In 2014 APN+ celebrates 20 years of working in solidarity with our member networks across the region. That is 20 years of representing people living with HIV, implemented by PLHIV, for the benefit of PLHIV.

In 2013 APN+ and member networks continued to rise in reputation, ability and responsibility. We are recognised leaders in our communities, bringing local level issues to the centre of discussions, ensuring a positive perspective is heard loud and clear when advocating quality of life for PLHIV in our region.

In late 2012, APN+ finalised and launched our new strategic plan POSITIVE Change, providing us with clarity about our roles and our priorities for the next 4 years.

Under this strategic plan, our highest purpose remains quality of life and access to fully funded, affordable and comprehensive treatment, care and support for PLHIV. Everything we do links back to this purpose, from our network strengthening initiative, which aims to build PLHIV capacity to lead and influence national HIV planning, monitor treatment access and treatment adherence, to our initiatives on sexual reproductive health rights for positive women and advocacy around better treatment options for HIV-HCV co-infection.

At the time of writing this message, the 64th World Health assembly passed a resolution on HCV, something we have been advocating for years. This means that we can now put more pressure on our country governments, donors and bi-lateral agencies to urgently respond to the needs of our peers who cannot afford to access HCV treatment.

We have developed strong partnerships with key regional networks to help us meet our goals to work collaboratively in areas such as community based HIV testing, treatment literacy, advocacy and human rights. We have also built strong alliances across the world for collective and effective response to the harmful provisions of Free Trade Agreements and patents on access to medicines.

Our regional programs continue to expand our leadership and, strengthen our voice. Both our multi-country Global Fund program and our multi-country capacity building initiative focus on PLHIV networks getting stronger as leaders and increasing our capacity as networks to generate evidence from our unique point of view and perspective as PLHIV.

Having a strategic plan is one thing, having strong and capable member networks will enable us to deliver our plan and advocate our rights more effectively across the spectrum of barriers that continue to exist for PLHIV across diverse communities. Let us continue working together to be an effective force that is able to speak to and support the priorities of PLHIV at the local, provincial, national, regional level and international level.

In solidarity.

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**Vision**  
A better world for People Living with HIV

**Mission**  
Working together to improve the quality of life for all people living with HIV in our region through peer led advocacy, network strengthening, communication and capacity building activities

**Governance and Implementation structures**  
APN+ was established in 1994 as a collective voice for all HIV positive people in the Asia Pacific region. We are a peer led organisation that is driven by the needs of PLHIV at the local level. All country representatives to our Board are positive leaders.

- **The Steering Committee:** APN+ is a regional network, with a regional mandate that operates under the direction of the APN+ steering committee and the APN+ Board.
- **The Board:** APN+ Regional board is made up of all country representatives to APN+ (30 member networks) with a focus on APN+ vision, mission and strategic direction.
- **The Secretariat:** APN+ secretariat is based in Bangkok, Thailand. As of December 2013 APN+ employed 10 full time staff.

**Strategy**  
Our work is guided by our strategic plan (2012-2016) which was developed and finalised in consultation with member networks. Our activities are prioritised according to 5 strategies for action:
Strategic Direction 1:

Peer Led Advocacy

advocating the issues that matter to PLHIV

Monitoring Access to Treatment in ASIA (MATA)

APN+ and partner networks in Bangladesh, Indonesia, Laos, Nepal, Pakistan, the Philippines and Vietnam lead a multi-country HIV grant from round 10 of the Global Fund. MATA is a long term tool to document, monitor and advocate issues related to treatment, care and support access. The program enables APN+ and member networks to generate evidence from the perspective of PLHIV in the region. Data collectors have been trained, with balanced distribution across geographical areas, gender and risk groups. All 7 networks receive ongoing technical assistance in areas of grant management, including program and financial management, and research. APN+ has met key outcome indicator targets and been awarded high performance ratings by the Global Fund in 2013.

Key outcomes:

+ Regional interactive information system & database platform developed and in use
+ 7 Country reports and 1 Regional report finalised on treatment initiation and adherence issues with respect to Community access to HIV treatment, care and support services (CAT-s)
Treatment Access for HIV- Hepatitis C co-infection

APN+ and country networks in Nepal, Myanmar, Thailand, Indonesia, India and Vietnam lead an advocacy program to increase knowledge of HIV-hepatitis C co-infection, including impact on long-term HIV treatment and survival for PLHIV. Community mobilisation through treatment literacy and advocacy trainings has been the primary focus across all countries. Several national level consultations have taken place between government, health care providers and community to discuss action plans that address barriers and challenges to treatment and testing. Working groups and coalitions are established in each country with a focus on integrating HCV services into HIV programs, engaging in dialogue with government and pharmaceutical companies to reduce treatment costs, partnerships with hospitals and reviewing current efforts to address HCV. Activities are mainly funded by Robert Carr Network Fund.

Key outcomes:

+ Government of Nepal announced commitments to allocate funds to treat 250 people
+ Discussions between community leaders, government officials and other key stakeholders including UN agencies have been initiate for HCV testing and treatment
+ A peer led treatment literacy training manual was developed and series of workshops conducted
+ Series of dialogues between community leaders and pharmaceutical companies have taken place and the cost of medicines (pegylated interferon) has started lowering/ dropping down in some countries

Hepatitis Coalition of Nagaland (HepCon), India
Sexual Reproductive Health Rights Advocacy

WAP+ leads an advocacy program on sexual and reproductive health rights and needs of women and their partners in the region. The program aims to increase knowledge, promote sexual reproductive health status and rights through increase demands for gender and HIV-sensitive SRH facilities and services. WAP+ developed a SRHR training module and held a training of the trainer’s workshop to roll out the training module for core representatives of women living with HIV in the region. A series of trainings and workshops were conducted in India, Nepal, Thailand, Cambodia, China, Myanmar, Indonesia, Laos and Vietnam reaching over 500 positive women.

**Key outcomes:**

- Key positive women are informed and better equipped with advocacy tools to uphold their rights and actively involved in promoting better services
- National SRHR consultations and working groups established to carry out action plans
- Access to basic services such as PAP smears have increased among positive women
Strategic direction 2: Leadership

promoting leadership among PLHIV and their networks

Empowered women
20 positive women from 10 countries (India, Cambodia, China, Vietnam, Fiji, Timor, Australia, Indonesia, Nepal and Sri Lanka) participated in a strategic planning meeting to develop an action plan for positive women in the region. Participants agreed to merge the two existing networks (ICW-AP and WAPN+) to form WAP+. A core group of 8 members govern WAP+, with 2 representatives from each sub region.

Young PLHIV
My right to health consultation facilitated leadership among YPLHIV in the Asia Pacific. It was a formal collaboration including financial support from Treat Asia, UNICEF and UNESCO. A peer led report with recommendations was finalised and launched at ICAAP. Discussions with country networks and local level groups are initiated to further address issues identified through the consultation.

Mentoring
APN+ consistently strives to be a strong role model and mentor for PLHIV in the region, and to support emerging and existing leaders to be visionary, inspirational and accountable. We do this by being available at all times, responding to needs wherever possible, facilitating opportunities, bringing networks together to increase their knowledge, to meet, exchange ideas and strategise collective advocacy plans that meet the interests of PLHIV.

Collaboration
APN+ works in close partnership with ANPUD, TAG, GNP+, ITPC, Treat Asia and several country and local level groups to increase leadership on HCV treatment literacy, testing and access. A series of capacity building trainings have been conducted across the region and as a result many of our network members are actively involved in addressing Hep C issues at both country and regional levels. We have engaged in dialogue with pharmaceutical companies to advocate for reduced cost of medicines. APN+ and TAG collaborated to organise the first Hepatitis C World Community Advisory Board (WorldCAB) meeting. All major multi-national companies that produce HCV drugs will participate. Some generic companies will also attend, in addition to GNP+, ITPC, ANPUD and other international activists.

Patent Opposition
APN+ is actively involved in challenging drug patents including more recently for the new HCV drug. Drug patents keep the price of medicines high, and so it is critical that APN+ and network members are actively involved in opposing these patents. Our network members are involved in addressing patent barriers in several countries in the region, and many have filed patent oppositions to patent offices. Advocacy efforts include raising awareness about patents on particular drugs being opposed, keeping these challenges on the agenda of relevant stakeholders and officials. Our work is well recognized and appreciated by key stakeholders.
Strategic direction 3:

Network strengthening

strengthening APN+ and member networks

Positive Capacity Development Initiative

The positive capacity program enables APN+ to work with national partners in Cambodia, China, Fiji, Lao, Myanmar, Timor Leste and Vietnam. The program supports networks to strengthen their governance and management structures according to their needs, while also building up leadership and advocacy capacity for PLHIV in each country. Governance and operation models were developed so that networks could adapt these modules according to their country context, therefore strengthening network constituency. Trainings were conducted in treatment literacy, positive speaking and healthy living, in addition to mentoring provided to operationalise new governance structures and policies. Emerging leaders were identified and trained across all countries. Activities are funded by AusAID.

Key outcomes:

+ APLHIV in Lao and Estrela+ in Timor Leste gain independence and are officially recognised and registered as PLHIV organisation
+ Positive Pacific Working Group established and Positive Pacific Network Coordinator in place

Local level MSM and TG Capacity Strengthening Initiative

This initiative was established to focus specifically on positive MSM and TG, as an additional component to the positive capacity development initiative funded by AusAID. It has provided a space for partner networks to build links with positive MSM and TG groups in China, Cambodia, Myanmar and Vietnam. In addition we are working to strengthen partnerships between key MSM and TG networks in the region and local positive MSM and TG groups at the country level. Up to 60 positive peer educators were identified and trained and treatment literacy trainings conducted including peer outreach with the aim to support MSM and TG to access testing and treatment. Network action plans have been developed for target cities in each country.

Key outcomes:

+ Outreach has been successful, with an increase in testing and treatment access among MSM and TG
+ Positive MSM and TG provide formal input into policy, strategy, advocacy and prevention messages of key MSM and TG networks at the local level

Technical assistance to Women’s networks

WAP+ provided technical assistance with proposal development and resource mobilisation to Malaysia (PEWAHIM) and Myanmar (MPWN). WAP+ support has resulted in MPWN and PEWAHIM being successful with their submissions and received funding support to undertake activities.
Strategic direction 4: Communication

knowledge exchange among PLHIV and partners

Sharing experiences and knowledge between different networks is very important to our work and to effective skills transfer. We consistently encourage and facilitate opportunities for PLHIV groups in the region to share country actions, which enable positive networks to learn new ideas and to develop stronger advocacy strategies. APN+ uses Facebook and APN+ mailing list to keep members regularly updated and to share key articles and news including network activities. Regular communication between APN+ secretariat and country networks continues to design programs and campaigns together. We have also identified areas that will improve how we communicate among PLHIV networks in the region.

Key outcomes:

- APN+, HCV blog, FTA Facebook page and profile is established and regularly used to engage with network members, PLHIV and a wider audience to exchange important information
- APN+ research ethics committee is established with 5 community members from the region
- Peer led research launched generating evidence about treatment access and adherence issues and to increase our understanding of the needs of positive people in our region

Peer led Research

APN+ has led a number of initiatives in relation to peer led research, as follows:

APN+ ethics committee and ethics research protocols have been established and shared
Framework and guidelines finalised for research on PLHIV living with the virus for 10+ years

MATA Community Access to Treatment, Care and Support (CATs) study (GF funded). Data collection implemented, analysed and completed in 2013. The report provides several recommendations for advocacy including:

- Encourage stakeholders involved in diagnosis to ensure those who test positive see a health care provider immediately after
- Country networks and CBO support groups should reach out as soon as HIV diagnosis is made and governments/national AIDS programs must promote their involvement
- Groups at higher risk because of their mobility and at start of ARV's need programmatic attention
- Investing resources in populations at higher risk can yield positive results and better adherence
- Strengthening relationship between PLHIV and their community is necessary part of HIV programmatic efforts

APN+ and network members use key research findings in peer led research to support evidence based advocacy to push for changes to community based testing guidelines and WHO HCV treatment guidelines. Peer led research supports our advocacy in community based testing, which will increase our ability to provide peer to peer support for testing and treatment access.
Key events and meetings in 2013

1. **APN+ and ITPC conducted a training meeting** on intellectual property to assist networks and strategic partners to increase awareness and knowledge of issues. Key leaders from Key affected population networks have built up capacity in treatment literacy and advocacy, and they have carried out further activities when reaching out to their network members to further build capacity for their members.

2. **HIV testing via community based organisations regional consultation** took place in September 2013. A statement was issued to support our advocacy in community based testing. We understand that WHO is currently developing a protocol on community testing. APN+ will provide inputs once the draft is ready.

3. During ICAAP 11 in Bangkok, APN+ took the opportunity to raise profile of community based testing targeting WHO, UN and Government participants. WAP+ attended a pre conference for women and girls and community forum for positive women. We have also used ICAAP to advocate for action on HCV. We take this opportunity to note our position on ICAAP, which is to say that we consider the amount of money spent on conferences every year is wasteful, and we have strongly advocated to move the regional conference to every 4 or 5 years. The dollars spent are huge and we continue to advocate for a review of this level of spending when we are in the middle of facing a funding crisis.
Strategic direction 5:

Secretariat Strengthening and Capacity Building

APN+ continue to abide by the systems established within the secretariat such as using the work place agreement policy and financial system. Additional staff have been hired to manage programs implemented with our country networks. Staff have been able to participate in many key workshops and trainings, so that secretariat staff are able to advocate more effectively on issues faced by positive people.

Key outcomes

- APN+ systems updated, new database systems in place and progress on new website design
- Able to carry out activities according to workplans
- Constructive partnership and collaboration with KAP networks including ANPUD, APTN, APNSW, Youth Lead and 7 sisters, increased by sharing office spaces and regular meetings.
- Financial systems established to meet Global Fund standard

Governance

Steering committee and board meet to discuss work plans, priorities and methods of operation. These meetings take place twice a year for the steering committee. Regular meetings are also conducted with the Thai board. From time to time joint meetings between the steering committee and the foundation board were held.

APN+ moved to new office in September 2013 as Ruam rudee building is being re-developed

APN+ hosts regional networks including: Asian Network of People who Use Drugs (ANPUD), Asia Pacific Network of Sex workers (APNSW), Asia Pacific Transgender Network (APTN), Youth Lead, and the UNAIDS PCB (program coordinating board). Hosting other community organisations has increased our partnership and collaboration with them.

PLHIV networks advocate for their rights in Malaysia

PLHIV advocacy in Phnom Penh, Cambodia
Challenges and Limitations

We continue to face various hurdles and challenges in the implementation of our work. In a diverse region we have various natural challenges due to our diversity, including language and distance. We work towards improving our communication channels and using technology to our advantage and to surpass these challenges.

Risks to funding remains a primary concern, as this could have significant impact on PLHIV leadership in the region and subsequently HIV planning. Without sustainable funding support, our ability to lead and mobilise community will prevent us from engaging in policy and dialogue. Most networks have managed to maintain their funding despite cuts to HIV funding, however the threat remains.

Another challenge worth noting is the persistent delays experienced with transfer of funding from various agencies. This often impacts on our ability to maximise our work activities within the implementation timeframes that we have planned.

Finally, the environment in which we advocate is still not always conducive to the community. In many places in our region, we still face resistance from authorities and barriers for inclusion continue to exist. These challenges make us a stronger force as we advocate for the interests of PLHIV.
Moving forward

In 2014 APN+ celebrates 20 years as leaders in the regional HIV response. At the regional and national levels we, and our country networks, have reached a position where we are now recognised as central to HIV planning in the region. Where this is not the case, APN+ and member networks will continue to advocate for these barriers to be removed.

APN+ will continue to prioritise quality of life and access to fully funded, affordable and comprehensive treatment, care and support for PLHIV in the Asia Pacific region. We will do this under the guidance of our steering committee and by working closely with our member networks to deliver our strategic plan and to advocate our rights across the spectrum of barriers that continue to exist for PLHIV across diverse communities.

The newly passed HCV resolution will enable us to take advocacy to the next level, and we will have a lot more fuel to pressure the various stakeholders to urgently respond to the needs of our peers who cannot afford to access HCV treatment. Similarly the threats of FTAs and other IP barriers will continue to dominate our work in the coming years.
2. AusAID (July 2012 - June 2014) - 1,124,500 AUD
4. UNAIDS (2013) - 167,400 USD
5. Levi Strauss Foundation (September 2012 - August 2014) - 100,000 USD
6. UNDP - 50,000 USD