



Plataforma Regional
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Apoyo, Coordinación y Comunicación



Situational analysis of Latin American and Caribbean countries in accordance with the policies of the Global Fund

Guyana

Latin America and the Caribbean Regional Platform for Support, Coordination and Communication of Civil Society and Communities.



SITUATIONAL ANALYSIS OF LATIN AMERICAN AND CARIBBEAN COUNTRIES IN ACCORDANCE WITH THE POLICIES OF THE GLOBAL FUND

Guyana

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Introduction



The LAC Regional Platform is one of several initiatives of the Global Fund aimed at improving the coordination of technical assistance and key information to civil society groups at the country level, as well as to offer greater support to CSO at all levels of their processes.

The LAC Platform along with five others located in Asia and the Pacific, Anglophone Africa, Francophone Africa, the Middle East and North Africa and Eastern Europe and Central Asia contribute to the achievement of the overall goal of the Strategic Initiative on Community, Rights and Gender (SI CRG). The objective of the SI CRG is for civil society and communities to participate in an effective way and to contribute in the elaboration, execution and supervision of programs financed by the Global Fund.

The series “Analysis of situations in Latin American and Caribbean countries in accordance with the policies of the Global Fund”, is intended to help communities and other key actors in the regional response to increase their understanding of the processes that the Global Fund is implementing through its financing mechanisms. For this reason, it is particularly important to understand the technical assistance needs of civil society organizations in the context of the sustainability, transition and co-financing policy of the Global Fund, as well as the main elements of the process in 18 countries of the region related to implementation of this policy.

01. Global Fund in Guyana

Over the past 7 years there have been significant advances in HIV prevention, care and treatment as a result of the combined efforts of the government; civil society and development partners in Guyana. The adult HIV prevalence in 2016 of 1.6% is down from 2.4% in 2004 and 80% of persons living with HIV (PLH) are on anti-retroviral therapy. However, HIV/AIDS continues to be a significant cause of morbidity and mortality. The link between HIV and TB also continues to be significant as HIV/TB co-infection especially among key populations is still a challenge. Malaria is still considered endemic in Guyana especially in the remote regions.

For this reason, donors such as the Global Fund (GF), Clinton Foundation, The United States President's Emergency Plan for AIDS Relief (PEPFAR), the World Bank and others have prioritized support to Guyana through the National AIDS Program (NAP) and civil society organizations (CSO). In 2016 the World Bank updated Guyana to an upper-middle income country (UMIC) classification. As result, the support received from the Global Fund and PEPFAR has started to drastically decrease. The effects of this are already being felt among civil society organizations and communities that have been benefitting from programs specifically geared towards increasing HIV prevention, care and treatment among key populations. Over the years the GF has played significant roles in ad-



addressing key population issues and advancing HIV, TB and Malaria programming for marginalized groups through support for civil society and communities interventions and engagements.

To date 4,800 PLH are on anti-retroviral therapy, 2,210 new smear positive TB cases have been detected and treated; 127,000 Malaria insecticide-treated nets have been distributed. To date the GF has committed US\$45,016,694 to Guyana's response to HIV, TB and Malaria. HIV, TB and Malaria programs have been focused on health systems strengthening and increasing testing and treatment among key populations. The country under the stewardship of the Ministry of Health, which also serves as the Principal Recipient (PR) for the present GF grant, acknowledges the importance of sustainability strategizing for its HIV, TB and Malaria response and with support of the GF has started to put measures in place¹.

Table 1: Global Fund investment to date in Guyana, 2017²

Component	Signed (in USD)	Committed (in USD)	Disbursed (in USD)
HIV/AIDS	39,722,230	35,668,962	34,662,412
Tuberculosis	4,384,134	3,907,960	3,692,837
Malaria	6,367,448	5,696,935	5,318,738
Other	1,342,708	1,342,708	1,342,708
Total	51,816,520	46,616,565	45,016,694

¹ Transition and Sustainability Social Dialogue with Civil Society Organizations in the HIV, Tuberculosis and Malaria Response in Guyana, LAC Regional Platform, 2017.

² Source: Global Fund website <http://www.globalfundatm.org>



02. Active Guyana GF Grants

Presently, Guyana is in the process of implementing three GF Grants for HIV/AIDS, Tuberculosis and Malaria. The HIV/AIDS grant “Strengthening Response to HIV/AIDS in Guyana” for a total of \$ 10,993,474 commenced in January 2014 and culminated in December 2017. The Tuberculosis “*Enhancing and Strengthening Tuberculosis services in key populations across Guyana*” commenced in April 2016 and culminates in December 2019 for a total of \$ 1,057,099. The Malaria grant “*Consolidation of Malaria control and prevention and strengthening of local capacity to respond to Malaria through alliances*” commenced in 2017 and will terminate in December 2019 for a total of \$2,686,230.



03. The situation of Guyana and the Transition, Sustainability and Co-financing Policy of the GF

According to the Global Fund's eligibility lists for 2017 and 2018, due to its high disease burden Guyana is still eligible for funding for the three diseases HIV, TB and Malaria. In 2017 Guyana's Country Coordinating Mechanism (Guyana-CCM) submitted its request for Program Continuation 2018-2020 specifically for HIV for the total sum of \$4,543,335. The overall goals of this Program Continuation request are:

- To reduce HIV associated mortality.
- To increase the mean survival time of persons with AIDS.
- To reduce HIV seroprevalence in the antenatal population.
- To reduce the HIV seroprevalence among female sex workers.
- To reduce the HIV seroprevalence among men who have sex with men.

The objectives of the Program Continuation are:

- To strengthen the national capacity for multi-sectoral response.
- To intensify prevention and advocacy.
- Ensuring universal access to treatment and support.
- To Strengthen surveillance and monitoring and evaluation.



04. Communities, Rights and Gender³

Has an assessment of the legal environment been conducted to assist in the reform of policies and practices that violate the rights of the people affected?*

Has a disease-focused gender assessment been conducted to determine gender barriers and help alleviate inequalities

Has the NAP defined and prioritized vulnerable and neglected populations in order to eliminate barriers to access essential services?

Are there national networks or groups for people affected by diseases that actively advocates for a person-centred response?

TB

No

No

No

No

HIV

Yes

Yes

Yes

Yes

³ Source: Joel Simpson, SASOD and Devanand Milton, Guyana Trans United, 2018.



05. The Situation of Civil Society Organizations

Through its technical assistance, the Via Libre's Regional Technical Support Centre for Latin America & the Caribbean (CRAT) engaged civil society in a social dialogue for critical reflection and provided support for the development of an action plan within the context of transition and sustainability. The process included the identification of possible risks to sustainability as well as technical assistance needs which may facilitate civil society to meet the challenges.

Key risks identified included: legal barriers to access to services for key populations (KP), lack of capacity of CSOs and community groups in programmatic and organizational skills, inadequate coordination and collaboration among key partners in the response, lack of national funding for CSOs and communities, high dependency on external funding in the areas of prevention and treatment, particularly for KP, and lack of cooperation between CSOs and the government in the provision of care and treatment among others.

Based on the risks and opportunities identified during the social dialogue and review of national documents and plans, 3 priority areas were identified: 1.) Sustainable Programming for KP; 2.) Governance and Partnerships and 3.) Financial Sustainability of Civil Society response. These guided the development of an action



plan for 2017-2020, addressing possible risks to sustainability and technical assistance needs.

Civil Society in Guyana, like in most other countries, plays an integral role in the HIV, TB and Malaria response but is heavily dependent on external donors. Over the years this has resulted in CSOs being greatly dependent on international funders to be able to carry out their programs especially with key populations. During the past years funders have started to decrease their financial support and this is starting to affect the CSO response in Guyana. Three major areas of concern are: 1.) Lack of financing to sustain their organizations and programs especially for key populations, 2.) Limited capacity of CSOs to mobilize resources at international and national level and 3.) Lack of an investment case which highlights the value of the work of civil society organizations.



06. Access to Technical Assistance (TA) for CSOs

There hasn't been any official study to determine CSOs access to TA in Guyana. However, CSOs have been benefitting from technical support from external partners such as PEPFAR, COC Netherlands, CVC, and LAC Regional Platform among others, most for program implementation. Most recently the CSOs, in particular those that work with KP have received support to build their capacity to be able to more meaningful participate in GF processes. These initiatives have been undertaken by the LAC Regional Platform in 2017 and the Global Action for Trans Equality (GATE) in 2018.

In 2017 the LAC Regional Platform piloted a Social Dialogue exercise with CSOs using a methodology that provided for the opportunity to reflect on the risks and opportunities presented by the transition of external donors such as the GF. The opportunity provided a chance for the CSOs in Guyana to forge a joint vision and develop a plan which outline key priority areas to be addressed. In March of 2018, GATE with the support of Guyana Trans United engaged the trans community in a capacity-building exercise focused on building their capacity to be more actively involved in the global fund processes in Guyana. This provided for the opportunity to identify challenges for the trans community, develop strategies as well as prepare a funding request for technical assistance to the Strategic Initiative on Communities, Rights and Gender (SI CRG) of the GF.



07. Challenges for the transition

There is no change in Guyana's epidemiological context compared to the previous funding request. The country continues to have a mixed epidemic, which disproportionately affects key populations. The number of persons estimated to be living with HIV has increased from 5,200 in 2004 to 8,637 in 2016. This is projected to increase to 10,095 in 2020. New HIV infections were estimated to have increased from 500 in 2012 to 619 in 2016 and projected to decrease to 575 in 2020⁴.

In addition, external funding provided for the HIV, TB and Malaria response in Guyana has started to decrease. Guyana is one of the countries in the region that has benefitted greatly from the PEPFAR. The USA has started to decrease support to UMIC of the Caribbean and has started to terminate funding in some countries.

As the government prepares to put measures in place for the sustainability of the HIV, TB and Malaria response the government's plans needs to focus on how programming for key populations at risk will be sustained and financed. Civil society organizations have for the longest time been at the hub of HIV prevention, care and treatment especially for key populations that are generally not included in national planning and budgeting. CSOs indicate that there is an urgent need to explore Social Contracting and the government's role in engaging civil society organizations in planning and implementation of projects to ensure that civil society organizations will be able to continue their important work as a part of the national response.

⁴ Guyana, Program Continuation Funding Request 2017.



Overall, for the country to be transition-ready and for the response to be sustainable, there are 4 areas that need to be addressed⁵:

- » Governance: High level political engagement and effective coordination to ensure gains achieved are maintained.
- » Technical: Urgent need to decide on a pathway to consolidate and achieve the 90/90/90 targets including implementation of treat all.
- » Civil society: Strong relationship between the NAP, CCM, MOPH & CSOs that support governance & service delivery needs to be maintained & strengthened.
- » Financing:
 - Data needed to support domestic budget allocations to HIV.
 - ii) Need to understand the full resourcing requirements and benefits of treat all;
 - ii) strengthen HIV-specific budget formation;
 - iii) execution and tracking within the budget process.

⁵ Transition Readiness Assessment and Sustainability planning for Guyana's HIV response, Presentation by Dr. Morris Edwards, 2018 – PANCAP Managers meetings.



08. Milestones for the transition

- The GF commissioned a Social Contracting Study conducted in Guyana in 2017⁶.
- Social Dialogues with CSO on the Transition and Sustainability of the HIV and TB response were held in 2017.
- Transition Readiness Assessment and development of Transition Work Plan, 2017-2018.
- Development and submission of 2018-2020 Global Fund Program Continuation Request with a special focus on Social Contracting strategies.

⁶ Social contracting research study found that CSOs including KP CSOs are legally permitted to incorporate; No legal or regulatory restrictions on activities that can be executed by CSOs funded from government budget, other than service delivery areas that require licensing & training under existing legislation; No restrictions in law or policy preventing or limiting CSOs from working on HIV or TB; No restrictions on government funding directly to groups comprising gay, bisexual & MSM, TG, SW, persons who use drugs, prisoners, migrants & persons living with HIV &/or TB.



Next Steps⁷

- ✓ Sustainability Plan to be endorsed by Cabinet.
- ✓ Preparations for the implementation of Social Contracting Pilot underway with the financial support of the Global Fund and the Government of Guyana.
- ✓ Identification of technical assistance for the design, implementation, monitoring and evaluation of the pilot.
- ✓ Implementation of the pilot.
- ✓ Capacity building & training for government and civil society organizations to implement together.



⁷ Transition Readiness Assessment and Sustainability planning for Guyana's HIV response, Presentation by Dr Morris Edwards, 2018 – PANCAP Managers meetings.





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