

ROBERT CARR FUND
ANNUAL REPORT
2022

**Stronger
networks**

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communities**

**ROBERT
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FUND** For civil
society
networks

2022 ANNUAL REPORT

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ACRONYMS AND ABBREVIATIONS

AGYW	Adolescent girls and young women
ART	Antiretroviral therapy
CEDAW	Committee on the Elimination of Discrimination Against Women
CCM	Country Coordinating Mechanism
CLM	Community-Led Monitoring
COP	PEPFAR Country Operational Plan
CND	UN Committee on Narcotic Drugs
CSO	Civil society organization
DVR	Dapivirine vaginal ring
EECA	Eastern Europe and Central Asia
FCDO	Foreign, Commonwealth & Development Office, the United Kingdom
GBMSM	Gay, Bisexual and Other Men who Have Sex with Men
GC7	Grant Cycle 7 (of the Global Fund)
ISP	Inadequately Served Population
LAC	Latin America and the Caribbean
LGBTIQ	Lesbian, Gay, Bisexual, Transgender, Intersex, and Queer/Questioning
MEL	Monitoring and evaluation for learning
MoFA	Ministry of Foreign Affairs, the Netherlands
Norad	Norwegian Agency for Development Cooperation
OAT	Opioid Agonist Therapy
PEPFAR	United States President's Emergency Plan for AIDS Relief
PrEP	Pre-exposure prophylaxis
RCF	Robert Carr Fund for civil society networks
SAG	UN Strategic Advisory Group on Drugs
SRHR	Sexual and reproductive health and rights
STI	Sexually-transmitted infection
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNODC	United Nations Office on Drugs and Crime
UNDP	United Nations Development Programme
USAID	United States Agency for International Development
WHO	World Health Organization

LIST OF GRANTEE NETWORKS LISTED IN THE REPORT

AfricaNPUD	African Network of People who Use Drugs	IDPC	International Drug Policy Consortium
APN+	Asia Pacific Network of People Living with HIV/AIDS	INPUD	International Network of People who Use Drugs
APT	Asia Pacific Transgender Network Foundation	ITPC	International Treatment Preparedness Coalition
ARASA	AIDS and Rights Alliance for Southern Africa	J+LAC	Red Regional de Adolescentes y Jóvenes Positivos
ASWA	African Sex Workers Alliance	LANPUD	Latin American Network of People Who Use Drugs
CAA+	Central Asian Association of People Living with HIV	MENA	Community Middle East and North Africa Network of People Living with HIV
CARAM	Asia Coordination of Action Research on AIDS and Mobility in Asia	MENAHRA	Middle East and North Africa Harm Reduction Association
CCABA	Coalition for Children Affected by AIDS	MENANPUD	Middle East and North Africa Network of People who Use Drugs
Coalition PLUS	Coalition Internationale Sida	MENA	Rosa MENA Rosa
CRN+	Caribbean Regional Network of People Living with HIV	MPact	MPact: Global Action for Gay Men's Health and Rights
CVC	Caribbean Vulnerable Communities	NAPUD	Network of Asian People who Use Drugs
EATHAN	East Africa Trans Health and Advocacy Network	NSWP	Global Network of Sex Work Projects
ECOM	Eurasian Coalition for Health, Rights, Gender, and Sexual Diversity	PATA	Paediatric AIDS Treatment for Africa
EHRA	Eurasian Harm Reduction Association	PREO	Prisoner Re-Integration & Empowerment Organization
EMRHP	Eurasian Movement for the Right to Health in Prisons	RedTraSex	Red de Mujeres Trabajadoras Sexuales de Latinoamérica y el Caribe
ENPUD	Eurasian Network of People who Use Drugs	SAfAIDS	Southern Africa AIDS Information Dissemination Service
EPLN	European Prison Litigation Network	SALC	Southern Africa Litigation Centre
EuroNPUD	European Network of People who Use Drugs	SWAN	Sex Workers Rights Advocacy Network in Central, Eastern Europe and Central Asia
EWNA	Eurasian Women's Network on AIDS	TGEU	Transgender Europe
GATE	Global Action for Trans* Equality	WHRIN	Women and Harm Reduction International Network
GAYLATINO	GAYLATINO	WRADA	Women in Response to HIV/AIDS and Drug Addiction
GNP+	Global Network of People Living with HIV	Y+	Global Global Network of Young People Living with HIV
HJN	HIV Justice Network	YouthLEAD	YouthLEAD
HLN	HIV Legal Network	Youth RISE	Youth RISE (Resources, Information, Support and Education)
HRI	Harm Reduction International		
HWB	Health Without Barriers		
ICW-AP	International Community of Women living with HIV Asia Pacific		
ICW-CA	International Community of Women living with HIV Central Africa		
ICW-EA	International Community of Women living with HIV East Africa		
ICW-SA	International Community of Women living with HIV Southern Africa		
ICW-Latina	Comunidad Internacional de Mujeres Viviendo con VIH/SIDA		



Association for the Promotion of Women's, Maternal, Child and Family Health (APROSAM), member of International Drug Policy Consortium, Support Don't Punish Global Day of Action event in San Pedro, Cote D'Ivoire.

ABOUT THIS REPORT

2022 kicked off the Robert Carr Fund's (RCF's) 2022–2024 grant cycle. The International Steering Committee approved a total of \$32.1 million in Core Funding grants to 24 grantees, which together make up a cohort of 72 individual regional and global networks in the HIV response. This is the largest grantee cohort funded by RCF since it was established in 2012.

This grant cycle also supports the highest number of consortia. The majority of RCF grantee-networks (64 out of 72) are funded through their participation in a consortium. This high uptake of a consortium model shows the value and promise of collective action, not only for accessing and sharing resources, but also in planning and implementing advocacy campaigns, mobilizing and engaging community, and supporting organizational growth and learning.

2022 was also a year of turbulence. Many networks were still managing major disruptions caused by COVID-19, even after most restrictions were lifted. The invasion of Ukraine in February 2022 has caused a humanitarian crisis and posed unprecedented challenges to the HIV response in the region, leading to deterioration of human rights and straining the operational capacities of civil society and community networks in the region. These and other challenges are discussed in more detail in the section on the Environment of 2022.

ABOUT DR. ROBERT CARR

The Robert Carr Fund is named in honor of Dr. Robert Carr, a scholar and activist who worked tirelessly for human rights and an end to HIV in his native Caribbean region and globally. Dr. Carr was vocal, honest and unapologetic in naming injustices that contribute to poor health and prevent access to health services. He was a powerful organizer and advocate for the central role of civil society and communities in the HIV response.



Dr. Robert Carr.

HOW TO READ THIS REPORT

The report summarizes key grantee results along the four RCF outcome areas:

1. Network Strength and Influence
2. Human Rights
3. Access to and Quality of Services
4. Resource Accountability in financing the HIV response for ISPs

Each of these outcome areas is measured by indicators that grantees report on annually. Together, these 11 indicators make up the RCF Monitoring for Evaluation and Learning (MEL) Framework (see Annex II).

CORE SUPPORT

RCF also asks grantees to reflect on how the RCF core support has enabled their work. We ask grantees to indicate which type of funding (activity or core funding) they used for each programmatic outcome area and how they used it, for which specific needs. The findings and reflections are described in the section below, Value of Core Funding.

LINKAGES WITH THE GLOBAL FUND

We also want to understand better how RCF funding supports grantees' engagement with the Global Fund to Fight AIDS, Tuberculosis and Malaria and contributes to programs supported by the Global Fund. The findings are discussed in Linkages to the Global Fund below.

HOW WE MEASURE RESULTS

RCF measures progress by asking all RCF-funded grantees to complete an Annual Survey. The Survey is structured along the four outcome areas. It asks grantees to reflect on the milestones that they have achieved during the reporting year, as well as the results or change their efforts have contributed to. In the first grant year, RCF also collects baseline or plans data by asking grantees to describe where they are starting from or what they plan to achieve. We collect baseline for the Network Strength and Influence outcome area, and plans for the Programmatic outcome areas.

This data enables RCF to track and understand grantee progress and setbacks throughout the three years of the grant cycle.

RCF understands that advocacy is not a linear process and that bringing about change often requires multi-year strategies and effort. While individual advocacy actions rarely automatically lead to change, every achieved milestone ultimately contributes. The Survey measures this by plotting grantees' progress along a continuum:

- FOUNDATIONAL STEPS: collecting evidence to inform advocacy efforts or identify advocacy priorities
- EARLY ACTIONS: developing and launching advocacy campaigns or strategies
- ADVANCED ACTIONS: continuing advocacy campaigns or strategies, and engaging in decision-making spaces to influence change
- ADVOCACY RESULTS: achieving the desired, quantifiable advocacy results, including legal or policy change, documented changes in service access or quality, and changes in funding availability or use.

At the start of each indicator section, grantee results are presented in a table along these four stages. The table also compares 2022 progress against the baseline and/or plans for the grant cycle, depending on the indicator. This shows progress and dynamics over the three year grant cycle.

NUMBER OF REPORTING NETWORKS

NETWORK STRENGTH AND INFLUENCE

The first outcome area, Network Strength and Influence, is mandatory, so all **72 individual RCF-funded networks reported on it in 2022.**

PROGRAMMATIC OUTCOMES

The three programmatic outcome areas (Human Rights, Access and Quality of Services, and Resource Accountability) are optional. This means that RCF grantees set their own priorities for their efforts and hence for what they report on. Some networks report on none¹ or one of the programmatic outcomes, while others report on all three.

At the start of the 2022–2024 funding cycle, we asked grantees about their plans for the three grant years, including which outcome areas they plan to prioritize. The number of networks that report on each of the programmatic indicators is based on their responses to this question.

And lastly, while the total number of funded networks is 72, some of them participate in two consortia. Since they do distinct work under different consortium arrangements, they report on it separately. This means, that for the programmatic outcomes **we receive 83 surveys instead of 72.**



African Sex Work Alliance, South African participants cheering their team during the 1st African Leadership Sex Worker Academy.

¹ For instance, if a network is nascent and prioritizes investing RCF support in its own organizational capacity instead of programmatic activities.

THE ENVIRONMENT OF 2022

The legal, social, economic, and geo-political environments in which RCF-funded networks operate in often impede their progress in improving the health, social inclusion, and well-being of inadequately served populations (ISPs) they serve. In 2022, networks continued to work in challenging environments that impacted their goals, advocacy strategies, and progress.

COVID-19 PANDEMIC

The COVID-19 pandemic left lasting impacts on the HIV response and on regional and global HIV networks, even after most restrictions were lifted. The pandemic's negative impacts are well documented, but it also had some positive effects. As engaging online became the norm, many networks had less travel costs and new opportunities opened up. However, many community advocates lacked access to the technology or data for online engagement. Some networks also reported that normalization of online meetings reduced the opportunities and spaces to reflect and address challenges face-to-face. **Network of Asian People who Use Drugs** reported that the pandemic-related restrictions disrupted the scaling up of harm reduction services for people who use drugs across Asia. But it also accelerated reforms for take-home opioid agonist therapy (OAT) medications (methadone and buprenorphine) in several countries following advocacy by national networks and community-led organizations.

WAR AND CONFLICT

The invasion of Ukraine in February 2022 sparked a humanitarian crisis and presented unprecedented challenges to civil society networks working in Ukraine and in neighboring countries. Along with displacing civilians, the conflict has disrupted access to HIV treatment, basic medical and social services, psychosocial and mental support, and has heightened vulnerability to HIV, Tuberculosis, and other infectious diseases. Those displaced have fled to other Eastern Europe and Central Asia (EECA) countries, where people living with HIV faced challenges in accessing antiretroviral therapy (ART).

RESTRICTIONS ON FINANCIAL SERVICES

In 2022, several networks in Asia, Africa, and the Middle East faced challenges in accessing essential financial services and resources, including restrictions on transferring money abroad. As a result, some networks could not continue to support activists and partner organizations in other countries.

In August 2022, the accounts of the **International Network of People who Use Drugs** were temporarily frozen posing threats to their financial and operational health. The network highlighted that “even a globally recognized organization of people who use drugs faces unfair treatment in accessing financial services. Many national networks of people who use drugs are still unable to open a bank account due to their organizational identity and name. This not only impedes their right to freedom of assembly and association, but also means losing out on already scarce funding opportunities.” Financial constraints also posed limitations for some networks in registration processes.

LIMITATIONS TO FREEDOM

The legal and policy frameworks for freedom of association remained a challenge in 2022, including the right of civil society and community networks to register and operate as non-profit or non-governmental entities without discrimination. During their registration process, the government asked the **African Network of People who Use Drugs** to change their name to “African Network *for* People who Use Drugs.” For the network, this indicated that “people who use drugs are still not recognized as people with agency and the right to freedom of assembly and association.” Other RCF-funded networks also reported a worsening legal environment for civil society in several countries.

Some ISP and civil society networks report working in environments where freedom of expression can be constrained by harassment from government and other influential entities. The **AIDS and Rights Alliance for Southern Africa** shared that while organizations of adolescent girls and young women (AGYW) are allowed to be registered in Eastern and Southern Africa, freedom of speech and the ability to organize remains a challenge due to restrictive policies and laws. **GAYLATINO** reported that community-based groups in Latin America and Caribbean continued to experience attacks to their freedom of expression from government officials or elected representatives, undermining their rights to health and wellbeing, housing, food and security, and education.

DENIAL OF RIGHTS

Many networks continued to work in countries where ISP rights were not protected by policy and/or legislation. Proliferation of so called anti-gay bills in several countries in East Africa contributed to increased surveillance, persecution, and vigilante violence against organizations and individuals perceived as being LGBTIQ or supportive of LGBTIQ rights, putting lives of activists and community members at risk. The **East Africa Trans Health and Advocacy Network** reported an increase in religious leaders and politicians “disapproving homosexuality” in most East African countries.

Laws in most or all countries in the Middle East and North Africa continue to criminalize drug use and prohibit people who use drugs from organizing into an association or NGO. Sex worker movement in several Southeast Asian countries has been under threat due to the large crack down on activists. There are several legal and policy restrictions in Sub-Saharan Africa that constrict the agency of young people, for example laws that restrict age of consent for sex also restrict access to comprehensive sexuality and HIV education and services and criminalize same-sex practices, young sex workers, and youth who use drugs.

LIMITED ACCESS TO SERVICES

Throughout the regions that RCF-funded networks serve, ISPs continue to experience insufficient access to rights-based, quality HIV services. In many places, people living with HIV sometimes have to travel long distances to receive ART and other treatment, while often facing stigma and discrimination from service providers.

The **African Network of People who Use Drugs** reported that only 16 of 44 countries in West, Central, Eastern, and Southern Africa provide needle and syringe programs and only 12 provide OAT. In Latin America and the Caribbean, stigma, discrimination, and criminalization of people who use drugs have created a challenging human rights environment.

The **Eurasian Network of People who Use Drugs** reported a decline in the quality of OAT produced domestically in Ukraine, as cost was prioritized over effectiveness. Poor quality medication caused some patients to experience withdrawal symptoms and turn to illicit markets for relief, leading to an increase in overdoses and heightened risk of blood-borne infections, and other health problems. Medication stockouts in several countries in Eastern Europe and Central Asia further threatened access to OAT.

POSITIVE DEVELOPMENTS

There were also positive developments in 2022. The **Women in Response to HIV/AIDS and Drug Addiction** shared that “the ability to register as a community based non-profit organization has allowed us the freedom to organize and to encourage the formation of other drug user groups for young women who use drugs.” The **Eurasian Harm Reduction Association** reported an increase in recognition of harm reduction services, particularly in the context of the COVID-19 pandemic, which has led to increased funding and support for harm reduction programs from international organizations.



Eurasian Harm Reduction Association, Practical guide on Quality Harm Reduction Services.

2022 RESULTS SUMMARY

2022 is the first year of RCF's 2022–2024 grant cycle. For civil society and community networks new to RCF, this was an important year for laying the foundations for their work over the next three years, from developing advocacy strategies and building partnerships, to making sure they have the organizational systems in place to manage this work.

For returning grantees, this long-term RCF support is a critical source of stability and opportunity to take their initiatives further, despite — and often especially during — times of crisis.

NEW MONITORING AND EVALUATION FOR LEARNING (MEL) METHODOLOGY

Grantee results presented in this report are based on the Annual Survey that all RCF-funded networks complete at the end of each grant year. In the survey, they report on their activities, progress, and results achieved with RCF support. While the MEL framework itself remains unchanged, the Annual Survey was significantly revised and updated in 2022, to meet the demands of collecting and processing data for the largest cohort of grantees in the RCF history. As such, this report is a “test drive” of the new methodology and RCF will continue evaluating and refining its MEL process throughout the grant cycle, to make sure we collect accurate data in a process that is user-friendly and intuitive for the grantees.

This section summarizes the main 2022 results across the whole grantee cohort. The subsequent sections discuss these in more detail.

VALUE OF CORE FUNDING

Main findings

- Up to 88% of networks relied on RCF core funding to implement programmatic activities, most frequently by paying salaries of trained staff responsible for implementation.
- This high use of core funding for programmatic outcomes is consistent across the grantee cohorts and all years that RCF collected this data, affirming the vital value of flexible core support of financial systems, governance, and strategic planning and fundraising.

RCF provides long-term, flexible core funding, as mandated by our Theory of Change. Since 2019, we have been asking grantees to reflect on the value of core funding for their organizations and for their ability to make progress towards their programmatic goals.

CORE FUNDING & PROGRAMMATIC OUTCOMES

2022 grantee data is consistent with previous years: core funding is vital in supporting ISP networks in achieving their programmatic outcomes. Depending on an outcome area, up to 88% of networks relied on core funding to implement programmatic activities, most frequently by paying the salaries of expert staff involved in implementation.

Core funding is particularly valuable for community-led networks that have been historically underfunded, such as networks led by transgender people, sex workers, people who use drugs, and young people from key populations. These communities face markedly high barriers to accessing funding and core funding in particular, and RCF is a critical source of core support.

CORE FUNDING & ORGANIZATIONAL HEALTH.

Data shows that core funding is also vital for networks in strengthening their organizational systems, including to meet donor requirements and qualify for new funding.

LINKAGES TO THE GLOBAL FUND

Main findings

- RCF grantees used RCF funding to contribute to core costs of the Global Fund supported programs, including staff salaries, travel, equipment, and office space.
- RCF grantees also contributed to Global Fund supported programs by developing tools, mobilizing partnerships, and using community-generated data to engage with Global Fund processes more effectively.

2022 was the first year that RCF started measuring linkages with the Global Fund more systematically, by including dedicated questions in the Annual Survey. We will continue refining these questions, to ensure accuracy and relevance of collected data.

In 2022, RCF grantees used RCF funding to engage with the Global Fund in a variety of ways.

Examples include:

- **Supporting communities in engaging in Global Fund processes**, e.g. by making sure communities were involved in COVID-19 Response Mechanism processes at the country level (e.g., Global Network of Sex Work Projects, Youth LEAD)
- **Conducting community-led documentation to inform Global Fund programming** (e.g., Eurasian Women's Network on AIDS)
- **Complementing implementation costs of activities supported by the Global Fund** by developing tools, mobilizing partnerships, and in other ways (e.g. Women in Response to HIV/AIDS and Drug Addiction)
- **Contributing to core costs of carrying out Global Fund-funded activities**, particularly to staff salaries, travel, equipment, and office space (e.g. International Community of Women Living with HIV in Eastern Africa, Latin American Network of People Who Use Drugs, Global Action of Trans* Equality, and others)
- **Advocate for the replenishment of the Global Fund** (e.g., Youth LEAD, Coalition PLUS).

RCF funding is complementary to many Global Fund-funded initiatives and contributes to their implementation.

NETWORK STRENGTH AND INFLUENCE

Main findings

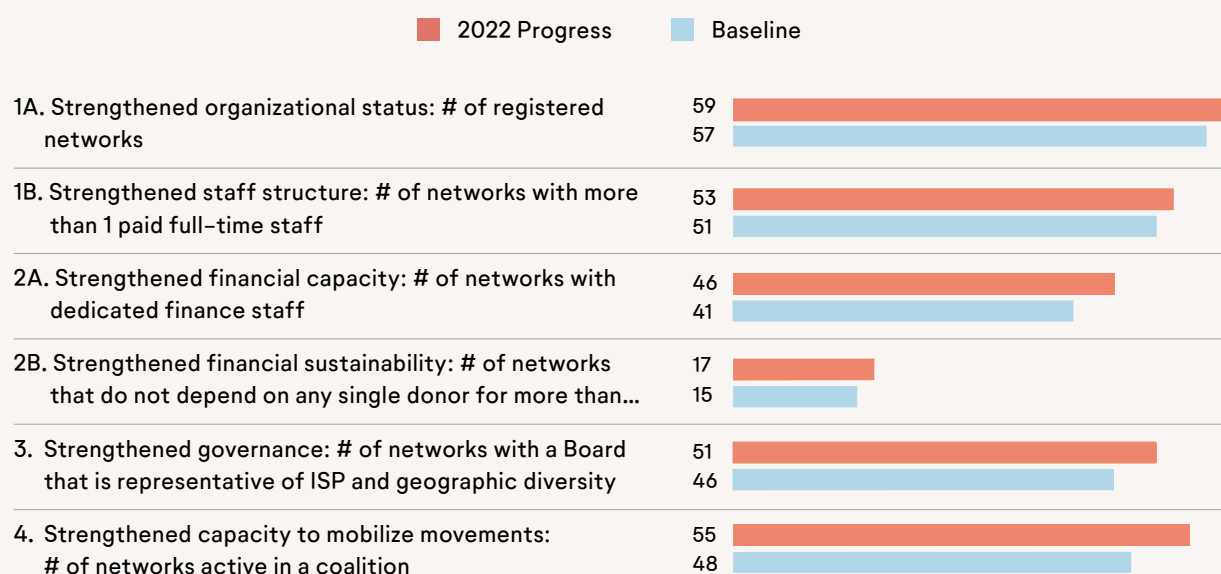
- All 72 RCF-funded networks made progress on at least one network strengthening indicator.
- Main gains are in the areas of strengthening governance systems, strengthened financial capacity and sustainability, and coalition building.
- At cohort level, incremental progress is indicative of inadequate access to long-term core funding for ISP networks in the HIV response.

In line with RCF's Theory of Change, RCF requires all 72 funded networks to report on their progress in strengthening their organizational and advocacy capacities. This progress does not always imply change: achieving and maintaining a certain milestone is often a sign of desired stability.

The chart below shows some of the key areas of progress as compared to baseline. This is a selective sample. A more detailed overview, with grantee highlights, is presented in the sections below.

NETWORK STRENGTH AND INFLUENCE

2022–2024 baseline and 2022 progress



While all of the RCF-funded networks made progress on at least one indicator, none have reached every milestone. This is to be expected, as organizations are dynamic, and as they gain in some areas, new challenges and demands present themselves. This is also indicative of a chronic lack of access to core funding and other support for organizational capacity building and development, especially for smaller and less established networks representing the most excluded communities.

NOTABLE FINDINGS:

- **Basic organizational status:**

Most of the 72 RCF-funded networks (59 or 82%) were registered in 2022. However, some networks continue facing challenges in obtaining their registration, particularly those representing people who use drugs and other criminalized communities.

- **Core Staff Structure:**

While most of the 72 RCF-funded networks (53 or 74%) had more than 1 paid full-time staff member, only 44 networks (61%) had a core team of full-time team in place to implement the scope of work for at least 2 years, highlighting the need for more core funding for ISP networks in the HIV response.

- **Financial capacity and accountability:**

By the end of 2022, RCF-funded networks had made incremental progress on financial capacity and accountability, e.g. by hiring dedicated financial staff or ensuring their Board Treasurer reviews financial reports.

- **Financial sustainability:**

While most of the 72 RCF-funded networks have more than one source of funding (63 or 88%), only 17 could be considered financially secure, with no single donor accounting for more than 30% of their overall funding. This shows that funding security remains a serious concern for many ISP networks.

- **Governance systems:**

RCF-funded networks made noticeable progress in ensuring their Boards are engaged and are representative of their constituencies in their ISP and geographic diversity.

- **Collaborative action and coalition building:**

One of the most notable results is the strong commitment to collaborative effort, either through joint advocacy campaigns, coalitions that unite movement beyond one issue or ISP, and other partnerships. Most RCF grantees (55 or 76%) have engaged in a collective action to advance their goals, an increase from baseline.

PROGRAMMATIC OUTCOMES

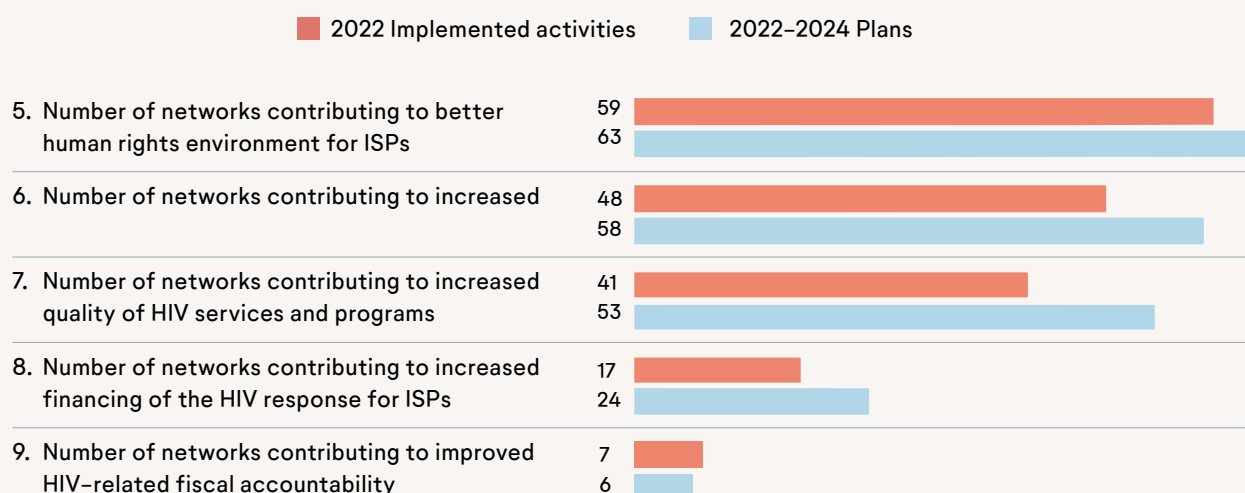
Main findings

- Human Rights was the most important outcome area in 2022: together, 59 networks carried out 216 activities to improve the human rights for ISPs.
- Together, RCF-funded networks carried out 176 activities to improve access to and quality of diverse services for ISPs.
- Advocacy for increased and more accountable financing of the HIV response for ISPs remains the smallest outcome area (consistent with previous grant cycle), reflecting the challenging funding climate for the HIV response to ISPs.

The five Programmatic Outcomes describe RCF grantees progress in advancing the human rights of ISPs, improving access to and quality of HIV services, and advocating for increased and more accountable financing of the HIV response for ISPs. While we collect annual data on grantees' gains in these areas, RCF recognizes that advocacy is not a linear process and is often cyclical in nature. RCF MEL framework reflects that.

The chart below shows the number of networks that carried out at least one activity towards a programmatic outcome as compared to the plans at baseline.

PROGRAMMATIC OUTCOMES 2022-2024 PLANS AND 2022 PROGRESS



NOTABLE FINDINGS:

- Human Rights:** 59 of 63 reporting networks carried out at least 216 activities towards this outcome in 2022. 47 networks (75%) documented evidence for advocacy, 36 networks (57%) carried out advocacy campaigns, and 14 networks (22%) supported strategic litigation. 7 of them saw their strategic litigation result in legal or policy change, and 17 networks' advocacy contributed to a better human rights law or policy for ISPs.
- Quality of Services:** 41 of 53 (77%) reporting networks carried out at least 81 activities, including amplifying breakthrough strategies, tools, and comprehensive service delivery models; improving harm reduction services; decreasing stigma by healthcare and prison workers; and improving health services for migrant workers, among others. 14 (26%) networks reported positive change linked to their advocacy.
- Access to Services:** 48 of 58 reporting networks (83%) carried out at least 95 activities to improve access to HIV testing, treatment, and counseling services including to pre-exposure prophylaxis (PrEP), ART, OAT, harm-reduction services, and to gender affirming care among others. 22 networks reported improved access to and retention in services linked to their advocacy.
- Resource Accountability:** 24 networks together carried out at least 37 activities in advocating for increased commitments and allocations of funding for ISPs in the HIV response. Six networks ultimately saw their advocacy contribute to increased funding commitments.



Asia Pacific Transgender Network's team meeting in Nepal.

VALUE OF CORE FUNDING

The RCF is unique in its explicit mandate to provide long-term, flexible core funding to regional and global civil society and community-led networks in the HIV response. This mandate is central to all RCF grantmaking.

Every year, RCF asks grantees to reflect on the value of core funding for their work, particularly how access to core funding contributed to their programmatic outcomes and operations. They also reflect on how they used their RCF core support, for which specific needs. The RCF uses this data to inform future grantmaking.

HOW GRANTEES USED RCF CORE SUPPORT IN 2022

Core funding is vital for programmatic outcomes:

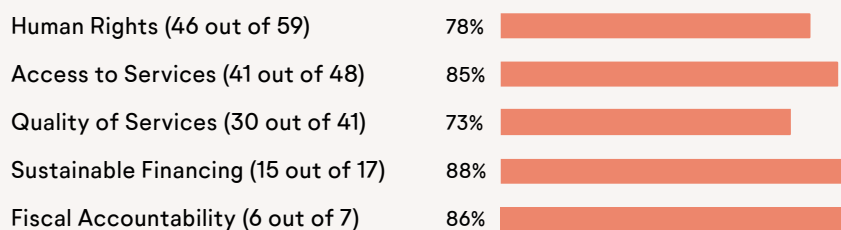
- Overwhelming majority (60 of 83 implementing networks or 72%) used RCF core funding for at least one of their programmatic activities.
- 80% (48 out of 60 networks) used core funding to pay staff responsible for programmatic activities.
- Grantees also used core funding to support basic operations, complement other funding sources, and access new funding.

TO SUPPORT PROGRAMS

RCF core funding is vital in contributing to the programmatic outcomes of the networks it supports. While a relatively small share of RCF grantees engaged in Resource Accountability advocacy, almost all networks relied on core support for this work. Advocacy for more and better HIV funding is often highly technical and requires expert staff and experienced community leadership. Core funding supports the costs of retaining and training these experts.

VALUE OF CORE FUNDING

■ % of networks who relied on core funding for programmatic work

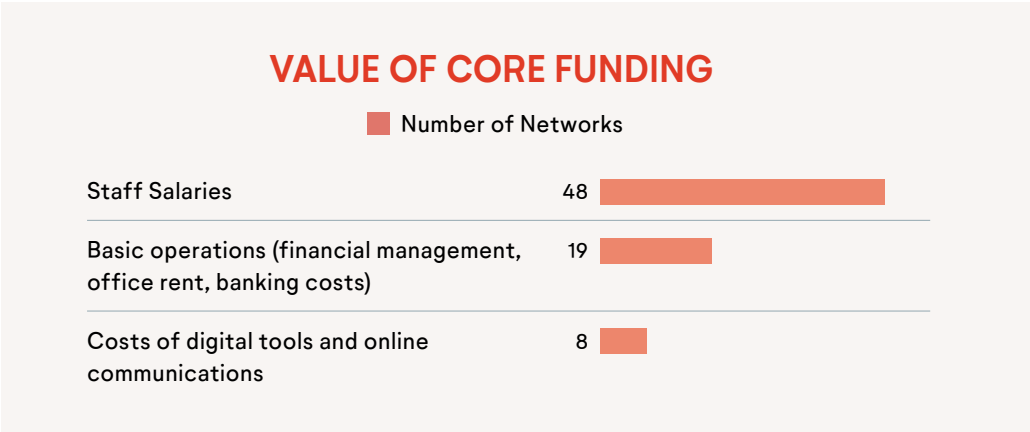


Eurasian Women’s Network on AIDS used RCF core funding to expand access to mental health services for women from ISP communities. RCF core funding allowed Eurasian Harm Reduction Association to commission a position paper on the Quality of Harm Reduction Services to support their advocacy:

“Without the RCF funding, it is likely that the scope and impact of these activities would have been limited, and the Position [paper] would not have been as effective in promoting improved harm reduction services across the region.”

Eurasian Harm Reduction Association

TO PAY STAFF RESPONSIBLE FOR ACTIVITIES



80% of networks who used RCF core funding (48 of 60), paid the salaries of staff member(s) responsible for at least one of their 2022 activities. Most programmatic activities rely on the networks’ ability to retain experienced and committed staff.

The high reliance on RCF core funding to pay for salaries highlights the persistent gap in HIV funding streams, that often prioritize activity costs. For example, RCF core funding supported the part of the salary of the Eurasian Coalition for Health, Rights, Gender, and Sexual Diversity’s Technical Assistance Coordinator:

“Without the support of the RCF grant, the continuous operation of the technical assistance system would not be possible.”

Eurasian Coalition for Health, Rights, Gender, and Sexual Diversity

TO SUPPORT BASIC OPERATIONS

Nearly one-third of networks (19 of 60 networks or 32%) who used core funding for at least one activity paid for basic operations, including financial management, office rent, and banking costs. Along with supporting their Support Don't Punish and World AIDS Day campaigns, RCF core funding allowed **Middle East and North Africa Network of People who Use Drugs** to pay for stationery, laptops, communication tools, internet, and other daily expenses for its representatives to perform their duties:

“MENANPUD could not have run at the national and regional levels without the financial support from the core fund of the RCF grant.”

Middle East and North Africa Network of People who Use Drugs

Without RCF core funding, networks such as the **International Community of Women living with HIV Asia Pacific** (ICW-AP) would probably have had to shut down.

TO FILL GAPS IN OR COMPLEMENT OTHER FUNDING SOURCES

Critically, RCF core funding complements and adds value to the funding that networks have from other sources, including from the Global Fund, bilateral agencies, and UN partners. The **International Community of Women living with HIV Eastern Africa** highlighted how RCF core funding allows them to build their capacity to deliver services where other funders might place limits. **Eurasian Women's Network on AIDS** used RCF core funding to submit a shadow report to UN Committee on Elimination of Discrimination Against Women (CEDAW), complementing a different report they submitted with support from the Global Fund.

TO ACCESS OTHER FUNDING

Additionally, RCF core funding supports networks to be eligible to other funding opportunities. For example, it enabled **Eurasian Network of People who Use Drugs** to strengthen their governance and management systems and improve their transparency and accountability. This allowed the network to be eligible to apply for the Global Fund's multi-country grant (SOS 2.0).

LINKAGES TO THE GLOBAL FUND

The RCF's core funding complements support civil society and community-led networks receive from the Global Fund. Many RCF grantees also include the Global Fund in their advocacy or engage with it in other ways.

In 2022, 18 RCF-funded networks reported receiving funding from the Global Fund and 19 networks reported that the Global Fund was a focus of their advocacy. The RCF measures complementarity with the Global Fund by asking grantees to reflect on how RCF support contributed to the implementation of work co-funded by the Global Fund.

HOW GRANTEES USE RCF SUPPORT FOR THEIR WORK WITH THE GLOBAL FUND:

- Take preparatory steps to become eligible for and/or to apply for the Global Fund grants
- Support communities in engaging in Global Fund processes
- Conduct community-led documentation to inform Global Fund programming
- Complement costs of implementing activities supported by the Global Fund
- Contribute to core costs of carrying out Global Fund-funded activities
- Advocate for the replenishment of the Global Fund.

Linkages to the work supported by the Global Fund extend across all programmatic outcome areas, including Human Rights, Access to and Quality of Services, and Resource Accountability.

HELP COMMUNITIES ENGAGE IN THE GLOBAL FUND PROCESSES

RCF-funded networks used RCF funding to support their communities to engage with the Global Fund processes more effectively. For instance, **Global Network of Sex Work Projects** developed tools to help their members in six countries document lived experiences of sex workers and understand and engage in Global Fund processes.

Similarly, **International Network of People who Use Drugs** developed a [guide for people who use drugs to better understand Country Coordinating Mechanism processes](#), while **Global Network of Young People Living with HIV** supported the engagement of adolescent girls and young key populations in Global Fund processes and Country Coordination Mechanisms in East and Southern Africa.

COMMUNITY-LED DOCUMENTATION TO INFORM THE GLOBAL FUND PROGRAMMING

RCF grantees supported community-led documentation, using the findings to understand whether and how the Global Fund funding is meeting the needs of communities on the ground. **Sex Workers Rights Advocacy Network in Central, Eastern Europe and Central Asia (SWAN)** supported its members to collect data on the quality of services sex workers receive from programs supported with the Global Fund grants. The SWAN and its members are now using the community monitoring data to engage in budget advocacy and advocate for more resources for programs and services that better meet the needs of sex workers.

Eurasian Women's Network on AIDS developed a community-led research tool on sexual and reproductive rights (SRHR) of women living with HIV. In 2022, the Global Fund supported the use of the tool for community-led research for women living with HIV in Serbia and Georgia and using the findings for the national stakeholder consultations.

CONTRIBUTE TO GLOBAL FUND PROGRAMMING

RCF grantees used funding to support implementation of the Global Fund-funded activities, by developing tools, mobilizing partnerships, and in other ways.

For example, **Paediatric AIDS Treatment for Africa (PATA)** and **Global Network of Young People Living with HIV** used RCF funding to develop a capacity assessment tool for community organizations that do not yet meet the requirements to receive Global Fund funding. With support from the Global Fund's Community, Rights and Gender Strategic Initiative, PATA has used the tool to pilot targeted trainings of community-based organizations in East Africa on governance, planning, finance, and other critical areas.

RCF grantees also used RCF funding to expand their efforts with the Global Fund support to new countries, regions, or communities. For example, the **Eurasian Women's Network on AIDS** worked with partners to highlight concerns faced by women living with HIV in the region in two alternative reports to the UN CEDAW Committee, one developed with the Global Fund support and another funded by RCF.

CONTRIBUTE TO CORE COSTS OF PROGRAMS SUPPORTED BY THE GLOBAL FUND

The most common way RCF core support is linked with the Global Fund is through critical contributions to core costs, particularly staff salaries, travel, equipment, and office space. Without these contributions, RCF grantees report that they would not have been able to implement Global Fund-supported activities in the same way or at all.

The RCF funding supported administrative costs and staff salaries of the **International Community of Women Living with HIV Eastern Africa** that implemented community-led monitoring of HIV services for women living with HIV with the Global Fund support, resulting in fewer drug stockouts.

Similarly, **Latin American Network of People Who Use Drugs** used RCF funding for salaries of staff involved in strengthening of the network's governance and building capacity of its members to implement activities with the Global Fund support, including peer mentoring and developing a Legal Assessment Tool to be applied in 10 countries in 2023–2024. Without RCF core support, LANPUD would not have been able to successfully implement their part of a Global Fund multi-country grant.

Other grantees who reported that RCF contributions to their core costs supported their Global Fund grant are the **Eurasian Harm Reduction Association**, **International Community of Women Living with HIV Eastern Africa**, **International Community of Women Living with HIV Asia Pacific**, **Middle East and North Africa Network of People Who Use Drugs**, **MENA Rosa**, **Latin American Network of People Who Use Drugs**, **Global Action of Trans* Equality**, and the **Eurasian Coalition for Health, Rights, Gender and Sexual Diversity**.

ADVOCATE FOR THE GLOBAL FUND REPLENISHMENT

RCF grantees traditionally play a role in advocating with donor governments to continue contributing to the Global Fund. For instance, **YouthLEAD** mobilized the community of young people to support the Seventh Replenishment effort. As part of their campaign, they developed a youth statement that was signed by 91 organizations from across the globe.



Eurasian Coalition for Health, Rights, Gender and Sexual Diversity, Young Queer Bloggers' QUEERaton for LGBT youth from Central Asia and Eastern Europe.

NETWORK STRENGTH AND INFLUENCE

NETWORK STRENGTH AND INFLUENCE	Organizational Capacity	1A. Number of networks with strengthened organizational status
		1B. Number of networks with strengthened core staff structure
		2A. Number of networks showing strengthened financial capacity and accountability
		2B. Number of networks showing strengthened financial sustainability
		3. Number of networks more representative of their constituencies and more democratically governed
	Advocacy Capacity	4. Number of networks showing strengthened influence and capacity to unite and mobilize movements

HOW MANY NETWORKS REPORT ON THESE INDICATORS

Network Strength and Influence is a **mandatory** indicator. All RCF-funded networks report on it. In 2022, it was **72 networks**.

WHAT THESE INDICATORS MEASURE

RCF's Theory of Change mandates the Fund to provide core funding to civil society and community-led networks to strengthen them institutionally. When HIV networks have a strong and stable foundation to support their advocacy, they and the communities they represent are likely to have more influence over the human rights and HIV issues that affect them. RCF's Theory of Change is described in more detail in Annex II.

These six indicators track grantees' progress in building stronger organizations: networks' basic organizational status, staffing structure, capacity to manage funds accountably, financial sustainability, and strength of their governance.

They also measure how grantees build their advocacy capacities, e.g. by developing advocacy strategies, building and engaging in partnerships and coalitions, and gaining access to decision making spaces to represent their communities.

HOW RCF MEASURES PROGRESS

At the start of the funding cycle, RCF collected baseline data, documenting where the grantees started from. At the end of each grant year, RCF asks grantees about their progress. This report represents the results for 2022, the first year of the 2022–2024 grant cycle, when grantees take the first steps towards their organizational goals.

RCF also recognized that “strengthening” does not always imply growth or change. Once grantees achieve certain milestones, they only need to maintain those gains. Stability should not be seen as stagnation, a key lesson from the initial deployment of the RCF MEL framework in 2017–2018.

OUTCOME INDICATOR 1A

STRENGTHENED ORGANIZATIONAL STATUS

Outcome: Institutionally Stronger ISP and Civil Society Networks and Consortia

This indicator measures networks’ basic organizational status. RCF looks at how many networks were registered at the baseline, how many operated with a fiscal host, and how many have changed their status during the grant cycle. RCF also looks at plans and measures progress annually against those plans.

IN 2022, 57 of 72 (79%) RCF-funded networks were registered during the whole year. 10 networks planned to obtain registration and 2 networks became newly registered, while 29 networks operated with a fiscal host.

All 72 (100%) individual networks report on this indicator. The table below shows their progress.

Progress to Strengthen Organizational Status		Baseline		2022 progress		2023 progress	2024 progress	Cumulative for 2022–2024
		# of Networks	% of 72 Reporting Networks	# of Networks	% of 72 Reporting Networks			
Foundational & Early Action	Network operates with a fiscal host	29	40%	29	40%			
Advanced Action	Network is in the process of registering			6	8%			
Results	Network is registered	57	79%	59	82%			

This indicator measures the networks’ basic organizational status, e.g. being registered or working with a fiscal host. Legally registered networks can operate independently, including hiring staff and managing funding. Nascent networks with limited operational capacity often choose to operate with a fiscal host, usually a more established organization who helps them with financial management and other key functions.

Networks can also opt to work with a fiscal host for other reasons. For instance, legal restrictions in some contexts make it difficult for civil society organizations (CSOs) to register and to operate. This is especially true for networks representing marginalized and criminalized communities, such as people who use drugs or LGBTIQ people in some contexts. Ultimately, it is up to the network itself to decide what works best for its specific needs and context. Understanding the organizational status helps understand the operational context of a network.

REGISTRATION STATUS IN 2022

The environmental context in which RCF-funded networks operate may present a host of challenges. For some, this means registering in another country due to war in a country they are based in. For others it may mean changing their registration from one entity to another to easily operate as a global network. As the funding cycle began, 10 networks planned to register during the 2022–2024 funding period.

GRANTEE HIGHLIGHT

THE AFRICAN NETWORK OF PEOPLE WHO USE DRUGS (AfricaNPUD) noted that their registration will “allow for the amplification of voice and visibility of people who use drugs. It will enable and legitimate our advocacy and evidence-generation [and] help us mobilize funds”. This shows the importance of network’s registration in strengthening its work.

Overall, nearly four-fifths (57 of 72 networks or 79%) of networks funded in 2022 were registered all year as of December 31, 2022.

GRANTEE HIGHLIGHT

YOUTH RISE noted its registration status as among its greatest achievements to strengthen its network by contributing to the network’s ability “to act more freely and be able to support our members' advocacy activities throughout the regions in a more independent way and at a faster pace”.

GRANTEE HIGHLIGHT

Two networks, the **EURASIAN MOVEMENT FOR THE RIGHT TO HEALTH IN PRISONS** (EMRHP) and the **EUROPEAN NETWORK OF PEOPLE WHO USE DRUGS**, gained registration in 2022. With the support of RCF funding, the EMRHP gained registration in a different country in response to the ongoing war and recognized this as its “most important achievement of 2022”.

As the 2022 grant year ended, six networks were in the process of registering.

OPERATING WITH A FISCAL HOST

For some networks, a fiscal host arrangement can offer needed stability and support, especially for less established networks or networks operating in challenging context. While a relationship with a fiscal host may be the right option for a network, it is often costly. Many networks prioritize independent operations as they mature. In 2022, more than one-quarter of all networks (29 of 72 networks or 40%) reported that they had a fiscal host.

OUTCOME INDICATOR 1B

STRENGTHENED CORE STAFF STRUCTURE

Outcome: Institutionally Stronger ISP and Civil Society Networks and Consortia

Ability to hire and retain knowledgeable and experienced staff ensures programs get implemented and progress made. RCF measures how many networks rely on volunteer work, how many have full-time staff, and the overall stability of staffing structure during the grant cycle.

All 72 (100%) individual networks report on this indicator. The table below shows their progress.

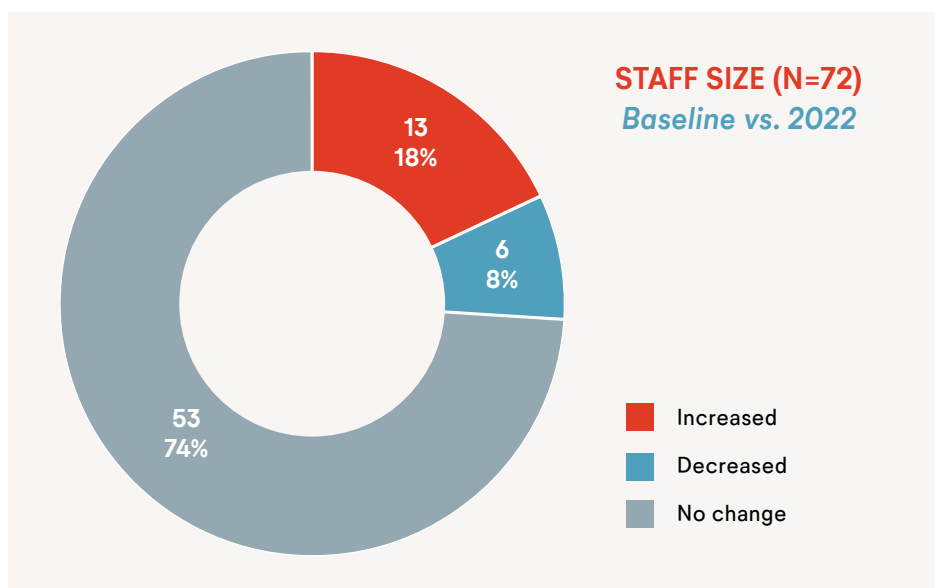
IN 2022, 44 (61%) networks had a core team of full-time staff in place. 18 (25%) networks planned to expand their staffing structure during the 2022–2024 funding cycle, and 13 (18%) networks did so in 2022.

Progress to Strengthen Staff Structure		Baseline		2022 progress		2023 progress	2024 progress	Cumulative for 2022–2024
		# of Networks	% of 72 Reporting Networks	# of Networks	% of 72 Reporting Networks			
Foundational	Network has only volunteers to carry out a defined scope of work and has no paid staff members	11	15%	7	10%			
Early action	Network has one paid staff member and volunteers to carry out a defined scope of work	10	14%	12	17%			
Advanced action	Network has more than one paid staff member and may have volunteers to carry out a defined scope of work	51	71%	53	74%			
Results	Network has a core team of full-time paid staff to carry out scope of work for at least 2 years	NA	NA	44	61%			

A strengthened core staff structure demonstrates a network’s capacity to conduct its work. On the ground, staff structure varies from one network to another. However, networks operating at the foundational level often only have volunteers to carry out a defined scope of work and more established networks have a core team of full-time paid staff with experience and expertise to carry out activities to achieve their strategic goals. This indicator measures a network’s capacity by assessing its staffing structure.

STAFFING

Staff size throughout the 2022 grant year saw a slight uptick and aligned with plans at baseline, with 65 networks reporting to have at least 1 full-time equivalent staff member by the end of the first grant year. Staff size at nearly three-fourths (53 of 72 networks or 74%) stayed the same throughout the 2022 grant year and 13 networks (18%) expanded their staff size during the 2022 grant year.



GRANTEE HIGHLIGHT

GLOBAL NETWORK OF YOUNG PEOPLE LIVING WITH HIV improved its operational functions and expanded its staff work to new regions and towards new actions and advocacy strategies internationally.

CORE TEAM

More than two-fifths (44 networks or 61.1%) reported to have a core team of full-time paid staff to carry out their key activities for at least 2 years. Core teams consisted of at least 2 full-time paid staff and had an average of 5 staff.



Red Regional de Adolescentes y Jóvenes Positivos, Workshop on emotional support for young people with HIV.

OUTCOME INDICATOR 2A

STRENGTHENED FINANCIAL CAPACITY AND ACCOUNTABILITY

Outcome: Institutionally Stronger ISP and Civil Society Networks

This indicator measures networks' financial capacity and accountability in managing its financial resources, e.g. by having dedicated financial staff, having the Board monitor financial reports, and conducting independent financial audits.

All 72 (100%) individual networks report on this indicator. The table below shows their progress.

IN 2022, the vast majority of networks (59 or 82%) had their Board treasurer review their financial reports, 46 network (64%) had a dedicated finance staff member, and 41 networks (57%) conducted regular financial audits.

Progress to Strengthen Financial Capacity and Accountability		Baseline		2022 progress		2023 progress	2024 progress	Cumulative for 2022–2024
		# of Networks	% of 72 Reporting Networks	# of Networks	% of 72 Reporting Networks			
Foundational	Network has a fiscal host which manages accounting	29	40%	29	40%			
Early action	Network has its own accounting system			54	75%			
Advanced action	Board Treasurer regularly monitors financial reports	58	81%	59	82%			
	Network has at least one paid dedicated finance staff member to manage accounting	41	57%	46	64%			
Results	Network conducts its own regular organizational and project audits	49	68%	41	57%			

The ability to manage its financial resources accountably and transparently is vital to ensuring that a network can continue to operate and conduct its work in a sustainable manner. Stronger financial systems enable networks to effectively allocate their financial resources, while meeting their funders' requirements related to financial management. This indicator measures a networks' capacity to effectively manage funding and resources.

FINANCIAL CAPACITY

Having an independent accounting system or having at least one paid dedicated finance staff member can demonstrate stronger capacity to manage funding. Three-quarters of all networks (54 of 72 or 75%) have their own accounting system.

GRANTEE HIGHLIGHT

As a legally registered entity with fiscal independence, **YOUTH RISE** has upgraded their financial management system and procedures. This enabled them to save money that they would otherwise use for a fiscal host. Instead, the saved funds supported their advocacy activities.

Nearly two-thirds of networks (46 of 72 networks or 64%) had at least one paid dedicated finance staff member to oversee the network's financial management.

GRANTEE HIGHLIGHT

After securing registration, **EURASIAN NETWORK OF PEOPLE WHO USE DRUGS** employed a full-time finance officer and put processes in place to strengthen their financial management. In 2022, **GLOBAL NETWORK OF YOUNG PEOPLE LIVING WITH HIV** hired a financial officer to advance their financial capacity.

RCF recognizes that some networks may have a fiscal host that manages their accounting and acknowledges this also demonstrates financial capacity. In 2022, two-fifths of the networks (29 or 40%) had a fiscal host manage their accounting. While this did not change since baseline, 11 of these networks (38%) reported plans to shift from having a fiscal host to being independently responsible for their accounting during the 2022–2024 funding cycle, showing aspirations to manage their resources independently in the coming years.

FINANCIAL ACCOUNTABILITY

Having a Board Treasurer who regularly monitors financial reports or conducts its own regular organizational and project audits contributes to financial accountability. More than four-fifths of all networks (59 of 72 networks or 82%) had a Board Treasurer who regularly monitors financial reports in 2022. This demonstrates that the majority of RCF-funded networks have financial oversight as part of their governance and illustrates their ability to manage funding.

GRANTEE HIGHLIGHT

In 2022, the **INTERNATIONAL COMMUNITY OF WOMEN LIVING WITH HIV SOUTHERN AFRICA** carried out assessments of its governance and financial management capacities and developed an action plan with specific implementation timelines. **MIDDLE EAST AND NORTH AFRICA HARM REDUCTION ASSOCIATION** and **GLOBAL NETWORK OF YOUNG PEOPLE LIVING WITH HIV** took similar approaches of engaging with their governance bodies to strengthen operational capacity and discussing the strategy's priority areas.

RCF encourages networks to conduct organizational audits. In 2022, more than half of all networks (41 or 57%) conducted their own regular organizational and project audits.

GRANTEE HIGHLIGHT

As a result of the improvements made in their financial capacity, including hiring a financial officer, **GLOBAL NETWORK OF YOUNG PEOPLE LIVING WITH HIV** carried out audits of its different programs.

OUTCOME INDICATOR 2B

STRENGTHENED FINANCIAL SUSTAINABILITY

Outcome: Institutionally Stronger ISP and Civil Society Networks and Consortia

This indicator measures networks' financial sustainability and ability to mobilize funding to support their work, e.g. how many networks have costed strategic and fundraising plans in place and how many depend on a single funder.

All 72 (100%) individual networks report on this indicator. The table below shows their progress.

BY THE END OF 2022, 33 of 72 networks (46%) had a costed strategic plan and 38 networks (53%) had a resource mobilization strategy in place. Yet, only 17 of 72 networks (24%) did not rely on any single donor for more than 30% of their funding, a measure of sustainability. This shows the funding environment for HIV networks remains challenging.

Progress to Strengthen Financial Sustainability		Baseline		2022 progress		2023 progress	2024 progress	Cumulative for 2022–2024
		# of Networks	% of 72 Reporting Networks	# of Networks	% of 72 Reporting Networks			
Foundational	Network has at least one source of funding	72	100%	72	100%			
Early action	Network has more than one source of funding	60	83%	63	88%			
Advanced action	No single donor accounts for more than 30% of network's funding	15	21%	17	24%			
	Network has a costed strategic plan	32	44%	33	46%			
	Network has a resource mobilization strategy in place	36	50%	38	53%			
Results	Network conducts its own regular organizational and project audits	13	18%	12	17%			

Network's ability to advance change depends on its ability to secure sustained funding for its work. RCF measures this by looking at how many sources of funding grantees have and whether they depend on any one funder for more than 30% of their total funding. The higher dependence, the greater the impact if funding cannot be renewed, e.g., when a project ends. RCF also looks at the steps grantees take to secure funding, e.g., developing a costed strategic plan and/or a resource mobilization strategy.

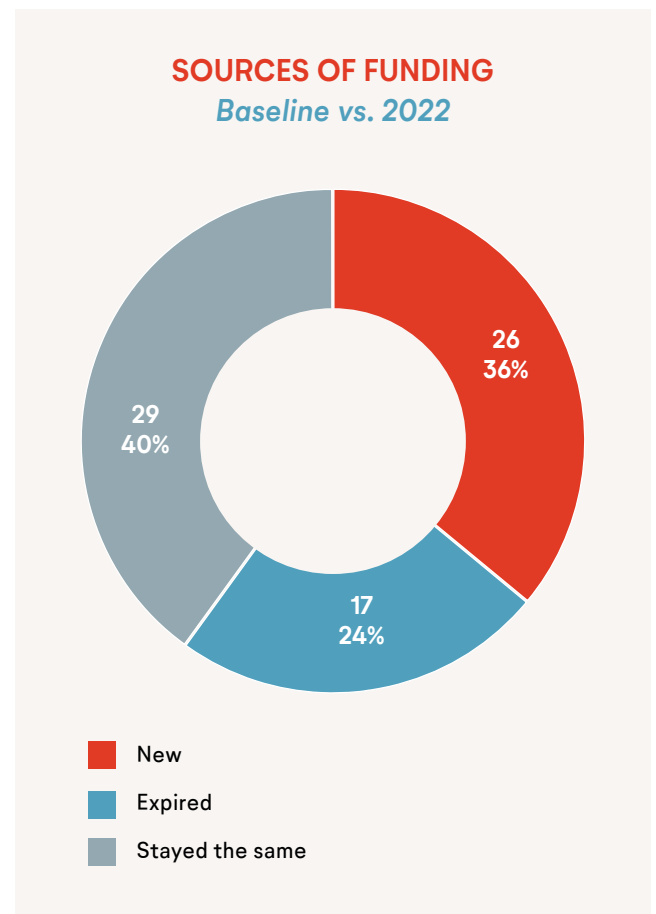
SOURCES OF FUNDING

In 2022, only 17 of 72 (24%) networks could be considered financially secure: no single donor accounted for more than 30% of their overall funding. This shows that funding security remains a serious concern for many ISP networks.

However, there were also some positive developments. In 2022, 88% (63 of 72 networks) reported having more than one source of funding. On average, RCF-funded networks had 5 sources of funding in 2022 and more networks added new sources of funding than had a funding source expire.

COSTED STRATEGIC PLANS & RESOURCE MOBILIZATION STRATEGIES

By the end of 2022, nearly half of all networks (33 networks or 46%) had a costed strategic plan and 38 networks (53%) had a resource mobilization strategy in place.



GRANTEE HIGHLIGHT

The **GLOBAL ACTION FOR TRANS* EQUALITY**, the **NETWORK OF ASIAN PEOPLE WHO USE DRUGS**, and the **MIDDLE EAST AND NORTH AFRICA NETWORK OF PEOPLE WHO USE DRUGS** reported that developing their strategic plan was among their greatest achievements towards strengthening their networks in 2022.

However, only one in six networks (12 of 72 networks or 17%) secured enough funding to *fully* implement their costed strategic plan through 2024.

While it is reassuring that almost all RCF-funded networks have at least two or more sources of funding to sustain their work, overall RCF-funded networks continue to operate in precarious funding environments as access to HIV funding decreases.

OUTCOME INDICATOR 3

DEMOCRATIC GOVERNANCE AND REPRESENTATIVE CONSTITUENCY

Outcome: Institutionally Stronger ISP And Civil Society Networks and Consortia

This indicator measures how democratic and accountable networks' governance structures are, e.g. whether a network has an open membership, whether its governance body is elected democratically, is representative, and is accountable to the communities it serves.

All 72 (100%) individual networks report on this indicator. The table below shows their progress.

BY THE END OF 2022, 44 of 72 networks (61%) had an open membership and 51 (71%) had a Board that was representative of all ISPs and regions that the network served, a slight increase from the baseline*.

Progress to Strengthen Democratic Governance and Representative Constituency		Baseline		2022 progress		2023 progress	2024 progress	Cumulative for 2022–2024
		# of Networks	% of 72 Reporting Networks	# of Networks	% of 72 Reporting Networks			
Foundational	Network has a process in place to democratically elect a governance body (e.g. Board of Directors) from among the network members	54	75%	53	74%			
	The network has open membership, whose members participate in governance elections in line with its membership statute	45	63%	44	61%			
Early action	Board leadership regularly rotates and adheres to principles of diversity in selecting new leadership	57	79%	59	82%			
Advanced action	Board of Directors actively engages in governance of the network and is accountable to its constituents from among the members of the network	52	72%	55	76%			
Results	At least 50% of Board is comprised of ISPs	52	72%	52	72%			
	Board is representative of all geographic and population diversity of its constituents	46	64%	51	71%			

The RCF believes that civil society- and community-led networks are best positioned to reach the populations most affected by HIV. As membership organizations, networks are deeply connected to the communities they represent and serve. Networks mobilize communities for advocacy and serve as a conduit for community members to make their voice heard in policy making spaces. This is particularly

important for marginalized and criminalized communities who have been historically excluded from policy decisions that affect their health and rights.

To meaningfully represent their constituencies, RCF supports its grantee-networks to invest in democratic and representative governance structures. This includes ensuring that networks' governance bodies (e.g. Boards or Steering Committees) reflect the geographic and population diversity of the network's constituencies and that Board members are active and engaged. This indicator measures the degree in which a network's governance is democratic, representative, and supports the network to effectively advocate for the needs of its constituency.

ACTIVE GOVERNANCE BODIES

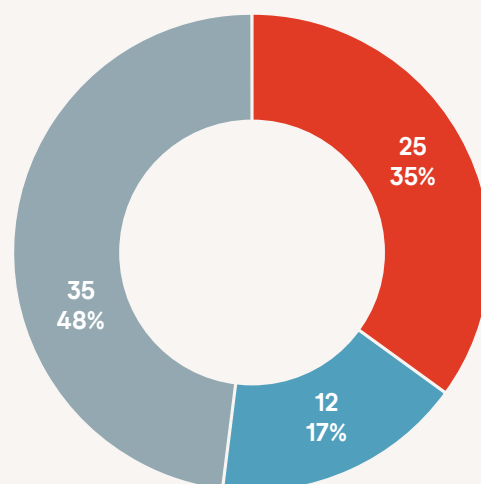
The majority of RCF-funded networks (53 of 72 networks or 74%) reported having a democratically elected governance body in place in 2022.

In 2022, 61 networks (85%) had governance bodies that met on average 4.6 times throughout the year, in line with their governance charters. One-third of networks (25 of 72 networks or 35%) reported that their Board met more times in 2022 than in 2021, a sign of recovery after the COVID-19 pandemic.

GRANTEE HIGHLIGHT

While the **RED REGIONAL DE ADOLESCENTES Y JÓVENES POSITIVOS** was unable to hold its regional assembly as scheduled during the COVID-19 pandemic, in 2022 they convened both the regional and national assemblies of young people and appointed 6 new regional coordinators as part of leadership rotation.

CHANGES IN FREQUENCY OF GOVERNANCE BODY MEETINGS *Baseline vs. 2022*



- More times in 2022
- Fewer times in 2022
- Stayed the same

GOVERNANCE BODY REPRESENTATION AND ACCOUNTABILITY

More than two-thirds of networks (52 of 72 networks or 72%) report that ISPs make up at least 50% of their Board membership, a measure of representativeness. In addition, by the end of 2022 more networks reported that their board was representative of all geographic and population diversity of its constituents: 51 networks compared to 46 at baseline.

GRANTEE HIGHLIGHT

With an increase in programs, **THE GLOBAL NETWORK OF YOUNG PEOPLE LIVING WITH HIV** board meetings allow members to evaluate the impact of its programs on the lives of young people living with HIV, explore new funding opportunities, and ensure that young people from different regions are represented in the decision-making processes.

GRANTEE HIGHLIGHT

After a governance capacity assessment highlighted a gap, **INTERNATIONAL COMMUNITY OF WOMEN LIVING WITH HIV SOUTHERN AFRICA** included a seat on their Board representing key populations, a milestone they owed to RCF funding. **INTERNATIONAL COMMUNITY OF WOMEN LIVING WITH HIV ASIA PACIFIC**, built the capacity of its board members to deepen their understanding of the network, its strengths, and challenges. The **MIDDLE EAST AND NORTH AFRICA NETWORK OF PEOPLE WHO USE DRUGS** noted that the completion of their organizational structure, the development of their bylaws, and an increase in their membership in 2022 as fundamental steps to strengthening the network.



South Africa AIDS Information Dissemination Service, Measuring Impact for Learning & Empowerment training for in Eswatini, Malawi, Zambia and Zimbabwe.

OUTCOME INDICATOR 4

STRENGTHENED INFLUENCE AND CAPACITY TO MOBILIZE MOVEMENTS

*Outcome: Improved and Sustainable Advocacy Capacity For ISPs
and Civil Society Networks and Consortia*

This indicator measures networks' capacity to influence change, both individually and through collaborative action, e.g. by developing advocacy strategies, engaging in partnerships and coalitions, or having formal membership in board delegations, such as UNAIDS Programme Coordinating Board.

All 72 (100%) individual networks report on this indicator.

IN 2022, 31 network (43%) developed a new advocacy strategy, 55 networks (76%) were active in an issue-based coalition, and 35 networks (49%) played a regular representative role in steering HIV policy.

Progress to Strengthen Democratic Governance and Representative Constituency		Baseline		2022 progress		2023 progress	2024 progress	Cumulative for 2022–2024
		# of Networks	% of 72 Reporting Networks	# of Networks	% of 72 Reporting Networks			
Foundational	Network has developed a formal or informal advocacy strategy in consultation with its membership (of network or consortium)	53	74%	31	43%			
Early action	Network has played a significant role in at least one joint advocacy campaign with other partners	55	76%	26	36%			
	Network engages in cross-sector partnership or working relationships with government or UN agencies, bilateral or multi-lateral donors	51	71%	20	28%			
	Network has expanded its active membership base by at least 20%			24	33%			
Advanced action	Network active in an issue-based coalition beyond its target ISP or HIV-related issue	48	67%	55	76%			
	Network holds formal membership in a coordination council or board delegation on a key topic for its constituent ISP(s)	34	47%	38	53%			
Results	Network plays a formal and regular representative role in steering HIV and/or health policy for target ISP at national/regional or global levels	32	44%	35	49%			
	Network has initiated and leads issue-based coalition(s)	19	26%	17	24%			
	Network plays a leadership role in a coordination council or board delegation on a topic for its constituent ISP(s)	25	35%	29	40%			

Civil society and community networks' power is in collective action. This includes their ability to mobilize their constituencies to influence change, to build and engage in strategic partnerships and coalitions with others, and to be able to represent their communities in key decision-making spaces at national, regional, and global levels. This indicator measures the increased capacity of RCF-funded networks to mobilize movements for advocacy and to influence change.

ADVOCACY STRATEGIES

At the start of the 2022–2024 funding cycle, RCF-funded networks demonstrated their commitment to influence change both individually and collaboratively with other actors through advocacy. Together, 56 of 72 reporting networks (or 78%) had a total of 160 advocacy strategies in place at the start of the 2022–2024 funding cycle. In 2022, many of these efforts continued, while 31 networks (43%) also developed 67 new advocacy strategies, further expanding their efforts.

Networks engaged on a range of advocacy efforts, related to:

- Accountability mechanisms of HIV commitments (**African Network of People who Use Drugs**),
- Decriminalization of sex work (**African Sex Workers Alliance**),
- Development and adoption of coordinated harm reduction quality standards (**Eurasian Harm Reduction Association**),
- Changing public perceptions of people who use drugs (**Eurasian Network of People who Use Drugs**),
- Improving access to care for people in prison (**Health Without Barriers**),
- Financing for children and adolescents affected by HIV (**Paediatric AIDS Treatment for Africa**), and
- Addressing specific and unmet needs of young sex workers who use drugs (**Youth RISE**).

Throughout 2022, networks invested in capacity building, online learning and training, stakeholder dialogues, community-led research, and provided mentorship, scholarships, and technical assistance to network members, activists, and other advocates.

The new advocacy strategies initiated in 2022 aimed to benefit many communities, including transgender, gender non-conforming, and intersex people, people living with HIV, men who have sex with men, migrants, people who use drugs, adolescent girls and young women, including those living with disabilities, LGBTIQ people and youth, people in prison, sex workers.

GRANTEE HIGHLIGHT

GAYLATINO strengthened community groups of gay and bisexual men in six Latin America and Caribbean (LAC) subregions where perceptions about gay and bisexual men remain negative.

JOINT ADVOCACY CAMPAIGNS

In 2022, more than one-third of networks (26 of 72 networks or 36%) played a significant role in at least one joint advocacy campaign at a regional and global level with other partners, including other civil society and community-led organizations.

GRANTEE HIGHLIGHT

GLOBAL ACTION FOR TRANS* EQUALITY worked with ILGA World, NSWP, MPact, INPUD, GNP+, TGEU, RFSL and APTN, amongst others on organizing information ahead of Trans Advocacy Week. Some networks also collaborated with one another.

GRANTEE HIGHLIGHT

GLOBAL NETWORK OF YOUNG PEOPLE LIVING WITH HIV collaborated with GNP+ to develop the Young Emerging Leaders (YEL) strategy. The strategy aimed to strengthen the leadership capacity of 31 young people between the ages of 15 and 25 who are either living with HIV, affected by or at risk of HIV globally and enable them to engage in global and decision making platforms meaningfully, including the HIV and Adolescence workshop, AIDS 2022 conference, and the World Health Summit.

GRANTEE HIGHLIGHT

RCF funding enabled **WOMEN IN RESPONSE TO HIV/AIDS AND DRUG ADDICTION** to establish relationships and mobilize the buy-in of allied organizations, especially those representing transgender people and key populations in East Africa, to engage in the Harm Reduction Club, an advocacy platform supported by Youth RISE.



MPact Global Action for Gay Men's Health and Rights, Right To Campaign.

GRANTEE HIGHLIGHT

INTERNATIONAL COMMUNITY OF WOMEN LIVING WITH HIV ASIA PACIFIC led a feminist leadership training across six countries to empower women living with HIV to engage at the highest levels of decision-making and in sub-national, national, and regional HIV networks.

CROSS-SECTOR PARTNERSHIPS

In 2022, more than one-quarter of networks (20 of 72 networks or 28%) engaged government or UN agencies, including UNAIDS, UNODC, UNDP, and the UN Human Rights Committee.

GRANTEE HIGHLIGHT

GLOBAL NETWORK OF YOUNG PEOPLE LIVING WITH HIV in collaboration with Frontline AIDS and UNDP conducted an African regional consultation with young people in all their diversity, in response to the high rejection of visas for young people to attend AIDS2022.

GRANTEE HIGHLIGHT

With the support of UNAIDS, **EURASIAN HARM REDUCTION ASSOCIATION** organized a training to strengthen authorities' communication skills and interaction with people who use drugs in Eastern Europe and Central Asia.

GRANTEE HIGHLIGHT

MPACT collaborated with UNAIDS and WHO to advocate for updated guidance on comprehensive and rights-based services and policies for gay, bisexual and other men who have sex with men.

GRANTEE HIGHLIGHT

INTERNATIONAL NETWORK OF PEOPLE WHO USE DRUGS in partnership with UNODC, the Global Fund and WHO organized a webinar that brought representatives of people who use drugs from five Sub-Saharan countries together with key global, regional, and national decision makers, including from the Global Fund and Country Coordinating Mechanisms (CCM), to identify current gaps in programming for people who use drugs, and to facilitate relationships and meaningful involvement in the lead up to Grant Cycle 7 of the Global Fund; to increase funding for people who use drugs in the five countries.

RESULTS IN NETWORK INFLUENCE AND CAPACITY TO MOBILIZE MOVEMENTS

ROLE IN STEERING HIV AND/OR HEALTH POLICY FOR TARGET ISP

In the first year of the funding cycle, nearly half of all RCF-funded networks (35 of 72 networks or 47%) played a formal and regular representative role in steering HIV and/or health policy for ISPs at national, regional or global levels.

GRANTEE HIGHLIGHT

ASIA PACIFIC TRANSGENDER NETWORK (APT) participated in the UN Trans Advocacy Week for the fifth year. **GLOBAL NETWORK OF YOUNG PEOPLE LIVING WITH HIV** participated in various advocacy and awareness spaces where it advocated for the inclusion of young key populations programming in the WHO consolidated guidelines on HIV, viral hepatitis, and sexually-transmitted infection prevention, diagnosis, treatment, and care for key populations.

COORDINATION COUNCILS

In 2022, two-fifths of networks (29 of 72 networks or 40%) played a leadership role in a coordination council or board delegation on a topic for its constituent ISP(s) demonstrating commitment and follow-through on plans.

GRANTEE HIGHLIGHT

INTERNATIONAL DRUG POLICY CONSORTIUM chairs and provides the Secretariat services for the UN Strategic Advisory Group on Drugs (SAG), the UNODC-CSO Platform on Drugs, and the EU Civil Society Forum on Drugs (CSFD).

ISSUE-BASED COALITIONS

In the first year of the funding cycle, 17 networks reported initiating and leading an issue-based coalition, including with other members of the RCF grantee cohort:

GRANTEE HIGHLIGHT

ASIA PACIFIC TRANSGENDER NETWORK initiated the Sexual and Reproductive Health and Rights Coalition to connect and link trans movements across South Asia and to build a cadre of trans and gender-diverse leaders skilled in advocacy for better access to trans-competent sexual and reproductive health services.

GRANTEE HIGHLIGHT

In 2022, **HIV JUSTICE NETWORK** continued to lead co-ordination of **HIV JUSTICE WORLDWIDE Coalition** (HJWW) which includes Eurasian Women's Network on AIDS, Harm Reduction International, MENA Community, MPact, and Y+ Global. By the end of December 2022, they created a joint advocacy agenda for 2023–2024 at the global level to guide HJWW partners working on ending HIV criminalization and other decriminalization goals.

GRANTEE HIGHLIGHT

ASIA PACIFIC NETWORK OF PEOPLE LIVING WITH HIV/AIDS initiated and led the creation of a consortium on community-led monitoring (CLM) to address the issues related to CLM implementation at the country level.

PROGRAMMATIC OUTCOMES

PROGRAMMATIC OUTCOMES	Human Rights	5. Number of networks contributing to an IMPROVED HUMAN RIGHTS environment for at least one ISP
	Access to Services	6. Number of networks contributing to INCREASED ACCESS TO HIV SERVICES and programs
		7. Number of networks contributing to INCREASED QUALITY OF HIV SERVICES and programs
	Resource Accountability	8. Number of networks contributing to INCREASED AND SUSTAINABLE FINANCING OF HIV RESPONSE including ISP programs
		9. Number of networks contributing to IMPROVED HIV-RELATED FISCAL ACCOUNTABILITY

WHAT ARE THE PROGRAMMATIC OUTCOMES?

This section describes grantees' progress in three programmatic outcome areas. Gains in these areas contribute to the ultimate goal of better health, inclusion, and social wellbeing of ISPs:

- Advancing Human Rights
- Improving Access to and Quality of Services for ISPs
- Resource Accountability or advocacy for better resourcing of the HIV response for ISPs

HOW RCF MEASURES PROGRESS

RCF compares grantees' programmatic plans at the start of the grant cycle to their annual progress for each indicator. RCF understands that advocacy is not a linear process. Bringing about change often requires multi-year efforts and ability to adapt or pivot when the situation demands it. RCF captures this cyclical nature of advocacy by understanding grantees progress along the four stages: foundational steps, early action, advanced action, and results. This continuum is described in more detail in the section About This Report.

HOW MANY NETWORKS REPORT ON THESE OUTCOMES

OVERALL COHORT

Some of the 72 funded networks participate in two consortia. They do distinctly different work under different consortium arrangements, and hence report on it separately. This means, that for programmatic outcomes we receive 83 surveys, not 72. Thus, **83 implementing networks are considered 100% (main denominator) for the programmatic outcomes.**

REPORTING PER INDICATOR.

Programmatic outcomes are **optional**. RCF grantees set their own priorities for their efforts and hence for what they report on. Some networks report on some of the three outcome areas, while others report on all three. As such, each indicator has a different number of reporting networks, based on the plans they indicated at the start of 2022–2024 grant cycle.

At the start of each indicator section, grantees' 2022 progress is presented along the four progress stages and compared against their plans for the whole 2022–2024 grant cycle. The number of reporting networks is clearly indicated for each indicator.

INDICATOR 5

HUMAN RIGHTS

Outcome: More Enabling and Rights-Affirming Social, Policy and Legal Environment for ISPs

This indicator measures the number of networks that worked to improve the human rights environment for the HIV response for ISPs, from developing and implementing advocacy strategies to ultimately contributing to policy or practice change.

2022-2024 GRANT CYCLE: 63 of 83 networks (76%) planned to contribute to the Human Rights outcome during 2022-2024 cycle. **63 networks are considered 100% for this outcome area.**

IN 2022: 59 of 63 networks carried out at least 216 activities towards this outcome in 2022. The table below shows their progress.

In 2022, 47 networks (75%) documented evidence for advocacy, 36 networks (57%) carried out advocacy campaigns, and 14 networks (22%) supported strategic litigation. 7 of them saw their strategic litigation result in legal or policy change, and 17 networks' advocacy contributed to a better human rights law or policy for ISPs.

Progress to Advance Human Rights of ISPs		Planned for 2022-2024		2022 progress		2023 progress	2024 progress	Cumulative for 2022-2024
		# of Networks	% of 63 Reporting Networks	# of Networks	% of 63 Reporting Networks			
Foundational	Network generated credible evidence for advocacy strategy or campaign	53	84%	47	75%			
	Network gained increased understanding of government's, UN's, or funding agency's mechanisms for advocacy	50	79%	51	81%			
Early action	Network developed an advocacy strategy or campaign for the human rights of ISPs	46	73%	47	75%			
	Network gained access to or representation in a UN or state body to apply influence	26	41%	20	32%			
Advanced action	Network implemented campaign to promote human rights	53	84%	36	57%			
	Network supported strategic litigation	17	27%	14	22%			
	Network utilized a UN or parliamentary hearing process to apply influence	29	46%	20	32%			
Results	Campaign or strategic litigation results in legal or policy change			7	11%			
	Campaign or litigation results in improved practice under existing law or policy			17	27%			

There is a direct link between human rights violation and HIV risk. ISPs are disproportionately impacted by laws and policies that affect their human rights and their ability to protect their health.

The Human Rights outcome area measures the number of networks that engaged in advocacy to improve human rights environment for at least one ISP. RCF defines advocacy outcome as a more enabling and rights-affirming social, policy and legal environment for ISPs.

At baseline, three-quarters of all networks (63 networks of 83 or 76%) planned to conduct least one activity in 2022–2024 funding cycle to advance the human rights of inadequately served populations.

In 2022, almost all of the networks who prioritized human rights outcomes (59 of 63 or 94%) worked to improve the human rights of at least one ISP. Together, these 59 networks conducted at least 216 advocacy activities.

Throughout 2022, grantees engaged in the protection and promotion of human rights by generating credible evidence, carrying out advocacy activities, and supporting strategic litigation. This section outlines the progress made by networks in the first year of the funding cycle.

EVIDENCE FOR ADVOCACY

In the first year of the grant cycle, more than four-fifths (47 of 63 or 75%) of networks generated evidence to support their advocacy. They collected data for case studies, for evidence-based reports, or carried out other forms of documentation to inform their advocacy asks, strategies, or campaigns by centering the experiences of ISPs.

GRANTEE HIGHLIGHT

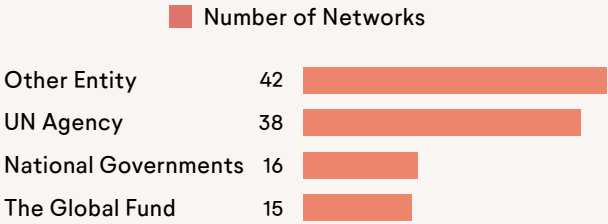
Across the 2022 funding portfolio, networks generated credible evidence on the human rights violations against people who use drugs within the COVID-19 context (**AFRICAN NETWORK OF PEOPLE WHO USE DRUGS**, member of the Consortium of People who use Drugs for Rights, Freedom and Autonomy), discrimination and stigma experienced by young sex workers who use drugs and the needs and priorities of LGBTIQ people who use drugs (**YOUTH RISE**, member of the Youth Consortium), and the HIV criminalization (**HIV LEGAL NETWORK**, member of the HIV Justice Global Consortium).

ENGAGING WITH NATIONAL AND INTERNATIONAL BODIES ON THE HUMAN RIGHTS OF ISPS

Civil society and community networks advocate at the national and international level to improve policies and practices that affect the human rights of ISPs. To build this advocacy capacity, in 2022 many RCF-funded networks prioritized increasing their understanding of the policy making mechanisms and processes of the national governments, the UN agencies, the Global Fund and of other key donors, as well as how they can engage with those mechanisms and processes to advance human rights.

By the end of the first funding year, 9 in 10 networks engaged in this outcome area (51 of 63 or 81%) reported a better understanding of the key mechanisms at national, UN, or funder level that they can engage with. For instance, how to provide expertise to inform policy-making process or to submit shadow or alternative reports to the UN human rights mechanisms. 20 networks (32%) also gained access to the advocacy spaces within the UN or state agencies.

2022 SITES OF HUMAN RIGHTS ADVOCACY



GRANTEE HIGHLIGHT

Networks conducted sensitization trainings and developed targeted statements to national governments to raise awareness on the issues and challenges faced by members of the trans community in the Caribbean (**CARIBBEAN VULNERABLE COMMUNITIES**, member of the Caribbean Regional ISP Leadership and Engagement Consortium), to end the death penalty for drug offences in Saudi Arabia, Singapore and Iran (**HARM REDUCTION INTERNATIONAL**, member of the Harm Reduction Consortium), and to reform the HIV criminalization Criminal Code in Canada (**HIV LEGAL NETWORK**, member of the HIV Justice Global Consortium).

In 2022, the submission of shadow reports to UN Special Rapporteurs, the Universal Periodic Review (UPR), the UN Economic and Social Council (ECOSOC), Committee on the Elimination of Discrimination Against Women (CEDAW), and other UN Treaty Bodies were integral in the human rights advocacy networks pursued.

GRANTEE HIGHLIGHT

In 2022, several networks prepared and submitted alternative reports to CEDAW, including advocating for a rights-affirming approach to sex work (**THE GLOBAL NETWORK OF SEX WORK PROJECTS**, member of the Sex Worker Networks Consortium), for decriminalization of HIV transmission (The Eurasian Women's Network on AIDS, member of the Eurasian Regional Consortium). Shadow reports were also submitted to highlight the right to health for people who use drugs, the harm of death penalty for drug offences, and structural and systemic violence and discrimination suffered by women who use drugs (**INTERNATIONAL NETWORK OF PEOPLE WHO USE DRUGS**, member of the Consortium of People who use Drugs for Rights, Freedom and Autonomy). **THE WOMEN AND HARM REDUCTION INTERNATIONAL NETWORK** (Harm Reduction Consortium) developed a joint shadow report with a community organization, which generated binding recommendations from CEDAW.

In 2022, one-third (20 of 63 networks or 32%) of reporting networks were able to advocate with the UN or state bodies by joining advisory groups, attending UN meetings, or gaining committee status. With their access and representation, RCF-funded networks demonstrated a commitment to using their seat at the table to uplift the voices of the ISPs they serve.

GRANTEE HIGHLIGHT

GLOBAL ACTION FOR TRANS* EQUALITY (Trans* Health and Rights HIV Advocacy Consortium), **INTERNATIONAL NETWORK OF PEOPLE WHO USE DRUGS** (Consortium of People who use Drugs for Rights, Freedom and Autonomy), **MPACT** (SHAG: Sustainable Health Advocacy for Gay Men Consortium), and **GLOBAL NETWORK OF SEX WORK PROJECTS** (Sex Worker Networks Consortium) were members of the Guideline Development Group for the WHO's *Consolidated Guidelines On HIV, Viral Hepatitis And STI Prevention, Diagnosis, Treatment, And Care For Key Populations*.

GRANTEE HIGHLIGHT

WOMEN IN RESPONSE TO HIV/AIDS AND DRUG ADDICTION and the **AFRICAN NETWORK OF PEOPLE WHO USE DRUGS** held meetings with representatives from the UNODC in East Africa to highlight human rights violations against people who use drugs and advocated for increased monitoring and proper implementation of the HIV programs.

Networks also engaged in regional or international advocacy spaces.

GRANTEE HIGHLIGHT

RED DE MUJERES TRABAJADORAS SEXUALES DE LATINOAMERICA Y EL CARIBE helped shape the XV Regional Conference on Women in Latin America and the Caribbean (ECLAC) by participating in the 62nd Meeting of the ECLAC Board of Directors. **THE INTERNATIONAL DRUG POLICY CONSORTIUM** (Harm Reduction Consortium) continued to play a central coordinating role for the network and wider sector to engage meaningfully and have their voices heard at the UN Commission on Narcotic Drugs (CND). After a three-year effort, the **INTERNATIONAL NETWORK OF PEOPLE WHO USE DRUGS** finally succeeded in becoming a member of the NGO Committee of the UN Economic and Social Council (ECOSOC) allowing them to formally engage in high-level processes (e.g., Commission on Narcotic Drugs or UN High Level meetings).

Irrespective of the type of access gained, access to such spaces is crucial to finding opportunities to protect and promote the human rights of ISPs.

ADVOCACY STRATEGIES AND CAMPAIGNS CALLING FOR HUMAN RIGHTS OF ISPs

47 of 63 networks (75%) developed an advocacy strategy or campaign to advocate for improvements in the rights of ISPs. Networks were creative in their approaches to advocacy using social media, films, and sensitization to advocate for the rights of people who use drugs, people living with HIV, sex workers, and for access to OAT in prison (Youth RISE, European Prison Litigation Network, and HIV Global Justice Network).

GRANTEE HIGHLIGHT

The **HIV GLOBAL JUSTICE NETWORK** (HIV Justice Global Consortium) created a campaign around a short film, [Mwayi's story](#), against the criminalization of women living with HIV for breastfeeding. It uses the example of a woman who was prosecuted for breastfeeding a baby who was not her own child.

GRANTEE HIGHLIGHT

YOUTH RISE (Harm Reduction Consortium) carried out three "[Support, Don't Punish](#)" campaigns: to bring attention to violence against women who use drugs; to harms of drug use criminalization; and to the dual stigma of drug use and sex work. All three campaigns were evidence-based and centered community engagement.

STRATEGIC LITIGATION TO EFFECT POLICY CHANGE

In 2022, nearly one-quarter (14 of 63 networks or 22%) of reporting networks supported strategic litigation to effect policy change for ISPs at different intersections including prisoners living with HIV.

GRANTEE HIGHLIGHT

One RCF grantee* supported strategic litigation that concerned an ex-prisoner living with HIV who was detained without access to ART. The submission to the UN Human Rights Committee (CCPR) led to the eventual release of the applicant, thus being an example of successful litigation before the UN bodies and paving way to similar cases. The **EUROPEAN PRISON LITIGATION NETWORK** (Prison Health and Rights Consortium) and PromoLEX also submitted a joint communication to the Committee of Ministers of the Council of Europe on a case from Moldova, resulting in Moldovan authorities establishing a working group to implement necessary measures for the prison health reform.

APPLYING INFLUENCE AT A UN OR PARLIAMENTARY HEARING PROCESS

Along with increasing their understanding, targeting, and engaging with the UN, networks participated in UN or parliamentary hearing processes to advocate for change and towards the realization of the human rights of ISPs on the global stage. In 2022, one-third (20 networks or 32%) used a UN or parliamentary hearing process to apply influence.

GRANTEE HIGHLIGHT

YOUTH RISE (Harm Reduction Consortium) participated in the 65th Session of the UN CND where it provided evidence on the needs and priorities of key populations regarding harm reduction, HIV, health and justice services and human rights-based drug policy and dialogued with the UNODC Executive Director about the inclusion of young people who use drugs in data collection.

GRANTEE HIGHLIGHT

THE INTERNATIONAL DRUG POLICY CONSORTIUM (Harm Reduction Consortium) successfully advocated with the UN General Assembly to have a first-ever vote for a drug policy document, overturning the UN's commitment to "war on drugs" language, winning a 124 to 9 vote. **HARM REDUCTION INTERNATIONAL** (Harm Reduction Consortium) took part in two joint statements during the 51st Human Rights Council sessions, to highlight the historic impact of colonialism on human rights and the lack of comprehensive data on drug policing and drug-related outcomes.

* The name of the grantee was anonymized for sensitivity reasons. Please, reach out to the RCF Secretariat for more details.

RESULTS MADE TO CONTRIBUTE TO IMPROVED HUMAN RIGHTS ENVIRONMENT IN 2022

In this first year of the funding cycle, a third of all networks (21 of 63 networks or 33%) reported that their advocacy or strategic litigation resulted in a policy or legal change and/or improved practice under existing law or policy related to human rights. Among the 59 networks who conducted activities that contributed to an improved human rights environment for at least one ISP, 7 networks contributed to a policy or legal change and 17 networks improved practice under existing law or policy.

POLICY OR LEGAL CHANGE

GRANTEE HIGHLIGHT

THE HIV LEGAL NETWORK (HIV Justice Global Consortium) improved the legal environment for people living with HIV through several court decisions in Canada including in *R. v. Ndhlovu* and in *R. v. Kirkpatrick*. These proceedings ruled that mandatory registration as a sex offender was unconstitutional and prevented an expansion of the criminal law in cases of HIV non-disclosure. Despite being domestic decisions, they set an important example internationally, particularly in countries where HIV transmission is criminalized.

In Lesotho, South Africa, the High Court declared that section 32(a)(vii) of the Sexual Offences Act was unconstitutional as it imposed a mandatory death penalty for people living with HIV convicted of sexual offenses solely on the basis of their HIV status. This decision is the result of a successful constitutional challenge supported by members of the HIV Justice Global Consortium, including **AIDS AND RIGHTS ALLIANCE FOR SOUTHERN AFRICA**, **HIV LEGAL NETWORK**, and **SOUTHERN AFRICA LITIGATION CENTRE**.

IMPROVED PRACTICE UNDER EXISTING LAW OR POLICY

In 2022, improvements to practice under existing law or policy were reported as a result of advocacy or strategic litigation.

GRANTEE HIGHLIGHT

AFRICAN NETWORK OF PEOPLE WHO USE DRUGS helped to release 47 people who use drugs from prisons in Mali due to arbitrary arrests and the **HIV LEGAL NETWORK** reported that a sex worker arrested on a border with Democratic Republic of the Congo was released after successfully advocating that changes in HIV legislation made her arrest illegal. This was a result of efforts to increase the capacity of community organizations to empower their members to claim human rights protections.

OUTCOME INDICATOR 6

ACCESS TO SERVICES

Outcome: More accessible, rights-based, quality HIV services and programs for ISPs

This indicator measures the number of networks that worked to improve access to and retention in HIV services for ISPs, from developing and implementing advocacy strategies to ultimately contributing to change.

2022-2024 GRANT CYCLE: 58 of 83 networks (70%) planned to contribute to improved Access to Services during 2022-2024 cycle. **58 networks are considered 100% for this outcome area.**

IN 2022: 48 of 58 (83%) networks carried out at least 95 activities towards this outcome in 2022. The table below shows their progress.

In 2022, 35 of 58 networks (60%) documented evidence for advocacy, 31 networks (53%) carried out advocacy campaigns to improve service access and 23 (40%) to increase demand for services among ISPs. 22 networks reported improved access to and retention in services linked to their advocacy.

Progress towards Improved Access to Services		Planned for 2022-2024		2022 progress		2023 progress	2024 progress	Cumulative for 2022-2024
		# of Networks	% of 58 Reporting Networks	# of Networks	% of 58 Reporting Networks			
Foundational	Network generated credible evidence for advocacy	48	83%	35	60%			
Early action	Network developed an advocacy strategy or campaign for better health outcomes for ISPs	47	81%	30	52%			
	Network gained access to or representation in a state's or multilateral donor's program	18	31%	12	21%			
Advanced action	Network carried out a campaign or advocacy activities to influence accessibility of services	43	74%	31	53%			
	Network implemented campaign or advocacy activities to increase ISP awareness of and demand for services	37	64%	23	40%			
	Network has utilized a UN process or participated in a national program planning or review or development process to affect changes on access to services	32	55%	14	24%			
Results	ISP services report increase in new clients			15	26%			
	ISP services report increased retention of clients/reduced loss-to-follow-up			7	12%			

RCF funds networks and consortia to advocate to promote and protect access to services for ISPs. Access to HIV and other life-saving services for ISPs should be available, adequate, accessible, appropriate and affordable. People from ISP communities should be aware of and demand these services. This indicator measures the number of networks engaged in advocacy for increased access to HIV services and programs for ISPs and their progress towards affecting change. RCF defines the advocacy outcome of this indicator as more accessible, rights-based, quality HIV services and programs for ISPs.

In 2022, more than half of reporting networks (48 of 58 networks or 83%) conducted at least one activity to contribute to increase access to HIV services and programs. In 2022, together they conducted at least 95 advocacy activities to increase access for ISPs. In 2022, networks worked to increase access to:

- HIV testing, treatment, counseling services including PrEP (Caribbean Regional Network of People Living with HIV, Coordination of Action Research on AIDS and Mobility in Asia, Coalition PLUS, Eurasian Coalition for Health, Rights, Gender and Sexual Diversity, GAYLATINO, Global Action for Trans* Equality, Global Network of Young People living with HIV, International Community of Women Living with HIV Eastern Africa, International Community of Women living with HIV West Africa, Coalition for Children Affected by AIDS, and Transgender Europe),
- Antiretroviral treatment and Opioid Agonist Therapy (Eurasian Harm Reduction Association, European Prison Litigation Network, International Treatment Preparedness Coalition, Middle East and North Africa Harm Reduction Association, Middle East and North Africa Network of People Living with HIV, Prisoner Re-Integration and Empowerment Organization, International Community of Women living with HIV Central Africa, and UnMode),
- Harm-reduction services (Eurasian Harm Reduction Association, European Network of People who Use Drugs, Network of Asian People who Use Drugs, Health Without Barriers, International Drug Policy Consortium, Women in Response to HIV/AIDS and Drug Addiction, and Youth RISE), and
- Gender affirming care (East Africa Trans Health and Advocacy Network).

EVIDENCE FOR ADVOCACY

In 2022, nearly three-quarters of reporting networks (35 of 58 networks or 60%) reached a foundational milestone by generating credible evidence on which an advocacy campaign or educational activities can be based.

GRANTEE HIGHLIGHT

Networks produced reports providing a comprehensive global mapping of harm reduction responses to drug use, HIV and viral hepatitis worldwide (**HARM REDUCTION INTERNATIONAL**, member of Harm Reduction Consortium) and on the *Legal Gender Recognition & Access to Trans Specific Healthcare* for trans*, intersex and non-binary persons in East Africa (**EAST AFRICA TRANS HEALTH AND ADVOCACY NETWORK**, member of Trans* Health and Rights HIV Advocacy Consortium).

GRANTEE HIGHLIGHT

Networks also conducted studies of:

- Financial, legal, social and structural barriers of drug checking services (**EURASIAN HARM REDUCTION ASSOCIATION**, member of Harm Reduction Consortium),
- Disruptions in treatment and lack of HIV care in the MENA region (**MIDDLE EAST AND NORTH AFRICA NETWORK OF PEOPLE LIVING WITH HIV**, member of Positive Universe Consortium),
- Needs and priorities of young LGBTIQ people who use drugs (**YOUTH RISE**, member of Harm Reduction Consortium), and
- Social issues affecting the quality of life for people living with HIV in the Caribbean (**CARIBBEAN REGIONAL NETWORK OF PEOPLE LIVING WITH HIV**, member of the Caribbean Regional ISP Leadership and Engagement Consortium).

ADVOCACY STRATEGIES AND CAMPAIGNS CALLING FOR IMPROVEMENTS IN HEALTH OUTCOMES

Nearly two-thirds of reporting networks (30 of 58 networks or 52%) developed an advocacy strategy or campaign to advocate for improvements in health outcomes for ISP including awareness campaigns and forums.

GRANTEE HIGHLIGHT

In 2022, networks advocated for:

- Access to gender affirming care, including hormones and surgeries, as part of trans-competent HIV care for trans and gender diverse people (**EAST AFRICA TRANS HEALTH AND ADVOCACY NETWORK**, member of Trans* Health and Rights HIV Advocacy Consortium)
- Inclusion of the dapivirine vaginal ring (DVR) as an HIV prevention tool for high-risk adolescent girls and young women (AGYW) (**INTERNATIONAL COMMUNITY OF WOMEN LIVING WITH HIV EASTERN AFRICA**, member of the Consortium of International Community of Women Living with HIV).

GRANTEE HIGHLIGHT

The **GLOBAL NETWORK OF YOUNG PEOPLE LIVING WITH HIV** (Vibrant and Young Voices Consortium) significantly contributed to the development of the AIDS2022 Montreal Youth Declaration, an advocacy position statement that provided recommendations to tackle the HIV/AIDS pandemic with a focus on leveraging youth networks and communities.

More than three-fifths of reporting networks (31 of 58 networks or 53%) carried out advocacy campaigns for more accessible services and/or to increase awareness of and demand for services by ISPs.

GRANTEE HIGHLIGHT

The advocacy campaigns implemented in 2022 aimed to ensure women living with HIV have access to quality HIV and health services and to justice against perpetrators of domestic violence (**INTERNATIONAL COMMUNITY OF WOMEN LIVING WITH HIV WEST AFRICA**, member of the Consortium of International Community of Women Living with HIV); **EURASIAN HARM REDUCTION ASSOCIATION** (Eurasian Regional Consortium) advocated to ensure that people who use drugs are not overlooked and ensured access to essential services during times of war and political instability.

Some advocacy campaigns were implemented at the country-level.

GRANTEE HIGHLIGHT

COORDINATION OF ACTION RESEARCH ON AIDS AND MOBILITY IN ASIA advocated for access to HIV testing and referral services for deportee and returnee migrants at international airports and borders in South Asia; **THE INTERNATIONAL TREATMENT PREPAREDNESS COALITION** tackled intellectual property related restrictions to remove barriers to hepatitis C treatment.

Nearly half of reporting networks (23 of 58 networks or 40%) implemented campaigns or other educational activities to increase ISP awareness of and demand for service.

GRANTEE HIGHLIGHT

GAYLATINO increased access to rapid HIV and STI tests with specialized counseling and medical services. Member of the **INTERNATIONAL TREATMENT PREPAREDNESS COALITION** organized community-led advocacy to restore access to a one month supply of ART after stockouts in India. **COORDINATION OF ACTION RESEARCH ON AIDS AND MOBILITY IN ASIA** advocated for access to health services for migrant workers living with HIV in South Asia.

ENGAGING WITH NATIONAL AND INTERNATIONAL BODIES ON ACCESS TO SERVICES OF ISPS

In 2022, more than one-fifth of reporting networks (12 of 58 networks or 19%) gained access to or representation in a multilateral donor's or state's program.

GRANTEE HIGHLIGHT

AFRICA NETWORK OF PEOPLE WHO USE DRUGS (Consortium of People who use Drugs for Rights, Freedom and Autonomy) attended the first face to face meeting of the 2023 International Conference on AIDS and STIs in Africa (ICASA) Steering Committee to advance dialogue and political will for increasing access to HIV services for key populations, and particularly harm reduction.

The **ASIA PACIFIC NETWORK OF PEOPLE LIVING WITH HIV/AIDS** worked with UNAIDS to advance knowledge on HIV related stigma and discrimination. The **EURASIAN COALITION FOR HEALTH, RIGHTS, GENDER AND SEXUAL DIVERSITY** (SHAG: Sustainable Health Advocacy for Gay Men Consortium) contributed to the report of the United Nations High Commissioner on Human Rights about HIV and AIDS, highlighting scarcity of HIV specific programs and funding for trans people during the COVID-19 pandemic.

More than one-quarter of reporting networks (14 of 58 networks or 24%) used a UN process or participated in a national program planning, review, or development process.

GRANTEE HIGHLIGHT

YOUTH RISE (Harm Reduction Consortium) provided evidence to state delegates and UN entities on the needs and priorities of key populations for harm reduction, HIV, and human rights-based drug policy during the 2022 session of the UN Commission on Narcotic Drugs (CND). The UNODC Southeast Asia Pacific (SEAP) office invited the **NETWORK OF ASIAN PEOPLE WHO USE DRUGS** (Consortium of People who use Drugs for Rights, Freedom and Autonomy) to join as a member of the Technical Working Group (TWG) for Thailand as a Harm Reduction expert. Through their interactions with UNAIDS, the **INTERNATIONAL COMMUNITY OF WOMEN LIVING WITH HIV CENTRAL AFRICA** (Consortium of International Community of Women Living with HIV) was able to share information on improving the availability and accessibility of services to prevent mother-to-child transmission of HIV.

SPOTLIGHT ON COMMUNITY LED MONITORING

THE EURASIAN NETWORK OF PEOPLE WHO USE DRUGS (Consortium of People who use Drugs for Rights, Freedom and Autonomy) established community-led monitoring (CLM) for OAT, as stockouts and interruptions to OAT delivery in several Eastern Europe and Central Asia (EECA) countries have dramatically impacted health outcomes of people who use drugs. The Eurasian Network of People who Use Drugs monitors stocks of OAT medications, reviews policy documents relating to procurement and distribution of OAT and works with governments, the Global Fund, pharmaceutical companies, and relevant UN agencies to ensure uninterrupted provision of the treatment.

RESULTS MADE TO CONTRIBUTE TO INCREASE ACCESS TO HIV SERVICES IN 2022

INCREASE IN NEW CLIENTS ACCESSING SERVICES

One-third of reporting networks (15 of 58 networks or 26%) reported an increase in new clients.

GRANTEE HIGHLIGHT

- The **INTERNATIONAL COMMUNITY OF WOMEN LIVING WITH HIV WEST AFRICA** (Consortium of International Community of Women Living with HIV) reported that hospital records in selected facilities in the region indicated an increase in new ISP clients as a result of a media advocacy campaign for continuous access to high quality and non-discriminatory HIV and COVID-19 services for women and young girls living with HIV.
- Together with its country partners, **INTERNATIONAL COMMUNITY OF WOMEN LIVING WITH HIV EASTERN AFRICA** (Consortium of International Community of Women Living with HIV) advocated for access to DVR in East Africa. To-date Uganda and Kenya have included DVR in the HIV prevention guidelines and DVR has started reaching the market for demonstration purposes.

INCREASED RETENTION OF CLIENTS AND REDUCED LOSS-TO-FOLLOW-UP

7 networks reported increased retention of clients or reduced loss-to-follow-up.

GRANTEE HIGHLIGHT

WOMEN IN RESPONSE TO HIV/AIDS AND DRUG ADDICTION (Consortium of People who use Drugs for Rights, Freedom and Autonomy) report increased demand for harm reduction education and services among young women, young sex workers, and trans women who use drugs in East Africa. This is largely due to greater visibility of women who use drugs and the services they use within their networks. The intersectional research on sex work and drug use, in which WRADA served as co-investigators, also contributed to increased visibility.

OUTCOME INDICATOR 7

QUALITY OF SERVICES

Outcome: More accessible, rights-based, quality HIV services and programs for ISPs

This indicator measures the number of networks that worked to improve the quality of HIV services and programs for ISPs, from collecting evidence, to carrying out advocacy and ultimately contributing to change.

2022-2024 GRANT CYCLE: 53 of 83 networks (64%) planned to contribute to better quality of services during 2022-2024 cycle. **53 networks are considered 100% for this outcome.**

IN 2022: 41 of 53 (77%) networks carried out at least 81 activities towards this outcome in 2022. The table below shows their progress.

In 2022, 30 of 53 networks (57%) documented evidence for advocacy, 35 networks (66%) carried out advocacy campaigns to improve quality of services and 14 (26%) networks reported positive change linked to their advocacy.

Progress towards Improved Quality of Services		Planned for 2022-2024		2022 progress		2023 progress	2024 progress	Cumulative for 2022-2024
		# of Networks	% of 53 Reporting Networks	# of Networks	% of 53 Reporting Networks			
Foundational	Network generated credible evidence for advocacy	50	94%	30	57%			
Early action	Network carried out a campaign or advocacy activities to improve quality of services for ISPs	46	87%	35	66%			
	Network gained access to or representation in a state's or multilateral donor's program planning or review process	16	30%	7	13%			
Advanced action	Network utilized a UN process or participated in a national program's planning, review, or development process to improve quality of services	25	47%	8	15%			
Results	Better quality of programs and services reported by ISPs			14	26%			

Improved quality of HIV and other health services for ISPs is intricately linked to increased access: people at risk of or affected by HIV are more likely to seek and continue care if the services they receive meet their needs, are non-judgmental, and appropriate. RCF measures the number of networks that engaged in advocacy for increased quality of HIV services and programs in 2022. RCF defines advocacy outcome of this indicator as contributing to more accessible, rights-based, quality HIV services and programs for ISPs.

In 2022, half of all networks (41 of 83 networks or 49%) conducted at least one activity to contribute to increased quality of HIV services and programs. During the 2022 funding year, networks conducted at least

81 advocacy activities internationally to increase quality of services for ISPs. During the 2022 funding year, networks worked to increase quality of services by:

- **Amplifying breakthrough strategies, tools, and comprehensive service delivery models** that accelerate HIV case finding, linkage and access to treatment (Global Network of Young People living with HIV),
- **Improving harm reduction services** available (Eurasian Harm Reduction Association, Health Without Barriers, International Drug Policy Consortium, Youth RISE),
- **Providing community-based HIV services** related to rapid testing, linkage to care, mental health, and harm reduction (GAYLATINO),
- **Providing gender-affirming care** (Global Action for Trans* Equality and Asia Pacific Network of People Living with HIV/AIDS),
- **Decreasing stigma by healthcare and prison workers** (Caribbean Vulnerable Communities, Health Without Barriers, Southern Africa AIDS Information Dissemination Service, International Community of Women living with HIV West Africa, and Youth LEAD),
- **Ensuring the provision of ART** (MENA Rosa, Middle East and North Africa Network of People who Use Drugs, Prisoner Re-Integration & Empowerment Organisation), and
- **Improving health services for migrant workers** who face increased stigma (Coordination of Action Research on AIDS and Mobility in Asia).

EVIDENCE FOR ADVOCACY

Nearly three-quarters of reporting networks (30 of 53 networks or 57%) generated evidence through community-led documentation, data collection, and surveys to inform their advocacy efforts.

The findings were reflected in advocacy position papers and reports as part of advocacy for better quality of HIV services and programs for ISPs.

GRANTEE HIGHLIGHT

The **EURASIAN UNION OF ADOLESCENTS AND YOUTH “TEENERGIZER”** (Eurasian Regional Consortium) conducted a survey to identify mental health needs of young people living with HIV in Eastern Europe and Central Asia; the **EURASIAN HARM REDUCTION ASSOCIATION** (Eurasian Regional Consortium) developed [a position paper](#) on the quality of harm reduction services to highlight the importance of ensuring the quality of harm reduction services and provided practical recommendations for quality improvements.

GRANTEE HIGHLIGHT

The **ASIA PACIFIC TRANSGENDER NETWORK** (Trans Asia Pacific and Africa Solidarity Consortium) released a [comprehensive report](#) to educate health care providers on providing trans cultural and clinical healthcare. **HARM REDUCTION INTERNATIONAL** (Harm Reduction Consortium) provided evidence to advocate for quality of harm reduction services for people who use drugs, including documenting impact of [harm reduction service disruptions](#) on women and indigenous people who use drugs.

GRANTEE HIGHLIGHT

As a prequalified technical assistance provider for the Global Fund's Community, Rights and Gender Initiative, the **EURASIAN COALITION FOR HEALTH, RIGHTS, GENDER AND SEXUAL DIVERSITY** (Eurasian Regional Consortium) provided technical assistance in evaluating effectiveness of CLM in several EECA countries, and training in the use and advocacy of data collected by CLM in Jamaica.

ADVOCACY STRATEGIES AND CAMPAIGNS CALLING FOR IMPROVEMENTS IN QUALITY OF SERVICES

In 2022, more than four-fifths of reporting networks (35 of 53 networks or 66%) implemented a campaign or other educational activities to improve quality of services for ISPs.

GRANTEE HIGHLIGHT

The **MIDDLE EAST AND NORTH AFRICA NETWORK OF PEOPLE WHO USE DRUGS** (Harm Reduction Consortium) organized World AIDS Day activities in Afghanistan, Pakistan, Morocco, Egypt, Tunisia, Lebanon, and Bahrain to improve how service providers interacted with people who use drugs and/or live with HIV and addressed issues of medication interruption.

GRANTEE HIGHLIGHT

The **PAEDIATRIC AIDS TREATMENT FOR AFRICA** (Vibrant and Young Voices Consortium) implemented "Me and My Health Provider" Campaign to raise awareness on the importance of improved quality, adolescent-friendly, and rights-based services for children, adolescents and young people.

GRANTEE HIGHLIGHT

The **SEX WORKERS RIGHTS ADVOCACY NETWORK IN CENTRAL, EASTERN EUROPE AND CENTRAL ASIA** facilitated capacity building through regional trainings on social protection, SRHR, budget advocacy, and community research. These trainings were the first steps for the development of national social protection and SRHR programs that are to be implemented in seven countries and the budget advocacy national activities in six countries.

ENGAGING WITH NATIONAL AND INTERNATIONAL BODIES ON QUALITY OF SERVICES FOR ISPS

One sixth of reporting networks (7 of 53 networks or 13%) gained access to or representation in a multi-lateral donor's or state's program planning or review process. Networks advocated for improved quality of services by engaging with national governments, UN agencies including UNAIDS, OHCHR, UNDP, WHO, UNICEF, and UNODC and with funding agencies including the Global Fund, PEPFAR, private trusts and foundations.

In addition, one-fifth of reporting networks (8 of 53 networks or 15%) utilized a UN process or participated in a national program planning, review, development process to improve quality of services.

GRANTEE HIGHLIGHT

PAEDIATRIC AIDS TREATMENT FOR AFRICA (Vibrant and Young Voices Consortium) led the 2022 Summit *Ending AIDS in Children, Adolescents and Young People: A Roadmap to 2030* in collaboration with UNICEF, UNAIDS, and the WHO to facilitate increased adoption and implementation of HIV services for children and young people.

RESULTS MADE TO IMPROVE QUALITY OF HIV SERVICES IN 2022

In 2022, nearly one-third of reporting networks (14 networks or 26%) reported better quality of programs and services by ISPs.

GRANTEE HIGHLIGHT

In 2022, **PAEDIATRIC AIDS TREATMENT FOR AFRICA** (Vibrant and Young Voices Consortium) reported increased satisfaction in services in Eswatini, Mozambique, Tanzania, Zimbabwe, Zambia, Kenya, and Uganda through their READY to Care scorecard. The **INTERNATIONAL TREATMENT PREPAREDNESS COALITION** reported that CLM data reveals service quality improvements at monitored facilities in Malawi and South Africa, including faster turnaround for viral load tests, while the six facilities in Malawi began screening for intimate partner violence before HIV testing, as a result of the CLM.

OUTCOME INDICATOR 8

INCREASED AND SUSTAINABLE FINANCING OF HIV RESPONSE

Outcome: Resources made available and spent properly to create better conditions for ISPs

This indicator measures the number of networks that advocate for increases in sustainable financing of the HIV response for ISPs. This includes budget monitoring, advocacy with domestic and international funders, and ultimately increased commitments.

2022-2024 GRANT CYCLE: 24 of 83 networks (29%) planned to contribute to better quality of services during the 2022-2024 cycle. **24 networks are considered 100% for this outcome.**

IN 2022: 17 of 24 (71%) networks carried out at least 27 activities towards this outcome in 2022.

The table below shows their progress.

In 2022, 8 of 24 networks (33%) conducted budget monitoring to inform their advocacy, 10 networks (42%) engaged in advocacy, and 6 (25%) ultimately saw their advocacy contribute to increased funding commitments

Progress towards Increasing and Sustaining Financing of the HIV Response		Planned for 2022-2024		2022 progress		2023 progress	2024 progress	Cumulative for 2022-2024
		# of Networks	% of 24 Reporting Networks	# of Networks	% of 24 Reporting Networks			
Foundational	Network undertook budget monitoring and analysis to develop advocacy plan	11	46%	8	33%			
	Network developed advocacy plans to push for increased financing, based on international or regional commitments, or existing budget analysis	13	54%	9	38%			
Early action	Network implemented a campaign or other advocacy activities to push for increased sustainable financing	17	71%	10	42%			
	Network has gained access to or representation in a multi-lateral donor's or state's budgeting process	12	50%	5	21%			
Advanced action	Network has taken part in a donor or national budget review or development process	16	67%	4	17%			
Results	Network's advocacy contributed to an increase in financial commitments to HIV response and ISP programming			6	25%			

HIV response for ISPs remains underfunded. The COVID-19 pandemic has further contributed to funding insecurity. Civil society and community-led networks play a role in representing ISP needs in spaces where decisions are made about funding for HIV programs and services, both internationally and domestically. They document funding needs, conduct budget monitoring and analysis, develop and implement advocacy campaigns for sustainable financing of the HIV response, and engage funders in direct advocacy.

This outcome indicator measures networks' progress in advocating for more sustainable funding for HIV response for ISPs. RCF defines the advocacy outcome of this indicator as resources made available and spent properly to create better conditions for ISPs in regard to HIV and human rights.

In 2022, one-fifth of all networks (17 of 24 or 71%) conducted advocacy activities to increase financing of HIV response for ISPs internationally. Together, they conducted a least 27 advocacy activities.

BUDGET MONITORING AND ANALYSIS

In 2022, nearly half of all reporting networks (9 of 24 networks or 38%) undertook budget monitoring and analysis to develop advocacy plans.

GRANTEE HIGHLIGHT

CENTRAL ASIAN ASSOCIATION OF PEOPLE LIVING WITH HIV (Positive Universe Consortium) trained their-in-country partners to actively hold their governments accountable for fulfilling universal healthcare commitments. Such training for in-country partners better equips them to undertake budget monitoring and develop advocacy plans.

Nearly half of all reporting networks (8 of 24 networks or 38%) also developed advocacy plans to push for increased financing, based on international or regional commitments, or existing budget analysis. Nearly one-quarter of networks (4 of 24 networks or 17%) took part in a donor or national budget review or development process.

ADVOCACY STRATEGIES AND CAMPAIGNS TO PUSH FOR INCREASED SUSTAINABLE FINANCING

More than half of all reporting networks (10 of 24 networks or 42%) developed a campaign or other advocacy activities to push for increased sustainable financing.

GRANTEE HIGHLIGHT

AIDS AND RIGHTS ALLIANCE FOR SOUTHERN AFRICA supported young women-led organizations in several Sub-Saharan countries to lead on health budget advocacy for the inclusion of adolescent girls and young women living with HIV and SRHR programming in their respective countries.

ENGAGING WITH NATIONAL AND INTERNATIONAL BODIES ON QUALITY OF SERVICES FOR ISPS

More than one-quarter of reporting networks (5 of 24 networks or 21%) gained access to or representation in a multi-lateral donor's or state's budgeting process.

GRANTEE HIGHLIGHT

A representative of **GLOBAL NETWORK OF PEOPLE LIVING WITH HIV** was appointed to the Civil Society Engagement Mechanism for Universal Healthcare 2030, a platform where private sector, civil society, international organizations, academia, and government organizations work together to accelerate equitable and sustainable progress towards universal health coverage.

RESULTS MADE TOWARDS SUSTAINABLE FINANCING OF HIV RESPONSE IN 2022

In 2022, more than one-quarter of reporting networks (5 of 24 networks or 21%) reported results of their advocacy yielding increased financial commitments to the HIV response and ISP programming.

GRANTEE HIGHLIGHT

The **PRISONER RE-INTEGRATION AND EMPOWERMENT ORGANIZATION** (Youth Prison Population Alliance) reported that activists in southern Africa were able to increase resources available at the national level for young people in prison because of their work with the Ministry of Home Affairs and Ministry of Health.

Activists in France were part of a successful campaign to increase France's contribution to the Global Fund.

GRANTEE HIGHLIGHT

COALITION PLUS's advocacy team was part of a successful campaign, resulting in France pledging an increased commitment at the Global Fund Replenishment Conference. Leading up to and during the Conference, this grantee advocated for a 30% increase in France's contribution to the Global Fund. In 2022, France committed to increase their commitment to the Global Fund by 23%; a portion of these resources will go to CSOs for the implementation of health programs throughout the world.



Co-ordination of Action Research on AIDS and Mobility in Asia, Training on HIV prevention for aspirant women migrant workers in Sri Lanka.

OUTCOME INDICATOR 9

IMPROVED HIV-RELATED FISCAL ACCOUNTABILITY

Outcome: Resources made available and spent properly to create better conditions for ISPs

This indicator measures the number of networks that advocate for better accountability in financing the HIV response to ensure that funding commitments result in better funding allocations. This includes expenditure monitoring, advocacy to influence budgeting and spending, and ultimately funding delivered to ISP programs.

2022-2024 GRANT CYCLE: 6 of 83 networks (7%) planned to contribute to better quality of services during 2022-2024 cycle. **6 networks are considered 100% for this outcome.**

In 2022: 7 of 6 (117%) networks carried out at least 10 activities towards this outcome in 2022. The table below shows their progress.

In 2022, 4 of 6 networks (67%) trained staff in budget and expenditure monitoring and 2 networks (33%) engaged with donor or state budget process to influence spending. No increased allocations were reported yet in the first year of the grant cycle.

Progress towards Increasing and Sustaining Financing of the HIV Response		Planned for 2022-2024		2022 progress		2023 progress	2024 progress	Cumulative for 2022-2024
		# of Networks	% of 6 Reporting Networks	# of Networks	% of 6 Reporting Networks			
Foundational	Network has staff trained on budget and expenditure monitoring and accountability	2	33%	4	67%			
	Network established a working partnership with budget monitoring groups or coalitions	5	83%	2	33%			
Early action	Network conducted monitoring and analysis of donor or state expenditure against their commitments	3	50%	1	17%			
Advanced action	Network developed asks and conducted advocacy as a result of budget or expenditure monitoring and accountability	6	100%	2	33%			
	Network engaged with the budget processes of donors or states to influence spending	4	67%	2	33%			
Results	Network reports increased financial commitments delivered to programs for ISPs in the HIV response			0				

Networks funded by RCF engage in several activities to ensure that financial commitments are delivered or expended (e.g., budget disbursed) to HIV response and ISP programming. This outcome indicator measures the number of networks that are engaged in advocating for improved accountability in financing of the HIV response and ISP programming and their progress towards positive change. RCF defines the advocacy outcome of this indicator as resources made available and spent properly to create better conditions for ISPs in regard to HIV and human rights.

In 2022, 7 networks conducted at least 10 activities to contribute to improved HIV-related fiscal accountability.

TRAINING ON MONITORING AND ACCOUNTABILITY TRACKING

In 2022, 4 of 6 networks that report on this outcome trained their staff in monitoring and accountability tracking for national, subnational, or international donor budgets and expenditures.

GRANTEE HIGHLIGHT

The **GLOBAL ACTION FOR TRANS* EQUALITY** (Trans* Health and Rights HIV Advocacy Consortium) provided trans*, gender diverse, and intersex organizations with free online training through its training academy on topics such as HIV monitoring and engagement on National Strategic Plans.

ENGAGEMENTS AND PARTNERSHIPS FOR BUDGET MONITORING

2 of 6 reporting networks established a working partnership with budget monitoring groups or coalitions and 2 networks engaged with the budget processes of donors or states to influence spending.

GRANTEE HIGHLIGHT

The **COALITION FOR CHILDREN AFFECTED BY AIDS** (Vibrant and Young Voices Consortium) worked in partnership with Avenir Health, World Health Organization, UNAIDS, and UNICEF to produce the first global analysis of financing for children and adolescents [report](#). It also engaged with the Global Fund, PEPFAR, and the UN Global Alliance to End Pediatric AIDS to prioritize children, adolescents, and parents from key population families in HIV response and commitments.

ADVOCACY STRATEGIES AND CAMPAIGNS DEVELOPED

2 networks developed asks for their advocacy.

GRANTEE HIGHLIGHT

The Coalition for **CHILDREN AFFECTED BY AIDS** created a new advocacy messaging and guidance on ethical storytelling and built the community advocacy capacity for AIDS 2022. Overall, this activity engaged a total of 12,068 key stakeholders and 52 new members joined the Coalition Advocate Network.

RESULTS TOWARDS INCREASED FUNDING DELIVERED TO HIV RESPONSE IN 2022

While no networks reported results towards increased funding delivered or expended to HIV response in 2022, all 6 reporting networks believed it was too early to tell if the activity or activities they implemented resulted in increased funding delivered or expended to HIV response. Throughout the remainder of this funding cycle we will monitor results for this outcome indicator.

FINANCIAL REPORT 2022

2022 – 2024 GRANT CYCLE

(all \$ are USD)

Figure A:
Funders’ Contributions to the RCF Pool – 2022–2024 (\$39.2 Million)

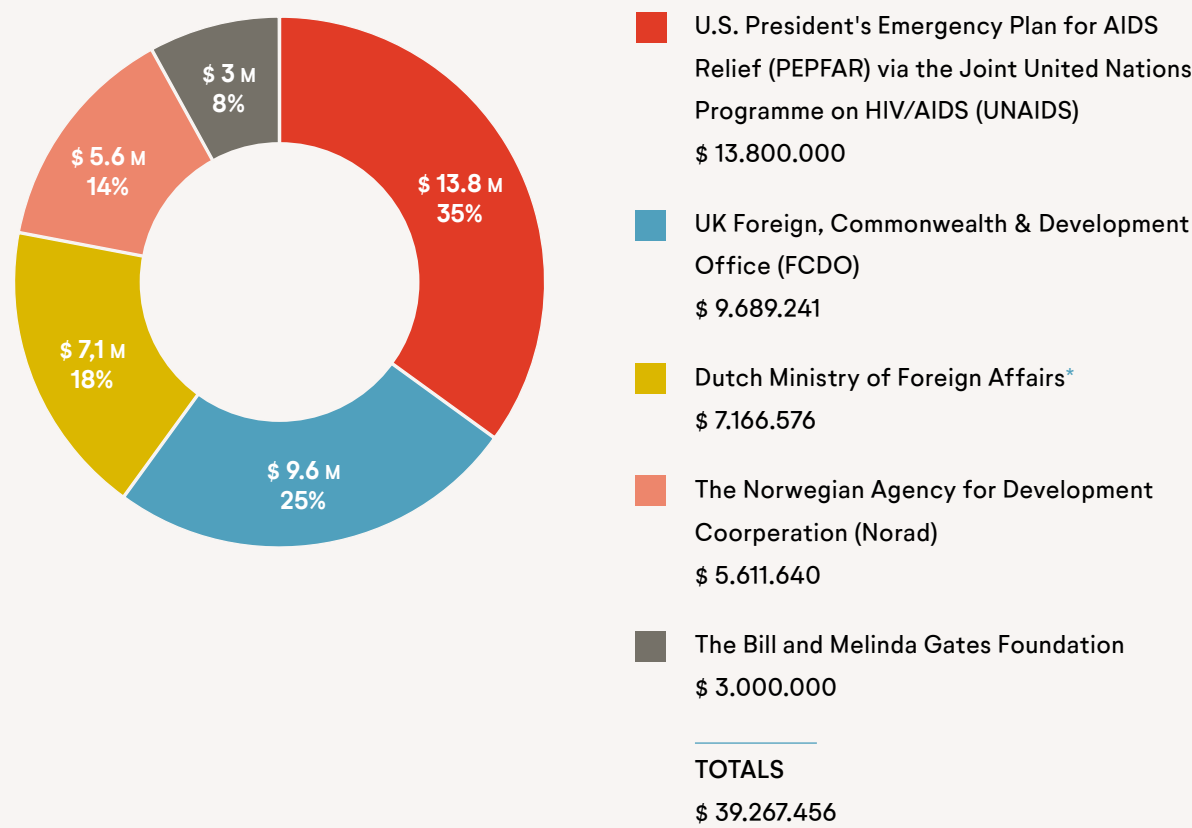


Figure B:
Total RCF Expenditure 2022 (\$11.7 Million)

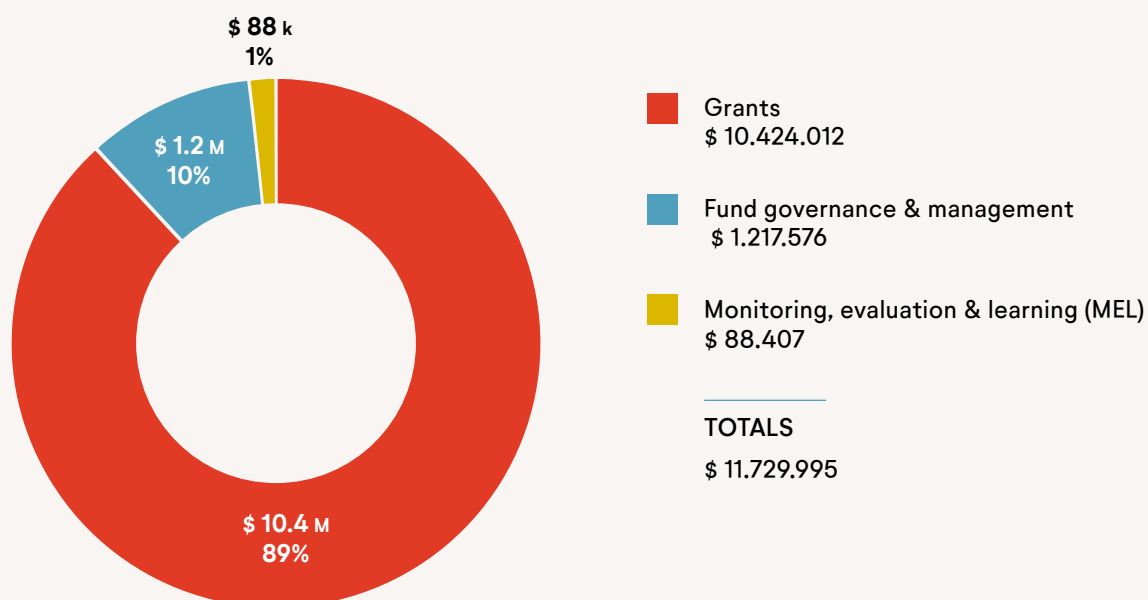


Figure C:
Total RCF Grantee Expenditure 2022 (\$11 million)

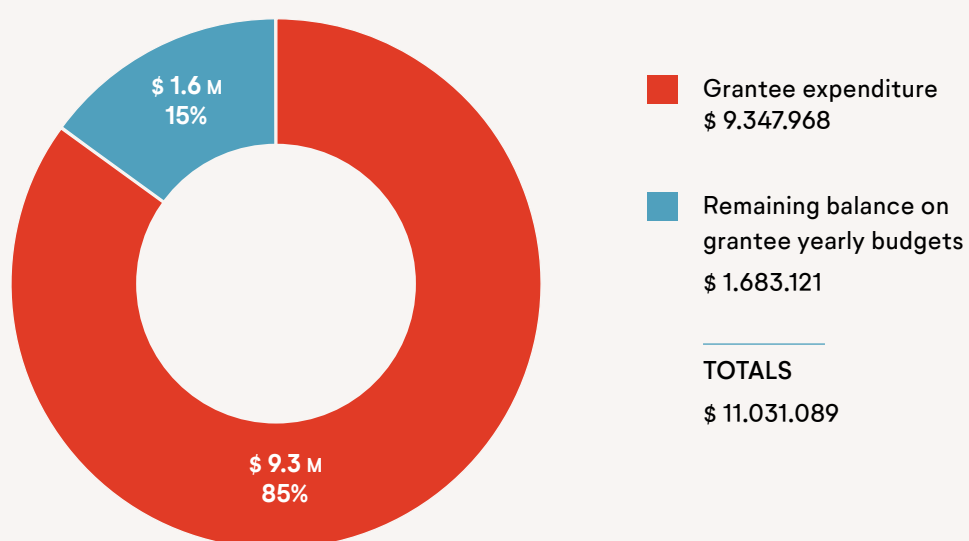


Figure D:

RCF Grants 2022 – Core vs. Activity Expenditures (\$9.3 Million)

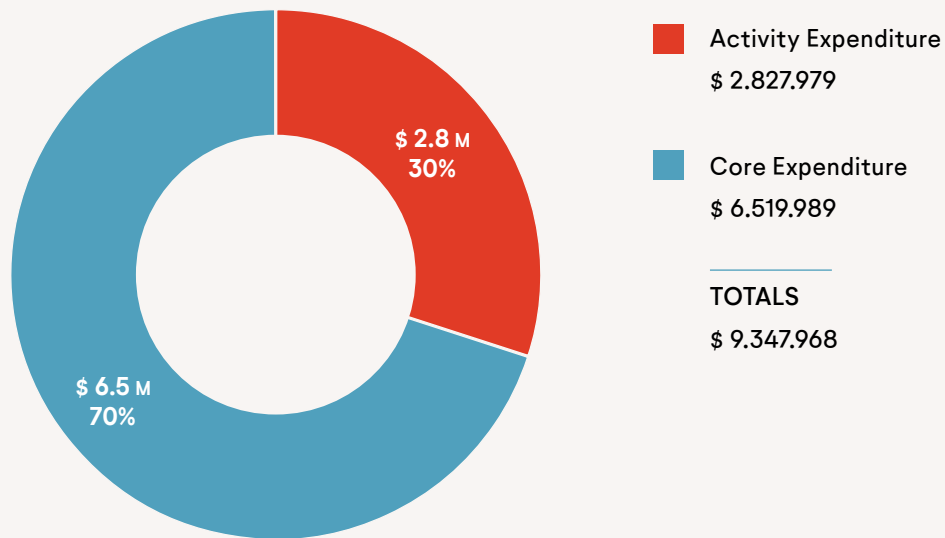


Figure E:

RCF Grants Core Expenditures 2022 (\$6.5 Million)

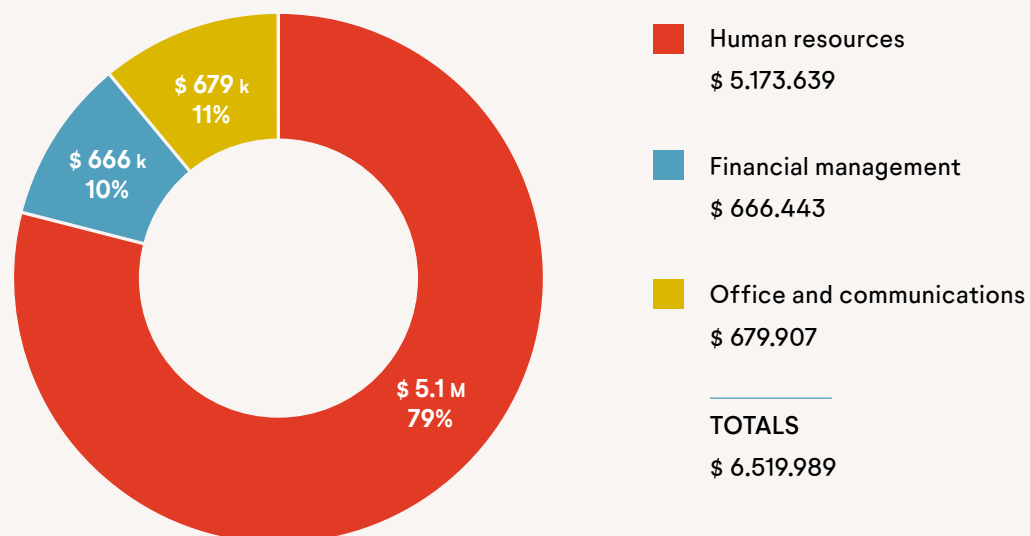


Figure F:

2022 Grantee Activity Expenditure per ISP (\$2.8 Million)

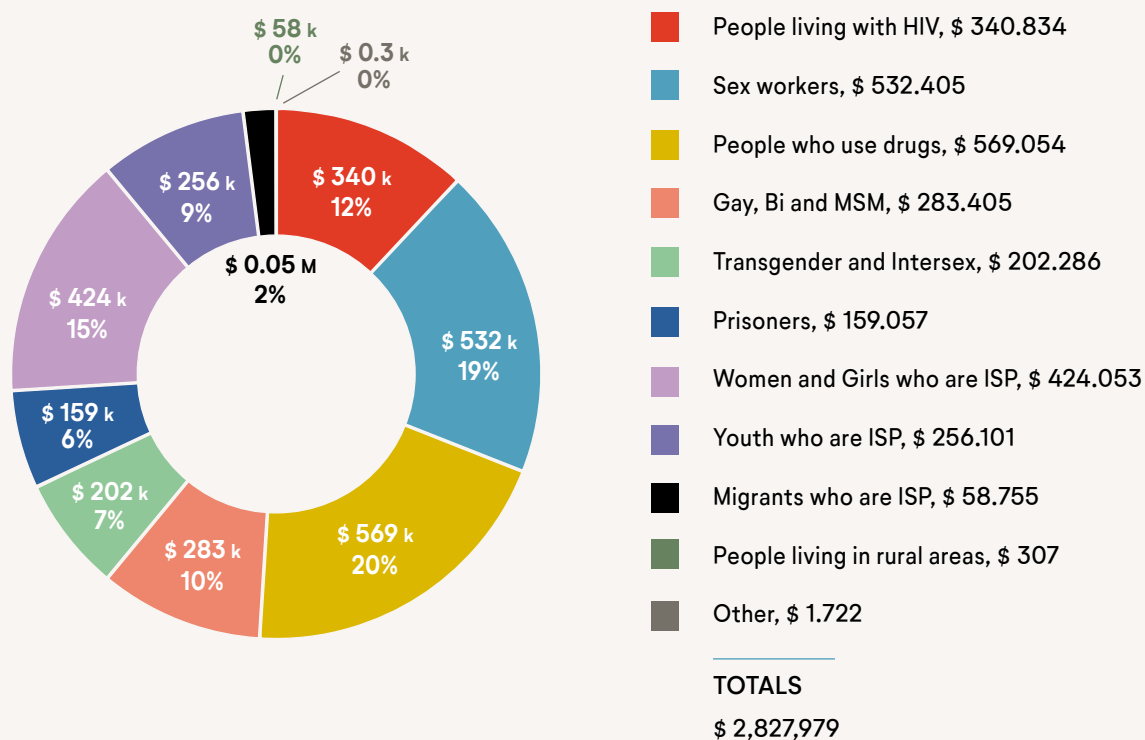


Figure G:

2022 Grantee Activity Expenditure per Region (\$ 2.8 Million)

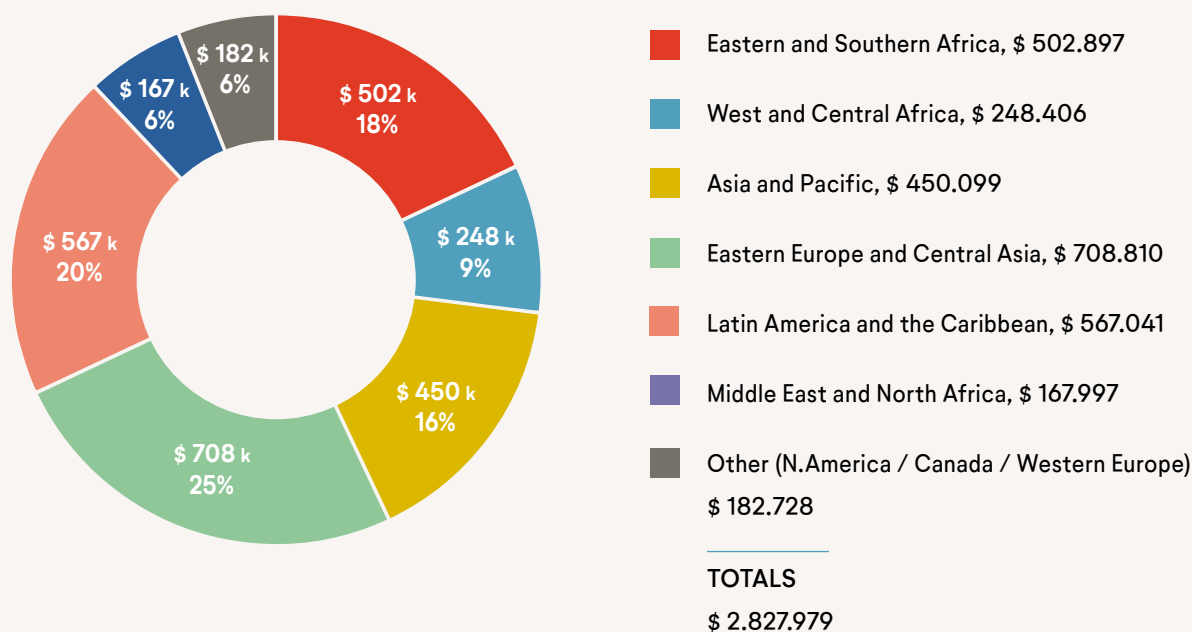


Figure H:

2022 Grantee Activity Expenditure per Outcome Areas (\$ 2.8 Million)

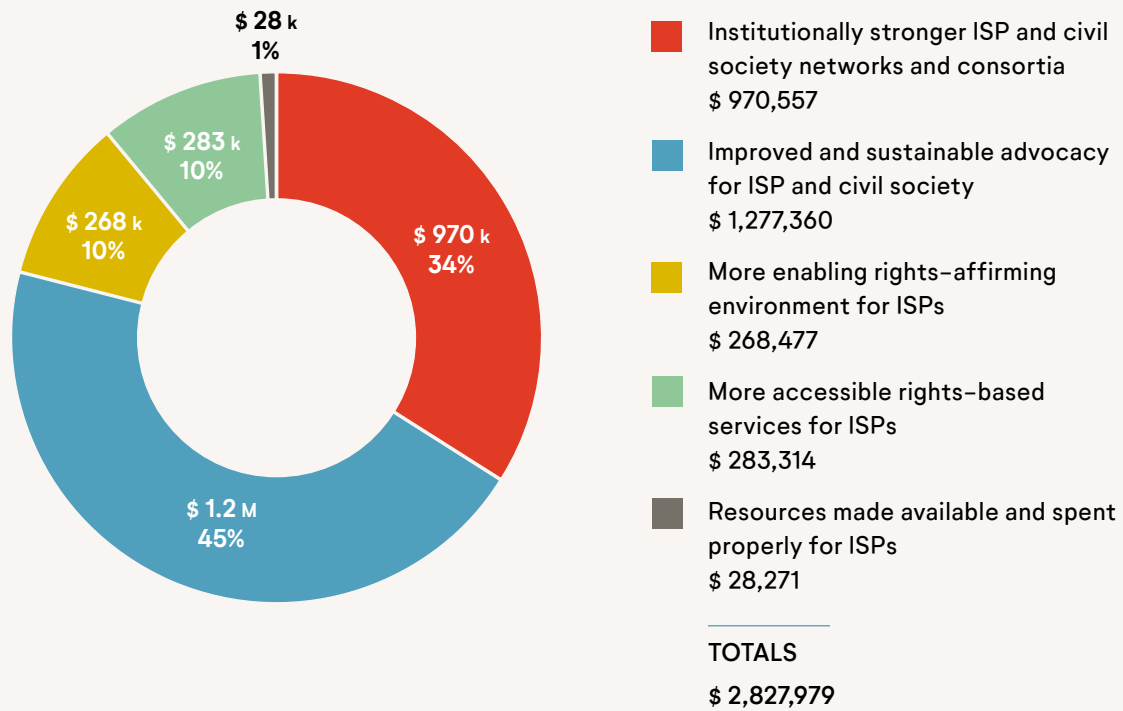


Figure I:

2022 Grantee Activity Expenditure per Result Area (\$ 2.8 Million)

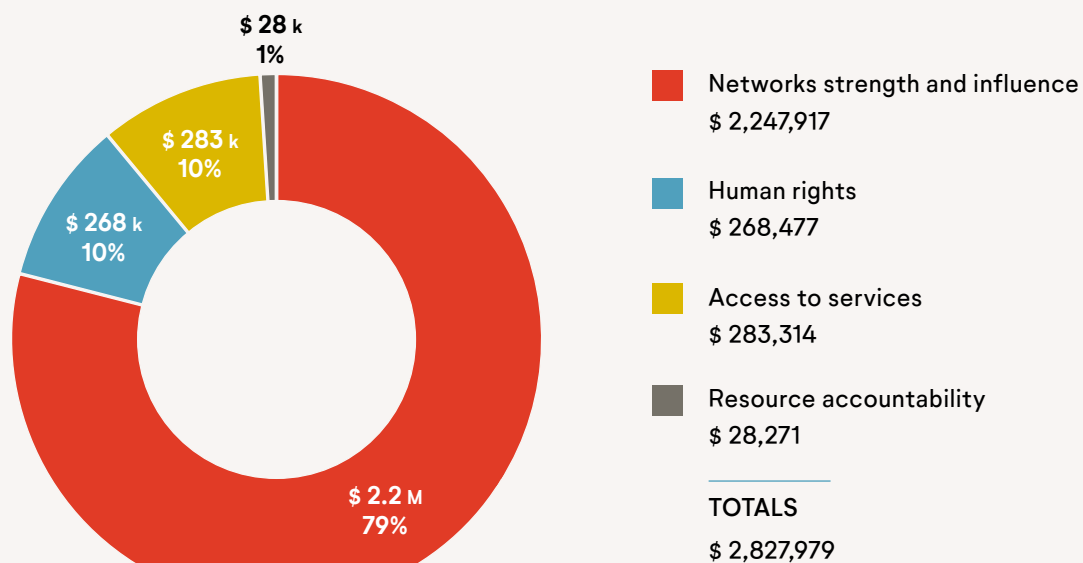
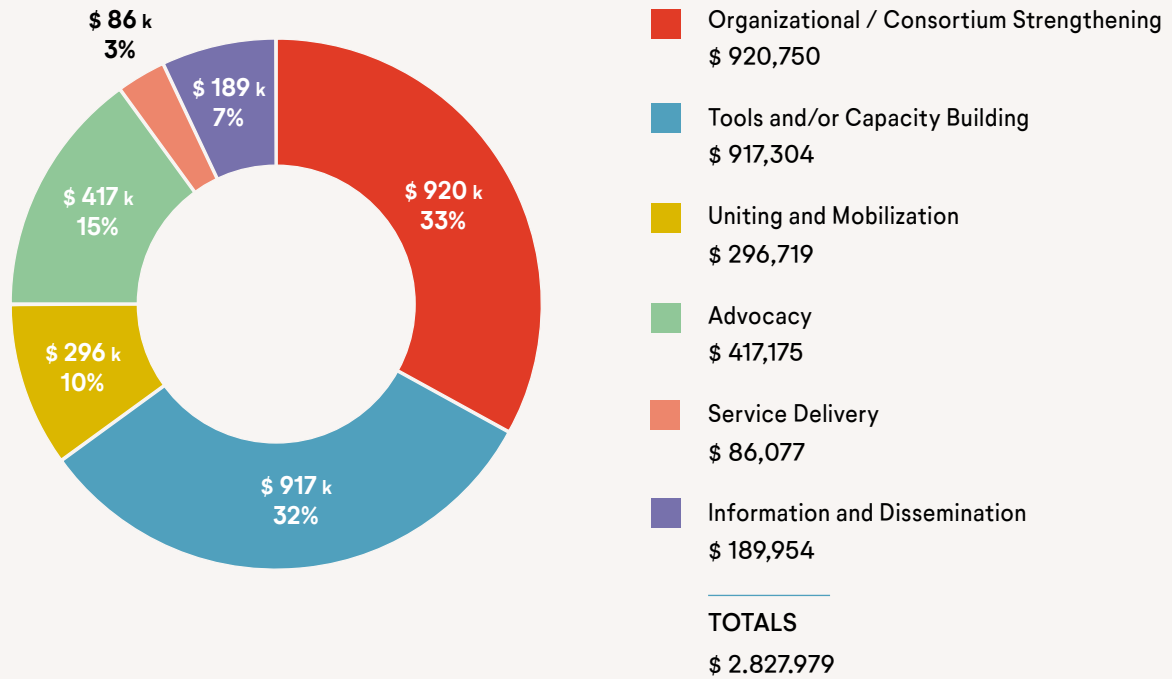
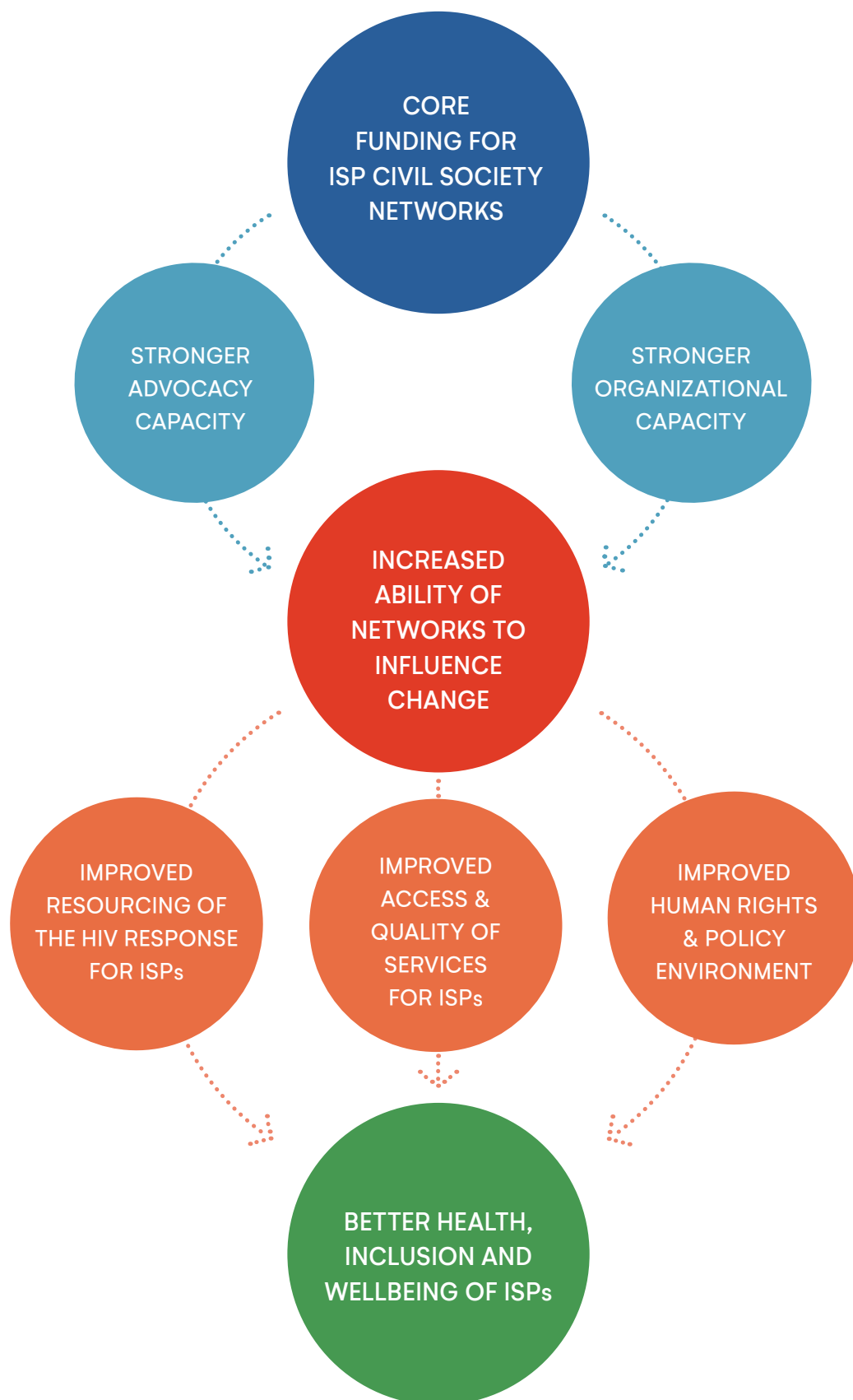


Figure J:

2022 Grantee Activity Expenditure per Category of Activity (\$ 2.8 Million)



ANNEX 2: RCF'S THEORY OF CHANGE



ANNEX 2: MEL FRAMEWORK

OUTCOMES		ENVIRONMENTAL INDICATORS	OUTCOME INDICATORS			
Networks strength and influence	<ul style="list-style-type: none"> Institutionally stronger ISP and civil society networks and consortia 	EI 1: The legal and policy framework allows for freedom of association for ISP/ civil society networks, including their right to establish/register and operate as non-profit/ non-governmental entities without discrimination.	OI 1a: Number of networks with strengthened organizational status.			
			Category 1	Category 2	Category 3	Category 4
			Network has a newly acquired fiscal agent (<2 years)	Network has a stable relationship (>2 years) and long-term agreement with a fiscal agent	Network is in the process of registering	Network is registered
			OI 1b: Number of networks with strengthened core staff structure.			
			Category 1	Category 2	Category 3	Category 4
			Network has volunteers to carry out a defined scope of work and has no paid staff members	Network has one paid staff member and volunteers to carry out a defined scope of work	Network has more than one paid staff member and may have volunteers to carry out a defined scope of work	Network has had a core team of full-time paid staff to carry out scope of work for at least 2 years
			OI 2a: Number of networks showing strengthened fiscal capacity and accountability.			
			Category 1	Category 2	Category 3	Category 4
			Network has a fiscal agent which manages its accounting	Network has its own accounting system and at least a part-time staff member devoted to finance	Network has at least one paid dedicated finance staff member to manage accounting AND Network Board of Directors has financial oversight	Network conducts its own regular organizational and project audits
			OI 2b: Number of networks showing strengthened financial sustainability.			
			Category 1	Category 2	Category 3	Category 4
			Network has at least one source of funding	Network has more than one source of funding	No single donor accounts for more than 30% of network's funding AND Network has a costed strategic plan or a resource mobilization strategy in place	Network has secured funding to implement its strategic plan for at least two more years

ANNEX 2: MEL FRAMEWORK

OUTCOMES		ENVIRONMENTAL INDICATORS	OUTCOME INDICATORS			
Networks strength and influence	• Institutionally stronger ISP and civil society networks and consortia	EI 1: The legal and policy framework allows for freedom of association for ISP/ civil society networks, including their right to establish/register and operate as non-profit/ non-governmental entities without discrimination.	OI 3: Number of networks more representative of their constituencies and more democratically governed			
			Category 1	Category 2	Category 3	Category 4
			Network has a process in place to democratically elect a governance body (e.g. Board of Directors) from among the network members OR The network has open membership, whose members participate in governance elections in line with its membership statute.	Board leadership regularly rotates and adheres to principles of diversity in selecting new leadership OR Network members actively participate in the governance elections of the network (at least 30% of members vote in elections)	Board of Directors actively engages in governance of the network and is accountable to its constituents from among the members of the network	At least 50% of Board is comprised of ISPs OR Board is representative of all geographic and population diversity of its constituents OR Network members actively participate in the governance elections of the network (at least 45% of members vote in elections)

OUTCOMES		ENVIRONMENTAL INDICATORS	OUTCOME INDICATORS			
Networks strength and influence	• Institutionally stronger ISP and civil society networks and consortia	EI 2: ISP/civil society networks experience freedom of expression without harassment by government and other influential entities.	OI 4: Number of networks showing strengthened influence and capacity to unite and mobilize movements			
			Category 1	Category 2	Category 3	Category 4
			Network has developed a formal or informal advocacy strategy in consultation with its membership (of network or consortium) OR Network has established relations with new allies and partners	Network has played a significant role in at least one joint advocacy campaign with other partners OR Network engages in cross-sector partnership or working relationships with government agencies, UN agencies, bi-lateral or multi-lateral donors OR Network has expanded its active membership base by at least 20%	Network is active in an issue-based coalition beyond its target ISP or beyond HIV-related issue OR Network holds formal membership in a coordination council or board delegation on a key topic for its constituent ISP(s)	Network plays a formal and regular representative role in steering HIV and/or health policy for target ISP at national/regional or global levels OR Network has initiated and leads issue-based coalition(s) OR Network has demonstrated ability to collaborate with other advocates to bring issues to a global agenda and affect change OR Network plays a leadership role in a coordination council or board delegation on a key topic for its constituent ISP(s)

ANNEX 2: MEL FRAMEWORK

OUTCOMES		ENVIRONMENTAL INDICATORS	OUTCOME INDICATORS			
Networks' influence on access of inadequately served populations to justice, health and resources	• More enabling and rights-affirming social, policy and legal environment for ISPs	EI 3: ISP rights are protected by policy and/or legislation, which is enforced and allows for effective redress of violations.	OI 5: Number of networks contributing to an improved human rights environment for at least one ISP			
			Category 1	Category 2	Category 3	Category 4
			<p>Network has generated credible evidence on which an advocacy strategy/campaign can be based</p> <p>OR</p> <p>Network has gained increased understanding of government or UN or funding agency mechanisms to be targeted for advocacy</p>	<p>Network has developed an advocacy strategy or campaign to advocate for improvements in the rights of ISPs</p> <p>OR</p> <p>Network has gained access to or representation in a UN or state body to apply influence</p>	<p>Network has implemented campaign to promote human rights</p> <p>OR</p> <p>Network has supported strategic litigation</p> <p>OR</p> <p>Network has utilized a UN or parliamentary hearing process to apply influence</p>	<p>Campaign or strategic litigation results in legal or policy change</p> <p>OR</p> <p>Campaign or litigation results in improved practice under existing law or policy</p>

ANNEX 2: MEL FRAMEWORK

OUTCOMES		ENVIRONMENTAL INDICATORS	OUTCOME INDICATORS			
Networks’ influence on access of inadequately served populations to justice, health and resources	• More accessible, rights-based, quality HIV services and programs for ISPs	EI 4: ISP experience full access to rights-based, quality HIV services.	OI 6: Number of networks contributing to increased <u>access</u> to HIV services and programs.			
			Category 1	Category 2	Category 3	Category 4
			Network has generated credible evidence on which an advocacy campaign or educational activities can be based	Network has developed an advocacy strategy or campaign to advocate for improvements in the health outcomes of ISPs OR Network has gained access to or representation in a multi-lateral donor’s or state’s program	Network has implemented campaign or other educational activities to influence accessibility of services OR Network has implemented campaign or other educational activities to increase ISP awareness of and demand for services OR Network has utilized a UN process or participated in a national program planning or review or development process to affect changes on access to services	ISP services report increase in new clients OR ISP services report increased retention of clients/reduced loss-to-follow-up
			OI 7: Number of networks contributing to increased <u>quality</u> of HIV programs and services.			
			Category 1	Category 2	Category 3	Category 4
			Network has generated credible evidence on which an advocacy campaign or educational activities can be based	Campaign or other educational activities implemented to improve quality of services for ISPs OR Network has gained access to or representation in a multi-lateral donor’s or state’s program planning or review process	Desired changes made in structure, function or delivery of services for ISPs OR Network has utilized a UN process or participated in a national program planning, review or development process to affect changes on quality of services	Better quality of programs and services reported by ISPs

ANNEX 2: MEL FRAMEWORK

OUTCOMES		ENVIRONMENTAL INDICATORS	OUTCOME INDICATORS			
Networks’ influence on access of inadequately served populations to justice, health and resources	• Resources made available and spent properly to create better conditions for ISPs with regards to HIV and human rights	EI 5: The funding environment allows for sufficient allocation of resources for HIV prevention, testing, care, and treatment.	OI 8: Number of networks contributing to increased and sustainable financing of HIV response including ISP programs.			
			Category 1	Category 2	Category 3	Category 4
		Network has undertaken budget monitoring and analysis to develop advocacy plans OR Network has developed advocacy plans to push for increased financing, based on international or regional commitments, or existing budget analyses	Network has implemented a campaign or other advocacy activities to push for increased sustainable financing OR Network has gained access to or representation in a multi-lateral donor’s or state’s budgeting process	Campaign or other advocacy activities contributed to an increase in financial commitments made (e.g. budget allocations) to HIV response and ISP programming OR Network has taken part in a donor or national budget review or development process	Increased financial commitments delivered to HIV response, particularly funding of ISP-related programs	
		EI 6: The funding environment allows for sufficient allocation of resources for advocacy and other supportive enabling environment programming for ISPs.	OI 9: Number of networks contributing to improved HIV-related fiscal accountability.			
	Category 1		Category 2	Category 3	Category 4	
			Network has staff trained on budget and expenditure monitoring and accountability OR Network has established a working partnership with budget monitoring groups or coalitions	Network conducts monitoring and analysis of donors or states expenditure against their commitments	Network develops asks and conducts advocacy as a result of budget or expenditure monitoring and accountability OR Network engages with the budget processes of donors or states to influence spending	A change in budgeting or expenditure is made as a result of advocacy
Impact:		• Better health, social inclusion and wellbeing of the ISPs				

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