MAKE OR BREAK

HOW CIVIL SOCIETY AND COMMUNITIES CAN ENGAGE IN GLOBAL FUND GRANT-MAKING PROCESSES FOR THE 2020-2022 CYCLE
ICASO was formed prior to the 6th International AIDS Conference in Florence in 1991 to provide a community voice in strategic decision-making spaces at a time when the world was only beginning to come together to respond to the growing AIDS crisis. Originally conceived as a network of regional networks, ICASO is strongly focused on advocacy for human rights and gender equality, holding governments and international institutions accountable for responding to the HIV epidemic, and promoting community sector participation and community- and rights-based responses in the fight against HIV. ICASO is also strongly committed to advancing the principles of the greater involvement of people living with HIV (GIPA) in the AIDS response.

ICASO’s vision is an end to the HIV epidemic with strong contributions by communities in all their diversity to achieving universal access to HIV prevention, treatment, care and support, and to defending and promoting human rights.

ICASO’s mission is to mobilize and support diverse community organizations and networks to create and sustain effective responses to HIV.

Acknowledgments:
This updated guide was written by Dr. Gemma M. Oberth (ICASO Policy Advisor) with inputs from Michael O’Connor (ICASO Special Advisor). The work was managed and overseen by Mary Ann Torres (ICASO Executive Director). Portions of text are reproduced from an earlier version of this guide (2017) which was written by staff at ICASO and Mpact.

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Graphic Design:
Daniel Cordner
www.danielcordnerdesign.com
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INTRODUCTION

This information note is an updated version of the one prepared by ICASO in 2017. The aim is to provide advice to civil society and community groups on how to engage in grant-making processes, once a funding request has been submitted to the Global Fund.

Following the submission of a funding request to the Global Fund, there is a critical role for communities and civil society to play. This information note describes the steps involved in moving from a funding request to a signed grant. It recommends entry points, resources, and technical assistance options to support civil society and communities during this phase of the funding model.

This information may be of interest to civil society and community representatives who sit in the Country Coordinating Mechanisms (CCMs) as well as disease-specific non-governmental organizations (NGOs), key and vulnerable population networks, gender and human right activists, and other groups that participated in the funding request development process.

What is Grant-Making?
Grant-making is the process of translating the funding request into grants that are ready for implementation.

During grant-making, one funding request may be translated into more than one grant. In the example below, the country has three Principal Recipients (PRs) and four Global Fund grants. Part of grant-making is deciding which modules, interventions and activities in the funding request go to which PR.

PRs are responsible for grant management, monitoring, financial management, procurement, and technical coordination. The PR selects and supervises sub-recipients (SRs), which are responsible for the bulk of the program implementation.

Example: How One Funding Request Gets Turned into Several Grants During Grant-Making

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All the relevant stakeholders in the country, including governments, development partners, civil society organizations, communities living with or affected by the three diseases, and key and vulnerable populations must be actively engaged in the grant-making process.

This engagement is coordinated by the CCM. The engagement of civil society and communities is critical to ensure that grants are developed in a way that effectively addresses the needs and priorities of these groups. These stakeholders must ensure that the objectives of the funding request are accurately reflected in each final grant, and that all issues flagged by the Technical Review Panel (TRP) to be addressed during grant-making are resolved.

CCMs Must Consider Dual-Track Financing

The PRs that were nominated by the CCM during the funding request stage are to be confirmed by the Global Fund during grant-making. Sometimes, the PRs that were nominated during the funding request development are not confirmed by the Global Fund. It is also possible that additional PRs are nominated during grant-making. It is important to pay attention to the final PR selection during grant-making.

Dual-track financing is the inclusion of both government and non-government PRs to manage Global Fund grants. The Global Fund recognizes that civil society and the private sector can, and should, play a role in the development of funding requests and the implementation and oversight of grants at the country level. The Global Fund recommends the routine inclusion of funding requests with both government and non-government implementers as part of its commitment to strengthening the role of civil society and the private sector in the processes of the Global Fund.

Eligibility Screening and TRP Review

The Global Fund approach calls for an iterative funding request development process to improve the quality of grants and ensure that programming focuses on interventions that are most relevant and have the greatest impact. Once submitted, funding requests are reviewed by the Global Fund Secretariat to determine if the country meets the CCM eligibility requirements and that the documentation submitted is complete. If the country has not met CCM eligibility requirements, the proposal will be returned to the country with advice about what steps need to be taken to meet these criteria.

To meet eligibility requirements, the CCM must prove:

1. That they engaged in a transparent and inclusive funding request development process
2. That an open and transparent Principal Recipient (PR) selection process was used.

Engagement Tip

It is important for civil society and community groups to be aware of which PR is responsible for specific interventions and activities. This is critical for monitoring, oversight and accountability during implementation. In particular, it is important for civil society and community groups to find out which PR has been assigned to manage interventions for key and vulnerable populations, human rights, and community systems strengthening.
In August 2020, civil society and community representatives of the Kenya Coordinating Mechanism (KCM) – constituting 30% of KCM members – wrote a letter to the chair and vice-chair of the KCM expressing dissatisfaction with the PR selection process.

Their key concern was that the request for proposals omitted to include aspects of human rights and gender, and as such, no assessment was done on prospective PRs in terms of their capacity to delivery on these critical aspects of the grant. The authors of the letter noted that they have had concerns in the past with the ability of PRs to implement human rights and gender work, when the PRs are entities that primarily undertake service delivery in the health sector.

As a result of this coordinated action by civil society and community groups, the Global Fund Secretariat recommended that Kenya cancel the non-state PR selection process as presented with the funding request, redo the selection through a transparent and documented process, and resubmit the selected PRs within two weeks.

This is a good example of how the engagement of civil society and communities after the funding request submission is critical, as it can influence the selection process of appropriate PRs.
When the Global Fund Secretariat has confirmed that the funding request is complete and the country has met the CCM eligibility requirements, the funding request is submitted to the TRP.

The TRP has a terms of reference\(^2\), which require it to evaluate funding requests against seven criteria:

- Strategic focus
- Technical soundness
- Prioritization
- Evidence-based programs for key populations
- Scale-up and ambition
- Leveraging partnerships
- Monitoring and evaluation for impact.

Based on the TRP’s assessment, there are two possible TRP outcomes. A funding request will either be:

1. **Recommended for Grant-Making**
   (meaning the negotiations to design implementation-ready grants begins)

   OR

2. **Requiring Iteration**
   (meaning it needs to be revised by the CCM and resubmitted at another TRP review window)

For both TRP outcomes, the TRP will ask for clarifications, or recommend adjustments to the funding request. Some TRP clarifications will need to be cleared by the TRP (major issues), while others may be cleared by the Global Fund Secretariat (minor issues).

In some cases, the funding request will also be reviewed by the Grant Approvals Committee (GAC) prior to grant-making. This step is likely when a country’s funding request includes matching funds, and in exceptional circumstances, such as when a government fails to meet the co-financing commitments it made in the previous allocation period.

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In its May 2020 review, the TRP found that Bangladesh’s TB funding request did not provide necessary details on how gender-specific barriers to accessing services will be addressed and integrated. The TRP requested the country to develop a costed Community, Rights and Gender (CRG) Action Plan during grant-making, based on the CRG Assessment that was done in 2018.

With technical assistance from the Stop TB Partnership, civil society TB survivors worked closely with the National TB Program in the Ministry of Health to develop a Costed Tuberculosis Community, Rights, and Gender Action Plan 2021-2023. Other civil society and community organizations were also involved, including those working on TB, HIV and malaria projects that represent and engage TB key populations as well as women and girls.

Launched in September 2020, the Action Plan was used during Global Fund grant implementation to scale-up community-based and community-led monitoring, additional human rights education, and advocacy activities. Additionally, the Plan further elaborates Rohingya and refugee-related issues.

This is a good example of how the TRP’s comments can be a useful entry point for civil society and community engagement during grant-making processes.
Phases and Timelines for Grant-Making

The standard timeline for grant-making is 6-8 months.\(^3\) It can be divided into 5 main phases:

**Phase 1 – Planning**
Planning effectively during grant-making is key to ensure all the different aspects of grant design are completed, and the right stakeholders are engaged at the right time. This step begins during the funding request development and continues into the TRP review.

The Country Team and PR – with inputs as required from CCM and Local Fund Agent (LFA) – agree on a grant-making project plan, which sets out the deliverables and timelines or completing grant-making.

As part of planning, the Global Fund Country Team discusses with the LFA what services are needed.

The planning phase ends once the application has been recommended for funding by the TRP.

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Phase 2 – Negotiation

This phase follows on from the planning stage and results in a disbursement ready grant for submission to the Grant Approvals Committee (GAC). In the negotiation phase, the PR and Global Fund Country Team work together to design the detailed grant, and to complete the grant documents required before the GAC review. They also address all the TRP issues that need to be addressed during grant-making negotiations. The TRP recommendations are a great entry point for communities and civil society to push for changes and adjustments to improve programming. CCMs and PRs are motivated to fix problems identified by the TRP or GAC and will welcome your advice.

Example: Grant-making Project Plan

**GRANT-MAKING - QUICK PLANNING GUIDE**

*(for new grants submitting to TRP W1 and starting new IP in January 2021)*

### 2020

<table>
<thead>
<tr>
<th>Trip</th>
<th>TRIP SUBMISSION WINDOW 1</th>
<th>TRIP REVIEW OUTCOME</th>
<th>GAC SUBMISSION DEADLINE</th>
<th>GAC MEETING for grant recommendation DATE TBD</th>
<th>BOARD DECISION 3-4 weeks after GAC</th>
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<tbody>
<tr>
<td>JAN</td>
<td>23</td>
<td>Trip</td>
<td>29</td>
<td>11</td>
<td>PLANNING</td>
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<tr>
<td>MAR</td>
<td>23</td>
<td></td>
<td>29</td>
<td>11</td>
<td>TRP REVIEW</td>
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<td>11</td>
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<td>MAY</td>
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<td>29</td>
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<td>TRP SUBMISSION</td>
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<td>DEC</td>
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**BEGINNING OF GRANT IMPLEMENTATION (Y3 OF IP)**

*PR Human Resources: early identification & contracting*

*Sub-recipients (SRs): early identification & contracting*

*Suppliers: early identification, contracting for health products & critical services*

*Workplan: agree on implementation work plan for year one of the implementation period*

*Identify residual risks & mitigating actions*

**IMPLEMENTATION READINESS**

**NEGOTIATE: TIMELY & QUALITY GRANT-MAKING**

*Prepare & finalize Detailed Performance Framework*

*Prepare & finalize Implementation Arrangement Map*

*Discuss need for advance payment mechanism, as applicable*

*Complete & validate Grant Entity Date (previously Master Data)*

*Address TRP clarifications identified for grant-making*

*Identify residual risks & mitigating actions*

**TIMELY GRANT SIGNING**

*Submit to GAC (1) Finalize grant docs (2) Prepare Financial Calculator (3) Prepare Grant-making Final Review Form (4) Create Purchase Order*

*Negotiate Grant Confirmation*

*Sign Grant Confirmation*
In August 2020, the TRP requested that the Mozambique CCM revise prevention targets upwards for men who have sex with men (MSM) and other key populations during grant-making.

Anticipating comments like this one, LAMBDA (an LGBT-led organization) submitted a technical assistance request to the Global Fund’s Community, Rights and Gender Strategic Initiative in July 2020, requesting TA during the grant-making phase to strengthen the meaningfully engagement of MSM and LGBT-led organizations. The TA was to review the TRP comments and contribute to improving the MSM component and package and to prepare for implementation.

In part due to this engagement, the country’s TRP responses revised the cumulative reach targets up to 24,800 MSM by 2023 – a significant increase from the 16,669 proposed in the funding request. To achieve this reach, LAMBDA is supporting the National AIDS Council (NAC) to further understand good practice and innovation for MSM and LGBT programs, including online outreach.
During the negotiation phase of the grant-making process, the detailed design of the grant takes place. It is important to ensure that the needs of those most impacted by the three diseases are fully represented in the grant, or grants, being developed.

The negotiation phase can be viewed as a window of opportunity to get the right interventions into the grant. Communities and civil society have a very important role to play in monitoring the process and ensuring that the final contract between the PR and the Global Fund reflects the strategies, approaches, and priorities specified in the funding request.

Sometimes, efficiencies are located during grant-making negotiations and the total budget amounts to less than the country’s allocation. This presents an opportunity for additional activities to be included in the grant. The additional activities for inclusion will often be drawn from the prioritized above allocation request (PAAR) that was submitted with the funding request. If the country wants to include activities that reflect a material change from what was submitted in the funding request, this must be submitted to the TRP to review.

Grant-making negotiations may also present opportunities to include PAAR activities in the current Global Fund grant, if there is an underspend. If programming prioritized by your community is not included in the funding request, be sure to insist that it be included in PAAR.

### The Prioritized Above Allocation Request

<table>
<thead>
<tr>
<th>It is a list of costed requests that the country wants funded but do not fit in the allocation.</th>
<th>It is another opportunity to include extra or left out activities that the country would like to implement if more funding were made available.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Be precise and clear about what you request in the PAAR in order to be successful.</td>
<td>PAAR activities may be funded during grant-making negotiations, or during grant implementation, from the identification of efficiencies, additional Global Fund resources called “Portfolio Optimization”, or through grant savings.</td>
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<td>Each funding request is now required to include a PAAR.</td>
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The CCM is expected to oversee engagement during funding request development, grant-making and grant-implementation. Engagement should be inclusive, including representatives and perspectives from marginalized and vulnerable groups and key populations, in order to ensure grants are designed to overcome many of the barriers these groups face. In some cases, this may challenge how other actors normally work, and require careful influencing.

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In August and September 2020, UNAIDS provided technical assistance to the Country Coordinating Mechanism of DRC to support grant-making processes. Within the scope of this support, a working group on key populations was established and supported by two key populations consultants supplied by the National AIDS Council.

A workshop was held from 12-14 August 2020 to develop an implementation plan for key populations, and to consider their interventions in the grant-making negotiations. This was to help respond to a TRP comment which asked the country to devise a differentiated testing strategy for each key population group, working closely with key population-led and community-based organizations to ensure that these strategies are appropriately client-centered and confidential.

This is a good example of how good grant-making processes require collaboration between governments and communities, including key populations. It may require out-of-the box thinking to find ways of ensuring diverse stakeholders come together and provide input into the grants.
During grant-making, technical assistance can provide support to civil society organizations and community groups to engage in the planning, design, and budgeting of programs to ensure that interventions included in the final grant documents are human rights-based, gender responsive, and reflect the needs and perspectives of key and vulnerable populations. Technical assistance providers include the Global Fund’s Community, Rights and Gender Department, UNAIDS, GIZ, l’Initiative, Stop TB Partnership, RBM, and others. See Appendix C: Available Technical Assistance.

A key part of the negotiation phase is the finalization of key grant documents. A list of these key documents, and who is responsible for developing them, is in the next section of this information note.

Grant-making negotiations present an opportunity for civil society and community groups to advocate for increased domestic resource mobilization for health. During grant-making, the Global Fund Country Teams needs to confirm compliance with previous co-financing commitments and take action on non-compliance. The Country Team will verify the co-financing details provided in the funding request, and use it to determine the amount of funding the country receives for the next implementation period. Recall that 15% of a country’s Global Fund allocation is deemed a co-financing incentive, and is only ‘unlocked’ if co-financing requirements are met. Co-financing requirements vary depending on the country’s economic status, but generally require a country to demonstrate an increase in domestic financing for the three diseases as compared to the previous Global Fund funding cycle.

The Global Fund will classify the country’s co-financing status into one of four categories:

1. Co-financing requirements met
2. Co-financing requirements conditionally met
3. Co-financing requirements not met with justifiable circumstances
4. Co-financing requirements not met

To be implementation ready on day one of the grant, grant-making includes early identification and contracting of SRs. It is helpful if civil society and communities can monitor the process to ensure criteria, timing, and selection of SRs is transparent and well-publicized and that self-promotion or lobbying by interested parties is kept in check. However, it is important to note that the Global Fund does not require competitive re-selection of existing SRs if they have demonstrated good performance and there is no change in their area of programmatic work. The negotiation phase ends with the Grants Approval Committee (GAC) review and the Global Fund Board’s approval of the disbursement-ready grant.

Phase 3 – Approval

The approval phase of grant-making starts with the Country Team’s preparation to submit the grant to the GAC and ends when the GAC’s recommendation has been approved by the Global Fund’s Board. The key grant documents (below) are submitted to the GAC prior to Board approval.

Ask the Global Fund Country Team or the CCM what classification your country has been given in terms of its co-financing commitments.

If the co-financing commitments have been met, this is good news. If they have been conditionally met or not met, this is an advocacy entry point to engage with Ministries of Health, Ministries of Finance, and the private sector, to increase their spending in order to access the full Global Fund allocation in future funding cycles.
The approval phase of grant-making takes approximately 7 weeks. Most of the responsibilities during this phase lie with the Global Fund Country Team at the Secretariat level. However, while this is taking place, the PR and Country Team continue to get ready to implement the grant. Civil society and community groups should remain engaged at the country level.

When the details of the grant are finalized with the PR, the funding request will be reviewed by the Grant Approvals Committee. This committee may seek additional clarifications and set certain conditions to be addressed before the grant is signed. The GAC will also confirm the level of unfunded quality demand (UQD). UQD is the term for the approved activities from the prioritized above allocation request (PAAR). Following GAC approval, the grant will be submitted to the Global Fund Board for approval.

**Phase 4 – Signature**

The Global Fund aims to have grants signed two months before the implementation start date, in order to leave time for implementation readiness. This is to avoid slow start-up of grants, or unnecessary delays. Grant-making is completed once the grant is signed.

The signed grant is made up of two parts:

1. **The Framework Agreement**
2. **Grant Confirmation(s).**

The grant confirmation contains the most important summary information for the grant. It includes the terms and conditions, grant regulations, grant requirements, grant entity data, overview of the program, target beneficiaries, performance framework, and summary budget. The grant confirmation is signed by the PR, Country Team, and acknowledged by the CCM chair and a civil society representative on the CCM.

**ENGAGEMENT TIP**

Don’t take your eyes off current grant implementation.

For continuing grants, grant-making negotiations will overlap with implementation of existing activities in the current period. It is important not to get too distracted by funding request development and grant-making negotiations for the new grant, and forget to remain engaged in implementation, monitoring and oversight of the current grant.

**PREPARING FOR GRANT SIGNATURE**

- **Board Approved**
- **Grant Confirmation**
- **Framework Agreement**

Forms the basis of the contractual obligations between the Global Fund and the PR.
Phase 5 – Getting Ready
At least two weeks before the grant implementation start date, the Global Fund Country Team will assess the overall readiness of the grant to begin. The implementation readiness covers four main areas:

- Management structures approved and PR human resources identified and contracted
- SR’s terms of reference are defined and SR’s identified and contracted
- Suppliers for health products and critical services are identified, terms of reference approved and contracted
- Implementation work plan for Year 1 is agreed.

Once the grant is implementation ready, the funds for the grant will be sent to the PR to begin implementation. The first disbursement marks the end of the grant-making stage in the Global Fund funding model.

Key Grant-Making Documents
Most of the grant documents that are negotiated during grant-making are initiated during the funding request stage. During grant-making, the objective is to negotiate these documents to arrive at finalized grant documents, which form the basis of the grant agreement. The PR develops the grant documents based on its dialogues with key stakeholders in country, including civil society and community groups.

The core grant documents are negotiated between the Principal Recipient and the Global Fund Secretariat. However, civil society and community groups should be meaningfully engaged in the development of these documents, and always have a right to see them if they request access. This is especially important for oversight, monitoring and accountability purposes.

The performance framework and the budget form part of the final grant-agreement documents. These are developed by the PR and are part of the ‘legal contract’ between the PR and the Global Fund.

Table 1. Grant-Making Documents and Entity Responsible

<table>
<thead>
<tr>
<th>Principal Recipient</th>
<th>Country Team</th>
<th>Local Fund Agent</th>
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<tbody>
<tr>
<td>Implementation arrangements map</td>
<td>Grant Financial Calculator</td>
<td>Capacity Assessment</td>
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<tr>
<td>Performance framework</td>
<td>Grant Confirmation</td>
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<tr>
<td>Detailed and summary budget</td>
<td>Grant-Making Final Review and Sign-off Form</td>
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<tr>
<td>Health products management template</td>
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<td>Monitoring and evaluation plan</td>
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<tr>
<td>Programmatic gap table</td>
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<tr>
<td>Funding landscape table</td>
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<tr>
<td>Grant entity data</td>
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ROLES AND RESPONSIBILITIES DURING GRANT-MAKING

The PR, CCM, Country Team, LFA and civil society all have roles to play during grant-making.

**PRINCIPAL RECIPIENT (PR)**

The PRs work with the Country Team and LFA to ensure that grant-making is completed in a timely manner, and the resulting grants and disbursement and implementation ready. The PRs are also responsible for the selection of SRs.

**COUNTRY COORDINATING MECHANISM (CCM)**

During grant-making, the CCM should ensure that civil society of the CCM and other stakeholders (CCM and non-CCM) remain engaged. The CCM oversees the grants being developed to ensure these are aligned with the approved funding request. It responds to the TRP’s clarifications and ensures that these feed into the resulting grant.

**GLOBAL FUND COUNTRY TEAM**

The FPM is the first point of contact for the CCM, PRs and LFA during grant negotiations. He or she will also work closely with the wider Country Team to ensure that all documents are signed off and ready for GAC and Board approval.

**PRINCIPAL RECIPIENT (PR)**

During grant-making, the LFA will work closely with the PR and Country Team to conduct a PR capacity assessment. Capacity assessments are only done for new PRs, or for existing PRs taking on work in a new program area. The LFA will review the grant documents and implementation arrangements. In some cases, the Global Fund may request a capacity assessment for sub-recipients or third-party service providers. The LFA will also do a strategic review of the program design and of operational feasibility. It will do implementation readiness reviews, before and after grant signing.

**CIVIL SOCIETY AND COMMUNITIES**

Civil society and community groups are encouraged to convene a meeting of participants from the funding request development and set up a working group to manage grant-making oversight. They should review TRP recommendations and develop appropriate project activities based on global normative guidance. Civil society should meet FPMs when they are in-country to get an update, and to offer support. They can review work plans and budgets – if important activities planned in the funding request do not appear in the budget and work plan, they will not happen. Monitor PR and SR selection. Request technical assistance and support during grant-making.
Engaging in Grant-Making During COVID-19

COVID-19 has dramatically changed the way Global Fund processes take place. Here are a few things to consider when engaging in grant-making processes during COVID-19.

- The Global Fund has issued new technical guidance on HIV, TB and malaria in the context of COVID-19. During grant-making negotiations, it may be important to ensure that the grants being prepared are in line with this new guidance.  
- Access to information may be limited during COVID-19, as in-person meetings and engagement sessions are minimized. The Global Fund’s COVID-19 Guidance Note on Virtual Inclusive Dialogue suggests that the CCM Secretariat could print some copies of important documents (like those listed in Table 1), for collection by CCM members, if some movement is permitted.
- Technical assistance for communities to engage in grant-making processes remains available, but it may be done virtually or with the use of local consultants. See Appendix C.

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6 See https://www.theglobalfund.org/en/covid-19/technical-guidance/
10 STEP GUIDE FOR EFFECTIVE COMMUNITY ENGAGEMENT IN GRANT-MAKING

STEP 1
Convene a meeting of participants involved in the funding request development and set up a taskforce or working group to manage grant-making oversight.

STEP 2
Make sure you have a copy of the final funding request package that was sent to the Global Fund. This package should include the narrative, budget, performance framework, programmatic gap table, funding landscape table, prioritized above allocation request, and health product management template.

STEP 3
Ask your CCM representative for a copy of the Technical Review Panel’s comments. These should arrive about two months after submission of the funding request to the Global Fund.

STEP 4
Review and analyze the TRP comments and see if there are issues related to key and vulnerable populations, community systems strengthening, human rights, gender equality, or other topics that are important to your constituency. Based on the comments, develop appropriate project activities based on normative guidance.

STEP 5
Request technical assistance to help you engage communities around the TRP issues. This might include consulting communities on how to address the issues, or developing plans or rapid assessments before grant implementation starts.

STEP 6
Monitor sub-recipient (SR) selection. Advocate for processes to be transparent and well-documented.

STEP 7
Find out when calls or Global Fund country missions are taking place and make sure you are part of these meetings. The CCM should share this information. Meet the Fund Portfolio Manager (FPM) or Country Team lead when they are in country to get an update. Offer support to address feedback from the TRP.

STEP 8
Review work plan and budget. If important activities planned in the funding request do not appear in the budget and work plan, they will not happen. Make sure the grant budget and the funding request are aligned. Advocate for this through your CCM member.

STEP 9
Prepare for grant implementation. This might include developing a monitoring, oversight and accountability plan for your constituency.

STEP 10
Document your process. What went well? Where did you experience challenges? What are your lessons learned? Share this documentation with the CCM, the Global Fund, and civil society and communities in your county and in others.
## APPENDIX A:
KEY STEPS IN THE GRANT-MAKING PROCESS

<table>
<thead>
<tr>
<th>Grant-Making Activities</th>
<th>Civil Society &amp; Community Role</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Performance Framework and M&amp;E plan</strong></td>
<td>The performance framework usually follows the work plan and budget. However, if the targets specified in the funding request are not included in the performance template, civil society and community representatives can raise this concern with the CCM.</td>
</tr>
<tr>
<td>These documents specify baseline, performance targets, indicators, and measurement methodologies.</td>
<td></td>
</tr>
<tr>
<td><strong>Health Product Management Template</strong></td>
<td>Civil society and community representatives may have limited involvement in developing the list of health products, unless they have been advocating during the funding request development phase to introduce newer drugs or diagnostics.</td>
</tr>
<tr>
<td>This is developed during the funding requests development phase. During grant-making, the list will be reviewed in more detail and updated.</td>
<td></td>
</tr>
<tr>
<td><strong>Detailed and Summary Budget</strong></td>
<td>The most important documents to be reviewed are the detailed work plan and budget. The work plan is developed by the PR, often with input from technical partners. Civil society and community representatives should review the work plan to ensure activities planned in the funding request are included and review the budget to confirm that sufficient money is allocated to these activities.</td>
</tr>
<tr>
<td>The work plan includes grant implementation milestones and specific actions to address capacity gaps and to tackle any risks identified. The budget provides a costing for all project inputs and activities.</td>
<td></td>
</tr>
<tr>
<td><strong>Assessment of (Key) Implementer(s)</strong></td>
<td>The results of the capacity assessment should be reviewed to ensure that the assessment is accurate and reflects the intent of the funding request. When a PR is found lacking in a specific area, the Global Fund can request technical support or recommend subcontracting grant implementation tasks, such as procurement activities, to a third party.</td>
</tr>
<tr>
<td>A capacity assessment may be required to determine if the nominated PR meets the minimum standards to manage the proposed grant, including: monitoring and evaluation, procurement and supply chain management, financial management, and program management, including SR management.</td>
<td></td>
</tr>
</tbody>
</table>
**Example: Capacity Assessment Process**

**Issues Identified during assessment process**

**Major issues:**
- Corruption risk
- System weaknesses
- Poor past performance

**Minor issues:**
- Technical weaknesses but fair past performance or strong governance

**Not mitigated in the short term**
- Request CCM to nominate new PR/SR

**Mitigated in the short term**
- Suggest contacting of implementation support
- Suggest TA provision

**Grant-Making Activities**

<table>
<thead>
<tr>
<th>Implementation Arrangements Map</th>
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<tbody>
<tr>
<td>The implementation arrangements map specifies all of the participants identified in the grant (PRs, SRs, and SSRs). Their roles, responsibilities, and funding levels are specified.</td>
</tr>
<tr>
<td>Civil society and community representatives should review implementation arrangements in detail to ensure that programming arrangements match the plans articulated in the funding request and should monitor any changes in the choice of PR and the SR selection process.</td>
</tr>
<tr>
<td>It can be especially strategic to ensure the map specifies if SRs or SSRs will be civil society organizations, community-led organizations, key population-led organizations, etc. It is recommended to push for this level of detail in the map.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Programmatic Gap and Funding Landscape Table</th>
</tr>
</thead>
<tbody>
<tr>
<td>The programmatic gap and funding landscape table is developed during the funding request development phase. During grant-making this document is reviewed in more detail and updated.</td>
</tr>
<tr>
<td>If new information becomes available about incidents affecting a particular population or group, civil society and community representatives should bring this to the CCM’s attention so that the gap analysis can be updated and programming adjusted to reflect these new data.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Applicant Response Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>Here, the applicant describes how they have addressed any comments or issues raised by the TRP/GAC in the Funding Request Review and Recommendation Form.</td>
</tr>
<tr>
<td>The Applicant Response Form reports on how all the comments from the TRP and GAC have been addressed in the grant-making process. The form should be reviewed to make sure all concerns relevant to community, rights, and gender have been adequately addressed.</td>
</tr>
</tbody>
</table>
"The impact of programs is often limited because insufficient attention has been paid to human rights, gender, and other inequalities or exclusions during grant-making."

Global Fund iLearn Course on Grant-Making
## APPENDIX B: GRANT-MAKING CHECKLIST

<table>
<thead>
<tr>
<th>Questions to verify during the grant-making process</th>
<th>Information Source</th>
<th>Actions to Take</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are the focus areas specified in the funding request still included in the work plan?</td>
<td>Review work plan and performance framework.</td>
<td>If the focus areas have changed from those specified in the funding request, find out why. Ask the CCM or the Global Fund Secretariat. Some changes may be relevant and based on input from the TRP or GAC, but it is important to find out why the changes have been made and evaluate whether they are acceptable.</td>
</tr>
<tr>
<td>Does the budget include all the interventions suggested in the funding request?</td>
<td>Review the budget and work plan to ensure that interventions are fully costed and included in the grant.</td>
<td>If activities are omitted, this should be raised with civil society representatives on the CCM. If funding levels are too low, technical support should be sought to provide more accurate costing (see technical support providers, Appendix C).</td>
</tr>
<tr>
<td>Was the PR recommended in the funding request maintained? Are there any capacity development needs identified? Are the right SRs and SSRs identified?</td>
<td>Review the capacity assessment tool and the implementation mapping report.</td>
<td>If the PR and SR arrangements defined in the implementation mapping report are not in line with the intent of the funding request, this should be raised with the CCM.</td>
</tr>
<tr>
<td>Are all the comments and recommendations by the TRP and GAC addressed?</td>
<td>Review the Applicant Response Form, which summarizes how the grant has addressed recommendations and comments from TRP and GAC.</td>
<td>The TRP and GAC reports often make specific reference to community and civil society concerns. If these have not been adequately addressed in the grant-making process, this should be raised with the CCM, FPM, or country team.</td>
</tr>
</tbody>
</table>
APPENDIX C:
AVAILABLE TECHNICAL ASSISTANCE

The United States Government provides technical support in the areas of prevention, care, and treatment for the three diseases, as well as for health systems strengthening.

- National Strategic Plan (NSP) or Investment Case Support – This includes technical assistance in the facilitation, costing, and development of inclusive processes and evidence-based NSPs at the country level.
- Funding Request Development – Provided this is a country owned and led process, should the program require outside facilitation and support to make the funding request development robust, inclusive and based on sound evidence, there is central support for this technical assistance.
- Grant Management Technical Assistance for CCMs, PRs and SRs – Across the three diseases, for short term support to “unblock” a grant or meet Global Fund eligibility requirements, there are a number of options to provide support in governance, M&E, procurement and supply chain (PSM) and grant and financial management.
- Medium to Longer Term Assistance – The USG provides several ways to access medium to longer term assistance to build local capacity in improving grant oversight/management as well as for specific technical areas, such as financial management/costing and monitoring and evaluation

To request assistance, contact the US government representative on your Country Coordinating Mechanism, or click here to download the application form.

L’Initiative is the French international agency for technical expertise. There are four primary ways it operates to provide support:
- Bilateral cooperation with a partner agency or country
- Direct donor funding through a call for tender
- European twinning projects
- European Union-delegated management contracts

Click here to learn more.
BACKUP Health is a global program funded by the German Federal Ministry for Economic Cooperation and Development (BMZ). In its current phase, BACKUP provides short- and long-term support in four areas, through a mechanism called “Strategic Technical Assistance for Grant Excellence (STAGE): A new Approach to Quality Management for Global Fund Recipients by BACKUP Health”:

- Improving planning and program revision
- Managing data challenges
- Strengthening financial management
- Distribution and Reporting at the Last Mile Level

Click here to learn more.

World Health Organization technical support includes the development of technically sound funding applications, action plans during grant-making, setting performance targets, responding to Technical Review Panel requirements, as well as support during implementation and addressing potential bottlenecks. This support can be provided in various ways, including directly by WHO staff, or by expert consultants through remote support, in-country missions, training workshops, or facilitated peer reviews. Request for support should be made through your WHO country office.

Click here for more information.

UNAIDS Technical Support Mechanism (TSM) supports the provision of high-quality technical assistance in three regions, namely the East and Southern Africa, Asia-Pacific, and West and Central Africa. In all other regions, UNAIDS provides technical assistance through the UNAIDS Regional Support Teams and/or directly through UNAIDS Country Offices. The TSM is set up to be adaptable and responsive to country needs to accelerate progress toward achieving the Fast-Track targets and the goals of the 2016 Political Declaration on HIV and AIDS. The UNAIDS TSM is jointly managed by Genesis Analytics and Oxford Policy Management. Support is available for the following activities:

- Supporting countries to align their targets to the 2016 Political Declaration on HIV and AIDS in all strategic documents, plans, and policies
- Ensuring an investment focus on location and populations most in need
- Addressing barriers and constraints to securing effective and comprehensive priority prevention programs
- Supporting the sub-national level (cities, provinces, districts) to engage in the expanded response and to develop sub-national strategies, plans, and policies
- Removing barriers to services through re-configured service delivery systems, including community service delivery; differentiated care models; addressing stigma and discrimination; and real-time strategic information including sub-national program data
- Supporting transition and sustainability planning
- Supporting cities/countries in implementing digital health programs for fast-tracking the AIDS response

This support is provided either directly by UNAIDS staff or through a network of quality-assured technical support providers. All request for technical support should be channeled through the UNAIDS country office.
Stop TB Partnership, with its initiatives such as TB REACH and the Global Drug Facility, is a source of technical support and collaboration in areas related to the TB response. Support ranges from community systems strengthening and high-level advocacy to improving case detection, finding missing cases and rapid uptake of new TB medicines and regimens. It also provides support for capacity strengthening in establishing systems for forecasting, quantification, supply planning and early warning.

Click here for more information, or email technicalsupport@stoptb.org

Roll Back Malaria Support Partner Committee (formerly the Harmonization Working Group) coordinates technical support to countries. Provided through consultants and partners, the support aids in funding request completion, including convening orientation meetings and simulating Technical Review Panels for peer review of funding requests, as well as expert review of near-final submissions. Support is tailored to country-specific needs, but may include support for the finalization of gap analyses and epidemiological mapping as well as assisting in completion of Global Fund templates, frameworks and budgets. In some cases, support for in-country consultative processes during the development of funding requests is available.

Send requests to technicalsupport@rbm.org

Community, Rights and Gender Technical Assistance is the Global Fund Board-approved strategic initiative that provides technical assistance to support the engagement of civil society, key populations, and people living with or affected by the three diseases to ensure people affected by them play a meaningful role in Global Fund processes and that human rights and gender barriers are effectively addressed in grants. Support is available in the following areas:

A) Situational analysis and needs assessment
   • CRG-related assessments to generate strategic information for better decision-making
   • Program reviews to ensure community perspectives inform service delivery improvements

B) Engagement in country dialogue processes
   • Community consultation to inform priorities for national policies, guidelines, plans and programs
   • Coordinating input into key Global Fund-related processed (e.g. NSP or funding request)
   • Engagement planning to strengthen participation of communities in Global Fund processes
   • Caucusing and collective strategizing for coordinated community-led advocacy

C) Supporting design and implementation arrangements
   • Mapping of civil society and community organizations and activities to strengthen community systems
   • Refining or validating tools that support community engagement in Global Fund-related processes
   • Workshop(s) to strengthen knowledge of civil society and communities on the Global Fund

Click here for more information, or send requests to crgta@theglobalfund.org
APPENDIX D: ADDITIONAL RESOURCES


Available in English, French and Spanish


Available in English and French, Russian and Spanish


Available in English (soon to be available in Spanish, French and Arabic)

Global Fund (2014). Practical tips to ensure the new funding model delivers the impact communities need.

Available in English


Available in English (An executive summary of the report is also available in Arabic, French, Russian and Spanish)

Available in English, French and Spanish


Available in English, French, Spanish and Russian


Available in English, Khmer, Sinhala, Thai, Urdu or Vietnamese.

Operational Policy Manual

Funding Model Information
The following documents can be downloaded at the Funding Model Information tab at https://www.theglobalfund.org/en/applying/funding/resources/

- 2020-2022 Funding Cycle Overview
- The Applicant Handbook
- Modular Framework Handbook

Frequently Asked Questions
The following documents can be downloaded at the Frequently Asked Questions tab at https://www.theglobalfund.org/en/applying/funding/resources/

- Funding Cycle 2020-2022 Frequently Asked Questions
- 2020-2022 Allocations Frequently Asked Questions
- Community, Rights and Gender and the 2020-2022 Funding Cycle
- Frequently Asked Questions on the Register of Unfunded Quality Demand

Grant-making Instructions and Tools
The following documents about grant-making are available at: https://www.theglobalfund.org/en/funding-model/funding-process-steps/grant-making/

- Implementation arrangement mapping
- Performance framework template
- Capacity assessment tool
- Instruction re listing Health products
- Instructions for Completing the Detailed Budget Template

Global Fund Technical Briefs
These can be downloaded from the “Applicant Resources” tab at https://www.theglobalfund.org/en/applying/funding/resources