

INFORMATION SESSION FOR COUNTRY TEAMS

Strengthening the inclusion and operationalization of security interventions in Global Fund grants for key populations

6 November 2024

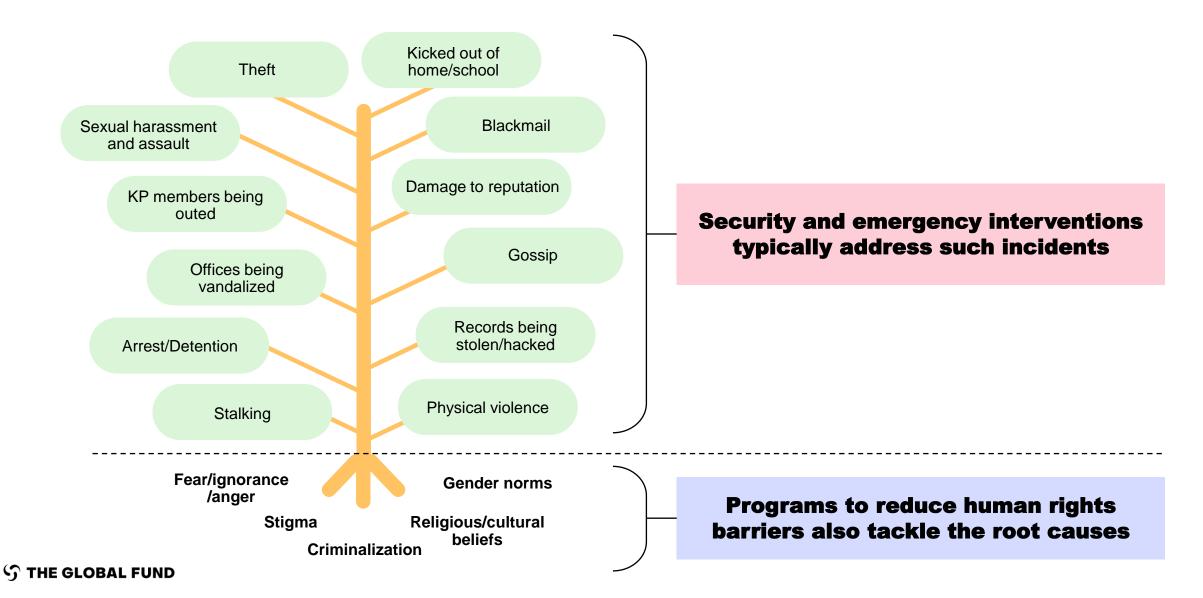
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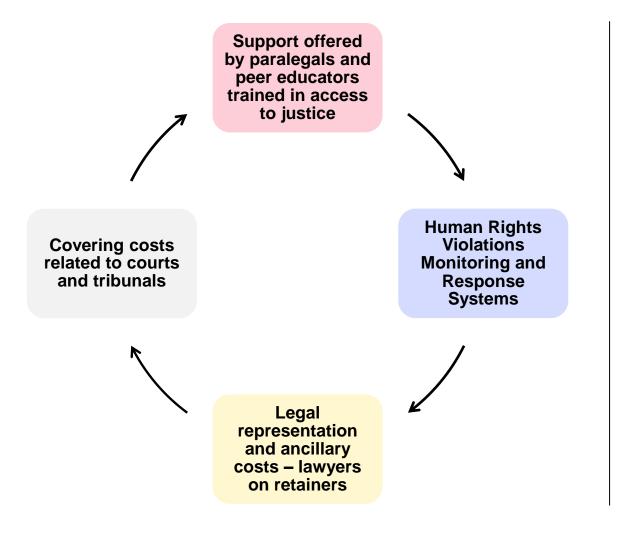
1	Opening remarks	Vuyiseka Majola Dubula Head of CRG Department, The Global Fund	10 mins
		Mandeep Dhaliwal Director of HIV and Health Group, UNDP	
2	Type of security and emergency interventions and budgeting considerations	Matteo Cassolato Technical Advisor Key Populations Community Rights and Gender Department	15 mins
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4	Pakistan: Promoting the safety and security of key populations	Umar Riaz Officer in Charge of the Global Fund HIV Grant UNDP Pakistan	10 mins
5	Q&A	Ed Ngoksin Senior Technical Coordinator, Investment Support Community Rights and Gender Department	25 mins

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Human rights programs and security interventions in KP programs are intrinsically linked - 1



Human rights programs and security interventions in KP programs are intrinsically linked - 2

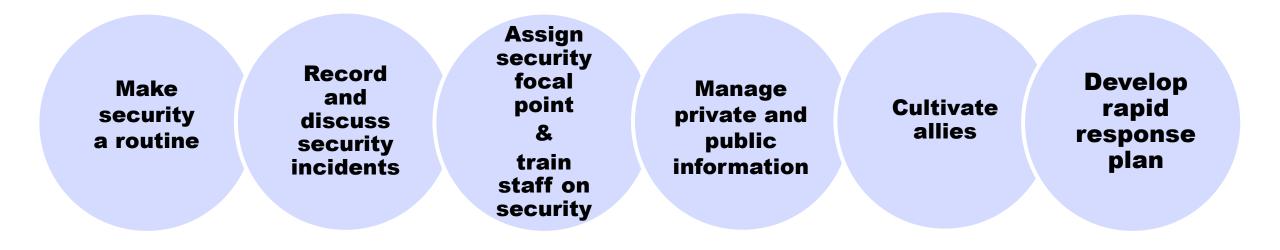


Human rights programs are an essential part and foundation of key populations security interventions.

Many human rights interventions normally included in Global Fund-supported programs are effectively part of KP security interventions.

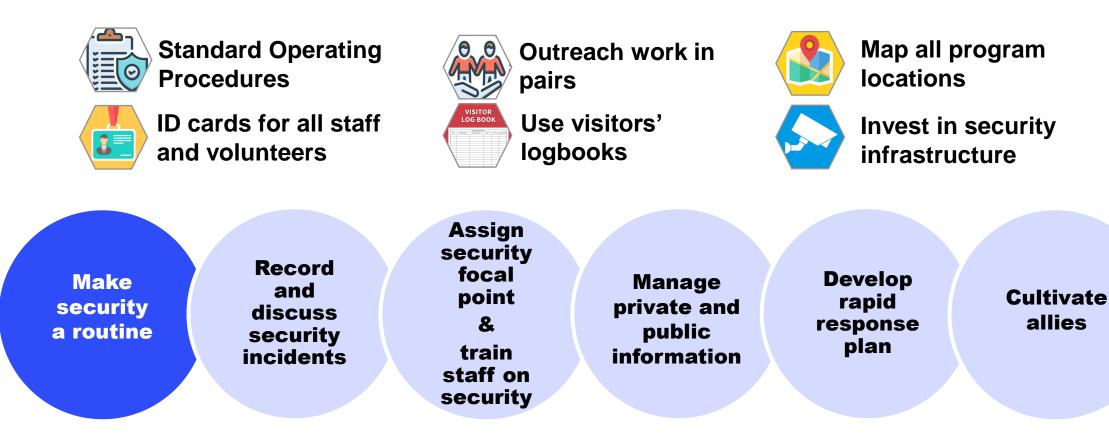
Six tips to make your KP program more secure

A set of suggestions for consideration. It is not recommended that all of the activities be included automatically in a program plan; rather, implementers should consider whether these activities would be useful in helping them make their programs more secure.

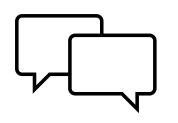


Make security a routine

Make security a routine part of your program – review all planned activities for potential security challenges, putting mitigating and response measures in place as needed. Ideas to mitigate or respond could include:

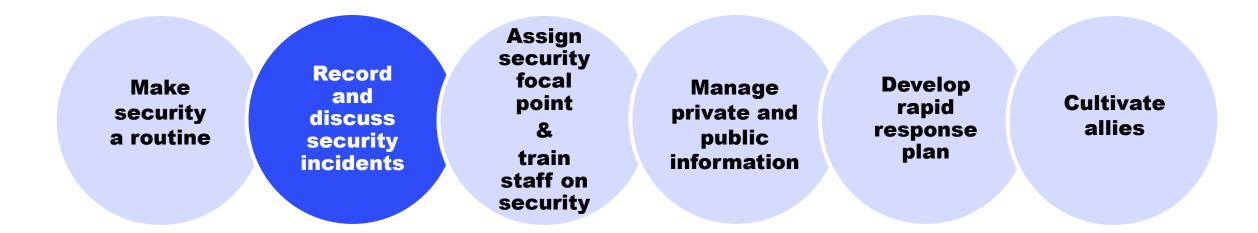


Record and discuss security incidents

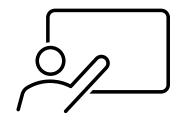


Discuss security incidents and concerns at regular team meetings (at least once per month) and encourage all staff and volunteers to share concerns and fears related to security.

Record all incidents and threats and actions taken in a log, and examine these periodically to identify trends and make changes to activity plans

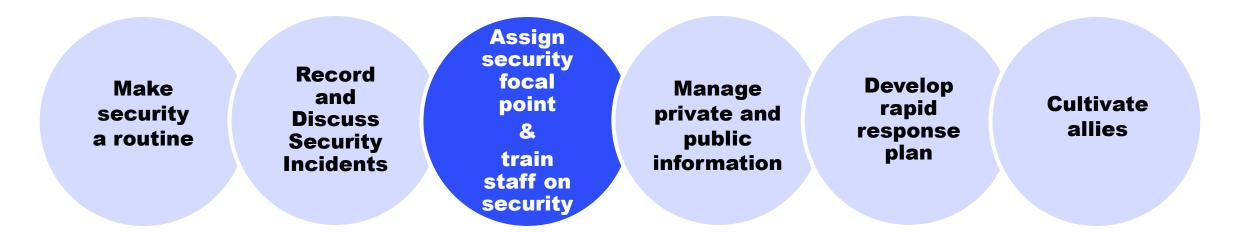


Security focal point and staff training

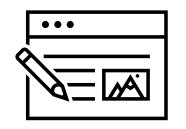


Designate a focal person for security in the organization – this can be someone with existing management or coordination responsibilities. Their role is to explain to and remind colleagues on policies and procedures. This person should be trained and supervised.

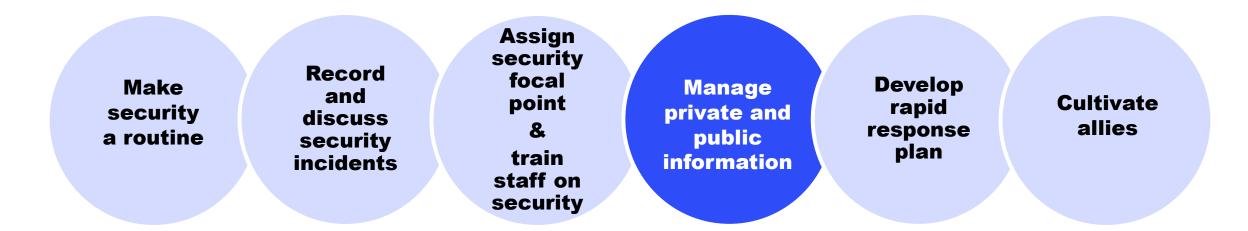
Provide training for staff and volunteers on how to approach security when implementing the KP program. This should include identifying and assessing threats and then the expectations of each worker if a threat occurs.



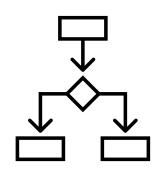
Manage what is shared publicly



Staff and volunteers should thoughtfully decide what information to make public (e.g., location of a facility or their own personal information in the case of online peer educators) by weighing the pros and cons of such sharing.



Rapid response plan



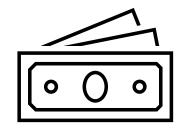
Have a rapid response plan for dealing with emergencies and crises, including clear communications channels, clear decision-making processes, and flexible funding that can be easily accessed.

Develop a phone tree / emergency communication group for all staff and volunteers so that everyone knows who to contact in a given situation and how to share urgent updates if an emergency occurs.

Consider setting aside an emergency fund which can be rapidly deployed

Make security a routine	Record and Discuss Security Incidents	Assign security focal point & train staff on	Manage private and public Information	Develop rapid response plan	Cultivate allies
		security			

Emergency Fund



An emergency fund might include funding for:

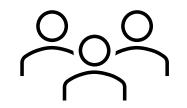
- Emergency accommodation
- Emergency transport
- Health care including mental health support
- Nutrition support
- Legal assistance and legal fees

Strong **governance mechanisms** need to be put in place to ensure an equitable and transparent utilization of the fund / and to support its inclusion in Global Fund budgets. These should be well described and always accompany a request for setting an emergency fund.

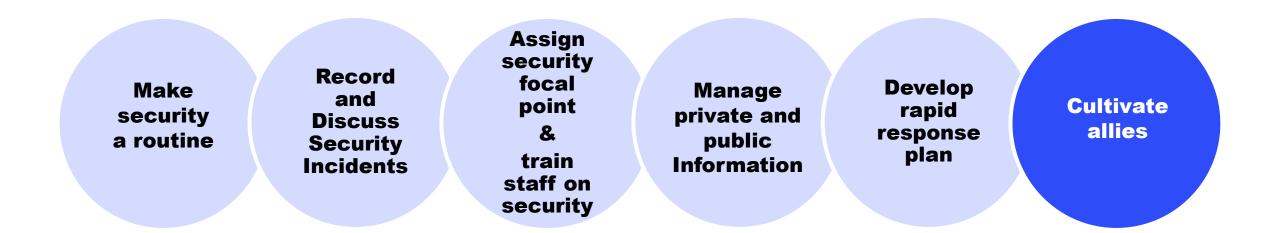
This includes determining from the onset of the program:

- Eligibility of services/costs that can be covered.
- Budget thresholds for all cost items.
- Transparent conditions for its allocations.

Cultivate allies



Identify allies in case of incidents and keep them briefed on any changes in the security situation (with clear lines of communication established before incidents occur).



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Summing-up: 3 steps for implementers security

Some of these actions will require change in work practices whereas others will require additional resources





Invest in security equipment, infrastructure and services



Institute emergency response mechanisms



For example:

- Develop and adopt security strategies and standard operating procedures that increase security
- Record and analyze security incidents
- Safe transport & buddy system during outreach
- Registration of all visitors to physical sites (office, DIC)
- Using official IDs

For example:

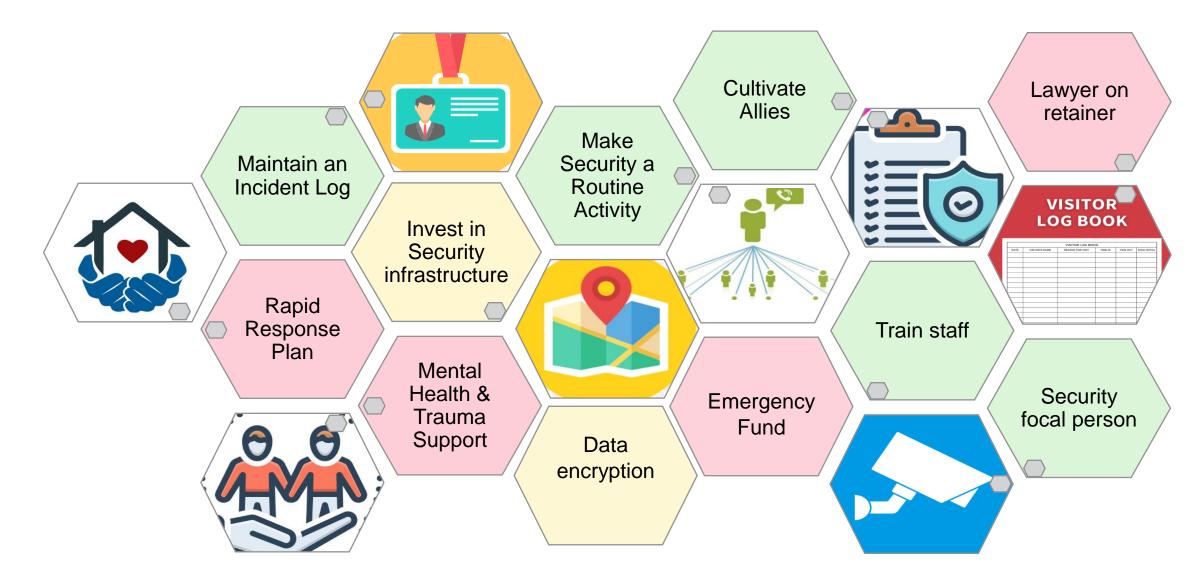
- Locks, barriers, alarms, monitors
- Security personnel
- Encryption for IT equipment
- Mobile Device Management
 software
- Health insurance
- Free access to mental health specialists

For example:

- Response protocols and crisis scenarios
- Emergency phone tree
- Legal support
- Internal Emergency Fund for immediate mitigation and securing safety of endangered workers
- Emergency treatment (trauma and mental health support)
- Identify and cultivate allies

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Type of security strategies and interventions



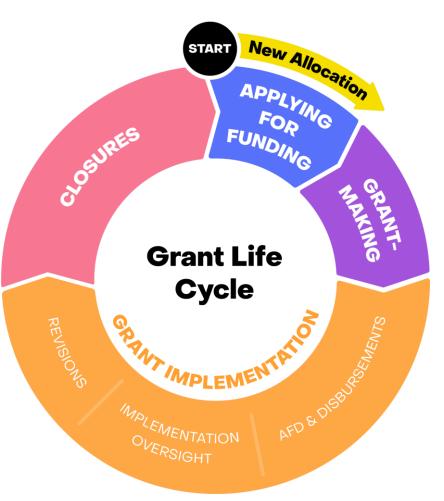
How to fund key populations security and emergency interventions



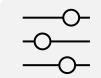
- Decide how to integrate security and emergency activities in KP program.
- Some security activities will require funding or a specific budget line, but some others will not.
- In some other cases, existing activities can be modified to integrate security considerations (i.e., trainings, adopting visitors' logs).
- Depending on the grant life cycle, there are basically two options:
 - 1. Upfront inclusion in the Global Fund grants during Funding Request development and Grant-making stage (recommended)
 - 2. Grant Revisions (programmatic and/or budget revisions)

1. Upfront inclusion of security interventions in grants

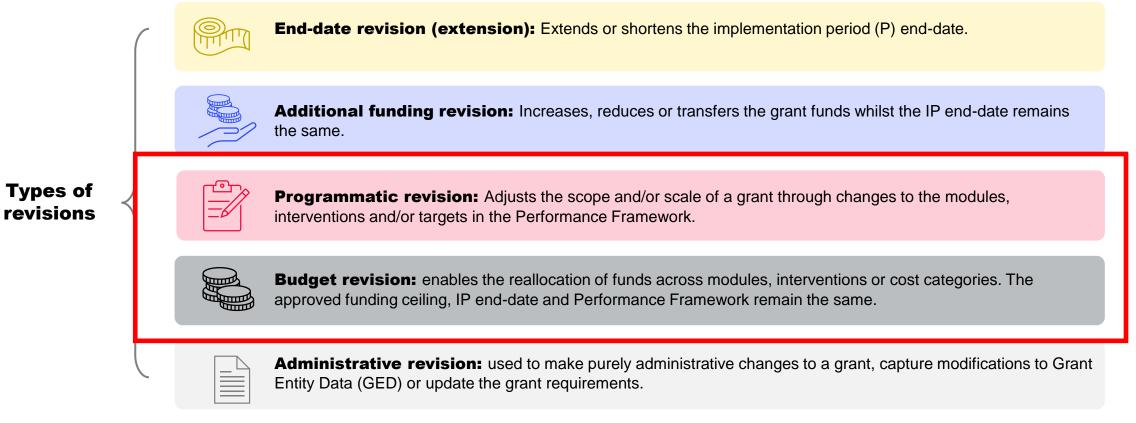
- Upfront inclusion of security interventions in grants during Funding Request development and Grant-making stages is the simplest and most straightforward approach.
- Adding new activities to an already approved budget (that is after Grant-making, via budget revision) can be a serious task, which, depending on the significance and size of the investment, may take up to several months and require various levels of approval.
- It is generally a simpler process to reallocate any grant savings to existing activities/budget lines, rather than introducing in the budget new activities or budget lines.



2 - Grant revisions



Implementers can revise a grant when the country context or needs change during implementation. A timely grant revision ensures that funds are used efficiently, aligning to national strategic plans and the <u>Global Fund Strategy (2023-2028)</u>. There are five types of revisions, that follow a hierarchy in which the higher-level revisions can include the lower-level ones, but not the contrary:



2A. Programmatic revision

- A programmatic revision (formerly referred to as a "reprogramming") refers to changes to the scope and/or scale of a grant within the already approved funding ceiling and current IP resulting in changes to the modules, interventions and/or targets in the Performance Framework.
- A programmatic revision can be proposed anytime during grant implementation if warranted by the programmatic context and needs to be completed maximum three calendar months after initiation of the process.
- A Country Teams reviews the programmatic revision request and documents with support from the LFA, as necessary. Depending on the type of programmatic change, the Country Team is required to consult with TAP/CRG advisors.
- Programmatic revisions <u>always require</u> endorsement by the CCM and <u>might require</u> TRP review.
- The approval process for programmatic revisions is differentiated based on whether the revision requires TRP review or not.



Detailed scenarios where **TRP review** is required or not (replacing materiality thresholds).



Programmatic revisions involving timesensitive changes to PF can now be completed after approval of the revision request based on a **notification email issued to the PR** and can be later formalized through an IL.



Changes to the **baseline budget** not required.

2A. Programmatic revision (cont.)

Revisions not requiring TRP review

- Adding new modules or interventions to incorporate activities included in the UQD register.
- Increasing or decreasing targets for existing indicators and adding missing targets in the Performance Framework.
- Scaling up existing interventions and innovative approaches, introducing new health products or removing health products to incorporate activities in UQD register.

Approval authority varies depending on portfolio category. High Impact and Core portfolios typically require Regional Manager or Department Head's approval. Focused portfolios typically only require Fund Portfolio Manager's approval.

Revisions requiring TRP review

- Adding changes that contradict or are not part of the TRP's review and recommendation on the funding request or the latest UQD register. For example:
 - adding a module or intervention not in the UQD register is added to the Performance Framework.
 - Removing a module or intervention.
 - Significant redesign/shift of balance from the original funding request approved by TRP.

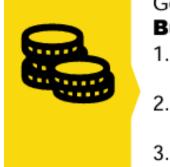
Approval authority follows TRP recommendation and varies depending on portfolio category. High Impact and Core portfolios typically require Regional Manager/Department Head or Grant Approval Committee's approval. Focused portfolios typically require Regional Manager/Department Head's approval.

2B. Budget revision

Budget revisions are a type of grant revision and refer to the reallocation of approved grant funds across modules, interventions or cost categories. They do not involve changes to approved grant funding ceiling, or the duration of the relevant Implementation Period, or the Performance Framework.

A Budget revision is categorized as <u>material</u> or <u>non-</u> <u>material</u> depending on the percentage increase or decrease for the module, intervention or discretionary cost category in the approved Grant Budget.

It does not change the approved funding ceiling, duration of implementation period, or the Performance Framework.



General alignment to the new **Budgeting Guidelines:**

- IL no longer required to formalize budget revisions.
- CCM endorsement not required
- Changes to the baseline budget not required.

2. Budget revision (cont.)

NON-MATERIAL BUDGET REVISION

- Grants with budget over US\$30 million:
- an <u>increase/decrease to the total budget for any</u> <u>intervention</u> that is equal or below 25% and/<u>or</u>
- an <u>increase in any discretionary cost category</u> that is equal or below to 10%
- Grants with budget under US \$ 30 million:
- an <u>increase/decrease to the total budget for any module</u> equal or below 30% in the Grant Budget; and/or
- an <u>increase in any discretionary cost category</u> level that is equal or below 10%

Non-material budget revisions <u>do not</u> require pre-approval from the Global Fund, PRs can undertake them following their formal internal organizational budget review and approval process maintaining audit trail for possible review by the Global Fund or other assigned assurance provider.

Timeline: 1 week or less

MATERIAL BUDGET REVISION

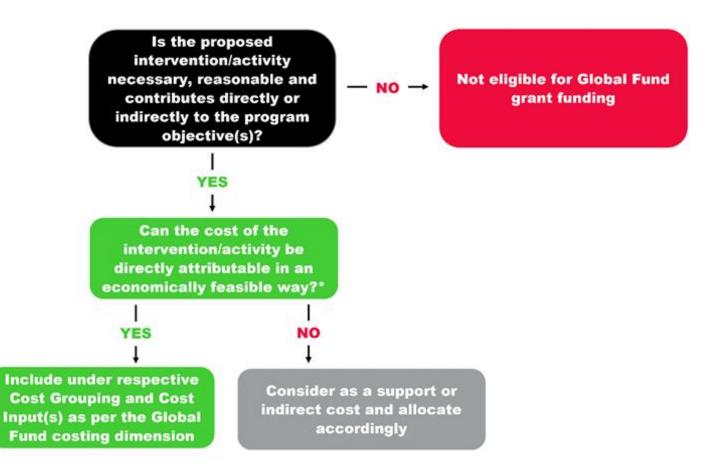
- All type of grants:
- Any budget revision above the non-material budget revision thresholds defined above.
- Any budget revision that introduces new modules and interventions.

PRs to follow their formal internal organizational budget review and approval process <u>and obtain written approval (</u>written notification) from the Global Fund prior to starting the activity or related payments.

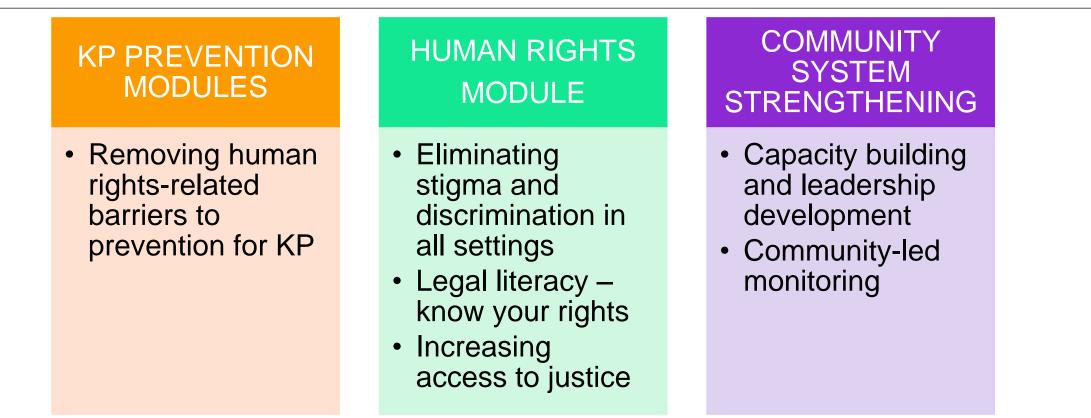
Triggers for budget revisions of discretionary cost categories are calculated on the cost grouping budget for the full Implementation Period. Material budget revisions can, therefore, be triggered by cumulative non-material budget revisions.

Ensure activities and costs eligibility

- Ensure the eligibility of security and emergency costs included in budgets.
- Refer to the relevant Global Fund application materials (operational policies and procedures for grant budgeting, information notes, technical briefs, modular framework, etc.).
- As is the case with any funding requested from the Global Fund, it is important that all costs are well justified and based on wellevidenced needs.
- Including emergency interventions in budget grants is possible and does happen. However, transparent criteria and conditions for allocation of funding are required.
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Where to include security and emergency activities in budgets?

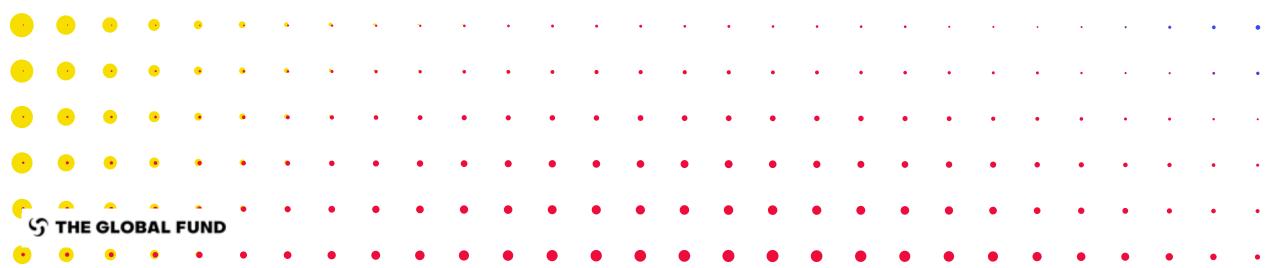


Frontline implementers typically know best how to prioritize security measures that are most relevant to them, therefore critical to enable them to have agency/control over resources. PRs have an important role in facilitating access to such support.



Burundi: Promoting the safety and security of key populations

3



Background

- Key population prevalence:
- In Burundi, three populations are considered highly exposed to STIs/HIV including viral hepatitis: men who have sex with men (MSM), sex workers (SW), drug users including injectable drugs (PWID).
- While the general trend of the epidemic is downward, key population prevalence has increased.

Key population	2013 prevalence	2021 prevalence
SW	21.3%	30.9%
MSM	4.6%	5.96%
PWID	10.2% (2017)	15.3%

Legal environment: The lack of distinction between consensual and non-consensual acts exposes victims of sexual violence to prosecution. Since 2009, the Burundian Penal Code, in its article 567, has condemned relations between persons of the same sex and makes them punishable by three months to two years of imprisonment and/or a fine ranging from 50,000 to 100,000 Burundian francs, or between 24 and 48 Swiss francs. Articles 564 and 565 respectively condemn acts contrary to "good morals" and behaviors that "offend modesty."

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On February 22, 2023, 24 people were arrested in Gitega, the political capital of Burundi, during an entrepreneurship workshop organized by MUCO, an association working on HIV/AIDS.

These people were charged with homosexual acts under Article 590 of the Penal Code, and several of them were also charged with incitement to debauchery (Article 562).



On August 21, 2023, 19 people were acquitted and seven were found guilty, two of them in their absence.



Both the prosecution and the defense appealed the court's decision. In January 2024, the Gitega Court of Appeal found all 26 defendants not guilty of the charge of "homosexuality."

Five people were convicted of incitement to debauchery and sentenced to one year in prison and a fine.

1. Legal assistance

UNDP Burundi was informed of the situation by members of a local organization and, with the approval of the Global Fund, contracted with a law firm to handle the case.

2. Humanitarian assistance to affected people and their families

In response, several associations have set up humanitarian assistance programs to support not only the detainees, but also their families. This support includes medical aid, food and psychological support and the reintegration of released persons into the community.

3. Soft diplomacy

Some diplomatic missions - mainly the US, Belgium, the Netherlands, France, EU - present in Burundi played a discreet but crucial role in this case. They used soft diplomacy to engage with Burundian authorities, advocating for respect for human rights and highlighting the injustice of the arrests.

4. Lobbying led by community actors

Community actors, including local associations and regional human rights networks, led an intense lobbying campaign to draw attention to this case: they raised awareness among the media, international organizations, and regional and international bodies (notably during the Universal Periodic Review) on the abuses committed against LGBTQI+ people in Burundi.

Important factors to consider

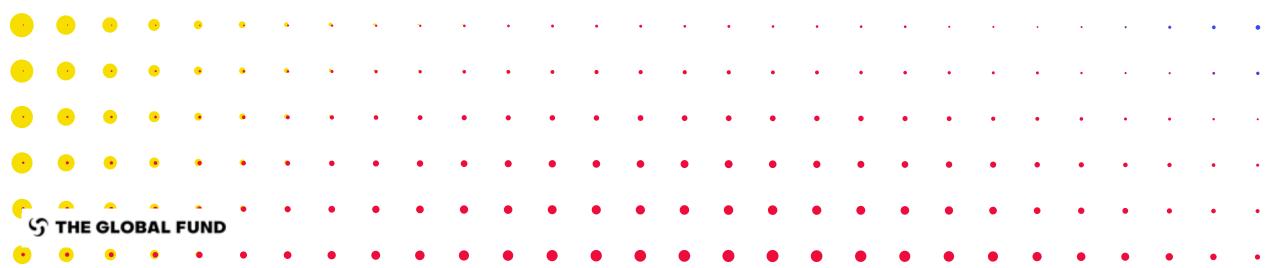
• To better understand the factors that contributed to the arrest of the 24 people in Gitega, it is essential to consider several elements related to the socio-political context of Burundi and the growing influence of anti-gender and anti-rights movements in Africa. It is also important to be informed of efforts to combat these movements.

Preventive actions

- Invest in local monitoring and response mechanisms held by community associations;
- Provide local associations with multi-year and flexible funding to respond to emerging cases;
- Support community associations on tax and administrative compliance aspects.
- Build the capacities of community members on knowing their rights and how to promote security.
- $\boldsymbol{\mathfrak{S}}$ the global fund



Pakistan: Promoting the safety and security of key populations



HIV prevalence among key populations

The country continues to have concentrated HIV epidemic among KP, namely: men having sex with men (MSM), people who inject drugs (PWID), transgender populations (TG), sex workers (male, female and transgender).

Key Population	IBBS V 2016/2017
PWID	38.4%
MSM (all)	3.5%
Non SW MSM	3.4%
MSW	5.6%
TG (all)	7.1%
TG SW	7.5%
FSW	2.2%





Background Current environment for key populations

Scan of Law and Policies Affecting Human Rights, Discrimination and Access to HIV and Health Services by Key Populations in Pakistan

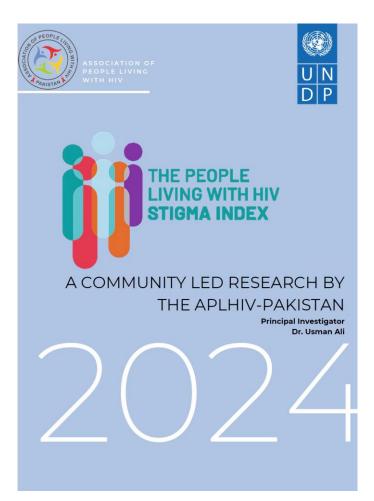


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In Pakistan, the HIV epidemic continues to be concentrated among key populations, who often represent highly ostracized and stigmatized segments within the society. They are not only rejected socially but further marginalized through legal frameworks that have cast them as criminals.

The recent HIV Stigma Index Study 2.0 commissioned in 2024 also highlights the social and legal inequalities that HIV community and key populations face, including the stigma and discrimination not only in healthcare settings but also at the level of other right providers they interact with.

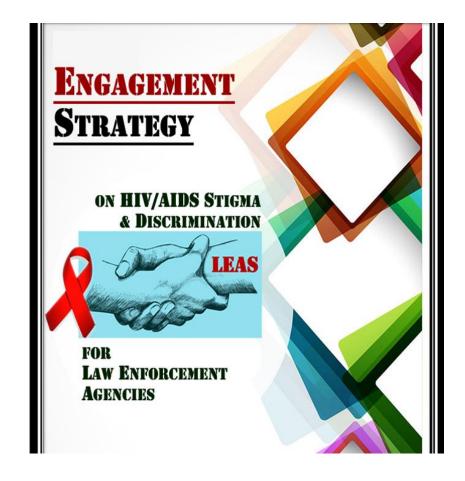
One of the significant issues highlighted through the study was unconsented disclosure of the HIV status to family, community and society which have negatively impacted the people living with HIV. Similarly lack of an enabling legal environment or weak justice systems coupled with the generally prevailing stigma towards HIV community and key populations has also been highlighted.



Intervention #1: Bridging the gap for safety and protection by strengthening the engagement with LEAs

Law enforcement agencies (LEAs), specifically local police, are the first responders to a range of complex situations involving criminal, civil or public health related issues, some of which may relate to HIV. Law enforcement, HIV and public health are therefore inextricably linked; however, many law enforcement agencies do not perceive these connections.

UNDP commissioned the development of Law Enforcement Agencies Engagement strategy through a Global Fund grant by engaging all key stakeholders including LEAs, UNAIDS, Government bodies, key population community representatives, CSOs and other UN Agencies. The Strategy has been presented to the Ministry of Health for endorsement and approval to design specific interventions as recommended in the strategy





Intervention #2: Access to justice initiative and community-led monitoring

UNDP has introduced access to justice initiatives to reduce inequalities, mitigate prevailing HIV associated stigma and discrimination and address human rights barriers for key populations and HIV community in accessing the healthcare.

These initiatives are providing communities a voice and a platform to ensure that the response is community led and takes into account their critical needs.

- UNDP, through the access to justice initiative, has established 10 legal aid desks and has onboarded 10 legal experts from mainstream court and justice system (Lawyers) as Legal Aid development officers who carry out community outreach directly and through the community-based organizations working as partners with UNDP in the Global Fund Grant.
- The outreach focuses on providing relevant legal services, including, but not limited to:
- legal counselling
- Case management and referral
- awareness raising on protection of human rights, national and provincial laws, or any needs of clients arising from key populations and HIV community.



Intervention #3: Safe community outreach

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UNDP Pakistan advocated with the National and Provincial AIDS Control Programs for provision of Authority Letters to all the community partners led by key populations ensuring that their outreach activities are not interrupted by law enforcement agencies and other safety and security agencies, who often carry out strict checking resulting halt or delay in outreach activities.

Considering that field-based counseling, awareness, testing and referral for key populations like transgender and female sex workers is critical and the outreach staff often face issues in the field, UNDP has procured Mobile Vans for the SRs which will ensure safe, private and easy commute and outreach to hot spots. These Vans will also serve as a private and safe space for testing and counselling in the field.

Lesson learned

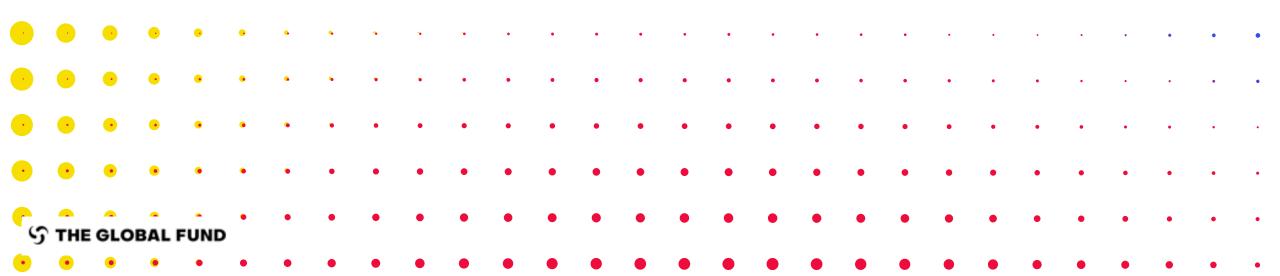
- The current environment on HIV legislation is still not advanced enough to provide equitable access to services. It requires extra efforts in mobilizing stakeholders.
- The political will from stakeholders, especially policy makers remains a challenge.
- High levels of stigma and discrimination towards key populations and HIV community
- The political instability makes the context unpredictable





Questions and Answers

5



Thank you!



The Global Fund to Fight AIDS, Tuberculosis and Malaria

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