



GLOBAL NETWORK  
OF PEOPLE LIVING  
WITH HIV



**OUR STRATEGIC PLAN 2023 - 2026**

# FOR OUR HEALTH & RIGHTS





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# THE FUTURE WITH COMMUNITY



As GNP+, we draw our strength from a strong structure of networks and associations of people living with HIV at community level, country level and regional level. Our networks are among the first to respond to pandemics and to stand up for rights. From the early days when we fought for the Greater Involvement of People Living with HIV (GIPA) principle, we continue to give voice and space for community leadership in global decision-making. We are intentional about including diverse communities and in particular the voices of the younger generation.

The world has committed to end AIDS by 2030. The global community of people living with HIV has the experience, skill, and sheer determination to help countries meet this ambitious goal. We know that we will only make progress if the HIV response is politically prioritised and adequately resourced. And most importantly, the goal will only be met if communities of people living with HIV and other key populations are empowered to lead.

The global movement of people living with HIV has played a critical part in every step of progress made over 40 years of the HIV epidemic. We have successfully pushed for meaningful engagement of people living with HIV and for community voices to be heard at all levels and in all aspects of the HIV response. We have proven that interventions designed and led by communities can bring about ground-breaking change. We have used our learnings and our structures to respond to new threats such as COVID-19. The current Global AIDS Strategy and the UN Political Declaration on HIV shows that governments, donors and UN agencies are beginning to acknowledge the vital role of communities. We must seize the opportunity this brings, build momentum, increase urgency and make sure that diverse communities of people living with HIV are given the space to lead.

Through our new strategy, GNP+ is committed to drawing on our long history and using our experience to adapt, innovate and contribute to the global HIV response and beyond. We are focused on working today, while thinking of what the future looks like beyond 2030. We call on you, our partners, to work in solidarity with us and invest in our collective resilience as a community-led movement.

Rodrigo Olin  
GNP+ Board Chair



## THE WORLD WE SEE



We now live in a world where there are more effective treatments for HIV. As a result, millions of people living with HIV can live longer, healthier lives. We also have more ways to prevent HIV and we know that treatment has the power to reduce HIV to a level that is undetectable and untransmissible. Yet biomedical approaches have only taken us so far. Marginalisation, inequality, stigma, discrimination, and criminalisation prevent many of us from enjoying the benefits of treatment and continue to drive the epidemic.

There has been a shift in the global health agenda in both funding and prioritisation. COVID-19 led to a greater focus on broad public health aims, pandemic preparedness and health system strengthening, and away from condition-specific programmes. There is a risk that HIV is forgotten within this new landscape and the expertise and experience that we bring, is lost.

We must remind the world, that over 38 million people are living with HIV and 1.5 million people became newly infected with HIV in 2021. We must safeguard future funding for HIV and re-establish a sense of urgency, not just in the HIV-specific response, but in critical work to address inequalities and contribute our learnings to pandemic preparedness and broader public health.



### STOPPING STIGMA AND DISCRIMINATION

Stigma and discrimination increase the risk of HIV acquisition and put people living with HIV at greater risk of violence and marginalisation. They also prevent people living with HIV from accessing treatment and health services, and create barriers to entering or staying in education, finding work or accessing justice. Self-stigma, people feeling ashamed or embarrassed by their HIV, is also a reality for too many, leading to self-limiting beliefs, low self-esteem and impacts on mental health.

Thanks to the People Living with HIV Stigma Index, we have a wealth of evidence from all corners of the world, showing the impact and depth of stigma and discrimination. This will continue to form the backbone of our advocacy to remove and reshape harmful and discriminatory laws, policies and practices. We will continue to work closely with governments and UN agencies as part of the Global Partnership to End HIV-related Stigma to ensure countries achieve the 10-10-10 targets set in the Global AIDS Strategy.



## SAFEGUARDING OUR RIGHTS



Activists and civil society groups are finding it harder and harder to operate, navigating restrictive laws, and in some cases, threats of violence and state-sanctioned repression. Individual staff and volunteers are targeted and fear for their safety, while the vulnerable and marginalised people they work with are also exposed to danger and unable to access important services. Gay men face imprisonment, transgender people are excluded from society, young women are unable to access contraception, sex workers face violence from the police - the consequences are wide reaching.

Across the world, key populations, including people who use drugs, sex workers, gay men and other men who have sex with men, transgender people and people in prison, experience systematic discrimination and criminalisation. The impact of criminalisation is stark. For example, the risk of acquiring HIV, is 29 times higher for people who inject drugs than for the rest of the population. In 2021, 70% of new HIV infections globally were among key populations and their sexual partners.

We know that criminalisation and erosion of our rights stands in the way of making progress in the HIV response. Working with our partners, we will continue our "Not A Criminal Campaign" to decriminalise HIV non-disclosure, exposure and transmission; same-sex relationships; sex work and drug use. We will unite with other civil society partners to campaign for human rights in creative and strategic ways.

## PROMOTING GENDER EQUALITY



Unequal social structures limit women's access to power, resources, autonomy, safety, and rights; exposing women and girls to increased risk of poverty, violence, and HIV. Gender discrimination and high levels of gender-based violence continues to drive new HIV infections among women and girls (especially those from marginalised communities) and stops them from accessing HIV and SRHR services they need.

We will continue work with our sister networks and other organisations to advocate for laws, policies and interventions that strengthen adolescent girls and young women's power to make decisions and choices about their health.





## EXPANDING ACCESS TO HIV DIAGNOSTICS AND TREATMENT

In 2021, one quarter of people living with HIV did not receive treatment. Just when the HIV response should have been accelerating to reach the 2025 targets, progress in some areas slowed down. Between 2020 and 2021, the total number of people receiving antiretroviral treatment increased by 1.5 million, the smallest increase since 2009. The human cost of this is enormous. In 2021, 650 000 people died of largely preventable, AIDS-related causes.

Co-infections such as TB, viral hepatitis and sexually transmitted infections continue to affect our communities disproportionately. TB remains the number one killer of people living with HIV and women living with HIV are 6% more likely to develop cervical cancer.

Current HIV services do not reach some marginalised populations. The “one size fits all” approach simply doesn’t work. Right now, access to the latest diagnostics and treatment varies depending on a long list of factors including where we live, our level of wealth, our ability to read and so on.

Children continue to be failed by the HIV response – they made up only 4% of the total number of people living with HIV in 2021 but 15% of AIDS-related deaths. In 2021, an estimated 800 000 children living with HIV globally were still not receiving HIV treatment.



We are increasing our efforts to reduce inequalities and remove the barriers that prevent everyone from accessing health services and leading healthy lives. We are working with our sister global networks and other partners to sustain political commitment for the Global Alliance to end AIDS in Children by 2030 and ensure that children are no longer forgotten by the HIV response. In close collaboration with ICW, we are engaging with WHO’s triple elimination initiative and supporting countries to end vertical transmission of HIV, hepatitis B and syphilis in a way that advances the rights of women and engages them in decision making.



## MANAGING HIV DURING EMERGENCIES AND CRISIS



We have increasingly been dealing with the impact of other crises such as COVID-19, climate change and conflict on people living with HIV and key and vulnerable populations. As migration increases and health systems are overburdened, we are seeing heightened HIV vulnerability and poorer health outcomes, especially for women and key populations. The lack of social protection for people living with HIV and other key populations, coupled with discrimination in the labour market, has a direct impact on access to testing and treatment, adequate nutrition, education, employment, and housing.

We want to increase awareness of the needs of people living with HIV in humanitarian responses and situations of migration and displacement, and to share our learning and expertise across regions and with partners.

## INVESTING IN OUR MOVEMENT

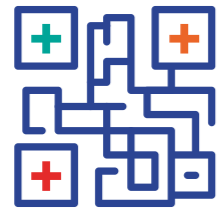


Despite the widespread acknowledgment of the value of community-led responses, community organisations across the world are struggling. The funding they receive is often inadequate, project-based, and comes with high expectations. Many governments are still to put in place social contracting mechanisms and some have policies that make it harder for community organisations to register, operate or seek donor funds. However, these community organisations continue to deliver on their mission to secure health and rights.

We will continue to advocate for adequate funding and political support for national networks and associations of people living with HIV so that they can contribute beyond HIV to pandemic preparedness and other social and environmental priorities. We are increasing our own capacity and infrastructure to act as an intermediary grant maker and learning to be a participatory grant maker.



# WHO WE ARE



We work with a diverse range of local, national, and regional networks and organisations of people living with HIV to reach individuals and communities. Some organise as youth or women's groups, others as journalists or artists. Some focus more on delivering services directly and others focus more on advocating for policy changes.

**GNP+ is a global network for people living with HIV, led by people living with HIV. We represent and serve every person living with HIV. We are committed to representing the needs and priorities of those of us who are underserved, marginalised, or excluded from health and other services and are prevented from participating in the decisions that impact their lives.**

Together we are part of a powerful global movement defending and promoting the rights of people living with HIV and key and vulnerable populations. Using the power of community-led research and evidence-based advocacy, we improve outcomes for people living with HIV. We strengthen the global HIV response by amplifying the perspectives, expertise, and information from diverse communities of people living with HIV. We work with national and regional networks to hold governments and global leaders accountable to their commitments and to improve access to quality of HIV prevention, treatment, care, and support services.

## WE ARE LEADERS

We are rooted in our belief that people living with HIV are experts in our own lives. We are bold and effective leaders of the HIV response in our communities and at national and global levels. We are guided by a rights-based approach, promoting self-determination and full participation in decisions that affect our lives.



## OUR VISION



+ A world where every person living with HIV enjoys their right to a healthy and dignified life, free from stigma and discrimination.

## OUR MISSION



+ We provide global leadership and advocate for improvements to the quality of life for all people living with HIV.

## OUR VALUES



- + We actively foster the participation and leadership of people living with HIV throughout the HIV response.
- + We are community-led and guided by the rights and realities of people living with HIV.
- + We are accountable to the communities of people living with HIV that we serve and are transparent in how we spend money and make decisions.
- + We are inclusive, and we embrace and defend diversity.
- + We recognise that the issues that affect us as people living with HIV often intersect with other aspects of our identities and our differing access to power and resources.





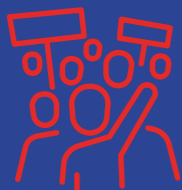
# THE WAY WE WORK

## COMMUNITY-LED RESEARCH:

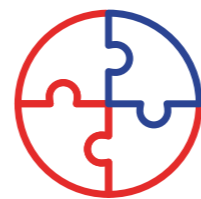
We pride ourselves on being leaders in promoting and facilitating community-led research that informs and shapes the HIV response at national and global levels. We train people living with HIV in the gathering of crucial learning and data from our lived experience. The research helps monitor the effectiveness, quality and accessibility of HIV services as experienced by people living with HIV. The findings are then used by communities to advocate for improvements in laws and policies, attitudes and practices.



## GLOBAL ADVOCACY:



We use the power of evidence and perspectives gathered from communities and countries to influence global decisions on our health and human rights. Throughout the years, we have established strong alliances with partners in global health, human rights and philanthropy and work with them to strengthen the global HIV response. We work closely with UNAIDS and WHO, to ensure the voice of people living with HIV is reflected in setting global goals and developing guidelines. We enable people living with HIV to fully claim their space in Global Fund and PEPFAR grant-making processes to set national priorities for funds and help implement and monitor programmes. We use our learnings from the HIV response to contribute to wider global health policy making.

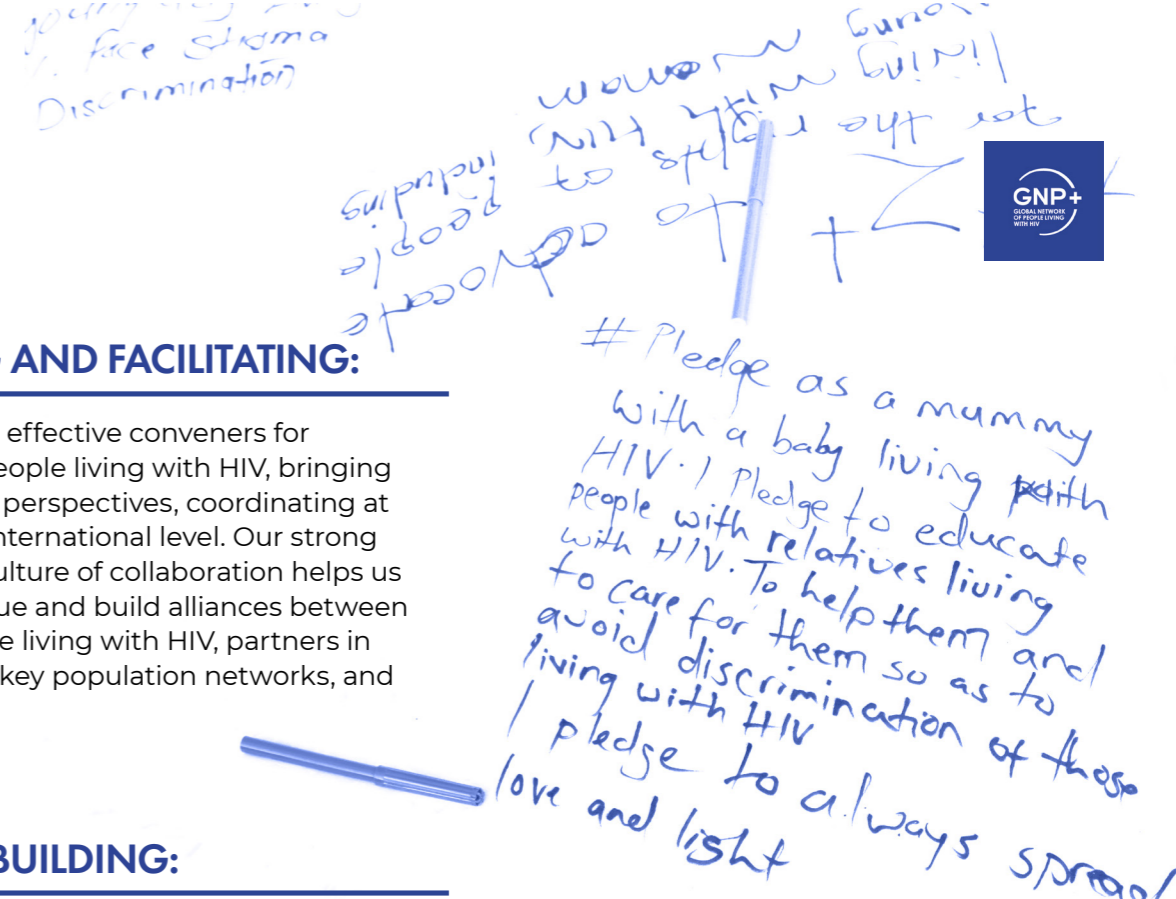
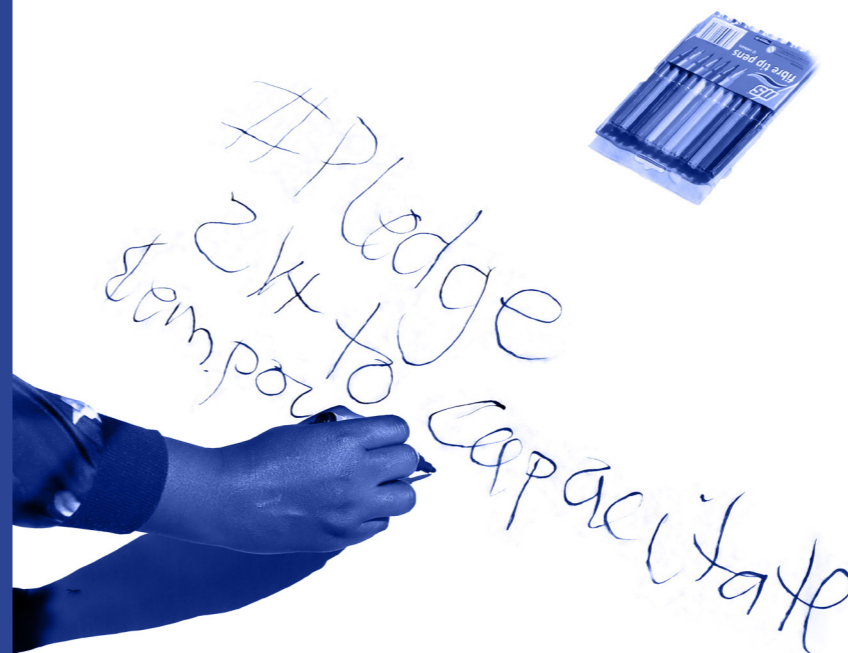


## CONVENING AND FACILITATING:

We strive to act as effective conveners for communities of people living with HIV, bringing together different perspectives, coordinating at the regional and international level. Our strong and established culture of collaboration helps us to facilitate dialogue and build alliances between networks of people living with HIV, partners in the HIV response, key population networks, and decision makers.

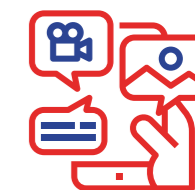
## MOVEMENT BUILDING:

We invest funds and share our learnings and expertise to strengthen the networks and leaders who make up the movement of people living with HIV. We engage with young people living with HIV and support development of youth leadership. We develop research and advocacy tools and resources which we share with others. We provide guidance to national and regional organisations on grant and financial management. We mobilise resources and channel funds to community organisations and strive to improve the sustainability of our movement. We are learning to make the process participatory so that communities can decide who to fund and what to fund.



## COMMUNITY-LED DIGITAL INNOVATION:

We recognise the growing influence of digital health technologies, and the differing access and impact for diverse communities of people living with HIV. We engage communities in research to better understand benefits of digital technologies such as improved access to care and health information as well as the gaps and risks such as privacy, exclusion and misinformation. We use these learnings to empower communities of people living with HIV through digital literacy and strengthen our collective ability to engage with and advocate for safe, effective and innovative digital health technologies.





# OUR STRATEGIC PRIORITIES

## GOAL 1

### ENJOYING OUR RIGHTS AND FREEDOMS



All people living with HIV, key and vulnerable populations, are increasingly able to enjoy their rights and lead lives free from HIV related and intersecting stigma or criminalisation.



#### The change we want to see:

- 1.1 Laws and policies that criminalise or discriminate or drive stigma against people living with HIV and key and vulnerable populations are progressively challenged, mitigated, and repealed.
- 1.2 Harmful narratives about people living with HIV and key and vulnerable populations in policy, the media and wider society are countered and reduced.
- 1.3 People living with HIV are increasingly able to access education, training and employment without prejudice or discrimination.
- 1.4 People living with HIV particularly those experiencing high levels of discrimination and marginalisation, know their rights and feel empowered and supported to access justice.

#### The approaches we will take:



- + Campaigning for decriminalisation of HIV transmission, exposure and non-disclosure, drug use, sex work and same sex relations.
- + Advocating for improved laws, policies and social and gender norms to protect the rights of people living with HIV and enable them to live free from stigma and discrimination.
- + Training, supporting and empowering communities of people living with HIV to conduct research and use the data they gather to advocate for improved laws, policies and practices.
- + Facilitating safe and empowering spaces for different communities of people living with HIV to support each other and share experiences, skills and learning.
- + Participating in global and regional initiatives that bring together communities, decision makers and other stakeholders to create improved legal and policy norms and environments that promote human rights and gender equality.
- + Building capacity to ensure that people living with HIV are integral to and lead research and advocacy on digital health promoting access and safeguarding rights.



# GOAL

## 2

### ENJOYING OUR HEALTH AND WELLBEING



All people living with HIV have access to quality HIV treatment and other health services to enable them to enjoy their right to health and wellbeing.



#### The change we want to see:

- 2.1 There is consistent and increasing investment in person-centred, high-quality prevention and treatment options for HIV.
- 2.2 Key barriers and inequities that impact health outcomes, particularly for the most marginalised are understood and increasingly addressed to enable progressive realisation of health and other socio-economic rights.
- 2.3 People living with HIV have access to high quality information, education and support enabling them to make decisions about their health.
- 2.4 People living with HIV have access to high quality, competent and integrated health services, including for co-infections, mental health, sexual and reproductive health and rights.
- 2.5 International and national regulation of the pharmaceutical industry is strengthened, to ensure equitable and affordable access to the most effective diagnostics and medications.

#### The approaches we will take:



- + Campaigning for quality HIV and health services (including Mental Health, Sexual and Reproductive Health and Rights, TB and Hepatitis) that meet the needs of different communities of people living with HIV.
- + Promoting treatment literacy to empower communities with latest science, such as U=U, and enabling them to make decisions about their health and improve their wellbeing.
- + Supporting communities of people living with HIV to participate in and influence decision-making at national and global levels to ensure health interventions and services are accessible to all, of high quality and is delivered with respect and dignity.
- + Advocating for person-centred and community-led approaches to ensure programmes reach the most marginalised communities and meet people's diverse and evolving needs.
- + Encouraging community-led monitoring of service delivery to improve the quality of programmes.



# GOAL

## 3

### A STRONG HIV MOVEMENT (I)



Communities of people living with HIV, key and vulnerable populations have the sustained political and financial support they need to continue leading the HIV response and contributing to other movements.



**The change we want to see:**

- 3.1 The HIV response continues to be prioritised and resourced in global, regional and national decision-making spaces.
- 3.2 Community organisations are supported with sustained funding and technical support to ensure strong governance, operational capacity, programme management, and advocacy skills to enable them to serve those who experience the highest levels of inequality, stigma and discrimination.
- 3.3 National and global decision-makers see the value and support the national, regional and global structures of the HIV movement to adapt to the changing priorities and environment, remain relevant and contribute to wider social goals.

**The approaches we will take:**



- + Continuously building partnerships with organisations and networks of people living with HIV to fund and support their work and facilitate their meaningful involvement in decision making spaces.
- + Providing guidance, technical support, and mentorship to strengthen and sustain community organisations and networks at national and regional levels.
- + Collaborating with other key population movements to coordinate our strategies and deepen our collective impact.
- + Participating in global health policy and decision-making spaces and advocating for governments, international organisations, and donors to prioritise and fund community leadership and community structures.



# GOAL

## 4

### A STRONG HIV MOVEMENT (II)



GNP+ is resilient, sustainable and able to adapt and better serve communities and networks of people living with HIV.



**The change we want to see:**

- 4.1 The governance and operational effectiveness of GNP+ is continually strengthened to ensure resilience, transparency, and greater accountability to communities and networks of people living with HIV.



**The approaches we will take:**

- + Reviewing our governance structures and processes to ensure we remain resilient and truly representative of and accountable to our communities.
- + Strengthening our organisational processes, policies and procedures to ensure a well-functioning and supported staff team.
- + Mobilising resources and seeking flexible funding mechanisms to ensure organisational stability and sustainability.





## GOAL

# 5 ACCESSING HIV CARE IN EMERGENCIES AND CRISIS



All people living with HIV and key and vulnerable populations are able to access essential services and support during emergencies and crisis.



### The change we want to see:

- 5.1 Global health and humanitarian agencies increasingly coordinate, prioritise, and respond to the needs of diverse communities of people living with HIV, and key and vulnerable populations in responses to emergencies and crisis.
- 5.2 Specific interventions to address HIV related stigma and discrimination within the humanitarian response are developed and implemented, in partnership with communities of people living with HIV, key and vulnerable populations.
- 5.3 Networks of people living with HIV, and key and vulnerable populations, at national, regional and global levels are better supported and resourced with flexible funding to allow us to respond rapidly to the needs of our communities in crisis.



### The approaches we will take:

- + Providing practical support and guidance to local community-led organisations and networks delivering help on the ground in times of crisis.
- + Advocating for tailored services and programmes for migrants and refugees, whether they are people living with HIV or other key populations, as well as remote HIV care for nationals living abroad.
- + Documenting the role of community-led groups in responding to crises and sharing their learning and innovation.
- + Working with humanitarian organisations to improve their understanding of the needs of diverse communities of people living with HIV and other key populations.
- + Calling for adequate and flexible funding to be made available for community organisations in countries that are facing an emergency or crisis.



## HOW WE WILL LEARN AND ADAPT



At GNP+, we are committed to making sure our work has a positive impact on the lives of the people we represent and work alongside. This is why we remain motivated to monitor, evaluate and learn from our work. We will continue to use the evidence from our monitoring to make informed decisions about our priorities and the way we work. We will further standardise our systems and practices and nurture an environment where we can continuously learn and improve.

As a part of these commitments, we will build on our existing review and reflection processes to assess the progress we are making in implementing this strategy every year. We will also strive to create opportunities to receive direct feedback, strengthen our communication, and be more accountable to community networks, donors, and other partners.

A set of key performance indicators will be articulated to aid the above review processes. Given the nature of our work, and capacity, this framework will only include essential information, with the rest of our impact analysis carried out using more qualitative methods such as outcome mapping.

Two years into the implementation, we will conduct a mid-term review of strategy deliverables. The review will help us assess the relevance of the plan and guide any necessary adaptations for the remaining period. We will also use these learnings to engage with and contribute to the development of the next Global AIDS Strategy.





## DEVELOPING OUR STRATEGY

This strategic plan brings together ideas and feedback from 178 stakeholders. Over the course of 2022, we consulted networks of people living with HIV, key population networks, civil society allies, donors, UN agencies as well as staff and Board members through surveys (in 6 languages) and interviews. GNP+ staff and leadership reflected on the context we are working in, as well as where and how we have made most impact and what we need to improve on. We listened, learned and drew conclusions from the invaluable feedback from all our partners and allies.

Our strategic plan reflects the priorities and perspectives of the communities we serve and the current reality of the HIV response. We know there is much more work to be done to address historic challenges of stigma and unequal treatment access, and we will continue to advocate for our rights. We are also living in the times of climate change, conflict and pandemics and our work needs to serve those who are living through these crises.

We know we must adapt our own organisation and support our structures to remain relevant and valuable as a global movement. We heard the call for us to connect better across regions and collaborate with new and existing partners. We plan to strengthen and extend our competencies and skills and that of our peer networks by providing funds and support. We want to be focused and bold in our advocacy and we will use this new strategy as our guide.



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