



## CS4ME CCM Working group Meeting Réunion du groupe de travail CS4ME CCM

Representatives of malaria communities in CCM join forces for greater impact

Les représentants des communautés affectées par le paludisme au sein de l'ICN joignent leurs forces pour plus d'impact



Tuesday 12 July 2022 | 09:00-10:30 am GMT

Mardi 12 Juillet 2022 | 09h00-10h30 GMT

✉ Secretariat@cs4me.org 🌐 www.cs4me.org

 click here / cliquez ici



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CS4ME Secretariat, only for invited guests



# CS4ME Video



CS4ME video

<https://www.youtube.com/watch?v=24KDICfKAU0&t=1s>

[https://www.youtube.com/watch?v=K5pYbGsm\\_iQ&t=23s](https://www.youtube.com/watch?v=K5pYbGsm_iQ&t=23s)



# WELCOME INTRODUCTION

**Olivia Ngou**

**Global Coordinator CS4ME**

Executive Director

Impact Santé Afrique (ISA)



# AGENDA



HOURS (GMT)	ACTIVITY / ACTIVITE	INTERVENANTS
09:00 - 09:05	Welcome and Introduction	<b>Olivia Ngou</b> Global Coordinator CS4ME Executive Director Impact Santé Afrique (ISA)
09:05 - 09:10	<b>Opening remarks:</b> Importance of Malaria Advocacy in CCMs <i>Mot d'ouverture : Importance du plaidoyer pour la lutte contre le paludisme dans les CCM</i>	<b>Dr Corine Karema</b> Interim CEO RBM Partnership to End Malaria
09:10 - 09:20	<u>Presentation 1</u> : Introduction of CS4ME and its strategic plan 2021-2025 <i>Présentation 1 : Introduction de CS4ME et son plan stratégique 2021-2025</i>	<b>Olivia Ngou</b> Global Coordinator CS4ME Executive Director Impact Santé Afrique (ISA)
09:20 - 09:30	<u>Presentation 2</u> : CCM Evolution recommendations <i>Présentation 2 : CCM Evolution - recommandations</i>	<b>Henita Kuntawala</b> Project Manager, CCM Evolution Strategic Initiative   Grant Portfolio Solutions

# AGENDA



HOURS (GMT)	ACTIVITY / ACTIVITE	INTERVENANTS
09:30 - 09:40	<p><b><u>Presentation 3:</u></b> The new Global Fund Strategy 2023-2028, the Community right and gender priorities and the Key Role of CCM Members</p> <p><b><u>Présentation 3 :</u></b> <i>La nouvelle stratégie du Fonds mondial 2023-2028, les priorités en matière de droit communautaire et de genre et le rôle clé des membres du CCM</i></p>	<b>Alistair Shaw</b> Senior Program Officer, Human Rights, CRG Department The Global Fund
09:40 - 09:55	<p><b><u>Presentation 4:</u></b> The NFM4 Technical Assistance from CRG SI</p> <p><b><u>Présentation 4 :</u></b> L'Assistance Technique de la NFM4 du CRG SI</p>	<b>Maria Golovanevskaya</b> Senior Program Officer, Community Engagement   CRG SI The Global Fund
09:55 - 10:10	<b>Discussions</b>	All/Tous
10:10 – 10:15	<b>Break</b>	
10:15 - 10:25	<p><b><u>Presentation 5:</u></b> Results of the last Global Fund board meeting: May 10-12, 2022</p> <p><b><u>Présentation 5 :</u></b> Les résultats du dernier conseil d'administration du Fonds mondial : 10 au 12 Mai 2022</p>	<b>Joseph Wato</b> Executive Director APDSP

# AGENDA

HOURS (GMT)	ACTIVITY / ACTIVITE	INTERVENANTS
10:25 – 10:40	<p><b><u>CCM Members Panel</u></b> : Good Practices, How to address the Needs of Vulnerable Communities to CCM</p> <p><b><u>Panel des membres CCM</u></b> : Bonnes pratiques, Comment remonter les besoins des communautés vulnérables paludisme au CCM</p>	<p><b>Ayo Ipinmoye</b> National Coordinator, ACOMIN</p> <p><b>Boubacar Sylla</b> President, Club des amis du monde</p> <p><b>Cecilia Senoo</b>, Executive Director HFFG</p> <p><b>Moderator:</b> <b>Carine Diboue</b>, Program Officer Impact Santé Afrique</p>
10:40 - 10:55	<p><b><u>Presentation 6:</u></b> Terms of reference of CS4ME CCM working group and the workplan 2022 Selection of Chair, Co-chair and Rapporteur of the working group</p> <p><b><u>Présentation 6:</u></b> Termes de références du groupe de travail CS4ME CCM et le plan de travail 2022 Sélection du Chair, Co-chair et Rapporteur du groupe de travail</p>	<p><b>Olivia Ngou</b> Executive Director Impact Santé Afrique Global Coordinator CS4ME</p>
10:55 - 11:00	<p><b>Conclusion and Next steps</b> <b>Conclusion et Prochaines étapes</b></p>	<p><b>Olivia Ngou</b> Executive Director Impact Santé Afrique Global Coordinator CS4ME</p>

# Purpose of the meeting



- To give key information to CCM CS4ME working members in the goal of increasing voices of malaria communities and ensuring the most vulnerable groups' needs are taken into account, supporting their roles in CCMs.
- To share best practices, tools, and first-hand experiences on how to address the Needs of Vulnerable Communities to CCM
- To collect feedbacks from CS4ME members and partners on how to ensure that the needs of vulnerable populations are at the center of malaria control interventions and Civil society-led advocacy for the Global Fund's 7th Replenishment Conference.
- To share and explain the Terms of Experience and the workplan 2022 for the CCM CS4ME working group



☰

# Housekeeping rules for the webinar today



# Please note conditions to be participant / Conditions pour être participant :



It is important for each participant to be aware of the conditions of participation

*Il est important que chaque participant prenne connaissance des conditions de participation:*

- **Make sure you have a good internet connection.**

**Assurez-vous d'avoir une bonne connexion internet.**

- **Settle down in a quiet place during the webinar.**

**Installez-vous dans un endroit calme pendant le webinaire.**

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- **The webinar is recorded, by staying connected, you give us your consent to be recorded. /**

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# Please note conditions to be participant / Conditions pour être participant :



- Please respect the speakers and panelist time, by being attentive during the webinar.

Veuillez respecter le temps des intervenants et des panélistes, en étant attentif pendant le webinaire.

- Please be respectful of everyone opinion and differences.

Veuillez respecter les opinions et les différences de chacun.

- During the webinar, kindly write your questions at any point in the Q&A box and please specify to whom each question is addressed to.

Pendant le webinaire, écrivez vos questions à tout moment dans la boîte de questions-réponses et précisez à qui s'adresse chaque question.

- All questions will be answered by the speakers and panelists.

Toutes les questions seront répondues par les orateurs et les panélistes.

- Please, each speaker should speak slowly for the interpreters to translate.

S'il vous plaît, chaque orateur doit parler lentement pour que les interprètes puissent traduire.

We look forward to have a productive session!

Nous nous réjouissons d'avoir une session productive !





# Opening remarks: Importance of Malaria Advocacy in CCMs

**Dr Corine Karema**  
Interim CEO RBM Partnership  
to End Malaria



# Introduction of **CS4ME** and its strategic plan 2021- 2025

**Olivia Ngou**  
Global Coordinator **CS4ME**  
Executive Director  
**Impact Santé Afrique (ISA)**



# What is CS4ME?



- CS4ME is a movement of nearly **500 civil society organisations and networks from 48 countries**, all committed to eliminating malaria.
- We believe that it is not acceptable that hundreds of thousands of people continue to die every year from a preventable and treatable disease.
- We are committed to strengthening our capacity and elevating the voice of affected communities to support national and global efforts to eliminate this disease.



# Our vision and mission



## Guiding vision: A malaria-free world by 2030

### Five-year Vision

National civil society and communities are recognised as bold and creative catalysts of change, and are supported to drive people-centred national, regional and global malaria elimination efforts.

### Our mission

To harness the power of a global movement of civil society organisations and communities to achieve malaria elimination



# Our members



- CS4ME membership is open to any local civil society organisation (CSO) or network **based in a malaria endemic country** that represents malaria-affected communities.
- **Member CSOs vary** from emerging community-based organisations and religious groups, to Global Fund sub-recipients.
- Organisations can join **individually and/or as part of a network**. CS4ME complements, rather than competes with existing national networks.



# Our members



Our leaders and members also include members of:

- Communities Delegation to the Global Fund Board
- Developing NGO Delegation to the Global Fund Board
- Global Fund Youth Council
- Global Fund Youth Advisory Council
- Global Fund CRG Advisory Group
- ALMA Youth Advisory Council
- RBM Strategic Communications Partnership Committee.





# CS4ME Organigram

CIVIL SOCIETY FOR MALARIA ELIMINATION



## General Assembly

Each member of CS4ME – organisations and networks – inspires and guides the movement, are members of the general assembly to review and approve the annual report and plan. Members are also invited to participate in the Steering Committee and working groups, and engage with the Secretariat.

### Friends of CS4ME

External partners provide technical and advocacy support to the movement at any level

### Steering Committee

Eight CS4ME members volunteer to be selected as Steering Committee members for four years to guide strategy & decision-making

### Technical Advisors

CS4ME members provide technical advice to the movement at any level

### Capacity Building Working Group

### CCM Working Group

### Advocacy & Communications Working Group

### Thematic ad hoc Working Groups

**Working Groups** consist of voluntary CS4ME members, typically including a Steering Committee representative, to guide, monitor, and support aspects of CS4ME's operational plan relevant to each group's mandate. Ad hoc working groups are formed as needed in response to specific events or opportunities.

**CS4ME Secretariat (hosted by Impact Santé Afrique)**  
Implements Steering Committee guidance, and facilitates communication across the movement and externally

#### Global Coordinator

Leads Secretariat and is a member of the Steering Committee to support and represent CS4ME's activities.

CS4ME Program Officer  
*(Filled)*

CS4ME Sub-Grants Manager  
*(Unfunded)*

CS4ME M&E Officer  
*(Filled)*

CS4ME Civil Society Engagement Officer  
*(Unfunded)*

CS4ME Officer – Asia  
*(Unfunded)*

CS4ME Advocacy & Communication Officer  
*(Unfunded)*

Finance Officer  
*(Part-time - Unfunded)*

Resource Mobilisation & Development Specialist  
*(Part-time - Unfunded)*

# Key points CS4ME Strategic Plan 2021-2025



# Guiding Principles

**Community First**

**Impact-focused**

**Alignment**

**Complement &  
Coordinate**

**Decentralise &  
Strengthen**

**Flexibility**



# Key Messages

The community knows their context best and their engagement can determine the success or failure of interventions. CSOs are well placed to drive local accountability.

It is time to invest strategically in malaria to reach elimination and this includes increasing direct funding and support for civil society and community engagement.

Current elimination strategies will be more effective and sustainable by engaging communities in their design, implementation and monitoring. Particularly at a time when additional resources may not become available, we need to use existing ones more effectively.

Community contributions – such as community health workers – need to be appropriately supported and budgeted for in national strategies as part of a comprehensive malaria control & elimination strategy.

CS4ME can lead the development of a clear definition of and framework for community engagement, which must be extended to beyond being equated with SBCC and community health workers.

Local civil society is capable of doing more than it is currently tasked with, and with the right support, it can do it more effectively and efficiently than outsiders.

# Logical Framework

## Vision

National civil society and communities are recognised as bold and creative catalysts of change, and are supported to drive people-centred national, regional and global malaria elimination efforts

## Mission

To strengthen, organise and unite civil society, and engage and empower affected communities to be creative, bold, catalysts for change, to accelerate malaria elimination

### Objective 1

Strengthen CS4ME member capacity and commitment to achieving malaria elimination

### Objective 2

Build civil society influence with CCMs/NMCPs in at least 11 countries

### Objective 3

Demonstrate the impact of community & civil society engagement in at least 5 countries

### Objective 4

Deepen CS4ME's global advocacy presence and member capacity

### Objective 5

Advocate for investing in Civil Society for malaria elimination

### Objective 6

Strengthen the efficiency and effectiveness of CS4ME's governance



# How does CS4ME prioritise?



- CS4ME is aware of the limitations of working as a diverse, voluntary movement and has studied the challenges facing similar structures to learn from their experience.
- Following a large-scale member survey and participatory strategic planning and operational planning exercises, CS4ME is focusing its efforts on six key areas.



# What does CS4ME do?



1. Strengthen CS4ME member **capacity** and commitment to achieving malaria elimination
2. Build civil society **influence** with CCMs/NMCPs in at least 10+1 high-burden high impact countries
3. Demonstrate the capacity and **impact** of civil society in at least 5 countries through a sub-grant mechanism
4. Deepen CS4ME's **global advocacy** presence
5. Advocate for **investing** in civil society for malaria elimination
6. **Strengthen** the efficiency and effectiveness of CS4ME.



# What has CS4ME done?



1. **Capacity:** Hosted and co-hosted training webinars and develop tool kits designed by and for CSOs, and in collaboration with technical partners.
2. **National influence:** Supported members of CCMs to be more effective advocates, and/or to develop productive dialogues with NMCPs.
3. **Local impact:** Support, learn from, and share community-led initiatives to overcome grassroots barriers to malaria elimination, such as community-led monitoring, and local advocacy efforts.



# What has CS4ME done?



4. **Global advocacy:** Participated in global advocacy campaigns, bringing community voices to the global level, including in advocating for Global Fund replenishment.
5. **Advocate for investment:** Develop clear messages on the importance of investing in civil society and community engagement as a key to malaria elimination.
6. **Strengthening:** Continual investment in our ongoing learning, effectiveness and accountability.



# **CCM EVOLUTION**

## **recommendations**

### **Henita Kuntawala**

Project Manager, CCM Evolution  
Strategic Initiative | Grant Portfolio  
Solutions

**The Global Fund**



# **CS4ME CCM Working Group**

## **CCM Evolution**

CCM Hub

July 12, 2022

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# CCM Evolution

1. CCM Overview
2. CCM Evolution overview and timeline
3. Engagement
4. Resources on Evolution and GF Strategy

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# The Country Coordinating Mechanism (CCM): Overview

## The Country Coordinating Mechanism (CCM)



Country Coordinating Mechanisms are national committees that submit funding applications to the Global Fund and oversee grants on behalf of their countries. They are a key element of the Global Fund partnership.

A Country Coordinating Mechanism includes representatives of all sectors involved in the response to the diseases: academic institutions, civil society, faith-based organizations, government, multilateral and bilateral agencies, nongovernmental organizations, people living with the diseases, the private sector and technical agencies.

CCMs have executive committees as well as other permanent and temporary committees. The highest decision-making authority lies with the CCM General Assembly which includes all voting members. All CCM operations are supported by a CCM Secretariat.

**CCMs lie at the heart of the Global Fund partnership model by embodying national ownership and country-led implementation processes**

# CCMs should include representatives of all groups involved in the local response to the diseases

**Coordinates** the development of the national request for funding & **approves** reprogramming requests

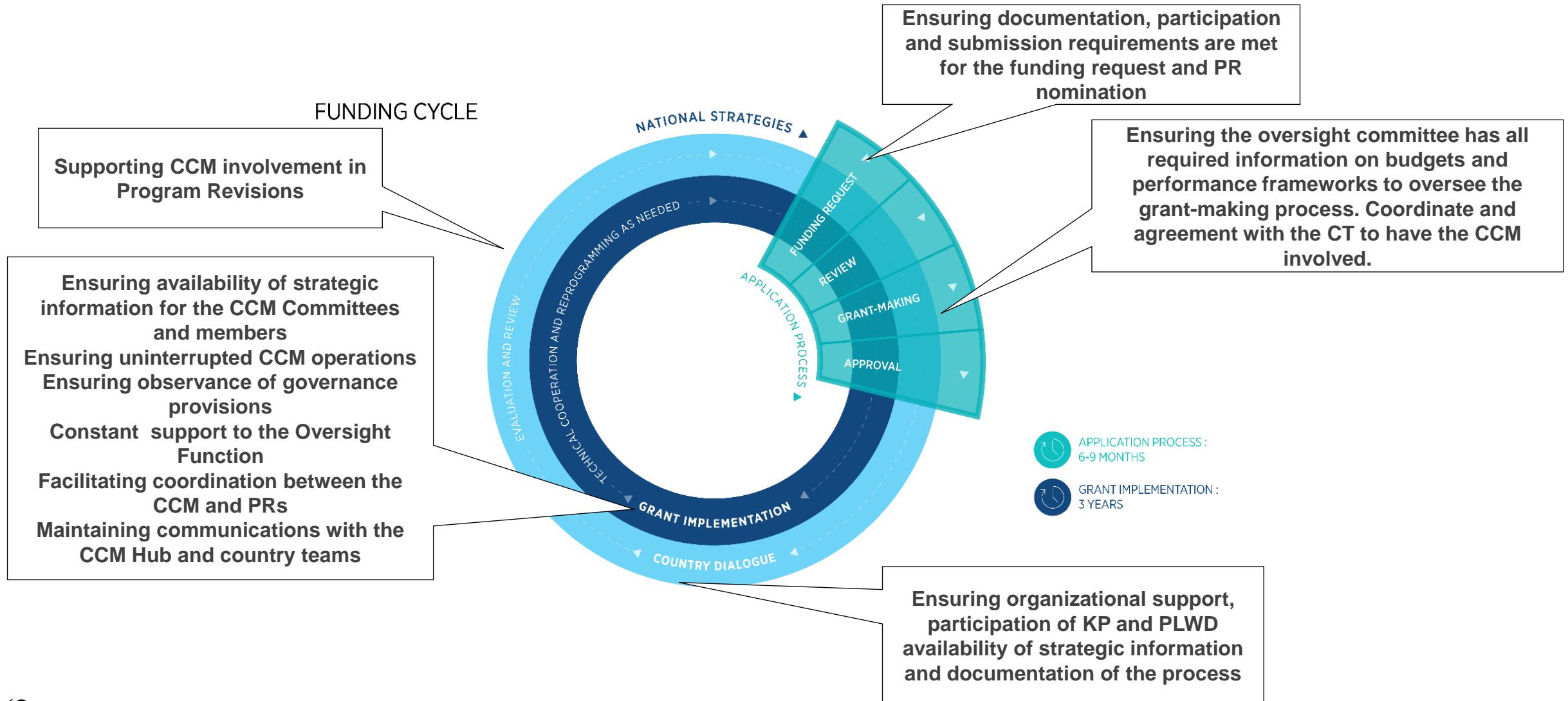


**Nominates** the Principal Recipient & **Oversees** implementation of approved grants

**Ensures** linkages and consistency between Global Fund grants and other national health and development programs

**Review** reports submitted by the PRs, **analyze** whether the grants are being implemented as planned & **takes actions** in case of problems

# CCM leadership needs to ensure the CCM has the required support at all stages of funding cycle.



# CCM Evolution

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# **Stronger CCMs**

## **What is CCM Evolution?**

### **Project**

- A Global Fund Strategic Initiative (\$15M, 2020-2023) working with 90 CCMs and RCMs, to assess, build and enhance core CCM capabilities

### **Objective**

- To equip CCMs to facilitate inclusive oversight and meaningful engagement in alignment with national structures for sustained health governance

### **Outcomes**

- Better equipped CCMs, aligned with national structures
- Streamlined CCM processes, focusing on results
- Strengthened CCM governance for existing and emerging health challenges

# Evolution interventions focus on 4 core responsibilities of CCMs



Active **oversight** of investments to ensure impact



Meaningful constituency **engagement** and information sharing, particularly with civil society and communities, to shape and oversee investments

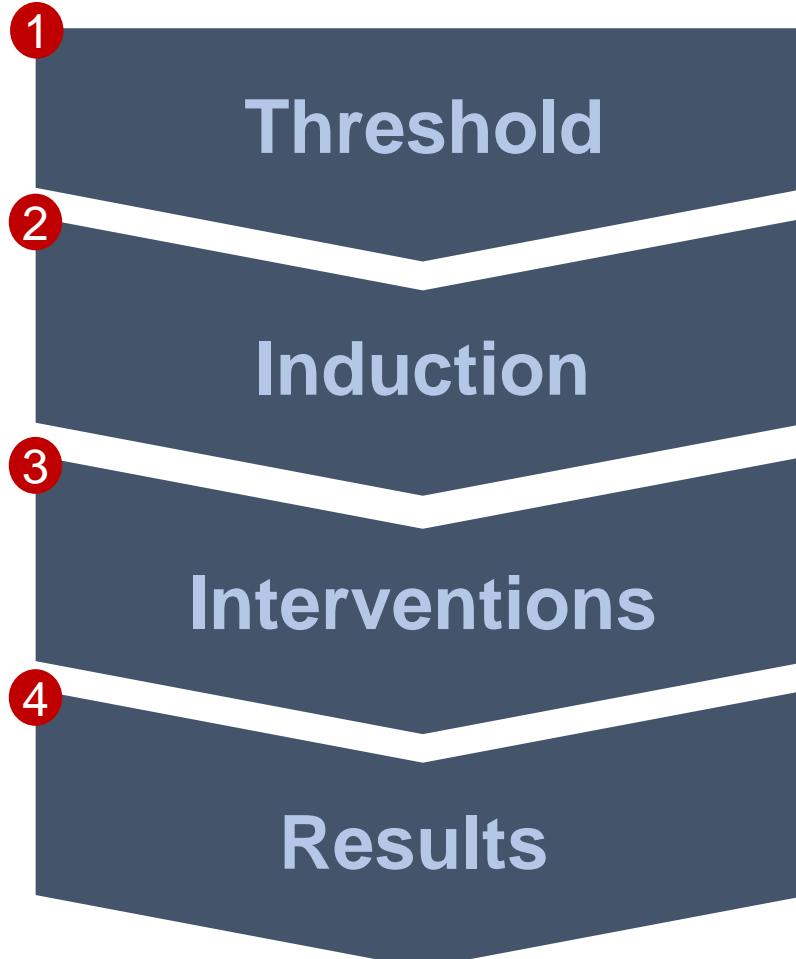


Effective **positioning** within national structures and existing/emerging platforms to increase efficiency of health investments



Efficient CCM Secretariat **operations** of core functions, enabling and sustaining health governance

# What does CCM Evolution entail?



Analyze what is working and **identify opportunities for enhancement**

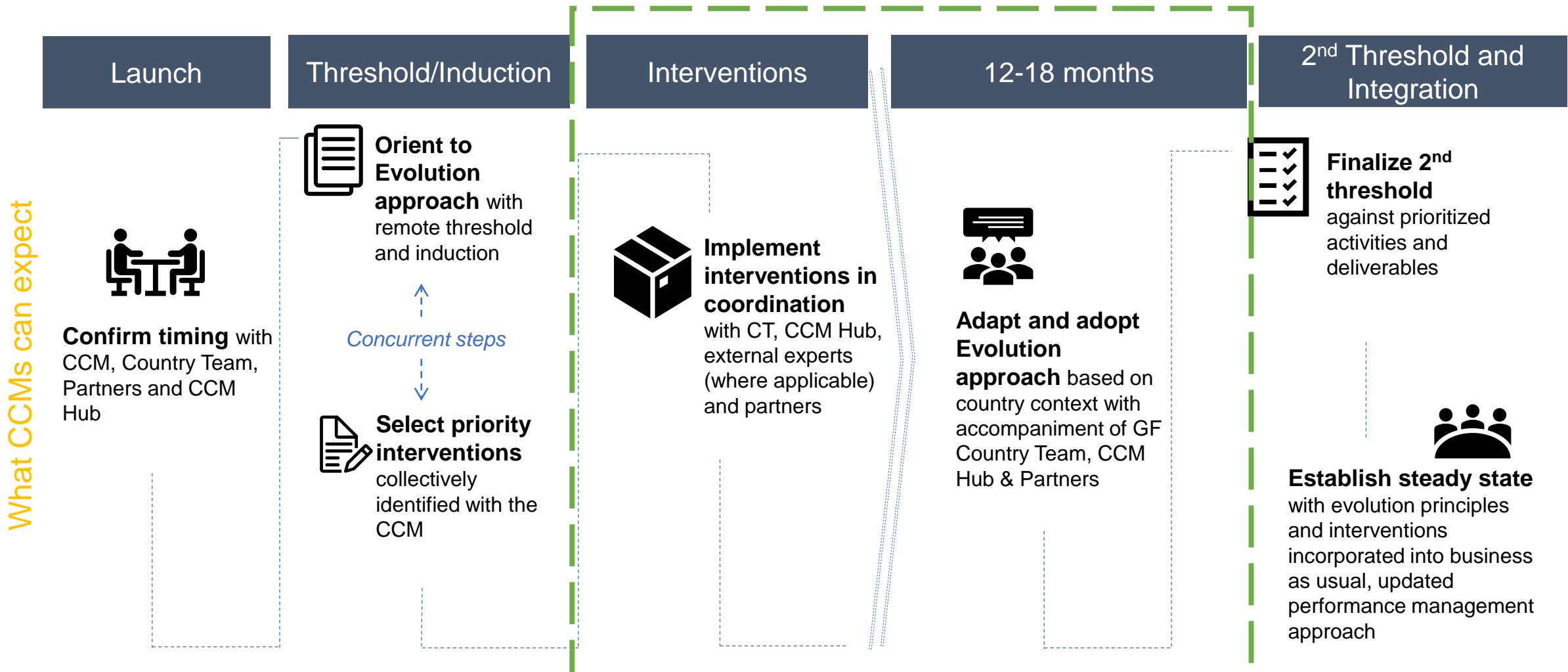
**Prioritize interventions** to enhance responsibilities

Tailor to the context and **maintain momentum**

*We are here*

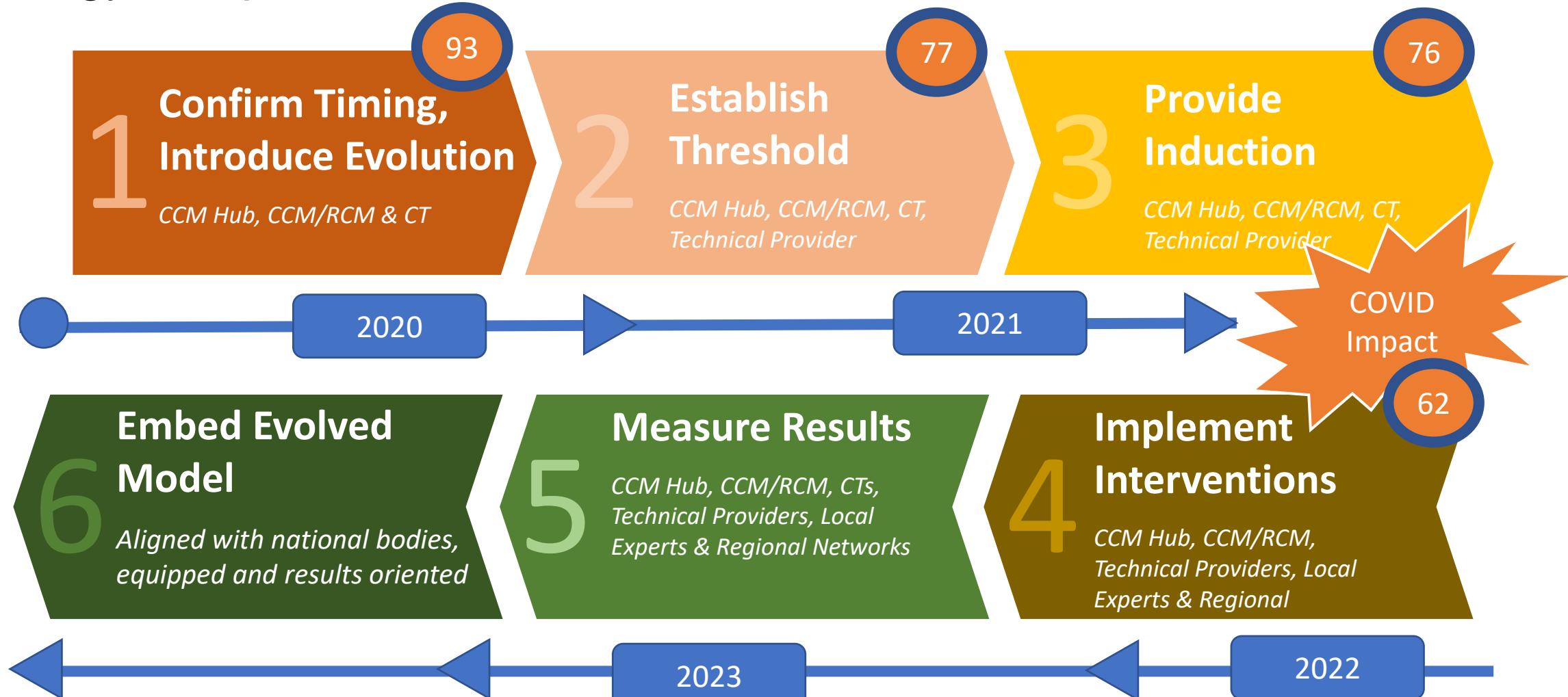
Learn and sustain systemic **enhancements to governance**

# Key Components of an Evolution Journey for CCMs



# CCM Evolution (93 CCMs in scope)

Covid delay created opportunity for **core** phase to support new GF Strategy components



# Threshold results provide an opportunity to prioritize areas for enhancing performance

## Leverage results to:

- Identify opportunities
- Prioritize key interventions
- Agree on implementation steps

## Process flow:



**Consultant & CCM**  
Propose prioritized areas  
and interventions

**Global Fund**  
Reviews and validates  
proposed areas and  
interventions

**CCM**  
Receives and implements  
validated interventions

# CCM Evolution

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# Interventions are adapted to ensure additional support for specific contexts

## Key Elements

**Oversight:** Recruiting oversight officers into all CCMs to strengthen data use in CCM operations, dialogue and oversight committee

**Engagement:** Enhancing meaningful participation from all constituencies

**Positioning:** Ensuring efficiencies with other platforms and national structures

**Operations:** Equipping CCMs for durable functionality through orientation and performance management

# Reinforcing engagement through targeted interventions

Intervention Type	Activities	Support Provision	What does success look like?
Essential All CCMs	Providing updated <b>guidance, e-learning modules &amp; tools</b>	CCM Hub E-learning Providers	Equipped CCMs to ensure effective engagement
Strategic High Impact and select CCMs	Supporting CCM <b>composition</b> review & updating processes	Technical Providers	Enhanced representation, meaningful participation, use of <b>strategic data</b> for informed decision-making
	Accompanying CS preparation & info sharing with <b>pre and post</b> CCM meetings	Lumpsum	
	Training CCM members on <b>CBM data analysis</b> and tools for decision-making	*Regional Platform/Networks	
	Supporting CS sectors in preparing and engaging in <b>election processes</b>	*Regional Platform/Networks	

# Reinforcing engagement through targeted interventions

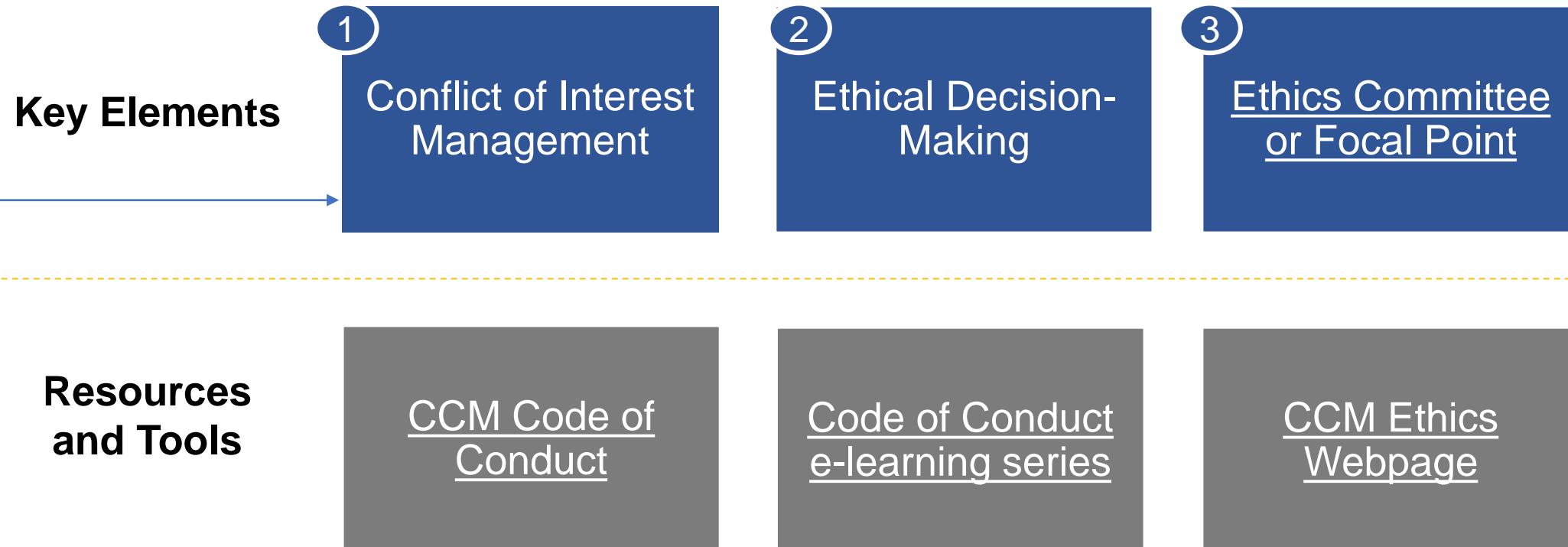
Engagement Activity	Activity Description	Essential/ Strategic	Modality
<b>Train Civil Society representatives pre- and post- CCM meetings</b>	amplify the participation and voice of a CCM's key populations, civil society and people living with and/or affected by the three diseases constituencies, this assignment will enhance their preparation and participation both prior to and following CCM (and relevant CCM Committee) meetings	Essential	CCM (disbursement) - national consultant
<b>Review CCM Composition</b>	review the current CCM composition and, where appropriate, support the realignment of representation on CCMs to align with country context, updated Global Fund strategic priorities (including support to pandemic preparedness and response) and Evolution principles	Strategic	TA Providers - international consultant
<b>Engage constituencies and coordinate CCM Election</b>	enhance KP, PLWD, CS, and/or community's CCM election/selection process(es) for meaningful representation and engagement	Strategic	Regional Platform KVP Networks
<b>Train on Community-led Monitoring (CLM) data tools and analysis</b>	build the capacity of KPs, PLWD, CS and community CCM members on the use of Community-led Monitoring (CLM) data and CLM data/feedback for programmatic and policy decision making.	Strategic	Regional Platform KVP Networks

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# Ethical decision-making by CCMs is key for advancing the fight against HIV, tuberculosis, malaria

CCMs Follow the Highest Standards of Ethics and Integrity



CCM members who are SRs or PRs should not take part in decisions where there is an obvious conflict of interest, including decisions related to oversight, and the selection or financing of PRs and SRs.” This means that at a minimum, CCM members representing PRs and SRs should leave the room when decisions are made such as (a) concerning grants for which their organizations are a PR or SR (or other implementer); and (b) concerning a PR nomination process where their PR is a candidate.

# The new Strategy sees a key role for CCMs

**Particularly in the early part of NFM 4 – leading Country Dialogue and promoting key strategy priorities**



## **Stronger CCM Governance**

- **Inclusive decision making** on use of Global Fund resources, especially meaningful involvement of communities, **including KPs, TB, and Malaria**
- CCM positioning and alignment with national structures to strengthen implementation of Strategy's priorities (e.g., **RSSH, PPR**)

## **Supporting decision-making on Strategy's new priorities**

- Communicating Strategy's priorities and ensuring these are embedded in grants
- Promoting new partnerships to address structural barriers to HTM, along with PPR & private sector linkages & promote integrated, people-centered, quality services
- **Considering CCM membership adjustments to bring in relevant new expertise.**

## **Resources**

- Global Fund Strategy (2023-2028): [عربي](#) | [English](#) | [Español](#) | [Français](#) | [Português](#) | [Русский](#)
- Executive Summary: [English](#) | [Español](#) | [Français](#) | [Italiano](#) | [日本語](#) | [Português](#) | [Русский](#) | [Deutsch](#) | [عربى](#) | [中文](#)
- Strategy Framework: [عربي](#) | [English](#) | [Español](#) | [Français](#) | [Português](#) | [Русский](#)
- Contact: [ccm@theglobalfund.org](mailto:ccm@theglobalfund.org) or for more information please see: <https://www.theglobalfund.org/en/strategy/>

# Resources on CCM Evolution



Country Coordinating Mechanism

Overview

**Evolution ^**

- Oversight
- Engagement
- Positioning
- Operations
- Transition
- Regional Coordination
- Eligibility
- Funding
- Ethics
- Archive

**Country Coordinating Mechanism Evolution**

Country Coordinating Mechanisms are core to the Global Fund's contribution to health governance to help end HIV, tuberculosis and malaria while investing in resilient and sustainable systems for health. The CCM Evolution Strategic Initiative is a catalytic opportunity to enhance the way our partnership works in countries and regions. The approach and methodology build from a pilot phase in 2018-2019.

**Objectives**

Oversight      Engagement      Positioning

Operations      Transition      Regional coordination

The objective of CCM Evolution is to equip CCMs to facilitate inclusive oversight and meaningful engagement in alignment with national structures for sustained health governance. As tested in the pilot, this involves increased focus on four core responsibilities:

- Oversight: Active oversight of existing and emerging investments
- Engagement: Meaningful, inclusive and active participation of key stakeholders
- Positioning: Working within national structures and existing emerging platforms to increase efficiency of health investments
- Operations: CCM Secretariats' core functions (including the code of conduct), enabling and sustaining health governance

**Anticipated results**

The anticipated results are to change business as usual, leveraging the opportunity of the strategic initiative to enhance CCMs, streamline processes and invest in results – strengthening governance for existing and emerging health challenges.

[View Related Resources](#)

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You can access Evolution resources on the updated **CCM Evolution webpage** through this [Link!](#)

# Thank You!



The Global Fund to Fight  
AIDS, Tuberculosis and Malaria

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[theglobalfund.org](http://theglobalfund.org)



# **Fighting Pandemics and Building a Healthier, More Equitable World**

## **Alistair Shaw**

Senior Program Officer,  
Human Rights, CRG Department  
**The Global Fund**





# Fighting Pandemics and Building a Healthier, More Equitable World

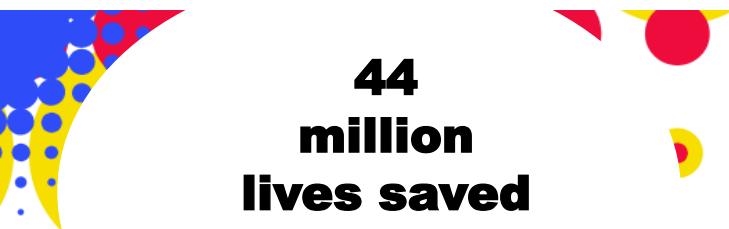
Alistair Shaw - Community, Rights and Gender Department

CS4ME CCM Working Group Meeting 12.07.2022

# Background

## Our Progress

As of end 2020:



**44  
million  
lives saved**



## Where we are now

We are off track to meet the **Sustainable Development Goal (SDG) 3 targets.**



## Our Future

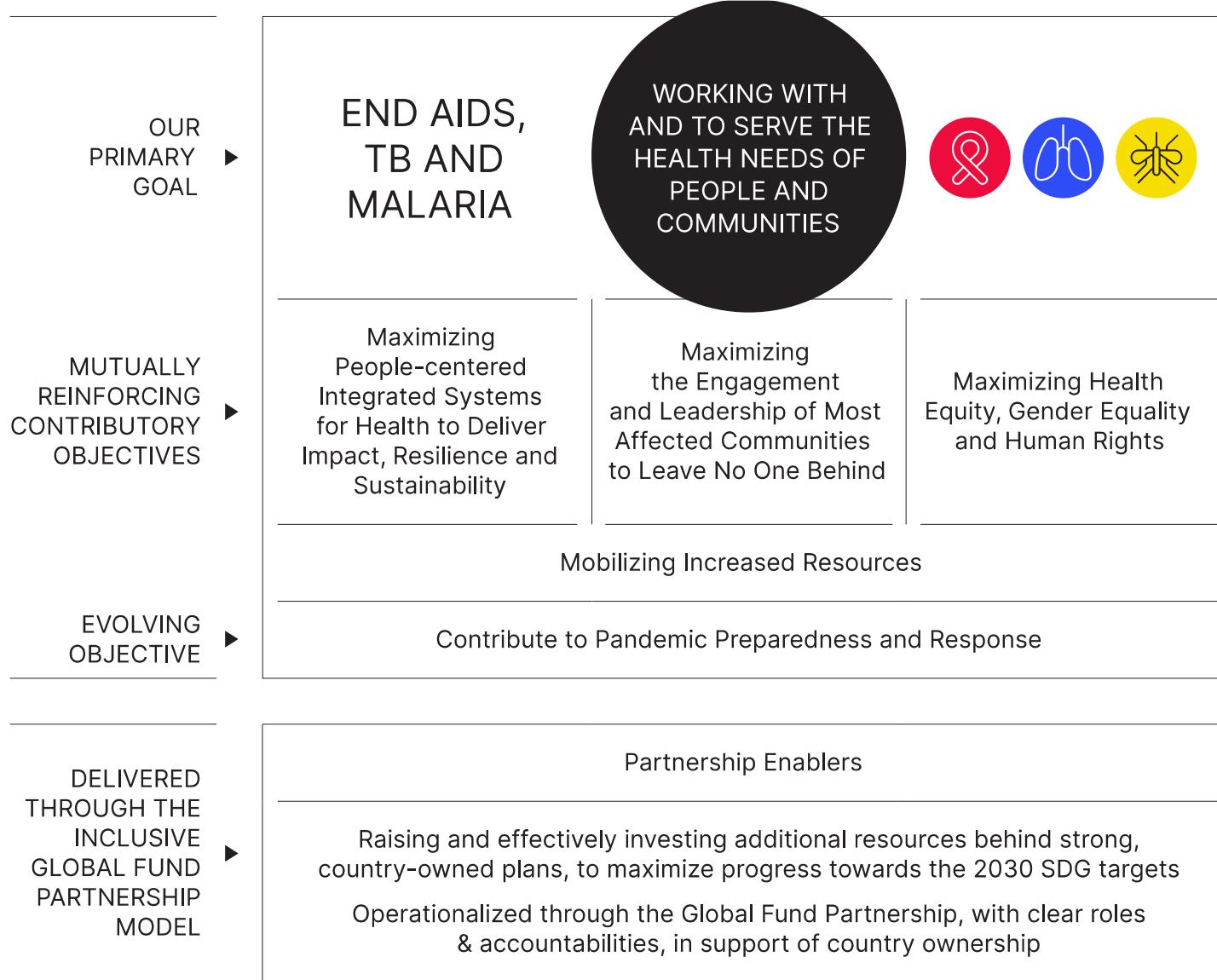
**New Global Fund Strategy** to accelerate impact toward the 2030 horizon.



**Fighting Pandemics and Building a Healthier and More Equitable World**

Global Fund Strategy (2023-2028)

# The Global Fund Strategy Framework



- **Strategy's primary goal** is to end AIDS, TB, and Malaria.
- **People and communities are at the heart** of our Strategy.
- Achievement of the primary goal is **supported by 4 mutually reinforcing contributory objectives** and **an evolving objective**.
- Partnership Enablers outline **roles and accountabilities** of all stakeholders.

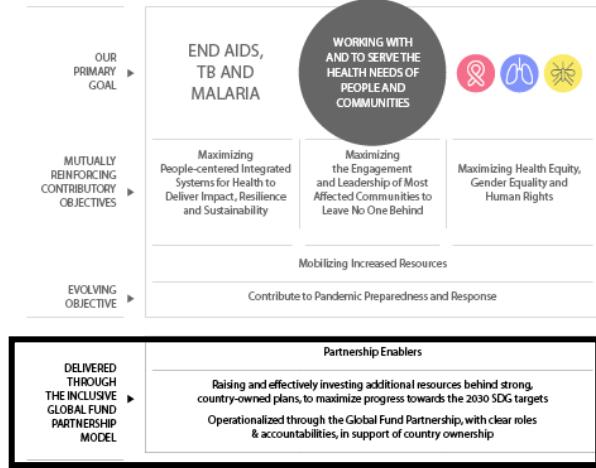
# The Global Fund Strategy Framework

## Mutually Reinforcing Contributory Objectives

OUR PRIMARY GOAL	END AIDS, TB AND MALARIA  WORKING WITH AND TO SERVE THE HEALTH NEEDS OF PEOPLE AND COMMUNITIES	Maximizing People-centered Integrated Systems for Health to Deliver Impact, Resilience and Sustainability	Maximizing the Engagement and Leadership of Most Affected Communities to Leave No One Behind	Maximizing Health Equity, Gender Equality and Human Rights
MUTUALLY REINFORCING CONTRIBUTORY OBJECTIVES	Maximizing People-centered Integrated Systems for Health to Deliver Impact, Resilience and Sustainability Maximizing the Engagement and Leadership of Most Affected Communities to Leave No One Behind Maximizing Health Equity, Gender Equality and Human Rights  Mobilizing Increased Resources  Contribute to Pandemic Preparedness and Response  Partnership Enablers  Raising and effectively investing additional resources behind strong, country-owned plans, to maximize progress towards the 2030 SDG targets Operationalized through the Global Fund Partnership, with clear roles & accountabilities, in support of country ownership	To catalyze sustainable HTM and broader health outcomes and in support of UHC, the Global Fund will strengthen RSSH by supporting countries and communities to: <ul style="list-style-type: none"> <li>Deliver integrated, people-centered quality services</li> <li>Strengthen and reinforce community systems and community-led programming, integrated within national health and social systems</li> <li>Strengthen generation and use of quality, timely, transparent, and disaggregated digital and secure data at all levels, aligned with human rights principles</li> <li>Strengthen the ecosystem of quality supply chains to improve the end-to-end management of national health products and laboratory services</li> <li>NextGen market shaping focus on equitable access to quality health products through innovation, partnership, and promoting sustainable sourcing and supply chains at global, national and community levels</li> <li>As part of Global Fund efforts to strengthen country oversight of the overall health system, better engage and harness the private sector to improve the scale, quality and affordability of services wherever patients seek it</li> <li>Deepen partnerships between governments &amp; non-public sector actors to enhance sustainability, transition-readiness and reach of services, including through social contracting</li> </ul>	To deliver greater impact and ensure the HTM response is responsive to and led by those living with and most affected by the 3 diseases, the Global Fund will reinforce community leadership by: <ul style="list-style-type: none"> <li>Accelerating the evolution of CCMs and community-led platforms to strengthen inclusive decision-making, oversight and evaluation throughout Global Fund-related processes</li> <li>Evolving Global Fund business processes, guidelines, tools and practices to support community-led organizations to deliver services and oversight, and to be engaged as providers of technical expertise</li> <li>Supporting community- and civil society-led advocacy to reinforce the prioritization of health investments and drive toward UHC</li> <li>Expanding partnerships with communities living with and affected by emerging and related health areas to support more inclusive, responsive and effective systems for health</li> </ul>	To improve HTM outcomes and drive more equitable access to health services, the Global Fund will support countries and communities by: <ul style="list-style-type: none"> <li>Scaling up comprehensive programs and approaches to remove human rights and gender-related barriers across the portfolio</li> <li>Supporting comprehensive SRHR programs and their strengthened integration with HIV services for women in all their diversity and their partners</li> <li>Advancing youth-responsive programming, including for AGYW and young KVP and their partners</li> <li>Deploying quantitative and qualitative data to identify drivers of HTM inequity and inform targeted responses, including by gender, age, geography, income and for KVP</li> <li>Leveraging the Global Fund's diplomatic voice to challenge laws, policies and practices that limit impact on HTM</li> </ul>
<b>Achievement of our primary goal will be underpinned by 4 mutually reinforcing contributory objectives that must be concurrently and synergistically pursued to achieve our aims.</b>				
<b>Mobilizing Increased Resources</b>				
To strengthen the scale, sustainability, efficiency and effectiveness of health financing for national and community responses the Global Fund will work across the partnership to: <ul style="list-style-type: none"> <li>Increase international financial and programmatic resources for health from current and new public and private sources</li> <li>Catalyze domestic resource mobilization for health to meet the urgent health needs for SDG 3</li> <li>Strengthen focus on VfM to enhance economy, efficiency, effectiveness, equity &amp; sustainability of Global Fund-supported country programs &amp; systems for health</li> <li>Leverage blended finance and debt swaps to translate unprecedented levels of debt and borrowing into tangible health outcomes</li> <li>Support country health financing systems to improve sustainability, including reducing financial barriers to access and strengthening purchasing efficiency</li> </ul>				

# The Global Fund Strategy Framework

## Partnership Enablers and M&E Framework



### Partnership Enablers

- The Global Fund model is based on the **core principles of country ownership and partnership**.
- Achievement of the Strategy's goal and objectives depends on the collaboration of **all partners, working together, each with distinct, complementary roles and accountabilities**.
- These roles and accountabilities are **described in the Partnership Enablers section of the Strategy**.

**Achievement of the Strategy's aims will be measured through a comprehensive and accountable M&E Framework,**

including key performance indicators, as well as through global partner plans and the SDG 3 goals and targets.

# What is different about this new Strategy?

1

Across all three diseases, **an intensified focus on prevention.**

2

Greater emphasis on integrated, people-centered services.

3

A more systematic approach to **supporting the development and integration of community systems for health.**

4

**A stronger role and voice for communities** living with and affected by the diseases.

5

Intensified action to **address inequities, human rights and gender-related barriers.**

6

Greater emphasis on programmatic and financial sustainability.

7

Greater focus on **accelerating the equitable deployment of and access to innovations.**

8

Much greater emphasis on **data-driven decision-making.**

9

Explicit recognition of the role **the Global Fund partnership** can and should play in **pandemic preparedness and response.**

10

**Clarity on the roles and accountabilities** of Global Fund partners across every aspect of the Strategy.

# Next Steps

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- It is important for **all stakeholders** in the Global Fund partnership **to consider which changes they can make** to deliver our Strategy's goals and objectives – as guided by the roles and accountabilities in the Partnership Enablers section.
  - The **Secretariat is also working to update relevant policies, guidelines, materials and tools** for the next cycle of grants.
  - We look forward to **working together to achieve our vision** of a world free of the burden of AIDS, TB and malaria with better, equitable health for all.
-

# Next Steps: What does the new Strategy mean for CCMs?

**CCMs play an important role in delivering the priorities of the Global Fund partnership's new Strategy**



## **Stronger CCM Governance**

- Ensuring balanced and inclusive decision making around use of Global Fund resources, especially the meaningful involvement of communities, including KPs
- Ensuring meaningful engagement of communities, including KPs, and other relevant experts in the design, delivery and monitoring of services.
- Strengthening CCM positioning and alignment with national structures to strengthen effective implementation of the Strategy's priorities (e.g., RSSH, PPR) and build sustainability.

## **Supporting decision-making around the Strategy's new priorities**

- Communicating the Strategy's priorities to stakeholders and ensuring they are embedded in grants and Global Fund lifecycle processes.
- Promoting new partnerships and new linkages to deliver the Strategy's aims.
- Considering CCM membership adjustments to bring in relevant new expertise.

# Next Steps: What does the new Strategy mean for Communities and Civil Society?

## Communities and Civil Society play an important role in delivering the Global Fund partnership's new Strategy



- Contributing to **CCM decision making** to ensure programs are best positioned to **deliver the Strategy's priorities** and **meet the needs of communities**, incl. KVP and under-represented populations.
- **Leading programs** where communities or civil society are best positioned to meet individuals' needs – at PR, SR, SSR and grassroots levels.
- Highlighting the **importance of community-led monitoring** and **technical support provided by communities and civil society** in guiding effective program implementation.
- **Strengthening community systems** and partnering with government, private and other healthcare providers to **integrate services** and provide **people-centered care**.
- Supporting **collaboration across sectors** and **addressing harmful laws, policies and practices** to tackle structural determinants of HTM outcomes, including human rights barriers, gender-related barriers and inequities, and promoting youth/ young-KP responsive programs.
- **Building new community and civil society partnerships** to deliver the Strategy, incl. with **disability and mental health communities**, those integral to **pandemic preparedness**.

### Resources

- Global Fund Strategy (2023-2028): [عربي](#) | [English](#) | [Español](#) | [Français](#) | [Português](#) | [Русский](#)
- Executive Summary: [English](#) | [Español](#) | [Français](#) | [Italiano](#) | [日本語](#) | [Português](#) | [Русский](#) | [Deutsch](#) | [عربى](#) | [中文](#)
- Strategy Framework: [عربي](#) | [English](#) | [Español](#) | [Français](#) | [Português](#) | [Русский](#)
- For more information please see: <https://www.theglobalfund.org/en/strategy/>

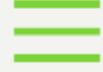
# **Community Engagement SI:**

**Short-Term Technical  
Assistance For NFM4**

**Maria Golovanevskaya**

Senior Program Officer, Community  
Engagement | CRG SI

**The Global Fund**



# **Community Engagement SI:**

**Short-Term Technical  
Assistance For NFM4**

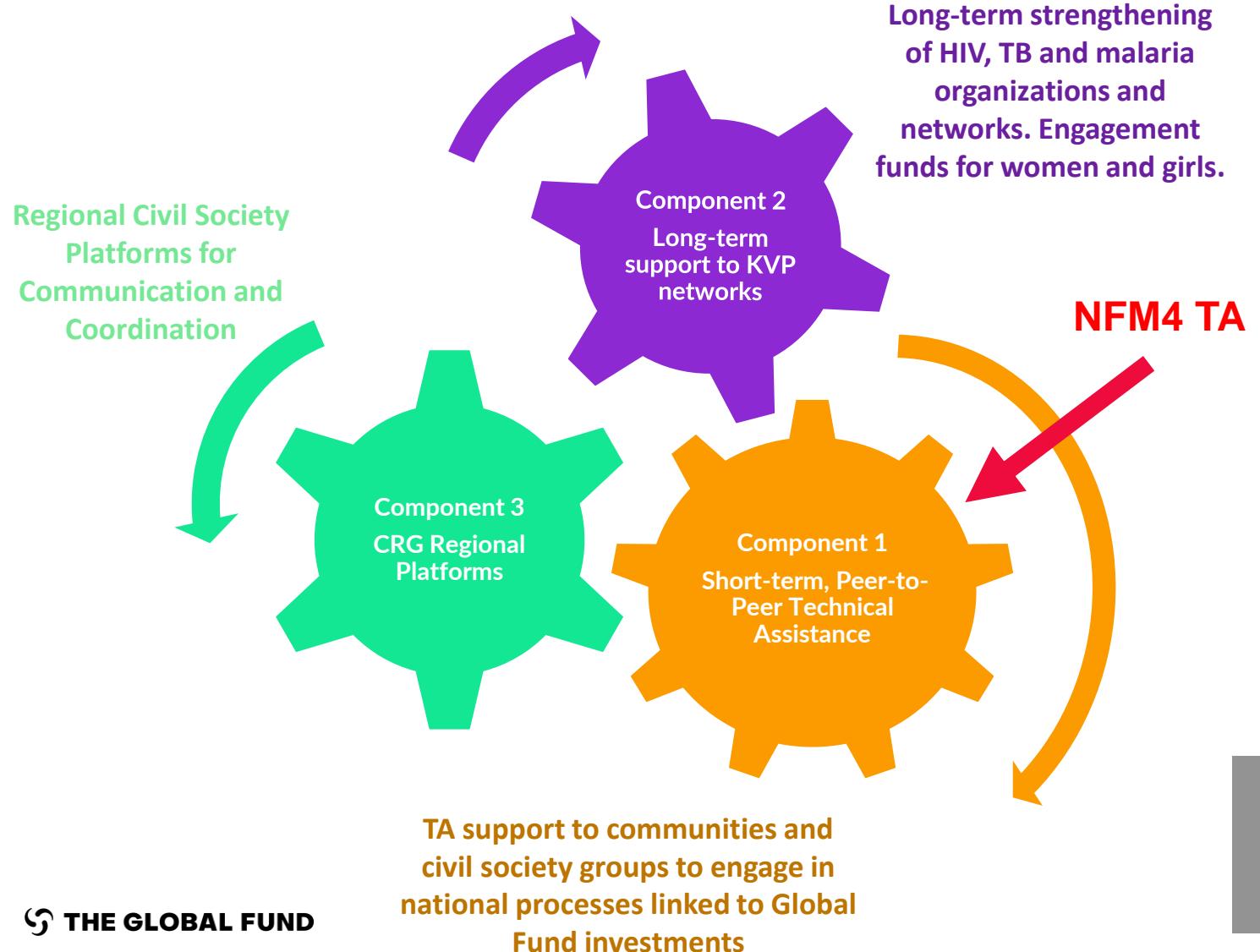
## Objective



**The primary objective of the Community Engagement Strategic Initiative (SI) is strengthened engagement of civil society and communities in Global Fund and related national processes.**

**Engagement of community and civil society actors at all stages in the grant life cycle is critical in the design, development and implementation of effective responses to the three diseases and systems strengthening, ensuring that global fund investments evolve as responsive to those most impacted**

## Three mutually reinforcing components for engaging communities in Global Fund-related processes



Community Engagement SI  
Operational Model

# Types of CRG Technical Assistance Available for NFM 4:

## Proposed Prioritized TA Tracks and Sub-Activities for NFM4

### TA Track A: Situational analysis and needs assessment

- **A.1 CRG-related assessment** (desk review and/or KIIs/FGDs) to generate strategic information for decision-making to inform NFM4 funding request development.
- **A.2 NFM3 program review** to ensure community perspectives inform service delivery improvements under NFM4.

### TA Track B: Engagement in NFM4 country dialogue processes

- **B.1 Virtual or face-to-face community consultation(s)** to inform priorities for NFM4 funding requests.
- **B.2 Coordinating input** into NFM4 funding requests and grant-making (e.g. review of draft funding requests or grant-making documents).

### TA Track C: Other

- **C.1 Costing support** (e.g. virtual mentoring or in-country costing support).

# When to Submit a CRG TA Request:

Tentative NFM4 FR submission windows (projection based on NFM3 dates – TBC by Access to Funding by end of 2022)	CRG TA request submission deadline <b>(6 months before NFM4 window)</b>
W1 - 31 March 2023	30 September 2022
W2a - 30 April 2023	31 October 2022
W2b - 31 May 2023	30 November 2022
W2c - 30 June 2023	31 December 2022
W3 - 31 August 2023	28 February 2023
W4 - 28 February 2024	31 July 2023
W5 - 30 April 2024	31 October 2023

- Please submit your CRG TA request related to NFM4 funding request development at least 6 months before your country's selected NFM4 window:
  - Date X = NFM4 submission window
  - Date X minus 1 month – Final TA deliverables
  - Date X minus 4 months – Start TA implementation
  - Date X minus 6 months – Submit TA request



★ If in doubt about your country's NFM4 submission window, reach out to your CCM or consult with the CRG Platform in your region (see last slide)

# TA Request Form Guidance:

## CRG Technical Assistance Request Form

Community, Rights and Gender Technical Assistance provides support to civil society and community organizations to meaningfully engage in Global Fund related processes throughout the grant lifecycle.  
Before submitting this application to the Global Fund please make sure that your application is reviewed by the [CRG Regional Platform](#) in your region.

### Applicant details

Name of organization	
Type of organization	<input type="checkbox"/> Key population network or organization <input type="checkbox"/> Youth-led network or organization <input type="checkbox"/> Women's network or organization <input type="checkbox"/> Network or organization of people living with HIV or affected by tuberculosis or malaria <input type="checkbox"/> Civil society network or organization led by or working with other affected communities (e.g. migrants, refugees, miners) Other: <input type="text"/>
Address	<input type="text"/>
Country/ies	<input type="text"/>
Focal point	<input type="text"/>
E-mail	<input type="text"/>
Phone number	<input type="text"/>
Is your organization a	<input type="checkbox"/> PR <input type="checkbox"/> SR/SSR <input type="checkbox"/> CCM member <input type="checkbox"/> CCM observer <input type="checkbox"/> None of the options
Date of request	<input type="text"/>
Envisaged start date of assignment <sup>1</sup>	<input type="text"/>
Envisaged country NFM4 submission window <sup>2</sup>	<i>Guidance: Please submit your TA request at least six months before the NFM4 submission window</i>

Which organizations were involved in preparing this request? Please outline their level of involvement.

*Guidance: Please include a list of all organizations/networks engaged in request development as well as their level of involvement (e.g. request writing, request review) and state if they are a PR, SR, SSR, CCM member, CCM observer. If the request is submitted by a consortium of organizations, please mention all organizations and outline the request development process.*

### 1. Background and rationale (max. 1 page)

- **Reach out to the CRG Regional Platform in your region for assistance with developing the TA request**
- **Select TA track(s) and sub-activities most relevant for your NFM4 planning needs**
- **Follow the prompts in red for how to complete form** (e.g. listing organizations/networks involved, providing detailed costing of workshops and data collection related costs)
- Indicate the expected **NFM4 submission window in the form**
- Submit your TA request at **least six months before** your country's NFM4 window



Please reach out to the relevant CRG Regional Platform to receive an NMF4 CRG TA request form (see last slide for contacts) or email [crgta@theglobalfund.org](mailto:crgta@theglobalfund.org)



Overview

Updates

Before Applying ▾

Applying for Funding ▾

Grant Implementation

## Strengthening Community Engagement

The Community, Rights and Gender Strategic Initiative's (CRG SI) objective is to strengthen the engagement of civil society and communities most affected by the three diseases in Global Fund and related processes. This page provides information and resources about short-term technical assistance, long-term capacity strengthening and the CRG regional platforms supported through the CRG SI.

## Technical assistance

### — How to apply

CRG Technical Assistance Guidance Note

download in [Arabic](#) | [English](#) | [Español](#) | [Français](#) | [Português](#) | [Русский](#)

CRG Technical Assistance Request Form

download in [Arabic](#) | [English](#) | [Español](#) | [Français](#) | [Português](#) | [Русский](#)

Example: High-quality TA Request

download in [English](#)

CRG Technical Assistance Provider List

download in [English](#)

## KVP networks and organizations

### — How to contact organizations and networks

Contact Details

download in [English](#)

## CRG regional platforms

### — How to contact CRG regional platforms

Contact Details

download in [English](#)

Link to 'Community engagement' page  
<https://www.theglobalfund.org/en/funding-model/throughout-the-cycle/community-engagement/>



Animated video on the CE SI (EN with subtitles in ES/FR):  
<https://www.youtube.com/watch?v=qJdK3qOVJuY&t=2s>



Animated video on how to apply for TA (EN with subtitles in ES/FR):  
<https://www.youtube.com/watch?v=WOK2kPzjA3A&t=22s>

# CRG REGIONAL PLATFORM CONTACTS

**ANGLOPHONE AFRICA: EANNASO**

[eannaso@eannaso.org](mailto:eannaso@eannaso.org)



**FRANCOPHONE AFRICA: RAME**

[contact@prf-fondsmondial.org](mailto:contact@prf-fondsmondial.org)



**ASIA-PACIFIC: APCASO**



[apcrg@apcaso.org](mailto:apcrg@apcaso.org)

**MIDDLE EAST AND NORTH AFRICA: ITPC-MENA**



[info@itpcmena.org](mailto:info@itpcmena.org)

**EASTERN EUROPE AND CENTRAL ASIA: EHRA**



[eecaplatform@harmreductioneurasia.org](mailto:eecaplatform@harmreductioneurasia.org)

**LATIN AMERICA AND THE CARIBBEAN: VIA LIBRE**



[vialibre@vialibre.org.pe](mailto:vialibre@vialibre.org.pe)



# DISCUSSIONS





# BREAK (5min)





# **47th Global Fund Board Meeting**

## **Mr. Wato Joseph**

Executive Director,  
**APDSP, Cameroon**



# **47ÈME RÉUNION DU CONSEIL D'ADMINISTRATION DU FONDS MONDIAL 10-12 MAI 2022**



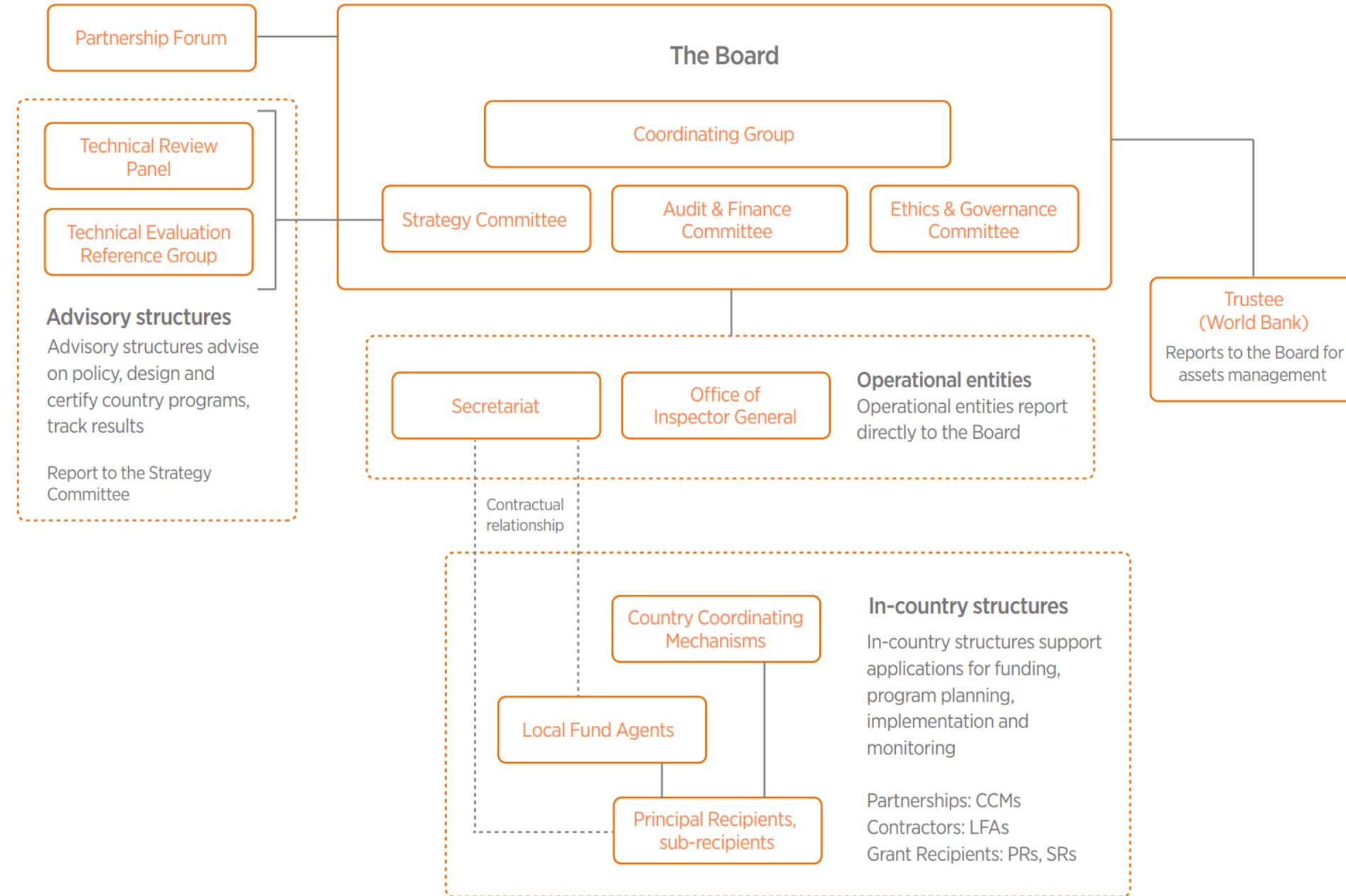
**DEVELOPING COUNTRY  
NGO DELEGATION**  
GLOBAL FUND TO FIGHT AIDS, TB & MALARIA

**Par: JOSEPH WATO**  
*Membre du C.A*



# **COMPRENDRE LE CONSEIL D'ADMINISTRATION DU FONDS MONDIAL**





**Le Conseil d'administration du Fonds mondial** incarne l'approche partenariale de la santé mondiale. Pour aider à mettre fin aux épidémies de VIH, de tuberculose et de paludisme, le Conseil intègre les principales parties prenantes d'une manière inclusive et efficace. Sa philosophie directrice, ainsi que son travail quotidien, reposent sur une responsabilité partagée et un engagement fort de toutes les parties concernées.



- **Les fonctions essentielles du Conseil**
  - ❖ Le développement de la stratégie
  - ❖ La supervision de la gouvernance
  - ❖ Engagement des ressources financières
  - ❖ L'évaluation des performances organisationnelles
  - ❖ la gestion des risques
  - ❖ Engagement de partenariat, mobilisation de ressources et plaidoyer



## ▪ Membres et groupes d'intérêt

Le **Conseil d'administration** comprend 20 membres votants, avec une représentation égale des exécutants et des donateurs. Les organisations non gouvernementales (**Pays développés et Pays en voie de développement**), les communautés touchées par le VIH, la tuberculose et le paludisme, le secteur privé et les fondations privées sont également représentés en tant que membres votants. En outre, il y a huit membres non votants, dont le président et le vice-président du Conseil d'administration, des représentants d'organisations partenaires, dont l'Organisation mondiale de la santé et la Banque mondiale, ainsi que le groupe des donateurs publics supplémentaires.



## ▪ Comités

Le travail du conseil d'administration est assuré par trois comités :

- ✓ Comité d'audit et des finances (AFC)
- ✓ Comité d'éthique et de gouvernance (EGC)
- ✓ Comité stratégique (CS/SC)

Un groupe de coordination, dirigé par le président du conseil, sert d'organe de collaboration pour coordonner les activités importantes du conseil.



## ▪ Structures consultatives et opérationnelles

Ces structures rendent compte au Conseil d'administration :

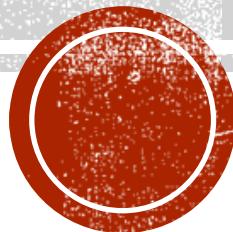
- Secrétariat
- Groupe de référence pour l'évaluation technique (TRP)
- Groupe d'examen technique (TERG)
- Bureau de l'inspecteur général



# RÉSUMÉ DES DÉCISIONS DE LA 47ÈME RÉUNION

DU CA

10-12 MAI 2022



# **1. Approbation de la politique d'éligibilité révisée (Point de décision GF/B47/DP03)**

Sur la base de la recommandation du comité stratégique, le Conseil d'administration(C.A) a approuvé la politique d'éligibilité révisée suivante, portant sur les programmes de subventions, en remplacement du point de décision GF/B39/DP03 et la Politique d'éligibilité précédente GF/B39/02 (la "Politique d'éligibilité précédente") qui reste applicable aux programmes de subventions issus de la période d'allocation 2020- 2022.



## **2. Approbation de l'éligibilité des composantes de financement de la transition 2020-2022 pour une allocation supplémentaire (Point de décision GF/B47/DP04)**

Sur la base de la recommandation du Comité Stratégique(C.S), le Conseil d'administration a approuvé l'admissibilité des six (6) composantes du financement de transition de la période d'allocation 2020-2022 pour une allocation supplémentaire de financement de transition pour la période d'allocation 2023-2025



### **3. Méthodologie d'allocation 2023 - 2025 (Point de décision GF/B47/DP05)**

Il s'agit d'une décision du CA qui approuve la méthodologie d'allocation 2020 – 2022 (GF/B41/DP03) et prend acte des paramètres techniques pour la période d'allocation 2023 – 2025 (Annexe 1&2 GF/B47/03). Elle a donc approuvé que, pas plus de 7,5 % du total des fonds disponibles pour les allocations par pays soient utilisées pour assurer l'intensification, l'impact et le rythme des réductions, comme décrites au paragraphe 4.c de la méthodologie d'allocation ;



et demande par conséquent au CS d'examiner et d'approver, lors de sa réunion de juillet 2022, la méthode par laquelle le Secrétariat appliquera le processus d'ajustement qualitatif et en rendra compte.

Ainsi, la présente Méthodologie d'allocation et les Paramètres techniques s'appliqueront à la période d'allocation 2023-2025 et remplacent par conséquent la méthodologie d'allocation et les paramètres techniques présentés dans le document GF/B41/02.



#### **4. Investissements catalytiques pour la période d'allocation 2023-2025 (Point de décision GF/B47/DP06)**

- Le C.A a décidé que le montant total des fonds à allouer pour la période d'allocation 2023-2025 sera décidé en novembre 2022, sur la base des recommandations du Comité de l'audit et des finances après l'annonce des résultats de la 7e reconstitution des ressources ;
- que le montant total du financement des investissements catalytiques pour la période d'allocation 2023-2025 ("Investissements catalytiques ") sera déterminé par le montant total des fonds à allouer pour la période d'allocation 2023-2025 ;



- Approuve les investissements catalytiques pour la période d'allocation 2023-2025, sur la base du montant total des fonds à allouer, comme indiqué dans le tableau 1 du document GF/B47/DP06 ;
- Convient que dans le cas où les fonds à allouer pour la période d'allocation 2023-2025 sont supérieures au point médian de la fourchette de financement spécifiée pour tout scénario dans le tableau 1 du document GF/B47/DP06, le Secrétariat peut recommander au Conseil d'approuver des montants supplémentaires pour les investissements catalytiques (jusqu'à 50 % de la différence du financement catalytique total pour le scénario applicable et le prochain scénario de financement élevé) à investir dans les domaines prioritaires pour le scénario de prochain grand financement tel dans le tableau 1 du document GF/B47/DP06 ;

■ Reconnaissant que des affinements supplémentaires peuvent être nécessaires pour les montants d'investissement catalytique pour les priorités de la section " RSSH/Cross-Cutting « (Système Résistant et Pérenne pour la Santé) du tableau 1 du document GF/B47/DP06, a délégué le pouvoir au Comité stratégique d'approuver, dans le cadre de cette section RSSH/Cross-Cutting (à l'exclusion de la priorité du Fonds d'urgence) : (i) une diminution du montant de toute priorité jusqu'à 15% et (ii) l'inclusion de ces montants diminués dans une autre priorité de ce groupe.

- Approuve que le Secrétariat :
  - i. rendra opérationnels les investissements catalytiques, en tenant compte des recommandations du TRP et du TERG, ainsi que des données disponibles sur la performance des programmes et des finances. TERG, ainsi que des données disponibles sur les programmes et les performances financières catalytiques en cours, et travaillera avec les partenaires pour s'assurer que les investissements ont des objectifs clairs, des résultats et un impact attendu, ainsi qu'une transparence dans les décisions d'investissement sur la priorisation géographique et la sélection des pays ;



ii. informer et faire des recommandations au Comité stratégique et au Conseil d'administration de l'état d'avancement de la mise en œuvre des subventions et des prochaines étapes prévues, lors de sa réunion de juillet 2022;

iii. disposer d'une marge de manœuvre, dans les limites du montant total du financement des investissements catalytiques, pour augmenter ou diminuer le montant de toute priorité approuvée jusqu'à 15 % et rendre compte de ces changements au comité stratégique ; et



iv. présenter au comité stratégique, pour approbation, toute augmentation ou diminution du montant de toute priorité approuvée au-delà de 15 % ; et

■ Convient que le Secrétariat aura le pouvoir délégué d'augmenter le montant du financement disponible pour le Fonds d'urgence, jusqu'à 50% du montant approuvé pour cette priorité, en utilisant les fonds approuvés comme disponibles par le Comité d'audit et des finances pour l'optimisation du portefeuille, et que le paragraphe 6.iv ci-dessus ne s'appliquera pas aux augmentations du Fonds d'urgence. Toute augmentation supérieure à 50 % sera présentée au Conseil d'administration pour approbation urgente et sans objection.

**Table 1 to GF/B47/DP06:**

Strategy Goal or Objective	Priority	Indicative Modality	US\$16 and Over	US\$15-16b	US\$14-15b	US\$13-14b	US\$12-13b
End AIDS	Prevention for key populations, AGYW and sexual partners	MF	\$107	\$87	\$78	\$73	\$24
	Implementation support for innovation, precision and scale in HIV prevention	SI	\$12	\$10	\$9	\$0	\$0
	Key populations sustainability and impact	MC	\$41	\$34	\$30	\$28	\$0
	HIV Incidence Reduction Total		\$160	\$131	\$117	\$101	\$24
End TB	Find and successfully treat the missing people with DS-TB and DR-TB	MF	\$179	\$161	\$152	\$123	\$82
	Scale up TB prevention	MF	\$54	\$48	\$45	\$37	\$0
	Country readiness for innovation and quality TB programming	MF	\$18	\$16	\$15	\$12	\$0
	Technical support to the TB matching funds	SI	\$16	\$13	\$12	\$11	\$0
	End TB: Accelerate progress to End TB by 2030 Total		\$267	\$238	\$224	\$183	\$82
End Malaria	Biologic threats in malaria case management in Africa	SI	\$20	\$16	\$14	\$13	\$0
	E2030: Drive towards elimination and facilitate prevention of reestablishment	SI	\$7	\$6	\$5	\$0	\$0
	Malaria Elimination in Southern Africa	MC, MF	\$13	\$11	\$10	\$10	\$0
	Resistance to Artemisinin Initiative (RAI)	MC	\$110	\$100	\$100	\$80	\$50
	Regional Coordination and targeted Technical Assistance (RCTA)	SI	\$9	\$7	\$7	\$0	\$0
	Addressing vector control threats and opportunities: supporting country readiness for an expanding toolbox	SI	\$16	\$13	\$12	\$11	\$0
	Malaria Total		\$175	\$153	\$148	\$114	\$50
Maximizing People-centered Integrated Systems for Health	Empowering regional reference laboratories and national diagnostic networks	SI, MC	\$33	\$27	\$24	\$0	\$0
	Data	SI	\$29	\$24	\$21	\$0	\$0
	Equitable access to quality health products through innovation, partnership, and promoting sustainable sourcing and supply chains at global, national and community levels (NextGen Market Shaping)	SI, MF	\$140	\$85	\$49	\$23	\$0
	Incentivizing RSSH quality and scale	MF	\$60	\$40	\$30	\$20	\$0
	Effective community systems & responses (CS&R) contributing to improved health outcomes, equitable access to integrated people-centered quality services	MF, SI	\$90	\$74	\$66	\$61	\$0
Maximizing Health Equity, Gender Equality and Human	Community engagement	SI	\$20	\$18	\$18	\$15	\$14
	Scaling up programs to remove human rights and gender related barriers	MF, SI	\$49	\$40	\$36	\$33	\$20
Mobilizing Increased Resources	Health Financing	SI	\$37	\$30	\$27	\$20	\$0
End AIDS, TB, Malaria	Emergency Fund	SI	\$40	\$40	\$40	\$30	\$10
	RSSH / Cross-Cutting Total		\$498	\$378	\$311	\$202	\$44
Amounts in US\$m	TOTAL		\$1,100	\$900	\$800	\$600	\$200

## **5. Mandat de direction du Conseil d'administration (Point de décision GF/B47/DP07)**

Le Conseil a approuvé les modifications apportées (i) au mandat du président et du vice-président du Conseil du Fonds mondial, (ii) aux statuts du Fonds mondial et (iii) aux procédures opérationnelles du Conseil et des comités du Fonds mondial, présentées respectivement dans les annexes 1, 2 et 3 du document GF/B47/05.



## **6. Point de décision GF/B47/DP08 : Tirer parti du travail des comités permanents**

Sur la base de la recommandation du Comité d'éthique et de gouvernance (le "EGC"), telle que présentée dans le document GF/B47/06 - Révision 1, le CA a, pris acte des modifications de la Charte du Comité stratégique déjà approuvées par le biais du document GF/B46/DP06 et qui entreront en vigueur le 31 décembre 2022 ;

Modifié les chartes des comités permanents du Conseil ("les chartes"), (annexes 5, 6 et 7 du document GF/B47/06 - Révision 1), qui prendront chacune effet à la fin de la quarante-septième réunion du Conseil ; et



**Reconnu la portée et l'intention spécifiques des changements apportés aux Chartes et demande à la direction du EGC de déterminer, après consultation de la direction du Conseil, du Groupe de coordination, des Comités permanents et du Secrétariat, le cas échéant, si un examen plus complet des Chartes peut être nécessaire au cours du prochain mandat du CGE.**



## Que retenir pour la société civile?

- Se familiariser ou comprendre les financements de transition ou le cycle de financement, la méthodologie d'allocation, les fonds catalytiques en consultant le lien ci-après:

<https://www.theglobalfund.org/fr/funding-model/throughout-the-cycle/>

- Nous mobiliser pour une meilleur allocation 2023-2025 et des fonds catalytiques qui seront décidés en novembre 2022 en accentuant les plaidoyer pour avoir **\$18 milliards** lors de la 7<sup>ème</sup> reconstitution des ressources du FM aux USA
- Se familiariser avec le tableau 1 présenter plus haut afin de mieux comprendre les enjeux d'une mobilisation inférieure à \$18 milliards à la 7<sup>ème</sup> reconstitution
- Se rapprocher des CCM pour plus d'informations et d'intervention dans les fonds catalytiques



## **Africains Membres du CA**

### **DNGO**

- Aaron SUNDAY
- Allan MALACHE
- Cecilia SONOO
- Morgane AHMAR
- Alice KAYONGO
- Kanju FEZILE

### **COMMUNITIES DELGATION**

- Olivia NGOU
- Kevin EVINA
- Etc...



## Quelques documents utiles pour la société civile

- Stratégie 2017-2022 du Fonds mondial : « Investir pour mettre fin aux épidémies »

[https://www.theglobalfund.org/media/7856/core\\_globalfundstrategy2017-2022\\_strategy\\_fr.pdf](https://www.theglobalfund.org/media/7856/core_globalfundstrategy2017-2022_strategy_fr.pdf)

- Guide du candidat du Fonds mondial

[https://www.theglobalfund.org/media/5651/fundingmodel\\_applicanthandbook\\_guide\\_fr.pdf](https://www.theglobalfund.org/media/5651/fundingmodel_applicanthandbook_guide_fr.pdf)

- Notes d'information du Fonds mondial sur : le VIH ; la tuberculose ; le paludisme ; et la mise en place de systèmes résistants et pérennes pour la santé au moyen d'investissements du Fonds mondial

<https://www.theglobalfund.org/fr/funding-model/applying/resources/>

- Guide sur le cadre modulaire du Fonds mondial

[https://www.theglobalfund.org/media/8967/fundingmodel\\_modularframework\\_handbook\\_fr.pdf](https://www.theglobalfund.org/media/8967/fundingmodel_modularframework_handbook_fr.pdf)

- Notes d'information techniques du Fonds mondial

<https://www.theglobalfund.org/fr/funding-model/applying/resources/>

- Note d'orientation sur la Politique du Fonds mondial en matière de pérennité, de transition et de cofinancement des programmes

[https://www.theglobalfund.org/media/6677/core\\_sustainabilityandtransition\\_guidancenote\\_fr.pdf](https://www.theglobalfund.org/media/6677/core_sustainabilityandtransition_guidancenote_fr.pdf)

- Directives relatives à l'établissement des budgets des subventions

<https://www.theglobalfund.org/fr/funding-model/applying/grant-making/>

- Prévisions d'affranchissement du soutien du Fonds mondial d'ici 2028 (en anglais)

[https://www.theglobalfund.org/media/9017/core\\_projectedtransitionsby2028\\_list\\_en.pdf](https://www.theglobalfund.org/media/9017/core_projectedtransitionsby2028_list_en.pdf)

**MERCI/UBUNTU/THANK YOU**



**DEVELOPING COUNTRY  
NGO DELEGATION**  
**GLOBAL FUND TO FIGHT AIDS, TB & MALARIA**

# PANEL



CCM Members Panel : Good Practices, How to address the  
Needs of Vulnerable Communities to CCM

Panel des membres CCM : Bonnes pratiques, Comment  
remonter les besoins des communautés vulnérables  
paludisme au CCM



# PANEL



- I. How do you proceed to consult with malaria-affected communities and raise their needs at the CCM ? / *Comment procédez-vous pour consulter les communautés affectées par le paludisme et faire remonter leurs besoins au CCM?*
  
2. Can you give us an example of how you have successfully advocate for the needs of communities at the ccm ? / *Pourriez vous nous donner un exemple d un plaidoyer que vous avez mené au sein du ccm au profit des communautés ?*



# Carine Diboue

Program Officer

Impact Santé Afrique

Moderator



# **Mr. Boubacar Sylla**

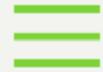
**President**

**Club des amis du monde, Guinea**



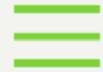
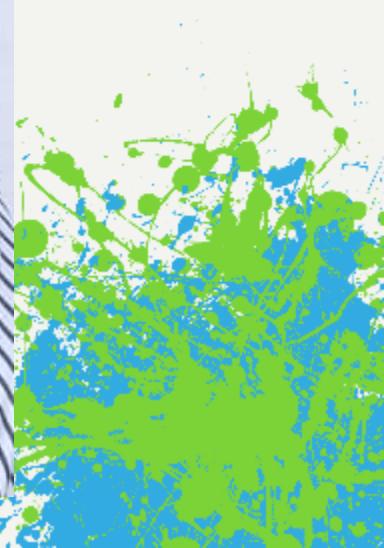
# Cecilia Senoo

Executive Director, HFFG



# Ayo Ipinmoye

National Coordinator,  
ACOMIN



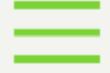
# **Terms of reference of CS4ME CCM working group and the workplan 2022**

## **Olivia Ngou**

Global Coordinator **CS4ME**  
Executive Director **Impact Santé  
Afrique (ISA)**



# CS4ME CCM Working group objectives



The second objective of CS4ME's current Strategic Plan 2021-2025 is: "**To build civil society influence with CCMs/NMCPs**".

- CS4ME recognizes that civil society membership on CCMs is an excellent opportunity to advocate and ensure that the voices of the community are heard by decision makers.
- The purpose of this working group is therefore to ensure that all civil society representatives who sit on CCMs are well prepared and well supported to play this role effectively



# CS4ME CCM Working group objectives



The working group will therefore:

- Draw on and analyze experience and lessons learned of CCM members to develop best practices and guidance for all civil society CCM members;
- Provide support to new CCM members to understand the Global Fund, the CCM, and how to be an effective CCM member;
- Exchange experiences, support, and coach other CCM members across the CS4ME network to represent civil society and affected communities effectively. This will include providing briefings on key issues and controversies, and guidance on effective communication;
- Monitor trends in Global Fund resources or activities, and national responses;
- Capture successes as a result of CCM involvement to contribute to CS4ME communications and advocacy;
- Sharing relevant updates documents with malaria constituencies in a timely manner.





# Membership & Structure

- The CCM CS4ME Working Group welcomes CS4ME members from different countries and backgrounds who are members of the CCM in their countries in order to bring together the rich diversity of the different CSOs involved.
- Members should represent Malaria affected communities
- It is hoped that the working group will achieve geographic, gender, and diversity to bring in varied perspectives and skills.



# Roles & Responsibilities of Working Group Members



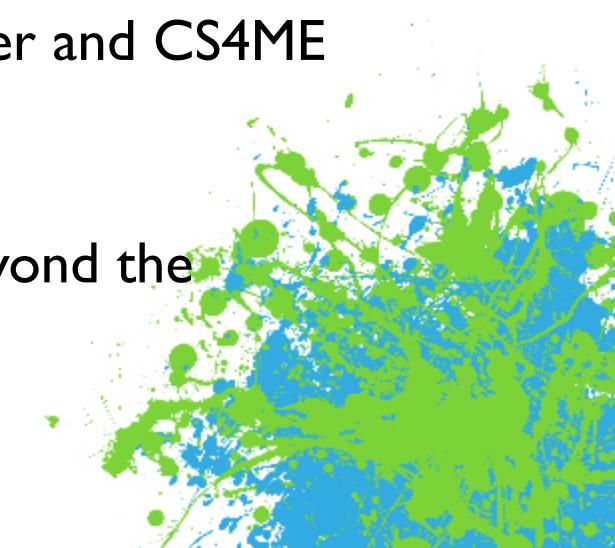
- **Learn:** Members are encouraged to learn more about the Global Fund, the funding commitments in place in their country, and their country's national malaria strategic plan;
- **Participate:** Participate actively in meetings by sharing experiences and perspectives, bringing creative ideas, asking good questions, listening actively to other members, and contributing to decision making by consensus;
- **Review:** Support the review of CS4ME training materials.



# Roles & Responsibilities of Working Group Members



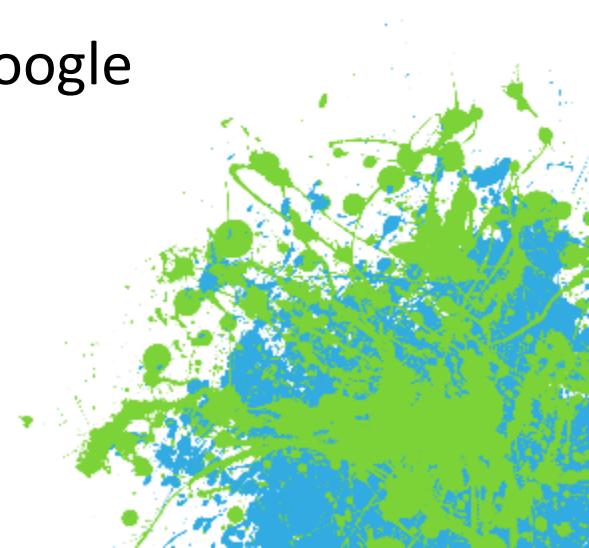
- **Connect:** Help identify examples or best practices related to CCM engagement;
- **Advise:** Review and/or participate in testing of materials designed to support civil society CCM members to be effective advocates;
- **Promote:** Promote and be an advocate of the working group and its activities;
- **Mentor:** Support, encourage, and advise other working group member and CS4ME members interested in learning more about CCMs;
- **Advocate:** Be an advocate for CS4ME and represent it effectively beyond the working group.



# Rights of Working Group Members



- **Respect:** be heard and respected for their experience and perspective;
- **Withdraw:** withdraw from the working group at any time, providing written notice to the chair;
- **Communicate:** speak in French or English at meetings, and use google translate to understand messages.

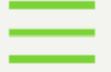


# Meetings & Operational Procedures



- **Meetings:** The working group will meet at least every quarter, but may call additional meetings as needed. Meetings will be virtual and take place on Zoom.
- **Language:** Meetings will generally be in English or French, with translation into the other language provided as possible.
- **Decision making:** Decisions will be made by consensus with the chair creating an environment open to reviewing different perspectives and finding an appropriate conclusion.
- **Meeting notes:** The working group secretary will send out notes summarizing decisions, action points, and any other key points to all members within three days of the meeting.
- **Communication:** The working group will communicate via email and WhatsApp between meetings. Meetings will be called at least one or two weeks in advance.
- **Absences:** Members are expected to inform the chair of any expected absences from meetings at least one day prior to the meeting.
- **Reviews:** Documents for review will be sent out at least two weeks ahead of the review deadline to ensure members have time to read.

# Workplan 2022



- Engage in the GF NFM4 preparation and communities consultations
- Document best practices in the current malaria GF grant and gaps communities face in accessing quality malaria services : for the period 2020-2022
- Quarterly CS4ME CCM working meetings October & December 2022 ( to strategize and Learn from other countries experiences)



# Leadership team



- Chair
- Co-chair
- Rapporteur





## Conclusion and Next steps

*Conclusion et Prochaines étapes*





CIVIL SOCIETY FOR MALARIA ELIMINATION

**THANK YOU ALL  
WE LOOK FORWARD TO WORK WITH ALL OF YOU**

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