

Transitions APCRG Meeting 2023



Documentation Report



BACKGROUND

APCASO, a regional civil society organization, has hosted the APCRG Platform since 2015, bridging connections between the Global Fund Secretariat, technical partners, and key population networks. In its 2021-2023 cycle, the platform aimed to boost Global Fund awareness, strengthen community engagement, and enhance access to technical assistance. As APCASO concludes its hosting, the APCRG Platform transitions to Seven Alliance in January 2024, focusing on continuity and expanding efforts into Grant Cycle 7. The official launch of this transition, scheduled for December 2023, will present Seven Alliance's plans and learning agenda for GC7.

The meeting's primary goal is to share insights on how the APCRG Platform can support civil society and community partners in GC7 grant implementation and reviewing APCRG Platform's support during its transition to Seven Alliance. The meeting also marks the launch of the new Regional Learning Hub for Asia-Pacific 2024-2026, involving a review and cocreation of the draft learning agenda for the next three years.





DAY 1 04 DECEMBER 2023

Welcome and introduction

Moderated by Jeff Acaba, Senior Program Officer, APCASO

Jeff extended a warm welcome to all participants at the Big Bangkok Meeting, a series focusing on the APCRG platform's work. Emphasizing the "transitions" theme, he highlighted that this marks APCASO's final hosting of the APCRG meeting, a bittersweet moment. The objectives for the two-day meeting include a broad focus on the Global Fund GC6 implementation and GC7 preparation, reflecting on collective contributions, discussing CLM, and addressing the transition of the platform into a learning hub. Jeff then invited the APCASO Executive Director, and Mr. Gavin Reid, from the Global Fund to deliver opening remarks.

1.1 Welcome remarks

RD Marte, Executive Director, APCASO

RD Marte conveyed that the Big Bangkok Meeting holds a bittersweet significance as it marks the last

APCRG meeting hosted by APCASO before transitioning hosting responsibilities to another entity. Despite this transition, she assured everyone that APCASO remains committed to upholding the spirit of APCRG, continuing its work and communications beyond the Global Fund. She expressed gratitude for the diverse representation of country partners and regional KP Network representatives present, acknowledging their participation in hosting the next cycle of the Learning Hub. She also recognized the APCASO staff for their excellent efforts in organizing the meeting. RD Marte emphasized that this transition signifies a time of transformation and regeneration, and she encouraged a collaborative and informal atmosphere during the meeting. The series of meetings will provide insights for reflection and strategic planning for the team, both in practical and strategic terms, with a focus on maintaining momentum and improvement for the future.

Mr. Gavin Reid, Senior Technical Advisor, Community Engagement, The Global Fund

Mr. Gavin Reid extended a warm welcome to everyone, recognizing that the platform is concluding after nine years. He emphasized the importance of reflecting on the journey and the valuable lessons learned during this period to inform future endeavors. Mr. Reid highlighted the current busy phase in the cycle, where funding requests have been submitted, grant-making is in progress, and anticipation is high for the funding implementation. Looking ahead, he mentioned the preparations for Grant Cycle 8 starting next year, with the subsequent cycle beginning within two years. Mr. Reid stressed the need to consider how insights from this transition phase inform ongoing work. He also acknowledged APCASO's continued leadership and hosting, particularly in tuberculosis and community engagement, expressing eagerness to learn and interact throughout the week.

1.2 Presentation of the agenda and Expectation setting

Moderated by Jeff Acaba, Senior Program Officer, APCASO

Jeff initiated the introduction session by leading engaging grouping activities before delving into the meeting agenda. He provided a briefing to the participants about the APCRG 2023 meeting schedule for 4-5 December 2023.

1.3 The APCRG Platform 2021-2023: achievements

Presented by Jeff Acaba, Senior Program Officer, APCASO

Jeff Acaba began by reflecting on the 2019 APCRG partners meeting, addressing crucial questions about regional resources and community connections in the new funding cycle. Despite advocacy restrictions, the focus was on advocating for increased funding to strengthen community networks, shaping the platform's 2020-2023 implementation. Highlighting APCASO's pivotal role as the platform's host since 2015, Jeff emphasized bidirectional support for country-level community-led and key population organizations. The approach aimed at mutual learning in advocacy and project implementation, focusing on three primary objectives: enhancing community knowledge of global funding processes, strengthening capacities in advocacy and relevant skills, and improving access to technical assistance from the Global Fund.

Jeff detailed the platform's three objectives, with eight committed activities. The first activity involved mapping for consistent communication on Global Fund-related information, disseminated through Mailchimp and Facebook. Over three years, Mailchimp subscribers reached 1,300, and Facebook followers nearly 5,000, achieving the 74% target. The activity concentrated on mapping 326 Civil Society organizations in Asia-Pacific involved in HIV, TB, malaria, or a combination of these. The mapping uncovered collaborations and opportunities, highlighting their active engagement in the Global Fund implementation process.

Under objective 2, the APCRG platform executed four key activities. In Activity 3, the platform aimed to enhance collective access to tools, organizing 13 webinars and sharing 45 tools through MailChimp and Facebook, exceeding the goal by over 150%. Leveraging insights from mapping and scoping exercises, the platform addressed technical assistance needs, supporting 12 civil society organizations with small funds averaging \$5,000 each. While the initial target was 900 Community Partners over three years, 648 were reached, with additional outreach under GC7, totaling more than 900 participants. Activity 5 convened the APCRG meeting in 2022 in Hanoi, with 50 participants presenting results from the scoping exercise, covering technical assistance needs, mapping, and involvement in CCM, GC6 implementation, and GC7

preparation. In Activity 6, the platform excelled in sharing opportunities, disseminating over 400 through newsletters and Facebook, and organizing eight forums.

The last objective focused on TA through two activities. Recognizing the challenge of mobilizing communities for TA, the platform streamlined the process, administering 17 TAs. Despite complexities, the platform effectively connected partners with resources, expanding the network at both regional and country levels. Jeff highlighted the platform's role in mobilizing funds, citing impactful quotes from GC7 support to Bhutan, Pakistan, and Sri Lanka.

Q&A and Comments

Mr. Niluka Perera, DAST, Sri Lanka

Mr. Niluka Perera highlighted the importance of packaging valuable lessons learned from APCRG's past years, emphasizing their significance as best practices. He inquired about APCASO's plans to make these lessons accessible to technical partners, civil society, the Global Fund, and a broader audience. In addition to acknowledging the value of publications, Mr. Perera suggested the creation of a dedicated webpage on the website. This centralized hub would provide easy access to specific lessons and insights from different regions, offering significant benefits to the Seven Alliance Consortium and other stakeholders seeking to leverage this accumulated knowledge.

Ms. Susan Perez, Community-led Monitoring Strategic Initiative (CLM SI) The Global Fund

Ms. Susan Perez congratulated the impressive quantitative achievements, exceeding the hundred percent mark. Ms. Perez expressed a particular interest in organizational capacity building and sought more examples in this regard. While recognizing the presence of upcoming panels, she emphasized the importance of delving into the progress of organizations met in 2015. Understanding how they have evolved, grown, obtained grants, or achieved registration would be enlightening. Ms. Perez highlighted the value of showcasing these stories, as such examples are not always visible or heard, providing a unique perspective.

Jeff Acaba, Senior Program Officer, APCASO

Jeff shared that a publication would be ready in two days and expressed appreciation for the idea from Mr. Perera from DAST. He acknowledged the merit of breaking down reports to make them more social media-friendly. Regarding Ms. Perez's recommendation, Jeff explained that the platform faces limitations due to its cyclical implementation every three years. He noted the absence of a long-term view as a challenge and agreed that it's a valuable idea to retrospectively examine the consistent partners since 2015.

1.4 Panel: APCRG Platform's impact on the ground (Strategic Support 2022-2023)

Ms. Vu Ngoc Hoa, SCDI, Vietnam

Ms. Vu Ngoc Hoa presented a comprehensive overview of SCDI's engagement in the Global Fund's grant cycle, emphasizing three critical areas for meaningful community participation. The first focused on capacity building, highlighting the need for knowledge among the national network and CBOs involved in Global Fund projects. The second stressed the importance of timely information about the grant cycle, acknowledging challenges in reaching all focal points. The third addressed the financing challenges, especially during online training in the COVID-19 era. Ms. Vu Ngoc Hoa emphasized the significance of in-person training, particularly for CBOs in provinces working on HIV, TB, and malaria, and the need for continuous technical assistance and support for CBOs.

The role of the platform in facilitating community engagement was discussed in light of challenges faced during Grant Cycle 7. Ms. Vu Ngoc Hoa highlighted the importance of platforms, either existing or newly created, to bridge communication gaps with the PR and facilitate community engagement. She underlined the impact of activities extending beyond Vietnam, resonating regionally and globally, emphasizing the connection between grassroots, national, regional, and global initiatives for comprehensive impact.

Discussing the APCRG timeline, Ms. Vu Ngoc Hoa covered support for CCM elections and the decline in CCM engagement with community members. The integration of CRG and CLM into community capacity building showcased a multifaceted approach inspired by APCRG. Ms. Vu Ngoc Hoa touched on outcomes and lessons learned, emphasizing ongoing transitions and decentralization in Vietnam's health system. The shift to social health insurance coverage for TB treatment raised considerations for careful planning. Decentralization's impact on domestic financing revealed challenges, including decreased investment in essential services. The ongoing need for financial support for community systems during transition and decentralization was underscored, emphasizing the pivotal role of CBOs at the provincial level and their expanded roles beyond the initial focus.

In conclusion, Ms. Vu Ngoc Hoa emphasized the importance of adapting to transitions, ensuring ongoing financial support, and fortifying the roles of community systems in comprehensive health responses. The insights presented by Ms. Vu Ngoc Hoa contributed valuable perspectives to the collective understanding of effective community engagement in the Global Fund's grant cycle.

Mr. Daniel Marguari, SPIRITIA, Indonesia

Mr. Daniel Marguari emphasized the enduring partnership between SPIRITIA and APCASO, highlighting a collaborative and mutually respectful relationship. The \$5,000 funding facilitated a workshop targeting the capacity building of community organizations and networks in addressing TB and HIV challenges. Despite a small group of fewer than 25 participants, the discussions proved fruitful, addressing progress, challenges, and future strategies. The workshop served as a catalyst for SPIRITIA to extend its efforts beyond the event.

Post-workshop, SPIRITIA strategically reprogrammed and extended activities to local districts, replicating the workshop to enhance the knowledge and skills of field workers, organizations, and local partners. Encouraged by the workshop, SPIRITIA focused on recording and reporting human rights violations, appointing community liaison officers in various districts. This initiative continued into 2023 and Grant Cycle 7, with a dedicated program and limited budget allocated to address ongoing challenges. Despite Indonesia's commendable achievement in detecting people's status (around 90%), the challenge remained in ensuring more people received treatment, with only a 40% achievement rate. The persistent barriers related to CRG and human rights violations reaffirmed the importance of CSS in enhancing SPIRITIA's organizational capacity.

Mr. Marguari emphasized that CLM should not stand alone but should be part of a broader CLR. He stressed the importance of individuals, organizations, and networks positioning themselves as part of the CLR, with CLM being just one component. He highlighted the impact of a \$5,000 workshop initiated by SPIRITIA, showcasing how the organization took the lead in implementing strategic activities, leveraging the funding and program management capacity it possessed. A notable outcome was the recording and reporting of almost 5,000 cases of alleged human rights violations, demonstrating the tangible impact of the \$5,000 investment. He concluded by underlining that the significance of \$5,000 extends beyond its monetary value; it acts as a stimulant, inspiring organizations to think creatively and seek opportunities. He encouraged the audience to view integration, not as a project but as part of their program, emphasizing that this approach, irrespective of one's position, can be immensely beneficial.

Mr. Viengakhone Souriyo, CHIAS, Lao PDR

Mr. Viengakhone Souriyo highlighted the groundbreaking moment as CRG received TA for the first time. Representing CHIAS, Lao, a key recipient of Global Fund support, he served as the focal point for civil society in Lao PDR during the country's transition away from specific grants. Instead, the government secured a World Bank loan, integrating funds for TB and HIV into a single basket to address health and nutrition services, emphasizing nutrition as a priority in Laos.

Navigating the challenges of this transition, Mr. Souriyo sought CRG's crucial technical assistance, especially with the HANSA project, operating under the Ministry of Health without the previous people's platform like CCM. Despite the government's emphasis on ownership, genuine civil society involvement faced obstacles, with directives dictating specific activities, sometimes without compensation for the involved staff.

Collaborating with regional focal points APCASO and APN Plus, Mr. Souriyo accessed TA, focusing on understanding HANSA 1 challenges and developing a comprehensive strategy for CSOs in HANSA Phase 2, aiming for integration into the country dialogue and funding requests. The outcomes of the CRG TA results were crucial, addressing achievements, gaps, and future contributions of CSOs during HANSA Phase 1. Mr. Souriyo acknowledged challenges with CCM and advocated for the broader role of CSOs beyond awareness campaigns. The Annex 1 report, highlighting funding priorities for Civil Society and Communities Most Affected by HIV and Tuberculosis, was instrumental for the Global Fund's next funding request.

Despite hurdles, Mr. Souriyo thanked APCASO and APN Plus for their support. Challenges with the government's acceptance of priorities and Performance-Based Conditions (PBC) in HANSA 1 complicated the process, with potential funding cuts. Mr. Souriyo outlined efforts to strengthen CSO-related indicators for Global Fund submissions, especially in challenging areas like HIV prevention for the LGBT and MSM communities. Mr. Souriyo shared findings from assessments and focus group discussions conducted with regional civil society experts. As negotiations for the grant were ongoing, he concluded by urging countries undergoing transition to draw insights from Laos's experiences for a smoother process.

Q&A and Comments

Ms. Amara Quesada, ACHIEVE, The Philippines

Ms. Amara Quesada highlighted that governments are well-aware of the 95.95.95 targets in the global AIDS strategy. However, she identified a common misunderstanding, with governments assuming their role is limited to identifying, testing, and treating individuals, regardless of funding sources. Ms. Quesada advocated for a more robust integration of UNAIDS targets with global CRG efforts, specifically emphasizing the 30-60-80 targets. Despite the widespread discussion of the 95.95.95 targets.

She stressed the necessity of conveying this message to governments, providing clarity on the rationale behind advocating for community engagement. Ms. Quesada noted that while the CRG platform primarily focuses on community engagement in the Global Fund context, the framework for community engagement should extend beyond Global Fund interventions. This perspective was shaped by Ms. Quesada's observations of the concerning situation in Laos.

RD Marte, Executive Director, APCASO

RD Marte conveyed gratitude for the impressive outcomes resulting from the \$5,000 mini-support, recognizing its catalytic impact. She stressed, however, that while \$5,000 can achieve much, there's a need for the Global Fund to understand its limitations. RD Marte acknowledged the challenges faced by partners, considering the expectations and administrative costs linked to projects with limited funding. She highlighted the catalytic nature of the money and the strength of implementing organizations, acknowledging that not everyone shares such privilege.

Insights into challenges, particularly in Laos, were shared by RD Marte, emphasizing the risk of weakening civil society with the shift to NGOs for organizational support without adequate funding. She underscored the importance of recognizing the genuine value of community interventions and ensuring their long-term sustainability. RD Marte commended the experiences shared by Indonesia and Vietnam, emphasizing the effective leveraging of funds by civil society.

RD Marte emphasized the vital role of robust organizations in maximizing limited funding. She appreciated organizations' willingness to contribute their resources, illustrating the significance of social capital and trust. These lessons, she noted, are invaluable for the next platform, where organizations willing to collaborate and invest in projects can play a substantial role beyond mere financial contributions.

Agatha Dafarel, Inti Muda Indonesia

Agatha Dafarel underscored the need to involve the community comprehensively in the response. Drawing from past experiences, especially within the transgender community, instances of microaggressions and transphobia were highlighted. Agatha Dafarel emphasized adopting a gender-based approach, respecting individuals' rights, including avoiding the use of a trans person's birth name in public settings.

A call was made to create a safe space for transgender individuals, allowing them to exist without facing challenges or judgment. Recognizing the intricacies of intersectionality, Agatha Dafarel urged not only understanding but also celebrating it. A key recommendation was the widespread implementation of gender sensitivity training across various platforms, reaching beyond specific fields to include health ministries, outreach workers, and others. The overarching aim is to sensitize everyone to the importance of establishing safe spaces for marginalized communities, particularly transgender and gender-diverse individuals.

Ms. Susan Perez, Community-led Monitoring Strategic Initiative (CLM SI) The Global Fund

Ms. Susan Perez posed a question to Vietnam, expressing curiosity about the progress in CRG and CLM training. She inquired about developments since the training, seeking information on ongoing CLM implementation and future plans. Turning to Indonesia, Ms. Perez sought clarification on the destination of the data, asking whether there is a legal service addressing the reported violations. Additionally, she inquired about the frequency of monitoring across the population and the regularity of data sharing, specifying the recipients. She concluded by asking about the development of the monitoring tool being utilized.

Ms. Vu Ngoc Hoa, SCDI, Vietnam

Ms. Vu Ngoc Hoa provided insights into ongoing CLM efforts for HIV, TB, and malaria in Vietnam. The recent training aimed to enhance CLM capacity, emphasizing the integration of CRG issues and local challenges. She highlighted the absence of a central system for CLM tools, underscoring the urgency to report and react to violation cases. The community relies on a network for prompt reporting, emphasizing the importance of identifying and documenting cases. While facing challenges in combining HIV and TB networks, collaborative efforts with CBOs address common issues among populations. The focus remains on reacting to and resolving cases on a case-by-case basis, documenting for potential government discussions. Despite the absence of perfect tools, Ms. Vu Ngoc Hoa stressed the normalization of CLM in CBOs, recognizing their vital role.

Mr. Daniel Marguari, SPIRITIA, Indonesia

Mr. Daniel Marguari highlighted his community organization's project-focused approach, developing tools, and training individuals, particularly emphasizing the role of Community Liaison Officers as a function rather than individuals. Stressing the importance of strengthening organizations and individuals for local problem-solving, he noted the need for tailored solutions based on each country's unique context. Drawing from his experience in Indonesia, where 60% of the Global Fund budget was managed by Community PR, he emphasized the importance of continued support, acknowledging the variation in the effectiveness of community engagement. Mr. Marguari stressed the need for adapting solutions to the local context for meaningful impact.

Ms. Clarisse Veylon-Hervet,

Regional Counsellor in Global Health - South-East Asia, French Ministry of Foreign Affairs

Ms. Clarisse Veylon-Hervet made a brief comment, revisiting Laos's presentation on the HANSA project. She emphasized the importance of collaboration between CSOs, the World Bank, and other partners, indicating that it is also the responsibility of CRG, the Global Fund, and their counterparts to engage with the World Bank. She conveyed the message that CSOs are not alone in this effort and stressed the need for a clear agenda that aligns the pandemic fund with the Global Fund grant, emphasizing that both entities work in collaboration with and for CSOs. She urged that if CSOs feel isolated in their efforts, they should reach out, the French Ministry of Foreign Affairs and others are willing to engage with the World Bank on their behalf.



Menti 1.4 How has APCRG Platform supported you in the coordination & communication under GC6 (2021-2023)

For participants respond, please refer to Appendix A.

1.5 CE SI for GC7: What's new? What's changed?

Mr. Gavin Reid, Senior Technical Advisor, Community Engagement, The Global Fund

Mr. Gavin Reid provided insights into the Strategic Initiative (SI), highlighting a nuanced shift in focus from the previous cycle. The SI aimed to empower communities by enabling them to generate and utilize data for informed advocacy and decisionmaking, emphasizing their capacity to hold representatives accountable. Key objectives included providing communities with timely Global Fund-related information and guiding program quality through the adoption of global guidance and best practices. The overarching theory of change focused on supporting community engagement in Global Fund and related national decision-making processes, extending beyond the Global Fund to include NSPs and technical working groups. Mr. Reid emphasized the need for a longer-term perspective, considering upcoming grant cycles, the replenishment cycle, and allocation matters.

The SI's catalytic effect aimed to strengthen community leadership and engagement throughout the grant life cycle, enhancing the overall impact of Global Fund investments.

In Component 1, Mr. Reid highlighted the continued emphasis on short-term, peer-to-peer, South-to-South technical assistance. A significant adjustment in this component involved addressing disparities in TA delivery, particularly in localization. Despite progress, Mr. Reid noted that improvements were needed to ensure TA was provided by community peers. In the previous cycle, only 67% of TA was delivered by those identifying with the assisted population, leading to imbalances, such as all TA being provided by men in a specific region. In response, the decision for the next cycle mandated that at least 80% of TA be delivered by those relating to the community they assist, with a minimum of 50% by women or gender-diverse individuals and 30% by those under 30. This intentional shift aimed to diversify TA sources, recognizing the untapped potential among young people and actively encouraging their participation in delivering this component.

In Component 2, a significant overhaul occurred, focusing on long-term support for HIV, TB, and malaria networks and organizations. The shift involved the adoption of a community-led engagement plan for each country, starting with a thorough situational analysis encompassing legal, political, and response-related aspects. Partners were urged to critically assess their work, scrutinize GC 7's funding request, and utilize additional data to define objectives. The approach emphasized embedding technical assistance within timelines, enabling partners to efficiently mobilize substantial TA budgets. Acknowledging that external experts might not always be necessary, the strategy empowered partners to contract individuals from their own community or sister organizations. The emphasis was on aligning TA outputs with intended processes, as demonstrated by collaboration with partners supporting community consultants in writing teams during this cycle. For TB and malaria,

insights from consultations underscored challenges in advocacy and representation due to a lack of infrastructure, contrasting with HIV's longer funding history and organizational structures. To address this, support extended to organizational strengthening, capacity building, and core support, proactively assisting in building structures for TB and malaria. Notably, the CE SI aimed for comprehensive and equitable TB response, supporting countries beyond high burden and impact settings.

In Component 3, Mr. Reid introduced CRG regional learning hubs, underscoring their role in enhancing learning within and between regions. The overview of TA highlighted its peer-to-peer nature, covering diverse aspects such as situation analysis, needs assessment, program design support, and engagement in NSP review and development. CCM strengthening efforts were aligned with CCM Hubs to enhance community literacy, spanning Civil Society, community populations, and CCM members. While direct support involved capacity development, standalone tools, and funding request writing, indirect support allowed communities to hire individuals for collaboration. Mr. Reid acknowledged the need to improve awareness of technical assistance, with specific partners identified for support in the region. The focus on the long-term perspective of the country engagement plan was emphasized, extending beyond a single advocacy opportunity to encompass the entire grant life cycle or beyond.

In the upcoming year, Pakistan, Mongolia, and Nepal took steps in Q1 to develop engagement planning workshops, allowing community-driven plans to be formulated and finalized in Q2, with a subsequent 30-month implementation period. Mr. Reid acknowledged the challenge of translating partnership ideals into practice and emphasized the importance of partners being aware of each other's work and fostering collaboration. For Regional Learning Hubs, eight focused activities were outlined, with Mr. Reid seeking input on content flexibility to address country-specific realities. He stressed the need for crosscomponent learning, acknowledging partner frustration and emphasizing flexibility in addressing technical assistance needs with funds held by Regional Learning Hubs and other partners. Mr. Reid highlighted key topics in the learning agenda, such as transition preparation, co-financing, multistakeholder partnership principles, and ensuring community voices are heard by the government. Lastly, he shared the commitment to a transition process and the formation of a dedicated team for investment support to strategically allocate resources for a more impactful outcome.

Q&A and Comments

Mr. Niluka Perera, DAST, Sri Lanka

Mr. Niluka Perera mentioned it might be early, but he finds the Community Annex in GC7 intriguing. There was extensive coordination among civil society to establish it. Questions were raised at the board meeting about the Community Annex's future. Mr. Perera wondered if there's consideration to use its analysis in shaping the Learning Hub's work.

Mr. Daniel Marguari, SPIRITIA, Indonesia

Mr. Daniel Marguari examined the conclusion of GC6 and noted that most PRs did not fully spend their budgets. He capitalized on this opportunity at the country level, working with nations to encourage them to utilize the remaining funds for activities related to CRG focus. Mr. Marguari emphasized the importance of learning from this grant cycle and establishing a close relationship from the initial stages of the next cycle. He highlighted the need for mechanisms to bridge the considerable gaps in CRG requirements for the Patriotic 95-95-95. Recognizing that not every

country has a community PR or a robust SSR, Mr. Marguari stressed the need for the Global Fund itself to push for these considerations, as many countries and governments may not be aware of these opportunities.

Ms. Karishma Banjara, Trisuli Plus, Nepal

Ms. Karishma Banjara asked about the criteria for identifying countries for GC7, particularly regarding geography and disease-specific priorities. She expressed curiosity about any unique requirements in the GC7 identification process.

RD Marte, Executive Director, APCASO

RD Marte highlighted a concern about the TA providers pregualified for Asia Pacific, noting that they are all international organizations. She expressed reservations about the deployment model, emphasizing that while the providers may assign partners to the region, the ownership, learning, and overall control of TA remain with global organizations. RD Marte raised the issue of a potential perception of colonizing technical assistance, emphasizing the need to address this fundamental problem. While supportive of diverse and inclusive TA provision, especially for young people, she suggested considering Tandem provision within CRG or CE SI resources to facilitate cross-generational collaboration and learning. This approach, RD Marte argued, would offer valuable perspectives from both young and older individuals and enhance the capabilities of TA provider organizations across generations.

Mr. Gavin Reid, Senior Technical Advisor, Community Engagement, The Global Fund

Mr. Gavin Reid outlined the stringent requirements for TA providers, emphasizing the need for them to define a learning objective to transfer knowledge or skills to the requester. This foundational element aimed to ensure that requesters gleaned valuable insights, even if not delving into intricate methodologies. The additional condition mandated TA providers to employ individuals from within the country, often opting for junior consultants, aligning with RD Marte's concerns from APCASO about localizing TA. Mr. Reid acknowledged the current scarcity of TA providers and expressed consideration for a potential call to address this shortfall. The strategic approach involved prioritizing the hiring of community organizations or civil society organizations over individual consultants, driven by the belief that knowledge should be retained within the community and region. Mr. Reid clarified the meticulous process of country selection for Component 2, involving discussions between CRG and the Grant Management division, considering various metrics and grant opportunities. The selection process culminated in a list of approximately 24 countries for HIV, 20 for TB, and 15 for malaria.

Mr. Reid clarified that Component 3, working with the Regional Learning Hub, is inclusive of all countries and regions, and the broad range of technical assistance requests is open to eligible countries for Global Fund allocation, including those in multi-country grants. Mr. Reid underscored that the CE SI exclusively supports engagement in decision-making processes. He acknowledged the substantial demand for TA in implementation, but due to budget constraints, the emphasis was on reserving funds for engagement. Advocacy efforts persisted for increased support in engagement, aligning with the strategy and priorities for Grant Cycle 7, which placed a heightened focus on implementation by Community-led and community-based organizations. Internally, ongoing policy reviews sought to enhance the effectiveness of this approach. Mr. Reid underscored the importance of unpacking TA, highlighting intensified collaboration across diverse mechanisms to leverage advantages in coordinating TAs. Active discussions among stakeholders aimed at optimizing support mechanisms underscored the commitment to addressing this crucial aspect.

In response to Mr. Marguari, Mr. Reid addressed a significant issue regarding underutilized funds and inefficiencies, highlighting that nearly 30% of the power was funded in GC4. While decisions typically rested between the PR and the country team, Mr. Reid noted the role of CCM in ensuring accountability. Advocating for community inclusion, he stressed the importance of CCM regularly seeking input from community members to prioritize community-based responses. Mr. Reid initiated work to examine the community annex from Windows 1 to 3, exploring the contributors, content, uptake, and its journey. A survey, introducing a new key performance indicator on community engagement satisfaction, was launched to assess engagement satisfaction during the funding request development for Windows 1, 2, and 3.



1.6 Panel: Supporting engagement in GC7 funding request development under the APCRG Platform: what works?

Moderated by Ms. Mangala Namasivayam, APCASO

APCRG GC7 grantees:

Mr. Wangda Dorjie, Lhak Sam, Bhutan

Mr. Wangda Dorjie conveyed appreciation for the pivotal support extended by APCASO, underscoring its instrumental role in promoting community engagement and driving funding initiatives. The assistance from APCRG to Lhak Sam spanning 2021-2023 yielded invaluable outcomes, notably through impactful activities like the consultation on the post-2022 Global Fund Strategy and the Social Dialogue-COVID-19 Response Mechanism. These initiatives facilitated substantive discussions, culminating in the assembly of key affected populations and the strategic submission of prioritized activities to the CCM, resulting in the successful procurement of Global Fund support. Lhak Sam's additional efforts addressed the absence of policies on UHC in Bhutan, shedding light on issues such as stigma and discrimination. The APCRG-supported activities marked a groundbreaking gathering of key affected populations, fostering mutual learning on CCM functionality, the Global Fund's

role, and support for community engagement and health system strengthening. Despite literacy challenges, participants, particularly those living with HIV, shared valuable experiences, contributing to a nuanced understanding of community perspectives across individual, familial, societal, and health service levels.

Mr. Dorjie highlighted the transformative impact of creating a platform for individuals to share long-hidden feelings, fostering comfort and relaxation. Beyond the educational aspect of Global Fund processes, these opportunities alleviated social isolation, instilled confidence, and solidified community bonds. In Bhutan, the principle of unity played a pivotal role, fostering collaboration among diverse groups, including people living with HIV, the LGBT community, and others confronting shared challenges related to stigma, discrimination, human rights issues, and health services. Additionally, these activities offered participants the chance to explore nature, visit new places, savor good food, and receive modest remuneration upon returning home, enabling them to contribute to family needs. He successfully budgeted and prioritized activities, presenting them to the CCM, leading to their inclusion in the global project proposal for GC7 funding request processes. Despite initial unfamiliarity, these activities laid the groundwork for a comprehensive understanding of how the CCM and Global Fund functioned, emphasizing the interconnected nature of these efforts.

Regarding the key lessons learned in engaging in this process and the challenges encountered, Mr. Dorjie emphasized the importance of bringing the community together to discuss and prioritize activities. According to Mr. Dorjie, the budgeting and submission to CCM posed minimal issues, with active engagement and involvement facilitated by PR. However, the main challenge faced is the potential exclusion or lack of budget allocation for community activities. He highlighted that during the initial phase of involvement, the national PR engaged all community members, but as the process advanced, ongoing involvement was lacking. The difficulty lies in not knowing the extent of approved activities or allocated budget until the official announcement, presenting a significant challenge in Bhutan.

Mr. Niluka Perera, DAST, Sri Lanka

Mr. Niluka Perera commenced by contextualizing Sri Lanka as a small country with a modest \$9 million portfolio for TB and HIV within the Global Fund. However, challenges with PR in accessing proposals and understanding ongoing activities necessitated support from APCASO during GC7. The primary objective was active involvement in the country dialogue process, spanning pre, during, and post phases. Using the provided resources strategically, spaces were created to shape the agenda, ensuring their perspectives were heard. To achieve this, a Community Communication Hub was established, utilizing WhatsApp and emails to disseminate bite-sized information about GC7 and Global Fund technical briefs, enhancing accessibility for communities. Initiated in March, this ongoing initiative aimed to provide a readily accessible information source for community members. Simultaneously, various community engagement events were organized, starting with an examination of the current HIV epidemic in Sri Lanka. This was followed by separate GC7 capacity-building workshops and numerous community engagement sessions. The coordination of these efforts, including support from APCASO for PPPR engagement work, aimed to present a cohesive narrative, ensuring people perceived these activities as interconnected components of the same overarching story.

Mr. Perera further explained how they strategically leveraged the community's position through financial resources, capitalizing on the economic challenges faced by Sri Lanka. Despite the economic crisis, Mr. Perera offered financial support with specific conditions, allowing the community to organize events aligned with their priorities. For instance, they co-supported a workshop on identifying activities for the NSP for Sri Lanka, involving both community members and consultant doctors. This collaboration enabled the inclusion of approximately 40 community perspectives in shaping priorities, a feat not previously achieved.

In consultations for the country dialogue, Mr. Perera took an active role, offering to host the events and providing pre-planned agendas with clear recommendations to participating community members. The provision of financial resources was complemented by technical support in facilitating workshops, creating presentations, and preparing documentation. This approach aimed to underscore that the community not only benefited from financial resources but also brought valuable technical expertise to support the CCM and the international program.

Actively organizing country dialogue events resulted in increased engagement compared to previous years. During the first draft of the funding request, a community consultation was conducted, allowing for a detailed review of activities, agreement on priorities, and the submission of recommendations to the CCM. Subsequent meetings with the national program involved discussing and incorporating community recommendations into the funding request. The development of the Community Annex followed seamlessly, progressing from understanding the academic to revealing the funding request and identifying priorities. Noteworthy community issues, such as interventions for chemsex, were raised and promptly addressed, with quick decisions to implement interventions in the current cycle and plan for the next.

These activities effectively demonstrated the community's ability to leverage its voice with the provided funding of \$5,000. Recognizing the impact of this modest funding as a catalyst, Mr. Perera emphasized its role in stimulating movement, motivating collaboration, and fostering coordination among community stakeholders.

Mr. Perera underscored key lessons and challenges in the engagement process. The first lesson highlighted the importance of ad hoc communication, emphasizing the need for timely and continuous information delivery directly to relevant individuals. This, Mr. Perera noted, ensures awareness and effective advocacy, optimizing impact. The second lesson focused on the necessity of a dedicated CSO entity coordinating efforts. While expecting Civil Society CCM members to assume this role, understanding their complex political dynamics is crucial. Mr. Perera cited the example of DAST in Sri Lanka, illustrating how an external CSO entity can effectively lead coordination processes, even if not part of the CCM.

In the third lesson, Mr. Perera addressed the need for strategic bargaining power, recognizing its unfortunate necessity. Despite this, he emphasized the leverage gained through modest resources and technical expertise. Organizing events became a means to amplify their voice, ensuring aligned agendas and securing access to consultation outcomes. APCASO support enabled them to demand budget transparency, reinforcing their right to understand fund allocation. The fourth lesson highlighted the flexibility of resources. The relationship between DAST and APCASO allowed for remarkable adaptability, empowering them to divert resources based on evolving priorities. This flexibility enabled the effective alignment of communities, CCM engagement, and national program coordination. The final lesson involved setting a precedent. With APCASO and partners' support, they established a model for consultations, emphasizing the sharing of funding requests with communities before submission. This marked a significant stride in ensuring transparency and meaningful community involvement in decisionmaking processes.

Mr. Asghar Satti, APLHIV, Pakistan

Mr. Asghar Satti mentioned the starting point of their ambition back in 2006 with the initial funding support of \$500. Acknowledging the significance of this collaboration, he emphasized that without APCASO's support, none of their achievements would have been possible. Expressing appreciation for the fruitful partnership between APCASO and APLHIVE, Mr. Satti delved into their activities under GC7.

For the first time in a decade, they were unaware of Pakistan's activities until receiving an email from the Ministry of National Health Services. APLHIV was tasked with ensuring community and Civil Society engagement, and Mr. Satti recalled reaching out to determine the best approach. Simultaneously, an email from RD informed him of available budget resources, proving to be a timely blessing. Mr. Satti expressed gratitude for the financial support and the technical guidance provided by RD Marte and Mangala from APCASO.

Within two months, a comprehensive program was developed, involving around 40 consultants. With the NSP process underway, the team divided into community segments, ensuring active participation in each case. The consultation process became unprecedented in reach, with 390 participants from communities and civil society at the national and provincial levels. This engagement allowed them to incorporate the perspectives of key populations and communities into the funding request drafts. The consultations resulted in a set of comprehensive recommendations contributing to the community annex of the Global Fund funding request.

In reflecting on the key lessons learned in engaging in this process and identifying challenging aspects, Mr. Satti highlighted the crucial role of flexibility, considering it as the top lesson. This flexibility, he noted, allowed for a concentrated and focused understanding, setting an example for future endeavors. The second lesson, according to Mr. Satti, centered around the short timeframe, less than two months. With the support of APCASO, the community in Pakistan demonstrated empowerment and familiarity with Global Fund processes, leveraging knowledge from previous activities. Mr. Satti emphasized the lesson learned that community leadership and representatives equipped with knowledge about Global Fund processes at the country level can effectively manage tasks despite time limitations.

Interventions

Mr. Ganzorig Munkhjargal, MTC, Mongolia

Mr. Ganzorig Munkhjargal conveyed the absence of community representatives in the TB and HIV fields, as highlighted during last year's program review. The lack of community involvement in decision-making and policy development was evident. NGOs, primarily led by medical staff, actively participated in the country dialogue or Grant request team. However, other members, such as TB survivors or key affected individuals, were largely excluded. Some input was provided by the community advisory board members of NTC, who offered suggestions that needed to be incorporated into submissions by attending various meetings. This has been the established approach in Mongolia. Since March of this year, efforts have been made to establish community networks in Mongolia, with the anticipation of increased community involvement in the funding request during GC7.

Q&A and Comments

Mr. Daniel Marguari, SPIRITIA, Indonesia

Mr. Daniel Marguari emphasized the challenge of community input in proposal development due to

limited funding. He suggested placing activities under the 'Unfunded Quality Demand' (UQD) section to secure their place, making them potential priorities in case of grant savings during implementation. Mr. Marguari encouraged countries to bring items from the UQD into the main grant for investment. He noted that during the proposal review, budgets might be cut, making UQD a valuable resource to move into the approved program. Mr. Marguari highlighted the opportunity for reprogramming even after approval in windows 1-2-3, expressing concern that many communities may not fully grasp this option.

Ms. Amara Quesada, ACHIEVE, The Philippines

Ms. Amara Quesada raised questions about the assessment of APCRG and its transition into a Learning Hub. She inquired about the extent of the evaluation of APCRG's impact within the broader Global Fund implementation across different countries. Ms. Quesada highlighted that APCRG TA is often perceived as specific to grant development, noting that those not involved in grant implementation might not find it relevant. Additionally, she observed that APCRG TA primarily focuses on community engagement processes, expressing concerns about the apparent absence of human rights and gender components in the overall engagement process.

Shifting to a concern in the Philippines, Ms. Quesada noted that the Global Fund policy on preventing sexual exploitation, abuse, and harassment has been used against community implementers. This policy has posed challenges for meaningful community engagement, including restrictions on sex workers and individuals facing dilemmas between relationships and roles as grant implementers. Ms. Quesada highlighted the contradiction between the concept of community engagement and the use of other policies to regulate it. In the Philippines, these issues have resulted in allegations, job losses without due process, and difficulties for transgender women. In light of these concerns, Ms. Quesada questioned the role of CRG in this context and the strength of the Global Fund's commitment to realizing the vision for CRG during the transition process.

Mr. Ganzorig Munkhjargal, MTC, Mongolia

Mr. Ganzorig Munkhjargal raised a question about overcoming language barriers for community inclusion in funding requests and activities. He inquired about policies for CCMs or principal recipients to translate documents, citing resource challenges in Mongolia where translation of numerous documents is required. Mr. Munkhjargal highlighted the need for interpreters in workshops and the resourceintensive process of translating documents between Mongolian and English.

Mr. Gavin Reid, Senior Technical Advisor, Community Engagement, The Global Fund

In response to the question from Ms. Quesada from ACHIEVE, Mr. Gavin Reid expressed support for preventing sexual exploitation, abuse, and harassment. He shared concerns about the understanding of how communities are organized, citing incidents in specific countries. Mr. Reid mentioned ongoing conversations about developing approaches, policies, tools, or resources for safeguarding, tailored to the structure of each community. Regarding a specific incident mentioned, he suggested a one-to-one discussion for a more detailed exploration of the matter, avoiding open plenary discussions. In terms of better inclusion, Mr. Reid emphasized the need to ensure human rights responsiveness and gender transformation, highlighting the interconnectedness of organizing methods. He

stressed the importance of integrating these considerations into consultations, acknowledging specific streams of work within vertical pillars while emphasizing the need for mainstreaming in discussions.

Addressing Mr. Munkhjargal from MTC, Mongolia's question, Mr. Reid highlighted two CCM requirements related to transparency and inclusivity in the funding request development process. He emphasized the need for documents to be available in local languages. Mr. Reid pointed out the CCM's 15% budget allocation for civil society consultation, expressing the challenge in understanding how this money is spent and the importance of transparency at the country level. He noted that constitutional guidelines are open to interpretation, suggesting a closer watch by civil society and key population representatives. Mr. Reid commended APCASO for dynamic translation efforts and suggested setting aside funds in Mongolia for translation. He encouraged a push from communities and civil society for the Global Fund to fund translation costs, expressing concern about the burden on resources for translation and the potential for AI assistance in this regard.

Before the funding request starts, Mr. Reid highlighted the popularity of the technical brief for Community Systems strengthening, emphasizing the need to consider its strategic use. He suggested moving away from extensive documents and focusing on developing materials accessible to communities and a wider range of stakeholders. Mr. Reid noted improved partnerships and strategic translation efforts in this cycle to avoid duplication. He proposed the creation of a core document with annexes for specific details instead of repetitive explanations for every key population and region in each funding request cycle.

Ms. Mangala Namasivayam, APCASO

Ms. Mangala Namasivayam mentioned that the need for translation was significant in her region. There wasn't one language that worked universally, so a considerable amount of resources were allocated for that purpose. In countries like Mongolia, it was realized that the cost of translation was substantial, with a major portion of workshops dedicated solely to translation. Emphasizing the importance of proper costing for translation, Ms. Namasivavam stressed that it was crucial to ensure effective communication in the country. Decisions had to be made regarding which information needed translation. Additionally, echoing Mr. Reid's earlier point, Ms. Namasivayam addressed the challenge of unpacking Global Fund language in a way that local people could comprehend.

Mr. Chok Choub Chamreun, Khana, Cambodia

Mr. Chok Choub Chamreun emphasized the apparent diversity in this region, emphasizing language as a significant barrier, particularly in Cambodia. While the older generation converses in French, Mr. Chamreun's generation, despite university studies, faces challenges with the language. He deems translation, exemplified in Mongolia, as crucial. He underscored the utility of consultations and workshops where organizations assume responsibility for direct community communication. During this period, he noted that AI support might not be necessary, given the emphasis on fostering interaction and closeness among communities.

In GC7, with backing from APCRG, local consultants accompanied Mr. Chamreun, establishing relationships within the community. He acknowledged that translation isn't always essential, praising the potency of the briefs used in the process for fostering interaction within the community and with other stakeholders, particularly the national program. From Mr. Chamreun's perspective, the GC7 process stands out as the most transparent, offering a range of tools, information, and support. Expressing a desire for a similar approach in future rounds, he commended GC7 as perfect. Ultimately, Mr. Chamreun emphasized the transparent process's ability to apply real priorities, particularly noting the inclusion of new components, especially in TB. He highlighted a substantial change, with less than 1% of the budget in GC7 applications allocated to CRG in TB, underscoring the impact of the transparent process.

Menti 1.6 What is your next step to ensure continued involvement and engagement of communities in the implementation of the GC7 grants at country levels?

For participants respond, please refer to Appendix A



1.7 Engagement in GC7 grant implementation: Learning from TRP Window Submissions 1-3, pushing for PAAR priorities to be funded at country level, engaging in grant oversight, engaging in grant reprogramming, and other opportunities.

Presented by Mr. Gavin Reid, The Global Fund

Mr. Gavin Reid discussed opportunities for sustained engagement, aligning with the Global Fund's 3-year cycle. He emphasized the need for ongoing involvement beyond the funding request submission, covering Grant making, program design, implementation, and learning lessons. Mr. Reid highlighted two notable changes: the establishment of minimum expectations for community engagement and ensuring community access to information during Grant making. He underscored the importance of community input to avoid last-minute requests.

Additionally, Mr. Reid pointed out that TRP's review of funding requests is published on the Global Fund website, emphasizing the increasing sensitivity to Human Rights, gender issues, and community responses in these reports. Regarding Program Essentials, Mr. Reid noted positive developments, including increased funding for specific groups and expanded options. Concerns included variable CLM quality and missed opportunities for community-led organizations as implementers, despite well-articulated CRG language not always translating into corresponding budgets.

Mr. Reid explained PAAR and UQD as tools for funding valuable interventions beyond the funding envelope. He stressed ongoing CCM conversations about optimized amounts and demand reprogramming, emphasizing the community's right to inquire and make a case for funding priorities.

In reviewing specific allocations, Mr. Reid noted the substantial funding available for various interventions. The importance of ongoing advocacy and awareness of UQD content were highlighted. Mr. Reid stressed the importance of ongoing community-led monitoring, using a toolbox with diverse resources and encouraging participants to report updates or gaps. Mr. Reid urged participants to be familiar with their CCM oversight committee and shared an example where LFA reports supported community proposals. He emphasized the need to bring data into decision-making spaces and the importance of advocacy, highlighting ongoing opportunities beyond the initial funding request.

Q&A and Comments

Mr. Daniel Marguari, SPIRITIA, Indonesia

Mr. Daniel Marguari emphasized the current opportunity before the cycle ends on December 31st. Despite the limited time, the community can propose additional activities for implementation in December. PR has flexibility with fund allocation: 5% for human resources, 10% under cost grouping, and 20% under cross-intervention, without requiring approval from the country team for percentages below that. Mr. Marguari encouraged discussions with PRs to effectively utilize this small fund. Applying for the next window for making funds also presents an opportunity in the upcoming cycle, allowing adjustments when the percentage falls below PR flexibility.

Mr. Asghar Satti, APLHIV, Pakistan

Mr. Asghar Satti made two comments. Firstly, he raised concerns about community engagement throughout the processes, particularly during grant meetings where the interaction is primarily between the PR and the Global Fund country team. He questioned how to ensure continued community engagement during this phase. Secondly, in the regional forum, reliance is placed on the oversight committee of the CCM. However, in Pakistan, Mr. Satti noted a less favorable experience, stating that, as an oversight committee member, they rarely witness PRs implementing the recommendations of the oversight committee.

Mr. Gopa Kumar, Touched by TB, India

Mr. Gopa Kumar mentioned that a significant amount of work was done in GC7, focusing on grassroots efforts. Despite significant changes at the top that were not communicated, Mr. Kumar and the team were able to influence decisions within the country through TRP before it reached Geneva. They requested approximately \$240 million for TB, but due to perceived lack of clarity and high impact in activities, only \$150 million was granted. Mr. Kumar raised the question of how to ensure community engagement during the grant meeting process.

Mr. Gavin Reid, Senior Technical Advisor, Community Engagement, The Global Fund

Mr. Gavin Reid emphasized the Global Fund's focus on minimizing expenditure absorption and improved engagement at the start of the funding request process. Efforts are underway to address community concerns about the lack of awareness regarding final submissions, with plans to allow a 72-hour review period for future requests. He highlighted challenges in the Grant-making stage, describing it as a black box, but identified two windows for impactful engagement where CCMs discuss substantive changes with PRs. Community representatives are encouraged to prioritize community-led responses during these discussions. Mr. Reid noted positive changes, such as allocation letters sent to all CCN members from the start, enhancing information flow. He stressed the need to demand clear roadmaps for request development and finalization. CCM meetings with PRs to discuss the Final Grant and implementation arrangements were also highlighted as crucial. Concerning oversight committees, Mr. Reid stressed the need for advocacy to address any inefficiencies. He encouraged stakeholders to engage with the CCM hub and share expertise to improve oversight. Acknowledging funding challenges, particularly for TB, Mr. Reid emphasized the strategy's ambition for more funding for community-led organizations. Despite lacking an immediate solution, he underscored the importance of ongoing advocacy. In the current cycle, 23% of long-term support funding went to the TB network, with an expected increase to 34% in the next cycle.

1.8 Group work: What kind of support do civil society and community partners need to engage meaningfully in GC7 grant implementation?

Work sheet link: <u>https://docs.google.com/</u> <u>spreadsheets/d/</u> <u>1A1O5DHRQSxSkClVNRTvLPX0qVisSUoyPNXK</u>

PXnK5cfl/edit?usp=share_link

Presentation of outputs

Group 1 What kind of information and communication is needed?

Group 1 emphasized the community's need for specific information to enhance engagement. Presence in funding request development and sharing community needs doesn't ensure meaningful engagement. In the Philippines, there's a need for a comprehensive listing of CRG components from various grants for effective monitoring. An avenue for community feedback and discussion is crucial for better understanding. In Indonesia, challenges arise due to the criminalization of sex work and geographical barriers impacting technology access. Benefits of Global Fund are unevenly distributed, affecting awareness and information access outside certain areas. Although activities are promoted on social media, reaching everyone remains challenging. Monitoring feedback processes and ensuring quality information dissemination to the broader community pose challenges.

Group 1 highlighted the challenge of limited awareness about CCM and Global Fund grant

details among the broader community. Building a culture of transparency and information sharing is crucial, especially given the substantial nature of the Global Fund grant. The speaker, having access to decision-making platforms, emphasized the need for accountability processes. In the Philippines, there's a lack of periodic assessments for civil society and community representatives in the CCM. Despite having representatives in the CCM from national networks, challenges arose when demanding accountability. Some CCM members viewed themselves as individual representatives without a responsibility to report to the larger community, hindering community input in grant negotiations. Transparency in CCM policies is essential for the broader community, whether CCM members or not, to demand accountability. The Department of Health consistently chairs the Philippines CCM, presenting inherent limitations.

Group 2 What kind of technical assistance is needed?

Group 2 envisions future collaboration where French expertise can assist more in Asia, particularly by working with regional civil society to support individual countries. They emphasized the crucial role of TA in supporting CCM members, including those from key populations within civil society. Recognizing the importance of TA, they seek ways to strengthen its impact at the country level and align it with government recruitment standards. The group emphasizes the need for long-term TA, extending beyond grant negotiations to implementation, particularly for preventing sexual exploitation, abuse, and harassment in healthcare services. They stress the significance of understanding Global Fund policies and see the Global Fund Zero 01 platform as a valuable resource for disseminating this information, not only to regional civil society but also to individual countries, ensuring informed engagement in country dialogues and with partners.

Group 3 What kind of learning and experience sharing is needed?

Group 3 aimed to grasp the comprehensive meaning of community engagement throughout the entire grant cycle, encompassing design, implementation, monitoring, and evaluation. Emphasizing the importance of the engagement during grant development and grant making, the group ensured their priorities remain a focal point. Addressing the need for capacity building, the group recognized that communities may not fully comprehend the Global Fund process. The learning objectives extend to language proficiency and the significance of mapping to identify key actors and understand their roles in supporting grant implementation. In terms of sharing experiences, allocation challenges are acknowledged, and the group encouraged countries with experiences in overcoming such challenges to share their insights. Additionally, the group seeks to understand how Global Fund grants fully support the implementation of CLM in three diseases. Lastly, the group is eager to hear success stories of communities taking the lead in creating opportunities for engagement in the Global Fund country process.

Group 4 What kind of good practice examples / case studies should be documented?

Group 4 discussed best practices but had uncertainties about approaches and mentalities. In India, GC7 was considered a monumental success in communicating engagement, with proactive CCM involvement in communities. TB communities conducted widespread consultations in often-missed geographic areas. For HIV, online technologies facilitated consultations nationwide. Inputs converged in a national dialogue involving HIV, TB, and malaria communities, recognized as a good practice. In HIV funding requests, a strategy involved aligning community priorities with NSP priorities to counter government pushback. Deliberate dialogues with government representatives addressed community needs and integrated them into funding requests. They pushed PRs for community consultations and dialogues for input and feedback, showcasing robust community engagement. Participants appreciated clear Global Fund guidance on inclusive and comprehensive country dialogue processes as a best practice, providing leverage for community engagement. In addition to GC7, India noted that the new CCM had advanced the oversight committee function.

Nepal implemented a steering Community within the CCM and task forces for each disease, with each task force facilitating consultations for its respective disease component. This has been one of their best practices to incorporate community voices into funding requests. Nepal maximized the use of resources within the CCM for community engagement and leveraged regional networks to collaborate effectively on funding requests.

For Bhutan, efforts extended beyond bringing communities and key populations together, as they also involved Health Service providers in discussions. This approach aimed to address challenges faced by HIV patients and communities when accessing health services, fostering a comprehensive understanding. In PNG, communities utilized CLM data to advocate for their priorities. However, the proposal faced rejection due to insufficient data, prompting the CCMS to request additional information. They are currently strategizing on how to address.

Interventions

Mr. Viengakhone Souriyo, CHIAS, Lao PDR

Mr. Viengakhone Souriyo contributed to Group 1's discussion, raising concerns about conflicts of

interest in certain Mekong countries. In these instances, the Ministry of Health often acts as both PR and the CCM chair. Meanwhile, Civil Society and key population representatives at the country level may find themselves fulfilling Global Fund Grant criteria without substantial involvement, potentially leading to conflicts of interest.

Ms. Periasamy Kousalya, PWN, India

Ms. Periasamy Kousalya mentioned that, despite conducting a needs assessment on women living with HIV, the proposal was excluded. She emphasized that the requested grant was not substantial but unfortunately the proposal was disregarded. Each time her organization provide recommendations for women living with HIV, they were not reflected in the budget.





DAY 2 05 DECEMBER 2023

Recap

Mr. Daniel Marguari, SPIRITIA, Indonesia

Reflecting on the first day, Mr. Daniel Marguari acknowledged numerous positive results and progress, expressing gratitude to APCASO for their commendable nine years of work. He reflected on valuable lessons learned, suggesting that TA should adopt a comprehensive approach and mindset. Discussing the typical three-year Grant Cycle, he noted that years 1-2-3 involve implementation, preparation, ongoing monitoring, evaluation, and proposal development. Mr. Marguari emphasized the importance of integrating evaluation and implementation throughout the cycle for effective community strengthening, acknowledging this as a concept supported by the Global Fund.

In addressing the second point, Mr. Marguari highlighted the need to understand the role of the targeted community, whether as implementers, monitors, or both. He questioned the criteria for providing technical assistance, emphasizing the necessity for data and studies, even for nonimplementing partners. Additionally, he proposed that each community organization analyze its situation, considering the strength of relationships with the CCM, government ties, the presence of community public relations, and opportunities for the country. These insights, Mr. Marguari concluded, were crucial takeaways from the previous day's discussions.

Jeff Acaba, Senior Program Officer, APCASO

Jeff presented the agenda for the meeting, highlighting the importance of having a special focus during APCRG meetings. Whenever convening meetings, it has always been an aim of the platform to emphasize a particular topic or theme. In this instance, Jeff announced that the focus for the year would be on CLM. The last session will be handed over to the Seven Alliance, the regional CE SI learning hub, for facilitation. Jeff then invited the Global Fund for the first session on CLM in GC6 and GC7, exploring successes and prospects



2.1 Thematic session: CLM in GC6 and GC7: successes and prospects

Presented by Ms. Susan Perez, Community-led Monitoring Strategic Initiative, the Global Fund

In preparation for 2024, Ms. Susan Perez reflected on CLM to gain a clearer understanding and refine approaches, aiming to minimize confusion. The Global Fund's grasp of CLM is rooted in past experiences and insights from the current Grant cycle, organized under the AAAQ framework, which assesses accessibility, affordability, acceptability, and quality, with a focus on facilities and community-centered practices. CLM utilizes both quantitative and qualitative indicators, emphasizing data sharing with decision-makers, and has undergone a shift from CBM during GC6. Challenges persist, including confusion about data ownership. In GC7, the Global Fund emphasizes improvement and seeks concrete examples of service improvements resulting from CLM data, aiming to include resources in grants for documentation, enabling the sharing of success stories and highlighting CLM's impact on empowering communities.

The Global Fund initiated the CLM strategic initiative in 2021, covering CLM C19RM CMLI. Two TA programs, with modest budgets, supported this effort, including APCASO as a notable TA provider. CLM SI focused on core grants related to HIV, TB, malaria, and RSSH, while CLM C19RM was dedicated to 19 RM grants. The Global Fund created resources forming a pandemic preparedness library. In the Asia Pacific, TB support extended to Bangladesh, the Philippines, Mongolia, and Malaria support to Laos and Cambodia. Reflecting on NFM3/GC6 CLM Implementation, Ms. Perez noted diverse CLM budgets and emphasized the resource-intensive nature, with \$100,000 over three years considered insufficient. Proliferation of CLM approaches posed coordination challenges. Ms. Perez highlighted a general lack of CLM understanding among governments and communities, necessitating accountability mechanisms and community engagement. Feedback loops sometimes lacked timely quality improvements. Limited knowledge sharing prompted active support from the Global Fund through webinars and meetings.

Coordination challenges were noted in the implementation of CLM and TA across countries, requiring considerable time and effort. The transition from CBM in GC6 to CLM in GC7 introduced new elements in the Modular Framework. These include national CLM frameworks, monitoring barriers to service access, piloting new mechanisms, tools for data management, and training. These aspects, not explicitly outlined in the previous cycle, present opportunities for inclusion in grant proposals.

The Global Fund defines CLM as an accountability mechanism led by equipped, trained, and compensated members of community-led organizations. It involves systematic data collection and analysis from health service sites. Ms. Perez highlighted priorities for HIV and TB investments in respective information notes, emphasizing prevention, treatment, strategic information, and addressing human rights and gender-related barriers. The information is not exclusive to RSSH and is intended to aid reviews during Grant making or relevant activities in 2024.

Ms. Perez highlighted the Malaria Information Note, emphasizing CLM support outlined on page 26. It details CLM goals, target populations, and tools, aligning with the reinforced CLM definition. In GC6, \$26 million was invested in CLM across 34 countries, and GC7 funding requests show a remarkable 100% increase, particularly a 120% rise in window 1 and 2 requests. Although CLM SI is concluding, efforts are directed toward embedding TA in grants, with alternative mechanisms available in the upcoming cycle.

A recent CLM TB meeting for Asia-Pacific countries, co-hosted by GF-STP and APCASO, gathered representatives from nine countries. Discussions focused on region-specific CBM/CLM TB interventions, tailoring programs to Asia-Pacific contexts. Key elements of CLM for TB, addressing NTP roles, community preparation strategies, and coordination structures, were highlighted. The meeting aimed to share and learn about unique interventions in the region, recognizing its distinctiveness from others.

The discussion on Implementation and Data Use emphasized defining criteria for CLM scale-up readiness, addressing program interest in expanding geographically or including additional communities. The meeting focused on the Asia-Pacific region's specific needs, fostering valuable exchanges and tailored insights. Ms. Perez introduced Country CLM cycle checklists during the session, allowing countries to self-assess their CLM TB program progress. This approach aimed to enhance data credibility, showcasing a serious commitment to the process and ensuring data quality. Countries engaged in the exercise, identifying their stage in the cycle and areas for improvement, while donors provided valuable input to address gaps.

For those already implementing CLM for TB, a deeper learning experience explored the Country CLM operational framework. This framework encouraged countries to reflect on current CLM activities, consider scale-up possibilities, and assess technical assistance needs aligned with their plan. The approach provided a comprehensive understanding of the current landscape, enabling tailored support to meet specific needs and objectives.

Q&A and Comments

Mr. Daniel Marguari, SPIRITIA, Indonesia

Mr. Daniel Marguari found the presentation intriguing. However, he also noted a gap in the presentation, feeling it was more tailored to community organizations not leading or managing programs. He highlighted that certain communities, acting as PRs in some countries, already possess and analyze data independently. While not explicitly CLM projects, these communities actively engage in similar initiatives.

Representing one such community PR organization, Mr. Marguari stated that despite lacking a mandate in the proposal and budget, his organization had undertaken significant work. For example, they facilitated testing for 100,000 MSM, with 90% of those diagnosed with HIV receiving treatment due to their support efforts. The presented tools, like the checklist, didn't align with their context, as they were involved in more comprehensive actions to address gaps.

In Indonesia, facing data challenges, Mr. Marguari's organization proposed supporting data efforts to the country team. They collaborated with district health offices in over 217 districts through their grant, actively contributing to addressing data challenges as grant managers and implementers. Mr. Marguari emphasized that the presentation seemed geared towards communities lacking access, potentially overlooking those already engaged in substantial efforts.

Agatha Dafarel, Inti Muda Indonesia Agatha Dafarel, part of last year's pilot joint CLM Initiative with seven national networks focusing on key populations and people with HIV, underscored the community-led nature of the initiative which sparked conversations addressing unexplored aspects of the HIV response. Agatha Dafarel noted that the CLM in Indonesia, inclusive of transgender men, sheds light on their challenges, an often-overlooked global issue. The gathered data revealed opportunities for interventions and research to enhance HIV access for transgender men. Agatha Dafarel envisioned applying these insights globally and at the country level, stimulating discussions.

Mr. Niluka Perera, DAST, Sri Lanka

As the CLM SI concludes and becomes part of the national grant progression, Mr. Niluka Perera discussed the challenge of negotiating with PRs and country teams and convincing them. Mr. Perera expressed the need to understand what is happening within the Global Fund to involve country teams and PRs in these discussions, ensuring they recognize the importance of CLM as an integral part of the grant, not just an annex.

Mr. Chok Choub Chamreun, Khana, Cambodia

Mr. Chok Choub Chamreun mentioned that, perhaps as feedback, this kind of presentation could have been made before the grant discussions, especially ahead of the process for the next round. Even though CLM is led by the community, support from everyone is still needed. This should be a process involving the entire Global Fund grant. Mr. Chamreun suggested that the Global Fund provides guidance to the country, especially to PRs, to ensure CLM is not just a project and has a clear portion of the budget; otherwise, it is very hard to advocate.

Ms. Periasamy Kousalya, PWN, India

Ms. Periasamy Kousalya raised health-related issues in the seminar with the government, supporting community monitoring in the health

sector. The process, initiated in 2005, involved supporting community monitoring for the entire health program in district 11. They conducted community monitoring in 16 districts, leading to dialogues with government officials, communities, and civil society. This effort resulted in the revival of the State Health Insurance program and other initiatives. A new policy is being considered, indicating the need to pay for hospital services, which were previously free. The ongoing dialogue addresses these changes.

Mr. Gopa Kumar, Touched TB, India

Mr. Gopa Kumar mentioned that CLM is often misunderstood by program personnel who perceive themselves as having the program and the government authority. They question how the community can monitor them. The real essence of CLM might not have been effectively communicated to program personnel, leading to their rejection of community monitoring. The program already has its own mechanism for data collection, and there has been a struggle to initiate the collection of data by CLM. While CLM has the data, it faces challenges in presenting the findings. Addressing the root cause is essential for effective communication with program personnel to make them feel comfortable; otherwise, CLM may not be implemented in some countries.

Ms. Susan Perez, Community-led Monitoring Strategic Initiative (CLM SI) The Global Fund

Responding to Mr. Marguari from SPIRITIA, Ms. Susan Perez clarified that the presentation's applicability varies by country and situation. The initiative in the Asia Pacific stems from the need for a structure for practical CLM implementation. SPIRITIA in Indonesia led similar initiatives, aiding their understanding of Global Fund expectations. Responding to Agatha Dafarel's comments, she suggested sharing Trans-led CLM examples for broader insights.

Regarding Mr. Perera's question on emphasizing CLM's importance in the grant cycle, Ms. Perez noted that CLM is often part of community priorities. Advocacy during Grant making and engaging with PRs are pivotal for highlighting CLM's significance. Internal efforts address budget concerns and enhance program viability through additional activities and budget adjustments.

Ms. Perez agreed with Mr. Chamreun's emphasis on CLM as a continuous process. Responding to Ms. Periasamy Kousalya, she suggested collective advocacy on affordability and financial barriers in India. Regarding Mr. Gopa Kumar's comments, Ms. Perez highlighted the need for friendly terminology to convey user feedback and suggested illustrating value through small examples. She acknowledged the delicacy of these conversations, citing similar challenges in African countries with delayed program launches due to unsigned MOUs.

Jeff Acaba, Senior Program Officer, APCASO

Jeff highlighted the upcoming matching fund. He noted that some of the CLM piloting in the Philippines and Mongolia focused on a Human Rights lens, encouraging the involvement of national human rights solutions. Therefore, CLM can be viewed not only from the perspective of community participation and engagement but also from the aspect of human rights and the right to participation. Jeff then called on RD Marte to facilitate the panel session and guide the participants.

2.2 Talk show: Lessons from the ground: Setting up and preparing country-level readiness on CLM

Moderated by RD Marte, Executive Director, APCASO

RD Marte introduced panelists from Mongolia, the Philippines, and PNG. She emphasized the importance of understanding CLM, distinguishing it from project monitoring, and expressed concern about the conclusion of the CLM-SI, highlighting its catalytic investment impact for the region and TB. Despite the CLM-SI's discontinuation, RD Marte noted existing tools and resources, such as the Training Toolkit on CLM by APCASO and the upcoming CLM Playbook. She encouraged learning from experiences, shared that the region has resources and expertise, and concluded with a call to provide an overview of CLM in each panelist's country.

Ms. Amara Quesada, ACHIEVE, The Philippines

Ms. Amara Quesada introduced 'com.musta' HIV Community Kumustahan, a web-based CLM system, addressing policy and investment gaps in the Philippines. The system, currently in the pilot stage, aims to ensure responsive services and programs. Ms. Quesada emphasized the lack of data on government and donor spending, underlining the need to understand community spending.

She also presented 'CallKaLungs' TB Community Hotline, a community-driven CLM mechanism for

TB in the Philippines. Despite unsuccessful attempts with app-based solutions, CallKaLungs, staffed by community members and TB survivors, has an MOU with the local government for potential referrals. Some CLM system data has been endorsed by the Department of Health. Ms. Quesada stressed the importance of offering community choices for feedback mechanisms tailored to their preferences.

As the implementing partner for TB and HIV, ACHIEVE, led by Ms. Quesada, differs from a community organization directly managing CLM. ACHIEVE avoids branding it solely as their initiative, emphasizing the importance of communicating leadership without overshadowing the community's role. Behind-thescenes efforts focus on capacity building and mentoring, recognizing that investing in CLM begins with empowering the community.

RD Marte, Executive Director, APCASO

RD Marte elaborated on the Philippines' CLM case, noting significant pre-operational efforts and investments. The journey involved community mobilization, organization, and capacity building. Partner organizations engaged in dialogues, conducted CRG assessments on TB, developed action plans, and facilitated discussions to clarify roles and identify principal recipients. Civil society, including CLM tools like the call center, played a pivotal role.

Considerable investment went into developing scripts and protocols, addressing human rights violations and stigma, and ensuring caller support. Extensive outreach initiatives fostered understanding and collaboration with stakeholders, government partners, and various provinces. The approach aimed at mutual benefit rather than confrontation.

Ms. Bazarragchaa Tsogt, MTC, Mongolia

The Mongolian Anti Tuberculosis Coalition (MTC), established in 2011, aims to End TB through Research, Community Engagement, Advocacy, and Capacity Building. In 2023, MTC initiated CLM for TB in Mongolia, currently in the preparation stage for CLM within grand cycle 7. To prepare, MTC collaborated with APCASO for orientation and capacity-building workshops. Three workshops, facilitated by APCASO, involved seven TB survivors in drafting the CLM strategy, now integrated into the National Strategic Plan for the next three years. The Coordinating Committee, including representatives from the Ministry of Health, national TB program, HIV NGO, and other NGOs, ensures policy-level inclusion of CLM. MTC eagerly awaits the upcoming year for implementation, aiming to develop a community network of TB survivors led by the community, with initial support from MTC.

RD Marte, Executive Director, APCASO

RD Marte emphasized MTC's role as a civil society organization, supporting advocacy, research, and community capacity development. She highlighted the introduction of the Global Fund's Strategic initiative on CLM by MPC in April 2023, bringing non-existent initiatives to Mongolia. The initiatives included orientation and capacity-building sessions for both the community and government partners, emphasizing CLM's significance in achieving TB goals. The CLM strategy is now integral to the Global Fund request, with a corresponding budget allocation. APCASO, actively involved during the funding request writing process, collaborated with the country team to advocate for CLM's inclusion. Mongolia has made necessary preparations, including training and indicator development, ensuring readiness for

CLM implementation in the next cycle. Concurrently, the national TB program has integrated CLM into its Monitoring and Evaluation (M&E) framework for TB.

Mr. Lesley Bola, Executive Director, KPAC, Papua New Guinea

Mr. Lesley Bola presented information from the KPACPNG.org website, discussing the initiation of the CLM program named 'Komuniti wok, Senis Kamap,' translating as "if the community works together, changes will happen." Localizing the name aimed to enhance understanding. The program's objective was to improve HIV and other service coverage and quality for the community. Key coordination was stressed, with involvement from partners, government, and stakeholders in CLM tool development. Community Champions underwent capacity building for data collection, empowering communities to collect, analyze, and understand data. Advocacy encouraged the community to advocate to the government.

Expected results included establishing a national and provincial platform for KPs to address service access issues, assessing service friendliness and quality, and documenting barriers for KP nonreturn or non-access to HIV services by the end of 2023. Triangulation of information involved verifying data across platforms, with four modes of data dissemination: Same-day Feedback, Facility Visits, Dissemination Workshops, and Online channels, where Same-day Feedback proved effective.

Facility accountability was prioritized, employing a feedback box for client input, enhancing insights for accountability. The community's empowerment in data collection was emphasized, supported by recipe books for learning about CLM in PNG. The initiative's success led the government to express interest in incorporating the tools, recognizing CLM as an effective community-driven data collection method.

RD Marte, Executive Director, APCASO

What is the recipe to get your countries to where they are now?

Ms. Amara Quesada, ACHIEVE, The Philippines

Ms. Amara Quesada emphasized the need for a consortium of community organizations with the skills and willingness to manage CLM. Simultaneously, there was a need for the clientele, the communities using the services, to cultivate the habit of providing feedback. A challenge identified in both HIV and TB was that community members, regardless of satisfaction with services, preferred informal discussions with peers rather than using a structured system for feedback. For sustainability, the focus extended beyond resources to maintaining community buy-in for CLM, with the aim of receiving both complaints and positive feedback to record best practices.

Another sustainability aspect involved gaining government support. The goal was not only to use data to prompt government improvements but to co-create solutions with stakeholders and the government. Despite investments in TB and HIV for the upcoming G7, a challenge in government buy-in was anticipated as they expanded their engagement with more local government officials. CLM in the Philippines operated at the local government level, and a concern was that facilities engaged in CLM might prioritize their own Quality Service mechanisms over CLM, citing the existence of their own system.

Ms. Bazarragchaa Tsogt, MTC, Mongolia

Ms. Bazarragchaa Tsogt expressed her belief that to secure government buy-in, the organization needed to approach the situation strategically. Collaborating with the National TB program and fostering strong relationships with other National NGOs and Civil Society organizations were key steps. The process involved building credibility, reputation, and lasting relationships, akin to a long-term investment. Despite thorough preparation, she foresaw potential challenges. Engaging in discussions with various stakeholders, particularly the Minister of Health, became essential, especially since CLM was part of the country grant. Ensuring a clear understanding of what CLM entailed was crucial, even though they had not been involved in prior discussions. While not a significant issue, one challenge anticipated was involving TB survivors in the process.

Mr. Lesley Bola, Executive Director, KPAC, Papua New Guinea

Mr. Lesley emphasized the key message: empower communities because they are the ones who will drive it. He urged giving them the tools, providing them with knowledge, engaging them, and they will speak on behalf of the drive to propel CLM forward.



Menti 2.2 What is your country's most important challenge in starting or in implementing CLM? Who needs to respond to these challenges?

For participants respond, please refer to Appendix

2.3 KPI C1 – Community Engagement Survey

Mr. Gavin Reid, Senior Technical Advisor, Community Engagement, The Global Fund

Mr. Gavin Reid mentioned that yesterday, the Global Fund launched a survey called KPI C1, a corporate indicator. KPI C1 aims to measure the level of satisfaction of communities with their engagement across the grant cycle in all countries eligible to receive a Global Fund allocation. He drew attention to the second part of the definition, where there are three stages of the grant life cycle, and the target is to achieve 75% satisfaction at all three stages: funding request development, grantmaking, and implementation. Patterns of satisfaction across time, geography, and population are essential, along with assessing the sustainability of satisfaction. Despite the high subjectivity and interpretative nature of satisfaction, it is seen as a strength rather than a weakness.

He emphasized the importance of recognizing limitations in an approach attempting to measure satisfaction quantitatively. KPI C1 was identified through an extensive consultation process in 2022, involving three workshops with community and civil society actors. The key criteria for KPI included measuring community engagement effectiveness across grant stages, integrating with existing data sources for validation, holding Global Fund and CCMs accountable, providing actionable insights, acknowledging limitations, and complementing thematic evaluations and data through surveys aggregated annually.

Through desk review and community consultation, community engagement was measured through elements such as 'voice,' 'attention,' 'understanding,' 'action,' and 'partnership.' The community engagement satisfaction survey aims to understand the durable improved understanding built through interactions between the community and decision-makers. Recognizing limitations in technology access, especially for those not connected with the Global Fund, collaboration and broad engagement were sought.

Q&A and Comments

Ms. Amara Quesada, ACHIEVE, The Philippines

Ms. Amara Quesada sought clarification on which part would be considered the allocation of resources. She explained that when discussing social contracting with governments and donors, the key to advancing it is ultimately community engagement.

Jeff Acaba, Senior Program Officer, APCASO

Jeff raised two questions. Firstly, who can participate in the survey? He emphasized that the

definition of "community" was addressed in the morning recap and expressed a desire to ensure its proper reflection in the survey scope. The second question pertained to understanding the satisfaction levels of all the qualifiers.

Mr. Daniel Marguari, SPIRITIA, Indonesia

Mr. Daniel Marguari emphasized the importance of having a clear definition for 'Community' in the survey. Whether it is the community implementing the Global Fund funding, those not implementing it, those only as beneficiaries, or those engaged in proposal development, there are many classifications. The results could be biased if the criteria were not specified.

Mr. Marguari recommended that there should be a profile question asking the respondent whether they are answering as an individual or representing the organization. If representing the organization, the survey should specify whether the organization is an implementer of the Global Fund funding, another donor, or has no funding. This additional information can be used to analyze the study with less bias.

Ms. Vu Ngoc Hoa, SCDI, Vietnam

Ms. Vu Ngoc Hoa also discussed the importance of the definition of the community. She emphasized the need for a clear and inclusive definition of the community or CSO. The funding request for the TB program in Vietnam mentioned three interventions involving common CSOs and the community. However, there are two systems of social organization in Vietnam, and an accurate definition is crucial to avoid discrepancies. The second point raised was about how the survey results could impact the funding request of the next grant cycle.

Mr. Gopa Kumar, Touched TB, India

Mr. Gopa Kumar highlighted the confusion around community definitions in India, with five different classifications causing uncertainty. The interconnectedness of TB with other diseases complicates matters, and a globally clear definition of the community is needed.

Ms. Periasamy Kousalya, PWN, India

Ms. Periasamy Kousalya highlighted the need for investment in community development during the nomination process in the CCM in India. She emphasized that community strengthening occurs only when there is equal funding, and the process should include funding through the Global Fund to enhance community strengthening at the country level. Simplifying the language used in the survey questions could improve comprehension.

Ms. Daxa Vitthal, NCPI+, India

Ms. Daxa Vitthal raised questions about reporting the survey results back to the country, the reporting mechanism, and how community engagement functions within the country's reporting system.

Agatha Dafarel, Inti Muda Indonesia

Agatha Dafarel suggested categorizing respondents to capture diverse perspectives. In Indonesia, larger networks may express satisfaction, while smaller communities, such as sex workers and MSM, might have different experiences. Urban and rural communities may also differ in their engagement satisfaction.

Mr. Niluka Perera, DAST, Sri Lanka

Mr. Niluka Perera highlighted the importance of gathering perspectives from different communities engaged in the country dialogue process. He emphasized the value of joint submissions to collectively discuss how different groups within a community feel about the engagement process. The qualitative data from the survey will facilitate conversations on areas of success, areas for improvement, and lessons learned. The upcoming session on the e-learning hub's vision and ambition is anticipated as an opportunity to leverage the insights gained for collective learning and inform future community engagements in GC8 and beyond.

Mr. Gavin Reid, Senior Technical Advisor, Community Engagement, The Global Fund

In response to Ms. Quesada from ACHIEVE's guestion, Mr. Gavin Reid mentioned that he couldn't provide a straightforward answer. He explained that the survey aims to offer indicative insights across a limited set of questions. There is an open text box at the end where participants can provide additional information. Since the survey focuses on social contracting, there are various specific areas to explore. While the data can offer some disaggregation and narrative around trends observed at a higher level, it may not capture the nuances of the diverse community. He emphasized that communities are not homogeneous but rather heterogeneous, with different passions even within HIV and among various populations. The evaluations are expected

to facilitate a deep dive into specific issues that may not be addressed at a quantitative level.

Mr. Reid, in reference to Jeff's questions, mentioned that they were really good discussion points. During a consultation, there was a huge debate about what community means. He thinks it's quite good that they're not defining satisfaction because they haven't finished the conversation about what community means, a discussion ongoing for 30 plus years. With the element around having a scope as wide as possible, the survey is intended for communities to respond in the wider sense of communities, meaning people most affected by three diseases and those who have particularly participated in Global Fund processes. From this, they will also be able to see who is not participating in Global Fund processes. The survey is not intended for governments, technical partners, or bilaterals to complete. It is specifically targeted for communities and Civil Society. Regarding satisfaction, he mentioned that it's about perception, and they wanted it to be more quantitative. They can have a conversation and share information to take action together, but the key question is how that leaves them and if they are starting to walk together. The aim was to get into that groove and understand the feelingswhether attention was given and an attempt was made to understand.

In response to concerns about the definition, Mr. Reid highlighted the challenge in reaching a consensus on a specific definition during the consultation. He explained that their approach relies on convenience sampling, connecting with individuals already linked through the community. The focus is on leveraging existing knowledge to identify those included or excluded. While acknowledging the limitations, he emphasized the survey's indicative nature. Their current scope includes funding request development for Windows 1-2-3, with plans to expand to grant-making for the same windows and subsequently cover Windows 4-5-6, likely in 2025. The reporting schedule is set for the spring of each year to the board, with an aim to progress

and seek resources for further improvement in the future.

Mr. Reid clarified that the survey boxes are conceptual frameworks, not reflective of reality, as individuals identify in multiple ways. The survey includes questions on personal identification and interests in HIV, TB, and malaria, aiming for specific frames related to these diseases. There are disaggregations for particular populations, with a focus on gender. The survey seeks to understand how respondents identify and the community they represent or serve. Acknowledging potential inequalities due to access limitations, the survey is available in six languages, including Hindi, to address concerns about language complexity.

Mr. Reid, responding to Ms. Vitthal from NCPT+, found her question useful and aligned with Mr. Marguari's recommendation on the profile question. Acknowledging time constraints for reporting to the board in March, he committed to enhancing information breakdown in the current survey, including responses as foreign organizations. While lacking decision-making power, communities' continued support relies on the information's impact on Global Fund policies and practices. He emphasized their commitment to demonstrating changes resulting from the survey and urged participants to download and disseminate it.



2.4 Transitioning from APCRG Platform Lessons Learned from the APCRG

Presented by Ms. Lorina McAdam, Consultant, Health Management Support Team (online)

Ms. Lorina McAdam, with a background in health and a focus on malaria, shared her experience with the Health Management Support Team at APCASO. The presentation aimed to showcase APCASO's successful approach as the host of the Asia Pacific CRG Regional Platform and offer insights for the new Learning Hub hosts based on this experience.

Reviewing APCRG's achievements and lessons learned in transitioning into a new funding cycle and evolving into Learning Hubs, the methodology included document reviews and 12 key informant interviews. While not a full evaluation, the review could benefit from additional surveys, interviews, and group discussions to comprehensively explore issues and impacts. Key achievements highlighted APCASO's excellence in information and communication, emphasizing tailored communication messages, a diversity of communication methods, and a mix of formal and informal communication to create connections and value partners. Monitoring and tracking newsletters through tools like Mail Chimp and website analytics provided valuable insights. Feedback quotes emphasized APCASO's role in focusing and narrowing the scope, adapting to community needs, quick responses, and the effectiveness of tools in making CCMs and national programs listen more.

APCASO faced challenges in short-term technical assistance but made efforts, consistently promoting it in communications, providing direct assistance, involving the Global Fund Country Team, and conducting a scoping exercise. In 2021, the English version of the TA information sheet was downloaded 921 times, but only 16 inquiries and 8 applications were received. Despite this, there were notable examples of successful short-term TA, such as support for the Regional TB Network and the Cambodia HIV NSP Review.

The scoping exercise identified financial needs more than technical ones, leading to a reallocation of the budget for small grants. The process was reported as user-friendly, with minimal paperwork and support from the APCRG secretariat. In the last round, 13 strategic funding awards were issued, addressing neglected issues like mental health, youth participation, and gender & malaria. Most strategic funding supported preparations for the GC7 funding requests and community dialogues. Ms. McAdam highlighted the positive relationships APCASO developed with partners, attributed not just to what APCASO does but how they do it.

Ms. McAdam noted areas for improvement. In Information & Communication, tailored materials for certain diseases, like Malaria, were less welladapted. Some partners requested linking communication to the broader Global Fund context. While newer partners found communication useful, experienced partners saw little value added. Language diversity remained an issue despite translation efforts. Timing improved from GC6 to GC7, but there were concerns, and webinars faced acceptance challenges. Suggestions were provided in the report for enhancing webinars and optimizing the Facebook page for better timing and content.

In Short-term Technical Assistance, further tailoring, proactive planning, and engagement with other networks can clarify opportunities. Strategic Funding can benefit from improved documentation, communication, and exploration of broader health linkages. Considerations for Management & Other include facilitating broader Global Fund and partner engagement, expanding engagement with regional networks, and advocating for CRG.

For the Learning Hub: Strive for a balanced approach across diseases, reconsider TA demand generation, document and communicate funding selection, and relaunch webinars. For CRG (CE SI): Provide more translation resources, simplify the TA request process (already addressed), expand strategic funding, and address advocacy needs, possibly in partnership with the External Relations and Advocacy Department.

Reflection on the Findings and recommendation on how we can move forward

Ms. Daxa Vitthal, NCPI+, India

Ms. Daxa Vitthal shared their current engagement in the CRG process, focusing on involving community members in understanding the Global Fund GC7 process, country implementation, upcoming challenges, and recommendations. Webinars have been initiated in Hindi, with plans for English sessions. A core team, including key population representatives, has been identified to prioritize upcoming GC7 issues, ensuring meaningful community involvement.

Through the partnership with APCASO, NCPI+ has learned about the flexibility of support, acting as fuel for organizational change and facilitating fast-tracked community feedback, ideally leading to community advocacy. This approach aids in identifying data for country-level advocacy. Constructive dialogues with APCRG and APCASO have translated country TA requirements from paper to implementation.

Areas for improvement include increasing the number of webinars in partnership with country partners, conducted in local languages. This approach enhances engagement with sub-district community members, aligning them with global and regional agendas. A second recommendation is to achieve a more balanced distribution of resources among countries, considering diverse needs and limited funding.

Ms. Mei Sebayang, JIP, Indonesia

Ms. Mei Sebayang, while not formally part of the APCRG platform, noted engagement with its activities and organizations. Her reflection on this learning document emphasized the need to maintain, continue, and enhance APCASO's achievements through the APCRG platform. Operating at the regional level, APCASO serves as a valuable partner, exemplifying the importance of prioritizing strategy in regular networks, as observed in their informative contributions during the GC 7 proposal discussions. Effective communication, especially in the spirit of "no one left behind," necessitates engagement not only with regular partners but also with diverse community organizations, ensuring regional networks authentically represent the broader network.

Looking to the future of the APCRG platform, her reflection suggested a focus on crisis response and support, considering global conversations on climate change. Discussions should explore how communities addressing HIV, TB, or malaria can comprehend the challenges posed by climate change. This perspective should be integrated into constituency plans. Mobilizing resources and providing support during challenging times, particularly in light of future climate-related issues affecting communities dealing with malaria, TB, HIV, and others, should be a priority. Strategic funding, a key activity highlighted in the learning document, warrants improvement. Strengthening needs assessment and establishing clear, evidence-based objectives are essential considerations. Diversifying funding sources beyond the Global Fund is crucial to support community initiatives actively. The focus should extend beyond the commonly discussed Global Fund to explore alternative resources accessible to the community.

Finally, discussions among organizations and donors often center around the sustainability of programs post-Global Fund support. Strategic funding can play a pivotal role in identifying alternative resources to support communities that may not receive assistance from the Global Fund, ensuring continued access to health facilities for all.

Jeff Acaba, Senior Program Officer, APCASO

Jeff noted consistent feedback from both interventions about the positive impact of directly collaborating with Country Partners, particularly in the development of webinars and learning opportunities—a practice the platform couldn't implement previously. This serves as valuable learning. The exchange of insightful points, especially regarding various issues, was acknowledged. Inspired by Mei's input, the focus is on ensuring the Learning Hub becomes a space for generating new ideas and insights. Past attempts within the platform to introduce novel aspects of diseases prompt a current opportunity for revisiting and enhancing this initiative.

2.5 Launch of the 2024-2026 Regional Learning Hub for Asia-Pacific

Hosted by Seven Alliance (APCOM, APN+, APNSW, APTN, ICWAP, NAPUD, and Youth LEAD)

Overview of the regional learning agenda priorities and draft work plan

Presented by Mr. Harry Prabowo, Seven Alliance (Program Manager, APN +)

Mr. Harry Prabowo introduced the Seven Alliance, a consortium comprising seven regional networks of key populations and people living with HIV, each playing a crucial role in the regional response to HIV. The Consortium was established to address community needs at the ground level for CLM. Mr. Prabowo emphasized the limited background experience on CLM from the HIV perspective, prompting the network to undergo training. The first CLM workshop involved government representatives, technical partners, and 13 community-led organizations from 13 countries sharing their CLM works and frameworks. The call for a learning hub led to its establishment. The Seven Alliance is now dedicated to supporting communities in understanding the Global Fund. They believe that without community action, engagement, or support, achieving regional and global targets on the three diseases would be impossible. The consortium emphasizes the essential role of community responses in ending the epidemic. With numerous country partners, constituents, members, and local focal points across the seven key population networks, the impact of their collective work is undoubtedly significant.

Seven Alliance employs three main strategies: Cross Learning & Innovations, Collaboration & Partnerships, and Research and Strengthening. The consortium's priority agenda includes Simplifying the Global Fund Document, ensuring Community Engagement on CCM in the country, prioritizing PSEAH information dissemination, and providing TA for communities and CSOs.

Regarding activities, as Seven Alliance is still new, the first step involves surveying and assessing community needs, along with quarterly virtual learning sessions. The initial session focused on the process of GC7, breaking down barriers to address gaps in previous discussions, featuring inperson meetings, technical assistance activities, and newsletters. Simultaneously, the consortium aims to delve deeper into innovations emerging from proposed activities.

Feedback and discussion to co-create the work of the Learning Hub

Ms. Ikka Novianti, Youth LEAD, Thailand

Ms. Ikka Novianti observed that Seven Alliance seems to focus on HIV, but given its affiliation with the Global Fund and its focus on the three diseases (HIV, TB, and Malaria), along with Community-based organizations providing health services for related diseases, the learning platform should encompass all relevant components.

Ms. Amara Quesada, ACHIEVE, The Philippines

Ms. Amara Quesada inquired about concrete steps from Seven Alliance to ensure adequate representation and coverage of TB and malaria in the learning hub, considering the alliance's primary composition of HIV key populations.

Mr. Niluka Perera, DAST, Sri Lanka

Mr. Niluka Perera reaffirmed his understanding that Seven Alliance is still in the process of being established as a formal body. He expressed satisfaction with the numerous recommendations and suggestions and proposed moving them forward for implementation in the learning hub next year to strengthen their work. Mr. Perera suggested involving community partners familiar with the e-learning hub in collectively determining the platform's direction over the next three years. He also recommended arranging learning sessions, such as bringing a PR person together with TAs, to address challenges and discuss mitigation strategies.

Mr. Viengakhone Souriyo, CHIAS, Lao PDR

Mr. Viengakhone Souriyo highlighted the need for clarity on how countries can benefit from Seven Alliance at the country level in the future strategy. He also inquired about ensuring coherence in the Alliance's collaboration with other key partners.

Mr. Chok Choub Chamreun, Khana, Cambodia

Mr. Chok Choub Chamreun echoed concerns about the focus on HIV and emphasized the importance of addressing other diseases, particularly co-infections on the ground. He stressed that collaboration within the platform could have a significant impact, especially concerning emerging issues like mental health. Mr. Chamreun questioned how Seven Alliance could guarantee integrated services and collaboration on such matters.

Mr. Desi Andrew Ching, HASH, the Philippines

Mr. Desi Andrew Ching underscored the necessity for Seven Alliance to directly communicate with communities at different country levels, enhancing environmental understanding. He emphasized the importance of community awareness about Seven Alliance for better cooperation in program surveys and activities. Ching acknowledged the presence of focal person representatives across different countries within the Seven Alliance but noted that communities are still unaware of these focal persons.

Mr. Harry Prabowo, Seven Alliance (Programme Manager, APN +)

Mr. Harry Prabowo emphasized that the alliance's strength resides in its constituents, while also acknowledging that support from country-level partners will enhance engagement and establish work for the three diseases at the country level. He stated the goal is to encourage stronger partnerships and collaboration to involve more programs related to the three diseases in the region.

Seven Alliance Representative (the moderator)

In addition to Mr. Prabowo's explanation, the moderator emphasized the significance of ensuring the inclusion of the TB and malaria community in the learning hub. It is crucial for the alliance to build upon APCASO's established connections with the TB and malaria community through the APCRG platform. The learning hub must maintain collaboration with current partners and strengthen these ties while actively seeking new partnerships.

Seven Alliance Representative (Male)

The speaker concurred with Mr. Desi Andrew Ching from HASH's remarks, acknowledging that the Seven Alliance operates at the regional level, yet country partners may lack awareness of its existence. This is attributed to each network functioning independently as an organization rather than as part of the Seven Alliance at the regional level, presenting an issue that needs addressing. The speaker expressed optimism that once the Seven Alliance is officially launched as a unified body with a common goal and mission, clarity on these matters would be significantly improved.

Ms. Amara Quesada, ACHIEVE, The Philippines

Ms. Amara Quesada proposed that once the Seven Alliance is launched and firmly established, it should inform organizations, particularly at the national level, focusing separately on HIV and TB. She noted existing platforms in the Philippines where the HIV network is part of an HIV key population Consortium, and the TB network has representation from key populations in both HIV and TB. Ms. Quesada highlighted the potential for these platforms to benefit from the Learning Hub.

Ms. Vu Ngoc Hoa, SCDI, Vietnam

Ms. Vu Ngoc Hoa requested that the Seven Alliance consider developing a roadmap for the Learning Hub, outlining the areas it will cover in terms of inclusivity regarding populations and various diseases. She highlighted the importance of the Learning Hub responding not only to current needs at the country and regional levels but also to changes and transitions in countries where support is required.

Mr. Daniel Marguari, SPIRITIA, Indonesia

Mr. Daniel Marguari stressed that the significance lies not just in launching the Seven Alliance but in introducing the platform to countries. He emphasized the need for considering external expertise, especially for TB and malaria, and raised the question of the mechanism facilitating country communication with the platform, suggesting the importance of clarifying this aspect from the beginning.

Mr. Harry Prabowo, Seven Alliance (Programme Manager, APN +)

Mr. Harry Prabowo agreed with Mr. Marguari's comment, stating that this is just the starting point, and there is a need for more time to learn. He acknowledged the valuable feedback in the meeting, emphasizing its contribution to the progress of the Seven Alliance.

Group Discussion

'What is your priority to assist us in shifting our learning hub focus?'

• What are the top priorities for the learning hub, and what are the specific needs of each country?

• What works well on the current platform, and what aspects are already good that we need to retain? In which areas does the learning hub need improvement?

Group presentation

Group 1

Ms. Amara Quesada, ACHIEVE, The Philippines

Ms. Amara Quesada highlighted two clusters of priority. The first pertains to CCM accountability to the community. She suggested that the Learning Hub could serve in specific ways in relation to CCM accountability. One way is to facilitate the coordination and sharing of information on good practices from different countries in the region, illustrating how they effectively engage CCM and hold them accountable. Simultaneously, the Learning Hub could provide materials to enhance CCM understanding of their functions and accountability. This approach would enable CCMs in the region to observe better practices from various countries, prompting reflection and reconsideration of their own operations.

The second priority concerns operationalizing community engagement in challenging situations, specifically addressing challenges experienced by the group's members. These challenges include reaching communities that are geographically hard to access, communities facing criminalization, limitations in accessing available technologies, and communities unaware of existing CRG-related components of the Global Fund grant. Clarity on the different CRG components in the grants for the three diseases would be beneficial for communities, making it easier for them to monitor implementation and enhance their engagement at the country level.

Group 2

Presented by Mr. Viengakhone Souriyo, CHIAS, Lao PDR

APCRG has effectively facilitated communication among country partners, creating a space for country organizations to collaborate and integrating TA to build holistic capacity in these organizations. These practices should be continued in the Seven Alliance learning hub. Mr. Souriyo emphasized the importance of tool development, dissemination, localization, and translation for country partners. Providing creative learning materials and building organizational capacity for quick responses to emergencies are crucial. Therefore, establishing peer-to-peer learning for TA from each country is necessary, leveraging the wealth of experience accumulated over more than 20 years in each organization in this region to foster sustainability in TA.

Ms. Vu Ngoc Hoa, SCDI, Vietnam

Ms. Vu Ngoc Hoa, also from Group 2, emphasized that as the regional network, Seven Alliance holds the primary responsibility for assessing regional information and updates. Consequently, the learning hub should actively contribute to creating learning materials and communicating with country organizations to address their learning needs in response to new situations. She highlighted the significance of recognizing that learning demands may originate from both the country level and the learning hub.

Group 3

Presented by Mr. Asghar Satti, APLHIV, Pakistan

Mr. Asghar Satti highlighted the first priority as gender equality, with a special focus on the empowerment of women living with HIV. The group proposed that Seven Alliance should advocate for health, including interventions for TB and HIV. The third priority is capacity building on organizational development at the country level to ensure full engagement in the Global Fund processes. The group emphasized that Seven Alliance should initiate a situation analysis and needs assessment at the country level to develop a profile for each country, guiding the learning hub. Within this process, the learning hub should identify technical assistance providers at both the country and regional levels. Mr. Satti suggested that, given diverse country experiences and lessons learned, the hub should prioritize crossborder learning and experience sharing. It should compile valuable expertise and evidence, creating an e-library for other countries to learn from. The hub should also establish mechanisms to gauge each country's engagement level in the Global Fund grant cycle process.

Group 4

Presented by Mr. Niluka Perera, DAST, Sri Lanka

Mr. Niluka Perera identified the first priority as inter-disease engagement, focusing on bringing together HIV, TB, and malaria communities for joint advocacy. While APCRG has successfully united TB and HIV communities, there is a need to include malaria communities more prominently in the region. Seven Alliance can play a crucial role in fostering regional community collaboration. At the country level, it can offer technical assistance to facilitate interdisease engagement. The second priority involves prioritizing CSS and CLM for frameworks and pillars, emphasizing capacity building for addressing CLM implementation challenges rather than simply implementing CLM initiatives at the country level. The third priority is establishing South-to-South cross-learning among PRs, CCMs, and communities, leveraging successful practices from certain countries.

Dissemination of information, including using online tools, and maintaining a regular feedback mechanism are crucial delivery methods. Building on APCRG's work, utilizing community-generated data for advocacy and supporting country partners in surveys should continue. Seven Alliance could identify impactful countries in the region for ongoing efforts. While APCRG has developed tools for organizational strengthening, Seven Alliance can explore translating them into audio and visual formats. Lastly, there is a need for more support for inclusive translation, a complex area that needs attention as the platform advances.

Seven Alliance Representative (Male)

The speaker expressed gratitude to all participants, emphasizing the immense value of the feedback gathered during the meeting. He assured that Seven Alliance will thoroughly discuss the raised issues and actively implement the recommendations provided. Reflecting on the two-day meeting, he acknowledged gaining valuable insights into the challenges related to CLM and the participants' preference for a shorter, snapshot-style newsletter. He affirmed that every suggestion, comment, and recommendation will be given due consideration and moved forward. On behalf of Seven Alliance, he commended APCASO for its noteworthy work and pledged continued collaboration.

Ms. Susan Perez, Community-led Monitoring Strategic Initiative, the Global Fund

Ms. Susan Perez shared her input. She underscored the importance of Seven Alliance collaborating with APCASO to address inquiries about APCASO's status and highlighted the need for a clear response to TB and malaria concerns. Ms. Perez expressed excitement about the upcoming cycle and extended congratulations to Seven Alliance.

Mr. Daniel Marguari, SPIRITIA, Indonesia

Mr. Daniel Marguari anticipated the opportunity and what each country will have at the end of December. He mentioned that during the group discussion, another priority raised was analyzing the situation and the gap in each country. Mr. Marguari reminded organizations that although Seven Alliance will be facilitating, but do not wait as otherwise a moment of opportunity might be lost. He suggested that it would be good for the communities who do not manage Global Fund funding as implementer, come to the PRs, whoever they are to request the evaluation of the programs managed by communities independently to gained insight into the progress and challenges.

RD Marte, Executive Director, APCASO

RD Marte sincerely welcomed the Seven Alliance, extending best wishes for their success. She acknowledged that serving the region has been a valuable opportunity for APCASO, and the establishment of the Seven Alliance further strengthens APCASO. RD Marte expressed the hope that the Seven Alliance would become a robust and effective platform for the region, ultimately benefiting country partners, which is of utmost importance. She emphasized APCASO's continuous support and commitment to collaborate in establishing the AP Learning Hub. RD Marte recognized and appreciated the country partners who have taken ownership of the APCRG and conveyed gratitude to the Global Fund. In conclusion, she acknowledged all the individuals within APCASO who have contributed to the work of APCRG.



APPENDICES

Appendix 1: Menti Reports

			M Mentir
		you in the coordinatio ion and in preparatior	
Supported to effectively coordinate communtiy and CCM enggement	Just using simple tools and information share and help us plan, implement and evalutate programs	Information was shared	Disseminated CLM info
gc7 new pr/Sr no word post-selection	Support preparation for youth representation in the CCM	Information shared and learned	CLM dissemination

1.4 How has APCRG Platform supported you in the coordination & communication during GC6 implementation and in preparation for GC7?

We can have information related to GC from the early stage to have a plan to engage the communities in the process. We are informed with the regional and global advocacy opportunities.

That's excellent

Mongolia: With TA assistant we included CLM intervention on GC7 shared tools and information - but convene the workshop with stakeholders and in particular with KPs from the three diseases ell

1.6 What is your next step to ensure continued involvement and engagement of communities in the implementation of the GC7 grants at country levels?



Mentimeter

2.2 What is your country's most important challenge in starting or in implementing CLM? Who needs to respond to these challenges?

PH: a need to make CLM (1) more organic (2) increase awareness (wider). (3) try to do a call-based CLM data collection (maybe something 7alliance can support also))

Because there will be Election coming on 2024, government and ruling party sees CLM initiative as pressure or criticism to government. How do you convince government partners who antagonize CLM to suppor CLM?

Because there will be Election coming on 2024, government and ruling party sees CLM initiative as pressure or criticism to government. For Mongolia in GC7 one of the important intervention is CLM. But as PR Ministry of Health has lack of understanding of CLM initiative. PH: community data "analysis" has long been requested as part of capbuilding rather than "data appreciation"-- this issue threatens sustainability if existing data analyzers (funded by pilot) leave

Appendix 2: Link to the presentations: <u>https://</u> <u>drive.google.com/drive/folders/</u> <u>1hvivfoVW4AawIyKS8aeMITf5AiEAhUyy</u>

List of Presentations

- 1.2 Transitions_APCRG Meeting 2023 CN
- 1.3 APCRG 2021-2023
- 1.4 Chias.pptx1.4 SCDI Strategic Support-22-23-03.12
- 1.4 Spiritia_TB-HIV SOGIESC and Human right
- 1.5 CE SI for GC7 What is new What changed FINAL
- 1.6 (BHUTAN)
- 1.6. (SRI LANKA)
- 1.7 Engagement in GC7 Grant Implementation APCRG Meeting December 2023
- 1.8 Group Work
- 2.1 APCRG Transitions Mtg 2023_Day 2 _CLM
- 2.2.1 PASTB and CallKaLungs
- 2.2.2 Commusta Launch Video

- 2.2.3 TB Community Report
- 2.2_ RD's Overview
- 2.2 Transitions APCRG day 2.2 Talk Show Bazra
- 2.3 KPI C1 APCRG Presentation
- 2.4 APCRG Learning Document
- 2.5 Learning Hub
- RD APCRG BigBKKMtng 2023 Day 2/Sessionn 2.2: RD's Overview