This is the third annual report to the Global Fund Board on activities taking place in the Secretariat to advance the Fund’s strategic commitments to human rights and gender equality, to address the needs of key populations in policies and programming and to strengthen community systems, responses and engagement.
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Executive Summary

Since the last report to the Board in May 2016, the work of the Global Fund Secretariat on community, rights and gender (CRG) has been focused on preparing to implement the new Global Fund strategy for 2017-2022, which strongly affirmed the organization’s commitment to human rights and gender equality, and includes important new commitments to key and vulnerable populations, strengthening community responses and systems, and achieving greater impact against the three diseases among adolescent girls and young women.

Drawing on lessons from the last three years, a large amount of work has been undertaken in the last 12 months to further strengthen Secretariat-wide capacity to address CRG-related issues, ensure that communities of people living with and affected by the three diseases are closely engaged with Global Fund processes, and align the Fund’s funding policies, technical guidance, data systems, implementation tools, application materials, and monitoring and evaluation framework to support intensified scale-up of CRG-related programming in the 2017-2019 funding cycle. Assessments of the scope of CRG programming in the Global Fund portfolio completed in the last year will provide an important baseline for future progress in scaling up. Differentiated approaches across the portfolio will enable the Secretariat to be more strategic in targeting its support for countries that are seeking to scale-up CRG related programming, including those that are transitioning from Global Fund financing.

In addition to promoting increased investments in CRG programming in the next funding cycle, the Secretariat is also strongly focused on ensuring that this programming is comprehensive and of sufficient quality to achieve impact.

The work described in this report reflects a steadily growing commitment to and collaboration on CRG issues involving many teams across the Secretariat, with leadership from the Community, Rights and Gender Department, as well as the Board, Board committees and the Office of the Inspector General. The Office of the Executive Director continues to provide strong leadership and support to the Global Fund’s CRG work. Most importantly, close engagement and commitment from Country Teams in the Grant Management Division have been crucial to the progress described in this report. Many partners have also made major contributions, including members of the CRG Advisory Group.

Contents of the Report

The report covers work undertaken since the May 2016 Board meeting until April 2017, and is organized as follows:

- Section 1 describes organization-wide policy, funding and accountability initiatives that have involved significant CRG-related issues;
- Section 2 discusses work undertaken in the last year to promote gender equality and to scale up programming for adolescent girls and young women;
- Section 3 describes work to scale up programming to reduce human rights barriers to accessing prevention and treatment services for the three diseases;
- Section 4 describes activities in the Secretariat related to key and vulnerable populations;
- Section 5 describes activities undertaken by the Secretariat to support increased investments in community systems and responses; and
- Section 6 discusses the Secretariat’s work to support meaningful engagement of communities and key and vulnerable populations in Global Fund processes, including through the CRG Special/Strategic Initiative.
I. Funding policies and accountability framework for the 2017-2019 funding cycle

In 2016 and early 2017, the Board and Secretariat developed key funding policies to support the scale-up of CRG-related programming in the portfolio and to ensure that the Global Fund and countries are accountable for increased impact as a result of these investments.

01 Allocation Methodology

Throughout 2016, the Board approved a series of refinements to the Global Fund allocation model. This included a “Stage 1 qualitative adjustment” that revises the formula-derived allocations for the 2017-2019 funding cycle in contexts where HIV is disproportionately concentrated among key populations. Given the well understood lack of quality data on key population size and disease burden, the Secretariat worked closely with UNAIDS and WHO to develop this approach to ensure that HIV burden and rises in incidence amongst key populations are better reflected in the allocation process. HIV allocations were increased through this qualitative adjustment in all contexts where UNAIDS data was available and which indicated that HIV burden is primarily impacting key populations. Work is also underway with technical agencies to examine how data related to key population size and disease burden in the context of TB can be better collected, analysed and used.

02 Catalytic funding

In November 2016, the Board approved $800 million for catalytic investments for the 2017-2019 funding cycle to incentivize countries to align their allocations with Global Fund strategic priorities. The catalytic funding stream includes matching funds of up to $55 million for scale-up of HIV programming for adolescent girls and young women in 13 focus countries in southern and eastern Africa; up to $45 million for scale-up of human rights-related HIV programming in 20 focus countries; and up to $50 million to scale up evidence-informed programs for key populations in 12 countries. Catalytic investments will include support to multi-country programs, including up to $50 million to support sustainable HIV programs for key populations in middle income countries that are in some proximity to transitioning from Global Fund support, as well as strategic initiatives, including $15 million for renewal of the CRG Special Initiative in the next funding cycle. Operationalization of these components is a shared responsibility across the Secretariat, including the CRG, Access to Funding, Technical Advice and Partnerships Departments, and Country Teams in the Grant Management Division.

03 Sustainability, transition and co-financing policy

The Secretariat has undertaken significant work to operationalize the Sustainability, Transition and Co-Financing Policy approved by the Board in April 2016, which includes requirements that Global Fund financing in upper middle-income and lower middle-income countries (UMICs and LMICs) should have a 100% and 50% focus respectively on key and vulnerable populations. The policy also requires that all funding requests - regardless of country income status or epidemiological context - should integrate programs to address human rights and gender related barriers as appropriate to the country context. The Secretariat aims to more systematically integrate discussions on sustainability into its interactions with countries, particularly UMICs and LMICs with low or moderate disease burden, and will work with technical and civil society partners to ensure that countries affected by the policy receive support when developing proposals for the forthcoming funding cycle, with a particular focus on strengthening
community engagement in transition-related processes in countries in Eastern Europe and Central Asia, South East Asia and Latin America and the Caribbean.

04 Accountability framework for CRG programming

The Secretariat has focused strongly over the last year on developing an accountability framework for the scale-up of CRG-related programming across the portfolio, including baseline assessments of the portfolio, studies being undertaken by the Technical Evaluation Reference Group (TERG) on gender-related programming, and approval of a new Strategic Key Performance Indicator (KPI) framework for the Global Fund.

The new KPI framework approved by the Board in June 2016 (with related indicators approved in March 2017) greatly enhances the Global Fund’s and countries’ accountability for increasing coverage, comprehensiveness, quality and impact of CRG-related programming.

KPI 5 will measure coverage of key populations reached with an evidence-informed package of HIV treatment and prevention services appropriate to national epidemic contexts. The indicator builds upon work undertaken in the last two years to improve key population size estimates in 55 countries (See Section 4). Several implementation issues related to the KPI are currently under discussion with technical partners, including the methodology for coverage measurement, minimization of risk to key populations during data collection and the potential role of community-based surveys and data collection approaches. This KPI directly supports achievement of Strategic Objective 1 of the Global Fund strategy for 2017-2022.

KPI 8 will measure HIV incidence reduction among adolescent girls and young women (AGYW) aged 15-24 in a cohort of 13 focus countries in sub-Saharan Africa, aligned with an intensive effort to scale up programming for AGYW (See Section 2). The indicator will be measured from a baseline of 21% incidence reduction (taken from modelled data of incidence reduction among 15-24 year-old females from 2010-2015 in the focus countries), with a target of achieving a 58% HIV incidence reduction in this age cohort by 2022 in the focus countries. An additional operational indicator will measure the number of focus countries with a comprehensive package of interventions for adolescent girls and young women. Measurement of the KPI will encourage comprehensive gender assessments in the focus countries. The KPI directly supports achievement of Strategic Objective 3 of the Global Fund strategy.

KPI 9 on human rights has three components. KPI 9a will measure the number of countries from a focus group of 20 that have comprehensive programs to reduce human rights barriers to HIV services, as identified by baseline assessments (see Section 3). KPI 9b will assess the percentage of the country allocation invested in programs targeting key populations and human rights barriers in middle-income countries, while KPI 9c will measure the percentage of funding from public and private domestic resources targeting key populations and human rights barriers to access in selected countries in transition. This KPI also supports achievement of Strategic Objective 3 of the Global Fund strategy.

While the KPIs are ambitious and it may take several years before adequate data to measure progress become available, they represent an important evolution from the framework used under the previous Global Fund strategy and should yield important measures of country progress and the impact of Global Fund investments in communities, key populations, human rights and gender equality.

The KPI framework will be supplemented by thematic studies to be undertaken by the TERG, including on gender equality (see Section 2).
II. Reducing gender inequalities and scaling up programming for adolescent girls and young women

The Global Fund strategy for 2017-22 formally integrates gender equality work- previously captured in the separate Gender Equality Strategy- into the Global Fund’s strategic and performance frameworks. This includes specific commitments to scale up programs to support adolescent girls and young women, and to advance sexual and reproductive health and rights. Work in the last year has laid the groundwork for implementation of these components of the strategy and for more intensive scale-up of gender-related programming in the 2017-2019 funding cycle.

05 Strategies to advance gender equality (SAGE)

The Secretariat’s SAGE initiative was implemented throughout 2016 to prepare for implementation of the Global Fund’s strategic commitment to gender equality and to build further support for and ownership of gender-related issues across the Secretariat. In 2016, the initiative supported the development of a communications package linked to the Global Fund replenishment conference that promoted the Fund’s past work to advance gender equality in areas such as adolescents and young women, education and health, and sexual and reproductive health and rights. This helped to communicate the Global Fund’s strategic commitment to gender equality to donors, civil society and other key actors, and to explain how the commitment is being realized.

The second component of the initiative has involved significant back-office work to integrate gender considerations into the Fund’s data and grant management systems, including the development of corporate and operational indicators (KPI 8), integration of core monitoring indicators by sex and age disaggregation into the Secretariat’s data systems, and development of baseline data and regular reporting mechanisms for the KPI.

The third component of SAGE has focused on a wide range of activities to integrate gender issues into Global Fund policies and procedures to support scale-up of gender-related programming. In 2016, gender was added to orientation sessions for new Secretariat staff, and trainings and information sessions on gender equality were offered to all staff, to be followed later in 2017 by a training program on gender in the workplace and a other trainings related to programming for adolescent girls, young women and gender equality.

06 Scaling up programs for adolescent girls and young women in 13 sub-Saharan African countries

A major focus of work initiated through SAGE involves a collaboration with partners to support investments in comprehensive, quality HIV and TB programming for young women and adolescent girls in a group of 13 high-burden countries in southern and eastern Africa during the 2017-2019 allocation period. The initiative is linked to KPI 8 and will seek to reduce HIV incidence among adolescent girls and women aged 15-24 years in the focus countries by 58 per cent by 2022. An implementation indicator linked to KPI 8 will assess the extent to which the focus countries are implementing comprehensive prevention programs for adolescent girls and young women.

The catalytic funding stream makes up to $55 million in matching funds available for programming for adolescent girls and young women in the 13 focus countries. The target countries received notification of their eligibility for matching funds in December. Five countries submitted applications for matching
funds in April 2017, three countries will submit in both May and August, and the final two countries will submit applications in December of this year.

To prepare for scale-up in the focus countries, significant effort has been invested to develop technical briefs on issues for adolescent girls and young women, build political support, engage technical partners including UNICEF, UNAIDS, WHO and UN Women, as well as civil society partners such as the International Community of Women Living with HIV, Women 4 Global Fund and other women’s groups. Training and intensive support has been provided to the 13 Country Teams on program design and implementation. The Bill and Melinda Gates Foundation is funding two full-time consultants in the Grant Management Division to support this effort, and a new position in the Monitoring, Evaluation and Country Analysis Department will focus on indicator development and data tracking in the 13 countries. This position will also support countries in the development of evaluations and operational research on the AGYW interventions. These individuals will work with the CRG and Technical Advice and Partnerships (TAP) Departments as a cross-departmental team to coordinate the initiative in the Secretariat.

The 13 participating countries will need to include HIV incidence measurement for 15-24 females in their grant performance framework. Considerable work has been undertaken with UNAIDS, WHO, PEPFAR and other partners over the last year to develop and align the incidence measurement methodology.

07 Funding Forward for Girls

The Secretariat is preparing to launch the Funding Forward for Girls platform to mobilize additional resources from the private sector to help address “above allocation” funding gaps in programming, technical support, community mobilization and advocacy related to adolescent girls and young women in the 13 focus countries. Partners in the initiative can earmark their financial support for existing Global Fund grants and priority interventions, scale-up of programming in new grants or Secretariat activities that will facilitate scale-up. They may also make co-investments at country level that complement Global Fund financing.

08 Meaningful engagement

The Secretariat has developed a roadmap to increase the meaningful engagement of adolescent girls and young women throughout the grant cycle in the 13 focus countries. The roadmap includes $500,000 from the CRG Strategic Initiative. It also aims to improve participation in Global Fund processes by key government departments and agencies working on gender equality and issues for adolescents/youth in those countries to increase prioritization of strategies and resourcing for HIV, TB and sexual and reproductive health. The roadmap provides a schedule of activities through the course of the three funding windows for the 13 countries in 2017 to enhance coordination between Country Teams, CCMs, women’s and girls’ groups, donors and technical partners.

09 Promoting multisectoral approaches for adolescent girls and young women

Strategies to promote the health of adolescent girls and young women need to be delivered in conjunction with a range of programming beyond the health sector, for example, to ensure that girls attend school and receive sexuality education and that girls and young women have opportunities to generate income and can protect themselves from gender-based violence. The Secretariat is participating in discussions with partners this year to promote more coordinated and effective
multisectoral approaches to the needs of these populations. An early example of political leadership has been shown by the President of Malawi, whose initiative to convene an inter-ministerial task force that will develop a national plan for adolescent girls and young women was highlighted during a country visit in December 2016 by agency heads from the Global Fund, GAVI, PEPFAR, the US government, Girls not Brides: The Global Partnership to End Child Marriage and the Global Partnership for Education. These partners will offer support for the development of Malawi’s national plan and identify opportunities for collaboration and coordination that may provide a model for similar efforts in other countries.

10 Modelling the impact of structural interventions

As part of its work on modelling of gender-related data being undertaken with the HIV Modelling Consortium, the STRIVE Consortium, UNAIDS and other partners, the Secretariat is participating in an effort to strengthen the modelling tools to integrate age range and structural HIV interventions. Interventions that are relevant to this approach include strategies to reduce gender-based, partner violence, schooling interventions, female sex worker empowerment, and alcohol-related interventions. The initiative aims to understand the feasibility of incorporating complex, structural interventions into investment cases and the use of a cascade approach to analyze impact. In December 2016, the Secretariat supported a meeting organized by the Strive Consortium and the International Modelling Consortium to discuss modelling techniques on gender more broadly, with a view to improving current tools. The long-term goal is to ensure that modelling – and, in turn, investment frameworks at national level - reflect age considerations and include more gender-responsive interventions, particularly where AGYW are disproportionately affected by HIV.

11 Collaboration with Stop TB

Data and analysis on TB and gender-related issues in Global Fund funding requests have been consistently weak. Building on a collaboration in 2015 between the Global Fund, Stop TB and UNAIDS to increase the capacity of TB activists to undertake gender assessments, the Secretariat has begun collaborating with the Stop TB partnership to conduct gender and TB assessments in up to 10 countries by the end of 2018. The assessments will be used to help guide implementers and donors on the most appropriate interventions and to inform the development of national TB plans. The collaboration includes three proposed training workshops in 2017 to increase the capacity of French-, Spanish- and Russian-speaking TB experts to perform TB gender assessments as part of national planning processes.

12 Thematic review on gender

As part of the Global Fund’s efforts to increase accountability for the scale-up of CRG-related programming, including the new KPIs, the TERG has commissioned the Euro Health Group to conduct an in-depth thematic review of gender-responsive programming at country level in 2017, with a primary focus on HIV among AGYW. The review will evaluate country plans and policies and the extent to which they have been designed and implemented to reflect the needs of AGYW, assess opportunities for improvement, and serve as a baseline to inform other, prospective country evaluations planned by the TERG. The thematic review is due to be completed by June 2017.

13 Gender and key populations

In March 2017, the Secretariat organised a workshop for Country Teams to strengthen their capacities in understanding data, strategic information and programming for young (including adolescent) key
populations in the context of HIV. The aim of the workshop was to ensure that Country Teams are adequately supported to interrogate young key population-related issues with country stakeholders. Extensive mapping of strategic information related to young key populations in Ukraine, Cote d’Ivoire, Philippines and Indonesia was conducted with support from UNICEF, LINKAGES programme, WHO, USAID and youth-led networks. The data were then used to facilitate a workshop delivered by an external consultant.

The CRG Department in the Secretariat is currently recruiting an advisor on gender and key populations to assist the Global Fund in focusing more closely on these intersecting issues. A focus will be on young key populations.

III. Scaling up programmes to reduce human rights barriers

The Global Fund strategy for 2017-2022 commits the Global Fund to increase the impact of its investments by introducing and scaling up programs that reduce human rights barriers to accessing HIV, TB and malaria services. This strategic commitment is strongly supported by KPI 9 to measure scale up of such programming and by the requirement in the Global Fund’s new Sustainability, Transition and Co-financing Policy that requires all countries – regardless of income level – to include interventions to remove human rights- and gender-related barriers to access in their proposals.

14 Updated guidance and application modules

Over the last year, the Secretariat has undertaken a large amount of work to operationalize the human rights commitment in the new strategy, working with a wide range of country stakeholders, UNAIDS, WHO, UNDP, Stop TB, PEPFAR and other bilaterals, donors and partners, including communities of people living with and affected by the three diseases. This work has included efforts to increase understanding among Secretariat staff, the Technical Review Panel, partners and countries about the interventions needed to reduce human rights barriers, and alignment of HIV funding application modules with the seven key programming areas identified by UNAIDS as necessary to reduce stigma and discrimination and increase access to justice.

In 2016, working groups were established with partners to define the programs needed to reduce human rights-related barriers to TB and malaria services. The groups have developed technical briefs on human rights and gender issues and related programmatic responses for each of the diseases to help countries select programs relevant to their contexts. The HIV, human rights and gender technical brief has also been updated. The Secretariat also commissioned a review of the evidence of the impact of interventions to reduce human rights-related barriers to services, which will be completed in 2017.

15 Approaches to scale-up and country support in 2017-2019

With input from a consultation held by the Secretariat in April 2016 involving 80 participants representing all stakeholders, a new approach aimed at achieving the Global Fund’s strategic objective to increase investment in programs to reduce human rights-related barriers was developed. From 2017, support provided to countries will take the three forms described below.
16 Intensive support for scale-up in 20 focus countries

Twenty countries selected through a consultative process are being offered intensive support over the six-year period of the current Global Fund strategy to increase investments in programs to remove human rights-related barriers to services. These countries will be eligible for matching funds from the catalytic funding stream as an incentive to include resources for such programming in their funding requests. In all 20 countries, a concerted effort will be made to reduce barriers to HIV services, and efforts will also be made to reduce human rights-related barriers to TB and/or malaria services in a subset of the countries.

Following a request for proposals issued in July 2016, four research groups were selected to perform baseline assessments in the 20 countries to identify and describe barriers to services, define and cost the programs needed to address them and identify opportunities and challenges to bring these programs to scale. The research groups have developed a research protocol and are expected to complete baseline assessments in four countries by May. The Secretariat will take stock of the lessons learned and further baseline assessments will follow in a sequence aligned with grant-making opportunities. Similar assessments will be undertaken at mid- and end-points of the Global Fund strategy to assess the impact of scaling up human rights-related programming.

Partnerships and the close involvement of national stakeholders have proven very important to the progress made to date in this initiative, including in the selection of countries and planning for collaboration to support them. The initiative will be rigorously monitored and evaluated, and is expected to provide valuable lessons for future scale-up of Global Fund-supported programming to reduce human rights related barriers to services.

Following an expert consultation on human rights monitoring and evaluation held by the Secretariat in November, a working group was established to assist in both monitoring and evaluating this initiative and to provide guidance on strategies and methods for measuring the impact of human rights programming across the portfolio more broadly, including measurement of progress against the three components of KPI 9.

As part of the Secretariat’s work on modelling for the scale-up of gender equality programming, efforts are also being made to incorporate programs to reduce human rights-related barriers to services into modelling, and to determine how modeling can be performed to estimate the impact of scaling up programs to remove human rights barriers to services, with a focus on the 20 focus countries chosen for intensive support. The Secretariat has developed a draft conceptual/logical framework of hypothesized links between removing human rights barriers and achieving health outcomes. The modeling is an important tool to test the existence and strength of those links and to directly inform program design and implementation.

17 Support for countries in transition

Wealthier countries – including those that are transitioning from Global Fund support - frequently have lower levels of international financing and epidemiological profiles in which HIV and TB epidemics are concentrated among key and vulnerable populations. Programs for these populations - as well as programs to reduce human rights related barriers to services – are frequently not prioritized when countries cease to be eligible for Global Fund financing. A specific effort is being undertaken by the
Secretariat to deepen understanding of how programming can be sustained in these contexts through increased domestic resources.

This work is linked to monitoring of KPI 9c and its target of ensuring that 100% of upper middle-income countries transitioning from Global Fund support report on domestic investments in key populations and human rights programs during the 2017-2019 funding cycle. Collection of these data will establish a baseline for future target-setting and monitoring of domestic investments in transitioning countries.

18 Differentiated support across the portfolio

While the Global Fund requires all applicant countries to include human rights- and gender-related programming in funding proposals, the Secretariat recognizes that it cannot provide the same intensive level of support to all countries, such as those with very small grants. Instead, support will be provided in a differentiated way across the portfolio.

19 Review of OIG Complaints Mechanism

In 2015, the Office of the Inspector General (OIG) established a mechanism through which individuals can make complaints about human rights violations by grant recipients. Despite a campaign to publicize the mechanism, it has generated very few eligible human rights complaints. An independent assessment is currently being undertaken - including in several focus countries where the mechanism has been promoted - to understand why it has not been used and to develop relevant recommendations for the OIG and the Secretariat.

20 Guidance on challenging operating environments

In May 2016, the Global Fund Board approved a policy for the Fund’s work in challenging operating environments (COEs). The policy systematizes the Global Fund’s approach and engagement in COEs toward the goal of “maximizing impact and greater accountability” of investments in those settings. The policy benefited from a consultation hosted by the Secretariat in early 2016 to explore what kinds of human rights and gender equality interventions and participatory approaches with respect to the three diseases are needed in COEs, and conversely, what interventions are not realistic or needed, and why. As follow-up on that process, the Secretariat will shortly publish a guidance brief on human rights and gender programming in COEs that includes key principles for programming and prioritization in these settings, approaches to situational assessments, and examples of country approaches.

IV. Scaling up comprehensive and quality programmes for key and vulnerable populations

As in the case of gender and human rights, policy and funding initiatives developed and introduced over the last year have been designed to stimulate attention to and increased investment in programming for key and vulnerable populations. The Global Fund strategy for 2017-2022 commits the Fund to scaling up evidence-based interventions for key and vulnerable populations disproportionately affected by the three diseases, and the new Sustainability, Transition and Co-financing Policy includes minimum requirements for investment in key populations in middle-income countries. The interim indicator for KPI 5 on service coverage for key populations aims to increase from 53 per cent to 75 per cent by 2019 the proportion of a cohort of 55 countries with nationally adequate key population size estimates that report a comprehensive package of services for at least two key populations.
Up to $50 million will be made available as matching funds through the catalytic funding stream for a proposed group of 12 countries to scale up ambitious and high quality, comprehensive services for key populations, including through community-led service delivery and engagement. Countries have been proposed for eligibility based on factors such as high HIV burden among key populations, the availability of robust population size estimates, rising incidence, domestic commitments, and the potential for investments to be catalytic in a region.

21 Analyses and lessons from the 2014-2016 funding cycle

A rapid review of the Global Fund Key Populations Action Plan 2014-2017 performed in 2016 found that the Secretariat has led or mobilized significant efforts to promote accountability for action on key and vulnerable populations among countries and other stakeholders, built capacity to address these issues in the Secretariat (including Country Teams), supported the increased engagement of these populations in Global Fund processes (for example, through the CRG Special Initiative, described in Section 6), and more clearly defined and developed partnerships with technical and civil society partners on these issues.

The review also found ongoing challenges in translating these foundations - either quickly enough or at sufficient scale – into more, better quality and comprehensive programming. These include limited availability of relevant data, mixed results in securing meaningful engagement, and persistent concerns about the sustainability of engagement and investments in key populations in countries transitioning from Global Fund support. Work to address these issues is a high priority for the Secretariat in 2017-2019.

An in-depth investment tracking exercise was undertaken in 2016 to assess the extent to which Global Fund investments approved under the current funding model to date benefit key populations, with summary results to be provided to the Board at this meeting. The analysis reviewed 138 HIV and HIV/TB grants from 87 countries and seven multi-country regional grants encompassing just under 69% of the original allocation and identified almost $650 million in investments in all key populations in the last funding cycle. The ongoing analysis will aim to shed light on the extent to which the level of Global Fund investment is in line with epidemiological data, whether investments are aligned with normative guidance and implementation tools and the extent of the Global Fund contribution to key population programming vis-à-vis other donors and global need.

The data and analysis will provide a valuable baseline for measuring future scale-up across the portfolio, should help to inform portfolio optimization in future allocation periods, and may provide insights into the quality and comprehensiveness of Global Fund-supported programming. The analysis performed to date suggests that there is likely to be a persistent gap between what the Global Fund can support and global needs, but that the Fund’s investments in key populations play a crucial catalytic role. It also highlights the need for increased domestic investments in these programs, especially in countries transitioning from Global Fund support.

A qualitative analysis of selected grants signed in 2014-2016 based on key stakeholder interviews and country visits examined factors that have contributed to increased or decreased investments in key populations, taking into account local epidemiological, political and funding contexts. It found, inter alia, that there is a greater chance of comprehensive services for key populations being funded if these populations are meaningfully engaged in all aspects of country dialogues and the development of funding proposals, and that the more specific the advice given by the Secretariat and the TRP during proposal review and grant negotiation, the more likely it is that focused programming will result. The analysis also highlighted the importance of strategic information and the need to disseminate relevant data as soon as it is available to support program planning, implementation and evaluation.
22 Strengthening key population size data

The Global Fund has made a major effort over the last two years to help address longstanding deficiencies in data on key population size at country level, notably through the Board’s approval in 2014 of $6 million for key population size estimates and programmatic mapping in 15 countries as part of the Special Initiative on country data systems. Final reports have now been submitted by nine countries, with the remainder to be submitted by June. The data will provide denominators for measuring future scale-up of key population programming in these countries.

In addition to these studies, training workshops on the methodology have been provided in five regions with the participation of more than 60 countries, of which 55 had been classified by December 2016 as having nationally adequate population size estimates. Support provided through the initiative has also enabled several countries to secure around $20 million for this work through Global Fund grants and partner contributions. Guidance on key population size estimates and measuring coverage of treatment and prevention for key populations has been developed and integrated into technical information notes for all applicant countries, and training is being provided to Country Teams. Importantly, work under this component of the Special Initiative has helped to build a broad partnership – including USAID, CDC, UNAIDS, WHO and others – that will be essential to support the further strengthening of country capacity to collect and use key population size and coverage data in the new funding cycle, and for the Secretariat to measure progress against KPI 5.

No country participating in this work has reported any adverse events – such as harm to key populations or service providers - related to the collection of key population data, but the Secretariat will continue to closely monitor risks of harm and adverse consequences.

23 Implementation tools and capacity building for program design and implementation

The Secretariat has continued to strongly support the development and use of key population implementation tools developed by partner organizations, including the tool for sex workers (SWIT), men who have sex with men (MSMIT), transgender people (TRANSIT) and people who use drugs (IDUIT). In 2016, the Secretariat worked to modify the Global Fund’s application materials, performance framework and application guidance so that they are closely aligned with these tools. Training on use of the tools has been provided to Country Teams in partnership with global key population networks. Dissemination activities with partners - including UNDP, UNFPA, UNODC and the networks - began in 2016 and are scheduled to continue throughout 2017.

A pilot workshop for community-based organizations on the use of the MSMIT implementation tool was hosted by the Community Action and Leadership Collaborative (CLAC) in Vietnam in March, with financial support from the Secretariat. A workshop on the use of SWIT was held in Kenya in March 2017, and two others on the use of TRANSIT and IDUIT will be held by June. The workshops focus on use of the tools to strengthen community engagement in key population program planning and quality improvement.

In January 2017, the Secretariat held a consultation with technical agencies and key population networks in Geneva to identify lessons learned to date from the use of the tools and to plan further steps needed to support their use in Global Fund grant-making and implementation. Future efforts will need to include continued promotion of the tools as normative guidance, along with further work to build community capacity to understand and use them. The Secretariat has engaged a consultant to work on mapping current and future plans for tools promotion to guide further work in this area.
24 Engaging key populations affected by TB

The Secretariat has worked with the Stop TB Partnership to develop an action framework designed to support National TB Programs in working with groups that are more vulnerable, underserved or at higher risk of infection and illness related to TB. The plan reflects Stop TB and the Global Fund’s strategic focus on shifting from passive to active case finding and from vertical to integrated delivery systems for TB, and will support achievement of the Global Plan to Stop TB’s target of reaching 90 per cent of key populations with TB services by 2020, as well as strengthening the role that TB key populations can play in engagement, service delivery and accountability. The action framework addresses issues such as data collection, delivering services in challenging contexts, program and service planning at national and local levels, key population risks and drivers, and examples of innovative country approaches to working with key and vulnerable populations affected by TB.

V. Strengthening community systems and responses

Work has continued over the last year to increase attention to and understanding of the role of community systems and responses as a key component of resilient and sustainable systems for health, consistent with Strategic Objective 2 of the Global Fund strategy 2017-2022.

25 Updates to modular tools and technical materials

Modular application tools and technical materials have been updated for the 2017-2019 funding cycle to embed community-led service delivery approaches within HIV, TB and malaria programming, such as community-based HIV testing, community-based TB care and prevention, and community-level awareness and sensitization for malaria. Funding proposals must now describe the role of communities in each program intervention and the performance framework and include plans and budgets so that community organizations have the resources needed to deliver the services effectively.

Cross-cutting funding for “community systems strengthening” is now available under “Resilient and sustainable systems for health” in the performance framework and is intended to build capacity for community responses that address more than one of the diseases and health more generally, for example, to enable stronger local level accountability through advocacy, financial management or community-led monitoring. Such funding is particularly important to enable communities to contribute to improving program quality and comprehensiveness.

26 Community-based monitoring and feedback

The Secretariat began work with the London School of Economics in 2015 to strengthen understanding of the role that community-based monitoring and feedback (CBMF) could play in increasing local ownership, building community capacity to identify and resolve problems, and improving accountability and the quality and comprehensiveness of programming in Global Fund grants. Building on work undertaken in 2016 to identify CBMF models that could be relevant, funds will be made available through the CRG Strategic Initiative and other sources to support technical assistance for CBMF approaches, operational research and continuous improvement in up to 10 countries with investments from both the 2014-2016 funding cycle and in new grants.

27 Exploring flexibilities for sub-grantees

The Secretariat is exploring experiences and lessons learnt from the provision of financing through grants to small, community-based sub-recipients. These organizations often lack sophisticated
financial management and reporting systems and struggle to manage the burden of the Global Fund’s financial and reporting requirements. The aim of the work is to “make it easier for grants to do the right thing and support community organizations” by identifying how practices with regard to small sub-recipients may currently differ across the portfolio, and to determine if and how flexibilities can be implemented in a more consistent way to reduce the administrative burden on community-based sub-recipients, without unduly increasing financial risks. This initiative is particularly important to support the further scale-up of community systems and responses.

VI. Strengthening meaningful community engagement with the Global Fund

The Global Fund has long been committed to meaningful engagement with communities in advocacy, governance, grant-making and program implementation, and the Secretariat has worked over the last year to document successes and lessons learnt from its work to increase meaningful engagement in the 2014-2016 funding cycle. The Global Fund strategy for 2017-2022 specifically commits the Fund to supporting the meaningful engagement of key and vulnerable populations and networks in Global Fund-related processes.

28 Documenting lessons on meaningful engagement

In 2016, the Secretariat commissioned CLAC - working with the Global Forum for MSM and HIV and other global key population networks, with oversight from the Global Fund’s CRG Advisory Group - to perform an independent multi-country review of community engagement in Global Fund grant-making and implementation processes. The review, published in March 2017, defined four core principles for meaningful engagement: 1) effective and proportional representation in planning; 2) Adequate time and resource allocation to communities to understand systems, derive shared priorities, contribute to debate and discussion and deliver programs; 3) Ongoing, independent oversight of grant negotiations, and 4) Ongoing efforts to strengthen the capacities of community organizations and leaders so that they are able to take on increasing responsibilities and have greater impact.

The review recommended that the Global Fund should work to mainstream this definition and make it actionable and measurable. It also proposed that the Fund should develop guidance for community engagement before and during grant negotiation and for community review of grant-making decisions; strengthen community representation on CCMs; increase the meaningful engagement of vulnerable, underrepresented and criminalized communities; and provide adequate financing to support and mainstream community engagement in quality improvement, including through “community taskforces”. An information session about the report was held for staff in March 2017. The Secretariat and the CRG Advisory Group are currently determining their responses to the recommendations and undertaking validations to see what challenges identified in the report are common across countries.

In late 2016, the Secretariat published How We Engaged, a series of illustrative, in-depth case studies that highlight how the Global Fund and partners worked to engage communities and key populations in country dialogue and other processes in six countries between 2013 and 2016. A further two case studies in the report examine community engagement in the governance of a regional grant, and activities undertaken by the Regional Platforms under the CRG Special Initiative to support community engagement.
29 CRG Special/Strategic Initiative

The CRG Special Initiative approved by the Board in 2014 made $15 million available to support community engagement with the Global Fund in three mutually reinforcing components.

Component 1 made $5.2 million available for technical assistance to support community engagement in Global Fund processes. By the end of December, these funds supported 76 technical assistance assignments by 34 prequalified providers in the 2014-2016 allocation period. Component 2 provided $5.3 million for long-term capacity development of eight global and regional key population networks to support their constituencies in engaging with the Global Fund at country level, in a partnership with the Robert Carr Civil Society Networks Fund (RCNF). Component 3 invested $4.6 million for the establishment of six regional civil society coordination and communication platforms to enhance knowledge about the Global Fund and its processes, facilitate access to technical support and strengthen civil society awareness to effectively participate in national processes.

An independent evaluation of the Special Initiative conducted between April and October 2016 found that it brought significant added value to in-country Global Fund processes and filled an urgent gap in the global architecture for civil society technical assistance and capacity building, especially for HIV and key populations. Together, the three components were found to comprise a logical model that leveraged civil society participation in multiple country and regional dialogues and concept note development processes. The evaluation also recognized that the Initiative was understaffed at the Secretariat level and challenged by the lack of a clear monitoring and evaluation framework. The initiative also had a limited response from civil society and communities affected by TB and malaria, and was restricted by its focus only on the period up to grant-signing when many organizations would have benefited from additional support in the implementation and evaluation phases of grants.

Overall, the evaluation concluded that the funding provided through the initiative is needed now more than ever to enable effective implementation of the CRG-related components of the Global Fund strategy. The evaluation recommended that funding for the initiative be allocated for a further three years; that its remit be expanded beyond the point of grant signing to all stages of the grant cycle, including monitoring and evaluation; emphasized the need for stronger linkages between the three components; highlighted the importance of increased Secretariat capacity to manage the initiative, and recommended the development of both a monitoring and evaluation framework and a knowledge management and communications strategy to support the work.

In November 2016, the Board approved $15 million in November from the catalytic funding stream for continuation of the Initiative throughout the 2017-2019 funding cycle. Now known as the CRG Strategic Initiative, it will include a monitoring, evaluation and reporting framework, to be developed by an independent senior consultant working closely with the CRG-SI team.

The initiative will continue to consist of three components, and several new features will be incorporated in its second phase. The short-term technical assistance provided under Component 1 will be accessible during the whole grant cycle and will be delivered by a replenished pool of TA providers with stronger expertise in engaging communities affected by malaria and TB, as well as in new priority areas, such as engagement of civil society in sustainability and transition issues. The scope of work of Component 2 will be expanded to support long-term capacity development of global networks of communities and key populations affected by malaria and TB, as well as HIV, and will also aim to enhance the meaningful engagement of civil society and community groups working with adolescent girls and young women. Synergies among the three components of the initiative will be strengthened,
both through the work of the regional platforms and through closer collaboration between the CRG Department and the Grant Management Division in the Secretariat.

30 Community engagement in tuberculosis and malaria

Demand for financing for community responses, human rights and gender equality in the context of malaria programming has been consistently low. In 2016, the Secretariat issued a competitive request for proposals to award $400,000 from the CRG Special Initiative to engage communities on malaria, gender, and human rights. This work aims to increase meaningful engagement of civil society and community voices in Global Fund processes related to malaria, enhance understanding and analysis of human rights and gender-related barriers in funding requests, and lead to increased inclusion of community-centred, rights-based and gender transformative interventions in Global Fund supported malaria programming. In September 2016, four organizations from three regions and one working at the global level - APCASO, the Kenyan NGO Alliance Against Malaria (KENAAM), the Réseau d'Accès au Médicaments Essentiels (RAME) and International Public Health Advisers - were selected to undertake this work for a six-month period. The organizations have contributed to more effective community engagement in the greater Mekong sub-region regional funding request; research, round tables and strategy development on domestic resource mobilization for malaria; feedback from a rights and gender perspective on draft funding requests; and drafting of tools to support country-level analysis of human rights and gender-related barriers to the delivery of malaria programmes.

The initiative may be extended or expanded after it is evaluated. Additional technical assistance funding for community organizations seeking to engage with the Global Fund on malaria will be available through the CRG Strategic Initiative.

The Global Coalition of TB Activists (GCTA) was also supported through the CRG Special Initiative to assist their constituencies at the global, regional, and national levels to meaningfully engage in a range of Global Fund processes related to TB, such as ensuring that communities affected by TB and key affected populations are part of Country Coordinating Mechanisms, are active in country dialogue meetings and provide input during the development of national strategic plans, country concept notes, and grant implementation.

31 Country Coordinating Mechanisms

An audit of Global Fund Country Coordinating Mechanisms by the Office of the Inspector General was published in February 2016. The audit assessed the adequacy of the CCM model in coordinating and overseeing country grants, as well as the operational effectiveness of CCMs, including policies, procedures and systems in place at the Secretariat and at country level. The audit found that, despite some progress, grant oversight continues to be weak in most CCMs, and there is often a lack of feedback from key populations and people living with HIV. Many of the CCMs studied were not compliant with Global Fund eligibility criteria. Although the audit found that there had been significant improvements in the involvement of civil society and affected communities in designing programs, some gaps remain, including suboptimal membership of and meaningful engagement by civil society and key populations.

The audit also noted that, of the nine countries from which the Global Fund had withdrawn support, only one had retained its CCM, highlighting the lack of sustainability policies for CCMs in transitioning counties.

The Secretariat has developed a set of agreed management actions to respond to the audit, implementation of which commenced in September and will continue through 2017. Among these actions, the CRG Department, Grants Management Division and CCM Hub have identified five focus countries that will receive intensive technical assistance to address CCM improvement plans.
Improvements will include strengthening the capacity of civil society and key and vulnerable population representatives on CCMs, monitoring the selection process for civil society representatives, and leveraging the CRG Civil Society Platforms to provide ongoing support. The Global Fund Guidelines for CCM Funding were also revised in 2016 to include the requirement that at least 15 per cent of CCM funds must be used to support non-government constituency engagement and processes to promote and improve the quality of stakeholder participation. The CRG Special Initiative has also contributed to strengthening the capacities of key population representatives on CCMs, including through the partnership with RCNF to provide long-term capacity development.

The Global Fund Ethics Officer has developed a Code of Conduct for CCMs that the Board will be asked to approve at this meeting. The code will clearly state the values and behaviours expected of CCM members and compliance with it will be measured through CCM eligibility and performance assessments. Strong community participation will also be an important component of the anti-corruption policy that is currently being developed.

### 32 Universal health coverage

The Secretariat is committed to being involved in policy discussions around meaningful engagement and community responses in the context of universal health coverage, for example, through its participation at the Prince Mahidol Award Conference (PMAC) in Thailand in January that focused on “addressing the health needs of vulnerable populations for an inclusive society”. At the conference, the Secretariat presented its publication in the World Health Bulletin in 2017 on Reaching the most vulnerable populations; lessons learned from the Global Fund. Further work in this area is being planned for 2017.

### 33 Community engagement in resource mobilization

Civil society and community organizations - including the Global Fund Advocates Network (GFAN) and regional Friends of the Global Fund organizations - played a crucial role in advocacy to mobilize donor support prior to the Global Fund replenishment conference in Montreal in September. The conference itself involved unprecedented participation of civil society, including by Canadian NGOs, sending a strong message to donors about the extent of civil society support for the Global Fund. Sustained support from advocacy groups and networks is now essential to turn the pledges made at the conference into contributions, particularly in major donor countries that have recently elected new governments or that will hold elections in the near future.

The Global Fund is currently increasing its work with civil society partners and advocacy groups to identify and work with parliamentarians and other stakeholders in key countries to increase domestic investments for HIV, TB and malaria, consistent with the Global Fund strategy on enhanced domestic financing.

### VII. Conclusion

After three years of intensive effort – including significant work over the last year - community, rights and gender issues are now extensively integrated in work across the Global Fund Secretariat, including in the Global Fund strategy, funding policies, implementation tools, technical guidance, data systems, application modules, approaches to community engagement and the organization’s monitoring and evaluation framework. As a result, the Global Fund is more strongly positioned than ever to support increased scale, comprehensiveness, quality and accountability of CRG-related programming in the 2017-2019 funding cycle, and to achieve greater impact through these investments.