

REACHING KEY POPULATIONS

AFEW Strategic Plan 2017–2019

- ARMENIA
- AZERBAIJAN
- BELARUS
- GEORGIA
- KAZAKHSTAN
- KYRGYZSTAN
- MOLDOVA
- RUSSIA
- TAJIKISTAN
- TURKMENISTAN
- UKRAINE
- UZBEKISTAN

November 2016

Vision

The vision of *AFEW* is a world in which vulnerable groups in society have access to health care without stigma and discrimination.

Mission

AFEW is dedicated to improving the health of key populations¹ in society.

With a focus on Eastern Europe and Central Asia, *AFEW* strives to promote health and increase access to prevention, treatment and care for major public health concerns such as HIV, TB, viral hepatitis, and sexual and reproductive health.

We seek to do this by:

- Advocating for human rights for key populations and upholding their rights to health;
- Engaging communities in developing participatory approaches;
- Decreasing the stigma of HIV, AIDS, hepatitis and TB by providing information to community leaders and creating a supportive environment;
- Developing and supporting health services for key populations;
- Utilising innovative strategies to promote healthy behaviours

Introduction

AFEW is uniquely positioned as one of the few HIV, TB, hepatitis and sexual and reproductive health and rights (SRHR) organisations working in Eastern Europe and Central Asia. This is a region where the work is critical, as HIV and sexually transmitted infections are on the rise, sexuality education is deficient and gender-based violence goes largely unrecognized. Further, cases of multidrug resistant and extensive drug resistant tuberculosis are increasing; and there is a very high prevalence of hepatitis C. The group with the highest risk for HIV and HIV related diseases are people who use drugs. However, transmission through sexual contact is increasing and the prevalence among women and men who have sex with men is increasing.

For a more detailed situation analysis, please see Annex 1.



¹ AFEW works for and with people who are disproportionately affected by HIV, tuberculosis and viral hepatitis: people who use drugs, prisoners, sex workers and men who have sex with men, as well as youth and women.



Purpose of the strategic plan

The purpose of this 3-year (2017-2019) strategic plan is to guide *AFEW* in the next phase of its structure after the re-organisation in 2013. Further, it will present the directions that will guide *AFEW* for the coming years. With regards to decision making, it sets out to:

- Identify priorities
- Provide the basis for determining resource requirements
- Provide the basis for detailed implementation planning.

The Sustainable Development Goals (SDGs), and specifically SDG 3 'Ensure healthy lives and promote well-being for all at all ages' and its target: 'By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases' are the framework in which this Strategic Plan is developed.

AFEW's activities in this Strategic Plan contribute to the UNAIDS/WHO strategy that is centred around a continuum of care cascade with the goals of "90-90-90". As such it sets out to increase access to testing, treatment and adherence to treatment. Furthermore, this strategic plan should guide AFEW in contributing to the WHO global health sector strategies for HIV and hepatitis (2016–2021) by activities in the action framework that support universal health coverage, the continuum of services and improved public health.

The plan is intended to help *AFEW* effectively uphold the human rights of all people with a focus on key populations at risk for HIV, TB, viral hepatitis and poor sexual and reproductive health by fulfilling the right to health.

The strategic plan has been drafted in accordance with the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW) by contributing to access to health services for women and girls.

The three strategic objectives:

- 1. Advance the ability of key populations to access health services without stigma and discrimination;
- 2. Mobilize and support communities and NGOs to improve the health of key populations specifically with regards to HIV, TB, hepatitis and sexual and reproductive health
- 3. Ensure that *AFEW* is strong, sustainable and linked to international organisations and networks.

1. Advance the ability of key populations to access health services without stigma and discrimination

To ensure funding, domestic resources, political attention and prioritisation, advocacy is fundamental. *AFEW* will continue participating in the Bridging the Gaps Alliance, with the continuation of the project 'Bridging the Gaps: health and rights for key populations' (2016–2020), in which advocacy for key populations and harm reduction is central.

To facilitate and maintain access of key populations to health services, there is an urgent need to raise funds for Eastern Europe and Central Asia from international donors and domestic resources for HIV, TB, hepatitis and other public health concerns. International donors such as the Global Fund, USAID and the European Union are withdrawing from the region. Local authorities are not able or willing to replace them. Key populations and specifically people who use drugs and prisoners are the groups in society who suffer most. *AFEW*, as a member (chair) of AIDS Action Europe, of the Civil Society Forum on HIV/ AIDS and the Civil Society Forum on Drugs, will continue advocating for increased access to prevention, treatment and care of HIV,

² By 2020, 90% of all people living with HIV will know their HIV status. By 2020, 90% of all people with diagnosed HIV infection will receive sustained antiretroviral therapy. By 2020, 90% of all people receiving antiretroviral therapy will have viral suppression

TB, hepatitis C and SRHR, including harm reduction.

AFEW will continue to position itself as a leading advocate by taking part in diverse national, regional and European groups and networks. AFEW is participating in discussions with the Dutch Ministry of Foreign Affairs, Ministry of Justice and Ministry of Health to discuss harm reduction and drug policies at a national and international (UN) level.

As a member of the Dutch HIV/AIDS platform, with other HIV and AIDS focused organisations, *AFEW* shapes the advocacy agenda for Dutch politicians.

As member of the Health in Prison Project of the WHO Regional Office for Europe, *AFEW* advocates for improved health and well-being for prisoners.

The International AIDS Conference 2018 will be held in Amsterdam and will have a focus on Eastern Europe and Central Asia. AIDS2018 will be an ideal opportunity to put the needs of the EECA region in the spotlight. *AFEW* is proud to have been chosen by the Dutch Ministry of Foreign Affairs as the organization best suited to engage the Eastern Europe and Central Asia EECA region at AIDS2018. One of the pillars of the coordination project for AIDS2018 will be the enhancement of community-based research. The produced data will form the basis for the advocacy agenda of the next years.

Outcomes for objective 1:

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Outcome	2017	2018	2019			
A maintained focus from the Dutch gov- ernment on EECA	Visit of SRHR/AIDS ambassador Mr Lam- bert Grijns to EECA. Study tour for Dutch parliamentarians to EECA	AIDS2018, International AIDS Conference in Amsterdam	EECA on the political agenda of Dutch local authorities Financial support for activities in the region			
Increased funding for AFEW – goal is to have EUR 4 million annual budget in 2019	A budget of EUR 2.5 million	A budget of EUR 3 million	A budget of EUR 3.5 million			
Increased domestic funding, AFEW part- ners have received local funding through social contracts	2 partner organisa- tions receive domes- tic funding (in total 50.000 EUR)	3 partner organisa- tions receive domes- tic funding (in total 100.000 EUR)	3 or more partner organisations receive domestic funding (in total 150.000 EUR)			
Increased participa- tion of EECA represen- tatives at AIDS2018 (targets set in work plan AIDS2018)	Workplan AIDS2018 to be implemented. Other sponsors on board.	AIDS2018: increased # of abstracts, posters, presentations from representatives from the region at the con- ference.				

2. Mobilize and support communities and NGOs to improve the health of key populations specifically with regards to HIV, TB, hepatitis and sexual and reproductive health

AFEW will support direct service delivery for testing, counselling, Needle and Syringe Programmes and other (psychosocial and legal) care for key populations at risk.

Apart from the aforementioned activities AFEW would like to provide technical assistance

that is new for the region in offering therapies and other mental care to people who use drugs.

AFEW introduced the client management model into Eastern Europe and Central Asia in 2004. Client management has proven to increase adherence to therapy, and to reduce recidivism of prisoners. It is now time to safeguard and improve the quality of services where necessary.

No stigma and discrimination

AFEW will continue to act as the leader in the training of health care providers and other professionals to improve their attitudes towards key populations. Stigma and discrimination among service providers is still an important barrier to seeking treatment and care for people who use drugs, men who have sex with men, and sex workers. Issues related to stigma and discrimination will be incorporated in all training activities and informational materials for governmental and non-governmental service providers.

Decriminalisation of key populations

Key populations in many countries are criminalized by laws and by law enforcement. *AFEW* will continue to advocating and supporting decriminalisation of key populations. Access to legal support will be part of the comprehensive package of services and training; sensitization of law enforcement officers in the EECA countries is an ongoing activity.

Prison Health

AFEW is recognised for its expertise in prison health and working with prison authorities. We will continue and expand our leadership role in supporting HIV, TB and viral hepatitis prevention and care in prisons and promote essential elements like harm reduction, including needle and syringe programmes, and opioid substitution therapy. Transitional client management that prepares prisoners for release and ensures linkage to follow-up after release is a valuable variant of client management that meets many of (ex)prisoners' needs, and will therefore be scaled up.



Sexual and Reproductive Health and Rights

The AFEW Network will actively explore opportunities to integrate SRHR and HIV by either linking services with family planning organisations or by strengthening the capacity of its partners to include SRHR services.

Women, youth and migrants

Services are often not geared towards the needs of vulnerable women, youth and migrants. Youth are at risk of drug use and may have issues related to sexuality. Youth face barriers to services due to the need for parental consent. *AFEW* has started activities for young sex workers, young people who use drugs, and young offenders. *AFEW* will enhance efforts towards youth-friendly services.

There are many labour migrant streams in the region: from Central Asia to Russia, from the Caucasus to Russia and Ukraine, and from Ukraine to Western Europe. Migrants are at risk of drug use and SRHR concerns such as HIV. Some countries in EECA have strict policies for migrants with HIV and/or TB, such as deportation of people with these infections.

AFEW will explore opportunities to develop and implement activities for migrants and to look for partners in implementing multi-country projects for migrants as a regional activity in the Bridging the Gaps project.

HIV and TB

As both MDR- and XDR-TB are prevalent in the region, *AFEW* initiated activities in Kazakhstan, in collaboration with KNCV, to enhance collaboration between public and non-public (NGO and private services) sectors. We will continue to explore how *AFEW* can best contribute to expanding its HIV/TB capacity and build up services in a meaningful way.

Outcomes for objective 2:

Outcome	2017	2018	2019
People who use drugs or other substances have access to therapies and treatment	Awareness raised about new and other therapies and treat- ment among AFEW partners	Pilot projects for therapies and treat- ment for people who use drugs	Evaluation of pilot projects and decisions about how to continue taken
Direct services offered by AFEW partners in Ukraine, Kyrgyzstan and Tajikistan are in place	Direct service, sup- ported by AFEW, started in one country other than Tajikistan.	Direct services expanded in one or more countries of EECA.	Evaluation of direct services and deci- sions about how to continue taken
AFEW upholds its reputation as prison health expert and has at least 2 projects in Prison Health	Partnerships with other prison health related organisations are established.	2 prison health projects	2 prison health projects
AFEW demonstrates activities aimed at improving access for migrants to prevention, treatment and care for HIV, TB and Hep C	A regional project for migrants	AFEW recognised as a player in access to health for migrants.	Activities for migrants expanded.
AFEW is recognized as expert of integration of HIV and TB services and has at least 2 projects in this area	Partnerships with other TB organisations established.	New proposals developed.	2 projects imple- mented.



3. To ensure that AFEW is strong, sustainable and linked to international organisations and networks.

AFEW responds to a changing environment. International donors are withdrawing from the region, the geopolitical situation is tense, and local laws and policies make work for NGOs more and more challenging.

Civil society is a key stakeholder in the response to the HIV epidemic, tuberculosis and viral hepatitis. The health system and other governmental organisations also need to have the necessary capacity to act. In bringing civil society and governmental actors together, we contribute to building diverse and open partnerships. Capacity strengthening conducted in a sustainable way will continue to be our key activity for the region.

In some areas where our expertise transcends the regional experience, such as HIV in prison systems, technical assistance may be given outside the geographical region of EECA, such as in the Balkan region, where *AFEW* has made contact with an organization in Bosnia-Hercegovina.

E-learning and blended learning, e-health and m-health

AFEW will continue introducing innovative ways of transferring knowledge via e-health and m-health in collaboration with strategic partners.

Strengthening of AFEW and its partner organisations

AFEW will support partner organisations with resource mobilization, it will offer technical assistance to implement projects, and it will safeguard the quality of the work. During the years of this strategic plan AFEW will strengthen partner organisations' capacity by creating an enabling environment for learning, exchanging information, and expertise, while contributing to the sustainability of member organisations. We will allocate funds in the current projects, where possible, for human resource development.

AFEW International has a team of 6 staff members (1 director, 1 financial manager, 1 office manager, 1 communication officer and 2 project managers) with the possibility of adding 1 more project manager in the coming period. To mitigate the risks of a small team, AFEW International will look for opportunities to collaborate closely with other international organisations and networks. In 2019 AFEW will have a clear understanding of which collaboration and organisational structure it will have for the future.

Outcomes for objective 3:

Outcome	2017	2018	2019
AFEW contributes to pools of consultants and offers technical assistance throughout the region	AFEW as Technical Advisor for Client management, Prison health and Commu- nity-based research promoted	2 requests for TA	Requests for TA expanded
AFEW has introduced m-health in the region	Ideas about m-health developed and possi- ble donors explored	1 pilot project on M-health	Evaluation and decision how to continue
AFEW is strengthened and capacity is increased	Knowledge and skills about treatment, therapies and rehabil- itation for people who use drugs increased	AFEW active and visible at AIDS2018	Strong linkages with international part-ner-organisations



Monitoring and Evaluation Plan

The outputs and outcomes of the three objectives described in this Strategic Plan will be monitored by steering committee and board on an annual basis. *AFEW*'s Network Steering Committee will review the outputs and outcomes during their annual reporting and planning meeting. The board of *AFEW International* will review them during their face-to-face meeting in the spring of each year. An in-depth evaluation will be planned in the last year of this Strategic Plan.

Sustainability and the longer-term future

AFEW has a stable financial basis until the end of 2020 thanks to the Bridging the Gaps project. In order to ensure sustainability from 2020 on we will carefully follow the funding stream and public health development trends in the region.

Currently there is an increased focus on international funding for advocacy activities and less so for service delivery activities. Furthermore, donors are inclined to fund community-based organisations and networks with the aim of empowering those communities to fight for a better life. Donors have a preference for funding big international organisations instead of smaller ones that may have a more limited capacity in mitigating risks.

AIDS2018 is an important event and moment in time to assess the possibilities for *AFEW*'s future.

AFEW will further explore opportunities for collaboration with networks and organisations in the coming years in order to make an informed decision about AFEW's future by the end of 2019.

About AFEW

Our Core Values

AFEW is a learning organisation in the broadest sense of the word

Learning from best-practice experiences elsewhere in the world and from knowledge gained in EECA, *AFEW* develops innovative tools and approaches adapted to a specific context. *AFEW* builds upon its own practical experience in the region, strives for ongoing improvements in its practices, and manages and transfers knowledge to the relevant stakeholders.

AFEW strengthens the capacity of professionals in EECA

AFEW sees its role as providing assistance in such a way that appropriate action is taken, with the objective of strengthening local capacity and ensuring that the final responsibility remains with those in the society itself.

AFEW is resilient and sustainable

AFEW responds to a changing environment, is resilient and sustainable, committed to building partnerships and engaging with communities.

AFEW is fundamentally a humanitarian organisation

Through its work practices, *AFEW* contributes to realisation of the right to the best possible health care and development of just, compassionate, open, and democratic societies firmly based on social justice principles that affirm the dignity of each human being and emphasise the need for tolerance and co-operation.

AFEW is a transparent and accountable organisation

AFEW is fully transparent in terms of its structure, planning, decision-making, reporting and fundraising.

AFEW values the commitment, compassion and the professionalism of its staff and this is reflected in our actions

AFEW has built up extensive expertise in prison health and is recognized as a reliable

partner by local governments, United Nations bodies and other international organizations in improving health and upholding the rights of detainees.



AFEW has a broad approach towards groups in society that are at risk for HIV, TB and viral hepatitis and who have limited access to health services. With its introduction in 2004 of a client management system in the region:

- 1. AFEW improves access to health care services
- 2. Strengthens local health systems by offering a people-centred approach
- 3. Safeguards and improves the quality of service delivery
- 4. Facilitates collaboration between public and non-public (NGO and private) services at the regional, national, and municipal levels.

AFEW works in Eastern Europe and Central Asia. At present, AFEW collaborates with partner organisations in Kazakhstan, Kyrgyzstan, the Netherlands, Tajikistan, and Ukraine. AFEW International in the Netherlands serves as the secretariat of the AFEW Steering Committee, which consists of directors of our partner organisations in the region. This is a unique constellation for the region and in the fields of HIV, tuberculosis, and SRHR, as it links best practices and lessons learnt from the 'west' with the 'east' and vice versa. The independent, locally embedded AFEW organisations are uniquely placed because of their longstanding relationship with and connection to the local context, right from the time of AFEW's foundation in 2001 when these members were local branches. AFEW is currently exploring new ways of implementing activities in the Russian Federation due to the current difficult working environment for NGOs in Russia. In late 2015, AFEW Russia ceased its activities.

How the strategic plan was developed

Evaluation

The Steering Committee of *AFEW* evaluated the previous Strategic Plan 2014–2016 guided by a set of questions. Some important issues were highlighted during the evaluation and taken into account in the new Strategic Plan.

Review by board

During the board meeting in December 2015, the board reviewed the Strategic Plan 2014–2016 and concluded that the restructuring of the organization is completed. *AFEW* has started new activities in the past 2 years that will be continued and followed up in the new strategic plan.

2-days meeting in March 2016

During a two-day meeting on 21-22 March 2016, the *AFEW* Network Steering Committee convened to discuss the directions of this Strategic Plan. An agenda with topics to be further explored guided the meeting.



Annex 1: Situation analysisHIV

Eastern Europe and Central Asia (EECA) represents one of the few regions globally where there is a continued increase in the estimated incidence of HIV infection³. The current estimated number of people living with HIV in the region exceeds 1.5 million people⁴.

Injecting drug, heterosexual transmission and sex among men who have sex with men (MSM) are the main modes of transmission. The number of women acquiring HIV is increasing.

Tuberculosis

TB is a leading killer among people living with HIV and this deadly HIV/TB combination is increasing in the EECA region. Key populations at risk for TB in the EECA region are people who inject drugs (PWID), prisoners and ex-prisoners, homeless, migrants and internally displaced persons (IDP). Eastern Europe and Central-Asia has the highest burden of MDR-TB⁵.

Hepatitis C

With prevalence as high at 80-90%, Eastern Europe and Central-Asia has some of the highest rates of hepatitis C among PWID in the world.

Human rights, stigma and discrimination

There is an increasingly hostile social and legal environment for HIV prevention among key populations (KPs). Following the Russian example, some countries in the region are introducing anti-gay bills (Kyrgyzstan). Kyrgyz civil society is also concerned about a bill that will



³ DeHovitz, J., A. Uuskula, and N. El-Bassel, The HIV epidemic in Eastern Europe and Central Asia. Curr HIV/AIDS Rep, 2014. 11(2): p. 168-76.

Kazatchkine, M., Drug use, HIV, HCV and TB: major interlinked challenges in Eastern Europe and Central Asia. J Int AIDS Soc, 2014. 17(4 Suppl 3): p. 19501.

⁵ http://www.euro.who.int/en/health-topics/communicable-diseases/tuberculosis/publications/2016/tuberculosis-surveil-lance-and-monitoring-in-europe-2016.



⁴ http://www.unaids.org/sites/default/files/media_asset/AIDS-by-the-numbers-2016_en.pdf

criminalise sex work. Access to health services is limited for PWID due to barriers such as stigma and discrimination and harm reduction measures, such as needle syringe programmes or opioid substitution therapy (OST), are still prohibited or exceedingly difficult to access in some countries, including Russia. Although official data are not available, an estimated 25 – 35% of prisoners are incarcerated because of crimes related to drugs⁶.

Financial and structural sustainability

There is a major lack of financial sustainability in the region. Most governments do not take responsibility to fund non-governmental or community-based organisations. The fact that many countries in the region are becoming middle-income countries due to rises in their Gross Domestic Product, means that international donors, including the Global Fund, are exiting the region. Civil society organizations express great concerns that a transition to government funding of prevention interventions, in particular, will not happen, given the lack of commitment that governments have shown. And when domestic funding is increased, it frequently does not cover harm reduction services. As a result existing infrastructures, especially at the social and community level are collapsing or being dismantled.

Civil society

NGOs and CBOs are relatively weak throughout the EECA region, especially with regards to advocacy, negotiation skills and collaboration with the local authorities, although some countries have an increasing number of competent organisations, usually with links to international NGOs. Throughout the region, there is also a lack of community organisations, or organisations of patients with specific diseases, who can advocate on behalf of those affected. Laws modelled after the Russian foreign agent law, which requires NGOs receiving foreign funding to register as foreign agents, are being drafted in Kyrgyzstan, Kazakhstan, and other countries in the region⁷. These laws mean that NGOs receiving international funding will be fined if they do not register and, once registered, face significant barriers in implementing activities. Such laws constitute a major challenge and setback for the large portion of NGOs that receive international donor support.

⁷ Putz C. Kyrgyz «Foreign Agents» Bill Moves Forward. The Diplomat, 4 June 2015. http://thediplomat.com/2015/06/kyrgyz-foreign-agents-bill-moves-forward/ Accessed 13 July 2015.



 $^{^6\} https://www.unodc.org/documents/ungass2016/Contributions/Civil/PenalReform/Drugs_and_imprisonment_PRI_submission_UNGASS.pdf.$

Annex 2: Action Framework

1. Advance the ability of key populations to access health services without stigma and discrimination;

Activities

- Participation in Dutch HIV/AIDS platform and # of meetings
- Participation in Dutch Harm Reduction Platform and # of meetings
- Participation in Civil Society Forum on HIV/AIDS and Civil Society Forum on drugs to advise the European Commission
- Participation in the Health in Prison Project of WHO Europe
- Participation in Bridging the Gaps Alliance and maintaining a focus on EECA
- Collaboration with Beat the AIDS Epidemic to join advocacy for EECA
- Implementation of AIDS2018 project
- Participation of AFEW partners in local platforms to advocate for increased domestic funding for key populations
- Presentation at several conferences and events

2. Mobilize and support communities and NGOs to improve the health of key populations specifically with regards to HIV, TB, hepatitis and sexual and reproductive health

Activities:

- A plan to introduce therapies and treatment for people who use drugs and other substances
- Training of AFEW Network staff and local partners in therapies and treatment
- AFEW network members develop plan to provide direct services AFEW Tajikistan could be taken as example
- Plan to develop regional activities for migrants
- Prison Health projects seek collaboration with organisations that work in prison
- Plan with steps for safeguarding and improving client management
- 2 projects with KNCV to improve integration of HIV and TB services
- 3. To ensure that *AFEW* is strong, sustainable and linked to international organisations and networks.

Activities:

- A comprehensive package of e-learning modules for service providers
- A plan to introduce m-health activities for direct beneficiaries
- A human resource development plan for AFEW partner organisations' staff



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