Community Action, Sexual Health & Human Rights: The Global Forum On MSM & HIV’s Strategic Plan 2016-2021

ACKNOWLEDGEMENTS

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Who We Are

The Global Forum on MSM & HIV (MSMGF) was founded in 2006 at the Toronto International AIDS Conference by an international group of activists concerned about the disproportionate HIV disease burden being shouldered by gay, bisexual and other men who have sex with men worldwide. The silence at that time about the toll HIV was taking on gay, bisexual and other men who have sex with men was deeply troubling to many community members and advocates working at the frontlines.

Our coalition includes a wide range of people, including HIV-positive and HIV-negative gay men directly affected by the HIV epidemic, and other experts in health, human rights, research, and policy work. What we share is our willingness to step forward and to act to address the lack of HIV responses targeted at gay, bisexual and other men who have sex with men, to end AIDS, and to promote health and rights for all. We also share a particular concern for the health and rights of gay, bisexual and other men who have sex with men who: are living with HIV; are young; are from low and middle income countries; are poor; are migrant; belong to racial/ethnic minority or indigenous communities; are sex workers; use drugs; and/or identify as transgender.

The Changing Landscape

Over the past 10 years, MSMGF has worked closely with partners around the world to develop a suite of advocacy and capacity building programs designed to address a range of interrelated health and human rights challenges faced globally by gay and bisexual men and other men who have sex with men. In fact, MSMGF now finds itself in an increasingly crowded field where a range of players are engaging in work on behalf of men who have sex with men and claiming expertise.

In 2016, the HIV global landscape is in the midst of dramatic changes. This includes but is not limited to:

- Unabated (and in many instances worsening) STI and HIV incidence among gay and bisexual men and other men who have sex with men;
- Reductions in HIV funding and gross disparities of funding directed to community—based programs led by or serving gay and bisexual men;
- Integration of HIV within a broader global health or sexual and reproductive health agenda;
- Criminalization and persistent (and in many instances worsening) stigma, discrimination, violence directed at gay and bisexual men and other men who have sex with men, undermining the HIV response;
- Convincing evidence of the health and prevention potential of antiretroviral medication;
- The increasing bio—medicalization of the HIV response;

“We can imagine 2040 as a time when (some) societies freely adopt the terms lesbian, gay, bisexual, transgender, two-spirited, queer, etc. and respect other culturally-specific terms people use affirmatively to refer to their sexual orientation or gender identity. By the year 2040, clinically or behaviourally labeling terms like ‘MSM’ will likely be antiquated and obsolete.”
This new Strategic Plan outlines how MSMGF proposes to position itself within this context over the next five years (2016-2021). It is grounded in the understanding and insight gained through the series of activities described below, including a scenario planning exercise that allowed MSMGF to explore how it might direct itself over an even longer timeline. As such, although this Strategic Plan articulates the focus for MSMGF over the next five years, the strategic directions were developed with a view towards longer-term impact.

Beyond the Limitations of Our Current Terminology

Allow us to take a brief moment for a critical reflection on terminology. We are MSMGF—the Global Forum on MSM and HIV. Typically, in a document such as this strategic plan, we would include a section that defines what we mean by terms like ‘MSM’ (gay and bisexual men and other men who have sex with men).

However, our strategic plan comes at a time of extraordinary flux in our field. This presents us with an important opportunity to expand our thinking. Instead of seeing our name and our mission as elements that bind us to a specific focus on HIV and that anchor us in today’s conceptions around language, we would like to propose a different approach.

We ask you to critically and deliberately interrogate terms like MSM. We believe it may be time to liberate our thinking from the ways that terms like MSM limit or constrain us from what might be possible in the global HIV response. Instead, we might imagine agendas that reflect the full range of human sexual and gender expression and to actively reject language and strategies that (intentionally or unintentionally) confine, typecast, stereotype, restrict, omit, and/or render gay and bisexual men and other men who have sex with men invisible. Increasingly, stakeholders are actively engaged in critical reflection: how has the term ‘MSM’ served us in light of the unabated HIV epidemic around the world? This is not merely an exercise in wordsmithing, nor is it just semantics. We are engaged in and will continue to promote an evolution in the underlying conceptions we have built for decades around ‘MSM’ and HIV—a shift in semiotics, happening in real time.

In that vein, our strategic plan is best understood when it is read with the companion document we published in 2015, *A Fundamental Shift: The Future of the Global MSM and HIV Movement*. While this strategic plan outlines our priority directions for the next five years, it is merely a springboard towards an even bolder and more innovative future. In this document, we use the term ‘gay and bisexual men and other men who have sex with men’ as a strategy for: 1) rejecting the ways that acronyms like ‘MSM’ constrain the HIV response; and 2) drawing specific attention to the needs of our communities.
The Path to our Strategic Directions

In order to develop its new Strategic Plan (2016-2021), MSMGF undertook a comprehensive and iterative consultation process with MSMGF members, partners, Board members and staff. We gathered evidence through a series of activities conducted between early 2015 and early 2016, including:

- A review of relevant documents relating to the global development and HIV/AIDS contexts, including strategic plans of key partner agencies and donor organizations, and international papers and reports;

- A review of relevant internal documents relating to the MSMGF’s mandate and activities, (previous strategic plan, funding proposals and reports, and key project documents), as well as findings from a communications firm’s stakeholder survey regarding MSMGF’s perceived branding (2014);

- Findings from an online survey completed by over 50 MSMGF stakeholders; and

- Input gathered during an in-person consultation meeting with 50 MSMGF partners in May 2015.

These activities were conducted not only as part of the strategic planning process, but also as part of a complementary scenario planning process that led to the development of a Foresight Document called *A Fundamental Shift: The Future of the Global MSM and HIV Movement*. Scenario planning is a technique used for medium to long-term strategic analysis and planning. Scenarios are stories or narratives set in the future that describe how the world might look many years from now (in this case, 25 years). They explore how the world would change if certain trends were to strengthen or diminish, or if various events were to occur. As such, the Foresight Document provided MSMGF with tools to recognize where we are heading, and to recognize that decisions taken today will have significant effects on the reality of the global HIV movements in 2040.

Through a detailed analysis of the data collected through the activities listed above, we also developed a SWOT analysis. The SWOT analysis, summarized in the section below, highlights areas in which the MSMGF has a niche, where it is seen to be a strong leader, to have added value as a leader, and identifies the issues and approaches which present promising new areas of work for the MSMGF. The SWOT analysis also helped to identify areas in which the MSMGF needs to develop further, and challenges in the global context that may limit its successes.

We also conducted a “headline exercise” with MSMGF staff and board members, asking them to envision the key contributions of the MSMGF five years down the road.

To develop proposed strategic directions, we combined the insight gained from the scenario planning exercise (as articulated in the Foresight Document) with the understanding of the internal and external contexts facing the MSMGF over the next five years (from the SWOT Analysis), and the results from the headline exercise. Below we provide a brief description of these three activities.

Finally, a Theory of Change model was developed to articulate how MSMGF will achieve its results; it provides an easily understood visual representation of the Strategic Plan.
Strategic Directions

For the years 2016-2021, the following three Strategic Directions will guide the work of the MSMGF.

I. Forging the way: Nurturing and mobilizing leadership for community action on HIV, sexual health and human rights

MSMGF started as a voice for gay, bisexual and other men who have sex with men, a community disproportionately affected by HIV. It has now grown into a global leader and advocate for communities of gay and bisexual men and other men who have sex with men, and allied networks working to promote health and human rights. MSMGF’s work is deeply rooted in the communities it represents and this symbiotic relationship will continue to be a critical factor in its work. MSMGF will continue to work hard at local, regional and global levels to identify, nurture and support strong leadership among gay and bisexual men and other men who have sex with men. MSMGF particularly aims to support community mobilization efforts of youth and transgender leaders, and in areas of sexual health and human rights. MSMGF will work to ensure community action that is strong and aligned across key populations, and that gay and bisexual men and other men who have sex with men and other key populations participate equally and fully in economic, social, cultural and political institutions. To achieve this, MSMGF will conduct crosscutting analysis, facilitate linkages to communities and partners from other social justice movements, and support capacity building and mentorship.
How we will achieve this:

- Defend space for meaningful engagement of civil society representing gay, bisexual and other men who have sex with men;
- Develop, support and invest in leadership among youth and transgender people;
- Build capacity of, and opportunities for, communities to engage in the HIV movement and other critical social justice and health movements including those that promote and protect human rights, including the right to health;
- Support community mobilization efforts by providing information for advocacy and skills building;
- Lead customizable international campaigns against criminalization and promote awareness for the sexual health and HIV-related needs of gay and bisexual men;
- Coordinate the Consortium of MSM and Transgender Networks by providing technical support, opportunities for peer-to-peer exchange, and linkages to policy makers; and
- Facilitate expanded funding opportunities (e.g., Global Fund) to support community-led sexual health and social service programs.

Our expected results:

- Increased role of civil society representing gay and bisexual and other men who have sex with men in policy analysis and decision making at local, regional and global levels;
- Increased engagement of youth and transgender leaders in developing programs and policies around sexual health, social inclusion, and human rights;
- Increased community participation in networks, events and initiatives focused on their sexual health, social inclusion and human rights; and
- Improved funding resources available for community-led sexual health, service, and human rights-related programs.

How we will know that we achieved intended results:

- Community members will be represented and will meaningfully contribute to changes in policies, norms and practices in accountability systems and bodies;
- Youth and transgender leaders will have increased their interest and involvement in and commitment to sexual health and social inclusion issues;
- Higher level of community influence and participation in local health services;
- Policy makers and donors will maintain their commitment to HIV and sexual health responses among men who have sex with men and key populations.
- Great solidarity among key population networks and allies, including the formation of new alliances working towards sexual health, social inclusion and human rights.
2. Breaking barriers: Promoting equitable access to comprehensive and holistic HIV and sexual health services for gay and bisexual men and other men who have sex with men

MSMGF has played a significant role in providing reliable and key information to promote equitable access to comprehensive HIV services. This has more recently expanded to broader sexual health services. But many social-structural barriers still remain for gay and bisexual men and other men who have sex with men to access the comprehensive services that are needed to reduce their burden of HIV. The most damaging of these barriers are stigma, discrimination, and violence against sexual minorities, and criminalization of same sex practices. MSMGF will work through research, analysis, and advocacy to ensure availability of and access to comprehensive prevention, care, treatment, and support services that are tailored to meet the specific sexual and holistic health needs of gay and bisexual men and other men who have sex with men. Specifically relating to HIV, the MSMGF will also help to ensure that gay and bisexual men and other men who have sex with men have equitable access to effective treatment and biomedical prevention tools, and are linked to, and remain engaged in, the prevention, treatment and care cascade. MSMGF will also work with its partners to ensure access to services that address the social determinants of health, including employment, housing, education, substance use, mental health and other health services.
**How we will achieve this:**

- Provide guidance on developing and delivering prevention, care, treatment and support services for gay, bisexual and other men who have sex with men;
- Advocate for equitable access to biomedical prevention, treatment and care tools and services;
- Support community groups at the national level who are working to break down barriers, thereby creating spaces for community organizing, problem solving, and mutual support;
- Conduct analysis and advocacy around retention of gay and bisexual men and other men who have sex with men in the prevention, care and treatment cascade;
- Promote research and advocacy around access to services addressing social determinants of health for gay and bisexual men and other men who have sex with men.

**Our expected results:**

- Dissemination of evidence-based research and information on comprehensive prevention, care, treatment and support for gay and bisexual men and other men who have sex with men, and other key populations;
- Increased advocacy for access to biomedical prevention, treatment and care, tools and services, especially in contexts where stigma, discrimination, violence, and criminalization are pervasive; and
- Links between HIV and sexual health services to other services addressing the social determinants of health.

**How we will know that we achieved intended results:**

- Increased knowledge of evidence-based research and best-practices around prevention, treatment and care among policy makers, service providers, funders, gay and bisexual men, and other key populations;
- Documented advocacy efforts for unobstructed access to prevention, treatment, care and support for HIV and sexual health services;
- Improved policies that result in more men who have sex with men and other key populations knowing their HIV status, receiving affordable medicines essential to treating and prevention HIV, and having supportive friends, family members, providers, and politicians who will champion their health and rights; and
- Strategic partnerships and collaborations that link HIV and sexual health services to other social determinants.
3. Leading together on human rights: Gay and bisexual men and other men who have sex with men working in broad based coalitions towards social justice

Human rights are inherent and should remain central to the global HIV response. While progress has been made in some contexts, there is regression in others and the struggle towards social justice continues. MSMGF – in coalition with its stakeholders, partners, and allies from the LGBT, sex worker, people who use drugs, and women’s communities– will work towards greater inclusion through laws and environments that are respectful of the human rights. This focus on addressing structural and systemic inequities includes working through research, analysis, and advocacy to decriminalize same-sex behaviours, sex work, drug use, gender non-conformity, and HIV transmission, exposure, and non-disclosure. At the core of its work, MSMGF will positively affirm sex, pleasure, and sexuality as central to sexual health programs and strategies for mitigating the detrimental effects of HIV. MSMGF will also continue to promote the basic principles of self-determination and bodily integrity. Stigma, discrimination, violence, and criminalization have no place in the global HIV response.

How we will achieve this:

- Lead and support global, regional and national advocacy through broader based coalitions of LGBT communities and other key populations;
- Conduct research and policy analysis on legal and structural barriers and enablers, and share information with advocates;
- Represent communities of gay and bisexual men and other men who have sex with men and social justice issues at relevant global fora; and
- Facilitate expanded funding opportunities and funding support to community-led advocacy initiatives associated with human rights and social justice issues.

Our expected results:

- Increased cross-sectoral collaborations to contribute to improved social justice;
- Improved evidence-based research and advocacy to support harm-reduction and protective legal reforms;
- Sustained and renewed energy on human rights issues affecting LGBT communities at the national, regional and global levels; and
- Improved funding resources available for advocacy on human rights and social justice.

How we will know that we achieved intended results:

- Collective actions that contribute to improving human rights in policy decisions affecting LGBT communities;
- Decriminalization of same-sex behaviours, sex work, drug use, gender non-conformity, HIV transmission, exposure, and non-disclosure;
- Protective laws in place to guarantee basic human rights, including the right to health;
- Reduced stigma, discrimination, and violence targeted to gay and bisexual men and other men who have sex with men, cis gender and transgender women, sex workers, people who use drugs, and people living with HIV; and
- Human rights and social justice reflected in programming and supported by donors.
MSMGF is an expanding global network of advocates working to ensure an effective response to the sexual health and human rights needs of gay and bisexual men and other men who have sex with men. The following diagram illustrates how MSMGF works in a crosscutting way with the community at a grassroots level, supporting program and service delivery, while also addressing structural and systemic issues. All of the components are interlinked through various key actions (detailed above) that make progress towards the desired outcomes. Key actions and their intended effects are depicted as ripples that begin with the community (MSMGF’s core). Actions at the grassroots civil society level extend outward in ever-progressing and amplified waves toward social change.
A Time for Critical Self-Reflection

MSMGF sees the next five years as an opportunity to examine its own place and role in the evolving global context. MSMGF is turning 10 years old in the same year that this Strategic Plan is released. It has always been a versatile organization that has been and continues to be responsive to the needs for advocacy from the grassroots to the transnational levels. It has experienced great successes as a global network, raising the profile of human rights and the perspectives of gay and bisexual men and other men who have sex with men in policy making, funding decisions, and program development.

HIV is and has been a catalyst. It is a lens through which many diverse networks of people come together, find common cause, and engage in work on a broad range of science, health and human rights-related issues. In our work, HIV has been the fulcrum in the lever, the hub in the wheel, the grit of sand that becomes a pearl in the oyster. But MSMGF also recognizes that there continues to exist deep disparities in the well-being of gay and bisexual men and other men who have sex with men across the globe, and that an HIV-specific focus and response has limitations.

The extensive consultative process we undertook has led us to the three strategic directions outlined in this Strategic Plan. MSMGF is committed to moving forward on the three strategic directions detailed above and see them as a springboard into the future, beyond their stated five-year time horizon.

In response to the changing nature of the HIV sector and the expected challenges ahead, MSMGF began to change its organizational and governance structure. Over the past year, we:

- Became a legally registered and independent agency;
- Appointed a Board of Directors with legal and fiduciary custodial responsibilities;
- Reconstituted our International Steering Committee by integrating our 9-member youth reference group into its membership and by inviting the Consortium of MSM and Transgender Networks to appoint 5 members;
- Reaffirmed the strategic advisory role of our International Steering Committee by enshrining it into the agency’s by-laws and by authorizing it to appoint Board members;
- Strengthened the agency’s communications approach by amplifying MSMGF’s presence on social media;
- Created a Director of Finance and Operations position, the agency’s first;
- Increased our advocacy efforts by linking more activists working in their respective countries and regions to international policy-making processes; and
- Expanded technical support programs focused on ensuring accessible, stigma-free, evidence-informed, and rights-based HIV services for gay and bisexual men.

MSMGF is now the only constituency-led global network promoting the sexual health and human rights of gay and bisexual men worldwide. Young gay and bisexual men (no older than 29), and gay and bisexual men living with HIV representing all regions of the world, make up the majority (greater than 60%) of MSMGF’s governance bodies and senior leadership positions.
We will continue to align our organizational structure with the strategic directions contained within this document, in close consultation with our partners. As such, we recognize that there are some important questions with which MSMGF must now grapple at this critical juncture. These questions are grounded in the consultative process we undertook to develop our strategic plan, including the scenario planning process. Others in the movement may want to consider them as well. Such questions include:

- How can MSMGF help to re-center sex and sexuality in the response to HIV and STIs?
- What more can MSMGF do to elevate grassroots community perspectives and community-led responses?
- How can MSMGF focus more on the social and cultural determinants of health vulnerability and inequity experienced by gay and bisexual men and other men who have sex with men?
- How can we model the best blending of biomedical, socio-behavioural, and structural approaches to HIV and STI prevention?
- How can we build more solidarity with other key populations?
- What is the best way to remain a global network while also directing the bulk of our efforts to regions and countries of the world with the greatest need?

These challenging questions will drive ongoing discussions about MSMGF’s governance model, corporate structure, and organizational identity as we work to fulfill our agency’s mandate. This process of critical self-reflection will ensure we can achieve the strategic directions we have articulated in this Strategic Plan, and to which we are committed, just as we are committed to continuing to serve and shape the evolving HIV and gay men’s health movements.
APPENDIX: Strategic planning consultation process

Foresight Document

To conduct the scenario planning exercise that led to the Foresight Document, MSMGF adopted a two-axis method for envisioning the future. The method generated four contrasting scenarios by placing a major factor influencing the future on each axis, which cross to form four quadrants. We chose a horizontal axis that juxtaposes two ways to focus action, with (Sexual) Health on one end and Social Solidarity on the other end. On the vertical axis, we juxtapose structural/systemic actions on one end, and services/program on the other. The next page features a grid summarizing the four scenarios created by intersecting these axes.

When we cross-referenced our proposed strategic directions (described below) with the four scenarios from A Fundamental Shift, it became apparent that the work of the MSMGF would span all four scenarios, combining efforts focused on sexual health and social solidarity, as well as actions at structural/systemic and services/program levels.

Scenario 1: The Thin Edge of the Wedge
In 2040, the focus of the global LGBT and HIV movement is at the intersection of structural and/or systemic interventions to address health. Priority is given to: improving the overall laws, policies, systems and social norms that are needed to promote the health of LGBT people; removing policy and social barriers to accessing services that address sexual health, co-infections, mental health, substance use and addictions among marginalized populations; LGBT people and their allies recognize that health (and sexual health, in particular) is only one element of disparity that they experience in many societies, but health is seen as an issue that can act as the thin edge of the wedge for cracking open broader discussion and action in other domains such as education and employment. Addressing health disparities is a politically powerful and more socially palatable way to address these overarching structural inequities experienced by LGBT communities.

Scenario 2: Pride Without Prejudice
In 2040, the strategy adopted by the global LGBT movement is much broader than addressing the direct and immediate factors that put these communities at risk of HIV— their increased biological vulnerabilities to infection. Instead, the movement is focused on three inter-related goals and strategies. First, addressing structural and systemic inequalities faced by LGBT communities by promoting their human rights and protective legislation and policies. Second, influencing social attitudes toward LGBT communities within political, religious, socio-cultural and government institutions as a step to achieve the previous goal. Third, participating in a broad-based coalition of social justice movements working on mutually supportive and complementary agendas. The focus is on the removal of the structural and systemic barriers that impede access, and the implementation of legislation and policies that protect the rights of, and prohibit discrimination against, LGBT communities. The goal truly is Pride without Prejudice.

Scenario 3: Activist Camp
In 2040, the focus of the global LGBT and HIV movements has shifted to the development of programs and services that promote and support social solidarity. It is believed that the HIV burden among gay men and transgender women can be alleviated by: recognizing and valuing diversity; promoting women’s rights; working towards social justice and against social, economic, political and cultural disenfranchisement; and, promoting full and equal participation of these communities in economic, social, cultural and political institutions. In fact these have become goals in their own right, not just a means to address some of the health issues—including HIV and other infectious and chronic illnesses, mental health, drug use, smoking—that disproportionately affect LGBT communities. This combined provision of LGBT-centred training, capacity building, programs and services aimed at promoting social solidarity make many feel like they are part of an Activist Camp.

Scenario 4: Service with Pleasure
In 2040, the global LGBT and HIV movement focuses on developing and delivering services and programs that are tailored to address the specific sexual and holistic health needs of LGBT people. Service with Pleasure goes beyond HIV and sexual health to include mental health, addictions, substance use and other co-morbidities. Systemic and structural issues such as the social determinants of health are not directly addressed but rather left to other community groups and social justice movements to tackle. Service with Pleasure has espoused a model that is arguably closest to the typical response from 25 years ago—the community health centers, LGBT health centers, rainbow clinics, AIDS service organizations, and sexual health clinics that were common in 2015.
SWOT Analysis

We have conducted a thorough but focused assessment of MSMGF’s internal strengths and weaknesses, as well as external opportunities and threats (SWOT analysis), with a view to identifying appropriate strategic options for the 2016-2021 operational period. Below is a summary table of key findings from our SWOT analysis, with details of the SWOT analysis available upon request.

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<thead>
<tr>
<th>STRENGTHS</th>
<th>WEAKNESSES</th>
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<tbody>
<tr>
<td>◦ High-level policy engagement</td>
<td>◦ Perceived tensions between global south and north</td>
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<td>◦ High calibre staff with strong technical expertise</td>
<td>◦ Competing areas of focus</td>
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<tr>
<td>◦ Global leader in health issues among gay, bisexual and other men who have sex with men</td>
<td>◦ Expectations and needs far exceed current number of staff</td>
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<tr>
<td>◦ Advocacy</td>
<td></td>
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<tr>
<td>◦ Convener for civil society and community-based organizations</td>
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<tr>
<td>◦ Builds networks and coalitions</td>
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<td>◦ Communication &amp; knowledge exchange</td>
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<tr>
<td>◦ Fundraising and grant management</td>
<td></td>
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<tr>
<td>◦ Governance structure</td>
<td></td>
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<tr>
<td>◦ Relevance</td>
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<table>
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<tr>
<th>OPPORTUNITIES</th>
<th>THREATS</th>
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<tr>
<td>◦ Unique niche and relevance</td>
<td>◦ Persisting high HIV incidence and prevalence</td>
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<tr>
<td>◦ Holistic and comprehensive approach</td>
<td>◦ Increasing fundamentalism</td>
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<tr>
<td>◦ New Sustainable Development Goals on Health</td>
<td>◦ Homophobia, stigma, discrimination and violence</td>
</tr>
<tr>
<td>◦ Advancing human rights</td>
<td>◦ Criminalization of HIV and same-sex behaviours</td>
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<tr>
<td>◦ Networks, coalitions and partnerships</td>
<td>◦ Xenophobia / racism in among gay, bisexual and other men who have sex with men</td>
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<tr>
<td>◦ Focus on youth</td>
<td>◦ Syndemics</td>
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<tr>
<td>◦ Funding</td>
<td>◦ New Sustainable Development Goals on Health</td>
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<tr>
<td>◦ Promoting evidence-based practice and advocacy</td>
<td>◦ Erosion of funding, lack of political will</td>
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<tr>
<td>◦ Biomedical interventions</td>
<td>◦ Decentering of community as integral to address-</td>
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<tr>
<td>◦ Information &amp; communications technologies</td>
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<td></td>
<td>◦ Increasingly crowded field</td>
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<tr>
<td></td>
<td>◦ Imbalance between treatment and prevention</td>
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<td></td>
<td>◦ Fragmentation within LGBT community</td>
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<tr>
<td></td>
<td>◦ Erosion of community engagement and shrinking civil society space</td>
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<tr>
<td></td>
<td>◦ Aging population</td>
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Headline exercise

We used a “headline exercise” with MSMGF staff and board members as one means to generate ideas for strategic directions. We asked: “It’s September 10, 2020, and you wake up for your morning coffee and scan the top news stories of the day. Much to your delight, there’s a story highlighting MSMGF’s greatest accomplishment. What does the headline say?” Here are some of the headlines that helped to articulate a vision for key MSMGF contributions over the next five years.

- MSMGF’s High Level Advocacy for gay, bisexual and other men who have sex with men Integral to Global HIV Suppression Goals
- A recent MSMGF survey shows that more than 80 % of gay, bisexual and other men who have sex with men all around the world have now access to HIV care, treatment and support
- Gay-led Community-Centered HIV responses eliminate HIV
- MSMGF awarded 100 million to support scale-up of sexual health programs for gay men in 20 countries
- MSMGF incites socialist revolution!
- MSMGF advocacy leads to reduced sexual stigma, decriminalization of homosexuality, and increased sexual health and well-being

The headlines highlighted the importance of some of the following themes:

- Reducing or eliminating HIV among gay and bisexual men and other men who have sex with men;
- Addressing HIV, as well as broader sexual health, in addition to criminalization, stigma, discrimination, and violence;
- Improving access to services, commodities, and interventions;
- Ensuring programs and services specifically targeted to gay and bisexual men and other men who have sex with men;
- Advocacy;
- Community mobilization; and
- Funding.
MSMGF (The Global Forum on MSM & HIV) has worked since 2006 to encourage targeted, better resourced, and rights-based sexual health services for gay and bisexual men and other men who have sex with men worldwide through its advocacy and technical support work. As a global network, MSMGF has successfully influenced HIV responses at the local level through shifts in global-level policies and has effectively utilized public health as an entry point for advancing the human rights of LGBT people. MSMGF currently supports programs in 31 countries.