

**CENTRAL ASIAN CONFERENCE
ON COMMUNITY-LED MONITORING (CLM)
IN THE CONTEXT OF ENSURING
HEALTH SYSTEM RESILIENCE**

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RESOLUTION

**COMMUNITY-LED MONITORING - AN ESSENTIAL
TOOL IN ENSURING HEALTH SYSTEM RESILIENCE
AND SUSTAINABLE ACCESS TO QUALITY HEALTH
SERVICES AND HUMAN RIGHTS**



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CENTRAL ASIAN CONFERENCE ON COMMUNITY-LED MONITORING (CLM) IN CONTEXT OF ENSURING HEALTH SYSTEMS SUSTAINABILITY 2023,

- Recalling that HIV in Central Asia is at present still a major public health concern that threatens all people, but also recognizing that it disproportionately impacts economically and socially disadvantaged and excluded groups,
- Recognizing that Central Asia is part of the wider EECA region, that is one of three regions globally where new HIV infections have risen since 2010,
- Recognizing that stigma and discrimination towards key populations and people living with HIV, including in health-care settings, persists,
- Concerned that key populations most at risk of HIV face structural barriers to accessing HIV prevention, treatment, and care services, which further widens social inequalities,
- Acknowledging that the withdrawal or reduction of external donor financing for HIV programmes in the region has challenged efforts to preserve and expand access to essential HIV services,
- Acknowledging that the major challenges in ensuring sustainable response to HIV/AIDS in Central Asian region, has been further negatively influenced by contextual developments, external factors, and crisis in the region,
- Acknowledging that the COVID-19 pandemic resulted in economic crisis, that affected the public health structures and services, and social protection systems,
- Acknowledging that the full-scale Russian invasion of Ukraine further worsened an economic crisis, resulted in geopolitical crisis in the region, and caused humanitarian crisis, including huge of waves of migration in Central Asian region, that places additional financial and systematic burden to the health sector,

- Acknowledging that the impact of the crisis among others affects regional and national HIV responses, and possesses significant threats to ensuring sustainable and continuous access to essential HIV services for those in need,
- Acknowledging the impact and negative consequences of the crisis, requires immediate political and strategic adjustments of the health policies, systems, and approaches towards sustainability,
- Recognizing utmost importance of multi-sectoral engagement, collaborative efforts and role of civil society and community actors to be placed in response to existing and emerging challenges,
- Recognizing need of engagement of civil society and community actors at every level of health systems and continuum of health services, including service delivery, strategic planning, data generation, quality improvement and monitoring and evaluation,
- Accepting recorded human rights violations within REACT database in all Central Asia countries including in law enforcement agencies and health establishments,
- Recognizing specific and unique ability and capacity of civil society and community actors in accumulating ground-level data on needs, interests and challenges faced by target communities and health service beneficiaries,
- Recognizing Community-Led Monitoring (CLM) as an evidence-supported, internationally recognized strategic instrument and accountability mechanism for HIV responses at different levels,
- Recognizing CLM as strategic instrument to systematically and routinely collect and analyze qualitative and quantitative data on HIV service delivery and human rights and complement national monitoring and evaluation systems and provide key information to fill critical gaps in decision-making process that leads to evidence-informed action and improve national responses,

- Acknowledging that quality and structured CLM that can inform strategic decision-making, can be implemented only if recognized by national health systems and integrated across its major functions,
- Recognizing an emerging need of introduction and integration of CLM in Central Asia as a tool to inform strategic planning and policy development,
- Understanding lack of support to CLM in Central Asian countries, including lack of funding available for implementation of systematic and quality CLM,
- Understanding existing gaps in recognition of CLM generated data by national systems in Central Asian countries, including ability of CLM to influence decisions and inform strategies in line with the interests of communities in need,
- Recognizing expressed readiness and declared willingness of national stakeholders across Central Asian countries to commit to improvement of CLM practices and their integration as a strategic instrument to inform national policies,

1. ADOPTS the Resolution on immediate actions required to introduce and integrate Community-Led Monitoring as a strategic tool to monitor quality of health services and human rights needs, and inform national and regional strategies and policies,

2. ENCOURAGES the approach of community-centered decision making, and applying CLM as a major approach in ensuring community needs-based strategic planning and policy making in Central Asia,

3. PROMOTES the following efforts:

a) ENSURE PARTICIPATORY GOVERNANCE

- Reinforce governance and leadership on national level, through rethinking the multi-sectoral coordination and participatory decision-making,
- Ensure that key coordination and decision-making structures engage communities, safeguarding their representation in core decision-making committees, and establishing environment where decisions are influenced by communities,
- Establish multisectoral stakeholder committee for CLM, comprising from community-based organizations, healthcare providers, government agencies, civil society organizations. Ensure legitimation of this committee and equip it with functions to oversee the planning, implementation and evaluation of community-led monitoring initiatives and its integration and institutionalization processes.

b) STRENGTHEN POLICIES AND STRATEGIES

- Adopt national policies and strategies in the field of HIV, so they integrate obligations and political support for CLM on national level, through prioritizing it within national strategies and action plans, and recognizing CLM as an essential instrument of monitoring of quality of services, level of access to services, and human rights violations,
- Revise national HIV/AIDS strategic plan and integrate CLM related actions into strategic directions of monitoring and evaluation, community system strengthening, and Resilient and Sustainable Systems for Health,
- Ensure an aligned integration of CLM instruments into the country proposals to GFATM and other donor agencies,

- Ensure that national legal and regulatory frameworks recognize CLM as an essential instrument for generating strategic information for informed decision making. Recognize unique capacities of community organizations to implement CLM, through elaboration and approval of the standards that define what is CLM, how it is implemented, and how its results are used to inform strategies and actions.

c) SECURE FUNDING SOURCES

- Reinforce the political commitment and ensure the financial resources required and make the case for adequate funding for CLM, including both national and donor funding sources,
- Allocate sufficient and sustainable financial resources for implementation of CLM that are channeled to communities for its implementation.

d) INTEGRATE CLM INTO NATIONAL MONITORING AND EVALUATION SYSTEMS

- Ensure institutionalization of CLM generated data by its recognition across all levels of national data collection and utilization processes, including national monitoring and evaluation systems, and strategic planning processes,
- Adopt national monitoring and evaluation and surveillance systems, so that they integrate CLM as an routine instrument for data collection and generation,
- Elaborate standardized list of indicators for CLM and integrate it into national M&E system. Elaborated indicators must align with the priorities of the community and national HIV response, including indicators on access to testing, treatment initiation and retention, adherence to antiretroviral therapy, quality of healthcare services, and reduction of stigma and discrimination,

- Standardize mechanism of CLM of HIV prevention and treatment services, as well as services for key populations,
- Ensure that both national indicators, as well as mechanisms and tools for their collection are recognized by national M&E system and standardized as an instrument for generating strategic information to inform national HIV response,
- Transform decision-making processes so that they rely on CLM generated data and aim to influence policies, programs, and practices to better align with the needs and rights of communities affected by HIV.

e) STRENGTHEN COMMUNITIES

- Concentrate efforts on capacity building and institutional strengthening of community-led and civil society organizations engaged in CLM implementation,
- Develop a robust data and information framework and data collection tools, in line with the national level indicators and mechanisms,
- Build a standardized process of CLM implementation as a core function of the organizational actions and structure.

f) ADDRESS STRUCTURAL BARRIERS TO CLM IMPLEMENTATION

- Influence national duty-bearers to work closely with communities to remove structural and systematic barriers to CLM implementation,
- Address discriminatory and punitive laws and policies, and establish systems that overcome stigma, discrimination and other structural barriers to access,
- Promote regular dialogues with government bodies on ensuring favorable legal and regulatory environment for CLM implementation.