Purpose and audience of this guidance note

- This guidance supports Country Coordinating Mechanisms (CCMs\(^1\)) to enhance quality representation, meaningful participation and engagement from all constituencies\(^2\) in the design, delivery, monitoring and governance of AIDS, tuberculosis and malaria responses in which the Global Fund invests.

Definition of Engagement

- All constituencies are effectively represented and actively participate in governing processes to ensure Global Fund investments are transparently developed and overseen. This maximizes impact against the three diseases and contributes to resilient and sustainable systems for health (RSSH). These investments should also strengthen sustainability of national programs and health systems following the Global Fund’s sustainability, transition, and co-financing efforts.

Principles of effective Engagement

- **Active participation by national leadership**: sector leaders responsible for planning, implementing, monitoring, and funding health programs\(^3\) participate regularly in CCM meetings. They provide strategic steer and key decisions to maximize coordination between Global Fund-supported investments, national programs and other sources of funding.
- **Diverse sectors and voices**: CCM composition reflects a manageable size\(^4\) and relevant skills/expertise needed across the three diseases, including cross cutting areas such as laboratory, procurement and supply chain management. A safe and enabling environment for key or marginalized populations is critical for effective engagement.
- **Relevant partnerships for sustainable responses**: Active participation from the Ministry of Finance or Planning, development banks, multi- and bi-lateral partners, private sector, and civil society/NGOs.

Drivers of effective Engagement

- **Representation** for constituencies is diverse, reflecting the epidemiological context and community realities, experiences and needs. CCM members with the right skill sets from relevant sectors are nominated/elected through a transparent process.

---

1. For purposes of this paper, CCMs includes Regional Coordinating Mechanisms (RCMs) as further defined in the [CCM Policy](https://www.theglobalfund.org/en/about/guidelines/).
2. Guidelines on CCM constituency representation are set forth in the [Country Coordinating Mechanism Policy](https://www.theglobalfund.org/en/about/guidelines/), - see annex 1
3. This includes primary health care and laboratories (e.g. Permanent Secretaries, Directors General of Health Services, Laboratory Directors, Directors General of Primary Health Care, Directors of Planning, or similar roles appropriate to the context)
4. Based on findings from the CCM Evolution Pilot, while context is critical in determining the right size in alignment with CCM by-laws, between 10 and 20 active participants demonstrated the most effectiveness in robust dialogue and decision making
• **Preparation**: members receive key information in advance *(from the CCM secretariat)* of CCM meetings and take appropriate time to prepare for meetings by reviewing and understanding agenda items in advance. Members consult their constituency to obtain their input (e.g. qualitative or quantitative data) and positions on the agenda and any emerging issues requiring governance attention.

• **Participation**: in addition to attendance (crucial to reach a quorum to validate and legitimate decisions), active engagement in the dialogue and attention to the issues is key to an effective health governance body. Commitment to voice constituency priorities using relevant data – qualitative, quantitative and drawn from a diversity of levels including the community.

• **Communication**: throughout the process, effective bi-directional and systematic communication and information flow with members that is cascaded to their constituencies is key. Communication, both during meetings and in-between, should foster respectful dissent, solicit perspectives from all members (not only the most vocal) and be captured in a manner that is shared for mutual accountability and collective action.

**Key stakeholders in Engagement**

**CCM Leadership**

- Encourages adherence to good governance principles.
- Sets the tone to listen and respect voices of all CCM members, especially representatives from key affected populations and communities, by creating a safe space to speak up.
- Promotes data-driven discussions to maximize Global Fund investments for impact.
- Mediates between different stakeholders in conflict situations.
- Communicates a clear understanding of the roles and responsibilities of CCM members.

**CCM Secretariat**

- Shares **timely** information for quality meeting preparation and decision-making: meeting agenda/minutes, relevant supporting materials (plenary, committees, technical working groups) to all CCM members/alternates and enthusiastically encourages members to participate in the CCM.
- Ensures credible and verified community input from the CCM is brought to high-level government discussions to drive informed responses to the three diseases.
- Engages with senior government officials to promote CCM in the national health landscape.

**CCM Members**

- Participate meaningfully in different processes based on their capacities and support.
- Promote ethical behaviours. Adhere to the Global Fund principles and expectations, including the [Code of Ethical Conduct for CCM Members](#), the CCM policies, and its governance principles and procedures.

**Global Fund Country Team (CT)**

- Works in partnership with various Global Fund stakeholders including CCMs to foster meaningful engagement.

**Special Considerations for CCMs in different contexts**

- **COVID-19 guidance summary**: Ensuring Continuity of Core Country Coordinating Mechanism Responsibilities in [English](#) | [Português](#) | [Español](#) | [Français](#)

- **CCMs preparing for transition or transitioning from Global Fund financing**: CCM compositions should reflect a representation of members relevant to transition planning,
efforts to strengthen transition preparedness, and implementation. Relevant members should be strongly engaged in transition planning and implementation (including Ministry of Finance or Planning, development banks, the private sector, civil society, etc.)\(^5\).

- **Challenging Operating Environment (COE).** In complex emergencies, the CCM should have representation of relevant humanitarian health stakeholders and/or coordination mechanisms including representatives of internally displaced persons (IDP).

- **Refugee, Stateless, or Migrant Populations.** In countries with relevant refugee, stateless or migrant populations, the CCM should have representation of this vulnerable population or relevant UN/INGO organizations advocating for their interests and concerns.

**Recommended practices, methods, and implementation tools**

- **Resources Links**
  - Community Engagement Toolbox v1 designed for use by CSO and community groups to engage meaningfully in Global Fund processes at country-level e.g. civil society members of CCM.

**Annexes**

- Annex 1 - Meaningful engagement constituency representatives
- Annex 2 - Menu of options to use 15% CSO
- Annex 3 - Tip for Partners in CCM

---