Guide to Influencing the Global Fund's Grant Cycle 7 for Transgender People

2023

vialibre
Regional Platform
Latin America and the Caribbean
GATE

Copyright © 2023 GATE | LAC Platform / Via Libre

This work may be reproduced and redistributed, in whole or in part, without alteration and without prior written permission, solely for non-profit advocacy and/or educational purposes provided all copies contain the following statement:

© 2023 GATE. This work is reproduced and distributed with the permission of GATE. No other use is permitted without the express prior written permission of GATE. For permission, contact gate@gate.ngo or cc.plataformalac@vialibre.org.pe

Author: GATE | LAC Platform / Via Libre

Editing, design and layout: Gabriel de Larch

Suggested citation:

GATE & LAC Platform / Via Libre (2023). *Guide to Influencing the Global Fund's Grant Cycle 7 for Transgender People.* New York: GATE.

About GATE

GATE is an international advocacy organization working towards justice and equality for trans, gender diverse and intersex communities. Rooted in our movements, we work collaboratively with strategic partners at the global level to provide knowledge, resources and access to international institutions and processes. Our vision is a world free from human rights violations based on gender identity, gender expression and sex characteristics. Our strategy is to transform the landscape of global advocacy, knowledge creation and resource distribution through critical inclusion of trans, gender diverse and intersex movements at all levels of political, legal and socio-economic processes.

Find out more about GATE by visiting www.gate.ngo

About LAC Platform / Vía Libre

The Latin America and the Caribbean Platform Community Engagement (LAC Platform) is an initiative driven by Vía Libre and supported by the Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund). It's part of several interventions of the Global Fund to support and strengthen community and civil society participation at all levels of its processes.

Find out more about LAC Platform / Via Libre by visiting www.plataformalac.org | www.vialibre.org.pe

Acerca de la Plataforma LAC / Vía Libre

La Plataforma Regional – Latinoamérica y el Caribe de Participación Comunitaria, (Plataforma LAC), es una iniciativa impulsada por VÍA LIBRE y apoyada por el Fondo Mundial de Lucha contra el Sida, la Tuberculosis y la Malaria. Forma parte de varias intervenciones del Fondo Mundial para apoyar y fortalecer la participación comunitaria y de la sociedad civil en todos los niveles de sus procesos.

***Conoce más sobre la Plataforma LAC / Vía Libre visitando** www.plataformalac.org / www.vialibre.org.pe*

Glossary

CD	Country Dialogue
CCM	Country Coordinating Mechanism
GAC	Grant Approvals Committee
GC7	Grant Cycle 7
GEM	Gender Equality Marker
NFM4	New Funding Model 4
NSP	National Strategic Plan
PEs	Program Essentials
PR	Principal Recipient
TRP	Technical Review Panel

Contents

Glossary 3

Section A: About the Guide 7

Introduction 7

Purpose of this Guide 8

Audience 8

How to use this Guide 9

Section B: More About Grant Cycle 7 (2023–2025) 11

Grant Cycle 7 allocations 12

Grant Cycle 7 submission windows 13

Section C: How Transgender Groups Can Engage in Global Fund Processes and Ensure That Transgender Programs are Included in the Funding Request 15

Community engagement minimum expectations 15

7 Key steps for transgender groups in the Global Fund process 17

Step 1: Country Dialogue 18

Step 2: Develop or review National Strategic Plan 20

Step 3: Develop the Funding Request 21

Step 4: Incorporate feedback from the Technical Review Panel 28

Step 5: Decision from Grant Approvals Committee 29

Step 6: Undertake process of grant making 29

Step 7: Board approval 30

Section D: Key Resources to Support Transgender Groups in GC7 32

Section E: Annexes 34

Annex 1: HIV Program Essentials 35

Annex 2: List of Interventions Related to Transgender Programming in the Global Fund's *Modular Framework Handbook* 37

Section A:

About the Guide

Section A: About the Guide

Introduction

The Global Fund provides funding for HIV, Tuberculosis (TB), Malaria and the strengthening of health systems to over 155 countries across the world.[1] The Funding Model works in a 3-year cycle that corresponds directly with the Replenishment Cycle. The current funding period is from 2023–2025 and is called Grant Cycle 7, or GC7. GC7 was previously known as the New Funding Model 4, or NFM4. As the NFM4 funding model is no longer new, the name has been changed to Grant Cycle 7, which corresponds directly with the 7th Replenishment.

In December 2022, the Global Fund sent Allocation Letters to all countries eligible for a Global Fund grant,[2] and countries have begun preparing their Funding Requests through the Country Coordinating Mechanisms (CCMs). Transgender and gender-diverse[3] community groups, and priority interventions for these groups, have often been side-lined in the Funding Request process. This new grant cycle therefore presents an opportunity to ensure that transgender groups are meaningfully engaged in the process, from the Funding Request through to Grant Implementation, and that transgender interventions are prioritized and included in the Funding Requests.

---

1 https://www.theglobalfund.org/en/about-the-global-fund/history-of-the-global-fund/

2 Global Fund (2023). "Global Fund Eligibility List 2023." Available at: https://www.theglobalfund.org/media/12505/core_eligiblecountries2023_list_en.pdf

3 You will note that many of the Global Fund guidance documents sometimes use the term "gender-diverse communities" to "refer to people whose gender identity and expression does not conform to the norms and expectations traditionally associated with their sex at birth. This includes trans people as well as people who do not identify as completely male or completely female. Across cultures and organizations many different terms are used to describe people's gender identities and expressions." However, the term most used is "transgender", so this Guide will use that language, which includes gender-diverse people and communities.

Purpose of this Guide

This Guide aims to:

- Outline how GC7 works and what is new compared to NFM4.
- Provide step-by-step opportunities and tools for transgender communities to meaningfully engage in GC7.
- Outline the specific interventions for transgender communities that can be included in the Funding Request.
- Provide additional resources that transgender communities can refer to for more information.

What this Guide does *not* aim to do:

- Repeat information that is already available in other resources that are useful for transgender communities to engage in GC7.
- Provide a one-size-fits-all approach: the approach towards engaging in GC7 must be adapted according to context and local knowledge.

Audience

The primary audience for this Guide is transgender communities. Other community groups, especially key population groups, may also find this Guide useful.

How to use this Guide

This Guide is structured to provide information for transgender groups on how to engage in GC7, and to ensure that transgender priorities are included in GC7 for each of the 7 key steps in the Preparation Phase of the Global Fund process. These steps are:

1. Country Dialogue
2. Developing/Reviewing National Strategic Plan
3. Developing the Funding Request
4. Incorporation of Feedback from the Technical Review Panel
5. Decision from Grant Approval Committee
6. Process of Grant Making
7. Board Approval.

Each step has recommended actions that the transgender community can take to ensure that the 7 steps are taken together with the transgender community. This builds on the guidance outlined in a prior guide by GATE.[4]

4 GATE (2020). *Integration of the Trans Community in Oversight of Global Fund Processes – A Guide for the Community, Principal Recipients and Country Coordinating Mechanisms.* Available here: https://gate.ngo/wp-content/uploads/2020/04/Guidelines-for-Trans-GF.pdf

Section B:

More About Grant Cycle 7 (2023–2025)

Section B: More About Grant Cycle 7 (2023–2025)

As indicated in the introduction to this Guide, Grant Cycle 7 (GC7) is the new name for the previous New Funding Model 4 (NFM4). GC7 is the first cycle where the new Global Fund Strategy for 2023–2025,[5] will be implemented. The new Strategy commits to intensified engagement of communities throughout the grant cycle and highlights the critical role of community engagement and leadership, and the importance of addressing inequities, human rights, and gender-related barriers.

As the Global Fund states,

> "through intensified focus on prevention and on action to address inequities, human rights and gender-related barriers, the Strategy highlights this stronger role and voice for communities living with and affected by the diseases as a key ambition. Improved Global Fund policies, processes and approaches, informed by evidence from communities, will make sure that the principle of 'Communities at the Center' is achieved. This will include clearer roles, responsibilities and accountability in the Secretariat and across the whole Global Fund partnership."[6]

The new Strategy and its funding cycle, GC7, is therefore an excellent opportunity for transgender groups to ensure that the Global Fund lives up to this statement and meaningfully engages these groups and prioritizes transgender interventions.

5 Global Fund (n.d). "Fighting Pandemics and Building a Healthier and More Equitable World." Available at: https://www.theglobalfund.org/en/strategy/
6 Global Fund (2022). *Community Engagement: A Guide to Opportunities Throughout the Grant Life Cycle.* Available at: https://www.theglobalfund.org/media/12649/core_community-engagement_guide_en.pdf

Grant Cycle 7 allocations

In December 2022, all countries eligible for a Global Fund grant[7] received their Allocation Letters. These letters indicate the amount of funding each country can receive. Through the CCM, a consultative process will begin, where key populations, communities, civil society, government, technical partners, and the private sector will work together to decide what will be included in each country's Funding Request.

The Allocation Letter is meant to be shared with all CCM members, so you can ask your key population, community, or Person Living with HIV (PLHIV) representative for a copy of the Allocation Letter in order to find out how much has been allocated to your country. You can also find the list of 2023–2025 Allocations on their website.[8]

7 Global Fund (2023). "Global Fund Eligibility List 2023." Available at: https://www.theglobalfund.org/media/12505/core_eligiblecountries2023_list_en.pdf

8 Global Fund (2023). "2023–2025 Allocations." Available at: https://www.theglobalfund.org/en/updates/2023/2023-01-18-2023-2025-allocations-now-available/

Grant Cycle 7 submission windows

Global Fund Funding Requests for GC7 are not all submitted at the same time. Each country is allocated a specific 'window' within which their application falls, which determines their due date. The current submission deadlines are[9]:

Review Window	Submission Date	Technical Review Panel (TRP) Meeting
Window 1	20 March 2023	April to May 2023
Window 2	30 May 2023	July 2023
Window 3	21 August 2023	September to October 2023
Window 4	February 2024 (TBC)	TBC
Window 5	April 2024 (TBC)	TBC
Window 6	September 2024 (TBC)	TBC

To see which window your country falls under, download the 2023–2025 Funding Request Tracker.[10]

9 Global Funding Request deadlines available at https://www.theglobalfund.org/en/applying-for-funding/design-and-submit-funding-requests/timing-of-submissions/

10 Frontline AIDS (n.d.) "Funding Request Tracker." Available as a Microsoft Excel download at: https://www.theglobalfund.org/media/12730/fundingmodel_2023-2025-funding-request-status_tracker_en.xlsx

Section C:

How Transgender Groups Can Engage in Global Fund Processes and Ensure That Transgender Programs are Included in the Funding Request

Section C: How Transgender Groups Can Engage in Global Fund Processes and Ensure That Transgender Programs are Included in the Funding Request

Community engagement minimum expectations

Transgender groups are often not meaningfully involved in Global Fund processes at country level due to criminalization and marginalization by governments. GC7 is the first grant cycle under the new Global Fund Strategy that emphasizes the crucial role of communities and community engagement. For this reason, the Global Fund has introduced the Community Engagement Minimum Expectations. There are a set of actions that the CCM needs to take for each Minimum Expectation. This is an opportunity for transgender groups to hold their CCMs accountable if the Community Engagement Minimum Expectations are not being met throughout the process. The Minimum Expectations and their related actions required are presented in the following table.

Minimum Expectation	Actions Required from CCMs
Minimum Expectation 1: The Funding Request development must include transparent and inclusive consultations with populations most impacted by HIV, TB and Malaria, across gender and age. This process will result in a document called "Annex of Funding Priorities of Civil Society and Communities Most Affected by HIV, TB and Malaria".	■ CCM Secretariat develops and shares in a timely manner an engagement roadmap, including process that sets out an access to 15% of the CCM funding for constituency engagement and a submission window for all CCM members. ■ Funding requests include a mandatory "Annex", which should result from CCM-led country dialogue processes with communities. ■ Funding Request documents are published externally following the Technical Review Panel (TRP), a group of independent experts, recommendation. ■ Country Teams use the Annexes of Community Priorities to assess the effectiveness of country dialogue and gain a fuller picture.
Minimum Expectation 2: To further their involvement in oversight, community and civil society representatives in the CCMs must have timely access to information on the status of grant negotiations and any changes to the grant.	■ Copy all CCM members, including civil society / community representatives on key automated grant-making milestone notifications. ■ CCMs will convene a minimum of two (2) meetings during grant making for PR briefing on revisions to the Funding Request and plans for Community-Based Organizations (CBO) / Community-Led Organizations (CLO) implementation.
Minimum Expectation 3: Community and civil society representatives on the CCM must have timely access to information on program implementation.	■ CCMs will provide pre- and post-CCM meeting support and access to 15% of the CCM funding for constituency engagement. ■ Best practice: Country Teams will conduct at least one grant-making briefing with the community / civil society representatives.

7 Key steps for transgender groups in the Global Fund process

This section outlines the 7 key steps in the Global Fund process that transgender groups can follow and use to leverage key opportunities for engagement, and to ensure that the priorities of transgender communities are included in the process.

Even before the Allocation Letters arrive or any other funding activities begin, transgender groups can begin preparing by taking the following actions, followed by the 7 key steps:

Action	Key Resources or Sources of Information
Identifying key dates related to your grants, such as your country's submission window and requesting the engagement roadmap from your CCM, including the dates for the Country Dialogues and relevant CCM meetings.	■ CCM Chair and Representatives for Engagement Plan. ■ Funding Request Status Tracker for Country Windows.[11] ■ Global Fund Community, Rights and Gender Regional Platforms. [12]
Map out your partners and stakeholders to collaborate with, such as your CCM representatives, and other CCM representatives that may be supportive, such as UN agencies and technical partners, key population groups, and civil society.	■ List of your CCM members. ■ Your national or regional UNAIDS office.
Identify and ensure that you are represented on any Technical Working Groups.	■ Ask your CCM if there are Technical Working Groups.
Know your grant's consultant and writers. Your CCM will hire consultants to write the Funding Request. It is very important to develop a good relationship with the writers as they can influence the priorities that are included.	■ CCM members. ■ Your national or regional UNAIDS office. ■ Technical partners in your region, such as GIZ BACKUP and Expertise Française.
Create a roadmap of how you will engage with the wider transgender community.	■ You and your partners.

11 Global Fund (2023). "Funding Request Status Tracker for Country Windows." Available as a Microsoft Excel download at: https://www.theglobalfund.org/en/updates/2023/2023-01-18-2023-2025-allocations-now-available/
12 Global Fund (2023). *Community, Rights and Gender Regional Platforms.* Available at: https://www.theglobalfund.org/media/10393/crg_regionalplatforms_contactdetails_en.pdf

Step 1: Country Dialogue

The Country Dialogue (CD) is a requirement for all CCMs as part of the development of the Funding Request and is the basis for deciding what should be included in each country's Funding Request. The Country Dialogue Narrative[13] is a required document as part of the Funding Request. This document must outline the process undertaken to engage a broad range of stakeholders in the CD leading to the development of the Funding Request.

CDs are an ongoing process throughout the grant cycle, and are open and inclusive conversations between different stakeholders in order to get input about the needs and concerns of the following communities, and to engage these communities in decision making: people who respond to and are affected by HIV, TB and/or Malaria in the country, including government, people living with or affected by these diseases, which include transgender people and other key population groups, as well as technical agencies, implementers, Principal Recipients and Sub-recipients, and others. The CD is therefore meant to be an opportunity for input broader than that provided by CCM members.

For transgender people, the CDs are therefore a critical opportunity for engagement, a platform to voice what your priorities are so that you and your rights and needs are heard and included in Funding Requests.

13 Global Fund (2022). "Country Dialogue Narrative." Available as a Microsoft Word download at: https://www.theglobalfund.org/media/12162/core_country-dialogue_narrative_en.docx

Actions for transgender groups:

- Watch this video[14] for more information about the CD.
- Ask the CCM when the CD will take place.
- Follow up with the CCM Secretariat about funding options to support constituency engagement. 15% of CCM funding is reserved for constituency engagement.
- Reach out to regional platforms and networks for financial support for your organization to ensure that you have the capacity to participate in the CD in a significant manner.
- Ensure that transgender groups are well represented at the CD.
- Actively participate in the CD and raise the need for services for transgender people.

14 Global Fund Country Dialogue. Available at: https://www.dropbox.com/s/k6clmrrrd9vrc5p/Global%20Fund%20-%20Country%20Dialogue.mp4?dl=0

Step 2: Develop or review National Strategic Plan

The Global Fund's support to countries and review of their Funding Requests is based on disease-specific National Strategic Plans (NSPs). These Plans have been developed through an inclusive, multi-stakeholder process that includes diverse communities. NSPs are aligned to the latest evidence and international guidelines and should, therefore, include an analysis of barriers to gender equity, human rights, and access to services, and the rights of key populations.

Actions for transgender groups:

- Watch this video[15] by GATE on Trans Inclusion in National Plans.
- Ensure that there is data disaggregation (separating data into smaller population groups) to reflect transgender information in the NSP and specify that the transgender community is separate from the MSM (Men who have Sex with Men) community.
- Conduct a review of your NSP to ensure that transgender needs are included, and that the data about transgender groups is correct.
- Access ongoing peer support through the Community Engagement Strategic Initiative.[16]
- Take the eLearning course,[17] developed by GATE and AmfAR, on trans inclusion in the development of NSPs.

15 GATE (2022). "Trans Inclusion in National Strategic Plans: HIV." Available at: https://www.youtube.com/watch?v=_EZRAWIIJ7U
16 Global Fund (n.d.) "Strengthening Community Engagement." Available here: https://www.theglobalfund.org/en/funding-model/throughout-the-cycle/community-engagement/
17 GATE/AmfAR (2022). *eLearning: HIV National Strategic Planning for Trans Inclusion*. Available here: https://gate.ngo/elearning-hiv-national-strategic-planning/

Step 3: Develop the Funding Request

There are new elements in the GC7 funding cycle that transgender groups can leverage to ensure that they are meaningfully engaged throughout the Funding Request process, and that transgender priorities are included in the Global Fund country grant. These new elements are:

1. Program Essentials

Program Essentials (PEs) are the most critical programmatic elements that are expected to be included as part of national programs supported by the Global Fund. These PEs are the priority interventions of the Global Fund for HIV, TB, Malaria, human rights, gender equity and community responses, and are strongly recommended by the Global Fund's technical partners such as the World Health Organization and UNAIDS, based on evidence as outlined in their technical guidelines.

The PEs are an opportunity for transgender and key population groups to ensure that all transgender programmatic elements, according to global technical guidance, are included in each country's Funding Request. There are also PEs for Human Rights and Gender Equity that transgender groups can advocate for.

With the GC7, countries will now be required to outline how advanced the country is in the implementation of each of the PEs. In situations where the introduction and acceleration of PEs have been prioritized in Funding Requests, the Global Fund will support these countries throughout the grant life cycle to ensure the achievement and sustainability of the introduction and acceleration of PEs.

The PEs for HIV can be found in Annex 1 of this Guide.

What can be funded for transgender programming?

In order to know what the priorities you as transgender groups would like to be included in the Funding Request, you first need to understand what can be funded in a Global Fund Funding Request. All interventions that can be included in the Funding Request, based on the PEs, are outlined in the Global Fund's *Modular Framework Handbook*. It is important that when you as the transgender community comes together to prioritize the interventions to be included in the Funding Request, that interventions only come from the Modular Framework in order for them to be considered by the Global Fund.

For example, this table indicates interventions that the Global Fund will consider:

Module	Intervention	Scope of Intervention Package – Illustrative List of Activities
Preventions Package for Transgender People and their Sexual Partners	Removing human rights-related barriers to prevention for transgender people	Activities related to removing human rights-related barriers to prevention, screening and response to physical, emotional and gender-based violence for transgender people. For example: ■ Anti-transphobia campaigns, access to justice and linkages to other services. ■ Documenting violence and other human rights violations and referral to redress and support. ■ Community-led and other advocacy for reform of laws, policies and practices that hinder effective prevention among transgender people. ■ Assessments of the gender-responsiveness of all prevention programming for transgender people and activities to change programming. ■ Participation of transgender people in activities to sensitize/train law enforcement and health providers. ■ Crisis prevention & response.

Source: *Modular Framework Handbook,* page 72[18]

18 Global Fund (2022). *Modular Framework Handbook*. Available at: https://www.theglobalfund.org/media/4309/fundingmodel_modularframework_handbook_en.pdf

To make information more easily accessible, we have extracted all the interventions related to transgender people from the Global Fund's *Modular Framework Handbook* in Annex 2. For each of the priority areas for your community, find the intervention that can be included in the Funding Request. These can be included in the mandatory annex of Funding Priorities for Civil Society and Communities.

2. Annex of Funding Priorities of Civil Society and Communities

The Annex of Funding Priorities of Civil Society and Communities is a new tool introduced in GC7 to document the highest priority interventions identified by communities and civil society in the Country Dialogue Process. This is a mandatory document that must be included in all Funding Request applications. The Global Fund will use the Annex to assess how community needs were included in the Funding Request, and to assess the effectiveness of the Country Dialogue Process itself.

The Annex can include up to 20 priorities combined across communities and civil society in a country for all the disease components. This means that in the Country Dialogue process, communities from different constituencies and disease areas need to agree on the 20 interventions overall that have the greatest potential to impact reducing barriers in accessing services and are therefore the greatest priorities.

In filling out the Annex document, countries need to include a shared and brief description of each intervention from the *Modular Framework Handbook*:

- problem statement
- evidence-based rationale
- expected impact or outcome, and, if possible,
- estimated costings for the intervention.

The Global Fund has developed a Frequently Asked Questions (FAQs) document relating to the Annex.[19]

19 Global Fund (2023). *Annex of Funding Priorities of Civil Society and Communities Frequently Asked Questions.* Available at: https://gate.ngo/annex_funding-priorities-of-communities-and-civil-society_faq/

Once you know your own priorities and the priorities of all communities and civil society in your country, you can proactively advocate with CCM members and the Writing Team to ensure that your priorities are included in the 20 agreed upon interventions in the Annex to the Funding Request. Once the Funding Request is prepared, all CCM members need to sign off on the Funding Request. Work closely with your CCM representative (if there is not a transgender representative, work with the Key Population or PLHIV representatives) to ensure that your non-negotiable priority interventions are included. If you are not satisfied with the interventions agreed upon and included in the Funding Request, you can ask your CCM representative to refuse to sign off on the Request until your concerns are addressed.

Costing of community interventions and priorities

Determining the cost of each of your priority interventions is very important. Interventions are often left out of consideration by the Global Fund when they are not properly costed. In order to ensure that all interventions are considered, the Global Fund has developed a Costing Guide for Civil Society and Community Priorities in NFM4[20] (now called GC7), and a Community Priorities Budgeting Tool[21] to support communities in costing their priorities. Because costing can be complex, the Global Fund has provided technical support and technical assistance to communities so that they can access and hire a consultant to carry out the costing. This assistance is available through the Global Fund's Technical Assistance on Community, Right and Gender[22] publication.

20 Frontline AIDS (2022) *Costing Guide for Civil Society and Community Priorities in NFM 4.* Available here: https://gate.ngo/wp-content/uploads/2023/03/Frontline_AIDS-Costing_Guide-FINAL.pdf
21 Frontline AIDS (2022) *Civil Society and Community Interventions Costing Tool for Global Fund Funding Requests.* Available here as a Microsoft Excel download: https://gate.ngo/wp-content/uploads/2023/03/Frontline_AIDS-Costing_Tool-FINAL.xlsx
22 Global Fund (n.d.) *Technical Assistance on Community, Rights and Gender.* Available here: https://www.plataformalac.org/en/2022/07/community-engagement-si-short-term-technical-assistance-for-nfm4/

3. Human rights and gender assessments

Although Human Rights Assessments and Gender Assessments of countries have long existed, the Global Fund's Sustainability, Transition and Co-Financing Policy as part of the GC7 now requires that should any country have any Human Rights or Gender Assessments underway, they are now required to be attached to the Funding Request. There are many types of these Assessments that may have been undertaken in your country, including:

- HIV Legal Environment Assessment
- HIV Gender Assessment
- Mid-Term Assessment of Global Fund Breaking Down Barriers Initiative
- Assessment of Human Rights and Gender-Related Barriers to Access at Service Delivery Points.

As the TRP will now receive the Assessments as part of the application package, they will ensure that each country's Funding Request responds to the findings and recommendations of these Assessments.

Actions for transgender groups:

- Find out if any Human Rights and Gender Assessments have been done in your country. Unfortunately, the Assessments are not all available publicly. You can find out whether your country has done these Assessments from your UNAIDS office.
- Review the findings and recommendations of the Assessments and advocate for programming that responds to these to be included in the Funding Request.
- Read more about the Global Fund's Human Rights and Gender Assessments.[23]

23 Global Fund (n.d.) "Human Rights and Gender." Available here: https://www.theglobalfund.org/en/funding-model/throughout-the-cycle/community-rights-gender/

4. Gender equality marker

As part of implementing the goals related to gender equality outlined by the Global Fund, a Gender Equality Marker (GEM) has been introduced to evaluate the extent to which the Funding Request addresses gender equality. The GEM is also aimed at increasing each country's investments in gender-responsive and gender-transformative programming over time. The Global Fund and the TRP will use the GEM to identify strengths, weaknesses and trends, and then to broker support and capacity building for the country so that the country can adapt and strengthen its approach to gender equality.

The GEM is a 3-point scoring system that identifies whether gender equality is:

- a principal focus of the Funding Request and fundamental in the design and expected results
- a significant focus of the Funding Request, but not a primary reason for undertaking the project or program, and is
- not targeted at all within the Funding Request.

The scoring is based on:

- the availability of a Gender Assessment
- the extent to which this Assessment informs interventions and expected results included within the Funding Request
- the extent to which sex- and gender-disaggregated data is collected and used, and
- whether there is a commitment to use collected data to inform program design and adaptation.

It is important to note that these principal scores are not necessarily better than significant scores, as outlined in the table below.

Score	Global Fund Minimum Criteria
Not targeted (Score 0): Any Funding Request that does not meet Significant or Principal criteria.	It is strongly recommended that all Funding Requests are informed by gender analysis, so at a minimum the Global Fund investment does no harm and does not reinforce gender inequalities.
Significant (Score 1): Gender equality is not the principal reason for undertaking the project/ program but is an important and deliberate part of the intervention.	■ A Gender Assessment has been conducted relevant to each disease component in the Funding Request. ■ The findings of the Gender Assessment have informed the Funding Request. ■ The Funding Request includes at least one intervention explicitly contributing to advancing gender equality. ■ Data and indicators are disaggregated by sex and/or gender, where applicable. ■ A commitment to routinely collect and analyze sex and/or gender disaggregated data to inform program design, adaptation, and understanding of performance.
Principal (Score 2): Gender equality is a contributory objective of the project/program and is fundamental to its design and expected results.	■ A Gender Assessment has been conducted relevant to each disease component in the Funding Request. ■ The findings of the Gender Assessment have informed the Funding Request. ■ The Funding Request includes at least 3 interventions that explicitly contribute to the advancement of gender equality, with at least 1 intervention specific to transgender populations. ■ One of the main ambitions of the Global Fund investment is to advance gender equality. ■ Performance for the majority of interventions is being measured with sex and/or gender disaggregated indicators. ■ A commitment to routinely collect and analyze gender disaggregated data to inform program design, adaptation, and understanding of performance.

Source: *Applicant Handbook 2023-2025 Allocation Period,* page 26[24]

24 Global Fund (2022). *Applicant Handbook 2023-2025 Allocation Period,* page 26. Available at: https://www.theglobalfund.org/media/4755/fundingmodel_applicanthandbook_guide_en.pdf

Step 4: Incorporate feedback from the Technical Review Panel

Once the Funding Request has been submitted, the next phase is Grant Negotiation. The Global Fund's TRP will review the Funding Request to ensure that it is aligned with global technical guidance, the Program Essentials, and that communities were meaningfully involved in the Funding Request Process. The TRP will then make recommendations to improve the Funding Request, which the CCM needs to incorporate.

Unfortunately, there is no community participation in the TRP review. However, the Global Fund's Minimum Expectations for Community Engagement requires the CCM to publish the recommendations of the TRP.

Actions for transgender groups:

- Read the recommendations of the TRP carefully and check if any changes have been recommended for your priority interventions. If so, prepare to advocate for the inclusion of your priority with your CCM representatives before the final Funding Request is submitted.
- Verify that changes have been made to the Funding Request based on the TRP's recommendations.

Step 5: Decision from Grant Approvals Committee

The Grant Approvals Committee (GAC) decides on the upper ceiling (highest amount possible) for the Global Fund grant, based on the Funding Request. The GAC is made up of technical and bilateral partners, and senior Global Fund staff.

Actions for transgender groups:

- Ensure that the decision of the GAC has been communicated to you by your CCM, and that you understand the implications for transgender groups.

Step 6: Undertake process of grant making

The Global Fund's Community Engagement Minimum Expectations 2 outlines that the CCM will convene at least two meetings during grant making, including the Principal Recipient briefing on revisions to the Funding Request and on implementation arrangements, including community-based and community-led implementation.

At this stage of the process, the CCM and the Global Fund work with the Principal Recipient (PR).[25] The Global Fund assesses the PR, and then the PR and the Global Fund work together to develop the performance framework, detailed budget, work plan, procurement and supply management plan, and implementation map. This is a crucially important stage, as this is where interventions can be cut, deprioritized, or not funded.[26]

25 Global Fund (n.d.) "Implementing Partners". Available here: https://www.theglobalfund.org/en/implementing-partners/#:~:text=Principal%20Recipients%20are%20selected%20by,agreement%20with%20the%20Global%20Fund

26 GATE (2020). *Integration of the Trans Community in Oversight of Global Fund Processes: A Guide for the Community, Principal Recipients and Country Coordinating Mechanisms.* Available at: https://gate.ngo/wp-content/uploads/2020/04/Guidelines-for-Trans-GF.pdf

Actions for transgender groups:

- Ensure that you attend the PR briefing on revisions to the Funding Request and implementation arrangements meetings held by the CCM, and advocate for your priorities.
- Throughout this process, the transgender representative should be involved in and informed of any major changes that will affect the community and the overall grant, so ensure that this happens.

Step 7: Board approval

Once the grant making is completed, the grant documentation undergoes a final review by the GAC before being sent to the Board for approval. Once approved, the grant is then signed, and the first disbursement is made to the PR. All members of the CCM, including members of the key population community, such as transgender persons, should be informed about this announcement.

Actions for transgender groups:

- Ensure that you remain informed about the process by asking your CCM representatives or the Communities Delegation to the Global Fund Board.[27]
- Once the grant is approved, ensure that you and your community understand what has been agreed upon in the grant, and monitor implementation.

27 More information about the Communities Delegation to the Global Fund Board is available here: https://communitiesdelegation.org/

Section D:

Key Resources to Support Transgender Groups in GC7

Section D: Key Resources to Support Transgender Groups in GC7

There are many resources that you as transgender groups can use to support your advocacy and engagement in GC7. This Guide summarizes the key points and links to several references, but you can find more detailed information in these resources:

Resource	Usefulness
GATE (2020). *Integration of the Trans Community in Oversight of Global Fund Processes: A Guide for the Community, Principal Recipients and Country Coordinating Mechanisms.*	Understanding how transgender groups can engage with the Global Fund generally.
Global Fund (2023). *Annex of Funding Priorities of Civil Society and Communities Frequently Asked Questions.*	Provides all the information needed about the Community Annex.
Global Fund (2023). *Community Engagement Toolbox: Resources from Partners of the Global Fund Community Engagement Strategic Initiative.*	Includes many useful guides and tools for transgender communities for various Global Fund processes and is updated from time to time.
Global Fund (2022). *Community Engagement: A Guide to Opportunities Throughout the Grant Life Cycle.*	Outlines all the opportunities for transgender communities to engage in GC7 and has useful sections. The "Ten Stumbling Blocks: What Inhibits the Engagement of Communities" section on page 8 outlines barriers to communities effectively engaging in the grant making process. The "Questions and Answers: Ten Recurring Queries" section on page 18 is also useful.
Global Fund (2022). *Modular Framework Handbook.*	This document outlines all interventions that can be included in the Funding Request.

Section E:

Annexes

Section E: Annexes

The following annexes have been added to this Guide to aid you in your interactions with your CCM:

- Annex 1: HIV Program Essentials, Table 2.
- Annex 2: List of Interventions Related to Trans Programming in the Global Fund's *Modular Framework Handbook.*

Annex 1: HIV Program Essentials

Table 2. HIV Program Essentials:

*Note that **all** programming must be human rights-based, gender-responsive and informed by and respond to an analysis of inequities.*

HIV primary prevention	1. Condoms and lubricants are available for all people at increased risk of HIV infection. 2. Pre-exposure prophylaxis (PrEP) is available to all people at increased risk of HIV infection, and post-exposure prophylaxis (PEP) is available for those eligible. 3. Harm reduction services are available for people who use drugs. 4. Voluntary medical male circumcision (VMMC) is available for adolescent boys (15+ years) and men in WHO/UNAIDS VMMC priority countries.
HIV testing and diagnosis	5. HIV testing services include HIV self-testing, safe ethical index testing and social network-based testing. 6. A three-test algorithm is followed for rapid diagnostic test-based diagnosis of HIV. 7. Rapid diagnostic tests are conducted by trained and supervised lay providers in addition to health professionals.
Elimination of vertical transmission	8. Antiretroviral therapy (ART) is available for pregnant and breastfeeding women living with HIV to ensure viral suppression. 9. HIV testing, including early infant diagnosis (EID) is available for all HIV-exposed infants.
Continued on following page...	

Source: Global Fund's *HIV Information Note,* page 14, Table 2[28]

28 Global Fund (2022). *Information Note: HIV Information Note – Allocation Period 2023–2025*, p. 14, Table 2. Available at: https://www.theglobalfund.org/media/4765/core_hiv_infonote_en.pdf

HIV treatment and care	10. Rapid ART initiation follows a confirmed HIV diagnosis for all people irrespective of age, sex or gender. 11. HIV treatment uses WHO recommended regimens. 12. Management of advanced HIV disease is available. 13. Support is available to retain people across the treatment cascade including return to care. 14. CD4 and viral load testing, and diagnosis of common comorbidity and coinfections are available for management of HIV.
TB/HIV	15. People living with HIV with active tuberculosis (TB) are started on ART early. 16. TB preventive therapy is available for all eligible people living with HIV, including children and adolescents.
Differentiated service delivery (DSD)	17. HIV services (prevention, testing, treatment and care) are available in health facilities, including sexual and reproductive health services, and outside health facilities including through community, outreach, pharmacy and digital platforms. 18. Multi-month dispensing is available for ART and other HIV commodities.
Human rights	19. HIV programs for key and vulnerable populations integrate interventions to reduce human rights- and gender-related barriers. 20. Stigma and discrimination reduction activities for people living with HIV and key populations are undertaken in health care and other settings. 21. Legal literacy and access to justice activities are accessible to people living with HIV and key populations. 22. Support is provided to efforts, including community-led efforts, to analyze and reform criminal and other harmful laws, policies and practices that hinder effective HIV responses.

Annex 2: List of Interventions Related to Transgender Programming in the Global Fund's Modular Framework Handbook

6. HIV

6.1 Modules, interventions and illustrative list of activities

Prevention Package for Transgender People and their sexual partners		
Module	**Intervention**	**Scope and Description of Intervention Package: Illustrative List of Activities**
Prevention Package for Transgender People and their Sexual Partners	Condom and lubricant programming for transgender people	Activities related to increasing condom use among transgender people, including virtual interventions. For example: ■ Promotion and distribution of condoms and condom-compatible lubricants. ■ Targeted condom distribution, including to non-traditional outlets. Information and communication on safer sex and condom use at community level, or through social media/web-based condom promotion. ■ Demand generation through peer outreach and other peer-based strategies. ■ Condom social marketing activities. ■ Integration with and referrals to other HIV prevention and HIV testing services. ➔ **Procurement of condoms and lubricants for TGs should be included here.** ➔ **Community level surveys and studies to examine barriers to condom use should be included under the module "RSSH: Monitoring and Evaluation Systems".**
Continued on following page...		

Source: Global Fund's *Modular Framework Handbook*,[29] p 63, with the section of the table relating to transgender populations on pages 69–72.

29 Global Fund (2022). *Modular Framework Handbook*, p. 63; pp 69–72. Available at: https://www.theglobalfund.org/media/4309/fundingmodel_modularframework_handbook_en.pdf

Prevention Package for Transgender People and their sexual partners	Pre-exposure prophylaxis (PrEP) programming for transgender people	Activities, including virtual interventions, related to Pre-Exposure Prophylaxis (PrEP) for transgender people at substantial risk of HIV infection. For example: ■ Design and delivery of PrEP program, including planning, determining eligibility, and service delivery requirements. ■ Adherence support, including peer led. ■ PrEP information and demand creation, including peer-based approaches. ■ Referrals to HIV/STI prevention, testing, treatment, care and clinical monitoring, hepatitis B vaccination, other primary health care (PHC) services. ➔ **Procurement of PrEP commodities, including different formulations such as oral (daily and event driven), vaginal ring and injectable, should be included here.**
Prevention Package for Transgender People and their Sexual Partners	HIV prevention communication, information and demand creation for transgender people	Activities, including virtual interventions, related to individual-level and community-level behavioral interventions for the promotion of personal preventive/ adaptive strategies for transgender people and use of HIV prevention options. It includes promotion of condom use, PrEP, HIV testing, safer sex, violence protection, HIV positive partner virally suppressed. For example: ■ Development of Information, Education and Communication (IEC) materials. ■ Targeted internet-based information, education, communication, including social media. ■ Social marketing-based information, education, communication. ■ Venue-based outreach. ■ One-on-one and group risk reduction activities. ■ Program design, delivery and related training. ■ IEC activities for young transgender people, focusing on uptake of prevention options and skills-based risk reduction (including at clubs, festivals and other non-traditional settings). ➔ **Activities related to integrated (multiple prevention options) communication, information and demand creation should be budgeted here.** ➔ **Communication, information and demand creation for specific prevention interventions (e.g., PrEP, condoms) should be budgeted under these specific interventions.**

Continued on following page...

Prevention Package for Transgender People and their Sexual Partners	Community empowerment for transgender people	Activities related to enhancing community empowerment. For example: ■ Community mobilization. ■ Training on HIV, sexual and reproductive health and sexuality. ■ Capacity development for transgender-led organizations. ■ Provision of safe spaces. ■ Community surveys, including participatory assessment of community needs for program design. ■ Community roundtables and dialogue. ■ Community involvement in service delivery, monitoring, data collection. ■ Participation in technical working groups, national, provincial and local decision-making fora.
Prevention Package for Transgender People and their Sexual Partners	Sexual and reproductive health services, including STIs, hepatitis, post-violence care for transgender people	Activities related to sexual health service provision. For example: ■ Screening, testing and treatment of asymptomatic STIs, including periodic serological testing for syphilis infection, gonorrhea, chlamydia trachomatis. ■ Prevention, screening, testing and treatment for hepatitis B and C. Referrals to vaccination for hepatitis B. ■ Integration of and referrals to hormone therapy as part of HIV service package. ■ Routine STI check-ups. ■ Contraception/family planning information and services. ■ Pregnancy testing. ■ Syndromic and clinical case management for patients with STI symptoms. ■ Delivery of anal health care, including anal cancer screening and linkages. ■ Integration of HIV prevention and sexual and reproductive health services, drop-in centers, shelters, community centers, including youth-friendly services. ■ Post-violence counseling, referral and linkages to post exposure prophylaxis (PEP), clinical investigations, medical management, clinical care, forensics management and medical-legal linkages, psychosocial support, including mental health services and counselling. ■ Gender affirming care.

Continued on following page...

Prevention Package for Transgender People and their Sexual Partners	Removing human rights-related barriers to prevention for transgender people	Activities related to removing human rights-related barriers to prevention, screening and response to physical, emotional and gender-based violence for transgender people. For example: ■ Anti-transphobia campaigns, access to justice and linkages to other services. ■ Documenting violence and other human rights violations and referral to redress and support. ■ Community-led and other advocacy for reform of laws, policies and practices that hinder effective prevention among transgender people. ■ Assessments of the gender-responsiveness of all prevention programing for transgender people and activities to change programing. ■ Participation of transgender people in activities to sensitize/train law enforcement and health providers. ■ Crisis prevention & response. ➔ **"General" activities (not HIV prevention/key population specific) related to reducing human rights-related barriers to TB/HIV services should be included in the module "Reducing Human Rights-related Barriers to HIV/TB Services".**
Differentiated HIV Testing Services	Facility-based testing for key population (KP) programs	Activities related to HIV testing services and return of results provided in a health facility or laboratory setting, such as, facilities providing antenatal care (ANC), TB related services, sexual and reproductive health services, in-patient and outpatient primary health care clinics, and voluntary medical male circumcision (VMMC) services. For example: ■ Lay provider testing and counseling, including assisted partner notification and index testing. ■ HIV testing in family planning clinics, KP-friendly clinics, such as drop-in centers. ■ Linkage to HIV treatment and care for people who are found to be HIV positive, risk assessment and linkage to prevention services for those found to be negative.
Continued on following page...		

Differentiated HIV Testing Services	Community-based testing for KP programs	Activities related to HIV testing services provided in a community setting. For example: ■ Outreach/mobile (including index-testing), door-to-door, fixed community sites, workplace, and HIV testing in educational institutions. ■ Test for triage to support community-based HIV testing services provided by lay providers. ■ Activities for demand creation and mobilization of HIV testing, such as virtual interventions, motivational interviewing and self-efficacy-focused counseling, educational programs and campaigns, peer norming or comparisons, peer mentorship and navigation, community mobilization and empowerment and incentives. ■ Linkage to HIV treatment and care/for people who are found to be HIV positive, risk assessment and linkage to prevention services for those found to be negative.
Differentiated HIV Testing Services	Self-testing for KP programs	Activities related to HIV testing and results interpretation performed by key populations who want to know their HIV status using self-test kits distributed through facility and community settings, social networks, partners (including index-testing), private sector (pharmacies, online, vending machines) and workplace. For example: ■ Procurement and distribution of self-test kits. ■ Linkages to confirmatory test and return of results starting from the first test in the national algorithm for those with a reactive test result. ■ Virtual services for demand creation and online order.
Reducing Human Rights-related Barriers to HIV/TB Services	Legal literacy ("Know Your Rights")	Activities related to increasing people's knowledge of their rights and mobilization around them. For example: ■ Community-level legal empowerment efforts, including "Know-Your Rights" and legal literacy trainings, for people living with HIV and/or TB, key populations, indigenous populations, people in prisons and other incarcerated people, migrants, refugees, and women and girls, particularly AGYW. ■ Development and dissemination of communication materials on patient rights and other human rights. ■ Integration of human rights and legal literacy into peer educator trainings, including peer human rights educators. ■ Integration of human rights and legal literacy into key populations outreach and treatment literacy. ■ Establishment of crisis response mechanisms to prevent abuse, including gender-based violence.

Continued on following page...

Reducing Human Rights-related Barriers to HIV/TB Services	Ensuring nondiscriminatory provision of health care	Activities related to ensuring health care settings are places of welcome, acceptance, care and support for those at risk of and affected by HIV. For example: ■ Development and integration of training materials on how to provide rights-based, gender-sensitive and people-centered services into pre- and in-service training of all health-care providers. ■ Pre- and in-service training of health care providers, including facility and non-facility based, health care administrators and health care regulators on patient rights, non-discrimination, duty to treat, informed consent and confidentiality, violence prevention and treatment. ■ Collaboration between health care facilities and community organizations for patient support and quality control. ■ Engagement of paralegals into health facilities to provide on-site guidance and legal literacy. ■ Development of institutional policies and accountability mechanisms for health care facilities. ■ Periodic and ongoing community-led and community-based monitoring, including "mystery shoppers", suggestion boxes, and exit surveys. ➔ **Qualitative assessments of attitudes of healthcare providers including pre- and post-intervention assessments should be included under the module "RSSH: Monitoring and Evaluation Systems".**
Continued on following page...		

Reducing Human Rights-related Barriers to HIV/TB Services	Increasing access to justice	Activities related to increase access to justice for people living with HIV and/or TB, key populations, indigenous populations, people in prisons and other incarcerated people, migrants, women and girls, particularly AGYW. For example: ■ Legal information, referrals, advice and representation related to HIV and HIV/TB, including developing and supporting pro bono legal networks and covering ancillary costs. ■ Engagement of national legal aid board/agencies, and human rights/legal organizations to expand pro bono legal services and/or legal aid clinics to include HIV and TB-related legal services. ■ Establish or expand peer/community paralegals and evaluate the extent and content of their HIV & TB work. ■ Legal services and counselling for women and girls in all their diversity. ■ Support to alternative and community forms of dispute resolution, including engagement of traditional leaders and customary law in support of people affected by HIV and HIV/TB. ■ Support strategic litigation to reform harmful laws and policies. ■ Community-led and community-based monitoring of share of stigma, discrimination and other rights violations referred for redress. Strengthen linkage of community-led monitoring (CLM) to legal counselling and support. ■ Hotlines and other rapid response mechanisms in cases of HIV and TB-related rights violations.
Continued on following page...		

Reducing Human Rights-related Barriers to HIV/TB Services	Ensuring rights-based law enforcement practices	Activities related to ensuring rights-based law enforcement practices. For example: ■ HIV, TB and human rights trainings for law enforcement officers (police, judges, prison staff) and support participation of KVPs in trainings. ■ Development and integration of training materials into the pre- and in-service training for police. ■ Assessments of attitudes of police, judges, prison staff, including pre- and post-intervention assessments. ■ Support community-led monitoring of human rights violations in context of policing and prison practices. ■ Establish working committee/groups with KP communities and local police focal persons to improve policing practices. ■ Sensitization of judges on HIV, TB and human rights. ■ Training of prison personnel (both in prisons for women and men) on public health, human rights and HIV and HIV/TB responses. ➔ **Qualitative assessments of attitudes of police, judges, prison staff including pre- and post-intervention assessments should be included under the module "RSSH: Monitoring and Evaluation systems".**
Reducing Human Rights-related Barriers to HIV/TB Services	Improving laws, regulations and polices relating to HIV and HIV/TB	Activities related to improving laws, regulations and polices relating to HIV and HIV/TB. For example: ■ Assessments of the legal and policy environment. ■ Development of action plans for law and policy reform based on the assessments. ■ On-going monitoring of law and policy development and implementation. ■ Advocacy and mobilization of capacity for law and policy reform, including supporting community leadership and engagement in reviewing and drafting laws and policies related to HIV and TB support activities to inform and sensitize parliamentarians and ministers of justice, interior, corrections, finance, industry, labor, education, immigration, housing, health and trade, and religious and traditional leaders on law and policy reform, and ensure community engagement in these activities. ■ Engagement of parliamentarians in human rights and the role of protective legal framework in the HIV and TB response.

Continued on following page...

Reducing Human Rights-related Barriers to HIV/TB Services	Reducing HIV-related gender discrimination, harmful gender norms and violence against women and girls in all their diversity	The following programs and activities should be designed and implemented to be gender responsive. Activities to reduce gender discrimination, harmful gender norms and violence. For example: ■ Reform of family, property, inheritance and custody laws. ■ Community consultations to identify specific gender-related barriers to accessing HIV/TB services. ■ Meaningful engagement, community-led advocacy and leadership of women in all their diversity.
Reducing Human Rights-related Barriers to HIV/TB Services	Improving laws, regulations and polices relating to HIV and HIV/TB	Activities related to improving laws, regulations and polices relating to HIV and HIV/TB. For example: ■ Assessments of the legal and policy environment. ■ Development of action plans for law and policy reform based on the assessments. ■ On-going monitoring of law and policy development and implementation. ■ Advocacy and mobilization of capacity for law and policy reform, including supporting community leadership and engagement in reviewing and drafting laws and policies related to HIV and TB support activities to inform and sensitize parliamentarians and ministers of justice, interior, corrections, finance, industry, labor, education, immigration, housing, health and trade, and religious and traditional leaders on law and policy reform, and ensure community engagement in these activities. ■ Engagement of parliamentarians in human rights and the role of protective legal framework in the HIV and TB response.
Continued on following page...		

Reducing Human Rights-related Barriers to HIV/TB Services	Reducing HIV-related gender discrimination, harmful gender norms and violence against women and girls in all their diversity	The following programs and activities should be designed and implemented to be gender responsive. Activities to reduce gender discrimination, harmful gender norms and violence. For example: ■ Reform of family, property, inheritance and custody laws. ■ Community consultations to identify specific gender-related barriers to accessing HIV/TB services. ■ Meaningful engagement, community-led advocacy and leadership of women in all their diversity. ■ Sensitization and engagement of community, religious and opinion leaders on gender-based violence, harmful gender norms and traditional practices. ■ Supporting women's groups to raise awareness of HIV and TB-related rights and to monitor violations and advocate for change. ■ Monitoring of HIV and/or TB-related violations against women and young people.
Reducing Human Rights-related Barriers to HIV/TB Services	Community mobilization and advocacy for human rights	Activities related to community mobilization and advocacy for human rights. For example: ■ Community-led advocacy for law and policy reform, particularly decriminalization. ■ Community leadership and engagement in efforts to monitor and reform laws that relate to HIV and TB. ■ Community-led monitoring of law and policy implementation. ■ Community-led outreach campaigns to address harmful gender norms and stereotypes and other gender and human rights-related barriers. ➔ **Applicants must mention specific communities in the activity description in the detailed budget.**

Resilient and Sustainable Systems for Health (RSSH)

Module	Intervention	Scope and Description of Intervention Package: Illustrative List of Activities
RSSH: Community Systems Strengthening	Community-led monitoring	Activities related to accountability mechanisms led and implemented by local community-led organizations to improve accessibility, acceptability, affordability, quality (AAAQ) and impact of health services. For example: ■ Development of national community-led monitoring frameworks and strategies for public health facilities, private facilities and in community-based settings (e.g., observatories, alert systems. Surveys, Scorecards, health policy, budget and resource tracking and/or complaint and grievance mechanisms). ■ Implementation of community-led monitoring of barriers to accessing services. ■ Piloting of new community-led monitoring mechanisms and programs for learning and refinement. ■ Tools and equipment including appropriate technologies for data management and storage. ■ Technical support and training: e.g., indicator selection, data collection, collation, cleaning and analysis, development or adaptation of data collection tools, using community data to inform programmatic decision-making and advocacy, informed consent, ethics approval, etc. ■ Presentation and discussion of community-led monitoring data and recommendations in various governance structures, oversight mechanisms and other decision-making fora. ➔ **Community-led monitoring is complementary to routine program monitoring. Routine monitoring and evaluation related activities should be included under the module "RSSH: Monitoring and Evaluation Systems".** ➔ **Activities for intermittent community-led data collection activities such as surveys, assessments, research and ad hoc troubleshooting, should be included in the intervention "Community-led research and advocacy".** ➔ **Engagement of community actors in decision-making fora should be included in the intervention "Community engagement, linkages and coordination".**
Continued on following page...		

Source: *Modular Framework Handbook,* pp. 13–20[30]

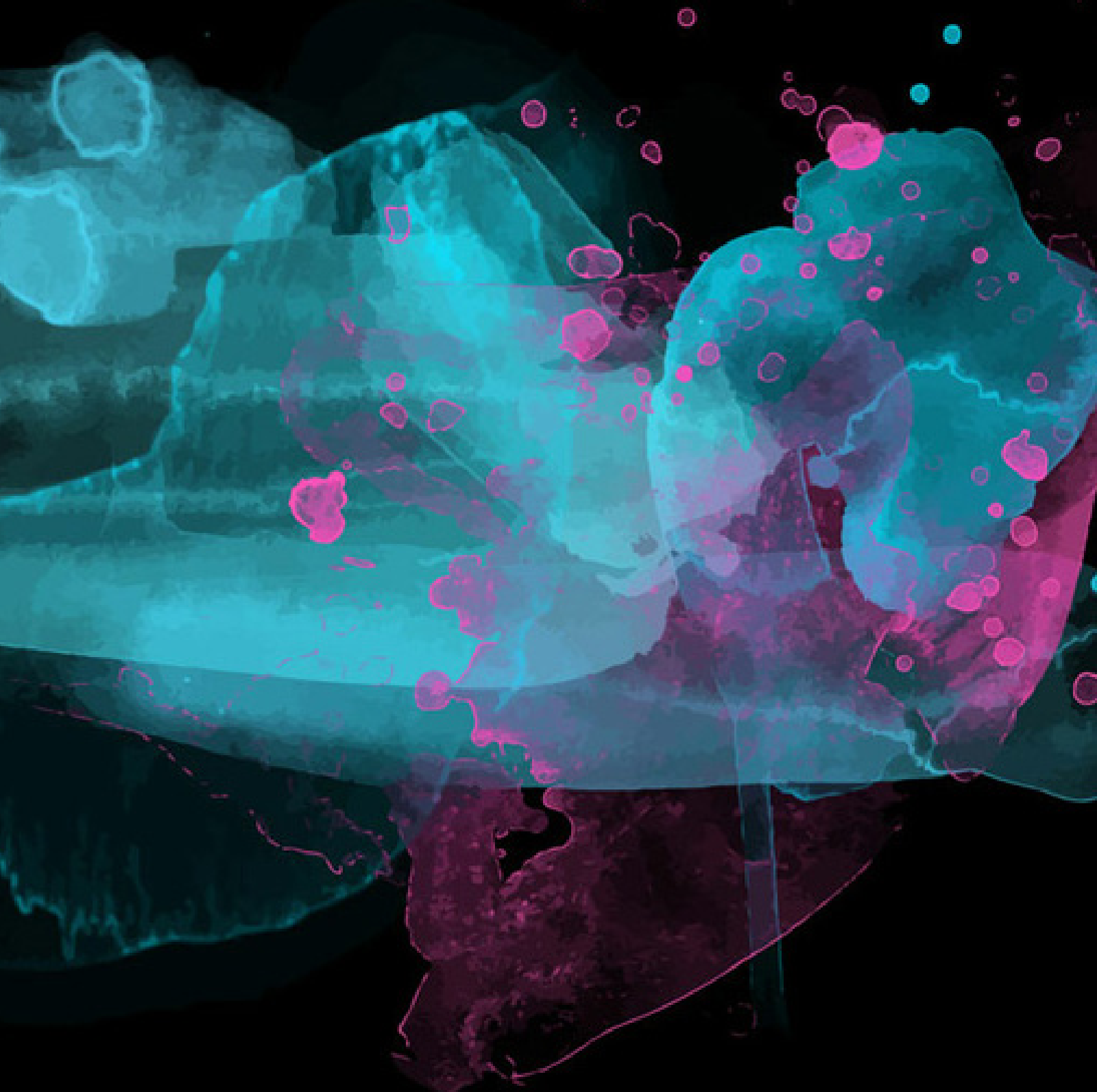
30 Global Fund (2022). *Modular Framework Handbook*, pp 13–20. Available at: https://www.theglobalfund.org/media/4309/fundingmodel_modularframework_handbook_en.pdf

RSSH: Community Systems Strengthening	Community-led research and advocacy	Activities to support local-, provincial-, national- and/or regional-level advocacy led by community organizations, networks and civil society actors, particularly those representing marginalized, under-served and key and vulnerable populations. Advocacy activities can relate to health services, disease-specific programs, human rights violations, including stigma and discrimination and confidentiality. age and gender inequities. sustainable financing. and legal and policy reform. For example: ■ Qualitative, quantitative and operational community-led research and the production, publication and dissemination of reports and communication materials. ■ Community-led mapping of legal, policy and other barriers that hinder/limit community responses (including barriers that impede registration, funding of community organizations). ■ Community-led situational analyses or participatory needs assessments. ■ Assessments of program implementation (e.g., shadow reports). ■ Advocacy to sustain/scale-up access to services among key and vulnerable populations. ■ Technical support and training to develop and undertake campaigns, advocacy and lobbying for improved health services and/or enabling environments. ■ Community-led advocacy activities, such as using community-led monitoring data to influence decision-making around, laws, regulations or policies that limit the registration and/or operation of community organizations, engagement and representation in policy processes, accountability mechanisms and processes and in the development of local, regional and national health and disease-specific strategies and plans, community health and UHC. ➔ **Activities that enable public financing of civil society organizations, including social contracting mechanisms, should be included under the module "RSSH: Health Financing Systems".** ➔ **Activities related to non-community-led legal environment assessments and advocacy for legal and policy reform, should be included under respective disease and RSSH modules.**
Continued on following page...		

RSSH: Community Systems Strengthening	Community engagement, linkages and coordination	Activities to mobilize communities, particularly of marginalized, under-served and key and vulnerable populations, in responses to the three diseases, barriers to accessing health and other social services, social determinants of health and progress towards Universal Health Coverage (UHC) and the realization of the Sustainable Development Goals (SDGs). For example: ■ Building community capacity on the use of appropriate new information communication and coordination tools and technologies, including digital tools. ■ Community-led development/revision of strategies, plans, tools, resources and messages for social mobilization. ■ Mapping of community-led and community-based organizations and networks and their service packages. ■ Creation and/or strengthening of platforms that improve coordination, joint planning and effective linkages between communities and formal health systems, other health actors and broader movements such as human rights and women's movements. ■ Establishing or strengthening formal agreements between community-led service providers and health facilities or private health service providers, linkages with community health worker associations, joint outreach activities and bi-directional referral mechanisms between health and community-led service delivery points. ■ Representation, participation and engagement of community actors in high-level health advisory or governing bodies, oversight committees (including clinic health committees), disease councils and other decision-making fora. ➔ **Disease-specific community mobilization activities should be included under the relevant disease module.** ➔ **Support for country coordinating mechanisms (CCMs) or community representation/engagement on CCMs should not be included in country grants.**
Continued on following page...		

RSSH: Community Systems Strengthening	Capacity building and leadership development	Activities related to the establishment, strengthening and sustainability of civil society organizations, especially those that are community-led (informal and formal), key population-led, women-led, led by people living with or affected by the three diseases, community networks and associations. For example: ■ Capacity building and mentorship of community organizations. ■ Capacity strengthening (technically and programmatically) to deliver high quality integrated community-led and community-based health services. ■ Small grants to community-led organizations to increase their capacity in health service delivery, social mobilization, community-led monitoring, community-led research and advocacy, understanding labor rights and social dialogue, etc. ■ Development of strategy, governance and policy documents for community organizations, such as human resource policies, resource mobilization strategies and social dialogue strategies, etc. ■ National- or regional-level peer-learning initiatives. ■ Legal registration of community organizations, especially those led by and/or working with marginalized populations, including preparation and/or revision of necessary documents. ■ Development and/or revision of tools and other forms of support for community organizations and networks to assess capacity and develop appropriate capacity building plans. ■ Infrastructure (furniture and equipment) and core costs of community organizations and networks to support/strengthen service provision, social mobilization, community monitoring and advocacy, organizing and social dialogue.
Continued on following page...		

RSSH: Health Financing Systems	Social contracting	Activities related to establishing or strengthening mechanisms for public financing of provision of services by private sector (non-state actors), especially civil society/ community-led and -based organizations. For example: ■ Analysis of the legal and policy context. ■ Costing of services and implementation arrangements. ■ Tendering and selection processes. ■ Resolution of legal, administrative, political and resourcing (financing and human resources) bottlenecks for public financing of private sector (non-state actors), especially civil society organizations. ■ Developing technical capacity of government entities for outcome-based contracting to private sector, especially NGOs and CSOs in service delivery, issuing tenders, conducting transparent selection, monitoring, supervision and evaluating projects. ■ Strengthening institutional capacity of CSOs to engage with government and social contracting processes for tendering, planning, budgeting, managing and monitoring of implementation. ➔ **Activities related to broader private sector engagement should be included under the module "RSSH: Health Sector Planning and Governance for Integrated People-centered Services".**



vialibre | Regional Platform Latin America and the Caribbean

GATE

www.plataformalac.org | www.vialibre.org.pe

www.gate.ngo