
**Report:
Strategic
Review of the
Global Network
of People Living
with HIV**

September 2010

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ACKNOWLEDGEMENTS

The author of this report is sincerely grateful to the many individuals, organizations and institutions that participated in the Strategic Review of GNP+. In particular, thanks are given to the staff and Board of GNP+, the coordinators of the regional and sub-regional PLHIV networks and the Strategic Review Working Group.

ACRONYMS

Alliance	International HIV/AIDS Alliance
APN+	Asia Pacific Network of People Living with HIV
ART	Antiretroviral therapy
CEO	Chief Executive Officer
CRN+	Caribbean Regional Network of People Living with HIV
CSO	Civil society organisation
CSS	Community systems strengthening
DfID	Department for International Development
EATG	European AIDS Treatment Group
ECUO	East Europe and Central Asia Union of People Living with HIV
GIPA	Greater involvement of people living with HIV
Global Fund	Global Fund to Fight AIDS, Tuberculosis and Malaria
GNP+	Global Network of People Living with HIV
GNP+ NA	Global Network of People Living with HIV - North America
HSS	Health systems strengthening
IAC	International AIDS Conference
IAS	International AIDS Society
ICASO	International Council of AIDS Service Organisations
ICW	International Community of Women Living with HIV
IFRC	International Federation of Red Cross and Red Crescent Societies
INPUD	International Network of People who Use Drugs
IPPF	International Planned Parenthood Federation
ITPC	International Treatment Preparedness Coalition
MDGs	Millennium Development Goals
MoU	Memorandum of Understanding
MSM	Men who have sex with men
MSMGF	Global Forum on HIV and MSM
NAP+	Network of African People Living with HIV
NGO	Nongovernmental organisation
NSWP	Network of Sex Worker Projects
PEPFAR	President's Emergency Plan for AIDS Relief
PLHIV	People living with HIV
RedLA+	Latin American Network of People Living with HIV
SRHR	Sexual and reproductive health and rights
TORs	Terms of Reference
UNAIDS	United Nations Joint Programme on AIDS
WAC	World AIDS Campaign
WHO	World Health Organisation

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EXECUTIVE SUMMARY

Introduction

In June-August 2010, the Global Network of People Living with HIV (GNP+) undertook a comprehensive Strategic Review – to inform a new Strategic Plan for 2011-15 and guide the organisation within the changing environment for HIV and global health. The Review was approved by the International Board of GNP+, managed by a Strategic Review Working Group and implemented by an independent consultant. It focused on three areas – the role, work and governance of GNP+ - and explored key questions (such as how GNP+ could make a more effective contribution to the global response to HIV). The Review looked backwards (reflecting on GNP+'s strengths and weaknesses in 2006-10) and forwards (identifying strategic issues and options for the future). Its remit was the competencies and strategies of the International Secretariat of GNP+ (not the wider PLHIV movement or regional networks, nor serving as an evaluation of GNP+'s programmatic and advocacy work). The Review engaged over 1,160 stakeholders through five methods:

1. **Global e-survey among PLHIV** in English, Chinese, French, Spanish and Russian, with 662 surveys completed and up to 995 responses to some questions from over 129 countries.
2. **Focus group discussions** involving 121 participants from over 50 countries through: 4 discussions with stakeholder groups (GNP+ Board, GNP+ staff, World AIDS Campaign (WAC) staff and GNP+ national programme partners); and 6 with constituents of regional and sub-regional PLHIV networks (in Asia Pacific, Sub Saharan Africa, Latin America and East Europe and Central Asia).
3. **In-depth interviews** with 38 representatives of institutions (of PLHIV organizations, donors, multilateral agencies, etc) and 11 key informants (leaders within the HIV and PLHIV movements).
4. **Short questionnaire among GNP+ programme partners**, with 4 responses received.
5. **Literature review** of over 20 GNP+ strategies, plans, proposals and reports relating to 2006-10.

The Strategic Review was complemented by two further processes to address the future role of GNP+: Needs Assessment of Regional PLHIV Networks; and GNP+ Environment Mapping of key civil society actors.

The Consultant thanks all of the participants in the Review and confirms that all inputs were used in the preparation of this Executive Summary and Report that, as syntheses, focus on the key issues highlighted.

Context to GNP+ Strategic Review

The Review took place at a critical time for the response to HIV and for GNP+. The global environment is changing, characterized by: a pandemic with 33.4 million PLHIV; 2010 targets for Universal Access unmet; changing architecture; economic crisis; 're-medicalisation' of HIV; move towards wider responses to health and the Millennium Development Goals (MDGs); and increased attention to human rights. Meanwhile, GNP+ has undergone rapid growth; faces critical challenge as an HIV network; and functions in a crowded civil society arena, with increasing efforts to consolidate.

'Snapshot' of GNP+ achievements in 2006-10

Since 2006, GNP+ has: developed a new model of evidence collection; increased involvement with regional PLHIV networks and individual PLHIV; improved access to technical expertise from global partners; and formed better structural relationships with other networks and civil society partners. This new way of working has proven successful in: supporting global, regional and national structures; developing and sustaining networking functions that cannot be otherwise funded; ensuring structural mechanisms to document the voices and experiences of PLHIV; and ensuring that PLHIV messaging in advocacy results in positive change at global, regional and national levels.

Examples of specific results include:

- Increasing GNP+'s income by 458% during 2005-09.
- Increasing GNP+'s sub-contractors/grantees to over 90, mostly national PLHIV networks, by 2009.
- Scaling up evidence-gathering tools, such as the Criminalisation Scan (applied in over 200 countries).
- Influencing global policy making bodies, such as WHO (on ART guidelines) and UNAIDS (on Positive Health, Dignity and Prevention).

Findings of the GNP+ Strategic Review

Area 1: The role of GNP+: The Review identified that, while applauding the vision cited in GNP+'s Strategic Plan 2006-10 ("*facilitating leadership and the voices of PLWHAs*"), respondents had mixed views on its performance. In the online survey, over half of PLHIV respondents – who had stated that they know GNP+ at least a little - said it facilitates PLHIV voices 'quite well' or 'very well'. Others, particularly in interviews and focus groups, felt that it is paying too much attention to programmatic work, neglecting its primary role of global advocate. GNP+'s literature documents commitment to being constituency-driven, with significant efforts made to enhance communication and consultation. Yet many respondents – across stakeholder groups - perceive GNP+ as a Northern-based organisation led by gay men. GNP+ is acknowledged as the 'go to' organisation to bring PLHIV to the global table, but there is concern that representatives do not reflect the diversity of PLHIV. There is a sense of disconnect between PLHIV 'on the ground' and GNP+ internationally. Many constituents do not know what GNP+ does and/or how to get involved.

GNP+ describes itself as a network of networks, governed by six autonomous regional PLHIV networks. Yet many respondents described the 'broken' relationship between the Secretariat and regional networks. While some of the networks see the Secretariat as disrespectful and unsupportive (including in times of crisis), some staff see some of the networks as uncommunicative and unaccountable to their constituents. The Needs Assessment confirmed significant needs among some regional networks, including for core funding and capacity building in strategic planning, financial management and outreach to constituents. There is an urgent need to rebuild all links in GNP+'s global-regional-national chain of communication/collaboration.

GNP+ is credited with strong positioning within the civil society response to HIV, but encouraged to collaborate more systematically, maximizing complementarities with others while ensuring its unique role. It is also seen as having developed an important relationship with key normative and policy institutions, such as WHO. Meanwhile, the Secretariat is widely praised for achieving a 'phoenix from the ashes' transformation of GNP+ since 2006 – gaining financial stability and impressive growth in programmes and staff. Key aspects of this transformation have included: professionalization of the organisation's systems and processes; strategic packaging of activities that appeal to donors; and identification of a strong technical niche (evidence-based advocacy for PLHIV).

For the future, almost all respondents (91.5% in the online survey) said that a global network of PLHIV is still needed and that its primary role should be as a global advocate and voice for PLHIV. Some people called for a more planned approach to building PLHIV leadership and more diverse representation of GNP+. Such steps would be critical to GNP+ moving beyond a network-of-network model and re-mobilising as a more modern and innovative global 'forum' or 'alliance', with a constituency of PLHIV organisations and networks working at national, regional and global levels. The Secretariat would need leadership with the vision to push through such a change and its implications. It would also be critical for the Secretariat to (re)build relations with the regional PLHIV networks and, in turn, for them to rebuild relations with their national constituents. The Secretariat should *facilitate* support to improve the regional networks' functioning, accountability and crisis resolution. Meanwhile, especially through the interviews with institutional representatives, GNP+ was encouraged to continue positioning itself strongly among global stakeholders, particularly civil society - exploring more systematic collaborations, even mergers, with key 'peers', such as the International Community of Women Living with HIV (ICW) and International Treatment Preparedness Campaign (ITPC).

Area 2: The work of GNP+: Respondents gave very positive feedback on the 'evidence informed advocacy' approach of GNP+ that has re-established its technical reputation and legitimacy to do advocacy. The tools (Criminalisation Scan, Stigma Index, etc), combined with technical and financial support to national PLHIV networks, are seen as a good 'model of change' to gather evidence, build capacity, influence policy, etc. There are some concerns, including delays in extracting advocacy messages and perceptions by some (including some regional PLHIV networks) of the tools being too academic. Some respondents questioned the process and transparency of the selection of countries/partners and the sustainability of the work in countries.

As seen in its literature, GNP+ has also undertaken extensive planned and reactive advocacy work, from direct lobbying to technical consultations. Examples were cited of policy changes achieved (such as the text of WHO guidelines on ART) and agendas set (such as Positive Health, Dignity and Prevention). While welcoming individual achievements, there was a call for such work to have a strong strategy, with a focus on key global policy change processes (such as the civil society delegations to UNAIDS and the Global Fund).

A strong message from the Review was of imbalance between national programmes and global advocacy. The former are seen as a vital source of income and evidence. But, while a small minority said that GNP+ should not do *any* programmatic work, many – including national PLHIV network partners - called for GNP+ to re-prioritise advocacy and re-articulate programmes as a means to support it. Meanwhile, there were mixed feelings about PLHIV involvement in GNP+'s work. Over half of the PLHIV in the online survey rated involvement as 'quite well' or 'very well'. E-surveys and PLHIV summits, such as Living 2008, were cited as important opportunities for consultation, while GNP+'s coordination role in the International AIDS Conferences was seen as strategically important for PLHIV. Overall, respondents praised extensive use of partnerships - from the Leadership through Accountability Programme (with WAC) to the SRHR package (with EngenderHealth, ICW, International Planned Parenthood Federation (IPPF), United Nations Programme on AIDS (UNAIDS), United Nations Population Fund (UNFPA), WHO and Young Positives).

Respondents enthusiastically welcomed GNP+'s focus on human rights – a portfolio of issues viewed as highly relevant and appropriate. But many emphatically criticized neglect of treatment and low engagement in the wider health/financing agenda – areas within which GNP+ could identify a key, complementary role.

For the future, GNP+ was urged to prioritise global advocacy, informed by the evidence of its programmes. It was strongly encouraged to better communicate its results – to enable constituents and stakeholders to understand the real (rather than perceived) scale and quality of its results. For programmes, some respondents asked GNP+ to more clearly define its 'roadmap', with particular attention to how it starts and ends its involvement (with exit strategies continuing to facilitate support and sustain the roll out of its work). It should also speed up the process of identifying advocacy messages and ensure transparent approaches to country/partner selection. As for advocacy, GNP+ was encouraged to 'work smart' – having a defined strategy focused on the key bodies and processes for global policy change. Meanwhile, as in Area 1, GNP+ was encouraged to continue to scale up and be creative in its consultation with and involvement of PLHIV. Hundreds of suggestions, from blogs to information platforms, were made by the PLHIV answering the online survey. Meanwhile, other respondents asked GNP+ to ensure that its partnerships have agreed deliverables and are institutionalized. Finally, while PLHIV would ideally like GNP+ to address a broad range of issues, priority is given to access to treatment and human rights, combined with a call to engage in the MDGs and global health/financing. There was a lack of consensus about the extent to which GNP+ should focus on such issues from the perspective of all PLHIV or key populations.

Area 3: The governance of GNP+: Here, respondents welcomed that regional PLHIV networks have been at the heart of GNP+ governance. But there have been challenges in fulfilling that model, especially securing full participation across all regions. There are also concerns as to whether the Board provides appropriate support to the Secretariat, in terms of strategic inputs and rapid decision making. While the Renewal Process has improved understanding of some roles and responsibilities, areas are still unclear. Overall, it was acknowledged that GNP+ has benefitted from some highly committed Board members. But concerns were expressed about the transparency of selection process and some members' accountability to their constituents. There were also many questions about under-performance and the degree to which the Board offers the range of organizational, policy and programmatic skills, experience and influence needed. These challenges are exacerbated by unclear systems and tensions - between the Secretariat and GNP+ Board, with concerns on both sides about poor communication and lack of trust.

For the future, most respondents said that GNP+ should continue to *only* be governed by PLHIV. But many stressed that *all* members of the Board must demonstrate the right type and level of skills and experience.

The majority of respondents called for each of the regional PLHIV networks to retain a seat on the Board, with efforts to address full cross-regional participation and under-served areas (such as the Middle East and North Africa). They also, across all stakeholder groups, favoured adding other types of members, including representatives of constituencies (such as key populations), key 'peers' (such as ICW and ITPC) and areas of expertise (such as the law). There was a call for all members to be transparently selected or elected, building on the current Renewal Process, with agreed TORs, etc. In terms of structure, a minority of respondents called for GNP+ governance to remain as it is. But others argued for change – probably to a model combining a small executive committee and wider advisory group. Finally, it was stressed that the success of future governance is dependent on improved systems and relations between the Secretariat and Board.

Conclusions and recommendations

Based on the findings across all three areas of the Strategic Review, the following **conclusions** were drawn:

1. GNP+ is, by its very nature, something in which **many people have invested a great deal and about which many care deeply**. The over 1,160 respondents to the Strategic Review (from diverse countries, cultures, sectors, etc) were keen to contribute to securing and strengthening the organisation's future.
2. That range of stakeholders has a **range of (sometimes dramatically different) hopes and expectations** of an organisation that, despite impressive growth, remains modest in size and capacity. As with any global network, GNP+ 'cannot please all of the people all of the time'. However, it could better manage expectations and foster ownership by more clearly defining and articulating what it is, what it does and what people can and cannot expect from it.
3. GNP+ in 2010 is unrecognisable from 2006. It has achieved a **dramatic transformation** – from a nearly bankrupt organisation struggling to survive to one with financial stability, an increasingly professional approach and a growing technical reputation. The credit for this lies with many different individuals and organizations, but, in particular, the CEO and staff of GNP+.
4. GNP+ now implements a vast portfolio of work - supporting national PLHIV networks, building partnerships, developing evidence on areas identified as priorities by PLHIV, etc. But there risks being a growing tension between the **increasing praise from external stakeholders and an internal sense of disconnect** (with many constituents feeling unengaged and unrepresented).
5. Some of this disconnect is fuelled by **challenging systems and dynamics** within GNP+ that require urgent action. Examples include the relationships between the International Secretariat and regional PLHIV networks and between the CEO, Chair of the Board and Board as a whole. While continuing to professionalise as an organisation, such relationships require as much attention as issues of structure and function.
6. The disconnect is also fuelled by a gap between the **reality** of GNP+ (i.e. its documented work and results) and **perceptions**. Despite significant efforts to enhance communication and consultation, many constituents and stakeholders remain unaware of the scale, range and quality of programmatic and advocacy results that the network is achieving.
7. The **global environment is shifting rapidly around PLHIV**, with an end to 'AIDS exceptionalism' within policy and funding arenas. Resources are scarcer and HIV-specific networks face pressure to down-size. Against this context, GNP+ faces a choice. It can continue business as usual and try to ride out the storm. Or it can, itself, shift - **fundamentally re-visiting the type of organization it is** and what it means to be 'fit for purpose' for the next five years.
8. Strategic Planning for 2011-15 provides a **timely opportunity** to address many of the issues identified in the Strategic Review of GNP+. It also provides a further opportunity to listen to stakeholders, reach out to new/existing constituents and work together to re-ignite passion for the **meaningful involvement of PLHIV in the response to HIV** and ensure that GNP+ is the global organisation to make that a reality.

Based on the finds and conclusions, the **recommendations** are that GNP+:

1. Refocus, reenergize and reposition itself as **the global voice, advocate and leader of PLHIV**.

2. Develop a **Strategic Plan for 2011-15 that clearly defines and substantiates that primary role.**
Key components should include: defining/building an engaged constituency, including through further creative communication and consultation; developing a planned approach to building global leadership among PLHIV; and enhancing GNP+'s own leadership, including by expanding the diversity of its representation.
3. Move beyond the business as usual of a network-of-networks. Explore different models and re-orientate itself as a **modern type of global entity** - perhaps a 'forum' or 'alliance' - with a constituency base of **PLHIV organisations and networks that work at national, regional and global levels.**
4. Support its role and model by **(re)building strong relations between the International Secretariat (i.e. the global Board and staff) and the regional PLHIV networks** - in recognition of the importance of such relations to engaging constituencies and, in turn, ensuring the legitimacy of GNP+. Use the results of the Needs Assessment of Regional Networks to develop a collaborative approach to GNP+ *facilitating* (rather than *implementing*) the strengthening of the regions' work and accountability and, in turn, their engagement in GNP+'s global efforts. Also, as appropriate, support crisis resolution.
5. Significantly **expand global advocacy**, with programmatic work more clearly articulated to provide supporting evidence. In the Strategic Plan, focus on advocacy that specifically targets key policy change mechanisms within which GNP+ can bring added value and make a concrete difference.
6. Specifically, as a matter of urgency, reach out to PLHIV leaders in Africa to explore the most appropriate and practical mechanism to **engage the African PLHIV community** in the governance and work of GNP+.
7. Maintain a focus on a **human rights portfolio of issues**, but also passionately re-engage with **HIV treatment** and more fully engage in the **global health, MDG and financing for health/HIV agenda.** Define what these issues mean to GNP+ and where its niche lies (complementing the work of others).
8. Build on the Strategic Review to, within an **evaluation of GNP+ programmes**, address not only results and impact, but how the work is done. In particular, look at: the involvement of PLHIV; partnerships; ownership of tools; and a 'road map' of where GNP+ can best use its capacity and value added.
9. Remain **governed by and for PLHIV**, with only PLHIV having decision-making power. But, after the Strategic Plan has been developed, expand the range of PLHIV on the GNP+ Board – maintaining the regional PLHIV networks and **adding HIV positive members from specific constituencies** (such as key populations), **areas of expertise** (such as law) and/or **strategic partners** (such as ICW and ITPC). Based on an audit of the skills and knowledge required to guide implementation of the Plan, ensure that all Board members are appropriately qualified and selected/elected through transparent processes.
10. After the Strategic Plan has been developed, **re-structure the Board** to a model that will provide more effective decision-making for the organisation and support to the International Secretariat in the challenging years to come. Explore different types of models, such as those that combine some form of small and highly engaged management committee with a diverse and flexible advisory group.
11. Position itself more strategically within efforts (such as the Free Space Initiative) to ensure **collaboration, consolidation and cost efficiency within the global civil society response to HIV.** In particular, clarify and strengthen relationships and complementarities with key peers (such as ICW and ITPC), including exploring the potential for more systematic collaboration and/or mergers.
12. Combine the above strategic actions with **urgent attention to inter-personal dynamics and structural relationships** within GNP+. Continue the Renewal Process and professionalization of the organization, but also actively promote conflict resolution and team building.
13. Build on the Strategic Review and use the development of the next Strategic Plan as an opportunity to **continue to listen to, consult and debate** with GNP+ constituents and stakeholders, both 'friends and foes'. Use the final Plan to **re-launch and re-mobilise.** Ensure that all key stakeholders, but particularly staff and Board, understand and support the plan and can act as ambassadors for GNP+ - leading far reaching corporate communications and a 'membership drive' to expand and engage the constituency.

INTRODUCTION TO GNP+ STRATEGIC REVIEW

Aim, remit and timeframe

In 2010, the Global Network of People Living with HIV (GNP+) undertook a comprehensive Strategic Review. The rationale for this was two-fold: the pragmatic need to produce a Strategic Plan for 2011-15; and the need to reflect on the organisation's role and added value within the rapidly changing environment for HIV and global health. The Strategic Review will form the basis of a new strategy that will guide the organisation's direction over the next five years, in turn facilitating work planning and resource mobilisation.

The Strategic Review of focused on three areas:

Area 1: The role of GNP+

Area 2: The work of GNP+

Area 3: The governance of GNP+

The process was designed to both reflect back on GNP+'s strengths and weaknesses to date (especially 2006-10, the period of its current Strategic Plan) and look forwards (identifying its strategic options for the future). In particular, it aimed to explore three key questions [see [Figure 1](#)].

The remit of the Strategic Review was the International Secretariat of GNP+ (i.e. the organisation directed by the International Board and operationalised by offices in Amsterdam and South Africa). It did not address the wider global movement of PLHIV or the independent regional networks of PLHIV. The remit also focused on issues of strategy and, as such, did not look at the Secretariat's organizational development (such as funding, administration and staff structure). It also did not aim to serve as an evaluation of the quality or impact of the programmatic or advocacy work of GNP+ - something that will be implemented in 2011.

The Strategic Review was carried out during June – August 2010.

Methods and participants

The Review of GNP+ was designed to engage as many and as large a range of participants as possible within the timeframe and resources available, while also prioritising stakeholders of greatest strategic relevance. The process engaged over 1,160 people through 5 methodologies:

- 1. Global e-survey among PLHIV:** An online survey was produced in 5 languages and disseminated to PLHIV through GNP contacts, partners organizations, regional networks, list-servs and the International AIDS Conference (IAC) 2010, Vienna. A total of 662 full responses were received: 371 in English, 105 Spanish, 77 Russian, 58 Chinese and 51 French. Up to 995 PLHIV from over 129 countries answered some of the specific questions. [See [Figure 2](#) for a profile of the respondents and [Annex 2](#) for the full quantitative results].

Figure 1: Key questions for GNP+ Strategic Review

1. *How could GNP+ make a more effective contribution to the global response to HIV?*
2. *How could GNP+ better bring the voices of PLHIV to the global HIV arena?*
3. *How could GNP+ better involve PLHIV in its work and decision-making?*

Figure 2: Profile of respondents to GNP+ online survey

- **Gender:** 67.1% male; 30.7% female; 1.1% transgender
- **Sexual orientation:** gay or lesbian (41.4%); heterosexual woman (21.7%); heterosexual man (15.3%)
- **Identification with key populations:** MSM (22.3%); person that uses drugs (10.4%); sex worker (5.6%); prisoner or ex-prisoner (5.4%)
- **Level of knowledge of GNP+:** not at all (19.6%); a little (43.9%); quite well (21.7%); very well (14.8%)

[Percentages are of the respondents to each question]

2. **Focus group discussions with stakeholder groups and regional PLHIV networks:** Discussions were carried out in-person or through teleconferences, lasting between an hour and a day and based on a guide translated into appropriate languages. A total of 121 participants from over 50 countries were involved through:
 - 4 focus group discussions among key stakeholder groups, namely: the Board of GNP+ (9 participants); staff of GNP+ (10); staff of World AIDS Campaign (WAC) (9); and GNP+ programme partners from national PLHIV networks (8).
 - 6 focus group discussions among the Board members and constituents of regional PLHIV networks, namely: Asia Pacific Network of People Living with HIV (APN+) (36 participants); Network of African People Living with HIV (NAP+) Southern Africa (11); NAP+ Central Africa (21); NAP+ East Africa (5); Latin American Network of People Living with HIV (RedLA+) (6); and East Europe and Central Asia Union of People Living with HIV (ECUO) (6).

3. **In-depth interviews with institutional representatives and key informants:** One-to-one in-depth interviews were carried out in-person, over the phone or in writing, based upon a framework of questions. The total of 49 interviews were formed of:
 - 38 interviews with representatives of key institutions of strategic relevance to GNP+, including regional PLHIV networks, other HIV and key population networks, HIV civil society organizations, donors, the private sector, multilateral agencies and research institutions.
 - 11 interviews with individuals identified as key informants and leaders within the global response to HIV and the PLHIV movement.

4. **Short questionnaire among GNP+ programme partners:** A brief e-mail questionnaire was sent to GNP+ programme partners (national PLHIV networks, research organizations, etc) not involved in one-to-one interviews or focus group discussions. A total of 4 responses were received.

5. **Literature review:** A desk review of over 20 GNP+ documents relating to the period of the current Strategic Plan (2006-10), including work plans, annual reports, proposals to donors and project reports.

See **Annex 2** for lists of the participants in the focus group discussions, interviews and short questionnaire.

The Strategic Review was complemented by two parallel processes designed to address the future role and work of GNP+:

- **Needs Assessment of Regional PLHIV Networks¹**, responding to a request of the GNP+ Board and providing an assessment of the capacity, resources and needs (relating to areas such as strategy, networking and resource mobilization) of four of GNP+'s regional partners.
- **GNP+ Environment Mapping²**, providing a rapid scan of a selection of 14 major global civil society networks and NGOs working in HIV to map their role and work and, in turn, identify areas of complementarity, duplication and/or gaps for GNP+.

¹Addressing: CRN+, APN+, GNP+ NA and RedLA+. *Rapid Regional Networks of PLHIV Needs Assessment: Independent Consultant's Report*, Spark Public Health Group, September 2010.

² Addressing: European AIDS Treatment Group; Global Forum on MSM and HIV; Global Network of People Living with HIV/AIDS; Global Network of Sex Work Projects; International AIDS Society; International Community of Women Living with HIV/AIDS; International Council of AIDS Service Organizations; International Federation of Red Cross and Red Crescent Societies; International HIV/AIDS Alliance; International Network of People who Use Drugs; International Planned Parenthood Federation; International Treatment Preparedness Coalition; Sidaction; and World AIDS Campaign. *GNP+ Environment Mapping*, Marc-André LeBlanc, September 2010.

Management and implementation

The Strategic Review was approved by the international Board of GNP+ in December 2009. As agreed by the Board, the process was overseen by a Strategic Review Working Group (SRWG). This was comprised of: Rachel Ong (Chair, GNP+ Board); Reuben Pecchio (Regional Coordinator, RedLA+); Kevin Moody (GNP+ International Coordinator/Chief Executive Officer (CEO)); and Milly Katana (independent).

The Review was implemented by a core, independent consultant (Sarah Middleton-Lee). Other consultants (Spark Public Health Group and Marc-André LeBlanc respectively) led the Needs Assessment of Regional PLHIV Networks and GNP+ Environment Mapping.

Limitations

The implementation of the Strategic Review experienced limitations that influenced the scale and depth of its findings. These included that the survey was computer-based (restricting access for some people) and that some institutional representatives and key informants were not available for interview. Also, focus group discussions were not implemented by some of the regional PLHIV networks.

A major limitation was that many of the respondents to the Review, particularly those completing the online survey, stated that they did not have detailed knowledge of the role, work and governance of GNP+. As such, they were unable to answer some of the questions and/or provided responses based on their *perceptions*.

The Consultant would like to thank all those that participated in the Strategic Review and confirm that all inputs were reviewed in the preparation of this report – that, as a synthesis, can not reflect all views, but focuses on the key issues highlighted across all of the methodologies used.

CONTEXT TO GNP+ STRATEGIC REVIEW

The Strategic Review took place at a critical time, both for the global response to HIV and for GNP+ itself. Nearly 30 years into the global pandemic, the context in which the network operates is both complex and changing. It is characterized by broad trends and factors that, in turn, have multiple impacts – both direct and indirect - on the lives, resources and opportunities for PLHIV. Examples of these include:

- **Global HIV epidemic that still sees an estimated 2.7 million new infections per year, with 33.4 million PLHIV worldwide³.**
- **Global health/development frameworks and targets reaching their deadlines** - such as Universal Access to HIV prevention, care, support and treatment (deadline 2010)⁴ and the Millennium Development Goals (MDGs) (deadline 2015)⁵ – that shape political agendas, priorities and decisions that affect PLHIV.
- **Crowded and changing global architecture** – with an increasing variety and complexity of bodies that set policy agendas and, in particular, decide on resource allocation, including for areas such as PLHIV networking, health systems strengthening (HSS) and community systems strengthening (CSS).

³ *AIDS Epidemic Update 2009*, UNAIDS.

⁴ *Political Declaration on HIV/AIDS*, United Nations General Assembly, 15 June 2006.

⁵ *United Nations Millennium Declaration*, United Nations General Assembly, 18 September 2000.

- **Global economic crisis** – that threatens allocations to HIV by national governments, individual donors, donor governments and key international mechanisms (such as the Global Fund to Fight AIDS, Tuberculosis and Malaria (the Global Fund)). In turn, this threatens the stability/sustainability of long fought for gains for PLHIV, such as increased access to antiretroviral therapy (ART).
- **Political move away from ‘AIDS exceptionalism’ and towards wider responses to health** – within which, both HIV and key principles, such as the greater involvement of people living with HIV (GIPA)⁶, could be sidelined.
- **‘Re-medicalisation’ of HIV** – within which ‘treatment as prevention’ risks neglect of the socio-political factors (such as gender and marginalization) that continue to drive HIV epidemics and heighten the needs of PLHIV.
- **Move towards ‘combination prevention’ approaches** – that, in contrast to ‘re-medicalisation’, acknowledge the role of factors such as policy and culture in HIV prevention and provide a strategic opportunity to promote and ensure Positive Health, Dignity and Prevention for PLHIV.
- **Increased global attention to the human rights of PLHIV and key populations**⁷, but also, in some countries, negative moves towards the criminalisation of HIV transmission and/or behaviours.

Similarly, the Strategic Review occurred at a critical time within the evolution and development of GNP+ as a global civil society organization (CSO). This included that GNP+:

- **Has undergone a period of rapid organisational growth and development, particularly during 2008-10.** As such, it would benefit from an opportunity to ‘reflect and re-group’ in preparation for the future.
- **Faces critical future challenges as an HIV network** – such as securing core funding within a resource-constrained environment where donors increasingly favour project-based work.
- **Works within the changing dynamics of the wider PLHIV movement.** For example, with changes taking place among key ‘peer’ organisations (such as ICW) and with potential tensions between different groups of PLHIV (such as those on ART who are experiencing wellness and those that still lack access to treatment).
- **Functions within a crowded civil society market place, with increasing demands to show added value and efficiency.** The HIV world remains a crowded one, with multiple CSOs performing different roles and focusing on different areas. There is an increasing need for organisations, particularly those performing networking functions, to demonstrate their value and cost-efficiency. This has led not only GNP+, but others – such as WAC, ICASO, ITPC and the International HIV/AIDS Alliance – to undertake review processes to assess both their individual comparative advantage and how to work *together* more effectively as a sector.
- **Is involved in strategic efforts to consolidate and strengthen the civil society response to HIV.** For example, through the Free Space⁸, GNP+ collaborates with 9 other global networks and NGOs to address issues of complementarity and duplication. It also builds specific alliances with other initiatives – such as the International Network of People that Use Drugs (INPUD) and Global Forum on HIV and MSM (MSMGF) – to ensure more united support to common constituents among key populations.

⁶ *The Paris Declaration*, Paris AIDS Summit, 1 December 1994.

⁷ Note: In this report, the term ‘key population’ is used to refer to people highly vulnerable to and/or affected by HIV. Examples include sex workers, MSM and people that use drugs.

⁸ Coordinated by International Civil Society Support and involving: GNP+; ICW; ICASO; ITPC; International HIV/AIDS Alliance; WAC; Ecumenical Advocacy Alliance; MSMGF; NSWP; and INPUD.

GNP+ ACHIEVEMENTS IN 2006-10

The following text, summarising the work and achievements of GNP+ during the period of its existing Strategic Plan (2006-10), was prepared the International Secretariat:

Before 2006, GNP+ relied mostly on the work of individuals in the Global North to transmit important information about the lives and experiences of PLHIV in the Global South through participation of the GNP+ International Coordinator in key events and meetings organised in the Global North. The main activity of GNP+ at the time was focused almost entirely on organising global gatherings of PLHIV which provided for networking opportunities for those who were chosen to attend and eventually formed the global advocacy agenda. Very little programmatic and associated advocacy efforts were in place to develop tools and methodologies that would support national networks of PLHIV in engaging with their own national responses and sustaining a feedback loop between global, regional and national and vice versa.

Almost bankrupt in 2006, GNP+ was completely lost and nearly shut down. The regions were at the time engaged with their own work and had little to offer GNP+ global in terms of advice for the way forward, either one-on-one or at the Board level. Following the first donor meeting, GNP+ worked with global partners and Regional Networks to develop and pilot test tools to systematically collect evidence of the experiences of PLHIV in the fields of human rights, sexual and reproductive health and rights (SRHR), GIPA and prevention. Integral to this was also the commitment to and development of a mechanism that would embed into the evidence for advocacy methodologies a sustainable two-way messaging between global-regional-national chains of communication. The challenge to change the way in which GNP+ provided evidence to policy makers (national, regional and global levels) did not come without challenges.

The first challenge was financing. Networks are inherently difficult for donors to fund, especially for 'capacity building', 'networking' and 'communications', i.e. advocacy separated from service provision. GNP+ was no exception and it was an innovation for GNP+ to incorporate these functions into the development and implementation of programmes. This was initially possible due to the faith of a few donors that provided modest but necessary contributions to GNP+ to improve the quality of its internal financial and programme management systems and delivering a programmatic approach to evidence-informed advocacy. Most notably in 2006 to 2008 were the Foreign Ministries of the Netherlands, Norway and the UK. This was followed by the generosity of the Alphawood Foundation in 2008 to today and the continuous support of Norway and the Netherlands (the UK support to core funding ending in 2009). All four understood the need for a network of PLHIV to invest in systems in order to be able to make a difference with programming to collect evidence for advocacy and to incorporate key networking functions. Because of this support, GNP+ was able to expand its expertise in specific thematic areas. Today, there is global demand from GNP+ to share its expertise and an acknowledgement of the significant success of countries that implement the tools that have been developed.

Notable is that GNP+ does not implement programmes, contrary to popular perception. Rather, GNP+ offers technical support to countries – a function that can eventually be provided by regions or even external organizations. The most important innovation is the systemization of the way in which experiences of PLHIV are translated into evidence and then used for advocacy by PLHIV and partners. GNP+ has developed innovative advocacy activities based on evidence it collects from the roll out of its tools at national level and through extensive consultations on issues that are important to PLHIV. Although this type of advocacy is not as obvious as sign-on letters or marches in the streets, it has shown to be extremely effective by putting PLHIV at the centre of the advocacy messaging.

In the past, PLHV were individually invited to provide ‘testimonials’ of their experiences; however, policy-makers and programmers base their decisions on ‘evidence’, which for the most part is scientific in nature. A case-study or testimonial with an ‘n’ of 1 does not count in their view as evidence. With GNP+’s expertise in systematic evidence gathering, the ‘n’s become significant, both in terms of qualitative and quantitative data, making it impossible for policy-makers to ignore the voices and experiences of PLHIV. Examples include the process leading up to LIVING 2008, which started with a meeting of PLHIV leaders in December 2008 and was followed by online and face-to-face consultations with partners (including regional networks), culminating in a 2-day meeting before the IAC in Mexico City. Over a thousand PLHIV were consulted and this led to further work and consultations in the areas of prevention (eventually leading to Positive Health Dignity and Prevention) and criminalization. GNP+’s social networking platform, Positive Community, has been instrumental in developing concepts and advocacy positions for GNP+ and partners, especially in the area of new prevention technologies. Thousands and thousands of PLHIV’s voices have been documented and amplified through GNP+’s work in the past 4 years.

GNP+ took on the challenge of ensuring that it could take on programming and consultation processes by upgrading its financial and programme management systems. This was necessary to be able to provide transparent and reliable reflections of GNP+’s work, both at the Secretariat and via partners. GNP+ went from a handful of sub-contractors in 2006 to over 90 – mostly networks of PLHIV – in 2009, with confidence both internally and through its auditors that funds were appropriately employed to achieve the goals required to achieve GNP+’s mission in a transparent and accountable manner. This led to GNP+’s successful bid in 2007 for a 5-year, £4 million funding to implement its evidence gathering tools in 15 countries.

The functions of a network are as diverse as the members of that network. They include: advocacy, capacity building, networking, communications, etc. The GNP+ family has been challenged since the Regional Organizational Development Initiative (1998-2002) to incorporate multi-directional networking functions. Since 2006, GNP+ has incorporated networking processes into its programmes because donors were simply unable or unwilling to fund these activities directly. Therefore, all of GNP+’s programmes for collecting evidence of PLHIV experiences include the following components: capacity building, partnership building, resource mobilisation, communications and networking (the ‘learning by doing’ approach).

GNP+ has invested in the Renewal Process, which aims to assist GNP+ and the regional networks to professionalize their working relationships. GNP+ supported two meetings in 2007 – one on communications and knowledge management and one on accountability, transparency and governance. In spite of well intensions and promises made at these meetings on all sides, no significant results were achieved in improving these areas. The Renewal Process did lead to the development of documents to support the Board’s functioning, including terms of reference and policies and procedures. In addition to investing in improving processes, GNP+ has directly supported regional networks in trouble. In 2007, GNP+ supported a meeting of European community-based networks so that they could decide the future of the European Network of PLHIV (ENP+). Unfortunately, the follow up processes led by those selected to move the agenda forwarded did not result in success for ENP+. GNP+ has also devoted thousands of Euros and many hours of upper management time in support of NAP+. In addition to fundraising for a series of Board Meetings, GNP+ has also diverted core funds to support processes in NAP+’s progression through a difficult time. GNP+ was limited in the extent of the support it could give and, of course, it is African PLHIV themselves who have to decide on the best way forward for their constituents. GNP+ remains supportive and keeps regularly updated on the progress being made in Africa.

Between 2008 and 2010, GNP+ went through a series of development processes for 6 evidence-gathering methodologies: Human Rights Count!, PLHIV Stigma Index, Global Criminalization Scan, GIPA Report Card, Advancing the SRHR of PLHIV (country level) and Positive Health, Dignity and Prevention. The steps in development were: conceptualisation, planning and development (including framing within existing and/or developing the policy guidance), piloting, revision based on lessons learned from pilot testing, implementation (including technical support to national networks of PLHIV), evaluation (process as well as

outcomes). Country selection and first contact with national networks of PLHIV always occurs in consultation with the relevant PLHIV regional network.

It is noteworthy to mention the successes were not only in the evidence gathered from the methodologies mentioned above, but also in the capacity building of partner networks due to the 'learn by doing' approach. In Kenya, for example, the engagement of NEPHAK in the Leadership through Accountability programme - which puts together the evidence gathering tools in a 'package' - has led to the successful partnership between NEPHAK and the National AIDS Council. In Tanzania, following the work of NACOPHA with GNP+ on the development of the Positive Health, Dignity and Prevention evidence methodology, NACOPHA with UNAIDS have successfully lobbied the Tanzanian government to develop guidelines that are founded on Positive Health, Dignity and Prevention. The government has laid out the guidelines to operationalise Positive Health, Dignity and Prevention in partnership with civil society and PLHIV networks in particular in four areas: 1) preventing infections; 2) empowerment of PLHIV; 3) quality of life for all with focus on working with PLHIV to achieve that; 4) capacity building of civil society and in particular networks and linking Health Sector with community.

The Global Criminalisation Scan has now documented laws in more than 145 countries in all geographical regions and the first global analysis was launched during IAC 2010 with great success. The analysis drew from in-depth country as well as individual cases of persecution analyses.

The Human Rights Count! has now documented more than 600 cases of human rights violations against PLHIV in 8 countries and has informed not only the work of the national networks of PLHIV in those countries, but also resulted in partnerships between networks and human rights organisations and informed global policy dialogue on social protection of PLHIV.

In 2008, GNP+ and the World AIDS Campaign (WAC) jointly succeeded to secure funding from the UK DfID Governance and Transparency Fund. The 5-year, \$6 million programme Leadership Through Accountability is to be implemented between 2008 and 2013 and supports the implementation of 5 evidence-gathering programmes at country level that provide insight into the experiences of PLHIV for advocacy and campaigns. At the same time, WAC develops national platforms of campaigners who employ the messages provided by PLHIV to develop country-wide campaigns.

The expertise gained by GNP+ during 2008 to 2010, as well as the improvement GNP+ has demonstrated in consulting with PLHIV (through a variety of methodologies: e-consultations, thematic, face-to-face) has been recognised by normative agencies such as the World Health Organisation. In 2009, GNP+ led the coordination of a series of consultations on the revision of the WHO Guidelines on ART (managing consultations with PLHIV as well as coordinating the responses from GNP+, ICW and ITPC to WHO). This was an example where GNP+ was able to provide recommendations to a normative agency with global clout and reach. As a result, GNP+ was approached by WHO to apply and successfully gained Formal Relations with WHO.

In regards to policy influence, GNP+ has successfully moved the political debate from 'positive prevention' to a holistic, rights-based and responsive framework of 'Positive Health, Dignity and Prevention'. The process started in 2008 with LIVING 2008: The Positive Leadership Summit with consultations within the PLHIV community. In 2009, the consultation expanded to include development agencies, national governmental bodies and donor agencies. In 2010, the 'idea' transcended to policy framework guidance and, in 2011, it will be made more concrete through development of programmatic guidance for operationalisation at country level. The framework has been adopted by donor agencies (e.g. PEPFAR's new 5-year strategic framework now includes 'Health, Dignity and Prevention'), normative and development agencies (UNAIDS is developing a strategy for the Secretariat and its 10 Cosponsors and the 2009 WHO Universal Access Progress Report makes reference to the frameworks and provides examples that support the framework), as well as regional networks of PLHIV (e.g., APN+ is adapting the framework to the region as 'Positive Health').

In summary, changes in GNP+ since 2006 include: the development of a new model of evidence collection; increased involvement with regional networks and individual PLHIV; improved access to technical expertise from global partners; and better structural relationships with other networks and civil society partners. The new way of working has been shown to be successful in: supporting global, regional and national structures; developing and sustaining networking functions that cannot be otherwise funded; ensuring structural mechanisms for proactively documenting the voices and experiences of PLHIV; and ensuring that PLHIV messaging in advocacy results in positive change at global, regional and national levels.

INTRODUCTION TO FINDINGS OF GNP+ STRATEGIC REVIEW

The following pages summarise the findings of the GNP+ Strategic Review. They are divided into the 3 areas addressed within the process:

Area 1: The role of GNP+

Area 2: The work of GNP+

Area 3: The governance of GNP+

In each area, the findings are grouped into two sections:

The past: Strengths, weaknesses and key issues in 2006-10

The future: Key issues and directions for 2011-15

As a Strategic Review, many of the findings refer back to GNP+'s current Strategic Plan for 2006-10 [see Figure 3].

Figure 3: GNP+ vision, mission and strategic objectives for 2006-10

Vision: To strengthen the worldwide movement of people living with HIV/AIDS by facilitating leadership and the voices of PLWHAs.

Mission: To improve the quality of life of PLWHA at the personal, national regional and international levels.

Strategic objectives:

1. To undertake regular constructive sharing and exchange of information with GNP+'s target group.
2. To enable PLHIV and their leaders to articulate and promote their interests in all appropriate forums:
3. To build effective strategic partnerships that address issues affecting the quality of life of PLHIV.
4. To develop GNP+'s own capacity and capability as well as that of regional networks and other organisations promoting the interests of PLHIV.

FINDINGS AREA 1: THE ROLE OF GNP+

Area 1 of the Strategic Review focused on: the role of GNP+ in facilitating the voice and leadership of PLHIV; the profile, representation and ownership of GNP+; GNP+'s constituency and national/regional/global model; the strategic positioning of GNP+; and the GNP+ Secretariat (in terms of funding, communication and management). It explored GNP+'s strengths and weaknesses to date and identified key issues and directions for the future.

[Note: In this report, and particularly relevant to Area 1, the term 'GNP+' refers to the role and work of the International Secretariat – as directed by the International Board (comprised of the six regional PLHIV networks) and implemented by staff in Amsterdam and South Africa. Where comments refer to specific bodies or systems, this is specified].

The past: Strengths, weaknesses and key issues in 2006-10

In relation to the past role of GNP+, the key findings of the Strategic Review related to:

Role of GNP+ - facilitating PLHIV voice and leadership

The Strategic Review highlighted a common view that the wording of GNP+'s mission for 2006-10 [see Figure 3 on previous page] may have been overly ambitious, even misleading (in terms of the potential for any global network to impact on the lives of individuals). However, there was a very clear sense of its vision being 'on track'. The voice and leadership of PLHIV is critical to a comprehensive, rights-based global response to HIV and to putting the GIPA and 'nothing about us without us' principles into practice.

The respondents to the Review had varying opinions about well GNP+ is *performing* its vision and mission – in terms of their clarity, visibility and implementation. A common message across different stakeholder groups was that the organisation is definitely "*doing a much better job*", having made dramatic improvements in recent years. When asked how well GNP+ represents the voices of PLHIV, over half of those answering the question in the online survey – all of whom said that they know GNP+ to some extent⁹ – selected either 'quite well' or 'very well' (35.9% and 20.8% respectively). Only 13.5% said 'not well'.¹⁰

Figure 4: Viewpoints on the strengths and weaknesses of the past role of GNP+

"[GNP+ has] made voices of PLHIV stronger by inter-connecting networks and putting PLHIV issues on the global agenda."

PLHIV respondent to online survey

"I can't imagine a global response without GNP. They, and the voices and perspective they bring, are critical to 'keeping it real' and developing policies and interventions that work."

Respondent from a multilateral organisation

"Activists in my region know that GNP+ exists and welcome its role. But they don't really know what the organization does and there isn't a sense of 'it's not mine.'"

Respondent from a regional PLHIV network

"We have a responsibility to all those who've died to continue to own this organization. But we need to be clear what we are /are not. At the moment, it's not clear why GNP+ exists and what the expectations are."

Respondent from GNP+ Board

"The intention for involvement is clear. But the mechanism isn't. We need to look at two-way communication between Secretariat and regions."

Respondent from regional PLHIV network

⁹ Question 4 of the survey was compulsory and asked the respondents to select one option to indicate whether they know GNP+ 'not at all', 'a little', 'quite well' or 'very well'. The responses were 19.6%, 43.9%, 21.7% and 14.8% respectively. The percentages are of the 993 PLHIV responding to the question. Subsequently, those answering 'not at all' were automatically taken to question 10 (about the future of GNP+). Those selecting the other options continued to question 5 onwards (about the past and future of GNP+).

Interestingly, however, 30.11% of the respondents to the survey question – again people who said that they know GNP+ to some extent – stated that they did not know how well GNP+ is performing. Examples of reasons given included that GNP+'s role is unclear or it has a low profile in their region. Many did not provide further comment, explaining that they simply do not know enough about what the organization *does*.

Meanwhile, a range of other respondents – particularly from regional PLHIV networks and international CSOs – expressed some disappointment about the extent to which GNP+ has facilitated a voice or leadership of PLHIV. Some perceived that GNP+ had experienced 'mission creep' – with the organization becoming too focused on programmatic work and neglecting its core role as a global advocate. They expressed concern that GNP+, guided by the Board's strategic decisions, has neither provided strong and dynamic leadership itself (mobilizing constituents, being 'out there' in the policy arena, tackling cutting-edge issues, etc) nor invested in the development of new leaders. The Young People Living with HIV programme was cited as an exception to this, with respondents enthusiastic about its potential to re-energise the movement and support young leaders.

Some people noted that 'empowerment' should be an important part of GNP+'s role – through fostering a sense of ownership and involvement in the organisation and building leadership within and among PLHIV.

Some respondents from other HIV networks and CSOs specifically called for GNP+ to, itself, provide dynamic leadership within the current global environment – where the end to 'AIDS exceptionalism' requires a stronger and more united PLHIV voice than ever.

Profile, representation and ownership of GNP+

Throughout its literature relating to 2006-10 (work plans, annual reports, etc), there is recognition of the need for GNP+ to be more inclusive in its efforts to achieve its vision and fulfil its role¹¹. The materials also demonstrate that – through programming and communications – GNP+ has responded by investing staff time and resources in creating channels and building platforms to increase consultation and input.

The many and significant achievements in this area include the establishment of Positive Community. This online discussion platform aims to use social networking tools to catalyse an HIV response driven by PLHIV from all around the world and shape GNP+'s advocacy messages. The achievements also include international e-consultations (such as on the WHO guidelines on ART and TB in 2009), the redevelopment of the GNP+ website and the development of a communications strategy.

Figure 5: Online survey: What has GNP+ done best?

When asked what GNP+ has done best to date, examples of responses by PLHIV answering the online survey included:

"Placed itself on the global HIV map."

"Putting the voices of PLHIV firmly on the agenda."

"The very existence of a network is a good start and even in its hard times with finances and management GNP+ has managed to stay alive and loud."

"Strengthening PLWHIV networks and fighting stigma and discrimination."

"Been in the fore front of fighting for the rights, involvement and freedom of PLHIV for many years."

"Excellent guides/tools and conference planning."

"There has been a lot of progress at addressing key prevention, treatment, stigma and human rights issues within its various consultations."

"As a result of the work carried by GNP+ more countries are interested in the active participation of PLWH."

"Representation in international policy development arena and conducting regular surveys and studies that are unique to the PLHIV population to guide interventions and national strategies and HIV funding."

¹⁰ Respondents were asked to select one option. The percentages are of the 638 PLHIV that answered the question.

¹¹ For example, *Annual Report 2006*, Global Network of People Living with HIV, June 2007.

These efforts were particularly recognised during the focus group discussion with GNP+ programme partners - with national PLHIV networks expressing a sense of involvement in the organisation's work. They provided examples of how they had been contacted during consultation processes (from e-surveys to in-person meetings) and invited to share their views and contribute to the development of global positions.

The Review also showed, however, that, beyond its immediate programmatic partners, many stakeholders still perceive GNP+ to be, as described by a respondent from a regional PLHIV network, a *"clique, rather than a network"*. There is a view – particularly among those from regional PLHIV networks - that, rather than facilitating a voice and leadership, the organisation is driven by the Secretariat (described by one such stakeholder as *"a team of great, talented people, but predominantly white gay men from the North"*). Others articulated a sense of disconnect between GNP+ and 'PLHIV on the street'. Again, GNP+'s literature demonstrates awareness of these concerns and steps to address them (such as the recruitment of a more diverse range of staff). But many constituents appear to remain unaware of this.

The Strategic Plan for 2006-10 and other literature for the period states that GNP+ takes its mandate from its constituents. However, again, there appears to be a gap between this intention and people's perceptions. Many of the PLHIV involved in the Review said that they did not know if and how they could get involved. As some respondents to the online survey commented: *"you do something somewhere very far away ... with little use for HIV-infected lay people"*, *"I don't feel represented, I have not been consulted, I don't know their activities"* and *"it's not clear how people can get involved."* Such challenges were acknowledged to be exacerbated by structural issues within GNP+, for example with some regions/sub-regions (such as the Middle East and North Africa) lacking a formal connection through the GNP+ Board. There is also the immense practical challenge – cited most strongly on the issue of communication, but mentioned throughout the Review – of language. Many respondents from countries warmly welcomed the increasing availability of GNP+ tools and online surveys in multiple languages. However, some - from regions as diverse as Latin America and West Africa – perceived that routine GNP+ information often remains solely in English.

GNP+'s literature also demonstrates that the organisation has a comprehensive understanding of the breadth of issues within the PLHIV community, including those relating to gender, geography and key populations. Again, however, there is a contrast in how GNP+ is *perceived*. Many respondents to the Review – including multilateral organisations and other global CSOs - expressed concern that, when GNP+ provides a voice of PLHIV, it is *one* type of voice – that does not represent the diversity of PLHIV. GNP+ is seen as very effective at getting PLHIV around the table – with donors and multilateral respondents acknowledging it as the 'go to' organization that is trusted to provide PLHIV input. However, some respondents – across different stakeholder groups - question whether GNP+ is getting the 'right' PLHIV around the table, in terms of maximizing the reach of the network, rather than depending on 'the usual suspects'. Some even perceived that the 'call GNP+ syndrome' risks demeaning, rather than upholding, the GIPA principle.

GNP+ constituency and national/regional/global model

A general view expressed in the Strategic Review was that GNP+ could better communicate who its primary targets are. As one respondent said: *"It's not clear who they're representing – individuals or organisations ... who is the constituency?"* While there appears to be a basic understanding that GNP+ can not involve and work with all 33.4 million PLHIV in the world, some of the responses to the online survey demonstrated that there are still significant hopes from individuals on the ground – and that, within its future strategy, GNP+ must clearly define both who its constituency is and is not.

GNP+ describes itself as a global network of six regional networks and being *"on equal footing with its affiliate regional networks"*¹². Its direct target group is stated to be those networks and their members.

¹² Annual Report 2007, Global Network of People Living with HIV, March 2008.

Its indirect target is all PLHIV, especially those that are vulnerable and under-served, including women, sex workers and people that use drugs¹³. GNP+ aims to “support the ongoing development of its regional networks”¹⁴ and “continually feeds back to the regions” to ensure that “PLHIV are at the centre of everything we do and that networks of PLHIV from around the world drive our cutting-edge evidence informed advocacy.”¹⁵

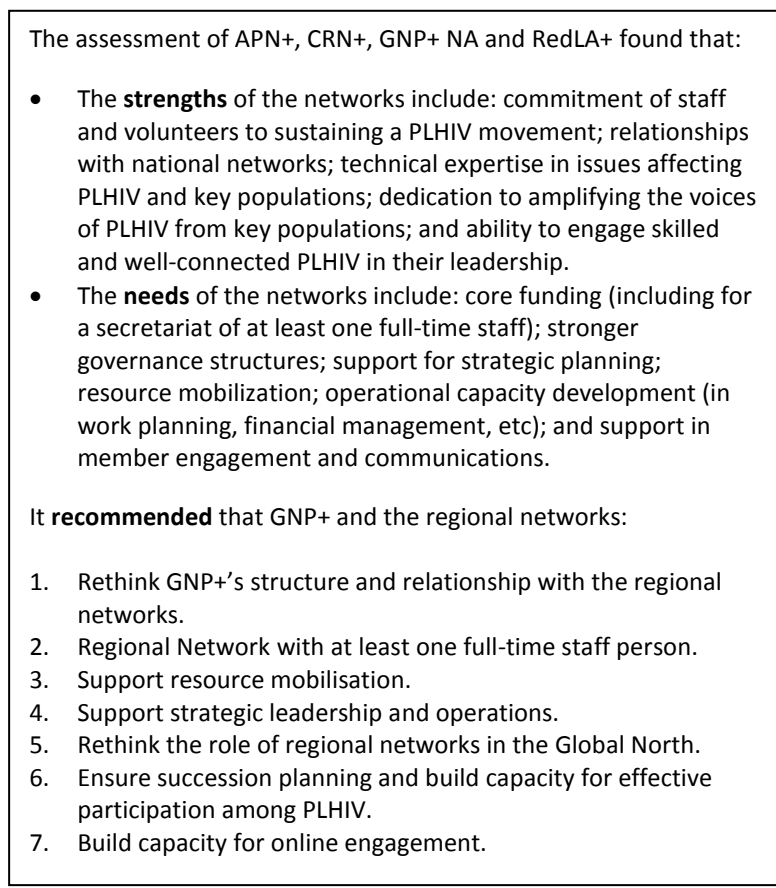
However, again despite evident good intentions, one of the strongest messages from the Strategic Review was the urgent need for GNP+ to re-build the national-regional-global chain that many see as critical to its role and legitimacy (in terms of facilitating a *global* voice of PLHIV). A member of staff expressed frankly that “the relationship between the Secretariat and the regional networks is broken and needs to be fixed.” A key informant perceived GNP+ to be in a vicious circle: it is an organisation governed and owned by the six regional PLHIV networks, but many of those networks are in crisis and/or are dissatisfied with the very organisation that they guide.

During frank discussions, many reasons were given for this scenario. Some regional networks perceive the Secretariat to not treat them as equal partners, be disrespectful of their role and not listen to their needs. Some of the Secretariat perceive some of the regional networks to have low technical capacity, lack transparency, be unaccountable to

their constituents and lack the ability to engage in global level work. Indeed, the Needs Assessment of Regional PLHIV Networks documented significant challenges and needs among the four networks addressed, including in relation to organisational and strategy development and core resources [see Figure 6]. Such challenges significantly limit the role and work that the regional PLHIV networks can currently contribute. As at the global-regional level, there is a sense of disconnect between the regional-national levels.

The Secretariat expressed particular frustration that communication feels one-way – with messages to regional colleagues often going unanswered and opportunities for consultation not ‘passed down the line’ to national constituents. Indeed, respondents with extensive experience of HIV networking at different levels – including from civil society and multilateral organisations – argued that the International Secretariat of GNP+ should not be ‘blamed’ for the weaknesses of the regional PLHIV networks and, as a consequence, obstacles to the functioning of the global body.

Figure 6: Needs assessment of regional PLHIV networks



¹³ GNP+ Strategic Plan 2006-2010, Global Network of People Living with HIV, January 2006.

¹⁴ GNP+ Strategic Plan 2006-2010, Global Network of People Living with HIV, January 2006.

¹⁵ Reclaiming Our Lives: Annual Report 2009, Global Network of People Living with HIV.

On the other hand, the Review also highlighted concern – among those same stakeholders, but also particularly regional and national PLHIV networks – about the extent to which the Secretariat is perceived to have offered support (negotiation, conflict resolution, etc) to networks that are in crisis. A frequently cited example was NAP+ – which has now almost ceased to function on a regional basis, severely limiting Africa-wide PLHIV networking. Such *perceptions* once more contrast with GNP+ literature that documents that, while respecting the autonomy of such networks and often working behind the scenes, the organisation has been engaged and offered support to resolve critical challenges.

Overall, the Review identified a common concern that the links in the GNP+ ‘chain’ are struggling and, sometimes, barely operational. For example, when asked to identify GNP+’s weaknesses to date, many PLHIV answering the online survey (42.5% of whom said that they have been a member of a regional PLHIV that works with GNP+¹⁶) identified communication with countries and links to regional networks¹⁷.

Strategic positioning of GNP+

The Strategic Review highlighted many positive opinions about GNP+’s positioning among civil society and other key stakeholders in the global response to HIV.

GNP+’s annual reports and work plans provide long lists of CSO partners, with many examples of where the organisation gains from and influences others. One such example is WAC - with which GNP+ is connected on multiple levels, including the WAC Board, the joint \$6 million Leadership through Accountability programme and shared offices in Amsterdam and South Africa. Meanwhile, through the Free Space Initiative, GNP+ is part of a wider process to build collaboration among the major global HIV networks.

As shown by the GNP+ Environment Mapping, the civil society response to HIV remains a crowded one [see **Annex 4** for a chart summarising the complementarity and gaps of topic areas and activities of 14 global networks and NGOs working in HIV]. The response is also increasingly vulnerable, with declining resources, particularly for networking and advocacy. As such, many respondents to the Strategic Review – notably those from donor and multilateral organisations - emphasized the need for GNP+ to clarify and enhance its relationship with its closest ‘peers’ and even explore mergers. While recognizing organizational histories (and the original rationale for being *separate* entities), this was seen as particularly important in relation to ICW and ITPC – both of which have significant complementarity with GNP+.

During the Review, many specific examples were cited of GNP+’s successful collaborations with other CSOs and, in particular, the strategic benefits. For example, many respondents praised the youth programme – carried out in collaboration with Young Positives and others, under the umbrella of GNP+. Meanwhile, GNP+ was also specifically credited for building relationships with CSOs beyond the HIV arena, such as Amnesty International and Human Rights Watch.

In terms of the future, some respondents – again, particularly donors and multilateral organisations - cautioned that, while positioning itself within the wider civil society response, GNP+ must stay true to its unique role (as a global PLHIV advocate and leader) rather than position itself as a programmatic NGO. Meanwhile, a few respondents – mainly from other global networks and NGOs - made specific remarks about the dynamics of some of GNP+’s relations with other CSOs, welcoming the leadership of the CEO in establishing them, but urging that they be institutional rather than based on individual relationships.

Meanwhile, the Review also highlighted very positive feedback on GNP+’s positioning among other types of stakeholders within the global response to HIV.

¹⁶ Percentage of the 494 PLHIV responding to the question.

¹⁷ Total of 182 comments received to the question.

Examples included GNP+'s role in relation to normative and policy-setting bodies, such as WHO (with GNP+'s lead role in facilitating consultations on ART guidelines leading to it gaining Formal Relations with the agency) and the Global Fund (with GNP+ seen as instrumental to the inclusion of affected communities within decision-making structures at both global and national levels). They also included in relation to other multilateral agencies, such as UNFPA and UNICEF – which recognise and appreciate GNP+'s role in gathering evidence and providing a voice for PLHIV within technical debates and policy development on issues such as SRHR and youth. Meanwhile, donor respondents articulated the value added of GNP+ to them – not only in terms of providing a sound investment of their funding, by also serving as an invaluable reality check within the changing environment for HIV and a critical partner for keeping HIV on the global agenda.

While again providing very positive feedback, some respondents – notably from global CSOs – called on GNP+ to ensure that its engagement with other types of stakeholders is more systematic and strategic. For example, they urged GNP+ to not only continue good relations with bodies such as the Global Fund and UNAIDS, but to maintain constant and consistent engagement in the Board structures of those agencies.

GNP+ Secretariat – funding, communication, management

Throughout the Strategic Review, many respondents praised the dramatic and significant transformation of GNP+ - approved by the Board and operationalised by the Secretariat - within the period of its current Strategic Plan. It has changed from a near-bankrupt organization on the verge of collapse in 2006 to an increasingly secure and stable one in 2010 with a large programming portfolio. During 2005-9, GNP+'s income rose by an astounding 458%, matched by an almost parallel increase in expenditure of 439%. During 2006-10, the number of staff increased to 13. During 2006-09, GNP+ went from having a handful of sub-contractors to over 90, mostly networks of PLHIV. It has proven its competency in not only raising, but managing significant amounts of resources, such as the \$6 million grant from the UK's Department for International Development (DfID) for the Leadership through Accountability Programme.

As a key informant stakeholder involved in HIV for over 20 years summarised: *“GNP+ has been like a phoenix emerging from the flames. It has come out much stronger than before.”*

As documented in its literature – and as noted by some respondents, including Board members and donors – much of GNP+'s recent success is rooted in a commitment to professionalise as an organisation. This extensive Renewal Process has involved strengthening or introducing good practice systems and procedures in areas as varied as accounting and monitoring and evaluation. The network has also enhanced its corporate image, including with a recent re-branding of its logo.

These developments are sincerely welcomed. However, the Strategic Review again identified a sense of some of GNP+'s constituents feeling out of touch – with a perception of decisions being taken without consultation and/or explanation. There were also some questions about the allocation of resources. For example, one respondent, while welcoming GNP+'s 'new look', felt that effort would be better invested in the basics (of improving day-to-day communication between the Secretariat and the regional networks).

The International Secretariat of GNP+ was credited as being a skilled and committed group of professionals. As a respondent from a regional PLHIV network put it *“you can't possibly question their dedication – they work hard, have solid skills and care about what they do.”* However, other respondents questioned what they perceived as imbalance within the Secretariat – particularly in terms of gender, ethnicity and sexual orientation. A more significant concern was expressed - across different types of stakeholder groups - about the leadership of the GNP+ Secretariat, with questions as to whether - after the intensive work and personal dedication of recent years – they have the vision and energy to re-mobilise the organization for the critical period ahead.

In relation to the future role of GNP+, the key findings of the Strategic Review related to:

Role of GNP+ - facilitating PLHIV voice and leadership

When asked if a global network of PLHIV is still needed, the vast majority (91.5%) of the respondents to the online survey said 'yes'. Many added comments to qualify their answer, often focusing on the unique role that such a network can play and the sense that it is needed 'now more than ever'. Across the other methods of the Strategic Review – including the one-to-one interviews and focus group discussions with constituents of regional PLHIV networks – the answer to the same question was also a resounding 'yes!'

Many respondents – particularly those involved in the PLHIV movement for a long time – qualified their 'yes'.

A common comment was that such a network is only needed if GNP+ changes - more strongly focusing on a core role of facilitating the voice and leadership of PLHIV.

When PLHIV answering the online survey were asked to select *all* possible roles that they would like GNP+ to play in the global response, the selections were: an advocate for the issues and needs of PLHIV among global organisations, meetings and consultations (selected by 73.2%); a supporter and trainer of PLHIV leaders (enabling them to represent PLHIV at national, regional and global organisations, meetings and consultations) (72.2%); a provider of support (training, tools, etc) to national and regional networks of PLHIV to support their advocacy work (67.8%); a global 'watchdog' – sharing and exchanging information about issues that affect PLHIV (60.1%); a mobiliser of resources for PLHIV organizations (59.8%); a coordinator of programmes to gather evidence about the issues and needs of PLHIV (53.5%); and a coordinator of regional networks of PLHIV (46.8%)¹⁸.

The popularity of all of the given options perhaps, once more, reflects people's different and ambitious expectations of GNP+. Subsequently, however, when asked to select *just one* priority, preference was given to 'advocate for the issues and needs of PLHIV among global organisations, meetings and consultations' and 'supporter and trainer of PLHIV leaders'¹⁹.

Figure 7: Viewpoints on issues and directions for the future role of GNP+

"The GNP+ centre of gravity needs to change. As a global network, you get your legitimacy if regional and national networks see you a global leader."
Respondent from international HIV organisation

"It is important to have global level leadership, but it is also essential for this global voice to be able to bring to the table in New York or Geneva the voices of its constituencies in countries."
Respondent from multilateral organisation

"GNP+'s niche is as the voice for PLHIV. GNP+ is needed more than ever AIDS is slipping off the world's agenda. People need to ... counter the re-medicalisation. We need to get real there are millions still ill and without ARVS."
Key informant respondent

"The Secretariat and regional networks need to do joint programming and fundraising. It's about: 'How do we work together to get the funding we need?'"
Respondent from international CSO

"HIV groups need to organise themselves as a system. We need simplification of structures, without groups losing their identities."
Respondent from donor organisation

¹⁸ The respondents were asked to select as many options as relevant. The percentages are of the 684 PLHIV responding to the question.

¹⁹ The respondents were asked to select one option. The responses were: an advocate for the issues and needs of PLHIV among global organisations, meetings and consultations (25.9%); a supporter and trainer of PLHIV leaders (enabling them to represent PLHIV at national, regional and global organisations, meetings and consultations) (21.5%); a provider of support (training, tools, etc) to national and regional networks of PLHIV to support their advocacy work (12.9%); a mobiliser of resources for PLHIV organizations (12.6%); a global 'watchdog' – sharing and exchanging information about issues that affect PLHIV (12.4%); a coordinator of programmes to gather evidence about the issues and needs of PLHIV (6.6%); and a coordinator of regional networks of PLHIV (5.4%). The percentages are of the 683 PLHIV responding to the question.

These two roles were strongly echoed across the Review, including in the interviews with key stakeholders and focus groups with the Board and staff. Even national programme partners - who could be argued to gain the most from the current focus on programmatic work- stated global advocacy as GNP+'s comparative advantage. As a key informant said, GNP+'s role is as a *"megaphone for developing countries and PLHIV issues – providing international connections and protection."* As discussed in Area 2, GNP+'s programme platforms/portfolio of issues should provide the pillars and parameters for its advocacy and leadership role.

Many respondents specifically called on GNP+ to develop a more conscious and comprehensive approach to facilitating and developing leadership among PLHIV. This should continue to include providing spaces for existing and potential leaders to meet (not necessarily in person), as well as exploring the potential for mobilising the development of a package of leadership capacity building and support.

Overall, respondents across the sectors involved in the Review urged GNP+ to not simply clarify its role, but passionately and convincingly articulate it to internal and external audiences alike. Many particularly urged the 'new' GNP+ to provide dynamic and forward-looking leadership within the PLHIV movement – uniting people and serving as a global watchdog for emerging issues affecting PLHIV within challenging times.

Profile, representation and ownership of GNP+

The Strategic Review confirmed a common desire for GNP+ to become the global network for the full diversity of all PLHIV. To support this, it should continue to build the strategic links begun in 2010 – particularly with ICW, the Network of Sex Worker Projects (NSWP), Global Forum on HIV and MSM (MSMGF) and International Network of People who Use Drugs (INPUD) - to better address the needs of those most vulnerable. People stressed the need for GNP+ to be aware of the changing nature of HIV responses and, for example, the need to stay relevant to people who have access to treatment and experience wellness.

Many respondents – but particularly the Board and regional PLHIV networks - felt that, to be a voice for all PLHIV, would require a change in the current culture and structure of GNP+ - with systems established to ensure wider and more diverse involvement of PLHIV in the organization, especially in terms of representation and governance (see Findings Area 3). As some respondents – such as key informants and global CSOs - articulated, it is time to move beyond GNP+ being represented by a small group of individuals and develop legitimate processes to build a wider group of spokespeople and 'ambassadors'.

As described in more detail in Findings Area 2, the PLHIV participating in the online survey had hundreds of suggestions as to how GNP+ could better communicate with and engage them, from consultations to national focal points to using social networking tools.

GNP+ constituency and national/regional/global model

In this part of Area 1, many of the recommendations for future action were connected to those of Area 3 and issues of governance. For example, it was noted that, within re-defining the role of GNP+, it would also be critical to re-define (or re-confirm) the organisation's constituency (and in turn, who should be involved in its governance). While many individual PLHIV respondents to the online survey appealed for GNP+ to engage at the local level, many others – particularly those directly involved in global networking - warned that this is neither appropriate nor feasible. Some people, including many within the GNP+ Board, were keen to maintain a network model focused exclusively on the regional PLHIV networks. Many others, however – and, again, particularly those with extensive current involvement in global networks - argued for a more modern approach. This would move away from the rigidity of a traditional network and offer a more flexible interpretation (of a constituency of PLHIV networks and organizations that work at national/regional/global levels and are connected through shared interests and values). As a respondent from a research institution noted: *"Over time, the concept of a network has become less relevant ... but there is still a need for global bodies that bring people together."*

Indeed – as shown by the online survey (where, when asked to select one role for the organization, only 5.4% chose ‘coordinator of regional networks of PLHIV’²⁰) – the Review showed strong interest in moving away from GNP+’s previous model. But, despite this, respondents were keen to emphasise that, to maintain its constituency links and credibility, GNP+ *must* still, as a matter of urgency, improve the relationship between the Secretariat and the regional PLHIV networks. It was suggested that this would require significant investment on both ‘sides’ – not only in terms of time and infrastructure, but will and energy. As someone expressed very frankly: “*we will all have to stop the whining and get on with it.*”

Informed by the Needs Assessment of Regional PLHIV Networks, the Secretariat and regional networks should build genuine two-way communication, better understand each other’s needs, and strategise together about relevant action. While many regional networks called for the Secretariat to have a direct role in resource mobilization and technical support, other stakeholders warned that this may be neither appropriate nor feasible – and, instead, the Secretariat should identify opportunities, broker with potential donors, etc. Specifically, where called upon by local constituents, GNP+ should also offer support and facilitation to networks that are in internal crisis.

Overall, many called on GNP+ to build on its many past strengths, but ‘reinvent’ itself – redeveloping as a more modern, dynamic and flexible body – perhaps a type of ‘forum’. It was encouraged to look at examples such as the MSMGF to explore ways to build a ‘movement’ of people – or, as one person described it, “*networking, rather than building a network*”. The mandate should be tight – with a clear, strong focus on the big global issues and processes of the day.

Strategic positioning of GNP+

For the future, respondents encouraged GNP+ to continue its positioning with other civil society actors (such as the Free Space), but to take a step further – more strategically identifying areas of commonality and streamlining agendas and even infrastructure. Some respondents, particularly donors and multilateral organisations, advised GNP+ to be a ‘lean’ CSO – responding to the financial environment by consolidating with others and demonstrating cost efficiencies in Secretariat and running costs. Specific suggestions included having further strategic discussions with ICW about the potential to merge or align as a single global network. They also included exploring some type of merger or, at least, more structured collaboration with ITPC, especially given (as presented in Area 2) the strong desire for GNP+ to re-engage with treatment issues.

Figure 8: GNP+ Environment Mapping

The GNP+ Environment Mapping concluded that:

1. While there are several global networks and CSOs working in HIV, GNP+ has strategic advantages in some areas, fills particular niches and distinguishes itself from most others by:
 - Being a global network with a mandate, governance structure and specific focus on PLHIV.
 - Having programming supported by extensive experience in evidence gathering, social and community based research.
 - Showing particularly strong leadership on GIPA, SRHR and Positive Health, Dignity and Prevention.
 - Having a unique opportunity for innovative programming through the Young People Living with HIV Programme.
2. Given the common areas of work, it is important to ensure coordination among GNP+ and IAS, ICASO, ICW, IPPF, MSMGF and International HIV/AIDS Alliance.
3. GNP+ can also play a leadership role in helping to coordinate the efforts of global networks and CSOs engaged in advocacy and policy work, particularly in relation to: Universal Access; human rights, criminalisation and stigma and discrimination; and global commitments to HIV, accountability and funding.

²⁰ Percentage of the 683 PLHIV responding to the question.

Overall, as concluded by the Environment Mapping to complement the Strategic Review [see [Figure 8](#) and [Annex 4](#)], the GNP+ Strategic Plan for 2011-15 must reflect both what role other civil society actors are playing and what unique contribution GNP+ can make. Some respondents to the Review also recommended that GNP+ continue to build relations with CSOs beyond the field of HIV, especially in the light of the global trend towards both broader and human rights-based approaches to health.

GNP+ was also strongly encouraged to continue its positioning among other key sectors involved in the global response to HIV. This was seen as critical to a move (recommended in Area 2) to expand GNP+'s role in global advocacy, for which it will be vital to have 'open doors'. Some respondents – including from donor and multilateral organisations – specifically urged GNP+ to continue its collaboration with organisations such as WHO and to more systematically engage (or re-engage) with the decision-making structures of other normative agencies (notably UNAIDS) and funding mechanisms (notably the Global Fund).

GNP+ Secretariat – funding, communication, management

Within the Review, it was recommended that, to support the 'new' GNP+, the International Secretariat would need to review and adjust their work accordingly, for example looking at job descriptions, staff development and the allocation of resources. In particular, it was noted that increased capacity might be required in advocacy and leadership development, as well as continued attention to issues of professionalisation.

In addition, further investment will be required in consultation and communications work to bring the 'new' organisation to life. PLHIV answering the online survey suggested a variety of social media (many of which GNP+ is already using) to enhance such work. Organisations such as INPUD and MSMGF were cited by some CSOs as useful examples to learn from in terms of both the advantages and disadvantages of using diverse media to develop a 'virtual global community'.

It was also emphasized that a successful future for GNP+ will require dynamic leadership within both the Secretariat and the Board – with the vision to drive through potentially significant changes throughout the network and to rebuild relationships of trust.

Some respondents – particularly those based in regions themselves – specifically encouraged the Secretariat to consider relocating (fully or partially) to a developing country. This could build on the current example of a GNP+ member of staff being based in the WAC office in South Africa or explore co-hosting opportunities with a regional PLHIV network. While it was recognised that the latter would require careful planning and positioning, it was felt that it would present significant opportunities for synergies.

FINDINGS AREA 2: THE WORK OF GNP+

Area 2 of the Strategic Review focused on: GNP+'s work (in terms of key competencies, results and balance); GNP+'s country programmes (approaches, strategy and dynamics); GNP+'s global advocacy; GNP+'s approaches (involvement of PLHIV and partnerships); and GNP+'s portfolio of issues. It explored GNP+'s strengths and weaknesses to date and identified key issues and directions for the future.

[Note: As stated in the Introduction to this report, the Strategic Review did not serve as a formal or systematic evaluation of the quality or impact of the programmatic and advocacy work of GNP+. As such, this section does not intend to provide a detailed description or assessment of these areas. It does, however, address strategic questions relating to programmes and advocacy, such as GNP+'s overall competencies, approaches and balance. It should also be noted that no definition of 'advocacy' was provided to participants in the Review – and, as such, responses often reflect different understandings of what the term means and involves for GNP+].

The past: Strengths, weaknesses and key issues in 2006-10

In relation to the past work of GNP+, the key findings of the Strategic Review related to:

GNP+ work – key competencies, results and balance

As seen in Findings Area 1, many respondents – from donors to regional PLHIV networks – praised the work achieved by GNP+ in 2006-10. This reflected a sense of the organization 'coming back to life' and re-establishing itself as a technically credible player within the global response to HIV.

As documented throughout its literature, each year GNP+ has achieved an increasingly impressive amount and range of work. As just one example, the highlights of 2009 [see [Annex 5](#) for an extract of the Annual Report] included: Positive Health, Dignity and Prevention receiving global recognition as a new human rights-based framework; the Leadership through Accountability programme supporting PLHIV networks in Kenya, Nigeria and Zambia to build their capacity and implement the GIPA Report Card and Human Rights Count! (with 139 human rights violations recorded in just three months); the Global Criminalisation Scan having data from over 200 countries and serving as the main source for the UNAIDS database on Punitive and Protective Laws; the launch of the Advancing the Sexual and Reproductive Health and Human Rights of People Living with HIV Guidance Package and development of Policy Briefs for key populations; e-consultations providing PLHIV input into the development of WHO guidelines on ART and TB; and the launch of the Young People Living with HIV Programme.

Figure 9: Viewpoints on the strengths and weaknesses of the past work of GNP+

"The transition of GNP+ has been spectacular. It's come back from the dead. It has excelled at toolkits, reports, consultations on technical areas, etc. But that hasn't been translated into advocacy."

Respondent from GNP+ Board

"Documentation/production of books and guidelines on positive living, human rights and care and support has tremendously assisted individuals and communities."

PLHIV respondent to online survey

"The tools are amazing and very useful. But the challenge is that it feels like the projects aren't part of a strategy. The activities are ... not connected."

Respondent from a regional PLHIV network

"With advocacy, we've achieved a lot, but the issue is that our work isn't systematic, especially with the big global mechanisms and processes. We need to get better at taking our evidence and having the guts to go to global mechanisms and say 'these are the issues, what are you going to do about them?'"

Respondent from GNP+ staff

As described in the following pages, the Strategic Review documented some challenges, but often major strengths and competencies within such areas of GNP+'s programmatic and advocacy work. Perhaps more significantly, however, it identified a strong concern about the *balance* between the two. As seen in Area 1, GNP+ is called on to have a primary role of global advocate. Yet, at present, many feel that advocacy²¹, alongside leadership and network development, takes a back seat to programmes and critical opportunities are being missed. Many respondents qualified their concern with recognition that GNP+'s programmatic work is a practical necessity to 'keep the organization afloat', in particular serving as a vital, and increasingly rare, means to cover core costs. However, while this situation is common to other global networks, there is a fear – particularly expressed by respondents from other global CSOs - that GNP+ might 'follow the money' too much and be distracted from its core purpose.

Meanwhile, literature again demonstrates that, throughout its work, GNP+ has moved towards quality improvement, being more objective-orientated, with more clearly defined and measured results. Again, however, some respondents noted that – with both programmatic and advocacy work – GNP+ should improve how it shares its results. There is a perception that, while clearly (and importantly) being articulated to donors, GNP+'s results are not always translated into 'easy access' information or communicated widely.

GNP+ country programmes – approaches, strategy and dynamics

Across all of the stakeholder groups - from donors to regional and national PLHIV networks – people praised the programmatic work that GNP+'s Board has approved and the Secretariat supported. The programmes are broadly considered useful, high quality and well managed.

A minority made a strong argument that, as a global advocate, GNP+ should not support *any* type of programmes. But many others acknowledged GNP+'s strong competency in evidence gathering to be critical to both the credibility of the organisation and the messages that it brings to advocacy. As a respondent from another global CSO network said, "*an organization can't just do international work. Without developing tools and gathering evidence from the ground, you don't have the legitimacy to do global advocacy.*"

Figure 10: Viewpoints on GNP+ tools

"Positive Development was a very good tool to empower leaders."
Respondent to online survey

"The manual on HIV decriminalisation done by GNP+ together with IPPF is remarkable."
Respondent to online survey

"While donors and national governments pay lip service to stigma and discrimination as a barrier to scaling up, the Stigma Index provides a concrete strategy and involves PLHIV."
Respondent from a donor organisation

During 2008-10, GNP+ went through a series of development processes for 6 evidence-gathering methodologies: Human Rights Count!, PLHIV Stigma Index, Global Criminalization Scan, GIPA Report Card, Advancing the SRHR of PLHIV (country level) and Positive Health, Dignity and Prevention. These and other aspects of GNP+'s work are now presented under five thematic platforms: 1. SRHR of PLHIV; 2. Human Rights of PLHIV; 3. Positive Health, Dignity and Prevention; 4. PLHIV Empowerment; and Measuring Impact and Operational Support²². As articulated in GNP+ literature, such as proposals to donors and work plans, the work is based on a 'model of change' whereby national PLHIV networks are supported to develop and/or implement one or a series of tools, build their capacity, involve their constituents, analyse issues of concern, gather evidence and inform advocacy for policy change.

²¹ As noted, a definition of 'advocacy' was not provided to the respondents to the Review. However, here, in this report, the term is used to refer to a range of activities that influence and bring about policy change. Examples include the use of evidence and messages to: directly lobby decision-makers; affect the decisions of global Boards; and influence the conclusions of technical consultations. In relation to GNP+, it particularly refers to advocacy with global decision-making institutions – such as the Global Fund, UNAIDS and WHO – that provide normative guidance, set policy agendas and allocate resources.

²² *Work Plan 2010*, Global Network of People Living with HIV.

The Review showed that many people consider this model both ‘clever’ and ‘strategic’. Comments in the online survey – as well as interviews and focus groups with programme partners and regional PLHIV networks - demonstrated very positive views on the utility of programmes, with multiple examples cited [see Figure 10]. Within the survey, 43.7% of the respondents said that they knew GNP+ through using its tools²³. As a national programme partner said: *“evidence gathering has been a critical milestone in the functioning of our network.”*

However, the Strategic Review also identified some strategic challenges relating to programme work. For example, some respondents, especially from global CSOs, cautioned GNP+ of the dangers of tools-based process – that risk the tool being seen as the end, rather than a means to a larger goal (of increased local capacity and policy change). Some voiced a concern that GNP+’s programmes do not quickly or effectively enough get beyond information gathering to the stage of extracting advocacy messages. This is exemplified by two comments from respondents from multilateral organisations that: *“the SRH work is good, but not fast enough ... they need to ‘get things out the door’”* and *“the stigma and criminalisation work is beginning to bear fruit ... the question now is how the information can be harvested and used for global advocacy.”*

As documented in its literature, the tools used by GNP+ have been developed in collaboration with PLHIV and their networks. Despite this, however, some questions were raised – particularly by respondents involved at the country level – about the user-friendliness of some of the resources. For example, someone felt that the Stigma Index is *“too complex and requires training to carry it out with confidence”*. Some others felt that the tools address issues that are *“too high up on the pyramid of PLHIV needs”* or that the processes are too rigid – with the methods perceived as too prescriptive and not allowing for enough flexibility (to adapt to the local context and modifications by the project partners).

Some respondents – notably from some regional and sub-regional PLHIV networks – raised challenging issues about the relationships involved in GNP+ programmes. In some cases, there was disappointment about the selection of countries and partners (a process viewed by some as un-transparent). This was particularly the case in instances where GNP+ was perceived to have ‘leapfrogged’ the regional or sub-regional PLHIV network and worked directly with a national network. GNP+’s national partners did not specifically cite such scenarios to be a problem, while the GNP+ Secretariat provides clear explanations of their logistical and/or political rationale for such instances and emphasises that they maintain communication with the regional network in question. However, some people have been left with a sense of distrust. As a respondent from a regional PLHIV network perceived: *“It feels like GNP+ goes around looking for fertile ground to implement its tools, but doesn’t want to take the time to understand us and our region and work through our structures.”*

As in Area 1, some respondents again articulated concern about a vicious circle. As the International Board, the regional PLHIV networks guide and approve the strategies and decisions of GNP+. For example, every Board meeting includes an update on programme developments, including efforts to ensure quality and accountability to donors and constituents. Yet it is sometimes those same networks that question what work GNP+ is doing, and express frustration at being deemed unable to meet the technical requirements for programme management. An important reality check was provided by the Needs Assessment of Regional PLHIV Networks. This clearly identified that, despite interest and will to serve as a channel for technical and financial support to the national level, some of the regional networks are currently not in a position to do so. They have major limits to their capacity - not only technical, but in critical areas such as financial accounting and monitoring and evaluation systems.

²³ Respondents were asked to select as many options as relevant. The percentage is of the 494 PLHIV responding to the question.

More generally, several respondents called on GNP+ to better articulate how its tools link to each other and provide a combined package of support – something clearly explained in proposals to donors²⁴ and annual reports, but less so in other communication.

There were concerns about the progression of aspects of GNP+'s programme work – with the perception of a lack of a clear 'roadmap' of when and why GNP+ starts, implements and exits. This is particularly the case with tool-based work – where several different types of respondents felt that GNP+'s comparative advantage is in the research, development and piloting process (then mobilising others to take the tool to scale). In contrast, some other respondents – particularly from countries and regions - questioned the longer-term plan for the work of GNP+ within countries. They urged GNP+ to take on a more comprehensive and sustainable role in technical and financial support for national and regional PLHIV networks. As someone from a regional network said, *"the Criminalization Scan is good, but what are we supposed to do with it? We need guidance, support and resources to take it forward."* While many understand the challenging financial environment, others feel angry by a perceived scenario of GNP+ expecting them to roll out tools without support to secure the resources to do so. Yet another dimension was expressed by some respondents – including from some regional PLHIV networks - who perceive GNP+ to be too protective of its tools. A member of the Board felt that *"the tools are seen as belonging to Amsterdam, not to the wider network"*.

Finally, the Review also revealed a sense of GNP+ programmes being 'victims of their own success' – facing multiple expectations (from network members, partner organisations, donors, etc) and lacking adequate time to stop and fully reflect on their strengths and weaknesses. As a member of staff concluded, *"the pace is too fast ... we don't have time to learn as an organization."*

GNP+ global advocacy

As documented in GNP+ literature, such as annual reports, during 2006-10, the network carried out a significant amount of both planned and reactive advocacy work. This took a variety of forms, from direct lobbying to the production of publications and the participation in technical consultations and working groups. It addressed a broad range of issues of relevance to PLHIV, from travel restrictions to SRHR and new prevention technologies. Such work is seen to have been especially powerful when rooted in evidence gathered through GNP+'s programmes (such as on stigma) and/or when dealing with issues where the value added of PLHIV voices is particularly clear (such as criminalisation of HIV transmission).

The literature documents multiple examples of where GNP+ has demonstrated its competency, either on its own or in partnership, to affect policy change. For example, during a recent consultation on WHO guidelines on ART, almost all of the input from PLHIV (coordinated by GNP+) was reflected in the final text. Another particularly important achievement has been GNP+'s contribution to paradigm shifts in critical areas of policy relating to PLHIV. A key example of this is Positive Health, Dignity and Prevention – a concept established at the Living 2008: Positive Leadership Summit, then intensively developed through a technical consultation coordinated by GNP+ and UNAIDS in 2009 involving networks of PLHIV, and, country programme implementers, as well as development, multilateral, UN and donor agencies. Here, GNP+ is credited with re-orientating thinking on 'positive prevention' to a more holistic, empowering and rights-based approach. For example, the new five year strategy of the US government's President's Emergency Plan for AIDS Relief (PEPFAR) now includes Health, Dignity and Prevention, while UNAIDS is promoting the strategy among its ten cosponsoring UN agencies.

²⁴ For example, in its proposal to the Governance and Transparency Fund, GNP+ uses the context of global HIV commitments and national HIV targets to package GNP+ tools and processes as a means to build national ownership, accountability and action. *Keeping the Promise of HIV/AIDS Universal Access: Proposal to the Governance and Transparency Fund of the Department for International Development*, Global Network of People Living with HIV and World AIDS Campaign, September 2007.

Such concrete achievements are praised and welcome. For example, as a respondent from a multilateral organisation said of Positive Health, Dignity and Prevention, *“This is precisely what a global network of PLHIV should be doing – pushing us, making us think ‘outside the box’ and setting the new agenda.”*

However, some involved in the Review – including respondents from GNP+ staff and global CSO advocates – questioned the extent to which GNP+ has an advocacy *strategy*. Some perceived GNP+’s efforts to be disjointed, rather than systematic or specifically enough focused on the institutions with the greatest potential for policy change. Especially strong opinions were expressed about GNP+’s perceived lack of consistent engagement with the civil society structures to influence the Boards of UNAIDS and the Global Fund. Some respondents perceived that, even when present at such opportunities, GNP+ can sometimes appear to lack the capacity to fully engage in policy processes and to use their evidence from countries to actually shape global agendas. Some also voiced concern that the advocacy work is too dependent on individuals, rather than institutionalised within the network.

In 2006, at the start of the period of its current Strategic Plan, GNP+ acknowledged that *“the International Secretariat needs to develop its advocacy niche”*²⁵. Despite individual high quality efforts, there is a sense that this is still to be achieved. While acknowledging the global advocacy arena to be a crowded one, many respondents to the Review – including those from organizations that are, themselves, in that arena - felt that GNP+ should ‘up its game’ and fulfil its unique and critical role. Some also specified that – while welcoming all staff having some responsibility (within a holistic programme cycle that sees evidence and advocacy as a continuum of activities) – GNP+ should strongly consider hiring or re-assigning at least one member of staff to have specific and senior-level responsibility for the organisation’s advocacy work.

GNP+ approach to programmes and advocacy – involvement of PLHIV

While Area 1 of the Strategic Review addressed PLHIV involvement in GNP+ as a network, Area 2 examined the strengths and weaknesses of involvement in developing and implementing the organisation’s programmatic and advocacy work. Once more, the process highlighted a mixed set of feelings about the quality and quantity of such involvement. In the online survey, over half of the respondents to the relevant question – all of whom described themselves as knowing GNP+ to some extent - rated GNP+ as involving PLHIV ‘quite well’ or ‘very well’ (31.9% and 22.4% respectively). Just 14% stated ‘not well’²⁶.

This was supported by views expressed across many of the one-to-one interviews and focus group discussions – that, within its programmatic work, GNP+ has invested time and resources in establishing a consultation mechanism, as well as used tools such as Positive Community and e-surveys. As a member of programme staff said: *“Everything we do is based on consultation with PLHIV. The challenge is that we don’t always communicate that to people.”*

Some respondents, including some PLHIV answering the online survey, were keen to discuss the PLHIV-specific summits organized by GNP+. Living 2008 – held in Mexico City before the 2008 IAC and involving 267 PLHIV from 82 countries – was seen as an important opportunity to both bring PLHIV together and structure their input into advocacy (for example, through sessions on Positive Health, Dignity and Prevention)²⁷. Examples of comments made in the Strategic Review – by respondents from a regional PLHIV network, national HIV organization and multilateral organisation respectively – were: *“the Living Summit was very much cherished by people in my region we met others and shared experiences with those from other countries”, “Living 2008 covered essential themes”*²⁸ *and was a good step forwards” and “a well placed and inspirational event – encouraging PLHIV to be more vocal in their own countries about their rights and needs”*. However, some others – particularly donors and other global civil society networks – questioned the sustainability of such *“expensive and coordination-heavy”* meetings.

²⁵ Annual Report 2006, Global Network of People Living with HIV, June 2007.

²⁶ Respondents were asked to make one selection. 31.7% selected ‘do not know’. The percentages are of the 494 PLHIV that answered the question.

²⁷ Living 2008: The Positive Leadership Summit: Management Evaluation Report, May 2009.

²⁸ The Summit focused on four key issues identified by a pre-meeting of 40 PLHIV leaders: Universal Access; SRHR; criminalization; and prevention.

Similarly, mixed views were expressed about GNP+'s ongoing membership of the coordinating committee of the IAC – a position that many view as an opportunity to serve multiple purposes (promote GIPA, further GNP+'s advocacy work, share results from its programmes, etc). GNP+ is credited with investing significant time and effort in this work which, during the course of the current Strategic Plan, saw Conferences in Toronto (2006), Mexico (2008) and Vienna (2010). Also many commend GNP+ for being the voice and guide for PLHIV within the labyrinth of the Conferences – ensuring both support for PLHIV delegates and profile for PLHIV-related issues. For example, Vienna 2010 saw the first major plenary on the subject of Positive Health, Dignity and Prevention, while GNP+ participated in a large number of interactive sessions, including with national programme partners sharing the results their work. However, some other respondents question the degree to which GNP+ has been able to actually set the agenda of the IACs, bringing new issues and different perspectives. Some also specifically criticised GNP+'s coordination role to be, as a respondent from another CSO described, *“director-led, rather than institutional and systematic, with the regions involved.”*

GNP+ approach to programmes and advocacy – partnerships

While Area 1 of the Strategic Review addressed how GNP+ positions its role in relation to others involved in the global response to HIV, Area 2 examined the strengths and weaknesses of its partnerships for developing and implementing its programme and advocacy work.

The Review confirmed that, as proposed in its Strategic Plan 2006-10, GNP+ *“makes extensive use of strategic partnerships with other organisations and structures”*²⁹. Multiple examples were cited of such partnerships – from the 5-year Leadership through Accountability Programme (with WAC) to the SRHR package (with EngenderHealth, ICW, IPPF, UNAIDS, UNFPA, WHO and Young Positives) and Stigma Index (with ICW, IPPF and UNAIDS). Such partnerships have offered concrete added value to both sides. For example, the Leadership through Accountability Programme combines GNP+'s reach to national PLHIV networks and set of evidence-gathering tools with WAC's involvement in national civil society platforms and campaigns. Similarly, GNP+'s collaboration with the University of the Witwatersrand and Human Sciences Research Council on sero-discordant couples, GNP+ gained from the academic institution's research rigour and project structure, while they gained from GNP+'s contacts with national PLHIV groups and people-centred approaches.

In some cases, such as with INPUD and WAC, GNP+ partnerships are formalized through a written Memorandum of Understanding (MoU). While welcomed as good practice and an important step in professionalization, some respondents – although notably not from the partners in question - critiqued the practical validity of some of these agreements. An example cited was ICW, with some people unsure of the worth of an MoU while an organization is experiencing significant internal challenges and limited capacity.

Also, a range of respondents – from some members of the Board to other leading HIV CSOs – questioned the degree to which partnerships are organisation-to-organisation rather than personality based. As one respondent expressed: *“there often isn't a real relation between GNP+ and other organizations – it's a relationship between people ... [that doesn't] translate into a systematic and collaborative effort.”* Such a scenario is perceived as unhelpful for the development of the organization as a whole and members of staff. Finally, some partner organisations, while broadly welcoming their collaboration with GNP+, expressed concern about the extent to which GNP+ views them as equal collaborators – in terms of not only the partner organization respecting GNP+'s expertise in relation to PLHIV-related issues, but GNP+ respecting the partners' areas of skill and knowledge.

²⁹ GNP+ Strategic Plan 2006-2010, Global Network of People Living with HIV, January 2006.

GNP+ work – portfolio of issues

Almost all respondents felt that GNP+ are ‘on track’ with a portfolio of issues, such as SRHR and stigma and discrimination, that fit under a broad banner of human rights. The organization was credited with not only focusing on this area, but being responsive to its changing agenda, for example taking up the emerging issues of travel restrictions and criminalisation (not just of HIV transmission, but key populations). It was also, as noted, felt to have actually *introduced* some human rights agendas – such as Positive Health, Dignity and Prevention, described by a respondent from a multilateral organisation as *“cutting edge discourse.”*

Figure 11: Viewpoints on issues addressed by GNP+

“GNP+’s focus on human rights has been entirely appropriate and welcome. Yes, there are many challenges facing PLHIV. But, in my region, rights are top of the list.”

Respondent from a regional PLHIV network

“GNP+ has been a strong and reliable advocate for human rights – not only promoting strong messages, but backing them up with the evidence.”

Respondent from a multilateral organisation

“It’s insane that a global network of PLHIV isn’t working on treatment.”

Respondent from an international CSO

Overall, rights-related issues were felt to be highly relevant to PLHIV throughout the world and a strong basis for both country level programmatic work and global advocacy.

Alongside this positive endorsement, GNP+ was strongly criticized for key issues that appear to be missing, or of low profile, within its portfolio. The vast majority of respondents felt that it was a significant, even *“unforgivable”*, mistake for GNP+ to have been inactive on issues of treatment – and that, rather than seeing it as ‘ITPC’s turf’, they should find a strong complementary role (for example focusing on global advocacy). Strong concerns were also expressed about GNP+’s perceived limited engagement in the broader frameworks of Universal Access, the MDGs and global financing. As a key informant said of the latter: *“It may seem intangible to those on the ground, but the most critical issue for PLHIV right now is funding. The failure to achieve full funding means stock outs, reduced access to treatment and loss of life.”*

The future: Key issues and directions for 2011-15

In relation to the future work of GNP+, the key findings of the Strategic Review related to:

GNP+ work – key competencies, results and balance

Many of those involved in the Strategic Review encouraged GNP+ to build on its competencies to date and continue to implement a continuum of programmatic and advocacy work. However, they called for a reorientation of the organisation’s work (namely a greater emphasis on advocacy) – a move seen as critical if GNP+’s core role is as a global advocate and leader for PLHIV.

The Strategic Review identified that, across all aspects of its work, GNP+ needs to continue to not just measure its results, but communicate and market them. A strong message heard throughout the Review was that many important stakeholders – from national PLHIV organisations to multilateral organisations - simply do not know the type and scale of work that GNP+ is implementing. In turn, they risk significantly underestimating its results.

GNP+ country programmes – approaches, strategy and dynamics

Here, the Strategic Review identified that, in the future, GNP+ should continue its programmatic work, but explore some aspects of its strategy and approach to such work. In particular, respondents – including those from national programme partners – called on GNP+ to define a roadmap (showing how it envisions its role in, contribution to and stages of programming). Particular attention should be paid to the rationale for starting a programme (why that issue? why that approach? why that country? what added value does GNP+ bring? etc) and exiting (when can a tool be scaled up by others? when can GNP+ move on? etc). For example, a respondent from an international CSO argued that “GNP+ should approve the concept of the tools and pilot them, then advocate to others to use them as standard.”

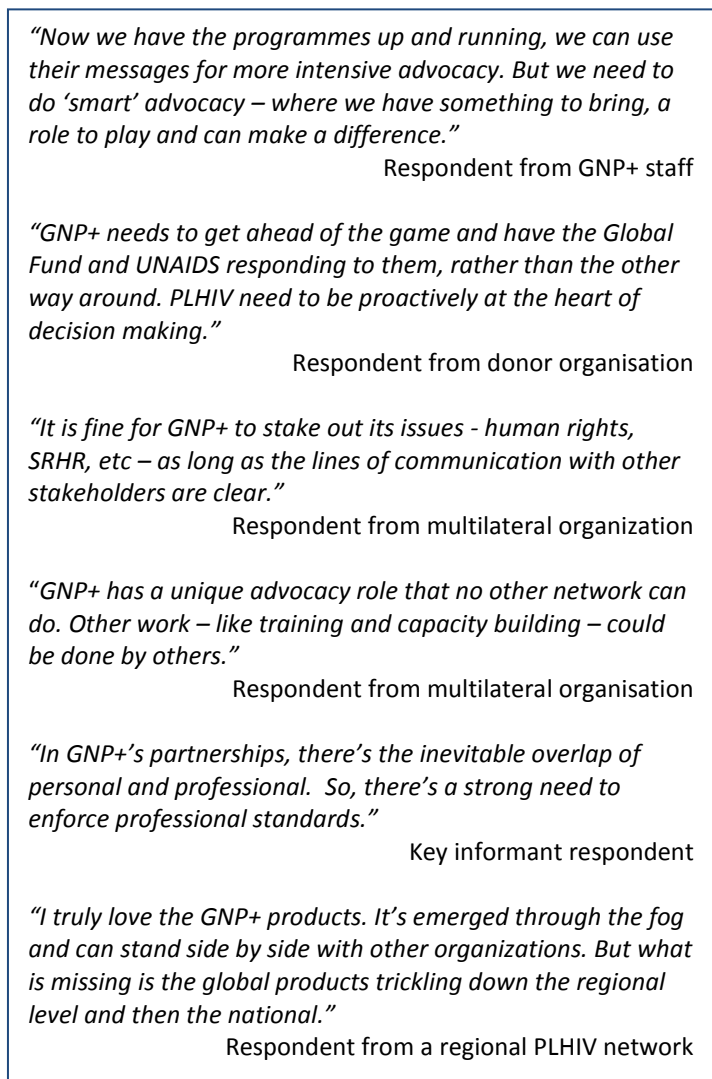
As noted, there was also a request by many – including respondents from multilateral organisations and global CSO advocates - to speed up the process to reach some stage of evidence that can be used for global advocacy, even if that evidence is preliminary.

Some respondents specifically encouraged GNP+ to review the process by which it selects countries and partners. However, those respondents had different opinions about what such a process should look like. Some – including from regional and sub-regional PLHIV networks - called for programmes to *only* be implemented through the regional PLHIV networks (as a matter of principle and a means to support those networks). Others – including some from national PLHIV networks - felt that GNP+ should be free to work directly with national organizations (while making all possible efforts to communicate with the relevant regional network).

GNP+ global advocacy

The Strategic Review identified a strong message for GNP+ to build on its global advocacy work to date and scale-up such efforts in the future. Some respondents advised that - with limited resources (especially for policy-orientated work) and a crowded playing field – such advocacy must be ‘smart’. They further explained that this meant being highly strategic – identifying where the organization could most usefully and uniquely bring the voices of PLHIV, in combination with identifying where it is most likely to influence policy change. Indeed, some respondents – especially those from organizations that are, themselves, involved in global advocacy – emphasized that GNP+ should (perhaps exclusively) focus its advocacy on the key bodies and processes within the global HIV and health architecture, particularly through the civil society delegations to the Boards of the Global Fund, UNITAID and UNAIDS.

Figure 12: Viewpoints on issues and directions for the future work of GNP+



Overall, there was a call for GNP+ to develop a clear advocacy plan – that continues to build on the consultative process enshrined in the original Global Advocacy Agenda³⁰ and has clear aims, targets and indicators. The plan should also clearly show how the advocacy work is informed by GNP+'s programmes and focused on its portfolio of issues.

GNP+ approach to programmes and advocacy – involvement of PLHIV

As noted in Area 1, many respondents perceived the need for GNP+ to implement a significant shift in the involvement of PLHIV in all aspects of its work. In relation to consultation and communication for programmes and advocacy, the organization was again encouraged to 'get even more creative'. The PLHIV answering the online survey had multiple suggestions, including the use of: social media (facebook, blogs, etc); list serves; consultations; concise materials; regional teleconferences; national focal points; and information platforms.

Some respondents specified that the involvement of PLHIV must be both a philosophy and practice in GNP+ programme and advocacy work. While the concrete consultation mechanisms developed with national programmatic partners are welcome, such work needs to continue to extend much further – to a wider and larger group of constituents. Again, the Secretariat's ability to liaise and consult with the regional PLHIV networks and, in turn, their ability to liaise and consult with their national constituents, is critical to the process and requires significant attention.

GNP+ approach to programmes and advocacy – partnerships

In the future, GNP+ is strongly encouraged to continue its trend of developing mutually beneficial partnerships with organisations that offer complementary 'added value' to its programme and advocacy work (such as through their technical skills, reach and political influence).

There is a call to look at the quality of some such partnerships – to ensure both that GNP+'s involvement is not token (to *"give the PLHIV rubber stamp"*) and that the work is based on mutual respect and agreed deliverables on both sides. Some respondents also specified that, while an MoU can serve as a useful tool, GNP+ should ensure that its partnerships are 'alive' (rather than just on paper) and also institutional (rather than just being understood or led by individual members of staff).

As noted in Findings Area 1, some respondents – especially donors – urged GNP+ to consider moving beyond general partnerships with other stakeholders to establish more systematic collaborations. The GNP+ Environment Mapping suggested that, for programmatic work, organizations such as the International HIV/AIDS may be particularly relevant partners, while, for advocacy, groups such as ICASO are important.

GNP+ work – portfolio of issues

Within the Review, respondents called upon GNP+ to clearly define its portfolio of issues – namely those on which it focuses and to which it brings the greatest 'added value'. The portfolio should be feasible – being mindful, as a respondent from a regional PLHIV network advised, *"not to dilute the work by trying to cover too much."* It must also be needs-based and strategic, complementing the work of others organizations.

³⁰ Developed at GNP+'s 9th Conference, Warsaw, 1999, by PLHIV activists from around the world as a platform to underpin GNP+'s advocacy work. Aims: 1. To increase access to treatment, care and prevention programmes for all PLHIV. 2. To decrease stigma and discrimination directed towards people living with HIV. 3. To increase and implement a more meaningful involvement of people living with HIV at all levels and in every aspect of the HIV response.

As exemplified by the online survey, many PLHIV would *ideally* like GNP+ to address a broad range of issues³¹. However, when asked to prioritise, the respondents selected access to treatment and human rights. This emerged as a common selection across all methods of the Strategic Review, including the focus group discussions among staff and regional networks, where a strong, often unanimous, call was made for GNP+ to both maintain attention to human rights and strongly re-engage in treatment.

During the process of the Review, definitions were not provided or solicited for the terms 'human rights' and 'treatment'. However, it was noted that it would be important to agree on such definitions within the development of GNP+'s Strategic Plan for 2011-15. For example, the APN+ focus group discussion specified that 'treatment' should include issues of co-infection and the quality of treatment that is accessed by PLHIV.

Meanwhile, some respondents – particularly multilateral organisations and CSO advocates - made powerful arguments that GNP+ has 'little choice' and a 'moral imperative' to engage in issues relating to the changing global environment and backlash against 'AIDS exceptionalism' - within the context of reduced global financing, the failure to reach Universal Access by 2010 and the political interest in the MDGs and global health.

Such agreed thematic priorities will help GNP+ to not only articulate what it addresses and why, but also justify what – with limited resources - it does not address.

Meanwhile, the Strategic Review revealed debate and disagreement about the degree to which – within its portfolio of issues – GNP+ should focus on the full diversity of PLHIV or more specifically on key populations. Some respondents, for example from Sub Saharan African countries, appealed for GNP+ to give more attention to issues relating to women, children and poor communities. Others appealed for GNP+ to focus more on sex workers, MSM and people that use drugs – articulating the specificities of their vulnerability and needs as PLHIV. Meanwhile, some respondents argued that GNP+ does not necessarily need to address 'all camps' and, instead, as one respondent said, "*should be the 'glue' to link up all of the interest groups - MSM, IDU, women, etc – and reflect the large group and diversity that is PLHIV.*"

³¹ When asked to select as many issues as are relevant, respondents selected: human rights of PLHIV (79.9%); stigma and discrimination against PLHIV (77.1%); access to treatment for PLHIV (75%); PHDP for PLHIV (72.0%); GIPA (68.6%); SRHR of PLHIV (61.2%); and leadership among PLHIV (58.3%). When asked to prioritise just one of those issues, the respondents selected: access to treatment for PLHIV (24%); human rights of PLHIV (17.7%); PHDP for PLHIV (13.5%); stigma and discrimination against PLHIV (13.4%); GIPA (14.8%); leadership among PLHIV (10.5%); and SRHR of PLHIV (4.5%). Percentages are of the 707 and 696 PLHIV that answered the two questions.

FINDINGS AREA 3: GOVERNANCE OF GNP+

Area 3 of the Strategic Review focused on the: model, role and value added of the GNP+ Board; selection, constituency and skills of Board members; and roles, relationship and communication between the Board and Secretariat. It explored GNP+'s strengths and weaknesses to date and identified key issues and directions for the future.

The past: Strengths, weaknesses and key issues in 2006-10

In relation to the past governance of GNP+, the key findings of the Strategic Review related to:

GNP+ Board – model and role

According to the Strategic Plan for 2006-10, the Board of GNP+³² (composed of two representatives of each of the six regional PLHIV networks): *“represents its diverse constituency base and leads the network in both strategic and operational matters.”*

For the respondents who felt able to comment on the subject, the membership and functioning of the GNP+ Board evoked lively discussions within the Strategic Review. Many of those respondents welcomed a model that places the regional PLHIV networks at the heart of GNP+ governance and decision-making. This was reflected in the online survey – where the highest proportion of PLHIV (74%) identified representatives of regional networks as stakeholders that should be members of the Board³³. Meanwhile, some other respondents – including key informants - welcomed what they saw as a move away from a paternal approach to governance (with the Secretariat as the ‘parent’) to one of shared ownership that, as a CSO respondent described, is *“more like seven spokes on a wheel”*.

The Review also highlighted, however, that achieving full, cross-regional participation in GNP+ has been hugely challenging. Few Board meetings have achieved representation of all 12 of the regional representatives, with some even struggling to achieve the modest target set for a quorum. Various reasons were cited for this situation, notably internal crises within individual networks (affecting their ability to select and send representatives and/or to engage in GNP+'s global agenda). The impacts have often been negative and perceived to threaten the legitimacy of the Board as a cross-regional structure. For example, most recently, there has been limited participation by Sub-Saharan Africa (the region that accounts for some 67% of all HIV infections³⁴) and Eastern Europe and Central Asia (the only region where HIV prevalence is still on the rise³⁵).

Figure 13: Viewpoints on the strengths and weaknesses of the past governance of GNP+

“The regional networks are critical to GNP+ governance – they not only bring the regional issues, but connection to people on the ground. They make GNP+'s decisions and strategies ‘real’”
Respondent from regional PLHIV network

“The problem is with how the regional representatives are selected. My question is: do the current board members really represent the community?”
Respondent from regional PLHIV network

“What I miss is a complete set of PLHIV voices on the Board. I haven't seen a single sex worker or person that uses drugs – or even people who really, really know those issues. It's not about where people come from, but the expertise that they bring.”
Respondent from GNP+ staff

³² Note: The Board meets at least once a year, requires a quorum of 50% and takes decisions by majority vote. Regular agenda items include a report from the CEO, programme update, financial update and reports from the regional networks. These are complemented by meeting-specific items on current areas of work and strategic issues. The Board appoints a Secretariat Council (to oversee and support the Secretariat on day-to-day matters) and is advised by the Regional Coordinators who serve as ex-officio members. The CEO reports to the Board and is an ex-officio member.

³³ Respondents were asked to select as many types of stakeholder as relevant. Percentage of the 681 PLHIV answering the question.

³⁴ Data for 2008. UNAIDS; <http://www.unaids.org/en/CountryResponses/Regions/SubSaharanAfrica.asp>.

³⁵ UNAIDS; <http://www.unaids.org/en/CountryResponses/Regions/EasternEuropeAndCentralAsia.asp>

Some respondents specifically discussed the structure of GNP+'s governance. In particular, concerns were cited about the ability of the current model to provide appropriate support to the Secretariat in terms of technical and strategic inputs and rapid decision-making. One key informant respondent bluntly described the current Board as functioning as *"little more than a talk shop – that has neither the power nor the inclination to make decisions."*

Overall, GNP+ literature documents significant efforts – through the organisation's Renewal Process – to enhance the understanding of roles and responsibilities and performance of functions by the GNP+ Board. Started in 2009, this has led to the approval of a core set of documents, such as a Code of Conduct.

GNP+ Board members – selection, constituency and skills

Some of the respondents to the Strategic Review did not wish to comment on the strengths and weaknesses of representation within the GNP+ Board to date – due to a lack of knowledge or direct experience of the subject. However, among those stakeholders who *were* familiar with the recent and current structure and performance, related questions again evoked some strong reactions.

Many respondents – including key informants and multilateral organisations - emphasised that, over the years, the GNP+ Board has benefitted from the involvement of some highly skilled, committed and passionate members. They also noted that the current Board offers maturity, with extensive experience of both GNP+ and individual networks. Overall, however, concerns were expressed both about how regional representatives are selected for the GNP+ Board and whether they bring the right type of skills, experience and expertise to their role (both individually and collectively). Selection processes vary from region to region and, in some cases, appear to lack transparency (as reported by some PLHIV in the regions concerned). At worst, the process is perceived as a 'done deal', with Board members maintaining their places for extended periods, potentially preventing others from getting involved. Some respondents linked their concern over the selection of members to questions about the accountability of the Board – namely the extent to which members feel responsibility to their constituents, for example in terms of gathering input on agenda items and providing feedback after Board meetings.

In its 2006-10 Strategic Plan, GNP+ stated that: *"Critical to the networks' long-term success is the ability of the Board to involve a wider range of views from the constituencies they represent in developing and shaping the strategic direction of the organization"*. The Plan also committed to *"procedures for opening out the involvement and responsibility for thinking to a wider constituency of those aligned to the network."* In 2010, many respondents feel that this has not happened and question whether the current GNP+ Board offers the full range of organizational, policy and programmatic skills - from human resources to HSS - needed by a global network operating within an increasingly complex HIV environment. They also questioned whether the Board offers the 'clout' needed for GNP+'s future – in terms of what one person described as the *"PLHIV movers and shakers"* that can serve as high profile advocates for the organization and its work. A common message across many sectors involved in the Review was that the Board needs a wider diversity of members, in particular those with experience in relation to issues affecting key populations.

GNP+'s Strategic Plan for 2006-10 also committed to supporting Board members to *"have the skills and capacities they need to play their leadership role"*, including through *"mentoring, coaching and induction elements."*³⁶ In practice, however, relevant respondents to the Review – including some of the past and current Board themselves – report the lack of strategy to actively assess, make use of and, where necessary, build the capacity of the Board. Some also highlighted the lack of succession planning, for example with no strategy for handover from exiting/entering members or to maximize the experience of ex-Board members.

³⁶ GNP+ Strategic Plan 2006-2010, Global Network of People Living with HIV, January 2006.

GNP+ Board and Secretariat – roles, relationship and communication

Different aspects of the Strategic Review – but, in particular, the focus group discussions among the staff and Board, plus a review of the minutes of Board meetings during 2006 to 2010 – highlighted a major concern about the relationship between the GNP+ Board and Secretariat. At best, the tensions have been healthy – constructively challenging each other to perform better and more transparently. At worst, however, they are perceived to have descended into conflicts and rifts, threatening to destabilize the organization.

It is clear that, through the Renewal Process, the Secretariat has made significant efforts to clarify and strengthen roles and responsibilities in relation to GNP+ governance. But, despite this, there remain some fundamental misunderstandings – even among some current Board members – about who is responsible for the day-to-day activities of GNP+ and whether the Board leads the Secretariat or vice versa. There is also a need for more clarity about some roles and relationships, notably between the CEO, Chair of the Board and wider Board. Some respondents feel that the current roles of the CEO and Chair risk them having, as a respondent from a regional PLHIV network perceived, *“too much power and taking decisions without due process.”*

Poor communication was also cited as a major cause of tensions on both ‘sides’. For example, the minutes of Board meetings document Board members frequently asking for more information and involvement. But they also document the Secretariat expressing disappointment about repeatedly poor responses to requests for input from members. A closed session of the 2009 Board meeting concluded that there wasn’t enough communication in all directions – within the network, among the regions and between the Secretariat and the Board. While actions agreed as a result of that meeting – such as a monthly call between the Chair and CEO – are seen as a positive move, there remains a sense that there is still much to be done.

Other causes for poor relations, particularly between individuals in the Board and Secretariat, were cited as personality clashes and lack of respect. Once more, these often appear to be rooted in issues relating to the governance system – in terms of different understandings of processes, roles and responsibilities.

The future: Key issues and directions for 2011-15

In relation to the future governance of GNP+, the key findings of the Strategic Review related to:

GNP+ Board – model and role

When asked whether, in the future, GNP+ should *only* be governed by PLHIV, the majority of respondents gave a firm ‘yes’. This opinion was stated most strongly by individual interviewees, particularly those involved in past and/or current PLHIV networking and activism. Some described the question as a ‘no brainer’ – that any PLHIV organization, but especially one that provides a global voice, must be governed solely by PLHIV. Otherwise, it is an affront to the GIPA and ‘nothing about us without us’ principles and would risk GNP+ becoming ‘like any other HIV organisation’. As one of the focus group discussions concluded: *“We don’t want governance on our behalf”*.

However, other views on the matter were also expressed. For example, in the online survey, although the majority of PLHIV (56.6%) answered ‘yes’ to GNP+ only being governed by PLHIV, a large proportion (39.6%) said ‘no’³⁷. Many of the latter commented on their answer, for example arguing that skills and commitment should be the primary qualification for Board membership and that, in particular, people *affected* by HIV and/or involved in other HIV organizations have much to contribute to GNP+.

³⁷ The percentages are of the 685 PLHIV responding to the question.

Overall, the message was that PLHIV should maintain a significant, if not total, majority in any type of GNP+ governance structure. They should also have sole voting rights and ultimate decision-making power. However, the message was also that ‘the pressure is on’ for anyone involved in the governance of GNP+ to demonstrate not only commitment, but the right type, scale and level of skill set and experience to guide a global network of PLHIV through what may be its most challenging era to date.

The Review confirmed that most respondents call for the regional PLHIV networks to remain central to GNP+’s governance, having at least one place each on the Board. It was also noted that specific efforts should be taken to ensure the involvement of under-represented regions or sub-regions, such as Central Europe and the Middle East and North Africa.

As noted in Findings Area 1, many respondents – including those from global CSOs and national PLHIV networks - encouraged GNP+ to diplomatically, but actively, engage in conflict resolution for the regional PLHIV networks. This issue arose again in relation to governance – where action was called for in situations where regional networks fail to be represented at GNP+ Board meetings. This was seen as critical to the quality and legitimacy of decision-making within the governance structure. As someone stated passionately: *“I don’t want to hear about another GNP+ Board meeting where there’s no representation from Africa – it’s just unacceptable.”* But other respondents cautioned against simply ‘filling a seat’, calling for efforts to ensure representatives that can provide high quality input, based on the real issues of PLHIV in their region.

A small number of respondents felt that the number of Board seats allocated to each region should reflect HIV epidemiology, for example with Sub-Saharan Africa having more seats than other regions. A clear message was also, however, that the regional networks should no longer be the *only* members of the Board. Instead, GNP+ should actively explore ways to facilitate input from a wider group of stakeholders. For example, according to the results of the online survey among PLHIV, GNP+’s governance should also involve: specific populations living with HIV, such as HIV positive MSM and HIV positive sex workers (identified by 52.1% of respondents); organisations that support PLHIV, such as UN agencies or international NGOs (49%); other global networks that involve PLHIV (43.2%); ‘at large’ individuals who participate in their individual capacity and bring specific expertise or skills (44.6%); and groups that work with specific populations affected by HIV (34.7%)³⁸.

Figure 14: Viewpoints on issues and directions for the future governance of GNP+

<p><i>“The voice of PLHIV has to be in the hands of PLHIV. I don’t accept having others speak for me.”</i></p> <p>Respondent from a multilateral organisation</p>
<p><i>“I would like to see a process that engages PLHIV in electing the representatives to the Board. It’s currently done in a closed way.”</i></p> <p>Respondent from a regional PLHIV network</p>
<p><i>“There’s no excuse for GNP+ not to have connected and skilled PLHIV on their Board. They exist, but you’ve got to make it worth their while. And, yes, geographic representation matters. But GNP+ needs to be tough on who those representatives are and what it needs from them.”</i></p> <p>Key informant respondent</p>
<p><i>“GNP+ is not responsible for what happens in regions and never can or should be. But it has responsibility to reach out to partners. As a global network, you can’t guarantee that something won’t go wrong in the regions. So you need to be flexible enough to adapt your governance structure to the changes.”</i></p> <p>Respondent from international CSO</p>
<p><i>“As it’s a network that represents ‘me’ globally, it needs to have representatives from different communities – sexual orientation, women, key populations and, in particular, youth - as well as the regional networks.”</i></p> <p>Respondent from a national PLHIV organization</p>
<p><i>“We need people that understand the issues that PLHIV face, but from a policy change perspective.”</i></p> <p>Respondent from GNP+ staff</p>
<p><i>“We need Board members who can translate their regional perspective into a global cause.”</i></p> <p>Respondent from a regional PLHIV network</p>

³⁸ The respondents were asked to select all relevant options. The percentages are of the 681 PLHIV answering the question.

The results of the survey were confirmed by the interviews and focus groups, with respondents suggesting that GNP+ should, in particular, reach out to 'peer' networks (such as ICW and ITPC), organizations with specific technical expertise (such as ARASA on law or Young Positives on youth) and forums for key populations (such as INPUD, NSWP and MSMGF). They should also involve PLHIV who are 'hooked into' key advocacy forums, such as the civil society Delegations to the Global Fund, UNAIDS and UNITAID. Meanwhile, some respondents emphasised the importance of the Board maintaining a balance in terms of gender.

In terms of structure, some respondents – particularly those from regional PLHIV networks - called for GNP+ governance to remain as it is. But the majority - notably those outside of the current structure and with experience of other organisations – argued that the model must change. They suggested that a new, more efficient structure is needed for the next five years to, in particular, provide guidance within the global environment and on organizational development. While there was no consensus on which particular structure might work best, many encouraged GNP+ to learn from other organizations – such as ICASO, ITPC and WAC – that have developed structures such as management boards, advisory groups and constituency representatives. In general, the future GNP+ structure should combine some type of small executive group (that is highly engaged, appropriately skilled and provides regular support for organizational management) with some type of a wider advisory group (that provides strategic and technical input into areas of work).

GNP+ Board members – selection, constituency and skills

The Strategic Review highlighted the need for some of the regional PLHIV networks to urgently clarify and, where necessary, improve the democratic and transparent process for selecting or electing their representatives to the GNP+ Board. As a key informant said: *“The days of just having people at the table are long gone. We now need a proper application process to ensure high qualified and skilled representatives.”* Many respondents called for comprehensive selection processes and performance frameworks – as increasingly used by other bodies, such as the civil society delegation to the UNAIDS Board. These could include job descriptions, selection criteria, applications, interviews and key performance indicators.

Meanwhile, another clear message from the Review was that all members of the GNP+ governance structure – whether HIV positive or negative, and whether from the global South or North – must be able to offer (or rapidly build) skills that go beyond general HIV networking and into critical organizational areas (such as resource mobilization, strategic planning and human resources) and policy/technical debates (such as 'treatment as prevention', HIV integration and global financing). They must also offer contacts and connections, both to the PLHIV community and to key decision-making forums.

As with the management of the Secretariat, several respondents emphasized that the management of the GNP+ Board will be critical to the organisation's future – with the Chair needing not only appropriate skills, but time and determination to play their role to the full. Suggestions of how to support the role of the Chair included introducing a Vice Chair position and providing a tailor made package of support, for example including mutual mentoring with Chairs of other global civil society networks.

GNP+ Board and Secretariat – roles, relationship and communication

Finally, respondents – including those involved in the current Board and staff - were keen to stress that any future governance structure would be dependent on improved relations between the GNP+ Board and Secretariat. Building on the current Renewal Process, this could be assisted through the further development of and 'buy in' to clear systems and roles and responsibilities on both sides. This should, in particular, address areas of current tension, including the relationship both between the CEO and Chair of the Board and between each of them and the Board as a whole. There was a call from several respondents – both within and external to the current Board – to improve relevant systems and professionalise relationships for the sake of the organization. It was emphasized that such processes would require good will among those involved, with team building to re-foster mutual trust and respect.

CONCLUSIONS

Based on the findings across all three areas of the Strategic Review, the following conclusions are drawn:

1. GNP+ is, by its very nature, something in which **many people have invested a great deal and about which many care deeply**. The over 1,160 respondents to the Strategic Review (from diverse countries, cultures, sectors, etc) were keen to contribute to securing and strengthening the organisation's future.
2. That range of stakeholders has a **range of (sometimes dramatically different) hopes and expectations** of an organisation that, despite impressive growth, remains modest in size and capacity. As with any global network, GNP+ 'cannot please all of the people all of the time'. However, it could better manage expectations and foster ownership by more clearly defining and articulating what it is, what it does and what people can and cannot expect from it.
3. GNP+ in 2010 is unrecognisable from 2006. It has achieved a **dramatic transformation** – from a nearly bankrupt organisation struggling to survive to one with financial stability, an increasingly professional approach and a growing technical reputation. The credit for this lies with many different individuals and organizations, but, in particular, the CEO and staff of GNP+.
4. GNP+ now implements a vast portfolio of work - supporting national PLHIV networks, building partnerships, developing evidence on areas identified as priorities by PLHIV, etc. But there risks being a growing tension between the **increasing praise from external stakeholders and an internal sense of disconnect** (with many constituents feeling unengaged and unrepresented).
5. Some of this disconnect is fuelled by **challenging systems and dynamics** within GNP+ that require urgent action. Examples include the relationships between the International Secretariat and regional PLHIV networks and between the CEO, Chair of the Board and Board as a whole. While continuing to professionalise as an organisation, such relationships require as much attention as issues of structure and function.
6. The disconnect is also fuelled by a gap between the **reality** of GNP+ (i.e. its documented work and results) and **perceptions**. Despite significant efforts to enhance communication and consultation, many constituents and stakeholders remain unaware of the scale, range and quality of programmatic and advocacy results that the network is achieving.
7. The **global environment is shifting rapidly around PLHIV**, with an end to 'AIDS exceptionalism' within policy and funding arenas. Resources are scarcer and HIV-specific networks face pressure to down-size. Against this context, GNP+ faces a choice. It can continue business as usual and try to ride out the storm. Or it can, itself, shift - **fundamentally re-visiting the type of organization it is** and what it means to be 'fit for purpose' for the next five years.
8. Strategic Planning for 2011-15 provides a **timely opportunity** to address many of the issues identified in the Strategic Review of GNP+. It also provides a further opportunity to listen to stakeholders, reach out to new/existing constituents and work together to re-ignite passion for the **meaningful involvement of PLHIV in the response to HIV** and ensure that GNP+ is the global organisation to make that a reality.

RECOMMENDATIONS

Based upon consideration and analysis of the findings of the Strategic Review, the key recommendations are that GNP+ should:

1. Refocus, reenergize and reposition itself as **the global voice, advocate and leader of PLHIV**.
2. Develop a **Strategic Plan for 2011-15 that clearly defines and substantiates that primary role**. Key components should include: defining/building an engaged constituency, including through further creative communication and consultation; developing a planned approach to building global leadership among PLHIV; and enhancing GNP+'s own leadership, including by expanding the diversity of its representation.
3. Move beyond the business as usual of a network-of-networks. Explore different models and re-orientate itself as a **modern type of global entity** - perhaps a 'forum' or 'alliance' - with a constituency base of **PLHIV organisations and networks that work at national, regional and global levels**.
4. Support its role and model by **(re)building strong relations between the International Secretariat (i.e. the global Board and staff) and the regional PLHIV networks** - in recognition of the importance of such relations to engaging constituencies and, in turn, ensuring the legitimacy of GNP+. Use the results of the Needs Assessment of Regional Networks to develop a collaborative approach to GNP+ *facilitating* (rather than *implementing*) the strengthening of the regions' work and accountability and, in turn, their engagement in GNP+'s global efforts. Also, as appropriate, support crisis resolution.
5. Specifically, as a matter of urgency, reach out to PLHIV leaders in Africa to explore the most appropriate and practical mechanism to **engage the African PLHIV community** in the governance and work of GNP+.
6. Significantly **expand global advocacy**, with programmatic work more clearly articulated to provide supporting evidence. In the Strategic Plan, focus on advocacy that specifically targets key policy change mechanisms within which GNP+ can bring added value and make a concrete difference.
7. Maintain a focus on a **human rights portfolio of issues**, but also passionately re-engage with **HIV treatment** and more fully engage in the **global health, MDG and financing for health/HIV agenda**. Define what these issues mean to GNP+ and where its niche lies (complementing the work of others).
8. Build on the Strategic Review to, within an **evaluation of GNP+ programmes**, address not only results and impact, but how the work is done. In particular, look at: the involvement of PLHIV; partnerships; ownership of tools; and a 'road map' of where GNP+ can best use its capacity and value added.
9. Remain **governed by and for PLHIV**, with only PLHIV having decision-making power. But, after the Strategic Plan has been developed, expand the range of PLHIV on the GNP+ Board – maintaining the regional PLHIV networks and **adding HIV positive members from specific constituencies** (such as key populations), **areas of expertise** (such as law) and/or **strategic partners** (such as ICW and ITPC). Based on an audit of the skills and knowledge required to guide implementation of the Plan, ensure that all Board members are appropriately qualified and selected/elected through transparent processes.

10. After the Strategic Plan has been developed, **re-structure the Board** to a model that will provide more effective decision-making for the organisation and support to the International Secretariat in the challenging years to come. Explore different types of models, such as those that combine some form of small and highly engaged management committee with a diverse and flexible advisory group.
11. Position itself more strategically within efforts (such as the Free Space Initiative) to ensure **collaboration, consolidation and cost efficiency within the global civil society response to HIV**. In particular, clarify and strengthen relationships and complementarities with key peers (such as ICW and ITPC), including exploring the potential for more systematic collaboration and/or mergers.
12. Combine the above strategic actions with **urgent attention to inter-personal dynamics and structural relationships** within GNP+. Continue the Renewal Process and professionalization of the organization, but also actively promote conflict resolution and team building.
13. Build on the Strategic Review and use the development of the next Strategic Plan as an opportunity to **continue to listen to, consult and debate** with GNP+ constituents and stakeholders, both 'friends and foes'. Use the final Plan to **re-launch and re-mobilise**. Ensure that all key stakeholders, but particularly staff and Board, understand and support the plan and can act as ambassadors for GNP+ - leading far reaching corporate communications and a 'membership drive' to expand and engage the constituency.

ANNEX 1: LITERATURE REVIEWED FOR GNP+ STRATEGIC REVIEW

1. *GNP+ Strategic Plan 2006-2010*, Global Network of People Living with HIV, January 2006.
2. *Work Plan 2006*, Global Network of People Living with HIV.
3. *Reclaiming Our Lives: Work Plan 2008*, Global Network of People Living with HIV, November 2007.
4. *Reclaiming Our Lives: Work Plan 2009*, Global Network of People Living with HIV, November 2008.
5. *Work Plan 2010*, Global Network of People Living with HIV.
6. *Year Report 2005*, Global Network of People Living with HIV, June 2006.
7. *Annual Report 2006*, Global Network of People Living with HIV, June 2007.
8. *Annual Report 2007*, Global Network of People Living with HIV, March 2008.
9. *Annual Report 2008*, Global Network of People Living with HIV.
10. *Reclaiming Our Lives: Annual Report 2009*, Global Network of People Living with HIV.
11. *Proposal to the Netherlands Ministry of Foreign Affairs 2009-2010: Supporting Documentation: Recent Achievements and Way Forward for GNP+*, Global Network of People Living with HIV.
12. *Annual Review: GNP+ Programme of Work 2007-2010 for Department for International Development*, Global Network of People Living with HIV.
13. *Advancing Positive Prevention through PLHIV Leadership: A Proposal to the Bill & Melinda Gates Foundation*, Global Network of People Living with HIV, March 2008.
14. *Keeping the Promise of HIV/AIDS Universal Access: Proposal to the Governance and Transparency Fund of the Department for International Development*, Global Network of People Living with HIV and World AIDS Campaign, September 2007.
15. *Articles of the Global Network of People Living with HIV*, Global Network of People Living with HIV, 1999.
16. *Global Network of People Living with HIV (GNP+): 2006 Board Meeting*, Global Network of People Living with HIV, August 2006.
17. *Global Network of People Living with HIV (GNP+): Report of the 2007 Board Meeting*, Global Network of People Living with HIV, July 2007.
18. *The Global Network of People Living with HIV (GNP+): Report of the 2008 Board Meeting*, Global Network of People Living with HIV, June 2008.
19. *The Global Network of People Living with HIV (GNP+): 2009 Board Meeting*, Global Network of People Living with HIV, July 2009.
20. *Global Network of People Living with HIV (GNP+): Positive Health, Dignity and Prevention: Country Level Implementation*, paper for Department for International Development, Global Network of People Living with HIV.
21. *Positive Health, Dignity and Prevention: Technical Consultation Report*, Global Network of People Living with HIV, April 2009.
22. *Living 2008: The Positive Leadership Summit: Summit Report*, Global Network of People Living with HIV, 2008.
23. *Living 2008: The Positive Leadership Summit: Participant Evaluation Report (Draft)*, Julian Hows, Development Research Advocacy Governance.
24. *Living 2008: The Positive Leadership Summit: Management Evaluation Report*, May 2009.

ANNEX 2: PARTICIPANTS IN INTERVIEWS AND FOCUS GROUP FOR GNP+ STRATEGIC REVIEW

1. Participants in institutional interviews

Sector/type of institution	Institution	Interviewee
Regional and sub-regional PLHIV networks	Asia Pacific Network of People Living with HIV	1. Noako Kawana
	Caribbean Regional Network +	2. Yolanda Simon
	Latin American Network of People Living with HIV	3. Ruben Pecchio
	GNP+ North America	4. Sean Strub, Frenk Guni and Stephen Alexander
	East Europe and Central Asia Union of People Living with HIV	5. Vladimir Zhovtyak
	Network of African People Living with HIV - Indian Ocean	6. Nicolas Ritter and Ramjuttun Moher
	Network of African People Living with HIV - Central Africa	7. Tita Isaac
	Network of African People Living with HIV - East Africa	8. Joe Muriuki
	Network of African People Living with HIV - Southern Africa	9. Jefter Mxotshwa
PLHIV organisations and programmes	International Community of Women Living with HIV	10. Patricia Perez
	Young Positives	11. Raoul Fransen
	United Nations Plus	12. Rodrigo Pascal
	European AIDS Treatment Group	13. Koen Block
Key population networks	Global MSM Forum	14. George Ayala
	INPUD	15. Mat Southwell
UN agencies	United Nations Joint Programme on AIDS	16. Michel Sidibe
	United Nations Population Fund	17. Lynn Collins
	World Health Organisation	18. Andrew Doupe
	United Nations Children's Fund	19. Pierre Robert
Donor organizations	Bill and Melinda Gates Foundation	20. Owen Ryan
	Ford Foundation	21. Zonny Woods
	Global Fund to Fight AIDS, TB and Malaria	22. Andy Seale
	Government of the Netherlands	23. Monique Middelhoff
	Department for International Development, United Kingdom	24. Silke Seco-Grutz
HIV-specific civil society networks and organisations	International Council of AIDS Service Organisations	25. Kieran Daly
	International HIV/AIDS Alliance	26. Sam McPherson
	International Treatment Preparedness Campaign	27. Sarah Zaidi and John Rock
	AIDS and Rights Alliance for Southern Africa	28. Michaela Clayton and colleagues
	International AIDS Society	29. Ron McInnis and Alan Brotherton
	NGO Delegation to the UNAIDS PCB	30. Sara Simon and Natalia Siniora
Other civil society networks and organisations	International Planned Parenthood Federation	31. Kevin Osborne
	Human Rights Watch	32. Joseph Amon
Research organisations	Population Council	33. Harriet Birungi and Chi Chi Undie
	University of Witwatersrand	34. Laetitia Rispel

Private sector	Positive Action, ViiV Healthcare	35. Dominic Kemps and Michael Joyner
GNP+ Board and staff	GNP+ Board (Chair)	36. Rachel Ong
	GNP+ staff (International Coordinator/ Chief Executive Officer)	37. Kevin Moody
	GNP+ staff (Director of Programmes)	38. Christoforos Mallouris

2. Participants in key informant interviews

Person	Current position and organization (but interviewed in <u>personal</u> capacity)
1. Kate Thomson	Head, Civil Society Partnerships Unit, UNAIDS, Geneva
2. Shaun Mellors	Head, Treatment, Care and Support Department Positive Life Project, Foundation for Professional Development, South Africa
3. Sigrun Mogedal	HIV/AIDS Ambassador, Norway
4. David Barr	Director, Collaborative Fund for HIV Treatment Preparedness, USA
5. Peter Piot	Director, Global Health Institute, Imperial College, London
6. Ben Plumley	Chief Executive Officer, Pangaea Global AIDS Foundation, USA
7. Javier Hourcade Belloqc	Latin America and Caribbean Regional Representative, International HIV/AIDS Alliance, Argentina
8. Els Klinkert	Senior Advisor, Risk and Social Vulnerability: Evidence, Strategy and Results Department, UNAIDS, Geneva
9. Jaqueline Rocha	Programme Associate, UNAIDS, Brazil
10. Hassan Cherry	Director, Think Positive, Lebanon
11. Robin Gorna	Independent consultant

3. Participants in short questionnaire among programme partners

Institution	Interviewee
1. NAM	Caspar Thomson
2. UNAIDS	Xenia Marco
3. REDBOL	Gracia Violeta Ross
4. ICW	Fiona Petit

4. Participants in focus group discussions with key stakeholder groups

Stakeholder group	Number and description of participants/discussion
1. GNP+ Board	9 members of the Board/Regional Coordinators, representing 4 regions. One-day session in Amsterdam. Participants: <ol style="list-style-type: none"> 1. Anuar Luna Cadena, Board Member for RedLA+ 2. Laura Ines, Board Member for RedLA+ 3. Deborah Williams, Board Member for CRN+ 4. Rachel Ong, Board Member for APN+ 5. Robert Baldwin, Board Member for APN+ 6. Sean Strub, Board Member for GNP+ North America 7. Skip Rosenthal, Board Member for GNP+ North America 8. Ruben Pecchio, Regional Coordinator, RedLA+ 9. Yolanda Simon, Regional Coordinator, CRN+
2. GNP+ programme partners/national PLHIV networks	8 representatives of national PLHIV networks/GNP+ programme partners from countries in Sub-Saharan Africa and Asia. 1 hour session held at International AIDS Conference, Vienna.

3. GNP+ staff	<p>10 members of programmatic and administrative staff from offices in the Netherlands and South Africa. Held with two different groups – one as a half day discussion in Amsterdam, the other a 2 hour teleconference. Participants:</p> <ol style="list-style-type: none"> 1. Julian Hows, Programme Officer 2. Rick Jones, Secretariat Coordinator 3. Georgina Caswell, Programme Officer 4. Adam Garner, Programme Officer 5. Marsel Kuzyakov, Programme Officer 6. Moono Nyambe, Programme Officer 7. Martin Stolk, Communications Officer 8. Elizabeth Wouters-Eising, Administrative Accountant 9. Gavin Reid, Technical Support Officer 10. Corinne Moinet, Executive Secretary
4. World AIDS Campaign staff	<p>9 members of staff, including from offices in the Netherlands, South Africa and Bangkok. 1.5 hour session at International AIDS Conference, Vienna. Participants:</p> <ol style="list-style-type: none"> 1. Bianca Marks, Global Programme Officer 2. Claudia Ahumada, Constituencies Programme Manager 3. Tim Barnett, Global Programme Manager 4. Rukia Cornelius, Operations Manager 5. Denis Burke, Chief Producer Media and Communications 6. Daniel Molokele, Africa Programme Manager 7. Liping Mian, Youth Campaign Coordinator 8. Molly Lepeska 9. Greg Gray, Key Populations Campaign Coordinator

5. Participants in focus group discussions with regional PLHIV networks

Regional PLHIV network	Number and description of participants/discussion
1. RedLA+	<p>6 network members from Central America, Andean Region and Southern Cone. 2.5 hour session via teleconference using Elluminate software. Participants:</p> <ol style="list-style-type: none"> 1. Lorena Di Giano, Argentinian Network of Positive People (REDAR Positive), Argentina 2. Guiselly Flores, Peruvian Network of Women Living with HIV, Peru 3. Santiago Jaramillo, Ecuadorian Coalition of People Living with HIV/AIDS (CEPVVS), Ecuador 4. Estevan Colina, Venezuelan Network of Positive People (AMAVIDA/RVG+), Venezuela 5. Adulio Marín, Genesis Group Panama+, Panama 6. Gustavo Chinchilla, ASOVIIH-SIDA COSTA RICA, Costa Rica
7. ECUO	<p>6 network members from 5 countries. Focus group sessions via teleconference. Participants:</p> <ol style="list-style-type: none"> 1. Alexei Burlak, Russian League of People Leaving with HIV/Russian Advocacy Committee, Russia 2. Ivan Ilyin, League of People Leaving with HIV from Eastern Europe and Central Asia, Ukraine 3. Ehtiram Pashayev, Association on Fighting against HIV/AIDS, Network 'Positive Life', Azerbaijan 4. Igori Chilcevschi, League of People Leaving with HIV, Moldova 5. Ghennadii Rosciupkin, League of People Leaving with HIV, Moldova 6. Wojciech. J. Tomczynski, Polish Network of PLHIV 'SIEC PLUS', Poland

8. NAP+ East Africa	5 network members from East Africa region. Session via teleconference. Participants: <ol style="list-style-type: none"> 1. Vincent Omwega, NEPHAK, Kenya 2. Eunice W Waithaka, NAP+ East Africa 3. Anisia Karanja, Focus on Family Living with HIV/AIDS, Kenya 4. Joe Muriuki, NAP+ East Africa 5. Ruth Wanjiru, Consultant
9. NAP+ Southern Africa	11 network members from 6 countries: Lesotho, Mozambique, Namibia, South Africa, Swaziland, Zimbabwe. 2 hour session via teleconference.
10. NAP+ Central Africa	21 network members from 10 countries. 3 hour session held in Yaoundé. Participants: <ol style="list-style-type: none"> 1. Nyobe Dieudonné, INCS/RAPAIC, Cameroon 2. Kayo James Clovis, CATAG/ITPC, Cameroon 3. Tchatat Bankwe, AFSU, Cameroon 4. Tchuenté Hélène, AFASO, Cameroon 5. Irogo Michel, RéCAP+, Cameroon 6. Bertrand Kampoer, FISS MST/SIDA, Cameroon 7. Manga Hilarion, Synergies Campus, Cameroon 8. Fogué Alain, Positive Generation, Cameroon 9. Djihemine Roger, CANEP, Cameroon 10. Nathalie Machoussi, WEL+, Cameroon 11. Anguile Kouassi, REGAP+, Gabon 12. Karl, REGAP+, Gabon 13. Manuel Ndong Nsué, Salud Positiva, Equatorial Guinea 14. Luc Mvendo, Central African Republic 15. Vital Risasi, Democratic Republic of Congo 16. Colonel Felix Ntungumburanye, Burundi 17. Beatrice Kagoyire, Rwanda 18. Dr Jean Claude Fahé, Sao Tome and Príncipe 19. Ivette Ceita Cruz, Sao Tome and Príncipe 20. Ange Bissanga, Republic of Congo 21. Dabe Claire, RNTAP, Chad
11. APN+	36 network members from 24 countries. Half day session held in Bangkok. Participants: <ol style="list-style-type: none"> 1. Dez Hargreaves, Australia 2. John Trigg, Australia 3. John Rock, Australia 4. Wangda Dorji, Bhutan 5. Heng Phin, Cambodia 6. Thomas Cai, China 7. Menglin, China 8. Sarah, East Timor 9. Abdullah Denovan, Indonesia 10. Amireza Moradi, Iran 11. Jun Hatori, Japan 12. Kopkeo Samnanvet, Lao 13. Bounyang, Lao 14. Kinoy, Lao 15. Bakhtiar Talhah, Malaysia 16. Thiya Kyaing, Myanmar 17. Sudin Sherchan, Nepal 18. Rajiv Kafle, Nepal 19. Ron, New Zealand 20. Imran Zali, Pakistan 21. Jerico Paterno, Philippines

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| | <ol style="list-style-type: none">22. Helen Samilo, Papua New Guinea23. Grace Vali, Papua New Guinea24. Arthur Lim, Singapore25. Brenton Wong, Singapore26. Han Suri, South Korea27. Kang Seok Joo, South Korea28. Priyanga Sharin, Sri Lanka29. Geraldine, Sri Lanka30. Suriya Wingwon, Thailand31. Jean, Darc Vietnam32. Vince Crisostomo, Guam33. Zhan Li, China34. Andrew Tan, Malaysia35. Rico Gustav, Indonesia36. Vijay Nair, India |
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ANNEX 3: PARTICIPANTS AND RESULTS OF ONLINE SURVEY FOR GNP+ STRATEGIC REVIEW

The following summarises the quantitative results across all 5 languages (English, Chinese, French, Russian and Spanish) of 'Have Your Say! Survey for People Living with HIV on the Future Role and Priorities for GNP+'. Up to 995 PLHIV answered some of the questions. The percentages cited are of the number of people (indicated by 'n=xxx') that answered that particular question.

About you

1. How do you define your gender?

Options	# of responses to option	% of total respondents to question (n=973)
Male	653	67.1%
Female	299	30.7%
Transgender	11	1.1%
Other	10	1.0%

2. What country do you live in?

Country	#	Country	#	Country	#
Afghanistan	1	Gibraltar		Norway	14
Åland Islands	4	Greece	3	Oman	
Albania		Greenland		Pakistan	4
Algeria	1	Grenada	1	Palau	
American Samoa		Guadeloupe		Palestinian Territory, Occupied	
Andorra		Guam		Panama	7
Angola		Guatemala	18	Papua New Guinea	1
Anguilla		Guernsey	1	Paraguay	
Antarctica		Guinea		Peru	
Antigua And Barbuda		Guinea-bissau		Philippines	2
Argentina	17	Guyana	2	Pitcairn	
Armenia	1	Haiti	1	Poland	
Aruba	1	Heard Island And Mcdonald Islands		Portugal	4
Australia	16	Holy See (Vatican City State)		Puerto Rico	
Austria		Honduras	2	Qatar	
Azerbaijan	2	Hong Kong	1	Réunion	
Bahamas		Hungary	1	Romania	3
Bahrain	1	Iceland		Russian Federation	54
Bangladesh	1	India	25	Rwanda	3
Barbados	3	Indonesia	7	Saint Barthélemy	
Belarus	1	Iran, Islamic Republic Of	1	Saint Helena	
Belgium	8	Iraq		Saint Kitts And Nevis	
Belize	2	Ireland	2	Saint Lucia	
Benin		Isle Of Man		Saint Martin	
Bermuda	1	Israel		Saint Pierre And Miquelon	
Bhutan	1	Italy	2	Saint Vincent And The Grenadines	
Bolivia, Plurinational State of	9	Jamaica	3	Samoa	
Bosnia and Herzegovina		Japan	1	San Marino	
Botswana	2	Jersey		Sao Tome And Principe	
Bouvet Island		Jordan	1	Saudi Arabia	

Brazil	6	Kazakhstan	6	Senegal	1
British Indian Ocean Territory		Kenya	44	Serbia	
Brunei Darussalam		Kiribati	1	Seychelles	
Bulgaria		Korea, Democratic People's Republic Of	1	Sierra Leone	
Burkina Faso	2	Korea, Republic Of		Singapore	1
Burundi	2	Kuwait		Slovakia	
Cambodia	5	Kyrgyzstan	3	Slovenia	
Cameroon	16	Lao People's Democratic Republic		Solomon Islands	
Canada	55	Latvia	2	Somalia	1
Cape Verde		Lebanon	2	South Africa	20
Cayman Islands		Lesotho	2	South Georgia And The South Sandwich Islands	1
Central African Republic	2	Liberia	3	Spain	8
Chad	1	Libyan Arab Jamahiriya		Sri Lanka	
Chile	2	Liechtenstein		Sudan	4
China	94	Lithuania	4	Suriname	
Christmas Island	1	Luxembourg		Svalbard And Jan Mayen	
Cocos (Keeling) Islands		Macao		Swaziland	2
Colombia	12	Macedonia, The Former Yugoslav Republic Of		Sweden	4
Comoros		Madagascar		Switzerland	6
Congo	3	Malawi	5	Syrian Arab Republic	
Congo, The Democratic Republic of The	8	Malaysia	19	Taiwan, Province Of China	
Cook Islands		Maldives		Tajikistan	2
Costa Rica	7	Mali		Tanzania, United Republic Of	4
Côte D'Ivoire	10	Malta		Thailand	1
Croatia		Marshall Islands		Timor-leste	1
Cuba		Martinique		Togo	2
Cyprus		Mauritania		Tokelau	
Czech Republic	3	Mauritius	1	Tonga	
Denmark	2	Mayotte		Trinidad And Tobago	
Djibouti		Mexico	18	Tunisia	1
Dominica		Micronesia, Federated States Of		Turkey	1
Dominican Republic	3	Moldova, Republic Of	4	Turkmenistan	
Ecuador	8	Monaco	1	Turks And Caicos Islands	
Egypt		Mongolia	2	Tuvalu	
El Salvador	5	Montenegro		Uganda	13
Equatorial Guinea		Montserrat	1	Ukraine	25
Eritrea		Morocco	1	United Arab Emirates	
Estonia	4	Mozambique		United Kingdom	48
Ethiopia	3	Myanmar		United States	52
Falkland Islands (Malvinas)	1	Namibia	8	United States Minor Outlying Islands	
Faroe Islands		Nauru		Uruguay	
Fiji	2	Nepal	9	Uzbekistan	5
Finland	3	Netherlands	26	Vanuatu	
France	5	Netherlands Antilles	2	Venezuela, Bolivarian Republic of	2
French Guiana	1	New Caledonia	1	Viet Nam	
French Polynesia		New Zealand	1	Virgin Islands, British	
French Southern Territories	1	Nicaragua	2	Virgin Islands, U.S.	
Gabon		Niger		Wallis and Futuna	
Gambia		Nigeria	28	Western Sahara	
Georgia	3	Niue		Yemen	1
Germany	6	Norfolk Island		Zambia	7
Ghana	3	Northern Mariana Islands		Zimbabwe	6
				Other	68

3. Do you identify with any of these groups or populations? (Note: Respondents were asked to select as many options as are relevant)

Options	# of responses to option	% of total respondents to question (n=966)
Gay or lesbian	400	41.4%
Heterosexual man	148	15.3%
Heterosexual woman	210	21.7%
Transgender	23	2.4%
HIV/human rights activist	536	55.5%
Person that uses drugs	100	10.4%
Indigenous group	63	6.5%
Men who have sex with men	215	22.3%
Migrant	68	7.0%
Sex worker	54	5.6%
Person with a disability	94	9.7%
Prisoner or ex prisoner	52	5.4%
Refugee or asylum seeker	29	3.0%
None	31	3.2%
Other	79	8.2%

4. How well do you know GNP+ and its work? (Note: Respondents were asked to select one option. Question 4 was compulsory. Respondents answering 'not at all' were taken directly to question 10)

Options	# of responses to option	% of total respondents to question (n=993)
Not at all (e.g. 'I have never heard of GNP+')	195	19.6%
A little (e.g. 'I have heard of GNP+, but I do not really know what it does')	436	43.9%
Quite well (e.g. 'I have been to a meeting organised by GNP+' or 'I have used a guide developed by GNP+')	215	21.7%
Very well (e.g. 'I am very familiar with the role and work of GNP+')	147	14.8%

Current role and work of GNP+

5. How have you been involved with GNP+? (Note: Respondents were asked to select as many options as are relevant)

Options	# of responses to option	% of total respondents to question (n=494)
I have attended a meeting or conference organised by GNP+	206	41.7%
I have used a guide or tool developed by GNP+	216	43.7%
I have worked with an organisation that partners with GNP+	209	42.3%
I have been involved in a programme supported by GNP+	100	20.2%
I have been a member of a regional PLHIV network that works with GNP+	210	42.5%
I have worked with representatives of GNP+ at meetings or conferences	157	31.8%
I have been a member of staff, on the Board or a consultant for GNP+	30	6.1%
Other	117	23.7%

6. How well do you think GNP+ represents the voices of PLHIV in the global response to HIV? (Note: Respondents were asked to select one option and to make a comment)

Options	# of responses to option	% of total respondents to question (n=638)
Not well	86	13.5%
Quite well	227	35.6%
Very well	133	20.8%
Do not know	192	30.1%
<i>Comment</i>	242 <i>comments</i>	37.9% <i>made comments</i>

7. How well do you think GNP+ involves PLHIV in developing and carrying out its work? (Note: Respondents were asked to select one option and to make a comment)

Options	# of responses to option	% of total respondents to question (n=634)
Not well	89	14.0%
Quite well	202	31.9%
Very well	142	22.4%
Do not know	201	31.7%
<i>Comment</i>	201 <i>comments</i>	31.7% <i>made comments</i>

8. Overall, what has GNP+ done best to date? In your opinion, what have been the organisation's strengths? (e.g. Which of our activities have been most helpful? What roles have we played well? Where have we made a positive difference? Which of our guides or tools have been good quality? What important issues have we highlighted?) (Note: Respondents were asked to make a comment)

Options	# of responses to option
<i>Comment</i>	184 <i>comments</i>

9. Overall, what could GNP+ have done better to date? In your opinion, what have been the organisation's weaknesses? (e.g. Which of our activities have been least helpful? What role could we have played better or differently? Have any of our guides or tools been poor quality? What opportunities have we missed?) (Note: Respondents were asked to make a comment)

Options	# of responses to option
<i>Comment</i>	182 <i>comments</i>

Future role and work of GNP+

10. Do you think that a global network of people living with HIV is still needed? (Note: Respondents were asked to select one option and to make a comment)

Options	# of responses to option	% of total respondents to question (n=706)
Yes	646	91.5%
No	15	2.1%
Do not know	45	6.4%
<i>Comment</i>	306 <i>comments</i>	43.3% <i>made comments</i>

11. In the future, what type of issues affecting you and other PLHIV would you like GNP+ to focus on?

(Note: Respondents were asked to select as many options as are relevant and to make a comment)

Options	# of responses to option	% of total respondents to question (n=707)
Human rights of PLHIV	565	79.9%
Positive Health, Dignity and Prevention for PLHIV	509	72.0%
Stigma and discrimination against PLHIV	545	77.1%
Sexual and reproductive health and rights of PLHIV	433	61.2%
Access to treatment for PLHIV	530	75.0%
Leadership among PLHIV	412	58.3%
Greater involvement of PLHIV (GIPA)	485	68.6%
Do not know	5	0.7%
<i>Comment</i>	128 <i>comments</i>	18.1% <i>made comments</i>

12. In your opinion, which of the issues listed is the most important one for GNP+ to focus on? (Note:

Respondents were asked to select one option and to make a comment)

Options	# of responses to option	% of total respondents to question (n=696)
Human rights of PLHIV	123	17.7%
Positive Health, Dignity and Prevention for PLHIV	94	13.5%
Stigma and discrimination against PLHIV	93	13.4%
Sexual and reproductive health and rights of PLHIV	31	4.5%
Access to treatment for PLHIV	167	24.0%
Leadership among PLHIV	73	10.5%
Greater involvement of PLHIV (GIPA)	103	14.8%
Do not know	12	1.7%
<i>Comment</i>	121 <i>comments</i>	17.4% <i>made comments</i>

13. How could GNP+ improve how it involves you and other PLHIV in developing and carrying out its work?

For example, how could GNP+ consult with you better about your needs and communicate with you better about its decisions? (Note: Respondents were asked to suggest up to 3 actions)

Options	# of responses to option	% of total respondents to question (n=274)
Do not know	0	0%
<i>Action 1</i>	274	100% <i>suggested a first</i>
<i>Action 2</i>	226	82.5% <i>suggested a second action</i>
<i>Action 3</i>	176	64.2% <i>suggested a third action</i>

14. In the future, what type of role would you like GNP+ to play in the global response to HIV? (Note: Respondents were asked to select as many options as are relevant)

Options	# of responses to option	% of total respondents to question (n=684)
An advocate for the issues and needs of PLHIV among global organisations, meetings and consultations	501	73.2%
A supporter and trainer of PLHIV leaders (enabling them to represent PLHIV at national, regional and global organisations, meetings and consultations)	494	72.2%
A provider of support (training, tools, etc) to national and regional networks of PLHIV to support their advocacy work	464	67.8%
A global 'watchdog' – sharing and exchanging information about issues that affect PLHIV	411	60.1%
A coordinator of programmes to gather evidence about the issues and needs of PLHIV	366	53.5%
A coordinator of regional networks of PLHIV	320	46.8%
A mobiliser of resources for PLHIV organisations	409	59.8%
Do not know	18	2.6%
Other	46	6.7%

15. In your opinion, which of the roles listed is the most important one for GNP+ to play in the global response to HIV? (Note: Respondents were asked to select one option)

Options	# of responses to option	% of total respondents to question (n=683)
An advocate for the issues and needs of PLHIV among global organisations, meetings and consultations	177	25.9%
A supporter and trainer of PLHIV leaders (enabling them to represent PLHIV at national, regional and global organisations, meetings and consultations)	147	21.5%
A provider of support (training, tools, etc) to national and regional networks of PLHIV to support their advocacy work	88	12.9%
A global 'watchdog' – sharing and exchanging information about issues that affect PLHIV	85	12.4%
A coordinator of programmes to gather evidence about the issues and needs of PLHIV	45	6.6%
A coordinator of regional networks of PLHIV	37	5.4%
A mobiliser of resources for PLHIV organisations	86	12.6%
Do not know	18	2.6%
Other	25	3.7%

Future governance of GNP+

16. Do you think that GNP+ should only be governed by PLHIV? (i.e. should all of its Board members be HIV positive?) (Note: Respondents were asked to select one option and to make a comment)

Options	# of responses to option	% of total respondents to question (n=685)
Yes	388	56.6%
No	271	39.6%
Do not know	26	3.8%
<i>Comment</i>	<i>272 comments</i>	<i>39.7% made comments</i>

17. Who do you think should be on the Board of GNP+? (i.e. who should take decisions about the organisation's strategies and directions?) (Note: Respondents were asked to select as many options as are relevant)

Options	# of responses to option	% of total respondents to question (n=681)
Representatives of regional networks of PLHIV	504	74.0%
Representatives of other global networks that involve PLHIV	294	43.2%
Representatives of organisations that support PLHIV (such as UN agencies or international NGOs)	334	49.0%
Representatives of specific populations living with HIV (such as HIV positive men who have sex with men, HIV positive sex workers and HIV positive people that use drugs)	355	52.1%
Representatives of groups that work with specific populations affected by HIV (such as men who have sex with men, sex workers and people that use drugs)	236	34.7%
'At large' individuals (participating in their individual capacity and bringing specific expertise or skills)	304	44.6%
Do not know	23	3.4%
Other	86	12.6%

Further comments

18. Please share any other comments that you would like to make about the past or future of GNP+. (Note: Respondents were asked to make a comment)

Options	# of responses to option
<i>Comment</i>	<i>189 comments</i>

ANNEX 4: GNP+ ENVIRONMENT MAPPING: CHART OF TOPIC AREAS AND ACTIVITY TYPES

Type of activity	Topic area										
	GIPA, involvement of civil society	Universal Access— treatment, care and support	Human rights, stigma, discrimination and criminalisation	Sexual and reproductive health and rights	Gender and gender-based violence	Harm reduction	Positive health, dignity and prevention	Health systems	Coordination and best practice (Three Ones, NGO Code of Practice)	Global commitments, accountability and funding	Co-infections (TB, HCV)
Advocacy and policy	Alliance EATG GNP+ ICW	Alliance EATG GNP+ IAS ICASO ICW INPUD IPPF ITPC MSMGF Sidaction	Alliance EATG GNP+ IAS ICASO ICW INPUD IPPF ITPC MSMGF NSWP Sidaction	Alliance GNP+ ICW IPPF MSMGF	ICW IPPF	IAS INPUD	Alliance GNP+ ICASO ICW IPPF MSMGF	Alliance IAS	GNP+ ICASO	Alliance IAS ICASO ICW MSMGF NSWP Sidaction WAC	Alliance INPUD
Training, capacity building, technical support	Alliance ICW	Alliance EATG ITPC*	Alliance GNP+ ITPC*	Alliance		Alliance	Alliance	Alliance	Alliance	Alliance ICASO	Alliance
Social and community-based research	GNP+	ICW ITPC	GNP+ ICW IPPF	GNP+ ICW			GNP+ IPPF			ICASO	
Communications, knowledge exchange and awareness raising	Alliance GNP+ IAS	Alliance GNP+ IAS ITPC MSMGF WAC	Alliance GNP+ IAS IFRC MSMGF	Alliance GNP+	Alliance IAS ICW	Alliance IAS	Alliance GNP+ MSMGF	Alliance	Alliance IAS	Alliance IAS ICASO MSMGF WAC	

* ITPC provides funding for this through the Collaborative Fund for Treatment Preparedness

Notes: Sidaction funds research and provides funding for national/local training and service delivery related to treatment, care, prevention. IFRC and IPPF's national chapters provide direct service delivery in a number of areas listed above. GNP+ is the only group with programming dedicated to HIV-positive youth. IAS dedicates substantial effort to promoting research and disseminating results in areas beyond the social and community-based research areas included above. MSMGF advocates for more research, particularly in the global south, and particularly community-based participatory research.

ANNEX 5: EXAMPLE SUMMARY OF GNP+ PROGRESS AND ACHIEVEMENTS: 2009

The following example of a summary of GNP+ achievements is taken from *2009 Annual Report: Reclaiming Our Lives*:

- **Positive Health, Dignity and Prevention** – after the 2009 International Technical Consultation, Positive Health, Dignity and Prevention has received global recognition from partners as a new human rights-based framework, which integrates prevention, treatment, support and care for people living with HIV. The framework stresses the meaningful engagement of communities in decision-making, programme development, and addressing legal and policy barriers, re-emphasising the value of the leadership of people living with HIV. Consultations at regional level and with partner organisations have been held and the new concept has been widely presented by GNP+ and its key partner UNAIDS at conferences and events.
- **HIV Leadership through Accountability Programme Results:** The Leadership through Accountability programme garnered valuable results in 2009 from the first round of countries: Kenya, Nigeria and Zambia which have implemented the 4 evidence-gathering tools and the SRHR Guidance Package. The country PLHIV networks in the 3 countries all developed and demonstrated the capacity of PLHIV networks to carry out operational research, generate their own evidence and subsequently evidence-informed advocacy agenda and to build multi-sectoral partnerships. Specific results include:
 - **GIPA Report Card:** Reports were generated from all 3 countries detailing the quality and level of meaningful involvement of PLHIV in the countries responses. In Kenya, the process resulted in the establishment of the National GIPA Task Force by the National AIDS Control Council (NACC). Network for the Empowerment of People living with HIV/AIDS in Kenya (NEPHAK) is co-convenor of the task force with NACC.
 - **Human Rights Count!** : Over a 3 month period in 2009, the three national PLHIV networks recorded 139 human rights violations cases: 68 in Kenya, 42 in Nigeria, and 29 in Zambia. Documentation will continue in 2010 with an alert system to be established if a violation is ongoing. In Kenya, a number of pioneer cases are to be handed over to the National HIV/AIDS Tribunal.
- **The Global Criminalisation Scan:** This year country coverage was extended to include data from Africa and Caribbean, including updated information from North and Latin America. The Global Criminalisation Scan now has up-to-date data from more than 200 countries and judicial territories and is now the main source of information on HIV criminalisation for the UNAIDS database on Punitive and Protective Laws.
- **Launch of the Guidance Package** - GNP+ in partnership with EngenderHealth, ICW, IPPF, UNAIDS, UNFPA, WHO and Young Positives launched: *Advancing the Sexual and Reproductive Health and Human Rights of People Living with HIV: A Guidance Package*. The Guidance Package has been translated into Spanish and French. Furthermore, in 2009, GNP+ with support from WHO, began the process of establishing partnerships with networks of key populations and developing SRHR Policy Briefings for 5 key populations living with HIV: MSM, sex workers, people who use drugs, prisoners, and migrants.

- **E-Consultations:** GNP+ successfully leveraged the use of online technologies to input the needs of people living with HIV directly into WHO policy guidelines on ART and TB. In 2010, GNP+ is scaling up the use of technology and social media to communicate and consult with a wide range of people living with HIV.
- **Young People Living with HIV Programme:** Led by the GNP+ Young People Living with HIV Reference Group, the global secretariat is hosting the new position of Youth Officer. This position and programme is funded by the Ford Foundation and will work to support and broaden networking and collaboration amongst stakeholders to facilitate an enabling environment within GNP+ and the regional people living with HIV networks for young people living with HIV.
- **Strengthened Communications:** GNP+ developed the position of Communication Officer. This new position ensures linkages with GNP+ Programme Officers to strengthen communications of programme activities and results. Programme results are now made widely available through the GNP+ website, which is updated regularly to better reflect the impact of GNP+'s work. There is now a comprehensive communications strategy and GNP+ has been actively responding to key issues with press releases. A new logo and website will be launched in 2010.
- **Improvement process:** GNP+'s ongoing improvement process came to fruition in 2009 with the development of rigorous management, financial and monitoring internal policies and procedures.