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Making Global Fund Money Work for Communities: Community Partnership Consultation

Meeting Report Pattaya, Thailand, 7-8 December 2011

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Acknowledgements

This report documents the presentations and discussions made during the "Making Global Fund Money Work for Communities: Community Partnership Consultation" held in Pattaya, Thailand on 7-8 December 2011.

It aims to draw attention to the issues associated with how current approaches to Global Fund proposals and grants management processes have hindered grantees' abilities to inclusively develop and effectively implement rights-based programmes that best serve their communities. The report provides a wide array of recommendations for the Global Fund Secretariat, Board, Local Fund Agents and Global Fund technical partners.

This global consultation of key populations was jointly organized by UNDP Asia-Pacific Regional Centre (APRC), Open Society Foundations (OSF) and the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) Secretariat in close partnership with UNAIDS Asia-Pacific Regional Support Team, KHANA International AIDS Alliance and the Coalition of Asia Pacific Regional Networks on HIV/AIDS (7 Sisters).

Many people were involved in making this meeting possible. The meeting organizers would like to gratefully acknowledge all the participants for their valuable participation and inputs. A list of participants is included in the Annex of this report.

The meeting was facilitated and the report drafted by David Barr of The Fremont Center.

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Edmund Settle, Policy Specialist, UNDP; Shannon Kowalski, Senior Programme Officer, OSI; Mauro Guarinieri, Senior Civil Society Officer, Global Fund and Michael O'Connor, Team Leader, Civil Society and Private Sector Partnerships Team, Global Fund coordinated the meeting, developed the agenda and finalized this report.

Ian Mungall, UNDP Knowledge Management and Communications Analyst, designed this report.

Acronyms and abbreviations

AIDS	Acquired immunodeficiency syndrome
APN+	Asia Pacific Network of People Living with HIV/AIDS
APNSW	Asia Pacific Network of Sex Workers
ART	Anti-retroviral therapy
ARV	Anti-retroviral drugs
CBO	Community-based organization
CSAT	Civil Society Action Team
CSO	Civil society organization
CSPRN	Civil Society Principal Recipient Network
CCM	Country Coordinating Mechanism
COIN	Centro de Orientación e Investigación Integral
CSS	Community Systems Strengthening
DIVA	Diversity in Action
EPOS	EPOS Health Management
FPM	Fund Portfolio Manager
FTA	Free trade agreement
FTT	Financial transaction tax
G20	The Group of Twenty
GFATM	Global Fund on AIDS, Tuberculosis and Malaria
HIV	Human immunodeficiency virus
HLM	High-level meeting
HSS	Health systems strengthening
IAC	International AIDS Conference
ICAAP	International Congress on AIDS in Asia and the Pacific
IDUs	Injecting drug users
IEC	Information, education and communication
ITPC	International Treatment Preparedness Coalition
JPR	Joint programme review
KAPs	Key affected populations
LFA	Local Fund Agent
M & E	Monitoring and evaluation
MARPs	Most-at-risk populations
MDGs	Millennium Development Goals
MSM	Men who have sex with men
NGO	Non-governmental organization
NSA	National Strategy Application
OIG	Office of Inspector General
OSF	Open Society Foundations
PCB	Programme Coordinating Board
PLHIV	People living with HIV
PR	Principal Recipient
RCC	Rolling Continuation Channel
RCM	Regional Coordinating Mechanism
RST	Regional Support Team
SDA	Service Delivery Area
SR	Sub-recipient

SSR	Sub-sub-recipient
STI	Sexually transmitted infection
TRIPS+	Trade-Related Aspects of Intellectual Property Rights Plus
TRP	Technical Review Panel
TSF-SEAP	Technical Support Facility for Southeast Asia and Pacific
TWG	Technical working group
UA	Universal access
UCC	UNAIDS Country Coordinator
UCO	UNAIDS Country Office
UNAIDS	The Joint United Nations Programme on HIV/AIDS
UNAIDS RST	UNAIDS Regional Support Team
UNDP	United Nations Development Programme
UN ESCAP	UN Economic and Social Commission for Asia and the Pacific
UNGASS	United Nations General Assembly Special Session
UNICEF	The United Nations Children's Fund
VCT	Voluntary counseling and testing
WHO	World Health Organization

Executive Summary

In December 2011, UNDP, Open Society Foundations, and the Global Fund partnered with UNAIDS, KHANA International AIDS Alliance and 7 Sisters to convene the 'Making Global Fund Money Work for Communities: Community Partnership Consultation' in Pattaya, Thailand. The consultation's aim was to document the experience of participants in the development and implementation of Global Fund multi-country grants and generate policy guidance and recommendations for the Global Fund and other stakeholders to strengthen the effectiveness, management and oversight of these funding streams. These recommendations are meant to ensure that community-based organizations can fully participate in Global Fund HIV programmes, inform the recently approved Human Rights Strategy and better meet the needs of their communities.

Representatives from over 30 community-based organizations and individuals from key affected populations and people living with HIV representing Africa, Asia, the Caribbean, Eastern Europe and Latin America attended the meeting. The participants had substantive experience and have played key roles during various phases of Global Fund multi-country grants, including proposal formulation, grant negotiation, programme implementation and evaluation. The Global Fund Secretariat and UN-based partners were also represented.

Since the approval of Round 9 and 10 multi-country grants, specific issues relating to community-based organizations' grant management and implementation have been highlighted through both formal and informal communications with the Global Fund:

- Current Global Fund grant signing, management, programme review and ongoing disbursement processes and procedures are designed primarily for government-led national grants. These risk mitigation structures often create a substantive barrier to community-based organizations, which serve as Sub-recipients (SRs) and Sub-sub-recipient (SSRs) under multi-country grants and national grants.

- Risk management, overall expectation and communication needs of the Principle Recipients (PRs), SRs and SSRs are often inconsistent and different from traditional Country Coordinating Mechanism (CCM)-focused countries.

- The role and operability of the Local Fund Agent (LFA) under community-led multi-country grants is perceived to be inconsistent and often impeded grant progress.

The participants raised serious concerns about how current approaches to Global Fund proposal and grants management have hindered grantees abilities to develop and implement programmes that best serve their communities. The report provides a wide array of recommendations for the Global Fund Secretariat, Board, LFAs and Global Fund technical partners. The key recommendations are summarized below. More detailed recommendations and background information are contained in the body of the report.

The consultation took place only two weeks following the Global Fund Board meeting of November 2011. At that meeting, serious shortfalls in funding were revealed leading to the cancellation of Round 11, a withdrawal of further support to G20 countries, the development of a Transitional Funding Mechanism and revised guidelines for Phase Two renewals. The Board also approved a new proposal development and review process

that left unanswered many questions about if and how multi-country proposals can be developed and supported. Finally, the Board approved a specific Human Rights Strategic Objective intended to: (a) Integrate human rights considerations throughout the grant cycle; (b) Increase investments in programmes that address human rights-related barriers to access; and (c) Ensure that the Global Fund does not support programmes that infringe human rights. The consultation provided an important first opportunity for community representatives to hear about these Board decisions, discuss their impact and develop advocacy strategies in response.

One overarching recommendation is the need to document the effectiveness of multi-country grants in serving key affected populations. Services and advocacy provided for and by key affected populations is an essential component of success in the response to HIV, TB and malaria. By documenting the results of these programmes, the Global Fund and other funding mechanisms will be encouraged to further expand support for these efforts.

Key Issues and Recommendations

Proposal Development

- The kind of expertise required to understand and evaluate multi-country proposals developed and led by organizations representing most at-risk populations is not well defined by the Global Fund.

  Recommendation: The Secretariat needs to develop criteria for improved community-level expertise on the Technical Review Panel (TRP).

- The Global Fund Secretariat needs to explain how the revised application and approval process will be applied to multi-country proposals.

  Recommendation: The Global Fund should recognize the added value of community-driven multi-country proposals, and in doing so, should consider development of separate application procedures and review processes tailored to meet the needs of such proposals. At the least, guidelines for multi-country proposal development using the new iterative process should be issued by the Secretariat.

- The GF Secretariat should clarify the roles of CCMs, PRs and SRs in the new application process. CCM engagement is a difficult and time-consuming process, and getting CCM endorsement is contradictory to the reason why the regional proposal was developed in the first place. Even without CCM endorsement, a multi-country proposal can and should be able to align with national plans and demonstrate additionality.

  Recommendation: PRs and SRs should be identified early in the process in order to participate in programme development. CCM engagement should not be such a high criteria for approval.

- The grant negotiation process took a great deal of time and required many hours of staff time, not covered by the grant.

Recommendation: The cost for the grant negotiation process to meet GFATM minimum requirements should be included in the proposal.

- The Global Fund Human Rights Strategy must be implemented through the Fund's grant making procedures.

  Recommendation: The Global Fund Board and Secretariat need to define rights-based services and how to reflect that definition in RFPs and proposal guidance, staff training, TRP member selection and proposal review criteria and other Global Fund policies.

Grant Negotiation

- The specified role and competency of Fund Portfolio Managers (FPM) and Local Fund Agents to understand and oversee programmes developed and led by organizations serving key affected communities is lacking. This leads to decisions that impede the ability of these organizations to achieve their goals and provide high-quality services to their clients.

  Recommendation: LFAs and FPMs must have the capacity to understand how community-based programmes function, how community-based organizations are structured and how the needs of the populations they serve require flexibility in programme implementation. Increasing LFA and FPM capacity to work with and for key affected populations should be seen as a component of implementing the Human Rights Strategy.

- The meeting participants provided multiple examples of inflexibility in reviewing and approving budgets. These included:
  - Refusal to cover the cost of tea for workshop participants because multiple bids were not submitted.
  - Refusal to permit changes in proposed budgets developed three years prior, despite rising inflation and currency fluctuations.
  - Approvals required for any change in unit costs or details in a budget line even if the overall total costs remains the same – stifling progress and project implementation.
  - Up-front removal (cutting a proposed budget through the proposal review process) should be practiced carefully. In one instance, 90% of the budget was cut, thus gutting the heart of the proposal.

  Recommendation: Greater flexibility in budget negotiation is required with a greater emphasis on ensuring programmatic goals.

- Changes in the content of proposals during the negotiation process can undermine both the needs of key affected populations and the organizations that serve them.

  Recommendation: Grant negotiations, especially for those programmes focused on key affected populations, must involve both PRs and SRs throughout the entire process, who can ensure that any changes to activities and budgets do not compromise the goals, objectives and value of the initially proposed programmes.

Programme Implementation

- In an effort to reduce financial risk and better monitor programme performance, the Global Fund has initiated risk management processes that actually threaten the ability of community-based organizations to implement programmes successfully. Many examples were provided at the meeting, including:
  - Requiring workshop participants to provide copies of ID cards to prove their attendance. This jeopardized participant confidentiality, a priority for the target audiences of these workshops - MSM, sex workers and drug users.
  - Refusing to allow for budget changes to cover emergencies, including one instance in which people attending a workshop were injured in an auto accident on their way to the event and required medical care.

  Recommendation: Fiscal accountability should not be the only consideration in risk management. Flexibility in working with civil society SRs and SSRs, particularly those working with most-at-risk populations (MARPs), is essential for effective programme implementation. Improved training about HIV and HIV service delivery for FPMs and LFAs would also lead to more rational implementation of risk management approaches.

- The administrative burden placed on PRs and SRs is high. For SRs involved in community-led multi-country grants, there is a significant danger of overwhelming the organization with administrative responsibilities that undermine their ability to serve their community. Ways should be found to streamline administration and to ensure that community-based SRs can obtain necessary technical support. If the goal of a Community Systems Strengthening (CSS) project is to increase the capacity of community-based organizations, the reporting requirements placed on those organizations must not expect the capacity to exist prior to engagement in the project.

  Recommendations:
  - The Global Fund should develop simpler, less burdensome administration requirements for community-led, SR/SSR multi-country grants.
  - The goals and objectives of the CSS Framework should be better reflected in the administrative processes developed by the Secretariat and by LFAs.
  - Provide bridge or start-up funding to community based SRs/SSRs so they can build capacity of their management and reporting.
  - Allow civil society PRs and SRs to have a three-year Phase One and two-year Phase Two schedule.

Re-programming and Renewals

- Collect additional evidence on the outcomes and impact of multi-country grants.

- Develop a better guidance on good programming for MARPs to ensure quality. The guidance would include human rights standard for implementers and the Global Fund. Communities must be involved in the development of this HR guideline. Develop specific proposal forms for Phase Two renewal processes for multi-country

implementers that respond to specific multi-country proposal issues. Non-CCM options need to be validated, given the current multi-country proposal procedure that requires CCM endorsement, especially in countries where CCM oppose funding for MARPs.

- Prioritise programmes that protect and promote human rights, using Phase Two as opportunities to *stop funding* for programmes that violate human rights (such as forced provider-initiated testing for sex workers, and programmes that are supportive of criminalization of HIV transmission, sexual behaviours and drug use).

Background

Support for Key Affected Populations and Community Systems Strengthening

Since its creation in 2002, the Global Fund has become one of the main funders of programmes to fight AIDS, TB and malaria, with approved funding of US$22.4 billion for more than 1,000 programmes in 150 countries (as of 30 June 2011), equivalent to one quarter of the international financing for HIV and AIDS.

Although the Framework Document of the Global Fund[1] does not explicitly refer to human rights, it takes a rights-based approach, stating that the Fund will support proposals which strengthen the meaningful participation of most-at-risk populations; give due priority to the most affected countries and communities; and aim to eliminate stigmatization of, and discrimination against those infected and affected. Within the HIV stream, most-at-risk populations – as defined by the Global Fund - are those sub-populations that have, within a defined and recognized epidemiological context and relative to the overall population, significantly higher levels of risk, mortality and/or morbidity, and significantly lower access to or uptake of relevant, rights-based services. Overall, despite an increasing trend of disproportionally higher prevalence, HIV prevention funding addressing most-at-risk populations represents only around 6 percent of its cumulative funding (or US$196 million) for the period 2002-2009 according to research undertaken by the Global Fund.[2]

The Global HIV Prevention Working Group has estimated that in epidemics where HIV is *concentrated* among most-at-risk populations, less than 10 percent of HIV-related expenditures target them[3]. In *generalized* epidemics the proportion is even lower with only 1 percent of expenditures supporting most at risk populations, with 0.5 percent for sex work, 0.1 percent for men who have sex with men, and 0 percent for people who inject drugs.[4]

To address this gap in financial resources and involvement in national programmes, the Global Fund has developed a number of mechanisms and policies to strengthen support for key affected populations, human rights protections, and community systems strengthening. These include the Gender Equality Strategy, the Sexual Orientation and Gender Identities Strategy (SOGI), the Community Systems Strengthening Framework, Dual Track Financing, non-CCM and multi-country proposal consideration, and the Targeted Pool for MARPs[5]. In response, community based organizations have successfully formulated and submitted multi-country proposals to the Global Fund with 15 multi-country grants in the current Global Fund portfolio. These grants often include creating an enabling environment to support further action at country level and those that aim for efficiency in action. Additional multi-country proposals were anticipated in Round 11 until the Global Fund Board cancelled that round in November 2011. Despite the many specific challenges of multi-country grants, community-led regional proposals

1 The Global Fund to Fight AIDS, Tuberculosis and Malaria (2010). Global Fund HIV Investments Targeting Most-at-Risk Populations: An Analysis of Round 8 (2008) Phase 1.

2 Ibid.

3 Global HIV Prevention Working Group (2009). Global HIV Prevention: The Access, Funding, and Leadership Gaps. Washington, DC.

4 Ibid.

5 These mechanisms are described and discussed in the MARPS paper annexed to this report.

offer community-based organizations an additional platform to address key advocacy, capacity and strategic information issues often missing from national proposals, which limit community participation.

Multi-country grants are not 'business as usual' and can present some challenges in relation to: proposal development and review, programmatic focus, oversight and governance, and day-to-day management – both within the Secretariat and also for the key partnerships, including the Local Fund Agents. Since the approval of Round 9 and 10 multi-country grants, specific issues relating to community-based organizations' grant management and implementation have been highlighted through both formal and informal communications with the Global Fund:

- Current Global Fund grant signing, management, programme review and ongoing disbursement processes and procedures are designed primarily for government-led national grants. These risk mitigation structures often create a substantive barrier to community-based organizations, which serve as SRs and SSRs under multi-country grants and national grants.

- Risk management, overall expectation and communication needs of the PRs, SRs and SSRs are often inconsistent and different from traditional CCM-focused country.

- The role and operability of the Local Fund Agent under community-led multi-country grants is perceived to be inconsistent and often impeded grant progress.

The Global Fund Strategy Framework and Transformation Plan

At the 25th Global Fund Board in November 2011, a new Strategy Framework and Transformation Plan were adopted that will impact how the Fund supports most-at-risk populations and strengthens community systems. Key elements include:

- Replacing the rounds system with a two-step iterative proposal development process.

- An increased emphasis on re-programming of current grants.

- Increased focus on targeted, evidenced-based interventions that address the needs of key affected populations.

- A revised approach to risk management that moves away from the current *one size fits all* models.

- A specific Human Rights Strategic Objective intended to: (a) Integrate human rights considerations throughout the grant cycle; (b) Increase investments in programmes that address human rights-related barriers to access; and (c) Ensure that the Global Fund does not support programmes that infringe human rights.

Impact of Decisions from the November 2011 Global Fund Board Meeting

A lack of funding led to a series of decisions at the November 2011 Global Fund Board meeting that will also have a strong impact on efforts to support community systems strengthening and multi-country proposals supporting most at-risk populations. These include:

- Cancellation of the Round 11 grant cycle. A number of organizations representing key affected populations were already engaged in the development of multi-country proposals for Round 11, but these will not go forward until at least 2014.
- Elimination of any proposals from G20 countries, including Phase Two renewals.
- Development of a transitional funding mechanism to ensure continuation of services in countries where Global Fund grants will end prior to 2014. This transitional funding will not cover expansion of services and will be limited to "essential services", the definition of which is in development.

Consultation in Pattaya

In December 2011, UNDP, Open Society Foundations, and the Global Fund partnered with UNAIDS, KHANA International AIDS Alliance and 7 Sisters to convene the 'Making Global Fund Money Work for Communities: Community Partnership Consultation' in Pattaya, Thailand. The consultation's aim was to document the experience of participants in the development and implementation of Global Fund multi-country grants and generate policy guidance and recommendations for the Global Fund and other stakeholders to strengthen the effectiveness, management and oversight of these funding streams. These recommendations are meant to ensure that community-based organizations can fully participate in Global Fund HIV programmes, inform the recently approved Human Rights Strategy and better meet the needs of their communities.

Representatives from over 30 community-based organizations and individuals from key affected populations and people living with HIV representing Africa, Asia, the Caribbean, Eastern Europe and Latin America attended the meeting. The participants had substantive experience and have played key roles during various phases of Global Fund multi-country grants, including proposal formulation, grant negotiation, programme implementation and evaluation. The Global Fund Secretariat and UN-based partners were also represented.

Presentations describing the GF Board decisions and the new strategies were made at the consultation, which took place shortly after the Board meeting and provided a unique and timely opportunity for meeting participants to discuss the potential impact of the funding cuts and the Strategic Framework. Their questions, comments and strategies are described in each section of this report. The consultation focused on the following areas: (1) proposal development and grant negotiation; (2) programme implementation; (3) grant renewals and re-programming and; (4) advocacy. The meeting agenda, participant list, presentations and background documents are all available through a web index at:

Proposal Development

The development of any Global Fund proposal is challenging. Multi-country proposals are even more so. Such proposals usually require the endorsement of the CCM from each participating country. To be successful, a multi-country proposal should adequately demonstrate the added value of a regional approach compared to country-level proposals, alignment and additionality with national plans, and administrative expertise to oversee a complex infrastructure. Technical and financial support for community-driven multi-country proposal development can be difficult to obtain when compared to government support for country-level proposals. Administrative capacity must often be developed in comparison to what governments can provide. The development of the proposal involves identifying and negotiating with multiple partners in different countries, often with varying needs and capacities.

Historically, multi-country proposals have not been viewed favourably by the Global Fund Technical Review Panel and proposal submission and review processes favour country-level applications. However, in the past three grant rounds, there has been a gradual increase in the multi-country proposal approval and an improved understanding that such proposals can produce added value, especially in serving most-at-risk populations, strengthening community systems and addressing human rights programming. And, though challenging, the process of proposal development has been a valuable community mobilization opportunity in and of itself. Despite the difficulties of negotiating with multiple partners across a region, the proposal development process has helped affected communities articulate shared strategies that have strengthened coalition building.

Case Study: Regional Proposal Development: APN+ Treatment Literacy and Support for People Living with HIV/AIDS in South-East Asia

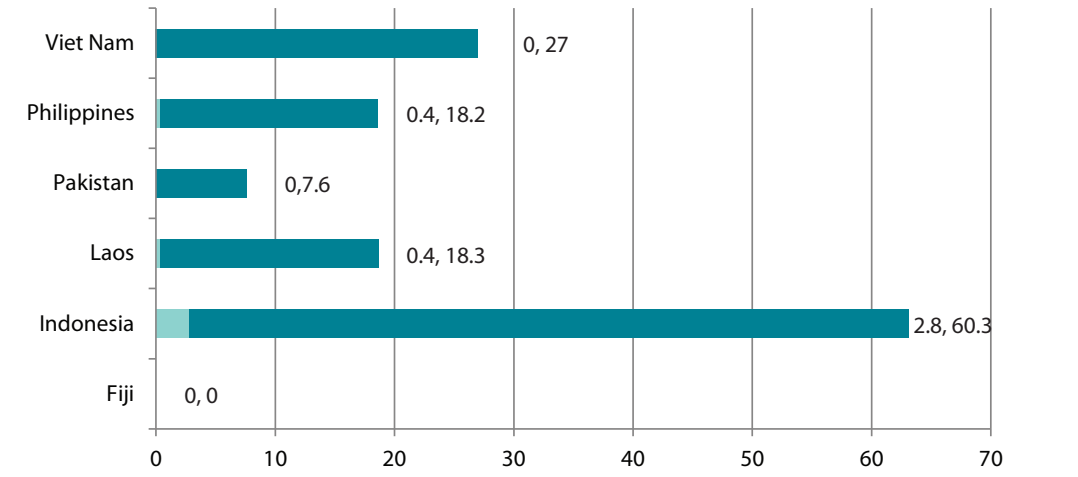
Presented by Rico Gustav, APN+

Proposal Title	People Living with HIV Response to AIDS in AIDS and Pacific – Regional Advocacy for Treatment need of People Living with HIV in Asia and Pacific
Grant Starting Date – Grant Ending Date	October 1st 2011 – September 30th 2016
Project Goal	To improve access of PLHIV to treatment, care and support services in Bangladesh, Indonesia, Laos, Nepal, Pakistan, Philippines and Viet Nam
Programme Objectives (1)	To improve policy environment on treatment, care and support of PLHIV by strengthening community-based organizations (PLHIV networks) from Bangladesh, Indonesia, Laos, Nepal, Pakistan, Philippines and Viet Nam
Programme Objectives (2)	To improve community acceptance of treatment, care and support services for PLHIV by strengthening community-based organizations (PLHIV networks) from Bangladesh, Indonesia, Laos, Nepal, Pakistan, Philippines and Viet Nam

Why the Proposal was Developed

- Treatment-related gaps at the country level were not being addressed by country grants. Country grants focus more on quantity, but not quality of services. Treatment literacy and support services were not being provided. As there were few efforts at country levels to address these gaps, APN+ decided to develop a regional proposal to support peer-based services and advocacy for people living with HIV.

- National PLHIV networks are underfunded, despite the amount of funding that the country receives through the GF grant. This has led country networks to become donor driven, and there is no continuity in their advocacy efforts. Staff members of national PLHIV networks are seriously underpaid, despite expectations of them being *'superman',* responsible for mobilizing their communities, establishing relationships with government agencies, understanding UN languages, developing and implementing services, raising and administering funds.



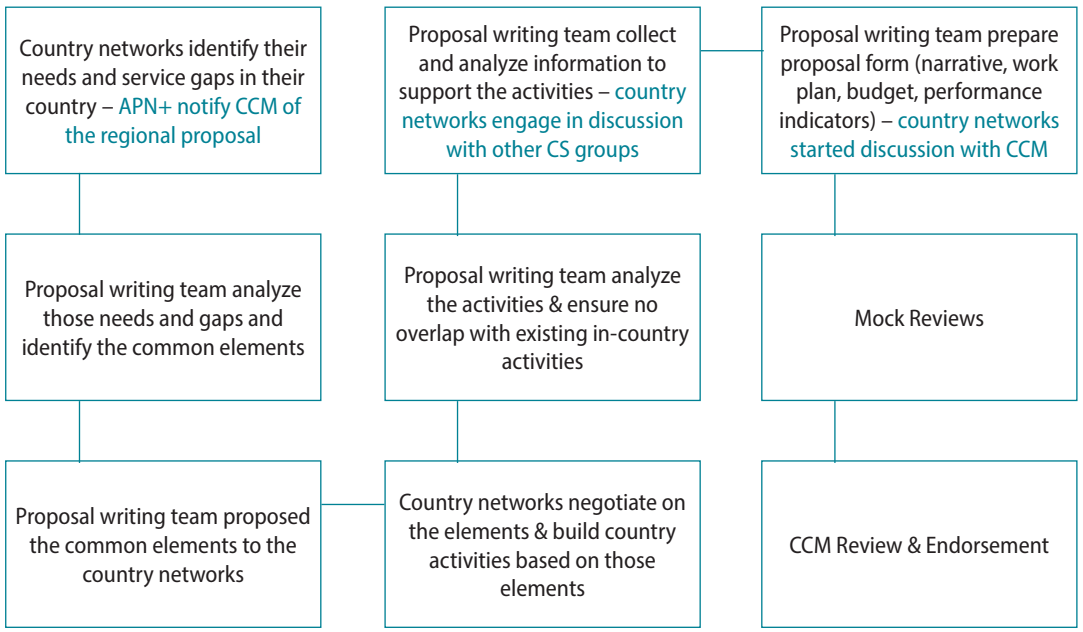
Proposal Development

- Technical Support Facility for Southeast Asia and Pacific (TSF-SEAP) provided support for the proposal development. At the country level, UNAIDS Country Offices (UCOs) provide support for grant implementation.

- Initially, 11 country networks were involved in the proposal but in the end only seven remained, with four dropping out for various reasons including difficulties in getting CCM sign-off. Funded countries are: Bangladesh, Indonesia, Laos, Nepal, Pakistan, Philippines, Viet Nam

- The total spending of the proposal development process was US$ 84,000.

The Process



Lessons Learned

- The full involvement of potential SRs in proposal development significantly facilitates better grant implementation and management flow.
- Mock TRP review process is important to ensure quality of proposal

Results

Although the proposal was awarded Category 2A by the TRP, 90 percent of the proposed budget was cut because the TRP felt that country activities should not be managed by a regional organization. The only Service Delivery Area (SDA) that was approved was the regional information system (treatment database).

Recommendations from the Presentation

- The Global Fund should develop guidelines and templates specifically designed for regional/ multi-country grants.
- CCM engagement should not be such a high criteria for approval. CCM engagement is a difficult and time-consuming process, and getting CCM endorsement is contradictory to the reason why the regional proposal was developed in the first place. Even without CCM endorsement, a multi-country proposal can and should be able to align with national plans and demonstrate additionality.
- Up-front removal (cutting a proposed budget through the proposal review process) should be practiced carefully. In this instance, 90 percent of the budget was cut, thus gutting the heart of the proposal.

- The grant negotiation process took a great deal of time and required many hours of staff time not covered by the grant. The cost for the grant negotiation process to meet GFATM minimum requirements should be included in the proposal.

Participant Questions and Comments on the Presentation:

- Why did you think treatment gaps should be included in a regional proposal?
  - National entities and national strategic plans talk about scaling up of services, but not about the quality of the treatment. Quality of services and treatment literacy are considered low priority for country grants, but they are important to PLHIV and should be considered essential services in order for treatment to be effective.

- What is left from the 90 percent budget cut?
  - The remaining 10 percent budget approved by the TRP was the only regional SDA in the proposal to establish a regional information system. The regional treatment database establishes a set of community driven indicators to monitor provision of treatment for PLHIV. The proposed budget for this SDA was actually US$7 million, but for reasons unknown, only US$3 million was approved. APN+ is raising funds from other sources to cover the funding gaps.

The new two-step *iterative process* for Global Fund proposal development

The GF Transformation Plan proposes a revised two-step grant making process. This includes an initial submission of a Letter of Intent, which, if approved by the TRP, would be followed by further proposal development framed as a negotiation between the applicant, TRP and Global Fund Secretariat. In parallel, key stakeholders will discuss implementation matters so that the proposal that is eventually recommended to the Board will be substantially pre-negotiated and ready for signing shortly after approval. It is thought that this new approach will lead to higher proposal quality; less lost effort; improved risk management through earlier risk identification and management; and more informed decision-making on proposals.

How this new process can be applied to multi-country proposals is not yet clear, nor addressed in the Transformation Plan. The two-step process includes ongoing negotiation with the CCM prior to approval. Whether and how multiple CCMs will be able and willing to participate in such negotiations requires further discussion.

Issues, Concerns and Recommendations about Proposal Development

- Does the TRP have adequate expertise to review community-based proposals and programme designs? The kind of expertise required to understand and evaluate multi-country proposals developed and led by organizations representing most at-risk populations is not well-defined by the Global Fund.

  Recommendation: The Secretariat needs to develop criteria for improved community-level expertise on the TRP.

- The Global Fund Secretariat needs to explain how the revised application and approval process will be applied to multi-country proposals. Multi-country approaches, especially those that seek to serve key affected populations, bring added value to the HIV response.

  Recommendation: The Global Fund should recognize the added value of community-driven multi-country proposals, and in doing so, should consider development separate application procedures and review processes tailored to meet the needs of such proposals.

- While the two-step process may be helpful in reducing the time from proposal submission to grant implementation, it should not become a 'linear experience' involving only the applicant, CCMs and the GF Secretariat. The GF Secretariat should clarify the roles of CCMs, PRs and SRs in the new application process.

  Recommendation: To inform programme development and facilitate implementation, PRs and SRs should be identified early in the process in order to participate in programme development.

- The iterative process will increase the need for ongoing CCM involvement. However, most at-risk populations are still inadequately represented on CCMs and often are not provided with opportunities for meaningful involvement.

  Recommendation: The Global Fund should be more proactive to ensure adequate representation of MARPs on CCMs and provide support through its partners to ensure that such representation is meaningful and well informed.

- The Global Fund Human Rights Strategy must be implemented through the Fund's grant making procedures.

  Recommendation: The Global Fund Board and Secretariat need to define rights-based services and how to reflect that definition in RFPs and proposal guidance, staff training, TRP member selection and proposal review criteria and other Global Fund policies.

- Although the Global Fund Secretariat has said that the Targeted Pool for MARPs support will continue under the revised grant making process, it is not clear how it will be incorporated into the new application process. Nor is it clear whether targeted funding for MARPs will be considered an essential service for Transitional Funding in lieu of new Round 11 grants. Multi-country proposals can be an important pathway to reaching and serving most-at-risk populations and countries should consider supporting and partnering on such proposals.

  Recommendation: The Global Fund should continue to support targeted funding for MARPs, encourage country governments to take advantage of the Targeted Pool, and support the development of community-driven multi-country proposals to reach most-at-risk populations.

- Costs for regional proposals development are higher than for country proposals and it is left up to community-based organizations and NGOs to find funding to support

proposal development. The development of a community-based regional proposal is also time consuming, placing significant burdens on CBOs with limited staff. [6]

Recommendation: Adequate financial support should be provided to community-based organizations for their work on these proposals.

- Multi-country grants developed and led by organizations representing key affected populations are a key component in strengthening community systems, as described in the CSS Framework. Proposals should include a commitment to fund dedicated budget lines for advocacy, coordination and communications.

  Recommendation: In developing multi-country grants to support MARPs, ensure that proposals maximise:
  - Sharing of information;
  - Building capacity of local organizations;
  - Address cross-border issues and other issues that are gaps in national responses; and
  - Alignment with national responses.

6 Many participants noted their frustration with the cancellation of Round 11 mid-way through the proposal development process. Not only had they spent a great deal of time working with partners and drafting proposals, but funding received for proposal development could have been used for other purposes. Significant amounts of funding have gone toward proposals that will not be considered for at least two years.

Grant Negotiation

After TRP approval, a Global Fund proposal moves into the grant negotiation phase. As most proposals are written within a short time frame, the negotiation phase is where the real details of programme activities, budgets and monitoring processes are settled. This phase can take an inordinately long time; delaying grant implementation and requiring significant changes in proposed programmes, partners and budgets. However, the negotiation process can also provide good opportunities to better define programme goals, objectives, activities and partnerships. The negotiation process will change dramatically under the new application procedures, with negotiation taking place as a component of proposal approval. It is not yet clear how this will be managed with multi-country proposals.

Participants discussed their experiences – good and bad – with grant negotiation. Inclusion of PRs and SRs early in the process was considered essential. Transparency throughout the process was of prime importance for successful negotiation with achievable outcomes. Many participants were frustrated by the amount of time the process takes, the failure to recoup costs incurred during the negotiation phase, and a lack of experience by LFAs and FPMs in community-based programme and organizational needs.

Case Study: Grant Negotiation - Civil Society Experiences from the Caribbean

Presented by: John Waters, Centro de Orientación e Investigación Integral (COIN)

The presentation covered the grant negotiation for civil society involved in implementing programmes supported by GFATM Round 2 in the Dominican Republic through the Rolling Continuation Channel (RCC) and a regional grant from Round 9.

The Caribbean Vulnerable Communities Coalition (CVC) and El Centro de Orientación e Investigación Integral are the sub-recipients of the Vulnerable Groups Component of the PANCAP Round 9 Regional Global Fund Project, a five-year project which in Phase One will develop a strategy and model programming for preventing HIV among vulnerable groups in Trinidad, Jamaica and the Dominican Republic, and in Phase Two will expand programming to incorporate the Eastern Caribbean.

The project has two key approaches: the first emphasizes mobilization and community development to foster collective commitment in prevention, secured through partnering with CVC member organizations (lead in-country, non-governmental and community-based organizations) throughout the Caribbean. The second approach stresses the added value of combining the forces of civil society with those of government. The CVC/COIN Vulnerable Group Project seeks to achieve two lasting impacts:

- Increased access to services among vulnerable groups.
- Lower sero-prevalence among vulnerable groups.

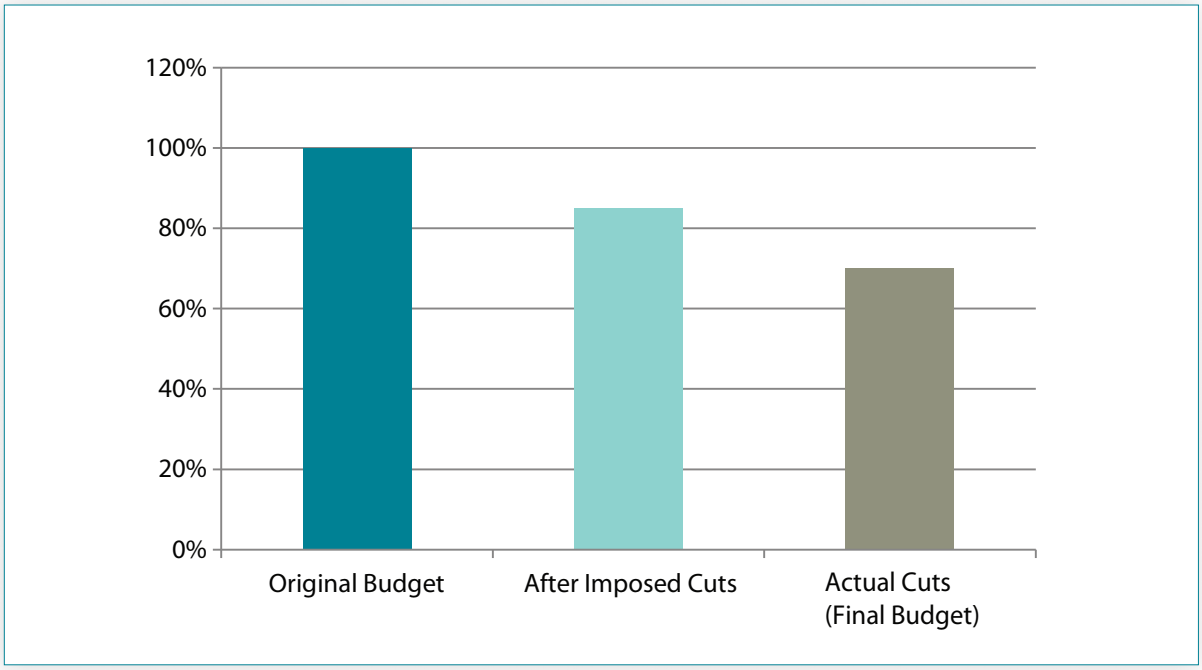
The strategy for achieving these impacts rests on four critical approaches:

- Creation of an enabling environment;
- Providing empowerment opportunities and options for vulnerable groups;
- Addressing sexual and reproductive health needs of vulnerable groups; and
- Scaling-up the scope of interventions.

In the Caribbean, there is a strong involvement of MARPs communities in proposal development and grant negotiations. In the Dominican Republic, five seats on the CCM are reserved for MARPs as follows: AIDS service organizations, networks of MSM, sex workers, youth and PLHIV. At a regional level, the membership of PANCAP - a multi-sectorial organization established to coordinate regional efforts on HIV – includes two community-based networks - the Coalition of Vulnerable Communities and COIN. The strength of civil society in the region and its meaningful engagement in Global Fund processes has resulted in solid proposals to support MSM, IDUs, prisoners, marginalized youth and sex workers. For the country proposal (in this case, Dominican Republic), civil society organized in working groups to develop content of RCC, based on three major axis: health system strengthening; care and treatment; and prevention. The implementation for the latter axis was to be spearheaded by civil society.

The result of the collaboration through PANCAP on the multi-country proposal resulted in the strong involvement of civil society in the architecture of the proposal and a civil society-led programme focused on vulnerable groups as a core component of the overall project, which was vital to securing the grant. During the grant negotiation, there were successive rounds of budget cuts and changes to the work plan to arrive at GF approval of PANCAP R9 grant. The budget cuts and work plan revisions were done in full consultation with civil society through a transparent process. At the end, one-third of the final approved budget was assigned to the vulnerable groups' project with CVC and COIN named as the SRs.

However, after the negotiation was supposedly complete, the Global Fund required a mandatory 15 percent efficiency cut on the full amount awarded. No directives given to the PR about how to make these cuts, or what procedures to follow to achieve them. The budget cuts were done through a closed-door negotiation between PR and GF Secretariat with no consultation with the SRs. The SRs were informed to expect a 15 percent across the board cut in their respective overall budgets.



- Amount of mini-grants for pilot programmes reduced to under US$2,000, an amount not feasible to meet programme needs.
- Funding to support implementation costs to NGOs/ CBOs were cut completely.
- Funds to carry out project interventions in three countries in the first phase were cut to cover only two countries.
- Funding for some key project components (e.g. support groups) were completely eliminated.
- Changes were made to the budget, but not reflected in the work plan, performance framework or M&E plan. There were major disparities among these documents. For example, the budget for the peer education programme was postponed until Year Two, but performance framework still contained a target number of people to be reached through the programme in Year One.

The budget cuts and delayed implementation resulted in extensive re-programming and consolidation including inadequate staff for the important set-up and procurement phase. The lack of clarity and uncertainty has had an impact on the engagement and trust of NGOs/CBOs at country levels. The programmatic distortion compromises a well thought-out and carefully crafted proposal. A third party who did not understand the original methodology and purpose of the complex project made the budget cuts. In case of the Dominican Republic, the distortion caused disproportionate allocation between prevention and health system strengthening.

The presentation ended with a strong message to the Secretariat regarding issues of ownership and liability. The Global Fund negotiates with PR who is liable for the grants, while the primary beneficiaries of the Fund are the SRs and SSRs as implementers. PR has administrative capacity to manage the project but ultimately it is communities who implement the project and have legitimacy to 'own' the Fund.

Issues, Concerns and Recommendations about Grant Negotiation

- The specified role and competency of Fund Portfolio Managers and Local Fund Agents to understand and oversee programmes developed and led by organizations serving key affected communities is lacking. This leads to decisions that impede the ability of these organizations to achieve their goals and provide high-quality services to their clients. LFAs often do not possess even a basic knowledge of HIV and are not familiar with on-the-ground realities, including political and social contexts as well as the needs of most-at-risk populations.

  Recommendation: In selection and training of LFAs and FPMs, they must have the capacity to understand how community-based programmes function, how community-based organizations are structured and how the needs of the populations they serve require flexibility in programme implementation. Increasing LFA and FPM capacity to work with and for key affected populations should be seen as a component of implementing the Human Rights Strategy.

- The meeting participants provided multiple examples of inflexibility in reviewing and approving budgets. These included:
  - Refusal to cover the cost of tea for workshop participants because multiple bids were not submitted.
  - Refusal to permit changes in proposed budgets developed three years prior, despite rising inflation and currency fluctuations.

- Approvals required for any change in unit costs or details in a budget line even if the overall total costs remains the same – stifling progress and project implementation.

Recommendation: Greater flexibility in budget negotiation is required with a greater emphasis on ensuring programmatic goals.

- Changes in the content of proposals during the negotiation process can undermine both the needs of key affected populations and the organizations that serve them. One example from Thailand described a programme originally created to support sex workers for increased uptake of HIV and sexually transmitted infections (STI) testing. During the grant negotiation, this programme was turned into a compulsory HIV testing programme for sex workers for monitoring purposes.

  Recommendation: Grant negotiations, especially for those programmes focused on key affected populations, must involve both PRs and SRs throughout the entire process, who can ensure that any changes to activities and budgets do not compromise the goals, objectives and value of the initially proposed programmes.

- Currently, FPMs handle too many grants causing them to be overly reliant on the LFA in both grant negotiation and implementation. Meeting participants described management letters that are clearly copied from LFA letters to the FPM. It can feel as if LFA is designing the programme. However, the primary function of the LFA is and should continue to be financial oversight. The role of the FPM should be to ensure that programmatic and policy goals are the priority in the grant negotiation process and that financial oversight is performed in such a way as to promote and enhance the programmatic vision.

  Recommendation: The Global Fund should clarify the roles of FPMs and LFAs and provide FPMs with the capacity and authority to ensure that grant negotiations are transparent, focused on fulfilling programme goals, and conducted in the best interests of key affected populations.

Grant Implementation

No one has a greater stake in good fiscal management and oversight at the Global Fund than communities affected by HIV. Development and implementation of accountable and transparent risk management approaches is essential. The primary outcome of risk management should be to ensure that programmes are improving the lives of people living with and at-risk for HIV, TB and malaria. However, the current approach to risk management is not always informed by programmatic needs.

The Case Study presentation and subsequent discussion raised many concerns about how Global Fund risk management approaches, administrative burden, a lack of LFA and FPM expertise, poor communications and hierarchical approaches interfere with the implementation multi-country programmes and indicate a need for the Global Fund to examine whether alternative approaches should be developed to better serve the goals of these programmes.

Case Study: Grant Implementation - Project DIVA – Diversity in Action

Shivananda Khan, NAZ Foundation International (NFI) and national partners

Project Diva is now in Phase One (2011–2012) and operating in seven countries[7] with a self-selected group of CBO regional SRs and country SSRs. These CBOs invited PSI Nepal as the PR and UNDP Asia-Pacific Regional Centre as the Technical Assistance Provider. The estimated cost of the proposal development was US$250,000 and the overall grant size is US$44 million. The grant negotiation process took 14 months. The service delivery areas are:

1. To increase capacity and improve the delivery of HIV related services for MSM and TG in South Asian countries.
2. To improve the policy environment with regard to MSM, TG and HIV related issues in South Asian countries.
3. To improve strategic knowledge on MSM, TG and HIV related issues in South Asian countries.

The primary focus of the grant is community systems strengthening in all seven countries. In addition, direct service delivery is provided in Afghanistan and Pakistan. During the grant negotiation, the budget was cut by approximately 12 percent. The budgets were prepared in 2008 but the grant was not approved until 2010. The Global Fund continued to rely on the old budgets, despite changes in costs over time. There were other long delays in programme approval. For example, eight months after the start of the programme, the training plan was not approved. Despite this, Project Diva was still expected to meet all original targets.

This presentation set the stage for key discussions about how the Global Fund defines and manages risk, how Global Fund accountability structures can actually impede the goals of funded programs, and how implementation of the CSS Framework will require development of new and innovative approaches for programme support and monitoring in order to be effective.

7 Participating countries include Afghanistan, Bangladesh, Bhutan, India, Nepal, Pakistan and Sri Lanka

Issues, Concerns and Recommendations about Programme Implementation

- In an effort to reduce financial risk and better monitor programme performance, the Global Fund has initiated risk management processes that actually threaten the ability of community-based organizations to implement programmes successfully. There is an emphasis on quantity, not quality. The content or outcomes from workshops and trainings are barely considered; instead there is an over-emphasis on quantifying the numbers of people attending events. Many examples were provided at the meeting, including:
  - Requiring workshop participants to provide copies of ID cards to prove their attendance. This jeopardized participant confidentiality, a priority for the target audiences of these workshops - MSM, sex workers and drug users.
  - Refusing to allow for budget changes to cover emergencies, including one instance in which people attending a workshop were injured in an auto accident on their way to the event and required medical care.
  - After workshop participants were required to sign two separate forms - one stating they were transported to a workshop and another to state they actually attended the workshop, outreach workers were forced to re-visit each of the attendees for a third signature because the languages of the first two documents were not the same.

  Recommendation: As the Global Fund Secretariat and Board revise risk management policies and procedures, approaches that best meet the needs of community-driven multi-country grants need to be considered. Fiscal accountability should not be the only consideration. The ways in which fiscal accountability is monitored must be re-examined to look at its effect on programme implementation. Flexibility in working with civil society SRs and SSRs, particularly those working with MARPs, is essential for effective programme implementation. Improved training about HIV and HIV service delivery for FPMs and LFAs would also lead to more rational implementation of risk management approaches.

- The administrative burden placed on PRs and SRs is high. For SRs involved in community-led multi-country grants, there is a significant danger of overwhelming the organization with administrative responsibilities that undermine their ability to serve its community. While there will always be a significant amount of administrative work involved in implementation of a Global Fund grant, ways should be found to streamline administration and to ensure that community-based SRs can obtain necessary technical support. Presenters reported that rather than easing the administrative burden, the Global Fund Secretariat has demanded increased levels of documentation. For example, an LFA/PR mandated 200-page fiscal management booklet does not work for CBOs, especially those that do not speak English. If the goal of a CSS project is to increase the capacity of community-based organizations, the reporting requirements placed on those organizations must not expect the capacity to exist prior to engagement in the project.

  Recommendations:
  - The Global Fund should develop simpler, less burdensome administration requirements for community-led, SR/SSR multi-country grants.
  - The goals and objectives of the CSS Framework should be better reflected in the administrative processes developed by the Secretariat and by LFAs.

- Provide bridge or start-up funding to community based SRs/SSRs so they can build capacity of their management and reporting.
- Allow civil society PRs and SRs to have a three-year Phase One and two-year Phase Two schedule.

• Many participants raised concerns about communications and hierarchical structures. These included:
  - SRs and SSRs being unaware of and not included in communication between the Global Fund Secretariat, LFAs and the PRs. Decisions about funding, budgeting, programme implementation and reporting are made without consulting with the organizations that implement these policies.
  - Requests from FPMs and LFAs to PRs and SRs for information and documents are made haphazardly. There were several examples of multiple requests for the same set of documents and for requests to be made piecemeal.
  - Decision-making is very hierarchical. As one participant noted, "community systems strengthening is collaborative, not hierarchical".
  - Communication with LFAs often reveal that they are not in possession of a basic knowledge on HIV and are not familiar with on-the-ground realities, including political and social contexts that affect most-at-risk populations.
  - There are no management criteria by which to measure the performance of FPMs and hold them accountable.

Recommendations:
- Include SRs and SSRs in the discussions between PRs and the Secretariat.
- Increase budget lines for communications and coordination to support programme implementation.
- Replace the current hierarchical structure with a more horizontal partnership structure.
- Performance criteria for FPMs and LFAs should be established and SRs and SSRs should be involved in the evaluation of their performance.
- Requests for documentation and information should be well coordinated and efficient so as not to waste staff time and reduce administrative burdens.

Renewals and Re-programming

The Global Fund Strategy calls for an evolving funding model that supports strategic refocusing of existing investments. The Strategy also emphasizes the need for the Global Fund to support rights-based approaches to service delivery and policy. Phase Two renewals and re-programming of existing grants offer key opportunities to redirect funding toward those interventions with proven impact and which support human rights programming and the engagement of vulnerable populations.

The Community Systems Strengthening framework and MARPs Targeted Pool both provide important mechanisms for funding proven efforts to reach most-at-risk populations through rights-based services that decrease HIV transmission rates and produce better health outcomes. The recent cancellation of Round 11 increases the importance of re-programming to ensure that scale up of rights-based programming focused on those most in need is continued.

One example showing the added value is the EPOS evaluation, a study conducted by the Global Fund Commissioners to look at effectiveness of the models including the current support provided through multi-country grants. The results of this study have not yet been published but the study was discussed at the consultation.

According to the EPOS, multi-country grants:

- Fill in the gaps and needs that may not have been met by national HIV programmes, such as those of key affected populations.
- Positively influence national programmes creating spin-off effects, such as alignment of treatment protocols throughout regions.
- Address legal and policy barriers that undermine the effectiveness of HIV programme interventions and access of MARPs in accessing prevention, treatment and care services.
- Strengthen national level networks for improved response. Communities use regional processes to address areas that are not met.

Recommendations on Re-programming and Renewals:

- Collect additional evidence on the outcomes and impact of multi-country grants.
- Develop a better guidance on good programming for MARPs to ensure quality. The guidance would include human rights standards for implementers and the Global Fund. Communities must be involved in the development of this HR guideline. Develop specific proposal forms for Phase Two renewal processes for multi-country implementers that respond to specific multi-country proposal issues. Non-CCM options need to be validated, given the current multi-country proposal procedure that requires CCM endorsement, especially in countries where CCM oppose funding for MARPs.
- Prioritise programmes that protect and promote human rights, using Phase Two as opportunities to *stop funding* for programmes that violate human rights (such as forced provider-initiated testing for sex workers and programmes that are supportive of criminalization of HIV transmission, sexual behaviours and drug use).
- Develop a mechanism to directly fund communities. Civil society needs to ensure this recommendation does not fall off the agenda. Look into the possibility of establishing a Regional Coordinating Mechanism (RCM) that includes participation

of communities, including MARPs. Regional networks that meet the requirements in terms of good governance, to ensure accountability and transparency, could play the role of RCM. The RCM role is also to provide oversight to the programme, thus conflict of interest mitigation plans are critical.

- Hold regular Joint Programme Reviews (JPRs) at Phase Two that bring together all implementers and relevant technical partners as well as regional partners to: a) review progress and challenges faced during Phase One; b) define or re-define priorities; and c) re-programme to meet the needs more effectively. If the JPRs are convened at a national level, regional organizations in the multi-country proposal can be involved in the discussions.
- Have a South-South evaluation (peer-based evaluation). Building qualitative evaluation of programmes (quality assessment tools looking at indication of quality and best practices through focused group discussions). TSFs could potentially support community-based assessment of the quality.
- The Secretariat should publish renewal schedules on its website so that communities can prepare for these events.
- If there is 'NO GO' for the renewal, a transition plan needs to be in place. GFATM must be responsible to close act of grants that minimize impacts on process.
- Allow PRs and SRs greater flexibilities for re-programming on an ongoing basis (budget thresholds and clarity on decision-making authority, for example - LFAs should not be making programmatic decisions or having veto authority).

Conclusion

Multi-country Global Fund grants led by and serving key affected populations strengthen community systems, improve access to health and prevention services for vulnerable groups, and successfully advocate for human rights protections for their communities. As a result of their unique ability to access hard-to-reach population, multi-country grants provide significant additionality to country-level grants. To be successful, the Global Fund should increase the expertise of its staff, the TRP and LFAs to better meet the needs of multi-country grantees. The Global Fund should develop application mechanisms, communications systems and risk management approaches that are specifically designed to encourage and support multi-county proposal development and implementation with a focus on key affected populations. Support for these proposals is an essential component for implementation of the Global Fund's human rights strategy.

Appendix

Agenda - Day One

Time	Topic	Speaker	Notes
9:00 – 9:15	Introduction by the Organizers and of participants	Edmund Settle HIV Policy Specialist, UNDP	UNDP Asia-Pacific Regional Centre Welcome
9:15 – 9:30	Introduction to the meeting	Facilitator/ Participants	Agenda review, goals and objectives, ground rules, logistics, etc.
9:30 – 10:45	Impact of the Global Fund Board meeting and the Global Fund's transformation plan: how they might affect our approach to communities (challenges and opportunities). Current GF Secretariat response to Board meeting decisions	Shannon Kowalski Senior Program Officer, OSF Mauro Guarinieri Senior Civil Society Officer, Global Fund	This presentation will provide a summary of the Board meeting decisions and the transformation plan and how it may impact multi-country proposals, funding for community support, and the engagement of affected communities. Group discussion will follow
10:45 – 11:00	BREAK		
11:00 – 11:30	Global Fund Support for Communities and Most At-Risk Populations: Strengths and Weaknesses of the Current Business Model	David Barr	Presentation from August meeting on GF support for key affected populations and human rights
11:30 – 12:30	Multi-country proposals: What's working? What isn't?	Group Discussion	
12.30 – 13:30	LUNCH		
13:30 – 14:00	Case study: Regional proposal development	Rico Gustav Q & A	Asia Pacific Network of People Living with HIV (APN+)
14:00 – 14:30	Case study: Grant negotiation	John Waters Q & A	Caribbean Vulnerable Communities Coalition (CVC)
14:30 – 15:00	Case study: Grant Implementation	Shivananda Khan Q & A	Project DIVA: South Asia Multi Country Global Fund Programme
15:00 – 15:15	BREAK		
15:15 – 15:30	Goals and Instructions for Break-out groups		How can Global Fund processes be revised to better serve multi-country proposal development and implementation?

15:30 – 18:00	• Break out Groups
	  • Proposal development and grant negotiation
	  • Programme Implementation
	  • Renewals
			• Proposal format
			• CCM sign off
			• TRP review process
			• Currency fluctuations
			• Reporting requirements
			• Relationships with PRs LFAs and Portfolio Managers
			• Impact of administrative burden on community-based PRs
			• Alignment with country proposals/ projects.
			• implementing programmes in hostile environments with limited political cover
			• Technical support needs

Day Two

Time	Topic	Speaker	Notes
9:00 – 9:15	Day 1 review and objectives for day 2	Facilitator	
9:15 – 9:45	Report back: Proposal Development/Grant negotiation group		
9:45 – 10:15	Report back: Renewal group		
10:15 – 10:45	Report back: Programme Implementation group		
10:45 – 11:00	Coffee break		
11:00 – 12:30	Developing Recommendations for improving multi-country grants	Facilitator	
12:30 – 13:30	LUNCH		

13.30 – 16.30
 	
(break mid-way thru discussion)
	Advocacy to ensure continued and expanding Global Fund resources for affected communities	Group discussion	• How can community advocates work to ensure continued Global Fund support?
			  • What does improving "value for money" mean in the context of CSS?
			  • Advocacy for resource mobilizaitons
			  • Meeting the needs of key affected populations in low middle and middle income countries
			  • Risks and benefit of the targeted pool

16:30 – 17:45	Group Discussion: The meeting is not long enough – how do we continue this discussion?	Facilitator	• How to bring the concerns and recommendation developed at this meeting to the GF Secretariat and discuss implementation? • How can technical support be improved and funded? • How can we work together as advocates to ensure continued GF support for affected communities?
17:45 – 18:00	Closing remarks		

Participants List

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