

CONSULTATION REPORT

Section 1: Background Overview

Name of Organiser	KHANA
Date and Time of Consultation	12-February-2021 9:00 am – 12:00 pm
Length of Consultation	3 hours
# of Participants	25 participants
General Composition of the Participants (e.g. KP, CS, NGO rep, CS CCM rep, etc.) (Please also include a list of participants in annex)	The meeting gathered 25 participants from affected communities of three diseases and CSOs/NGOs implementing the program of three diseases in Cambodia
Disease Focus of Participants (HIV, TB, and/or malaria)	HIV/AIDS: 13 people TB: 8 people Malaria: 4 people

Section 2: Consultation Highlights Per Session

Please kindly report highlights include issues/comments/feedbacks that have general agreement/support from the group and specific issues/comments/feedbacks/questions that was also raised for considerations.

Session A: About the consultation

[Please note if permission to document (written, photos, and video) was obtained from the participants by the organizer. Noting that participants also have the right to decline any of those.]

KHANA has highly prioritized the confidentiality and privacy of key populations and people living with HIV/AIDS to fully apply the Human Rights-Based Approach. In this consultation, all participants verbally agreed to use their photos taken during the meeting for reporting and social media purpose.

Session B: Overview

In collaboration with Health Action Coordinating Committee (HACC) and APCASO, KHANA hosted the Community and CSO Consultation Meeting on the Global Fund Strategic Plan beyond 2022 by bringing together 25 participants representing the affected communities and CSOs from three diseases: HIV/AIDS, TB, and Malaria. The consultation aimed to share and update the communities and civil societies in Cambodia on the post-2022 Global Fund Strategy development process, including key emerging themes, to facilitate in discussing and collecting feedbacks from affected communities and CSO, and to react and/or provide further feedback on the draft AP Communities and CSS position statement. It was a three-hour

consultation in which materials that produced by APCASO including slide presentations and statements were used, shared, and discussed amongst participants in plenary session.

Session C: The Draft A-P statement

The drafted statement on We Want the Global Fund which was developed by APCASO and its regional and country partners, was translated into local language (Khmer) and introduced to participants. The lead facilitator presented the overview of the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) and its current Global Fund Strategic Plan 2017-2021 which will come to an end by late 2021. The discussion was also highlighted the country commitment to end HIV/AIDS towards reaching 95-95-95 targets by 2025.

The statement is an essential tool and guidance used by the lead facilitator and participants in reviewing and providing concrete recommendations and suggestions from affected communities and CSOs on specific three diseases to advance the implementation of the Community, Rights and Gender (CRG), Community System Strengthening (CSS), and Resilient and Sustainable Systems for Health (RSSH) under the Global Fund investments.

Session D/E: Thematic Discussions

THEME #1: “We want the Global Fund to put the money where its mouth is on CRG and CSS”

The participants reviewed, discussed, and agreed the proposed interventions in the statement. In addition, they request to emphasize on the following points below:

- Community and CSOs want the Global Fund to pay more attention and investments on Community, Rights and Gender (CRG) in three diseases to ensure the roles of affected communities in the responses are strengthened.
- There must be increased the investments on Community System Strengthening (CSS) in which to lead on improvement the critical roles of community health workers (Outreach Workers, Lay Counselors, Peer Support Groups, Village Health Support Groups) in the responses to three diseases.
- The percentage of funding allocation at country level must be guided by the Global Fund to support the affected communities and CSOs in three diseases.
- The Global Fund grant should invest on capacity building for key populations and PLHIV networks in relation the leadership and organizational and institutional development (OID).
- We also call for the Global Fund to connect between strategy and implementation in which the replenishment call has to be bigger.

THEME #2: “We want the Global Fund to effectively fulfill its mandate on HIV, TB and malaria, first and foremost.”

The participants reviewed, discussed, and agreed the proposed interventions in the statement. But added the following points:

- The Global Fund should provide more support on resource mobilization at country level to have more engagements from private companies, foundations, and other key actors to maintain financing the three diseases programming toward ending them.
- For TB specifically, we suggested a call for the global fund that ensures access for all to existing tools and scales up support for new tools - in particular, new diagnostics and new preventative therapies - including vaccines (this should be considered in light of the strategy going up to 2030).

THEME #3: “We want the Global Fund to continue to put CRG and CSS approaches as cornerstones of pandemic and health emergency responses.”

The participants reviewed, discussed, and agreed the proposed interventions in the statement. Here the additional inputs:

- When the emergency health problems or crisis exists, the affected communities and CSO want the Global Fund do not leave the three diseases and should put more investments to improve services access during the crisis/disaster.
- The Global Fund should give more priority and its investment to address the issues on mental health, stigma and discrimination, and human rights-related health services (HIV/AIDS, TB and Malaria).
- We wanted the complementarity of COVID-19 and TB responses and the need to leverage investment in joint TB and COVID-19 infrastructure and there should be a specific reference to anti-microbial resistance (AMR)

THEME #4: “We want a fully resourced Global Fund.”

The participants reviewed, discussed, and agreed the proposed interventions in the statement. In addition, there are the following specific points call to the Global Fund:

- Affected communities and CSOs call for the international community donors to sustain or maintain its commitments and investment through scaling up funding to the Global Fund in which the country allocation will be also increased and given more priorities to health-related issues, including CRG-oriented HIV/AIDS, TB and malaria responses.
- The Global Fund should have been fully financed and played its critical roles to address the issues beyond the three diseases, but not limited to livelihood development, gender equality, social injustice and economic development for key populations and PLHIV.

THEME #5: “We still want a Global Fund that is truly global - one that does not leave key vulnerable and marginalised communities behind, regardless of their income classification.”

The participants reviewed, discussed, and agreed the proposed interventions in the statement. They just request to emphasize on one point below:

- The Global Fund should increase its resources/investment community and CSO engagement in three diseases response through improving the capacity on advocacy, peer support, mentoring and coaching for community networks of key populations.
- There should be a reference to founding and strengthening the engagement of communities of people affected in all eligible country (including through Challenge Facility for Civil Society).

Session F: General discussion/any other comments and feedback

There are two specific recommendations made by the affected communities and CSO in this particular consultation, includes:

- The Global Fund should not consider on the economic growth in the country but should give more focus on the needs of affected communities or marginalized groups following the rights-based approach and patients-centered approach through increasing the investment on Community, Rights and Gender (CRG) for three diseases.
- The Global Fund should increase the funding investment or resources for specific programs that the government does not fund where the Global Fund will play the complement roles in fulfilling the gaps such as HIV preventions, community mobilization, and CRG.

Session G: What happens next. Closing and Thanks.

- KHANA thanks to all for their active participation and interaction during this consultation and promised to prepare a comprehensive report from this important consultation to be shared to APCASO for further inputs to the Global Fund.
- KHANA also promised to participants that if there is any further update from APCASO will be then shared to all participants.

ANNEXES:

Annex 1: Participants list/list of organisation (whichever is appropriate)

Annex 2: Photos from the meeting



