What is a community-led organization?
Community-led organizations are led by the people who they serve and are primarily accountable to them. In the AIDS response, this includes organizations by and for people living with HIV or tuberculosis and organizations by and for people affected by HIV, including women, young people, gay men and other men who have sex with men, people who use drugs, prisoners, sex workers and transgender people.

Communities of people living with and affected by HIV have provided definitions as follows:

**A. Community-led organizations, groups, and networks**[^1], irrespective of their legal status, are entities for which the majority of governance, leadership, staff, spokespeople, membership and volunteers[^2], 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.

**B. Key population-led organizations and networks** are led by people living with HIV, female, male and transgender sex workers, gay men and other men who have sex with men, people who use drugs, and transgender people[^3]. Key populations share experiences of stigma, discrimination, criminalization, and violence and shoulder disproportionate HIV disease burden in all parts of the world.

Key population-led organizations and networks are entities whose governance, leadership, staff, spokespeople, members and volunteers reflect and represent the experiences, perspectives, and voices of their constituencies.

Key population-led organizations and networks and their expertise are anchored in our lived experiences, which determine our priorities. We speak for ourselves and are an intrinsic part of the global HIV response.

[^1]: Community-led organizations, groups, and networks
[^2]: irrespective of their legal status, are entities for which the majority of governance, leadership, staff, spokespeople, membership and volunteers,
[^3]: Key population-led organizations and networks are led by people living with HIV, female, male and transgender sex workers, gay men and other men who have sex with men, people who use drugs, and transgender people.
C. Community-led 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 responses are
determined by and respond to
the needs and aspirations of their
constituents. Community-led responses
include advocacy, campaigning and
holding decision-makers to account;
monitoring of policies, practices, and
service delivery; participatory research;
education and information sharing;
service delivery; capacity building, and
funding of community-led organizations,
groups, and networks. Community-led
responses can take place at global,
regional, national, subnational,
and grassroots levels, and can be
implemented virtually or in person.

Not all responses that take place in
communities are community-led.

D. Key Population-led responses
Key populations are primary actors in,
and intrinsic to, the global HIV response.
Our responses are transformational,
based on our priorities, needs and
rights. Key populations should be
included, on our own terms and with
consideration to varying social and
structural determinants, at all levels of
the global HIV response.

Key population responses aim to
strengthen the capacities of our commu-
nities and are committed to action,
irrespective of resource availability. Key
population communities are overlapping
and thus our responses strive to be inter-
sectional. Key populations choose our
own representative and how we engage
in HIV-, gender-, human rights-, and
development-related processes.

E. Women-led organizations and
responses
In 2020, communities of women living
with and affected by HIV will be meeting
to define “women-led organizations”
and “women-led responses”. Women
living with and affected by HIV, in all their
diversity, are a crucial part of the HIV
response and face multiple impacts of
gender discrimination and gender-based
violence that fuel the HIV epidemic.

Definitions of other community-led
organizations are under development
and this will document will continue to
be updated.

These definitions were created by:
GNP+ (Omar Syarif), ICW (Lillian
Mworeko), INPUD (Judy Chang), ITPC
(Wame Mosime), IRGT (Leigh Ann van
der Merwe), MPact (George Ayala),
NSWP (Ruth Morgan Thomas), TB
People (Timur Abdullaev), Y+ (Renatta
Langlais), the Communities Delegation
to the Global Fund on AIDS, TB and
Malaria board (Carlos Garcia de Leon)
and UNAIDS PCB NGO Delegation
(Alessandra Nilo, Aditia Taslim).

[1] Including collectives, coalitions, and other ways that
people self organize.
[2] These entities may structure themselves differently and
may not have all of these actors.
[3] This definition of key populations is not meant to
preclude the ways that people describe themselves,
including related to sexual orientation, gender, and
gender identity.