SOUTH-TO-SOUTH LEARNING: LESSONS LEARNT FROM VIRTUAL COUNTRY DIALOGUES FOR GLOBAL FUND FUNDING REQUEST DEVELOPMENT IN THE ASIA-PACIFIC

19th August 2020, Wednesday, 14:00 - 16:00 BKK / 12:30 – 14:30 IST / 09:00 -10:00 CEST
# AGENDA

Moderated by RD Marte, Executive Director, APCASO, host of APCRG Platform

<table>
<thead>
<tr>
<th>Time</th>
<th>Agenda Item</th>
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<tr>
<td></td>
<td><strong>Welcome and Introductions to Webinar</strong></td>
<td>RD Marte, APCASO &amp; Host of APCRG&lt;br&gt;Rachel Ong, GFAN AP&lt;br&gt;Kate Thomson, CRG Department, Global Fund</td>
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<tr>
<td>10 min</td>
<td><strong>Participant Polling</strong></td>
<td>Rachel Ong</td>
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<td>5 min</td>
<td><strong>Global Fund Virtual Country Dialogues</strong></td>
<td>Hyeyoung Lim, CRG Department, Global Fund</td>
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<tr>
<td>15 min</td>
<td><strong>Moderated Q &amp; A</strong></td>
<td>Moderated by RD Marte</td>
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<td>5 min</td>
<td><strong>Participant Polling</strong></td>
<td>Rachel Ong</td>
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<td>30 min</td>
<td><strong>Experiences from the ground</strong></td>
<td>Achut Sitaula, CCM Vice-Chair, Nepal&lt;br&gt;Mei Sebayang, CCM Member, Chair of HIV National Technical Working Group of the CCM, Indonesia&lt;br&gt;Khuat Thi Hai Oanh, SCDI Vietnam, SR for HIV and Malaria</td>
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<td>20 min</td>
<td><strong>Moderated Q &amp; A</strong></td>
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<td><strong>APCRG-led initiatives:</strong></td>
<td>Jennifer Ho, APCRG</td>
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<td>• Information Dissemination</td>
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<td>• Technical Assistance Support</td>
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<td>• COVID-19 Alert System</td>
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<td>10 min</td>
<td><strong>Moderated Q &amp; A</strong></td>
<td>Moderated by RD Marte</td>
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<td>5 min</td>
<td><strong>Closing Remarks</strong></td>
<td>RD Marte, APCASO &amp; Host of APCRG&lt;br&gt;Rachel Ong, GFAN AP</td>
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Welcome

Moderator

RD Marte
Executive Director
APCASO, Host of APCRG Platform

Rachel Ong
Regional Coordinator
GFAN AP

Kate Thomson
Head, Community Rights & Gender Department
Global Fund

Welcoming Remarks
1. Please go to www.menti.com
2. Enter Code 40 87 42 0
GLOBAL FUND VIRTUAL COUNTRY DIALOGUES

Hyeyoung Lim
Human Rights Adviser, CRG Department
Global Fund to Fight AIDS, Tuberculosis and Malaria
Towards Inclusive and Transparent Country Dialogue

AUGUST, 2020

HYEYOUNG LIM

COMMUNITY, RIGHTS AND GENDER DEPARTMENT
Overview of the discussion

1. Global Fund Strategic Commitment
   Meaningful participation of the key and vulnerable populations as a Global Fund Strategic Commitment

2. Country Dialogue:
   Inclusive, transparent, and on-going throughout the grant cycle

3. Strengthening community engagement: available resources
   • CCM Engagement
   • CRG Strategic Initiative
Global Fund Strategy 2017-2022
“Investing to End Epidemics”

MAXIMIZE IMPACT AGAINST HIV, TB AND MALARIA

BUILD RESILIENT & SUSTAINABLE SYSTEMS FOR HEALTH

MOBILIZE INCREASED RESOURCES

PROMOTE & PROTECT HUMAN RIGHTS AND GENDER EQUALITY

Promoting and protecting human rights and gender equality is required to accelerate the end of the epidemics

- Scale-up programs to support women and girls, including programs to advance sexual and reproductive health and rights
- Invest to reduce health inequities including gender- and age-related disparities
- Introduce and scale-up programs that remove human rights barriers to accessing HIV, TB and malaria services
- Integrate human rights considerations throughout the grant cycle and in policies and policy-making processes
- Support meaningful engagement of key and vulnerable populations and networks in Global Fund-related processes

STRATEGIC ENABLERS: Innovate and differentiate along the development continuum + Support mutually accountable partnerships
*Country dialogue* is a continuous consultation and inclusive discussion among all relevant stakeholders whose views are important to design a disease response which will deliver the most impact.
Eligibility requirements for a funding request to be considered by the Global Fund.

Eligibility Requirement 1:
Ensure that the funding request is the result of a transparent and inclusive process.

Eligibility Requirement 2:
An open, transparent and documented Principal Recipient (PR) selection process.
Country Dialogue must go on – go virtual

Use Social Media, Whatsapp/Line/Facebook/Viber

- CCM Mongolia published the invitation for the country dialogue on the CCM website

Use Bluejeans/Zoom/Webex/MSTeam for the virtual conferencing

Use Youtube to share information

- Indonesia – Youtube posting on inclusive country dialogue

Available CCM resources for the virtual country dialogue
Overall result from the Applicant Survey Windows 1 & 2

Applicant Survey: Key Populations and CSOs

<table>
<thead>
<tr>
<th>AXIS TITLE</th>
<th>Positive</th>
<th>Negative</th>
<th>Neutral/No response</th>
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<tbody>
<tr>
<td>Overall FR Experience</td>
<td>39</td>
<td>8</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Overall CD experience</td>
<td>36</td>
<td>12</td>
<td>3</td>
<td>3</td>
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<tr>
<td>Free expression</td>
<td>36</td>
<td>9</td>
<td>3</td>
<td>3</td>
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<tr>
<td>Proactive outreach for KP/CSOs</td>
<td>36</td>
<td>8</td>
<td>7</td>
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<td>Addressing HR</td>
<td>34</td>
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<tr>
<td>Addressing Gender</td>
<td>36</td>
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Engagement remains fundamental to CCM contribution to ending diseases

“Yet the secret sauce of a CCM is the inclusion of civil society, including people from nongovernmental organizations and communities affected by HIV, TB, or malaria…”

Peter Sands, Executive Director, The Global Fund

“…it is always essential to have CCM members from the communities most affected the epidemics, because they bring irreplaceable insights into barriers to access, communication gaps, or the sociopolitical dynamics that impact key and vulnerable populations”
How to ensure ‘meaningful’ participation?
**Engagement needs to enhance meaningful participation from all constituencies**

- Leverage opportunities with community platforms, partners and CRG*
  - **Amplified local, regional expertise** to sustain inclusive health governance

- Equip all constituencies to analyze data
  - **Strengthened use of data** for strategic decision making, particularly in oversight

- Right size CCM membership
  - **Engaged representation** that allows dialogue and takes decisions

- Reinforce pre/post dialogue for civil society & communities
  - **Increased representation and information sharing** across diverse community experiences

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*This includes but is not limited to collaborating on CRG Strategic Initiative investment and partnerships; co-hosting feedback sessions/surveys; regular information sharing*
1a. CRG Strategic Initiative: Operation model

3 mutually reinforcing components for engaging communities in GF processes

- Level 1: Regional Civil Society Platform for Communication and Coordination
- Level 2: Long-term support for HIV & TB Networks. Support for CS working on malaria responses (population & disease focused engagement)
- Level 3: TA support to communities and civil society groups to engage in national processes linked to GF investments

Notes (6pt) for 2000-2013 figures are disbursements for the prior 4 years, e.g. 2000 figure presented is disbursements over 2005-2000. Allocation figure is based on the final allocations. Components are fixed to their over or under allocation status according to the 2014 determination of that status. The “fair allocation” reference is the allocation based on only the allocation formula (disease burden and ability to pay) and the external financing adjustment.

Community, Rights and Gender
2a. CRG-SI Short-term technical assistance

Examples:

**Afghanistan:** TB community-led survey among refugees, migrants and returnees to support the design of an IEC strategy.

**Mauritania:** Support for communities affected by TB in reinforcing their knowledge of Global Fund related processes, enabling them to engage in funding request development.

**Tunisia:** Support to CS engagement in the Human Rights Matching Funding application and program designing.

**Niger:** Malaria equity assessment – understanding barriers faced by rural women in accessing PHC and designing a response plan.

**Zimbabwe:** Design of a AGYW friendly Accountability Framework to oversee and feedback on AGYW program implementation.

**How to apply:**


**Good application practices**
- Identify the needs of your community;
- Discuss the needs with the Regional Platform that covers your country;
- If possible discuss with the CCM and/or the Country Team;
- Access the link to the CRG-SI TA and fill in a request;

Note that this TA is specifically used to support CS and community engagement in GF and related national processes. This TA does not support writing processes or program implementation.
Resources

https://www.theglobalfund.org/media/9536/covid19_virtualinclusivedialogue_guidancenote_en.pdf

Questions and Answers: Supporting Countries and Grants during the COVID-19 Pandemic
https://www.theglobalfund.org/media/9501/covid19_supportingcountriesandgrants_faq_en.pdf?u=637319001926630000

Human Rights in Times of COVID
https://www.theglobalfund.org/media/9538/covid19_humanrights_guidancenote_en.pdf?u=637319001366570000

Global Fund i-Learn on Inclusive Country Dialogue
https://theglobalfund.csod.com/content/theglobalfund/publications/344/inclusive%20country%20dialogue%20storyline%20output/index_lms_html5.html

Community, Rights and Gender Technical Assistance
EXPERIENCES FROM THE GROUND: NEPAL

Achut Sitaula
Executive Director, Trisuli Plus
Vice-Chair, CCM, Nepal
EXPERIENCES FROM THE GROUND: INDONESIA

Meirinda Sebayang
Chair, Jaringan Indonesia Positif
CCM Member, Indonesia
Chair of HIV Technical Working Group of the CCM
Community Engagement on Funding Request HIV 2021 – 2023 Development Process in Indonesia

Meirinda Sebayang
JARINGAN INDONESIA POSITIF
Context

• Indonesia has an extensive history of receiving funding from the Global Fund.

• Allocated US$293,407,740 for ATM and building resilient and sustainable systems for health (RSSH) for the 2021-2023 allocation period (US$ 102,717,937 for HIV, Matching Funds: USD 6,300,000).

• The CCM Indonesia ensures that the FR HIV 2021-2023 has developed through an open, inclusive, and participatory process.
FR HIV 2021-2023 Development Process

January 2020: Planning and Buying in the process, including: Data and Policy availability.

February 2020: Rally 10 SWG Meetings

March 2020: Postpone submission of proposals, too many unsolved problems incl Size Estimation.

April 2020: Rally Meetings with a more structured discussion, there are still many issues that are difficult to find common ground.

May 2020: Rally Meetings, focus on Implementation Arrangement and budget. Submitting the Second Draft. Size Estimate can be finalized.

June 2020: FR Revision including priority areas decision based on epidemiology, IAM of MOHA as PR candidate, and the Budget Arrangement. Submission of final FR.

Process

• Established 10 Sub-Working Groups (MSM-TG, PWID, Sex Workers, PMTCT, TBHIV, RSSH, CSS, Human Rights, TCS, PSCM). Each SWG has representatives from the Key-affected populations and the PLHIV community.

• Rumah Cemara facilitate CSO’s reps from several provinces to engage with the SWG’s

• CCM conducted CSO and Community Consultation meetings in west and east region of Indonesia

• TWG HIV provide GoogleDrive link – easy access to community

• Development of Multi Year Plan of Human Rights Barriers to HIV and TB services – Involved civil society from HIV and TB
Community Role

• Review the Programmatic Gap tables from current implementation program (2018-2020),
• Recommend the strategy and proposed main intervention in the Performance Framework,
• Recommend the operational definition including service delivery package and proposed budget activities,
• Recommend the implementation arrangement plan for each module.
• During the development of Funding Request HIV 2021-2023 from January to June 2020, the SWG have conducted 64 meetings.
Challenges faced and Solutions adopted

- Data and policy Limitation (Including KPSE)
- Innovative approaches are generally a very limited scale
- Target setting is less ambitious (Target on ART, MMD, TLD, PrEP, CBS, etc)
- Methodologies proposed for the core modules – BAU
- Implementation and budget arrangements: BAU

Solutions: Tiered dialogue and strengthen alliances
EXPERIENCES FROM THE GROUND: VIETNAM

Khuat Thi Hai Oanh
Executive Director, SCDI
APCRG-LED INITIATIVES

Jennifer Ho
Deputy Director, APCASO, Host of APCRG
About APCRG

SOUTH-TO-SOUTH LEARNING: LESSONS LEARNT FROM VIRTUAL COUNTRY DIALOGUES FOR GLOBAL FUND FUNDING REQUEST DEVELOPMENT IN ASIA-PACIFIC

19 AUGUST 2020
Asia-Pacific Platform on Communities, Rights and Gender (APCRG)

• Established by the Global Fund’s Community, Rights and Gender Strategic Initiative (CRG SI)
• One of six regional platforms: Anglophone Africa, Asia-Pacific, Francophone Africa, Eastern Europe and Central Asia, Latin America & the Caribbean, Middle East & North Africa
• Communication and coordination focused – not advocacy
• 2nd phase: November 2017 to December 2020
Objectives

1. Further the meaningful engagement of civil society and communities in GF processes through bi-direction communications and the provision of accurate and accessible information;

2. Improve the overall impact of GF programmes and interventions through strengthened engagement of civil society and communities affected by HIV, TB and malaria;

3. Expand access to technical assistance (TA) for civil society and communities through coordination with the CRG-SI short-term TA component, as well as other TA providers and opportunities; and

4. Support strategic civil society and community capacity development initiatives through fostering spaces for engagement and collective participation in key-decision processes, in particular as they relate to community, rights and gender
AP Rapid Assessment During the COVID-19 Pandemic

Objectives of Rapid Assessment:

1) **Assess the impact** of COVID-19 related measures to HIV, TB, and malaria community access to treatment and other medical and health-related services and information; and the undertaking of robust and community-inclusive country dialogue processes for the development of Global Fund funding requests;

2) **Document the engagements** and impact of HIV, TB, and malaria communities and civil society in country-level COVID-19 responses;

3) **Understand community and civil society uptake** of, and any challenges in observing Global Fund-issued guidelines to mitigating the impact of COVID-19 in the implementation of Global Fund grants; and

4) **Seek perspectives** on necessary further Global Fund COVID-19 related guidance and policy to mitigate negative impacts of the pandemic to HIV, TB, and malaria communities.
Key Findings

- Key and vulnerable populations have experienced varying degrees of difficulty coping with the pandemic.
- Existing HIV, TB, and malaria service delivery has been disrupted by COVID-19 measures in varying levels.
- Services that provide prevention and treatment have either closed down or have enabled shorter operating hours which affect access for many clients.
- An increase in gender-based violence (GBV) among key population groups, especially among sex workers.
- Specific vulnerable populations, such as migrant workers, also experienced increased vulnerability due to their economic loss and impact of travel restrictions, making it difficult for them to access services in their places of origin.
Key Findings (cont.)

- **Daily programmatic operations** of civil society and key population—led organisations have also been severely affected by the pandemic.

- Some have reprogrammed activities toward COVID-19 related activity.

- Using the **GF COVID-19 Response Mechanism and grant flexibilities**, CS and KP-led organisations were quick to **mobilise and intervene**.

- **HOWEVER, many CCM members and technical working group partners were hesitant** to implement these communications without direct instructions from the GF Secretariat – making it difficult for communities to engage meaningfully in the design and utilisation of these grant flexibilities.
RECOMMENDATIONS

1. **Global Fund and funding partners** to provide specific allocations to support CS and KP to augment immediate, medium and long-term COVID-19 community-led responses. This is particularly applicable in responding to CRG-related issues.

2. **CCMs and Global Fund Country Teams** to immediately rollout GF Funding Request, grant implementation, and grant flexibilities guidance and policies in coordination with CS and KP-led organisations;

3. **Technical partners** to develop further modelling exercises and situation reports on the regional and country-level impact of COVID-19 across the three diseases responses and propose immediate and long-term recommendations.
RECOMMENDATIONS

4. **CS and KP-led communities** to be supported to work closely with CCM, national diseases programmes and similar multisectoral bodies to fast-track the immediate delivery of life-saving drugs and to avoid further infections and deaths due to HIV, TB, and malaria as may have been possibly intensified by the COVID-19 pandemic.

5. **All stakeholders, particularly CS and KP-led communities** to develop risk mitigation measures that would help sustain ongoing work around the health responses especially in time of health and other emergencies.

6. **Governments** should be encouraged to explore inclusion of COVID-19 as well as possible future pandemic with the **UHC framework**. This includes strengthening and sustainability of health systems, improving strategic information sharing and data utilisation, frontloading budgetary allocations on critical service delivery and vaccine and treatment research and development, and setting up systematic health emergency response that would involve health and non-health agencies and sectors.

APCRG Resources for CS and Communities

GLOBAL FUND UPDATES ON COVID-19
Aug 15, 2020 | 0 | * * * *

GLOBAL FUND UPDATES ON COVID-19
Why it is Important to Engage the CCM in the Funding Request Development Virtually During COVID-19 Pandemic

The Country Coordinating Mechanism plays an important role in the funding request development process.

To do this, the CCM must have:
- A transparent and inclusive process, including key population engagement
- A transparent and documented Principal Recipient (PR) selection process

Your Country Coordinating Mechanism (CCM) can be your

ADVOCATE
STRENGTHENING ALLY
HELPFUL GUIDE

in the fight against HIV and AIDS, TB and Malaria

Key population communities and civil society organizations can be part of this multi-stakeholder body, joining government agencies (Ministries of Health) private sector, academic research groups, and development institutions in strategizing and planning to engage the funding development process.

By joining the CCM, your organization or community can:
- Interact with and influence different stakeholders
- Influence national strategies for disease response
- Influence allocations to ensure that funding goes to key populations
- Influence and participate in mechanisms to monitor implementation

ENGAGE! ENGAGE! ENGAGE!

As dialogues and meetings of CCM will take place online because of COVID-19, here are ways to make sure that key population communities and civil society organizations can participate:

- Get invited into CCM meetings via social media and chat platforms.
- Share information and announcements of relevant CCM processes to your communities and constituencies.
- Use several online tools and platforms to share your priorities to the CCM.
- Organize online consultations but making sure that the safety, privacy, and security of your members are protected.
- Request access to funding request documents and collaborate.
- Most importantly, when attending CCM meetings, present an intervention.

Get in touch with your CCM now and request to be included in the virtual activities. Here is the CCM directory for the Asia Pacific region: https://apcaso.org/apcrg/ccmdir

Your CCM is obliged by the Global Fund to be participatory and consultative with civil society and key and affected populations. An increase from the 15% CCM allocation is also expected in this time of the crisis.

If your CCM refuses to involve CSOs, communities and key populations, you may address your concerns to the Global Fund Secretariat by email: ccm@theglobalfund.org with the subject line “Attention CCM Hub”.

https://www.theglobalfund.org/media/9536/covid19_virtualinclusivecounselling_guidancenote_en.pdf
GLOBAL FUND COVID-19 ALERT SYSTEM

Are you facing any issues and challenges in engaging Global Fund processes in your country due to the COVID-19 pandemic? Has the Global Fund grant implementation in your country been affected because of COVID-19 pandemic? Share it with us via the COVID-19 Alert System! Click the button below to quickly report any challenges or interruptions so that we can alert the Global Fund Secretariat right away!

Click Here to Access the COVID-19 Alert System

ACCESS TO THE COVID-19 RESPONSE MECHANISM (C19RM)

GLOBAL FUND FUNDING REQUEST PROCESS

Learn more about Submission Dates here  Learn more about Virtual Inclusive Dialogues here  Download the C19RM Materials here

Learn more about the Guidance Note here  Learn more about Continued PR Operations here  Access the Detailed FAQ here
Specific considerations per disease program and around community, rights, and gender are being developed as of this time. Click on any of the available technical guidance below to learn more.

We will also keep this section updated as new guidances are released.

- Community, Rights, and Gender Guidance Note
- Considerations for Global Fund HIV support in the context of the COVID-19 pandemic
- Considerations for Global Fund TB support in the context of the COVID-19 pandemic
- Considerations for Global Fund malaria support in the context of the COVID-19 pandemic
- Considerations for Global Fund support for Resilient and Sustainable Systems for Health in the context of the COVID-19 pandemic
- Priorities for Global Fund HIV Support
- NEW! Mitigating the Impact of COVID-19 on Countries Affected by HIV, TB, and malaria
THANK YOU

CCM (R)EVOLUTIONS: LESSONS AND INSPIRATIONS FROM NEPAL, PAKISTAN, PAPUA NEW GUINEA, AND SRI LANKA

APCASO, through the BACKUP Health Project, supported civil society (CS) and key population (KP) networks in four countries in Asia-Pacific, namely Nepal, Sri Lanka, Pakistan, Papua New Guinea, to engage more effectively in their respective Country...
THANK YOU!