

## **Regional Community Action Plan 2017-2020: on Sustainable Access to the Continuum of Care for All in Need in Eastern Europe and Central Asia**

The Regional Community Action Plan sets out priorities and steps of different communities what they commit to achieve jointly. It is not a comprehensive plan of all the work that community groups do. The Community Action Plan aligns voices and interests of our groups including groups of: people who live with HIV; people who use drugs, sex workers, men who have sex with men, transgender people, undocumented and other vulnerable migrants, prisoners and people who live with HIV and are affected by TB, with attention to gender and age. It will be implemented not only by our community groups but also by other civil society groups that support our interests.

### **The Regional Community Action Plan is based on recognition of the following:**

- With appreciation for the great achievements of our countries over the last two decades, we are concerned by major gaps in access to the continuum of HIV care, particularly for key populations in EECA which is one of the only regions in the world where new HIV infections and HIV related deaths continue to grow.
- There is urgent need for increased and sustained state investment in the response to HIV and expenditures on medicines and services must be optimized while assuring quality.
- There are examples of governments contracting NGOs to provide services to key populations in the EECA region and this practice must be expanded.
- Responses to HIV must be aligned with the existing commitments of our countries in UN Political Declarations of 2001, 2009 and 2016, WHO Action Plans for HIV and TB in Europe, the Dublin Declaration and others.
- Human rights are at the core of our agenda and fundamental for achieving the end of the HIV epidemic and better quality of life and social justice for everyone as outlined in the UN Sustainable Development Goals by 2030.
- Removal of legal barriers, especially criminalization of key affected populations is needed to realize their full access to needed services.
- Donor support (especially from the Global fund) was key to building meaningful involvement of our communities and civil society at large in the response to HIV in our countries and its decrease (as the economic status of our countries increases) will require urgent innovative approaches to continue to build and maintain appropriate responses to HIV.
- There are examples of effective cooperation among communities and with governments and non-governmental organizations addressing public health, social welfare, human rights and justice to promote effective and sustainable responses to HIV and these must be further supported.

Collaboration between regional networks in Eastern Europe and Central Asia (EECA)<sup>1</sup> was formalized in a Memorandum of Understanding and Cooperation signed in 2014 in Yerevan. It further evolved through joint initiatives including projects supported by the Global Fund and the Robert Carr

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<sup>1</sup> For the purpose of joint work, the EECA region is understood narrowly as the countries where most of the regional networks operate, while recognizing that similar priorities and coordination work is needed beyond those countries. The following countries are included for the purpose of this document: Armenia, Azerbaijan, Belarus, Estonia, Georgia, Kazakhstan, Kyrgyzstan, Latvia, Lithuania, Moldova, Poland, the Russian Federation, Tajikistan, Turkmenistan, Ukraine and Uzbekistan.

Civil Society Networks Fund which, among others, enable formal and informal meetings of network leaders, the development of common positions and development of further cooperation.

**The following networks are involved:**

- East Europe and Central Asia Union of People Living with HIV (ECUO),
- Eurasian Harm Reduction Network (EHRN),
- The Sex Workers' Rights Advocacy Network (SWAN),
- Eurasian Coalition on Male Health (ECOM),
- Eurasian Women's Network on AIDS (EWNA),
- Eurasian Network of People Who Use Drugs (ENPUD),
- International Treatment Preparedness Coalition of East Europe and Central Asia (ITPCru),
- Eurasian Union of Adolescents and Youth Teenegizer
- TB people
- The Regional HIV Legal Network

This Community Action Plan was developed based on research and consultation with community representatives, regional networks and other stakeholders and stakeholders and serves as the basis for joint planning and fundraising. Different networks can lead on different elements of its implementation and coordination depending on resources available and expertise. ECUO in partnership with EHRN provides overall coordination in consultation with the other networks including regular monitoring of planned events. The Regional Expert Group (consisting of network representatives) will serve as the body for measuring the progress and adjusting the plan on annual basis.

## Goal and Objectives:

### Goal

To coordinate joint community efforts to enhance the quality and sustainability of the continuum of HIV care for all in need in the EECA region.

### Objective 1: Access to effective services

*To contribute to improved access to effective services along continuum of HIV care.*

#### Key milestones:

1. National standards of community-based services (including for example outreach, community-based testing and counselling, community-based adherence support) with strong linkage to medical services are prepared and institutionalized with input from community groups.
2. Communities monitor and promote the update and integration into national guidelines and systems, and donor approach the following elements from WHO/UN recommended standards, including quality control mechanisms, on:
  - Strong linkages of community-based services with medical services;
  - Community-based counseling and testing, self-testing and simplified diagnosis integrating the latest advancements;
  - Integration of HIV, drug dependence, TB and hepatitis services;
  - Client centered adherence support, *including the needs of key populations.*
3. Communities engage in monitoring quality of services through research and engage in dialogue based on findings.
4. Communities will promote the inclusion of specific objectives and indicators for equal access to HIV services for all key populations including undocumented migrants and refugees and prisoners, (who are not directly represented by the regional networks) in national programs and funding transition plans.
5. Stigma and human rights violations are exposed and responded to by communities, national justice systems, UN bodies, and the mass media when appropriate both proactively and in response to emergencies.
6. Communities take action to address HIV criminalization.
7. Communities will engage with partners focusing on health system reform strategies to promote to integration of community health and social services with state services.

### Objective 2: Funding

*To contribute to dialogue on national investments and expense optimization and on donors' policies for responsible transition.*

#### Key milestones:

1. Community groups have joint capacity building on budget advocacy including: potential funding sources; budget cycles; costing; opportunities and needs for optimization in health reform and HIV response; and exercises for reviewing how to prioritize various aspects within HIV and TB responses.

2. Communities are involved in dialogue about funding the response to HIV and represented in relevant key decision making bodies.
3. Challenges and opportunities in HIV, TB, hepatitis and substitution therapy medication policies (registration, reimbursement lists, pricing etc.) are documented and known across community groups.
4. NGO contracting mechanisms for community-based services along the continuum of HIV care established and piloted.
5. Community groups are involved in dialogue about pricing and quality of medicines and diagnostics and propose practical steps such as voluntary and compulsory licensing, technology transfer and prequalification of nationally produced generics, use of international procurement mechanisms and technical support.
6. Donors including the Global Fund extend their work and nuance their transition policies in EECA in response to community involvement.

### **Objective 3: Cooperation**

*To increase coordination and joint work across various community groups at regional and national levels*

#### **Key milestones:**

1. National level community committees are established for promoting effective and sustainable responses to HIV resulting in:
  - Clearly identified advocacy priorities; among communities;
  - Joint positions on key issues;
  - Strategic monitoring, evaluation of HIV responses (including issues related to stigma, human rights and criminalization), budgets, and pricing.
2. Regional networks collaborate to enable synergies especially within large regional projects and on support for national communities, joint advocacy and technical assistance at the regional and global level and avoid duplication through:
  - Clearly identified advocacy priorities; among communities;
  - Joint positions on key issues;
  - Strategic monitoring, evaluation of HIV responses (including issues related to stigma, human rights and criminalization), budgets, and pricing.

## Activities by objectives:

### **Objective 1: Access to effective services**

*To advocate for improved access to effective services along continuum of HIV care.*

#### **Key milestones:**

1. National standards of community-based services (including for example outreach, community-based testing and counselling, community-based adherence support) with strong linkage to medical services are prepared and institutionalized with input from community groups.
2. Communities monitor and promote the update and integration into national guidelines and systems, and donor approach the following elements from WHO/UN recommended standards, including quality control mechanisms, on:
  - Strong linkages of community-based services with medical services;
  - Community-based counseling and testing, self-testing and simplified diagnosis integrating the latest advancements;
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3. Communities engage in monitoring quality of services through research and engage in dialogue based on findings.
4. Communities will promote the inclusion of specific objectives and indicators for equal access to HIV services for all key populations including undocumented migrants and refugees and prisoners, (who are not directly represented by the regional networks) in national programs and funding transition plans.
5. Stigma and human rights violations are exposed and responded to by communities, national justice systems, UN bodies, and the mass media when appropriate both proactively and in response to emergencies.
6. Communities take action to address criminalization.
7. Communities will engage with partners focusing on health system reform strategies to promote integration of community health and social services with state services.

#### **Types of Regional activities:**

- Developing ToRs and providing assistance for community-led monitoring of country status in relation to UN/WHO standards and institutionalization of national standards and equality in access to HIV services (including information on gaps and good practices).
- Identifying and communicating technical support needs of specific countries to the Community Sustainability and Transition Task Force and building capacities of communities for cooperation and advocacy.
- Providing guidance and briefs outlining community arguments for suggested changes in national programs, standards, guidelines and systems
- Providing sample documents of possible standards, including quality control mechanism, and suggested language.

- Dialogue with international partners including the UN on advancing national standards and plans for each country.
- International gatherings including side meetings to other planned events that bring communities, government and international partners for a dialogue and comparison of country status and highlighting of gaps and good practices.
- Developing a joint “emergency response” system/procedure to be agreed by networks and communicated to national community groups
- Facilitating country dialogue for possible joint responses and advocacy.
- Providing tools, briefings and capacity building around opportunities and community role in health system reforms, including using involvement of WHO and World Bank among others to channel the suggestions.

**Types of National activities:**

- Developing ToR for community-based activities for providing effective services along continuum of HIV care.
- Community-led monitoring of country status in related to UN/WHO recommendations and institutionalization of national standards and equality in access to HIV services (including information on gaps and good practices).
- Developing, adapting and implementing of a quality control mechanism of services provided by the community, to ensure the links between prevention programs, testing and treatment of HIV and TB.
- Communities engage in national dialogue with national AIDS and TB councils, CCMs, Ministry of Health and others on national strategic plans and standards, through the developing joint appeals and offers on the formation of national policies and procedures on behalf all national communities (PWH, PUD, SW, MCM & transgender people, people with HIV/TB).
- Community led research, reporting and engagement in dialogue on quality of services.
- Developing a joint “emergency response” system/procedure to be agreed by national networks & communities.
- Monitoring and response to human rights violations.
- Developing and promoting joint “shadow reports” to national and UN bodies on human rights violations when needed and relevant.
- Establishing new partnerships with stakeholders which address health care reform.
- Building capacity of community leaders in national advocacy.

## **Objective 2: Funding**

*To contribute to dialogue on national investments and expense optimization and on donors' policies for responsible transition.*

### **Key milestones:**

1. Community groups have joint capacity building on budget advocacy including: potential funding sources; budget cycles; costing; opportunities and needs for optimization in health reform and HIV response; and exercises for reviewing how to prioritize various aspects within HIV and TB responses.
2. Communities are involved in dialogue about funding the response to HIV and represented in relevant key decision making bodies.
3. Challenges and opportunities in HIV, TB, hepatitis and substitution therapy medication policies (registration, reimbursement lists, pricing etc.) are documented and known across community groups.
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6. Donors including the Global Fund extend their work and nuance their transition policies in EECA in response to community involvement

### **Types of Regional activities:**

- Reports comparing status of progress in countries' domestic investments including in community-based services and treatment and social contracting.
- Reports highlighting good practices (of countries increasing ownership and operationalizing contracting for community services).
- Reports comparing pharmaceutical prices (between EECA countries and with global benchmark & cheapest options).
- Materials, technical support and grants on budget advocacy.
- Materials, technical support and grants for price reduction advocacy.
- Developing partnerships with global allies (like MSF) on price reduction.
- Timely communication to national and local partners on international donor policies and how that affects their countries.
- Materials and technical support for reflection of the future community role in advocacy and support after international funding.
- Support for national advocates in brokering relations with government officials, the UN and donors as needed.
- Monitoring donor policies and actively communicating the EECA community positions towards donors including but not limited through the Global Fund's Communities, NGO and EECA Delegations.
- Reaching out to a dialogue with the EU and other donors to facilitate a continued political dialogue on addressing human rights barriers, health reforms, and need for national investment in community-based services.
- Influencing the AIDS 2018 agenda so that EECA community priorities are addressed.

### **Types of National Activities:**

- Training and planning for budget advocacy work.
- Conducting budget advocacy towards decision-makers at national and local levels (*including involvement of community in key working groups and committees*).
- Engaging in advocacy with other partners for optimization of procurement including using TRIPS flexibilities.
- Assessing and monitoring of medicine related issues like registration, inclusion in essential medicine and reimbursement lists, pricing
- Extracting arguments for advocacy for national investment including costing, review of optimization, price reduction and service prioritization exercises.
- Agreeing on a joint community position regarding its own role and services after donor exit.
- Collaborating with partners in setting plans and the dialogue regarding operationalizing the contracting mechanisms.
- Participation in transition planning, monitoring of transition plans where relevant.
- Meaningful involvement in national AIDS program planning, budgeting and M&E and media work to support advocacy.
- High profile national events.
- Engaging spokespeople etc.
- Documenting good practices.
- Training of community members/NGOs/joint communities in order to prepare them for contracting mechanisms for community-based prevention and treatment support.

### **Objective 3: Cooperation**

***To increase coordination and joint work across various community groups at regional and national levels***

#### **Key milestones:**

1. National level community committees are established for promoting effective and sustainable responses to HIV resulting in:
  - Clearly identified advocacy priorities; among communities;
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  - Clearly identified advocacy priorities; among communities;
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### **Types of Regional Level Activities:**

- Coordinating the exchanging of operational plans on:
  - support to specific countries
  - regional level (EECA) work
  - global advocacy
- Cooperation with the Transition and Sustainability Task Force on technical assistance needs and improving synergy with other regional and national initiatives (those outside the framework of this plan)
- Gathering and sharing information on feedback from national community groups on technical assistance they received. (if this will not already be done by the Transition and Sustainability Task Force)
- Develop a calendar of events (if this will not already be done by the Transition and Sustainability Task Force)
- Coordinating appeals to UN agencies for support in countries (especially related to leveraging of UN convening power to support national dialogue.)
- Facilitating information exchange on progress in countries, good practices, gaps, opportunities among the networks.
- Sharing information on [GFBD DelegationsEECA@googlegroups.com](mailto:GFBD DelegationsEECA@googlegroups.com) or providing information to the GF Observer.
- Monitoring and Evaluation (using the milestones in this Plan)
- Seeing new opportunities for support for continued collaboration
- Sharing lessons learned from regional GF grant support for advocacy and other aspects of work and management

### **Types of National Level Activities:**

- Regular meetings or calls for planning, implementation and M&E of joint work including the identification of priorities, partners, strategies.
- Exchanging information between national community groups on planned national level advocacy work.
- Joint appeals to UN agencies for support for national level work (especially related to leveraging of UN convening power to support national dialogue.) This should be done in line with regional level agreements.
- Exchange of technical support to each other where appropriate.
- Making consolidated appeals for external technical support when needed.
- Mutual support on advocacy efforts (i.e. sign-on etc.)
- Monitoring and Evaluation of common plans.
- Providing input in monitoring of national level milestones of this Plan.
- Raising awareness of individuals and community groups on the importance and ethics of coordination of different community groups.