

**STRATEGIC PLAN
OF THE COALITION SEXUAL AND
HEALTH RIGHTS OF
MARGINALIZED COMMUNITIES
– COALITION “MARGINS”**

2019-2022

Bitola, October 2018

The Strategic Plan was developed during a workshop held from 15-16 October, 2018, in Bitola, with the participation of representatives from all members of the Coalition Margins, representatives from the targeted communities and from the partner organizations.

On the basis of Article 24 of the Coalition Statute, the Coalition Board adopted the Strategic Plan during a session held on 17.10.2018 in Bitola.

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Abbreviations

BDE	Bureau for Development of Education
LPE	Law on Primary Education
LHSE	Law on High School Education
LPPD	Law on Prevention and Protection against Discrimination
PP	Public Prosecutor
CPD	Commission for Protection against Discrimination
LGBTIQ	Lesbian, Gay, Bisexual, Transgender (including transexual), Intersex and Queer People
PLHIV	People Living with HIV
MOI	Ministry of Interior
MOH	Ministry of Health
MOES	Ministry of Education and Science
MGC	Medical Gender Confirmation
LGR	Legal Gender Recognition
SXR	Sexual and Health Rights
SOGI	Sexual Orientation and Gender Identity

ABOUT THE COALITION

The Coalition Margins was founded in 2007 as a non-formal, joint platform and the result of the joint efforts of several organizations: HOPS - Healthy Options Project Skopje, HERA, IZBOR – Strumica and EGAL. Since 2011, the Coalition has been registered as an individual entity, i.e. civil society organization founded by: HOPS – Healthy Options Project Skopje, HERA, IZBOR – Strumica, EGAL and STAR-STAR. In 2017, the Coalition was joined by Stronger Together – Association for Support of People Living with HIV in Macedonia.

Current members of the Coalition are:

- HOPS – Healthy Options Project Skopje
- HERA
- IZBOR - Strumica
- EGAL
- STAR - STAR
- Stronger Together

The Coalition has its own Statute and is registered as a civil society organization in the Central Registry of Macedonia.

The Coalition Margins and its members work towards promotion of the rights of marginalized communities, with a focus on advocacy, strengthening the capacities of institutions and the communities for active participation in the decision making processes concerning the rights of LGBTIs, people who use drugs, people who live with HIV, sex workers and marginalized women.

CONTEXT

Macedonian society is a society of dominant traditional and patriarchal beliefs affecting the protection, recognition and respect of sexual and health rights of the marginalized communities. Marginalized communities such as LGTB/MSM, sex workers, people living with HIV/AIDS, people who use drugs and marginalized women continue to be subjected to discriminatory practices on many institutional levels and feel stigmatized by society. Furthermore, the general public is still not prepared to accept these groups as equal citizens in our society, while prejudices and stereotypes are deeply rooted. However, circumstances changed after the fall of the hybrid regime of the previous right-wing conservative government in 2017.

The current Macedonian government was formed by the socio-democrats. The Prespa Agreement and the Referendum divided the society, while Macedonian politics and society is once again fuelled by nationalism. However, contrary to the previous right-wing government, the socio-democrats share some of the values crucial to the Coalition. State institutions expressed interest and motivation to cooperate with the civil society regarding the rights of marginalized communities. The EU Integration processes are among the main priorities of the Government and we have perceived potential for advocacy for the rights of marginalized communities in such circumstances.

ASSESSMENT OF THE SITUATION

Marginalized communities (sex workers, LGBTI, people who use drugs and people living with HIV) are exposed to daily rights violations, discrimination and social exclusion resulting from the treatment of institutions which instead of protecting and promoting human rights often act as perpetrators of the violations. On the other hand, policies and laws fail to respond to the communities' needs, with a significant part of the essential issues concerning the communities lacking proper legal solution, and documents protecting human rights being poorly implemented by unsensitized and partisan institutions. Instead of serving as tools for promotion of human rights, the media, education and culture produce contents which sustain and strengthen exclusion and discriminatory values, narratives and practices against marginalized communities.

Sex workers in Macedonia are exposed to humiliation and violence and are ignored by family members, neighbours, clients, institutions, the media and the general population. Such treatment of society towards sex workers disrupts their economic power, and consequently increases the risk to their health and life. Sex workers live and work in an unsafe environment, reinforced partly by police officers treating them in an undignified and degrading manner. Instead of protecting them from violence, police officers often blackmail, abuse and harass sex workers. On the other hand, the social protection system fails to recognize the needs of sex workers and provide the necessary help and support, thus contributing to social exclusion.

People who use drugs face similar treatment by the police. Rights violations during police procedures such as frequent body searches, invitations to police stations and harassment, as well as the treatment of the "usual suspect" negatively influence the success rate of the already improper treatment programs, completely lacking the component of resocialization and psychological support. People who use drugs recreationally and/or due to medical reasons are exposed to criminalization as a result of arbitrary law implementation and unsuitable legal framework on drug use. People who use drugs face discrimination and limited access to the labour market, which additionally leads to social exclusion and impossibility for resocialization. Contrary to sex workers, the social protection system somewhat recognizes people who use drugs, however, the existing services and rights fail to correspond to their needs. Addiction treatment centres function with minimum capacities, with the focus exclusively on administration of substitution therapies, while the rest of the public health has negative attitudes and excludes people who use drugs, frequently even denying them health services.

One of the basic problems people living with HIV face are prejudices and stigmatization from the general population, health system and other institutions. HIV is still represented as the "deadly virus", followed by stigma and prejudices against gay men. Although the Ministry of Health agreed to finance the HIV prevention program, still the issue of sustainability is not solved, while these people's needs prescribe new and additional services for prevention and protection of the PLHIV's rights and other key communities.

Stigma and prejudices towards LGBTI people present among the public, media and education further lead to sustaining the homophobia and transphobia. In a research on the population's views regarding how LGBTI people are represented by the media, 64% of the respondents stated that they very much object to intimate scenes between two men. The police and the

public prosecutor's office fail to act properly in cases of hate crimes on the basis of sexual orientation and gender identity, thus motivating perpetrators instead of prosecuting them. Social protection and protection from violence, sexual and reproductive rights, the right to privacy and family life are just part of the problems yet to be solved with advocacy for changes in policies and laws.

Transsexual people face legal insecurity due to the lack of legal framework for legal gender recognition, while institutions make arbitrary decisions which directly influence their life and health. Inaccessibility and non-availability of services for medical gender confirmation, ignorance and prejudices of health workers are among the key problems. Transsexual women sex workers are the most exposed to exclusion, violence and discrimination, and consequently 85% of the documented cases of rights violations of sex workers in 2017 were documented by transsexual women sex workers.

Peer violence and bullying based on gender and sexual orientation in schools, the lack of mechanisms and skills for dealing with such situations, outdated and irrelevant textbook contents which instead of promoting diversity promote hate towards marginalized communities, the lack of evidence-based sexual education, are just some of the problems leading to exclusion and violations of the rights of LGBTI people and other marginalized groups.

The protection and prevention of discrimination system is still non-functional, joined by poor capacities and sensitization of bodies for equality. The new legal solution for prevention and protection against discrimination significantly improves the institutional and legal framework, however the law is yet to be adopted by the Assembly and further be implemented.

VISION

The Coalition Margins promotes a world with equal people, without discrimination, a world where everyone can enjoy the universal human rights and where respect of diversity and the right to choice and social justice are the basic principles of a democratic and free society.

MISSION

The Coalition Margins promotes protection and respect of the human rights of marginalized communities, with a focus on LGBTI people, people who use drugs, people living with HIV, sex workers and marginalized women. The Coalition acts through advocacy, research and analysis, substantial inclusion of marginalized communities in the creation and implementation of policies, education of all relevant actors, promotion of the cultural practices of the marginalized communities, as well as networking and building alliances with the civil society.

GOALS

The Coalition's long-term goals, established with the Statute, are:

1. Promotion of the health and well-being by providing availability and improvement of access to quality health, social and legal services;
2. Promotion of human rights and protection against discrimination through advocacy and promotion of laws, policies and practices;

3. Establishing a supportive environment, where equality, freedom and respect of sexual differences are core values;
4. Stronger participation and activity of marginalized communities in the struggle for application of their rights and freedoms;
5. Improving the organizational effectiveness and transparency of the Coalition Margins.

KEY ACTIVITIES

- Advocating for policies, laws and practices that will provide fair and equal treatment of marginalized communities;
- Promoting inclusion and full participation of marginalized communities in the creation and implementation of policies and services affecting their health and rights;
- Educating the concerned marginalized communities, government representatives, service providers, collaborators and the general public regarding the health requirements and rights of marginalized communities;
- Developing/inclusion/networking with associated organizations in order to provide exchange of knowledge, assuming joint actions and providing application of good practices for promotion of the health and rights of marginalized communities;
- Developing strategies for providing finances from potential donors, government institutions etc.
- Public sensitization campaigns on the rights of marginalized communities;
- Promotion of Anti-Discrimination Law in the context of marginalized communities;
- Debating and discussing about sexual and health rights of marginalized communities;
- Creating a reference network of doctors and lawyers, sensitized to marginalized communities;
- Developing skills with representatives of public institutions (in the field of health, social services etc.) and state bodies (ministries, parliament, local self-government units);
- Instigating court cases for exercising the rights of marginalized communities and providing legal assistance;
- Advocating for establishing specialized (free, quality, voluntary, confidential) services for sex and reproductive health within the frames of the health protection system;
- Introducing sexual health as a school subject;
- Establishing positive legal environment for prevention of discrimination against marginalized communities;
- Promotion of a Law on Anti-Discrimination in the context of marginalized communities;
- Advocating for amendments to the Law on Anti-Discrimination in the context of marginalized communities;
- Advocating for development of national policies;
- Establishing collaboration and partnership with the Ombudsman and the Public Prosecutor;
- Working with the Commissions for Protection of Patients' Rights in the municipalities;
- Documenting violation cases of sexual and health rights of marginalized communities, writing and issuing reports on the state with the sexual and health rights of marginalized communities;
- Informing marginalized communities on their rights;
- Active participation of marginalized communities in the Coalition's activities;
- Organizing activities for community reinforcement;

- Motivating marginalized communities to report/instigate cases;
- Organizing activities for raising the political awareness of marginalized communities.

BELIEFS

- The Coalition believes that respect of diversity and the right to choice are the fundamental principles of a healthy, tolerant and free society;
- The Coalition recognizes in full the needs and requirements of marginalized communities regarding their health, sexuality and freedom to choose their life style and habits, and promotes the application of these rights;
- The Coalition believes that enjoying the sexual and health rights and freedoms of marginalized communities can be implemented in its full solely by active participation and mobilization of representatives of marginalized communities and partnership with all relevant factors in society;
- The Coalition is a democratic network of civil society organizations, based on the principle of equality, horizontal and collaborative actions and decision-making based on principles grounded on the framework of human rights;
- The Coalition promotes comprehensive understanding of sexuality, including emotional, psychological, social and cultural factors in its planning and distribution of services;
- The Coalition promotes actions based on an integral approach in advocating for human rights and solidarity with all social movements for justice and equality of all people, regardless of their identity, status, characteristics and differences.

TARGET GROUPS

- The general population
- Decision-makers
- Representatives of public and state institutions on a local and central level
- The youth
- The international community
- Marginalized communities

BENEFICIARIES

- LGBTIQ and MSMS (man who have sex with men)
- Sex workers
- People who use drugs
- People Living with HIV/AIDS
- Marginalized women
- Members of the Coalition

PARTNERSHIP AND COOPERATION

The Coalition has established cooperation and partnership with the:

- Ministry of Health
- Ministry of Education and Science
- Ministry of Labour and Social Policy

- Ministry of Justice
- Ministry of Culture
- Assembly of the Republic of Macedonia
- Ombudsman
- Commission for Prevention and Protection against Discrimination
- Agency for Audio and Audio-Visual Media Services
- Public institutions which provide health, social and legal services
- Higher-education institutions
- Electronic and printed media
- Civil sector
- European Commission
- Council of Europe
- International organizations and networks
- Donors

MEDIUM-TERM GOALS

The Coalition determined the following medium-term goals for the 2019-2022 period:

- 1. Improving the treatment of marginalized communities by the institutions;**
- 2. Promoting a national framework of policies and laws by including the interests and needs of marginalized communities;**
- 3. Introducing non-stigmatizing representations and science-based information and knowledge on marginalized communities in the public sphere;**
- 4. Strengthening the Coalition’s capacities for strategic advocacy, public relations and financial sustainability.**

MEDIUM-TERM GOAL 1: Improving the treatment of marginalized communities by the institutions

Priorities

- 1.1. Advocacy for introduction of training programs in public institutions for working with marginalized communities.
- 1.2. Building the capacities of public institutions towards being sensitized on working with marginalized communities.
- 1.3. Monitoring the work of public institutions while working with marginalized communities and the work of protection mechanisms.
- 1.4. Mapping the allies in public institutions, establishing cooperation and frequent reports.
- 1.5. Strengthening the capacities of marginalized communities towards recognizing when their rights are being violated, documenting cases and reporting violations to competent institutions.

Indicators

- 10% increase (on average annually) of the number of cases initiated by the Coalition in which the competent institutions reached a positive decision (Ombudsman, Public Prosecutor, courts, inspectorates, MOI - SIC, Ombudsman, CPPD);
- A 20% decrease in the documented cases of physical violence from the police;

- Decrease in the percentage of documented cases of confidentiality breach and refusing health services in comparison to the total number of documented cases;
- A 100% increase in doctors in the public health working with transgender people and PLHIV (current value 9);
- 200 professionals from the Social Work Centre trained for working with marginalized communities;
- Introducing programs on continuous training of police officers in working with marginalized communities at the MOI Training Centre;
- Introducing a module on working with LGBTI people for social workers with the Office for Social Affairs;
- A 25% increase in the number of cases documented by the Coalition on average annually (starting value – average for 2015-2018)
- At least 20% of the cases documented by the Coalition were reported to the competent institutions (starting value – 2018)

MEDIUM-TERM GOAL 2: Promoting a national framework of policies and laws by including the interests and needs of marginalized communities

Priorities

- 2.1. Advocacy in the Assembly for the adoption of a new Law on Prevention and Protection against Discrimination and monitoring its implementation in partnership with the Network for Protection against Discrimination
- 2.2. Adopting a LGR model;
- 2.3. Amendments to the Law on Termination of Pregnancy pursuant the WHO standards;
- 2.4. Harmonization of current laws with the new LPPD (SOGI in all anti-discriminatory clauses)
- 2.5. Adopting amendments to the laws on media with provisions on prevention and protection from discrimination and hate speech;
- 2.6. Adopting policies against violence at schools;
- 2.7. Advocacy for amendments to the LPE and LHSE towards inclusion of the equality principle and protection against discrimination;
- 2.8. Adopting professional medical guidelines for regulating of the MGC process
- 2.9. Advocacy for civil partnership through strategic litigation
- 2.10. Decriminalization of drug possession for personal use
- 2.11. Advocacy for implementation of the Action Plan for Implementation of the Istanbul Convention
- 2.12. Incorporating the interests and needs of marginalized communities in the development of social inclusion policies pursuant EU standards and policies

Indicators

- Harmonized laws in the fields of education, health, media, judicial system, labour relations and social protection with the LPPD with the Coalition’s participation;
- Adopted LGR model on the basis of the self-determination principle;
- Adopted amendments to the laws regulating education with provisions on prevention and protection from discrimination;
- Adopted amendments to the Law on Media with provisions on prevention and protection from discrimination and hate speech;
- 10 high schools adopted policies for prevention and protection from gender-based violence;
- Adopted a Professional Medical Guidelines that contains the requests of the transsexual community;
- Adopted policy on decriminalization of drug possession for personal use among the police, public prosecutor and the courts.
- Adopted policies and laws from the Action Plan for Implementation of the Istanbul Convention

MEDIUM-TERM GOAL 3: Introduction of non-stigmatizing representations and science-based information and knowledge on marginalized communities in the public sphere

Priorities

- 3.1. Advocacy for revising and amending contents related to marginalized communities in textbooks and textbook aids;
- 3.2. Monitoring the situation and strengthening the cooperation with the media;
- 3.3. Strengthening the knowledge and capacities of schools on prevention and protection against gender-based violence;
- 3.4. Increasing the presence of subjects related to marginalized communities during teaching and in academic production of texts and researches;
- 3.5. Organizing cultural-artistic events with contents concerning marginalized communities.

Indicators

- Removed and changed the content in 5 textbooks on the basis of contemporary and science-based information;
- At least 2 successful court procedures for removing disputable textbook content;
- 8 lectures on human rights at state universities;
- 8 cultural – artistic events concerning and representing marginalized communities;
- Public cultural institutions initiated and realized 4 cultural – artistic events concerning and representing marginalized communities;
- A 20% increase on average annually in the non-stereotyping and positive media publications;
- Realized /broadcasted 5 debates on subjects concerning marginalized communities;
- 8 individual appearances on TV or other media by people from marginalized communities.

MEDIUM-TERM GOAL 4: Strengthening the Coalition’s capacities for strategic representation, public relations and financial sustainability.

Priorities

- 4.1. Promoting the capacities for analysis and advocacy for subjects and policies consistent with the Coalition’s strategic goals;
- 4.2. Introducing communication strategy/plan;
- 4.3. Strengthening the resources for strategic planning, budgeting and providing finances on a long-term basis.

Indicators

- Two new cases related to the realization of the strategic goals;
- Ratio of projects we have applied for and of projects we were granted finances for;
- Introduced practices and systems of measuring the Coalition’s communication.

IMPLEMENTATION OF THE STRATEGIC PLAN

Action Plan

The implementation of the Strategic Plan is elaborated in details in the 2019-2022 Action Plan on the Implementation of the Strategic Plan (appendix).

The Action Plans determines the activities to be implemented in order to realize the medium-term goals and priorities established with the Strategic Plan. The activities time framework corresponds to the determined implementation deadlines.

In addition, the Action Plan also determines the people responsible for specific activities, as well as the potential financing sources of the activities.

Monitoring the implementation of the Strategic and Action Plan

The implementation of the Strategic Plan is monitored in accordance with the completion of the determined indicators.

The indicators’ completion is monitored according to a previously determined indicator monitoring plan, which establishes the data collection method, verification sources, frequency of data collection, the persons/organizations in charge of the data collection and the manner of reporting.

Annually, the Coalition Board evaluates the implementation of the Strategic Plan and determines guidelines for its further implementation.

An internal, i.e. external evaluation of the Strategic Plan implementation is carried out.

The Coalition’s executive office prepares an overview of the Action Plan implementation every three months, which is then sent to the Board. The Board deliberates on the implementation and determines guidelines for its further implementation.

