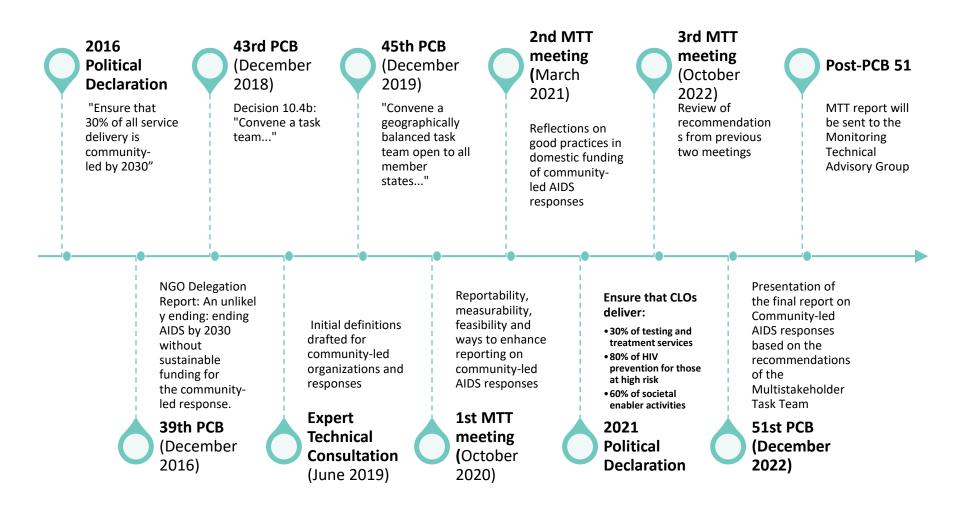
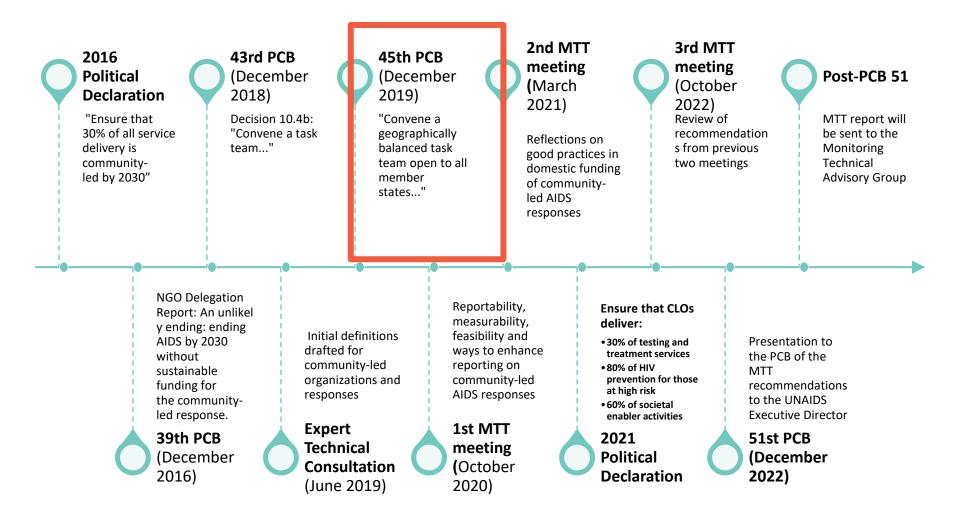
FINAL REPORT ON COMMUNITY-LED AIDS RESPONSES

RECOMMENDATIONS OF THE UNAIDS MULTISTAKE-HOLDER TASK TEAM











Multistakeholder Task Team Members

Member States Representatives of NGOs and People Living with HIV AIDS Action Europe, Hungary/Germany Cameroon Alliance Nationale des communautés pour la Santé, Senegal Ecuador Bolivian Network of People Living with HIV, Bolivia Ethiopia Global Network of People Living with HIV (GNP+), Ghana Indonesia/Netherlands Iran Global Network of Young People Living with HIV (Y+), **Russian Federation** Dominica Rwanda International Community of Women Living with HIV, Kenya Sweden MPact Global Action for Gay Men's Health and Rights, USA United States of America Peer-to-Peer, Uganda **Zimbabwe** Tunisian Center for public health, Tunisia Women's Health in Women's Hands, Canada

External partner

The Global Fund to Fight AIDS, Tuberculosis and Malaria



Framing the work of the multi-stakeholder task team

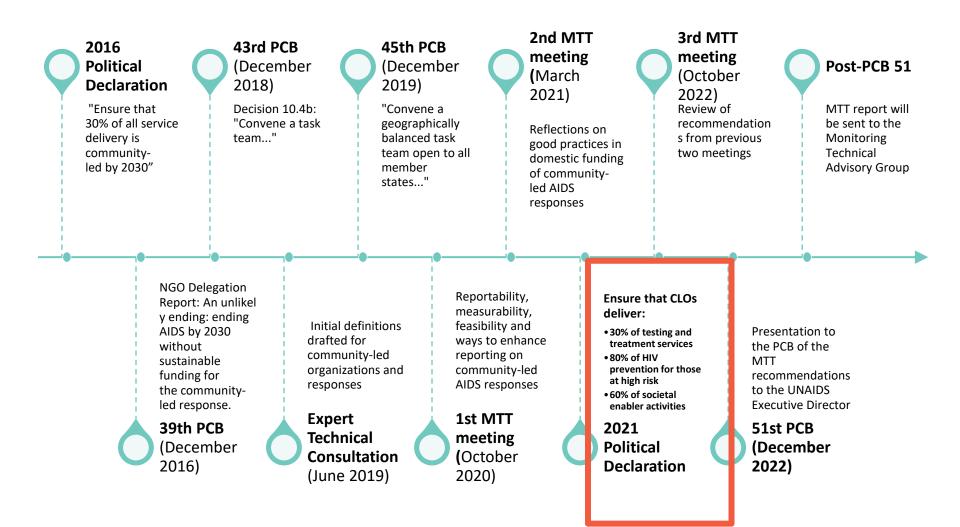
The multi-stakeholder task team was charged with the following activities:

- Reflect on relevant definitions, including the reportability and measurability of the indicators, for consideration by the UNAIDS Monitoring Technical Advisory Group (MTAG);
- Develop recommendations on the use of the definition of communityled AIDS responses, for consideration by the UNAIDS MTAG; and
- Explore the feasibility and ways to enhance reporting on community-led AIDS responses to assist Member States in fulfilling their commitments, as outlined in the 2016 Political Declaration on Ending AIDS

At the end of the process, the multi-stakeholder task team was tasked to provide **recommendations** to the UNAIDS Executive Director which will be outlined in a report presented to the Programme Coordinating Board.

After this meeting, the recommendations will be shared with the MTAG.





Political Declaration (2021): Ending Inequalities and Getting on Track to end AIDS by 2030

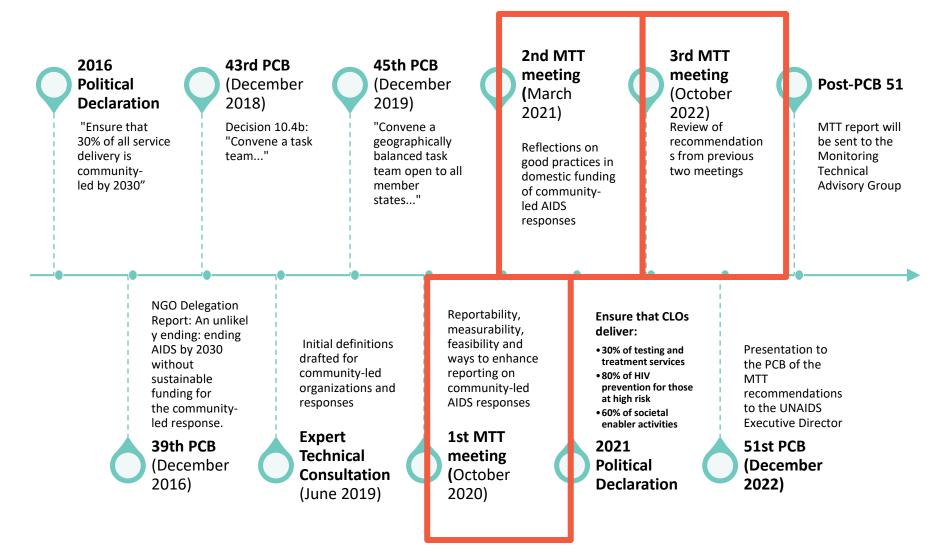
Commitments:

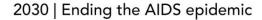
- Commit to the Greater Involvement of People Living with HIV/AIDS (GIPA) principle and ensure that relevant global, regional, national and sub-national networks and other affected communities are included in HIV response decision-making, planning, implementing and monitoring, and are provided with sufficient technical and financial support.
- Ensure that community-generated data is used to tailor HIV responses to protect the rights and meet the needs of people living with, at risk of, and affected by HIV.

Reaffirmed principles and updated 2025 targets:

- Ensure that community-led organizations deliver 30% of testing and treatment services, with a focus on HIV testing, linkage to treatment, adherence and retention support, and treatment literacy by 2025.
- Ensure that community-led organizations deliver 80% of HIV prevention services for populations at high risk of HIV infection, including for women within those populations by 2025.
- Ensure that community-led organization deliver 60% of programmes to support the achievement of societal enablers by 2025.







Recommendations



Multi-Stakeholder Task Team Recommendations: Definitions

 UNAIDS should adopt the definition of community-led organizations and responses* and move forward rapidly to develop indicators and technical support for national AIDS programmes, funders, and communities to measure, monitor and report on community-led AIDS responses.

*as revised in the first meeting of the Multi-Stakeholder Task Team



Definitions: Community-led organizations and responses

- **Community-led AIDS responses** are actions and strategies that seek to improve the health and human rights of their constituencies, that are specifically informed and implemented by and for communities themselves and the organizations, groups and networks that represent them.
- Community-led organizations, groups and networks engaged in the AIDS response, whether formally or informally organized, are entities for which the majority of governance, leadership, staff, spokespeople, membership and volunteers, reflect and represent the experiences, perspectives, and voices of their constituencies and who have transparent mechanisms of accountability to their constituencies.

Community-led organizations, groups, and networks are self-determining and autonomous, and not influenced by government, commercial, or donor agendas.

Not all community-based organizations are community led



Multi-Stakeholder Task Team Recommendations: Monitoring Frameworks

- UNAIDS should apply the definitions in the development of the new monitoring framework for 2021 and beyond.
- Frameworks for measuring, monitoring, and reporting on community-led responses should:
 - capture activities led by communities most affected by HIV at national and subnational levels;
 - ✓ include process-level, output and impact indicators;
 - ensure inclusion of the diverse communities living with and disproportionately affected by HIV; and
 - ✓ be based on shorter, simplified and flexible reporting tools
- UNAIDS should take the lead in developing standards for community-led data to be recognized and validated for use in national reporting and GAM.



Multi-Stakeholder Task Team Recommendations: Inclusion

- Community-led AIDS responses are fundamentally by and for about populations who are extremely vulnerable in relation to HIV including adolescent girls and young women and key populations.
- Community-led AIDS responses must necessarily center on marginalized groups including persons with disabilities and young people.
- Governments, UN agencies and communities need to ensure that aging populations and rural communities are not excluded, as technological divides contribute to widening gaps in access to information and services.



Multi-Stakeholder Task Team Recommendations: Capacity-Building

- When rolling out the new monitoring framework, UNAIDS should ensure an accompanying programme of capacity-building and mentorship to enable and ensure high-quality application of monitoring tools that feed into the Global AIDS Monitoring (GAM) framework.
- A member emphasised strengthening technical and operational capacities of communities as well as supporting community empowerment, peer support and social cohesion as part of the response to HIV
- Prioritise empowerment and capacity building of community led organisations in the context of the AIDS response to support the HIV response at community level particularly in support for people living with HIV
- Establishing better systems for financing communityled organizations is required, as well as reinforcing the capacity of community-led organizations to mobilize resources



Multi-Stakeholder Task Team Recommendations: Good Practices in Domestic Funding for Community-Led Responses

- Core and project funding from governments to networks of people living with HIV and key populations for service delivery;
- Government funding for community-led organizations to organize capacitybuilding activities and meetings;
- Government funding of community-led organizations to develop and lead advocacy campaigns on the needs of vulnerable groups;
- Government provision of technical support to community-led organizations to ensure that they are capacitated to engage with stakeholders in international fora;
- Social contracting arrangements should recognize independence of community-led organizations and fairly pay communities for their expertise and work;
- Hiring of people living with HIV as government employees among qualified candidates, who join medical teams to provide counselling and referral support for people living with HIV
- Sustained political will to ensure that domestic funding successfully close gaps in support to community-led AIDS responses



Thank you

