RCF NARRATIVE REPORT TEMPLATE

FOR CONSORTIUM GRANTEES

ANNUAL REPORT: 2018

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Contents

1. CONTEXT

1.1. Grantee Background

In 2015, three regional community networks, representing people who use drugs (Eurasian Harm Reduction Network, EHRN), men who have sex with men and trans people ([Eurasian Coalition on Male Health](), ECOM), and people living with HIV ([East Europe and Central Asia Union of People Living with HIV](), ECUO), have formed the **Eurasian Regional Consortium** to jointly advocate for better resourcing of HIV response for inadequately served populations (ISPs) in Eastern Europe and Central Asia.

While the Consortium was formed to receive funding from Robert Carr Fund for Civil Society Networks (RCF), the three networks had a history of collaboration, including in implementing the GFTAM-funded Regional Programs and participation in other regional consortia (as described in previous annual reports). The decision to join forces was made strategically, based on complementary capacities, networks and resources that each Consortium member would contribute to the RCF-funded project. Importantly, all three networks shared a vision that addressing a common sustainability threat to HIV services for ISPs in the region called for joint advocacy by affected communities and required equipping community organizations with tools and expertise to effectively engage in budget advocacy.

The Consortium was formalized by signing the Memorandum of Understanding (MoU) in 2015. In January 2016, it was awarded the current RCF grant for the regional project "Money Can Buy Health If You Budget For It", to build advocacy capacity of ISP communities in EECA and to implement joint advocacy activities for expanded funding for HIV services for people who use drugs, men who have sex with men, trans people, and people living with HIV. The Consortium is exclusively funded by the RCF, and the RCF funding catalyzed the Consortium members to pool other financial resources towards the project's advocacy and program goals.

In 2017, the Consortium changed its composition after EHRN faced a governance crisis, that resulted in re-registering the organization as [Eurasian Harm Reduction Association]() (EHRA). EHRA was able to preserve the network, advocacy capacity, funding, committed membership and most of the staff of its predecessor. Given EHRA's recognition in EECA as an expert organization in the field of HIV funding and advocacy, its strong capacity for managing complex projects, community mobilization and capacity building (demonstrated in

implementation of the GFTAM-funded Regional Program), the Eurasian Regional Consortium decided to re-establish EHRA as the lead organization of the Consortium by signing a new MoU in 2017.

All three Consortium members are officially registered network organizations working at the regional level in 29 countries of Eastern Europe and Central Asia (EECA). The Consortium collaborates with other networks and organizations, and in 2018 has actively involved 9 regional ISPs networks and organizations in the Campaign "Chase the Virus Not People", which was implemented partly with the RCF funding. Based on this fruitful collaboration, in 2018, the Eurasian Regional Consortium has successfully applied for the second Robert Carr Fund grant for the project "Thinking outside the box: overcoming challenges in community advocacy for sustainable and high-quality HIV services" with a new composition that reflects a stronger focus on gender.

For the 2018 reporting period, EURASIAN REGIONAL CONSORTIUM is reporting on the following indicators:

Outcome Area	Reported	Indicators
Institutional & Advocacy Capacity Strengthening (Internal)	X	**EI 1:** The legal and policy framework allows for freedom of association for ISP/civil society networks, including their right to establish/register and operate as non-profit/non-governmental entities without discrimination.
	X	**OI 1:** Number of networks with improved basic organizational status.
	X	**OI 2:** Number of networks more representative of their constituencies and more democratically governed.
	X	**EI 2:** ISP/civil society networks experience freedom of expression without harassment by government and other influential entities.
	X	**OI 3:** Number of networks showing increased fiscal capacity and sustainability.
	X	**OI 4:** Number of networks showing increased influence and capacity to unite and mobilize movements.
Influencing Capacity (External)		**EI 3:** ISP (*specify which*) rights are protected by policy and/or legislation, which is enforced and allows for effective redress of violations.
		OI 5: Number of networks contributing to an improved human rights environment for at least one ISP.
		EI 4: ISP (*specify which*) experience full access to rights-based, quality HIV services.
		OI 6: Number of networks contributing to increased access to HIV services and programs.
		OI 7: Number of networks contributing to increased quality of HIV programs and services.
	X	**EI 5:** The funding environment allows for sufficient allocation of resources for HIV prevention, testing, care, treatment.
	X	**EI 6:** The funding environment allows for sufficient allocation of resources for advocacy and other supportive enabling environment programming for ISPs.
	X	**OI 8:** Number of networks contributing to increased and sustainable financing of HIV response including ISP programs.
	X	**OI 9:** Number of networks contributing to improved HIV-related fiscal accountability.

2. INSTITUTIONAL AND ADVOCACY CAPACITY

2.1. Institutionally Stronger ISP and Civil Society Networks and Consortia

EI 1: The legal and policy framework allows for freedom of association for ISP/civil society networks, including their right to establish/register and operate as non-profit/non-governmental entities without discrimination.					
	Major Progress	Minor Progress	No Change	Minor Regress	Major Regress
Total # of Networks Reporting	Give the total number of networks reporting each category of change for this indicator.	1	1	1	
		Three new trans people organizations in Armenia have been established and grow in visibility among HIV organizations.	ISP organizations across the region continue to face similar challenges in getting registered and in operating as in previous years.	Politically motivated closure of HIV prevention organizations in Russia and criminalization of homelessness in Hungary, that directly affects many ISPs.	

In 2018, we saw the continued trend of increasingly hostile environment for organizations representing ISP communities. While we did not observe introduction of new laws or regulations that would explicitly prevent registration of organizations of people who use drugs, living with HIV or LGBTQI people, the existing anti-civil society laws continue to be targetedly applied to ISP groups. Persistent stigma and criminalization of drug use, sex work, LGBTQI identities, and of HIV transmission make ISPs easy political scapegoats in the context of rising right-wing populism, which complicates ISP-led advocacy. In addition, after the Hungarian government forced the Central European University to move to Vienna it created risks of continuation of its summer schools and courses on drug policy and other human rights issues, ISP activists lost an important training ground.

Despite the overall hostile climate, there are instances of new ISP groups getting registered, but the process is often challenging, e.g. three new trans people organizations now operate in Armenia, however, they were registered as general human rights or arts groups rather than as trans people organizations to avoid excessive scrutiny in the context of transphobia.

OI 1: Number of networks with improved basic organizational status.				
	Level 1	Level 2	Level 3	Level 4
Total # of Networks Reporting	Give the total number of networks reporting each level of achievement for this indicator.		2	1
			EHRA maintained a team of full-time staff, implemented 9 projects funded from 7 different sources, as well as strengthened its governance structure by	ECOM has maintained a core team of full-time paid staff for over two years, introduced a formal steering committee, developed a strategic

			democratically electing a new Steering Committee and appointing Advisory Board.	plan, and improved internal communication.
			ECUO has streamlined its program management and overall operations and has established a more democratic governance structure.	

While ECOM is the only Consortium member that meets Level 4 criterium of having a core team of full-time paid staff for at least two years, all three Consortium members are officially registered organizations, have qualified full-time staff, and are able to operate with funding.

Less than a year after its registration, EHRA had a fully capacitated team of core programmatic and support staff, confident leadership, and a strategy framework, enabling it to carry out its funded projects and to maintain its reputation as a leading advocate for sustainable harm reduction and HIV programs in the EECA region. The Association's Secretariat currently has 13 full-time staff members and implements 9 advocacy projects.

In addition to maintaining its core team for over 2 years, thanks to RCF support, ECOM had start a strategic planning, an ethics code and secured funding from the GFTAM in 2016. The strategy plan and ethics code were finalized in 2017. Introduction of the quarterly reporting on strategy implementation has improved accountability between the team, the Steering Committee and the membership, and has strengthened the overall management.

Despite reduced funding, the ECUO was also able to retain a core group of staff equipped with skills and expertise required to manage its core programs and implement its new fundraising and sustainability strategy.

OI 2: Number of networks more representative of their constituencies and more democratically governed.				
	Level 1	Level 2	Level 3	Level 4
Total # of Networks Reporting	Give the total number of networks reporting each level of achievement for this indicator.			3
				ECOM's Steering Committee is 100% comprised of representatives of MSM and trans people Communities and has improved systems of internal and external accountability.
				ECUO is governed by the General Assembly, a rotating Board and a Steering Committees, which are 100% made up of representatives of PLHIV.

				EHRA now has a functioning governance system, based on principles of transparency, representation and democratic decision-making. The Association has 251 members from 29 countries, a newly elected steering committee representing sub-regions and the community, and the advisory board and treasurer.

By the end of 2018, all three networks participating in the Consortium had put in place governance structures that operationalized their shared values of transparency, accountability, and meaningful participation of community members in key decisions.

By the end of 2018, EHRA had in place a functional Steering Committee elected by the Association's 251 members, reflecting it regional and community representation (1/2 of the SC members are people who use drugs), an expert Advisory Board, and a newly-revisited Strategic Framework for 2018-2019. Openness and clarity of the process was instrumental for regaining the trust and support of EHRA's partners, funders, and members.

In 2017 ECOM has formalized its Steering Committee, which 100% consists of representatives of MSM and trans people communities, while 80% of the Coalition's members are community organizations. Thanks to RCF support, ECOM has regular in-person Steering Committee meetings and developed a system of reporting, which improved overall governance and accountability towards Coalition's s members.

By the end of 2018, ECUO has finalized decentralization of its governance system. It is governed by the General Assembly, and in between the GA meetings, the decisions are made by the democratically elected Board and the two Co-Chairs, made up 100% of people living with HIV. In ECUO's own assessment, the new system has made the decision-making more transparent and coordinated. The opportunity to convene in-person Board and SC meetings was key for developing governance systems that reflected the operational needs of the Union.

2.1.1. Lessons Learned on Building Institutionally Stronger ISP and Civil Society Networks and Consortia

Transparent and effective governance and management systems are essential for strong networks, particularly at a time when organizations of criminalized and marginalized populations are operating in increasingly hostile political environments. However, meaningful organizational development requires financial, time, and staff resources which are challenging to carve out without access to flexible, long-term, unrestricted funding. During the impact reflection meeting, the three Consortium members identified the following key lessons:

- **Being part of a bigger initiative and learning from each others**: recognition and support from other regional networks helped boost the Consortium members' confidence during the time of transition. It was extensive learning about internal decision making and effective network management which

helped consortium members to understand ways for development and ensuring more transparent governance in their own networks. Joint program activities provided opportunity to know resources and experts of each other more, not duplicating but strengthening joint working teams with unique capacities from different networks (consortium members).

- **Pooling resources**: All members agree, that coordinated work within the Consortium allowed members to strategically combine organizational and staff resources in implementing joint activities. Consistent communication within the Consortium provided a constructive environment for networks to align their own program- and grant-management systems and processes, which both benefitted the project and strengthened member organizations.

- **Access to funding**: As the funding environment changes, participation in a Consortium based on shared advocacy goals, vision and approaches increases chances of securing funding. The Consortium members have used the experiences and models of collaboration under the RCF-funded project to successfully apply for GFTAM Regional Program and other consortium-based funding.

- **Flexibility and core funding**: RCF flexibility during EHRA's re-registration enabled to use it as an opportunity to build an organization with a stronger legal and governance status to ensure it is better protected in the future. Access to core funding provided the necessary long-term stability to plan for and to implement meaningful governance transitions while maintaining programs and fulfilling our obligations to our networks, funders and partners. Some of the core support was also used towards fundraising to secure additional funding and increase organizational sustainability.

2.2. Improved and sustainable advocacy capacity for ISP and civil society networks and consortia

THE INDICATOR BELOW IS REQUIRED: Based on the data compiled in the LEAD GRANTEE Indicator Summary Workbook and the results of your consortium impact reflection processes, complete the EI 2 indicator table as prompted by the red text.

EI 2: ISP organizations experience freedom of expression without harassment by government and other influential entities.					
	Major Progress	Minor Progress	No Change	Minor Regress	Major Regress
Total # of Networks Reporting	Give the total number of networks reporting each category of change for this indicator.	1	2		
		After the change of government in Armenia, ISP organizations feel more confident about participating in public policy discourse.	Harm reduction organizations continue to operate in an ambiguous legal environment. In Russia, Belarus, Ukraine Kazakhstan and Lithuania criminalization of drug use remains an easy tool to		

			silence harm reduction advocates, who criticize the state response to HIV. 2018 was earmarked by some warning signs of restrictions in traveling of SCO and harm reduction activists to the Union State (Russia and Belarus) as an outcome of the advocacy aimed to reform drug policy.		
			ECOM reports continued attacks against public events organized by LGBTQI groups across the region.		

In 2018 we see the continued trend of silencing organizations and activists that represent criminalized and 'undesirable' populations, both by arbitrary enforcement of anti-civil society laws, and by condoning or tacitly encouraging police and right-wing violence against LGBTQI people, people who use drugs and sex workers. This disrupts civil society advocacy for the rights of their communities (e.g. violent attacks on LGBTQI groups in Armenia and Ukraine, and a suffocating fine for a vocal harm reduction advocate in Russia). In Estonia, state-funded HIV service providers are discouraged from engaging in advocacy, which limits their ability to push for greater effectiveness of HIV programming for ISPs, particularly for MSM. Moreover, 2018 was earmarked by some new warning trend of restrictions in traveling of SCO and harm reduction activists to the Union State (Russia and Belarus) as an outcome of the advocacy aimed to reform drug policy.

While the Regional Networks that are part of the Consortium were not directly affected by the closing space for freedom of expression – none of the advocacy publications or events produced by the Consortium members were directly challenged by local or national governments – these developments do affect their members among local organizations of people who use drugs, MSM and trans people, and people living with HIV. There are, however, some reasons for cautious optimism, including a greater openness to cooperate with civil society demonstrated by the new government in Armenia and decriminalization of HIV transmission in Belarus at the very end of 2018.

OI 3: Number of networks showing increased fiscal capacity and sustainability.				
	Level 1	Level 2	Level 3	Level 4
Total # of Networks Reporting	Give the total number of networks reporting each level of achievement for this indicator.		1	2
			ECUO's overall funding has diminished as compared to previous year. The priority is to secure a new core support now that the GFTAM grant has expired. RCF bridge funding will be essential to achieve that.	EHRA has secured funding for 2019, including 4 grants from different funders, including 2 core support grants (GFTAM and RCF, both of which are consortium-based regional programs, with EHRA as lead). Despite the governance crisis, EHRA was able to maintain the trust of key funders, including the EU. None of the funders account for more than 30% of EHRA's funding.
				ECOM's 6 current grants will be renewed in 2019, two of these grants (RCF and GFTAM) include core funding.

All three networks agree, that consortium-based approaches have become an important sustainability strategy. Eurasian Regional Consortium has enabled community networks to practice a model for collaboration across identity silos by articulating bigger-picture advocacy goals affecting all ISPs (e.g. sustainability of HIV programs) and by piloting a coordinated program management, including rotating leadership and regular coordinating calls. This approach has been used by participating networks when applying for other consortium-based grants, including from GFTAM and other RCF grants.

However, the networks did feel the negative impact of reduced advocacy funding. Funding that is available tends to be project-based for specific initiatives and rarely includes core support, with few exceptions, such as RCF and GFTAM Regional Program. ECUO, in particular, has seen its overall budget reduce after the GFTAM grant expired and is working now to identify other sources of core support. Overall, all three networks have used the RCF core funding to support their fundraising efforts by maintaining key paid staff and/or engaging resourcing experts.

OI 4: Number of networks showing increased influence and capacity to unite and mobilize movements.				
	Level 1	Level 2	Level 3	Level 4
Total # of Networks Reporting	Give the total number of networks reporting each level of achievement for this indicator.		3	

				Consortium members launched regional *Chase the Virus Not People* campaign. 9 regional networks joined the campaign, which calls attention to the catastrophic impact of criminalization on resourcing HIV services for ISP communities. Campaign concept, planning, as well as idea for naming and branding came from ECOM. EHRA has handed over from ECUO some admin functions on campaign coordination and provided staff member that was coordinating the campaign.
				ECOM in daily partnership with Eurasian Regional Consortium has provided active input in conceptualizing the idea and implementation of the joint campaign "chase the virus" It has mobilized lots of "ActivEasts" during the networking zone activities and throughout entire campaign.
				ECOM published [Handbook](#) for leaders and activists "How to improve cooperation between communities of key affected populations for effective joint advocacy"

Through small grants, joint trainings and advocacy initiatives, the Consortium succeeded in creating a platform for diverse ISP communities to mobilize around shared goals and to develop practical skills for targeted advocacy. At the impact reflection meeting, all Consortium's national partners in Armenia, Estonia, and Kyrgyzstan unanimously acknowledged that acting in solidarity strengthen their overall efforts: "*Organizations of three different communities sat at one table, working as one team. In made our voice stronger: if one group can be ignored, when all groups come together, they cannot be ignored. Before [the project], every community only minded its own interests*" (Members of the national consortium in Armenia).

Building on these efforts mobilization efforts, the Consortium members have launched a regional *Chase the Virus not People* campaign, that brought together 9 regional networks of ISPs. The campaign was designed to attract attention to the catastrophic impact of criminalization on resourcing HIV programs for ISPs and was implemented with RCF core funds and other funding. It has equipped communities with campaigning tools and skills and set an important example of a cross-movement effort. All participating networks recognized that being part of a bigger platform added visibility and credibility to their advocacy and committed to continuing

the campaign at the national or regional levels: CBOs in Estonia have mobilized for national-level advocacy, while EWNA launched a regional effort focusing on women, with support from ECUO.

2.2.1. Lessons Learned on Improved and Sustained Advocacy Capacity for ISP and Civil Society Networks and Consortia

Mobilizing diverse communities for joint advocacy is time and effort intensive. However, if successful, it enables ISP networks to combine staff and knowledge resources; equips them with practical skills in articulating and achieving advocacy goals that benefit all ISP communities; and, importantly, encourages communities to overcome internal competition in order to fundraise together. As an example of collective experience of mutual understanding and effective cooperation can be brought a joint regional training conducted in 2017 on capacity building of communities' coordination for improved participation in national HIV governance. During the training, different ISP communities lively discussed principles of cooperation and communication and shared best practices of intercommunity cooperation to improve effectiveness of joint advocacy. Results of those discussions fed Handbook for leaders and activists "How to improve cooperation between communities of key affected populations for effective joint advocacy" published in 2018.

As all involved networks noted, a collective voice is difficult to dismiss and joining forces made their overall advocacy stronger. In our analysis, several factors played a role in successful mobilization. Externally, the threat to sustainability of HIV programs for ISPs due to funding transition in EECA has created a sense of urgency and provided an incentive to collaborate rather than compete. Consortium's initiatives – the small grants, consultative process around setting advocacy goals, conducting joint trainings on budget advocacy tools and approaches, regional *Chase the Virus, Not People* Campaign – created a concrete platform and instruments for organizing. Regular coordination calls and meetings served as a glue for mobilization, ensuring that all participating networks were on the same page. In addition, the regional Campaign, that was eventually joined by several networks outside the Consortium, generated the necessary excitement, sense of solidarity, something bigger to be part of. At the same time, it can be challenging and time consuming to align different priorities and goals of networks representing diverse ISPs and arrive at a shared vision. Similarly, it is difficult to engage communities beyond leaders: a continued effort is needed to engage rank-and-file activists to participate meaningfully, which requires sustained funding.

3. INFLUENCING RESULTS

This section reports on the influencing capacity that has been strengthened in your consortium during 2018. For each outcome, corresponding to the RCF Theory of Change, there is one or more environmental indicators which capture key changes in the environment(s) in which your consortium works. These environmental indicators are meant to provide context for achievements (or lack thereof) presented in the outcome indicators which follow.

Please note that you do not need to report on all of the indicators in this section; you should report on indicators as previously agreed with the RCF Secretariat during your workplanning process.

At the Lead Grantee level, you are responsible for reporting on all indicators chosen by your consortium members. For any indicators you are not reporting on, please delete both the corresponding instructions and the table.

3.3 Resources made available and spent properly to create better conditions for ISPs with regards to HIV and human rights

THE INDICATOR BELOW IS OPTIONAL: Based on the data compiled in the LEAD GRANTEE Indicator Summary Workbook and the results of your consortium impact reflection processes, complete the EI 5 indicator table below as prompted by the red text.

EI 5: The funding environment allows for sufficient allocation of resources for HIV prevention, testing, care, and treatment.					
	Major Progress	Minor Progress	No Change	Minor Regress	Major Regress
Total # of Networks Reporting	Give the total number of networks reporting each category of change for this indicator.	1	2		
		In Armenia the state has committed to increase its share of funding for ARVT and OST treatments. Government in Kyrgyzstan has committed to increasing its expenditure on HIV care.	Domestic funding allocations remain inadequate across the region and cover less than 50% of the need.		
			Coverage of targeted HIV prevention and treatment services for MSM and trans people in the region remains minimal or non-existent due to high levels of		

			homophobia and transphobia at the state level.		

While transition to domestic funding in EECA is underway, it is proceeding at an unacceptably slow pace. Where state funding is available, it is largely inadequate: the total resources allocated for HIV programs in the region cover [less than 50% of the total need](#).

Intense criminalization and stigmatization of ISP groups means that earmarking state budged for these "undesirable" groups is politically inexpedient. In many countries, there are no effective mechanisms for the state to directly fund community-based organizations (CBOs) for HIV prevention among ISPs and governments are slow in developing them. Despite some experiments in social contracting and other forms of state funding for CBOs in Kyrgyzstan, Ukraine, Kazakhstan and other countries, requirements for receiving state funds remain prohibitively high: CBOs are often required to provide services first and get compensated later or to have financial reserves that equal the amount of the state grant, while few ISP organizations have such resources. The potential of CBOs to provide innovative, culturally appropriate HIV prevention services to their communities remains severely underutilized or directly undermined.

At the same time, there are some examples of stronger representation of ISP communities in policy processes: in Kyrgyzstan, community representatives are formally included in the national HIV decision-making process. In Estonia, national consortium continues to engage the National Institute of Health Development on improving access to community based and low threshold programs for ISPs. In Armenia there is a new openness following the change of government in 2018, which appointed several pro-civil society government members.

THE INDICATOR BELOW IS OPTIONAL: Based on the data compiled in the LEAD GRANTEE Indicator Summary Workbook and the results of your consortium impact reflection processes, complete the EI 6 indicator table below, as prompted by the red text.

EI 6: The funding environment allows for sufficient allocation of resources for advocacy and other supportive enabling environment programming for ISPs.					
	Major Progress	Minor Progress	No Change	Minor Regress	Major Regress
Total # of Networks Reporting	Give the total number of networks reporting each category of change for this indicator.		3		
			Lack of data on HIV among MSM and trans people inhibits effective advocacy for investing in targeted programs.		

			Increased uncertainty among CBOs and networks about availability of (international) funding for advocacy to improve policy environment for HIV response.		

Advocacy efforts to improve legal and human rights environment for HIV response in the region remain to be funded only by international donors. Key funders increasingly prioritize regional or multi-country advocacy initiatives, which encourages regional networks to collaborate (e.g. by forming consortia) and to streamline their efforts. While this shift has contributed to a more targeted response to human rights concerns, the uncertainty about continued support for advocacy, both at the regional and national level, is a growing source of anxiety for many advocates.

Overall, there is a sense among community networks, that while funders place increased emphasis on community participation in domestic funding decisions (a good thing), they do not sufficiently involve communities in forming their own funding agendas. Communities delegations to the Boards of key funders often play a formal rather than substantive role and their voice is not always heeded. A recent example includes a joint statement by community delegations expressing concerns of the new Global Fund's Eligibility Policy that was left without response. Another concern is the impact of volatile political situation on funders: while PEPFAR conducted community consultations to inform its funding priorities and reflected recommendations in the call of proposals, those initiatives remained unfunded following the political changes in the U.S.

THE INDICATOR BELOW IS OPTIONAL: Based on the data compiled in the LEAD GRANTEE Indicator Summary Workbook and the results of your consortium impact reflection processes, complete the OI 8 indicator table below as prompted by the red text.

OI 8: Number of networks contributing to increased and sustainable financing of HIV response including ISP programs.				
	Level 1	Level 2	Level 3	Level 4
Total # of Networks Reporting	Give the total number of networks reporting each level of achievement for this indicator.	2		1
		Chase the Virus Campaign, led by the Consortium and joined by 6 other regional ISP networks, brought into focus the impact of criminalization on the inadequate investment into HIV response among ISP in EECA.		The collaboration within the Regional Platform for Policy Reform, launched by ECOM together with the regional UNAIDS office, has contributed to increased state funding commitments in line with CBO recommendations in Macedonia.

		At the proposal of the Consortium, WHO held a policy dialogue with health ministers in the lead up to the AIDS2018 on sustaining HIV response in EECA. The meeting resulted in a statement of commitment to sustainable, innovative and evidence-based HIV responses.		
		At the initiative of the Consortium, WHO held a policy dialogue with health ministers in the lead up to the AIDS2018 on sustaining HIV response in EECA. The meeting resulted in a statement of commitment to sustainable, innovative and evidence-based HIV responses.		

Small grants and capacity building have enabled members of national ISP consortia in Armenia, Estonia and Kyrgyzstan to meaningfully engage in evidence-based advocacy at the local and/or national level. In Armenia, community involvement in national bio-behavioral surveillance (IBBS) resulted in more accurate HIV prevalence data, which was one of the factors contributing to the state commitment to increase funding for OST and ARVT programs. As an example of strategic synergy of resources, Consortium members in Armenia have combined funding available through the RCF and the Global Fund to organize the first national communities conference on effective HIV response, which received a lot of media attention and contributed to build momentum for increased state investment.

The Consortium's regional *Chase the Virus, Not People* campaign was successful in attracting attention to the impact of criminalization on inadequate resourcing of HIV programming for ISPs and brought into focus the urgency of funding crisis in EECA. The campaign urged international funders, UN agencies and policy makers to commit to creating a better legal environment for HIV programs for ISPs and for including communities in funding decision making.

THE INDICATOR BELOW IS OPTIONAL: Based on the data compiled in the LEAD GRANTEE Indicator Summary Workbook and the results of your consortium impact reflection processes, complete the OI 9 indicator table below as prompted by the red text.

OI 9: Number of networks contributing to improved fiscal accountability.				
	Level 1	Level 2	Level 3	Level 4
Total # of Networks Reporting	1	1	1	

In Kyrgyzstan, CBOs join the national Budget Advocacy Coalition and make plans to monitor the 1st national procurement plan of the Health Ministry to ensure that HIV and TB budget lines reflect community needs.	ECUO has adapted 'test & treat" concept to the region's needs, making an economic argument that starting ART right after positive test is cost efficient as it prevents risks of transmission and higher treatment costs later.	ECUO has conducted a community-led monitoring of over-the-counter availability of naloxone in Ukraine; based on the findings, the Ministry of Health has committed to ensure availability of naloxone in pharmacies.	
National partners trained on budget monitoring and advocacy (EHRA), on gender-based budgeting (ECUO), and on community-based monitoring (ECUO),	Following trainings by ECUO on gender-sensitive budgeting, CBOs in Armenia advocated for inclusion of gender sensitive indicators in the transition plan.		
EHRA published Budget Advocacy Guide for community activists, based on best practices and experiences of budget advocacy capacity building in EECA.			

A combination of trainings, such as Regional ToT for leaders/activists of community-based organizations to engage with a combination of linked Investment Assessment (IA) and Service Assessment (SA) (2016), Regional Training on budget monitoring and advocacy (2016), Regional training "Mainstreaming Human Rights into HIV Advocacy. Human rights and gender sensitive budgeting" (2018) technical assistance, and direct participation in advocacy through all three years of the project, contributed to increased savviness of ISP organizations in EECA in using community-based monitoring as a tool to hold governments accountable on their budget or policy commitments and to develop 'asks' for change by documenting gaps and proposing solutions.

Locally, CBOs in Kyrgyzstan have reported confidence in their ability to monitor the Kyrgyz Health Ministry's first procurement plan and ensure that the TB and HIV budget lines reflect the needs of their communities. They also demonstrated an increased understanding of the budget decision making at the national and local level, including the need to reform the law that prevents local authorities in Kyrgyzstan from budgeting for health and makes them rely on national health budget instead.

At the national level, CBOs in Armenia, with support from ECOM, have participated in a community-based monitoring of access to HIV treatment and developed recommendations for including gender-sensitive indicators into the plan for transition to domestic funding. Recognizing the usefulness of community-based monitoring, participating CBOs expressed interest in monitoring access not only to clinical services (ART and OST), but also to ISP services provided by community organizations as part of budget advocacy.

At the regional level, as part of the larger advocacy for adequate investment in ISP services, EHRA has collected data for 26 EECA countries on the high cost of incarcerating people who use drugs vs. the cost-effectiveness of providing prevention and treatment services in the community. ECUO worked with community

partners to promote 'test & treat' approach, making an economic argument that early onset of HIV treatment saves costs in the long run.

3.1.1. Lessons Learned on Resources made available and spent properly to create better conditions for ISPs

- *Based on the experience of your consortium, what are the most effective strategies to influence positive change on sustainability and domestic resource mobilization and accountability?*

The Regional Consortium was created to bring three communities together for joint advocacy at the regional and national level. This required developing a model for collaboration between the three national networks who formed the Consortium, and between the diverse community organizations at the local/national level. A few lessons from the process were articulated at the impact reflection meeting by all participating organizations:

- For regional networks, aligning internal grantmaking, project management and reporting processes was as important as articulating a shared vision of change. By agreeing to make grants decisions and to review the progress reports jointly, the Consortium's members were able to see beyond individual communities and to develop a nuanced understanding of the bigger-picture processes in the three focus countries.

- Joint trainings and capacity building on community monitoring and budget advocacy equipped national CBOs with tools to develop shared advocacy strategies. However, in retrospect, Regional Consortium members agreed that starting with trainings on collaborative approaches rather than with technical trainings would have helped to develop cross-movement solidarity faster.

- Conducting monitoring activities in the first year of the project was key for setting priorities, articulating asks, and identifying audiences for further advocacy, while the long-term nature of the project (3 years) allowed to adjust and fine-tune those goals as the context changed.

- Some CBOs needed more time to grow and develop enough skills to effectively engage in budget advocacy. In retrospect, setting small, achievable goals rather than articulating a bigger-picture vision proved to be a better strategy for smaller, local CBOs, e.g. in Kyrgyzstan or Estonia.

- Overall, increased capacity among CBOs to plan for and generate evidence through community-based monitoring contributed to stronger advocacy. However, persistent stigma remains a barrier for ISP community members to come forward with individual complaints which could lead to change within specific institutions, e.g. cases in Estonia, where several OST clients refused to file individual complaints for fear of further harm despite status disclosure and other rights violations.

4.   OTHER KEY ACHIEVEMENTS

Did your consortium have any other key achievements or outcomes that were important to your network members and/or the ISP(s) you represent, but which are not captured in the Outcome Indicators above? If so, please described in one or two paragraphs.

Collaboration within the Consortium enabled consortium members to carry out initiatives that complemented and enhanced activities originally planned within the grant. By pooling resources available through other funding, Consortium members were able to expand the scope of projects funded both by RCF and by other donors.

Regional campaign Chase the Virus not People, described in earlier sections, emerged organically from regular communication between participating networks on strategic goals, which led to shared understanding of criminalization as a key barrier for financing HIV programs for all ISPs. The Campaign, together with other efforts to increase visibility of HIV funding crisis in EECA, contributed to the sense of urgency that informed EJAF's [Emergency Fund for Key Populations in EECA](#) (while we cannot attribute EJAF's decision directly to the outcomes of the project, the Consortium's evidence-based advocacy and campaigning were among the factors that paved the way for the Fund).

Increased skills and knowledge: thanks to a program of trainings, technical assistance and advocacy campaigns, budget advocacy became a household term in the region and a growing number of CBOs developed the skills, experience and confidence to track local budgets and demand a seat at the table on funding decisions. To solidify practical skills gained by community networks, EHRA, ECOM and ECUO have summarized their experiences and best practices in the [budget advocacy guide](#), the [Handbook for leaders and activists "How to improve cooperation between communities of key affected populations for effective joint advocacy"](#) and the [toolkit for community monitoring of quality of HIV services](#). Both tools were produced in a consultative process and are meant as technical handbooks to guide ongoing and future advocacy efforts by ISP communities.

Cost of criminalization is another example of an initiative born out of the momentum generated by the RCF project. It mobilized the community to collect data for advocacy for reducing the cost of over-criminalization of people who use drugs and investing in HIV prevention and treatment instead. Similarly, the *WHO dialogue with Health Ministers*, initiated at the proposal from ECUO and other Consortium members, is an example of strategic use of the opportunity of the international AIDS2018 Conference to advance the priorities of the RCF project.

And lastly, *Regional Platform for Policy Reform (RPPR)*, launched by ECOM with RCF and GFTAM funding, contributed to Macedonian government committing to bring its investments in HIV programming in line with CBOs recommendations.

5.   CASE STUDIES

Case study 1.

Outcome area: *Resources made available and spent properly to create better conditions for ISPs with regards to HIV and human rights.*

Social security – including access to housing, nutrition and other basic needs – is equally crucial for the quality of life of people affected by HIV as access to high quality HIV treatment and prevention services. In Kyrgyzstan, as in many other countries with concentrated HIV epidemics, people living with HIV are more likely to live in poverty and lack basic resources. Unstable or inadequate housing, poor nutrition or fragmented social connections have a detrimental impact on individual's ability to access and adhere to HIV treatment.

While people living with HIV are prioritized as a vulnerable group for some social benefits guaranteed by the local or municipal governments, many patients face barriers in accessing these benefits due to stigma, discrimination, or lack of information on where and how to access these services.

Members of the national consortium in Kyrgyzstan have prioritized engaging their community members in direct advocacy at the local level on issues that directly affect them. Trainings on community monitoring have showed how community members can observe allocation of basic services and benefits and take direct action to rectify injustices. In a small town of Kara-Balta access to heating in winter is a matter of basic survival, particularly for families or individuals who might be disowned by their families due to stigma attached to HIV, drug use or being MSM or trans people. Thanks to trainings, community members were able to advocate – by documenting discrimination, submitting complaints, and direct case management - for access to subsidized coal for heating for 6 most disadvantaged families and individuals living with HIV, reducing their level of stress and increasing their chances to adhere to their HIV or TB treatment.

While a hyper-local change, it had an empowering effect on community members by demonstrating the power of collective action to overcome barriers created by stigma to access resources that are already available to the community. Focusing on issues of direct concern to the community and setting immediate, achievable goals has enabled the national consortium members to mobilize activists and build their capacity to engage in advocacy at a higher level.

Case study 2.

Outcome area: *Improved and sustainable advocacy capacity for ISP and civil society networks and consortia.*

Over-criminalization of people who use drugs, including arrests and incarceration for possessing extremely small doses of drugs for personal use, is a key driver of HIV transmission and one of the major barriers for engaging people who inject drugs in HIV prevention and treatment services in many EECA countries, including Armenia. Decriminalization of drug possession is one measure that can significantly improve HIV response among people who use drugs.

In April 2018, the government of Armenia initiated a review of the schedules of illicit drugs in the criminal code, which considers possession of extremely small amounts of drugs (significantly less than average daily dose) a criminal offence.

Recognizing the opportunity, members of the national consortium in Armenia have mobilized to develop an alternative proposal to decriminalize possession of drugs for personal use, as part of their larger advocacy at the national level for scale up of ART and OST programs. Importantly, community organizations representing people who use drugs (Potential of Awakening) and MSM/trans people (PINK Armenia) pooled their resources together for a joint effort, reflecting their understanding that criminalization affects not only people who use drugs but all marginalized populations.

The Consortium members conducted community-led research to document the impact of overcriminalization of people who use drugs on access to HIV services and drafted a policy brief that analysed international legislation and court practices, comparing Armenian legal norms to those of Russia and European states, and their impact on health. The policy brief built an argument that possession of drugs is a symptom of addictive disorder that requires a public health response rather than incarceration, and that changing legal norms would advance public health and economic priorities in Armenia.

The in-depth research and the policy brief were submitted to Ministry of Health and Ministry of Internal Affairs. While the review of criminal code did not result in full decriminalization of possession, the updated drugs schedule increased the minimal doses for personal dose, reducing the burden of criminalization on some drug users. While the fight continues, this is an important example of community-led evidence-based advocacy to amend harmful policies, done by a coalition of organizations representing different communities. The policy brief received a lot of attention, including from the Ministry of Health, and opened space for further advocacy to improve HIV response among ISPs.

6.   VALUE OF THE CORE FUNDING FROM THE ROBERT CARR FUND

Stability and retaining key staff: Availability of core funding was critical for all Consortium members to avoid staff drain and to retain highly skilled, experienced and committed staff who could effectively carry out key fundraising and programmatic activities. RCF funding has enabled EHRA, the newest of the three networks, to re-engage its members and build an energized, active, and involved membership, that plays a direct role in all EHRA monitoring and advocacy activities. EHRA has also used RCF support to invest in communications, develop a new website, and translate advocacy materials so that its members have access to information for their work. EHRA has also used RCF funding to complement some of its work under the GFTAM regional grant by expanding its activities to Armenia, Kyrgyzstan, and Estonia.

Improving governance and sustainability: Both ECOM and ECUO have used RCF core support to hold in-person Steering Committee and Board Meetings, with was particularly importance as both organizations were going through restructuring of their governance systems. ECUO, that lost some of its funding after the end of the GFTAM project, was able to engage resourcing experts to develop a new fundraising policy to increase its sustainability.

Complementing GFTAM activities: All three networks have used GFTAM funding to complement or expand some of their activities funded by GFTAM regional programs, e.g. by bringing new partners on board or by including RCF grant countries (Armenia, Estonia, and Kyrgyzstan) into some of the activities planned under GFTAM grant.

Many of the outcomes described in Chapter 4 (Other Achievements) were possible thanks to core funding. Also, the Consortium has allocated some of the RCF core support to help ISP community organizations adjust to changing funding landscape: in 2017 and 2018, in addition to capacity building originally planned within the project, the Consortium has organized a series of practical trainings on fundraising, identifying potential sources of funding, and preparing effective proposals.

7.   REPORT PRODUCTION

In line with the recommendations of RCF, the Consortium have outlined a reporting plan that would give an opportunity for all project participants – the staff of the three networks of Eurasian Regional Consortium and of the 9 CBOs-members of the national consortia in Armenia, Estonia and Kyrgyzstan – to participate in the reflection process in a meaningful way and to benefit from the learning. Besides preparing the reporting documentation, all involved organizations met for a two-day impact reflection meeting in December 2018, in Kiev, Ukraine, to jointly review progress, challenges and lessons learned. In addition, the Consortium has hired an external consultant to guide the process and to draft the final narrative report, consolidating the insights from the written documentation and the collective analysis at the reflection meeting.

Given the innovative nature of the project that for the first time brought three different communities together for a structured collaboration on a shared issue, the reflection meeting was seen not only as a part of formal reporting process, but as a genuine opportunity to collectively assess the path taken by the Consortium members and the impact this collaboration had on the networks and their communities as a whole. Unfortunately, due to restrictions on travel to Ukraine for Russian citizens, one of the EHRA staff members could not attend.

EHRA, as the project lead, took responsibility for coordinating the reporting process. Once the draft of the narrative report was completed, it was shared with all the participants for comments and additions. Once the report was endorsed by all three Consortium members and deemed final, EHRA submitted it to RCF with all the accompanying documentation. The whole process – from preparing for the reflection meeting, to completing the written documentation and finalizing the final report – took about a month and a half.

The consortium members found that the reporting forms were somewhat streamlined and simplified in the third and last year of the project, while the opportunity for a face-to-face collective reflection was valuable not only for the reporting purposes, but for an overall appraisal of the model for cross-movement collaboration. All participants agreed, that it has resulted in valuable and lasting partnerships that have strengthened collaboration within other advocacy and fundraising initiatives of the Consortium members.