

## **Key themes and positions on the Global Fund Strategy 2017–2021 as stated by civil society representatives from Eastern Europe and Central Asia**

This document is a brief summary of key themes relating to the response to HIV and TB in Eastern Europe and Central Asia (EECA) - and positions on a range of issues within each theme - that should be reflected in the new Global Fund Strategy 2017–2021, as stated by civil society and communities’ representatives from the EECA region.

These key themes and positions were defined during the ‘Communities and Civil Society Consultation on the Global Fund Strategy 2017–2021’ held on 12 and 13 July in Chisinau (Moldova), organized by the Communities Delegation to the Board of the Global Fund, co-organized by Eurasian Harm Reduction Network. Participants represented various regional networks, such as EHRN, ECUO, ENPUD, EWNA, SWAN, TBEC, ITPCru and such Delegations to the Board of the Global Fund as Communities Delegation, Developed and Developing countries NGO Delegations and EECA Delegation.

Following the Consultation and in the lead-up to the 3<sup>rd</sup> Partnership Forum of the Global Fund to be held 3–4 September 2015 in Buenos Aires, an EECA Regional Networks Position Paper on the new Global Fund Strategy will be prepared based on the key themes and positions developed by the participants and stated here.

### **1. Transition to domestic funding and Global Fund investment in middle-income countries**

- It is essential that the Global Fund re-considers its criteria for countries to be eligible to apply for Global Fund resources. More sensitive criteria should be developed to go beyond epidemiological and economic averages and consider such factors as countries’ readiness to invest in the implementation of best practices for disease control, and the political will to do so.
- The Global Fund needs to develop and implement a strategy for responsible and successful transition to domestic funding for middle-income countries, clearly identifying the following:
  - criteria for and clear definition of successful transition to domestic funding (developed together with a broad range of partners, including civil society);
  - requirements for transition stages and processes, including community participation;
  - monitoring and independent evaluation of countries’ readiness for transition, roll-out of transition processes and successfulness of transition;
  - identifying key technical support needs of countries for different stages of transition planning and implementation, and providing access to such technical support;
  - providing the necessary funding – both from the Global Fund and other donors – to secure successful transition;
  - determining the time frame for successful transition on a country-by-country basis.
- The Global Fund needs to improve the existing - and/or introduce additional - mechanisms to encourage countries to remain adherent to the commitments made and reflected in their concept notes to co-fund Global Fund-supported programs, and to implement the agreed sustainability plans to ensure the continuation of supported programs and medical activities beyond the termination of Global Fund grants.
- The Global Fund needs to provide openings for meaningful involvement of key affected populations and other civil society representatives at all stages of the strategic planning and project development/implementation

processes, as well as in sustainability planning for successful transition to domestic funding to end the three diseases.

- For those countries where governments are able, but not willing, to support programs for key populations, the Global Fund needs to either expand the implementation of ‘the NGO rule’ or develop and enforce other appropriate funding mechanisms to allow NGOs to continue their work with key populations. These funding mechanisms should focus not only on services, but also on solidifying the Community Systems Strengthening components and reducing legal barriers.

## 2. Continuum of HIV and TB services for key affected populations

Transition from Global Fund resources to domestic funding requires efforts to ensure the continuity of services currently supported by the Global Fund, and any such transition can only be recognized as successful if the sustainability requirement has been met, notably for programs that serve the groups that are most vulnerable to the epidemic, such as people who use drugs, men who have sex with men, sex workers, etc. – programs that many governments are reluctant or unwilling to support.

It should also be noted that the current level of support for HIV/AIDS responses in EECA is not sufficient to ensure the sustainable and balanced continuum of services. To enable successful transition from Global Fund finances, it is necessary not only to safeguard the continuity of services that are currently operating through support of the Global Fund, but also to improve the quality, quantity and access to those services, especially for key populations that are often ignored in national responses – in particular, transgender people, men who have sex with men, people who use drugs and sex workers. At the same time, it is important to support not just best practices, but also innovative approaches and methods of work.

Transition to domestic funding can only happen if the continuum of services is likely to be sustainable in the long-term.

## 3. Treatment for TB, HIV, conditions caused by long-term ART, co-infections and access to medicines

The new Strategy should aim to remove barriers to accessing medicines and prevention, diagnosis and treatment services for all people affected by the three diseases, including by means of:

- consolidating efforts with Global Fund recipient countries to advocate for reduced prices for medicines through registering them in countries - so that, following transition, the governments are able procure the necessary amounts of affordable quality drugs and ensure the coverage all those people in need for treatment;
- strengthening national programs to prevent mother-to-child transmission of HIV;
- controlling prices of purchased drugs, especially the new and more effective medicines, and supporting communities in price reduction negotiations;
- supporting countries to develop and introduce treatment protocols consistent with the international WHO recommendations;
- facilitating procurement bids through international mechanisms (such as the Green Light Committee initiative for TB, UNICEF and MSF for HIV) that reduce the cost of treatment and increase the transparency of procurement procedures;
- strengthening national capacities in planning and organization of procurement (also with the purpose of reforming the current legal framework) and develop and introduce a simplified drug registration procedure for medicines purchased within Global Fund projects;

- stepping-up support for HCV prevention and treatment as part of programs for people living with HIV;
- providing funding to targeted treatment programs for migrants and persons without citizenship, also through joint purchases under the Global Fund's Special Initiatives Budget;
- focusing on the development of a system of TB care, including non-medical care to encourage and maintain adherence to treatment in order to reduce the rates of MDR-TB in EECA.
- supporting engagement of key populations and civil society in monitoring procurement planning and implementation, particularly during transition to domestic funding for disease control.

#### 4. Human rights, gender equality and vulnerable groups

It is essential that the Global Fund continues to improve its policy on preventing human rights violations, including discrimination based on sexual orientation and gender identity, through:

- development of clear criteria and indicators for assessing the implementation of human rights component in Global Fund-supported projects in the context of responses to the epidemics;
- guarding against financing programs that directly or indirectly support human rights violations, and improving the system of monitoring and direct responses to any of such violations;

To prevent human rights violations, criminalization and persecution of the representatives of key affected populations, such as transgender people, sex workers, men who have sex with men, people who use drugs and people living with HIV, in its new Strategy the Global Fund needs to:

- focus more on the development of programs that are tasked with reforming / creating enabling legal environments for working with vulnerable groups, and programs that address the criminalization of key populations;
- scale-up support for community based monitoring and protection of human rights in the context of the three diseases, as well as for community based monitoring of the quality of services;
- prioritize programs working with law enforcement agencies to prevent police violence, stigma and discrimination against people living with HIV and representatives of key affected populations;
- make it mandatory for Country Coordination Mechanisms to monitor human rights violations and discrimination of key populations in the context of Global Fund programs.

Besides that, the Global Fund should focus its new Strategy on supporting gender-oriented programs that document and address gender inequalities in access to services.

The Global Fund needs to be especially specific about improving access to HIV services for transgender people who are not acknowledged as a priority key population in any EECA country and are basically excluded from HIV/AIDS programs, both supported by the Global Fund and by governments.

It is essential that the Global Fund provides targeted support to building a strong evidence base around HIV epidemiology among key populations who are ignored by national governments, i.e. transgender people, men who have sex with men, sex workers, drug users and migrants.

## 5. Community systems strengthening

It is expected that the Global Fund will develop its responses through acknowledging, developing and strengthening community engagement in programs designed to end the three diseases. To achieve this within the framework of its new Strategy, the Global Fund needs to:

- focus more on the development of CSS components as part of national and regional projects;
- facilitate the introduction of clear and specific CSS indicators at the national level, including qualitative ones;
- expand funding mechanisms such as the ‘dual track funding’ or ‘the NGO rule’ to encourage involvement of community-based organizations and civil society in advancing responses to the epidemics among key affected populations, especially in countries where governments are reluctant to support such activities;
- avoid completing the transition from Global Fund to domestic funding unless the meaningful involvement of NGOs, including community-based organizations, is reflected in national responses to the three diseases. Any transition should only be considered successful if a country has a sustained national system in place (e.g. governmental and/or municipal public contract mechanisms, government grants and/or taxation benefits for businesses and individuals) to support NGOs providing services to vulnerable groups, including prevention, testing, care and support, addressing stigma and discrimination, etc., through national investment;
- expand regional programs to increase capacity building for community-based organizations in the EECA countries;
- under the CSS component, encourage larger-scale and more effective involvement of donors and technical partners in the provision of structured technical support to community-based organizations in order to increase their capacity and foster further development.