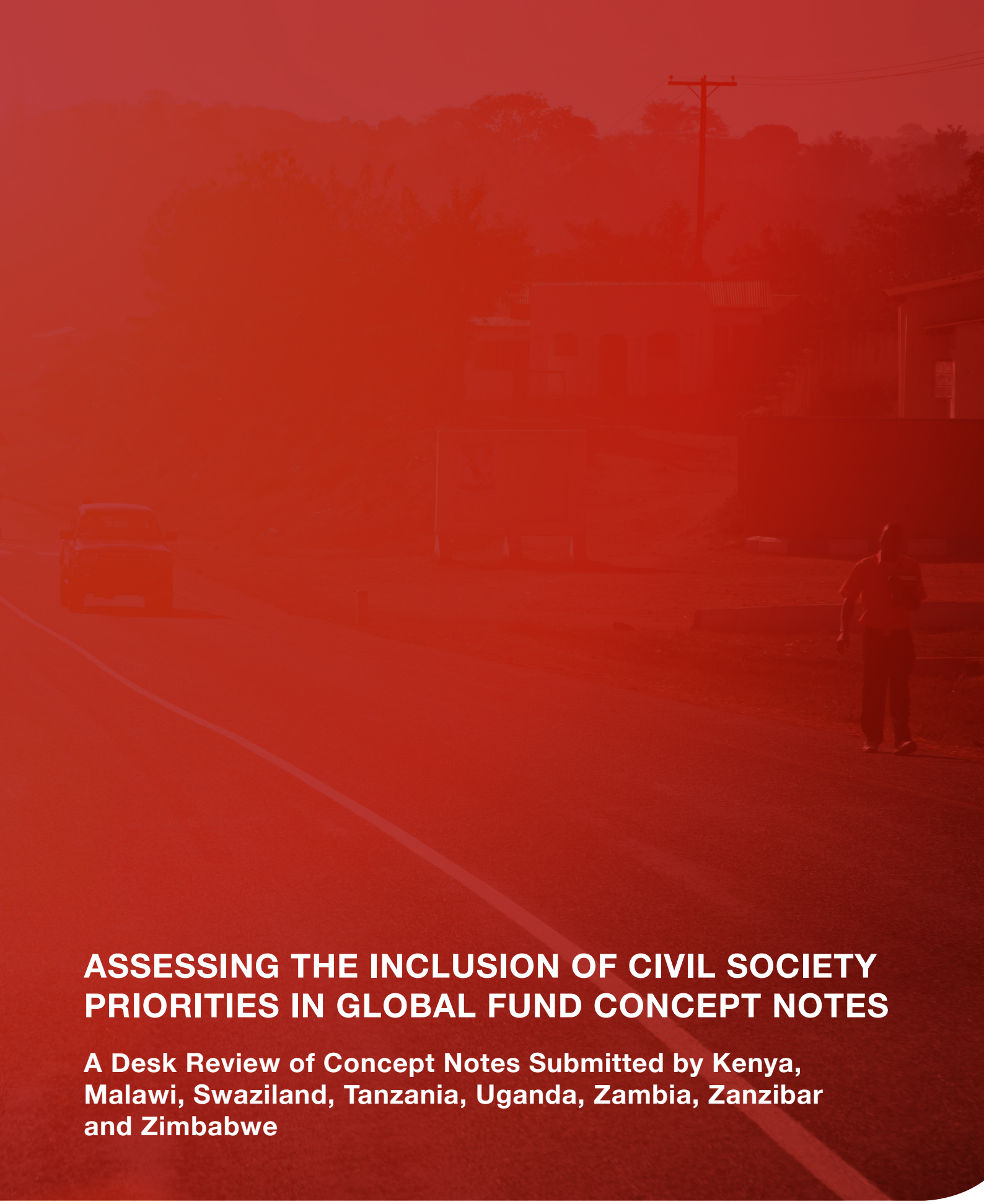

ASSESSING THE INCLUSION OF CIVIL SOCIETY PRIORITIES IN GLOBAL FUND CONCEPT NOTES

A Desk Review of Concept Notes Submitted by Kenya, Malawi, Swaziland, Tanzania, Uganda, Zambia, Zanzibar and Zimbabwe

AUGUST 2015

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ACKNOWLEDGEMENTS

EANNASO would like to thank GIZ (Deutsche Gesellschaft für Internationale Zusammenarbeit) for funding this research and the production of this report.

Dr. Gemma Oberth (Independent Consultant) is the principal author of this report. Additional research and analysis was provided by Olive Mumba (EANNASO), Lubna Bhayani (International HIV/AIDS Alliance), Dr. Mark Daku (Montreal Health Equity Research Consortium) and Carla Oberth (Simon Fraser University).

ABOUT EANNASO

The Eastern Africa National Networks of AIDS Service Organization (EANNASO) is a nongovernmental regional network. It is a membership regional network made up of eight national networks of AIDS Service organizations in seven countries: Burundi, Ethiopia, Kenya, Rwanda, Sudan, Tanzania (mainland and Zanzibar) and Uganda. EANNASO facilitates coordination, effective joint advocacy, networking and information sharing among its member networks in Eastern Africa, with a vision of an empowered civil society which can effectively contribute to promoting a life free from the HIV epidemic and its associated impacts in the East African region. Through driving a regional HIV prevention agenda that empowers national networks, we can effectively contribute to reducing new HIV infections by enhancing the voice of CSOs and strengthening both institutional and programmatic capacities.

LIST OF ACRONYMS

AIDS	ACQUIRED IMMUNE DEFICIENCY SYNDROME
COP	COUNTRY OPERATIONAL PLAN
CSO	CIVIL SOCIETY ORGANIZATION
EANNASO	EASTERN AFRICA NATIONAL NETWORKS OF AIDS SERVICE ORGANIZATIONS
GFATM	GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA
GIZ	DEUTSCHE GESELLSCHAFT FÜR INTERNATIONALE ZUSAMMENARBEIT
HIV	HUMAN IMMUNODEFICIENCY VIRUS
NFM	NEW FUNDING MODEL
NGO	NON-GOVERNMENTAL ORGANIZATION
NSP	NATIONAL STRATEGIC PLAN
PEPFAR	PRESIDENT'S EMERGENCY PLAN FOR AIDS RELIEF
PMTCT	PREVENTION OF MOTHER-TO-CHILD TRANSMISSION
TB	TUBERCULOSIS
VMMC	VOLUNTARY MEDICAL MALE CIRCUMCISION

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EXECUTIVE SUMMARY

There is consensus that a strong and engaged civil society should be part of the entire continuum of health programming, from planning to implementation and through to monitoring and evaluation. However, the degree to which civil society is able to participate meaningfully in these processes is not well understood. Available evidence suggests that civil society still faces enormous barriers to being able to effectively influence decision making around health (Kelly & Birdsall, 2010; Lopez Gonzalez, 2013; Oberth, 2012b). There is also a tradition of debate around the influence that international donors might have over the decisions made at country level. In many cases, evidence indicates that donor agencies have more say over the design of health programs than local actors on the ground (Cohen & Tate, 2005; Epstein, 2007). This has clear implications for the ability of civil society to have their voice heard and to engage effectively.

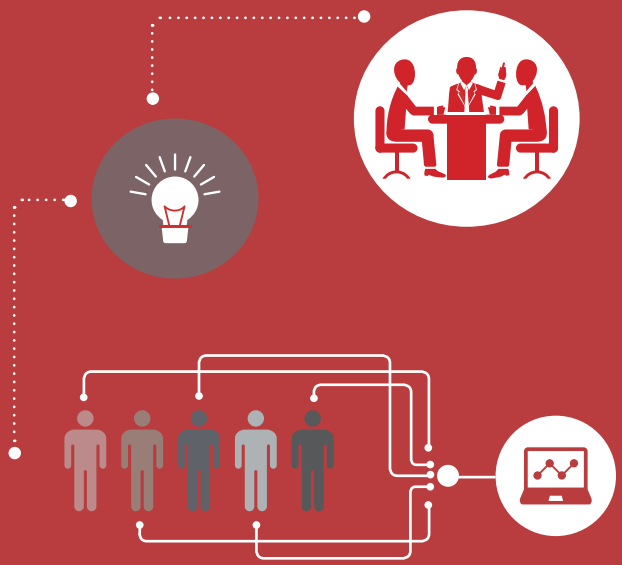
There are two main trends which inform the need to conduct this desk review. First, there is a shift towards increasing funding for AIDS, TB and malaria programs coming from within affected countries instead of from international funding partners. This might mean that local actors are provided more space to direct decision making about health programs in country. Second, there is renewed emphasis on the importance of dialogue, consultation and engagement in designing these programs, especially from civil society and key affected populations. In fact, large international donors such as the Global Fund to Fight AIDS, Tuberculosis and Malaria as well as the US President's Emergency Plan for AIDS Relief (PEPFAR) require evidence of civil society engagement to be included in requests for funding.

In light of these trends, this desk review systematically measures and assesses the inclusion of civil society priorities in Global Fund concept notes. Eight county concept notes were examined: Kenya, Malawi, Swaziland, Tanzania, Uganda, Zambia, Zanzibar and Zimbabwe. The concept notes were measured against the Civil Society Priorities Charters published by AIDS Accountability International. Each country then received a score (percentage) for the level of inclusion of civil society priorities. The objectives were threefold: (1) to measure the level of inclusion of civil society priorities in Global Fund concept notes, (2) to analyse contextual factors which might have made inclusion of civil society priorities more or less likely, and (3) to make initial observations about the implications of the results.

The results of the analysis reveal that there is wide variation in the degree to which concept notes include civil society priorities. Malawi's concept note is by far the most responsive to civil society priorities (87%) and Zambia's is the least (38%). The remaining country scores are as follows: Kenya (76%), Tanzania (67%), Zanzibar (67%), Uganda (64%), Swaziland (50%) and Zimbabwe (40%). The concept notes are the most responsive to civil society priorities on key populations' issues, with 68% of these priorities included. Conversely, just 15% of civil society priorities on voluntary medical male circumcision are included in the concept notes, making them the least responsive to this focal area.

In explaining these results, there are strong statistically significant relationships found between the responsiveness of Global Fund concept notes and Afrobarometer indicators on democracy, participation and civic engagement. There is also a significant relationship between the voice and accountability rankings from the World Governance Indicators. This makes a compelling case to show that civil society participation at the community level is linked to the democracy of aid, and the ability of civil society to hold government and funding partners accountable. The strongest significant relationship found was between the responsiveness of the concept notes and the Afrobarometer indicator on how often people get together with others to raise issues. This provides strong evidence for the impact of consultation and dialogue on the end result of influencing requests for funding.

This desk review ends with a brief discussion on the potential impacts of concept note responsiveness to civil society, followed by a series of recommendations for further research as well as action around the results.



It is generally understood that health programes should be designed to reflect a wide and varied range of interests, perspectives and needs. It is critical that interventions serve those most in need, so key affected populations must be part of the process to design activities. It is also important that these interventions be technically sounds, so disease experts should also play a role. Ideally, the programme should also be sustainable and in line with national strategies, so government has a central role to play. Other key stakeholders include: academia, to bring in the latest peer-reviewed research findings; civil society, to bring the voice of the community; and the private sector, to include considerations of workplace settings as well as corporate investment. Indeed, funding partners should also be involved to a degree, especially if the money for the programme is coming from their coffers.

There is a rich literature on the examination of the power dynamics between these various groups when it comes to influencing decisions about the design of health programes (Fox, 2014; Kelly & Birdsall, 2010; Oberth, 2012a; Oberth, 2012b; Patterson & Cole, 2006; Tucker, 2012). One of the core debates within this tradition has been whether countries are more influenced by the priorities of international funding partners or the demands of their own citizens. The influence of Northern funding over development programs in the Global South has a long and controversial history. With roots in the era of structural adjustment led by the International Monetary Fund and World Bank in the 1980s, there is a precedent for scepticism towards funding that is tied to donor-defined reforms. In many ways, if programs are externally funded by donors in Washington or Geneva, the recipient country is more accountable to the donor than they are to beneficiaries on the ground. Hulme and Edwards (1997) call this “upward accountability”. Upward accountability is not only misdirected (upward instead of downward), but also misrepresented, as it is often reduced to numbers and statistics in donor reports rather than political impact in the local community (Bendaña, 2006). Similarly, Wood (1997) argues that large flows of money from international donors into developing countries - and often into the hands of large international NGOs - can lead to a “franchising out” of the state, undermining democracy while claiming to deepen it.

One of the most oft-cited examples of donor influence over domestic health programming is in Uganda, especially around abstinence-only interventions which were paid for primarily by the American government (Cohen & Tate, 2006; Epstein, 2007). As Cohen and Tate (2006) documented in Kampala, “With funding coming in now, for any youth activities, if you talk about abstinence in your proposal, you will get the money. Everybody knows that.”

However, recent trends in international health financing show that an increasing proportion of global AIDS investment is coming from within affected countries. In 2011, a 15% rise in HIV expenditure by low- and middle-income countries meant that for the first time ever, domestic spending made up the majority of all HIV expenditure, globally (UNAIDS, 2012, p 62). This might shift power from donors to local actors, redirecting demands for accountability away from donors and towards beneficiaries.

Despite this trend, progress towards a more sustainable domestically-funded AIDS response has not been even. Some countries already have the resources to completely fund their own AIDS programs, while others remain largely dependent on external resources, and will likely remain that way for some time. Many other countries are somewhere in transition. A recent analysis of twelve African countries suggested that by 2018, and in a maximum effort scenario, Botswana, Namibia and South Africa will be able to completely finance their own AIDS programs without any donor assistance (Resch, Ryckman & Hecht, 2015). Conversely, even in a maximum effort scenario, Ethiopia will only be able to fund 23 percent of its program needs; Mozambique, just 19 percent. Given these different levels of dependence on donors, countries are necessarily influenced by donors in different ways and to different degrees. In fact, countries that depend more heavily on donor funding are more inclined to align their National Strategic Plans (NSPs) to donor policies (Oberth, 2012a).

Countries that are more financially independent develop NSPs which are more reflective of locally defined priorities. In other words, African countries have tended to respond to AIDS in one of two ways: The 'Geneva Consensus', aligning with internally agreed practice, or the "Pan-African Response", employing more domestically tailored solutions (Fox, 2014).

Within the context of shared responsibility for AIDS financing, there is also an enhanced recognition of the importance of consultation and participation of a variety of actors in the development of requests for funding as well as program design. The New Funding Mode (NFM) of the Global Fund to Fight AIDS Tuberculosis and Malaria (GFATM) requires that countries demonstrate a robust country dialogue process in order to qualify for funding. For the first time in 2015, the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) requires country offices to document civil society input and feedback in the development of PEPFAR Country Operational Plans (COPs). Despite this renewed commitment to the importance of civil society engagement, these organizations have not benefited equally from the shift to more domestic funding for AIDS. According to the recent UNAIDS Gap Report (2014, p. 22), 59% of the civil society organizations implementing human rights programes are reporting decreases in funding and another 24% had no change in funding levels. Further, nearly 70% of these organizations are not accessing domestic funding at all for any their activities.

As such, there remain unanswered questions about the impact of civil society engagement on the outcomes of donor-funded programs, especially when consultation is heavily emphasized in the process. Do consultations with communities matter for the bottom line? Do civil society's priorities get included?

There is some emerging evidence about civil society's ability to influence decision-making related to funding requests submitted to major international donors. The Open Society Foundations conducted research in Swaziland which indicated that civil society was best able to track whether their priorities were included in grant proposals when civil society representatives sat on the writing team (Lopez Gonzalez, 2012). In the Global Fund's NFM, evidence from pilot countries suggested that challenges persist with civil society inclusion, even within the spirit of country dialogue that the NFM envisioned. In Myanmar, tensions arose during the country dialogue after it was perceived that one of the country's sex worker networks was intentionally excluded from discussion (Lopez Gonzalez, 2013). In Zimbabwe, some felt that the Global Fund's heavy focus on National Strategic Plans (NSPs) risked excluding civil society priorities, since some NSPs may not adequately capture these issues (Zimbabwe CCM, 2013).

Research Objectives

This desk review has three main research objectives. First, the review seeks to systematically measure the extent to which civil society priorities are included in Global Fund concept notes submitted by eight African countries - Kenya, Malawi, Swaziland, Tanzania, Uganda, Zambia, Zanzibar[1] and Zimbabwe.

Second, this review also aims to understand which factors may enable or hinder the ability of civil society to influence Global Fund concept notes. To assess this, a series of variables on civil society strength, freedom of association, freedom of expression and voice and accountability are examined to explore relationships between these contextual factors and the inclusion of civil society priorities in the concept notes.

Third, this desk review examines the impact of the inclusion/exclusion civil society priorities in Global Fund concept notes. Factors such as the success or failure of the requests for funding as well as the relationship between the inclusion of civil society priorities and disease context were investigated.

Methodology

In order to operationalize the concepts of "Civil Society Priorities" and "Donor" and to measure the responsiveness of the former to the latter in a systematic way, these variables need to be clearly defined.

Measuring civil society priorities for donor spending is a difficult variable to identify. This data is not regularly or rigorously collected. For this desk review, Civil Society Priorities Charters [2] were selected as the measure of civil society priorities (the independent variable). The Charters were published by AIDS Accountability International in 2013 and 2014, and include national level civil society priorities specifically designed to influence the funding decisions of the Global Fund. The Concept Notes that were submitted to the Global Fund were selected as the dependent variable, as one of the largest funding partners of HIV and TB in East and Southern Africa.

Countries were included in this analysis based on the availability of data. Civil Society Priorities Charters existed for eight African countries (Kenya, Malawi, Swaziland, Tanzania, Uganda, Zambia, Zanzibar and Zimbabwe) at the time of data collection. As such, these eight countries form the focus of the desk review. The Civil Society Priorities Charters were downloaded from AIDS Accountability International's website (www.aidsaccountability.org).

[1] For the purposes of this report, Zanzibar is considered as a separate entity to mainland Tanzania. For Global Fund processes, Zanzibar has its own country coordinating mechanism (CCM), its own funding allocation and submits its own concept note. It is a distinct portfolio, completely separate from Mainland Tanzania. For these reasons, it is analyzed and discussed as a separate country in this report.

[2] The Civil Society Priorities Charters are accessible on AIDS Accountability International's Website: http://www.aidsaccountability.org/?page_id=10280&projectid=922

Next, for each of the eight countries, Global Fund concept notes were sourced by contacting relevant partners, including CCM Secretariats, CCM members and Global Fund watchdogs, via email to request the documents. Most countries submitted integrated TB/HIV concept notes, with the exception of Zimbabwe which only submitted a single concept note for TB (the country had submitted its HIV concept note in April 2013 as an early applicant to the Global Fund's NFM, but this was not examined because it was submitted before the country produced its Civil Society Priorities Charter).

See Table 1 for the timeline of when countries developed civil society priorities charters, and when they submitted concept notes to the Global Fund.

TABLE 1: TIMELINE OF COUNTRY DEVELOPMENT OF CIVIL SOCIETY PRIORITIES CHARTERS AND CONCEPT NOTE SUBMISSION

COUNTRY	CIVIL SOCIETY PRIORITIES CHARTER PUBLISHED	# OF CIVIL SOCIETY ORGANIZATIONS REPRESENTED IN THE CHARTER	CONCEPT NOTE SUBMITTED TO THE GLOBAL FUND	TYPE OF CONCEPT NOTE SUBMITTED
KENYA	September 2014	32	30 January 2015	HIV/TB
MALAWI	February 2014	37	30 January 2015	HIV/TB
SWAZILAND	November 2013	36	15 October 2014	HIV/TB
TANZANIA	May 2014	78	15 October 2014	HIV/TB
UGANDA	August 2014	56	15 October 2014	HIV/TB
ZAMBIA	December 2013	40	15 June 2014*	HIV/TB
ZANZIBAR	June 2014	51	15 October 2014*	HIV/TB
ZIMBABWE	March 2014	50	15 May 2014	TB

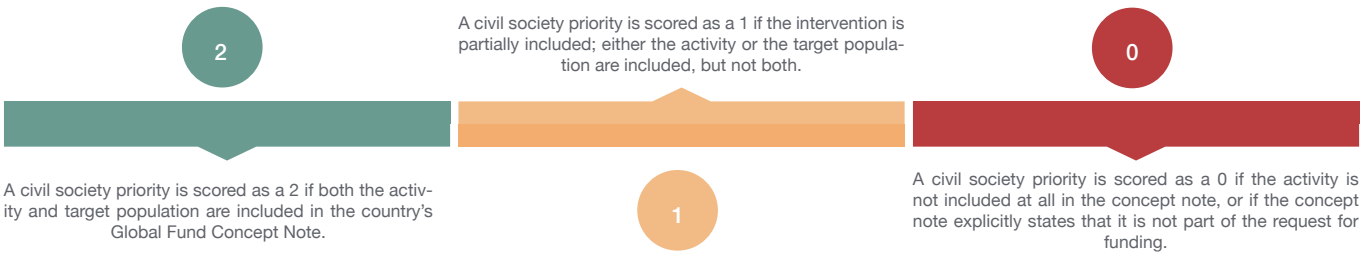
*Applicant resubmitted concept note for second iteration several months later. For consistency purposes, only first iteration concept notes were reviewed as part of this analysis.

Scoring

In order to measure the level of inclusion of civil society priorities in the Global Fund concept notes, a systematic approach was employed to generate a quantitative result. For each priority in the Civil Society Priorities Charters, the Global Fund concept notes were examined for a corresponding intervention. This process was limited to the "Applicant Request for Funding" or "Modular Template" sections of the concept note, since these are the sections where money is requested for specific activities. In other words, this analysis did not consider a priority to be included unless funding was specifically requested for it. In many cases, the concept notes discuss issues in the other parts of the narrative (country context, national strategic plan) but do not include it in the funding request.

Next, the inclusion of the civil society priority in the Global Fund concept note was graded on a three-point scale (Table 2).

TABLE 2: RANKING SCALE FOR MEASURING THE LEVEL OF INCLUSION OF CIVIL SOCIETY PRIORITIES IN GLOBAL FUND CONCEPT NOTES



Weighted Scoring

After each civil society priority was assigned a score for the level of inclusion, it was also deemed important to add a weighting to this score. The weighting is necessary because some priorities were expressed as more important than others in the Civil Society Priorities Charters. The inclusion of the top priority for civil society should carry more weight than the inclusion of those lower down in the Charter. To reflect this prioritization, each score was given a weighting to reflect the importance of that priority in the Charter. The weightings were simple multipliers, in descending order of priorities. For example, if a Charter contained 12 priorities, the number one priority score was multiplied by twelve, the number two priority score was multiplied by 11, and so forth. The Weighted Score represents the Score (2, 1, or 0) x Priority Value.

Categorizing Concept Note Responsiveness

The total value of all the weighted scores were tallied, and then expressed as a percentage, out of a total possible points score. In other words, the final grade is generated by the total cumulative Weighted Score, divided by the total possible points. The total scores will be categorized into five groupings, outlined in Table 3.

TABLE 3: CATEGORIES AND SCORING FOR MEASURING RESPONSIVENESS OF GLOBAL FUND CONCEPT NOTES TO CIVIL SOCIETY PRIORITIES

CATEGORY	SCORE	DESCRIPTION OF CATEGORY	LEVEL OF RESPONSIVENESS TO CIVIL SOCIETY PRIORITIES
1	87.5-100%	Almost all priorities included	Extremely Responsive
2	75-87.5%	Large majority of priorities included	Highly Responsive
3	62.5-75%	Majority of priorities included	Moderately Responsive
4	50-62.5%	Some priorities included	Mildly Responsive
5	<50%	Less than half of priorities included	Limited Responsiveness

Limitations

There are a few limitations to the data and the methodology of this desk review which bear articulating.

First, AIDS Accountability International supported countries to produce Civil Society Priorities Charters based on demand from civil society. For this reasons, there is a certain level of proactive initiative among civil society in these contexts from the outset. As such, the results in this analysis may not be easily extended to other countries where there were no requests for Civil Society Priorities Charters. These results therefore do not necessarily paint an accurate picture of the overall level of concept note responsiveness to civil society in the NFM.

Second, it is important to note that the scoring methodology does leave room for subjective interpretation on behalf of the investigator. To mitigate this, three countries were blind double-coded and scored by a third party researcher to test for consistency of the method. In this exercise the results yielded a reliability coefficient of more than 90%, which is deemed acceptable in political and social science literature (Krippendorff, 1980; Miles & Huberman, 1994; Riffe, Lacy & Fico, 1998).

Results

The results of the desk review of the eight Global Fund concept notes reveal wide variation in the level of responsiveness to civil society priorities (Table 4). Malawi's concept note was by far the most responsive to civil society priorities, with a score of 87% which is deemed extremely responsive. By contrast, both Zimbabwe and Zambia had scores below 50%, which demonstrates limited responsiveness.

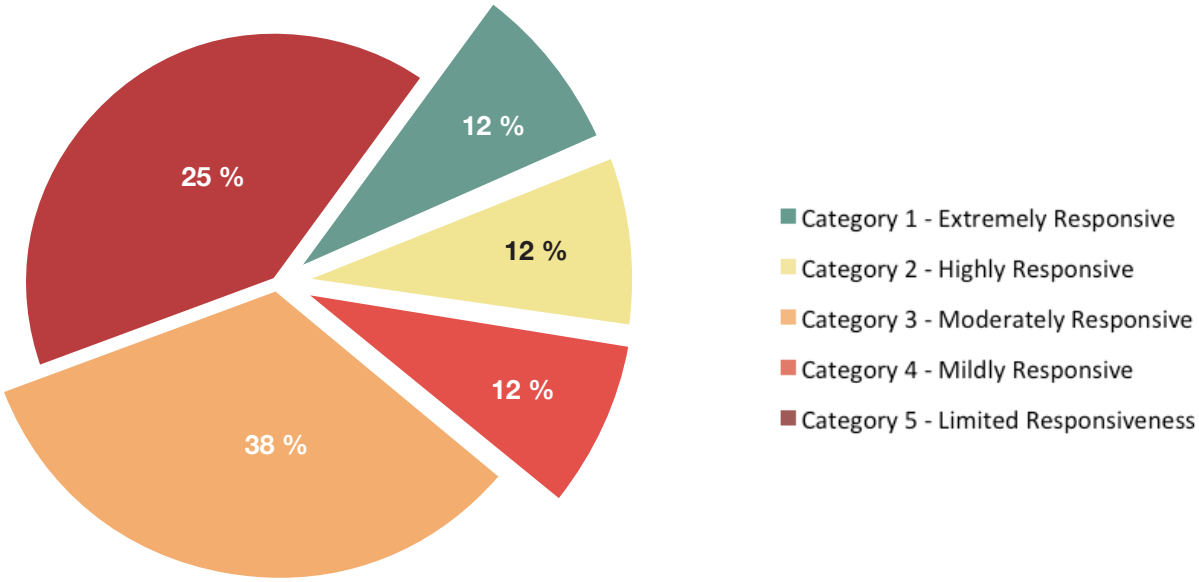
TABLE 4: OVERALL RESPONSIVENESS OF GLOBAL FUND CONCEPT NOTES TO CIVIL SOCIETY PRIORITIES IN EIGHT AFRICAN COUNTRIES

COUNTRY	SCORE	CATEGORY	LEVEL OF CONCEPT NOTE RESPONSIVE-NESS TO CIVIL SOCIETY PRIORITIES
Malawi	87%	1	Extremely Responsive
Kenya	76%	2	Highly Responsive
Tanzania	67%	3	Moderately Responsive
Zanzibar	67%	3	Moderately Responsive
Uganda	64%	3	Moderately Responsive
Swaziland	50%	4	Mildly Responsive
Zimbabwe	40%	5	Limited Responsiveness
Zambia	38%	5	Limited Responsiveness

Uganda, Tanzania and Zanzibar all had concept notes that were moderately responsive, which was the most common category. Malawi was the only concept note which was in the extremely responsive category and Kenya's concept note was the only on in the highly responsive category. The average score across the eight countries was 61%, which is mildly responsive, though the majority of countries (five out of eight) outperformed the average.

FIGURE 1: RESPONSIVENESS OF CONCEPT NOTES TO CIVIL SOCIETY PRIORITIES, BY COUNTRY & CATEGORY

FIGURE 2: RESPONSIVENESS OF GLOBAL FUND CONCEPT NOTES TO CIVIL SOCIETY PRIORITIES, BY CATEGORY[3]



Taking a closer look at the kinds of priorities that were included is another interesting way to assess the inclusion of civil society priorities in Global Fund concept notes. In the Charters, civil society set priorities based on the UNAIDS Strategic Investment Framework (Schwartländer et al., 2011). Each country set two priorities within the following six intervention categories: (1) Treatment Care and Support, (2) Prevention of Mother-to-Child Transmission (PMTCT), (3) Voluntary Medical Male Circumcision (VMMC), (4) Key Populations, (5) Behaviour Change, and (6) Condom Promotion. It is useful to see how responsive the Global Fund concept notes were to each category, to see if some priorities are more likely to be included than others (Table 5). The analysis presented in Table 5 only includes Malawi, Swaziland, Tanzania, Uganda and Zambia. The other three countries - Kenya, Zanzibar and Zimbabwe – were excluded because they employed slightly different methods of selecting priority categories and did not stick strictly to the UNAIDS Investment Framework[4]. These scores were generated without weighting.

Table 5 reveals that civil society priorities on key populations issues were the most likely to be included in Global Fund concept notes. Priorities on voluntary medical male circumcision (VMMC) were the least likely to be included.

TABLE 5: INCLUSION OF CIVIL SOCIETY PRIORITIES IN CONCEPT NOTES, BY UNAIDS INVESTMENT FRAMEWORK CATEGORY

Most Responsive

Least Responsive

TYPE OF PRIORITIES SET BY CIVIL SOCIETY	% OF PRIORITIES INCLUDED IN CONCEPT NOTES
Key Populations	68%
Behaviour Change	65%
Condom Promotion	63%
Prevention of Mother-to-Child Transmission	50%
Treatment Care and Support	40%
Voluntary Medical Male Circumcision	15%

[3] The pie adds up to 99% because each of the 12% slices is really 12.33%.

[4] Zanzibar opted to set priorities under HIV Testing instead of Male Circumcision, as the Muslim country has a near 100% circumcision rate. Kenya opted to select priorities under different categories, which included Procurement as well as Health Systems Strengthening. The methodology for setting priorities was held constant, so they were included in this analysis, though for the purposes of comparing categories of priorities they have been excluded. Zimbabwe's process focused on TB-specific categories.

Civil society priorities on key populations issues were the mostly likely to be included in Global Fund concept notes

It is not unsurprising that the concept notes were less responsive to civil society priorities on the bio-medical elements of the investment framework, such as treatment and VMMC. These are areas in which civil society has comparably less experience and expertise than government. It is also interesting to note that behaviour change and key populations were most commonly selected as the top priorities for civil society in the Charters and VMMC was most commonly selected near the bottom. The results presented in Table 5 also suggest that civil society may be more likely to experience success in lobbying for the inclusion of an issue that it has relative competence in delivering as a service. Perhaps this is a credibility issue, where civil society is seen as an expert in behavioural interventions but not in bio-medical ones.

At the country level, Table 6 provides an overview of the priorities included in Tanzania's concept note, by Investment Framework Category. Civil society priorities on prevention of mother-to-child transmission (PMTCT) were both included in the concept note. These two PMTCT priorities articulated by civil society in their Charter were: (1) Do community mobilization for antenatal clinic attendance and delivery at health facility, and (2) Strengthen community-based PMTCT services. Both of these priorities were included in the country's concept note. On the other end of the scale, the country's concept note was the least responsive to civil society priorities on VMMC, which were placed last on civil society's list in the Charter. Neither of these two priorities was included in the country's concept note. In fact, the concept note explicitly states VMMC is not included at all as a priority module to be funded by the Global Fund NFM.

TABLE 6: INCLUSION OF CIVIL SOCIETY PRIORITIES IN TANZANIA'S CONCEPT NOTE, BY INVESTMENT CASE CATEGORY

Most Responsive

Least Responsive

TYPE OF PRIORITIES SET BY CIVIL SOCIETY IN TANZANIA	% OF PRIORITIES INCLUDED IN TANZANIA'S CONCEPT NOTE
Prevention of Mother-to-Child Transmission	100%
Treatment Care and Support	75%
Key Populations	63%
Condom Promotion	63%
Behaviour Change	50%
Voluntary Medical Male Circumcision	0%

Another country close-up presented in Table 7 shows which specific priorities are included and to what degree in Swaziland's TB/HIV concept note. Half of civil society's priorities were partially included, three are fully included and another three were not included. The priorities that are included were around youth behaviour change programming, family-centred treatment literacy, and community-based mother-baby follow up for PMTCT.

Analysis and Discussion

The second aim of this desk review, after systematically measuring the inclusion of civil society priorities in Global Fund concept notes, is to explore factors which might affect the degree to which these priorities were included. This analysis and discussion section investigates the potential relationship between variables measuring civil society freedom and the results of the concept note analysis. Are there certain factors which responsive concept notes share? Are there certain contexts which promote requests for funding that are more responsive to the priorities of civil society?

The first interesting result to highlight and discuss is the geographic element of variance in Global Fund responsiveness. Figure 3 clearly shows how (in this small sample) East African countries were generally more responsive to civil society priorities than Southern African countries. There are several reasons which might help to explain why this is the case. This could be, in part, because the civil society consultations were done in Southern Africa first, then East Africa afterwards. It might be that the process was refined in an ongoing manner and those countries which developed their priorities charters later had the benefit of lessons learned and were therefore more effective. Another relevant factor might be that local civil society organizations organized and hosted the prioritization workshops in Kenya and Uganda (supported in part by EANNASO) which could have led to a more effective advocacy process.

TABLE 7: SWAZILAND COUNTRY CLOSE-UP (CATEGORY 4 - MILDLY RESPONSIVE)

PRIORITY NUMBER	SWAZILAND CIVIL SOCIETY PRIORITY	LEVEL OF INCLUSION IN CONCEPT NOTE
1	Community Mobilization through interpersonal communication that is youth-focused and youth-driven, targeting young girls age 10-24.	Included
2	Advocacy for an enabling environment for behaviour change, targeting traditional leaders, Member of Parliament and other community gatekeepers.	Partially Included
3	ART Literacy by bringing ART services to the communities, targeting youth, children and men in remote rural areas.	Not Included
4	Access to ART through using family-centred approaches to care, targeting youth, children and men in remote rural areas.	Included
5	Access to condoms (including female condoms) in all public places, events and communities, targeting MARPS, migrants and married couples in factories, border gates, bars and low cost rentals.	Partially Included
6	Education on proper use and storage of condoms for MARPS, migrants and high school youth in high schools, factories, border gates, bars and low cost rentals.	Partially Included
7	Protection & Creating a Conducive Environment through legal change, availability of commodities, targeting sex workers, OVCs, LGBTI people, persons with disabilities, and migrant workers.	Partially Included
8	Access to services through safe, convenient, mainstreamed service provision for sex workers, OVCs, LGBTI people, persons with disabilities, and migrant workers.	Partially Included
9	Community and Family Approaches to compliment bio-medical interventions for PMTCT i.e. developing guidelines for community & family-centred interventions.	Not Included
10	Post-Delivery Care from Birth to 24 Months through home visits, counselling and testing, psychosocial support, patient tracking, assisting HIV negative mothers to remain negative and strengthening future family planning.	Included
11	Social Mobilization & Demand Creation through honest campaigns that presents male circumcision as an option, targeting men older than 24 as well as women who can influence their partners.	Partially Included
12	Use of Innovative and Efficient Mechanisms such as newer non-surgical MC devices as well as the promotion of neo-natal infant MC.	Not Included

FIGURE 3: GEOGRAPHIC REPRESENTATION OF THE RESPONSIVENESS OF GLOBAL FUND CONCEPT NOTES TO CIVIL SOCIETY PRIORITIES

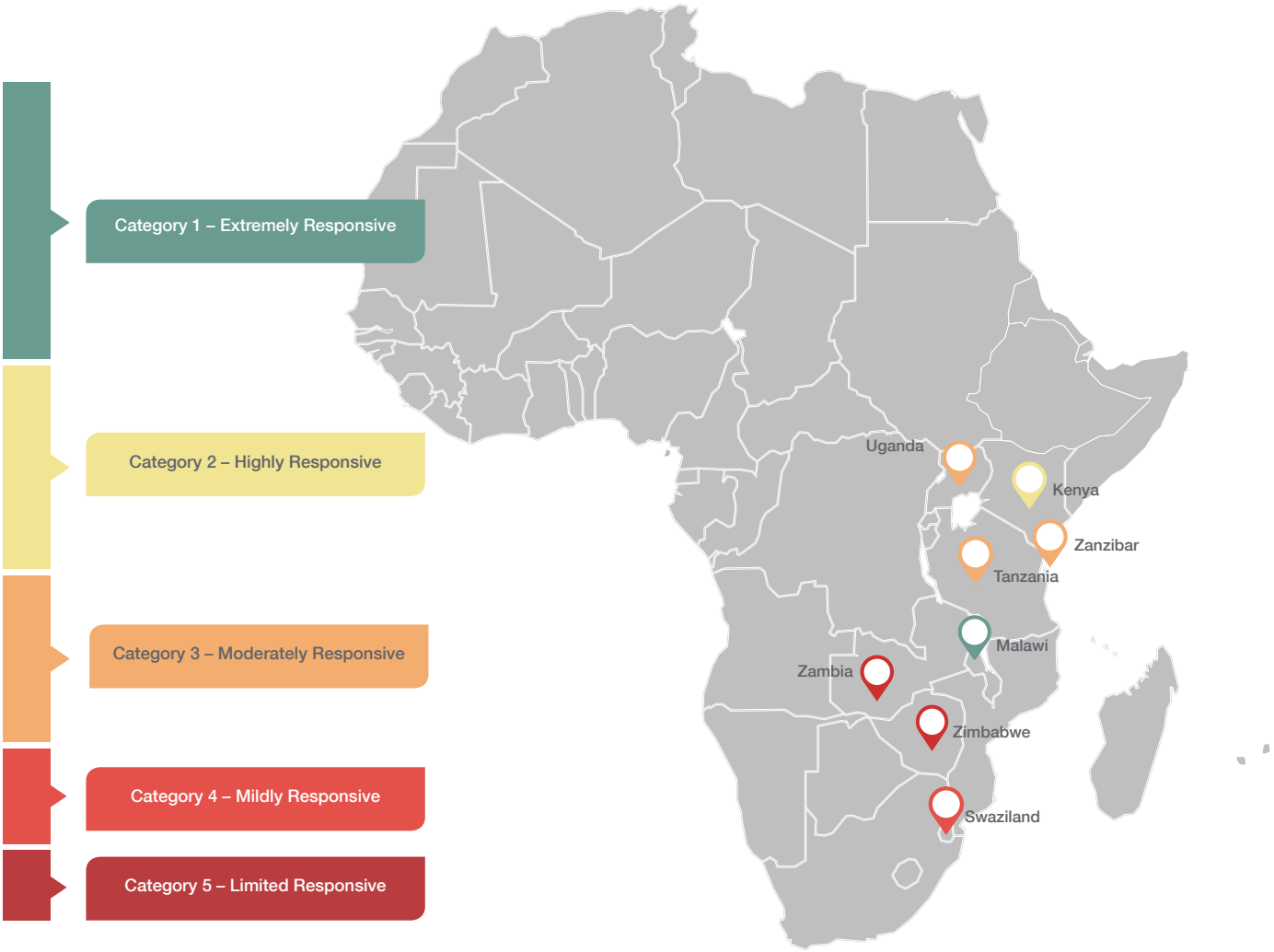
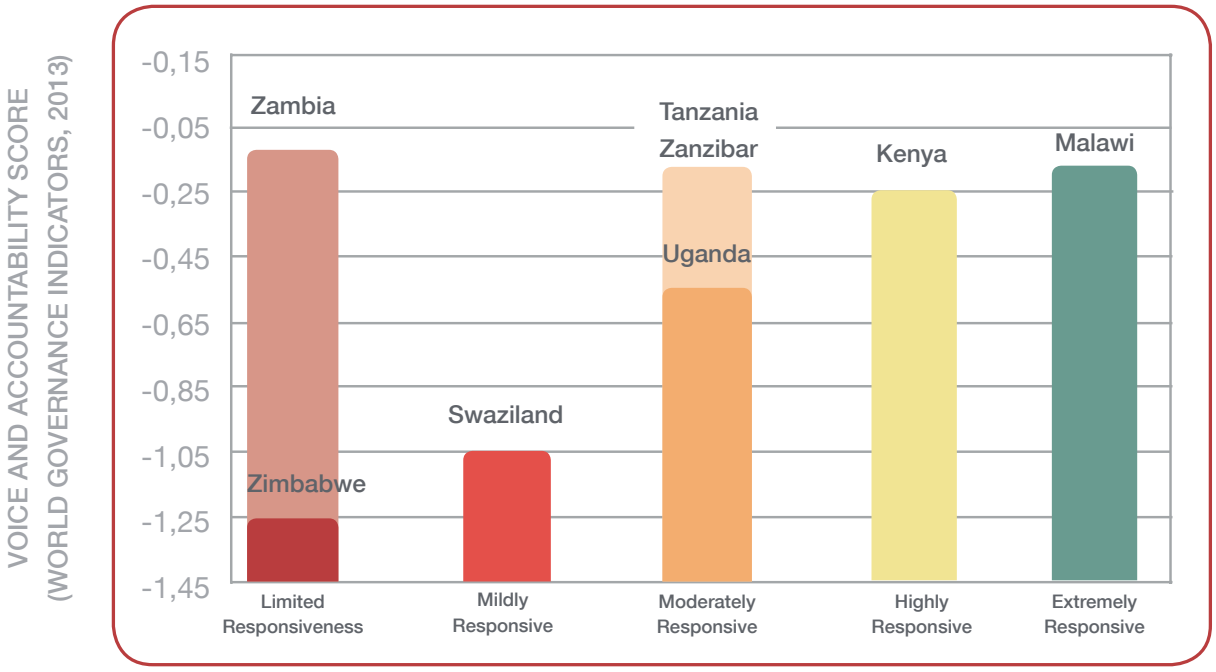


FIGURE 4: RELATIONSHIP BETWEEN VOICE AND ACCOUNTABILITY AND THE RESPONSIVENESS OF GLOBAL FUND CONCEPT NOTES TO CIVIL SOCIETY PRIORITIES (r = 0.541, p = 0.083*).



Countries with a greater degree of freedom of association and freedom of expression submitted concept notes that were more inclusive of civil society priorities.

In addition to the process for priority setting, there are several political contextual factors which are worth probing. Contextual variables related to civil society strength and freedom might also help explain the variance in responsiveness of Global Fund concept notes to civil society priorities.

The World Bank's Worldwide Governance Indicators (Kaufmann, Kraay, & Mastruzzi, 2014) provide six measurements of political freedom and democracy which are worth exploring for their relationship with the results of this desk review. These six indicators are: (1) Voice and Accountability, (2) Political Stability and Absence of Violence, (3) Government Effectiveness, (4) Regulatory Quality, (5) Rule of Law, and (6) Control of Corruption.

Among these indicators, Voice and Accountability has the strongest correlation with the responsiveness of Global Fund concept notes to civil society priorities ($r = 0.541$, $p = 0.083$*) (Figure 4). The voice and accountability indicator measures the extent to which a country's citizens are able to participate in selecting their government, as well as freedom of expression, freedom of association, and a free media. This means that countries with a greater degree of freedom of association and freedom of expression submitted concept notes to the Global Fund that were more inclusive of civil society priorities.

In this relationship, Zambia is a clear outlier (Figure 4), which could be reasonably explained by the fact that it was the first country in the sample to submit an integrated TB/HIV concept note (recall timeline in Table 1). As such, it may be that Zambia had less time to consider various input from different stakeholders, or did not benefit as much from sharing of experiences and good practice as the NFM progressed. If Zambia is removed from the analysis the relationship in Figure 4 becomes very, very strong ($r = 0.910$, $p = 0.002$***).

The remaining five World Governance Indicators have mixed results in the statistical analysis. Rule of Law was the next strongest relationship with the responsiveness of concept notes ($r = 0.421$), followed by Regulatory Quality ($r = 0.410$), though neither of these correlations were significant. Government Effectiveness was also correlated ($r = 0.323$), though also not statistically significant. This means that countries with better governments (stronger rule of law, regulatory quality and effectiveness) were more likely to submit concept notes that were responsive to civil society priorities, though not to statistically significant levels. Control of corruption and political stability were not useful indicators in explaining trends in Global Fund concept note responsiveness to civil society, with minimal correlation.

Another set of governance indicators which were explored were those collected by Freedom House International and published in their Freedom in the World 2015 Report. Table 8 shows the correlational relationships between concept note responsiveness and the country's Freedom Rating, Political Rights and Civil Liberties indicators. For each of these indicators, Freedom House assigns countries a number from 1 to 6, with lower numbers representing freer countries. This is why the correlations appear negative in Table 8. Civil liberties was the strongest relationship, revealing that countries with greater civil liberties submitted concept notes which were more inclusive of civil society priorities. Political rights and freedom rating were also relevant relationships, both showing that countries with greater political rights and greater levels of freedom submitted concept notes that were more representative of civil society priorities. However, none of these correlations was statistically significant.

TABLE 8: RELATIONSHIP BETWEEN RESPONSIVENESS OF CONCEPT NOTES TO CIVIL SOCIETY PRIORITIES AND FREEDOM, POLITICAL RIGHTS AND CIVIL LIBERTIES

	FREEDOM IN THE WORLD 2015 INDICATORS (FREEDOM HOUSE, 2015)		
	Freedom Rating	Political Rights	Civil Liberties
Responsiveness of Concept Note to Civil Society Priorities	$r = -0.425$	$r = -0.332$	$r = -0.500$

*. Correlation is significant at the 0.1 level (2-tailed).
**. Correlation is significant at the 0.05 level (2-tailed).
***. Correlation is significant at the 0.01 level (2-tailed).

Another set of useful variables to examine are those from the Afrobarometer public opinion surveys (www.afrobarometer.org). The Afrobarometer is an African-led, non-partisan survey which measures citizen's attitudes and perceptions towards democracy, governance, the economy and civil society. Of

particular importance, the Survey asks questions of nationally representative samples on democracy, participation and civic engagement, which are directly related to the research objectives of this review.

One question asked as part of the Afrobarometer survey is "In this country, how free are you to say what you think?" This is directly related to the measure of Global Fund concept note responsiveness o civil society because it assesses how free people are to express their priorities in public fora. The relationship between this Afrobarometer indicator and the results of this desk review are really intriguing. There is a strong statistically significant relationship between how free people are to say what they think, and the responsiveness of Global Fund concept notes to civil society priorities. This can be explained rather intuitively as it is logical that a freer society which encourages freedom of expression would be more responsive to the voices of those who speak out. Table 9 and Figure 5 express this relationship in two different formats.

TABLE 9: RELATIONSHIP BETWEEN THE FREEDOM TO SAY WHAT YOU THINK, AND THE RESPONSIVENESS OF GLOBAL FUND CONCEPT NOTES TO CIVIL SOCIETY PRIORITIES (r = 0.686, p = 0.030**)

COUNTRY	RESPONSIVENESS (SCORE) OF CONCEPT NOTE TO CIVIL SOCIETY PRIORITIES	% OF PEOPLE WHO RESPONDED "COMPLETELY FREE" TO THE QUESTION "IN THIS COUNTRY, HOW FREE ARE YOU TO SAY WHAT YOU THINK?" (AFROBAROMETER, ROUND 5)
Malawi	87%	78.6%
Kenya	76%	54.9%
Tanzania	67%	75.6%
Zanzibar	67%	75.6%
Uganda	64%	51.6%
Swaziland	50%	23.8%
Zimbabwe	40%	21.6%
Zambia	38%	56.9%

There were several other strong results from the statistical analysis between the Afrobarometer Surveys and the responsive of Global Fund concept notes to civil society priorities. Table 10 displays the relationship between three other civic participation survey questions and the level of responsiveness of the Global Fund concept notes. Countries where citizens are more likely to attend community meetings, be interested in public affairs, and agree with the need to hold government accountable (even if it slows down decision making) were more likely to submit concept notes that were more responsive to civil society priorities.

One of the strongest relationships (r = 0.745, p = 0.017**) is between the responsiveness of the concept notes and the percentage of people in the Afrobarometer surveys who said they often get together with others to raise an issue (Afrobarometer, Round 5 2011/2013). This relationship is a logical one, as it follows that a stronger and more active civil society which is unified and organized might be more successful in lobbying for the inclusion of their issues in various fora. The fact that it so strongly correlates with the degree of responsiveness of the concept notes to civil society priorities explains a lot of the results in this analysis. The participation of men was slightly more correlated to the participation of women, potentially reflecting the patriarchal societies in many of the eight countries analysed.

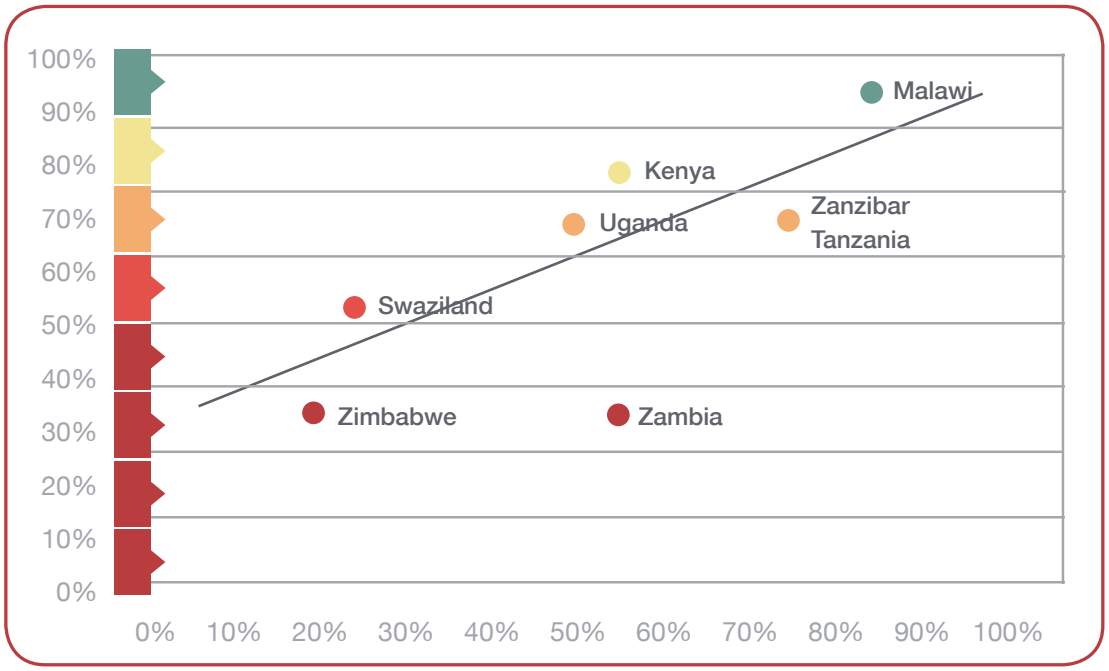
TABLE 10: RELATIONSHIP BETWEEN RESPONSIVENESS OF CONCEPT NOTES TO CIVIL SOCIETY PRIORITIES AND AFROBAROMETER INDICATORS ON CIVIC ENGAGEMENT

	AFROBAROMETER INDICATOR (ROUND 5, 2011/2013)		
	% of respondents who said "yes, Often" to the question "Do you attend community meetings?"	% of respondents who said "very interested" to the question "How interested would you say you are in public affairs?"	% of respondents who strongly agreed with the statement "It is more important for citizens to be able to hold government accountable, even if that means it makes decisions more slowly."
Responsiveness of Concept Note to Civil Society Priorities	r = 0.648**	r = 0.464	r = 0.586*

*. Correlation is significant at the 0.1 level (2-tailed).
**. Correlation is significant at the 0.05 level (2-tailed).
***. Correlation is significant at the 0.01 level (2-tailed).

The third objective of this desk review is to explore the implications of the findings and the statistical analysis. What does it mean for countries if they submit concept notes that are more responsive to civil society priorities? Does it result in stronger concept notes? Are they more likely to get funded? Are they more likely to have impact as a program during implementation? These questions are particularly difficult to measure, but this report offers some preliminary observations which may be worth exploring further.

FIGURE 5: RELATIONSHIP BETWEEN THE FREEDOM TO SAY WHAT YOU THINK, AND THE RESPONSIVENESS OF GLOBAL FUND CONCEPT NOTES TO CIVIL SOCIETY PRIORITIES (r = 686, p = 0.030**)



% OF PEOPLE WHO RESPONDED "COMPLETELY FREE" TO THE QUESTION "IN THIS COUNTRY, HOW FREE ARE YOU TO SAY WHAT YOU THINK?" (AFROBAROMETER SURVEY, ROUND 5)

TABLE 11: RELATIONSHIP BETWEEN RESPONSIVENESS OF CONCEPT NOTES TO CIVIL SOCIETY PRIORITIES AND AFROBAROMETER INDICATORS ON CIVIC ACTION

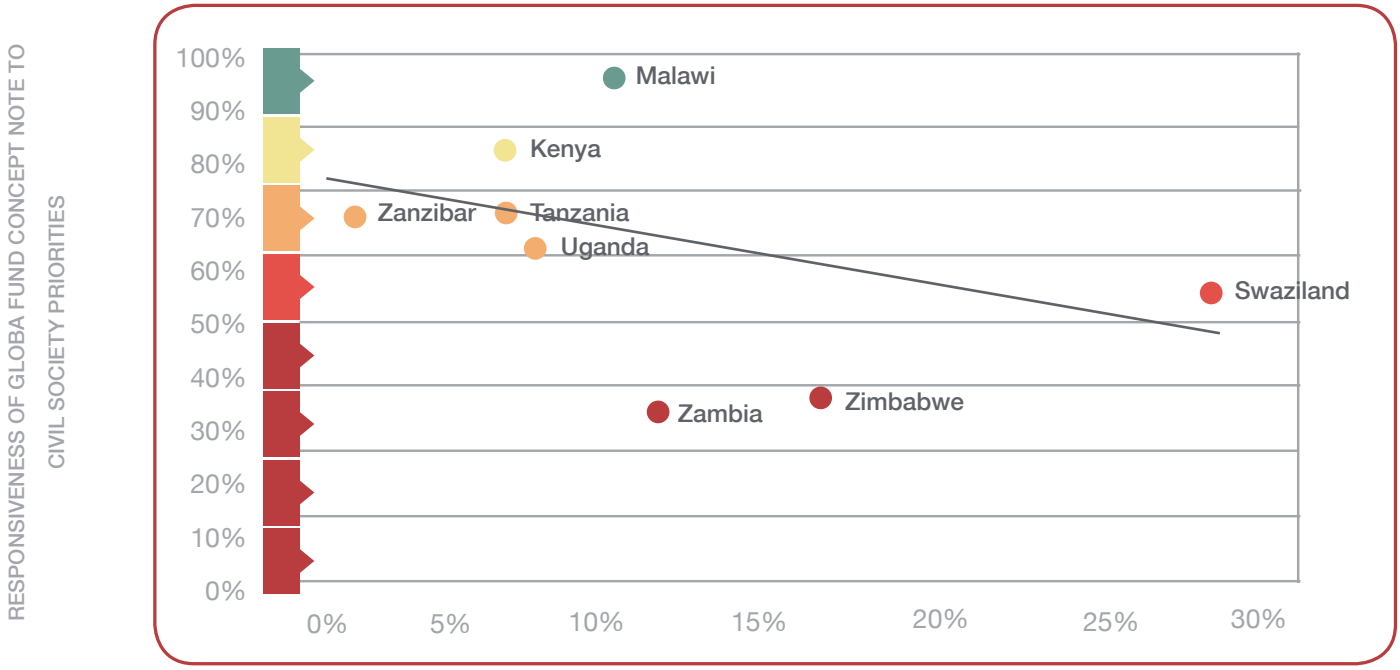
	AFROBAROMETER INDICATOR (ROUND 5, 2011/2013)		
	% of respondents who said they often join others to raise an issue (men and women)	% of respondents who said they often join others to raise an issue (men only)	% of respondents who said they often join others to raise an issue (women only)
Responsiveness of Concept Note to Civil Society Priorities	r = 0.745**	r = 0.769**	r = 0.723**

*. Correlation is significant at the 0.1 level (2-tailed).
**. Correlation is significant at the 0.05 level (2-tailed).
***. Correlation is significant at the 0.01 level (2-tailed).

First, out of this sample there were two concept notes which were sent back by the Technical Review Panel for a second iteration. This means that the TRP was not satisfied with certain elements of the concept notes and requested the country to re-write and re-submit. These two countries were Zambia (the least responsive in our sample) and Zanzibar (moderately responsive). It is possible that these concept notes were sent back to the countries in part due to the need for more inclusion of civil society priorities, but this will need to be explored through a second phase of research on this topic in a key informant interview setting.

Second, it is worth testing some epidemiological data to see if there is a relationship between concept note responsiveness to civil society priorities and disease burden. Interestingly, there is quite a strong significant relationship between HIV Prevalence and the responsiveness of concept notes to civil society priorities; in countries where HIV prevalence is lower, concept notes were more responsive to civil society priorities ($r = -0.725$, $p = 0.021^{**}$). There are a few possible explanations for this. While emphasizing that correlation certainly does not equal causation, this could indicate that countries which are more democratic in their approach to HIV and TB programming, and more aligned to the priorities of civil society, may have a more effective response to the epidemic. This relationship is likely worth exploring further in future research, especially with lagged prevalence data (i.e. do more responsive concept notes correlate with improved epidemiological outcomes three, five and ten years down the road?).

FIGURE 6: RELATIONSHIP BETWEEN HIV PREVALENCE AND THE RESPONSIVENESS OF GLOBAL FUND CONCEPT NOTES TO CIVIL SOCIETY PRIORITIES ($r = -0.725$, $p = 0.021^{**}$)



Recommendations

Based on the results of this desk review, this paper makes a series of recommendations for other researchers, civil society, funding partners and CCMs:

1. Prioritize efforts to improve civil society participation in Global Fund processes in Zimbabwe, Zambia and Swaziland, where concept notes were least inclusive of civil society priorities.
2. Encourage cross-regional learning between countries in Eastern Africa and countries in Southern Africa, since concept notes in East Africa appear to have been more responsive than those in Southern Africa.
3. Replicate this methodology with other Global Fund concept notes in other countries to continue to assess the inclusion of civil society priorities.
4. Replicate this methodology with other funding partners. For example, are civil society's priorities included in PEPFAR's COPs?
5. Use this desk review as a starting point to conduct more intensive research at country level with civil society leaders, civil society CCM representatives and other key stakeholders to interrogate the results and find out which factors led to the success of concept notes including civil society priorities.
6. Invest in elements of community systems strengthening which support people's ability to speak freely, join groups to raise an issue and hold their governments accountable. These factors are related to how responsive concept notes are to civil society priorities.

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Eastern Africa National Networks of AIDS Service Organizations (EANNASO)
P.O. Box 6187, Arusha, Tanzania.
Tel : +255 27 2549525 | Fax: +255 27 25549524
Email: eannaso@eannaso.org | Website: www.eannaso.org

eannaso