

THE GLOBAL FUND'S POST 2022 STRATEGY

INPUT FROM THE FRONTLINE AIDS PARTNERSHIP IN ASIA



KEY MESSAGES

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The Global Fund's new strategy must remain committed to funding innovative and high impact programming to address the structural drivers of HIV infections and accelerate momentum towards achieving the end of AIDS by 2030.
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Alternative channels of funding are needed for civil society and communities to access, which are not managed or controlled by government actors.
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Provide direct investment for national and regional networks of people who use drugs and harm reduction programming, sex workers, gay men and other men who have sex with men (MSM), and transgender people.
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Ensure strong community leadership and engagement in the design, implementation and evaluation of Global Fund programmes.
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Global Fund grants must incorporate equity, human rights and access considerations, while also ensuring proper oversight and accountability.
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The Global Fund must commit to a more nuanced understanding of the political context in countries where it disburses funding and use its political capital to challenge access barriers or human rights violations affecting marginalised populations.

Frontline AIDS' partners in Asia want to see the next Global Fund strategy:

DELIVERING AGAINST HIV, TB AND MALARIA

- Prioritise investment in HIV prevention for key and vulnerable populations in the region.
- Adopt a holistic approach to investment along the continuum of care, from outreach and prevention to support for treatment and care that includes legal and socio-economic support.
- Place communities and community-led interventions at the core of its investment priorities.
- Increase investment in Asia to support networks of people who use drugs and innovative community-led programmes to scale up access to innovative harm reduction services that respond to changing patterns in drug use.
- Capitalise on advances in technology and invest in research to expand programme reach, support real-time monitoring and scale innovations in treatment.
- Provide alternative channels of financial support to fund civil society and community-led harm reduction and other programmes and networks for people who use drugs, sex workers, gay men and other MSM, and trans people. This should include core funding and not just for service delivery.
- Prioritise evidence-based interventions that are innovative, flexible, and responsive.

INTEGRATION AND SYSTEMS FOR HEALTH

Health outcomes are determined by more than systems for health. Community action is critical for accountability and for improving quality and access to clinical or facility-based health services. Global Fund programming must be led by the guiding principle that civil society is a valued equal partner to government.

To demonstrate its commitment to civil society as a driver of sustainable programming, in the next strategy the Global Fund should:

- Prioritise community leadership and stronger community systems.
- Maintain and expand investments in advocacy, community-led monitoring and interventions to strengthen community systems. Maximise community-led efforts to reach key populations that are left behind, and work to dismantle legal and policy barriers that impede access to health services.
- Reinvigorate its commitment to dual-track financing and redirect funding from UN organisations, large NGOs and INGOs towards smaller indigenous organisations.
- Require Principal Recipients (PRs) to develop and implement capacity-building programmes to support the transfer of skills to community organisations in areas of governance, financial and programme management, and monitoring to enable them to become Sub-Recipients (SRs) and PRs in future allocations.
- Support communities to become critical voices in national strategies and processes and build systems for community-led groups to become registered and recognised entities working with key populations, particular on universal health coverage.
- Continue to support and increase investment in regional and multi-country programmes, grounded in peer learning, sharing, advocacy and capacity building.

EQUITY, HUMAN RIGHTS AND GENDER EQUALITY

The Global Fund's progress on equity, human rights and gender issues has been limited, according to the Strategic Review 2020, in the next strategy the Global Fund should:

- Ensure meaningful community engagement in the design, implementation, and evaluation of programmes for advocacy to address equity, human rights and access issues.¹
- Support the documentation and dissemination of best practices from national and community-level activities through horizontal learning and mentoring, to ensure that they are brought to scale.
- Apply a gender lens to programme design, implementation and monitoring and encourage greater commitment to disaggregating data by gender, while in parallel scaling capacity to address gender issues within the Global Fund.
- Invest in national level cross-sectoral technical working groups on gender equality to provide technical guidance for programming, implementation and monitoring on gender and gender-based violence.
- Demonstrate greater conscientiousness about the political and social conditions on the ground in countries where it disburses funding and work collaboratively with civil society to challenge access and legal barriers that criminalise people and behaviours.
- Set indicators/milestones for human rights and gender equality for every country and periodically assess whether the country is meeting those indicators over the course of the three-year cycle.
- Implement direct feedback mechanisms to engage directly and confidentially with civil society without government present, in order to encourage more honest and candid feedback.
- Support community-led advocacy against the criminalisation of people who use drugs and human rights violations against this population.

¹ All countries should have access to the 2020 guidance on 'Implementing and scaling up programmes to remove human rights-related barriers to HIV services'. This guide was funded by GIZ BACKUP Health, and developed by Frontline AIDS with the help of governments, donors and civil-society organisations, and in close collaboration with The Global Fund. <https://frontlineaids.org/resources/implementing-and-scaling-up-programmes-to-remove-human-rights-related-barriers-to-hiv-services/>

- Leverage its political and social capital in support of activists challenging the criminalisation of people and behaviours.
- Only transition key populations or human rights programmes when governments learn how to manage and fund these programs and integrate them into their public health response.

PARTNERSHIPS TO SUPPORT EFFECTIVE IMPLEMENTATION

There are considerable challenges that compromise the strength of the Global Fund's partnership model. Of greatest concern to our constituents are continued missed opportunities in stakeholder coordination, including with other funders. A lack of clarity around division of roles and responsibilities, and lack of accountability for how technical assistance is delivered, which impedes optimal implementation of programming and ultimately prevents civil society from playing as decisive a role as it could in the fight against the three diseases.

We recommend that the Global Fund's new strategy should prioritise commitments to:

- Improve collaboration and coordination through a better application of the partnership model.
- Recognise the inherent expertise of community actors living with and affected by HIV, TB and malaria, and that of community organisations working to combat the three diseases.
- Address the continued concerns about the failure to provide adequate space for civil society and communities on country coordinating mechanisms (CCMs) and other national decision-making bodies,

- Adopt a differentiated approach to meaningfully engaging with communities living with and affected by HIV, TB and malaria.
- Engage in joint and coordinated planning with donors, development partners, the private sector and government stakeholders to avoid duplication and gaps, so that countries can optimise their responses and leave no one behind.
- Promote a move away from disease-specific silos within CCMs and emphasise coordination and synergies across national grant portfolios.
- Stronger cooperation between donors and technical partners on delivery of technical assistance and engagement for more efficiency and to promote accountability.