Financing for Health in Latin America and the Caribbean: Advocacy Strategies for Effective Resource Mobilization


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Forum Report

Financing for Health in Latin America and the Caribbean: Advocacy Strategies for Effective Resource Mobilization

March 23, 2016 Panama City, Panama
<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>AHF</td>
<td>AIDS Healthcare Foundation</td>
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<tr>
<td>CARICOM</td>
<td>Caribbean Community and Common Market</td>
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<td>CARIFORUM</td>
<td>The Caribbean Forum</td>
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<td>COHSAD</td>
<td>CARICOM Council for Human and Social Development</td>
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<td>CS</td>
<td>Civil Society</td>
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<td>CSO</td>
<td>Civil Society Organization</td>
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<td>CVC</td>
<td>Caribbean Vulnerable Communities Coalition</td>
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<tr>
<td>FEDEPRICAP</td>
<td>Federación de Entidades Privadas de Centroamérica, Panamá y República Dominicana (Federation of Private Entities for Central America, Panama and Dominican Republic)</td>
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<tr>
<td>GIZ</td>
<td>Deutsche Gesellschaft für Internationale Zusammenarbeit</td>
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<td>GF/TGF</td>
<td>The Global Fund</td>
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<td>GFAN</td>
<td>Global Fund Advocates Network</td>
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<tr>
<td>HLM</td>
<td>High Level Meeting</td>
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<td>KAP</td>
<td>Key Affected Populations</td>
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<td>LAC</td>
<td>Latin America and the Caribbean</td>
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<td>LIC</td>
<td>Lower Income Country</td>
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<td>L-MIC</td>
<td>Lower-Middle Income Country</td>
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<td>MIC</td>
<td>Middle Income Country</td>
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<td>MoH</td>
<td>Ministry of Health</td>
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<tr>
<td>NGO</td>
<td>Non-governmental organisation</td>
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<td>PAHO</td>
<td>Pan-American Health Organization</td>
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<td>PANCAP</td>
<td>Pan Caribbean Partnership against HIV &amp; AIDS</td>
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<td>REDCA</td>
<td>Red Centroamericana de Personas con VIH (Central American Network of Persons Living with HIV)</td>
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<td>SDC</td>
<td>Swiss Agency for Development and Cooperation</td>
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<td>SDG</td>
<td>Sustainable Development Goal</td>
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<td>SICA</td>
<td>Central American Integration System</td>
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<td>TA</td>
<td>Technical assistance</td>
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<td>TB</td>
<td>Tuberculosis</td>
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<td>UNAIDS</td>
<td>Joint United Nations Program on HIV and AIDS</td>
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<td>UNICEF</td>
<td>United Nations Children's Emergency Fund</td>
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<td>WB</td>
<td>World Bank</td>
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<td>WHO</td>
<td>World Health Organization</td>
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Executive Summary

Lead by the Developing Country NGO Delegation of the Global Fund Board (TGF), the one-day workshop on Financing for Health in Latin America and the Caribbean: Advocacy Strategies for Effective Resource Mobilization brought together over 35 participants from 17 countries across the LAC region. The workshop focused on discussing the importance of advocacy for TGF 5th Replenishment and possible strategies to ensure effective advocacy.

The workshop was held in anticipation of the 5th replenishment cycle for TGF. At the same time, the LAC region is preparing for transitions, as many countries are becoming ineligible to receive GF financing. As such, the success of the upcoming replenishment is extremely important to support sustainable and properly funded transition processes in the region.

It is estimated that the current need to implement the global plan for HIV, TB and malaria (2017-2019) is 2017-2019 US$134.5 billion in funding is required, with US$97.5 billion destined to for GF-funded countries. TGF is requesting US$13 billion in funding, which together will all other estimated funds available will leave a US$20 gap in funding. At the same time, the last replenishment of TFG was not as successful as expected, which is why advocacy and new approaches are extremely important on this occasion.

Presentations were given by TGF, GFAN, AHF and group discussions were encouraged throughout the workshop, including a breakout session on discussing possible advocacy strategies. TGF advocates primarily through involving champions, high-profile influencers, including celebrities, political leaders and heads of state. GFAN on the other hand, is a supporting network of advocates to TGF, who use a variety of tools and methods to promote a successful replenishment for the Fund.

Some of the existing strategies in advocacy that were presented include lobbying with embassies and country representatives, using influencers and champions to promote the cause in events and media, presenting key messages and convincing data to political and business leaders to on-board them for the cause.

The workshop highlighted that new strategies are also needed for better advocacy. This additionally involves better coordination and cohesion among the different members of CS, NGOs and others, including aligning key messages and presenting them in a way that is appealing to target audiences. Additionally, a need was expressed for heavier involvement from the LAC region in advocacy efforts, both for TGF replenishment, but also to encourage higher domestic spending on the three diseases. As such, a working group was proposed and volunteers identified to take steps to encourage coordination and regional participation.

As the next steps, the workshop identified further involvement of the LAC region with GFAN, both by contributing to the advocacy efforts and using the tools available through the network. Additionally, the CVC volunteered to provide a starting point for a coordinated platform, especially for the Caribbean, and encouraged better coordination between the Caribbean and Latin America in this process. Last but not least, TGF proposed support in positioning messages
and reaching out to potential influencers and champions in the region once identified by participants.
Introduction

Background
Financing for Health in Latin America and the Caribbean: Advocacy Strategies for Effective Resource Mobilization was held on March 23 in Panama City, Panama. It was organized by the Developing Country NGO Delegation of the Global Fund Board (TGF), with collaboration and support from the Swiss Agency for Development Cooperation (SDC), Caribbean Vulnerable Communities (CVC), J-FLAG, AIDS Healthcare Foundation (AHF) and the Global Fund Advocates Network (GFAN). The workshop brought together 35 participants from 17 countries across the region.

The one-day event was convened to discuss domestic financing strategies for HIV, tuberculosis and malaria and ideate on strategies for resource mobilization for CSOs in the LAC region. The workshop focused on understanding and developing advocacy strategies that can be applied in the region to ensure a successful 5th replenishment of TGF and the sustainability of current programing.

The workshop followed a two-day LAC Risk Management Forum for Implementers, also held in Panama City on March 21 and 22.

Objectives
1. Present GF replenishment strategies and approaches to ensure a successful 5th replenishment
2. Learn about GFAN, its objectives and actions, and encourage involvement from LAC region
3. Develop ideas on advocacy strategies for resource mobilization, especially from a CS perspective

Note: The forum took on a presentation and discussion format.Outlined below are the summaries of each presentation made by a variety of speakers and a brief outline of the discussions that followed.
The Global Fund and The Global Fund Advocates Network

The Global Fund was established, in part, by advocacy from civil society and the communities of people living with or affected by HIV, TB and malaria, calling for a fund that would support responses to these diseases regardless of country politics. The Global Fund operates on three core principles: partnership, co-ownership and high-impact performance. It is a financing institution governed by a board, which works to ensure mobilization of resources from the world to support country-owned programs and invest into high impact interventions. It has a Board made up of 20 voting members of which 10 are from donor countries, 10 for implementing countries and include civil society communities.

The Global Fund’s 5th replenishment exercise begins in 2016. From the 4th replenishment, with its target of $15B, only $12.5 was pledged. This time, a different approach is needed to mobilize donors. Supporters of TGF have decided to expand the advocacy base to encourage change.

Established in 2011, the Global Fund Advocates Network (GFAN) is a platform that unites voices and efforts from activists and advocates all over the world to support a fully funded and effective Global Fund. GFAN has over 442 members and 240 organizations in 76 countries, with branches in Asia Pacific and Africa. Its objectives are to support advocacy and resource mobilization, facilitate action and build the movement in support of TGF.

GFAN carries out the following activities globally:
- Ongoing replenishment campaign support
- Regional and international strategy meetings
- Speakers Bureau - promotional campaign “We Need the Global Fund”
- Share reports, action alerts and info notes
- Information sharing and regular teleconferences including GF secretariat
- Toolkits on major events
- Support GFAN members in high level political processes

To date, GFAN has not been very successful in engaging with the LAC region. While efforts were made in 2011 to mobilize potential donors in the region, it has seen little activity. One of the reasons for this was insufficient buy-in and engagement at country level. There is now an aim to encourage more engagement in the region with a focus on domestic resource mobilization for health, fostering donor potential and engagement in transition and sustainability whilst not letting go of options for contributions from the international donor community.

Key Questions From participants

- We agree that LAC needs to have a strong voice and position to lobby for resources, but if there are less resources available for LAC, what are we doing to mobilize new resources and why?
• How are actions mobilized and what are more strategic and impactful, considering few donors are now willing to finance programs in the region?
• Is there a conflict within TGF space around transitioning and advocacy scale up?
• How can we talk about resource mobilization with new donors, for a fund that is not visible and the mobilized funds may not return to LAC?
• What are the barriers preventing promotion of the Debt4Health mechanism?
• How is the language and gender diversity of the region taken into account?

Responses and comments from the panel

• Today, several key donor countries give their money to TGF from their overseas development assistance (ODA) budgets – much of this is earmarked specifically to fund primarily LICs and L-MICs. This funding may form part of a larger development agenda which includes HIV, TB and Malaria. A new discussion is needed with donors. All regions need to work together towards a new dialogue in order to impact the global response.
• There is currently no LAC chapter of the GFAN. It is an informal structure that is committed to supporting TGF. It would be great to leave with an interest in supporting GFAN and by extension The Global Fund in LAC.
• Transition is a long-term process and there is a need to define the way it will work in each country. Part of that is mobilizing resources for the process. It is important to work with countries around domestic financing and innovative ways to support countries. This could include co-financing and south-south cooperation. All in all, at all these components need to be considered, to ensure a responsible process towards sustainability.
• What countries are willing to invest in the region and in what ways can those resources be mobilized locally to be invested within the region? If there is little money in TGF replenishment, everyone is hurt. If there is a good replenishment, then there is more funding for responsible transitioning. Governments and CSOs need to raise their voice and advocate for this to happen.
The Global Fund Replenishment - External and Domestic Funding

Significant gains have been achieved in fighting and controlling HIV, TB and malaria. So far, as shown in Figure 1 Number of Lives Saved Through Global Fund-Supported Programs, TGF has invested in saving more than 17 million lives with funding from the last replenishment, with projections to save 22 million lives by the end of 2016. At the same time, the world is on the brink of being able to say that there is a chance to defeat the three diseases. For this, the global plan is to significantly decrease the number of new infections and deaths with milestones set out for 2020, 2025 and 2030.

To implement the global plan for the three diseases in 2017-2019 US$134.5 billion in funding is required, with US$97.5 billion destined to for GF-funded countries. TGF is requesting US$13 billion in funding for the upcoming replenishment. Based on projections, with domestic funding, financing from donors, and a projected contribution of US$13 billion from TGF, 80% of the projected need for the global response will be covered, however a US$20 billion gap will remain.

TGF US$13 billion contribution will achieve the following:

- Up to 8 million lives saved through programs supported by TGF, leading to 30-32 million lives saved cumulatively by 2020;
- Up to 300 million new infections averted across the three diseases;
- Allow TGF to make substantial contributions towards building resilient and sustainable systems for health;
- Support partners in domestic investment of $41 B toward the three diseases;
- Support strengthened responses for women & girls, key populations and human rights;
- Lead to broad economic gains of up to $290 B over the coming years and decades, based on partner estimates.

To date, a number of governments, including the US government, have unofficially pledged to support the 5th replenishment of TGF. This being said, due to the global humanitarian crisis, many of the resources are being relocated to support refugees and other related areas, which means that much effort and lobbying is still needed to ensure a successful replenishment. Part
of this process is mobilizing champions in each region where TGF works, including speakers and influential persons to promote TGF and organize events. To this end, it is essential to identify key advocates and mobilizing moments in the LAC region to advocate for financing.

In summary, participants from LAC need to advocate for a successful 5th replenishment of TGF to ensure resources are available for robust transition and sustainability planning processes in their countries. At the same time advocacy is also needed for increased domestic funding, both for sustainability and to ensure that the gap in funding is as small as possible. Additionally, regional initiatives to pool resources, TA and south-south cooperation, involvement of the private sector in resource mobilization and innovative financing are all areas that need to be included in ensuring responsible transition and programmatic sustainability.

Questions and comments from participants

- What will be the amount of undisbursed funds from the previous project cycle of TGF?
- Has there been sufficient investment in research on difficult to reach populations that do not have access to public services? We need to demonstrate that resources are still needed to reach those people, due to a large gap in access in LAC countries.
- How does one work to mobilize domestic resources? Categorizing LAC countries as MICs is unrealistic - there are large segments of the population living in poverty and extreme poverty. Domestic resources are assigned in a conservative way and do not include KAPs. Strategies are needed to look at these gaps and provide resources to those communities.
- Additional research is needed on how HIV and AIDS affect orphans of mothers with HIV/AIDS and how this impacts the social makeup of the countries.
- Why mobilize funds in LAC for TGF if it is transitioning out of the region?
- New strategies and innovative initiatives are needed to secure funding. Additionally, ensuring that countries are eligible through new indicators could promote sustainability.
- Do we need to include Zika and Chikungunya that are important in the region and will bring incentives to provide funding to TGF?
- Systematization is needed in showing successes in fighting the three diseases in the region.
- TGF needs to stop working through intermediaries and work directly with KAPs
- There is a gap identified in funding, but is there information on how this affects LAC?
- Violence and corruption must be part of the discussion.
- Better CS organization is needed in order to advocate, with other areas in CS, not just HIV, TB and Malaria, since everyone is affected by the WB country rankings.
Responses and comments from the panel

- Key messaging needs to be developed with a specific focus on populations needs and the specific characteristics of the epidemic, not on country income levels only.
- Undisbursed funds are still in process of being evaluated and no official information has been released at this time.
- TGF depends on information from stakeholders in order to have high impact interventions that will address KAPs. This is why the involvement of CSOs is so important.
- Larger investment in TGF means larger investment in LAC for transition and sustainability.
- It is important to showcase the work that has been done in the region, and influential people can tell that story to the world, calling for global solidarity. If a narrative is built, one can demonstrate how investment is building resilient health systems and community systems. This also means working with other regions, outside of LAC.
- Dialogue with UNAIDS is needed to develop and better present data. It should then be facilitated and available to key persons in the region for their advocacy.
Strategies in Advocacy with Parliamentarians and Decision Makers

TGF Investment Case, as outlined in the section *The Global Fund Replenishment - External and Domestic Funding*, is based on global plans of industry partners, as well as joint analysis and additionally modeling work with partners. It is also assuming that domestic funding will increase and levels of external funding will remain steady. The GFAN approach is to support TGF in advocating for the US$13 billion in replenishment, but also lobby to close the US$20 billion gap in funding and promote domestic spending in each country and region. GFAN considers the $13 billion target as a minimum; TGF needs an ongoing resource mobilization effort aimed at closing the gap.

GFAN Theory of Change

To do this, GFAN is guided by its Theory of Change (as above), with a strong focus on building policy and political advocacy capacity, while strengthening communication about HIV, TB and Malaria programing.

One of the key components in campaigning is to engage parliamentarians in the advocacy process. This includes the following steps:

- Identifying champions - new and existing - and creating an index to monitor progress over time
- Identifying what messages will work with who and what the political motivation will be for different parties
- Identifying key moments in the political calendar: i.e. budget processes, key debates or legislation that might entry points
- Identifying and building relationships with key staff
- Setting an aspirational ask
Additionally, GFAN proposes the following strategies to engage parliamentarians by using tools such as factsheets, meetings, submissions to processes, sign-on letters, petitions, draft motions for legislature and others, depending on each local context:

- Find the actual and thought leaders in Parliament: find who can influence fellow parliamentarians
- Constituent focus: find local voices where possible to bring the messages
- Link parliamentarians in national groups and to international networks of other parliamentarians

While it is important to on-board parliamentarians, in the long run it is necessary to engage policy and decision-makers as well. While it is a similar process and strategic set-up, it can also be a more difficult relationship to build. GFAN suggests engaging decision-makers in specific events to raise awareness on HIV, TB and malaria among them. This could mean special weeks related to health and financing, organizing lunchtime events at or near departments with thought leaders as the draw, take advantage of any public consultations organized by departments, etc.

GFAN offers CS tools and resources they can use to engage parliamentarians and decision-makers. These are:

- Regular teleconference calls on different policy and advocacy topics for linking and learning
- Specialized calls on specific issues, countries or regions
- Toolkits for social media and virtual engagement around key events in replenishment and calendars
- Access to other advocates working on similar issues and the resources they provide and share
- Resources related to speakers bureau for international community voices
- Media work around HLM and other events

Questions and comments from participants

- Do global plans take information and costs of new products and WHO guidelines into account?
- Assuming that bilateral funding stays the same is a very optimistic approach.
- NGOs are very busy doing and do not have time to step back and look at the bigger picture. How the way to communicate advocacy messages be simplified?
- Short-term goal is replenishment, while the medium-long term goal is to increase in national funding. When talking about advocacy, it is important to separate these two objectives. For replenishment, what is the plan in talking with countries like Brazil and Mexico that may have more fiscal space in committing resources? There is also lot of potential in the private sector.
- There may not be the time to sequence short and long term goals in advocacy. The new model is to have everyone share responsibility, as per the new SDGs.
- Stakeholders should engage with pharmaceutical companies.
- Advocacy should promote cost-benefit of investment for the government, to continue looking for sustainability through government commitment.
- Information is often collected, but not translated depending on the target audience. Using strategies with differentiated information depending on the audience can be beneficial.
- NGO delegation can approach TGF board for a 101 on talking to private sector through constituencies that represent it.
Championed Examples of Civil Society Input in Replenishment Processes and Domestic Financing

Civil Society Perspective

The Developing Country NGO Delegation was actively engaged in the 4th Replenishment by opening calling China to contribute $1 billion to the Global Fund. We mobilized our NGO/CSO contacts to sign on the petition to China. One of the delegation members had also had an opportunity to ask President Putin to contribute to the Global Fund in the G20 CSO summit in Moscow in 2013. The delegation approach is to advocate to non-traditional donors.

AIDS Healthcare Foundation (AHF) strategy is to target G20 countries, including China, Russia and others, who are non-traditional donors. Because advocacy is a lengthy process, it is important to start it as soon as possible.

This type of advocacy can involve signature campaigns, letters to embassies in different countries, as well as joining an online petition, an alliance, GFAN or any other regional advocacy activities. One way is to join the Fund the Fund campaign, which calls on China, Germany and Japan to step up contributions for the 5th Replenishment of TGF. To do this, CS can reach out the AHF branches, which are in 35 countries. At the same time, they can reach out to country teams and other partners and begin advocating locally. For more information, visit www.facebook.com/fundthefund/ and http://fundthegf.org.

The Global Fund

TGF is involved in advocacy on many levels. This includes work with heads of state, parliamentarians, CS partners and communities. Mainly, this involves having champions who speak out in favor of TGF and work to fundraise - for example, in the last replenishment process, 13 heads of state were active in championing for TGF. This means that TGF tries to promote and create spaces for partners and CS to share their messages. At the same time, TGF works together with all champions to develop talking points and promote key messages to the public.

While many of the influencers involved are public sector figures, champions from the private sector and private foundations, such as Bill Gates, as well as CS champions are also very powerful, whether they are asking or thanking for support provided by TGF. This advocacy work involves close partnerships with GFAN to develop advocacy tools and working at the national level with local CS in developing a narrative to support TGF.

GFAN Speakers Bureau

Presented by Erika Castellanos, one of the champions of the GFAN Speakers Bureau

It is an understatement to say that it is important to make the voices of CS heard - without doing so, not much can be achieved. Those who are championing GF messages in the region must try
and speak the same language as their target audience. It is also imperative to share stories and data, while giving these stories a human face.

As a champion of the Speakers Bureau, Erika Castellanos has engaged with the international media on issues of The Global Fund and CS and communities. Her interviews and work have been featured or published in the French and Danish media. For international women’s day, Erika used her platform to herald the issues affecting PLHIV in Belize – in particular, women in all their diversity. At the same time, work is being carried out with Health for Rights to encourage Spain to become a donor in the region. This is being done by presenting human-interest stories and other information, supported by data on domestic investment, to demonstrate the impact that investments in LAC can have. Erika will also be one of the speakers at the HLM, talking about the cost of inaction from a LAC perspective.

**Conclusions - GF Replenishment Process and Advocacy**

With the current process of advocating for a successful 5th replenishment, TGF is making a call for CS, NGOs and other supporters to advocate on their behalf. A successful replenishment will mean a better transition process for countries in the LAC region, as most of them are up for transition within the next 3-10 years. Supporting this process is GFAN, a global network of advocates, who are working on diverse promotion strategies.

It is in the interest of the LAC region to become more involved and vocal, in encouraging financing to TGF, as well as increases in domestic financing for HIV (especially) in the region. This will help ensure sustainability, strengthen transition processes.

To this end, CS plays a key role in advocating, especially with politicians, decision-makers and parliamentarians. Additionally, advocates should look to key influencers in the region and potential private sector donors to support the advocacy process and provided financing. This requires a strong positioning of key messaging about the replenishment and the three diseases.

GFAN provides support to their network by providing tools and resources, such as campaign materials and communications platforms. At the same time, there needs to be a strong focus on supporting key messages with data and promoting evidence-based information, to ensure on-boarding of governments and other partners.
Developing the LAC 5th Replenishment Advocacy Strategy

Case Study: Roll Back Malaria

Roll Back Malaria provides a replicable example in advocacy. Malaria Zero is a partnership among the Centers for Disease Control and Prevention (CDC) Foundation, Ministries of Health in Haiti and Dominican Republic, PAHO, Carter Centre, and the London School of Economics.

The World Malaria Report 2015 highlighted that there were 438,000 deaths and 214 million cases of malaria in 2000, and a steep decline since. The majority of cases in the Caribbean presented in Hispaniola, with largest number of cases in Haiti, with a small number of cases in Dominican Republic, but with risk of persistence. As such, the goal of Malaria Zero is to eliminate malaria from Hispaniola by 2020.

Research shows that this is a winnable battle, as chloroquine is still effective on the island, as resistance has not built up. At the same time, once eliminated, the risk of reintroduction is very low. However, there are some challenges faced by the initiative, including a financial need of US$100 million to eliminate malaria on Hispaniola. Malaria Zero looks to ensure enhances surveillance systems and laboratory capacity, leading to a malaria free Caribbean region.
Breakout Sessions on Strategy Development

Group 1 Discussion

Opportunities to resource mobilization efforts in the LAC Region:

- Olympic games as a strategic place (Rio de Janeiro, Brazil, 2016)
- Media oriented towards HIV during the Olympics
- Delivering Wellbeing – Global Maternal Newborn Health Conference (Copenhagen 2016)
  - Disseminate key information through representatives in the region and ensure work progress is demonstrated and shared
- Asia-Pacific Economic Cooperation Forum (Peru, 2016)
  - Demonstrate cost/benefit in responding to the three diseases
- HLM (New York, 2016)
  - Use the space as momentum to advocate

Threats to resource mobilization in the LAC region:

- Competition between different sectors and areas of development work, for example prioritization of climate change
  - Create key messages that unify these areas and ensure risks of ignoring specific areas are well understood
- Recession in donor countries, while local and national structures in LAC often do not permit spending on the three diseases
  - Highlight the cost of misuse of funds, including how prevention is significantly cheaper than treatment in the longer term

Potential champions from government, civil society, or private sector:

- Athletes participating in the Olympic games in 2016
  - Use brands sponsorships to support specific causes (e.g. Adidas did a campaign for valentine’s day for diversification of love)
  - A way of attracting attention is to position these people as open-minded and concerned about human rights with visibility being anchored to them

Proposed Advocacy Strategy for Resource Mobilization

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<tr>
<th>Objectives</th>
<th>Activities</th>
<th>Resources Required</th>
<th>Responsible Org</th>
<th>Timeframe</th>
<th>Expected Outcome</th>
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<tr>
<td>Position the three diseases as a priority for financing</td>
<td>Information campaigns on the replenishment process</td>
<td>Communications team and support to maintain comms platforms</td>
<td>RedTraSex and ASPAT Perú</td>
<td>June (prior to HLM)</td>
<td>HLM declaration mentioning the three diseases</td>
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<td>Involve academia and</td>
<td>Generate</td>
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other organizations from the private sector in financing

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<th>Improve capacity within regional networks and groups on resource mobilization</th>
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**Group 2 Discussion**

**Opportunities to resource mobilization efforts in the LAC Region:**

- Involve CARICOM, CARIFORUM, COHSAD, PANCAP
  - Use the HLM as an opportunity
  - PANCAP can use the platform to educate CARICOM/COHSAD and mobilize their voices to donor communities urging them to fully fund TGF
  - Identify national Ministries and engage them to prepare at country level
  - Develop declarations after meetings are completed with government officials and stay for finalization
  - Partner with UNAIDS in engaging the government to strike a balance between CS and the government
  - Select regional champion from the government who is sympathetic to the cause of CSOs and KAPs
  - Tap into Goodwill Ambassadors of UNAIDS, UNICEF to lend their voice to the statements of the region
- Utilize Zika and the mobilization efforts for maternal health to mobilize other vector control; including dialogue around Malaria and Chikungunya that are similar in transmission
  - Brazilians embassies should lead the efforts, but a joint message needs to be developed regional
  - Involve PAHO to support the efforts
- Explore Debt4Health opportunities
  - Engage Ministers of Finance and Ministers of Health
  - Seek support from GFAN and TGF to conduct mapping in the region to inform actions

**Threats to resource mobilization in the LAC region:**

- Coordination is weak amongst CSOs
  - Build on existing coordination methods
  - Develop a dedicated coordination strategy
  - Opportunities in PANCAP and CVC in their coordination of their concept notes with TGF
- Political situation in respective countries
  - Early engagement and sensitization training with the new MoHs
- Lack of knowledge on the three disease within communities
- A lot of the conversation is high level and it is not filtering down to the communities
- Education needs to help in CCM meetings, and at the community level, via short presentation or availability to tap into community systems

Potential champions from government, civil society, or private sector:
- Minister of Health in Jamaica, Dr. Christopher Tufton: CSOs should coordinate invitation or request to contact via the MoH/Rudyard Spencer and provide data to move his championing the cause
- Mr. Ian McKnight, leading HIV Activist
- Usain Bolt, Jamaican sprinter
- Rihanna/MAC – MAC is already a committed partner
- DIGICEL, Dennis O’Brien at the DIGICEL Foundation: TGF could lead from its secretariat by getting one other individual of high net worth to reach out to him and transfer the concepts

Proposed Advocacy Strategy for Resource Mobilizations

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Activities</th>
<th>Resources Required</th>
<th>Responsible Org</th>
<th>Time Frame</th>
<th>Expected Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase Government and donor contribution to the response to HIV/Tb and Malaria</td>
<td>Advocate for governments to use dedicated tax funds to fund the HIV, TB, Malaria response Eg. CHASE Build the Capacity of the Ministers of Health and Permanent Secretaries in the region to advocate for funding with Donor Community Increase MOF involvement and engagement in the dialogue to support decisions to finance the HIV response Develop Robust data to support the engagement of MOF and regional finance committee of CARICOM to make the case to fill the funding gap</td>
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Group 3 Discussion

Opportunities to resource mobilization efforts in the LAC Region:
- Involve SICA / SIECA
Take advantage of contacts with COMISCA and encourage dialogue about financing

- Presidential Summit
  - Working with the consulting committee to advance agenda

- FEDEPRICAP
  - Advocacy to work with national bodies

- BCIE
  - Management and information sharing

- HLM
  - Advocacy with delegations and through Zambia and Swiss embassies

- International Aids Conference 2016
  - Highlight advocacy efforts to demonstrate clear financing needs in the region

Threats to resource mobilization in the LAC region:

- Lack of acceptance of current management and actions
  - Open spaces for dialogue and ensure key messages are disseminated

- Inability to gain traction due to other diseases gaining importance
  - Demonstrate the importance of diminishing the impact of these diseases and the cost of inaction

- Focus on other subjects in the region, such as violence
  - Foster understanding that ignoring HIV, TB and malaria can lead to a different type of violence

- Economic crisis and corruption
  - Strengthen processes for CS empowerment to try and overcome this

Potential champions from government, civil society, or private sector:

- First Lady of Costa Rica
  - Can position messaging on TB, HIV and malaria at presidential summit and is already involved in promoting programing on these three diseases

- First Lady of Panama
  - Already a UNAIDS Ambassador

- FEDEPRICAP President
  - Currently passive on the subject but can have direct contact with officials through RCM

- Otoniel Romírez, REDCA

Proposed Advocacy Strategy for Resource Mobilization

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<tr>
<td>Position investment in the three diseases as a social responsibility and common good</td>
<td>Take advantage of the COMISCA contacts</td>
<td>Coordination meetings</td>
<td>RED CA+</td>
<td>May 2016</td>
<td>Bring messaging to HLM</td>
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<td>Working with the</td>
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<tr>
<th>Increase coordination among key actors</th>
<th>Establish specific action plans</th>
<th>Communication sharing and high level meetings</th>
<th>RED CA and MCR</th>
<th>June – Oct 2016</th>
<th>Achieve coordination on the three diseases</th>
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</thead>
<tbody>
<tr>
<td>consultative committee</td>
<td>Advocacy with the Swiss and Zambian embassies</td>
<td>Information dissemination and management</td>
<td>Support advocacy with data to make the need for financing in the region clear</td>
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Conclusions - Resource Mobilization Advocacy Strategies

During this session, participants brainstormed potential advocacy strategies for resource mobilization. One of the main points that came out during the discussions is the need to align and position key messaging about the three initiatives. This should be done through cohesive coordination among the different actions and by ensuring that messages are evidence-based and supported by real data.

At the same time, innovative strategies integration with other areas of CS and looking to new spaces as platforms for advocacy are an essential way to tap into new resources. While it is important to position and develop key messages, the ultimate goal is to disseminate these locally, nationally, regionally and at the international level. To do this, champions with highly visible profiles are essential. Participants have proposed to work on involving politicians and popular figures who have already expressed interest in supporting causes around the three diseases first, to have better success.

Since coordination is such an important factor in the success of advocacy, workshop organizers proposed developing a working group involving the participants, and involving others who were not present. This means defining the action items that are most pertinent from the strategies brainstormed and ensuring that they are delegated to specific persons or groups. This involves developing a working strategy that takes into account the unique position of the region, developing a strategy to guide LAC region going forward, presenting a draft statement to speak on behalf of the group, sharing the messages from today with networks in each participants’ country, and joining the GFAN as advocates to raise financing.

GFAN Working Group for LAC

- Sergio Montealegre, Costa Rica, Hivos
- Ottoniel Ramirez, El Salvador, Red Centroamericana de Personas con VIH (REDCA+)
- Alma de Leon, Guatemala, International Treatment Preparedness Coalition (ITPC)
- Guiselly Flores, Peru, Red Peruana de Mujeres Viviendo con VIH / MCP Perú
- Elena Reynaga, Argentina, REDTRASEX
- Kandasi Levermore, Jamaica, Jamaica AIDS Support for Life (JASL)
- Karlene Temple Anderson, Jamaica, Grants Manager, Ministry of Health
Going Forward

CS Perspective
It is important to position the working group for resource mobilization as a meaningful space and ensure that it has real traction. CVC could be a space to anchor this in the Caribbean, however there also needs to be a broader approach as LAC – this being one of the challenges in the past – to work as an entire region together. It is essential to be effective and bring in all of the voices into this particular process.

TGF Perspective
Once the group to lead the process in LAC is identified, TGF secretariat looks forward to working together. This include reaching out to champions identified by the LAC region, packaging information for LAC regional use and ensuring that key messaging from LAC is presented at the International AIDS Conference 2016.

GFAN Perspective
There is strong desire for outcomes in the region. Although LAC almost dropped off the advocacy efforts for TGF replenishment in the past, this meeting has shown that there is much initiative and it can be the beginning of a new collaboration and joint efforts. It is essential to have a follow-up discussion for prioritization, coordination, hoping and translation of key messages. Individuals are the ones to make a difference. It is important to be persistent with donors and advocacy – that’s how results are achieved.