



## COUNTRY COORDINATING MECHANISM MODEL GOVERNANCE AND CIVIL SOCIETY PARTICIPATION

In a manner analogous to the Global Fund's own board of directors, Country Coordinating Mechanism (CCM) members are responsible for governing Global Fund investments within countries. Eight case studies were conducted in **Cambodia, Ethiopia, Honduras, India, Kenya, Romania, Tajikistan, and Tanzania** to examine factors which impact upon governance and civil society participation.

### GOVERNANCE

With the exception of **Romania** and **Honduras**, all case study CCMs had systems for allowing each membership sector to select their own representatives. Satisfaction with these methods varied, with reports from some constituencies – such as men having sex with men in **Honduras**, and civil society in **India** – that inclusion was problematic. Furthermore, women's representation on CCMs was uneven (e.g. only 28 percent in **India**), indicating that a gender-sensitive perspective in governance is far from guaranteed.

Beyond the challenges of equitable and participatory representation, problems with CCMs' ability to exercise governance functions had emerged, most of which were attributed to weak and under-funded CCM Secretariats.<sup>1</sup> Insufficient information and delays in communications were common, and were likely to have hampered the quality of decision-making. However, since the first CCM assessment in 2003, information management systems had improved to include better processes for conducting meetings, documenting minutes, and circulating progress reports from Principal Recipients (PRs) to CCM members. CCMs have become more sophisticated in their use of sub-committees (e.g. Executive, Oversight, Financial, etc.) Progress in other relevant areas was evident: CCMs occasionally used websites to share information; terms of reference for CCM members and PR selection processes were well documented; systems of alternate members to ensure seamless participation were put

in place; and technical review panels and sub-committees for specific tasks – including field monitoring – were established.

### CIVIL SOCIETY PARTICIPATION

The Global Fund recommends that nongovernmental organizations (NGOs) represent at least 40 percent of the CCM membership, and yet half the countries studied (**India, Cambodia, Ethiopia and Tajikistan**) fell short of this quota. In **Tajikistan**, NGOs held only 17 percent of the seats; whereas in **India**, the figure was 28 percent, though plans were in progress to include four new NGO seats. Similarly, participation by persons affected by the three diseases was weak. Some difficulties were said to stem from a lack of organization within local groups. For instance, in **Tanzania**, and a weak organization of people living with HIV/AIDS (PLWHA) was said to have hampered a transparent selection process, resulting in this seat remaining vacant for more than a year before being

<sup>1</sup> See Brief: CCM Secretariat Financing

filled. However, considerable barriers due to stigma and lack of acceptance were also noted<sup>2</sup>.

Beyond inclusion in membership, civil society faced other challenges participating in CCMs: i) Lack of acceptance by government compounded by culturally-dictated power differentials resulted in deference to government.<sup>3</sup> For instance, in **Romania** and **Tajikistan**, civil society members initially met separately until government attitudes changed. In **India**, some felt that the “contractor-provider” relationship between government

and some civil society representatives served to silence opposition to the government’s point of view.

ii) Weak technical skills limited civil society’s ability to contribute to deliberations of strategic importance, such as proposal development (**Tanzania**). iii) Networking weaknesses prevented channelling intelligence to and from CCMs to the wider civil society constituencies - particularly NGOs based in remote, rural locations. Some obstacles, such as coverage for vast geographical distances and numbers of NGOs (**India**), or resolving communication and

transport infrastructure weaknesses (**Ethiopia** and **Tanzania**), were considered difficult to resolve.

Nevertheless, the case studies indicated that CCM governance functions and civil society participation have improved with time. The Global Fund’s new policy of providing funding for CCMs, coupled with the move to encouraging dual-track PRs (i.e. the use of both a governmental and a non-governmental PR), is expected to assist in improving CCM governance and in encouraging a much wider participation.

## RECOMMENDATIONS

Establish communication protocols and governance tools to improve timely information flow between constituencies and their members.

Use time efficiently by organizing work through well-defined sub-committees (e.g. Executive, monitoring and evaluation, etc.).

Ensure all CCM members are introduced to CCM roles, responsibilities and governance tools.

Post governance manuals on CCM websites.

Expand membership and include more key affected population seats.

Choose leaders who actively encourage civil society participation.

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<sup>2</sup> Globally, however, all CCMs that have applied for funding since Round 6 have documented evidence of membership by a person living with or affected by HIV or TB.

<sup>3</sup> Such observations were common across the series of 40 case studies and regardless of the specific theme being investigated.