We Fight, We Hide or We Unite:
Coping strategies amongst resilient harm reduction organisations and community networks in the context of shrinking space for civil society in Eastern Europe and Central Asia

Within the ‘Bridging the Gaps: Health and Rights for Key Populations’ phase 2 project
2017
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1 ACKNOWLEDGMENTS

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2_INTRODUCTION

The title of this report, ‘We Fight, We Hide and We Unite’, reflects the survival strategies we identified amongst resilient harm reduction non-governmental organisations (NGOs) and community networks of people who use drugs (PWUD) in Eastern Europe and Central Asia (EECA). This report details our findings from the situation assessment, ‘The Shrinking Space for Civil Society in Eastern Europe and Central Asia: Coping strategies amongst resilient harm reduction organisations and community networks in the context of a shrinking space for civil society in Eastern Europe and Central Asia,’ conducted in the summer of 2017. This assessment forms a part of the regional approach of the AFEW Network within the ‘Bridging the Gaps: health and rights of key populations’ programme (hereafter, the ‘Bridging the Gaps’ programme), financed by the Ministry of Foreign Affairs of The Netherlands. Furthermore, within this programme, the AFEW Network implements four country programmes, namely, in Georgia, the Kyrgyz Republic, Tajikistan and Ukraine.

In EECA, we have observed a diminishing space for civil society organisations (CSOs), perhaps best exemplified by the ‘Foreign Agent Law’ in the Russian Federation. The shrinking civil society space threatens the effectiveness of the response to HIV and other public health issues, particularly as it pertains to the health and rights of key populations. This pillar of the regional approach seeks to build upon progress made and support strategies that work, thereby reclaiming that space for civil society involvement (CSI). In this way, we work towards an effective HIV and public health response that respects the human rights of key populations and the survival of a healthy civil society.

REGIONAL APPROACH: OBJECTIVES, FOCUS AREAS AND METHOD OF WORK

The regional approach of the AFEW Network guides our planned activities beginning in mid-June 2016 continuing through December 2020 under the PWUD project of the ‘Bridging the Gaps’ programme. The areas identified for the regional approach within this time period consist of: 1) migration and mobility amongst key populations; 2) harm reduction friendly rehabilitation; and 3) the shrinking space for civil society in EECA.

The objectives of the regional approach of the AFEW Network within the ‘Bridging the Gaps’ PWUD project are to:

- Facilitate exchanges between and build the capacity of the AFEW Network and its partners within the EECA region in the fields of key populations (specifically PWUD), public health and human rights.
- Introduce and link regional and local expertise to international experience and experts working in the fields of public health and key populations (with an emphasis on drug use) through human rights–based approaches.
- Initiate an international dialogue regarding upholding human rights for key populations in the EECA region.
- Introduce innovations and advocate for activities currently lacking within the above-mentioned fields.

During implementation, an annual cycle of experience sharing, exchanges and capacity building will take place:

- To ensure the visibility of our innovative, unique and regional approach.
- To raise awareness and increase funding.
- To involve more partners and services.
Work focused on addressing the shrinking space for civil society in EECA also has the following specific goals, which are to:

- Develop strategies to respond to the shrinking space for CSO and NGOs in EECA with the intention of maintaining and securing the progress made in recent decades on fulfilling the health and rights of PWUD in EECA.
- Offer country partners shelter and prevent their isolation by joining regional capacity building and advocacy meetings.
- Raise awareness and offer tools to donors on finding ways to work with NGOs in societies dealing with a shrinking civil society space.

This report presents the primary findings from the assessment, ‘Shrinking Space for Civil Society Organisations in Eastern Europe and Central Asia,’ conducted between June and September 2017 at the international level by AFEW International and at the regional level in seven countries in the region (Georgia, Kazakhstan, the Kyrgyz Republic, the Russian Federation, Tajikistan, Ukraine and Uzbekistan) as well as Hungary and Poland.

After the initial review of the nine countries, we selected six — Kazakhstan, the Kyrgyz Republic, Poland, the Russian Federation, Tajikistan and Uzbekistan — for a further situation assessment. Here, we provide a detailed description of the overall study purpose, methodology, background and context regarding the shrinking civil society space and the coping strategies of HIV and PWUD CSOs working under these circumstances. The annexes to this report contain details regarding the assessment design, methods and tools.

Country profile includes a description and comparison of the overall legal and democratic context, conducted by representatives of global human rights and democratic organisations. We also include the perspective of members of NGOs and community-level partners through extracts from interviews with them.

We studied the resilience strategies through literature reviews and in-depth interviews with local country partners in six countries: Kazakhstan, the Kyrgyz Republic, Poland, the Russian Federation, Tajikistan and Uzbekistan. This country selection was based on the objective of presenting diverse contexts vis-à-vis the shrinking civil society space. Thus, we selected different situations ranging from very strict but stable, to very rapidly changing, to countries where improvements were observed. Furthermore, we selected countries characterised by a certain accessibility to and trusted relationships with local CSOs.

We also describe the perspective of donors, and their conditions for and ideas regarding supporting NGOs in countries where the civil society space is shrinking little by little.

The results of this assessment will be used to develop ideas and strategies on how to cope with the local contexts of the shrinking civil society space. In this way, it will contribute to the survival of CSOs and improving the current situation.

This assessment represents the first step in the development of this focus within the AFEW Network’s regional approach within the ‘Bridging the Gaps’ programme. It will be followed by an analysis of existing gaps in the support necessary for specific interventions and initiatives to support specific coping strategies; the development of pilot projects on advocacy, service delivery or capacity building; and the continuous monitoring of results.
3_SUMMARY OF PRIMARY FINDINGS

As much as EECA is a heterogeneous monolith and differences exist in civil society situations across countries, the civil society space remains somewhat limited (or shrinking) in the region as a whole. Surprisingly, however, we found that differences also exist between how objective monitoring tools describe the state of civic rights and freedoms within each of the states and how country representatives active in the drug policy, harm reduction or HIV fields view their own situation. A comparison of these two points of view leads us to conclude that the nine countries analysed fall into three broad categories:

• The environment for civil society is quite challenging, leaving NGOs very fragile and placing them, their work and at times their staff members in danger (i.e., the Russian Federation).
• The situation has been and remains challenging, although stable, allowing civil society to feel safer and more optimistic when slight, positive changes occur.
• The context in which rapid and worrying changes are currently observed moves such countries from the comfort zone to a challenging environment (i.e., Poland and Hungary).

The shrinking space for civil society represents a broader phenomenon and has a wide range of consequences for NGOs of different types. This becomes doubly disturbing when coupled with work on HIV and related fields, since in most countries civil society assumes responsibility for the majority of such work. Any additional burdens and challenges that make their work harder if not impossible are not only life-threatening for their survival as organisations. These consequences also extend across the entirety of the HIV, harm reduction and related fields of work by potentially not meeting the needs of vulnerable populations such as PWUD, sex workers or the lesbian, gay, bisexual, transgender and queer (LGBTQ) communities.

An emerging or continually shrinking space for the existence and activities of CSOs challenges organisations and communities, forcing them to develop ways to sustain and continue their missions. Typically, defining a ‘way’ forward is far removed from preparing a well thought out, long-term strategy based on evidence and evaluation. Often, such plans must be tailored to the chaotic changes at the country level and represent an ad hoc response to specific challenges, such as responding to the ‘Foreign Agent Law’ (in the Russian Federation), smear campaigns or being denied public funding.

A closer look at the numerous coping strategies CSOs develop leads us to conclude that most fall into one of three broader strategies as follows:

• FIGHT or openly fighting the system,
• HIDE or remaining silent to prevent problems or operating in secret and
• UNITE or actively seeking close collaboration with authorities.

The following sections of this report describe the attitudes of NGOs belonging to each category. We also summarise a number of practical coping strategies they use, including example activities, their strategy, the conditions needed to apply it and the advantages and disadvantages of doing so.

Before we summarise these coping strategies, we must note that this report does not judge nor rate any of the strategies employed. Neither do we put forth a single best solution for all NGOs and communities in the region to adopt. There is no one-size fits all strategy. Therefore, each individual CSO must develop its own strategy, and — equally important — respect the choices others make and build a supportive environment together.
3_SUMMARY OF PRIMARY FINDINGS

**FIGHT**

The *FIGHT* category consists of coping strategies that openly oppose authorities or rules and regulations which shrink the space available to civil society. Such strategies advocate against strict drug laws and aim to implement international standards and evidence-based interventions, advocacy and actions which uphold the rights of key populations such as PWUD. In addition, *FIGHT* strategies also rely on various means of protest against general laws and policies and against punishing organisations and smear campaigns. Whilst CSOs who decide to *FIGHT* do so in keeping with the freedom of expression and protecting the fundamental civil rights for all including PWUD, opposing and criticising authorities openly closes the door to dialogue and collaboration and puts the safety of organisations and individual activists at risk. Under the *FIGHT* category, we identified coping strategies such as strategic litigation, street lawyers, working with paralegals, finding alternative funding streams and working regionally across EECA.

**HIDE**

*HIDE* strategies consist of those where NGOs operate silently without advocating for activities not welcomed by authorities, and at times without openly admitting they provide such services or engage in particular activities. Such strategies help to continue the activities offered by NGOs, protect the organisations themselves (from being closed or listed as foreign agents) or protect their staff from personal risks. Whilst *HIDE* strategies can openly show that civil society adheres to authorities, they can also include hidden protests or secretly continuing to support the community. Hiding sometimes allows CSOs to maintain access to state grants or to cooperate with authorities. This strategy is not without negative consequences. Operating secretly can affect the quality of work. Similarly, not speaking freely diminishes public and open discussions on life-saving evidence-based interventions. *HIDE* coping strategies consist of reframing and rewording the work conducted, finding and establishing wider coalitions, volunteers organisations and changing the formal structure of the organisation.

**UNITE**

This group of coping strategies consists of different forms of working with authorities. Some organisations do so in order to influence decisions made within the country, to preserve at least part of their work or to be eligible for state funding. Uniting with authorities requires resigning from the watch dog function and abandoning (or hiding) the most sensitive parts of their work, such as advocacy for opioid substitution therapy (OST) or for LGBTQ rights. By doing so, NGOs become partially responsible for not supporting certain key populations and communities or for not implementing evidence-based practices. In addition, *UNITE* strategies jeopardise work centred on various core principles, such as ‘nothing about us without us’ or the Injecting Drug Users Implementation Tool (IDUIT, a tool developed by the International Network of People Who Use Drugs (INPUD) describing how to involve PWUD in work focused on PWUD; for a further description, see page 26. The coping strategies used here typically include offering mostly health-related services which form an integrated part of national responses and include policy implementation, training governmental representatives on health and HIV (possibly including the specific and important role of CSOs), roundtable discussions and consultations with the government and accessing state grants.
COMMUNICATION

As the civil society space shrinks, CSOs change or reshape their communications strategies. Their choices here follow the FIGHT, HIDE and UNITE strategies employed to manage the situation. Although advocacy has been an important tool for many NGOs active in the HIV, harm reduction and drug policy fields, it is not uncommon for organisations to refrain from public appearances and appearing in the media. This typically occurs to protect their existence, their activities or possibly the entire field of work. Remaining silent towards the media represents the option of last resort, implemented only once all other means of communicating with authorities proves ineffective. In terms of the core work, most CSOs feel differently — that is, they feel obligated to speak up and protest. The section on communication of this report recognises the use of social media as well as the idea of NGOs messaging to a more international audience with the hope of garnering support from the international community.

DONOR RESPONSES

A short but substantive part of this report is dedicated to international donors’ positions vis-à-vis the shrinking space for civil society in the countries they support. In parallel although not necessarily independently, we found that the amount of funding enabling NGOs to function has dramatically decreased. The withdrawal from the region of some of the largest agencies providing financial support to HIV, harm reduction and drug policy NGOs is perceived by organisations as one of the primary obstacles to sustaining their activities. Based on interviews with representatives of grant-giving institutions, this section examines some of the reasons donors stepped back from EECA. For example, the Global Fund to Fight AIDS, Tuberculosis and Malaria’s (hereafter, the Global Fund) withdrawal was based on the expectation that EECA states would assume responsibility for funding HIV prevention and treatment programmes at the country level. Whilst the goal was met in some countries, this expectation was not met at all in others. In most countries, only treatment and testing have been financed by the state, whilst no funding exists to support community involvement, advocacy and prevention. Other reasons the Global Fund withdrew include amongst others changes to legal regulations at the national level which list international organisations not welcome in the country, as well as concerns regarding the safety of organisation staff.

The decreasing presence of international donors (and their funding) in the region carries a number of severe consequences for civil society, such as unhealthy competition between NGOs or an overreliance amongst NGOs on domestic sources. But, we learned during interviews that some donors appear to be developing ways to cope with the unintended consequences of their strategies. This includes outcomes related to the shrinking civil society space. Some donors appear more open and flexible when considering and implementing new ways of acting, whilst others need to re-adapt — often internally — to political conditions in order to continue their funding. As such, a list of new ways to operate is currently under consideration and development, and can be found in this section of the report.

CONCLUSIONS AND RECOMMENDATIONS

From our analysis of the situations in Kazakhstan, the Kyrgyz Republic, Poland, the Russian Federation, Tajikistan and Uzbekistan presented in this report, we can conclude that the perceived space for NGOs and the feeling of being involved or under threat is heavily influenced by a combination of strict state policies and
changing laws, regulations and the overall political climate. Although these feelings may vary heavily across organisations, we can clearly see that the space for civil society in the EECA regions is shrinking. But — and another conclusion drawn from our interviews — HIV, harm reduction and drug policy NGOs remain persistent and show great resilience even in the harshest and most unsafe situations.

As much as their commitment deserves much appreciation, if this limited civil society space persists for much long or worsens, the dedication and devotion of civil society representatives will require a more strategic response and support given this challenging situation. We also recommend that NGOs in the region work in solidarity and cooperation, extending to countries in Central Europe. Considering the present developments in Hungary, Poland and some other countries in Central Europe, it is essential to include CSOs in this region in discussions, dialogues and exchanges when it comes to coping strategies.

Another set of recommendations focuses on following international standards, guidelines and principles that are vulnerable and sometimes abandoned during critical situations such as when organisations struggle to survive and sustain their work.

A clear need exists to develop regional networks and to exchange practical knowledge — not only amongst activists, but also amongst donors. As such, donors can find a list of recommendations addressed to them specifically.

Survival of CSOs in EECA necessitates that donors re-strategise and develop opportunities to support civil society in the region that includes providing some kind of emergency funding as well as funding via alternative channels and offering flexible conditions. This also requires working less often on the forefront as a donor in order to protect CSOs. It may also demand being aware that, in countries where CSOs struggle to survive, sustainability cannot currently be the goal. International donors should not solely focus on the effectiveness of direct epidemiological interventions, but should consider the importance of community involvement. Thus, investing in community advocacy, monitoring, prevention and outreach remain priorities.
4_METHODOLOGY

This assessment on the shrinking space for civil society in EECA for community networks of PWUD, harm reduction and drug policy NGOs took place between June and September 2017 in six countries in the region – Kazakhstan, the Kyrgyz Republic, Poland, the Russian Federation, Tajikistan and Uzbekistan. Most countries were chosen from amongst AFEW Network organisations based on the relevance of the topic and in accordance with the needs of PWUD. Poland represents an exception. It was added because of the current dynamics vis-à-vis the civil society space and because country partners expressed an interest in collaborating with Polish NGOs linking them to regional work within the ‘Bridging the Gaps’ programme. Since we aimed to include a diverse picture of countries experiencing a shrinking civil society space and various developments, we attempted to include Hungary as well. However, because we are less well-known amongst Hungarian NGOs and we received no responses from Government organised non-governmental organisations (GONGO’s) (that is, NGOs initiated through or by government agencies) when requesting an interview, we decided to limit the Central European case to Poland.

We originally hypothesised that countries in EECA face an increasing threat when it comes to the rights and health of key populations. As such, CSOs face increasingly repressive national legislation and are increasingly excluded from government-level funding. Already, NGOs have developed strategies to deal with this situation and to reduce or manage their risks. By describing their coping strategies, we can support and build the capacity and skills amongst CSOs, and make stakeholders aware of current trends.

The assessment questions included the following:

- What is the situation per country (Georgia, Hungary, Kazakhstan, the Kyrgyz Republic, Poland, the Russian Federation, Tajikistan, Ukraine and Uzbekistan) when it comes to NGO laws and regulations? And how does this situation affect NGOs working in the fields of drug policy, harm reduction and HIV?
  - What changed in recent years and what is expected to happen in the coming five years?
  - What strategies do NGOs adopt in their work to prevent, resist or survive the current situation as an NGO?
  - How do donors perceive their position within this reality of a shrinking civil society space?

The assessment objectives consisted of the following:

- Develop recommendations for coping strategies to manage the trend towards a shrinking space for CSOs and NGOs in EECA by describing existing coping strategies, and to maintain and secure progress made in recent decades on protecting the health and rights of PWUD in EECA.
- To offer country partners shelter and prevent their isolation by joining regional capacity building and regional advocacy meetings, based on the findings of this assessment.
- Raise awareness and offer tools to donors to find ways to work with NGOs in countries dealing with a shrinking civil society space.

The assessment methods and instruments were chosen in order to fulfil each of the above-mentioned objectives. These included:

- desk research,
- an online questionnaire,
- semi-structured expert interviews and
- focus group discussions following the initial analysis.

These methods were chosen to allow us to analyse our data from different perspectives and link theoretical and factual information with practical implementation.
Desk research covered international and regional studies and overviews, primarily available online, and allowed us to form an overall picture of the current situation. Mapping these data allowed us to accurately depict the situation and compare it with how local individuals experience the situation. Collecting the ideas and opinions of local populations occurred during in-depth interviews with community networks of PWUD, and harm reduction and drug policy NGOs — that is, the types of CSOs we studied in this assessment. A detailed list of our source and the references we relied upon during the desk research appears at the end of this report.

The expert interviews conducted in each country provided valuable data confirming, refining or rejecting information received through the desk research. All interviews were analysed using a content analysis tool to determine if selected expert statements supported the data and conclusions regarding the overall country situation. Experts were selected based on their experience as a community or NGO leader, the position they held and if they represented a harm reduction or community-based network or drug policy organisation. Based on these criteria, in total 17 expert interviews were conducted in 6 countries — 3 in the Kyrgyz Republic (2 women, 1 man; 1 HIV-related NGO, 1 community organisation and 1 drug policy NGO); 4 in Tajikistan (3 men, 1 woman; 1 HIV-related NGO, 2 community organisations, 1 harm reduction NGO); 3 in the Russian Federation (3 women; 1 HIV-related NGO, 1 community network and 1 community-based harm reduction and drug policy NGO); 5 in Poland (4 men, 1 woman; 1 drug policy, 1 community network, 1 human rights organisation, 1 HIV-related NGO and 1 harm reduction-focused NGO); 1 in Kazakhstan (1 man; HIV-related NGO); and 1 man in Uzbekistan. In the Russian Federation, the phenomenon of GONGOs prompted us to also request interviews with GONGOs, from which we did not receive a response. We also attempted to recruit some Hungarian GONGOs working in the field of HIV, which also lead to no responses.

The questionnaires we used were taken from the ‘2016 state of civil society in Europe and Russia’ study, completed annually by the European Union (EU)–Russia Civil Society Forum. Questionnaires (n = 40) were distributed in those countries where more than one in-depth interview was completed in order to collect further factual data related to the situation: 28 were distributed via email and 12 via hand delivered, asking respondents to complete them by hand. In total, 23 (58%) questionnaires were completed and returned. We found that the questionnaire was not the best method for email responses, particularly in countries with repressive CSO legislation and atmospheres. Despite the limited and biased responses, questionnaire responses still provided additional information allowing us to triangulate data as intended.

We also conducted five donor interviews. Donors were selected based on their track record vis-à-vis support for HIV and key populations and which were knowledgeable regarding the regional situation. Two donors did not reply to our request for an interview.

After finalising the general data collection phase, we completed a preliminary analysis and presented these findings during the AFEW Network’s regional autumn school, which took place in October 2017 in Almaty (with 35 participants). After presenting the preliminary results, the coping strategies emerged during group discussions of the data analysis, each of which was facilitated either by an expert or a representative employing that specific coping strategy. The advantages and disadvantages were discussed and experiences exchanged. The results from these discussions were gathered into a structured format and informed the descriptions of the coping strategies; these now appear in this final assessment report. During the AFEW Network’s regional autumn school, partners — consisting of service-delivery NGOs, expert NGOs and community organisations and networks from Georgia, Kazakhstan, the Kyrgyz Republic, The Netherlands, the Russian Federation, Poland, Tajikistan, Ukraine and Uzbekistan — exchanged experiences and discussed further steps towards addressing the three themes of the regional approach under the ‘Bridging the Gaps’ programme work, linking this to other partnerships. These additional partnerships included the ‘Beyond
programme work, linking this to other partnerships. These additional partnerships included the ‘Beyond Resistance’ project, the International AIDS Conference in 2018 (AIDS2018) and other AFEW Network activity partners.

Limitations

Although we achieved the aims of this study, we must point out some unavoidable limitations.

First, the questionnaire had a very limited response rate, possibly due to its sensitive topic combined with sending it out over email. Despite the limited and biased response rate, however, responses still added information allowing us to triangulate data as intended.

The second limitation consists of our limited financial resources to conduct this assessment. In truth, this study provides a description of the current situation and the hands-on coping strategies NGOs apply to survive in various contexts. To better understand the effectiveness and weaknesses of each strategy, a broader study should be developed, requiring additional financial support.

In addition, the lack of participation amongst GONGOs represents a lost opportunity. Ideally, we could link to them and study their effectiveness amongst other issues, since they represent another type of resilience. In essence, such organisations represent the most extreme form of the so-called UNITE strategy. Simultaneously, they receive loads of criticism since they are often considered satellites of the state, the result of non-transparent selection processes and lack the proper experience to accomplish their objectives.

Finally, because prior research on this topic in the EECA region remains scarce at best, comparing practices in the assessed countries with international practices was difficult.
In the EECA region, the HIV epidemic continues to grow, particularly in the Russian Federation, Ukraine and Uzbekistan. In total, 85% of all people living with HIV in the region live in the Russian Federation and Ukraine. In addition, the Russian Federation accounts for eight out of every ten new HIV cases, and reported 85,252 new diagnoses in 2014 alone. Alongside countries with a very high incidence and prevalence, EECA also features countries hardly reached by international expertise and support, such as Armenia and Azerbaijan.

Relying on regional statistics and as stated in the position paper from EECA civil society networks ‘Let’s Not Lose Track’, there is no region that failed to achieve Millennium Development Goal (MDG) 6 on HIV. HIV incidence and deaths due to AIDS continue to increase, and only 1 in 5 HIV-positive individuals receive antiretroviral therapy (ART). In 2014, 96% of new HIV cases occurred amongst key populations and their sexual partners in EECA.

High rates of co-infections affect the region, with tuberculosis cases increasingly linked to HIV and opiate use, and hepatitis C virus prevalence approaching 80% amongst PWUD in many countries. Apart from HIV, PWUD in EECA confront substantial health and social risks, such as unemployment, mental health problems, a lack of drug treatment options, stigma and discrimination.

The HIV situation remains closely linked to injecting drug use. EECA features the highest regional prevalence of injecting drug use worldwide.

In recent years, several countries in the region have faced a growing incidence of new HIV cases through sexual transmission, partly or primarily caused by sexual contact with a person who injects drugs, a sex worker and a man who has sex with a man (MSM). Thus, it is crucial that programmes include sexual and reproductive health services as a part of all services offered, something not always guaranteed at present.

**Eastern Europe & Central Asia (2016)**

- 1.5 million people living with HIV
- 0.9% adult HIV prevalence
- 190,000 new HIV infections
- 47,000 AIDS-related deaths
- 67% of HIV infected people know their status
- 21% of PLHIV know their status
- 19% virally suppressed

(Source: UNAIDS Prevention Gap Report 2016)

**Distribution of new HIV infections among population groups by region**

<table>
<thead>
<tr>
<th>Region</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sex workers</strong></td>
<td>06%</td>
</tr>
<tr>
<td><strong>People who inject drugs</strong></td>
<td>51%</td>
</tr>
<tr>
<td><strong>Gay men and other men</strong></td>
<td>06%</td>
</tr>
<tr>
<td><strong>Clients of sex workers and other sexual partners of key populations</strong></td>
<td>33%</td>
</tr>
<tr>
<td><strong>Rest of population</strong></td>
<td>04%</td>
</tr>
</tbody>
</table>

(https://www.avert.org/professionals/hiv-around-world/eastern-europe-central-asia)
From the above, we may conclude that the EECA countries show similarity in certain aspects of society. From the interviews we conducted, we found that most countries are influenced by the Russia Federation in varying ways. As such, drug use in many countries occurs, the rights of key populations are not fully respected or may be violated, specific groups are criminalised and a rather high degree of mobility exists between countries. In addition, the Soviet culture persists, whereby the state strongly influences the development of health systems and drug treatment, resulting in very little drive to innovate or adopt new approaches.

Within the ‘Bridging the Gaps’ programme, country-specific projects are planned and monitored based on the theory of change. The theory of change describes specific pathways through which specific results or goals can be achieved and monitored, including the underlying assumptions. During the theory of change country meetings as a part the ‘Bridging the Gaps’ programme, we defined country project-specific goals. In addition, the situation regarding international donor money drying up and domestic funding not yet accessible to NGOs in several countries emerged as challenges to accomplishing various country-level goals. Interlinked with this, the increasing threats to the NGO and civil society space are becoming more serious each year. If this shrinking space continues, the development of better alignment between drugs legislation and health policies couched in evidence will be negatively impacted. This will ultimately stall efforts to decriminalise drug use.

Civil society, including NGOs, play an important role in societies, which is easily observed within the scope of our work — that is, working towards improved access to healthcare and human rights for key populations, particularly, amongst PWUD. If not for the work of NGOs and community-based organisations, the harm reduction approach would never have been developed. Advocacy for drug policy reforms and the introduction of harm reduction services have been initiated across the globe thanks to their efforts.

Despite an abundance of evidence that civil society represents an important factor for a peaceful and stable society, not all authorities appreciate its work or acknowledge its importance. Often, the repressive attitude of a government represses critical voices and opinions within a society.

At present in EECA, we see the space for NGOs shrinking, primarily due to the influence of the Russian Federation and nationalist leaders. The ‘Foreign Agent Law,’ as implemented in the Russian Federation, represents the clearest example. This law places a heavy and often unclear administrative burden on CSOs, which they must comply with or face being fined:

‘After the changes in Russia started, our government also reacted and now when we receive new project funding we must register with the Ministry of Justice and provide all requested information. It is not that difficult to do; but again this year new regulations were introduced, namely, extra checks from the anti-corruption agency. It seems like in Tajikistan they are also working towards a ‘Foreign Agent Law.’ But it will be difficult to apply since our country is fully dependent on foreign support.’ (Civil society organisation, Tajikistan)

Rather remarkably, this primarily concerns NGOs working in fields related to HIV, human rights and environmental issues. This tendency remains a significant concern since it can reverse any progress made vis-à-vis work amongst key populations. Furthermore, transitioning from funding from the Global Fund and reducing international funding from agencies such as the President’s Emergency Plan for AIDS Relief (PEPFAR) and others in the HIV field in general assumes domestic funding sources will step in. Yet, it is highly uncertain
if domestic funding will be allocated to NGOs. Even more worrisome, most authorities across the region remain resistant to funding work aimed at addressing the needs of the key populations with whom we work. This brings to light a significant threat to establishing a healthy civil society comprised of and for key populations in EECA. If no CSOs can do the work, who will advocate for drug policy reform or pilot and offer harm reduction services?

**LAWS, DRUGS POLICIES AND CIVIL SOCIETY**

In many countries globally, the laws and regulations that exist primarily criminalise drug trafficking and, often, the possession and use of drugs as well. In addition, the activities of sex workers and individuals within LGBTQ communities remain largely criminalised. By the time these groups were identified as at higher risk for HIV, some countries (at least partly) shifted from a law enforcement perspective towards these groups’ behaviours to public health-focused concern as a policy starting point. As such, some countries initiated harm reduction approaches despite criminalising laws and regulations. Yet, evidence demonstrates that penalties and criminalisation cost more than other approaches. For the implementation of the harm reduction approaches, community and NGO spaces remain essential to addressing the needs of the community and to ensuring their meaningful involvement. Another highly important precondition for the development of harm reduction programmes rests upon a people-friendly environment, where the rights of individuals are respected and not violated. A climate of criminalisation and the so-called War on Drugs results in a situation where the rights of PWUD are often violated and the quality of life of such communities compromised. NGOs and community-based organisations have always played a vital role in advocating against and protesting such violations.

Although positive steps were taken towards public health policies and strategies (mostly financed by international donors) surrounding HIV in EECA, in most countries the laws remained quite strict and were not adjusted to ameliorate the risky situation in which PWUD exist. In some countries, evidence-based harm reduction interventions are unaccepted, and are not implemented or are obstructed through legal bans to them. This leads to groups of people deprived of essential information, services and medication. Perhaps most surprising, some countries in the region may enact HIV-related health policies developed in an effective direction, whilst laws and regulations towards drugs remain unchanged — that is, strict and criminalising — thereby cancelling the effectiveness of health programmes. Because EECA is one of two regions in the world where HIV cases continue to increase, it is crucial that laws and law enforcement are reformed in line with health policies and international standards on health and human rights. To advocate for this, vibrant and healthy CSOs are necessary.

**shrinking civil society space**

In addition to criminalisation and the need for NGO advocacy towards decriminalisation, another significant challenge to the effective implementation of evidence-based health approaches lies in the rise of political suppression. Increasingly worrisome, we identified a tendency of governments in the region to exercise more control over civil society. The prime example of this is found amongst Russian authorities, which appears to be or threatens to spread into more countries including Kazakhstan, the Kyrgyz Republic, Tajikistan and Uzbekistan.
The involvement of the community, often organised via networks and NGOs which deliver services or advocate for health and rights, represents an essential element in the effectiveness of HIV and key population responses. This is increasingly threatened.

A wealth of literature exists on the importance of civil society for a country and her society. By civil society, we mean the entire range of organised groups and institutions that are independent from the state, voluntary and at least to some extent self-generating and self-reliant. This, of course, includes NGOs as well as independent mass media agents, think tanks, universities and social and religious groups.

To be a part of civil society, groups must meet different conditions. One of these is that, in a democracy, civil society groups respect the law, the rights of individuals and the rights of other groups to express their interests and opinions. The word ‘civil’ partially implies tolerance and the accommodation of pluralism and diversity6.

NGOs play a crucial role in society and for the people they represent or try to protect.

The role of civil society in a democracy

The following information was taken from a presentation to NGO leaders in Baghdad, Iraq by Larry Diamond. During that presentation, he described the functions of civil society rather thoroughly 6:

1. The primary and most basic role of civil society is to limit and control the power of the state. Naturally, any democracy needs a well-functioning and strong state, but it also needs to check, monitor and restrain the power of political leaders and state officials.

2. Civil society actors should monitor how state officials use their powers, raising public awareness of any abuses of power. They should also lobby for access to information, including freedom of information laws and rules and institutions to control corruption.

3. Civil society organisations can help develop the other values associated with a democratic life including tolerance, moderation, compromise and respect for opposing points of view. Without this deeper culture of accommodation, democracy cannot remain stable. These values cannot be simply taught; they must also be experienced through practice.

4. Civil society also can help develop programmes for democratic civic education in schools. Civil society must be involved as a constructive partner and advocate for democracy and human rights training.

5. Civil society is an arena for the expression of diverse interests, and one role for civil society organisations is to lobby for the needs and concerns of their members as women, students, farmers, environmentalists, trade unionists, lawyers, doctors and so on. NGOs and interest groups can present their views to parliaments and provincial councils by contacting individual members and testifying before parliamentary committees. They can also establish a dialogue with relevant government ministries and agencies to lobby for their interests and concerns. In addition, it is not only the resourceful and well-organised who can have their voices heard. Over time, groups historically oppressed and confined to the margins of society can organise to assert their rights and defend their interests as well.

6. Civil society can strengthen democracy to provide new forms of interest and solidarity that cut through historic tribal, linguistic, religious and other identity barriers. Democracy cannot remain stable if individuals only associate with others from the same religion or identity.

7. Civil society can help inform the public about important issues. This role does not fall solely on mass media; NGOs can provide forums for debating public policies and disseminating information about issues before parliament that affect various groups or society at large.

Civil society does not simply occupy a tense position vis-à-vis the state. Similarly, civil society’s independence from the state does not mean constant criticism and opposition to the state. In fact, by making the state at all levels more accountable, responsive, inclusive and effective — and, hence, more legitimate — a vigorous civil society strengthens citizens’ respect for the state and promotes their positive engagement with it. A democratic state cannot be stable unless it is effective and legitimate, as well as respected and supported by its citizens. Civil society represents a check and a monitor, but also a vital partner in the quest for a positive relationship between the democratic state and its citizens. When leaders with authoritarian tendencies remove their support to any brave NGOs that question them, activists become increasingly exposed to harassment, intimidation and violence. As a result, the society becomes less stable and the public health faces risks.

In situations where the civil society space begins to shrink or where that space remains limited, CSOs begin choosing ways of working allowing them to survive. There are also ample examples where NGOs ceased operating in such places. For many CSOs, these survival techniques or tactics are chosen ad hoc and as reactions to emerging situations. Some adopt a more strategic approach, whereby they attempt to predict the future and strategically and comprehensively develop plans for their operations including project implementation, fundraising, communications and advocacy amongst others.

In this assessment, we use the concept ‘coping strategies’ for the tactics, techniques or more comprehensive plans that describe the actions and activities of resilience and survival. We did not distinguish between more long-term, comprehensive plans and more ad hoc tactics. From our viewpoint, describing all of the coping strategies employed might allow CSOs to begin analysing their context and chose coping strategies in a more holistic way. This might also allow CSOs to adopt more strategic, comprehensive approaches to their work and various contexts. Differentiating between techniques, tactics and strategies, in this sense, does not serve any further purpose.

Governments justify via official rationale restrictions primarily related to safety and security. Other important factors authorities in EECA specifically use to justify their reasoning in exercising more control over CSO include the following:

- ‘Foreign agents,’ national sovereignty arguments and defending national ‘morals and values’ and
- A fear of Western political values and a lack of grassroots support for civil society groups.

Source: https://web.stanford.edu/~ldiamond/iraq/Develop_Democracy021002.htm
Unofficially, it seems that NGO regulations are often misused for various reasons. These include:

- Targeting organisations critical of the state and which undertake advocacy, litigation and mobilising to hold governments to account.
- Targeting activists who scrutinise public policies and, especially, counter-terrorism policies.
- Harassing business and human rights activists that challenge the economic interests of states and corporations.
- In some cases, targeting organisations that work on contested and marginalised issues, including the rights of women, LGBTQ communities and migrants and the environment.

With the increasingly shrinking space for civil society and harmful political parties and leaders opposed to respecting and fulfilling human rights and protecting key populations, we now face a threat against the political commitment needed to reach the goal of ending AIDS amongst key populations. In EECA, many countries (will) face reductions in international financial support for this work as they move to middle-income ratings. But, in combination with a lack of political support from leaders, it is extremely unlikely that communities and NGOs will continue receiving support and enjoy being treated as an essential part of the responses despite evidence demonstrating their effectiveness. More troubling, in middle-income countries, often more money supports the suppression of CSOs and NGOs. This leads to a situation where withdrawing funding based on the income rating becomes counterproductive and any gains to public health and to the human rights positions of key populations are negated. A re-evaluation of the existing approaches of international donors and international and local NGOs will highlight new ways of addressing problematic situations.

An interesting and potentially challenging funding opportunity lies in funding from the Russian Federation awarded to Central Asian countries aimed at addressing HIV. In this way, the Russian government is influencing a situation, which whilst providing programme funding, it also carries huge limitations in terms of responses to HIV and the needs of key populations. Simultaneously, we can argue that by bringing in more regional funding, ownership and involvement increases potentially offering a positive impact.

Despite these worrisome tendencies, positive changes and steps forward continue in the region. This includes civil society collaboration with law enforcement authorities, police officers, prisons and justice departments. In addition, some initial steps have been taken in a few countries to fund and support their national NGOs and civil society. These positive examples and practices, whereby NGOs, governmental agencies including both health and law enforcement authorities cooperate with civil society, highlight improvements and a strengthening of collaborative efforts. Such examples indicate where successful and committed teams of communities and professionals adopt best practices on human rights strengthening and legal support of community members to protect individuals’ health and offer them a better quality of life. We should learn how these NGOs maintain their independence whilst working with their governments.

*Ariadne: a practical starting point for funders: challenging the closing space for civil society*
I_FINDINGS

COUNTRY DESCRIPTIONS

This assessment focuses on nine countries and takes into account the rapid, recent changes in a number of them (e.g., Poland) in order to provide a reliable depiction of the current civil society situation in the region. To do so, we carried out desk research that primarily examined external monitoring sources (such as those available via civicus.org and freedomhouse.org). We decided to use the sources, which collect and compare data, rather than to focus on country-by-country legislation, which do not provide a complete picture and may be difficult to assess from a distance without specific contextual insight. In order not to miss current shifts, however, we followed the news and media coverage of any proposed, advancing or newly introduced legislation in various countries. We also reviewed new reports and analyses released shortly before or during this assessment.

The Freedom House tools proved quite useful for guiding discussions with civil society representatives from the region. For instance, the Freedom in the World database provides annual scores for the state of democratic developments in countries globally by evaluating political rights and civil liberties. Comparing desk research findings with interpretations and judgements from individuals actively working in the fields of drug policy, harm reduction and HIV in the region formed the second phase of the situation assessment. Interestingly, these external monitoring sources were not necessarily confirmed during the expert interviews conducted in the Kyrgyz Republic, Poland, Tajikistan and Uzbekistan (the Russian Federation representing the only exception) nor during the AFEW Network’s regional autumn school which provided a unique opportunity to hear from individuals working on the ground.

The country contexts described below condense these sometimes overlapping and at times opposing perspectives. Due to the limitations of our assessment, which does not attempt to summarise or present the extensive material available elsewhere, these descriptions should be viewed as extracts of a wider and comprehensive analyses.
The map above provides a simplified, yet helpful classification of Central Europe and EECA from the Freedom House’s *Nations in Transit 2017*. The nine countries of interest here fall into three categories: consolidated or semi-consolidated democracies, states under transitional governments or hybrid regimes and consolidated or semi-consolidated authoritarian regimes. These three groups to some extent overlap with the three types of countries we identified during our assessment. Using a slightly different terminology, we refer to the space for civil society and to the NGO situation (and, to a lesser extent, the type of political regimes). Our categories are as follows:

• very challenging environment for civil society (instead of consolidated or semi-consolidated authoritarian regimes);
• challenging, but stable situation (instead of countries under transition or with hybrid regimes); and
• rapid shift from a stable state to a challenging environment (instead of consolidated or semi-consolidated democracies).

With these categories we use, it is important to consider that not all is rocket science. For example, the following description from the Russian Federation illustrates that country's classification:

‘So, the situation is that for some organisations the space is not shrinking, it’s even expanding. They can get more money. Now, we have Presidential grants in Russia which are controlled by the presidential administration and go to several major operators in different areas. There is an operator for health and an operator for human rights. The structure exists and Russian civil society receives support from the Russian government, but a part of this civil society finds itself within a shrinking space. And this is the part where we as harm reduction and human rights NGOs find ourselves now. (Community leader, Russian Federation)

Thus, we perceive this shrinking civil society space here as primarily based on the idea that controversial topics and discussions also need space and need to be addressed. Therefore, any state intervening in that space leads us to characterise that space as shrinking.

How do we characterise the three groups and which countries do we see belonging to them? We provide a detailed description below.

**Very challenging environment for civil society**

*Russian Federation and – possibly – Kazakhstan, the Kyrgyz Republic, Tajikistan and Uzbekistan*

Civil societies in these countries struggle with limited political rights and civil liberties including the freedom of expression or associated rights. CSOs, particularly those opposing authorities, report serious threats to their existence and to continuing their activities, but also to the security of their staff. In most of these countries, we also noted that restrictive laws on foreign funding and international collaboration have been introduced, such as the Russian ‘Foreign Agents Law’ which places a heavy burden on NGOs designated with this particular status. In addition, Russia’s ‘Law on Undesirable Organisations’ eliminated a number of international NGOs from the country. Several similar laws have been enacted or introduced in other countries in the region. For instance, the Law on Public Associations in Tajikistan obligates organisations to notify the Ministry of Justice about grants and other aid received from abroad. Similarly, regulations in Uzbekistan require NGOs to obtain ministerial approval to receive foreign aid as well as to notify the government about travel to foreign countries.
I. FINDINGS

In most of the countries with very challenging environments for civil society, CSOs must complete some form of central governmental registration. If domestic tender bids are solicited and funded, the process, including the possibility amongst CSOs to apply and obtain state funding, adheres to strict rules and regulations. Furthermore, the selection of grantees lies within the hands of the authorities.

Interviews with NGO and community representatives in the Russian Federation confirmed that the above-mentioned regulations as well as the overall climate complicate their work, rendering it dangerous and at times impeding it altogether. Activists understand the risks associated with their work and develop different strategies to cope with both objective threats and difficulties and their personal fears and discomfort. These coping strategies, described in more detail below result in three categories of organisations and unregistered groups: CSOs and activists willing to take risks and openly criticise authorities; CSOs that hide certain activities hoping they will not be noticed; and CSOs that seek state funding such as presidential grants, and thus serve as allies with authorities. This last category forces them to either fully obey with official policies or continue unsanctioned activities silently. Such activities may include promoting OST, which is banned in the Russian Federation, or providing sexual education and information to LGBTQ and MSM to respond to the HIV epidemic. Naturally, differences exist between countries regarding which harm reduction-related topics are viewed as controversial. Such differences include methadone (in the Russian Federation), including LGBTQ communities amongst key populations (in Tajikistan), or more broadly, drugs law reform or implementing a human rights framework. In the Russian Federation, working actively and openly in any unsanctioned field makes it difficult if not impossible to apply for state financing. Thus, some cases exist whereby presidential grants earmarked for HIV and harm reduction were awarded to NGOs without troublesome track records, whilst in practice, other, hidden NGOs with experience and know-how implement such projects.

All three approaches mentioned above carry their own pros and cons. In this report, we do not evaluate the effectiveness of these different approaches nor advocate for what works best. That is, we do not view any approach as the one universally effective strategy that would work for everyone. Each approach carries strengths and weaknesses, and may serve better in specific situations for different organisations.

‘There are NGOs that have made their peace working with the government and with not pressing the government. I can understand that calculus. But I cannot say that it is my experience that the calculus led to the results some of those NGOs wanted to achieve. An organisation changed its name to position itself as less controversial, less associated with civil society pressure and challenges to the government. Nonetheless, it was named a foreign agent.’ (Donor agency)

‘We had consultations with lawyers. They said it would be better to shut down the activities of our NGO because we were exposing ourselves to huge risks. They were unanimous on this advice.’ (NGO registered as a foreign agent, Russian Federation)

‘No one is safe. I’m an opposition person. Maybe I’m paranoid, but they create such a situation that everyone must be scared.’ (NGO, Russian Federation)

‘The Ministry of Health does not want to go against the Russian Orthodox Church. They do not want to use methods needed for preventing the spread of HIV. To prevent HIV from spreading we must use methods like harm reduction and telling young people about sexual risks. They don’t like this. I don’t foresee any improvements, so we have to work in accordance with the situation and try to teach young people to be independent and to look for information on the internet. We can give them good sources of information where they can get reliable and truthful information.’ (NGO, recipient of Presidential grants, Russian Federation)
We now turn our attention to those countries in which the situation is somewhat murky. As much interviews with Russian activists confirmed our appraisal based on external monitoring mechanisms, the images we received from personal conversations with representatives from Kazakhstan, the Kyrgyz Republic, Tajikistan and Uzbekistan differed from the picture painted by various reports or monitoring materials. Interestingly, the interviews did not reveal a high level of anxiety, perhaps surprisingly given the difficult conditions described in multiple resources. On the contrary, our respondents in Central Asia seemed less anxious than interviewees from Poland. This created a bit of uncertainty regarding our classification of these four countries to states with the worst conditions and most limited space for civil society. This uncertainty is reflected in the dual classification of these four states, whereby they appear in two groups: countries with a very challenging environment for civil society, as well as states with challenging, but stable situations described below.

‘We want to cooperate with governmental structures, both federal and regional…. But we have to be very cautious and we have to avoid certain activities which can irritate (conservative) circles.’ (NGO, Russian Federation)

‘We believe that it is ethically inappropriate to form an alliance with this government. We also don’t try to be invisible to them. We are violating no law, so there is nothing to hide.’ (NGO, Russian Federation)

**Challenging, but stable situation**

*Georgia, Ukraine and, again, possibly Kazakhstan, the Kyrgyz Republic, Tajikistan and Uzbekistan*

Whilst the environment in these countries remains challenging to civil society’s activities, the situation is stable and no noticeable feeling of serious new threats is emerging. Therefore, during interviews or discussions with representatives from these countries, we noted no clear need for CSOs to rethink their strategies.

‘At present, the situation with NGOs remains the same: the red tape hampered by the Ministry of Justice, the Ministry of Health and the banking system interferes with collaboration with international donors and, thus, highly distorts the development of programmes linked to HIV. Overwhelming control is exerted and annual inspections are conducted by the Revenue Service, the Ministry of Justice and the Auditing Office of the Ministry of Finance. In my opinion, this is due to the political bias against HIV.’ (Anonymous)

This does not mean, of course, that the situation for civil society is easy, lacking any threats or risks. Again, a question regarding the potential strategies adopted by communities and NGOs working in this climate arises: Should we busy our daily realities with the climate, ignoring or accepting the evidence at hand suggesting that civil liberties and political rights are limited? Or should we, given that the situation is stable, watch from a distance (and through someone else’s eyes such as by checking how external bodies see the situation) and then decide what should be done? Again, all approaches carry strengths and weaknesses, and it is important to understand them. But, this report aims to pose questions and describe the diverse options available rather than evaluate and identify the best option. Instead, showing solidarity rather than blaming those who make different choices is more beneficial to the entire movement. If an organisation allies with a government and receives state financing — in most cases, resulting in abandoning the most controversial activities — they may still support their colleagues who provide services or represent communities. This might be accomplished by establishing channels via which they can explain to authorities the value of the work of others. If a CSO chooses a strategy of silence and invisibility, they should understand that human rights organisations which defend the broad idea of civic freedoms may have a different, quite vocal way of operating. In actuality, this benefits the entirety of civil society wishing to actively use such freedoms.
Uzbekistan serves as an interesting case. Here, all NGOs in the country are registered and controlled. Using rather neutral criteria, Uzbekistan has been rated as one of the strictest countries in the world when it comes to NGO regulation. Organisations somehow assess the situation as free, since some small improvements in legislation occurred and social contracting — whereby state funding for state-selected NGOs was awarded — was launched.

The National Association of NGOs of Uzbekistan (NANNOUZ) consists of more than 550 members, and forms and initiates policies and strategies related to NGO activities in Uzbekistan. NANNOUZ consolidates the organisational and intellectual resources of NGOs for the implementation of the state’s priority tasks of and public construction, including democratic reforms to the formation of a free, open and strong civil society in the country. In reality, this is a pro-government organisation.

Rapid shift from a stable to a challenging environment
Hungary and Poland

Two EU member-states form the last group of countries. Most comparative, international reports making use of numerous data sources describe the realities within stable and developed democracies. Therefore, reliable descriptions of both Hungary and Poland rely on the awareness of drastic and recent changes observed in both countries accompanied by rapidly diminishing political rights and civic freedoms. Legal regulations on funding from abroad, similar to the Russian ‘Foreign Agents Law’, have already been introduced or are expected in the near future. Similarly, open attacks against George Soros — perceived as a public enemy and a powerful opponent to the conservative narratives introduced by the Hungarian and, to a lesser degree, Polish governments — and on grant-giving institutions affiliated with him that provide funding for human rights or drug policy institutions have increased. In addition, we see a centralisation of control and power over NGOs both at the administrative level and in terms of requirements as well as how to apply for and distribute state funding. State funding is being centralised into the hands of a single, politicised institution.

Since this situation is new and changing rapidly, Polish respondents appeared more anxious than their colleagues from countries where conditions are much more difficult. Moreover, Polish NGOs face an increasing need to reshape their strategies and tailor their activities to this new, unpredictable reality.

As a result, some NGOs have decided or feel pressured to concentrate on human rights principles and now focus their energy on fighting for basic democratic rights currently under threat. As a consequence, such agencies have frozen their on-going, thematic activities. This currently shrinking space for civil society distracts them from their work in fields in which they have been active for years.

Other agencies adopt a temporary strategy of silence, resigning from public advocacy so as not to attract attention from authorities. Thus, they first decide to concentrate on securing the status quo rather than advocating for further positive changes in fields such as drug policy. As such, there is a visible need amongst CSOs to prepare for the difficulties ahead and to rethink how to secure funds.

‘We sometimes wear a cloak of invisibility.’ (NGO, Poland)

‘We expect meticulous control. We take into account that we are being eavesdropped upon.’ (NGO, Poland)

As mentioned above for other strategies or techniques, we do not address the issue of effectiveness related to waiting and observing rather than taking action.
‘We intentionally withdrew from the media so as not to attract the attention of the government and as a consequence not to inspire any harm to drug policy in Poland.’ (NGO, Poland)

‘If the ultra-right government continues to rule the country, sooner or later they will come for us. I have no doubts. Our activities will be blocked and destroyed.’ (NGO, Poland)

‘There is a pattern that we have now come to recognise as a pattern in multiple countries. This pattern is as follow: require NGOs to have their mission reviewed by and then register with the Ministry . . ., scrutinise and criticise foreign funding and suggest that those NGOs that receive foreign funding as unaccountable to national interest.’ (Donor agency)

We now turn our attention to understanding how harm reduction or drug policy NGOs and networks and communities of PWUD work in these situations and how they ensure their survival. We also examine how they cope with challenging realities. Briefly, they fight, they hide or they unite.
In this section, we describe in detail the coping strategies we identified through this assessment. CSOs we studied all work in the fields of (illegal) drug use and drug policies. We interviewed PWUD community networks, harm reduction and HIV service delivery NGOs and NGOs advocating for changes in drug policies and legislation. Our understanding of coping strategies refers not to situations where one freely chooses between good options or applies the best or most effective strategy. Within the shrinking civil society space, where state control is increasing and the freedom to do what is required remains limited, coping strategies can be viewed as survival strategies. In part, we see that these strategies allow for modest gains. Furthermore, we recognise losses in terms of the scale, quality and sustainability of such strategies. More worrying, these coping strategies cannot replace the current situation where Global Fund–supported programmes continue and work continues with relative freedom. In addition, we realise that whilst describing the coping strategies and the resilience of civil society, IDUIT (INPUD, 2016) often remains unapplied. IDUIT, a tool developed by the International Network of People who Use Drugs (INPUD), contains practical advice on implementing HIV and hepatitis C virus (HCV) programmes amongst and with people who inject drugs (PWID). Based on recommendations from the World Health Organisation (WHO), the United Nations Office on Drugs and Crime (UNODC) and the Joint United Nations Programme on HIV and AIDS (UNAIDS), IDUIT serves as a technical guide for countries to set targets for universal access to HIV prevention, treatment and care for PWID. In that sense, it offers a standard set of guidelines based on evidence and offers principles and tools that both organisations and service providers should apply in their work. In the shrinking civil society space, international guidelines outlining meaningful involvement are often not followed due to the harsh circumstances under which organisations operate and struggle to survive. Analysing the coping strategies used by various agencies allows us to highlight creative approaches and understand how organisations continue working by making use of various gains and being aware of losses. Furthermore, this type of analysis can support the development of strategic, comprehensive longer-term approaches. Still, the on-going needs that remain lacking also remain unresolved in this situation. Yet, the expressed need for alternative funding as well as the freedom to apply and implement evidence-based projects will not be forgotten whilst working and applying these strategies. Supporting NGOs that apply these survival strategies can strengthen their resilience and their energy to continue even under the harshest conditions.

After analysing the interviews and the literature, we identified three types of strategies, each of which contains a list of specific actions. We understood from the interviews that two factors related to CSO-related legislation primarily determine the type of strategy chosen. These factors are the strictness and level of state control and the stability or rapid change in policies and legislations towards NGOs. In addition, these two factors influence one other. Only when viewed in combination do we understand how these factors push organisations to work in a particular direction. This phenomenon also emerged in the inconsistency between the objective analyses of external monitoring sources on CSO legislation and policies not necessarily reflected in the expert interviews (see the section on the country descriptions). Another influencing factor seems to be the focus of the organization: either they focus on HIV service delivery and harm reduction services or they focus on human rights-related work as drug policy and laws.

The different type of strategies we identified can be categorised as follows:

- **Fight**, whereby NGOs openly fight the system;
- **Hide**, whereby NGOs remain silent to prevent problems; and
- **Unite**, whereby NGOs actively seek close collaboration with authorities.
**I_FINDINGS**

The *Hide* strategy is applied across all circumstances, whilst the *Fight* and *Unite* approaches clearly depend upon the specific circumstances in a particular context. Our analyses lead us to the following overview. This is not written in stone and we find clear exceptions in each country. In general, we may conclude that NGOs react as follows:

<table>
<thead>
<tr>
<th>STABILITY</th>
<th>STATE CONTROL STRICTNESS (*)</th>
<th>VERY STRICT</th>
<th>DEMOCRATIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improving</td>
<td></td>
<td>Unite and Hide Uzbekistan and Kazakhstan</td>
<td>NA</td>
</tr>
<tr>
<td>Stable</td>
<td></td>
<td>Fight and Hide Russian Federation</td>
<td>NA</td>
</tr>
<tr>
<td>Fear of deterioration</td>
<td>Unite and Hide Tajikistan and the Kyrgyz Republic</td>
<td>Fight and Hide and Unite Poland</td>
<td></td>
</tr>
</tbody>
</table>

(*) Based on Freedom House classification

The explanations we heard for various situations were logical and well-reasoned. When a country is repressive for years, very few agencies continue to fight the system given the significant risks attached to doing so. However, individuals and agencies that dare to take such risks have little other choice than to fight and remain in opposition. They simply refuse to ally with authorities. And important parts of the work requires either collaboration or state permission is not taking place or is taking place in secret.

When few improvements take place in such countries, CSOs primarily react by ceasing to fight and attempt to ally and unite with the state in efforts to support a more positive direction.

When a significant fear exists towards a worsening situation, most NGOs in our field of work choose to ally and attempt to unite with authorities, push back against the risk of deterioration and attempt to save their current work. Evidence based work that is taking place and that is implementing essential approaches, may not conform to specific regulations and may be stopped or reluctantly hidden.

In a more democratic situation that is rapidly changing and deteriorating vis-à-vis civil freedoms and civil society space, we find individuals standing up, protesting changes and the system and clearly responding by fighting. In some cases, individuals temporarily set aside their core priorities as organisations. Simultaneously, we also found instances whereby organisations continued closely collaborating with friendly state departments still in place (their state allies from the past).

The reality of diminishing international funds has accelerated reactions since international funding allowed many countries a larger space for civil society work. That space was allowed by governments, along with the freedom to implement internationally supported evidence-based programming. But now we can see that many authorities are supportive as long as they do not need to finance the work of NGOs from their national budgets, and at present react by enacting stricter regulations. We must also note that the situation and current reality vis-à-vis the withdrawal or reduced international funding does lead to questions regarding the ownership of CSOs. From the NGO perspective, we found several examples of agencies working in various fields primarily given the opportunity to earn money. However, currently, this opportunity is decreasing, leading organisations to change their focus, seemingly at odds with the ethos of CSOs. During the expert interviews, the issues of self-criticism and the self-evaluation of ownership and the functioning of civil society emerged as a critical factor in the current climate. This view was expressed during an interview with a CSO leader in the Kyrgyz Republic:
FIGHT: OPPOSING AUTHORITIES AND VOCALLY PROTESTING AGAINST THEM

Within the *FIGHT* coping strategy, we find activities openly in opposition to authorities and vocally protesting against rules and regulations that shrink the civil society space or the daily consequences of such laws. In addition, the *FIGHT* strategy contains advocacy activities that openly oppose governmental positions on strict drugs laws or the obstruction of implementing international standards and evidence-based interventions. The *FIGHT* strategy contains protests against general laws and policies, against punishing organisations and smear campaigns, whilst simultaneously standing up for the rights of individuals who use drugs. The rationale behind fighting and opposing is rather straightforward:

- People fight for the freedom of expression and the fundamental civil rights for all, including for PWUD.
- When a governmental system oppresses the rights of and access to health services for PWUD, CSOs should support the drug-using community and protest against injustice.
- International standards rely on scientific facts and evidence; thus, CSOs working in the drug policy and harm reduction field are backed by factual information and data and must stand up for evidence-based policies.

As with any strategy, fighting carries risks with potential negative consequences. These include the following:

- Opposing authorities openly closes the doors for further dialogue and collaboration.
- Organisations and individual activists risk their safety and freedom.
- By fighting the system, the state’s counteractions often create additional oppression.
- NGOs that take a strong position in opposition often face criticism from other CSOs, since these agencies also suffer any potential counteractions and more severe oppression in reaction to protests. Fighters, in this way, often become more isolated, making them even more vulnerable to counteractions.

‘Organisations are often framed as being “enemies of the state”, working against the morale and well-being of the people, or are trying to indoctrinate people with hostile, Western values.’ (Community leader, Russian Federation)

‘…we want to be more diplomatic. If you are too activist-like you can also just destroy your organisation.’ (HIV-related NGO, Tajikistan)

The *FIGHT* strategy is often found in countries where the situation suddenly and swiftly deteriorates and in countries where the civil society space remains quite limited and strictly controlled by authorities. In countries characterised by strict control, the majority of CSOs *HIDE* their opinions, although a small group of powerful
activists and CSOs take huge risks whilst vocalising strong positions and acting upon them. Working through volunteers as described under the HIDE strategy also falls within the FIGHT strategy (see the discussion below).

In our analysis, we identified the following FIGHT strategies.

**Strategic litigation**

Strategic litigation represents one method by which CSOs can bring about social change. To do so, they must bring cases before regional human rights systems and United Nations (UN) bodies by using specific cases to achieve practical change. This can be achieved by establishing legal precedent or by drawing attention to a case to highlight perceived injustice. Aside from bringing cases to international human rights systems, strategic litigation also involves bringing cases linked to civil society law and to individual rights to national courts.

Activities falling under strategic litigation include:

- Bringing court cases to the European Court of Human Rights.
- Providing legal counselling to PWUD whose rights are violated.
- Filing court cases against fines imposed upon foreign agents or other NGOs.

The conditions necessary to strategically litigate include legal knowledge and expertise on issues such as selecting cases, building cases and supporting individuals whose cases are brought before the court. In addition, strategic litigation necessitates patience and persistence.

The advantages of strategic litigation include the following:

- Most countries are bound to respect international treaties and laws, thus establishing legal precedent when a case is won by an organisation.
- Cases draw a lot of attention, providing a lot of exposure and pushing authorities to adhere to their own laws and regulations.
- Strategic litigation is immensely empowering, influencing both the organisation involved as well as the community they represent. Such a strategy views people as having rights and as important.

By contrast, strategic litigation carries a set of disadvantages as well. These include:

- By drawing much attention, authorities are likely to be annoyed, often leading to further excluding or monitoring from the authorities (that is, the risk of being listed as a foreign agent increases).
- The legal expertise required is not available or accessible to many NGOs.

‘We engage in a lot of strategic litigations, including cases against the government. A few years ago, we sued the government for not meeting the international recommendations regarding certain social rights to support syringe programmes. We also sued the government when they tried to shut down our website. It’s difficult to win these kinds of cases in the Russian court, but we can also sue in the European Court of Human Rights since Russia should obey such courts. We have a number (about 20) of strategic litigation cases in the European Court, which aim to address the problem of access to health, human rights and stuff like that. Basically, we are still in dialogue with the government, but this dialogue is happening in the court or mass media.’ (Community leader, Russian Federation)
Street lawyers or working with paralegals

This strategy directs work to the community of PWUD, primarily implemented by members of the community. Whilst training drug using peers about their rights when arrested, for example, or when denied access to health services, individuals become empowered. These trained peers then distribute their knowledge to others within the community, such that everyone is aware of their rights and can defend themselves if they need to.

Activities falling under street lawyers or working with paralegals include:

- Community training on individual rights.
- Paralegal outreach activities.
- Paralegals offering support to people when arrested.
- Offering consultation hours during which professional lawyers counsel and support PWUD.

The conditions necessary in which to apply these activities include support from professional, licensed lawyers and combining such activities with any health services offered.

Street lawyers and working with paralegals offers a number of advantages. These include:

- Raising awareness of their rights and enabling individuals to stand up for their rights can be enormously empowering. The moment individuals realise they have rights, their preparedness to support an NGO in their work increases, thus building a stronger civil society.
- This strategy does not require a lot of resources.
- This strategy can address and diminish the ignorance of police officers when PWUD know their rights.
- Peers disperse legal expertise to the entire community.

By contrast, this strategy also carries a number of disadvantages. These include:

- Going to court is rather time-consuming and demands rather extensive legal expertise.
- The option of going to court remains limited.

By building legal literacy, the resilience of CSOs is strengthened, rendering grass roots legal work an important activity.

Identifying alternative funding sources

In general, harm reduction services, drug policy reform and PWUD networks are currently financed primarily based on project-based targets and sustainability. In addition, national state funding initiatives are based on achieving policy goals and targets. With the shrinking civil society space, we now face a situation whereby NGOs opposing state policies that serve as members of civil society (as a critical voice or a watch dog) become increasingly left without funding. Finding alternative sources of funding specifically available to this type of work now represents an important strategy to continue operating. This also includes identifying income to pay for court cases or fines imposed by laws that shrink the legal space for civil society immensely.
Activities that support identifying alternative sources of funding consist of:

- Crowd funding.
- Fundraising through private donations.
- Advocating for international funding from traditional donors, although under more open conditions.
- Initiating income-generating activities.

The necessary conditions to carry out such activities include adopting a systematic approach and employing a fundraiser with special skills in this type of work.

Identifying alternative funding sources carries the following advantages:

- It allows space for allocating funding more freely to activities traditional donors typically do not support.
- Independence from institutional donors allows a larger space for independent opinions and ideas CSOs may express.

By contrast, these types of activities also carry a few disadvantages. These include:

- At current levels, we found no instances in which alternative sources of funding sufficiently replaced the level of traditional financial support.
- This type of work requires employing a fundraiser, whose salary is often paid before any income is secured for the organisation.
- Advocating for the health and rights of PWUD remains challenging to market.

During interviews, only one organisation had any substantial success securing alternative funding. However, even in this case, the alternative sources remained far below the level provided by traditional international donor agencies. Securing alternative funding increases an NGO’s independence. But, in general, we can conclude that it also provides some valuable space. Yet, such alternative sources cannot meet the financial needs related to service delivery or advocacy.

**Regional work in EECA**

In some cases and for some types of work, work through a regional NGO or platform of NGOs may prove beneficial. When dealing with controversial topics in particular, expressing ideas, opinions and criticism through a regional channel may work even better.

Regional work includes activities such as the following:

- Advocacy on controversial topics by network members who are not residents of that specific country.
- Providing training seminars on skills building for regional delegates.
- Exchange platforms for community members or CSOs, so that they can share their daily struggles and strengthen the sense that they are not the only agencies in such situations, and allowing them to be heard and feel as though they are not isolated.

The necessary conditions for engaging in regional work include a functioning regional structure to coordinate regional activities and organisation. In addition, participants must feel a sense of ownership.
Regional work in EECA carries the following advantages:

- It provides more safety for CSOs by having their message distributed by others.
- By doing this on a regional basis, the often-heard criticism of ‘Western indoctrination’ softens.

By contrast, regional work also entails several disadvantages:

- Regional work is challenging to manage and maintaining a regional network is difficult.
- Because individuals live far apart from one another, network cohesion can be at risk.
- To make strong statements on controversial topics, individuals must reach consensus, which can be challenging when members represent different countries and cultures.
- Authorities can more easily ignore outside voices.

Initiating organised regional platforms and organisations can be helpful to delivering controversial messages and to maintain the safety of CSOs. But, in general, we should acknowledge that controversies represent struggles and are normally only solved by directly involved citizens and not just by regional advocacy.

**HIDE: REMAINING SILENT, CEASING OR HIDING ACTIVITIES TO PREVENT PROBLEMS WITH AUTHORITIES AND OPERATING IN THE SHADOWS**

As described above, the HIDE coping strategy consists of NGOs operating silently so as to avoid attracting attention. Carrying out such activities equates with either not mentioning or not advocating openly for policies not in line with the ideas of authorities. It may also entail ceasing implementation altogether as policies change. The rationale for such decisions is based on the following:

- Safeguarding activities that remain possible.
- Protecting and sustaining organisations and their staff from risks associated with closure, being declared a ‘foreign agent’ or threats to one’s personal safety.
- Keeping one’s options open vis-à-vis access to state grants or collaboration with authorities.

The HIDE strategy also carries a series of negative consequences. These include the following:

- By not operating openly, the quality of work and specific actions may be negatively affected.
- Terminating life-saving evidence-based interventions may create significant gaps in services and ultimately cost lives.
- Not openly advocating for seemingly controversial policies undermines open discussions and dialogue as well as opportunities to convince others of your ideas through the presentation of factual evidence and experience. Ultimately, this leaves society deadlocked, without healthy opportunities for the exchange and development of ideas, and in essence without effective solutions to stop the spread of the HIV epidemic particularly in EECA.
- By not communicating specific achievements, donors tend to withdraw their support, since they are not aware anymore of CSOs achievements or needs and they meet resistance and obstruction from authorities.
**I. Findings**

The HIDE strategy includes both obedience to authorities and civil disobedience. All of the experts interviewed agreed that an increasing degree of control from authorities over civil society activities is undesired; most expressed an attitude of waiting and hoping for a shift in the overall political climate. Some will take more risks and value such risks as necessary to saving lives. Others prefer safer options, and take fewer risks, preferring to restart ‘undesired’ activities when the situation changes in future. We note that this ‘safe’ option does not necessarily lead to the sustainability of an organisation.

‘In 2003, the Russian Harm Reduction Network was founded. In 2010 or 2011, I think, they decided to change their name and drop the phrase “harm reduction” because they also planned to cooperate with the government. They were closed in the end regardless. You cannot say that there is a clear division between these kinds of groups. Some of the organisations also try to find a compromise in their vision, hoping it will help them to continue their activities, but also to be on better footing with the government.’ (Community leader, Russian Federation)

‘The organisation formerly known as the Russian Harm Reduction Network changed its name to remove harm reduction and positioned itself as less controversial and less associated with civil society pressure and challenges to the government. Nonetheless, it was named a foreign agent and the director who was responsible for that transition left.’ (Donor agency)

In what follows, we identified the following specific types of activities fitting within the HIDE coping strategy employed by organisations in the region. All of these types take the form of remaining silent, ceasing or altogether hiding activities to prevent problems with authorities and operating in the shadows in one way or another.

**Reframing and redescribing one’s work**

By applying this type of strategy, the work of CSOs is explained and described by using diplomatic language and through sensitive monitoring without necessarily altering activities. By using language authorities consider acceptable and avoiding mentioning specific groups or terminology, work can continue.

Activities falling under this category include, for example:

- Instead of mentioning targeting MSM, an organisation works on men’s health. Similarly, an organisation designed for people living with HIV or to prevent HIV often refrains from mentioning the terms harm reduction and PWUD in their activities. Other examples consist of working with vulnerable women or at-risk youth. Experts mentioned that specifying groups based on their sexual identity, sex work or drug use is not always necessary.

- When registering clients and monitoring frameworks, sexual identity, key population backgrounds or other characteristics may not be registered.

The conditions necessary to engaging in such activities rely on donors accepting these formulations and the terminology used. In addition, adopting such strategies assumes that authorities will not dig deeper into the day-to-day work of specific organisations.

The primary advantage to adopting this coping strategy is that valuable work can continue despite being labelled differently.
By contrast, this strategy carries several disadvantages. These include:

- The human rights component — such as addressing stigma and discrimination, empowering and emancipating PWUD and other key populations and decriminalising drug use — remains an integral component of harm reduction and HIV-related service delivery. Using alternative language weakens this component.
- Advocating for the conditions to establish genuine change in the HIV response is not possible, since real change can only result from addressing specific problems. For example, when it is impossible to speak about basic human rights for PWUD, it is possible to initiate a dialogue on the language of HIV prevention and how language can hamper prevention efforts. In this case, acceptance and non-discrimination for all as requirements for effective HIV prevention may be difficult to genuinely take place, although progress can be made in other ways.
- Community network organisation and involvement is hampered, since people cannot openly express their identity or their needs based on their identity. Organisations adopting this strategy more explicitly refer to organisations, often community groups, now assume all of the risks.

‘We were never asked to state that we exclude specific groups. So, as long as we do not specify groups by sexual identity or the work they do, we avoid specific types of discrimination. If authorities are not comfortable with our information on, for instance, MSM, then we refer to LGBTQ organisations. These organisations live in fear of being closed.’ (Community network)

Finding and establishing wider coalitions

This type of activity falls within the HIDE as well the FIGHT strategies. By establishing wider partnerships and coalitions, organisations feel that they can hide behind a collective. Such a strategy can position agencies behind less sensitive organisations such as women’s or youth organisations, behind experts such as human rights organisations or stand stronger by aligning with all individuals affected by HIV including all key populations.

Activities we find falling within this strategy include, for example, the following:

- Establishing platforms of key populations whereby four key populations groups — that is, PWUD, LGBTQ, people living with HIV and sex workers — jointly advocate for access to health services and equal rights for all. One example was described whereby the four communities developed a ‘safety plan’ describing how communities will support one another in emergency situations, including upcoming homophobic laws, police raids on sex workers or sudden intensified arrests of drug users.
- Allying with wider NGOs that work for PWUD beyond the harm reduction sphere, such as including the rehabilitation movement and providing support for the relatives of drug users amongst others.
- Joining the EU-Russia Civil Society Forum to work with all types of CSOs through a cross-border initiative.

The conditions necessary to adopting strategies that rely on identifying and establishing wider coalitions include:

- A willingness to work together amongst groups. Such a willingness does not currently exist amongst CSOs in all countries. Moreover, various CSOs are not always a natural match, and prejudices, attitudes and approaches may differ substantially. A sensitising process is often required in order to reach consensus and create a space for collaboration and coalition building.
Common ground and goals must be established in order to focus work. Solidarity between groups must exist. A functioning system of collaboration and a rotating coordination mechanism must be created so that all coalition partners are equally involved.

Identifying and establishing coalitions, once created, carry a number of advantages:

- Widening partnerships creates a stronger mandate and protection for the coalition, all of which are stronger than protection when standing alone.
- Wider coalitions appear more successful through media and social network activities and even more so at the local level. By informing the local public together, a message of tolerance and acceptance can be distributed. Thus, individual groups may hide, but the coalition together fights by convincing the public of their messages and engaging in public dialogue.

‘If you discuss human rights in general, we should form very wide coalitions. When we discuss only LGBTQ rights, it represents a very negative topic in our country. But, if you say something about human rights in general, and include victims of sexual abuse, and LGBTQ victims alongside such discussions, it becomes okay. By doing so, it distracts the attention from LGBTQ issues. If you discuss health-related issues, it should be coalitions with organisations that provide some services for key populations.’ (HIV-related NGO, the Kyrgyz Republic)

By contrast, this particular category of activities also carries several disadvantages. These include:

- A coalition can provide protection, but could also result in vulnerability, since working in a wider coalition requires solidarity with partners potentially falling under attack.
- Groups do not necessarily align with one another. We found examples of LGBTQ and PWUD organisations with rigid prejudices against one another. However, we also found examples of coalition building processes, whereby prejudices were broken down incrementally and coalitions were formed. Human rights organisations often have a stronger emphasis on explicit rights-based advocacy. For instance, health service providers can be seen as too provocative, whilst human rights organisations often have no natural desire to fold key population rights into their work. We also found examples of women’s movements unaware or uninterested in the needs of women who use drugs or sex workers.
- Broader coalitions typically have no formal structures. The absence of such structures often challenges coordination and collaboration since activities are delegated to individual organisations or activists, placing additional burdens on their daily work. A functioning mechanism is crucial to effectiveness and enabling responses to incidents requiring a swift response.

‘The question is how drug policy and harm reduction NGOs react to expected attacks on other organisations. Will they oppose such attacks in solidarity with NGOs targeted, putting themselves in similar trouble? Or will they remain silent, preferring not to expose themselves? It depends on the policies of certain NGOs. The same question is relevant to the circle of NGOs dealing only with drug-related issues. I can imagine some of the activities, including harm reduction services, which may be more vulnerable to criticism from authorities. Again, what will others do? Will they defend their colleagues or not? This is a challenge.’ (Human rights-related NGO, Poland)

In further elaboration of forming or building coalitions, hiding is not always easy to apply. When you represent the ‘most attacked,’ hiding offers you the most protection relative to other strategies. Since being a part of a coalition can never provide complete protection, forming coalitions also means that you will stand up when others fall under attack.
Volunteer organisations

By transforming an NGO from a (fully) paid-staff organisation into an (mostly) unpaid volunteer organisation, it may become more independent from official policies and state guidance. This becomes possible since increasing state control often entails a financial and administrative burden accompanying cash flow, taxes and salaries amongst other expenses. When relying on volunteers, the organisation becomes much more invisible; by mobilising local communities, it also becomes much more locally rooted and owned. In itself, volunteer organisations often represent the last straw, representing a *HIDE* strategy as well as a *FIGHT* strategy. In reality, we only found community networks of PWUD using this as a strategy. As a person who uses drugs, one cannot step away from advocating and supporting their community. For most paid staff, volunteering often is not an option, and individuals will look for alternative employment. Yet, we did find non-community-based professionals who dedicated a portion of their time to volunteering. The cost effectiveness of volunteering remains an open question, which depends upon the type of work volunteers complete, the type of volunteers recruited and the cost savings accompanying working with volunteers. Yet, investing in volunteers always requires training, coordinating and mentoring amongst other costs.

Volunteer organisations adopt the following activities under this strategy:

- PWUD peer support groups who individually benefit from support from their peers, and who can share their knowledge and experience with the group.
- Volunteers working in shelters for homeless people.
- Lawyers offering free consultations for individuals facing legal problems.
- Youth and adolescents helping with activities and serving as sounding boards for activities.
- Organising events.
- Informing communities of new locations where clients can gather and perform outreach work.

The following conditions are necessary in order to adopt this strategy:

- Creating clarity and vision when it comes to working with volunteers. Instability amongst staff regarding if and when they are paid versus working voluntarily creates uncertainty and instability.
- Guidance and support for volunteers to deliver high-quality work.
- Flexibility in managing a high turnover rate and a large team of volunteers, since availability often fluctuates amongst volunteers.
- A volunteer strategy and policy describing procedures, tasks and responsibilities, any bonuses to show appreciation and training opportunities.

Relying on volunteers as an organisation carries a number of advantages. These include:

- Less dependence on donor support.
- A greater degree of independence and lying beyond government oversight.
- Volunteers comprising a wide network of specialists and volunteers, often demonstrating a high level of motivation and commitment to their work.
- In the fields of harm reduction, HIV and drug policy reform, many volunteers represent community members, working for their own community, providing additional motivation.
- Local ownership increases by working with volunteers and provides space to initiate change in communities from within.
- Allowing individuals the possibility to learn new and further develop their professional skills.
By contrast, this strategy also carries a number of disadvantages. These include:

- Volunteers result in higher turnover rates, potentially negatively affecting the expertise an organisation can reasonably build.
- Running a volunteer organisation requires a well-established coordinating body so that volunteers work in a similar way and towards shared goals. Volunteers, in general, are more difficult to manage, control, or guide in a unified way.
- Since volunteers often have no official contract or link to an organisation, in unsafe conditions or when faced with harassment from society or authorities, volunteers may be less protected.
- In EECA, volunteering remains relatively undeveloped, resulting in challenges in terms of finding volunteers and working with them amongst other issues.
- If an organisation is fully staffed by volunteers, the skills and expertise provided by professionally trained and paid staff may no longer be available. Yet, trained professionals may also offer their services as volunteers.
- Some activities require paid staff, which becomes difficult when relying on volunteers — that is, in relation to financial administration, coordination, and medical interventions amongst others.
- Completing work takes longer when individuals are not available full-time.

In general, we may conclude that responses related to this strategy demonstrate how initiating a volunteer organisation is only an option when no funding remains and no other options exist. We only found one example of an organisation adopting the strategy of operating on a voluntary basis so as to survive the shrinking civil society space. In discussions, all experts interviewed agreed that this should represent a temporary situation, since it can never replace fully paid staff. Alternatively, volunteers can be recruited alongside paid staff for specific tasks.

From work in The Netherlands, a country where volunteering is more widely known, accepted and developed, we know that some organisations work as highly professional organisations with around 50 volunteers and just one or two paid staff members. Thus, the cultural context appears to be an important factor determining if a volunteer organisation can develop. We see a huge potential for this strategy, particularly given the advantages listed above.

Interviewer: ‘But how then would you keep your NGO alive with hardly any money?’

Respondent: ‘We would work in a very limited capacity, and of course look for alternatives. Maybe if we could no longer sign contracts we would be forced to work with volunteers. Our volunteer core would remain then.’
(Community leader, Tajikistan)

Alter the CSO’s formal structure

Most CSOs in the fields of harm reduction, HIV and drug policy are formally registered as a public union, NGO or a network. The laws and regulations related to registration in each country differ. The exact same laws apply to situations related to the shrinking space and to controlling CSOs. By changing the formal structure of the organisation, the organisation HIDES from this control.
Thus, activities which fall under this particular strategy include, for example:

- Becoming a commercial entity.
- Working as an unregistered organisation.
- Establishing a satellite NGO abroad.
- Donors or partners recruiting NGOs staff, but as individual consultants to avoid receipt of direct funding to the organisation, and avoiding the risk of being listed as a ‘foreign agent’.
- Becoming a regional organisation.

The conditions necessary to adopting the activities related to this strategy include:

- A strong network or presence in the country where activities take place.
- For some contexts, an ‘umbrella’ or ‘mother’ NGO that is registered is necessary in order to meet the minimum requirements to work. For example, some physical office space, an address to receive mail and having some cash on-hand to implement activities amongst others may be necessary.
- Staff willing to work voluntarily.
- Flexibility amongst donors to not demand reporting of outputs and outcomes completed through their support. Considering ways to work with commercial organisations as a donor is worth discussing, as some NGOs are considering to register as commercial organization to avoid strict NGO regulations.

Altering the formal structure of an agency carries several advantages. These include:

- A larger degree of freedom to work on controversial topics, since no official organisation can be closed.
- Diminished risk of being listed as a foreign agent.
- Limited ability to apply government instruments to control CSOs.
- By not being registered, an organisation cannot be prosecuted.

By contrast, this strategy also entails several disadvantages, such as:

- Commercial agents pay more or higher taxes.
- Accessing funding becomes more difficult when not registered as a non-profit agency. This means that an umbrella or mother NGO may need to be established, which can garner support and donors must be flexible in working with it. In general, donors do not like the challenges created vis-à-vis transparency and accountability. Only small funding schemes are open to such situations.
- The safety of individuals active in unregistered organisation may be compromised: a loose network or organisation renders private individuals easier to attack.

**UNITE: ALLYING WITH AUTHORITIES**

As described above, the **UNITE** coping strategy entails NGOs actively seeking close collaboration with national authorities. The rationale for doing so is based on the following:

- **UNITING** represents the only way of influencing the direction events will take in a country. By uniting with national authorities, CSOs can prevent the deterioration of conditions and support small improvements to the circumstances for communities and for CSI in a country.
- **UNITING** allows CSOs to integrate in the implementation of policies. Thus, national authorities cannot forget about CSOs in future and cannot reach their objectives without us.
UNITING allows CSOs to preserve work that is allowed at a minimum. In future, it offers entrance to open dialogues on strategies no longer allowed or lacking for other reasons.

‘[W]e strive to do it, every day, gradually, through discussions with our partners from the authorities. In this way, we can influence their minds. If we don’t speak with them, they will maintain their position and we will maintain ours. I think that is not good. We should speak, we should discuss, we should collaborate. We can do that; we can speak directly with the decision-maker about our approaches, about our steps towards health promotion amongst the general and key populations. If we do this, we can change the situation. For example, the “Bridging the Gaps” project here. Every plan we organised here in Tajikistan, the presentation was focused on Bridging the Gaps. What is the main goal of the project? Who are the participants? If we continue influencing, maybe tomorrow we can talk about sex workers.’ (HIV-related NGO, Tajikistan)

The challenges and negative consequences of the UNITE approach consist of the following:

• By UNITING with authorities, CSOs lose much vis-à-vis their ability to check and balance against authorities, their critical voice and their function as watch dogs, all of which are essential elements of NGOs and civil society.
• UNITING leaves out the most sensitive parts of their work, resulting in a gap in services and rendering NGOs partially responsible for not supporting the rights of specific groups or not implementing evidence-based practices.
• Examples exist demonstrating clearly that allying closely with the state does not necessarily lead to reducing harm or the acceptance of such strategies by the state. Similarly, the organisation neither received funding or other means of support by that same government.

‘There is one example of an organisation. They positioned themselves as a partner to the government and I remember very clearly the moment of great optimism when the then Minister of Health of Russia addressed the regional HIV/AIDS conference in Moscow to say that the government would be adopting harm reduction programmes. However, when the time came for the government to do that, the plan changed and the government announced that it would be promoting healthy lifestyles and not adopting NGO programming. So, generally speaking, I have to say that those attempts to kind of calibrate the confrontation by NGOs in my mind have not resulted in a greater commitment by or support from the governments in the region. I think that’s an important lesson.’

We must note that in the countries discussed here allying does not simply refer to the work implemented with the authorities in accordance with national policies and space. That is, most authorities will not allow or collaborate with organisations that also carry out other activities independent from that collaboration, using other financial resources and support. Those other activities might be sensitive to LGBTQ issues, support OST in some countries, advocating for expanded rights to key populations and advocate for drug law reforms. For one reason or another, some organisations must confront suspicion from authorities and deal with additional checks and controls, and face the reality that allying is nearly impossible.

‘…[A]fter all these checks, the AIDS Centre also distanced itself from us, since they think our NGO is not OK because it is checked so frequently…’ (NGO, Tajikistan)

We identified the following specific coping strategies falling under the UNITE category, all of which focus on collaborating with governments and states.
Offer NGO based policy-supported health-related services

Here, CSOs adopt a strategy whereby they provide integrated health-related services in line with national responses and policies. As such, HIV and harm reduction service delivery NGOs primarily apply this coping strategy. By adopting this sort of strategy, NGO services are offered to authorities as a way ‘to meet their targets’ defined in national HIV and drug use policies, which often receive input from those same NGOs. In this type of work, NGOs prove valuable to authorities for several reasons:

- NGOs can access groups inaccessible to the public system due to high levels of stigma and discrimination and due to criminalisation. Thus, NGOs are invaluable to the public system.
- NGOs can often continue to access international funding, funding inaccessible to governmental organisations. By working together, international funds can be used to support nationally defined policies.

It is not possible in all countries to cooperate with national-level authorities. Yet, we learned that within the public system and state authorities’ opinions, in different levels and departments one can find that support does exist for CSO freedoms as well on issues related to HIV and key populations. This makes it possible to work with the public system requesting support and evidence from NGOs who act as allies. Such support and evidence also allows individuals and agencies to FIGHT their internal battles. This is particularly crucial in countries experiencing a rapid shift towards challenging environments.

‘NGOs active in the big cities should, based on partnerships with the municipalities, try to achieve as much as possible for themselves, for the whole movement. Jointly with the municipalities, they should create platforms, consortia or other forms of communication and cooperation. They should mobilise to protect — at least in the big cities — the productive culture of cooperation and standards of operations. They should prevent becoming divided and subordinate. I think the big cities in Poland are the bastions that NGOs can still defend; but, in order to do that, they have to work together and the cities must enable them to do so.’ (Community leader, Poland)

The activities we find falling under this strategy, include, for example:

- Outreach work where PWUD receive referrals — often to public facilities — for testing and treatment and information on preventing HIV and other blood-borne infections.
- HIV testing through low-threshold services, where individuals testing positive receive support and referrals to public health facilities.
- Housing state doctors and healthcare providers at the service delivery locations managed by NGOs.

The conditions necessary to offer health-related services consist of the following:

- Implement activities in line with governmental policies. To do so, the organisation needs to compromise, potentially leading to official agreements regarding cooperation, rendering the work easier and offering opportunities to improve effectiveness.
- Define common goals. At times, international funding does not align with state policies, rendering some funding ineligible for use to form alliances with authorities to jointly work towards policy goals or targets.
- Government recognition of CSOs as valuable for implementing work that public bodies find challenging to implement.
- Possess a solid network within state agencies and governments.
Availability of financial resources. Across all countries included in this report, hardly any domestic funds exist to support HIV-related national responses. Thus, UNITING with government bodies is primarily financed through international sources. In Kazakhstan, the Russian Federation and Uzbekistan, national funding mechanisms have initiated HIV-related service delivery by social contracting NGOs. Whilst social contracting represents a means to transition and establish local ownership, it can simultaneously further limit the civil society space. In several countries, NGO monitoring remains rather strict and government guidance should be followed if an agency hopes to receive national, domestic funding. In Poland, for example, a granting system has existed for years, although a limited amount of funding is earmarked for harm reduction services and has never been open to genuine community involvement.

This coping strategy carries the following advantages:

- Crucial work continues to be implemented.
- UNITING offers the opportunity to promote reform and simplify NGO regulations both for foreign funding as well as for social contracting systems, by providing the opportunity to choose convenient moments for dialogue and carefully advocating for the necessary evidence-based interventions. This is particularly the case during regular consultation with governmental and non-governmental bodies.
- Working closely with public physicians and officials provides opportunities to share skills and expertise and to sensitise them to working with PWUD.

- UNITING offers the opportunity to involve leaders from the PWUD community, either directly or indirectly, depending on the openness of authorities.

By contrast, this coping strategy carries several disadvantages. These include the following:

- Working in close collaboration with the state typically softens or places risks on controversial service delivery and human rights–related work. The more controversial the work, the greater the threat to that work continuing.
- By implementing state policy, an NGO primarily serves the government that envisions civil society as an implementing party with no ideas or opinions of their own. This diminishes the function of civil society.
- In harm reduction, service delivery and advocacy for the rights of PWUD cannot be separated; they must remain integrated. Working towards the integration of activities into the national framework often leads to emphasising service delivery and a lack of support for community networks, advocacy for drug policy reform and other human rights-related work. The meaningful involvement of the PWUD community remains a core principal in civil society’s work that cannot be left out. This sometimes challenges partnerships with state bodies and remains under pressure from limitations on funding.

Some of these disadvantages can be managed by forming collaborative links or a coalition of local NGOs, national authorities and international agencies and bodies. In this sense, international bodies function as advocates and push for internationally accepted, evidence-based interventions and approaches.

‘For community-based NGOs, the situation is difficult because of the financial situation. Next year, the Global Fund will withdraw even more than they did last year and nobody now considers the community of PWUD that much for funding. They are very fragile in this situation. The Global Fund’s New Funding Model gives little space to community-based initiatives, and needle and syringe exchange service points are shrinking; just two left are planned — one by the government and one by an NGO. AIDS-related NGOs are in a somewhat better situation.

They have easier access to information, more representation in platforms and working groups.’ (Community leader, the Kyrgyz Republic)
CSO-related training for state officials on the importance of CSO in health and HIV programming

Here, we specifically refer to the provision of training on health and HIV for state officials, particularly with regards to the role played by CSOs. Because CSOs often implement activities related to health, HIV and key populations in specific countries, staff from CSOs has gained much knowledge and experience. In addition, international support often focuses on capacity building for CSO staff including social workers, psychologists, medical doctors and outreach workers amongst others. Public nurses and physicians receive less training, and many CSOs now offer training to them. By training state medical staff on HIV-related medical skills, the important role of CSI in such work can be highlighted and communicated. This also extends to training or study visits for parliamentarians and policy makers. It is essential to use these opportunities to make state agencies aware of civil society, why they are needed, as well as how they function as watch dogs and how the public and non-public sectors can continue to work together.

Activities falling under this strategy include, for example:

- Study visits for politicians.
- Training the assistants of parliamentarians.
- Training law enforcement officers.

The conditions necessary to adopt this type of strategy consist of:

- A willingness from government agencies to attend this type of training on HIV and harm reduction and providing services to key populations.
- The financial resources to organise such training seminars and visits.
- A network within government structures to attract willing participants.

This coping strategy carries a range of advantages. Based primarily on experiences from training state officers, we know that the impact on their attitude is rather substantial. Thus, integrating a module on the role and importance of civil society can create a broader and more positive awareness.

The primary disadvantage of this coping strategy remains in deciding what level of decision-making authorities to include in such training. Many people within the public system can be supportive. But decisions specifically on CSO regulations are made in other departments or by higher-ranked officers, individuals who do not necessarily attend trainings such as these.

‘We are experts on HIV and we understand very well that if you do not work with the key population the epidemic will grow. We use advocacy. It’s not like fighting and a tough attitude but it is more meetings, roundtables, discussions. We have solid contact persons at the Ministry of Health who understand the tendencies of HIV and TB, and we share with them and try to convince them. Sometimes, the decision-makers from state organisations ask NGOs to give them some interviews, organise public hearings and they await initiatives from NGOs, where it becomes like a vertical subordination. Sometimes, especially for the Ministry of Health, it is very difficult to have a public opinion and that is why they need NGO support. We should work with parliamentarians. Not everyone, but we have some parliamentarians we partner with. Our organisation now has a very good relationship with two officials, two of them are women, and they often call me for advice on HIV issues or when they discuss the budget of the Ministry of Health and it is good that they reply to us and ask for expert opinions. This is good and I see that we work towards a more peaceful advocacy.’ (HIV-related NGO, the Kyrgyz Republic)
Roundtables and consultations with the government

In many countries, consultation mechanisms to inform national HIV plans and policies are in place. Country Coordinating Mechanisms (CCMs) represent one of the primary consultative instruments, put in place for the planning and implementation of Global Fund programmes. Despite the decreasing funding available through the Global Fund, maintaining these mechanisms is crucial since they serve as models for the overall coordination of activities in NGO-related work. A strong civil society presence that includes community representation is essential. In addition, a wide representation from amongst governmental structures is also crucial in, for example, establishing CSO regulations, budget allocations, establishing drugs laws and deciding upon the HIV response, all of which involve different departments and ministries. Under ideal circumstances, the government initiates and coordinates these consultations. However, when this role is not assumed by the authorities, CSOs push for or even take on such initiatives themselves.

Activities falling under this category include, for example:

- Establishing consultation committees on guidelines to work with pregnant Women who Use Drugs or with adolescents who use drugs.
- Organising roundtable discussions on decriminalisation and alternatives to punishment.

The conditions necessary to applying this strategy consist of:

- Authorities being prepared to initiate and coordinate such activities.
- Respecting and acknowledging CSO participation, particularly amongst communities of key populations. Community-based organisations should be included in working groups related to budget advocacy, the development of an HIV plan and implementing various health- and HIV-related policies. Thus, CSOs must be included in such work.

This coping strategy carries the advantage of providing direct influence over the development of plans and policies.

The disadvantages of this coping strategy include the following:

- Because CSO representatives in such consultations and roundtables often depend on the state representatives, often not all opinions are fully expressed.
- Not all feedback and input shared during consultations are genuinely included in decisions. Thus, consultations can easily be abused, mentioning a consultation, but not resulting in any clear influence or outcome.

‘The strategy to reach out for state funding at first in Uzbekistan was not so much about funding, but to start collaboration with authorities: working together through roundtables, creating trust, intersectional collaboration and then disseminating on a district level. Now, the National Fund is in place and monitoring from the state is very strict, since the state feels that the control should be very high. But there are just two organisations working in the sphere of HIV and now at least one receives this funding even as an advocacy organisation. The project plan is aligned with state plans.’ (Anonymous)
Accessing state grants

In several countries, some form of state funding for CSOs for HIV-related programming is beginning. These funding systems are often non-transparent in the selection of grantees and soliciting requests for proposals. Such issues are solely based on state opinions and policies, and carried out without involving civil society. In Kazakhstan, for instance, national authorities are advancing their granting system, through three different state funding schemes and following tender procedures that are becoming increasingly transparent.

Activities falling under this category include, for example, national requests for proposals that lead to state funding for NGOs.

The conditions necessary to adopt this strategy consist of:

- An available budget.
- Not drafting a foreign agents law, since this serves to exclude organisations from state grants (despite the absence of a formal rule).

This coping strategy carries a series of advantages. These include, for instance:

- Securing the financial resources to conduct a series of proposed activities.
- By receiving state funding, the public system also becomes accessible, providing the opportunity to slowly influence public policy. Whilst mentioned by several NGO partners from various countries, no such influence in the national granting systems has been observed in reality.
- In some countries, state funding represents the last funding option, given that very little international funding remains or receiving international support creates suspicion amongst authorities.

‘Receiving presidential grants simplifies our future. Now we have a legal address, and state control is difficult at times, but it also gives us solid opportunities for discussions and we can serve as an example for how such work is possible. At present, I do not feel any pressure from the government on our activities. But, of course, protesting against the government is not possible.’ (Anonymous)

By contrast, this strategy also carries several disadvantages. These include the following:

- Primarily CSOs not involved in controversial work receive state funding.
- Community networks of key populations in reality are not funded.
- The selection criteria continue to remain unclear. In addition, NGOs without any harm reduction expertise have received funding, which can compromise quality and effectiveness.
- Receiving national funding equates with a lot of administration.
- Receiving state grants make CSOs more dependent on the state, thus risking their monitoring and watchdog functions in countries where the state does not welcome critical voices nor is it open to controversial discussions.
- With a state grant, NGOs should be careful regarding what they say and what they advocate for, since the grants seem to place conditions on all organisational activities.

‘We don’t receive funding from the government, primarily for two reasons. First, it is very bureaucratic so you have to write many reports and have to be very educated in all of that bureaucratic stuff. The second reason is that you cannot say anything against the government while you receive funds from them. So, you cannot oppose them.’ (HIV-related NGO, Russian Federation)
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‘Now we see that the government wants to develop the NGO sector, but it doesn’t want any NGOs who oppose the government to exist or at least to be active. The government tries to suppress and marginalise them by creating an image of organisations who are against the Russian population or the Russian government. So, now they do not suppress the NGO sector as a whole, but they try to exclude those NGOs who are not liked by the government.’ (Public health NGO, Russian Federation)

‘Social contracting can also make civil society more vulnerable... they will be more dependent on the government. Or NGOs will simply not apply for social grants, since these do not support their needs or ideas. The role of NGOs will be a bit different then. Now, they primarily follow the money and apply what donors define as priorities... but they will have to work to implement the ideas outlined in grant requests. Instead of donors setting these ideas as is common now. But, of course, there will be a risk that NGOs will be closed or silenced.’ (Community leader, Tajikistan)

‘Receiving state funding is complicated and challenging, particularly for activities that they do not fully agree with. The presidential grants are awarded under high competition with others and it is not clear how the distribution and granting is carried out. Often, the lowest bid wins, which does not mean anything good in terms of quality. Lots of governmental funding is wasted on useless activities by useless organisations. But, legally, they comply with the rules set. Some of the funded organisations come to our NGO now to ask if we can implement some activities. Resources are needed for alternative funding.’ (Community leader, Russian Federation)

COMMUNICATIONS STRATEGIES

During the interviews, it became clear that the communications strategies adopted by CSOs working within shrinking spaces deserved special attention. In general, the communications strategy in these types of circumstances results in similar types of coping strategies adopted, namely, to HIDE, FIGHT or UNITE. Choosing between various tactics relies more on daily reactions to the challenges faced by CSOs rather than reflecting a strategic choice. Opting for more strategically thought-out communications plans may render the choices more coherent. In this section, we summarise some of the information we collected vis-à-vis communications strategies.

Whilst advocacy plays an important role in the work of many organisations active in the fields of HIV, harm reduction and drug policy, some NGO representatives we interviewed mentioned that they retreated from public appearances and engaging with the media. Such representatives chose silence to protect their organisation’s existence or activities, to protect others working in the same field.

‘If it’s not moving, let’s not touch it.’ (HIV-related NGO, Kazakhstan)

‘Now we keep silent a bit and do not protest too much, so that we do not provoke [the authorities too] much.’ (Participant at the regional autumn school)

Being silent in some cases maintains a good relationship with authorities who may continue to open doors for new projects. For others, remaining silent is more akin to the HIDE coping strategy, whereby representatives hope to deflect notice.

Others wondered if this strategy was truly safeguarding part of their work whilst remaining silent.

‘Something needs to be sacrificed... [W]e lose smaller things to protect the larger items.’ (Community leader, Poland)
Remaining silent towards the media represents the option of last resort, chosen only after dialogue with authorities brought no results. When it comes to the core work, however, most CSOs felt that they should engage with the media.

‘When it concerns our health, I will never calm down and obey; that is when I will protest and protect [our rights]. Since we do it for our own lives. We are not doing anything wrong, just [fighting for] the right things.’ (Community leader, Russian Federation)

When discussing communications approaches and considerations, one respondent pointed out that in his country strategies are based upon what is culturally appropriate and should be respected.

Interviewer: ‘So, you take a careful approach in that?’

Respondent: ‘Yes, because, of course, for example, in a neighbouring country such as Tajikistan where some NGOs have been closed….. and we don’t want such an experience so we play it safe. It’s really like also considering the local traditions that we are not in a country where you can go to the parliament and advocate very openly about something. So it’s better to do it in the Asian way, cleverer, more secret. In this way, it’s okay. A demonstration doesn’t work here and is even dangerous.’ (HIV-related NGO, Kazakhstan)

Other countries, such as Poland, primarily look for international support and focus their communications strategy on European leaders and citizens.

‘…. Creating a defence mechanism on an international level.’(Drug policy NGO, Poland)

Other agencies in Poland appear quite reluctant to communicate at present. The rather seismic shift in the civil society space is not (yet) affecting harm reduction and drug policy movements. At the moment, protests are much more focused on democracy and attempts to minimise democratic values. By advocating for harm reduction and drug policy reform, however, such agencies fear risking more with little if any result.

‘On purpose, we withdrew from the media so as not to attract the attention of the government and as a consequence not to cause any harm to drug policy in Poland. Second, we also retreated to some extent from the public debate. We used to do a lot of advocacy in the public sphere before such as by hosting debates in public places, at universities, but also in parliament itself. We completely resigned from advocacy and from pushing legislative processes towards the liberalisation of drugs law. Not to produce more harm than good.’ (Drug policy NGO, Poland)

In the literature, we found information on the use of social media in the context of the shrinking civil society space. Social media can allow activists to remain anonymous, although they can continue to broadcast their message. In our interviews, we found no experiences of organisations using social media in this way.

Organisations deciding to adopt the FIGHT strategy as a communications strategy often focus primarily on an international audience hoping to garner support in the international arena. Unfortunately, they do not always gain such support.

‘Before the sanctions were in place, many international organisations invited me as an expert. Since 2014, I haven’t received any invitations. I think you were the second person since last year who asked me in English and showed some interest in my expertise. I haven’t shared this kind of information for a long time so I’m glad I can do it. Before, I was invited to meetings, conferences, press conferences. I wrote five proposals for trainings and meetings.
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last year, but I was not supported. Before I was invited without needing to write any proposals.’ (HIV-related NGO, Russian Federation)

‘I don’t believe that in the current situation, when Law and Justice take all of the power, a position of resistance through barking at the authorities will be ineffective. It will only infuriate them and we’ll completely vanish from the map of Polish NGOs.’ (Drug policy NGO, Poland)

**DONOR POSITIONS**

In addition to the desk research and interviews we conducted amongst those working on the ground in the six countries assessed, we also conducted a number of interviews with representatives from national and international funding institutions that finance drug policy-, harm reduction– and HIV-related initiatives across the region. Since the withdrawal from the region of some of the largest funding institutions, many NGOs perceive financial support as one of the primary obstacles to sustaining their activities. We aimed to better understand the donors’ positions and to learn how they view the current space for civil society as well as their vision for the future. Whilst this component of the assessment was somewhat limited, it provided us with multiple interesting reflections on the situation from the donors’ perspective.

From the analysis of questionnaires with CSOs: ‘The challenge mentioned most often across all three countries (Poland, Tajikistan, Kyrgyzstan) is the lack of financing, both from international donors and the government.’

To date, the donor retreat from the region resulted from a number of different factors, some of which have already been defined. This includes the Global Fund’s withdrawal from the region with the expectation that EECA countries will assumed the task of funding HIV prevention and treatment at the country level. Such a decision relies on an assumption that simply proved wrong. One respondent called this ‘the myth of middle-income countries’ sustainability or self-sufficiency’. Priority has been granted to the poorest countries, a political reality some donors find difficult to openly admit both in relation to funding HIV prevention activities and the association such efforts have to key populations. Namely, funding the poorest countries led to the abandonment of key populations and people living with HIV as well as harm reduction and HIV-focused NGOs in worrisome situations. This is particularly the case in countries which would prefer these groups not exist at all.

‘I still receive emails from organisations in the Russian Federation and I don’t even respond because I don’t want to endanger them. But, I am very conscious that for them it will seem like I’m ignoring them. To me that highlights a sort of basic communication breakdown and I wish there were some better ways to provide this.’ (Donor)

‘We are afraid there will be trials to deprive us of international funding, of funds coming from abroad. The policies of our donors to date were based on the assumption that the situation in the country was safe and stable. Therefore, they’ve had a feeling they can slowly withdraw from the country and they have expected us to look for other sources of funding at the national level. We are observing a clash of plans and strategies created by our donors a while ago and the current situation when it is very difficult to find any support within the country. It may be that the changing situation in Poland will be followed by changes in donors’ strategies. But the gap in between will be quite problematic since it is almost impossible to get any state support nowadays and potential private business sources are a) small and b) not necessarily against the government.’ (Human rights-related NGO, Poland)

In other cases, the internal strategies resulting in donors stepping back resulted from, were supported by or pushed further by different legal regulations at the country level. One example can be found in the Russian
‘Foreign Agents Law’ or the ‘Law on Undesirable Organisations’. Developed purely on political grounds or on the authorities’ desire to tighten their control over critically thinking amongst civil society, these laws proved quite effective. First, this leaves societies more conservative, by playing an important role in public debates on drug policy or public health issues perceived as controversial. Second, this tightening of control serves to vanquish or at least slightly limit foreign funding on HIV and harm reduction.

One reason donors withdraw results from concerns about the safety of NGO staff.

‘For me it’s a story of international donors emboldening NGOs, national governments feeling threatened and also wanting a taste of money, and then international donors being unreliable partners and vanishing when the going gets tough.’ (Donor)

During the interviews, experts voiced their disappointment and criticism related to donors’ public attitudes vis-à-vis the shrinking space and how to support CSOs.

‘I see donors agreeing with the authorities all the time. They hardly ever push back. And, now, we as NGOs are left with that problem and now it is our responsibility to change it. They were the ones that agreed to leave out MSM and other key populations. So, to my mind, it is at least a shared responsibility between NGOs and donors. The donors sit in on all strategic discussions with authorities, and international agencies are listened to better and they have money… So it is much easier for them to be listened to.’ (CSO representative, Tajikistan)

‘I think our general attitude is to try to stay as engaged as we can, as long as we can, until it becomes a clear risk to the grantee at which point we then need to reconsider.’ (Donor)

With the wide spectrum of differences amongst the international grant-giving institutions and their reasons for disappearing from the region, during interviews we learned that some donors are now developing coping strategies to handle the complicated regional situation. Some donors are more open and flexible, whilst others need to adapt both internally and externally to the political climate to enable funding for those civil society organisations that continue to operate. Thus, how donors operate is now being considered or already implemented, including the following:

- Rethinking withdrawal from the region due to the currently shrinking space for civil society, thus, challenging the assumption that middle-income countries no longer require support.
- Focusing on regional support or support to intermediary partners who can then re-direct grants. This includes exploring how regional mechanisms can direct funds to NGOs in order to expose them to less risk or prevent them from becoming instruments in the hands of conservative or authoritarian regimes. This also includes supporting informal networks and other forms of knowledge exchange processes.
- Contemplating more general support which would allow NGOs more flexibility in spending money and adjust ongoing projects based on rapid changes to the situations on the ground.
- Increasing the budget allocated to support civil society in the region.
- Developing internal acceptance policies for flexibility and creating new patterns for operating.
- Allowing grantees more flexibility during the grant application process and, later, during project implementation such as accepting changes to project partners and accepting scanned versions of documents rather than original hard copies amongst others.
- Agreeing to relinquish the benefits of being acknowledged as a donor supporting specific projects, meetings or publications by eliminating the requirement to include donor logos on all materials produced within the framework of a project. This is particularly relevant since the affiliation to a donor may cause problems for a grantee at the national level. In addition, this might include refraining from media coverage of
a project’s results at conferences and other public events which would normally bring attention to and improve a donor’s image.

• Rethinking the efficiency assessment criteria, that is, not limiting success to the number of needles and syringes exchanged. In hostile environments in particular, harm reduction requires more sophisticated criteria to measure its usefulness and what works well for society or the community.

• Recognising and admitting that harm reduction staff may also be at risk, at times similarly to the risk faced by the key populations they serve, thus necessitating additional support and protection.

• Using silent diplomacy and attempting to work through or with help from NGOs.

• Knowledge exchange amongst donors allowing them to better understand the regional situation.

As much as this list provides an optimistic view of the future, currently the lack of stable funding from outside specific countries or funding independent from governments carries a number of severe consequences for civil society. Amongst others, this funding gap causes competition between NGOs. It also forces organisations to tailor their activities to donors’ expectations rather than respond to the needs of specific key populations. Furthermore, the lack of funding forces civil society to resign from a number of activities. Inevitably, the lack of international funding also leads to an overreliance amongst NGOs on domestic funding sources or face the threat of closure. Therefore, it is unsurprising that the lack of funds available from independent sources — especially within contexts where NGOs are unable to apply for state money due to their status as a foreign agent — represents one of the biggest challenges to their sustainability.

In addition, the prioritisation of medicalised interventions, including HIV testing and access to ARVs or OST in some cases, leaves behind the PWUD community and rights-based support for them. Human rights–based approaches represent an essential element to prevention, along with the well-being of all individuals. The role of civil society and more so PWUD community involvement remains at risk and can lead to undesirable consequences, such as expanding the HIV, hepatitis and TB outbreaks, the further marginalisation of key populations, higher medical and societal costs and harming individual well-being.

‘I think that less and less funding will go to the EECA region and that in an effort to convince themselves that they will have an impact HIV donors will focus increasingly on treatment and less on HIV prevention and within that, even more less so on people who use drugs, who are concentrated in middle-income countries. I think that governments will ironically be willing to spend money on treatment, but less money on prevention and that we will see in other places what we are seeing in places like Romania and Serbia where international funding for harm reduction was discontinued and where HIV infections are now increasing again. As such, some countries that were ineligible are becoming eligible again. That is an insane and immoral cycle that you leave countries knowing that no one will deal with the issue and watch as HIV infections rise and then say “oh now you have more HIV infections we are willing to fund you again.” I’m afraid that this is the direction I see things going.’ (Donor)

The situation with country-based funding institutions is a bit different, particularly in relation to branches of large UN agencies. Their presence and support seem less vulnerable, and they can do much for civil society. For example, they may not be obligated nor interested in looking at the political background or preferences of NGOs receiving their support as long as such organisations staff experts in their fields.

‘…[O]ur mandate is quite clear. We have a very open policy that civil society is an important actor for us. We will continue to support civil society, the amount made available to support civil society will increase, we will continue to try to find more flexible and innovative ways to engage with civil society and where we will not be able work as usual then we will step up the innovation so that we will can continue our work.’ (Donor)
Furthermore, supporting national structures, such as ministerial level agencies or law enforcement if they do provide such support, allows them the opportunity to convince or push state institutions to work with CSOs already proven as reliable and valuable partners. This represents potentially precious help to civil society during uncertain times.

‘I would like to understand the position of the international community. I can understand they don’t want to deal with Russia in the first place because of Russian politics. But they are also worried about Russian NGOs because they think they are fragile. They are afraid to fund small NGOs not to put them at risk. I think there should be more educational work with these international organisations and donors. We need to explain that not everything has ended yet. It would be good if some organisations could educate Western peers that there is still work going on, there are still some organisations. We used to have 80 NGOs working in harm reduction, now there are around 10 and we are desperate for support for our activities.’ (Community leader, Russian Federation)
In this assessment, ‘Coping strategies amongst resilient harm reduction non-governmental organisations and community networks in the context of the shrinking civil society space in Eastern Europe and Central Asia’, we analysed the situation in each country (Georgia, Hungary, Kazakhstan, the Kyrgyz Republic, Poland, the Russian Federation, Tajikistan, Ukraine and Uzbekistan) vis-a-vis NGO laws and regulations. Within select countries (Kazakhstan, the Kyrgyz Republic, Poland, the Russian Federation, Tajikistan and Uzbekistan), we studied how these situations affect NGOs working in the fields of drug policy, harm reduction and HIV. In addition, we examined recent changes and expectations expressed by local NGOs. In general, we conclude that more neutral and factual analyses of the situation regarding the current civil society space are often far different than the perceived situation regarding daily realities. For some country-level CSOs, this reflects the fields within which they work. Thus, these fields are more or less politicised and sensitive, affecting the strictness and monitoring efforts of states’ laws and regulations. In addition, the daily reality may reflect the stability of the strictness or freedoms offered by laws and regulations. For instance, in countries where very strict control over civil society has persisted for years, small improvements can lead to a great hope for additional space and for collaboration with authorities, such as the situation in Uzbekistan. By contrast, a system where much more space exists but where sudden measures to change this freedom have been observed results in much concern and a preparedness to protest the shrinking space, as illustrated by the situation in Poland. Systems in which CSOs feel seriously threatened and concerned that further restrictions will be introduced result in CSOs avoiding openly or loudly opposing authorities. In such contexts, CSOs may attempt to closely collaborate with authorities or become less visible, such as organisations in Tajikistan. Thus, whilst objectively the situation appears quite stable and strictly controlled and the country itself appears less free, CSOs felt they had much more space for discussions and their work.

**Strategic responses needed**

Based on this analysis, we can conclude that the perceived space for civil society and the sense of being involved or under threat are heavily influenced by the combination of strictness and change. Future analyses of the coping strategies adopted by CSOs should take into account this sensitive interaction. That is, understanding the tension of this sensitive interaction may help CSOs react to changes and threats in a manner that is less *ad hoc*, allowing them to adopt strategies that are more cohesive and strategic. These strategies may be based on the broader mechanisms we have observed in the various countries in the EECA region. The way in which the civil society spaces shrink within the region appear to follow a similar pattern. Basing coping strategies which do not merely hope for the best or fear the worst but appear more neutral and draw upon others’ experiences can help build most effective responses. Furthermore, understanding how civil society copes will help relieve the daily fear and stress under which individuals work. Deciding which coping strategy to select based on the various pros and cons of each might serve to link reality to more distant considerations, potentially leading to stronger responses and to greater solidarity amongst CSOs.

**Work in solidarity and form a united front**

During interviews with civil society representatives, it became clear that the approach adopted by states often lead to scattered and at times competitive work amongst CSOs. This likely will only lead to less effective responses to the HIV and drug use epidemics in the region. We, therefore, conclude that no one-size-fits-all situation exists. The harm reduction principle to meet people where they are, accept their choices and not expect them to do more than they are ready to do should also be applied to NGOs and community groups. That is, no one single pattern of activism will work well for everyone or across all situations. Some NGOs vocally engage in discussions on human rights, whilst others are comfortable opposing authorities. Still others might cooperate with authorities and use state funds to finance their work. Respecting one another’s choices
and strategies and working in solidarity will strengthen the collective response.

Given the current situation in Central Europe — that is, in Hungary, Poland and other countries with similar tendencies — it is crucial that we include these countries’ CSOs in discussions, dialogues and exchanges when we examine civil society’s coping strategies.

Working in solidarity and along a unified front becomes possible through exchanging experiences and collaboration between countries, both within the region and between different regions globally. This solidarity can keep NGOs inspired and remove any feelings of isolation. In some countries, civil society communities are better developed. Sharing best practices and achievements remain crucial, and regional collaboration can help organisations share various aspects of their work widely.

**Coping strategies**

This assessment showed us that the variety of coping strategies employed fall within three broad categories: **FIGHT**, **HIDE** and **UNITE**. Most CSOs with whom we spoke choose either a single strategy or a combination of **FIGHT–HIDE** or **UNITE–HIDE**.

Within the **FIGHT** category, we identified strategies that openly oppose authorities or rules and regulations put into place to shrink the space for civil society. This strategy includes advocacy against strict drug laws or implementing international standards and evidence-based interventions, advocacy and actions that support the rights of individuals belonging to key populations such as PWUD. In addition, this strategy also includes various types of protests against general laws and policies, against organisational punishments and smear campaigns. Whilst CSOs who decide to **FIGHT** do so to support the freedom of expression and fundamental civil rights for all, including PWUD, opposing and criticising authorities openly closes the door to dialogue and collaboration and places the safety of organisations and individual activists at risk. Within the **FIGHT** category, we identified the following coping strategies: strategic litigation, street lawyers and working with paralegals, finding alternative funding streams and working regionally across EECA.

The **HIDE** category involves NGOs operating silently without advocating for activities unwelcomed by authorities or without openly admitting to provide such services. This is all done to preserve the activities NGOs may still conduct, to protect organisations themselves — from being closed or listed as foreign agents — or their staff from personal risk. Although **HIDE** strategies openly appear as though the civil society organisation is adhering to the authorities, it may also include protests or secretly supporting a particular community. Hiding sometimes allows CSOs to continue accessing state grants or to cooperate with authorities. Yet, it is not without negative consequences. Not operating openly can affect the quality of work. Not speaking freely removes the possibility of open discussions on life-saving evidence-based interventions. The **HIDE** coping strategies consist of reframing and redefining the work conducted, finding and establishing broader coalitions, becoming a volunteer organisation and changing the formal structure of the organisation.

The **UNITE** coping strategies entail forming different alliances with authorities. Some organisations do so in order to influence decisions taken by a country, to preserve at least a portion of their work or to access state funds. Uniting with authorities requires resigning from the watch dog role and typically abandoning (or hiding) the most sensitive parts of their work such as advocating for OST or for LGBTQ rights. Thus, NGOs become partially responsible for not supporting specific key populations and communities or for not implementing evidence-based practices. In addition, this places significant stress on work that adheres to core principles such as ‘nothing about us, without us!’ or implementing IDUIT. The **UNITE** coping strategies adopted include offering health-related services provided as an integral part of national responses and
policies, training governmental staff on health and HIV possibly by including the specific role of CSOs, roundtables and consultations with the government and accessing state grants.

Thus, the choices between strategies are not often made strategically or cohesively, nor are they related to communications or advocacy. Whilst several CSOs spoke of coherence, none provided a full situation analysis and most described their coping strategies as temporary. In addition, most CSOs operated in the hope that the situation will become calmer and result in less fear. From the literature and legal analysis, we expect that the shrinking civil society space will continue or not necessarily improve.

Resilient movement

During the interviews, it became clear that harm reduction CSOs in EECA show great resilience. Despite harsh and unsafe situations, individuals remain committed to sustaining the goals of their organisations. Yet, it is worrisome to hear that several CSOs in various countries have disappeared despite their attempts to survive. In countries where the community space continues to shrink, it is crucial that we keep the spirit alive, maintaining the motivation and capacity developed over the past 15 years. We must continue to develop and support strategies and models to continue such work. To do so, NGOs need to feel supported and the strength of foreign and regional NGOs to avoid exhaustion and despair resulting from isolation.

Following standards and guidelines

Under circumstances where survival is threatened, international standards and guidelines such as IDUIT, the WHO principles on harm reduction, ‘nothing about us without us!’ may be challenging to follow. As much as the CSOs interviewed support such principles and guidelines, many indicated that they struggle to follow and adhere to them. As a basis for international support, it is important to maintain our collective focus on these principles, particularly their relationship to evidence-based practices. Since EECA is one of two regions in the world where the number of new HIV cases continues to grow each year, laws and law enforcement reform should adhere to health policies and international health and human rights standards. Support for NGOs prepared to take up this critical advocacy role towards legal reforms remains crucial.

Donors

When examining the donor response to the shrinking civil society space, we found a delay in the unfortunate effects of strategies once developed by donors.

The lack of funding available from independent sources represents one of the biggest challenges CSOs currently face in the present climate.

Since most donors favour working in countries where they are welcome by national authorities, including an interest amongst authorities to take responsibility for the work supported, we observed the (planned) withdrawal of donors from EECA. During interviews with donors, all of them expressed a continuing commitment to civil society in all of the countries in the region, although they understand that the transition from international donor support to domestic funding will not result in the essential support to civil society needed for an effective HIV response and support for the rights of PWUD. Even middle-income countries financially able to support CSOs and this type of work show a strong reluctance to support critical or sensitive CSOs. Perhaps worse, in countries where such transitions are occurring, medicalised HIV care for general populations depends upon international funding, funding that is diminishing. The undesired effect is that CSOs working on harm reduction and drug policy reform are currently much more suppressed than in
previous years. The system of state funding can unfortunately not be relied upon to improve the situation. Several examples exist whereby state funding is used to control CSOs and to effectively stop any form of critical review or advocacy to national authorities. At present, we see donors beginning to react, and whereby different strategies are guiding efforts. These include building internal awareness on the space to support these CSOs, granting funding through other mechanisms if activities cannot be openly funded and considering flexible granting conditions such as individual contracts or the use of umbrella partner organisations amongst other strategies.

The survival of CSOs in EECA relies on donors restrategising and granting room to support CSOs in EECA through flexible conditions, by providing funding through other channels, by working less on the forefront as a donor to keep CSOs safe and by understanding in which countries CSOs are attempting to survive and where sustainability cannot currently serve as a goal. In some countries, emergency funding represents an immediate need until more strategic approaches can be implemented. This does not just lead to financial resources for CSOs, but also to the sense that the international community cares and supports CSOs in their struggles.

Finally, international donors should not solely focus on the effectiveness of direct epidemiological interventions, but consider the importance of community involvement. For that reason, they should invest in community advocacy, monitoring, prevention and outreach. These represent the first activities eliminated when funding shrinks and the last funded by domestic sources. At least a portion of all investments should be allocated to community initiatives.

The role of the international community

Raising awareness amongst donors and advocating for attention and financial support for civil society in EECA can be assumed by international NGOs in solidarity with their EECA partners. A clear need exists to develop regional networks and exchange practical knowledge — not only amongst activists, but also amongst donors. Donors as members of the international community, which includes the governments of Western countries, are in the best position to interact and initiate dialogue with EECA authorities. Such discussions should focus on decision-making principles and lobbying for the interests of these countries, implying a healthy civil society sector allying with governmental sectors. This strong civil society can also form the basis of checks and balances within each society.
REFERENCES


II_ANNEXES

TEMPLATES OF ASSESSMENT INSTRUMENTS
ANNEX 1: DESK RESEARCH TEMPLATE ON NGO LAWS AND REGULATIONS

‘Assessment on the state of the civil society space related to access to health for key populations in select countries of the EECA region’

**DESK RESEARCH TEMPLATE**

**Country:**

**What is the situation related to NGO laws and regulations in [name country]?**

Please provide information on the general situation on NGOs, on organisational forms and registration forms. How many NGOs are registered? Is there information on how many NGOs are registered that work within the scope of harm reduction, drug policy, HIV and health for PWUD? What barriers impede NGO formation or their ability to conduct activities as NGOs? What regulations exist related to the freedom of NGOs to speak out and to advocate? Are there any regulations on international contact and accessing resources? Are there any barriers to assembly?

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**Is there any NGO legislation pending and regulatory initiatives that we know of in [name country]?**

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‘Assessment on the state of the civil society space related to access to health for key populations in select countries of the EECA region’

**DESK RESEARCH TEMPLATE**

**Country:**

What type of action activities are described in how NGOs deal with the shrinking civil society space in the literature, online or in the media?

Please provide information, including concrete examples or models described and note the actions or activities of NGOs in the fields of harm reduction and drug policy reform.

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What types of actions or activities describe how NGOs address fears related to the shrinking civil society space?

Please provide information, including concrete examples or models described and note the actions or activities of NGOs in the fields of harm reduction and drug policy reform.

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<th>Title of the document / resource used</th>
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Analyse and describe the different attitudes, models and positions NGOs adopt to use or apply to deal with or overcome their fears related to the shrinking civil society described in the literature, online or in the media.

Please provide an analytical review of the literature gathered and any conclusions that can be drawn from that on models or positions CSOs take when dealing with or in fear of the shrinking civil society space. Make specific notes when these actions or activities are carried out by NGOs working in the fields of harm reduction and drug policy reform, such as strategies to prevent worsening the situation or pushing back, or maintaining the status quo and one’s own position.

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This annex provides the interview guide for discussions with experts in the region. The guide was intended to provide descriptions of the different activities, actions, attitudes, positions and strategies adopted by NGOs and CSOs working in the fields of harm reduction and drug policy reform.

‘Assessment on the state of the civil society space related to access to health for key populations in select countries in the EECA region’

GUIDE FOR THE EXPERT SEMI-STRUCTURED INTERVIEW

with NGOs and community networks

I_Introduction

1. Introduce yourself, your organisation and the project you represent
2. Briefly describe the goals and objectives of the assessment as well as the expected duration of the interview
3. Ask the respondent to sign the informed consent form
4. Ask if the person has any questions about the assessment or procedure
5. Ask the respondent about her/his experience, current job title and other information and complete the following table:

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<th>Name of the respondent:</th>
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<tr>
<td>Organisation:</td>
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<td>Job title:</td>
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<td>Responsibilities:</td>
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II_General situation in the civil society space, specifically for NGOs, CSOs and community networks related to the space they are allowed and the space they occupy in order to carry out their work.

1. How would you describe the situation for NGOs and communities in your country?
2. Is it more or less or equally challenging for your NGO in the sphere of harm reduction, service delivery or drug policy compared with others?
3. What is the effect on your organisation? What is the situation you are in now and do you feel any consequences related to this situation?
4. What do you foresee for the near future? That is, will it improve, stay the same or become worse?
### III_What is your organisation doing to deal with the present situation?

1. Do you also (fore)see any specific challenges for NGOs working in your sphere of work in harm reduction, drug policy or service delivery?
2. Do you also see any specific opportunities for NGOs working in your sphere of work in harm reduction, drug policy or service delivery?

### IV_Strategies to guarantee the operation of your organisation

1. Current or anticipated risks to operations (What risks do you now face to do your work and what risks do you foresee for the future?)
2. Current or anticipated new opportunities for operations.
3. Current climate for operations (How do you now choose to position yourself as an NGO — an ally of the authorities, trying to remain invisible or as a protestor or activist?)
4. Anticipated climate for operations (Do you think that you will change the way you position yourself if the situation changes?)
5. Strategies to sustain in the current climate.
6. Strategies to sustain in the anticipated climate.
7. Biggest challenges.

### V_What kind or type of support would you need to deal with this situation and to continue your work?

1. Needs
2. National support
3. International support
4. Is any of this already in place or offered?

### VI_Conclusions and recommendations

1. Do you have any suggestions for influencing the situation positively? Or do you have any suggestions for sustaining the situation so it will not continue to move towards the Russian model?
2. Do you have any suggestions for *AFEW International* regarding how we can improve our work or the situation?
1. Please state the name of the organisation and contact details (not mandatory).

2. In your opinion, has the situation for your NGO become better or worse in the last three years?
   - better
   - worse
   - stayed the same

3. How do you evaluate the conditions for your NGO with regard to the legal framework, financing, private donations, public opinion, state support, volunteering and media coverage?

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<th>Conditions with regard to</th>
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4. What types of major challenges have civil society organisations faced in your country over the last year? (List three of them and explain them in 1-2 sentences)

5. What kind of challenges has your organisation faced over the last year? (List three of them and explain in 1-2 sentences)

6. What did you do to overcome these challenges?

7. Has your organisation developed some interesting solutions or best practices to address these challenges? Briefly describe. (Under ‘best practices’, we refer to innovative solutions, practices and initiatives that allow civil society organisations to face and react to challenges.)

8. In which field would you primarily identify your organisation’s work?
   - human rights
   - drug policy
   - harm reduction
   - HIV and health service provision
   - Drug user network

9. In what form does your organisation operate?
   - Registered organisation
   - Unregistered organisation – grassroots movement
   - Unregistered organisation – professional movement
   - Other: ....

10. How long has your organisation existed?
    - less than 1 year
    - 1–5 years
    - 6–10 years
    - 10–20 years
    - more than 20 years

11. How many people (employees, volunteers, members) were involved in your organisation in 2016?
    - less than 10 people
    - 10–50 people
    - 50–100 people
    - 100–200 people
    - more than 200 people
12. On which level does your organisation work mostly (you can choose 1–2 options)?
In a capital city only
In a non-capital city/town
In a rural community
On a regional level (a number of cities or communities)
On a national level
On an international level

13. Would you be willing to share your best practices with other civil society organisations in other countries if we are looking for respondents? If yes, please provide your contact details and a researcher will contact you to organise an interview. (This will depend on the study needs.) Contacting respondents will be handled separately from the survey analysis.

If you would prefer simply to send information or reports on your best practices, please indicate this below.

You can return this questionnaire to:  Janine Wildschut:  janine_wildschut@afew.nl

Magdalena Dąbkowska: m.a.dabkowska@gmail.com
1. Пожалуйста, укажите имя организации и контактные данные (не обязательно).

2. По вашему мнению, стала ли ситуация в вашей НПО лучше или хуже за последние три года? лучше хуже осталась без изменений

3. Как вы оцениваете контекстные условия в ваших НПО в отношении правовых устоев, финансирования, пожертвований частных лиц, общественного мнения, государственной поддержки, волонтерства и освещения в СМИ?

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<th>Отрицательные</th>
<th>Нейтральные</th>
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4. С какими видами основных проблем общественные организации в вашей стране столкнулись в прошлом году? (укажите три из них и объясните одним-двумя предложениями)

5. С какими проблемами столкнулась ваша организация в прошлом году? (укажите три из них и объясните одним-двумя предложениями)

6. Что ваша организация предприняла для разрешения данных проблем?

7. Нашла ли ваша организация примечательные решения / передовые методы для разрешения данных проблем? Коротко опишите. (Под «передовыми методами » подразумеваются инновационные решения, подходы или инициативы, которые позволяют общественным организациям решать проблемы и реагировать на трудности.)

8. В какой области, по вашему определению, преимущественно работает ваша организация?

- права человека
- наркополитика
- снижение вреда
- обеспечение ВИЧ-позитивных людей и здравоохранения
- сеть потребителей наркотиков

9. В каком виде ваша организация осуществляет свою деятельность?

- Официальная организация
- Неофициальная организация - местного уровня
- Неофициальная организация - профессионального уровня
- Другое: ...

10. Как долго существует ваша организация?

- менее года
- 1-5 лет
- 6-10 лет
- 10-20 лет
- более 20 лет

11. Сколько человек (служащих, волонтеров, членов) были вовлечены в деятельность вашей организации в 2016 году?

- менее 10 человек
- 10-50 человек
- 50-100 человек
- 100-200 человек
- более 200 человек
12. В каком масштабе ваша организация, в основном, работает (можете выбрать 1-2 варианта)?
только в столице
в большом городе/городе
в сельской общине
в областном масштабе
в государственном масштабе
в международном масштабе

13. Будете ли вы готовы поделиться передовыми методами вашей организации с другими общественными организациями в других странах, в том случае, если нам понадобятся ранее опрошенные лица? Если вы будете готовы это сделать, то запишите пожалуйста ваши контактные данные и с вами свяжется исследователь, чтобы организовать интервью (это будет зависеть от особенностей исследования). Случаи контактирования с опрошенными лицами будут рассматриваться отдельно от результатов исследования.

Если вы предпочитаете прислать нам ваши записи о передовых методах вашей организации, пожалуйста напишите об этом здесь.

Вы можете вернуть этот вопросный лист:  
Janine Wildschut: janine_wildschut@afew.nl
Magdalena Dąbkowska: m.a.dabkowska@gmail.com
This annex provides the interview guide for discussions with representatives from donor agencies active or formerly active in the EECA region. The guide was intended to provide descriptions of the donor positions and their considerations regarding support for civil society where the space is shrinking or closing entirely.

‘Assessment on the state of the shrinking civil society space related to access to health for key populations in select countries in the EECA region’

**GUIDE FOR THE EXPERT SEMI-STRUCTURED INTERVIEW with donors**

I_Introduction

1. Introduce yourself, your organisation and the project you represent
2. Briefly describe the goals and objectives of the assessment as well as the expected duration of the interview
3. Ask the respondent to sign the informed consent form
4. Ask if the person has any questions about the assessment or procedure
5. Ask the respondent about her/his experience, current job title and other information and complete the following table:

<table>
<thead>
<tr>
<th>Name of the respondent:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organisation:</td>
</tr>
<tr>
<td>Job title:</td>
</tr>
<tr>
<td>Responsibilities:</td>
</tr>
</tbody>
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II_General situation related to the sphere of funding in countries where the civil society space is shrinking

1. Do you have examples of countries where you support CSOs and where this is becoming increasingly difficult? What are the challenges that you see from the donor’s perspective?
2. Did you ever stop supporting CSOs because a country’s government no longer wanted you there or made it quite problematic for CSOs to implement their work or jeopardised their position or safety by receiving foreign funding?
3. Did you ever begin supporting CSOs because of the shrinking space?
4. Amongst CSOs, from the donor’s perspective, how do you view the position of harm reduction NGOs and PWUD community groups?
5. What kinds of activities or strategies do you adopt to deal with the risks and results of the shrinking civil society space?
III_Selection of countries and civil society partners

1. Positions and considerations for a partner in general. (Do you select partners that have close relationships with authorities, who are activists or allies, who are quite exposed and vocal or who remain more silent?)
2. Positions and considerations for a partner within shrinking civil society spaces. (Do you select partners close to the authorities or refrain from working with them? Do you choose allies or activists, agencies that are silent or outspoken? Do you select agencies that take risks or which remain safe?)
3. Specific requirements for harm reduction and drug policy NGOs.
4. Specific situation to support the community of PWUD.

IV_Conditions and regulations of funding

1. Do you place any conditions or requirements on your funding that CSOs in shrinking spaces have found increasingly problematic to meet or comply with?
2. Are there practical challenges that you as a donor face to support CSOs in shrinking spaces?
3. Did you ever adjust or become more flexible in terms of official procedures and requirements for CSOs to receive funding in specific cases? For instance, procedures or requirements which they cannot meet due to this shrinking civil society space.

V_Consclusions and recommendations

1. What are your concerns when it comes to donor support under shrinking civil society spaces?
2. Do you have any suggestions or recommendations towards improving the support for CSOs in the field of harm reduction in the shrinking civil society space?
3. What are your expectations of what will happen in the coming years?
4. What is your advice to CSOs regarding how to position themselves within shrinking civil society spaces? (For example, to comply, ally, protest, become an activist or disband?)
5. Do you have any suggestions for AFEW International regarding how we can improve the situation?
Consent for participation

Bridging the Gaps: Health and rights for key populations: AFEW International

I agree to participate in an interview for a study on the civil society space in EECA. I agree with the following statements:

1. I have been provided with sufficient information about this research project. The purpose and conditions of my participation have been clearly explained to me. I either personally read the information sheet in full or the information sheet has been explained to me in detail.
2. I agree to participate in the interview on the conditions mentioned above.
3. I have been given a copy of this consent form co-signed by the interviewer.

Participant’s Signature: __________________________ Date: ________________________
Researcher’s Signature: __________________________ Date: ________________________

Согласие на участие в интервью

Восполняю пробелы: здоровье и права уязвимых групп: AFEW Интернешил

Я согласен/на участвовать в исследовании по вопросам гражданского сообщества в ВЕЦА и подтверждаю, что:

1. Я получил/ла достаточно информации об этом исследовании. Мне четко объяснили цель исследования и условия моего участия. Я полностью прочитал/ла информационный лист или мне подробно пересказали его содержание.
2. Я согласен/на участвовать в интервью на основе изложенных выше условий.
3. Мне предоставили копию этой формы согласия, подписанную интервьюером.

Подпись участника: __________________________ Дата: __________________________.
Подпись исследователя: __________________________ Дата: __________________________.

Если вы хотите получить более подробную информацию об исследовании, пожалуйста, свяжитесь с Жанин Вилдскут: janine_wildschut@afew.nl
Interviews with CSOs in Central Europe and EECA working in the fields of harm reduction and drug policy.

Introduction

At present in Central and Eastern Europe and Central Asia, we see the space for NGOs shrinking, primarily due to the influence of the Russian Federation or nationalistic leaders. It is striking that this mainly affects NGOs working in the fields of human rights and environmental issues. Since harm reduction activities are strongly rooted in human rights, drug policy reform, public health as well as drug use are always heavily debated worldwide. Harm reduction-related CSOs are affected by this climate. The tendency towards a shrinking space represents a big concern, since it can reverse progress made in our work supporting key populations.

In studies regarding the civil society space, we rarely find much reference to harm reduction and drug policy NGOs. Based on regular practice and our network, we know a number of NGOs and community networks are under increasing pressure, challenges which extend to donors of harm reduction and drug policy reforms. Thus, we decided to conduct this assessment. We aim to understand the state of the civil society space related to access to health services and rights for PWUD in select countries of Central Europe and the EECA region. This includes the dilemmas, challenges and considerations donors face when deciding to support NGOs in countries where the civil society space is shrinking.

This is not a full scientific study, but rather a scan of the overall situation. Thus, we would like to consult with you given your expertise and experiences in the current climate in your country. Interviews will be conducted in Kazakhstan, the Kyrgyz Republic, Poland, the Russian Federation, Tajikistan and Uzbekistan with four to five harm reduction– and drug policy–related NGOs and community networks as well as with five donor agencies. Additionally, a short questionnaire will be distributed in these countries to the network of our interviewees. Desk research will further include the situations in Armenia, Georgia, Ukraine and Uzbekistan.

Interview invitation and explanation of the process

We are inviting you to an interview to discuss the work of your NGO or the network's situation. The interview will take 1 to 1.5 hours of your time. We will record the interview using a digital recorder, which will be transcribed into text making analysis more convenient.

The interview will be anonymous and confidential. This means that your name or any other information that may identify you personally will not be recorded by the interviewer. If you accidentally mention your name or the names of other people during the interview, this information will be omitted from the transcripts. The content of your discussion with the interviewer will only be used for the purpose of the study, and it will be impossible for you to be later identified as a participant. The study reports will not contain any (actual) names, unless you would prefer your name is used during the course of the interview. After transcription, all audio recordings will be destroyed. Please note that the study is carried out by a Dutch organisation; therefore, interviews will not be shared with any officials in your country.
During the interview, you will be asked questions about the situation in your country when it comes to the space within which NGOs in general and yours in particular work. In particular, we will discuss how you deal with the challenges you face and what opportunities this situation provides you. In particular, we are interested in the specific climate in which harm reduction and drug policy NGOs and community networks operate in comparison to other NGOs. We would also like to know your opinion regarding how the situation can be improved or how to cope with the increasing challenges in future.

Should you feel uncomfortable about any questions asked by the interviewer, you can refuse to answer those particular questions. If you continue to feel uncomfortable, you can stop the interview at any time. Please remember that the interview as a whole and answering any particular questions is completely voluntary.

Only a general report of the study results will be released to the public. We hope that report and our findings will help improve the situation for civil society in the fields of harm reduction and drug policy. Based on the conclusions of this study, we hope to develop the next steps in our regional work to strengthen the situation for CSOs in our field.

If you need more information about the study, you may contact Janine Wildschut (janine_wildschut@afew.nl) or Magdalena Dąbkowska (m.a.dabkowska@gmail.com).
Интервью с НПО в (Ц)ВЕЦА, которые работают в сфере снижения вреда и политики по отношению к наркотикам

Вступление

В Центральной и Восточной Европе и Центральной Азии в настоящее время мы видим сокращения НПО, в основном из-за влияния России и / или националистических лидеров. Поразительно, что это в основном касается НПО, работающих в области прав человека и экологических проблем. Поскольку работа по снижению вреда уходит корнями в работу в области прав человека, а политика в отношении наркотиков и общественное здравоохранение и также употребление наркотиков постоянно обсуждаются во всем мире, это негативно отражается на НПО, которые занимаются вопросом снижения вреда. Эта тенденция вызывает большую озабоченность, поскольку она может изменить прогресс, достигнутый в нашей работе в поддержку ключевых групп населения.

В исследованиях, посвященных ситуациям в области НПО, мы не часто находим много информации об организациях, которые занимаются снижением вреда и наркополитикой. Основываясь на регулярной практике и нашей сети, мы знаем о рядах НПО и общинных сетях, которые находятся под давлением, и что даже доноры для снижения вреда и политики в отношении наркотиков сталкиваются с проблемами. Вот почему мы решили провести эту оценку. Мы планируем узнать о состоянии деятельности НПО, когда речь заходит о доступе к медицинским услугам и правам людей, употребляющих наркотики в отдельных странах региона (Ц)ВЕЦА, а также о диллемах, проблемах и соображениях, которые доноры оказывают для поддержки НПО в странах, где деятельность НПО уменьшается.

Это не полное научное исследование, а скорее сканирование общей ситуации, с помощью которой мы хотели бы проконсультироваться с вами, поскольку вы являетесь экспертом в вашей ситуации (или текущей ситуации в вашей стране). Интервью будут проводиться в Польше, России, Таджикистане, Кыргызстане и Казахстане с 4-5 организациями, которые занимаются снижением вреда и наркополитикой, общинными сетями и 5 донорами. Кроме того, мы разошлем короткую анкету в эти страны для сетей наших собеседников. В исследования также будут включены Украина, Грузия, Узбекистан и Армения.

Приглашение и объяснение интервью

Вы один из тех, кого мы приглашаем на интервью, чтобы поговорить о НПО или ситуации в вашей сети. Это интервью займет 1-1,5 часа вашего времени. Мы запишем информацию на цифровой диктофон для удобства анализа, а затем перепишем как текст.

Интервью будет анонимным и конфиденциальным. Это означает, что ваше имя или любая другая информация, которая может идентифицировать вас лично, не будет записана интервьюером. Если вы случайно упомянете свое имя или имена других людей в записи, эта информация будет удалена при расшифровке интервью. Содержание вашей беседы с интервьюером будет использовано только для целей данного исследования и вас потом будет невозможно определить как одного из участников.
Отчеты об исследовании не будут содержать никаких подлинных имен, за исключением случая, если вы сами назовете, чтобы ваше настоящее имя было использовано в ходе интервью. После транскрипции все звуковые записи будут уничтожены. Обратите внимание, что исследование проводится голландской организацией, и поэтому записи интервью не будут предоставлены никаким должностным лицом или СМИ в России или Казахстане.

Во время интервью вас будут спрашивать о ситуации в вашей стране, о деятельности НПО в целом и ваших, в частности; о том, как вы справляетесь с проблемами, с которыми вы сталкиваетесь, и какие возможности вам предоставляет такая ситуация. В частности, нас интересуют конкретные примеры НПО / сетей сообществ в области снижения вреда и наркополитики по сравнению с другими НПО. Мы также хотели бы узнать ваше мнение о том, как можно улучшить эту ситуацию или как справиться с проблемами, которые возникают, в будущем.

Если вы чувствуете дискомфорт по поводу любых вопросов, заданных интервьюером, вы можете отказаться отвечать на эти конкретные вопросы. Если вы продолжаете чувствовать себя не комфортно, вы можете прекратить интервью в любое время без объяснения на то причин. Пожалуйста, помните, что интервью в целом и ответы на любые вопросы – это полностью добровольно!

В результате исследования будет опубликован общий отчет. Мы надеемся, что он поможет улучшить ситуацию с доступом к здравоохранению, социальным услугам и защите прав человека для людей, которые мигрируют для работы или по другим причинам и используют наркотики.

Для более подробной информации об исследовании, пожалуйста, свяжитесь с Жанин Вилдсют: janine_wildschut@afew.nl или Магдаленой Дабковской: m.a.dabkowska@gmail.com
Interviews with donor representatives in Central Europe and EECA working in the fields of harm reduction and drug policy

Introduction

At present in Central and Eastern Europe and Central Asia, we see the space for NGOs shrinking, primarily due to the influence of the Russian Federation or nationalistic leaders. It is striking that this mainly affects NGOs working in the fields of human rights and environmental issues. Since harm reduction activities are strongly rooted in human rights, drug policy reform, public health as well as drug use are always heavily debated worldwide. Harm reduction–related CSOs are affected by this climate. The tendency towards a shrinking space represents a big concern, since it can reverse progress made in our work supporting key populations.

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Financial support for this survey was provided through the budget of the project ‘Bridging the Gaps: Health and rights for key populations 2.0’, funded by the Ministry of Foreign Affairs of the Netherlands.