

Sustaining HIV and Human Rights Programming in Challenging Contexts: Continued Criminalization of Key Populations and Shrinking Resources

Meeting Report

**Geneva, Switzerland
11-12 June 2014**

**Co-hosted by
UNAIDS and Funders Concerned About AIDS**



Funders Concerned About AIDS
Mobilizing Philanthropic Leadership, Ideas, and Resources
in the Fight Against AIDS

Partners of the meeting



FORD FOUNDATION



**OPEN SOCIETY
FOUNDATIONS**



**ELTON JOHN
AIDS FOUNDATION**



The Global Fund
To Fight AIDS, Tuberculosis and Malaria

Contents

1. Purpose and structure of meeting	4
2. Overview and background	5
3. Understanding the funding landscape for HIV-related human rights programming: draft paper presentation	6
4. HIV-associated human rights threats and challenges	8
5. What does and can work: strategies, opportunities and solutions for effective human rights programming	10
6. Priority themes, approaches and concepts	12
7. Action items	14

Acronyms and abbreviations

CEHURD	Center for Health, Human Rights and Development
EHRN	Eurasian Harm Reduction Network
FCAA	Funders Concerned About AIDS
Global Fund	Global Fund to Fight AIDS, Tuberculosis and Malaria
GNP+	Global Network of People living with HIV
LGBT	lesbian, gay, bisexual and transgender
MDG	Millennium Development Goal
MIC	middle-income country
NFM	new funding model (of the Global Fund)
MSM	men who have sex with men
OSF	Open Society Foundations
SDG	Sustainable Development Goal
SWEAT	Sex Workers Education and Advocacy Taskforce
UNAIDS	Joint United Nations Programme on HIV/AIDS

1. Purpose and structure of meeting

Funding for HIV-related human rights work by civil society is, and has always been insufficient, and may be threatened even further. Research from the Joint United Nations Programme on HIV/AIDS (UNAIDS), with the support of the Ford Foundation, indicates that in recent years, less than 1% of annual funding for the global HIV response has supported human rights programming. Furthermore, funding appears to be dropping as donors focus on new priorities, as many countries move to middle-income status and thus have reduced eligibility for external aid, and as domestic funding fails to support human rights work.

The low and declining levels of such funding jeopardize the critical work of civil society organisations working at the intersection of HIV and human rights at a time when their work is urgently needed. Harmful legislation in many countries aims to further marginalize and oppress members of populations at greatest risk of HIV, including women, young people, sex workers, gay and other men who have sex with men (MSM), transgender people, people who use drugs, prisoners, and migrants. Targeted funding for the human rights response to HIV is not only a critical need in and of itself. It will also contribute to making the overall HIV response more effective and – if adequately and strategically funded – has the potential to contribute to the strengthening of human rights movements globally.

With the support of the Ford Foundation, UNAIDS and Funders Concerned About AIDS (FCAA) co-convened a meeting on 11-12 June 2014 in Geneva to discuss the funding landscape for HIV-related human rights work and the vital need to support it more extensively. Other partners included the Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund), the Open Society Foundations (OSF), the Elton John AIDS Foundation UK, and the Fund for Global Human Rights. More than 60 participants from across the donor spectrum—HIV and human rights donors, multilateral and bilateral donors, private foundations, publicly funded intermediary foundations, and community-driven collaborative funds—attended. Also represented were civil society organisations implementing HIV-related human rights programming.

In order to capitalize on the knowledge and expertise of the people assembled, the meeting was organised around interactive discussions and designed to respect the confidentiality of participants, given the sensitive human rights work undertaken by many of the participants. This report provides a summary of the sessions in the following sections:

- overview of the current situation regarding key human rights considerations in the context of the global HIV response, as well as relevant background information;
- key findings of a draft paper commissioned by UNAIDS, “Sustaining the Human Rights Response to HIV”, that was prepared in advance of the meeting and distributed to participants for review;
- human rights-related obstacles, threats and challenges to HIV responses, in particular those facing key populations and civil society groups working with and for them;
- examples of human rights strategies, approaches and programme that can help improve the health and well-being of people living with and affected by HIV (especially members of key population groups);
- priority themes and concepts identified by participants; and
- proposed action steps for the short- and longer-term.

2. Overview and background

UNAIDS Deputy Executive Director Jan Beagle set the tone for meeting by stating the following:

As we meet here in 2014, 30 plus years into the AIDS response, I cannot emphasize enough two points. We would be nowhere in the AIDS response without civil society; and we would be nowhere without human rights.

Ms. Beagle's comment underscores the fact that civil society has been instrumental in raising awareness about and seeking to protect the human rights of key populations most affected by HIV. Such human rights work remains essential because the HIV response is at a crossroads. The science and knowledge of how to defeat AIDS are increasingly clear, yet these opportunities are threatened by persistent and emerging challenges. AIDS remains one of the leading causes of death globally, and new infections remain high among key populations. Yet instead of increasing to meet demand and fully reverse the epidemic, funding has been flat for several years and donors' priorities are shifting.

This is occurring as laws and policies in many countries have further isolated and stigmatized those most vulnerable to HIV and reduced the space for civil society to operate. The worsening legal and policy environment for key populations is particularly dire. For example, some 80 countries criminalize same-sex activities; among them are nations with major HIV epidemics that have recently passed draconian laws that put the health and lives of LGBT individuals in grave danger (including Nigeria, Uganda and Russia) and where encouraging developments in removing legal barriers to same-sex sexual activities have been countermanded (e.g., India). In jurisdictions around the world, sex workers and drug users are denied services and support, women living with HIV are forcibly sterilized, and misguided HIV-transmission laws criminalize the very existence of many people living with HIV.

All of this is happening as many governments are using legal and bureaucratic means to stifle civil society, thereby making it harder to get financial and other kinds of support to such groups even when it is available. The potential consequences of these developments are alarming. As emphasized by FCAA Executive Director John Barnes, "Violations of human rights have always spread the epidemic." He added, paraphrasing a UNAIDS credo, "We can never get no new infections without getting no new discrimination."

Reversing these troubling trends is essential. It requires greater commitment to human rights and the recognition of how and why they are necessary for successful HIV responses. Several developments in recent years have laid the groundwork for building and sustaining rights-based responses, including the following:

- human rights one of three core "strategic directions" of the UNAIDS 2011-2015 Strategy ("Getting to Zero");
- a landmark strategic investment approach, unveiled in 2011 and supported by UNAIDS, the Global Fund and most other leading stakeholders in the HIV response, prioritizes the funding and support of "critical enablers"—rights-based interventions in which civil society plays a central role;
- human rights have been elevated to a core priority in the Global Fund Strategy 2012-2016 ("Investing for Impact"); and
- efforts have been made to define programmes that protect and promote human rights in the context of HIV. For example, UNAIDS describes seven key programme areas to

reduce stigma and discrimination and increase access to justice that it advocates should be components of every HIV response:

- stigma and discrimination reduction;
- HIV-related legal services;
- monitoring and reforming laws, regulations and policies relating to HIV;
- legal literacy (“know your HIV-related rights and laws”);
- sensitisation of lawmakers and law enforcement agents to HIV concerns and key populations;
- training for health care providers and medical ethics related to HIV and health; and
- reducing discrimination, violence, harmful gender norms and problematic laws experienced by women which increase their vulnerability to HIV.

More and better-targeted funding support is needed to ensure these developments translate into funding for organisations working at the intersection of HIV and human rights. The majority of civil society and community groups providing essential human rights-related HIV work do not have access the resources that they and those they work with need.

Participants’ expectations

Identifying the specific challenges and setting concrete outcomes aimed at addressing them were among the main expectations of the meeting, as cited by participants. Among other expectations, they also hoped to strategize how to work together more effectively and strategically, including by pooling resources and expertise. Ideally, in the view of most participants, the discussions and outcomes would help break down “siloes” in which HIV, human rights (including sexual and reproductive rights), and other funders operate, hindering holistic and strategic funding for civil society organizations straddling the HIV and human rights issues.

Four other notable expectations were also articulated that helped frame much of the discussion that followed:

1. Enabling an emergency response for human rights crackdowns on people living with HIV; members of key populations (sex workers, LGBT people, people who use drugs, etc.); and women's reproductive rights; among others.
2. Sustaining key organisations responding to human rights in the context of HIV during and throughout the current funding crisis – an effort that requires better collaboration between HIV and human rights funders and bilateral, multilateral and private foundations
3. Funding for programmes in middle- and upper-income countries.
4. Working with the Global Fund where it will play a key role in supporting the human rights response to HIV.

3. Understanding the funding landscape for HIV-related human rights programming

A discussion paper, “Sustaining the Human Rights Response to HIV”, was commissioned by UNAIDS to better understand the current and future landscape experienced by civil society groups implementing key human rights programmes in the response to HIV. It also includes a

series of recommendations focused on the roles and responsibilities of a range of stakeholders, including UNAIDS, the Global Fund, and other donors (both bilaterals and private).

A presentation on the draft paper at the meeting summarized the process and noted some of the key findings.

The methodology consisted of a desk review of funding for HIV and human rights; key stakeholder interviews with donors, civil society, and policy makers; and a survey distributed to civil society groups working on HIV in countries around the world. A total of 265 groups were contacted, with nearly half (48%) responding.

In terms of the *findings*, the big picture is that funding is decreasing for more than half of all respondents, with particularly substantial declines for groups that focus significantly on human rights. Most indicated that they may need to downsize or even shut down completely if the funding situation does not improve.

Moreover, a very small fraction of resources for the global HIV response supports programming for human rights. About USD 137 million is spent each year on the human rights response to HIV, less than 1% of the USD 18.9 billion spent on the overall response in 2012.

The following were among the findings highlighted during the presentation, with basic analysis offered by the report's authors:

- More than 50% of survey respondents reported declines in funding in general.
- 58% reported that core unrestricted funding ("core support") has decreased, which is notable given that many civil society and community groups do much of their human rights work from such funding.
- Only slightly more than one-quarter (28%) of respondents reported spending more than 75% of their work on human rights. This finding suggests that i) many groups integrate human rights interventions in their overall work, and ii) there is a small, yet highly committed number of groups that focus primarily on the HIV/human rights intersection.
- Respondents in middle-income countries (MICs) were most likely to report decreases in funding and expectations of decreased funding. Of note is that these groups were also more likely to report doing human rights work, thus indicating that organisations most commonly at the intersection of human rights and HIV are facing particularly severe funding challenges.
- 70% of respondents reported having never received funding from their governments, suggesting that groups focusing on monitoring or addressing human rights issues in the context of HIV are not benefitting from the increase in domestic resources flowing to the HIV response.
- The potential for the Global Fund to be a preeminent funding mechanism for HIV and human rights is indicated by several factors, including the heightened emphasis on human rights in its 2012-2016 Strategy and new funding model (NFM) and the fact that 25% of survey respondents report having accessed funding from the Global Fund. But survey and interview respondents also expressed concern about considerations that could hinder the Global Fund's ability to meet its human rights strategic objectives, including its de-prioritization of support for MICs and its core principle of "country ownership".

The paper was expected to be revised and finalized in the weeks following the meeting. Participants were encouraged to contact UNAIDS with comments about the paper, including what they found unclear or lacking, during the revision process.

Preliminary responses made during the meeting were generally positive. One donor participant said the paper contained “the best data and perspective we have so far”, including in regards to funding streams, key funder trends, and implications of new Global Fund processes and strategies. A civil society participant said the report was “close to reality” in her country, where local groups receive little or no domestic funding, the government “denies” the existence of MSM, and human rights is not a governmental priority.

Meeting participants also said the paper should help donors and other stakeholders, including local civil society groups, recognize what strategies are most likely to have a beneficial impact. One strategy highlighted was legal empowerment programming for MSM, people living with HIV and sex workers, complemented by human rights training and advocacy aimed at legislators, judges and lawyers who are charged with applying and defending restrictive laws and policies.

4. HIV-associated human rights threats and challenges

Considerable time at the meeting was spent discussing HIV-related human rights threats and challenges both during panels and group discussions. Priority was placed on hearing the voices of civil society and community groups, especially those working with and among key populations. To that end, representatives from several groups in different countries discussed their organisations’ work as well as obstacles they and those they serve regularly face. Those groups, the countries where they are based and their primary focus areas are noted below:

- LaSky-St. Petersburg (Russia): MSM
- International Community of Women Living with HIV & AIDS Eastern Africa (Uganda): women living with HIV
- Aneka/Solidarity Foundation (India): sex workers and LGBT communities
- Lembaga Bantuan Hukum Masyarakat Community Legal Aid Institute (Indonesia): people who use drugs

Listed below are a number of the main threats and challenges, some of which are closely linked, that were mentioned during the meeting. Some were presented as context-specific (i.e., by a respondent working in one country), but many are nonetheless shared far more widely. A message that cut across all presentations was that funding for HIV-related human rights programmes is falling through the cracks, underfunded by both HIV and human rights donors. The threats and challenges identified by participants are grouped into two categories: those related primarily to funding and programming, and those related largely to political and human rights environments.

Challenges related to funding and programming:

- Governments and donors are often unwilling or reluctant to provide funding to organisations working directly with and for certain key populations. In the words of one participant: “we have to fund the hard human rights”. That is especially true when governments disapprove of or criminalize activities such as sex work, same-sex sexual practices, and drug use. As a result, such groups, which are heavily involved in human

rights work directly or indirectly, find it especially difficult to get funding. Chronic resource limitations prevent them from expanding support and services to meet need, which often is growing. Several meeting participants said, for example, that their organisations do not have sufficient funds to hire or adequately remunerate lawyers and other critical staff who focus on human rights issues.

- Programmes and governments are often involved in a “chase for numbers”—with quantity taking precedence over quality. Such prioritization leads to and reinforces human rights violations such as breach of confidentiality and forced HIV testing. Often the onus lies with donors and funding recipients due to inappropriate and unrealistic indicators in grants and programmes.
- Service provision is much easier to fund than human rights and advocacy work, at least in part because services (e.g., provision of medicines and bed nets) usually can be counted and quantified. Yet just handing out commodities does not address issues that are at the core of the problem, such as why services continue to be needed and what prevents many people from obtaining them. Changing this calculus should be done carefully, however. The goal is not to take money from HIV service provision and allocate instead to human rights work. Instead, funding for service provision should increase even as additional money is provided for human rights work.
- Funding is often restricted to, or focuses on, medical/health issues. Yet an effective response for all key populations also must cover a full range of critical enablers such as psycho-social and legal support. Organisations that want and need to provide comprehensive services find it difficult to do so because of the strings attached to funding from many donors.
- Laws criminalizing outreach to key populations. Such laws can put organisations serving key populations at risk of being shut down completely in addition to being blocked from undertaking programmes they consider essential.

Political and human rights environment–related challenges:

- Human rights violations continue to take place, but there are no effective redress or accountability mechanisms.
- A global trend shows a shrinking space for human rights work. A key reason is that many governments are introducing and enforcing legal restrictions on foreign funding of domestic civil society groups. Organisations focused on a full range of issues are affected negatively, including those working exclusively or primarily on HIV services—although human rights funders and groups are the main target.
- Health and human rights may get short changed in the post-2015 agenda. Numerous indications suggest a backlash against key human and health rights in international development frameworks in the future, including the Sustainable Development Goals (SDGs) that will follow from the Millennium Development Goals (MDGs) as the consensus global development priorities and indicators after 2015. An example of such pushback is occurring in the framework of the International Conference on Population and Development Beyond 2014 review, where there have been strong calls for rolling back sexuality education.

- “Backsliding” legal and policy environments are a growing concern, and threaten to halt or reverse progress made in HIV responses. In Uganda, for example, an HIV criminalization bill has recently been introduced. One of its many regressive clauses calls for mandatory HIV testing for pregnant women and their partners.
- Introduction and expansion of laws criminalizing key populations or limiting their access to information and services, such as recent moves in Nigeria, Uganda and Russia.
- Governments in many countries offer few or no targeted programmes for key populations most affected by the epidemic. In Russia, for example, nearly one-quarter and 15% of MSM are estimated to be living with HIV in Moscow and St. Petersburg, respectively. Comparable prevalence estimates are even higher among people who inject drugs around the country, as well as among sex workers. Yet the official response to members of these populations is more punitive than supportive.
- Detention of people who use drugs is a major human rights issue in the context of HIV. In Indonesia, as many as 50% of individuals incarcerated are drug offenders, mostly petty drug users. Many of them are abused and tortured when arrested and in prison.
- Funding for sex worker groups is uniquely challenged by the claims and advocacy of anti-trafficking groups. Many donors and some influential human rights organisations believe that all sex workers are victims in need of “rescue”, an incorrect assumption that has the effect of further stigmatizing and isolating many who choose to work in the trade.

5. What does and can work: strategies, opportunities and solutions for effective human rights programming

Challenges and threats are just one part of the overall picture, however. Numerous examples exist of effective and viable strategies and programmes at the intersection of HIV and human right. Such programmes show the resilience and pragmatism of many local civil society groups and underline the many opportunities for donors wishing to expand their HIV-related human rights work.

During a panel on best practices, representatives from the following groups gave examples from their work. Also included are the country where each is based, if relevant, and the primary focus area:

- Sex Workers Education and Advocacy Taskforce (SWEAT), based in South Africa: sex workers
- Center for Health, Human Rights and Development (CEHURD), based in Uganda: access to medicines and right to health
- Global Network of People living with HIV (GNP+), global and based in the Netherlands: information, advocacy and community strengthening
- South Africa Litigation Centre (SALC), based in South Africa: legal services and law reform

Listed below are some observations made at the meeting by both respondents from the local civil society groups mentioned above and other participants. All refer to lessons learned, success stories or opportunities that deserve recognition and attention.

The importance and value of *collaboration* was one point stressed by a number of participants. Collaboration is usually beneficial for all involved—and this is true for collaborations among civil society groups at the local and national level, collaborations among different donors, and collaborations between civil society/community groups and donors. For example, groups focusing on human rights work such as legal aid and documentation of abuses often do not know the reality of what is happening “on the ground” among sex workers and other key populations whose rights are routinely violated. Meanwhile, those who experience discrimination and abuse often do not know what (if anything) they can do about it. Coordination and collaboration is therefore beneficial in regards to identifying the real problems and then taking action to overcome them.

Collaboration can also be critical in leveraging resources and expertise. In South Africa, for example, SWEAT created a legal defence project in partnership with the Women’s Legal Centre. The project—which includes training of police officers and health workers, as well as training sex workers to be paralegals—has had demonstrated successes in improving the safety and well-being of many sex workers.

And finally, enhanced collaboration among HIV and human rights funders was seen by many participants as an opportunity to get them to work out of their “siloes”. Coordination of that sort could be especially beneficial for civil society groups that find themselves largely unfunded because they “fall in the gap” between HIV and human rights funding—even though such a gap should not exist.

The following are among other examples and observations from the meeting regarding lessons learned and opportunities:

- Human rights work in the context of HIV can be incredibly *high leverage* work. Many organisations achieve vital successes and accomplishments with annual budgets of less than \$100,000. Donors should recognize the big differences that can be made with relatively little money.
- *Donor flexibility* is often vital, especially for organisations working with and for key populations. To be effective, it is usually necessary to respond to a wide range of issues, often quickly and unexpectedly, to reach individuals where they are.
- Self-stigma can inadvertently perpetuate human rights abuses. Reaching individuals through specially trained outreach workers who, for example, visit venues where key populations gather and work, can help steer them to *psycho-social support aimed at reducing self-stigma*.
- *Effective media strategies* can have major impacts. Many civil society groups work with and even train journalists in human rights and HIV issues in an effort to get them to focus on human rights abuses such as torture in prisons and denial of health services. Examples abound of local advocacy groups alerting the media to stock-outs of antiretroviral drugs (for example); once reported, governments often act quickly to address the problems. (On the other hand, there are plenty of instances when the media

act irresponsibly. Often this occurs when journalists misrepresent situations for sensationalist purposes or when media outlets actively exacerbate human rights abuses when reinforcing repressive government policies and popular opinion. Civil society groups must always be prepared to face a backlash from the media even if relationships have tended to be constructive.)

- *Far-reaching mobilisation* may be essential, including beyond HIV and human rights. Doing so may be necessary to ensure that a group's "operations space" is not closed. In Uganda, for example, CEHURD has engaged with lawyers and judges as part of its health advocacy efforts aimed at ensuring access to medicines through trade and intellectual property reform. The organisation has found itself raising awareness of the complicated issues among such individuals, an effort that has had positive impacts.
- Strategic information and evaluation can be useful tools to further advocacy objectives from a human rights perspective. Through its HIV Leadership Through Accountability Programme, GNP+ has developed a number of research and evidence-gathering tools. These tools are geared to help community members (including people living with HIV) to evaluate and monitor such things as i) stigma and discrimination, and other human rights abuses associated with HIV (e.g., forced marriage of underage girls) and ii) existing legislation and cases where laws are used to criminalize HIV transmission.

6. Priority themes, approaches and concepts

Based on comments and discussions throughout the meeting, including those summarized in Sections 4 and 5 of this report, participants identified several approaches and concepts that should be emphasized in regards to HIV-related human rights programming. Most refer to ensuring sustainability and potential funding and programmatic priorities in the future. Notable ones are listed below.

Core funding. Greater and more sustainable support for core funding is needed for civil society and community groups. Such support has the potential to stabilize many organisations and enable them to develop and increase human rights-related interventions. An initial step suggested by some participants is for a clearer and more specific definition of "core funding" to be mutually agreed by donors and implementers (recipients). Donors are also urged as part of this process to reduce the amount and complexity of reporting required, especially given the fact that many grants provided are of relatively small amounts.

Recognition of community needs and priorities. Donors sometimes prefer to fund specific types of projects that may not align with the immediate, real or comprehensive needs of organisations and individuals on the ground. The same disconnect may exist between global human rights and HIV groups and those working in communities at grassroots, especially among key populations. For example, donors and global groups may focus on legal reform when implementers believe that immediate action to reduce police abuse on the streets should be an immediate priority in the meantime. And although MSM and transgender people welcome easier access to condoms, they also want and need "jobs, boyfriends and bodies" (in the words of one meeting participant).

Funders therefore were encouraged to find out what communities actually want and need, as well as how support might be provided most effectively and efficiently.

Emergency/rapid responses. Civil society and community groups often need to move quickly in response to human rights crackdowns on people living with HIV and key populations. In such instances, a rapid injection of resources can help support crises responses that may include targeted advocacy and media work, legal support, etc. Better access to such emergency funding is needed. One approach might be to identify funders that already provide such “emergency” resources and align with them instead of developing a new and different structure. It was noted that human rights funders have a wealth of experience working on emergency response and could contribute to developing strategic approaches that would benefit civil society groups working at the intersection of HIV and human rights.

Regional approaches. Regional initiatives and programmes can be the best and easiest way to direct money for human rights programming to hard-to-reach places, including for key populations. An example cited was a Global Fund grant recently awarded to the Eurasian Harm Reduction Network (EHRN) for harm reduction advocacy in Eastern Europe and Central Asia. That approach is considered one of the only ways for vital harm reduction and human rights work for people who use drugs to be supported in countries with highly restrictive policy and legal environments for local civil society groups, such as Russia and Belarus. Such regional approaches can also represent a lifeline for HIV-related human rights programmes in middle-income countries affected by shortages in funding.

The EHRN example accentuated the *leading role of the Global Fund* in HIV-related human rights programming. The world’s largest health financing mechanism is in the process of implementing its new funding model, which is a more “hands-on” process than the previous one. The new approach is intended to give the Global Fund more leverage in ensuring that increased investments are directed toward human rights programmes in partner countries. Its ability and willingness to fund and monitor such priorities were further signalled in the Global Fund 2012-2016 Strategy, which elevated human rights to one of five strategic objectives.

Such developments suggest increasing opportunities for working with and through the Global Fund for human rights work. One potential constraint is that through the NFM, the Global Fund is focusing its investments on low-income countries with high disease burdens. The space and impact for direct Global Fund engagement in middle-income countries are not yet fully clear, including nations with particularly great needs for human rights interventions among key populations. It does seem, though, that Global Fund money for human rights programmes and other programmes serving key populations in those countries may best be obtained through regional grants.

Middle-income countries (MICs). Countries classified as middle-income, and civil society groups working in them, increasingly have less and more restrictive access to development funding. Most notably from an HIV perspective, the Global Fund’s NFM prioritizes funding for low-income countries with high burdens of HIV and allots only 7% of its funding to MICs that are not classified as high disease burden, regardless of HIV impact among key populations. Many meeting participants raised concerns about the NFM’s benchmarks. Several noted that far more than half of the world’s poor people currently reside in MICs and that they are also home to concentrated epidemics among those most at risk of human rights violations.

The restricted access to external financial support is not a concern when governments are able and willing to fill in the gaps and meet the needs of residents, as is the case in countries such as

Brazil. Other countries, ranging from high-income Russia to lower middle-income Nigeria, are characterized by increasing human rights violations and restrictive legal and policy environments toward key populations. In such countries, key populations and civil society groups that support them face particularly drastic funding crises because domestic funding is essentially non-existent for human rights and HIV. Donors are stepping away just at the time they are most needed.

The post-2015 agenda. As referenced in Section 4, negotiations are ongoing regarding the composition of the Sustainable Development Goals (SDGs), which will set global development priorities after 2015. HIV was specified in one of the eight MDGs, but it is not yet clear whether it will remain a standalone goal in the SDGs. Many meeting participants expressed concern about the consequences on HIV and human rights funding and prioritization should HIV not be highly visible in the new development framework.

‘Change the narrative’. Organisations providing HIV-related human rights programming and their allies might have more success in attracting donor support by making their case in different ways. For example, donors tend to be more responsive when presented with something tangible—in other words, when results can be seen and impact measured. Thus **collecting and showing evidence** of programmes and policies that work—including in regards to specific health outcomes—is needed in addition to stressing moral and political reasons (among others) for funders’ engagement.

7. Action items

Participants divided into three working groups to brainstorm action steps that could help raise awareness of the critical gaps and mobilise resources for civil society and community groups undertaking human rights programming in the context of HIV. Donors in particular were urged to consider what might make them more likely and able to support organisations doing such work.

Several proposed short-term (i.e., in the next six months) and longer-term steps and priorities were proposed. The following are among the specific ones mentioned, with responsible parties noted in instances where their leadership was suggested at the meeting.

Short-term

- Draft a joint open letter on behalf of the donor community and UNAIDS and its co-sponsors, drawing upon lessons learnt from the HIV response on rights-based approaches to health to be presented to members of the inter-governmental Open Working Group and other actors negotiating the Sustainable Development Goals (the post-2015 development agenda). To have maximum potential impact, the letter ideally would be delivered as far as possible in advance of December 2014, when the Secretary-General is expected to present proposals.
Responsible: UNAIDS, FCAA
- Provide a space and opportunity for private funders to i) discuss the challenges and good practices to supporting groups providing human rights work in the context of HIV and ii) develop a strategy to address those challenges, collectively and individually with the aim of increasing the resource base. One possible opportunity could be during

FCAA's AIDS Philanthropy Summit in December 2014.

Responsible: FCAA

- Develop a strategy for donors to support and/or monitor the Global Fund in relation to its human rights commitments either through grant-making for civil society monitoring or engagement in the Global Fund Board Constituency (the Private Foundations Delegation).

Responsible: FCAA, Kaiser Family Foundation

- Clarify and evaluate the landscape of existing funding mechanisms, relevant conferences and meetings, public-private partnerships, etc. (the "inventory") of relevance to human rights programming in the context of HIV. Such a mapping exercise could help identify gaps and offer solutions such as, for example, pooling funds and a new collaborative fund.

Responsible: FCAA

Longer-term

- Conduct research on evidence of effectiveness of HIV-related human rights programmes and their broader public health outcomes. Strengthen indicators and M&E tools that can more accurately measure the impact of human rights programming on HIV and health. Develop better tools for costing and tracking human rights programmes in the context of HIV.

Responsible: UNAIDS, Open Society Foundations, U.S. President's Emergency Plan for AIDS Relief (PEPFAR)

- Support civil society groups working on human rights responses to HIV to articulate their work more clearly in human rights terms, and link them up to human rights donors. This may help overcome the "siloes" obstacle both within civil society and among donors.

Responsible: UNAIDS, Global Fund for Human Rights

- Develop tools and good practices guidance for civil society to use as models when preparing funding proposals and implementing programmes. Such tools could, among other things, provide a platform for sharing successes and models that document and address needs and deficits among key populations.

Responsible: UNAIDS, OSF, the International HIV/AIDS Alliance

- Support the monitoring role of civil society about funding flows, quality and coverage of programmes through grant-making and capacity building, as well as sharing positive practices

Responsible: UNAIDS, Global Fund, FCAA, OSF

- Jointly with the Global Fund, bilateral donors and other partners, develop a transition plan for middle-income countries that focuses on sustainability of health and human rights programmes for key populations.

Responsible: Global Fund, UNAIDS

- Develop and implement a comprehensive strategy aimed at supporting civil society and community groups to engage more effectively in all Global Fund structures and processes. Potentially useful components might include:

- guidance and leverage for civil society to evaluate country dialogues and country coordinating mechanisms to determine inclusiveness, to undertake quality monitoring and to engage in advocacy;
- clearly defined roles for UNAIDS regional and country staff and Global Fund country teams;
- systems and procedures ensuring that i) Fund Portfolio Managers understand the importance of human rights work and how to do it, and ii) that the Global Fund Secretariat has functioning watchdog mechanisms that enable it to affirm that such work is funded; and
- a method and system to better track Global Fund spending on human rights programming and interventions.

Responsible: Global Fund, UNAIDS

UNAIDS and FCAA agreed to review the action steps in greater detail and develop a draft, costed and time-bound roadmap for actions. As co-conveners of the meeting, both organisations recognized their respective roles in continuing to engage the broad range of stakeholders who had actively participated in the meeting—private and corporate donors, representatives of donor governments, members of the Global Fund Secretariat, and civil society organisations leading the human rights response to HIV—in specific actions designed to sustain funding for the human rights response to HIV.