Consultation and Regional Forum on the Provision of Global Fund-related Technical Assistance for CSOs and communities in the EECA region – how to make it work better?

14 - 15 November 2019, Chisinau, Moldova
About this report

This report describes the current status of the Global Fund Community, Rights and Gender Technical Assistance Programme (CRG TA Programme) and other related support and provides options about how to improve these opportunities and their utilisation in Eastern Europe and Central Asia.

The document integrates inputs from 16 preparatory individual interviews and from discussions at the Regional Forum, ‘Provision of Global Fund-related Technical Assistance for CSOs and communities in the EECA region – how to make it work better’, which took place on 14-15 November, 2019, in Chisinau, Moldova.

The two main sections of this report - Generating Demand, and Process from TA Requests to Provision and Evaluation – provides analysis of current progress, challenges, and opportunities for improvement. They end with detailed recommendations to the Global Fund and the Regional CRG Platform.

The comprehensive presentation by Mr. Brice Bambara, from the Global Fund’s team of Community, Rights and Gender and the focal point for CRG Technical Assistance, was used extensively, often with direct quotes, to present the Global Fund-related work. His full presentation is available in English and Russian.

This report was commissioned by the Regional Civil Society and Community Support, Coordination and Communication Platform – EECA (CRG EECA Platform). It was written by Raminta Stuikyte with the invaluable guidance and critical comments of Ivan Varentsov, the Coordinator of CRG EECA Platform. English text is edited by Graham Shaw.
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Acronyms

ATAC  Alliance Technical Assistance Centre
CBO   Community-Based Organisation
CCM   Country Coordinating Mechanism
CLAC  Community Leadership and Action Collaborative
CRG   Community, Rights and Gender
CSO   Civil Society Organisation
EECA  Eastern Europe and Central Asia
EHRA  Eurasian Harm Reduction Association
FPM   Fund Portfolio Manager
GIZ   Gesellschaft für Internationale Zusammenarbeit GmbH (German Development Agency)
HIV   Human Immunodeficiency Virus
ICF   International Charitable Foundation
NGO   Non-Governmental Organisation
PAS   Policies And Studies
PR    Principal Recipient
SI    Strategic Initiative
SoS   Sustainability of Services
SR    Sub-Recipient
SSR   Sub-Sub-Recipient
STC   Sustainability, Transition and Co-Financing
STE   Sustainability, Transition and Efficiency
TA    Technical Assistance
TB    Tuberculosis
TBEC  Tuberculosis European Coalition
TOR   Terms Of Reference
TRP   Technical Review Panel
TS    Technical Support
TSF   Technical Support Facility
TSM   Technical Support Mechanism
UNAIDS Joint United Nations Programme on HIV/AIDS
USAID United States Agency for International Development
WHO   World Health Organization
Overview of the Regional Forum

🔥 **Goal and objectives:**
- The Regional Forum was organised to exchange, discuss and learn from the implementation of the Global Fund’s Community, Rights and Gender Technical Assistance Programme (CRG TA Programme) in Eastern Europe and Central Asia over 2018 and 2019.
- The community and civil society recipients of technical assistance had an opportunity to engage with TA providers and vice versa.
- Other opportunities for assistance were presented by the major regional projects supported by the Global Fund, regional networks, UNAIDS and others.
- The participants discussed their recommendations on the Global Fund-related TA and other capacity strengthening including what type, in which areas, and through what mechanisms such support is needed not only from the CRG TA programme, but also other Global Fund initiatives and other partners.

🎯 **Participants:** 25 participants from NGOs, TA providers, and TA donors selected by the Regional Platform in consultation with colleagues from the Global Fund CRG Team.

召集人 **Convener:** The Regional Platform for Communication and Coordination for the EECA Region, hosted by Eurasian Harm Reduction Association (EHRA). This workshop was convened as part of the Global Fund’s Community, Rights and Gender Strategic Initiative.

🌐 **Languages:** Russian and English.

📅 **Preparation:** Before the Regional Forum, a series of interviews were conducted using a standardised form adapted to three target groups:
- 7 CRG TA recipients
- 4 providers
- 5 community representatives who either unsuccessfully sought CRG TA support or have never actively sought such support despite proactive outreach by the Regional CRG Platform.

🔗 **Link to materials:** presentations, concept, agenda, participant list and other documents are available in/at:
- Annex 2 [Agenda](https://www.dropbox.com/sh/3bp9wrhxsp2s1w3/AACvHO3WNCl_2FThKXW1Tv3ua?dl=0)

🔍 **Other technical support available:** An overview of mapped TA that is available is among the materials; the TA available through other Global Fund initiatives, regional grants and from UNAIDS was presented and is available in [Annex 4 Other Technical Support Related to the Global Fund](https://www.dropbox.com/sh/3bp9wrhxsp2s1w3/AACvHO3WNCl_2FThKXW1Tv3ua?dl=0).
CRG TA support in 2018-2019 in the EECA

The Community, Rights and Gender (CRG) Technical Assistance Programme provides support to civil society and community organisations to meaningfully engage in Global Fund-related processes during country dialogue; funding request development; grant-making; and grant implementation.

The CRG Technical Assistance Programme (CRG TA Programme) is one of the three mutually reinforcing components of the Global Fund’s CRG Strategic Initiative. The other two include support for regional platforms, similar to the EECA CRG Platform, and long-term capacity building through the support of the major global, and in some cases regional, HIV, tuberculosis and malaria networks. Among other things, the EECA CRG Platform helps to generate demand for CRG TA support (further details about the role of, and work undertaken by, the Platform are provided in Ivan Varentsov’s presentation). Unlike other components of the CRG Strategic Initiative, the CRG TA Programme is focused on short-term support. The current period of the Programme will finish at the end of 2020 and the CRG TA Programme will be evaluated within the current three-year allocation period. The funding for, and the starting date of, the new phase of Programme implementation is still to be determined.

The TA provided through the CRG TA Programme has to be directly linked to Global Fund grants – from their planning to monitoring and sustainability development, but not Country Coordinating Mechanisms:

<table>
<thead>
<tr>
<th>CRG TA can be requested for:</th>
<th>... cannot be requested for:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Situational analysis and planning</td>
<td>• Long-term capacity building of civil society organisations</td>
</tr>
<tr>
<td>• Participation in country dialogue</td>
<td>• Strengthening of Country Coordinating Mechanisms (CCM)</td>
</tr>
<tr>
<td>• Programme design</td>
<td>• Writing of funding requests</td>
</tr>
<tr>
<td>• Oversight and monitoring of grant implementation</td>
<td>• Supporting implementation of the grant prior to its approval</td>
</tr>
<tr>
<td>• Engagement in sustainability and transition strategy development</td>
<td></td>
</tr>
</tbody>
</table>

Approximately 30% of requests received by the CRG TA Programme in the past two years have been related to activities that cannot be supported, such as capacity building for community representatives in CCMs and requests for concept note writers.

The Programme has a pre-approved a list of the 26 civil society and key population networks. Among them, three are from the region: the Alliance Technical Assistance Centre, the Eurasian Coalition on Male Health (ECOM) and the Moldovan Institute on Human Rights (IDOM); additionally, the Canadian HIV/AIDS Legal Network has a staff member with broad expertise in the region.

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1 As from 2020, renamed as the Eurasian Coalition on Health, Rights, Gender and Sexual Diversity.
Out of 93 eligible requests received by the CRG TA Programme between September 2017 and September 2019, nine came from the EECA with a further 12 TA requests received from the EECA between January 2018 and November 2019. Among them, 7 were considered as eligible and supported, of which 5 were on HIV, 1 on HIV/TB and 1 on TB. Two TA requests have been delivered to support country funding requests, and another addressing Technical Review Panel (TRP) comments. Only one TA approval was linked to sustainability and transition, while all the countries are undergoing the process of Global Fund transition and sustainability building. One request asked for support to improve services. Two were assessments to show gaps, barriers and needs from different communities – one from a gender perspective and another being a comprehensive review of legal, gender, and stigma-related barriers. Participants commented that with the reducing envelop from the Global Fund, there has been reduced investments in legal services, for example, in Moldova, which might have also impacted the thematic focus of the support requested.

Based on information available, an average TA request in the EECA amounted to US$47,000 with a great variation of between US$6,500 and US$115,000 per TA request approved. Notably, the more recent requests are more costly, going above US$60,000.

Table 1: The list of CRG TA approved for the EECA in 2018-2019

<table>
<thead>
<tr>
<th>Recipient organisation, country</th>
<th>Purpose and specific tasks</th>
<th>Status (date of application receipt)</th>
<th>Provider</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alliance for Public Health, regional focus</td>
<td>Defining the engagement of regional networks of key population groups in the implementation of the multi-country regional grant ‘HIV Sustainability of Services for Key Populations’ (agreed workplans and mechanisms for four networks SWAN, ENPUD, EHRA, ECOM)</td>
<td>Completed (requested and received in August 2018; TA provider started preparations in October 2018)</td>
<td>Alliance Technical Assistance Centre</td>
<td>US$6,569.36 (budget for a meeting)</td>
</tr>
<tr>
<td>Kazakhstan Union of People living with HIV, Kazakhstan</td>
<td>Identify and prioritise the needed TB-related activities from community perspective to be presented to the CCM for consideration in the upcoming funding request</td>
<td>Completed (request submitted in August 2018, support provided October-December 2018)</td>
<td>Alliance Technical Assistance Centre</td>
<td>US$11,060</td>
</tr>
<tr>
<td>NGO New Generation, Armenia</td>
<td>Address TRP recommendations on key populations and human rights, specifically to: - develop recommendations on inclusion of relevant policies and practices aimed at eliminating discrimination against</td>
<td>Completed (request submitted in July 2018, support provided in October-November 2018)</td>
<td>ECOM</td>
<td>€16,535</td>
</tr>
<tr>
<td>Organization</td>
<td>Objective</td>
<td>Status</td>
<td>Implementing Partner</td>
<td>Funded Amount (US$)</td>
</tr>
<tr>
<td>--------------------------------------------------</td>
<td>---------------------------------------------------------------------------</td>
<td>-----------------------------------------------------------------------------------------------------------------</td>
<td>-----------------------------------------------------------</td>
<td>-----------------------------------------</td>
</tr>
<tr>
<td><strong>JUVENTAS, Montenegro</strong></td>
<td>Develop effective interventions for key populations with a focus on the use of information and communication technology, internet marketing and the use of social networks</td>
<td>In progress (request received April 2018; some implementation took place in December 2018; as of October 2019, there was no clarity of the final completion date)</td>
<td>Community Leadership and Action Collaborative (CLAC)</td>
<td>US$61,334</td>
</tr>
<tr>
<td><strong>NGO Gender and Development, Tajikistan</strong></td>
<td>Conduct an assessment of barriers to TB services with a focus on legal barriers, gender, key populations and stigma; Develop recommendations on how to address them</td>
<td>In progress (request received in June 2019, provision started in August 2019, Phase I advanced)</td>
<td>Canadian HIV/AIDS Legal Network</td>
<td>US$60,485 (phase I) + US$54,428 (phase II)</td>
</tr>
<tr>
<td><strong>SPIN Plus, Tajikistan</strong></td>
<td>Budget and cost the HIV transition plan</td>
<td>In progress (request received in April 2019)</td>
<td>Alliance Consultancy</td>
<td>US$68,716.27</td>
</tr>
<tr>
<td><strong>NGO Positive Women, Ukraine</strong></td>
<td>Conduct a gender audit/review of the Ukrainian national HIV programme; Expand the involvement of women living with HIV in promoting specific services for women within the Global Fund packages of service.</td>
<td>Approved in May 2019 but the start of implementation is still pending</td>
<td>n/a</td>
<td>n/a</td>
</tr>
</tbody>
</table>

Further clarifications (and some suggestions) were received on the CRG TA approach during the Forum, including the following:

**TA providers**
- The list of providers for the current phase of programme implementation had been defined in 2017 based on applications received and, therefore, is limited. Defining the list enables the Global Fund to enter into quick contracts without any additional tendering procedures.
- A new tender for TA providers for 2021-2022 is expected to be announced in 2020.
- The current list cannot be updated based on the identified needs or gaps. The TA providers can hire national consultants and civil society organisations can identify potential experts in their TA requests.

**Eligible organisations**
- Requests can come from national or local organisations that are not directly engaged in Global Fund grant implementation.
<table>
<thead>
<tr>
<th>Eligible countries</th>
<th>All countries that have active country grants – including transition grants - from the Global Fund are eligible. Countries that are included in regional grants are eligible even if they do not have national grants (TBC by Brice).</th>
</tr>
</thead>
<tbody>
<tr>
<td>Decision-making and engagement of national stakeholders</td>
<td>Global Fund portfolio managers are consulted during the decision making regarding CRG TA requests. They could be also be the entry point for facilitating and coordinating the TA request. CCM and the Principal Recipient (PR) might be asked for their feedback on a request. Some participants pointed out that this constitutes a conflict of interest, particularly given that some requests might be coming from groups representing highly marginalised populations and watchdog groups that might have tense relations with government agencies.</td>
</tr>
<tr>
<td>Rejection of TA request</td>
<td>If a TA request is rejected, the CRG TA coordinator can provide the reason for its rejection.</td>
</tr>
<tr>
<td>Coordination with other partners</td>
<td>Such regional projects, like TB-REP 2.0, conducts national dialogue and/or would be keen to use reports from such dialogue supported by the CRG. CCMs are expected to share the reports from the CRG-supported TA, such as national dialogue. The CRG team might check with other TA organising partners to ensure that the received requests are not duplicative. It is unclear how this objective is formalised and if some requests that the CRG finds are ineligible are forwarded to partners for their consideration.</td>
</tr>
<tr>
<td>Improving engagement in CCM</td>
<td>CCM budgets are expected to include TA support and, therefore, CCM-related support is excluded from the scope of CRG TA. The participants noted that this is one of the areas where support is missing.</td>
</tr>
<tr>
<td>Access to TA products</td>
<td>Products from TA are delivered to the TA recipient and the Global Fund. Currently, they are not available online (similar to many reports from the provision of other TA).</td>
</tr>
</tbody>
</table>
Generating Demand

Progress and challenges

**Support that generated requests.** So far, the two main sources of information about the CRG TA Programme identified among the actual TA recipients and other NGOs were their Global Fund Portfolio Managers (Armenia, Montenegro, Serbia) and the CRG Regional Platform (e.g. presentation at their meeting, ITPCru listserv and personal communication with the Platform’s coordinator, Ivan Varentsov). One person also mentioned one Russian-speaking CRG team member as a source. According to the Platform’s data, among the 7 approved TA, 6 were initiated with the participation of the Platform. An additional 5 TA requests that the Platform was engaged with have not been approved; 3 are being discussed or in the process of development. The Platform provides direct support to improve the TA requests.

**Diverse scope of the expressed demand.** The scope of the TA requested and provided ranges widely, showing diverse needs and an ad hoc approach. For example, the Montenegrin TA is expected to comprehensively improve outreach services, among other aspects, through the additional use of social media and online outreach and could enable the broader application of this approach as the Global Fund’s monitoring framework considers only physical services and not online services in calculating coverage. Another TA was requested by a regional project supported by the Global Fund for a very limited task - to co-finance a meeting with potential regional community partners. Most, if not all, requests came for national level TA and not the individual needs of NGOs.

**Low uptake despite gaps.** Participants noted with unease the low number of requests submitted and approved for TA from the CRG TA Programme in the EECA, despite the low supply of support. Among the interviewees, two indicated that there has been enough support from other sources in the last two years, including the local Soros foundation as well as UN agencies and/or regional Global Fund support projects. But such countries are more of an exception. Based on the analysis by EHRA, the level of technical support available in the region is extremely limited, among other issues, reflecting the donor and technical partner transition from the region. For example, Russia is the largest country with more than half of all HIV and TB infections in the region and has major challenges with human rights and community engagement but was not eligible for CRG TA support until December 2019. Furthermore, only one request has been received and approved from South Eastern Europe where the presence of technical partners and support is particularly restricted.

Platform work to promote and support the generation of requests in 2018/19
- 16 face-to-face sessions covering 363 people
- 6 webinars
- Individual outreach to NGOs in 10 countries
- 10 information notes on listservs, social networks, and a leaflet in Russian and English
- Information both in English and Russian on the EECA Platform’s website

The most productive approach so far has been through face-to-face meetings where ideas are generated and potential focal points or organisations with stronger capacity are identified for follow-up. The potential TA recipients are encouraged to produce one-page concept notes before developing full TA requests. The Platform can review and give feedback on eligibility and improvements needed.

*Based on the Ivan Varentsov presentation*
Increasing the demand for the CRG TA Programme is seen as a priority by the participants and, hence, the participants examined the current communication approaches, what works, and the reasons why groups from the region – even if they see the information – do not approach the CRG TA Programme.

Lack of clarity and misconceptions. The participants and interviewees see gaps in awareness among national and, particularly, local groups. The feedback from the same interviewees before and during the Regional Forum (where the CRG TA manager presented the Programme and answered questions) has shown the changes in their understanding of the Programme. Before the Regional Forum, all interviewees indicated that they had heard of the Programme or had seen a general online announcement or had even talked to the Regional Platform’s representative or their Portfolio Manager, and even heard a Platform presenting about the Programme. However, in a number of cases, this information did not connect with people and their needs because it was unclear, or too general, or that it looked different from their current needs and they felt it required more time to study and to think through. Some did not think that their organization or needs were eligible.

Also, there was no clarity regarding the eligibility of civil society from those countries without active Global Fund national grant but being the part of an active multi-country grant to request the TA within this Programme.

During the Regional Forum, following the presentation by, and interaction with, the Programme’s Manager, several participants noted retrospectively that the information received before the Forum had not been clear and that sometimes assumptions about the limitations of, and barriers to, support (e.g. the limited list of TA providers; an emphasis on the short-term approach of TA; a focus on assessments/plans/reports; and uncertainties as to the process and when support is likely) had been created. Information without examples of such support, or who is explicitly eligible, or an explanation of the process, made it harder to understand. There has been no strong, positive reputation built of the Programme in the region, nor of spokespersons who could positively outline the Programme as having a positive impact; only a few TAs have been fully completed; some TA that has been received has not yet been turned into impactful actions; and some who applied for TA have found some challenges in the process, including the management of expectations.

The overall notion of technical support is not well understood. It is also harder to understand the level of ownership, particularly as the TA requestor is not the TA contractor and they have a different relationship than would be the case if they had funding and contracted the TA themselves. People prefer personalised, or face-to-face, communication about the Programme with a possibility to ask additional questions and to hear examples.
**Identifying needs and focusing on products, not mentoring.** Analysis of critical gaps in technical support in the region and countries is missing and, therefore, it is not possible to answer how well the approved CRG TA matches the biggest gaps in technical support or to build on such analysis, particularly at the country level to support demand generation. Identifying needs in itself is a challenge for community groups and external support is needed. Some emphasised that ongoing support, advice and learning-by-doing are in greater demand by community groups than the current emphasis of the Programme on short-term products. Moreover, those products might not be utilised because of the lack of support and follow-up. Therefore, the Programme could have far greater impact.

**Areas of needs.** The participants repeatedly highlighted several technical areas for CRG TA:

- Donor transition-related work and NGO preparedness (e.g. addressing and monitoring the quality of services during transition; helping NGOs to change/adapt to new roles once social contracting starts; building budget advocacy capacity);
- Inputs in new country requests in the period leading to submission of country proposals to the Global Fund or for addressing TRP recommendations related to CRG; and,
- Involvement in the CCM (majority of interviewees mentioned this need).

Additionally, some mentioned the need to grow new leadership on CRG issues and in sustaining community spirit in not compromising with the government. Involvement in CCMs is expected to be covered by CCM grants; however, several CCM members report several reasons why the current CCM grants do not cover their real needs: CCM grants are inflexible and the approach is too formal to support real needs (based on outputs, not outcomes and impact); some CCMs do not functioning, which makes their grants harder-to-use effectively or that the political dynamics lead to the CCM political and operational leadership, as one interviewer said, being “not interested” in the growth of community activism.

“Vania [the Platform Coordinator] works very well, but the results are so-so. It is not because of his failure. It is because of the [CRG TA] system. The weakness of the Platform [and the Programme] is that it foresees very short-term opportunities for technical support, applications from national leaders and NGOs who do not understand the value of the technical support and its necessity, specifically when it comes to communities, rights and gender. The support is focused on reports, assessments, and manuals which often remain unread and unused. For key populations, maybe sometimes you need those reports but even more you need support and advice every day, 24/7. Now the Programme gives you a report, no mentoring, no support, and once reports are done – you have to flounder on your own.” (interview with a TA provider)

**Opportunities for improvement**

The Forum’s participants analysed the underlying causes of low utilisation, and good practical examples, in detail. Their recommendations, and those from interviews, are summed up below:
### Concerns

#### Strategic demand generation

The CRG TA could be strategically planned and make a difference in several areas:

- **Community-driven inputs in new country requests to the Global Fund.**
- **Human rights programming** (nearly no requests, presumably because of reduced human rights programming within the country grants from the Global Fund and overall reduction of funding for HIV)
- Advocacy in relation to TB in synergy with the TB Europe Coalition and PAS-led regional project TB-REP 2.0, possibly combining their mentoring to compliment CRG TA provided
- Community monitoring and quality assurance during implementation of state social contracting of services
- Strategic planning for community-based groups that close services and look for their new role during donor transition
- **Sustainability of services (CSO and non-CSO) in penitentiary institutions and of opioid agonist therapy.**

#### Options for improvement

- Well in advance, before the countries submit their requests to the Global Fund, help national groups to review their needs and consider TA support opportunities for country dialogue, etc.
- Together with regional networks and projects and several national networks, identify critical gaps and needs in advocacy and other work, using some pilot countries, areas and tools as examples. This analysis could be used to generate requests to the CRG TA programme and strategic linkages with other existing work. These pilot requests could be used for learning and generating similar requests from other countries and settings, piloting tools for community monitoring, etc. This support could be used for learning how to create synergies between other CRG support and its TA Programme, between the regional projects and the TA Programme, and also other critical areas identified for missing technical expertise among the regional networks and CRG-affiliated TA providers (gender, mental health, etc.).
- A discussion is needed on how to generate human rights requests and programming beyond the Human Rights Breaking Down the Barriers Initiative (described in the Annex, Other technical support related to the Global Fund). Concerning TRP recommendations to increase human rights programming, applicants could automatically be referred to the CRG TA Programme and support for them could be expedited.

### Scope, approach and eligibility

The scope and approach of the CRG TA Programme are seen as limiting. CCM-related support and CRG related TA are highly needed but, so far, have been ineligible for funding. CCM-related support is one of the areas that is supposed to be covered through other programmes; however, the demand remains high in the region and, based on CRG TA Programme statistics, globally. The Global Fund supported regional projects were repeatedly mentioned as good practices for identifying and meeting demands in countries through low-barrier, interactive approaches with the possibility of discussing follow-up. The current list of TA providers has important, but limited, expertise in the region, thereby giving a misleading impression of the scope of TA that is possible based on the TA provider list (this issue is further addressed in the section, Process from TA Requests to Provision and Evaluation).

- Revisit the geographic eligibility criteria so that not only eligible countries are included but also those that are no longer eligible for Global Fund country grants.
- Review the eligibility of community and civil society CCM involvement and synergies with other CRG and CCM support, based on lessons from the CCM Evolution project and analysis of CRG TA requests that were deemed ineligible.
- Learn from regional projects and their components to technically support and integrate these lessons into CRG TA.
- Consider changing the CRG TA Programme from output-oriented support to approaches that include mentoring opportunities before entering into the TA Programme - during and afterwards - to utilise products, and also to encourage a more learning-by-doing approach.
Awareness quality

Awareness of the CRG TA Programme is wide reaching, largely due to the Platform and some Portfolio Managers. However, there is a lack of understanding of the CRG TA Programme, and of TA overall. The current description, especially if only accessed online or through materials, is hard to contextualise. Portfolio Managers and individual communication are instrumental in discussing needs and linkage with the process.

The process is unclear. Aspects of negative experiences are prevalent when community group applicants are interviewed (but not necessarily reported back to the TA providers and the CRG TA Programme). There are positive experiences; but they are not highlighted in private and public communication or if TA provision is not completed. They could be used for building a positive reputation. Those who have been receiving TA often mentioned examples of how the TA differed from their expectations, particularly in terms of time taken.

- Improve the CRG TA Programme’s description to increase clarity, including details on criteria for TA and the process, and the TA areas with examples, or types of activities, that could be provided. Pay particular attention to misconceptions of ‘TA’ and unrealistic expectations among community groups.

- Use PR, Sub-Recipient (SR) and Sub-Sub-Recipient (SSR) communication, and also CCM meetings, for presenting the Programme. CCMs could play an important role in initiating technical support (TS) requests and in encouraging coordination between different communities and civil society groups at the national level.

- Engage and partner with the Global Fund-supported multi-country projects to promote responses to, and to identify/direct, relevant unmet needs.

- Promote successful cases of TA where possible, showing TA products.

- Report on changes taken to improve the CRG TA Programme.

- In addition to the Platform, all Portfolio Managers could play a role to remind stakeholders of the CRG TA and to identify opportunities during their visits, presentations to CCMs, etc.
Recommendations to the CRG TA Programme and Platform

Global Fund’s CRG TA Programme

- **Scope**: Evaluate and possibly revisit the scope and approach of TA to include CCM-related TA; assistance to analyse demands/opportunities; mentoring; and expand eligibility to the countries without active grants but with a great need for CRG-related work;

- **Communication**: Improve the CRG TA information tools, adding clarity to the criteria for TA, the process, and good practice examples, including regular webinars to potential applicants;

- **CCM engagement**: Encourage CCM Hubs to promote the CRG TA Programme among CCMs; and feed the received, unsupported TA requests for the CCM Hub to consider in how to address such requests through CCM grants;

- **The EECA grant management team, individual managers and Sustainability, Transition and Co-Financing (STC) coordinators**:
  - Periodically discuss CRG TA uptake and its promotion, specifically providing examples, tools for presentation, and encouraging the identification of gaps that might be relevant; explore synergies with the Global Fund’s Sustainability, Transition and Efficiency, and other initiatives;
  - Update and discuss feedback on CRG TA requested and provided; and,
  - Link TRP recommendations related to CRG with the CRG TA Programme;

- **Human rights**: discuss with the EECA grant management team, the CRG team and experts on how to increase the uptake of TA in the field of human rights.

Role of the CRG EECA Platform

- Regularly reach out to portfolio managers, asking them to promote CRG TA support to CCMs;

- Develop a marketing strategy to promote TA in the region;

- Document and promote successful cases of TA;

- Review the channels of communication in each country, using individualised, country-tailored approaches; for example, in some cases, have regular communication (calls) with the national CCM; engage the Global Fund FPM (Fund Portfolio Manager) and CRG team to review needs; have country focal points generate TA requests;

- Counsel NGOs on a regular basis, helping to identify country-specific needs and those eligible for CRG TA, particularly in countries without a regional grant and other donor support;

- Deliver a clear message that national and local groups are eligible for TA, even if they are not directly implementing Global Fund grants;

- Liaise with Global Fund supported multi-country projects to encourage synergies and identify potential requests to the CRG TA Programme;

- Explore strategic demand generation in priority areas together with regional networks and regional projects (e.g. country proposal preparation, different aspects related to transition and sustainability).
Getting to an agreement with the CRG TA Programme on the TA took time ... All-in-all, it was a useful process which enabled us to transform many aspects of our original request for the better – objectives, approach, and conditions. (Comments by a TA recipient at the Forum)

We asked for the CRG TA since we wanted help to bring community perspectives to our country’s draft funding request. <..> Instead we received a report outlining the problems we have known already. (Interview with a TA recipient)

One of the tasks of the Regional Platform is to increase awareness of civil society and communities about the opportunities of Global Fund’s CRG TA Programme, develop requests for such support and, if needed, to support the development of good quality requests for technical support. (Ivan Varentsov, presentation at the Forum)

Progress and challenges across the stages

Clarity of process. TA providers find the process clear, defined by their terms of reference and contract. The experience of TA recipients is diverse. The initial phase for preparation and submission of TA requests is clear for TA recipients but not the rest of the process and decision-making. The helpful schematic, below, outlines the process that was first viewed at the Regional Forum and should have been included in previous communications from the CRG TA Programme or the Regional Platform. Many Forum participants mentioned being unaware of the consultations and communication with different partners (FPM, CCM, PR, other technical partners, and donors providing GF-related TA in a country). Some stages are more fluid than indicated below, according to the experience of TA recipients.

Figure 1: Schematic of the CRG TA process

<table>
<thead>
<tr>
<th>Preparing &amp; submission</th>
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<tbody>
<tr>
<td>• CRG Regional Platform provides technical assistance;</td>
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<tr>
<td>• A request received at the Global Fund Secretariat’s CRG team at: <a href="mailto:crgta@theglobalfund.org">crgta@theglobalfund.org</a>;</td>
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<tr>
<th>Review</th>
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<tr>
<td>• Determination of eligibility;</td>
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<tr>
<td>• If eligible, discussion with the Secretariat’s country team and relevant advisors;</td>
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<tr>
<td>• When needed, additional discussion with the TA requesting organization and technical partners;</td>
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<table>
<thead>
<tr>
<th>Scoping &amp; planning</th>
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<tbody>
<tr>
<td>• Identification of a pre-qualified TA provider and—later—of their consultants;</td>
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<tr>
<td>• TOR agreed between the TA requestor, the Global Fund Secretariat, the TA provider &amp; the consultants;</td>
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<table>
<thead>
<tr>
<th>Initiation &amp; provision</th>
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<tbody>
<tr>
<td>• A briefing call with relevant stakeholders to plan the TA deployment;</td>
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<tr>
<td>• Identification of linking organizations by TA provider and recipient;</td>
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<tr>
<td>• Actual in-country work;</td>
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<tr>
<th>Evaluation and follow-up</th>
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<tr>
<td>• A debrief call (when necessary);</td>
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<tr>
<td>• TA completion report by the TA provider;</td>
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<tr>
<td>• Post-activity evaluation and follow-up community survey filled by the TA recipient (3-9 months after the TA).</td>
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</table>

Adapted from the Brice Bambara presentation
Timeline. The TA-related process takes significantly more time than TA recipients, and some TA providers, expect. Adding an indicative timeline could prevent people from filling the blanks with their assumptions. The short-term nature of TA, and previous experiences of quick decisions made during engagements with regional networks and Regional Projects supported by the Global Fund, creates expectations about quick decisions and the rapid arrival of consultants. The time issue affects all stages of the process with the exception of the evaluation.

Communication. TA providers – all but one - report highly responsive interaction with the CRG TA Manager and contracting team. It is their understanding that the Manager is overloaded due to a high volume of TA requests and by internal coordination processes. TA recipients report mixed experiences. Most do not proactively follow-up with communication and expect the CRG Team to initiate communication: in case of a prolonged silence for a month or so, instead of asking for updates, they presume that their requests are rejected. One interviewee said that they were too intimidated to ask the CRG Team for updates ("we, the community groups, are shy in communication with donors"). A number of groups do not know English and, therefore, cannot engage effectively with the CRG TA Manager directly. The Platform’s persistent communication with TA requestees, and mediation with the CRG Team (also with translation support), is appreciated by many. This support is limited to the first stage, according to the Platform’s information note, and, in practice, independent assistance is the most demanded in the first two, and the last, stages of the TA process.

Changes in scope. In at least 5 out of 7 TA’s provided, the scope of the TA has significantly changed from the initial request. In four cases, changes took place before a TA provider was engaged, i.e. during the review stages or at the beginning of the scoping. The causes of such changes included an unfeasibly short notice of the TA requested (2 cases); duplication with other work (1 case); better analysis of advocacy opportunities (1 case); and expansion of the original assessment to a more complex analysis due to similar assessments conducted in other EECA countries (1 case). Most of these changes were initiated by the Global Fund, often to match the request with the CRG TA scope and to improve its effectiveness. Only in one case did the TA recipient truly negotiate, or even disagree, with the Global Fund’s recommendations. In other cases, recipients are given the opportunity to review the terms of reference (TOR) of the draft TA’s (but not the TOR of consultants) but not all have undertaken such a possibility or had the capacity to meaningfully offer comments. In one case, the recipient was not aware of the changed TOR until consultants came to the country. Providers are open to changes in the TOR and to bring them up with the Global Fund if such changes are justified and fit with the CRG scope, even if the change relates to additional budget. Independent support is needed to assist the TA recipients to negotiate their needs.

Recipient’s capacity and ownership. The CRG TA Programme is built on the premiss that recipients have capacity and high motivation. Civil society groups are expected to understand their needs, have capacity to support the TA provision and to use results of the TA outside of the CRG TA Programme’s scope; however, often that has not been the case. The Platform’s assistance addresses gaps only in part. Having no contractual relationship between the TA recipient and the TA provider also limits influence, ownership and motivation of recipients to ensure that the TA is delivered in the most efficient and impactful way for later utilisation in advocacy and monitoring with respect to Global Fund projects and governance. The Forum recommended that the

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2 The Manager was not interviewed for this report with regards to comments on the internal processes.
Programme support the time of staff and recipient consultants in the TA provision and to follow-up and engage TA recipients among its contractual partners.

**Stage 1: Preparation & Submission**

“Groups that need TA the most have limited capacity, either to identify their own needs or to frame them in a request form”. (Interview with a TA provider)

“It is hard to understand the scope of the CRT TA Programme and to frame the request to match the Programme’s scope.” (Interview with a NGO representative)

**Easy application.** NGOs find the 4-page request form and online submission easy and highly accessible. The form is available in English and Russian which are commonly used for international communication in the region.

**National coordination.** At least half of the requests submitted or attempted were produced and coordinated among different groups nationally, often analysing it outside of their joint strategy. This national coordination is expected to improve the joint ownership, ensuring that the TA is received not for just one organisation’s benefit. National coordination takes time and effort. In one case, the lack of capacity prevented finalisation of the joint request.

**Platform’s support.** The Platform assisted 11 submitted requests. The Platform’s assistance to applicants includes: (1) preliminary feedback of the ‘concept’ of the TA needed; (2) organising preliminary eligibility determination; (3) helping to turn the ‘concept’ into the request form format; and, (4) translating it from Russian into English, as needed, for direct contact with the CRG TA Manager who does not speak Russian. The preliminary eligibility check enables a reduction in the number of negative responses at the review stage. Additionally, the Platform organises workshops for civil society and community groups to plan their meaningful engagement in national responses where a special group activity is dedicated to identifying potential areas for CRG TA. According to TA recipients, the Platform helps in matching their needs with the CRG TA priorities, eligibility and language, which remain hard-to-understand.

**Biggest need - identifying needs for TA.** Both the Forum and the interviews pointed to the low capacity of TA requestors to understand advocacy opportunities and their short-term needs, and to match those with donor support. Some called this challenge the biggest weakness of the CRG TA Programme as the whole. It comes not only because of the limited understanding of the TA perse, but also from how it differs from ‘projects’ and ‘capacity building’. Not understanding one’s needs is a more systemic issue which requires further systemic solutions such as mentoring to identify the problems, their causes, strategies to overcome these causes, and then the capacity and products required for implementation of these strategies. Such capacity and products could become the essence of the CRG TA request. The Platform’s support is designed for those who largely understand their needs and require only corrective support. The Platform’s one staff member has multiple tasks and should not be expected to deeply understand issues in more than 15 countries and help all civil society groups to strategise. In a number of cases, experts from regional networks and regional projects (and some national networks) might be in a position to coach national and local partners to go through strategic thinking and planning within the context of the respective country. Such a positive experience was indicated by one person. Some
recommended the utilisation of national experts or national peer review to find country-specific feedback.

**Stage 2: Review**

“When there was no answer from the CRG for some time, we submitted a similar request to [another call for proposals].” (Interview with a TA recipient)

“It takes a long time. We asked for support in August and only in December did we receive it. The Global Fund’s proposal, and influencing it - which was the whole point of TA - has gone.” (TA recipient’s comments at the Forum)

“2-3 months after the TA request [was submitted], a call was organised with the Global Fund where we clarified the content of the request, received recommendations and after that call I understood much clearer what we can expect, the essence of their [Programme’s] support and how to prepare.” (Interview with a TA recipient)

**Scope and purpose.** Only at the Forum did the TA requestors understand that the review process is more complex than checking eligibility based on geographic criteria and the Programme’s scope. The stage generates feedback from the Global Fund team involved in the country and, sometimes, in-country stakeholders and prevents duplication with other work. Some NGOs had concerns that their requests might be challenged, or at least influenced, by politics if authorities did not support the NGO advocacy agenda or means.

**A long wait without updates.** According to the interviews, the stage takes from one to more than 4 months. The Montenegrin example shows the review stage is cut short if the CCM and portfolio manager are already engaged during the development of the TA request. TA recipients were unaware if they benefited from an expedited review but recommended that such is used for time-sensitive TA requests. More time is needed in politically sensitive situations or in a case when internal recommendations are made that require additional consultations. The CRG team confirms the receipt of a TA request but do not update TA requesting organisations until a decision is made. In three cases, NGOs thought their requests had been rejected.

**Rejection.** NGOs can receive an explanation in the event that their request is rejected. The rejection without proper explanation causes frustration for the applicant and there is very little chance that the applicant will decide to submit a request for TA again. In one case, the request by a community-based organization (CBO) of sex workers was rejected because an Optima exercise has been undertaken in the country that showed that investing in programmes for sex workers, although important, was not a priority for that country from the epidemiological point of view. In another case, a TA request was rejected because a similar, though more elaborate, application had been made to a different donor; unfortunately, the other application has not approved by the donor for over one year.

**Set up for the next steps.** At the end of this stage, the Global Fund’s positive decision of approving the TA in principle comes with recommendations on how to better match the opportunities and the scope of the CRG TA. The recommendations and next steps are normally discussed during a call, which notes the beginning of the next stage – scoping and planning.
Stage 3: Scoping & Planning

“Our recommendations to the TOR should have been taken seriously. There should not have been pressure from the Global Fund on the content of the TOR so that it is indeed a consultative, community-driven process. Now we are told that the support is only possible if we accept all of their recommendations – even which localities to select.” (Interview with a TA recipient)

“I could not understand the TOR, only that it is a cry for help but not what exactly. [After a coordination call], the TOR was revised, basically increasing the number of days and slightly adjusting the tasks, still without a clear vision.” (Interview with a TA provider)

Coordination to agree on the TOR. Following the Global Fund’s decision to approve a TA request, the Global Fund’s recommendations and the original request form the basis of the TOR. Normally, a call is organised between the CRG TA manager and the NGO. In some cases, a selected TA provider and a portfolio manager are included in the call (particularly for Russian speakers) to clarify the needs and to discuss how to approach the recommendations. This call has been particularly useful for English speaking NGOs.

Unused opportunity to influence. The call and email communication with a draft TOR gives opportunities to influence the TOR, but most organisations requesting TA do not engage. One group was helped to think through the TOR by longer, reflective discussions and consultations with the Global Fund, their international peers and national partners. The negotiations can also be tough. One TA provider and one TA recipient felt pressure to fully include Global Fund recommendations that they did not agree with, even perceiving that “they [the Global Fund] know best what the region needs – we let civil society write something but then we will turn it into something we think is needed”.

Cases of an unclear TOR. Even after the TOR is agreed, some final TORs lack clarity. Two providers commented frankly about those situations when the substance of the TOR was unclear – probably even to the Global Fund. TA recipients were unable to articulate their expectations, answering clarification questions with, “help us at least with something”.

The roster of TA providers was been formed in 2017 through, what the current providers indicate as, an easy process which “took 10 minutes or so to fill in the application form” and formed the Global Fund’s list of pre-approved TA providers. Having such a list enables simplification of the Global Fund’s procurement processes. The roster is not being updated.

Selection. Neither TA providers, nor recipients, are aware of how TA providers are determined for specific TA requests. As one provider put it, “when we were not selected, we are not sure if it is because of methodology or budgets”. One TA provider – Alliance Consulting – has been engaged in 4 TA events, others once, one TA provider specialising in human rights has not yet been engaged in TA provision at all. All the TA providers rely on external consultants. Alliance Consulting extensively engages staff of the Alliance for Public Health in Ukraine. Two other TA providers use their in-house staff in combination with external consultants from their internal databases.

Missing expertise. There are expertise gaps in the roster. Some NGOs would prefer working with regional networks owing to the TA organisers with whom they have a trusted relationship (though
one case of engaging a regional community network had both positive and challenging elements). Missing inter-sectional expertise could be covered through partnerships of current TA providers and expansion of the TA provider roster in the future. This would include gender equality and feminism, mental health, hepatitis C, governance and transparency, social care and support, as well as sexual and reproductive health.

**Consultant selection.** All TA recipients expressed interest to engage in the selection of individual consultants. So far, only two have done so. Very few national consultants have been employed and, in many cases, TA recipients have not been aware of such a possibility. A combination of international and national consultants was seen by the Forum as a good recipe for contextualised, efficient and impactful TA. Two good practices show the great level of flexibility of the CRG TA Programme if a TA recipient (and a TA provider) takes the initiative and persists in relation to critical conditions for their TA’s success. In one case, a TA requestor found national experts on gender which are to be contracted by a pre-qualified TA provider. In another case, a TA requesting organisation is sub-contracted by a TA provider to contract a national research team for an assessment through the support of international experts. In both cases, negotiation of the arrangements took extra time.

**Stage 4: Initiation & Provision**

Two aspects of the same TA provision:

“CRG revised the initial request in such a significant way that people in the country could not understand why they requested one thing and received something different. My understanding is that the Global Fund did not inform the country partners about the changes.” (Interview with a TA provider)

“We had only our request that we submitted. But we do not know what TOR was given to the consultant(s) that came to the country. So we could not point out what not to do and advise on how to make things work better. The payer [the TA provider] calls the tune, not us: they pay, they order the TA from these consultants.” (Interview with a TA recipient)

**Little history.** Only three TA events completed this stage, limiting the possibility to extract a trend. Three other TA events were reviewed – two that are only just starting and a third that is half-completed. One event was logistical in nature (funding the logistics of a regional networks meeting with the Regional Project managers), with only positive experiences and no challenges.

**Contracting.** All mentioned a smooth process from the Global Fund’s side. TA providers found it easy to work with the Global Fund’s automatised system of signing contracts, which replaced the original invoice-based system. In one case, the contract was signed during the TA provision process (for at least a month). While the TA provider faced no negative consequences and a delay of their contract and payments were possible, a national sub-contractor has been negatively affected since they needed to advance funds to pay a research team and could not backdate the work in contracts due to national legislation.

**Local partner role.** Support from local partners who request assistance is expected but rarely funded. TOR’s reportedly do not foresee their role (with the exception of one case, mentioned above) and they are not parties to contracts. They are anticipated to support consultants: advise
on, or arrange, local logistics; organise the agenda, including field visits; individual and stakeholder meetings; collect documentation for consultants; debrief them; and provide feedback on the products, etc.

**Possibility to extend.** One TA provision has been extended by more than 10 months, as it turned out that it was unrealistic to accomplish all of the tasks of the consultants during one visit, as planned in the TOR. Scheduling a second visit for two highly in-demand global consultants has proven difficult. Given their expertise and the investment in familiarising them with the country’s context, no replacements have been identified.

**Recipients vs providers vs consultants.** In two cases, the TA recipients reported that the TA provided did not meet their expectations, while TA providers saw some level of impact – either on programmes/policies or on the TA recipient’s capacity and relations. One of the causes might be rooted in the previous phases of the process when a TOR was not clarified with all changes understood and agreed to by all the parties involved. Secondly, the connection between the consultants and TA recipients might not have evolved to address imperfections in the TOR and together to request adjustments before or during the provision of TA. Among the three consultants engaged in two consultancies, only one continues to work with their TA recipient after the provision of TA; s/he was considered as highly competent, with an in-depth knowledge of the context. One of the remaining two consultants was called, “a professional in the topic, but s/he did not allow others to express their opinion: s/he came and delivered without listening to anyone and left. Even at the Ministry of Health, some people could not understand this [approach].” One TA recipient tried to get the TORs of the engaged consultant(s) but was not able to and, according to their TA provider, were unlikely to have even been informed about the changes to the TOR that were taken since their original request. One TA provider acknowledged that their motivation dropped significantly after the changes in the original request and that they, themselves, might not have tried to effectively influence the provision of TA.

**Stage 5: Evaluation and Follow-up**

“We consider the acceptance of the work by the provider and the Global Fund as the act of evaluation. Only then does the Global Fund transfer to us the final payment.” (Interview with a TA provider)

“We submitted the report to the CRG. We very much wanted to get any feedback – questions or recommendations for the future. Nothing came.”

(Interview with a TA provider)

“The TA recipient is not satisfied with the results. However, they gained experience of engagement in processes; they were pointed towards their own strengths and weaknesses; they could realise it is because of a lack of their own skills as to why they were not heard. That has value in itself. However, the recipient should not be left alone at that stage.” (Interview with a TA provider)

**Completion of contract and delivery of products.** The TA provision is completed with finalisation of the contractual agreements to deliver all the products and a TA provider’s report as well as a questionnaire – using ‘survey monkey’ - to providers and recipients. No one mentioned a follow-up survey a few months after the provision of TA. One TA recipient wished “[t]he report with the results of the TA providers and experts to be available not only to the Global Fund but also to the
organisations that submitted the request”. The Forum explicitly recommended that the TA products that do not contain sensitive information, for example, instruments, action plans, etc., should be publicly available and could be used as a learning tool, or for initiating new TA requests.

**Limited monitoring.** The CRG TA Programme might benefit from an additional emphasis on monitoring of TA and follow-up. TA providers lacked feedback from the Global Fund and TA recipients. One consultant learnt what happened with the products once they met people from the TA recipient country at meetings. One TA recipient acknowledged in an interview that they did not feel comfortable in directly providing negative feedback to the Global Fund and felt that it was enough to provide their feedback to the Platform. Up until the Regional Forum, their negative feedback has not been received by TA providers and the CRG team.

**Impact** has not been assessed in a structured way. In one case, the TA provider received confirmation “from a patient organisation’s head that they had managed to integrate all of the recommendations produced [under CRG TA].” In another case, the TA provider said they “do not know what happened with the plan [that was developed under CRG TA]. Even the TA recipient does not know. They lost ownership of that plan”. Nevertheless, in both cases, TA providers saw a positive impact on the capacity of TA recipients. In the third case, regional networks discussed a role in the new Regional HIV Project, which is currently being implemented.

**Follow up.** No follow-up is supported – either through the CRG Team or Platform or TA providers. In one case, a consultant continues to support the TA recipient, reminiscent of a comment from another TA provider about the importance of consultant motivations where no follow-up is foreseen: “We have to engage TA from such strong experts who breath, live and believe. If I wrote some report, I will do everything to get the processes moving and will not let that report be shelved with other forgotten assessments.” Still, follow-up after short-term TA is completed might create additional value for the TA, e.g. several hours of work by consultants or the CRG Platform could support recipients in utilising the TA better or to address some unanticipated challenges.

**Opportunities for improvement**

Several priorities were identified for the process to be fit for purpose. Please note that the description of concerns, below, is short so as not to duplicate the above comments:

<table>
<thead>
<tr>
<th>Concerns</th>
<th>Options for improvement</th>
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<tbody>
<tr>
<td><strong>Process, timelines and review</strong></td>
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<tr>
<td>The CRG process and timeline are not understood, even among its recipients. The long review phase, in particular, concerns recipients. However, ‘delays’ or unrealistic expectations are seen in other phases too.</td>
<td>- Provide a description of the process, including what preparedness is needed by the recipient at each stage and what to expect from a TA provider and the CRG team. It could also be undertaken through a TA initiation package, or a package for prospective TA recipients (webinar, written brief, and an initial call);</td>
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<td>- Introduce a window-based system with deadlines to establish realistic expectations of civil society groups and to improve the speed of the review. For example, organise a working committee for the review of requests which would have a monthly timeline for the review of received applications and an ad hoc review of urgent requests. Such committees could operate for each region.</td>
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- Establish a ‘guaranteed’ period for getting decisions and feedback of a review and include such information in the performance review of the CRG TA Programme;
- Explicitly practice and communicate about expedited review of time-sensitive proposals, such as those related to a country funding request;
- All TA requests should receive regular updates on their progress, including - if requested – the feasibility of an expedited review;
- Communicate factors that could reduce and increase the time needed for various stages;
- Redirect rejected TA requests (due to the scope of CRG TA) to the UNAIDS Technical Support Mechanism (TSM), CCM Hub, the two regional projects, and others;
- Continue collaboration with other technical support partners to avoid duplication.

**TA providers and consultants**

The number of TA providers from the region is limited. Some have pointed to gaps in expertise which is not available in the HIV and TB fields, and also uneven expertise and the sensibility of consultants. Relying on international TA providers might lead to engaging international expertise and omitting national experts. A combination of international/regional and national expertise might be helpful.

TA providers also mentioned that they are expected to bring new expertise and not always have it but would be open to being trained.

Encourage applicants to indicate known national (and other) experts with relevant knowledge who could conduct at least part of the work with national documents in the national language under the TA requested;
- Balance utilisation of national and regional consultants and discuss the advantages and limitations for each individual case with the TA beneficiary and provider;
- Map additional partners in the region to address potential gaps in expertise and encourage linkages between existing TA providers, regional networks and these new partners;
- Create opportunities for increasing new topical expertise of TA providers and their consultant pool, based on regional needs;
- In the future, expand the list of consultants among the TA providers or directly as CRG pre-approved TA providers from other cross-cutting sectors.

**Recipient capacity, ownership and independent assistance**

Recipients could benefit from more active engagement in the TA process, not only in its logistics but as a contractual partner with a determined role, their own staff/consultants engaged and mentored, and financial contributions to their engagement where needed for the phase of provision and follow up.

The scope and essence of TA requested and confirmed in the TOR might change significantly. This might be related to changes in the needs, miscommunication and low capacity to frame their needs and review the suggested TOR.

- In the TA request form, add an option for the TA applicant to request support to improve their own abilities to effectively receive and engage in the provision and utilisation of TA. Examples of such assistance could be the provision of training for the requestor, paying their staff and experts to be engaged in this TA provision, and paying for the coordination of the TA process.
- Consider the TA requestee is a co-contractor of the TA provided.
- Do not change TORs/scope/budget of requested TA without a proper process of ensuring alignment of the changes by all sides engaged and the current circumstances and realistic timeline. TA recipients should be engaged in approval of the TOR being developed as well as in the process of consultant selection. The Platform should stay engaged in the negotiation process until the TOR is finalised;
- If circumstances change and TA is no longer relevant, allow an option to discontinue the TA request;
Extra assistance might help in:
- analysing the problems they are trying to solve and how the CRG TA could match that;
- independent support to think through recommendations received from the Global Fund’s review of their request and, as needed, to negotiate and influence the TOR and the process;
- utilise TA products and organise follow up.

Engage regional networks, the Platform and other partners to provide mentoring to organizations requesting TA and TA recipients on strategic planning, negotiating a TOR, and follow-up;
- Where feasible, engage the TA requesting organisations in the selection of consultants;
- Have a check-point in the first and mid-stages of the TA provision process to check if the TOR requires changes.

Monitoring and follow-up

Quality and utilisation of TA products are not tracked. Showing the value of TA might also be important to the Global Fund to understand its relevance, effectiveness, impact and synergies. The TA assessment is already planned for the current allocation period. It is unclear if there is sufficient utilisation and capacity for TA products after consultants complete their work.

There should be a standard tracking of the quality of TA and feedback after the provision of TA to the parties involved. The Platform could be involved in getting informal feedback given its close relationship with many TA recipients.

The approval of the final TA product should be undertaken, where possible, in face-to-face or online meetings between the TA recipient and the consultant. This approval should include discussion on next steps and possible follow-up between the recipient and consultant.

A small budget could be included in the TA for the TA recipient and provider to conduct follow-up actions using the product(s), as needed. Alternatively, the recipient could be linked with UNAIDS, regional networks or others to cooperate in the follow-up activities.

Make a joint regional database with summaries and full reports available by country. This would enable the sharing of research methodologies, tools, results of technical support and assessments conducted under different technical support assignments. Challenges are envisioned with intellectual property and access to sensitive reports.

Recommendations to the CRG TA Programme and Platform

Global Fund’s CRG TA Programme

- **Process and predictable timeline:** Add information to the Programme’s information materials about the process from the review to contracting and provision of TA with indicative timeline;

- **Capacity of TA requesting organisations:** Allow TA requestors to include TA and budget to support their organisation’s abilities to effectively receive and engage in the provision and utilisation of TA (e.g. staff time, training for staff);

- **Contractual arrangements:** Consider finding a contractual arrangement between TA requestors and TA providers to increase ownership and influence of TA requestors in the TA provided;

- **Request form:**
  - Revise and update the request form;
  - Make available an online version of the form that a TA requestor will be able to fill out directly online;
  - Encourage the TA requesting organisations to include their nominations of potential national and regional experts;
  - Add an option to request an expedited review;
- **TA request review:**
  o Significantly shorten the review (window-based deadlines, regular request for review meetings and ad hoc expedited reviews, establish a minimum review period);
  o Simplify the internal review process within the Global Fund by removing the step of getting a positive review from CCMs and PRs; even if a request is deemed eligible, the content of the request might not be supported for a political reasons by CCM\PR that may undermine the overall decision on delivering the TA; as an alternative, the Global Fund could consult with other partners;

- **TA providers:** Significantly expand the list of TA providers and/or their consultants, in particular expertise in gender, human rights and other cross-sectoral issues;

- **Evaluation and feedback:** Significantly improve collection and provision of feedback; among others, engage the Platform in debriefing the TA recipient, including identifying potential next steps; provide feedback to TA providers;

- **Communication:** Send directly, or through the Platform, regular updates to TA requesting organisations, even if decisions have not yet been made;

- **Coordination:** Consider adding additional staff support, preferably Russian speakers, if the number of TA requests is high;

- **Global learning:** Facilitate exchange of positive and challenging experiences of Platforms, TA providers and with TA requests/TA provision;

- **CRG Capacity Building:** Explore linkages between regional groups engaged in capacity building and TA requesting organisations for possible mentoring through processes where relevant.

**CRG EECA Platform**

- Together with the CRG TA Programme, provide a summary of the process of the TA review and provision including timelines and stakeholders involved, and the rights of those involved in these processes, good practices and bottlenecks;

- Continue supporting requests during the development of the TA request and consider engaging in other phases directly, or find a community friendly network that could mentor the group, specifically during negotiation of the Global Fund’s recommendations to the request and TOR development;

- Follow-up with TA recipients to get their feedback on the TA received (if possible, before the approval of the final products and before the contractual arrangement ends) and the use of its products in country processes; also, discuss the possible follow-up and support in that follow-up from regional networks, UNAIDS, Regional Projects or other partners;

- Support mapping of missing expertise and linkages of relevant groups and experts with pre-approved TA providers;

- Support the sharing of results from the TA provided;

- Dialogue with the Global Fund and other regional platforms to feed observations and recommendations from TA recipients and providers for the next cycle of the CRG TA Programme;

- Learn from other regions and introduce their good practices on how to support the generation of good quality requests, mentor TA beneficiaries and support follow-up.
Conclusions

The CRG TA Programme is greatly needed for enhancing communities, rights and gender efforts in relation to the Global Fund processes.

General conclusions and areas of concern are provided below that are equally relevant to the CRG TA Programme and other donors, organisers and providers of TA support. Donors and technical agencies were not represented at the Regional Forum. Hence, this report represents the perspectives of civil society and communities. Specific recommendations on how to improve the CRG TA Programme, and the role of the Regional Platform, are listed on the final page of the two main sections of this report – Generating Demand and Process from TA Requests to Provision and Evaluation. Implementation of these recommendations might require revisions in the CRG scope, processes and capacities and the mandate of the CRG EECA Platform.

Demand
Despite the low uptake of CRG TA, the region has a high demand for technical support. Identifying problems, and how CRG TA could help a civil society group to address these problems, is a skill requiring maturity and nurturing in the region. Regional networks, the Regional Projects supported by the Global Fund, together with the Platform, as well as technical partners could play a role in countries to mentor groups and leaders to help to generate good quality demand and matching such demand with the CRG TA Programme and other support. Among others, options on how the CRG TA could address the quality of services, enable community-monitoring, and other areas related to transition and sustainability, could be discussed and synergies found with the Global Fund’s Sustainability, Transition and Efficiency Strategic Initiative. Strategic demands could be generated to support community inputs in country grant requests to the Global Fund which are to take place in 2020. CCM processes remain the area where civil society asks for additional support despite CCM grants, and the CRG TA Programme remains incapacitated to meaningfully address the gap until its mandate is reviewed.

Clarity and support
The CRG TA Programme requires further clarity in its scope, beneficiaries, examples of support, as well as the process with an indicative timeline. One of the priorities in improving the process is a quicker review of requests and a predicable timeline.

Ownership and the capabilities of TA requestees should be increased in the process of making them contractual parties, increasing their power during TOR negotiations, funding of their time and in addressing their capacity needs.

The Regional Platform remains critical in providing community-trusted advice and to serve as a navigator throughout the process, not only in the generation of demand. Engagement of regional networks, the Regional Projects and other partners to support TA recipients through the process – possibly also in synergy with the CRG Capacity building arm – should be explored. Stronger emphasis on evaluation, and some follow-up after the TA is provided, might be useful. Follow-up could support utilisation of TA and link it with advocacy for impact.
TA providers and expertise on cross-sectoral issues

The regional networks, and the current list of providers, misses expertise on linked areas such as gender and feminism, e-governance, good governance and transparency, interlinked technical areas of sexual reproductive health and rights, mental health, hepatitis, public health and others. Beyond the CRG TA Programme, there is a need to find ways to link the movements in order to learn lessons and create synergies for better health and rights at policy, governance, and programmatic levels. As a minimum, individual experts from these fields could be included in rosters of TA providers, and TA requesting organisations could be asked about potential consultants, encouraging a combination of national and international expertise.

Eligibility

The geographic coverage of available support is shrinking. As the Global Fund and other donors leave countries, so do technical support partners and UN operations on HIV, TB and civil society development. Therefore, the Regional Forum strongly recommended to revisit the geographic eligibility criteria of the CRG TA Programme with a view that the needs after country grants end might increase and change due to the changes in the environment. At least three countries in the region have become re-eligible for country grants. The re-eligibility has a delay factor (a country needs to meet the criteria in order to become eligible for two years in a row) and country requests are prepared with great delay but, in the meantime, civil society and community groups are not able to seek support from the CRG TA Programme and do not have alternatives. Hence, the CRG TA Programme cannot be seen as truly addressing sustainability and transition if it does not allow support to the countries at least 3 years after their country grants end and immediately after meeting the eligibility criteria for the first time. Ineligible countries should be eligible for regional TA requests if more than 50% of participating countries are eligible, similar to regional applications.

Synergies and coordination

Synergies and coordination in relation to CRG could assist with identifying unmet needs, opportunities with other organisations – donors, UN agencies, regional projects, regional networks and others – to replicate interesting practices in new countries and to avoid duplication. Practical measures need further discussion with the partners absent at the Forum.

The participating regional networks, Regional Projects and the Regional Platform agreed to improve their cooperation in least in two areas of common interest: (1) public contracting and financing of services for HIV and TB (so-called social contracting mechanism with a definition of service packages, costing, etc.); and, (2) a national dialogue regarding country proposals to the Global Fund.
Annex 1: Interviews

Methodology and analysis was undertaken by Raminta Stuikyte with inputs from the CRG Platform and EHRA.

Interviews were conducted, recorded and transcribed by Natalya Podogova, EHRA, and Ivan Varentsov, CRG Platform and EHRA during October-November 2019.

Quotes have been anonymised, eliminating gender or the number of consultants to reduce exposure of specific organisations and to concentrate attention on extracting lessons learnt.

List of interviewees:

Technical support providers and consultants:
- Alliance Consultancy - Lesya Tonkonog
- Canadian HIV/AIDS Legal Network - Mikhail Golichenko
- Eurasian Coalition on Male Health (ECOM) - Sona Orbelyan
- Consultant, Evgeniya Geliukh

Recipients of CRG support:
- Gender and Development, Tajikistan - Nargis Saidova
- Kazakhstan Union of People Living with HIV - Oxana Ibragimova
- New Generation, Armenia - Sergey Gabrielyan
- Positive Women, Ukraine - Olena Stryzhak
- Real People Real Vision, Georgia - Medea Khmelidze

Other civil society groups:
- Belarus, Positive Movement – Inna Statkevich
- Kyrgyzstan, Partnership Network – Aibar Sultangaziev
- Moldova, Union of Organisations Working in the Field of HIV Prevention and Harm Reduction - Ala Iatco
- Serbia, Prevent – Nebojsa Djurasovic
- Ukraine, Convictus – Yevgeniya Kuvshinova
- Uzbekistan, Ishonch va Hayot – Sergey Uchaev
Annex 2: Forum Agenda

14 November (Thursday)

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>9:00-9:45</td>
<td><strong>Opening session</strong></td>
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<tr>
<td></td>
<td>- Welcome from the Global Fund – Brice Bambara</td>
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<td>- Welcome from EHRA – Ganna Dovbakh</td>
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<td></td>
<td>- Participant introductions. Agenda</td>
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<tr>
<td>9:45-11:00</td>
<td><strong>Global Fund CRG support</strong></td>
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<tr>
<td></td>
<td>- Presentation on CRG TA by Brice Bambara</td>
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<td></td>
<td>- Role of the EECA Platform with regard to CRG TA support in the region</td>
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<tr>
<td></td>
<td>by Ivan Varentsov</td>
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<tr>
<td>11:00-11:30</td>
<td><strong>Coffee / tea</strong></td>
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<tr>
<td>11:30-13:00</td>
<td><strong>Sharing technical support experiences</strong> – <em>learning from experiences of the CRG TA recipients and providers in the EECA</em></td>
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<tr>
<td></td>
<td>- Introduction about the process</td>
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<td></td>
<td>- Oxana Ibragimova, Kazakhstan Union of PLHIV</td>
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<td>- Olena Strizhak, Charitable Organisation Positive Women, Ukraine</td>
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<td></td>
<td>- Mikhail Golichenko, Canadian HIV/AIDS Legal Network (<em>online</em>)</td>
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<td></td>
<td>- Lesya Tonkonog, Alliance Technical Assistance Centre (Ukraine)</td>
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<tr>
<td>13:00-14:00</td>
<td><strong>Lunch</strong></td>
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<tr>
<td>14:00-14:45</td>
<td><strong>What are the realities of CRG-related support in countries?</strong></td>
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<td><em>What have been the needs and gaps in CRG-related support in the last two years? What kind of support has been useful in the last two years? What has been needed and is missing in your country context?</em></td>
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<td></td>
<td>- Ala Iatco, Union of Organisations Working in the Field of HIV Prevention and Harm Reduction, Moldova</td>
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<td>- Marija Mijovic, JUVENTAS, Montenegro</td>
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<tr>
<td>14:45-15:30</td>
<td><strong>Improving GF CRG TA and Platform in the next 2 years</strong></td>
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<td>World café on four questions:</td>
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<td></td>
<td>1. How to improve the uptake? What should be the role of the EECA</td>
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<td>Platform in increasing demand?</td>
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<td>2. How to improve the process before TA is provided: request</td>
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<td>development, submission, its review, approval by the Global Fund? How</td>
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<td></td>
<td>to improve the role of the EECA Regional Platform in these processes?</td>
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<td></td>
<td>3. How to improve the process after the approval of a TA request:</td>
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<td>selection of TA provider, development of a ToR, provision and</td>
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<td>evaluation?</td>
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<td></td>
<td>4. How to improve synergies between other available GF-related support</td>
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<td></td>
<td>and CRG TA?</td>
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<tr>
<td>15:30-16:00</td>
<td><strong>Coffee / tea</strong></td>
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<tr>
<td>16:00-17:00</td>
<td><strong>Improving GF CRG TA in the next 2 years (continued)</strong></td>
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<tr>
<td>17:00-17:15</td>
<td><strong>Closing of Day 1</strong></td>
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<td>Time</td>
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<tr>
<td>9:00–9:20</td>
<td>Conclusions from Day 1. Plan for Day 2</td>
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<tr>
<td>9:20–11:00</td>
<td><strong>Regional initiatives and technical support availability and synergies with CRG TA</strong>&lt;br&gt;How capacity building and TA support are integrated into the current regional programmes and possibilities for synergies?&lt;br&gt;- Short overview of the TA available in terms of themes and geography by Mr Ivan Varentsov&lt;br&gt;- Presentation from UNAIDS TSM – Ms Daria Ocheret-Matyushina, UNAIDS&lt;br&gt;- Presentations from the Global Fund Regional HIV and TB Programmes:&lt;br&gt;  o Project SoS, Roman Drozd, 100% Life, Ukraine&lt;br&gt;  o TB-REP 2.0: Liliana Caraulan, PAS Center&lt;br&gt;  o Yuliia Kalancha, TB Europe Coalition&lt;br&gt;Questions and comments.</td>
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<tr>
<td>11:00–11:30</td>
<td>Coffee / tea</td>
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<tr>
<td>11:30–12:30</td>
<td><strong>Capacity building and technical assistance on CRG in the EECA in the next 3 years</strong>&lt;br&gt;What are the priorities, availability, gaps and recommendations to the Global Fund and other TA organizers?&lt;br&gt;- Plenary discussion.&lt;br&gt;- Discussants to start the discussion:&lt;br&gt;Gennady Roshchupkin, Eurasian Coalition on Male Health&lt;br&gt;Ganna Dovbakh, EHRA&lt;br&gt;Lesya Tonkonog, Alliance Technical Assistance Centre (Ukraine)</td>
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<tr>
<td>12:30–13:00</td>
<td>Final session&lt;br&gt;<em>Conclusions. Next steps. Evaluation</em></td>
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<tr>
<td>13:00–14:00</td>
<td>Lunch</td>
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<tr>
<td>14:00–15:30</td>
<td>Networking time</td>
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</tbody>
</table>
### Annex 3: List of Forum Participants

<table>
<thead>
<tr>
<th>Surname</th>
<th>Name</th>
<th>Organization</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Bambara</td>
<td>Brice</td>
<td>The Global Fund</td>
<td>Switzerland</td>
</tr>
<tr>
<td>2 Caraulan</td>
<td>Liliana</td>
<td>Center PAS</td>
<td>Moldova</td>
</tr>
<tr>
<td>3 Doronceanu</td>
<td>Olesa</td>
<td>The Moldovan Institute for Human Rights</td>
<td>Moldova</td>
</tr>
<tr>
<td>4 Dovbakh</td>
<td>Anna</td>
<td>EHRA</td>
<td>Lithuania</td>
</tr>
<tr>
<td>5 Drozd</td>
<td>Roman</td>
<td>100% Life</td>
<td>Ukraine</td>
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<tr>
<td>6 Fomicheva</td>
<td>Tatiana</td>
<td>EHRA</td>
<td>Lithuania</td>
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<tr>
<td>7 Gabrielyan</td>
<td>Sergey</td>
<td>New Generation</td>
<td>Armenia</td>
</tr>
<tr>
<td>8 Golichenko</td>
<td>Mikhail</td>
<td>Canadian HIV/AIDS Legal Network (online)</td>
<td>Canada</td>
</tr>
<tr>
<td>9 Iatco</td>
<td>Ala</td>
<td>Union of Organisations Working in the Field of HIV Prevention and Harm Reduction</td>
<td>Moldova</td>
</tr>
<tr>
<td>10 Ibragimova</td>
<td>Oxana</td>
<td>Kazakhstan Union of People Living with HIV</td>
<td>Kazakhstan</td>
</tr>
<tr>
<td>11 Kalancha</td>
<td>Yuliia</td>
<td>TBEC</td>
<td>Ukraine</td>
</tr>
<tr>
<td>12 Khasanova</td>
<td>Elena</td>
<td>Spin Plus</td>
<td>Tajikistan</td>
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<tr>
<td>13 Khmelidze</td>
<td>Medea</td>
<td>Real People Real Vision</td>
<td>Georgia</td>
</tr>
<tr>
<td>14 Maliovana</td>
<td>Tatiana</td>
<td>Interpreter</td>
<td>Moldova</td>
</tr>
<tr>
<td>15 Matyushina-</td>
<td>Daria</td>
<td>UNAIDS TSF</td>
<td></td>
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<tr>
<td>Ocheret</td>
<td></td>
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<tr>
<td>16 Mijovic</td>
<td>Marija</td>
<td>Juventas</td>
<td>Montenegro</td>
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<tr>
<td>17 Roshchupkin</td>
<td>Gennady</td>
<td>Eurasian Coalition on Male Health</td>
<td>Estonia</td>
</tr>
<tr>
<td>18 Stryzhak</td>
<td>Olena</td>
<td>Positive women</td>
<td>Ukraine</td>
</tr>
<tr>
<td>19 Stuikyte</td>
<td>Raminta</td>
<td>Consultant</td>
<td>Lithuania</td>
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<tr>
<td>20 Timotin</td>
<td>Iulia</td>
<td>Interpreter</td>
<td>Moldova</td>
</tr>
<tr>
<td>21 Tonkonog</td>
<td>Lesya</td>
<td>Alliance Technical Assistance Centre – International Charitable Foundation (ATAC-ICF)</td>
<td>Ukraine</td>
</tr>
<tr>
<td>22 Uchayev</td>
<td>Sergey</td>
<td>Ishonch va Haet</td>
<td>Uzbekistan</td>
</tr>
<tr>
<td>23 Varentsov</td>
<td>Ivan</td>
<td>EHRA</td>
<td>Russia</td>
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<tr>
<td>24 Ziyoeva</td>
<td>Sayora</td>
<td>Gender and Development</td>
<td>Tajikistan</td>
</tr>
<tr>
<td>25 Zubkova</td>
<td>Irena</td>
<td>EHRA</td>
<td>Lithuania</td>
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Annex 4: Other technical support related to the Global Fund

The Global Fund provides other channels of support for countries in addition to the support that is already planned in country funding requests. These include ongoing regional grants on HIV and TB with the support of the donor, along with two strategic initiatives – on human rights and on transition, sustainability and efficiency.

Other important examples of support provided comes from the regional HIV, TB and key population networks. In addition to the Global Fund, there are other donors and technical support mechanisms, such as the Open Society Foundations, GIZ, and USAID. Unfortunately, these agencies were not able to join the meeting and only the UNAIDS Technical Support Mechanism was represented. The overview of technical support availability is produced by the Regional Platform and is available at the following link.

Other Global Fund CRG support: Human Rights

The Human Rights Breaking Down Barriers Strategic Initiative\(^3\) aims to remove human rights barriers to services and improve access to, uptake of, and adherence to, treatment and prevention programmes. Kyrgyzstan and Ukraine are part of the initiative. The list of countries participating in this innovative initiative was decided globally after long consultations. They have received human rights matching funds; technical guidance on human rights programmes for HIV and TB; and baseline assessments that detail the nature of the human rights barriers, what is needed to comprehensively address them, and the costs involved. Mid-term assessments are underway. Support has been provided to hold multi-stakeholder meetings and to develop plans for a comprehensive response to human rights-related barriers:

- Kyrgyzstan received TA through the STE SI and the Human Rights SI;
- Ukraine received TA funded from country grants and will be receiving additional TA from Frontline AIDS, with funding from BACKUP Health.

Global Fund’s Sustainability, Transition and Efficiency

As part of the Sustainability, Transition and Efficiency Strategic Initiative (STE-SI), a few countries in the region have received support to implement transition readiness assessments, technical assistance for transition planning, social contracting and domestic resources mobilisation for civil societies. Countries that have received support through the STE-SI include Albania, Armenia, Azerbaijan, Belarus, Kosovo, Kyrgyzstan, Montenegro, Romania, Tajikistan, and Turkmenistan. No information is available on how this support is initiated and decided.

UNAIDS Technical Support Mechanism

The UNAIDS Technical Support Mechanism (TSM) can provide short-term technical support (including co-sponsoring of that support), and integrated team support, including from skilled UNAIDS staff and closer dialogue with national partners to support countries to move towards fast-track targets. The three priority areas include: building blocks and target alignments; Global

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\(^3\) Directly cited from the Mr Bambara presentation.
Fund grant implementation; and efficiency, sustainability and transition. This could include assisting with investment cases; producing population size estimations and other strategic information; with writing proposals for countries and multi-countries or developing their costing and M&E systems; addressing policy and programmatic barriers; strengthening community systems and service delivery models; addressing human rights, stigma and discrimination including applying the Stigma Index, etc. Among the 210 technical support interventions provided globally since 2018, only 2 (i.e. less than 1 percent) came for Eastern Europe and Central Asia. Accessing the Mechanism includes referring to country and/or regional teams. The detailed steps of the Mechanism are provided in the presentation by Daria Matyushina of the UNAIDS TSM team who has offered to answer additional questions, if any, via email, dasha.ocheret@gmail.com.

Regional project on TB: TB-REP 2.0

The **TB-REP 2.0** project has been supported by the Global Fund during 2019–2021 to support timely identification of TB cases and improving treatment results, particularly for drug-resistant tuberculosis. Managed by the PAS Center in coordination with WHO/Europe, TB Europe Coalition, TB People, and TB Caucus, it covers 11 countries and continues from the TB-REP project implemented during 2016-2018.

The **TB REP 2.0** project implements an assessment on legal, key population, gender and stigma issues in the TB responses in three countries, while the CRG TA programme is able to fund the fourth country, Tajikistan. The **TB REP 2.0** Project had insufficient resources to cover all of the interested countries and one NGO in Tajikistan has already approached the Global Fund for possible support. The presentation by Lilian Caraulan from the PAS Center outlined other specific activities that are relevant for civil society – as advocates, as community mobilisers and as service providers – under its comprehensive programme in the following areas:

- Improving the strategy of case-finding
- Improving early diagnostics
- Improving quality of care and case management
- Increase adherence to treatment
- Removing barriers related to the health system
- Increasing political adherence to TB reforms
- Improving civil society capacity

**TB Europe Coalition** is a regional advocacy network of civil society organisations and individuals from across the WHO Europe region. Capacity building of civil society and activists in their service provision and advocacy role is one of the two critical areas across the themes of domestic financing, human rights and development of new tools and access to existing ones. The Coalition is one of the implementers of the CRG’s capacity building programme through key population, HIV, TB and malaria networks and is part of the **TB REP 2.0** project. Yuliia Kalancha, the TBEC Advocacy and Policy Manager, highlighted the potential synergies between TBEC’s programmes and the CRG TA programme where the first uses a mentorship approach, while the second a technical support method.
Regional project on HIV: Sustainability of Services

The SoS Project is being implemented during 2019-2021 by the Alliance for Public Health and the 100% Life Network of People living with HIV in Ukraine together with a broad partnership to support HIV sustainability services through: (1) improving the environment for services in 9+5 countries; and, (2) optimising prices for medicines. Based on the presentation of the Project by the representative Roman Drozd, the Project has specific plans for increasing the capacity of their direct civil society partners in the following areas interrelated with the CRG TA scope:

- Budget advocacy
- Service costing, standards
- Monitoring of tenders for medicines
- Updating HIV treatment protocols
- Medicine price reduction

The Project uses different approaches to capacity strengthening, including mentoring.