

# **EHRN Regional Initiative on HIV and Harm Reduction for Eastern Europe and Central Asia: first steps, processes and lessons learned**

Report

Eurasian Harm Reduction Network

August 2013

## Eurasian Harm Reduction Network

The Eurasian Harm Reduction Network (EHRN) is a regional network of harm reduction programs, groups of people who use drugs (PUD) and their allies from across 29 countries of Central and Eastern Europe and Central Asia (CEECA) who work to advocate for the universal human rights of people who use drugs in order to protect their lives and health. EHRN's mission it is to promote humane, evidence-based harm reduction approaches to drug use, with the aim of improving health and well-being, whilst protecting human rights at the individual, community and societal level.

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## List of Abbreviations

AIDS	Acquired Immunodeficiency Syndrome
CCM	Country Coordinating Mechanism
CSS	Community Systems Strengthening
ECUO	East Europe and Central Asia Union of People Living with HIV
EECA	Eastern Europe and Central Asia
EHRN	Eurasian Harm Reduction Network
ENPUD	Eurasian Network of People Who Use Drugs
Global Fund	The Global Fund to Fight AIDS, Tuberculosis and Malaria
GNSWP	Global Network of Sex Work Projects
HIV	Human Immunodeficiency Virus
HSS	Health Systems Strengthening
ICASO	International Council of AIDS Service Organisations
IDPC	International Drug Policy Consortium
NFM	New Funding Model
OC	Oversight Committee
OSF/IHRD	Open Society Foundations / International Harm Reduction Development
OST	Opioid Substitution Therapy
PR	Principal Recipient
PLWHIV	People Living with HIV
PWUD	Person/People who use/s drugs
RTAG	Regional Technical Advisory Group
EHRN SC	EHRN Steering Committee
SR	Sub Recipient
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNDP	United Nations Development Programme
UNODC	United Nations Office on Drugs and Crime
WHO	World Health Organisation

## Executive summary

On February 28, 2013, Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund) announced that Eurasian Harm Reduction Network (EHRN) had been invited to be an early applicant as part of the Global Fund's New Funding Model (NFM), with a proposal on HIV and harm reduction for the region of Eastern Europe and Central Asia (EECA). The funding amount indicated for this regional proposal was \$6 million over three years (2014-2016). Following a decision by EHRN's Steering Committee (EHRN SC), EHRN formally announced on April 2, 2013 that it had accepted this invitation, with a decision to develop and submit a concept note to the Global Fund, based on outcomes from an inclusive, consultative regional dialogue process.

This report describes work completed by EHRN since accepting the Global Fund's invitation, specifically: initiating and completing the regional dialogue process, establishing relevant regional governance structures for concept note development and grant implementation oversight, defining the overall concept for the regional EECA initiative, defining grant implementation strategies such as Sub Recipient (SR) selection and country eligibility, and preparing a zero draft of the regional initiative concept note.

Preliminary recommendations and lessons learned from completion of the regional dialogue process are listed below—these are particularly relevant given the Global Fund's ongoing and proactive work to learn from and improve upon the design and processes of the NFM during the transition phase:

- Supporting strong regional dialogue processes and provision of appropriate technical support is critical to the success of the NFM. Full support requires funding. Appropriate donors should make funds available urgently for these priorities.
- The Global Fund should be flexible in adjusting the concept note template and CCM endorsement requirements for regional proposals taking into account the regional context, results of regional dialogues, and the value of innovation in sub recipient (SR) selection and country prioritization processes.
- Although several early applicants have been able to undergo all NFM stages and sign their grants within three and a half months, EHRN's experience so far in developing the regional initiative indicates that substantial amounts of time are required, particularly for the purposes of a meaningful engagement of key stakeholders, primarily representatives of the community of people who use drugs. EHRN recommends the NFM feature multiple windows—perhaps four—in order to enable flexibility while ensuring all partners, particularly community representatives, are meaningfully engaged and moving as quickly as possible in contributing to quality concept notes development, negotiating with the Secretariat, and appropriately engaging a broad range of stakeholders, and implementing grants.
- Lack of updated and consolidated epidemiological data as well as lack of data on investment in harm reduction services by government hinders regional applications' strategic planning efforts and makes it difficult to establish the baseline for national investments. More attention and effort should be spent to resolve this issue by technical partners.
- Representatives of the technical agencies have been invited to sit on the Regional Technical Advisory Group for the regional initiative, to provide technical advice on the concept note, to review applications from prospective SRs, and to recommend a list of SRs for consideration and approval by EHRN's SC – the main governance body of EHRN. Technical partners should ensure that highly qualified staff are delegated for this important task and that costs related to their engagement are covered by the respective technical agency.

- EHRN should continue keeping all partners regularly informed and updated about the status of the regional initiative, including through face to face country level visits to share information, particularly through on-going dialogues with CCMs.
- The Global Fund should develop and share best practices for communication and meaningful involvement of civil society, government, technical partners, and key populations and other relevant partners at the national, regional, as well as international levels in regional initiative concept note development, in particular drawing on outcomes from the forthcoming TERG evaluation on the NFM.

## Methodology

This report, focusing on EHRN's efforts from March - July 2013 on development of the regional initiative on HIV and harm reduction for EECA, was written in July 2013. Information used for this report was gathered from a literature review and a questionnaire administered to a subset of participants in the regional dialogue process. The literature review included all publications identified by EHRN and the author to be relevant to development of the regional initiative, including: the results of the online consultations, reports and presentations from the regional face-to-face consultation on June 13-14, communication with the Global Fund Secretariat, communication from technical partners, preliminary drafts of the Concept Note, minutes of EHRN SC meetings, and TRP feedback to the zero draft of the regional initiative Concept Note and the minutes of the RTAG meeting .

The questionnaire was drafted by the author in consultation with EHRN, and was distributed to a representative cross-section of representatives selected among participants in the regional dialogue process from a range of stakeholders representing the following sub-sectors:

- technical partners (UN agencies and donors): representatives from GIZ and UNDP Bratislava Regional Centre;
- the regional organisation AIDS Foundation East West;
- national harm reduction and other relevant civil society or governmental organisations: the Armenian Ministry of Health (Global Fund Project Coordination Team) and the Ukrainian charitable organisation Club Svitanok; and
- organisations and/or groups of people who use drugs/clients of opioid substitution therapy (OST) – two representatives of the Eurasian Network of People who Use Drugs (ENPUD).

Interviews were conducted in either English or Russian. The questionnaire was completed either in writing or through semi-structured interviews conducted by telephone.

## Introduction

On February 28, 2013 the Global Fund issued a press release announcing the launch of the NFM. Invitations were extended to six countries and three regions to participate as "early applicants" using the full process of the NFM—from developing and submitting a concept note to implementing a new grant. EHRN was invited to participate as a regional applicant and to create a regional initiative focused on HIV and harm reduction in EECA for 2014-2016. EHRN accepted this invitation on April 2, 2013. The indicative funding amount for the project is US\$6 million.

This report provides information about the outcomes and processes of EHRN's first phase of work in response to the invitation from the Global Fund. This first phase has focused on defining and completing the regional dialogue process and has consisted of: establishing consensus among stakeholders

regarding the basic goals and objectives of the regional initiative, defining preferred implementation strategies for the regional initiative, and establishing relevant governance bodies for concept note development and oversight of grant implementation—as well as an appropriate division of labor among the governance bodies.<sup>1</sup>

Prior to the cancellation of the Global Fund’s Round 11 in 2011, EHRN was in the process of preparing a regional application on HIV and harm reduction. This work was funded at the time by the German government’s BACKUP Initiative. The work carried out in 2011 provided a helpful starting point in guiding EHRN’s further development of the regional initiative concept note. However, lessons learned since 2011 and the shifting needs within the region are being taken into consideration alongside the demands and requirements of applicants under Global Fund’s NFM.

## What is EHRN?

EHRN is a regional network with the mission of promoting humane, evidence-based harm reduction approaches to drug use, in order to achieve improved health outcomes and protection of human rights of people who use drugs at the individual, community, and societal levels. Founded in 1997, EHRN today unites more than 450 individuals and organisations from 29 countries of EECA. EHRN is governed by its members through the election of representatives who serve on its SC. As of June 2013, the EHRN SC consists of 13 persons representing eight constituencies of the EHRN membership and elected by these constituencies: Baltic States, Belarus-Ukraine-Moldova, Caucasus, Central Asia, Central Europe, Russia, South-Eastern Europe, and the drug user community.

Executive work is carried out by a Secretariat based in Vilnius, Lithuania, consisting of 12 highly trained and experienced staff.

Given the network’s core competencies as an advocacy and technical assistance agency, EHRN is uniquely positioned to build the capacity of civil society and community-based organisations to contribute to the process of improving the quality, scale-up and delivery of a range of harm reduction services in the region. As a regional network, EHRN acts as a liaison between local, national and international organisations, ensuring that regional needs receive appropriate representation in international and regional forums, and helping to build capacity for service provision and advocacy at the national level. EHRN draws on international models of best practice and on its knowledge of local realities to produce appropriate, quality technical support.

EHRN carries out its mission through work in three distinct and complementary programmatic areas, which ensures continuity and synergy across its projects and fosters teamwork between the staff, SC, and network members and experts. EHRN’s **Policy and Advocacy** programmatic area focuses on designing and carrying out regional and international advocacy to influence policies that affect access to and the quality of harm reduction in EECA, serving as a liaison between national drug policy and harm reduction advocates, groups of PWUD and regional and international policy-making bodies. The **Technical Support** programmatic area provides and brokers effective, timely and regionally appropriate technical support for civil society and community-based organisations that serve and advocate for the health and human rights of PWUD and their communities. Technical support is primarily delivered through two projects hosted within this programme — the WHO Harm Reduction Knowledge Hub and

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<sup>1</sup> Subsequent reports will share information about development and submission of the concept note, responses from the TRP and Global Fund Secretariat, grantmaking efforts, as well as policy recommendations regarding regional proposals within the NFM.

the Civil Society Action Team (CSAT) for EECA. During last two years, EHRN has successfully provided peer-driven, region-specific trainings and other technical support on harm reduction-related issues and topics to 181 organisations from 21 countries. Finally, the **Communications and Information** programmatic area is a key source of information and analysis on the current state of harm reduction-related services and the status of drug users' rights and policies in the region.

Development and implementation of the regional initiative on harm reduction and HIV for EECA is closely aligned with EHRN's policy and advocacy priorities, and will provide an important opportunity to intensify much needed high impact regional advocacy to increase access to quality harm reduction services while ensuring civil society-led regional proposals feature substantively as a relevant part of the NFM.

## The Global Fund's New Funding Model

The New Funding Model,<sup>2</sup> launched in February 28, 2013 by the Global Fund following approval at the 28<sup>th</sup> Board Meeting of the Global Fund, was designed to support more strategic, high impact investment by the Global Fund in the fight against the three diseases. The NFM replaces the previous funding system of annual funding 'Rounds,' where applicants were invited to submit proposals that were considered either technically sound and were recommended for funding by the Global Fund's Technical Review Panel (TRP) or were rejected by the TRP—with rejected applicants having to wait significant periods of time before having the chance to apply again for Global Fund funding. The new funding model has a number of major changes, including:

- 1) Country and regional applicants are expected to develop a concept note based on costed, evidence-based strategies developed through inclusive multi-stakeholder processes, including a full expression of demand;

- 2) The concept note is developed following a 'country dialogue' or a 'regional dialogue,' not limited to the members of the Country Coordinating Mechanism (CCM) but including other key stakeholders from government, donors, civil society, and technical partners;

- 3) The Global Fund Secretariat will begin negotiating grants *before* seeking Global Fund Board approval for funding, and will work with applicants to move as rapidly as possible from the concept note phase to preparing 'disbursement-ready grants.' Global Fund disbursements would then be possible immediately following grant signing;

- 4) All countries eligible for the Global Fund funding will have access to an 'indicative' funding amount during a three-year replenishment cycle, determined based on country's disease burden and country income level, adjusted for qualitative factors;

- 5) Applicants will also be eligible to apply for funding through an 'incentive stream,' that will provide a competitive opportunity for increased funding; and

- 6) Unfunded, technically sound expressions of country or regional demand will be captured for future funding (using a process that has yet to be finalized).

Regional applications will be possible under the NFM, where a regional approach can achieve an added impact that is not possible through national strategies alone. However, it is unclear how regional applicants will access funding according to the NFM—for example, during the transition to the NFM, the three early regional applicants are invited to apply for funding that will not be deducted from the indicative stream for the countries participating in the regional applications. However once the NFM is fully rolled out, countries participating in regional proposals could have to 'give up' some of their

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<sup>2</sup> More information about the New Funding Model can be found at: <http://www.theglobalfund.org/en/activities/fundingmodel/>



indicative stream funding allocation, for investment into the indicative funding stream of a regional proposal. It is highly unlikely that any country would choose this voluntarily—leading to the risk that regional applications would be extremely rare under the NFM, without some additional incentive.

The experience of EHRN and the other regional applicants will therefore provide vital data about the role of regional proposals in providing added value in the response to the three diseases and will help ensure that the Global Fund’s policies on regional applicants under the full implementation of the NFM support lessons generated during the transition period.

## Responding to the Global Fund’s invitation

Following the Global Fund’s invitation, EHRN sought clarification from the Global Fund Secretariat on a range of technical questions regarding appropriate approaches for preparation of a regional proposal under the NFM. Importantly, these exchanges with the Secretariat indicated that the options for regional applicants were to be fully defined or finalized during the NFM transition phase, which allowed room for EHRN to put forward proposals for optimizing the regional proposal development process.

While seeking clarification, EHRN also proposed several possible modifications to the Global Fund Secretariat’s approaches regarding preparation of regional applications and regional initiative implementation strategies, with the aim of strengthening the impact of its regional initiative (should it be approved for funding by the Global Fund Board). For example, EHRN provisionally proposed new approaches to obtaining CCM endorsement and engagement among participating countries which would combine some requirements for Regional Organization (RO) and non-CCM applicants in order to better reflect realities of countries in EECA. The approaches proposed included:

- allowing CCM members to make a decision electronically on country participation in the regional initiative rather than through an in person meeting (e.g. casting a vote via a conference call or an email);
- requiring CCMs to respond to the request of the regional applicant regarding their participation in regional application within a defined timeframe; and
- in case a CCM opposes the regional initiative for some reason, or a country’s policies or laws outlaw certain project activities, or a CCM does not exist in the country, letters of support or endorsement provided by the country’s CBOs, NGOs, networks and individual CCM members could be taken into account by the Global Fund Secretariat and the TRP as legitimate endorsement of the regional initiative.

In response, the Global Fund Secretariat indicated that the proposed approaches could be applicable to EHRN under NFM flexibilities on a country-by-country basis.

The EHRN SC decided on March 28, 2013 to accept the Global Fund’s invitation, and EHRN announced this decision publicly on April 2, 2013. EHRN first focused on widely disseminating a public update that it would be working with stakeholders in developing and implementing a regional proposal as a civil society early applicant under the NFM. EHRN also recognized that it would need to strongly prioritize ongoing, open communication with partners about the regional initiative in order to ensure broad understanding, strong collaboration, and authentic regional ownership. Funding was requested from donor partners, including International Council of AIDS Service Organizations (ICASO) and Open Society Foundations (OSF) in order to specifically fund public communication activities as well as comprehensive documentation of each stage of the process of EHRN’s participation as a regional early applicant under

the NFM. ICASO and OSF have since started funding EHRN's documentation and communications efforts.

#### **TIMELINE**

**February 28:** The Global Fund invites EHRN to be an early regional applicant during the transition to the NFM

**March:** EHRN sought clarifications from the Global Fund Secretariat; EHRN started consultations with technical partners

**March 28:** EHRN SC recommends accepting the Global Fund's invitation

**April 2:** EHRN widely announces it has accepted the Global Fund's invitation

**May-June:** On-line consultations organized by EHRN as part of the regional dialogue

**June 13-14:** In continuation of the regional dialogue, a face-to-face consultation among partners is held by EHRN in Vilnius, Lithuania

**June 21:** Submission of zero draft of regional initiative concept note to the TRP

**July 8:** Call for applications for Regional Technical Advisory Group membership

**July 19:** Establishment of the Regional Technical Advisory Group

**July 29-30:** Initial meeting of the Regional Technical Advisory Group

**August:** Finalization of the Concept Note

**September 06:** Submission of the Concept Note for TRP review

During this period, the Global Fund Secretariat also indicated that it could not provide funding to EHRN for either concept note development, to support a robust regional dialogue process, or for technical support needed during the concept note development stage. EHRN's outreach to donors resulted in the GIZ BACKUP Initiative's approval of EHRN's request for funding to support the regional initiative development phase. GIZ BACKUP Initiative has further committed to assist prospective sub-recipients (SRs) in EECA when they prepare applications to EHRN to join the regional initiative.

#### **The regional dialogue**

Since accepting the Global Fund's invitation, EHRN has emphasized a regional dialogue drawing on consultation with a wide range of civil society, government, technical partners, communities and other stakeholders regarding development of the regional initiative concept note and eventual grant implementation. A priority for EHRN during this initial phase was designing and implementing a robust and inclusive regional dialogue process. EHRN established three steps for the regional dialogue, with each step designed to generate analysis that would build on the subsequent step: preliminary outreach through meetings and conference calls with stakeholders; three on-line consultations; and a face-to-face regional partnership consultation for EECA. In

addition, a mapping in six countries was completed by Eurasian Network of People Using Drugs (ENPUD) between June and August on the inclusion of people who use drugs in relevant decision-making processes.

#### **Preliminary outreach with partners**

EHRN first organized conference calls and face-to-face meetings with a range of experts, technical partners and civil society organizations as well as networks of people who use drugs, in order to begin discussing the opportunity of the regional initiative, address questions, and to describe and refine the basic concept of the regional initiative. These interactions helped shape the design and approach of the on-line consultations, particularly through identifying priority themes, questions and challenges.

#### **On-line consultations**

EHRN initiated three on-line consultations on priority topics with partners throughout the region and around the world between May and June 2013. The consultations addressed topics including the value added of a regional approach; common regional challenges in harm reduction service provision and

advocacy; priority goals, objectives and activities for the regional initiative; prioritization criteria to identify focus countries and to select sub-recipients (SRs); and best practices in harm reduction service provision and advocacy.

Thousands of subscribers to relevant regional and international thematic listservs such as ITPCru, EHRNru, EHRNeng, GFAN, Harm Reduction RF, CSAT and others were targeted for participation in the on-line consultations. Also questionnaires were sent directly to 250 NGOs – SRs and SSRs of Global Fund grants in EECA as well as to more than 60 representatives of technical partners; donors; international, regional and national level organizations working with PWUD; and supporting/implementing harm reduction programs. As a result a total of 205 people from 24 countries participated in the on-line consultations, with 61% representing national and local NGOs, 11% representing community based organizations, 23% from UN agencies or international/regional organizations and 5% representing other sectors (including government). These consultations proved a low-cost method of obtaining broad strategic thinking on priority issues that the regional initiative should address.

At that stage, participants emphasized that the regional initiative should focus on regional advocacy rather than service delivery, since service delivery would both exceed the proposed budget and supplant the role of implementers at the national level. Instead, participants recommended that the initiative emphasize the value added of evidence based regional advocacy, and aim to leverage additional funds, treating the three year regional Global Fund grant as seed money to fund community mobilization and capacity building to improve advocacy at regional and national levels. In addition, discussion from the on-line consultations signaled inherent weaknesses associated with using a list of hard criteria for determining country eligibility—particularly when the criteria rely on national data, which in most cases are missing, out of date, or difficult to verify.

### **Face-to-face regional consultation**

EHRN also organized a face to face regional consultation in Vilnius, Lithuania June 13-14, 2013 in order to build consensus around the proposed goal and objectives of the regional initiative, describe provisional activities related to the objectives, develop consensus around how to determine country and SR eligibility criteria and prioritization/selection processes, discuss best practices in service delivery, define governance structures to support concept note development and oversight of grant implementation, and determine appropriate CCM engagement strategies and tactics in EECA countries.

76 people participated in the consultation, including international partners (such as WHO, UNAIDS, UNDP, UNODC, members of the Global Fund Secretariat, Harm Reduction International (HRI), International Network of People Using Drugs (INPUD), International Drug Policy Consortium (IDPC), Global Network of Sex Work Projects (GNSWP) among others), other regional networks (Eurasian Network of People Using Drugs (ENPUD), East Europe and Central Asia Union of PLWH (ECUO)), and national stakeholders—15 members of Country Coordinating Mechanisms from 10 countries of EECA representing both government agencies and civil society, 6 national harm reduction networks and organizations, 12 representatives of the community of people who use drugs and sex workers. A total of 18 countries in EECA were represented. The face-to-face consultation generated a revised version of goal and 2 objectives of the regional initiative; this revision was considered more appropriate and realistic by the stakeholders.

### *Determining SR selection and country prioritization*

A priority area for development of consensus during the face-to-face consultation was how the EHRN SC should determine which countries should participate in the regional initiative, and how to select SRs.

As a result of the consultative process, EHRN formulated and proposed several possible options for determining country prioritization and SR selection to participants in the consultation:

1. Selection based on quantitative data from country and international sources, using strict criteria for inclusion and exclusion;
2. Selection based on ‘profiling,’ considering more subjective and anecdotal data, as well as criteria such as countries’ political environments and presence of at least one strong civil society partner for implementation; or
3. Selection through a bottom up, ‘demand-driven approach,’ using open competition in a grants application process, with tailored criteria to prioritize and weigh applications.

After substantial discussion and debate, participants in the face-to-face consultation recommended Option 3—a more innovative approach that would reinforce the goals of the regional initiative to catalyze a regional harm reduction advocacy movement and mobilize the community of people who use drugs. To be successful, this option would require a ‘bottom-up’ engagement of stakeholders, preventing EHRN from imposing a selection process. Countries and partners applying to participate in the regional initiative would have to identify their own strengths, and specify their own needs for advocacy and capacity building within the goal and objectives of the regional initiative that would align with the overall design of the regional initiative. Importantly, this method is the only approach that would allow EHRN to better quantify the full expression of advocacy and community systems strengthening-related demand, and inform grant negotiations with the Global Fund for funding above the USD\$6 million indicative funding amount, since regional early applicants are not eligible for incentive funding but are also encouraged by the Global Fund to express their full demand.

Several stakeholders interviewed highlighted that they valued the opportunity afforded by a face-to-face meeting for consideration of ‘outside the box’ thinking on SR selection processes and country prioritization. The EHRN SC, which met immediately after the face-to-face consultation, agreed to this approach.

Interviewees who participated in the face to face consultation commented that the approach chosen for SR and country selection diverged significantly from initial thinking—which was a more standard approach of pre-selection of a number of countries based on hard, pre-determined criteria. The innovative, ‘bottom up’ methodology to SR selection and country prioritization approved by the EHRN SC was considered by interviewees to be a reflection of the spirit of the regional initiative itself—rather than being driven by a list of inherently imperfect and somewhat arbitrary criteria this approach increases local engagement, ownership, and adaptation.

Importantly, the new Global Fund regional initiative concept note template—published one day before the face-to-face consultation—describes country selection as something regional applicants will complete before submitting the concept note. The proposal for ‘bottom up’ selection evolved organically as a result of the dialogue process. EHRN plans to consult with the Global Fund Secretariat to ensure flexibility in completion of its concept note, reflecting the unique country prioritization and SR

selection process that has been recommended by the region as a result of a robust and transparent process.

### **ENPUD mapping of people who use drugs in decision-making processes**

Members of ENPUD in 6 countries—Georgia, Moldova, Russia, Tajikistan, Ukraine, and Uzbekistan—conducted a mapping of drug user engagement in decision-making processes between June and August. The results of this mapping provided an important source of data directly from the drug user community for consideration in developing the regional initiative concept note. The mapping—based on interviews with drug user activists, harm reduction organizations, and state healthcare providers—found substantial exclusion of drug users from relevant national decision making processes and policy setting bodies. Unsurprisingly, participants reported lack of access to relevant information, isolation, and discrimination hindering effective engagement by drug users in decision-making processes. These important findings underscore the value of an innovative regional approach building on the lessons of previous harm reduction advocacy efforts, using solidarity and collaboration between community networks throughout the region.

### **Assessment of the regional dialogue process**

Each stage of the regional dialogue process generated important lessons based on feedback from participants interviewed for this report. In general, interviewees felt the stages of the regional dialogue process were organized, representative, robust and highly inclusive.

Participants reported that on-line consultations generated substantive debate and discussion, but some organizations with important contributions did not engage or reported having limited or unstable access to the internet. Although stakeholders reported that engagement of communities had been meaningful during the first phase of work, they encouraged EHRN to do even more to ensure grassroots community engagement at each stage of the process—particularly in countries where community engagement is already known to be weaker. Others noted that involving official government structures should be a priority for the future, because they had been less involved in the regional dialogue.

Translation during the regional consultation was critical, however it also consumed more time, resulting in perceptions that some discussions were slightly rushed.

Participation of representatives from the Global Fund was considered extremely beneficial, and supportive of the partnership model of the NFM. Specifically, participants emphasized that the supportive, proactive and engaged Global Fund Secretariat team provided substantial and timely assistance as EHRN sought clarifications and feedback regarding key questions and concerns.

## **Governance structures**

The regional dialogue process also defined the governance structures for the regional initiative. Three bodies will share responsibilities for concept note development, grant implementation and grant oversight. EHRN's pre-existing governing body, a **Steering Committee (SC)** elected by EHRN membership and representing the 6 EECA sub-regions and the community of people who use drugs, will be responsible for the overall governance of the grant, as well as concept note development and implementation, including decision-making on prioritization criteria for target countries and SR selection criteria. The SC will also play a key role in monitoring grant implementation, serving as a de facto Coordinating Mechanism. The SC will take responsibility for regular communication with CCMs in countries where regional initiative activities will be implemented.

The Regional **Oversight Committee (OC)** will oversee grant implementation—a function that will be delegated by the SC to the OC. To increase transparency and accountability in governance, the OC will be open to non-EHRN members. The OC will not perform any management functions or assume any management responsibilities for the Principal Recipient, but will assure effective grant implementation. The OC will not make any decisions related to its findings, but rather will make recommendations to the Steering Committee for decision and action.

Finally, the SC also established a **Regional Technical Advisory Group (RTAG)**. The purpose of the RTAG is to provide the SC with strategic guidance on the development of the concept note and implementation of the grant and to review applications from potential SRs and small grantees. The RTAG acts as a consultative body and has no decision-making authority.

#### **Establishing the Regional Technical Advisory Group (RTAG)**

The RTAG will provide technical guidance from an array of partners who are linked with international and national processes in fields allied to harm reduction such as human rights, women’s rights, tuberculosis and hepatitis C, community and health systems strengthening, and financial management. The RTAG consists of 15 members representing 4 sub-sectors:

- technical partners (UN agencies, donors etc.);
- international and regional organisations;
- national harm reduction and other civil society or governmental organisations;
- organisations and/or groups of people who use drugs/clients of opioid substitutions therapy (OST).

On July 8, EHRN launched a call for applicants to the RTAG. The SC reviewed applications from representatives of national civil society organizations and from community organizations; representatives from technical partners and international and regional organizations were invited directly. The SC approved 15 RTAG members from the 4 sub-sectors. The RTAG had its first meeting in Vilnius, Lithuania from July 29-30. The RTAG meeting was also attended by EHRN staff members, and by consultants from the Australia-based AIDS Projects Management Group (APMG) and a regional consultant from Moldova. These consultants are working along with EHRN on development of the regional initiative concept note. At this meeting, RTAG members focused on the following:

- Establishing the RTAG’s methods of working to support the regional initiative, including processes it will use to review applications from potential SRs and small grantees;
- Further refining the scope and key elements of regional initiative;
- Reviewing the most recent version of the draft regional initiative concept note;
- Developing detailed technical advice and recommendations based on the TRP’s early feedback, in particular to assist in concept note finalization;
- Revising the draft scope of the project activities for the regional initiative; and
- Reviewing the feasibility of the draft project plan of activities.

RTAG participants agreed on a process for developing recommendations regarding SR selection: a sub-group of the RTAG will be constituted to review proposals, and the sub-group along with the EHRN Secretariat will provide recommendations to SC. The RTAG noted that SRs should be selected by November 15, permitting time for site visits to SR applicants between October and November.

In addition, the second sub-group of RTAG members was established to help EHRN to finalize the

regional advocacy campaign concept—a core activity that will be included in the regional initiative. RTAG members will also participate in a final review of the concept note in late August before its submission.

## Early engagement with the TRP

The EHRN SC submitted on June 21, 2013 a zero draft concept note to the TRP, in order to obtain high level, provisional feedback and reactions from the TRP. The SC sought feedback that would strengthen and focus further work on developing the final concept note, and would identify priority challenges and particular areas where additional work would be required by the drafting team and other stakeholders. TRP feedback has been received by the EHRN SC, and was reviewed by the RTAG and is being taken into account by the team finalizing the concept note.

EHRN plans to submit the final concept note by September 6, 2013.

## Lessons learned: technical support

Participants in the regional dialogue process identified numerous areas where provision of technical support for carrying out the regional dialogue process and for establishing the general approach of the regional initiative could have been stronger. Challenges that arose included unavailable or incomplete technical data on key populations and lack of clear communication lines regarding responsibilities for provision of technical support among UN technical partners.

Incomplete or unavailable technical data regarding key populations is critical for multiple reasons—including the direct impact on Global Fund eligibility and on determining indicative funding levels under the NFM. During development of the draft concept note, EHRN contacted UNAIDS to obtain data regarding the national HIV strategic plans in EECA. EHRN wished to determine whether or not the plans included harm reduction services and if they did, the size of budgets for harm reduction, how those budgets were allocated and for which services. Unfortunately the response to this request did not generate data that EHRN was able to use. This lack of data on baseline investments in harm reduction services by government complicates the challenge of prioritizing target countries within the regional initiative.

Likewise, EHRN was concerned that non-existent, unreliable or incomplete epidemiological data on estimated prevalence and incidence among people who inject drugs (PWID) further complicates the prioritization of target countries for the regional initiative. For example, based on an email exchange between EHRN, UNAIDS and the Global Fund it emerged that as at the beginning of 2013 Moldova's HIV burden was assessed as 'moderate' by the Global Fund, because UNAIDS only reported on the HIV prevalence among MSM in 2012, instead of including other key populations such as PWIDs. But Moldova has a concentrated epidemic among PWIDs—according to UNODC, over 20% of PWIDs are HIV positive.

In addition, efforts to mobilize technical support from UN technical partners during this initial stage indicated that communication and coordination within and between technical partners should be improved. For example, the UNAIDS global technical support plan on support for NFM early applicants did not include support to EHRN as a regional early applicant, despite UNAIDS clear alignment with the goal and objectives of the regional initiative. No technical partners other than UNODC were able to allocate financial resources to the regional dialogue process. Funding for both concept note

development and organizing the regional dialogue was provided by GIZ's BACKUP Initiative, which was the sole donor for EHRN's work to develop a Global Fund regional proposal for Round 11.

Finally, requests by EHRN to the UN technical partners for technical support, including reviews of the zero draft of the concept note, did not generate timely feedback except from UNDP and UNODC. EHRN relied almost entirely on a small number of staff within technical agencies, particularly at UNAIDS, already known to be supportive, and enlisted these individuals as experts best positioned to provide quality technical support—but this ad hoc approach is not ideal, and there were too few individuals enlisted. Subsequent work on the regional initiative will hopefully generate more comprehensive support from technical partners at national, regional, and global levels.

## Recommendations

The dialogue process for developing the regional initiative concept note has generated important lessons learned. The following are initial recommendations for key stakeholders:

- Supporting strong regional dialogue processes and provision of appropriate technical support is critical to the success of the NFM. Full support requires funding. Appropriate donors should make funds urgently available for these priorities.
- The Global Fund should be flexible in adjusting the concept note template and CCM endorsement requirements for regional proposals taking into account the regional context, results of regional dialogues, and the value of innovation in SR selection and country prioritization processes.
- Although several early applicants have been able to undergo all NFM stages and sign their grants within three and a half months, EHRN's experience so far in developing the regional initiative indicates that substantial amounts of time are required, particularly for the purposes of a meaningful engagement of key stakeholders, primarily representatives of the community of people who use drugs. EHRN recommends the NFM feature multiple windows—perhaps four—in order to enable flexibility while ensuring all partners are moving as quickly as possible in contributing to the process of quality concept notes development.
- Lack of updated and consolidated epidemiological data as well as lack of data on investment in harm reduction services by governments hinders regional applications' strategic planning of efforts and makes it difficult to establish the baseline for national investments. The technical partners should pay more attention to the quality and reliability of technical data and work to resolve this issue as soon as possible.
- Representatives of technical agencies were invited to sit on the RTAG for the regional initiative, to provide technical advice on the concept note, to review applications from prospective SRs, and to recommend a list of SRs for consideration and approval by EHRN's SC. Technical partners should ensure that highly qualified staff are formally delegated for this important task and that costs related to their engagement are covered by the respective technical agency.
- EHRN should continue keeping all partners regularly informed and updated about the status of the regional initiative, including through face-to-face country level visits to share information, particularly through on-going dialogues with CCMs.
- The Global Fund should develop and share best practices for communication and meaningful involvement of partners in regional initiative concept note development, in particular drawing on outcomes from the forthcoming TERG evaluation on the NFM.