REPORT OF PARTNERSHIP FORUM 2008

OUTLINE:

1. This paper provides the report from the Partnership Forum meeting which took place in Dakar, Senegal, from 8-10 December 2008. Please note that information on the proposed follow-up to the recommendations contained in this report can be found in Annex 1 to the Report of the Policy and Strategy Committee (GF/B19/4).

**Decision Point 1: Partnership Forum 2008**

_a) The Board takes note of the “Partnership Forum 2008 Report” (GF/B19/14) and agrees to use the recommendations contained therein to inform ongoing strategic planning and management of the Global Fund. The Board assigns responsibility to oversee follow-up on the recommendations to its committees as laid out in Annex 1 to GF/B19/4._

_b) The Board decides to hold the fourth Partnership Forum in the first half of 2011 and approves the following amendment to Article 6.3 of the By-Laws:

_by-laws: Article 6.3 Frequency and notice of meetings_

The Partnership Forum will meet biennially, at any time during even calendar years every 24 to 30 months.

Meetings of the Partnership Forum shall be convened by written notice from or on behalf of the Foundation Board._

_c) The Board mandates the Policy and Strategy Committee to establish a Partnership Forum Steering Committee to start planning for this event early in 2010._

_d) The Board approves a budget of US$ 1,500,000 as an upper limit for the fourth Partnership Forum and requests the Finance and Audit Committee to ensure that provision is made in the 2010 budget for adequate staff resources._

**This decision does not have material budgetary implications for 2009.**

This document is part of an internal deliberative process of the Fund and as such cannot be made public. Please refer to the Global Fund’s documents policy for further guidance.
LISTENING
TO THE VOICES
Listening to the voices
ÉCOUTER
LES VOIX
Escuchar las Voces
Listening to the voices
Прислушиваться к мнениям

Report of the Partnership Forum 2008
of the Global Fund to Fight AIDS,
Tuberculosis and Malaria
8-10 December 2008, Dakar, Senegal

Listening to the Voices: Stronger and more effective partnership for sustained impact
## CONTENTS

<table>
<thead>
<tr>
<th>Page</th>
<th>Section</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>Introduction and overview</td>
</tr>
<tr>
<td>9</td>
<td>Discussions of sub-themes</td>
</tr>
<tr>
<td>22</td>
<td>Discussions of wider issues</td>
</tr>
<tr>
<td>28</td>
<td>Next steps</td>
</tr>
<tr>
<td>29</td>
<td>Annex I: Program</td>
</tr>
<tr>
<td>32</td>
<td>Annex II: Breakdown of participants</td>
</tr>
<tr>
<td>33</td>
<td>Annex III: Members of steering committee and facilitation team</td>
</tr>
</tbody>
</table>
“Listen to our voices: Because we are the infected and affected communities. As partners we should recognize and respect the unique capabilities, strengths, as well as weaknesses, that each stakeholder faces. Involvement of people infected, affected by TB, malaria or are living with HIV is of great value to all, because of our first-hand experience with the diseases…Listen to our voices: Though we are the experts with the diseases, we cannot work in isolation and that is why we need stronger and more effective partnerships with other stakeholders so that we can together achieve “sustained impact”…If we listen to each other and work together, anything and everything is possible. So let us believe that we can and we will.”

Carol Nawina Nyirenda,
Alternate Board Member, Delegation of Communities Living with HIV, TB and Affected by Malaria

“The activities of the Global Fund have shown to the international community that if developing countries, including low-income countries, have the necessary financial means, they can significantly reduce the impact of the three most deadly diseases that affect their development.”

Cheikh Hadjibou Soumare
Prime Minister of the Republic of Senegal

“The Global Fund is by essence a partnership. Every member of the partnership has responsibilities, is accountable and contributes in his or her own way to the implementation of programs in countries….The Partnership Forum is partnership in action, our partnership in dialogue and in dialectic dynamic. Partnership is absolutely key to all of the founding principles of the Global Fund – be it country ownership, be it accountability, be it results-based performance… I am absolutely convinced that the further success of the Global Fund will depend significantly on how we now together strengthen that partnership.”

Michel Kazatchkine, Executive Director
The Global Fund
Role of the Partnership Forum within the Global Fund

The Partnership Forum is an integral part of the governance structure of the Global Fund to Fight AIDS, Tuberculosis and Malaria (the Global Fund).

The Partnership Forum takes place every two years. It provides a platform for a diverse range of stakeholders - including those not previously involved - to have open and frank discussions about the Global Fund's strategies and policies, enabling them to share experiences, debate ideas and identify priorities. Vitally, the Partnership Forum also serves to channel guidance from those stakeholders to the Global Fund Board.

The Partnership Forum is unique within the governance architecture of the global response to the three diseases. And it has been proven to make a difference. Of the 68 recommendations made at the Partnership Forum in 2006 (in Durban, South Africa), 32 resulted in or are linked to concrete Board decisions. The remaining 36 have clear follow-up activities via relevant Global Fund committees or the Secretariat. Particularly ground-breaking examples of Board decisions include those confirmed in GF/B15/DP14 on the routine inclusion in proposals of both government and non-government Principal Recipients (dual-track financing) and of funding to strengthen communities (community systems strengthening).

Context to the Partnership Forum 2008

The Global Fund was established in 2002. It is now the largest multilateral financier of AIDS, tuberculosis (TB) and malaria programs in developing countries.

The Global Fund has had – and continues to have – a monumental impact on the lives of those living with and affected by the three diseases.

KEY ACHIEVEMENTS OF THE GLOBAL FUND

By the time of the Partnership Forum 2008, the Global Fund had:

- Committed US$ 14.9 billion to large-scale prevention, treatment and care programs in 140 countries
- Enabled the provision of antiretroviral (ARV) drugs to two million people living with HIV
- Enabled the detection and treatment of 4.6 million cases of TB
- Enabled the provision of 70 million bed nets to protect families from malaria


While the previous two Partnership Forums had largely focused upon shaping the still-nascent institution, the 2008 event was able to take a closer look at how policies and processes are working in practice. In turn, this enabled the discussions to focus on critical ways in which the Global Fund's strategies, procedures and structures might be yet further enhanced to increase its future efficiency, effectiveness and, ultimately, impact.

The Partnership Forum also came amidst landmark decisions about the Global Fund's Round 8. This was by far the largest and most successful round to date, as the Board approved new grants with a two-year value of US$ 2.75 billion - more than twice that of any previous round.

Yet, as the Partnership Forum’s participants gathered in Dakar, the successes of Round 8 and excitement of the launch of Round 9 were also tempered by fears about financial stability and predictability. Many stakeholders came with questions about the potential impact of the international financial crisis on the Global Fund’s work. More specifically, discussions were also fuelled by concern about how to bridge the emerging gap between the predicted future demands on the Global Fund and its available resources.

Finally, the Partnership Forum 2008 also occurred within the timeframe of the first Five-Year Evaluation of the Global Fund. During the Partnership Forum, the findings were already available from Study Area 1 (Organizational Efficiency and Effectiveness) and Study Area 2 (Effectiveness of the Partner Environment), and were keenly expected from Study Area 3 (Impact on the Three Diseases). As such, the event provided a critical opportunity to both update stakeholders on the emerging recommendations and to gain their input on next steps in terms of prioritization and implementation.
OVERVIEW OF THE PARTNERSHIP FORUM 2008

Location, timing and objectives

The third Global Fund Partnership Forum took place on 8-10 December 2008 in Dakar, within the generous and kind hospitality of the government and people of Senegal.

The overall objective of the Partnership Forum 2008 was: To communicate and consult with all Global Fund stakeholders.

The more specific objectives were:

1. To review and provide feedback on the progress of the Global Fund and develop recommendations on its strategy, policy and practice.
2. To provide an open and visible platform for understanding, learning and debate for all partners in the work of the Global Fund, including relevant actors not currently involved in the work of the Global Fund.
3. To mobilize and sustain political commitment to define, create and articulate demand and to ensure sustainable long-term financing.

Management and facilitation

The Partnership Forum 2008 was managed by a nine-member international Steering Committee1. The Chair was Shaun Mellors from the Communities Living with HIV, TB and Affected by Malaria Delegation (Communities Delegation) to the Global Fund Board. The committee held responsibility for strategic decisions relating to the Partnership Forum such as the themes, program, number/profile of participants and allocation of budget.

The Partnership Forum 2008 was provided with significant support from a full-time manager (Birgit Poniatowski) and other staff within the Secretariat of the Global Fund. It was facilitated by an 11-member Facilitation Team, led by a Lead Facilitator (Sarah Middleton-Lee). The members of the team offered extensive experience in facilitation and were selected from across the Global Fund’s stakeholder groups, disease areas and geographic regions2.

Participants

The Partnership Forum 2008 welcomed a total of 450 participants, including staff of the Global Fund Secretariat3.

The 395 non-Secretariat participants came from across the Global Fund’s constituencies. The largest proportions (48 percent and 24 percent) came from civil society (including developing country nongovernmental organizations, developed country nongovernmental organizations, communities and faith-based organizations) and government (from donor as well as implementing countries and including parliamentarians). Other participants represented international organizations, the private sector, foundations, academia and the media.

The participants came from 104 countries. The largest proportions (18 percent) came from the local West and Central Africa region. Other regions – from Eastern Europe to Latin America and the Caribbean – were also represented.

In terms of disease areas, 40 percent of the participants focus on HIV, seven percent on TB and ten percent on malaria, while 39 percent are involved in cross-cutting work and four percent in health systems strengthening.

Almost half of the participants did not have any current involvement in the formal structures of the Global Fund. The remainder included people involved in Country Coordinating Mechanisms, Principal Recipients, sub-recipients, Local Fund Agents, Global Fund Board, committees, technical partners and Friends of the Fund.

In many cases, the attendance figures achieved the targets set by the Steering Committee. However, in some instances, these could not be met. This was due to a number of challenges, including that the Partnership Forum coincided with the festival of Eid al-Adha (affecting the participation of Muslim colleagues) and followed the closure of international airports in Thailand (affecting participants from the Asia region).

The majority of the participants funded their own attendance. However, 133 people – including 83 from civil society – were funded through the Partnership Forum 2008 budget.

1 Please see Annex 3 for full list of members of the Steering Committee.
2 Please see Annex 3 for a full list of members of the Facilitation Team.
3 Please see Annex 2 for a detailed breakdown of participants.
Program and methodology

The program for the Partnership Forum 2008 is shared in Annex 1 of this report.

The first day of the Partnership Forum (Monday 8 December) featured a series of information clinics. These aimed to get participants “up to speed” on key areas of the Global Fund’s work:

- Global Fund architecture
- Technical assistance
- Country-level partnerships
- Capacity development
- Global Fund governance
- Global-level initiatives
- Program implementation

The first day culminated in an opening ceremony presided over by Cheikh Hadjibou Soumare, Prime Minister of the Republic of Senegal.

The second and third days of the Partnership Forum (Tuesday 9 and Wednesday 10 December) combined plenary sessions (based upon the overall theme of the Partnership Forum and exploring broad issues relating to the Global Fund) with a series of breakout sessions (with groups of approx. 80 participants focusing on the selected sub-themes). The Partnership Forum ended with a closing ceremony in the presence of Safiatou Thiam, Minister of Health of the Republic of Senegal.

The program also provided the participants with two opportunities for networking. The first took place among constituencies (communities, private sector, etc). The second took place among those interested in the same thematic areas (human rights, integration of HIV/sexual and reproductive health and rights, etc).

The Partnership Forum was carried out using a set of suggested “ground rules”. These emphasized that the participants should participate actively and openly, but also with respect – acknowledging each other’s different expertise, levels of knowledge and perspectives.

The Partnership Forum’s plenary sessions benefitted from full interpretation into the six UN languages (Arabic, Chinese, English, French, Russian and Spanish). The breakout sessions offered interpretation in three languages (English, French and Spanish).

Building upon the 2008 e-Forum

The meeting in Dakar formed a central part of the Partnership Forum process in 2008. The process also featured extensive online discussions carried out through an e-Forum. This took place from April to October 2008 and was moderated in four languages (English, French, Russian and Spanish). More than 2,000 messages were posted by 476 participants from 112 countries on the same themes which were later debated in Dakar. A full report is available on the Global Fund website.

---

4 Presentations from the information clinics are available at: www.theglobalfund.org/en/partnershipforum/2008/meeting/
Overarching theme

The overarching theme of Partnership Forum 2008 was: 
*Listening to the Voices: Stronger and more effective partnership for sustained impact.*

This theme aimed to reflect that the Global Fund is a partnership – between governments, civil society, the private sector, affected communities and technical partners, among others. This partnership informs the division of labor between the Global Fund and other international, multilateral, bilateral and national actors. It is expressed throughout the different levels of the Global Fund’s work. This ranges from the way in which proposals are developed and programs are implemented at the country level to the way in which policy, operational and funding decisions are taken in the Global Fund’s governing bodies.

The Partnership Forum 2008 aimed to “listen to the voices” to identify ways to increase and improve how the different public and private partners of the Global Fund work together on a daily basis at all relevant levels.

Sub-themes

In turn, the overarching theme of Partnership Forum 2008 was translated into five sub-themes. These were identified by the Steering Committee as critical to the current and future direction of the Global Fund. The themes were:

- Partnership and gender (women and girls)
- Partnership and gender (sexual minorities)
- Partnership and demand
- Partnership and coordination
- Partnership and implementation

During the Partnership Forum, participants were asked to identify one of these sub-themes to discuss in detail. Summaries of the presentations made and the issues discussed in those groups are shared in the following pages. They also present the approximately five priority recommendations to the Board of the Global Fund that each group was asked to put forward to the closing ceremony.

---

7 All of the presentations from the thematic sessions are available at: www.theglobalfund.org/en/partnershipforum/2008/meeting/
“The Global Fund is not the only place where we create partnerships, but it’s the one where we have actually been able to do that differently – to set the pattern and learn. Maybe it’s the place where we, more than anything, have learned to listen…We have seen that coming together with these different identities, with these concerns, with these reflections, with these commitments and drives, does not mean that we should all be more and more similar – that we all should go from a colorful partnership to a grey tone. We talk about a partnership where we can maintain our identities, but where we can make better sense of those identities – by having them fit together, by creating synergies.”

Sigrun Møgedal
HIV/AIDS Ambassador, Norway

“The Partnership Forum is a type of relationship of equals among different parties, based on mutual trust. It goes without saying that we all have to share responsibility, to maintain a common objective, to improve health. This partnership is extensive…and I believe that each partner has to be satisfied, be motivated, to continue forward. We have to have a culture of good governance, of transparency and of performance.”

Joseph André Tiendrebeogo
Ministry of Health, Burkina Faso
PARTNERSHIP AND GENDER: WOMEN AND GIRLS

Introduction to theme

Within the Partnership Forum 2008, the discussions on “Partnership and Gender (Women and Girls)” were based upon an understanding that:

The Global Fund aims to ensure that the programs it supports appropriately address the needs of women and girls, men and boys as well as sexual minorities, in order to ensure real impact on the three epidemics of AIDS, TB and malaria. To this end, the Global Fund has developed a gender strategy to ensure gender equity and equality and, in a closely linked process, a strategy to better take account of the specific situations of sexual minorities. Given the disproportionate burden placed on women and girls in societies affected by these diseases, the strategy identifies transformative actions which the Global Fund can take, within its financing model and role, to ensure greater impact for women and girls. Similarly, the particular challenges faced by sexual minorities and other marginalized groups are reflected in a targeted strategy to ensure their challenges, especially as they relate to the right to health, are addressed.

Discussions focused on the role of the Global Fund in supporting, encouraging and promoting gender-sensitive programs.

Sessions at the Partnership Forum 2008

The sessions were facilitated by Amakobe Caroline Sande (Consultant, South Africa) and Alejandra Trossero (International Planned Parenthood Federation, UK).

The sessions included three presentations. The first – Overview Of Gender (Women And Girls) – was given by Marijke Wijnroks, Ministry of Foreign Affairs, the Netherlands. This provided an update on the Global Fund’s Gender Equality Strategy – outlining its process, aims and key intervention areas. It explained that, although the strategy was approved at the Eighteenth Board Meeting, the Board is keen to receive input about its implementation. It also emphasized that the strategy responds to the specific mandate of the Global Fund – a financing mechanism that cannot necessarily address the more structural causes and manifestations of gender inequality.

The second presentation – Gender Empowerment And Effective HIV Responses in the Arab Region – was made by Khadija Moalla, UNDP/HARPAS, Egypt. This provided a case study on why gender-sensitive approaches are particularly vital in the Arab region. It gave examples of effective responses that focus on women’s leadership and rights and that work in collaboration with religious leaders and communities, ensuring culturally appropriate transformative approaches. Meanwhile, the third presentation – Building Gender-Orientated Services In Russia — Problems And Opportunities – was given by Anya Sarang, All-Russian Harm Reduction Network, Russia. This provided a case study on interventions to support women drug users who are highly vulnerable to HIV. It outlined good practices such as peer counselling. It also shared lessons, such as the need to strategize gender approaches at the design stage of programs and to increase the systematic involvement of women who use drugs.

Key issues raised

During their discussions, the participants identified the following major challenges in relation to the Global Fund’s work on gender (women and girls):

1. Proposal development and review process

The key issues included that:

- The Global Fund has conducted a portfolio review on the inclusion of a gender component in existing proposals from Rounds 1 to 7. While a good number of proposals did include gender, the component was often lost at the planning/implementation stage, with no concrete activities or budgets allocated.

- Gender-related guidelines need to be developed and strengthened, using emerging evidence on what does and does not work. Countries are often unclear about what can and cannot be included in proposals. This is an opportunity to shape what we want to see on the ground, for example by including an extended list of 10 to 12 interventions that could be considered.

- Women’s organizations should be consulted and involved in all levels of decision-making and processes, from strategic planning to proposal development, implementation and evaluation. Beyond Country Coordinating Mechanisms, their participation should also be invited at the level of Principal Recipients and sub-recipients.

- Sex workers are often not included in Global Fund mechanisms and face challenges to be part of this process. They request the inclusion of interventions that go beyond condom distribution and address other areas, such as increasing the literacy rate among sex workers.
2. Partnership advocacy and technical support
The key issues included that:

- It is important for knowledge to be made available to all relevant country-level stakeholders on the Gender Equality Strategy and revised guidelines.

- It is important to involve stakeholders who are not traditionally involved in proposal development or Country Coordinating Mechanism structures. These include sector ministries (such as gender and education) and parliamentarians.

- Countries should be asked to justify why their Global Fund proposals are not gender-sensitive. They should further be asked to explain what processes were undertaken to do a gender analysis and prioritize issues.

- Partners have an important role in the technical assistance process to build the capacity of civil society organizations and women’s groups. A number of initiatives have been tried, which the Global Fund should document and share with others.

- The Global Fund should develop a Memorandum of Understanding with different partners - especially those with in-country presence – to facilitate better collaboration, effectiveness and accountability within gender initiatives.

3. Accountability, incorporating monitoring and evaluation
The key issues included that:

- Accountability is an issue at every level, from the country level to the Board and the Secretariat.

- There are very few indicators to measure gender components and monitor the progress of the strategy. The Global Fund Secretariat should join forces with other partners to develop gender indicators, with future disbursements linked to successful performance.

- Country Coordinating Mechanism membership should be broadened to include parliamentarians, wider civil society and, in particular, representatives of women’s and other vulnerable groups.

- The Global Fund Secretariat should play a stronger role in monitoring how Country Coordinating Mechanisms implement recommendations about their functioning and composition. In particular, conflict of interest issues should be addressed as a matter of urgency.
RECOMMENDATIONS TO THE BOARD OF THE GLOBAL FUND ON PARTNERSHIP AND GENDER (women and girls)

1. That the Board instruct the Secretariat to ensure that the implementation plan for the Gender Equality Strategy is produced in consultation with women’s organizations and other groups working on gender equality, and that it has specific, measurable goals and objectives with indicators to track progress by the Global Fund and countries against defined benchmarks and within defined timeframes. This implementation plan should reflect progress at the country level, in particular linking disbursements with outcomes for girls and women.

2. That the Board instruct the Secretariat, in consultation with women’s groups and other groups working on gender equality, to produce guidance on the kinds of activities that the Global Fund will champion and finance and that are needed to serve women and girls, drawing on existing evidence and practice.

3. That the Board should ensure that existing and new partnership agreements of the Global Fund include a component on technical assistance and capacity building for programs for women and girls, including appropriate accountability mechanisms. These arrangements should be coordinated to facilitate access from countries.

4. That the Board instruct the Secretariat to encourage and support country implementers to request financial assistance in their proposals to access in-country and international expertise on programming for women and girls. This will allow countries to produce strong needs assessments, develop national strategic plans, review and revise existing funded programs and establish specific indicators that will support the achievement of the Gender Equality Strategy for women and girls.

5. That the Board should formalize the setting up of an Advisory Group comprising women’s organizations and other groups working on gender equality to support the implementation of the Gender Equality Strategy.
Introduction to theme

Within the Partnership Forum 2008, the discussions on “Partnership and Gender (Sexual Minorities)” were based upon the same understanding that informed the sessions on “Partnership and Gender (Women and Girls”).

Sessions at the Partnership Forum 2008

The sessions were facilitated by Andy Seale, the Joint United Nations Programme on HIV/AIDS (UNAIDS), South Africa and Arturo Sanabria (John Snow Incorporated/DELIVER, Zambia).

The sessions featured three presentations. The first – The Global Fund, Gender (Sexual Minorities) and Partnership – was given by Sam Avrett, Funders Concerned About AIDS, USA. This summarized who “sexual minorities” are, why they are vulnerable and the evidence of their needs. It described the role of the Global Fund and the development of its strategy, with the Policy and Strategy Committee having reviewed a draft Gender Equality Strategy including a brief component on sexual minorities.

The second presentation – Latin America and Caribbean Network of Trans People – was made by Marcela Romero, Latin American Transsexual Network, Argentina. This provided a case study on why the trans community is particularly vulnerable, due to reasons of legislation, stigma and discrimination. It outlined the challenges to address in Global Fund programs, such as increasing the community’s visibility and building its knowledge about legal instruments. The third presentation - Challenges In Developing Strong Global Fund Proposals Related to Sexual Minorities (And What To Do About These Barriers) – was given by Robert Carr, Caribbean Vulnerable Communities Coalition, Jamaica. This gave a case study of a regional initiative to support highly vulnerable populations, including men who have sex with men and transgender people. It raised, and suggested answers to, key questions for the development of such a proposal to the Global Fund: who should lead, who should provide the technical input, who should be accountable?

Key issues raised

During the discussions, the participants highlighted that:

- People can experience discrimination based on their real or perceived sexual practices, sexual orientation and gender identity. Sexual minorities can include: gay men and other men who have sex with men; lesbian women and other women who have sex with women; transsexual, transgender and intersex individuals; female and male sex workers and heterosexual people who have rectal sex.

- Some sexual minorities - such as transgender people, who are also often also sex workers - experience particularly high levels of prevalence, face threats of violence and a much-reduced life expectancy. Peer support is particularly vital, as well as including all sexual minority groups (especially those that are less visible) in a rights-based approach to the three diseases.

- Sexual minorities exist in every country and often experience high rates of HIV. In addition, they are often denied access to health and human rights through the interpretations of laws or religion or because of social institutions and cultural traditions. This can include hostility, incitement to violence and criminalization. Advocates argue for full access to health and other services, for human rights and freedom from discrimination. This is supported by an increasing amount of evidence around sexual minorities and their needs in relation to the three diseases.

- Regional approaches can be particularly effective for supporting sexual minorities – by enabling communities to work beyond the restrictions of national boundaries and to focus on structural issues as well as outreach to individuals. They can build on community-led strategy development, examining appropriate issues of policy, interventions and capacity, while also maximizing existing “entry points” (both governmental and inter-governmental). They can also ensure that budget allocations are sufficient to enable success.

- The Global Fund is seen as important in supporting sexual minorities, but with significant unmet potential. Subsequently, the participants discussed “what could work better” in relation to the Global Fund and its support to sexual minorities. The issues included that:

  - Regions have very different experiences and issues relating to sexual minorities. Regional organizing is important, but there can be challenges to including all countries. In some regions, the UN has played an important convening role among sexual-minority coalitions.

  - Technical support and strategic information have particularly important roles in responses relating to sexual minorities. It is also vital that programs for sexual minorities be funded appropriately in order to achieve the scale that is required.

  - There is a tension in promoting the involvement of sexual minorities in countries that criminalize same-sex practices. Is it irresponsible to put people in the spotlight in a social context which does not allow them “safe space”?

  - There are challenges around programming for groups such as women who have sex with women in terms of evidence and visibility in relation to the three diseases. Meanwhile, anal sex may or may not prove to be an important focus for HIV prevention approaches, whoever is involved in the practice.

  - Language around sexual minorities is important. But the related discussions should not derail the shared vision of moving forwards on this agenda.

The participants identified the following issues to put forward to the Global Fund Board:

- The composition of Country Coordinating Mechanisms should be reviewed, recognizing the imbalance with governments and explicitly ensuring the inclusion of all groups with prevalence of five percent or higher, regardless of the type of epidemic.

- Regions have very different experiences and issues relating to sexual minorities. Regional organizing is important, but there can be challenges to including all countries. In some regions, the UN has played an important convening role among sexual-minority coalitions.

- Technical support and strategic information have particularly important roles in responses relating to sexual minorities. It is also vital that programs for sexual minorities be funded appropriately in order to achieve the scale that is required.

- There is a tension in promoting the involvement of sexual minorities in countries that criminalize same-sex practices. Is it irresponsible to put people in the spotlight in a social context which does not allow them “safe space”?
• There should be a routine review and assessment of Country Coordinating Mechanism expertise in relation to sexual minorities/gender issues, as well as of the level of participation of sexual minority groups. This should include regular mapping and analysis of Principal Recipients and sub-recipients.

• Consultative meetings relating to the Global Fund should involve all key and relevant groups.

• The Global Fund should welcome human rights-based proposals that seek to influence the enabling environment.

• The criteria for reviewing non-Country Coordinating Mechanism proposals should explicitly refer to the challenges of vulnerable groups that are criminalized. Meanwhile, regional proposals for sexual minorities should be able to be processed without Country Coordinating Mechanism approval. There should be recognition of the strategic importance of non-Country Coordinating Mechanism regional approaches and the need for clear criteria to guide regional/country coalitions – which are different to country-level partnership and should be recognized in the face of countries where organizations are criminalized.

• Technical partners of the Global Fund that support community groups should be recognized as critical to the “funding partnership” in relation to sexual minorities.

• The Global Fund should review the appropriateness of relevant terminology and, specifically, the use of the term “sexual minorities”. Meanwhile, proposals should seek to have strong language on the evidence regarding sexual minorities in relation to AIDS, TB and malaria.
RECOMMENDATIONS TO THE BOARD OF THE GLOBAL FUND ON PARTNERSHIP AND GENDER (sexual minorities)

The Partnership and Gender (Sexual Minorities) group developed the following recommendations aware of, and to support the review and strengthening of, other recommendations made during consultations carried out in 2008 and captured in the draft strategy under review by the Policy and Strategy Committee.

PREAMBLE: The discussion group assumes that, in taking this important work forward, the Global Fund will ensure that terminology is inclusive, in other words, ensuring that “sexual minorities” refers to all people whose sexual orientation, gender identity and/or sexual behaviors do not conform to majority norms and values including: men who have sex with men, women who have sex with women, individuals who are transgender, transsexual and intersex. Sexual minorities can also include marginalized heterosexual behaviors and gender roles, including non-monogamous sex and sex work. The group also assumes that the Global Fund will ensure that the draft sexual minorities’ strategy is completed in a timely manner following a broad and clear consultation process. The strategy is expected to acknowledge and reflect the diverse regional experiences around sexual minority issues, including levels of criminalization and persecution.

1. INCLUSION That the Board strengthen Country Coordination Mechanism guidelines to ensure inclusion of all groups who are disproportionately affected by the three diseases, regardless of epidemic type. The Board is requested to commit to all Global Fund consultative meetings appropriately involving all key affected groups, particularly the underrepresented groups that include transgender people and women who have sex with women.

2. EVIDENCE That the Board require countries to work within the framework of “know your epidemic” and “know your response” strategies in their approach to the three diseases. National strategy applications that do not explicitly include sexual minorities should not be recommended for funding.

3. REGIONAL AND NATIONAL NON-COUNTRY COORDINATING MECHANISM PROPOSALS That the Board develop clear criteria and mechanisms to support the submission of regional and national proposals for sexual minorities and other criminalized, vulnerable and marginalized groups so that they do not need Country Coordinating Mechanism approval and to ensure that they will be accepted from countries which fall outside of country income eligibility criteria beginning with Round 9.

4. HUMAN RIGHTS AND AN ENABLING ENVIRONMENT That the Board ensure that the Global Fund shows leadership in recognizing the importance of decriminalization as an essential element in responding to the three diseases. The Board is requested to create more scope for human rights-based proposals that seek to influence the enabling legal and policy environment for successful outcomes for the three diseases in relation to criminalized and vulnerable groups. Proposals should require an analysis of legal and policy barriers to implementation of effective programs for sexual minorities and a plan to address those barriers. Indicators should be developed to track the impact of these interventions.

5. ENHANCING THE CAPACITY OF GLOBAL FUND SECRETARIAT AND STRUCTURES TO WORK MORE EFFECTIVELY WITH SEXUAL MINORITIES That the Board ensure enhanced capacity and competence of the Global Fund Board, Secretariat, Technical Review Panel, Technical Evaluation Reference Group and other structures in relation to sexual minorities. In particular it is asked to routinely assess levels of expertise and competence on areas of sexual minorities within the Secretariat and within key Global Fund structures including the governance and Country Coordinating Mechanism structures and to have an appropriate training and sensitization plan in place by end of 2009.
PARTNERSHIP AND DEMAND

Introduction to theme

Within the Partnership Forum 2008, the discussions on “Partnership and Demand” were based upon an understanding that:

The mission of the Global Fund is to support a significant scaling up of successful programs in order to dramatically decrease the number of lives and livelihoods lost to the three diseases. To do so, the Global Fund on the one hand has to provide funding structures that facilitate such scaling up, and on the other hand to raise sufficient resources to meet the demand.

The Global Fund, jointly with its stakeholders and partners, has reviewed the way in which it works to help countries to develop high-quality programs that are ambitious and scaled up. The different options for Global Fund support for programs have been streamlined, and timelines for grant applications and proposal review have been adjusted in response to the experiences made to date. In order to meet the need that exists in countries, donors have made it clear that they are ready to support scaled-up proposals if the technical quality of those proposals is good and the implementation is feasible.

Discussions will focus on measures the Global Fund and/ or its partners and stakeholders could take to support countries in taking advantage of the new funding structures.

Sessions at the Partnership Forum 2008

The sessions were facilitated by Peter van Rooijen (International Civil Society Support, The Netherlands) and Liza Kimbo (Netmark, Kenya).

The sessions included four presentations. The first – Overview And Update On Demand Creation and the Global Fund – was given by Asia Russell, Health GAP (Global Access Project), USA. This outlined what “demand” is and the gap between estimated global needs and demands expressed to the Global Fund. It emphasized current/future opportunities to express demand, from dual-track financing to National Strategy Applications. It also summarized the challenges involved, such as how to increase resource mobilization and address weak health systems. This presentation was followed by Expression of Demand: Meeting The Challenges, Finding Opportunities by Jojo Merilles, Tropical Disease Foundation, Philippines. This provided a case study on demand creation in addressing multidrug-resistant TB. It highlighted the lessons learned, including the need to combine health systems strengthening with community systems strengthening, and the need to develop strong strategies for scale-up that are based not only on political leadership but also on ownership. The third presentation – Support to Generate Demand for Universal Coverage – was given by Melanie Renshaw, Roll Back Malaria/UNICEF. This outlined the work of the RBM Harmonisation Working Group to lay the policy and operational groundwork for building demand for malaria responses. It presented a package of support offered for Rounds 7 and 8, including country capacity assessments, training of country teams, “mock” Technical Review Panels and expert reviews.

Finally, the fourth presentation – Demand Creation and Resource Mobilization – was given by Christoph Benn, the Global Fund, Switzerland. This summarized the challenges of matching demand and supply in programs for the three diseases. It emphasized the urgency of the situation – with unprecedented demand expressed in Round 8 and even higher expectations for 2009-2010. It posed key questions, such as how to mobilize additional pledges from the public sector, encourage the role of the private sector and maximize innovative financing.

Key issues raised

Based upon the presentations, the participants firstly discussed what countries can do - and what global partners can contribute - to generate high-quality demand and to expand/improve multi-stakeholder collaboration in submissions to the Global Fund. The key issues included that:

- While there have been successful strategies for building from small-scale community pilots to national-level interventions, such processes require different levels of capacity, ownership and approaches to sustainability.
- Challenges have been experienced in relation to language/ translation – in relation to both country proposals submitted to the Global Fund and communication from the Global Fund, including the Technical Review Panel, to country-level stakeholders.
- Community systems strengthening is important for enhancing civil society involvement in the development and implementation of proposals. Meanwhile, the transparency and communication of Country Coordinating Mechanisms require improvement throughout.
- Successful technical support efforts have been led by RBM, UNAIDS and Stop TB. But it is important to examine the costs involved and to strengthen capacity at the country level.
- There is both a need and the potential to expand partnerships through other types of stakeholders such as trade unions.

The second discussion focused on how resource mobilization can be leveraged at the global and country levels to ensure that sustained financial targets are met. The key issues included that:

- In response to the funding gap, there is an urgent need for innovative and creative action.
- The private sector has made important efforts in resource mobilization, but these have been focused globally. There is great potential for tapping into their capacity at the country level.
- There are promising examples of partnerships with faith-based organizations in raising capital and increasing the sector’s involvement.
In addition to the priority recommendations that the “Partnership and Demand” group was invited to share in the closing plenary, the members strongly supported the following actions:

- **INNOVATIVE FINANCING MECHANISMS:** The Board should strongly support the recent engagement of the Global Fund with private institutional investors to establish an innovative financing mechanism in the form of an Investment Fund. Such an investment fund provides private institutional investors with returns on their investments and, at the same time, helps them to contribute new and additional resources to the fight against AIDS, TB and malaria.

- **DEMAND DRIVERS:** The Global Fund – in collaboration with its partners, including technical support providers (e.g., the Technical Support Facility, the Global Implementation Support Team and the Civil Society Action Team) – should develop mechanisms to provide the requisite information to all relevant stakeholders at the country level to build understanding of “demand drivers”. This includes information about: epidemiology; stakeholders; increased civil society empowerment; monitoring and evaluation processes; translating need into demand; best practices in proposal development; and up-to-date information on (changes in) procurement policies.

- **PROPOSAL DEVELOPMENT:** The Global Fund should encourage the development and use of technical capacity at the country level above reliance on “professional” proposal writers. It should stimulate high-quality innovative and technically sound proposals that build on existing approaches.

- **IMPROVED FLOW OF FUNDS:** The Global Fund should enable an iterative dialogue between Country Coordinating Mechanisms and the Technical Review Panel, where Country Coordinating Mechanisms can re-submit improved proposals after three months (i.e., four approval windows per year). More generally, the Global Fund should simplify and accelerate access to financing at all stages at the same pace that demand is expressed.

- **REGIONAL PROPOSALS:** On sensitive issues (such as sexual minorities and other discriminated groups), new guidelines should be produced urgently. These should aim to maximize access to Global Fund financing for regional proposals that especially address sensitive issues, for example by lifting the requirements that all Country Coordinating Mechanisms in a region need to sign on to such a proposal.

- **CLEAR DEMAND AND EFFECTIVE RESOURCE MOBILIZATION REINFORCE EACH OTHER:** The Global Fund should continue to encourage and support countries to express their demand in the most realistic and predictable manner possible in order to strengthen its resource mobilization efforts.

- **PARTNERSHIP OF THE GLOBAL FUND WITH THE WORLD HEALTH ORGANIZATION (WHO) AND UNAIDS:** The Global Fund and UNAIDS should organize an annual civil society assembly about issues relevant to the sector; provide support to civil society representatives on Country Coordinating Mechanisms and publish technical support resources for civil society online. WHO could be asked to pilot the “gap analysis component” (including the required technical support) in relation to proposal development.

- **PUBLISHING OF FURTHER RESOURCES:** Building on its commitment to transparency, the Global Fund could publish further documents online. These include the minimum requirements submitted to Country Coordinating Mechanisms, annual work plans of Country Coordinating Mechanisms and reports by Principal Recipients/Sub-recipients forwarded to Geneva.
RECOMMENDATIONS TO THE BOARD OF THE GLOBAL FUND ON PARTNERSHIP AND DEMAND

1. That the Board and the Secretariat adopt an emergency resource mobilization strategy, including communicating publicly the full and detailed financing gap and the timeline on which new pledges are needed, as the credibility of the Global Fund as a sustainable and predictable financing mechanism is at stake because of the gap in pledges of approximately US$ 5 billion to meet the projected demand in 2009 and 2010 (including Rounds 9 and 10 and National Strategy Applications). We strongly recommend that the Board take every available opportunity to encourage new pledges for 2009 and 2010, including the 2009 Mid-Term Review, an early replenishment meeting in 2010 and rigorously exploring innovative financing mechanisms.

2. That, recognizing that increase in demand also depends on the effective functioning of Country Coordinating Mechanisms, the Global Fund should work more strongly with its partners to monitor and validate the in-country Country Coordinating Mechanism oversight role through, for example, mechanisms for increased transparency, democratic election processes and increased and equal stakeholder inclusiveness and participation (like trade unions, sexual minorities), as a major instrument for increasing demand.

3. That the Global Fund urge and enable Country Coordinating Mechanisms to actively promote partnership with the private sector for program co-creation, co-investments and capacity development. To this effect, enhanced approaches should be implemented and lessons learned shared by 2010 to inform Global Fund policy. Likewise, the Global Fund should incentivize the private sector to contribute core competencies and resources to the Global Fund and country programs. To this effect, innovative global and in-country initiatives need to be developed (with a range of approaches including fiscal measures) to inform a 2010 Board decision.

4. That the Global Fund develop and implement a communication and media strategy that supports all phases of proposal development and identifies critical factors for successful proposals. The Global Fund is asked to ensure that all relevant stakeholders participate in the Country Coordinating Mechanism throughout the grant development process, including grant signing and publicizing grant information. The Global Fund is urged to ensure implementation of National Strategy Applications to commence in Round 10 in conformity with the Paris Declaration on Aid Effectiveness.

5. That, as resources for global health should be directed to aid modalities that are transparent, accountable and produce results, the Global Fund should advocate for this in allocation of official development assistance for health by donors. In this context, the Board should (a) encourage donors to support transparent reporting on the impact of aid on health, which enables stakeholders to fully participate in policy dialogue and monitoring donor and partner country performance; and (b) encourage Country Coordinating Mechanisms to engage in health sector policy dialogue and other national planning and budget allocation discussions.

6. That, in order to increase the sustainability and predictability of the resources, the Resource Mobilization Task Team should explore options to develop a mutually agreed global burden-sharing framework for resource mobilization in line with the demand.
PARTNERSHIP AND COORDINATION

Introduction to theme

Within the Partnership Forum 2008, the discussions on “Partnership and Coordination” were based upon an understanding that:

The partnership environment and mechanisms underwent a comprehensive review as part of the Five-Year Evaluation of the Global Fund. The Global Fund will now develop a partnership strategy which attempts to create a coherent approach to this area of work and establish responsibilities and accountabilities for all partners.

To contribute to this strategy, discussions will, with reference to the recommendations presented in the Five-Year Evaluation study area on partnership, focus on the appropriate division of labor between the Global Fund and its partners at the global, regional and country levels, including governments, multi- and bilateral organizations, civil society and the private sector, as well as measures that the Global Fund should take to increase the efficiency, effectiveness and accountability of its partnerships.

Sessions at the Partnership Forum 2008

The sessions were facilitated by Papa Moussé Ndiaye (Directorate Military Health Support Services, Senegal) and Kieran Daly (International Council of AIDS Service Organizations, Canada).

The sessions included three presentations. These started with Overview of Partnership and Coordination by Sigrun Mögedal, HIV/AIDS Ambassador, Norway. This summarized the Global Fund’s vision of partnership and highlighted issues emerging from the Five-Year Evaluation (e.g., the need for clearer roles/ responsibilities of partners, especially for technical assistance and grant implementation). It also outlined the process to develop a partnership strategy, with a draft to be presented to the Policy and Strategy Committee in March 2009.

The second presentation – Learning from Partnership and Coordination in the Philippines – was given by Luz Escubil, Tropical Disease Foundation, Philippines. This gave a case study of coordination of a country-level response to the three diseases. It emphasized the need for a division of labor in key areas (e.g., grant oversight, technical assistance) and the benefits of Global Fund processes (e.g., Principal Recipient-sub-recipient system, inclusion of affected communities in Country Coordinating Mechanisms). Its lessons included the need for clear roles, strong leadership and transparency. The third presentation – Real Life Practice: Putting Coordination into Practice – was by Catherine Bonnaud, Agence Française de Développement, France. This gave a donor perspective of global-level coordination and highlighted Global Fund successes (e.g., “atypical” Board, mobilization of civil society) and challenges (e.g., translating political commitments to agencies’ technical and country levels). The lessons include the need to further coordinate a division of labor, especially to address key gaps (e.g., in harmonization of monitoring and evaluation).

Key issues raised

The sessions’ discussions were framed around: effective division of labor between the Global Fund and other global actors; appropriate measures for the Global Fund to take to ensure the effectiveness of its partnerships for program development, implementation, resource mobilization and advocacy and effective working relationships between the Global Fund Secretariat and country-level actors. The key issues raised included:

• How to build strong national-level partnerships though common aims and values and greater clarity of roles, responsibilities and accountabilities.

• The need to develop a clearer division of labor of partners from the global, regional and national levels, especially in the context of technical support.

• The need for donor alignment and multilateral harmonization with national processes, strategies and structures.

• The role of clear accountability frameworks that work at the country level. Also, the need for appropriate national accountability frameworks beyond Country Coordinating Mechanisms (including national legislature and parliaments) while also supporting the important role of Country Coordinating Mechanisms in oversight.

• How to ensure that Global Fund communication is accessible to all stakeholders.

Subsequently, the discussions focused on three key areas that, in turn, shaped the Partnership and Coordination group’s recommendations to the Global Fund Board:

1. Governance and accountability

The key issues included that:

• There is a lack of mechanisms that result in “heads to roll” in terms of clear lines of responsibility to identify problems and address failing grants.

• The performance measurement mechanism needs to be changed in order to better measure outcomes and impact.

• There is a lack of clarity about who is responsible for what at the country level and a need for stronger methods for holding each partner to account.

• Governance structures at the national level (Country Coordinating Mechanisms) require review.

• Many partners and stakeholders do not get the information they need - due to lack of clarity about who needs what and whose role it is to communicate. Language can also be a barrier.

• There is a need to use formal parliamentary structures and involve parliamentarians to strengthen accountability and oversight.
Regional Coordinating Mechanisms are less effective because they cannot function according to the Country Coordinating Mechanism model. This impacts on the success rate of regional proposals and needs attention relating to architecture.

2. Technical support
The key issues included that:

- There is a lack of clarity about the role of the Secretariat in coordinating technical support for grant recipients and Country Coordinating Mechanisms. Coordination is currently seen as not working, especially among UN agencies, and there is still a lack of funding for the provision of technical support and longer-term capacity development.

- Where there is a mismatch between proposals/grants and epidemics, there is a role for other partners to provide better technical guidance.

- The full spectrum of national, regional and global technical support providers need to be engaged, including nongovernmental organizations, academia, the private sector, UN agencies and horizontal government collaboration.

3. Coordination and alignment with national processes
The key issues included that:

- Contracts are needed between partners (and all stakeholders, including civil society) to define roles and responsibilities, such as for developing, reviewing and monitoring proposals.

- There is a need for better coordination of donors and bilateral engagement at the national level, with clearer roles and responsibilities.

- There can be conflicts of interest for technical support partners that are engaged in proposal development, as well as in subsequent stages (of proposal verification and implementation).

- A division of labor is needed among multilaterals, and with the Global Fund, through Memoranda of Understanding. Where such agreements exist, they need to be fully translated into action.

- Various stakeholders are not consulting with each other or with national planning, health and other ministries, as well as coordination structures.

Overall, it was also noted that there were some important successes in relation to coordination. These included that there are good examples of communication between Fund Portfolio Managers-Principal Recipients-Local Fund Agents, although these are dependent on individuals and not measured against performance. Also, the Country Coordinating Mechanism concept works well (while needing support to ensure coordination, good governance, communications and clarity of roles and responsibilities), as does the overall partnership model (in countries where the stakeholders are clear about their roles and responsibilities).
RECOMMENDATIONS TO THE BOARD OF THE GLOBAL FUND ON PARTNERSHIP AND COORDINATION

GOVERNANCE AND ACCOUNTABILITY

1. That the Board task the Secretariat to develop an accountability framework, process and action plan that identifies key triggers to prevent and solve failing grants, that defines who is responsible to act and that will require action by the Secretariat, Country Coordinating Mechanism, partners and implementers.

2. That the Board recommend to Country Coordinating Mechanisms and Regional Coordinating Mechanisms to develop a governance manual to define roles and responsibilities, with terms of references and related accountability mechanisms,
   • of Country Coordinating Mechanism and Regional Coordinating Mechanism members
   • of other coordinating mechanisms (e.g., AIDS, TB, malaria, health) and
   • of partners (e.g., multilaterals, bilateral, international and regional organizations, parliamentarians, national civil society and private sector).

3. That the Board request the Secretariat to specify in the communications strategy the communication flow requirements between all stakeholders and partners, in-country and with the regional and global levels, in all UN languages, to ensure greater access and transparency of information. Board to urge Country Coordinating Mechanisms to use parliamentary processes to report and account on expenditure, performance and future projections of Global Fund grants

TECHNICAL SUPPORT

4. That the Board request the relevant Board Committee (or sub-committee) to review and identify specific action required by the Global Fund to address the lack of coordination and funding of technical support provision and capacity development for grant recipients and Country Coordinating Mechanisms from country, regional and international partners (including, but not exclusive to, nongovernmental organizations, academia, the private sector, the UN agencies and horizontal government collaboration).

BROADER COORDINATION

5. That the Global Fund Secretariat update the grant proposal application form to require countries to articulate how they will maximize opportunities to integrate their responses to the three diseases and with broader health systems strengthening, community systems strengthening, and sexual and reproductive health rights activities. Requests the Policy and Strategy Committee to develop a strategy and recommendations for the engagement of Country Coordinating Mechanisms in the International Health Partnership Plus country compact process. (Recommendation discussed, but not reviewed by all).
PARTNERSHIP AND IMPLEMENTATION

Introduction to theme

Within the Partnership Forum 2008, the discussions on “Partnership and Implementation” were based upon an understanding that:

As a funding mechanism, the Global Fund does not work directly on implementation with countries. Instead it relies on a wide partnership to support and facilitate the implementation of grants so that the funded services and interventions are effectively delivered. The Global Fund’s various disbursement, oversight and review processes, though, have a profound impact on the way in which actors at the country level structure the implementation of their programs. It is important to capture best practice and good examples of successful implementation, to define the barriers and obstacles that impede implementation, and to develop measures to overcome these.

Discussions will focus on measures that have been and could be taken by the different partners – implementers, providers of technical assistance, the Global Fund Secretariat and Board – to increase the efficiency of program implementation

Sessions at the Partnership Forum 2008

The sessions were facilitated by Esther Tallah (Cameroon Coalition Against Malaria, Cameroon) and Raminta Stuikyte, Eurasian Harm Reduction Network, Lithuania).

The sessions included three presentations. The first – Update on Partnership and Implementation – was by Javier Hourcade Bellocq, International HIV/AIDS Alliance, Argentina. This summarized the Global Fund’s role in supporting implementation through partnership. It highlighted the related achievements (e.g., rapid start-up, high transparency, performance-based funding) and the impact of processes (e.g., relating to disbursement, oversight, grant review). It also shared the findings on implementation emerging from the Five-Year Evaluation and the e-Forum.

The second presentation – Global Fund Mechanism in Zambia – was by Karen Sichinga, Churches Health Association of Zambia, Zambia. This gave a case study of implementation in a country with multiple Principal Recipients and wide stakeholder involvement. The lessons included that such an approach is good for scaling up, supporting speedy disbursement and building the capacity of local organizations. The challenges include the insecurity of rounds-based funding and the time-consuming nature of Phase 2 transition procedures. The third presentation – Supply Chain Management: Tanzania Experience – was made by Cosmas Mwaifwani, Medical Stores Department, Tanzania. This provided a case study of a country with multiple grants and Principal Recipients, but one agency managing the procurement and supply of medical commodities. The challenges included delays in disbursements and inadequate infrastructure. However, improvements have been made, for example by increasing the efficiency of grant management and gaining funding from the Global Fund for storage, transport, etc.

Key issues raised

During the subsequent discussions, the key areas of concern to the participants included:

- The roles, capacities, transparency and interaction of, in particular, Country Coordinating Mechanisms and Local Fund Agents. There is a need to strengthen the capacity of Country Coordinating Mechanisms, particularly in relation to enhancing their grant oversight functions and addressing conflicts of interest - through the Secretariat and funding for Country Coordinating Mechanisms. The role of Local Fund Agents also requires further clarification, and their capacity in relation to public health management. Overall, transparency could be increased through a number of measures. While national/regional partners have an important role, these could also involve: attention to Global Fund policies (such as on the sharing of Local Fund Agent reports); engagement of parliamentarians; and attendance of Local Fund Agents at relevant Country Coordinating Mechanism meetings (as observers).

- Coordination among the range of partners (such as technical assistance providers, donors and cross-country partners), particularly at the country level and in relation to quality assurance.

- Health systems strengthening and community systems strengthening, including issues relating to the involvement of civil society.

- The roles and responsibilities of partners for procurement and supply management.

- The involvement of the private sector in Country Coordinating Mechanisms and grant implementation. There is a need to find strategic and meaningful ways to engage the sector, for example through co-investment initiatives and active involvement in proposal development.

- The integration and improved partnership relating to the responses to the three diseases, such as the alignment of AIDS, TB and malaria grants.

Subsequently, the discussions focused upon clarifying the key challenges in relation to partnership and implementation. These included:

- Conflict of interest in Country Coordinating Mechanisms, for example with members who are involved in Principal Recipients, sub-recipients or sub-sub-recipients. This issue is important not only for country partners, but also for donors.

- Key information (contracts with sub-recipients, Local Fund Agent documents, etc) not being available on the Global Fund website or distributed through Country Coordinating Mechanisms, and sometimes being only in English.
• Delays in funding disbursements (from the Global Fund and then between Principal Recipients and sub-recipients, and between sub-recipients and sub-sub-recipients) – which increases dependency between those stakeholders.

• Limited sustainability and security of rounds-based funding. The discontinuation of Global Fund resources (for example, due to an unsuccessful application or to a country becoming ineligible for Global Fund financing) can lead to the discontinuation of services for vulnerable groups and, in turn, can impact on prevention and mitigation of the three diseases.

• Civil society, particularly community-based organizations, lack strong capacity to be meaningfully involved and represented, especially in terms of consulting and communicating with their constituencies.

• The cycle of procurement and supply is long – creating problems in the planning of production (although it can be overcome with technical support).

• The need to address the ten percent cut (in some cases 25 percent) to Global Fund grants. Some participants propose that, rather than applying the cut, full grants should be provided to countries with quality proposals and high levels of implementation.

• The impact of losses due to the fluctuations of currencies, especially the American dollar.

• Within dual-track financing, the inter-dependency of Principal Recipients on each other's performance and the risk that, if one is performing slowly or poorly, the other is "penalized" as a result.

• Ongoing challenges in building and/or strengthening national capacities to manage Global Fund grants and provide technical assistance.

• Some Global Fund guidance is provided as recommendations, rather than being compulsory. As such, it is not necessarily implemented.

• There are challenges for securing technical assistance for cross-country initiatives, including the development of proposals.

• There is a lack of tools for monitoring Global Fund partnerships.

Throughout the Partnership and Implementation group's discussions, three key messages emerged particularly strongly. These were: the vital role of country partners in ensuring that Country Coordinating Mechanisms, Principal Recipients, etc. are operational and effective; the need to improve the sharing of good practice tools; and the need to recognize that different countries have different ways of organizing and resolving issues relating to grant oversight.
RECOMMENDATIONS TO THE BOARD OF THE GLOBAL FUND ON PARTNERSHIP AND IMPLEMENTATION

1. **CIVIL SOCIETY** That the Board of the Global Fund should dedicate a separate stream of funding in 2009 specifically for local civil society and community-based organizations to build their capacity to perform their various roles on the Country Coordinating Mechanism, which include representing their constituencies and performing oversight. Specific indicators should be developed and used to monitor the effectiveness of civil society engagement on Country Coordinating Mechanisms, starting with Round 10.

2. **TRANSPARENCY** That the Board of the Global Fund should improve the transparency of Global Fund-related processes by the end of 2009, specifically by:
   - Reinforcing and implementing the conflict of interest policy, including concrete sanctions, at all levels, by 2010.
   - Requiring the Country Coordinating Mechanism to publish and disseminate, including through the Global Fund website, the Country Coordinating Mechanism’s internal rules and procedures, meeting schedule, key decisions, calls for proposals, etc.
   - Making the templates of the reporting forms available in all six UN languages.

3. **COUNTRY COORDINATING MECHANISMS** That the Board of the Global Fund should further improve the capacities of Country Coordinating Mechanisms in 2009 by:
   - Significantly increasing the funding available to Country Coordinating Mechanisms to support secretariats and developing a comprehensive methodology to evaluate the amount of funding required by the Country Coordinating Mechanism Secretariats to perform their functions effectively.
   - Developing a plan for improving the capacity of Country Coordinating Mechanisms to perform their oversight, demand creation, and reporting functions based on documented best practices, and identify technical partners and mechanisms to implement the plan.

4. **PRINCIPAL RECIPIENTS** That the Board of the Global Fund should revise the Principal Recipient selection guidelines for Country Coordinating Mechanisms to give priority to national entities (including civil society) if they can demonstrate their capacity to comply with Global Fund requirements, by 2010. If national capacity does not exist, measures should be included in Global Fund grants to build such capacity.

5. **TECHNICAL ASSISTANCE** That the Board of the Global Fund should develop and implement mechanisms to encourage Country Coordinating Mechanisms to collaborate with technical assistance-providing partners present within countries to improve the quality of implementation. The Global Fund should develop tools to monitor the collaboration between Country Coordinating Mechanisms and technical assistance-providing partners by the end of 2009. The Global Fund should encourage technical assistance to facilitate regional proposal development and implementation.

6. **LOCAL FUND AGENTS** That the Global Fund Board should ensure that Local Fund Agents establish or strengthen their expertise in public health management in order to provide stronger financial and programmatic oversight. Local Fund Agent reports (with the exception of confidential reports) should be shared with Principal Recipients prior to submission to the Global Fund Secretariat, and with Country Coordinating Mechanisms upon submission, starting immediately. By the end of 2009, the Global Fund Board should review the policies related to producing and disseminating Local Fund Agent reports.

7. **PROCUREMENT AND HEALTH SYSTEMS** That the Global Fund Board should explore the possibility of regional joint procurement of goods and services to further reduce costs, build regional systems, and improve coordination by the middle of 2009. The Global Fund Board should develop policies on funding for salaries and salary top-ups for health workers by the end of 2009.
“And I would like to especially applaud the exemplary spirit of partnership that has been evident throughout the course of this forum.”

Safiou Thiam
Minister of Health, Republic of Senegal

“I view the Partnership Forum as such an important part of the overall governance structure of the Global Fund. This is where we meet people who really work on the ground.”

Lennarth Hjelmäker
Chair, Policy and Strategy Committee, the Global Fund

“We come together to listen to the voices of those living with and most affected by the diseases, those working at the frontlines of providing care and treatment, those who are involved in shaping and defining legislation and national policy to ensure a more enabling environment, those dealing with Global Fund application forms and paperwork, who tirelessly (and sometimes frustratingly) serve on Country Coordinating Mechanisms, or fulfil the important and challenging role of Local Fund Agents, those who make the Global Fund run effectively in Geneva, and of course those who develop and shape policy and make decisions related to the Global Fund’s strategic future of the Board.”

Shaun Mellors
Communities Delegation and Chair, Partnership Forum 2008
The Partnership Forum 2008 featured a question-and-answer session on the Five-Year Evaluation of the Global Fund. This was moderated by As Sy, UNAIDS, and involved three of the Global Fund's leaders:

- Michel Kazatchkine, Executive Director
- Rolf Korte, Chair, Technical Evaluation Reference Group
- Lennarth Hjelmåker, Chair, Policy and Strategy Committee

The following shares examples of questions asked by members of the audience and responses provided by the panelists [with comments summarized, rather than verbatim quotations]:

**Why was it decided to have a Five-Year Evaluation?**
**How was it carried out? Who is accountable for it?**

- **Lennarth Hjelmåker:** The need for an evaluation was noted from the early days of the Global Fund. As a forward-looking and innovative institution, it saw the need to examine progress after its first five years. The evaluation was particularly important given the changes in the global architecture.

- **Rolf Korte:** After the Board requested an evaluation, it was decided to focus on three areas. Study Area 1 looked at the Global Fund as an organization and is complete. Study Area 2 looked at partnership and has just been finished. Study Area 3 is examining impact. The TERG is responsible for the evaluation. It develops the terms of reference, carries out the contracting, reviews the findings and recommendations, and reports its conclusions to the Board.

**What are the critical findings of the Five-Year Evaluation? In particular, is the Global Fund maintaining its mandate as a funding mechanism?**

- **Lennarth Hjelmåker:** There are many useful recommendations and findings. Examples include that Study Area 1 recommends a clearer distinction of the levels of governance – with the Board and Committees looking at strategies, rather than details.

- **Rolf Korte:** Study Area 1 highlighted the need for simplification and innovation of processes and management. Study Area 2 showed that there are a number of barriers, such as misconceptions about things that the Secretariat has prescribed. This is a priority, for example with Fund Portfolio Managers needing to give clearer information, including about the principles of the Global Fund. We also need to review and adjust the role of Country Coordinating Mechanisms. Many were created at the beginning of the Global Fund in an ad hoc manner. We now need to look at what needs to be done for them to work more effectively.

- **Michel Kazatchkine:** There is a clear and simple recommendation - that the Global Fund should stay true to its mandate of being a financial mechanism. The results to date – such as the distribution of bed nets – have been achieved through being an innovative financing mechanism. However, the work cannot be done alone and needs to be undertaken with all partners. We would have liked an evaluation of others as well, such as UNAIDS and the President's Emergency Plan for AIDS Relief (PEPFAR) – to see if everyone is delivering within this partnership. The evaluation looks at the partnership through one channel. We would have liked a more global view.

**What does the Global Fund mean by health systems strengthening – is it about training? What is the Global Fund’s role in sector-wide approaches in countries?**

- **Rolf Korte:** We need to get away from the health systems dichotomy. What the Global Fund does is part of the health system. It contributes to national systems. The recommendation is that we should not be emphasizing measures such as training, but rather longer-term strategies. And we are cautioned against a rapid move towards mechanisms such as sector-wide approaches, as some of the assets of the Global Fund may be lost.

- **Michel Kazatchkine:** In its last rounds, the Global Fund has tried to strengthen health systems, with some 40 percent of grants allocated to related efforts. We are scaling this up – as it is impossible to expand our work without supporting health systems. But the Global Fund sees health systems to also encompass the “software” – legislation, human rights, strengthening of civil society, etc. We read a lot about sector-wide approaches and the Global Fund is very involved in, for example, International Health Partnership Plus. But HIV cannot be fought through one sector alone. Also, the Global Fund is keen that strategies have ownership – being not just government-led but rather reflecting a national consensus. In addition, some sector-wide approaches risk neglecting results. Overall, we need to be cautious before jumping into one approach.
What did the Five-Year Evaluation say about improving country-level coordination? How can lessons be shared, such as about how to move money more quickly?

**Lennarth Hjelmåker:** The Global Fund wants alignment and harmonization. This is for greater simplification, but also to improve ownership and support for National Strategy Applicationss. The Board is moving in the right direction with dual-track financing, pooled funding, etc. However, attention is needed not just from the side of the Global Fund. Donors need to work on the system and issues need to be addressed by others, for example within the forthcoming evaluation of UNAIDS.

**Rolf Korte:** Improvement is still needed at the country level. The Global Fund is an example of transparency – one that other donors should follow. While there is consensus at the global level, partners are often not so open at the country level.

**Michel Kazatchkine:** The Five-Year Evaluation makes a clear call for the Global Fund to improve relations at the country level. But when people say that our disbursement is slow, what is the Global Fund being compared to? As far as is known, it is the most rapid mechanism. Over US $7 billion has already been disbursed and donors have trust in the system, so we need to maintain a balance. Sometimes the in-country processes are longer, but the Secretariat is working hard to simplify the processes. In terms of funding architecture, the Global Fund is changing. Proposals under Category 3 will no longer need to wait for a whole year to re-submit. We are working towards a system whereby when a country receives a grant, it will be opening a line of credit that can be replenished. As such, the country can operate without having to think about the timeframes of different rounds.
The Partnership Forum 2008 included a plenary debate on the subject of “keeping it simple”. This was moderated by Francoise Girard, Open Society Institute (OSI), USA, with four panelists offering a range of experience relating to the Global Fund, from the Board to Country Coordinating Mechanisms and Principal Recipients:

- Ider Dungerdorj, UNICEF, Mongolia
- Simon Kunene, National Malaria Control and Regional Multi-Country Africa Representative, Swaziland
- Faruque Ahmed, Bangladesh Rural Advancement Committee, Bangladesh
- Mirta Villanueva, Oficina Nacional de Proyectos, Cuba

The debate explored a critical question for the Global Fund and a key issue emerging from its Five-Year Evaluation. That is the extent to which it is a priority, desirable and/or feasible to keep the institution’s policies and processes simple or, at least, make them simpler. The panelists and audience were strongly encouraged to think “outside the box”, identifying ideas for change that were not only concrete but innovative.

In the introduction, the moderator noted that there are a number of inherent tensions in how the Global Fund does business – including between simplicity, participation and accountability. While it is important to keep processes as quick and straightforward as possible, it is also vital to ensure that resources are used transparently, that all relevant stakeholders be engaged, etc.

During the discussions, the panelists and the audience raised a number of examples of complexity, with proposed actions to “keep it simple(r)”. These included that:

- **The Rolling Continuation Channel** does not always provide the straightforward continuity of processes expected. Experiences with an A-rated regional malaria grant showed that the process of applying for a Rolling Continuation Channel is similar to that for a new grant. For example, it required explanations of the selection of Principal Recipients and the membership of the Regional Coordinating Mechanism (although both had been in operation for five years). Instead, partners and systems that are already established could be simply “confirmed”, rather than having to repeat even the most basic of information.

- The process for identifying strong, realistic and measurable indicators that define success - both for the Global Fund and for the project – can be difficult and time-consuming. For example, in Cuba, stakeholders have found that the process would benefit from more specific and streamlined guidance on what type of performance-based indicators are appropriate for a five-year-old project and, in turn, what exactly the Global Fund requires reporting on. This should respect country ownership and not involve “prescribing” to countries. But, equally, it should be based upon the toolkits that already exist, rather than starting from scratch.

- **The current process for proposal development** for the Global Fund is lengthy and complex, with forms that are seen as unfriendly and resulting in documents of some 100 pages. An alternative process, based on experiences in Mongolia, could focus on three steps: 1. Production of a 15-page concept note by a country (summarizing the objectives, key indicators, etc, of the program and submitted to the Country Coordinating Mechanism and Technical Review Panel); 2. Review by the Technical Review Panel and, as appropriate, approval; 3. Development of a full proposal by the country. This could be a “win-win” situation for all involved, saving both time and money.

- In some cases, there is a need to simplify and improve countries’ processes for capacity building – which can be both confusing and unproductive. In Bangladesh (a country that has benefitted from multiple Global Fund grants for all three diseases), the Bangladesh Rural Advancement Committee has maximized the role of south-to-south capacity building. This involves utilizing international support where useful to fill specific gaps, but predominantly focusing on capacity within a country. For example, the Bangladesh Rural Advancement Committee has provided support on financial management to local sub-recipients.

- **The Global Fund has provided increasing guidance and clarification** on some priority areas, such as the functioning of Country Coordinating Mechanisms. But there remain significant confusions. Within all such processes, there are balances to be achieved – between country ownership, un-burdensome systems and accountability. There are also ongoing differences of opinion, for example about the extent to which multi-sectoral participation in Country Coordinating Mechanisms should be promoted or actually mandated and, if the latter, what percentages should be cited.

- **Enhanced communication** – using all available methods, from blogs to myglobalfund.org – has an important role to play in simplifying and enhancing the Global Fund’s work. However, to be truly accessible, all such communication initiatives need to be as user-friendly as possible and available in multiple languages.

The session also provided an opportunity for members of the Secretariat to emphasize that some Global Fund processes – for example relating to the frequency of funding streams and timing/content of financial reporting – are still “works in progress”. The Secretariat has already conducted a review of the architecture, focusing on how the Global Fund can achieve: 1. Simplification. 2. Better alignment and harmonization. 3. Architecture that supports growth. However, it warmly welcomes further suggestions on how to make improvements and simplifications.
A highlight of the Partnership Forum 2008 was a “Talk Show”. This was hosted by Richard Burzynski (former Executive Director of the International Council of AIDS Service Organizations) and featured 11 guests representing the range of the Global Fund’s constituencies:

**Donor governments:** Fidel Lopez Alvarez, Ministry of Foreign Affairs and Cooperation, Spain

**Implementing governments:** Sheila Tlou, Minister of Health, Botswana

**Communities:** Javier Hourcade Bellocq, International HIV/AIDS Alliance, Argentina

**Southern NGOs:** Vincent Crisostomo, The Seven Sisters, Thailand

**Northern NGOs:** Mohga Kamal-Yanni, Oxfam, United Kingdom

**Parliamentarians:** Henrietta Bogopane-Zulu, Member of Parliament, South Africa

**Private sector:** Brian Brink, Anglo American, South Africa

**Foundations:** Shannon Kowalski-Morton, Open Society Institute, USA

**International organizations:** Winnie Mpanju-Shumbusho, WHO

**Academia:** Rolf Korte, Justus Liebig University, Germany

**Media:** Youssouf Bamba, Réseau des Professionnels des Médias, Cote D’Ivoire

The talk show involved lively and frank exchanges. The following summarizes some of the “hot topics” debated and examples of the constituencies’ contributions [with comments summarized, rather than verbatim quotations]:

### Examples of constituency comments

#### HOT TOPIC 1: Within Country Coordinating Mechanisms … what should be done about tensions between stakeholders and conflicts of interest?

- **IMPLEMENTING GOVERNMENTS:** It is the responsibility of governments to provide for the health of the people. They should have a lead role in Country Coordinating Mechanisms, but also be participatory. Zero tolerance for corruption is a key ingredient for ensuring that Country Coordinating Mechanisms work well.

- **COMMUNITIES:** Nongovernmental organizations are increasingly frustrated by issues of conflict of interest, for example with sub-recipients being members of Country Coordinating Mechanisms.

- **SOUTHERN NONGOVERNMENTAL ORGANIZATIONS:** Country Coordinating Mechanisms are known as “Country Confusing Mechanisms”. If you are funded by the Global Fund, you should not be on the Country Coordinating Mechanism.

- **PARLIAMENTARIES:** Parliamentarians represent the people, but have different levels of understanding of democracy. They can be a voice of clarity in Country Coordinating Mechanisms, but also have to avoid making things more confused.

- **PRIVATE SECTOR:** Country ownership is not the same thing as government ownership. A Country Coordinating Mechanism should represent the full diversity of people in a country. They should be run more like the Boards of companies, especially in terms of their fiduciary responsibilities.

- **NORTHERN NONGOVERNMENTAL ORGANIZATIONS:** Country Coordinating Mechanisms reflect the challenges faced by developing countries. Government and non-government are not used to working together and it will take time to build trust. Country Coordinating Mechanisms need to link with other structures in the landscape, such as those related to the International Health Partnership.

- **FOUNDATIONS:** Foundations have been funding work to support Country Coordinating Mechanisms and there is progress being made. But some conflict of interest issues – which can also apply to civil society – still need to be addressed.

- **DONOR GOVERNMENTS:** Issues of conflict of interest are key to discussions among donors. Such issues need to be addressed and Global Fund resources used responsibly.

- **INTERNATIONAL ORGANIZATIONS:** The Global Fund brings together both traditional partners and others, all with an interest in building strong country programs. It should not be about “who should do what”, but how we can all work together.
ACADEMIA: Academia is not yet very involved in Country Coordinating Mechanism issues, but it could have a major role — perhaps through an “Academic Friends of the Fund”. The sector's capacity should be better used to inform the debate.

MEDIA: The media should also be better used — as it is part of the solution to these issues, for example by addressing transparency. The sector should be at the heart of Country Coordinating Mechanisms, bearing witness to what is going on.

HOT TOPIC 2: How does the economic crisis affect the Global Fund ... how worried should we be and should we reduce demand?

DONOR GOVERNMENTS: The economic crisis is a key concern for donors, more so than many other constituencies. Donors are aware that there is both an increase in demand and a shortfall in resources. What matters most is to do everything possible to uphold the commitments made in Berlin [replenishment conference, 2007] and maintain the momentum.

PARLIAMENTARIES: Donor parliamentarians should move towards making their countries' donations compulsory rather than voluntary. They need to be the eyes and ears of the Global Fund — to push on this issue.

NORTHERN NONGOVERNMENTAL ORGANIZATIONS: In crises, the poorest people lose the most – poverty increases, as does the lack of access to health care. If predictability of funding is reduced, and donations are cut to programs that are saving lives, what message does that send? It is not the time to cut aid spending.

COMMUNITIES: Donor governments should warn us if changes are to be made in funding. Otherwise, we risk becoming a “Global Confused Mechanism” – where there is increased demand, but decreased funds, and where the Global Fund seems more like “global business as usual”.

HOT TOPIC 3: If health is truly a “global good”, what needs to be done to achieve it?

IMPLEMENTING GOVERNMENTS: Health is a global good. But the issue requires more detailed attention. In 2001, African leaders committed to allocating 15 percent of spending to health programs, yet only four have done so. We do not need to be crying out to donors for help, but to start by looking within ourselves for the answers.

PARLIAMENTARIES: Parliaments finalize national budgets and, as such, have a large role in these issues. It is critical to involve them.

MEDIA: There are vital issues around the allocation of resources to health systems. But there is also a lot of politics with these discussions. Again, the media can be part of the solution — helping to provide information and ensure people receive care.

PRIVATE SECTOR: It has sometimes been difficult to mobilize the private sector on these issues, but it can make a major contribution. In countries, it is increasingly engaged and a promising source of new money.

COMMUNITIES: We need to reaffirm that health is a right and to ask donors to do all they can for those most in need - in a way that is both efficient and empowering. In turn, we need to encourage implementing countries to support this, including by allocating 15 percent of their national budget. If this is not achieved, we may not reach even the minimum package of health care that is needed.

HOT TOPIC 4: What is the role of the Global Fund and its stakeholders in responding to human rights abuses against men who have sex with men and other marginalized groups?

MEDIA: The media sometimes contributes to these problems, due to a lack of information. This needs to change. Each country needs a media strategy to fight stigma and promote health responsibly.

COMMUNITIES: There is still a lot of denial around these issues. Governments fail to acknowledge how they are fuelling the problem and are not addressing the needs of vulnerable groups.

FOUNDATIONS: The Global Fund should not give money to countries that do not address these issues. We are talking about human rights and this requires more attention. Foundations have a role in supporting communities and emphasizing human rights issues, for example by supporting groups to play the role of watchdog.

INTERNATIONAL ORGANIZATIONS: Within these discussions, the quality of the data, such as on men who have sex with men, is critical. The Global Fund is an evidence-based organization, so it needs data to support its arguments.

ACADEMIA: Academic networks could support governments and policy-makers in these areas by providing relevant data.

PARLIAMENTARIES: Many parliaments have been left out of the HIV debates and lack the capacity to engage in them. The Global Fund has a role in encouraging clarification on situations where, for example, a country applies for funding for programs, but also criminalizes men who have sex with men.
“I am encouraged by what I’ve heard and what I’ve seen. I have heard the voices of a lot of committed people working together on the portfolios of the Global Fund. …Let us benefit from our experience and expertise…All the issues brought here are relevant for the Global Fund. They are the issues of the people that the Global Fund exists for.”

Karlo Boras
Board Member, Developing Countries Nongovernmental Organizations Delegation

“The impression I have gained is a fantastic feeling of being uplifted – by the shared common purpose and shared commitment that we all have to control these terrible blights on man and womankind…We must focus on what works and what is good delivery that will be sustainable. That is the bigger picture – without which we will not save the lives that we are all given the privilege to try and do. We need clarity – through the unity that partnership brings.”

Stephen O’Brien
Member of Parliament, UK
The total of 28 recommendations were presented at the closing plenary of Partnership Forum 2008, alongside a resolution on the issue of HIV-related travel restrictions.

**RESOLUTION ON HIV-RELATED TRAVEL RESTRICTIONS**

The 2008 Global Fund Partnership Forum expresses its appreciation to Senegal for ensuring it has no HIV restrictions related to entry, stay or residence and encourages other countries to follow this example. The Partnership Forum also affirms the Board’s decision not to hold meetings in countries that restrict the travel of people living with HIV, and urges the Board to continue to follow these issues closely.

It was explained to the participants that the “next steps” would involve the recommendations being recorded in a report of the Partnership Forum and presented to the next Policy and Strategy Committee meeting by the Steering Committee. The recommendations would then be taken forward for consideration by the Global Fund Board in May 2009, which will decide on follow-up for each one. A full report on progress will be provided at the next Partnership Forum.

**NEXT STEPS FOR RECOMMENDATIONS FROM THE PARTNERSHIP FORUM 2008**

<table>
<thead>
<tr>
<th>December 2008</th>
<th>February 2009</th>
<th>March 2009</th>
<th>May 2009</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Partnership Forum 2008</strong></td>
<td><strong>Website</strong></td>
<td><strong>Board Committee (Policy and Strategy)</strong></td>
<td><strong>Nineteenth Board Meeting</strong></td>
<td><strong>Partnership Forum 2010</strong></td>
</tr>
</tbody>
</table>
## ANNEX I: Partnership Forum 2008 Program

### Monday 8 December

15:00 – 16:30 and 17:00 – 18:30

**Information Clinics**
- Global Fund architecture
- Country-level partnerships
- Global Fund governance
- Program implementation
- Technical assistance
- Capacity development
- Global-level initiatives

19:00 – 20:00

**Opening Ceremony**
- Lennarth Hjelmåker, AIDS Ambassador, Sweden, representing the Global Fund Board
- Shaun Mellors, Chair, Partnership Forum
- Carol Nawina Nyirenda, Alternate Board Member, Communities Living with HIV, Tuberculosis and Affected by Malaria Delegation
- Cheikh Hadjibou Soumare, Prime Minister of the Republic of Senegal

20:00 – 21:00

**Reception hosted by the Government of Senegal**

### Tuesday, 9 December

09:00 – 09:20

**Plenary: Welcome and introduction**
- Shaun Mellors, Chair, Partnership Forum
- Michel Kazatchkine, Executive Director, the Global Fund
- Sarah Middleton-Lee, Lead Facilitator

09:20 – 10:00

**Plenary: “Listening to the Voices” – the Global Fund and partnership**
- Sigrun Mögedal, HIV/AIDS Ambassador, Norway
- Joseph André Tiendrebeogo, Ministry of Health, Burkina Faso
- Ida Hakizinka, Global Fund Rwanda Country Coordinating Mechanism, Rwanda
- Sarah Middleton-Lee, Lead Facilitator

10:00 – 10:30

**Tea/coffee break**
10:30 – 12.30
Sharing, analyzing and strategizing sessions (Part 1 – sharing)
- **Partnership and gender (women and girls)**
  - Marijke Wijnroks, Ministry of Foreign Affairs, The Netherlands
  - Khadija Moalla, UNDP/HARPAS, Egypt
  - Anya Sarang, All Russian Harm Reduction Network, Russia
- **Partnership and gender (sexual minorities)**
  - Sam Avrett, Funders Concerned about AIDS, USA
  - Marcela Romero, Latin American Transsexual Network, Argentina
  - Robert Carr, Caribbean Vulnerable Communities Coalition, Jamaica
- **Partnership and demand**
  - Asia Russell, Health Gap, USA
  - Jojo Merilles, Tropical Disease Foundation, Philippines
  - Melanie Renshaw, UNICEF
  - Christoph Benn, Global Fund, Switzerland
- **Partnership and coordination**
  - Sigrun Mögedal, HIV/AIDS Ambassador, Norway
  - Luz Escubil, Tropical Disease Foundation, Philippines
  - Catherine Bonnaud, Agence Française de développement, France
- **Partnership and implementation**
  - Javier Hourcade Bellocq, International HIV/AIDS Alliance, Argentina
  - Karen Sichinga, Churches Health Association of Zambia
  - Cosmas Mwaifwani, Medical Stores Department, Tanzania

12:30 – 14:00
Lunch break

14:00 – 16:00
Sharing, analyzing and strategizing sessions (Parts 2-3 – analyzing and strategizing)
Continuation of sessions ……
- Partnership and gender (women and girls)
- Partnership and gender (sexual minorities)
- Partnership and demand
- Partnership and coordination
- Partnership and implementation

16:00 – 16:30
Tea/coffee break

16:30 – 17:45
Plenary: The Five-Year Evaluation – questions and answers with the Global Fund Leadership
Moderator: As Sy, UNAIDS
Global Fund Leaders: Michel Kazatchkine, Executive Director
Rolf Korte, Chair, Technical Evaluation Reference Group
Lennarth Hjelmåker, Chair, Policy and Strategy Committee

17:45 – 18.00
Plenary: Wrap-up
As Sy, UNAIDS
Stephen O’ Brien, Member of the UK Parliament
Sarah Middleton-Lee, Lead Facilitator

18:00 – 20:30
“Marketplace”: Constituency networking
**Wednesday, 10 December 2008**

**09:00 – 09:20**

**Plenary: Welcome and introduction**
- Pierre Blais, Vice-Chair, Partnership Forum
- Karlo Boras, Alternate Member, Global Fund Board
- Sarah Middleton-Lee, Lead Facilitator

**09:20 – 10:30**

**Plenary: Talk show - constituency feedback on “partnership”**
- Moderator: Richard Burzynski, Facilitator
- Panelists: Fidel Lopez Alvarez, Ministry of Foreign Affairs and Cooperation, Spain
  - Sheila Tlou, Minister of Health, Botswana
  - Javier Hourcade Bellocq, International HIV/AIDS Alliance, Argentina
  - Vincent Crisostomo, The Seven Sisters, Thailand
  - Mohga Kamal-Yanni, Oxfam, United Kingdom
  - Henrietta Bogopane-Zulu, Member of Parliament, South Africa
  - Brian Brink, Anglo American South Africa
  - Shannon Kowalski-Morton, Open Society Institute, USA
  - Winnie Mpanju-Shumbusho, WHO
  - Rolf Korte, Justus Liebig University, Germany
  - Youssouf Bamba, Réseau des Professionnels des Médias, des Arts et du Sport engagés dans la lutte contre le sida et les autres pandémies en Côte d’Ivoire

**10:30 - 11:00**

**Tea/coffee break**

**11:00 – 12.30**

**Finalizing recommendations sessions**
- Continuation of sessions ...
  - Partnership and gender (women and girls)
  - Partnership and gender (sexual minorities)
  - Partnership and demand
  - Partnership and coordination
  - Partnership and implementation

**12:30 – 14:30**

**Lunch break**
- “Marketplace”: Thematic networking

**14:30 – 16:00**

**Plenary: Debate – “Keeping it simple” …. an obligation or daydream for the Global Fund?”**
- Moderator: Francoise Girard, Open Society Institute, USA
- Panelists: Ider Dungerdorj, UNICEF, Mongolia
  - Simon Kunene, National Malaria Control and Regional Multi-Country Africa Representative, Swaziland
  - Faruque Ahmed, Bangladesh Rural Advancement Committee
  - Mirta Villanueva, Oficina Nacional de Proyectos, Cuba

**16:00 – 17:00**

**Plenary: Closing**
- Brian Brink, Partnership Forum Steering Committee
- Shaun Mellors, Chair, Partnership Forum
- Pierre Blais, Vice-Chair, Partnership Forum
- Helen Evans, Deputy Executive Director, Global Fund
- Safiatou Thiam, Minister of Health of Senegal

**17:00**

**Farewell reception**
ANNEX II: BREAKDOWN OF PARTICIPANTS

A breakdown of the total of 395 non-Global Fund Secretariat people that attended the Partnership Forum 2008 indicates the following participation:

Constituencies:

- 99 people (24 percent) from government (donor and implementing countries, including parliamentarians)
- 185 people (48 percent) from civil society (including developing Country Nongovernmental organizations, developed Country Nongovernmental organizations, communities and faith-based organizations)
- 42 people (11 percent) from international organizations
- 35 people (9 percent) from the private sector
- 12 people (3 percent) from foundations
- 5 people (1 percent) from academia
- 6 people (2 percent) from the media
- 11 people (3 percent) from other

Geographic region:

- 71 people (18 percent) from West and Central Africa
- 36 people (9 percent) from East Africa
- 42 people (11 percent) from Southern Africa
- 19 people (5 percent) from Middle East and North Africa
- 60 people (15 percent) from West and Central Europe
- 18 people (5 percent) from Eastern Europe
- 14 people (4 percent) from South and West Asia
- 18 people (5 percent) from East Asia and Pacific
- 29 people (7 percent) from Latin America and the Caribbean
- 33 people (8 percent) from North America
- 55 people (14 percent) from global/non-specified.

Disease focus:

- 157 people (40 percent) with a focus on HIV
- 27 people (7 percent) with a focus on TB
- 40 people (10 percent) with a focus on malaria
- 154 people (39 percent) with a cross-cutting focus
- 17 people (4 percent) with a focus on health systems strengthening

Formal involvement in the Global Fund:

- 187 people (47 percent) did not have any current involvement in formal structures
- 27 people (6 percent) were members of Country Coordinating Mechanisms
- 44 people (10 percent) were Principal Recipients
- 32 people (6 percent) were sub-recipients
- 8 people (2 percent) were Local Fund Agents
- 16 people (4 percent) were Global Fund Board members
- 13 people (3 percent) were Committee members
- 46 people (10 percent) were technical partners
- 10 people (2 percent) were a Friend of the Fund
## ANNEX III: MEMBERS OF STEERING COMMITTEE AND FACILITATION TEAM

The members of the Steering Committee for Partnership Forum 2008 were:

<table>
<thead>
<tr>
<th>Name</th>
<th>Constituency</th>
<th>Position and organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shaun Mellors (Chair)</td>
<td>Communities</td>
<td>Senior Adviser: Human Rights/PLHIV, HIV Best Practice Team, International HIV/AIDS Alliance</td>
</tr>
<tr>
<td>Pierre Blais (Vice Chair)</td>
<td>Germany (Canada, Switzerland)</td>
<td>Counsellor, Permanent Mission of Canada to the United Nations, Geneva</td>
</tr>
<tr>
<td>Jairo Pedraza</td>
<td>Developed Country Nongovernmental Organization</td>
<td>International Division Director, Cicatelli Associates</td>
</tr>
<tr>
<td>Bobby John</td>
<td>Developing Country Nongovernmental Organization</td>
<td>Executive Director, Center for Sustainable Health and Development and Global Health Advocates</td>
</tr>
<tr>
<td>Ida Hakizinka</td>
<td>Eastern and Southern Africa</td>
<td>Permanent Secretary, Rwanda Country Coordination Mechanism</td>
</tr>
<tr>
<td>Shannon Kowalski-Morton</td>
<td>Private foundations</td>
<td>Programme Officer, Open Society Institute</td>
</tr>
<tr>
<td>Brian Brink</td>
<td>Private sector</td>
<td>Senior Vice President: Health, Anglo American South Africa</td>
</tr>
<tr>
<td>Paul Bekkers</td>
<td>Point Seven</td>
<td>AIDS Ambassador, The Netherlands</td>
</tr>
<tr>
<td>Tim Poletti</td>
<td>United Kingdom and Australia</td>
<td>Adviser (Development Cooperation), Australian Permanent Mission to the United Nations, Geneva</td>
</tr>
</tbody>
</table>

The members of the Facilitation Team for Partnership Forum 2008 were:

<table>
<thead>
<tr>
<th>Name</th>
<th>Organization</th>
<th>Country (where organization based)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sarah Middleton-Lee (Lead Facilitator)</td>
<td>Consultant</td>
<td>UK</td>
</tr>
<tr>
<td>Richard Burzynski</td>
<td>(Exiting) International Council of AIDS Service Organizations</td>
<td>Canada</td>
</tr>
<tr>
<td>Amakobe Caroline Sande</td>
<td>Consultant</td>
<td>South Africa</td>
</tr>
<tr>
<td>Alejandra Trossero</td>
<td>International Planned Parenthood Federation</td>
<td>UK</td>
</tr>
<tr>
<td>Arturo Sanabria</td>
<td>John Snow Incorporated/DELIVER</td>
<td>Zambia</td>
</tr>
<tr>
<td>Andy Seale</td>
<td>UNAIDS</td>
<td>South Africa</td>
</tr>
<tr>
<td>Liza Kimbo</td>
<td>Netmark</td>
<td>Kenya</td>
</tr>
<tr>
<td>Peter van Rooijen</td>
<td>International Civil Society Support</td>
<td>The Netherlands</td>
</tr>
<tr>
<td>Papa Moussé Ndiaye</td>
<td>Directorate of Military Health Support Services</td>
<td>Senegal</td>
</tr>
<tr>
<td>Kieran Daly</td>
<td>International Council of AIDS Service Organizations</td>
<td>Canada</td>
</tr>
<tr>
<td>Esther Tallah</td>
<td>Cameroon Coalition Against Malaria</td>
<td>Cameroon</td>
</tr>
<tr>
<td>Raminta Stuikyte</td>
<td>Eurasian Harm Reduction Network</td>
<td>Lithuania</td>
</tr>
</tbody>
</table>
Acknowledgements

Sincere thanks are given to the government and people of Senegal for their warm welcome and hospitality of the Partnership Forum 2008.

This report was written by Sarah Middleton-Lee, the Lead Facilitator of the Partnership Forum 2008. She warmly and sincerely thanks Shaun Mellors, Pierre Blais, Dianne Stewart, Birgit Poniatowski and all those involved in preparing, coordinating and supporting the event. The Partnership Forum 2008 was supported in part by a grant from Foundation Open Society Institute (Zug).

The production team included Katharine Anderson and Beatrice Bernescut.

Photo credits: The Global Fund / John Rae