THE COMMUNITY, RIGHTS AND GENDER STRATEGIC INITIATIVE

Engaged Communities, Effective Grants

Update | June 2020
The Community, Rights and Gender Strategic Initiative (CRG SI) is a three-year $15-million catalytic investment, aimed at strengthening the meaningful engagement of civil society and communities in Global Fund-related processes.

It works through three mutually reinforcing components: (1) A short-term technical assistance program, (2) long-term capacity strengthening of key and vulnerable population networks and organizations, and (3) six regional communication and coordination platforms.
2020 is an important year. Countries are developing funding requests for the largest-ever Global Fund allocation cycle. 2020 also marks a key checkpoint for progress against the three diseases, with the culmination of the UNAIDS Fast-Track Commitments, the Stop TB Partnership’s Global Plan to End TB, and the RBM Partnership Strategic Plan. At the same time, the responses to the three diseases are confronted with unprecedented and unforeseen challenges from COVID-19.

Activated communities are essential for designing and delivering effective and equitable programs, monitoring their performance, and ensuring rights and gender equality are promoted and protected. Amid the transition to a new funding cycle, the Global Fund Strategy Committee approved $2.2 million in bridge funding so that civil society and communities are supported to remain engaged throughout 2020. The main focus this year is to ensure civil society and communities play a meaningful role in shaping funding requests and the design of programs for the 2020-2022 cycle. The CRG SI is also striving to mitigate the effects that COVID-19 is having on engagement by supporting innovative, flexible, and community-led solutions.

THE SHORT-TERM TECHNICAL ASSISTANCE PROGRAM

The **CRG Technical Assistance (TA) Program** provides peer-led support to civil society and community organizations to meaningfully engage in the Global Fund grant cycle, including during country dialogue, funding request development, grant-making and grant implementation.

As of June 2020, the Global Fund received 215 requests for CRG TA. Of these, 162 were eligible for support and 114 went on to the delivery phase. To date, CRG TA has been provided to communities in 69 unique countries, and 10 multi-country grants. Seventeen assignments were delivered in challenging operating environments (COEs).
SHAPING NATIONAL STRATEGIC PLANS

In recent months, particular attention has been paid to supporting key and vulnerable communities to engage in National Strategic Plan (NSP) development processes. As the basis for funding requests, engagement in NSPs is a critical first step to strengthening Global Fund grants.

In Myanmar, key populations were supported to discuss and validate the country review recommendations and provide final input into the fourth HIV NSP 2021-2025. This contributed to the inclusion of community-led key population service centers as a new NSP priority. TA is also ongoing in Sierra Leone, supporting TB-affected communities to meaningfully engage in the development of the new TB NSP. In Colombia, an assignment is being delivered to support the implementation of an oversight framework for civil society and communities to monitor the implementation of the 2018-2021 National HIV Response Plan and the transition policy process. In Ghana, CRG TA is preparing young people living with HIV to actively participate in the development of the new NSP. Through this TA, communities will have the opportunity to push for improved data for decision-making, including the use of age- and gender-disaggregated data in the NSP.

INCLUSIVE COUNTRY DIALOGUE

With 123 funding requests due for submission to the Global Fund between March and June 2020, the demand for technical assistance has surged. Technical assistance is being provided for communities to engage in country dialogue and funding request development.

In the Philippines, TA supported communities to identify and articulate their priorities for removing human rights- and gender-related barriers to access to health services for inclusion in the country’s Window 1 HIV funding request. This support ensured that the investments proposed in the matching funds were fully aligned with the recommendations in the mid-term review of the Global Fund’s ‘Breaking Down Barriers’ initiative. In Kazakhstan, TA supported a network of people living with HIV to meaningfully engage in country dialogue for the new HIV funding request. TA supported a community consultation in Mali, where a strategy is being developed for the involvement of communities in the response to HIV and TB and the preparation for the next funding request. Both Kazakhstan and Mali submitted their funding requests on 30 June 2020 (Window 2c). In Botswana, adolescent girls and young women (AGYW) are receiving TA to set their priorities for the funding request. Botswana will submit HIV and TB funding requests later this year, including $1.8 million in matching funds for AGYW HIV prevention.

TA IN THE TIME OF COVID-19

In the context of COVID-19, deployment of TA has added complexities. In April, the CRG SI issued guidance to its partners and to Global Fund Country Teams to ensure support could continue to be provided safely and effectively during the pandemic. Deployment of TA is always informed by the latest guidance from the World Health Organization and the local authorities. Where possible, TA is provided virtually, or only using local consultants and following social distancing regulations (e.g. gatherings of no more than 10 people). In-country activities are only undertaken with informed consent of consultants and TA requestors.

LEARNING TO IMPROVE

The Office of the Inspector General (OIG) recently commended the CRG SI for its comprehensive monitoring and evaluation framework, which facilitates regular and systematic assessments and reporting for measuring the impact of TA deployed under the Strategic Initiative. An external evaluation of the CRG SI is currently underway. This is expected to provide further insight into how the TA program (and other components) can be improved.
Complementing the short-term TA, the CRG SI also invests in long-term capacity strengthening of HIV, TB, and malaria networks and organizations, to better support the meaningful engagement of their constituencies in Global Fund-related processes. Investments are channeled through six global HIV networks of transgender people, people who use drugs, gay men and other men who have sex with men (MSM), sex workers, people living with HIV, and young key populations; five global and regional TB networks of survivors and activists; and one global malaria network focused on advocacy for disease elimination.

STRENGTHENING CAPACITY IN CCMS

In close collaboration with the CCM Hub and partners like GIZ, the CRG SI supports key and vulnerable populations to be able to effectively engage in Global Fund decision-making. In a recent commentary, the Global Fund Executive Director, Peter Sands, noted that the best CCMs incorporate the diverse experiences and perspectives of key and vulnerable populations.

To this end, CRG SI partners are supporting coaching and mentoring for a pool of ten civil society organizations active in malaria in Niger, Cameroon, Tanzania and Ghana. The mentoring will consist of organizing online training for the organizations on malaria NSPs, Global Fund processes, and the role of malaria representatives in CCMs. In Pakistan, people who use drugs are receiving network development support, including the establishment of linkages between network members, other civil society partners, CCM members, and the Global Fund Country Team. People affected by TB in Bolivia, El Salvador, Guatemala, Nicaragua and Peru are receiving training on how to engage in CCM processes, with a focus on country dialogue. CRG SI partners have developed guidance to ensure meaningful engagement of key populations amid COVID-19, including encouraging CCMs to ensure communities are part of decision-making.

HER Voice Fund, now implemented by the Global Network of Young People living with HIV (Y+), successfully launched the first two requests for proposals. HER Voice Fund offers small grants to organizations that amplify the voices and priorities of AGYW in Global Fund-related processes in 13 African countries. In the first two calls for proposals, 705 applications were received from AGYW, including young transgender women, young women with disability, and young women in conflict settings. HER Voice Fund has a dedicated capacity strengthening component, which includes mentoring and training AGYW and linking them directly with CCMs.

SUPPORTING PARTICIPATION IN WRITING TEAMS

Several CRG SI partners are supporting key populations to participate in writing teams for Global Fund funding requests. Trans activists are receiving support to participate in writing teams in Kenya, Uganda and Zambia. Sex workers from Papua New Guinea, South Sudan, Tanzania and Zambia are being mentored to participate in writing teams and to engage in grant-making negotiations. People who use drugs in India are receiving virtual support on developing and packaging their priorities for the CCM and proposal writing team. Support for writing team participation is also extended to MSM in Cameroon, and young people in Indonesia.
The inclusion of key populations in writing teams has shown to directly enable the inclusion of specific priorities in funding requests.

African TB Activists who are members of writing teams in Burkina Faso, Cameroon, Kenya, Ethiopia, Nigeria, Ghana and Eswatini will receive a three-day workshop on how to include findings from Stop TB CRG Assessments in funding requests. These seven countries are eligible for nearly $40 million in TB matching funds in the 2020-2022 allocation cycle.

**ADVOCATING FOR INVESTMENTS**

Meaningful engagement of key and vulnerable populations is recognized as a necessary step towards increasing investments in evidence- and rights-based programming.

Through the CRG SI, young people living with HIV from Côte d’Ivoire, Ghana, Kyrgyzstan and Moldova will receive a training curriculum called “Making Global Fund Money work for Young People”. In Nepal, young people are using a CRG TA report on cash transfer programs for children living with HIV to advocate for inclusion of program recommendations in the funding request. In Tanzania and Zanzibar, the SI supports advocacy for greater investment in community-led, rights-based, harm reduction programming in funding requests, including responding to Technical Review Panel (TRP) comments and following-up during the grant-making stage.

**REGIONAL COMMUNICATION AND COORDINATION PLATFORMS**

The third component of the CRG SI strengthens the overall coordination of community systems and enhances information sharing for meaningful engagement in Global Fund-related processes. Six civil society organizations host regional communication and coordination platforms in Asia-Pacific, Anglophone Africa, Eastern Europe and Central Asia (EECA), Francophone Africa, Latin America and the Caribbean (LAC), and Middle East and North Africa (MENA).

**STRENGTHENING COORDINATION DURING GRANT-MAKING**

Complementing the TA for country dialogue, and the networks’ support for key populations on writing teams, the regional platforms are focused on strengthening civil society and community engagement during grant-making.

An independent review, commissioned by the CRG Department, revealed that communities face unique barriers to engagement during the grant-making stage, often with limited support available.

In LAC, the platform is providing part-time coordination support for civil society organizations in Haiti during grant-making processes from June to December 2020. Working closely with the Country Team, the aim is to increase access to technical assistance and to ensure CSOs engage in discussions about the new implementation arrangements that are envisaged. With support from UNAIDS, the platform is also increasing access to technical assistance in Guatemala, aimed at improving the coordination of transgender community groups and their civil society allies.

In EECA, the Platform is working in coordination with the Kyrgyzstan CCM to ensure communities can engage with the TRP comments, particularly to respond to issues flagged about the scale-up of community TB care delivery. The Platform is also strengthening the civil society-led Coordination Committee in Russia, ensuring the organized participation of diverse constituencies in the country’s first funding request since 2014.
The Asia-Pacific platform is supporting communities in Sri Lanka to assess capacity for key population-led service delivery in the new Global Fund grant. This is linked to a sustainability roadmap developed by a CSO consortium. In India, the Platform is supporting communities to prepare for grant implementation by mapping current and potential partnerships between networks of people living with HIV and TB community groups.

The MENA platform is focusing on documenting experiences and capturing lessons learned, developing a case study on community experiences engaging in Morocco’s Window 2 HIV request. The platform will also develop case studies on community engagement in the ongoing Global Fund transition processes in Algeria and Egypt.

**ENHANCING INFORMATION SHARING ON COVID-19**

Since March 2020, the regional platforms have prioritized the sharing of timely and accurate information about COVID-19 and how it impacts the Global Fund’s work on HIV, TB and malaria.

The platforms have shared information on COVID-19 grant flexibilities and the COVID-19 Response Mechanism (C19RM). As of 23 June, the Global Fund had approved $357 million for 95 countries and 8 multi-country programs through the C19RM and grant flexibilities. Platforms have also assessed barriers to community engagement in Global Fund-related processes as a result of the virus. The Anglophone Africa platform surveyed 96 people in 19 countries, revealing that 31.3% of communities do not have access to regular information about prevention, testing, and treatment of COVID-19, and just 35.4% of civil society respondents are engaged in their country’s COVID-19 response team.

The Anglophone Africa Platform coordinates a 45-member COVID-19 civil society response task team, which has terms of reference and an active WhatsApp group. Through this forum, communities had access to Global Fund-related COVID-19 information, including a Tanzanian CSO position paper and strategic intervention areas on COVID-19, an open letter from Ugandan CSOs on COVID-19 and access to maternal health services, and a policy brief exploring adolescent experiences and priorities in Ethiopia under COVID-19.


The regional platforms are also acting as an alert system, gathering information from CSOs and communities through multi-language web-based tools and feeding it back up to the Global Fund. The objective of this exercise is to provide community-focused data to complement the COVID-19 country monitoring led by Local Fund Agents. Through the platforms, key service delivery issues have been flagged. Movement restrictions are creating barriers to treatment access in Morocco, Venezuelan migrants in Colombia, Ecuador and Peru are vulnerable to infection. The platforms have also reported positive responses. Drug users in Ukraine are accessing take-home doses of opioid substitution therapy. Global Fund implementers in Papua New Guinea’s TB grant are being harnessed by the government to share COVID-19 information.

On 22 June, the six regional platforms partnered with the Global Fund Advocates Network to convene a virtual town hall with Peter Sands. Communities used the forum to ask questions related to the development of the new Global Fund strategy, the Global Fund’s response to COVID-19, and the Access to COVID-19 Tools Accelerator (ACT-A).

“There aren’t a lot of easy answers here. Together, we are facing a profound set of challenges and I share with you the determination and the desire to make sure that vital programs, including things like harm reduction, are maintained.”

Peter Sands, during virtual town hall with communities
CRG SI PARTNERS

TA PROVIDERS

African Men for Sexual Health and Rights
AIDS and Rights Alliance for Southern Africa
AIDS Strategy, Advocacy and Policy Alliance
Alliance India
Alliance Technical Assistance Centre – International Charitable Foundation
Frontline AIDS
Amref Health Africa
Asia Pacific Coalition on Male Sexual Health
Asia Catalyst
ATHENA
Australian Federation of AIDS Organizations
Canadian HIV/AIDS Legal Network
Caribbean Vulnerable Communities Coalition
Community Leadership and Action Collaborative
Eurasian Coalition on Male Health
Hivos
International Center for Research on Women
International Council of AIDS Service Organizations
The Kenya Legal and Ethical Issues Network on HIV and AIDS
The Kenya NGOs Alliance Against Malaria
Moldovan Institute for Human Rights
Nai Zindagi
Networking HIV and AIDS Community of Southern Africa
PATH
Speak Up Africa
The Union

KEY AND VULNERABLE POPULATION NETWORKS AND ORGANIZATIONS

Global Advocates for Trans Equality
Global Network of People Living with HIV
MPact Global Action for Gay Men’s Health and Rights
International Network of People Who Use Drugs
Global Network of Sex Worker Projects
Youth Consortium (Youth Lead, Youth Rise, Y+)
ACT Africa
Association of People Affected by Tuberculosis (ASPAT) Peru
Global Coalition of TB Activists
TB Europe Coalition
TB People
Civil Society for Malaria Elimination
HER Voice Fund (implemented by the Global Network of Young People Living With HIV)

REGIONAL COMMUNICATION AND COORDINATION PLATFORMS

APCASO Foundation (Asia-Pacific)
Eastern Africa National Networks of AIDS and Health Service Organizations (Anglophone Africa)
Eurasian Harm Reduction Association (Eastern Europe and Central Asia)
International Treatment Preparedness Coalition (Middle East and North Africa)
Network on Access to Essential Medicines (RAME) (Francophone Africa)
Via Libre (Latin America and the Caribbean)