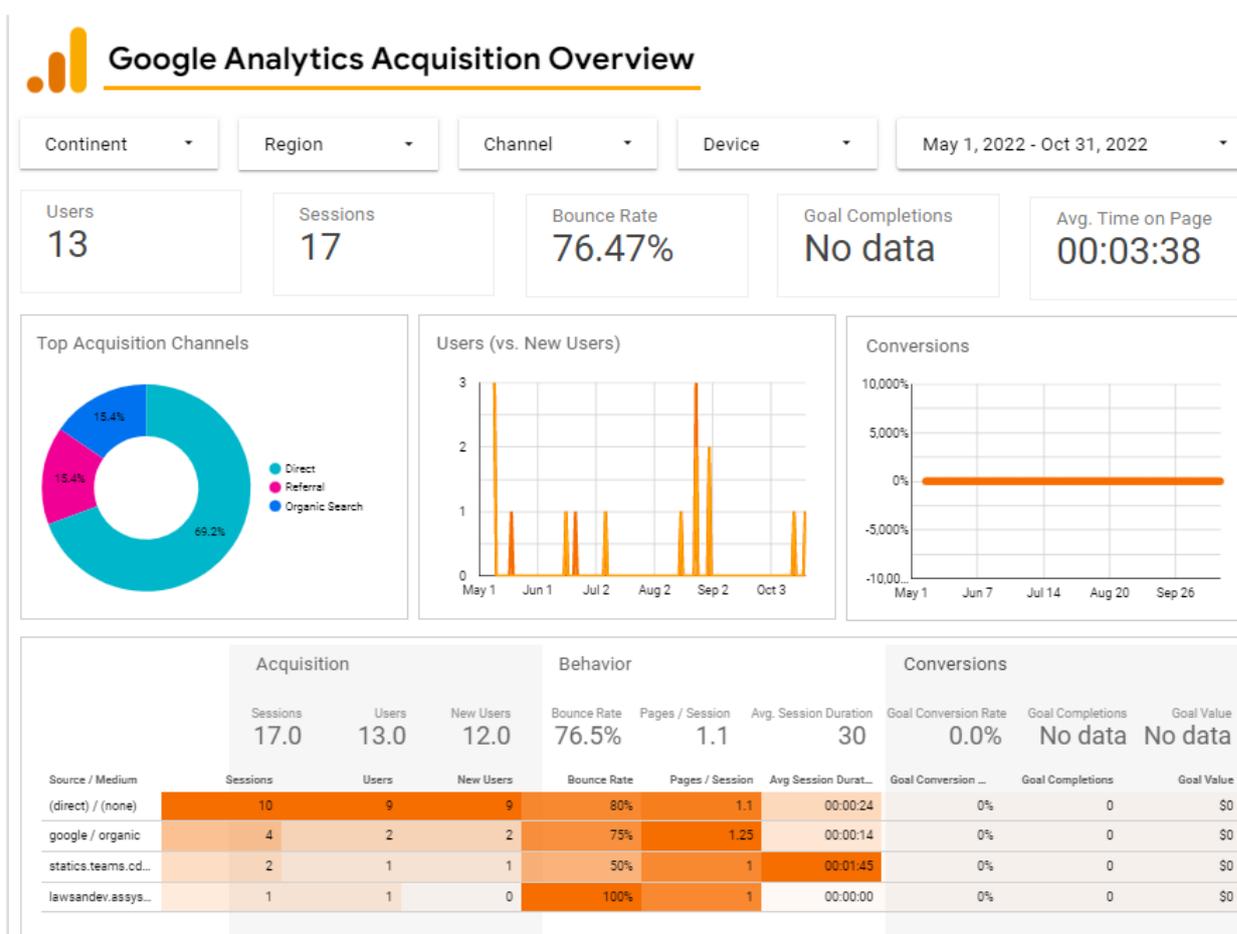
According to Google Analytics, the regional Data Hub had very low usage during the period of this analysis (May - October 2022). For comparison, the team includes the AP site for the same period.

Region	Sessions	Users	New users
WCA	17	13	12
AP	6,500	5,400	5,300

Data Hub SWOT Analysis

Strengths

- The team is highly aware of the data and information needs of the region.
- There is a strong need for a document repository in multiple languages.

Weaknesses

- Lack of staff.
- Lack of trust in the content management system.
- Lack of content on the site.
- No graphic design or user interface design skills on staff.

Opportunities

- Pull documents from other UNAIDS sources to populate on site.

Threats

- Poor quality data and insufficient capacity building makes data analysis to be difficult.

Annex E: Comparative Analysis

Organization	Division	Website name	Description	Data explorer?	Geographic	Focus areas	Hosts non org info?	Other functionality	Url
Africa CDC	Disease	HIV	Summary information on HIV	No	Africa				https://africacdc.org/disease/hiv-human-immunodeficiency-virus/
AIDSPortal	none	AIDSPortal	Spread information on HIV/AIDS for youth	No	global-ish	sharing information	yes		https://aidsportal.org/
amfAR	none	amfAR website	A review of amfAR's work, latest information on HIV/AIDS, donations	no	Global	amfAR work	no		https://www.amfar.org/
amfAR	Asia	Treat ASIA	A summary of the amfAR Treat Asia programme (Therapeutics Research, Education, and AIDS Training in Asia)	no	Asia	TREAT Asia work	no		https://www.amfar.org/treat-asia/
Global Fund	HIV	Global Fund	Provides a mix of information on Global Fund programming with technical resources	Yes	LMICS				https://www.theglobalfund.org/en/
Kaiser Family Foundation	Global Health policy	KFF	Website that contains strusted information on national health issues	yes, dashboard	Global	data	yes	interactive dashboards	https://www.kff.org/hivaids/
NAM	HIV	AIDSMap	They provide independent, accurate & accessible information about HIV		UK only				https://www.aidsmap.com/
National Institutes of Health	HIVAIDS	HIVInfo.nih.gov	HIVinfo.nih.gov offers access to the latest, federally approved HIV/AIDS medical practice guidelines, HIV treatment and prevention clinical trials, and other research information for health care providers, researchers, people affected by HIV/AIDS, and the general public	No	US	research information	yes	content search tool	https://hivinfo.nih.gov/hiv-source
State Department	PEPFAR	State Dept website	Summary information on PEPFAR, hosting technical guidance for PEPFAR funding recipience	no	LMICs	PEPFAR	No		https://www.state.gov/pepfar/

Organization	Division	Website name	Description	Data explorer?	Geographic	Focus areas	Hosts non org info?	Other functionality	Url
US CDC	HIV	Ending the HIV Epidemic	US programme focused on the US	No	US	CDCs work	No		https://www.cdc.gov/endhiv/index.html
US CDC	HIV	HIV Statistics center	HIV data in the US	?	US	CDCs work	No		https://www.cdc.gov/endhiv/index.html
US CDC	Global HIV and TB	CDC Global Health programming	Review of CDC's HIV programming, statistics, focused intervention information	No	US	CDCs work	No		https://www.cdc.gov/globalhivtb/
USAID	Global Health	USAID	Provides information on USAID's HIV programming, Provides information on focus, impact, success stories, USAID authored resources	No	LMICs	USAID's work	No		https://www.usaid.gov/global-health/health-areas/hiv-and-aids
USG Health and Human Services	HIV	HIV.GOV	A collaboration space for USG departments and Agencies to provide HIV information to users. Contains global data as well as US.	No	Global		No but does link to UNAIDS, WHO, and other partners	locaiton widget to find US testing sites	https://www.hiv.gov/hiv-basics/overview/data-and-trends/global-statistics
WHO	Global HIV Programme	WHO HIV	Technical guidance on prevention, testing, treatment and care, strategic information		global	guidance on treatment	maybe?		https://www.who.int/teams/global-hiv-hepatitis-and-stis-programmes/hiv/overview
WHO	Global HIV Programme	Statistics and Information	Provides up to date information on global statistics on HIV/AIDS	No	Global	statistics	maybe?		https://www.who.int/teams/global-hiv-hepatitis-and-stis-programmes/hiv/strategic-information/hiv-data-and-statistics
WHO	Africa	HIV/AIDS	Summary information on HIV in Africa, including WHO's response and World AIDS Day.		Africa	WHO recommendations	No		https://www.afro.who.int/health-topics/hivaids
World Bank	none	Data Bank	Provides indicator data on HIV statistics by country (from UNAIDS)	Yes	global	indicator data	yes		https://databank.worldbank.org/

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