

COMPASS

Since 2017, the Coalition to Build Momentum, Power, Strategy and Solidarity has broken new ground in transnational HIV activism that's grounded in rigorous analysis, fearless tactics and collaboration across geographies. We're winning commitments and changes that will drive epidemic control.

Here's what the future of AIDS activism looks like

NOW



The stakes have never been higher for the global HIV response. We have more tools and more knowledge than ever about how to end the epidemic. There are ways to reduce a person's risk of passing on or acquiring HIV to nearly zero. If these strategies reached everyone living with and at risk of HIV, the epidemic would be over.

But that's not happening. The task of delivering HIV prevention is incredibly complex, and millions of people are still not being reached. In many places the people most affected by HIV—young women, gay and bisexual men and other men who have sex with men, transgender people, people who use drugs and other vulnerable populations—are the people least likely to receive needed care and prevention services.

COMPASS represents a new model for powerful Africa-driven activism: a “business unusual” approach that we expect to shape the response to HIV and other global health challenges for decades to come.

To a large degree, this is due to shortcomings in policy, program design and prioritization of community-based and community-led services. Within affected countries, HIV funding is not always allocated to the communities where it's most needed. Critical

interventions—from viral load (VL) testing programs for people living with HIV (PLHIV) to the provision of daily oral PrEP to people at risk—are underfunded or inconvenient. Vulnerable populations are stigmatized, excluded from decision-making or even subject to official repression. The data that are needed to make complex policy decisions—to define needs, weigh priorities and predict results—are often unavailable or of low quality.

Throughout the course of the AIDS response, vibrant advocacy and activism have driven solutions to challenges like these by focusing on accountability: making sure that power, funds and policies work for people living with and at risk for HIV. Yet resources for advocacy and activism are currently shrinking. At the same time, civil society organizations have been enlisted as partners by the very funders and programs they must hold accountable, increasing the risks they face when they speak out as activists.

The **Coalition to build Momentum, Power, Activism, Strategy and Solidarity (COMPASS) in Africa** confronts these challenges head-on with bold, well-resourced, coalition-based, data-informed advocacy and activism. COMPASS combines country-based coalitions of civil society groups in Malawi, Tanzania and Zimbabwe with seasoned advocacy partners in the global North. Connected through a unique structure of strategic planning, real-time support and coordinated advocacy and activism, COMPASS partners work together to gather, analyze and use evidence and data to drive strategic advocacy campaigns and change policy in the coalition focus countries and beyond.

Who we are

COMPASS' innovation starts with the makeup of our coalition. We are a true North-South collaboration, anchored and led by African civil society coalitions in Malawi, Tanzania and Zimbabwe, with strong collaborations across the region. Partners in the region and in the global North serve as strategic thought partners offering data, intel, connections and expertise. Each partner in the coalition brings unique and complementary skills to the mix. And while many of us have worked together before, the structure of COMPASS amplifies our potential impact:



Who we are

In-country partners build and lead advocacy coalitions...

Malawian Civil Society Action Forum

Led by COMPASS partners CEDEP and MANET, the coalition spans 11 high-burden districts in Malawi and has already secured several key policy wins, including a government commitment to provide regular HIV viral load testing for all Malawians living with HIV. COWLHA, JONEHA, LITE and MANASO are part of the CSAF and the vibrant COMPASS Malawi team.

Differentiated Service Delivery Umoja Tanzania (DSDUT) and the Key and Vulnerable Populations Forum (KVP-F)

COMPASS Tanzania partners CENTA and TanPUD have been instrumental in creating an autonomous coalition of KVP groups. DSDUT is a working space for groups driving change in AGYW and women's issues (TNW+, TAYOA, DWWT), budget accountability (Sikika and NACOPHA) and human resources for health (BMF).

Advocacy Core Team (ACT), Zimbabwe

This existing collaboration between Zimbabwean civil society groups has taken on new urgency with COMPASS backing and has specific, focused advocacy campaigns underway. ACT is housed together with PZAT, the COMPASS monitoring and evaluation leader, further increasing its capacity to drive change. In 2020 the Zimbabwe coalition expanded to include six new groups: BHASO, My Age Zimbabwe Trust, UAN, Youth Engage, ZICHIRE, and ZNNP+.

...with support from non-country partners in Africa and the global North

AVAC

Leads COMPASS implementation, providing coordination across partners, geographies, thematic areas and offering support through strategic input, flexible funding approaches and intensive participatory M&E.

amfAR

Leads coalition Data & Analytics activities and serves as a data "help desk" for in-country teams.

CHANGE

Leads advocacy focused on the integration of HIV prevention with sexual and reproductive health and rights and women's health.

Health GAP

Co-leads Advocacy Strategy & Tactics with AVAC, focusing primarily on in-country advocacy.

ICW EA

Provides cross-cutting issue support for COMPASS partners and Tanzania country team support.

MPact

Provides key population issue support and Tanzania country team support.

PZAT

Acts as the Africa-based hub for all COMPASS monitoring and evaluation activities.

OUR IMPACT AT 24 MONTHS: Strengthened coalitions and tangible wins

COMPASS launched in November 2017 with an initial three-year project phase. Real activism and advocacy takes time. But just two years into the project, COMPASS has achieved impacts in all three major areas of our work. The outcomes listed below are just a few examples of how transnational activism is changing the landscape:

1 Building the strength and influence of Africa-focused civil society coalitions.

We've helped establish or reinvigorate advocacy coalitions in our focus countries, and ensured that they have the data and expertise to be effective.

- **Securing viral load scale-up, working towards U=U in Malawi:** Starting in early 2018, the newly-formed Civil Society Action Forum (CSAF) and other COMPASS partners navigated a web of funding streams and decision-making processes to win the

Malawian government's commitment to scale up viral load capacity so that each Malawian PLHIV would receive an annual assessment of virologic suppression. This commitment came in the context of agreement on a Malawian Undetectable = Untransmittable (U=U) campaign.

To secure this agreement, CSAF and COMPASS partners built scientific literacy to serve advocacy, successfully addressing scientific questions about annual VL testing, a key component of any U=U campaign. They also showed savvy and strategy in solving funding issues. When the Malawian government was at first unable to identify sufficient funding, COMPASS swung into action, making connections between multiple donors and government officials to close the gap. When COMPASS partner Health GAP identified an opportunity for Malawi to unlock additional Global Fund resources, CSAF leaders helped broker the necessary conversations and successfully pressed the Ministry of Health to take action to unlock the funds.

As of mid-2019, expanded VL access was in place, and key partners had agreed on U=U, with signs suggesting that this civil-society-driven proposal will become a reality. No other sub-Saharan African country has launched such a campaign, which has had transformational effects in the US, Europe and Viet Nam. Today, COMPASS partners are pushing for Malawi to be the first, even as they build out robust community-led monitoring to ensure that every commitment becomes a life-saving reality on the ground.

To learn more, read our U=U Case Study at: www.avac.org/compass.

➤ **Creating a KVP-led and -convened forum in Tanzania:** Over two years of work in Tanzania, COMPASS partners used the

PEPFAR country planning process as a place to raise core concerns about policies and programs that are not meeting the needs of the most impacted groups in Tanzania. This included pushing for expansion of programs for adolescent girls and young women in local government budgeting processes, GFATM funds reallocation and PEPFAR country planning meetings. It also meant asserting the need for treatment and prevention services that meet the needs of key and vulnerable population (KVP) groups, including men who have sex with men, transgender people, people who use drugs and sex workers. COMPASS partners within and outside of Tanzania worked together to build an evidence-based KVP agenda that secured shifts in KVP size estimates and the inclusion of KVP in the planning and implementation of a key survey of key populations and of the government PrEP program. Through this visible, substantive participation, COMPASS KVP partners secured leadership roles within the PEPFAR planning processes and, through these processes, established a government-recognized KVP-led and -convened forum for advancing evidence-based advocacy.

To learn more, read our KVP Forum Case Study at: www.avac.org/compass.

➤ **Making donor data useful and accessible:** With COMPASS support, amfAR is confronting a central challenge for in-country advocacy: the lack of useable, detailed data about the investments of PEPFAR and the Global Fund. In coordination with other COMPASS partners, amfAR created searchable online databases that allow advocates to monitor where services are being provided, where there are gaps and where additional funding or government attention are needed. With these data in hand, in-country coalitions can formulate credible demands regarding

the use of donor funding and hold governments accountable for effective use of those resources.

To learn more, read Data Watch at: www.amfar.org/data-watch-accessibility/.

2 **Defining priority issues and ambitious change agendas.**

COMPASS is confronting the complexity of today's HIV landscape with bold, data-backed agendas targeting multiple funders and implementers. We focus on:

- **Keeping human rights at the center of HIV testing:** In early 2019, COMPASS partners amfAR, AVAC and CHANGE worked together to analyze the potential unintended harms of PEPFAR strategies to increase the efficiency of HIV testing programs. These strategies—for example, testing the partners of people newly diagnosed (“index testing”) and testing in healthcare settings where HIV prevalence is especially high—are indeed necessary to reach more people with HIV. However, the COMPASS analysis found that PEPFAR's aggressive rollout of these strategies could inadvertently weaken patients' rights to informed consent, expose people to intimate partner violence or prompt governments to criminalize HIV exposure. In 2019, COMPASS partners compiled key findings, shared them with PEPFAR and won a commitment to immediately communicate changes in index testing implementation to the field.
- **Ensuring that community-led monitoring is driving change—not just ticking a box:** Community-led and -based responses to HIV have been central to the response since its inception. Today there is increasing interest from PEPFAR, GFATM and countries in using communities—including PLHIV networks and community service organizations working with youth, key populations, and

men—to both deliver and monitor the quality of services. Investments in “community-led monitoring” are being built into the next GFATM funding round and are part of many PEPFAR country plans. Almost all COMPASS partners are engaged in this work in some way, and through an exchange of ideas and approaches, the coalition came to understand that civil society needs to define minimum standards for community-led monitoring (CLM) and provide clarity of what it should lead to: a rapid response to address and resolve problems identified at the site or service level. Community-led monitoring that isn't tied to action but, rather, to a report to a donor, isn't meeting community needs. And not all monitoring is created equal. In 2019, COMPASS partners collaborated with other groups including the International Treatment Preparedness Coalition to define, for GFATM and PEPFAR, how 2020 funding windows for this work should reflect best practices for community-led monitoring. We're making sure that investments have impact, and sharing CLM tools to make sure our work does too.

3 **Advocating for comprehensive, effective treatment and primary prevention programs.**

We're pushing for decision-makers to effectively prioritize funding for and access to the full package of services to reduce HIV infections, including risk-reducing strategies like oral PrEP, voluntary medical male circumcision (VMMC) and access to sexual and reproductive health services, including re-energized male and female condom programming.

- **Shaping donor funding and government policy in tandem:** Armed with high-quality data and supported by partners, COMPASS' three in-country coalitions achieved an unprecedented impact on the allocation of

PEPFAR funding for the coming year. As active participants in PEPFAR's annual Regional Planning Meetings in March 2019, the coalitions arrived with well-formulated demands for government policy shifts that could be implemented with PEPFAR support.

- Malawi's CSAF, with the support of Health GAP, amfAR and AVAC, researched and developed a "People's COP" (referring to PEPFAR's Country Operational Plans). Their wins included the government's commitment to annual VL testing, along with expanded access to VMMC and the first major funding for PrEP in Malawi.
- Tanzanian activists secured their government's agreement for a national PrEP program, HIV testing by frontline health workers and a prohibition on forced anal exams of men suspected of having sex with men.
- And Zimbabwean coalition members were able to stave off cuts to VMMC and other primary prevention programs while securing commitments to expanded VL testing and screening for intimate partner violence in index-testing programs.

To learn more, read the Malawi People's COP 2019 at: www.healthgap.org/wp-content/uploads/2019/02/Liu-Lathu-Mu-COP19-Malawi.pdf.

➤ **Bringing African perspectives to Washington:** COMPASS partner CHANGE has held two "reverse congressional delegations" that brought young African women's health advocates as part of a "reverse congressional delegation" to Washington, DC. Their week-long visits flipped the traditional structure of Congressional delegations, enabling policy makers to hear from people outside the US government while still within the halls of Congress. The co-del participants amplified the positive impact of and challenges to US government funding for HIV/AIDS, particularly for women and girls. At a moment when comprehensive women's health is a must for achieving epidemic control, they put a human face on the impact of PrEP, the Global Gag Rule and more—securing commitments for continued Congressional funding support and action to overturn harmful policies.



COMPASS In Action

STRATEGIC CHALLENGE	OUR INNOVATION: In concept...	...and in practice
<p>Effective HIV advocacy demands true global collaboration—across continents, borders, time zones, organizations and areas of expertise. This requires equity, transparency and new ways of working.</p>	<p>We function as an integrated, virtual activist team. The COMPASS model brings partners from the Global North and the Global South together in a non-hierarchical, collaborative space focused on filling gaps and supporting each other's strengths. Ad hoc North-South advocacy and activism often hits a roadblock of inequities in funding or presumptions about who has—and needs—"capacity-building." COMPASS partners are committed to working together and we're transparent about resources, reports and goals. We use online forums to collaborate in real time. In-country and global team members can work seamlessly to share information, respond to new developments and workshop strategies as a group.</p>	<p>When Tanzanian COMPASS partners were at a multi-stakeholder meeting and national estimates of the number of key and vulnerable populations seemed low, they sent a message to the COMPASS Tanzania communication channel asking for help. amFAR stepped in with real-time calculations based on their published methodology. With this support, Tanzanian civil society changed the calculations used to drive funding and services.</p>
<p>National civil society coalitions must sustain their power as activists. But making bold activist demands can carry big risks, especially where governments hold power over civil society or can threaten their communities with repression.</p>	<p>We're focused on bold activism centered in Africa and supported by allies. Years of funding for civil society to provide services and participate in national processes and shrinking envelopes for true activist responses mean that many civil society activist and advocacy groups think carefully about taking risks, making those in power uncomfortable or pushing for audacious wins. COMPASS secures and expands the space for bold and necessary risks. We make sure we are all equipped with compelling and credible data, plugged into government decision-making at the right levels and ready with a range of tactics if a first request falls on deaf ears. Our demands are understood and ultimately supported by major funders, including PEPFAR and the Global Fund.</p>	<p>After a months-long stalemate over whether Malawi could reallocate funds from its Global Fund grant to scale up viral load testing, COMPASS partners set and secured a meeting with GFATM Executive Director Peter Sands to raise the issue. Despite in-country pushback over activists going outside of established channels of communication with GFATM, the coalition held firm and attention at the highest level helped to unlock government funds.</p>
<p>With so much still to learn about the effective implementation of HIV prevention, knowledge and expertise need to transcend geography.</p>	<p>We apply lessons across borders. Thanks to systems of collaboration within COMPASS, we share best practices and lessons between our focus countries and between regions of the world. Insights from our in-country partners also drive advocacy in Washington, Geneva and other Northern capitals where critical funding decisions are made.</p>	<p>When Zimbabwe's COMPASS partners identified conflicting age-of-consent laws as a major obstacle to young women's health and well-being, they teamed up with CHANGE to develop a shared analysis and policy paper; CHANGE brought an ACT member to Washington, D.C, for an all-female COMPASS "reverse congressional delegation" focused on the importance of funding for comprehensive sexual and reproductive health and HIV programs. With her leadership, and work from youth advocates across Zimbabwe, Parliamentarian adopted the policy paper and are using it as the basis for a review leading to change in 2020.</p>
<p>Advocacy needs to be accountable for outcomes, not outputs. While advocates have long welcomed measurement and evaluation, we've too often been measured for what we do—meetings held, reports issued—instead of what we achieve.</p>	<p>We're accountable for driving real change in policy and programs. We develop data-driven, strategic advocacy plans that identify what change is possible and how to get there. We're nimble and can adjust to changing circumstances or evidence. We hold each other accountable, since we're measured by collective impact, not individual milestones.</p>	<p>In the past two years, COMPASS partners have analyzed data, collected evidence and applied bold tactics to win the following: tens of thousands of VMMC procedures added to Tanzania targets; annual viral load for more than 800,000 Malawians living with HIV; a directive from PEPFAR HQ to countries on index testing that could save hundreds of lives and prevent thousands of human rights abuses; improved health for millions of AGYW via parliamentary support for reduced age of consent (Zimbabwe), inclusion of AGYW in PrEP programs (Malawi); optimized treatment for PLHIV in East and Southern Africa via pressure to provide DTG-based regimens in the context of choice and comprehensive programming.</p>
<p>Evaluation needs to be owned and embraced by advocates themselves, not conducted from the outside.</p>	<p>We evaluate ourselves constantly from within. Our work is subject to rigorous monitoring and evaluation led by Zimbabwean NGO partner PZAT. By centering this activity in Africa, COMPASS helps ensure that accountability and self-improvement are written into everything we do.</p>	<p>Within the first year of COMPASS, the in-country coalitions not only welcomed the monitoring and evaluation activities of PZAT, but sought in-person trainings to help them integrate this function into their work.</p>



COMPASS: Helping keep HIV/AIDS activism and advocacy on course—until the work is done

There would not be AIDS treatment in Africa—or anywhere in the world—without activism. Without it, the global emergency of unchecked death might never have ended. Today's progress towards health for all people living with and at risk of HIV would be a dream.

The need for advocacy, including direct activism, has not waned; it has only evolved. Today's advocates must continue the vital work of influencing decisions within political, economic and social institutions and systems. COMPASS exists because the work isn't finished and because the next phase of bold activism needs new models to navigate a more complex landscape and achieve more nuanced goals than ever before.

All AIDS programs are both local and global. The next phase of activism is using and innovating proven strategies for holding those in power accountable for their commitments. We raise concerns from communities to corridors of power, and we know that a comprehensive response is about much more than a single virus. Today's AIDS activists are also on the front lines of fights for contraception, sexual and reproductive health, tuberculosis programs that work, an end to high rates of maternal mortality, a cessation of stigma of all kinds and more.

COMPASS creates the space for AIDS activism to flourish, so that people can too. It's an innovation on time-tested strategies and a commitment to continue to gather evidence, analyze data and hold governments, funders and program implementers accountable for necessary change.