



# **Taking stock of budget advocacy efforts in Eastern Europe, South-Eastern Europe and Central Asia**

## **MONTENEGRO COUNTRY CASE**

**Vilnius, 2021**

# Montenegro

Population:	<b>0.62 million</b>
PLHIV number estimated:	<b>370</b> (2020, UNAIDS as communicated by the CCM)
PLHIV virally suppressed:	<b>48%</b> (2020, UNAIDS estimate)
Health expenditure as % of GDP:	<b>8.4%</b> (2018, WHO data)
Health as % of government expenditure:	<b>10.60%</b> (2018, WHO data)

## HIV financing: Share of government (domestic public) resources, US\$

	2017	2020
- overall HIV expenditure	100% EUR 2.44 or US\$2.76 million	75-80% EUR 3.26 or US\$3.74 million
- HIV treatment	100%	100%
- HIV prevention (without opioid agonist therapy)	100%	60%

Data from CCM except the most recent data for HIV prevention coming from respondents.

Currency rates: the annual average is taken from the European Central Bank at: [https://www.ecb.europa.eu/stats/policy\\_and\\_exchange\\_rates/euro\\_reference\\_exchange\\_rates/html/eurofxref-graph-usd.en.html](https://www.ecb.europa.eu/stats/policy_and_exchange_rates/euro_reference_exchange_rates/html/eurofxref-graph-usd.en.html) (EUR vs USD 1.1297 in 2017 and 1.1475 in 2020).

\*The Global Fund support has been interrupted between July 2015 and April 2018 due to the country's ineligibility and then re-eligibility based on the epidemiological criterion. Therefore, during the interruption, prevention is assumed to be fully funded from the state budget, while being vastly underfunded and utilizing volunteer contributions from civil society.

## HIV budget advocacy: How civil society organizes itself

An informal coalition of the five civil society members represented in the CCM are communicating regularly and cooperate on advocacy. Community voices are represented by an LGBTIQ group, QUEER, and the PLHIV support group, the Montenegro HIV Foundation. The two largest service providers and advocacy groups, CAZAS and JUVENTAS, are leading advocacy efforts. During the period without the Global Fund support, in 2017-2018 JUVENTAS was the driving force of mobilization of national and international support to ensure Montenegro acts on HIV prevention among key populations.

The CCM, the Secretariat of which is hosted in the Institute of Public Health, has been used as the key platform. The CCM remained vibrant during the 'break' between the Global Fund's HIV grants from July 2015 till April 2018.

### Funding amounts and sources, US\$:

<b>US\$372,000 in 2018-2021</b>	<b>65%:</b> multi-country grant from the Global Fund, SoS (2019-2021)
US\$93 thousand annually	<b>35%:</b> Open Society Foundations directly and through ERA, LGBTI regional network
	No advocacy in the country HIV grant from the Global Fund

## Key achievements and progress

The greatest achievement of the last 3 years was ensuring the government upheld its commitment to providing 40% co-financing of NGO-led HIV prevention and peer treatment support services to complement the Global Fund support. The Global Fund's role was crucial and co-financing is part of the current grant agreement between the country and donor. After the closure of the Global Fund's support in 2015, in 2018 the funder made social contracting and co-financing a pre-condition to its return to Montenegro. The funding is disbursed through a MoH calls for NGOs to provide services for key populations.

### Success story: Getting parliament to earmark funds to HIV prevention for the first time.

Civil society campaign to raise awareness about interruption of support for services for key populations was wide and started in 2015-2016. It has secured support from the European Parliament, the European Commission delegation, also such strong international networks as EHRA and ILGA (leading global LGBTIQ organization). The Global Fund's strong condition and return were feasible because strategic advocacy by civil society and the CCM led the Parliament to allocate a specific budget line in the State Budget Law for HIV prevention amounting to 100,000 euro. This was the first state funding had been allocated to HIV prevention among key populations. This amount would cover one-third of the need. The effort leading to this was vast, as outlined in the graph below. Additionally, JUVENTAS continued its services, though in drastically reduced coverage and capacities, basing on the voluntary basis of the whole staff involved and operational grant from the Norwegian Embassy. In 2014, the Institute of Public Health conducted the integrated bio-behavioral surveillance study among men who have sex with men, finding HIV prevalence at 12.5%. A testing campaign by civil society confirmed this worrying trend. The epidemiological evidence built the case for changing the eligibility status of the country by the Global Fund.

NGO's sent out over 100 letters to various government, donor, and international stakeholder organizations in the months after the Global Fund grant ended.

Advocates attended many events with government, health, and diplomatic staff to make the case for government financial support for services to the key vulnerable populations.

There were developed and disseminated research and policy briefs, as well as inputs for an EU accession progress report which mentioned the problematic situation of serving key populations

Fundraising for advocacy

December 2015 – meeting & presentation to an Inter-Parliamentary committee on health, social care, and labor.

Information from Ivana Vujovic and the presentation by Sanja Sisovic, 2019

The first allocation for HIV prevention was included in the national budget as a separate budget line by the Parliament. Currently, the funding is allocated by the Ministry of Health on the basis of the contractual agreement with the Global Fund. The compliance to the government's co-financing is checked by the Global Fund on annual basis in the last three years, 2019, 2020 and 2021.

The funding procedure has been changing and remains unresolved issue. The Ministry of Health has utilized the administrative regulations under the 2018 Law on Non-Governmental Organizations (which foresees up to 0.6% of the state budget being channeled to NGOs). However, the Law on Non-Governmental Organizations says that one NGO cannot get more than 20% of the budget allocated under the sectorial civil society engagement program but in the HIV field in this small country there are few service providers that reach MSM, people who use drugs, transgender people and sex workers. Therefore, the search for an alternative model of ensuring legal basis for allocation of funding and contracting is one of the strategic priorities for civil society.

A true test to resilience and sustainability came again in 2020. The parliamentary election was won by the opposition, ending 30 years of domination by one ruling party. The HIV prevention budget and the procedure for distribution and allocating funds to NGO services were questioned extensively by the new leadership of the Ministry of Health. Again, the CCM, civil society groups, successfully using evidence and working closely with Global Fund staff in Geneva managed to find a path forward. The Global Fund's precondition and contractual arrangements were key.

Engagement with the multi-country HIV project, SoS, enabled advocates to look at the long-term sustainability of the HIV response. It supported their interconnection with other advocates in the region. They are now exploring ways to influence health legislation, specifically the law on health protection and health insurance so that NGOs are recognized as service providers and so prevention can be funded through the National Health Insurance program. This path was also suggested as a possibility in the legal analysis conducted back in 2017-18 by UNDP. A similar approach is used by the Ministry of Labor and Social Welfare, where the main NGOs are already licensed for delivering social services.

The advocates continue to seek new partnerships and support. Advocacy has been supported by the European Commission, EHRA, Open Society Foundations, the Norwegian embassy among others.

While ensuring sustainable, quality HIV prevention is their main focus, the advocates are also working on addressing their clients' other needs. As 62.8% of people who inject drugs<sup>1</sup> have hepatitis C virus, NGOs are advocating for better drugs and a larger budget for hepatitis C treatment with the National Health Insurance Fund and other partners.

*Sources used:*

- *Interview with Miso Pejkovic, CAZAS*
- *Presentations by Sanja Sisovic, CAZAS & Ivana Vujovic, JUVENTAS in EHRA events*
- *UNDP. NGOs as Health Service Providers in Montenegro: Legal Analysis, 2019*
- *Country case study in OSF. Lost in transition, 2017*
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<sup>1</sup> Preliminary data from the unpublished IBBS on people who inject drugs, conducted in November and December 2020. In comparison, prevalence was staying at the level of 53-55% between 2008 and 2013.