



Independent observer
of the Global Fund

CONSULTATION HELD ON TOR FOR GLOBAL FUND MULTI-COUNTRY HIV GRANTS IN THE EECA

On 13-14 November 2017, a consultation took place in Minsk, Belarus, co-organized by the Eastern Europe and Central Asia (EECA) team at the Global Fund Secretariat and the UNAIDS Regional Office for EECA, to discuss with regional stakeholders the terms of reference (TOR) for next round of multi-country HIV projects for the EECA region to be financed by the Global Fund.

Representatives of the main regional networks working with key and vulnerable populations as well as representatives of regional NGOs, technical hubs, technical partners and some governmental officials (about 35 people altogether) were invited to take part in the consultation.

Based on the Global Fund Board's decision in November 2016 on the Catalytic Investments for 2017-2019 (see [GFO article](#)), \$13 million has been made available to address the sustainability of services for key populations in the EECA region. Up to two three-year HIV multi-country grants in the region could be supported. The goal is to accelerate progress on UNAIDS' "Fast-Track – Ending the AIDS Epidemic by 2030" and to ensure the sustainability of HIV services for key populations.

A document entitled "Multi-Country Priority Area Terms of Reference Open" (on file with the author and the GFO editor) was developed by the Secretariat with the support of the UNAIDS Regional office for the EECA, and was published on 25 October 2017 to guide the consultation on the TOR.

According to the draft TOR, the multi-country grants should address some or all of the following areas:

- sustainable financing for HIV services for key populations;
- sustainable access to affordable ARV drugs and other HIV commodities of assured quality;

- reduction of stigma and discrimination of key populations; and
- improving efficiency of service delivery models of HIV services for key populations.

The purpose of the consultation was as follows:

- to understand the scope of work covered by the TOR for the HIV multi-country project(s);
- to discuss problems, activities and products that many EECA countries consider to be the most important and of common interest, and that could be addressed within three years by means of a regional project;
- to outline the minimum requirements for being the principal recipient (PR) of funds for a multi-country project;
- to discuss needs for technical support, if any, to develop a regional project concept note; and
- to provide regional networks with a platform to start strategizing for their potential involvement in the development of the multi-country project(s).

At the beginning of the consultation, the representatives of the Global Fund Secretariat clarified their approach to the process of developing the multi-country applications by stating that it will be a very formal competitive process with no any preference for any PR or key populations or interventions. They said that it will be up to the TRP to decide which one or two of the applications submitted are the most technically sound and responsive to the needs of the region. According to Dumitru Laticevschi, the Global Fund's Regional Manager for the EECA, after this consultation the Secretariat will significantly restrict its communication with potential applicants to ensure a purely competitive tendering process.

Also, according to Vinay Saldanha, UNAIDS Regional Director for the EECA, because it has been involved into the development of the TOR, the UNAIDS Regional office will not be able to provide any technical support to potential applicants for the development of proposals, to avoid any bias.

Additionally, it was clarified by Alexandrina Iovita, representative of the Global Fund Secretariat, that funding from the Fund's Community, Rights and Gender Technical Assistance (CRG-TA) Program will not be available to support the regional dialogue processes.

The consultation was structured around small group discussions on the composition, regional value and measurable indicators for expected results for relevant interventions within each of four programmatic areas in the TOR, with reports back to the full plenary.

A number of participants expressed concern about the proposed deadline for submission of the multi-country applications (7 February 2018). They said that it would be difficult to obtain formal endorsements from CCMs in all of the countries to be covered by the projects, given that most CCMs will probably have only one meeting within this two-and-a-half-month period. Subsequent to the consultation, the Global Fund Secretariat advised that a revised submission deadline of 30 April 2018 had been set.

Another clear message from the civil society participants at the consultation was that technical partners, such as UN agencies, should not become PRs for these grants. The response from the representatives of the Global Fund Secretariat was that U.N. agencies could become the PRs but they cannot be the applicants. Only RCMs and regional organizations can apply for multi-country grants. (In other words, a U.N. agency could become the PR if that is what the applicant proposed.)

Also, there was a request from the participants of the consultation that although there will be a separate multi-country TB grant for the region (in the amount of \$5 million) – the TOR for the HIV project(s) should have a stronger focus on ensuring the sustainability of collaborative TB/HIV services for key populations.

Ana Filipovska, representative of the Secretariat of the Regional Coordination Committee for Eastern and Southern Europe, told Aidspace that “in the multi-country proposal, special attention should be given to

countries that are having challenging transitions and that were not eligible for transition funding under the Global Fund's Sustainability, Transition and Co-Financing Policy."

Filipovska added: "Gap funding for services for key populations should be provided in these countries while advocacy and state funding mechanisms are being put in place. Also, it would be great to get an access to the evaluation of the work done by previous EECA regional grants in order to see how work can be improved in this cycle of regional funding."

During the consultation, a position statement from the Coordinating Committee of the Global Fund HIV grant in Russia (on file with the author) was disseminated. It stressed the necessity of including the Russian Federation in the activities of the multi-country HIV grants for the EECA. According to the document, Russia is the "moving force" of the HIV epidemic in the region – in 2016, it was responsible for 81% of new HIV cases in the region compared with 15% for Belarus, Kazakhstan, Moldova, Tajikistan and Ukraine combined. Taking this into account, and given the geopolitical position of Russia, migration flows in the region and other factors, not to address the situation with HIV in Russia when planning the response to the epidemic on the regional level could cancel out all regional efforts to influence the HIV epidemic in neighboring countries. It is up to the applicants to decide whether Russia will be included in their proposals.

It is expected that based on the results of this consultation, the TOR for TOR for the multi-country HIV applications in the EECA will be finalized and the Global Fund will be able to launch a request for proposals (RFP) in mid-December.

Funding has also been set aside for similar multi-country HIV initiatives in Latin America and the Caribbean, the Middle East and North Africa, and South-East Asia.

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