

Report - The Global Fund Advocates Network Asia Pacific Meeting

Bangkok, Thailand, 9-10 April 2014

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Acronyms and Abbreviations

7 Sisters	Coalition of Asia Pacific Regional Networks on HIV/ AIDS
AFAO	Australian Federation of AIDS Organisations
AGM	Annual General Meeting
AIDS	Acquired Immunodeficiency Syndrome
ANPUD	Asian Network of People who Use Drugs
APCASO	Asia Pacific Coalition of AIDS Service Organisations
APCOM	Asia Pacific Coalition on Male Sexual Health
APN+	Asia Pacific Network of People Living with HIV
APNSW	Asia Pacific Network of Sex Workers
ASEAN	Association of Southeast Asia Nations
BRICS	Brazil, Russia, India, China, South Africa
CCM	Country Coordinating Mechanism
CLAC	Community Leadership Action Collaborative
CSO	Civil Society Organization
DFAT	Department of Foreign Affairs and Trade
FPM	Fund Portfolio Manager
FTT	Financial Transaction Tax
GAC	Grant Advisory Committee
GCTA	Global Coalition of TB Activists
GFAN	The Global Fund Advocates Network
GNP+	Global Network of People Living with HIV
HIV	Human Immunodeficiency Virus
HNWI	High Net Worth Individuals
IAC	International AIDS Conference
ICAAP	International Congress on AIDS in Asia and the Pacific
ICSS	International Civil Society Support
IEC	Information, Education and Communication
IGM	Intergovernmental Meeting
INPUD	International Network of People who Use Drugs
ITPC	International Treatment Preparedness Coalition
JCSAP	Joint Civil Society Action Plan
KAPs	Key Affected Populations
MDG	Millennium Development Goal
MDR/XDR-TB	Multidrug-resistance/ extensively drug-resistance tuberculosis
MSM	Men who have sex with men
NFM	New Funding Model
NGO	Non-Government Organization
NSWP	Global Network of Sex Workers Project
OIG	Office of Inspector General
OSF	Open Society Foundations
SAARC	South Asian Association for Regional Cooperation
SDG	Sustainable Development Goal
TA	Technical Assistance
TB	Tuberculosis
TRP	Technical Review Panel
UCC	UNAIDS Country Coordinator
UK	United Kingdom
UNAIDS	The Joint United Nations Programme on HIV/ AIDS
UNESCAP	United Nations Economic and Social Commission for Asia and the Pacific
UNSG	United Nations Secretary General
UQD	Unfunded Quality Demand
US	United States
WHO	World Health Organization

Executive Summary

The Global Fund Advocates Network (GFAN) and Communities Delegation held a two-days meeting from 9-10 April 2014 in Bangkok, Thailand. This meeting was supported and co-organised by the Asia Pacific Network of People Living with HIV (APN+) and the Coalition of Asia Pacific Regional Networks on HIV/AIDS (7 Sisters). The meeting was attended by a total of 27 people, including representatives of regional networks of Key Affected Populations (KAPs), Communities and Civil Society Delegations on the Board of the Global Fund, civil society organizations, and representatives from the Global Fund Secretariat.

The meeting's **objectives** were to:

- 1) Update community and civil society advocates in Asia Pacific on the New Funding Model and resource mobilization for the Global Fund, with emphasis on the past lessons and future directions for replenishment.
- 2) Update community and civil society advocates in Asia Pacific on key civil society initiatives related to advocacy on the Global Fund, with emphasis on the GFAN and Joint Civil Society Action Plan (JCSAP).
- 3) Develop a national/regional Action Plan for community and civil society advocates in Asia Pacific leading up to the 5th Replenishment of the Global Fund.
- 4) Identify a mechanism and the tools to mobilize, communicate and coordinate among community and civil society advocates in Asia Pacific to implement the Action Plan and work together in the future.

The meeting's **outputs** included: 1) a regional action plan for community and civil society advocates in Asia Pacific leading up to the 5th Replenishment of the Global Fund; and 2) an agreed mechanism and tools needed to mobilize, communicate and coordinate among community and civil society advocates in Asia Pacific to implement the action plan and work together in the future.

On the first day, meeting participants were updated on the New Funding Model (NFM), including lessons learned from the 4th Replenishment and future directions for replenishment, as well as the Unfunded Quality Demand (UQD), which is the funding gap between funded and unfunded interventions in the concept note. Meeting participants were also reminded on the importance of the provision of full expression of demand when countries submit their concept notes. Aside from updates on the changing funding landscape of the Global Fund, participants were also updated on civil society initiatives carried out by GFAN and JCSAP. On the second day of the meeting, meeting participants identified four key advocacy issues for replenishment in the Asia Pacific region, and specific actions and next steps. The four advocacy issues are:

1) **Financial Transaction Tax (FTT)**

The FTT is the taxation of the financial sector, which includes foreign exchange, stock market, etc. The FTT (or similar financial taxation) is not a stranger to the Asia Pacific region, and are in place in some countries in the region. The meeting agreed to advocate for some percentage of the FTT in selected countries to increase domestic health financing, through regional and global campaigns.

2) **Linking Access to Treatment with the Global Fund Campaigning**

Civil society groups that have been working on drug patent(s) are put in a difficult position when they have to advocate for the Global Fund replenishment. The United States is one of the biggest traditional donors to the Global Fund, and at the same time the 'target' of anti drug patent campaigns by civil societies. The meeting identified a campaign for uninterrupted treatment access as a way to link the issue of treatment access with the Global Fund campaigning. The small breakout group suggested naming the campaign "Three Zeroes Campaign" (Zero HIV, Zero TB, Zero Malaria), which focuses on raising awareness on the issues of interrupted treatment and existing threats to treatment access, such as through campaigns during international and regional events, and existing

platforms in the region, such as the Association of Southeast Asia Nations (ASEAN) Summit, parliamentarians meeting in India, etc.

3) Emerging and Traditional Donors

The Global Fund Secretariat is approaching countries with emerging economies in the region with the co-investment scheme, where countries contribute a certain amount of funding for another country without going through the Global Fund. Implementing countries need to raise more demand for co-investment, in order to attract other potential donor countries. Based on lessons learned from the experience of 4th replenishment, the meeting agreed that it is important to increase political leadership in championing for the Global Fund by identifying and engaging 'champions' among First Ladies, Heads of States, and current celebrity ambassadors for HIV/TB/malaria. The "Here I Am" campaign and other campaigns targeting parliamentarians as well as traditional and potential donors will be continued to increase the visibility of the Global Fund and how it has changed people's lives.

4) Domestic Financing

To be successful in the global HIV/ TB/ malaria response, we need to raise another US\$ 14 billion in domestic funding. In order to have a successful 5th replenishment, in the next three years we need to show impact and increase domestic funding. Because of this, there is a need to campaign for increased domestic health financing in the Asian Pacific countries. The meeting agreed to organize a domestic financing campaign in the region, by creating an enabling environment to help advocates at the country level to feel confident in their advocacy efforts (through capacity building programs, alliance building, etc), incorporate language on domestic spending in the outcome document of the High Level Meeting on HIV and AIDS on September 2014. The meeting also agreed to organize a campaign on domestic health financing, including by launching a satellite session on domestic health financing during the International AIDS Conference (IAC) on 20-25 July 2014.

The meeting established a working group to move the action plan forward. Ms. Rachel Ong volunteered to chair the working group until a coordinator is selected at the end of the year. 6 people volunteered as members of the working group: Mr. Laurindo Garcia, Ms. Rodelyn Marte, Ms. Malu Marin, Ms. Tracey Tully, Ms. Blessi Kumar and Ms. Ting Ting Shen.

The working group will work together through to the end of 2014, and will be responsible for:

- Facilitating information sharing and communications from global to regional level and vice versa;
- Developing a synergized workplan with specific timeline(s) from the discussions at the meeting and monitoring its progress;
- Identifying additional stakeholders and advocates to participate in the activities in the workplan; and
- Working with International Civil Society Support (ICSS) in developing a funding proposal for Gates Foundation.

Global Fund Advocates Network (GFAN) Asia Pacific Meeting
Bangkok, Thailand, 9 - 10 April 2014
Meeting Report

Day 1 – Wednesday, 9 April 2014

The first day of the meeting was focused on understanding the work of GFAN, learning from the efforts of GFAN and the Global Fund Secretariat on the 4th Replenishment, and understanding the changes in the Global Fund and how communities and civil society can move forward with the changing Global Fund funding landscape.

Introduction of Global Fund Advocates Network (GFAN)

Mr. Peter van Rooijen, as the Secretariat of GFAN, presented an introduction of GFAN, its vision and mission, activities and lessons learned from GFAN's experiences so far. GFAN builds on and brings together existing structures, expertise and experience in support of the Global Fund, working with advocates, activists and affected communities in the South and North, as well as Friends of the Fund organizations. **GFAN's mission** is to unite voices and efforts from all over the world to support a fully funded (and effective) Global Fund to fight AIDS, Tuberculosis and Malaria. Currently, GFAN is rethinking their mission. **GFAN's goal** is to build a global social movement to demand health for all by recruiting, connecting and mobilizing advocates to communicate the urgent need, and demand full funding for the Global Fund to Fight AIDS, Tuberculosis and Malaria to maximize its impact. GFAN's objectives are: 1) Support advocacy and resource mobilization; 2) Support action; and 3) Build the movement.

GFAN's activities include: 1) information sharing through bi-monthly calls (the Global Fund Secretariat always joins the calls to provide and receive the latest updates); 2) produced an "ask" and published "cost of inaction" report; 3) "Here I Am" campaign; and 4) videos, social media/ toolkits, 31 blogs on #TheBigPush in Huffington Post, etc.

Lessons learned:

- Working together is key - if we don't have a shared voice we are pitted against each other.
- More work needs to be done on social media (there is a different level of mastering social media in our work)
- More policy information sharing (there are more requests from advocates to learn about NFM)
- There is a need to develop country specific and disease specific materials
- We need to build a global social movement. The GFAN is but a small group now, and we need to mobilize the masses. Stronger campaigns in the region are needed to show impact and increased domestic health financing, in order to have a successful 5th Replenishment.

The "Here I Am" Campaign

- The "Here I Am" Campaign is one of GFAN's activities. Ambassadors of the Campaign travel to capitals of donor countries and met with parliaments, governments, to show them how their contributions have made a difference in people's lives.
- Many people, including beneficiaries of the Global Fund grants, are still not aware that funding for their programs comes from the Global Fund, not the government. The "Here I Am" Campaign has helped to raise people's awareness on Global Fund, and should be scaled up to make the Global Fund more visible in countries.
- Information sharing from regional networks to the "Here I Am" Campaign ambassadors should be strengthened through a closer and more systematic communication process to prepare ambassadors with talking points from the region whenever it is needed.

I. Learning From The Past: What Happened and 'What Worked' for the 4th Replenishment of the Global Fund?

This session provided meeting participants the opportunity to learn from the 4th Global Fund replenishment, which included an overview of strategies used by the Global Fund Secretariat in approaching the different donors, lessons learned - what has proven to work and what still needs to be improved upon, and steps for the next replenishment period. The session also reflected upon activities carried out at the global level by communities and civil society advocates in Africa, the Communities and Civil Society Delegations on the Board of the Global Fund, and in the Asia Pacific region.

I. 1. Overview of the Global Fund 4th Replenishment

Ms. Pauline Mazue, from the Global Fund Secretariat, explained that replenishment is a process that culminates in which donors pledge to an amount (initially for two years and then for another three years). Although it is not a pledge bound by treaty, donors respect their commitments 99% of the time. Unlike the first three replenishment processes, the strategy for the 4th replenishment used the four pillars plus support from the United Nations Secretary General (UNSG):

Traditional donors	Implementing countries	Emerging powers	Private sector/IF	UN Secretary-General
<ul style="list-style-type: none"> Strong support from US (President Obama, State Secretary Kerry) and UK (SoS Greening) Engage leaders, civil society, press to persuade donor governments to invest in the Global Fund. 	<ul style="list-style-type: none"> Strong support from African HoS Champions Advocate for the GF, highlight results & impact of programs and underscore increasing domestic contributions to the fight against HIV, TB and malaria. 	<ul style="list-style-type: none"> Encourage and facilitate their involvement and contributions through co-investment, technical assistance and services. 	<ul style="list-style-type: none"> Strong support from Bill Gates, and Bono Private sector as a long-standing and integral part of the GF, as advocates, suppliers, implementers of programs, as financiers and source of innovation. 	<ul style="list-style-type: none"> Support through keeping the fight against the 3 diseases on the agenda Reference to the GF in scheduled calls and meetings Letters to selected HoS highlighting the importance of the replenishment

Lessons learned from the 4th replenishment:

- US\$ 15 billion target is ambitious but not outrageous.
- Ask based on global need (rather than based on institutional needs), taking into account domestic and bilateral resources worked better.
- Main communication messages resonated: 1) replenishment key to defeating the three diseases; and 2) replenishment is complementary to increased domestic resources.
- Leveraging United States (US) pledge worked to increase pledges from some countries.
- Early announcement of United Kingdom (UK) pledge provide additional momentum
- Timing of replenishment in 2013 was advantageous ("honeymoon" period for reforms and the NFM)
- Lighter structure of pledging conference meetings were welcomed by most donors

Emerging Economies & Co-Investment

- Although the Global Fund has no earmarking policy for traditional donors, they can co-invest in a grant. Co-investment is a scheme in which countries contribute a certain amount of funding for another country without going through the Global Fund. This is one of the strategies that the Global Fund Secretariat is using to engage countries with emerging economies in the region. For example, China, has identified a list of countries that they want to invest in. Implementing countries need to raise more voices on the need for co-investment, to attract other potential donor countries.
- The meeting also discussed the Global Fund Secretariat approaching countries with a more stable economy in the region, such as Taiwan, Singapore, Malaysia and Brunei. The Global Fund Secretariat has not actively invested resources to mobilize funds from Taiwan, due to political circumstances. Singapore initially contributed US\$ 1 million over four years, but has not been interested to continue

their contribution. Malaysia has not really been focused on, while Brunei is categorized as an oil rich country, a member of Islamic countries organization rather than Asia Pacific region, which means that they are approached using a different, longer relationship building process.

Earmark Policy

- The Global Fund has a “no earmark” policy for traditional donors. However, since 2007, the Global Fund has established a policy in which private sectors can earmark their contributions to certain countries, such as a company in Japan who earmarked their contribution to Malaria program in Tanzania and Kenya. In light of the NFM, the Global Fund is also amending the policy of contributions from private sectors in countries with UQD, so that they can earmark their contribution for the UQD in that country. For example, the contribution from private sector in Vietnam can be earmarked for UQD in Vietnam. This amendment is still waiting for the Board’s approval.

Preparing for the 5th Replenishment

- The 5th Replenishment will cover funding needs for 2017-2020. Traditionally, the replenishment pledging conference is held at the end of the year, but with the NFM the conference will be held earlier. The Millennium Development Goal (MDG) Summit on September 2015 will provide a great platform to kick off the campaign for the 5th Replenishment.
- The strategy for the 5th Replenishment has not yet been designed; it will be developed in consultation with partners, and will take into account suggestions made in this meeting. Some initial steps that have been identified to prepare for the next replenishment are:
 - Continue advocacy to secure pledges and ensure pledge conversion into contribution.
 - Continue the “Here I Am” Campaign to bring more visibility to the Global Fund.
 - The Global Fund Secretariat is actively approaching other possible donors to maximize additional pledges to match US pledge (of matching 1:2) by September 2014, and UK pledge by the end of 2016.
 - Design a viable platform to engage emerging powers
 - Mobilization of High Net Worth Individuals (HNWI)
 - Next replenishment will be driven by two key factors: 1) decrease in new infections/ impact; and 2) increased domestic resources.

I.2. Civil Society Panel: Advocacy Strategies and Lessons from the 4th Replenishment of the Global Fund

I.2.1. Communities and Civil Society Delegations on the Board of the Global Fund

Meeting participants were introduced to the Communities and Civil Society Delegations on Board of the Global Fund: 1) The Communities Delegation (represented by Ms. Rachel Ong); 2) The Developed Country Non-Government Organization (NGO) Delegation (represented by Mr. Don Baxter); 3) The Developing Country NGO Delegation (represented by Ms. Ting Ting Shen).

The Communities Delegation brings the voices of their constituents to the Global Fund Board, and disseminates information from the Board and the Secretariat back to the community through various existing channels in the region. Much of the information shared with the constituencies/delegations is not to be disseminated broadly until the Board has made their final decisions. Different than the other two civil society delegations, the Communities Delegation is the only one without geographical boundaries. Members of the Communities Delegation are individuals living with HIV and/or affected by TB and Malaria. A lot of the work on replenishment mobilisation carried out by the Communities Delegation is complementary to GFAN. This includes selecting ambassadors for the “Here I Am” Campaign, trying to raise visibility for GFAN during International Congress on AIDS in Asia and the Pacific (ICAAP) and at the International AIDS Conferences, and writing statements to reach out to donors. A former Board Member of the Communities Delegation had an active blog site on Huffington Post, which was updated regularly. Last year, prior to the 7 Sisters’ Strategic Meeting in July, the Communities

Delegation organized a One-day meeting to engage regional networks on resource mobilization for the Global Fund and on the NFM.

The Developed Country NGO Delegation represents NGOs coming from developed countries such as from Europe, USA, Australia, and Japan. Most of the work carried out is focused on replenishment, carried out by members of the delegation with Friends of the Global Fund, as well as with decision makers and policy makers in the country. Within Australia, the Delegation members work closely with the Australian government to raise funding for communities and civil society initiatives, and supporting other countries in increasing their domestic resources.

The Developing Country NGO Delegation's members come from developing countries of Asia, Africa, Eastern Europe, and Latin America. Their replenishment strategy targets emerging economic members of G20 countries, which is 85% of the world's economy. The delegation organized campaigns for G20 leaders during G20 summits. Two HIV organizations were invited to the G20 Summit, and during the summit the delegation members publicly expressed concerns on the lacking resources for developing countries, and asked for more donations to the Global Fund. The delegation also urged the President of Russia to contribute more funding, and campaigned through posters and endorsement on Wall Street Journal asking China to increase their pledge to the Global Fund.

Rollout of the NFM has been a busy time for the Global Fund. The Communities and Civil Society Delegation on the Global Fund Board have been working hard to rebuild civil society expertise in the Global Fund, and at the same time build strategies on how to make the NFM work for civil society. Communities and civil society in the region should reach out to the Communities and Civil Society Delegation whenever they need information or need to raise an issue.

1.2.2. Lessons Learned from Civil Society Advocates in Africa

Because Africa has a more generalized epidemic, the advocacy landscape is quite different from that in the Asia Pacific region. The African Union also helps to provide a common platform for the African region, while the Asia Pacific region has various sub-regional mechanisms such as ASEAN, South Asian Association for Regional Cooperation (SAARC), etc.

Ms. Olive Mumba shared some lessons learned from experiences of civil society advocates in Africa. The African Civil Society platform was launched in 2009 to advocate for health financing, human rights, and strengthening the African civil society's voices. Building on existing platforms and networks and working closely with the Global Fund Secretariat and other international stakeholders, the group was able to push African Heads of States to declare in the outcome document support for a fully funded Global Fund and increased domestic funding allocations. The group felt a strong ownership of the "Here I Am" Campaign, raising awareness on how much the Global Fund means to its beneficiaries, who felt that they are alive today because of the Global Fund. From carrying out the "Here I Am" Campaign, they also learned how little people know about the source of funding for treatments they receive. Most of them thought that funding for treatment comes from the government.

Funding support for the group comes from GFAN, the African Union, and through utilizing existing opportunities that already has its source of funding. Working closely with the Global Fund Secretariat helped them in organizing themselves in a way that maximizes existing platforms. More investment is needed to improve the capacity of communities and civil society's to engage in the Country Coordinating Mechanism (CCM) and be a general watchdog for the government. In terms of community mobilization, more coordination and linkages need to be established with other countries.

1.2.3. Advocacy for the Global Fund Replenishment in Asia Pacific

Last year, on July 31st 2013, together with the Communities Delegation to the Board of the Global Fund, 7 Sisters held a One-day meeting that was attended by community and civil society organizations in the region. Ms. Malu Marin from 7 Sisters presented a summary of the meeting. The meeting introduced

NFM, and discussed the importance of resource mobilization and identified a sample of activities to be carried out in the region, which include: 1) Op-eds in major newspapers in India, Malaysia, and Thailand (link the issue of resource mobilization to campaign in keeping drug prices down); 2) Sending thank you letters to Japan as a major donor; 3) Community mobilization focusing on middle-income countries, working with community networks in 6 countries (Indonesia, China, South Korea, India, Malaysia, Brunei¹) target message is ensuring domestic co-financing as well as increasing their funds for the Global Fund). Unfortunately, there was no clear mechanism on how the identified activities should be implemented and monitored, so little progress has been made since the meeting.

Discussion: Advocacy Experiences & Issues for Global Fund Replenishment in Asia Pacific

Campaign for Access to Treatment

- There has been an extensive campaign for access to treatment in this region, but very little have been discussed on how the Global Fund resource mobilization efforts can better link with the work on treatment access.
- Drug patent is still a major issue that threatens access to treatment, as medicines (including ARV drugs) are produced mainly in this region, particularly in India. The United States is one of the biggest traditional donors to the Global Fund, and at the same time the 'target' of anti drug patent campaigns by the communities and civil society.
- The communities and civil society should be educated on this issue, particularly on existing threats to treatment access, so that more people will understand and join the campaign.
- All advocacy messages for access to treatment should be cross cutting and include HIV, TB and malaria. We should also explore how we can link with other health issues to get more support.

Regional Studies

- The Joint United Nations Programme on HIV/ AIDS (UNAIDS) and World Bank are supporting the production of a regional report on the AIDS funding landscape in Asia Pacific. The study aims to understand the AIDS financing situation in the region in the next ten years, including identifying funding sources and funding scenarios that will affect HIV programming in the region. This ongoing study will be presented at the IAC. Mr. Shiba Phurailatpam (APN+) and Ms. Malu Marin (7 Sisters) are members of the Panel of Experts tasked to review and approve the report.
- The Global Coalition of TB Activists has carried out a mapping of funding sources in the six regions, but did not find too much information from West Pacific. The mapping found that top funding sources in Southeast Asia countries for TB programs are: 1) the government, 2) the multilateral donors, and 3) the Global Fund.

Country Level Advocacy Issues

- It has been good to push for changes in the Philippines, for government to be more responsible for health in general, and HIV services in particular. The government has used archaic approaches such as criminalization and mandatory testing, but there has been a victory - the sexual reproductive law was passed and implemented, although access for young people is still limited. Another change that we want to see is for other government agencies to be able to provide funding for HIV programs, as the health department is currently the only one that can do so.
- Most governments still do not follow WHO guidelines to provide treatment for PLHIV with 500 CD4 count. This can be one of the issues we can advocate on.
- Migrant workers are often left out of the agenda when KAPs are discussed. We need to ensure that this does not happen in regional platforms.

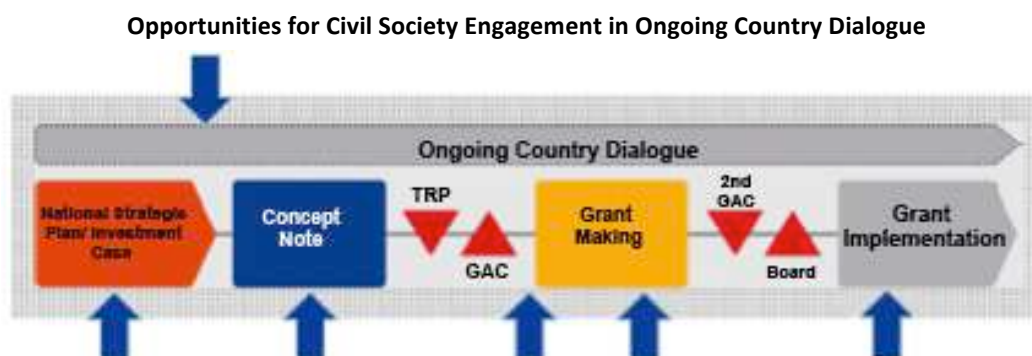
III. Understanding the Present & Future: What is the Global Fund Funding Landscape?

This session focused on the recent changes in the Global Fund's strategy and the NFM. As the Global Fund becomes more engaging, the session also discussed how communities and civil society could use the most of the changing Global Fund.

¹ Note: The meeting decided to add Singapore to the list of countries where community mobilization should be focused.

III. 1. 101 of the Global Fund's Strategy and the New Funding Model

Ms. Linda Mafu, from the Global Fund Secretariat, presented on the NFM. The NFM puts more emphasis on country ownership and promoting human rights to health, and effective high impact interventions. Under the NFM, there is an ongoing country dialogue to understand the epidemic and contributors to the epidemic, as well as high impact interventions for the country. The National Strategic Plan should be the basis of concept notes submitted by countries. The Technical Review Panel (TRP) reviews and provides comments and feedbacks on the concept notes and identifies areas to be improved. The Grant Advisory Committee (GAC) will review the revised concept notes and make sure that the interventions mentioned in the concept notes will have a high impact. The Global Fund Board will then review the concept notes and prepare for grant implementation.



Now more than ever there are more opportunities for civil society under the NFM. Communities and civil society should make sure that they are engaged in every step of the ongoing country dialogue, from developing the national strategic plan to grant implementation. Linda reminded meeting participants that, "if you are not on the table, then you become the menu and people will decide for you." The NFM provides a great opportunity for communities and civil society, because it is clear from the Global Fund's strategy that communities and civil society is part of the conversation. The Global Fund has acknowledged the fact that success in national response cannot be achieved without the involvement of communities and civil society.

Practical tips for creating successful inclusive country dialogue

- Assemble a strong coalition of organizations and inform the CCM of your intention to organize community and civil society's contribution to the national dialogue. Convene a planning team of committed members of the communities and civil society, and organize your first consultation.
- Plan for a series of follow up consultations after the first large, inclusive meeting.
- Document each step of the process (meeting notes, study reports, etc.)
- Strengthen internal governance systems among civil society while the country dialogue is taking place.
- Use the Global Fund resources to support a successful country dialogue (engage with the Fund Portfolio Manager (FPM), work with the Critical Enablers & Civil Society Hub in the Global Fund Secretariat, who reviews human rights issues in the applications under the NFM)
- Work with civil society representatives in the CCM to prepare a formal document (e.g. Civil Societies Priorities Charter)

Civil Society Participation in the Concept Note Stage

- Advocate for representation in the writing team
 - Make sure that the communities and civil society are well represented in the writing team, and that the needs of the communities and civil society are clearly identified.
- Review the concept note to ensure agreed interventions are included
 - Take the time to review the draft concept notes, TRP comments (civil society has the right to ask for the TRP comments), and final version of the concept notes before it is sent back to the

Global Fund, to make sure that all the civil society needs that have been identified are integrated in the concept note.

- Ensure planned interviews will achieve real impact
- Identify implementers most appropriate to deliver the activities and ensure impact
 - Know “who is going to implement what”, and suggest the names of potential implementers for the concept note. This shows a more proactive approach from the communities and civil society in selecting the grant implementers.

III.2. Unfunded Quality Demand (UQD)

Ms. Linda Mafu explained that countries are invited to submit their full expression of demand (concept note). Countries can apply for indicative and incentive funding (see below). The gap that remains between funded (through indicative and incentive funding) and unfunded interventions is called the UQD. The UQD register (list of countries with unfunded quality demand) is open to all donors to fund directly.

Countries in all bands are eligible for UQD. The Global Fund Secretariat is looking at different resources to fund the gap for the UQD register, from working with countries with emerging economies to private sector. There has never been such a concrete, reviewed list of demands before as the UQD register. The UQD register helps greatly in resource mobilization efforts and advocacy for the replenishment. The Global Fund Board will make the decision on funding mechanism to fund UQDs, while the Global Fund Secretariat will provide assistance. The Global Fund Secretariat is looking to support countries to close as much funding gap as possible, by mobilizing resources outside the traditional donors.

Indicative vs. Incentive Funding

- Indicative funding is the amount of funding allocated for countries by the Global Fund.
- Incentive funding is a separate reserve of funding designed to reward high impact, well performing programs and encourage ambitious requests. It is made available on a competitive basis (per component) to applicants within their own Country Bands. Incentive funding is awarded based on the TRP recommendation, by the GAC, and included in the upper-ceiling of the grant. Incentive funding rewards excellent, high impact interventions with value for money and demonstrating ambitious target.

Full Expression of Demand

By sending the full expression of demand, the Global Fund and other international stakeholders will have a better understanding of the full needs of both national and global HIV, TB and malaria response. For countries, this means that they will have an opportunity to close the funding gap for unfunded interventions if the quality UQD is on the register. When engaged in country dialogues, it is important to point out that the Global Fund invites a full expression of demand, so all necessary interventions can be included in the concept note. This is an important leverage for that was not available in the previous rounds based model.

III.3. Joint Civil Society Action Plan (JCSAP)

Mr. Peter van Rooijen, from GFAN Secretariat, presented on the Joint Civil Society Action Plan (JCSAP) – developed by international civil society and community advocates, including Communities Delegation. The NFM provides better opportunities for civil society than before. Now is the time to “get it right”, which JCSAP hopes to achieve through the following building blocks: 1) Improving the quality of data; 2) Making CCMs work better (A better system in place to ensure more effective participation of civil society); 3) Building the right mechanisms to facilitate civil society/ KAPs Technical Assistance (TA) support; 4) Increasing community service delivery; 5) Making the country process work (fee structures and recovery policies to better protect NGOs); and 6) Working with the Global Fund Critical Enablers & Civil Society Hub (ombudsman function).

Meeting participants remarked that information on JCSAP should be made more widely available, as many people are still not aware of JCSAP.

Discussion: What are the implications of the Global Fund's Strategy, NFM and the JCSAP for the context and opportunities/ challenges for communities and civil society?

Changing Global Fund and More Engagement of Civil Society

- There has been a fundamental transformation within the Global Fund. It is important for civil society to make the most of this change. The Global Fund Secretariat is on our side, and they want to ensure that funding is well spent to end the diseases. This is something that was missing in previous rounds based model.
- The Global Fund is now a proactive body. FPMs are responsible for effective country dialogues. A civil society meeting should be held prior to the country dialogue, but it is unclear if it should be initiated by the FPM or civil society - this is a country level decision. It will be clearer over the next few months as countries begin the country dialogue process under the NFM.
- A meeting participant shared her experience as a civil society representative when engaged in a country dialogue, where the FPM did not see the importance of communities and civil society participation in the country process.
→ The Global Fund Secretariat is training FPMs on the importance of civil society in grant design, preparation and implementation. The Global Fund Secretariat is also asking FPMs to liaise with civil society advocates during country visits. This is an ongoing process that still needs to be improved. We can file a complaint against our FPM to the Global Fund Secretariat, if the FPM does not perform their work.
- If there is a lack of civil society participation in country process that affects them (for example - a concept note with interventions targeting positive women was developed without involving or consulting positive women), the Global Fund Secretariat should be made aware of it, so that an internal strategy can be developed to address the situation. Being a part of GFAN also helps to raise the Global Fund Secretariat's awareness on the issues and follow up on them.

Improving the CCM

- The Global Fund is stepping around CCM to get them to work properly. It is important for civil society and key affected populations (KAPs) to take this opportunity to improve the CCM. The CCM Hub within the Global Fund Secretariat has developed a process to evaluate civil society participation on/in the CCM, revising the CCM eligibility criteria to ensure that it is not only the quantity, but also the quality of civil society representatives on the CCM.
- Aside from FPMs, UNAIDS Country Coordinators (UCCs) will also help if CCM is ignoring civil society participation, as well as bilateral funding agencies as the Global Fund goal and achieving the impact is also important to them.
- Since March 2014, 7 Sisters has engaged in a Global Fund supported initiative to enhance KAP engagement in the CCM. This initiative will be piloted in ten countries in Asia (including Sri Lanka, Philippines and Thailand). The pilot project will run for two years. Each CCM will develop a work plan to improve the engagement of communities and civil society in the CCM. For example, CCM in the Philippines has included a national consultation with KAPs in their work plan. APN+ has cancelled their participation in the project, due to conflicting timeline with other projects.

Concerns for the changing Global Fund

- After more than ten years, without discounting the benefits that the Global Fund has given, we should assess the impact that Global Fund has made to the communities. Based on discussions with people from different countries, there is a growing concern that activists have stopped being activists and instead are being implementers.
- Although it is good for the Global Fund to be involved from the beginning, there is also a question of how it fundamentally changes the basic model of Global Fund. In the beginning, the Global Fund

Secretariat was only involved after Board approval, and now the Global Fund is involved from the development of the concept note. Will this affect the performance based framework? Should there be a facilitator or neutral body during the Office of Inspector General (OIG) process? Should there be a neutral body to also oversee the balance of power in the country processes?

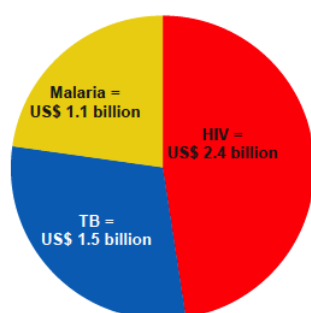
→ This is where the Critical Enablers & Civil Society Hub unit (in the Global Fund Secretariat) will be helpful; to ensure that safe spaces are established.

Capacity building for communities and civil society

- The NFM provides more opportunities than before for communities and civil society engagement. In order to maximize existing opportunities, communities and civil society need to understand the current Global Fund strategies and the NFM.
- There are some documents available that are aimed at raising the community and civil society's awareness on NFM, such as the simple tools that Asia Pacific Network of Sex Workers (APNSW) developed and shared with sex workers organizations in the region.
- Although it is not only about the numbers, communities and civil society need to also be proficient in data and statistics if we are to hold the governments and other stakeholders accountable for their data and statistics. Data and statistics are never an exciting thing, but it is very important for our advocacy efforts.

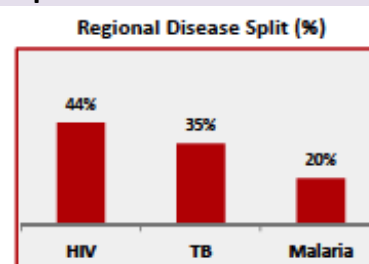
III. 3. Past/ Current Global Fund Investments in Asia Pacific

Ms. Linda Mafu from the Global Fund Secretariat also presented on the Global Fund funding landscape in Asia. A total of US\$ 5 billion has been approved for grants in the Asia Pacific region. 57% of this approved funding were disbursed between 2002 and 2010; US\$ 1.3 billion for HIV, US\$ 825 million for TB, and US\$ 718 million for malaria. 23% of the overall Global Fund Portfolio is for the Asia Pacific region. Almost 710,000 people in the region are being supported to access treatment, with over 1 million people accessing TB/ HIV co-infection treatment. 27 countries in the region have received the Global Fund grant, including regional programs. The Global Fund is actively supporting countries in the region to increase their domestic funding allocation for national HIV/ TB/ malaria responses. Some countries, like Malaysia, China and Thailand have increased their domestic funding to 80-90% of total funding. However, there are still gaps in identifying and supporting high impact interventions.



III. 4. Allocations to Countries in Asia – What They Are and Their Implications

Ms. Rachel Ong presented on the Global Fund funding allocations to countries in Asia. There is slightly more funds in the past funding allocations for Asia (5% increase), with the largest investment for TB in the region.



The Global Fund recently uploaded a list of country allocations for 2014-2016 on their website, which provides information on the allocated amount for each disease burden for each eligible country. Each country received an allocation announcement letter from the Global Fund, which contains the following information:

- A breakdown by disease component (countries may propose a different split, but it cannot be more than 10% variance for each disease. Supporting documents must be submitted along with the argument when proposing for a different split)
- Calculation methodology used for disease funding share allocation
- Historical allocation of the Global Fund funding and identified over/ under allocated disease components (to be approved by the Steering Committee)
- Band allocation, for the respective country, based on disease burden and income level

- Amount of potential incentive funding available for each band

With the limited amount of funding available for the next 3 years, resources need to be prioritized, and essential commodities and governmental allocations are being prioritized – leaving communities with minimum funding. Also, with the overall national AIDS portfolio going down, there is a false impression of demands and needs. Prioritizing which interventions are more urgently needed would be harder than ever. For example, how can we prioritize human rights programs when people are in need of treatment? If countries were to scale up their programs with the limited amount of funding available, the existing resources cannot be thinned out to cover four years instead of three. In light of the limited funding available, countries should be encouraged to submit ambitious concept notes that scale up national response. Real engagement for the community is needed now more than ever, to ensure that communities and civil society are not left behind in national funding.

Outcomes from UNAIDS/ WHO/ the Global Fund Technical Assistance Meeting

UNAIDS, World Health Organization (WHO) and the Global Fund recently held a meeting on TA needs under the NFM in Bangkok, Thailand. Around 130 people attended the meeting, including WHO, UNAIDS, Global Fund staff, consultants and communities and civil society representatives. The community and civil society representatives that attended the TA meeting generally felt disappointed and frustrated with the meeting. The meeting focused on TA needs that arise under the NFM. However, there was no new information on how to engage KAPs in TA provision, nor was there any discussion on what TA is really needed and how it can be effectively provided at the country level. The meeting had very little room for discussions, and in the discussions there was a lack of meaningful involvement of civil society. Although civil society has been doing capacity building and providing technical assistance, the meeting seemed to overlook civil society as a TA provider and instead focused only on traditional TA providers. Communities and civil society should be at the centre of the response, not as an afterthought.

Day 2 – Thursday, 10 April 2014

The second day of the meeting was focused on developing a concrete action plan, and mechanisms and tools to put the action plan in motion. Before breaking into small groups to develop the action plan, meeting participants received a session on Financial Transaction Tax.

IV. Preparing for the future: What needs to be done and what are the priorities?

IV. 1. Financial Transaction Tax (FTT)

In his presentation, Mr. Peter van Rooijen highlighted a current gap of US\$ 3 billion in the current replenishment, which means that additional funding cannot wait until the next replenishment. A potential funding source that has been identified to close the current funding gap is the FTT.

The FTT is taxation of the financial sector, which includes foreign exchange, stock market, etc. Taxes on these transactions can translate to very big money. Eleven European countries have launched an Enhanced Cooperation Agreement to establish a FTT of 30-35 billion Euros (10% of this amount is enough to close the current US\$ 3 billion gap). There is a global community and civil society campaign in Europe and the United States, advocating for the use of 50% of the FTT to fund development programs, including health. The deadline for this agreement is 6th May. Meeting participants agreed that communities and civil society in Asia Pacific should also join the global campaign on 6th May.

Countries in the region that have FTT include Hong Kong, India, Indonesia, Malaysia, Philippines, Singapore, South Korea and Taiwan. Community and civil society advocates at the country level should be informed on FTT, as an opportunity to increase domestic health financing.

Discussion: What needs to be done, globally and regionally?

Regional/ Global Strategy

- Learning from the experience of advocacy efforts for Global Fund replenishment in Africa, we need to also start mobilizing leaders and heads of state in this region to become active ambassadors for replenishment.
- To be successful in the global HIV/ TB/ Malaria response, we need to raise another US\$ 14 billion in domestic funding. In order to have a successful 5th replenishment, in the next three years we need to show impact and increase domestic funding. Because of this, there is a need to campaign for increased domestic health financing in the Asian Pacific countries.
- The meeting briefly discussed the possibility of online campaigning, but although this region is very connected online and there is a wide use of existing social media platforms, the context of the online campaign must be developed in such a way that will excite people. The key messages of the campaign should make sense not only for activists but also for the general public.
- In terms of community mobilization, although a lot of work will only make sense to be carried out at the national level, it is still important to link with international initiatives. It would be good to have one global tagline that regions can also use in their campaigns, although it can be tailored to meet regional context.
- The IAC in Melbourne is a very important opportunity to get commitments from traditional donors, which include the Australian government. The newly elected government has maintained the country's commitment to the Global Fund. The government has abolished AusAID and reintegrated it within the Department of Foreign Affairs and Trade (DFAT). Although at first the civil society group was anxious about the change, it has actually made advocacy efforts simpler and easier, as it means going through only one channel to identify and reach high level government people. The Australian Ministry of Foreign Affairs has continued interest in health and development, and focused on strengthening economy around Australia. DFAT will focus on Indo-Pacific countries, countries along the Indian Ocean.
- Health and development should be aligned in the advocacy efforts for the Global Fund replenishment.

Technical Assistance

- The Global Fund Critical Enablers and Civil Society Hub has developed communication channels to provide technical assistance for regional support and get feedback from the Global Fund processes at country levels, but the watchdog function of the civil society still needs to be improved.
- Community expert means what it is. As we have the experience, we can provide the TA needs for the country, and we need to mention this in every opportunity, as otherwise the issue will be seen only from a medical point of view with no role for the community. We also need to advocate for civil society experts to be treated equally as other experts. This includes getting the same payment.
- We need to have separate funding mechanism for TA. Under NFM, we need a separate funding stream for EOI and concept notes, without going through the CCMs.
- The Global Network of PLHIV (GNP+), MSM Global Forum, International Network of People who Use Drugs (INPUD), and Global Network of Sex Workers Project (NSWP) have created CLAC (Community Leadership Action Collaborative), which aims at providing TA for the community. Information on the request for proposal will be disseminated once it is available.

Post MDG 2015 Agenda

- A major concern for everyone in the meeting was the agenda for post MDG 2015. There is an urgency to discuss post 2015 agenda, as we go beyond MDG into Sustainable Development Goal (SDG), with only one health indicator. We need to ensure that health remains on the agenda after 2015.
- There hasn't been a consistent discussion in this region on the post 2015 agenda. There is no leadership and guidance, no cohesive strategy on how to push the agenda forward. UNAIDS has not provided any clear guidance on this issue. Although some countries have achieved Goal 6 of the

MDG, many have actually gone backwards in their national response. We need to know how to position ourselves strategically to move forward on this issue.

- There is a declining political interest in health, as politicians look for new priorities. Approaching the end of the MDG, it will be a struggle to keep even one health goal, and if there is no goal, it is hard to keep governments accountable. We need to ensure that health remains a priority, and the Global Fund is recognized as one of the preferred financing mechanisms for health.

V. Planning for the Future: Developing an Action Plan

The meeting decided on 4 key advocacy issues for replenishment: 1) FTT; 2) How to Link Access to Treatment with the Global Fund Campaigning; 3) Emerging and Traditional Donors; 4) Domestic Financing. Meeting participants broke into small groups to further discuss each issue. In their breakout group discussion, participants were reminded to review the issues in relation to health in general, and cross-cutting between HIV, TB and Malaria, as well as the regional and global context of the issue. Each group developed an action plan using a template provided by the meeting organizers. GFAN will use the action plan to develop their proposal for Gates Foundation. **The four key advocacy issues for replenishment were identified as follows²:**

1) Financial Transaction Tax – Global and/ or Regional

Campaign objective: To raise funding for development initiatives through FTT campaign in Asia Pacific.

Activities	Timeline
Preparatory Work: Situational analysis in selected countries on FTT situation	April 2014, to meet deadline of May 6 th to create global FTT campaign
Immediate Response: Campaign on German's position on FTT	April – June 2014
Long term plan: develop champions on FTT in the region	June 2014-June 2015

The group felt that linking FTT with public health and development issues will help get more support for the campaign. To do this, communities and civil society's capacity on these issues, and of course the issue of domestic health financing should be improved. PricewaterhouseCoopers is a potential partner to provide technical expertise on public health financing, for capacity building programs.

2) How to Link Access to Treatment with the Global Fund Campaigning

One of the issues raised in this meeting was how to link access to treatment with the Global Fund campaigning. Civil society groups that have been working on drug patent(s) are put in a difficult position when they have to advocate for Global Fund replenishment. The breakout group identified a campaign for uninterrupted treatment access as a way to link the issue of access to treatment with Global Fund campaigning. Dubbed the "Three Zeroes Campaign" (Zero AIDS, Zero TB, Zero Malaria), the campaign focuses on raising awareness on the issues of interrupted treatment and existing threats to treatment access, such as through campaigns during international and regional events, and existing platforms.

Campaign objective: To increase investment for the three diseases (Three Zeroes Campaign) through gaining political will, buy-in from decision makers and donors, and ensuring that everyone affected by the 3 diseases have easy and uninterrupted access to treatment.

Activities	Timeline
Raise awareness during upcoming events (through mass march, mock protest, printing and disseminating IEC materials, T-shirts/ posters/ wristbands etc)	Ongoing, during events such as IAC, World Lung Conference, ICAAP, etc.
Work closely with civil society representatives in the CCM to raise awareness of the changing funding landscape of Global Fund and the need to invest in the Three Zeroes Campaign	Ongoing
On a regular basis, get information regarding access to treatment for three	Ongoing

² Refer to Annex 3. Summary of Action Plan for more details

diseases from existing watchdog mechanism, shadow reports (possible partner is the International Treatment Preparedness Coalition (ITPC)) and other studies from countries and regions	
Highlight 3 zeroes campaign in existing platforms, such as the Parliamentarian Forum (such as in India), SAARC, ASEAN, etc	Ongoing

3) Emerging and Traditional Donors

Campaign objectives: (1) To increase the engagement of political leadership in championing for the Global Fund; (2) To engage champions for the Global Fund through heads of states and/or regional initiatives; (3) To identify and bring on new donors to the Global Fund; (4) Renew the attention of countries on health – and specifically on the three diseases, co-infections and linkages to chronic diseases.

Activities	Timeline
Increasing political leadership/ visibility of the Global Fund (First Ladies, Heads of States, current ambassadors for the 3 diseases, celebrities)	Ongoing. The upcoming ASEAN Summit in November is a good opportunity to mobilize the First Ladies.
Increase visibility of messaging of the 3 diseases, and especially for Multidrug-resistance/ extensively drug-resistance TB (MDR/ XDR-TB) and malaria, through the “Here I Am” Campaign and campaigns targeting parliamentarians as well as traditional and potential donors	Ongoing.
Map key events in the region that can be an entry point for HIV/ TB/ Malaria and for the Global Fund	Ongoing

4) Domestic Financing

Funding for national HIV/ TB/ Malaria response is integral to the achievement of broader development outcomes and must be a high priority in the post-2015 Development agenda. We call on our Governments to fund KAPs and Human Rights; and until this is achieved, we call on International Donor Organisations to fund these areas. Zero funding is not equal to zero stigma and discrimination, zero new infections and zero deaths. While zero funding remains as a given, we know that it is not zero that we’ll end up with, but millions of new infections, thousands of deaths and invaluable/priceless quality of life and dignity of peoples thrown away.

Campaign objective: To launch a regional campaign towards increased domestic health financing for HIV/ TB/ Malaria response.

Activities	Timeline
Asia-Pacific Inter-governmental Meeting (IGM) on HIV and AIDS: To incorporate language on domestic spending in the outcome document of the meeting, by including the issue in the agenda, prepare lobbying materials and strategies, and mobilize broader stakeholder support on the issue. One of the four main agenda items for the IGM is sustainable financing. The CSO preparatory meeting (held on April 30-1 May 2014) has also identified sustainable financing as one of the key asks.	April 30-May 1 2014 – CSO prep meeting 28-30 Jan 2015 – IGM
Community mobilization at country level (capacity building, advocacy, constituency building, alliance building, etc) and regional level (engagement in regional and international platforms)	Ongoing
Organize a domestic financing campaign during the IAC. The issue will be presented in a satellite session inviting high-level political leaders in this region.	IAC - July 20-25, 2014
Use ASEAN work programme 2016-2020 as entry point	Ongoing

What can we do at the regional level to push for increased domestic health financing?

- Create an enabling environment to help advocates at the country level feel confident in their advocacy efforts. We also need to make sure that the needs of KAPs (including human rights issues) are not left behind in any domestic health funding.
- Identify champions in the region and develop talking points for them to use when talking to policy makers and decision makers on domestic financing.
- Instead of a regional campaign on domestic financing, the regional activity should be developing communications strategy to build the capacity of civil society to engage fully in the preparations of domestic finance.
- Develop a generic advocacy template that can be used by country advocates.
- Build the capacity of our constituents in each country, particularly improving civil society's capacity to check national budget and implementation, to hold leaders accountable to their commitments.
- There was a talk in the GFAN Steering Committee on the need to access data on national expenditures from Open Society Foundations (OSF), UNAIDS, the Global Fund and AIDS Data Hub for community mobilization efforts. However, it is not known whether the data is disaggregated or not.

VI. Organizing for the Future: Mechanisms, Tools and Resources to Move Forward

Picking up from the previous session, meeting participants discussed the mechanism, tools and resources to move the action plan forward.

VI. 1. Working Group

The meeting decided to establish a working group to move forward with the action plan, as well as carry out the following key responsibilities:

- Clearer information sharing and communications from global to regional level, as well as from region to region. The Global Fund Secretariat will also be invited in regular communications with the working group.
- Develop a synergized workplan with specific timeline(s) for activities identified, identify partners and other implementation details.
- With ICSS, develop the proposal, capacity building plan, and budget for the Asia Pacific GFAN hub.
- Identify additional stakeholders across the three diseases to be included on the listserv and/or identified as partners in workplan activities.

Ms. Rachel Ong volunteered to chair the working group until a coordinator is selected at the end of the year. 6 people volunteered to become members of the working group: 1) Mr. Laurindo Garcia; 2) Ms. Rodelyn Marte; 3) Ms. Malu Marin; 4) Ms. Tracey Tully; 5) Ms. Blessi Kumar; 6) Ms. Ting Ting Shen.

GFAN is currently waiting for an invitation from Gates Foundation for funding proposals, but some funding will be available in August. Funding from Gates Foundation will allow the working group to recruit either a full time or part time coordinator. After 6 months, the working group will review whether a full time or part-time coordinator is needed. The current working group members are committed to work until the end of 2014.

VI. 2. Information Sharing (from the meeting)

- Ms. Sandii Lwin will impart information from this meeting to Malaria civil society advocates.
- Ms. Rachel Ong & Mr. Peter van Rooijen will disseminate information from the meeting to international civil society groups.
- Ms. Tracey Tully was nominated to attend the GFAN Africa meeting in Nairobi, Kenya in a week's time and will represent Asia Pacific civil society advocates and share findings from this meeting.
- Meeting participants, and other key stakeholders in the region that are unable to attend the meeting, will be added to the listserv.

VI. 3. Preparing for the IAC

The IAC, held 20-25 July 2014 in Melbourne, Australia will provide an opportunity to start the advocacy campaign for Global Fund replenishment. Meeting participants discussed strategies to use in the IAC to raise awareness on issues such as the funding gap, and get more support for the regional and global advocacy efforts for Global Fund replenishment.

- The networking zone in the Global Village of IAC has a big space that can be used for sessions, presentations, launches, etc. Posters, leaflets, and other IEC materials on replenishment issues need to be posted and distributed in the networking zone, to raise awareness, and inspire ideas and ignite discussions during the IAC and hopefully afterwards.
- Gates Foundation can fund more people to attend the IAC, if needed.
- There was a discussion on what type of session is best to have, to launch the campaign on increased health financing during the IAC. It was decided that a bigger and more formal meeting is more appropriate to invite high-level policy makers, instead of a session at the global village. The working group, along with Mr. Peter van Rooijen and Ms. Rachel Ong will work with the Global Fund Secretariat to organize a satellite session on domestic financing, which will include not only Asia Pacific region but also other regions.

Closing & Thank You

The meeting organizer(s) thanked the meeting participants for their active participation, to the meeting facilitator and rapporteur, and to Shiba (APN+) and Malu (7 Sisters) for all their support.

The meeting was closed with a moment of silence as meeting participants paid respect to Andrew Hunter, a member of the Global Fund Communities Delegation and Regional Coordinator of APNSW, who passed away in December last year.

Annex 1. List of Meeting Participants

Participants

Name	Organisation	Country	Email	
1	Mr Shiba Phurailatpam	Asia Pacific Network of People Living with HIV (APN+)	Thailand	shiba@apnplus.org
2	Ms Malu Marin	Coalition of Asia Pacific Regional Networks on HIV/ AIDS (7 Sisters)	Thailand	Malu_7sisters@yahoo.com
3	Ms Natt Kraipet	Asia Pacific Transgender Network (APTN)	Thailand	Natt.aptn@gmail.com
4	Ms Tracey Tully	Asia Pacific Network of Sex Workers (APNSW)	Thailand	ttully62@gmail.com
5	Mr Midnight Poonkasetwatana	Asia Pacific Coalition on Male Sexual Health (APCOM)	Thailand	midnight@apcom.org
6	Mr Gaj B Gurung	Developing Country NGO Delegation on the Board of the Global Fund, YouthLead	Thailand	Gaj496@gmail.com
7	Ms Naro Nukshi	Women of Asia Pacific Plus (WAP+)	Thailand	naro@apnplus.org
8	Mr Masaki Inaba	Developed Country NGO Delegation on the Board of the Global Fund, Global Health, Africa Japan Forum	Japan	Masaki.inaba@gmail.com
9	Mr Don Baxter	Developed Country NGO Delegation on the Board of the Global Fund, AFAO	Australia	don.baxter@afao.org.au
10	Ms Ting Ting Shen	Developing Country NGO Delegation on the Board of the Global Fund, Asia Catalyst	China	tshen@asiacatalyst.org
11	Ms Yuko Niizato	Results Japan	Japan	yuko.niizato@resultsjp.org
12	Ms Nguyen Kim Dung	Center for Supporting Community Development initiatives (SCDI)	Vietnam	dungnguyen@scdi.org.vn
13	Ms Blessi Kumar	Global Coalition of TB Activists (Chair)	India	Blessi.k@gmail.com
14	Mr Ikbal Rahman	Rumah Cemara	Indonesia	ikbal_r@rumahcemara.org
15	Mr Hong Reaksmeay	Khana	Cambodia	hreaksmey@khana.org.kh
16	Ms Rodelyn Marte	Asia Pacific Council of AIDS Service Organisations (APCASO)	Malaysia	Cai.apcaso@gmail.com
17	Ms Sandii Lwin	Myanmar Health and Development Consortium (MHDC)	Myanmar	Slwin.mhdc@gmail.com
18	Mr Laurindo Garcia	B-Change	Philippines	laurindo@b-change.com
19	Ms Amara Quesada	CARAM Asia	Philippines	mara.quesada@gmail.com
20	Ms Aki Ogawa	Africa Japan Forum	Japan/ Thailand	ogawa.aki.adua@gmail.com

Resource People

Name	Organisation	Country	Email	
1	Ms Linda Mafu	Global Fund Secretariat	Switzerland	Linda.mafu@theglobalfund.org
2	Ms Pauline Mazue	Global Fund Secretariat	Switzerland	Pauline.Mazue@theglobalfund.org
3	Mr Peter van Rooijen	International Civil Society Support (ICSS)	Netherlands	pvr@icsssupport.org
4	Ms Rachel Ong	Communities Delegation on the Board of the Global Fund	Singapore	Rachel.ong.gfatm@gmail.com
5	Ms Salina Abigail	Rapporteur	Thailand	salina.abigail@gmail.com
6	Ms Vicci Tallis	Facilitator	South Africa/ Thailand	vicci.tallis@gmail.com
7	Ms Olive Mumba	African Platform	Tanzania	mumba@eannaso.org

Annex 2. Meeting Agenda

DAY ONE: 9th April 2014, Wednesday

Time	Session	Resource people
09:00 – 09:45	Welcome <ul style="list-style-type: none"> Welcome and introductions of participants and resource people Housekeeping Overview of agenda and agreement of ground rules 	Peter van Rooijen, ICSS*, and Rachel Ong, CD** Facilitator
09:45 – 10:15	Global Fund Advocates Network: Who is GFAN and what does it do? <ul style="list-style-type: none"> Presentation: Introduction of GFAN Questions for clarification 	Peter van Rooijen, ICSS Facilitator
10:15 – 11:45	Learning from the past: What happened and ‘what worked’ for the 4th Replenishment of the Global Fund? <p>A. Global level</p> <ul style="list-style-type: none"> Presentation: Overview of the 4th Replenishment of the Global Fund, summarising the process, outcomes, strengths and weaknesses. Civil society panel: Discussing the advocacy strategies and lessons from the 4th Replenishment of the Global Fund, with representatives of: <ul style="list-style-type: none"> Civil society advocates in Africa Communities and civil society Delegation on the Board of the Global Fund GFAN Activities and Lessons Learned Questions/answers and discussion 	Pauline Mazue, GF Secretariat*** Olive Mumba, African Platform Rachel Ong, Don Baxter and Ting Ting Shen Peter van Rooijen, GFAN Secretariat Facilitator
11:45 – 12:00	COFFEE BREAK	
12:00 – 13:00	(Continued from previous session) <p>B. Asia Pacific region</p> <ul style="list-style-type: none"> Presentation: Experiences of Asia Pacific national/regional organisations and networks in relation to advocacy strategies and lessons from the 4th Replenishment Sharing & Discussion: Advocacy experiences for Global Fund Replenishment in Asia Pacific 	Malu Marin, 7 Sisters Facilitator
13:00 – 14:00	LUNCH	
14:00 – 15:30	Understanding the present/future: What is the Global Fund landscape? <p>A. Global level</p> <ul style="list-style-type: none"> Presentation: 101 of the Global Fund’s Strategy and New Funding Model, including the Unfunded Quality Demand Register, Special Initiatives and Regional Proposals Presentation: Overview of the Joint Civil Society Action Plan (JCSAP) Discussion: What are the implications of the Global Fund’s Strategy, New Funding Model and the JCSAP for the context and opportunities/challenges for communities and civil society? 	Linda Mafu, GF Secretariat Peter van Rooijen, ICSS Facilitator
15:30 – 15:45	BREAK	
15:45 – 17:15	(Continued from previous session) <p>B. Asia Pacific region</p> <ul style="list-style-type: none"> Past/current Global Fund eligibility and investments in Asia Pacific Allocations to countries in Asia Pacific - what they are and their implications Meeting participants shared outcomes from UNAIDS/ WHO/ Global Fund TA Meeting Questions/answers and discussion 	Linda Mafu, GF Secretariat Rachel Ong Facilitator
17:15 – 17:30	Wrap-up <ul style="list-style-type: none"> Summary of key points and decisions of Day 1 Brief introduction to Day 2 	Facilitator Facilitator

*ICSS = International Civil Society Support; ** CD = Communities Delegation of the Board of the Global Fund to Fight AIDS, Tuberculosis and Malaria; *** GF Secretariat = Global Fund Secretariat.

DAY TWO: 10th April 2014, Thursday

Time	Session	Resource people									
09:00 – 09:15	Welcome <ul style="list-style-type: none"> Recap of Day 1, review of Day 2 agenda 	Facilitator									
09:15 – 10:15	Preparing for the future: <i>What needs to be done and what are the priorities?</i> <ul style="list-style-type: none"> Presentation: Financial Transaction Tax Group reflection: Considering everything presented and discussed on Day 1: <ul style="list-style-type: none"> Globally, what needs to be done? i.e. What should be the key components of a campaign to advocate on resource mobilisation for the Global Fund? In Asia Pacific, what needs to be done? i.e. To support the global campaign, what should be the key components of a regional campaign to advocate on resource mobilisation for the Global Fund? With attention to both domestic and donor financing. 	Peter van Rooijen, ICSS Facilitator									
10:15 – 10:30	BREAK										
10:30 – 13:00	Planning for the future: <i>What should an Action Plan look like?</i> <ul style="list-style-type: none"> Group work: Participants divided into groups according to the key components of a regional campaign identified in the previous session. Each group further discusses their key component and develops a basic action plan: <table border="1" style="margin-left: 20px;"> <tr> <td colspan="3">Objective:</td> </tr> <tr> <td style="text-align: center;">What?</td> <td style="text-align: center;">When?</td> <td style="text-align: center;">Who?</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </table> Feedback: Presentations of action plan by each group Discussion: Discussion, debate and, if necessary, prioritisation of advocacy strategies. Agreement of overall Action Plan. 	Objective:			What?	When?	Who?				Group facilitators Group Rapporteurs Facilitator
Objective:											
What?	When?	Who?									
13:00 – 14:00	LUNCH										
14:00 – 16:00	Organising for the future: <i>Mechanisms, Tools and Resources to Move Forward</i> <ul style="list-style-type: none"> Discussion: <ul style="list-style-type: none"> Identification of potential mechanisms, tools and resources needed to make the Action Plan happen in Asia Pacific. Agreement of the mechanism, tools and resources. 	Facilitator									
16:00 – 16:15	COFFEE BREAK										
16:15 – 17:15	Closing <ul style="list-style-type: none"> Wrap-up of the meeting and farewell to participants 	Facilitator									

Annex 3. Summary of Action Plan

Location	Activities	Timeline	Lead & Implementing Partners
Financial Transaction Tax			
<i>Objective: To raise funding for development initiatives through Financial Transaction Tax campaign in Asia and the Pacific.</i>			
Australia, China, Hong Kong, India, Indonesia, Malaysia, Pakistan, Singapore and South Korea	<p>1) Preparatory work</p> <p>1.1. Situational analysis on selected countries in Asia Pacific and their situation around FTT:</p> <ul style="list-style-type: none"> Identify and group the countries by their economics Document the situation of FTT in the selected countries and develop a brief summary Circulate the brief to the selected countries, with focus on countries related to regional networks <p>2) Immediate response: Campaign on German's position on FTT</p> <p>2.1. Educate the country level networks on FTT remotely and half day orientation during the AGM of APN+</p> <p>2.2 Develop the letter, with support from global advocates, to be disseminated to the German embassies in the countries.</p> <p>2.3 Initiate dialogue with finance ministry and other related stakeholders on FTT, where the network of APN+ exist in the list of countries, listed above.</p> <p>3) Long term plan to develop champions on FTT in the region</p> <p>3.1 Capacity development training for selected advocates on public health financing supply chain over period of time.</p> <ul style="list-style-type: none"> Initiate the process and recruit the people starting through APN+ Annual General Meeting (AGM) in June 2014 Identify other committed people, apart from APN+ networks, through expression of interest from the listed countries. Train them on different issues of FTT (at least three 3 series of regional training) The participants come up with concrete recommendation and advocacy plan before APN+ AGM, June 2015 Final advocacy planning during the same AGM Create fund for the participants to run advocacy and roll outs in countries, sub-regions and region. 	<p>April, 2014 (Note: to meet the deadline of May 6, and its link to activity 2.1 and 2.2)</p> <p>June 2014 (APN+ AGM)</p> <p>May 1-6, 2014</p> <p>June, 2014- June 2015</p>	<p>GFAN, Laurindo Garcia</p> <p>APN+</p> <p>GFAN, Laurindo Garcia</p> <p>GFAN, APN+, Laurindo Garcia</p>
How to Link Access to Treatment with the Global Fund Campaigning			
<i>Objective: To increase investment for 3 diseases (Three Zeroes Campaign) through gaining political will, buy-in from decision makers and donors, and ensuring that everyone affected by the 3 diseases have easy and uninterrupted access to treatment.</i>			
<ol style="list-style-type: none"> India Cambodia Indonesia Thailand Vietnam Philippines Nepal Bangladesh Sri Lanka Myanmar Pakistan PNG 	<ul style="list-style-type: none"> Raise awareness during upcoming events (through mass march, mock protest, printing and disseminating IEC materials, 3 zeroes T-shirts/ posters/ wristbands etc) Work with civil society representatives in CCM to raise awareness of the changing Global Fund funding landscape and the need to invest in the three zeroes campaign On a regular basis, get information regarding access to treatment for the three diseases from existing watchdog mechanism, shadow reports (possible partner is ITPC) and other studies from countries and regions. Highlight the three zeroes campaign in existing platforms, such as the Parliamentarian Forum (such as in India), 	<p>World Lung Conference (Oct 2014); IAC (July 2014); 12th ICAAP (2015); Partnership Forum (if held in Spring 2015)</p> <p>Ongoing</p> <p>Ongoing</p> <p>IGM UNESCAP (Jan 2015) & Pre-consultation meeting (Apr</p>	<p>Global Coalition of TB Activists (GCTA)</p> <p>Malaria communities and civil society groups</p> <p>National and regional networks (APN+, APNSW, ANPUD, APTN, CARAM, etc)</p> <p>TB partnership</p>

SAARC, ASEAN, UN ESCAP.		2014)	
Emerging and Traditional Donors			
<i>Objectives: 1) Increase the engagement of political leadership in championing for the Global Fund; 2) Engage champions for the Global Fund through heads of states and/or regional initiatives; 3) Identify and bring on new donors to the Global Fund; 4) Renew the attention of countries on health – and specifically on the three diseases, co-infections and linkages to chronic diseases</i>			
<p>Traditional donors – Japan, Australia, New Zealand</p> <p>New donors (high income countries) – China, Taiwan, Singapore, South Korea, Brunei</p> <p>G20 countries</p> <p>Countries that have donor agencies – Thailand, Malaysia</p>	<p>1) Increasing political leadership/visibility of Global Fund</p> <ul style="list-style-type: none"> Possible champions – First lady of China (getting African first ladies to talk to her), Japan First Lady, Aung San Suu Kyi, Princess Kiko (Japan) for TB, Laxmi T, Edwin Cameron (for China) Heads of States – Prime Minister of Japan (Universal Health Coverage), from Brazil, Russia, India, China, South Africa (BRICS) Tapping Current Ambassadors – Yvonne Chaka Chaka, Karen Mok (Malaria), UNAIDS Aishwarya Rai Bachchan Look at engaging celebrities from Asia Pacific as ambassadors <p>2) New Donors</p> <ul style="list-style-type: none"> Need to increase visibility of messaging around increase of MDR/XDR-TB and Artemisinin Resistance and elimination of malaria (and sustaining) for urgency “Here I Am” Campaign Ambassadors from the region that can talk about the 3 diseases (especially MDR/XDR-TB and Malaria) Global Fund Secretariat target (New) – Brunei (OIC), South Korea, China → need political support from traditional and potential donors to increase contribution to the Global Fund and the co-investment dialogue Targeting parliamentarians <p>3) Mapping key events in the region where there can be an entry point for HIV/TB/Malaria and for the Global Fund</p>	<p>Ongoing</p> <p><u>Other Key events:</u></p> <ul style="list-style-type: none"> Melbourne IAC BRICS Summit 12th ICAAP (Bangladesh) Regional Initiatives Meetings ASEAN+3 (Nov 2014) <p>Ongoing</p> <p><u>Other Key events:</u></p> <p>Parliamentarian meeting prior to IAC Melbourne</p>	<p>Need to check if IAS/UNAIDS will plan first ladies meeting at Melbourne IAC, as well as other political sessions</p> <p>Working with Friends of the Fund</p>
Domestic Spending			
<i>Objective: To launch a regional campaign towards increased domestic financing of the HIV response</i>			
	<p>1) Asia-Pacific IGM on HIV and AIDS</p> <ul style="list-style-type: none"> Influence process and agenda of the meeting to include and address the issue of domestic financing (sustainable financing is one of the four main agenda items) Prepare lobbying materials and strategies Mobilize broader stakeholder support on the issue. <p>Target Output: Incorporation of language on domestic spending in the outcome document</p> <p>2) Community Mobilization</p> <p>2.1. Country Level: Capacity building component; Advocacy component; Constituency building; Alliance-building; Mapping of initiatives; Tracking Civil Society Organizations (CSO) experiences in budget advocacy; Developing analytical community perspective on domestic funding</p> <p>2.2. Regional Level: Engagement in regional and international platforms</p> <p>3) IAC - Organize a domestic financing campaign (Satellite sessions; AIDS Funding Landscape launch; Dialogue with leaders; CSO strategizing (position paper); Campaign materials (Collaterals))</p> <p>4) ASEAN Work Programme 2016-2020 – as entry point</p>	<p>April 30-May 1 –CSO prep meeting</p> <p>28-30 Jan 2015 - IGM</p> <p>Ongoing</p> <p>July 20-25, 2014</p>	<p>UN ESCAP, UNAIDS 7 Sisters</p> <p>APCASO and country partners (Vietnam, China, Laos, Indonesia, Philippines, ++)</p> <p>APCASO, Global Fund, UNAIDS, DFAT, 7Sisters, APN+</p> <p>AFAO, APCOM Regional Networks</p>