

## **NOTES FOR THE RECORD**

**27th GIST meeting, New York November 24-25 2008**

### **Attendance:**

**Chair:** Steve Kraus (UNFPA); **Vice Chair:** Elmar Vinh –Thomas (Global Fund); Angela Trenton-Mbonde; Aina Helen Saetre (UNAIDS); Nadia Fuleihan (UNDP); Ambassador Jimmy Kolker; Thilly De Bodt (UNICEF); Brad Hersh (WHO); Jonathan Brown (World Bank); Tomas Kirsch-Woik (GTZ); Colin McIff (OGAC); Jason Wright (USAID); Lynette Lowndes; Paul McCarrick (International AIDS Alliance); Michael O'Connor (ICAD); Natalia Ciausova (ICASO) and Carlos Passarelli (ICTC)

**Co-ordinator:** Shona Wynd (UNAIDS)

### **Day 1:**

#### **Item 1: Welcome by GIST Chair**

Timely meeting after the GF Board meeting and just before the upcoming PCB meeting. Timely review of status of GIST work plan, start planning for further work and prepare for GIST intervention at PCB.

Welcomed two new member of GIST: Lynette Lowndes (Director: Field Programmes, AIDS Alliance) and Tomas Kirsch-Woik (GTZ).

Introduction

#### **Decision:**

Agenda approved.

#### **Item 2: GIST study of TS to GF Grant Implementation: status and presentation of first level findings**

Nine countries are covered by the study; Cambodia; Ethiopia, Haiti, India, Peru, Senegal, Ukraine, Vietnam and Zambia. Guna Rajaratnam (lead consultant) presented findings based on a study of four countries; Cambodia, Ethiopia, Peru and Ukraine. Two more countries (India and Senegal) will have completed their data collection in time to be included in the report for the PCB. The presentation was very well received by the GIST and it was agreed that the final report will provide empirical guidance on how to improve TS.

#### **Discussion:**

- The importance of supporting countries in articulating their needs and to move beyond the easy short-term response and address more difficult challenge of planning long term responses based on countries' knowledge of their epidemic, as well as the importance of relevant strategic information available for countries.
- The issue around quantum and flexibility of TS available was raised and it was argued that DoL should come into play when needed. In settings where the provision of TS is running smoothly, no need to change the system.
- TS varies from country to country, and according to what donor money is available. Important to get data in this area, a marketplace study is being carried out in ESA region.
- It was also agreed that the study needs to focus more on GF grant implementation support and achievements in this area. So far the study is yet to find any direct

instance of UN support to GF grant implementation stage except some work on M&E. The finding might be symptomatic for the situation, but at the same time reflecting that it is easier to identify proposal support, because of its concrete and time limited nature. Implementation support is more difficult to isolate because it overlaps with other areas of work and programmes.

- The issue of whether or not TS increases local capacity and improves performance was discussed, and the need for long term TS to build capacity was agreed.
- Despite the DoL, there is still a lack of clarity on who will provide TS in what area and the importance and sometimes lack of coordination from UNAIDS was discussed.
- Quality and effectiveness issues for the bi-laterals – varies from country to country. Key question; how can we use all this information to improve the way we work?

#### **Action:**

- 4+2 country study draft presented to GIST by December 8.
- GIST to provide feedback to Guna within 48 hours of receiving the draft.
- Guna to share final version with GIST on 12 December.
- Guna to identify countries where information collection is facing blockage and inform GIST.
- GIST members to contact blockage countries and encourage collaboration.
- GIST to contact all study countries and encourage collaboration.
- GIST secretariat to ask Guna to develop an executive summary of the report.
- Need for more stakeholder consultation. GIST members attending the Partnership forum to informally get feedback/take the pulse on the study. Need to promote and moderate the online discussion form through MyGlobalFund.org

#### **Decision:**

- The 12 December version of the study and an executive summary will be made available for the PCB

### **Item 3: Review of On-going and recently completed studies of Technical Support to AIDS programme implementation**

The study is based on a review of over 40 reviews and evaluation related to TS and TS providers (see annex 1 of review for details). The reviews and evaluations assessed are disparate in their design and focus. It was noted that there is need for more input from CSO in the review.

#### **Discussion:**

- The review shows that TS focuses on short-term over long term because it responds to immediate country need and is easier to address.
- The need for long term coordinated approaches to TS was highlighted.
- Mechanisms and functions to address the clear needs was discussed.
- The UCC's clearinghouse and coordination roles should be key priorities for the UCC. GF grant cycle support is another key area for the UCC. Other mechanisms are DoL, but this is often not operationalised in country.
- Examples of coordinated efforts are good fortune rather than planned.
- Another example is the TS Principles which are a step towards norm, but the principles need to be operationalised. Key question is how to do this?

- The need for providers to realign their core functions to support implementation of GF grants was also discussed, and this in the light of that GF will not in the near future (if ever) fund TS providers directly.
- The need for useful indicators which go beyond basic input and process indicators to track output and outcomes was emphasised.

**Action:**

- Written feedback to the consultant from GIST members on how to finalize review.
- OGAC to develop executive summary of annual evaluation on GMS (please find attached) and share with the consultant, will also share GMS evaluation with the consultant.
- Consultant to develop a 2 page executive summary of the review.
- Welcome further input from CSO.

**Decision:**

- The executive summary of the review will be made available for the PCB.

**Item 4: CoATS (Coordination of AIDS Technical Support database) update**

- Brief update on CoATS status and presentation of example of report from CoATS.
- CoATS rolled out to: GIST members, including TSFs and 10 countries: Bangladesh, Vietnam, Cambodia, Tanzania, Kenya, Ethiopia, Burkina Faso, Haiti, Guyana and Ukraine. Initial feedback from users at country level: (1) user-friendly and practical tool, (2) support the coordination of TS and (2) important to get buy-in from all relevant partners to make it work. UCCs in Cambodia, Bangladesh, Vietnam and Tanzania have reported that they are in discussions with national AIDS authorities and other country partners (UN, TSFs and bi-laterals) around implementation.

**Action:**

- Monitor 10 country roll out, decide further roll out based on this.
- Share communication sent from UNAIDS to countries with GIST members (see attached).
- GIST members to feedback lessons learnt and ways of improving the database with GIST secretariat.
- CoATS roll out should be included as key priority for UCCs.

**Decision:**

- Start next phase of roll out by end of 1<sup>st</sup> quarter of 2009.
- CoATS to be captured in PCB

**Item 5: Global Fund update**

- Brief update from 18th Board Meeting: (1) TRP Report (2) Board Decisions and (3) Round 9. The TRP report from round 8 shows that 3% of the funding approved goes to TS. TS might also be included under training, management etc in the proposals.
- National Strategic Applications will have a phased roll-out and the first wave of NSAs will take place in a limited number of countries in 2009. The First Learning Wave shall be aimed at drawing policy and operational lessons to inform a broader roll-out of the NSA procedure.

- In implementing the First Learning Wave, the GF Secretariat shall take into account the outcome of the deliberations of the UNAIDS Programme Coordinating Board at its meeting in December 2008, the IHP+ consultations on the validation process and other relevant stakeholder consultations. GIST is an important group of stakeholders and a forum where all partners come together. What does the GIST want to say about the NSA process? Is the process taken care of? If not, what role could GIST play?

#### **Discussion:**

- It was noted that if new resources become available, the reductions in funding for round 8 may be partially or fully relaxed. Need to urge GF members to come forward with additional resources.
- The level of success in round 8 was discussed and it was noted that the level of approvals had increased from around 40% in previous rounds to 49 in this round. At the same time it was argued that the call for an early round 9 might have made countries perceive round 8 TRP as a potential mock TRP, before the submission in round 9. This could have influenced negatively on the result for round 8. It was argued that it is difficult to get statistics of the level of success in proposals that received TS, but it was noted that an estimated 70% of proposals that got TSF support were successful. More data on this as well as CSS success is needed.

A suggested process of how to organizing thoughts around the process was presented:

- 1<sup>st</sup> level: Funding of NSA: (the US and the Fund)
- 2<sup>nd</sup> level: Validation of NSA (WB)

- How does the GIST support countries that want to go in the NSA direction? GIST support of the NSA development, will make room for inclusion of CSO.

#### **Action:**

- The GF Board is looking forward to input from stakeholders on the first wave of NSA. GIST to watch/give feedback to the Fund on how the NSA process is progressing.

#### **Item 6: 70% coalition**

UNAIDS and WHO briefed the group on the existence of the 70% coalition. It was agreed that the 70% coalition is a useful information sharing forum for the partners, and especially for CSO. CSO has often reduced access to CCMs. The coalition should continue and use lessons learnt from round 8 in round 9.

#### **Discussion:**

- The coalition should act more regionally and stimulate similar collaborative efforts at regional/country level. The coalition could also have participant from regional and country level.
- Coalition should continue to support GF rounds but must be more calendar sensitive and encourage that regional work plans are prepared well in time and that peer review are conducted early enough so that comments and observations from the review can be included in final proposal submission.
- Is there a possibility for funding of initiatives like this in the UBW? Coordination of effort can happen at several levels, but it is also what we expect from RSTs and UCCS. UCC needs to engage in processes with other partners.

**Action:**

- Invite WB to become member.

**Decision:**

- Agreement that the coalition is useful and should continue but TS partners should facilitate similar processes at country and regional level.
- GIST plays a role in overseeing that this is happening, holding TS partners accountable.
- 70% group could play an important role in looking into how this process could be facilitated at regional/country level.

**Item 7: Workplan review**

Agreed that progress to date as well as budget obligations were satisfactory. Final review to be done by the working group including USG, Alliance, GTZ in January.

**Action:**

- For PCB:
  - Include ToR and list of participants
  - Take out confidential info on salary
  - Include a column in the work plan showing achievements and substantive information on what GIST has done, e.g. activities, challenges and lessons learnt.
- Working Group to conduct end of year review of the 2008 work plan as agreed and share with group.

**Decisions:**

- To be made available for PCB

**Item 8: PCB thematic session – Informing the debate**

Recap of how the day is organized, including information on who will be the moderators, panel speakers etc.

**Discussion:**

- The GF UNAIDS MoU should be focused broadly, not only focus on TS. Use the MoU to support GIST work in a broader sense. Maximize synergies between the Fund and the UN. GIST an excellent mechanism to implement the MoU.
- Practical suggestions to move the implementation forward:
  - Use what we have learnt through studies to inform discussion, e.g. TS gaps related to implementation and grant negotiations.
  - Improve collaboration between UCC, FPM and LFA. Challenges were mentioned: (1) time constraints, (2) lack of perceived value from the collaboration and (3) personalities
  - Include evaluation of GF relationship in UCCs' performance management. This is being looked at by UNAIDS.
  - Communicate strongly that GF support is a key area of UCC work, as well as TS.
  - Bring UBW and UNAIDS closer to GF.

### **Suggestion for inclusion in PCB intervention:**

- Promote GIST, important arena for CSO involvement in general, and in GF processes more specific
- UN to provide leadership in GF processes and keep donors informed
- Universal Access; ambitious plan, UN and GF are instruments, to achieve the goal.
- 5 Year Evaluation of UNAIDS a starting point for looking at potential changes of UNAIDS
- Focus on “how we can improve” relationships between GF and UNAIDS
- How do the PCB recommend that we act on/operationalise the knowledge we have gathered so far (studies carried out, CoATS roll out)?

### **Day 2:**

#### **Item 9: How does the GIST support CSOs to respond to the technical support challenge?**

Presentation by CSOs members in the GIST on their experience and challenges related to TS.

#### **Discussion:**

Key questions

- How does GIST support CSOs?
- How to make sure that capacity building of CSOs are captured in the grant proposals?
- What capacity needs to be built in, and by whom?
- How to involve groups that are not involved in the proposal development?

#### **UN as Sub-Recipient**

There is a funding and capacity challenge for CSOs who are aspiring to become PRs. The example of UNICEF as co-sub recipient in some countries was discussed. Instead of becoming PR UNICEF is co-sub recipient supporting the other SR for the grant, building capacity and prepare the SR to take over in phase 2. The possibility of community based groups to redefine itself to become service providers was also discussed, and GIST's role in supporting this.

#### **Country Coordination Mechanism**

How do we work with CCMs to facilitate CSO involvement? Dialogue at country level has to happen and CCM is the national forum for this discussion, but CCMs seem not to be receptive to this discussion and little has been done to change dynamics in the CCM. CCM strengthening, must focus on normative and oversight functions, as well as CCM as a mechanism to ensure accountability. GIST should help move GF to be more directive towards CCMs. CCM support available, and joint teams play an important role.

#### **Community System Strengthening**

Need for a clear definition of, and guidance on Community System Strengthening (CSS). GIST should play a role in this. Work on guidance note/tools on CSS and CSOs as PR/SRs is ongoing with UNAIDS/Alliance/CSAT. Important to involve CSOs. The UNAIDS guidance will influence GF work on CSS guidance.

### **CSO as Principal Recipients**

Dual track financing a positive development, but becoming PR should not be the aim for all CSOs. Mixed opinions related to this, must strengthen CSO as PRs versus balance it. Distinguish between various players. CSOs should decide where they want to go. CSOs should also focus on the strengthening of their role as technical providers, advocates and watchdogs. CSOs to be aware of the conflict between advocacy role and service delivery role.

### **Suggested action from GIST:**

- Mandate guidance notes related to planning, proposal development, implementation and oversight for CSOs.
- Look at exciting documents, with a view to produce some guidance, for CCMs, on their role in supporting CSOs as PRs.
- Look at governance of CSO. Lessons learnt from CSO that are PR. How to choose the right approach in support of getting CS on the CCM?
- Identify category 3 CSO proposals, and look at the organization being PR, and see how GIST can support. Suggested process: Focus the support, develop a plan and resource it.

### **Action:**

- UNAIDS guidance notes on CSS and CSO as PR/SRs to be circulated with GIST.
- CSAT study on how to strengthen CCMs accountability role circulated with GIST.

### **Item 10: 2009 workplan development**

The GIST brainstormed around ideas to be included in the workplan for 2009. Please find the “brainstormer” attached.

### **Action:**

- GF/UNAIDS workplan to be developed at RMM in Bangkok to be circulated with GIST. GIST to advocate for this in other regions.
- Alliance to synthesize some ideas around findings so far from the studies, which can support guidance building.
- The following volunteered to become members of 2009 workplan working group: GIST Secretariat, Alliance, WHO, UNICEF and ICAD (in an informal support role)

### **Decision:**

The 2009 work plan will be shared with GIST for input and finalized end of January 2009.

### **Item 11: Looking forward to 2010 – 2011 UBW earmarking appropriate funding**

The UBW will be presented in June 2009 PCB.

The document will be endorsed by CCO in April and a draft UBW will be prepared between now and end of February 2009.

### **Decision:**

Ask for the inclusion of a \$1 million budget line for GIST. This will be discussed on 16 and 17 February, during the peer review process of the UBW.

### **Item 12: AOB**