Evidence-informed advocacy for harm reduction investment

Harm Reduction International (HRI)

Abstract

HRI monitors the epidemiological, policy, programmatic and funding situation for harm reduction around the world, working closely with over 100 civil society and community organisations. This evidence is crucial for advocating for donor and government investment in harm reduction, both to make the case and inform strategic decision-making.

In collaboration with the University of New South Wales, we developed tools for assessing current investment levels, funding gaps and challenges to sustainable financing. We worked with researchers, civil society and community organisations to implement the tools in several countries in Europe and Asia, where the evidence gathered increased dialogue and informed advocacy for investment at the local and national level.

In most LMICs, harm reduction funding is far short of what is needed to reach UN recommended coverage levels of priority interventions. While many governments have increased their domestic resourcing of national HIV responses, few have prioritised reaching people who use drugs. Yet, states spend inordinate amounts on ineffective and often harmful punitive drug policies. HRI modeling projections demonstrate that redirecting a small proportion of drug law enforcement funds to harm reduction could end HIV among people who use drugs by 2030. We developed tools to assess national drug law enforcement spending, engaging input from experts working at the intersection of drug policy, public health and law enforcement. These tools, alongside budget advocacy strategies and supportive economic evidence for investing in harm reduction will form key components of a harm reduction budget advocacy guide.

Contact

Catherine Cook, Harm Reduction International, Catherine.cook@hri.global

Link

www.hri.global/sustainable-financing

* please note that some of the world cafe stations were not presented as some participants were unable to attend due to COVID-19
**Title:** HIV, UHC and the future of the global health architecture: A civil society discussion paper on key trends and principles for evolution

**Organization:** Paper developed by Working Group (STOPAIDS, Aidsfonds, Frontline AIDS, Civil Society Sustainability Network)

**Abstract:**

The aim of this paper is to serve as a catalyst for discussion on important considerations from a civil society perspective on how the global health architecture of the UHC era should evolve and how it should be governed based on lessons from the global HIV response. With a focus on six key international organisations in the global health architecture for HIV (WHO, UNAIDS, the Global Fund, PEPFAR, the World Bank and Unitaid) this paper considers top-line political trends affecting global health. Recognising that the global health architecture will adapt in light of these changing political and economic realities, it is critical that civil society are ready not just to react to proposals on what this evolution will look like but also to identify and promote their own ideas. The paper outlines five suggested key principles for re-imagining the global health architecture that seek to re-allocate power and introduce new mechanisms and approaches for greater financial sustainability and overall impact. These are accompanied by key questions to encourage civil society to reflect and further build on these suggested principles.

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**Link:** [https://stopaids.org.uk/resources/global-health-architecture/](https://stopaids.org.uk/resources/global-health-architecture/)
title: Evidence-informed advocacy for harm reduction investment

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contact: Catherine Cook, Harm Reduction International, Catherine.cook@hri.global

link: www.hri.global/sustainable-financing
title: Community and Civil Society Consultation

organization: The International Union Against Tuberculosis and Lung Disease

abstract:

2020 marks the Centennial year of The Union, and as the organization continues to grow and evolve, we aim to ensure our activities are reflective of what the TB and lung health community need and want most.

GFAN members are some of the most strategic and engaged advocates in the TB sphere, and The Union is keen to hear directly from GFAN members on what we can be doing better / more of / less of to better respond to the needs of TB-affected communities and civil society. This includes our in-country programming, The Union’s Community Advisory Panel (UCAP), the annual World Conference on Lung Health and associated events, and wherever else communities would like to see The Union having a stronger presence.

This consultation will include some specific questions directed at GFAN members, and also an open forum for feedback and discussion.

contact: Meaghan Derynck, The Union, meaghan.derynck@theunion.org
Sustaining global and national advocacy: Enabling women to track Global Fund investments towards gender equality across HIV, Tuberculosis & Malaria

Women4GlobalFund (W4GF)

W4GF was created in 2013 to ensure gender equality is central to the Global Fund. W4GF is a thriving, growing global movement and has seen transformation through the extension of global partnerships. Ensuring that Global Fund resources advance gender equality, and end the three diseases, is a core mission for W4GF. This means holding all stakeholders accountable for Global Fund investments.

The W4GF Community Based Monitoring Accountability Toolkit supports women to:

1. follow Global Fund supported programmes; conduct independent, community-led and owned monitoring and tracking that explores effectiveness of services and qualitative client perspectives;
2. ensure that countries take the right steps to achieve gender equality and uphold human rights by highlighting what is/is not working well and advocate to re programme and scale up programmes and services that are effective; and
3. build and strengthen strategic partnerships between community and those implementing the grants - enabling women to remain meaningfully engaged and assess their own effectiveness as W4GF advocates in Global Fund processes at the national level.

Kicking off in April/May 2020, with EANNASO as our fiscal agents, W4GF team will support women working in three countries (to be decided) to gather and leverage information and data on service provision to improve responsiveness, equity and quality of services and hold service providers to account. The support/coordination from W4GF will enable advocates to support each other, share/learn from experiences and translate findings to national/global advocacy. Lessons will be learned will refine the Accountability Toolkit for future work in other countries.

Sophie Dilmitis, Global Coordinator, Women4GlobalFund (W4GF), Based in Zimbabwe, Website, Facebook, sophie@women4gf.org
**title:** Monitoring, evaluation and learning for advocacy – everything you’ve always wanted to know but were afraid to ask

**organization:** Itad

**abstract:**

Have you ever found yourself wondering what impact your advocacy work is having? Or been asked to tell the story of how you influenced change? And – truth be told – been lacking evidence to support your tale?

We know monitoring, evaluation and learning might feel a bit abstract – as well as a bit cumbersome. But there are simple ideas and tools that you can adopt in your day-to-day that will help you understand more about your work.

Come and talk to us and ask your burning MEL questions!

**contact:** Laura Hopkins, Itad, laura.hopkins@itad.com
**title:** HIV PREVENTION SHADOW REPORTS

**organization:** Frontline AIDS and PITCH

**abstract:** In October 2017 governments, civil society, UN agencies and donors launched the Global HIV Prevention Coalition (https://hivpreventioncoalition.unaids.org/), to support countries in achieving their global HIV prevention targets. The Coalition endorsed the HIV Prevention 2020 Road Map, which commits countries to achieving key milestones outlined in a 10-point action plan. Countries must now report progress against these milestones and key prevention indicators, annually.

There were concerns among civil society, that these annual government-led reports do not accurately reflect the reality on the ground. To tackle this, community-led organisations agreed to work together in coalition to produce a series of shadow reports that analyse the progress and quality of national prevention response from the perspective of the communities bearing the brunt of the epidemic (adolescents, sex workers, people who use drugs, LGBT people and people living with HIV.)

The reports have been a useful advocacy tool for civil society, helping them to put pressure on national governments to uphold their 2020 commitments. The reports have already delivered policy changes at both the national and subnational level.

The report writing was a collaborative process, involving representatives from different communities affected by HIV. Each community was responsible for sharing intelligence and developing a shared set of recommendations. This process not only built advocates’ knowledge and understanding of the national prevention response, it also sensitised them to the needs and challenges facing other communities. This process helped build unity amongst the different civil society advocates, strengthening their ability to lobby for change more effectively.

**contact:** kanna Dharmarajah, Frontline AIDS (rdharmarajah@frontlineaids.org)

**additional links:**
National HIV Prevention Shadow Reports:
- [2018 countries](#): India, Malawi, Nigeria, Uganda, Ukraine, Zimbabwe
- [2019 countries](#): Kenya, Malawi, Mozambique, Nigeria, Uganda, Ukraine, Zimbabwe
Scaling up community monitoring and feedback (CMF) as a means to improve country disease responses and strengthen CS advocacy for change

organizations: EANNASO and Frontline AIDS

abstract: The Global Fund, technical partners and donors are committed to scaling up community monitoring and feedback (CMF) to improve the responsiveness, effectiveness and impact of grants and country disease responses. CMF can be defined as a means for local communities to gather, analyze and use information to improve access to and quality of services; better target resources; advocate for improved services and address human rights and gender related barriers to services. Communities expand the reach and uptake of services beyond formal health facilities and empower people to advocate for their rights while holding governments accountable.

CMF can include mechanisms that monitor the availability, accessibility, acceptability and quality of services; tracking of health policy and accountability, and monitoring of health financing allocation decisions, and/or complaint and grievance mechanisms. Given, the scope of these mechanism, there is still limited community agreement on a common understanding of how a CMF system should function, which creates challenges and limited understanding on how to fund and scale it up. In order to start this conversation on how we can better monitor national disease responses and foster accountability for grants, EANNASO and Frontline AIDS will share experience and some examples of CMFS.

We also hope to gather examples on tools to inform a guide being developed by EANNASO, GIZ and Frontline AIDS to support integration of CMFS in Global Fund Grants.

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**title:** TB in 2020: Reporting to the UNGA 2 Years on

**organization:** Stop TB Partnership & TBpeople

**abstract:**
In 2018 countries committed to ambitious targets for ending TB - including finding and treating 40million people, targets for DR TB and pediatric TB, and targets for TB prevention among PLHIV. We will look at how are we professing against these targets, and what else are we measuring. Also, we will look at how we can measure “soft targets” such as:

- stigma and discrimination,
- key and vulnerable populations,
- overcoming legal barriers to access,
- involvement of affected communities and civil society, TB and gender equity,
- access to drugs and diagnostics
- incorporating HLM targets in national strategic plans, and
- community-led monitoring for multi sectoral accountability

We will also be asking what else is needed to measure these soft targets effectively. And finally, what are strategic opportunities for civil society on the road to UNGA 2020?

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