

DESCRIPTION OF PRACTICAL EXPERIENCE BASED ON BUDGET ANALYSIS CONDUCTED BY NGO IN THE FRAMEWORK OF EHRA GRANT REALIZATION (CASE-STUDY)

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Organization title, country of registration	New Generation Humanitarian NGO
Name and surname of the employee / consultant who prepared the case-study	Hmayak Avetisyan – Project Coordinator Anahit Harutyunyan – Expert on Budget Advocacy
Terms of analysis conduction	01.07.2021-31.03.2021
The level of the analyzed budgets (national, local - indicate city or territory)	National
Target group(-s) (community(-s) for which service budgets have been analyzed	MSM and trans* people
Analyzed period	2018-2020

1. Description of the general state of funding for the specified target group(-s) in the analyzed period (list all possible sources of funding):

HIV prevention programs for MSM and trans* people are funded by the Global Fund to fight AIDS, tuberculosis and malaria. Main recipient until 2019 was “Mission East” international organization and RA Ministry of Health has been the main recipient since then. In addition, prevention programs in 2019 have been implemented in several regions of Armenia with funding from the Elton John AIDS Foundation.

Over the past three years, the total budget for MSM and trans* people for the HIV/AIDS and TB comprehensive prevention programs and percentage ratio according to each year provided by the Global Fund to the RA Ministry of Health are presented below:

	Total/USD	Comprehensive prevention programs for MSM	%	Comprehensive prevention programs for trans* people	%
2018-2019	2.347.619,00	119.841,00	5,1	1.224,00	0,05
2019-2020	3.485.134,00	277.114,00	7,9	3.912,00	0,11
2020-2021	2.506.947,00	271.676,00	10,8	3.569,00	0,14

2. A list of all partners and consultants involved in the review process, indicating their roles and contributions:

The analyzes were carried out by the members of the Budget Analysis for the Engagement of KPs in the Decision-Making Processes project team, other staff members of New Generation Humanitarian NGO, international expert, national expert team of local experts, employees of the RA Ministry of Health, National Center for Infectious Diseases (formerly National Center for AIDS Prevention) current and former staff, other independent experts.

Sergey Gabrielyan - Budget Analysis for the Engagement of KPs in the Decision-Making Processes project manager

Hmayak Avetisyan - Budget Analysis for the Engagement of KPs in the Decision-Making Processes project coordinator

Arman Sahakyan - Budget Analysis for the Engagement of KPs in the Decision-Making Processes project lawyer

Sirak Yeghiazaryan - Budget Analysis for the Engagement of KPs in the Decision-Making Processes project lawyer

Shushan Khnkoyan - Lawyer of New Generation Humanitarian NGO

Anahit Harutyunyan - Expert on Analysis of the National Budget of Armenia for Health Services Provided to MSM and trans* people, Expert on Development of Advocacy Roadmap addressing financial gaps in respect to health and social services provided to MSM and trans* people

Albert Sargsyan - Expert on Analysis of the National Budget of Armenia in respect to social services provided to MSM and trans* people

Mariam Muradyan - Expert presenting the international experience of budget advocacy for health and social services provided for MSM and trans* people

Hasmik Harutyunyan - Head of the Program Coordination Group of the Global Fund of the RA Ministry of Health, provided the necessary information.

3. List of documents under analysis (budgets, laws, regulations, protocols, etc.):

The following documents were considered during the analysis:

- RA National Program on the Response to HIV/AIDS 2017-2021
- Report on the main results of the measures implemented in 2019 within the framework of the RA National Program on the Response to HIV / AIDS in the Republic of Armenia

- Epidemiological control of HIV infection in the Republic of Armenia 2018, annual report
 - Global Fund Grants Program Proposal Package, 2018
 - HIV & TB Transition Plan, Armenia
 - Results of the Integrated biological and behavioral Surveillance on HIV infection among people who inject drugs, commercial sex workers, men who have sex with men and transgender people, 2018
 - Description of Minimal HIV / AIDS prevention services provided to MSM
 - Description of Minimal HIV / AIDS prevention services provided to trans* people
4. Availability, openness, transparency of the analyzed information (state / municipal budgets, etc.):

The main information was obtained with the help of letters sent to the RA Ministry of Health and RA Ministry of Labor and Social Affairs. The website of the Ministry of Health of the Republic of Armenia presents the program expenses in a transparent manner, but it is not so easy to get and separate open information about the available finances, as the national budget presents a total amount which doesn't reflect the separate distributions.

5. Other obstacles to budget analysis when conducted by NGO:

The available information on program activities is presented in a calendar year, and the allocations of national funds are presented in a fiscal year, which limited the analysis to some comparisons. The data collected for a number of activities is not aggregated, which has prevented us from looking at the financial resources spent on MSM and trans* people for various activities, such as pre-exposure and post-exposure prophylaxes. The data on the financial resources allocated to the prevention programs provided to MSM and trans* people were obtained in total, without opening any separate measures, taking into account the unit cost calculation principle applicable from 2019 onwards.

6. Which data collection methods worked better, and which didn't:

During the analysis, the existing documents were studied. The questionnaire collected information on financial expenditures from relevant government agencies and non-governmental organizations. In-depth interviews with experts were conducted.

The chosen methods of analysis have justified themselves.

7. Estimated data:

- list of services for the target group selected for analysis,

MSM

Minimal package of services

- Peer-to-peer counseling on HIV/AIDS and available services;
- Pre-test counseling on HIV infection;
- Provision of condoms.

Extended package of services

- Pre- and post-test counseling on HIV infection;
- HIV testing through beneficiary self-testing;
- Provision of lubricants;
- Provision of educational information materials;
- Provision of information on the possibility of receiving pre-exposure prophylaxes (PrEP) and post-exposure prophylaxes (PEP) for those who exhibit the most risky behaviors;
- Screening and treatment for STIs;
- Individual legal advice.

Trans* people

Minimal package of services

- Peer-to-peer counseling on HIV/AIDS and available services;
- Pre-test counseling on HIV infection;
- Provision of condoms.

Extended package of services

- Pre- and post-test counseling on HIV infection;
- HIV testing through beneficiary self-testing;
- Provision of lubricants;
- Provision of educational information materials;
- Provision of information on the possibility of receiving pre-exposure prophylaxes (PrEP) and post- exposure prophylaxes (PEP) for those who exhibit the most risky behaviors;
- Screening and treatment for STIs;
- Individual legal advice;
- Endocrinologist consultation.

- estimated size of the target group,

The population size estimation was conducted in during the IBBS: MSM - 16100 (1,52% of Armenia's male and adult population), the size estimation of trans* people was 150 at the country level.

Here is the coverage of MSM and trans* people in 2019 and 2020.

	2019	2020
MSM	4000	5500
TG	62	80

- the cost of each service

The total budget without distributions was studied, as the budget provided by the RA Ministry of Health did not reflect the separate cost of each service.

- total funding required to cover the entire target group with services

	2019	2020
MSM	USD 126,864.1059	USD 182,263.4576
TG	USD 1,669.91057	USD 2,190.58088

8. The main results of the analysis (actual data):

- list of actually budget-funded services for the target group,

Minimal package of services

- Peer-to-peer counseling on HIV/AIDS and available services;
- Pre-test counseling on HIV infection;
- Provision of condoms.

Extended package of services

- Pre- and post-test counseling on HIV infection;
- HIV testing through beneficiary self-testing;
- Provision of lubricants;
- Provision of information on the possibility of receiving pre-exposure prophylaxes (PrEP) and post- exposure prophylaxes (PEP) for those who exhibit the most risky behaviors;
- Screening and treatment for STIs;
- Individual legal advice.

- the size of the target group covered by budget funds,

	2019	2020
MSM	3946	5515
TG	62	80

- the cost of each service,

The total budget without distributions was studied, as the budget provided by the RA Ministry of Health did not reflect the separate cost of each service.

- total budget expenditures for the target group.

	2019	2020
MSM	USD 98,842.35	USD 189,711.07
TG	USD 1,215.38	USD 1,879.89

9. Identified funding gaps:
- services not covered by the budget,

The following services are not funded from the minimal and extended packages agreed with the RA Ministry of Health:

- Provision of educational information materials (for MSM and trans* people);
- Endocrinologist consultation (for trans* people).

However, the fact that only basic services are included in these packages should be taken into account. Thus, in 2018, New Generation Humanitarian NGO with the financial support of the Eurasian Coalition on Health, Rights, Gender, and Sexual Diversity, conducted a study on the services provided to MSM and trans* people and their compliance with international standards based on the Implementing Comprehensive HIV and STI Programs (MSMIT and TRANSIT tools). A number of services that are included in the minimal and extended packages developed as a result of the study do not receive funding.

- Educational and informative trainings for community representatives;
- Psychological Consultation;
- Various lubricants (silicone based);
- Mobile applications.

In addition to the minimal and extended packages, an additional package of services has also been developed.

Research based on MSMIT tool will be conducted in Armenia in 2021.

- overestimated or underestimated size of the target group,

In 2019, the coverage was less by 54 people, about 1.5%, and in 2020, the coverage was exceeded by 15 people, 0.2%, and in terms of the TG group, the planned and actual coverage is the same.

- overestimated or underestimated cost of each service,

N/A

- assessment of the lack of funding for each service and general calculations.

In order to address the funding gaps, it is necessary to follow up on the implementation of the recommendations listed below.

10. Recommendations for filling gaps in public funding based on the advocacy plan developed by the grantee:

The following recommendations have been highlighted during the analysis of the financial gaps in the Armenian state budget of social and health services provided to MSM and trans* people:

1. The National Program on the Response to HIV/AIDS for 2017-2021 ends in 2021. It is necessary to develop and establish the new National Program to ensure the sustainability of interventions for the future years.

Timetable: The interventions' timetable must be inquired from the CCM.

Expected result: Active participation of representatives of vulnerable groups in the process of development and establishment of the National Program on the Response to HIV of the Republic of Armenia for 2017-2021.

2. State funding for prevention programs has not been provided by the Acting National Program on the Response to HIV/AIDS of the Republic of Armenia, they have mainly been implemented through the funds of the Global Fund and other international donors. It is necessary to consider the future sustainability of prevention programs taking into account the fact that the financial support of the Global Fund ends in 2021, and it is also important to consider the economic situation and financial capacities of the country.

Timetable: Considering that the new CCM structure is established for 2 years, the advocacy steps must be taken in the coming two years.

Expected result: Partial ensurance of state financial resources for HIV/AIDS prevention programs.

3. Representatives of vulnerable groups receive prevention services at non-governmental organizations. It is necessary to study and consider the provision of prevention services to representatives of vulnerable groups through the primary link in order to expand the provided services.

Timetable: Considering that the new CCM structure is established for 2 years, the advocacy steps must be taken in the coming two years.

Expected result: Formation of community-based monitoring groups under the CCM. Development of recommendations based on the group reports aimed at ensuring provision of high-quality and needs-based services to representatives of vulnerable groups.

4. Social programs are not implemented for the vulnerable groups. It is not conditioned by legislative obstacles but by absence of an offer. In this sense it is recommended to study the needs and accessibility of social programs for vulnerable groups, and accordingly develop recommendations, projects aimed to address the needs of vulnerable groups.

Timetable: ongoing

Expected result: Needs assessment for social programs. Development and presentation of new project proposals.

11. How the activities on this short-term analysis fit into the overall budget advocacy process in the country (what previous work, possibly done by other organizations / experts, you relied on, with whom and how you plan to cooperate in the future):

The whole analysis is based on the analysis of the results made by the National Center for AIDS Prevention in 2019. Data for 2020 has not been received yet. The recommendations made during this analysis, as well as the developed roadmap, will enable interested organizations, including NGOs, to take steps towards budget advocacy.

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