

Update

JUNE 2025



# 1. New Engagement Approaches in 2024-2025

## **1.1 Introduction**

2025 is an important year for the global fight against the HIV, tuberculosis (TB) and malaria. Global strategies aim for 25 more countries to eliminate malaria, fewer than 370,000 new HIV infections, and a 75% reduction in TB mortality compared to a decade earlier.

As these deadlines loom, future funding for the responses is **uncertain**. The Global Fund's **Investment Case** for Grant Cycle 8 recognizes that investments in community engagement and support for community-led organizations will be key to expanding equitable access to prevention and treatment services for those most affected. The new **Sustainability**, **Transition**, **and Co-financing Policy** elevates the importance of engagement with key and vulnerable populations, communities, and civil society.

As of Grant Cycle 7, new data is available on the satisfaction of communities with their engagement in Global Fund processes (**Key Performance Indicator** C1). To date, 67% of communities are satisfied with their engagement in funding request development and 64% with grant-making. Though the engagement score for grant-making remains below target (75%), this is an encouraging outcome given **previously-reported** engagement barriers.

A more in-depth **evaluation** of community engagement in the Global Fund grant cycle is currently underway, with results expected this year.

In Grant Cycle 7, 67% of communities are satisfied with their engagement in funding request development and 64% with grant-making. The Global Fund **attributes** this reasonable outcome to the Community Engagement Strategic Initiative and the new minimum expectations for community engagement.

## **1.2 Developing Country-level Community Engagement Plans**

New in Grant Cycle 7, the Strategic Initiative prioritized 25 countries<sup>1</sup> for intensified community engagement support, led by global and regional key and vulnerable population networks.

By the end of 2024, three-year community engagement plans were in place for all 25 countries.

Technical support, long-term capacity strengthening and mentorship, and peer learning programs are all coalescing around agreed outcomes to strengthen the use of data, community participation and influence. The engagement plans have been shared with other technical assistance initiatives to foster greater alignment.

<sup>1</sup> Azerbaijan, Bolivia, Cameroon, Central African Republic, Congo, Côte d'Ivoire, Ghana, Guatemala, Guinea, Kenya, Kyrgyzstan, Moldova, Mongolia, Mozambique, Namibia, Nepal, Niger, Nigeria, Pakistan, Peru, Tanzania, Uganda, Ukraine, Zambia and Zimbabwe.

# **Snapshot of Global Fund Engagement support in 2024**



# **Technical Assistance**

- 25 assignments in 21 countries and one multicountry grant
- 100% of assignments deployed national or regional experts
- 94% of assignments delivered to the satisfaction of the requestor

# **Engagement of key and vulnerable populations**

- 25 countries with community-led engagement plans in place
- 88% of countries with plans convened bi-annually progress reviews
- 13 countries with new community data generated or used
- 18 countires with increased community participation in Global Fund decision-making



## **Regional learning support**

- 88,235 people receiving timely and relevant information
- 33 online or face-to-face learning exchanges convened

Early outcomes from implementation of the community engagement plans:



### NIGERIA

The network of people who use drugs successfully advocated for the inclusion of community-driven naloxone distribution in the 2024 National Needle and Syringe Program Implementation Guidelines.



#### MOLDOVA

The TB community co-developed a new community-led monitoring (CLM) tool to track the implementation of decisions taken by the Country Coordinating Mechanism (CCM). This has facilitated integrated reporting by the National Program and the Global Fund for a comprehensive overview of country progress.



### TANZANIA

A new task force was formed with six members from the National Malaria Control Program and nine from civil society. The task force met three times in 2024 to address gender-related barriers to malaria services and other bottlenecks. "The process of developing the engagement plan was supported by three Strategic Initiative partners who worked together. This was a great experience. It was the first time that TB communities were engaging with HIV communities. In Nepal, this engagement allowed for perspectives of trans and gender-diverse communities to inform the TB response"

- Activists Coalition on Tuberculosis Asia-Pacific (ACT! AP)

#### Strengthening community engagement in Country Coordinating Mechanisms

A key objective in many engagement plans is to improve community representation and participation in CCMs. By the end of 2024, CCM engagement maturity levels increased by 12 percentage points, indicating strengthened community engagement in CCMs according to **Strategic Performance Reporting**. Today, communities and civil society account for nearly half of global CCM membership.

Strategic Initiative partners collaborated with the Global Fund Secretariat's CCM Hub to achieve these results. Through a special agreement, Strategic Initiative partners were preselected as CCM technical assistance providers, supporting civil society elections in 21 countries and training CCM members in the use of CLM data in 33 countries.

In 2024, support from the Strategic Initiative contributed to increased community representation in CCMs. In Ghana, Global Fund partners successfully advocated for the inclusion of a new alternate seat to represent the needs of children living with HIV. For the first time, a trans and gender-diverse individual was elected as Uganda's key population CCM representative.

In 2025, the CCM Hub launched a new project called "Accelerating and Strengthening Community Engagement in National Decision-making through CCMs" (ASCEND CCMs). Strategic Initiative partners are collaborating on this project by recommending CVs of community experts, sharing engagement plans, providing community mapping information, and co-financing activities towards shared objectives. In Namibia, the collaboration included a national TB survivors' workshop on 15-16 May 2025, aimed at strengthening the TB constituency and its representation on the CCM.

Strategic Initiative partners are also helping to disseminate the new CCM Learning Hub, a repository of nearly 300 curated tools and guides for all CCM members.



"Support to civil society networks has been provided through the Community Engagement Strategic Initiative. It is the first time that key and vulnerable populations have spoken at the CCM general assembly and have openly shared their needs. They also presented costed priorities. This resulted in a revised HIV prevention package for key populations, with an increased number of condoms and de-medicalized HIV testing"

— Global Fund Country Team, Central African Republic

#### 1.3 Responding to Community-identified Learning Needs

In 2024, the Strategic Initiative embarked on a rigorous mapping of community engagement learning needs. This was done through six regional surveys, led by the six **Regional Learning Hubs**. The first of its kind, this exercise aimed to ensure that Strategic Initiative investments respond directly to community-identified gaps and priorities.

In total, the Learning Hubs collected and analyzed 635 responses from 88 countries. These data are used by the Strategic Initiative and others to tailor technical support, capacity strengthening, and learning opportunities to the expressed needs of communities.

Based on the most common priorities (Table 1), the Learning Hubs are convening a global series of online learning events in 2025, focusing on: Community engagement in grant implementation and oversight; CLM maturity to achieve sustainability; integrating human rights and gender into HIV, TB and malaria programs; and sustainability, transition and domestic financing.



The Global Fund/Vincent Becker



**TABLE 1.** Mapping of top community engagement learning priorities for Grant Cycle 7.

	Anglophone Africa Survey	Asia and the Pacific Survey	Eastern Europe and Central Asia Survey	Francophone Africa Survey	Latin America and the Caribbean Survey	Middle East and North Africa Survey
Global Fund policies and materials						
Global Fund Secretariat						
Epidemiological data and trends						
Innovations in disease responses						
National strategic planning						
Country dialogue						
Advocacy for community priorities, including in CCMs						
Grant-making						
Grant implementation / reprogramming						
CCM representation						
CCM oversight						
Technical Review Panel responses						
Office of the Inspector General's role						
Human rights and gender						
Safety and security						
Community-led monitoring						
Community-led research						
Climate change and health						
Sustainability and transition planning						
Domestic resource mobilization						
Costing community priorities						
Social contracting						

The Strategic Initiative has also made learning more systematic and accessible, **compiling** 33 new knowledge products produced by the Learning Hubs in 2024. The catalogue covers 11 key themes and provides links to learning products, including recordings, in Arabic, English, French, Russian and Spanish.

Kazakhstan's TB burden remains concentrated among key and vulnerable populations, including people who inject drugs, people living with HIV, migrants, former prisoners, and young men. With support from the EECA Regional Learning Hub, TB-affected communities shaped the country's TB funding request for GC7.

The process included a rapid needs assessment, inclusive consultations, and the development and validation of the Funding Priorities for Civil Society and Communities Annex. All seven community-defined priorities were partially or fully included in the final submission, accounting for over 23% of the TB allocation and 29% of the Prioritized Above Allocation (PAAR). These priorities addressed communitybased screening, psychosocial support, stigma reduction, and sustainability of civil society organizations.

The initiative fostered trust, built capacity, and strengthened collaboration between communities and national stakeholders. One community representative commented: "This was the first time we saw our vision not only discussed—but submitted, attached, and budgeted. Even partially—it was a breakthrough." The process not only strengthened national ownership and alignment with human rights-based TB responses but also proposed a replicable approach for other countries in the region.

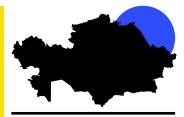
"The Community Engagement Strategic Initiative was successful in establishing regional hubs led by civil society organizations to facilitate peer learning and exchange. These hubs played a key role in disseminating effective strategies and promoting community engagement in Global Fund-supported programs"

 Audit of the Effectiveness of Global Fund Model in Delivering the New Strategy, October 2024

#### 1.4 Localizing Technical Assistance for Community Engagement

In 2024, the Strategic Initiative delivered short-term technical assistance to 17 countries, and initiated support in eight more. Assignments focused on country dialogue (in Bolivia, Colombia, Ecuador, Guatemala and Peru), facilitating community input into Technical Review Panel responses (in Solomon Islands, Djibouti and Turkmenistan), and supporting community engagement in grant-making and costing exercises (in Botswana and Egypt).

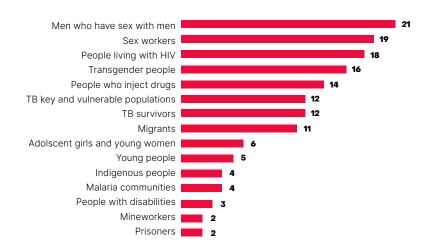
Assignments supported the engagement of at least 15 different key and vulnerable population groups in Global Fund-related processes (Figure 1). There is a significantly greater focus on TB key populations and TB survivors, with nearly half (44%) of assignments supporting these groups. For the first time, four assignments supported the engagement of indigenous communities, which face disproportionate barriers to accessing TB and HIV services.



CASE STUDY

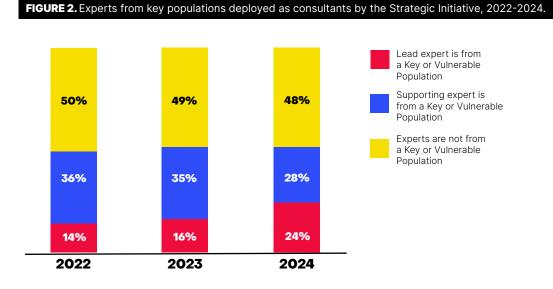
TB-AFFECTED COMMUNITIES SUCCESSFULLY SHAPE THE GC7 FUNDING REQUEST IN KAZAKHSTAN

#### FIGURE 1. Number of assignments that engaged key and vulnerable populations, 2024.



#### **Elevating community expertise**

The peer-to-peer model for technical assistance contributes to sustainability and localization of expertise. Over the years, the Strategic Initiative has increased the proportion of its technical support which is community-led (Figure 2). In 2024, more than half (52%) of all assignments were delivered by at least one expert from key and vulnerable populations, with a quarter (24%) in a lead expert position. This is in keeping with the **Global Fund's Strategy** to "promote the engagement of communities as providers of technical support."



The Community Engagement Strategic Initiative has scaled up communityled technical assistance. In 2022, 14% of lead experts for short-term technical assistance were from key or vulnerable populations, rising to 16% in 2023, and 24% in 2024.

#### Analyzing access barriers for TB

In 2024, the Strategic Initiative provided technical assistance to communities in Turkmenistan for the very first time. The assignment supported identification of gender-related barriers to TB services, centering the voices of TB-affected communities. A costed action plan was developed and adopted by the Principal Recipient—a requirement of the Technical Review Panel.

"This was the first ever community, rights, and gender assessment in Turkmenistan. It provided very good evidence on gender-related barriers to access for TB services from the perspective of health care workers, people with TB, their families, and nongovernmental organizations. As a result, a costed action plan for removing or mitigating gender-related barriers to access for TB services in Turkmenistan was developed"

— TB Principal Recipient (UNDP), April 2025

#### **Shaping grant-making negotiations**

Historically, it has been difficult for communities to have a meaningful influence during grant-making. In 2024, the Strategic Initiative supported three assignments to strengthen the inclusivity of this important process. In Botswana, technical support enabled diverse TB constituencies — including women in mining, ex-prisoners, health care workers, and indigenous populations — to actively take part in the budget negotiations. Communities report the inclusion of additional community priorities such as the TB Caucus and sensitization for health care workers as a result.

"TB communities wanted to operationalize the TB Caucus, and we were able to include this as our priority. We also secured funding for youth-friendly TB services and training for health care workers to serve people in their diversity without stigma or discrimination"

- Technical Assistance Recipient, Botswana



The Global Fund/Brian Otieno

In 2024, the Strategic Initiative supported young HIV key populations in Mongolia to contribute to the Debt2Health proposal, advancing youth priorities in collaboration with the National Center for Communicable Diseases, Ministry of Health, the United Nations Children's Fund and the World Health Organization.

Twenty young key populations from Mongolia received a sequence of technical training sessions, preparing them to take the stage during the Debt2Health negotiations to present and discuss their concerns. The group submitted a concept note to the Debt2Health process, calling for the inclusion of programming for young men who have sex with men and young trans and gender-diverse people in the agreement, and programming to address chemsex.

On 9 December 2024, Germany and Mongolia signed the **landmark agreement** to convert  $\leq 29$  million (about US\$33 million) of Mongolia's debt into public health investments. Of this,  $\leq 2.8$  million (about US\$3.2 million) was allocated for HIV-related programs. With these funds, Mongolia will expand HIV services for key and vulnerable populations — a major community priority. The funds will also support the transition to a more integrated and efficient health system.

This is a key result to achieve greater sustainability of HIV services in the country, including through domestic funding for integrated services for key populations.

#### **1.5 Strengthening the Leadership of Community Networks**

New in 2024, 14 national networks of TB activists, TB survivors and TB key populations benefited from baseline assessments to identify where they are on a continuum of organizational maturity, and to develop an action plan. This follows a recommendation in the Strategic Initiative's Grant Cycle 6 **evaluation** to increase organizational strengthening and core support to TB and malaria networks. The Global Fund's new **Community Pulse** tool for community-led organizations was used to do the assessments in all 14 countries.

For malaria, 64 civil society organizations were supported with rapid organizational self-assessments in 2024. Based on the results, three community-led organizations in Cameroon were selected to receive further organizational development support and localized technical assistance through other Global Fund resources.





# CASE STUDY

YOUNG KEY POPULATIONS SHAPE MONGOLIA'S DEBT2HEALTH SWAP Organizational development support reinforces broader strategic actions by the networks:

The Strategic Initiative catalyzed the formalization of TB survivor's network in Nepal, Mongolia and Pakistan in 2024. TB survivors in Mongolia have since been able to define and present their priorities during the National TB High Level Meeting.

The Strategic Initiative supported a national association of TB survivors in Moldova to update its risk management framework and compliance policies.

The organization submitted a revised organization package to obtain certification for participation in social contracting, meeting new 2024 requirements.

64 malaria civil society organizations were supported with rapid organizational self-assessments in 2024. Based on the assessment results, three organizations are benefiting from additional localized technical support through other Global Fund resources. The Global Fund/Vincent Baker





# CASE STUDY

COMMUNITIES **ENGAGE IN EGYPT'S** NON CCM CONTEXT. INTRODUCING **NEW PROGRAMS** TO REACH KEY AND VULNERABLE GROUPS

Since Grant Cycle 5, Egypt has had a non-CCM governance structure for its Global Fund grants, called an 'Independent Oversight Committee.' Community engagement can be challenging in non-CCM environments. Yet, the Global Fund's **Operational Policy** requires applications from non-CCMs to comply with principles of inclusiveness.

In 2024, the Strategic Initiative delivered technical assistance to key population groups in Egypt to ensure that the TB/HIV funding request for Grant Cycle 7 worth some US\$8.9 million — was responsive to community needs. This support enabled community engagement in a context where it would otherwise have been limited.

The assignment was delivered by a new community-led technical assistance provider: a network of people who use drugs. Experts conducted focus groups and interviews with 85 people from key populations in Alexandria, Cairo, Al Menia, and Tanta. Participants included people living with HIV, people who use or inject drugs, men who have sex with men, female sex workers, and TB survivors. Communities identified difficulties reaching young key populations, limited geographic coverage of harm reduction, commodity gaps and service quality challenges, and human rights barriers for migrants. During the results workshop, community priorities were discussed with the PR (UNDP) and National Disease Programs, facilitating collaboration in funding request design.

On 13 November 2024, the new Global Fund grant was signed. In review, nine out of 11 community priorities were either fully or partially included. The grant establishes a new structured outreach program for key populations, new needle and syringe distribution networks, and new programming to reach migrants with TB treatment.



# 2. Adapting to a Shifting Funding Landscape

# 2.1 Rapid mobilization of engagement support for grant reprioritiztion

The Strategic Initiative has a track record of responding quickly and effectively during times of uncertainty. In 2021, US\$2.1 million **were invested** to support community engagement in the Global Fund's COVID-19 Response Mechanism (C19RM) in more than 60 countries. Historically, more than a quarter (25.7%) of Global Fund technical assistance has **been delivered** in challenging operating environments.

In 2025, with significant changes to the global health funding landscape, the Strategic Initiative is poised to ensure meaningful community engagement during the grant **reprioritization and revision process**. As countries prepare for reduced allocations for Grant Cycle 7, the Strategic Initiative supports communities to engage in decisionmaking about the preservation of lifesaving interventions.

Adaptations included to ensure the engagement of communities in grant reprioritization:

- 1. Delivery of rapid virtual technical assistance assignments.
- 2. Tailored support to key populations through national community engagement plans.
- Provision of micro grants to rapidly and flexibly support communities to engage.
- 4. Timely dissemination of information and community guidance through. Regional Learning Hubs.

The Global Fund/Karin Schermbrucker

## MORE ABOUT THE COMMUNITY ENGAGEMENT STRATEGIC INITIATIVE

Strengthening Community Engagement Website Community Engagement Technical Assistance Guidelines Community Engagement Technical Assistance Request Form Contact Details of HIV, TB and Malaria Network Partners Contact Details of Regional Learning Hubs

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