

# AGYW MEETING FOR **HER VOICE FUND**



**25<sup>TH</sup> - 27<sup>TH</sup> APRIL 2018  
ACCRA, GHANA**

## **MEETING REPORT**



## LIST OF ACRONYMS

<b>AIDS</b>	Acquired Immune Deficiency Syndrome
<b>AGYW</b>	Adolescent Girls and Young Women
<b>ASP</b>	Additional Safeguard Policy
<b>CCM</b>	Country Coordinating Mechanism
<b>CoE</b>	Challenging Operating Environment
<b>CRG</b>	Community, Rights & Gender
<b>CS</b>	Civil Society
<b>CSO</b>	Civil Society Organization
<b>CSS</b>	Community Systems Strengthening
<b>CT</b>	Country Team,
<b>EANNASO</b>	Eastern Africa National Networks of AIDS Service Organizations
<b>EPA</b>	Eligibility and Performance Assessment
<b>FSWs</b>	Female Sex Workers
<b>GAC</b>	Grant Approvals Committee
<b>GFATM</b>	Global Fund to fight AIDS, Tuberculosis and Malaria
<b>GF CT</b>	Global Fund Country Team
<b>HIV</b>	Human Immune Deficiency Syndrome
<b>HSS</b>	Health Systems Strengthening
<b>KAPs</b>	Key and Affected Populations
<b>KPR</b>	Key Population Representative
<b>MSM</b>	Men who have Sex with Men
<b>NGO</b>	Non Governmental Organisation
<b>NTP</b>	National Tuberculosis Program
<b>PIP</b>	Performance Improvement Plan
<b>PLWD</b>	People Living With Diseases
<b>PLHIV</b>	People Living with HIV
<b>RCM</b>	Regional Coordinating Mechanism
<b>RSSH</b>	Resilient and Sustainable System for Health
<b>SW</b>	Sex Workers
<b>SR</b>	Sub-recipient
<b>TA</b>	Technical Assistance
<b>TB</b>	Tuberculosis
<b>TIMs</b>	TB in the Mines
<b>TRP</b>	Technical Review Panel
<b>TWG</b>	Technical Working Group



# 1.0 INTRODUCTION

Through Community Rights and Gender Strategic Initiative, the Global Fund has set up and invested **\$500,000** in HER Voice Fund; that seeks to support the **meaningful engagement of adolescent girls and young women (AGYW)** in Global Fund country processes as well as national and sub-national policy and strategy processes relevant to AGYW and youth SRH/HIV. HER Voice Fund is running for an initial period of 12 months and focuses on thirteen sub-Saharan African countries namely; Botswana, Cameroon, Lesotho, Kenya, Malawi, Mozambique, Namibia, Swaziland, South Africa, Tanzania, Uganda, Zambia and Zimbabwe. The Global Fund is supporting the scale up of comprehensive interventions aimed at reducing new HIV infections among AGYW aged 15-24 years in Sub Sahara Africa.

Her Voice Fund project was as a result of various consultations with women's organizations and women's funds citing challenges faced, particularly by young women, while engaging in relevant policy and program design processes that directly affect their lives. The Fund is based on the principle that **adolescent girls and young women** have a vital role to play in driving and shaping the HIV response. Her Voice is primarily geared towards supporting community-based AGYW organizations to meaningfully engage in Country Global Fund related processes hence carrying out activities within one or more of the following funding stream areas:

- Influencing frameworks, strategies, policies and guidelines related to AGYW health and wellbeing
- Implementing programmes on AGYW and financing the inclusion of AGYW's in agreements
- Monitoring the implementing of the Global Fund grants to ensure efficient and effective use of adolescent girls and young women

The experiences and needs of AGYW must be central to **policy making, program design and implementation.**

HER Voice believes that to respond adequately to the needs of adolescent girls and young women, **their voices and ideas must be heard.** They must have the opportunity to shape policies and programs that affect them. HER Voice will further collaborate with and compliment other initiatives geared towards strengthening quality of interventions targeting adolescent girls and young women.





## 2.0 HER VOICE IMPLEMENTING ORGANIZATIONS

HER Voice Fund is jointly managed and administered by SHRH Africa Trust (SAT) and Eastern Africa National Networks of AIDS and Health Service Organizations (EANNASO).

### EANNASO

Since 2003, EANNASO has worked towards strengthening civil society and community voices in various national, regional and global platforms related to the Global Fund.

It has supported:

- a) the engagement of civil society and community groups during the development of Global Fund funding requests;
  - b) the participation of key population and affected communities on Country Coordinating Mechanisms (CCMs) and
  - c) access to technical assistance by civil society and community groups in all Global Fund processes, including implementation and monitoring
- EANNASO believes that to enable meaningful engagement by civil society and community groups there must be a platform that is able to raise the voices of the communities from lived experiences so that specific issues are utilized in programming.

In the period 2015 to May 2017, EANNASO hosted the Regional Platform for Communication for Coordination for Anglophone Africa and was also a TA provider; in these capacities, EANNASO supported the key and vulnerable populations involved at various levels of the national AIDS responses.

EANNASO continues to host the Global Fund CRG Anglophone Africa Platform for the 2017-2019 and as a co implementer of the Her Voice Fund project which aims to support and facilitate AGYW to engage in country level Global Fund-related processes in 13 sub-Saharan African countries.



## SHRH AFRICA TRUST (SAT)

The SRHR Africa Trust (previously known as Southern African AIDS Trust) is a high impact regional Non-Governmental Organization (NGO) which is geared towards achieving Sexual and Reproductive Health Rights (SRHR) and Gender Equality across Eastern and Southern Africa (ESA).

SAT was established in 1990 to support community based organization strengthen programming in HIV and AIDS. SAT has evolved its programming activities to broaden our focus to SRHR in ESA. SAT work with communities, regional Non-Governmental Organizations (NGOs) and activists working for universal sexual and reproductive health and rights (SRHR) for girls, adolescents and young women in inclusive, equitable systems for health. SAT work in communities, districts, countries, and the region, continent and have a global footprint in the policy and advocacy space.





## 3.0 ANNUAL AGYW MEETING

### 27<sup>TH</sup> APRIL 2018 | ACCRA, GHANA

The meeting brought together adolescent girls and young women representatives, national stakeholders, development partners, youth leaders, funding and implementing partners of the 13 countries covered by Her Voice Fund. The meeting provided space for a deep-dive in the Fund's objectives and operationalization milestones. It also introduced the new selected AGYW Ambassadors to the Global Fund architecture with particular attention to the strategy towards gender equality and human rights programming. Finally, the workshop provided space for technical partners, countries' stakeholders, program implementers and AGYW representatives to discuss a roadmap to the successful operationalization of the fund through 2018.



#### The following were the specific workshop objectives:

1. Introduction to the Global Fund Architecture and Country process: The workshop will introduce the Global Fund new architecture, the GF strategy 2017-2022, the rationale for the AGYW focus, policies and the GF Country processes to the participants as the project targets AGYW to engage in GF country related processes.
2. To Orient and induct AGYW Ambassadors from the thirteen countries to Her Voice Fund and discuss expected roles and opportunities for meaningful engagement of AGYW groups in country Global Fund processes/National program and policy design towards a more effective HIV/AIDS response.
3. To share experiences from different countries from AGYW Ambassadors and other Implementers (IPs) who are currently implementing AGYW-focused programmes and have good best practice to share.
4. To create an action/Roadmap plan for 2018 going forward forward with clear tasks for the AGYW and recommendations on how best the project can benefit AGYW-led community-based groups manfully.

#### Meeting expected outcomes

1. Improved understanding of Global Fund processes and new architecture amongst AGYW; and understanding of application procedures
2. Ambassadors, Focal Point organisations have wider knowledge of the Her Voice Fund amongst Anglo African countries and how they expected to support the Her Voice Fund to meet its objectives.
3. Roadmap/action plan for 2018 that will allow AGYW to reach a specific/targeted number of AGYW community groups on how best to reach a wider range of AGYW community groups and how to engage more meaningfully in national Global Fund-related processes.

### PARTICIPATION

The workshop brought together about 47 participants from different 13 Countries including Her Voice Fund Stake holders, Ambassadors, Implementers and Partners. In attendance were also staff from EANNASO and SAT who are managing the Fund



## 4.0 DAY 1:

### SETTING THE STAGE UNDERSTANDING KEY ENGAGEMENT OPPORTUNITIES AND CHALLENGES FOR CIVIL SOCIETY AND COMMUNITY GROUPS

Brief welcome remarks were delivered by Marc Ndayiragije, the Chair of the EANNASO board, Cecilia Senoo, the Executive Director of Hope for Future Generations, and Michael Byrne, the Head of the High Impact Africa Grant Management Division cluster at the Global Fund.

This was followed by a keynote address by Ambassador Dr. Mokowa Blay Adu-Gyamfi, Director General of the Ghana AIDS Commission. Ambassador Mokowa thanked the organizers for making such a historic event possible in Ghana. She expressed the Ghanaian government's appreciation to the Global Fund in particular, for their continued support and technical assistance to the country - aimed at eliminating the three diseases.

She acknowledged that even though the country had made gains in the fight against these diseases, these gains needed to be safeguarded by a renewed commitment on the part of all stakeholders and the entire population. She talked about the establishment of the Ghana AIDS Fund, a local initiative to mobilize country resources to deal with the challenges posed by these diseases and sustain this momentum should the Global Fund withdraw or decrease its funding- given the current declining global donor resources for HIV. She assured the gathering of the Anglophone Africa Platform of the support of the government in undertaking any initiative that will move the fight forward. She acknowledged the unique roles that CSOs play and why there is the need for both governments and CSOs to work together.



### SNAPSHOT OF THE EPIDEMICS IN SUB-SAHARAN AFRICA

In this session, the panelists focused and highlighted epidemiological data and trends of HIV, TB and malaria globally with a focus on the Sub-Saharan African region. They described the main challenges faced by key populations and community groups in influencing policy for the three diseases.

Presenters for this session were Jacqueline Makokha - UNAIDS ESA RST, Caoimhe Smyth - Stop TB Partnership and Dr. Felicia Owusu Antwi - WHO.

Ms. Makokha shared key trends in the HIV epidemic in East and Southern and West and Central Africa. She highlighted positive trends such as a decrease in AIDS-related death, an increase in people accessing anti-retroviral treatment (ART) and a decrease in the rate of new infections. However, she also noted that new infections were concentrated among adolescents -particularly in East and Southern Africa.

She suggested that a renewed commitment to combination prevention was urgent to address the issue of new infections. She highlighted the need for advocacy to continue to challenge harmful social norms and practices that contribute to risky sexual behaviors. Additionally, she pointed out the need to address structural barriers to condom use and advocate for better data on key population groups to support programming and to address gaps in the treatment cascade that hamper efforts to reach the 90-90-90 targets.

Caoimhe Smyth (Stop TB Partnership) highlighted the following key trends:

- 25% of people who fell ill from TB were in the African region.
- The proportion of people with TB/HIV co-infection is highest in the African region.
- 74% of TB-related deaths among people living with HIV were in the African region.
- Case Fatality Rate is 20% in Africa, compared to 5% (on average) in other regions.
- 13 countries account for the 75% of the 4.1 million missing people with TB, among which are: Democratic Republic of Congo, Kenya, Mozambique, Nigeria, South Africa and Tanzania.

She also shared that an interactive civil society hearing will be held on 4 June 2018 at the United Nations in New York, as part of the preparatory process for the UN high-level meeting on tuberculosis (UN HLM) in September. She directed participants to familiarize themselves with several tools that are designed to address community, rights and gender-related barriers.

## CRG Tools



**Gender related barriers and pose corrective measures**



**Rights related barriers and pose corrective measures**



**Identify most vulnerable, identify the barriers to access and tailor interventions**

She stated that the CRG tools are currently being rolled out in six countries and seven others are being targeted.

Dr. Felicia Owusu Antwi (WHO) presented on the state of the malaria epidemic. Sub-Saharan Africa has most of the world's malaria cases, accounting for about 90% of malaria cases and deaths worldwide. Some of the key challenges include the distance to health facilities, policy gaps and a lack of prioritization of those most vulnerable to malaria.



This introductory session framed the key issues for discussion and provided a backdrop to understanding the Global Fund architecture, sharing experiences around the design and implementation of Global Fund programming, and mapping out technical assistance needs.

**“Unpacking the Global Fund Strategy for 2017-2022. “Investing to End the Epidemics”- A framework for engagement on community, rights and gender issues.**

This panel session featured three Global Fund representatives. Ulianne Appolinario (Program Officer), Heather Doyle (Senior Technical Advisor) and Gemma Oberth (Regional Platform Coordinator) from the Community Rights and Gender Department of the Global Fund. The aim of the session was to bring participants up to speed on the key elements of the Global Fund's Strategy 2017-2022. Dr. Gemma Oberth (Global Fund) gave a brief overview of the Global Fund Strategy. She emphasized the Global Fund's Strategy 2017-2022 explicitly targeted investments to reduce health inequalities including

## Global Fund Strategy 2017-2022: Investing to end epidemics





gender and age-related disparities. In particular, she drew participants' attention the *Strategic Objective 3: Promote and Protect Human Rights and Gender Equality*.

She highlighted that the Strategy Integrates human rights considerations through the grant cycle and in policy and policy-making processes, supports the meaningful engagement of key and vulnerable populations and focuses spending on high impact interventions.



Ms. Doyle reviewed the progress to date and challenges in advancing gender and human rights through catalytic investments for adolescent girls and young women, the reduction of human rights barriers to services, key population engagement and finding the missing TB patients. She highlighted that preliminary data from human rights assessments conducted in 20 countries showed that that human rights investments were tracking upwards in the current allocation compared to the previous allocation. She also mentioned the scale-up of programs to support women and girls, including programs to advance sexual and reproductive health and rights. Lastly, she described ongoing work to describe the full range of community systems and responses and community interventions in Global Fund investments and document and promote approaches to community-based monitoring to improve services and program impact.

Ms. Appolinario provided an update on progress from the Community Rights and Gender Strategic Initiative in supporting the meaningful engagement of civil society in Global Fund processes under

## Supporting meaningful engagement of civil society in GF processes

### Updates of the CGR-SI

#### CRG-STRATEGIC INITIATIVE

##### 1. Short term TA

(Global peer-to-peer civil society TA to support community engagement in Global Fund and related processes across the three diseases (i.e. HIV, TB, Malaria) and RSSH.

##### 2. Longer-term /meaningful engagement of key and vulnerable populations.

- 6 Global HIV KP networks; - 5 TB Advocates;  
- 2 Malaria CSOs; - AGYW groups;

##### 3. Regional Platforms

(Communication and Coordination of Global Fund processes in 6 key regions)

□ **34 TA assignments** delivered globally. Particular focus on funding request and grant making.

□ All **regional platforms** up and running, with most of them already doing their 1<sup>st</sup> annual meeting. Important to acknowledge the more focused work of the platforms in this implementation cycle.

□ **6 networks of KPs** also receiving grants and operating in closer collaboration with platforms;

the SI's three components: (1) short-term technical assistance, (2) longer term capacity development of key and vulnerable populations, and (3) regional communication and coordination platforms.

She also explained « HER Voice Initiative », a USD 500,000 initiative to catalyze the impact of the Global Fund investment in adolescent girls and young women in 13 HIV high burden countries in Africa, through the provision of small grants to address day-to-day financial and logistical barriers that challenge the inclusion of AGYW's voices in relevant policymaking processes that affect their lives.

She also touched upon increased investments for TB and malaria, including the recent selection of five TB networks as new grantees and the piloting of the Malaria Matchbox, a tool that consolidates a message around the importance of human rights and gender responsive approaches towards better malaria outcomes.

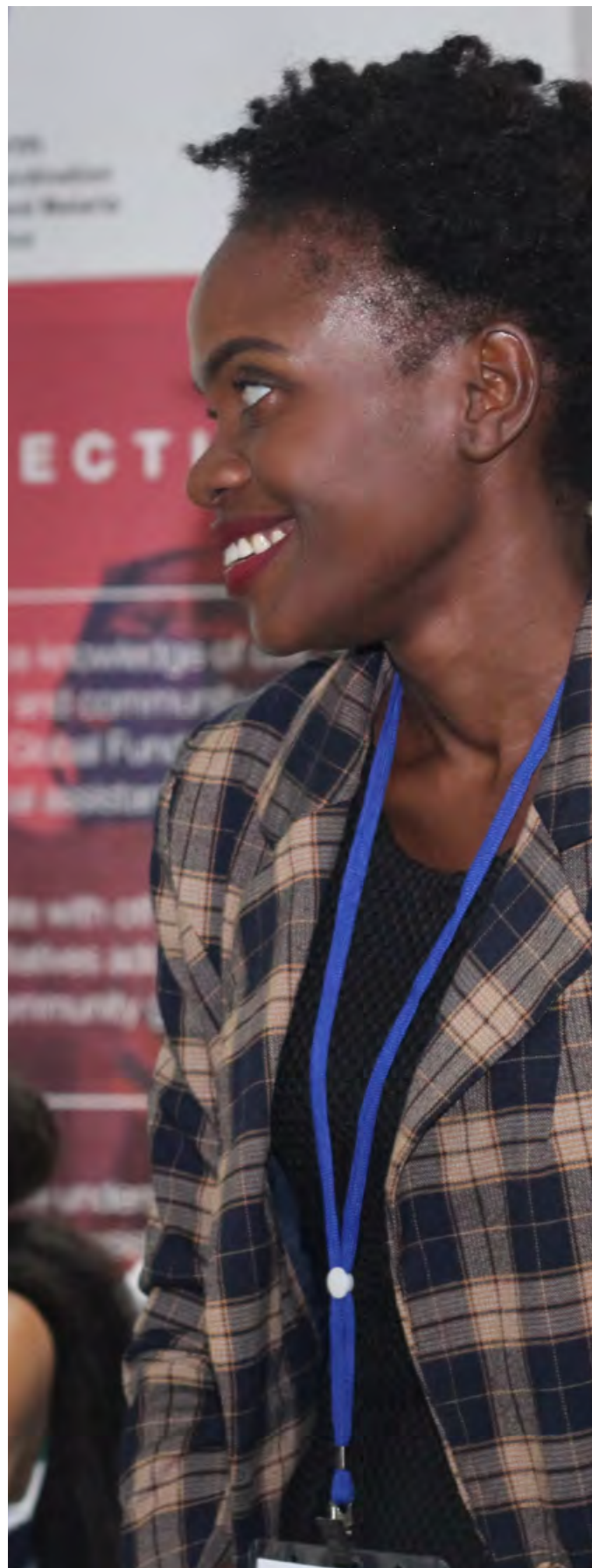
## DISCUSSION:

During the discussion the participants raised the issue of HIV and aging. With better treatment protocols, people living with HIV are living longer and there is nothing focusing on the specific issues of older people living with HIV.

There was also a concern that the network of women living with HIV in Zimbabwe were not included in these catalytic investment processes.

Lastly, participants asked how could CSOs articulate their role as key linkages in strengthening health systems and communities.

In responding to some of the issues, Ms. Appolinario said that National Strategic Plans should be the key guide to developing funding request and that there is the need to show the value of community programs and how they helps in achieving agreed targets.



## FROM PLANNING TO ACTION:

**EANNASO's work in leveraging human rights and gender responsive investments through the engagement of civil society and community based groups in GF and related processes.**

Yvonne Kahimbura (Program Officer, EANNASO) presentation's recapped key evaluation findings from the CRG Special Initiative 2014-2016 and Anglophone Africa Platform milestones. She also shared key elements of the platform's workplan and activities for the next two years.

The purpose of this presentation was to promote sound understanding of the role of the Anglophone Africa Platform and how participants and other civil society and community actors can engage and benefit from the platforms' resources to maximize the impact of Global Fund investments within their constituencies and in their countries.

The Anglophone Africa Regional Platform has implemented range of strategies such as: needs assessments, mappings, databases, websites, social media, annual meetings and information materials to support bi-directional information flow between communities and the Global Fund.

**Key challenges from the last phase that will be addressed in the current phase include:**

1. In the past, the cut-off point for technical assistance at was at grant signing. However, technical assistance is now available throughout the entire grant cycle (e.g. for community monitoring of grant implementation)
2. Low uptake among malaria stakeholders: the platform is developing a strategy to map and engage malaria constituency
3. Lower levels of engagement in the West and Southern region, which will be addressed through the selection of communication focal points organisations.
4. Lack of expertise in emerging technical areas: the pool of TA providers: Stronger capacity to deliver in key areas including gender, human rights barriers to services, malaria, TB as well as in emerging priority thematic areas such as sustainability, transition and co-financing (STC) and support to civil society in challenging operating environments (COEs).
5. A Monitoring, Evaluation and Learning (MEL) Framework has been developed to address the lack of M&E framework to identify and measure expected outcomes.





## **Is Community, Rights and Gender working for us? Civil society panel experiences on innovative community, rights and gender approaches for policy and program design in Anglophone Africa.**

In this session, the presenters shared case studies from four countries on innovative community, rights and gender approaches for policy and programming in Anglophone Africa. It was designed to allow participants to learn from peer panelists about how they have mobilized their constituencies to engage in Global Fund processes with a view to ensure that Global Fund investments adequately reflect their priorities, while effectively addressing human rights and gender related barriers to services.

Experiences were shared from about community engagement in South Sudan by Dr. Richard Ofwono, AGYW programming in Kenya by Lucy Wanjiku, finding the missing TB people in Mozambique by Rojerio Cumbane and community-based-monitoring in Sierra Leone by Abdulai Sesay Abubakar.



## **Engaging communities and civil society in the funding requests and program design: overcoming participation challenges and ensuring program quality to the most excluded groups in challenging operating environments.**

In his presentation, Dr. Richard Ofwono noted that in South Sudan, despite the conflict, political instability and infrastructure challenges that exist in this COE, there has been a growing involvement of communities and CSOs in processes like the development of National Strategic Plans (NSPs), from state to national levels. Nevertheless he identified need capacity building to ensure high quality CSO input. He said that most priorities identified by CSOs and communities fall off at the funding request stage and when they are included, they receive very limited budget allocations or are relegated to the prioritized above allocation request. He suggested the following to improve the engagement of civil society and communities:

- Peer-to-Peer learning from other networks in the region
- Capacity building for CSO coordination
- Comprehensive capacity building for civil society and community groups
- Continued advocacy for greater involvement of civil society and communities
- Advocacy for capacity building and support to South Sudan AIDS Commission
- Advocate for effective representation of civil society on CCMs

## Building coalitions of adolescent girls and young women towards the design of a roadmap to engagement in the Fund's investments for AGYW groups

Lucy Wanjiku Njenga presented on how coalitions of young women and girls managed to influence Global Fund programming. AGYW representation in the Global Fund writing team was comprised of one young woman who programmers overwhelmed and kept out of the conversation. With support from Lean on Me Foundation, two more AGYW representatives were able to attend the writing process. A lot of lobbying of other members of the writing team and CCM members was needed to ensure their priorities were not taken out. There is a tendency to dismiss young women in spaces where doctors, academics and older and more experienced advocates are present but she reminded the room that young women are experts at understanding their own issues and designing solutions and should be included from the beginning.

### Heather Doyle

She reviewed the progress and challenges on advancing gender and human rights in GF focused investments for adolescents, girls and young women. She also addressed reduction of human right barriers to services, key population and finding the missing TB cases.

She gave a quick recap about the matching funds and whether it was working.

She mentioned the scale-up programs to support women and girls, including programs to advance sexual and reproductive health and rights.

Under Tracking of Human Rights Investments, Doyle hinted that;

- Nepal is investing 1.3 mil from their Government funding to match 1.3 mil matching fund, while around 80k is invested on programs to address human rights-related barriers from the allocation.
- Mozambique- investment in the allocation reduced to 2.7 mil during the grant-making.
- Previous investment level tracked at Grant-making: on-going efforts to track data in signed grants



She indicated strongly that is important for CSOs to know that these processes are ongoing and what spaces are available for them.

Under strengthening community systems and responses she elaborated on;

- Ongoing work to describe range of community systems and responses and community interventions in Global Fund investments.
- Ongoing work to document and promote approaches to community-based monitoring to improve services and program impact.

## Ulianne Appolinario

She presented on the over view of the GF Strategic plan 2017-2022

Four pillars on which the strategy is built

1. Maximize impact against HIV, TB and Malaria
2. Build resilient & sustainable systems for health
3. Community Investments in CSR module (2017-2019)
4. Community Investments Excluding CSR Module (2017-2019)

Some strategies highlighted are as follows:

Under supporting meaningful engagement of civil society in GF processes, Doyle also gave updates of the CGR-Special initiative stating that;

- 34 TA assignments delivered globally. Particular focus on funding request and grant making.
- All regional platforms up and running, with most of them already doing their 1st annual meeting. Important to acknowledge the more focused work of the platforms in this implementation cycle.
- 6 networks of KPs also receiving grants and operating in closer collaboration with platforms;

Also she said on supporting meaningful engagement, she shared the example of the **HER Initiative**.

### HER VOICE Fund Grant

- Global Fund has provided USD 500,000 initiative to catalyze the impact of investment on adolescent girls and young women in 13 African HIV high burden countries
- Operates through the provision of small grants of up to USD 2000 to address day-to-day financial and logistical barriers that challenge the inclusion of AGYW' voices in relevant policy making processes that affect their lives.

Finally under supporting meaningful engagement of civil society in GF processes she gave updates of the CGR-SI on Malaria and TB and said that we have seen;

- Increased investments for TB: 5 TB networks recently selected to be the new grantees, ACT Africa included she congratulated ACT
- Increased investment in Malaria: Malaria grantees + Malaria matchbox = consolidate a message around the importance of human rights and gender responsive approaches towards better malaria outcomes.





## Questions, comments, discussions after presentations

- Under the CRG initiative, how can other countries benefit?
- Role of CSOs as key linkages in strengthening health systems and communities
- About the funding for women living with HIV, how was this done and who has been part of it
- HIV and aging; how little on nothing is been done to focus on elderly HIV positive persons

Responding to some of the issues, Ulianne said that National strategic plans should be the key guide to developing funding request and that there is the need to show the value of community programs and how that helps in achieving targets.

## AGYW focused discussions: Engaging AGYW groups in program and policy design towards a more effective HIV/AIDS response

In the Afternoon AGYW had their own side session, where by Ms Yvonne was chairing the session. Heather Doyle from Global Fund presented on Global Fund strategy to reduce incidence of HIV/AIDS among AGYW in 13 HIV high burden countries. **The Global Fund Strategy 2017–2022, “Investing to End Epidemics”**, aims to rapidly reduce HIV incidence and mortality by scaling up universal access to HIV prevention and treatment.

It also commits to scaling-up programs to support women and girls, including programs to advance sexual and reproductive health and rights, and has adopted a key performance indicator on reducing HIV incidence for **adolescent girls and young women (AGYW)** in focus countries. She further said that Her Voice is the result of various consultations with women organizations and women’s funds citing challenges faced particularly by young women, while engaging in relevant policy and program design processes that directly affect their lives.

Uliane Appolinario also shared why meaningful engagement is important to human-centered approach to health especially Adolescent girls and young women. Adolescents should participate and engage meaningfully in the country dialogue, national processes and Global Fund related processes at national level, to be included as target populations in national plans and policies, and be supported and empowered to contribute to the process of concept note development.

## HER VOICE Fund: Over coming barriers to participation, contributing to program quality

The session was chaired by Lucy Wanjiku. Glory Chagama and Gertrude Dendere presented on Her Voice Fund, who is eligible to apply, how to apply. They said through its community Rights and Gender Strategic initiative, the Global Fund has invested \$500,000 in Her Voice to support the meaningful engagement of adolescent girls and young women in national AGYW and youth related policy and program processes supported by or linked to the Global fund for an initial period of 12months.<sup>13</sup> sub Saharan Africa countries namely; (Botswana, Cameroon, Kenya, Lesotho, Malawi, Mozambique, Namibia, South Africa, Swaziland, Tanzania, Uganda, Zambia and Zimbabwe) were selected as eligible for the funds. The presenter also clearly mentioned examples of the activities which qualify to be funded and the ones that can not be funded. They also gave out the website presentation and shared links for all social media platforms.



## Building leadership, introduction and induction of Agyw ambassadors to her voice Fund

On this session it was agreed to leave Ambassadors discuss on how best they can support Her Voice fund and identify their expectations from Her Voice Fund. The same to the Project Management Unit (PMU) and Uliane from Global Fund had side discussion on the expectations from Ambassadors and what Her Voice Fund is expected to support. Their discussion were presented by Beverly Mutindi and Millicent Sethaile during the induction of the Ambassadors.

PMU discussion was presented by Uliane Appolinario. These two presentations came up with the conclusion of having Ambassadors Memorandum of Understanding. Different committee for Ambassadors were formulated such as communication, Finance and Administration.

At the clouser of day one meeting we had a very good interesting session: Introduction of the

New selected Ambassadors from the 8 countries This was done together with the annual regional platform meeting to ensure that we present the new ambassadors to the whole congregation and also link them to CCM members from the thirteen implementing countries of Her voice Fund Grant.

The session was chaired by Dr. Shakira Choonara (SAT). AGYW ambassadors from Botswana, Kenya, Lesotho, Malawi, South Africa, Tanzania, Zambia and Zimbabwe were each given a few minutes to make some remarks about their roles and expectations. They pointed out gaps in addressing violence against women and reiterated the importance of advocating for better services designed by and appropriate for young girls and women by amplifying the voice of the girl using girls. "Nothing for us without us".



Each ambassador was assigned a mentor from their respective countries to support their work as Her Voice Fund Ambassadors in their countries.

## 5.0 DAY 2:

### IMPLEMENTATION AND OVERSIGHT: SKILLS, TOOLS AND RESOURCES FOR MEANINGFUL ENGAGEMENT

#### Recap of Day One

Participants were given the opportunity to comment their observations from the first day of the meeting. Key points are summarized below:

- There is the need for Global Fund to look at us in specific and country contexts and not to treat each country as the same
- Community based monitoring is key for any successful program roll out.
- There has been a palpable increase in the allocation of resources to TB and HIV, but Malaria remains neglected. Malaria communities should be further engaged to see we can advocate together for increased funds.
- The young women selected as ambassadors were inspiring and motivating and will bring great energy and ideas to address age and gender-related barriers to HIV prevention in their countries
- In regards to HER Voice Fund, there is a vacuum for young people in TB and this is something AGYW should begin to focus on.

Participants were also briefed on the accreditation processes for the TB High level meeting which was discussed and persons that had problems with registration were asked to send queries to the link provided.

#### Effectiveness of TA, lessons learned from TA provision in the region

The purpose of this session was to provide participants with an understanding of experiences and lessons learned from TA provision across the region. Olive Mumba (EANNASO Executive Director) shared findings from the TA needs assessment study in Anglophone Africa. Some of the topics covered areas of EANNASO's work that they found the most useful and areas that they would like the Regional Platform to address in their work.

In terms of the support that civil society and community groups find most useful, the largest proportion of respondents 41%, said that the most useful kind of information they receive from the Regional Platform is community guides on Global

Fund policies and processes. This was followed by 24%, who said that tools and toolkits on how to engage in Global Fund processes are the most useful. Nineteen (19%) cited opportunities to participate in meetings and dialogue forums as the most useful contribution of the Regional Platform. Fifteen (15%) of respondents cited research reports and in-depth analysis and newsletters or emails on opportunities for accessing technical assistance as less useful, in terms of the information they have received from the Regional Platform.

In terms of areas to address, respondents identified issues such as how to transition from UNDP-managed grants, how to become a member of the CCM, how to



advocate for the inclusion of people who use drugs in Global Fund services, support for implementing grants in challenging operating environments (COEs), further the understanding of civil society and community needs and practical guidance on how to apply for technical assistance.

Donald Denis Tobaiwa's (Jointed Hands) presentation looked at TA experiences in Zimbabwe and the TIMS grant in Southern Africa. He explained that the CSOs in Zimbabwe saw the need for TA and requested for it through the Zimbabwe AIDS Network (ZAN) for the TB/HIV Grant. For ZAN, the TA was in the form of support for three regional consultative dialogues that contributed to both the HIV strategy and the Global Fund Funding Request. The second aspect was support to the writing process – further broken down into CSO specific consultant support and writing team and backup team support. A third aspect part to the TA was to support the CSO leads to attend the grant making- but because of manipulation it did not happen.



Similarly, because of the great need to involve key populations in the TIMS grant, the Regional Coordinating Mechanism (RCM) engaged EANNASO. In the case of the TIMS Grant, TA was for a key population-specific consultant. The technical assistance supported a virtual dialogue support and writing support. Not just for the community responses and systems activities but for key populations input into the entire Funding Request. There are two outstanding activities yet to be undertaken: preparing the key populations groups for implementation and support from GIZ for regional constituency feedback and building and strengthening mechanisms.



He shared the following reflections from the process:

- The TA for CSOs on the writing team reduces the wrongly perceived conflict of interest for CSOs
- Some bodies including CCM secretariats are highly conflicted and also need to be monitored
- It is important to contract a firm TA consultant who is grounded in CSO activities and country context
- All these TA efforts are slowly being lost through awards to Government, parastatals e.g. National AIDS Commissions and International NGOs and CSOs will tire and eventually close shop and no one will be there to participate.

## DISCUSSION

- A participant from Swaziland said there is the need to give credit to the Global Fund country team for Swaziland since they meet CSOs to reflect on several issues
- Another participant's concern was that, KANCO is a PR but struggles to get TA
- CSOs should be responsible and accountable
- The excuse of low capacity and often leads to the exclusion of KPs in implementation
- EANNASO shared the [CRG TA directory](#) available on the EANNASO website.

### How are technical partners resourcing civil society and community groups to support gender and human rights responsive policies?

This session was designed to provide participants with an overview of the different types and sources of technical assistance available and the process for obtaining it.

## CRG TA PROGRAM

Dr. Gemma Oberth explained that an important innovation to the CRG TA program is that technical assistance can be requested at any time. In order to be eligible the short-term technical assistance request needs to be tied to a Global Fund grant/ process happening in one's country and should not duplicate work currently undertaken by the platform or by the key population networks (under component 2 of the CRG SI). Typically, these assignments cost between \$50,000 to \$60,000 and last about 30 days.

Twenty-six civil society and key populations organizations have been identified as technical assistance providers. These providers have expertise in human rights, gender, malaria, tuberculosis, sustainability, transition and co-financing (STC), support to civil society in Challenging Operating Environments (COEs). See below:

### The 2017-2019 CRG-Strategic Initiative

#### CRG Short-term Technical Assistance

##### Who provides the CRG technical assistance?

- 26 civil society and key populations networks and have been prequalified as CRG technical assistance providers:

- |  |   |
|--|---|
| 1. African Men for Sexual Health and Rights (AMShE)                                      | 14. Community Leadership and Action Collaborative (CLAC)        |
| 2. AIDS & Rights Alliance for Southern Africa (ARASA)                                    | 15. Eurasian Coalition on Male Health (ECOM)                    |
| 3. AIDS Strategy, Advocacy and Policy (ASAP)   | 16. HIVOS   |
| 4. Alliance India  | 17. International Center for Research on Women (ICRW)           |
| 5. Alliance Technical Assistance Centre – International Charitable Foundation (ATAC-ICF) | 18. International Council of Aids Service Organizations (ICASO) |
| 6. International HIV/AIDS Alliance   | 19. KELIN   |
| 7. Amref   | 20. KeNAAM  |
| 8. APCOM   | 21. Moldovan Institute for Human Rights (IDOM)                  |
| 9. Asia Catalyst   | 22. Nai Zindagi   |
| 10. ATHENA   | 23. Networking HIV & AIDS Community of Southern Africa (NACOSA) |
| 11. Australian Federation of AIDS Organisations (AFAO)                                   | 24. PATH  |
| 12. Canadian HIV/AIDS Legal Network  | 25. Speak Up Africa   |
| 13. Caribbean Vulnerable Communities Coalition (CVC)                                     | 26. The Union   |

She advised participants to tap into the resources and links to technical assistance and made reference to e-learning platforms and upcoming trainings (e.g. social contracting).

## INTERNATIONAL HIV/AIDS ALLIANCE (ALLIANCE)

Revanta (Kanna) Dharmarajah presented on behalf of the Alliance. The Alliance is the largest global civil society partnership working on HIV. They are a unique global alliance of over 30 national based, independent, civil society organizations (known as Linking Organizations) – united by our vision of a world without AIDS.

The Alliance promotes capacity building and learning and sharing experiences and good practices across regions. It also organizes horizontal learning exchange and documents successful capacity-building efforts.

He described the Rapid Response Fund which is managed by the International HIV/AIDS Alliance and funded by the [Elton John AIDS Foundation](#). It is a \$4m Fund which disburses sums of up to \$20,000 to LGBT and MSM organizations so they can carry out urgent work to alleviate the stigma, discrimination and violence that threaten provision, access and uptake of HIV services for MSM and

LGBT people. The Fund is active in 30 countries and has supported projects in 20. More than 900 applications have been received, with 115 projects supported. Turn-around times in emergency situations can be as quick as a few days.

They also manage the PITCH project in Southern Africa which is implemented in Nigeria, Uganda, Kenya, Mozambique, Zimbabwe. It focuses on lobbying and advocacy, while building the capacity of civil society to champion their stories and needs. Target populations include, sex workers, people who use drugs, lesbians, gay, bisexual and transgender and adolescent girls and young women.

The Alliance also has an agreement with GIZ Backup Health for 2018-2019 to support CCM strengthening.

He also discussed the [Alliance the E-Learning Portal](#) and Tools, Trainings, Case Studies and Learning Platforms.



### Tools, Trainings, Case Studies and Learning Platforms

#### Safety and Security toolkit

aims to help implementers of HIV programmes for key populations, who often operate in hostile and unsafe environments, to address safety and security challenges in their programme implementation



#### Global Fund Principal Recipients (PRs) who manage local community-based sub-recipients (SRs).

It highlights actions for PRs to consider when managing community-based SRs, not just to meet the Global Fund's standards and requirements, but more importantly to sustain civil society's response to the three diseases after Global Fund financing ends.



<http://www.aidsalliance.org/>



## UNAIDS

Dr. Victor Bampoe provided an update on the new model of UNAIDS Technical Support. There are three main areas of support:

- 1) alignment with Fast Track Targets;
- 2) Global Fund grant implementation and;
- 3) sustainability and support to effective transitions.

Examples of eligible activities include advocacy and ensure that the response is grounded on human rights, identification of implementation barriers and the development of social contracting mechanisms to channel public funding to civil society and community organizations.

TA is delivered through one mechanism, Oxford Policy Management (OPM), that integrates UNAIDS and consultants to ensure that high impact and quality assured technical support is provided. He said that community role and delivery are a priority for quality and sustainable response and that support to community delivery is prioritized in the results framework for the UNAIDS Technical Support. UNAIDS encourages civil society organizations and community groups to reach out to the UNAIDS Country Office and the UNAIDS Regional Support Team and seek technical support.

## AIDSPAN

Ann Ithubi described the work of Aidspan. Aidspan is not a technical assistance provider per say but rather acts as an independent observer of the Global Fund. Aidspan covers all countries receiving Global Fund grants offering information, targeted critical analyses, sharing best practices/lessons learned and independent commentary. Aidspan receives no financial or material support from the Global Fund and though they maintain a positive working relationship with the Global Fund.

Ms. Ithubi identified some of the key implementation challenges at the country level. These include lack of understanding of Global Fund policies, processes and guidelines, the exclusion of key and vulnerable populations in Global Fund processes, low absorption of funds in grants, weak planning and implementation, low transparency in Global Fund processes and the additional safeguards policy (ASP).



## STOP TB PARTNERSHIP

Caoimhe Smyth explained the technical assistance opportunities. In addition to ad hoc TA and the TA provided through the regional networks, there is also available through the Stop TB Partnership's Challenge Facility for Civil Society (CFCS) is a small grants mechanism that supports innovative community responses to fight TB. Awards of up to \$40,000 are available to civil society, community-based and non-governmental organizations to boost the demand and access to TB services and improve the quality of TB services.

In addition, the OnelImpact project is a platform of digital solutions, created by Stop TB Partnership and partners to enhance community empowerment engagement and support. A collection of relevant tools is summarized below:



## CRG Tools and Technical Assistance

**Strategies (in addition to the Global Plan)**

- Global Plan to End TB
- Key Populations Policy Briefs

**Tools**

- Legal Environment Assessment
- TB/HIV Gender Assessment Tool
- Key Population Data for Action Framework
- Stigma Assessment Tool (in development)
- OnelImpact (in development)

**Support**

- Technical Assistance



## ARTICULATING OUR TA NEEDS

This session provided participants with TA scenarios, helping to identify and articulate technical assistance. The purpose of this session is to expose participants to a range of short-term technical assistance assignments to stimulate their thinking around what qualifies as short-term technical assistance, who can provide it, what the activities could be and what the expected results should be.

Each table received a scenario adapted from an actual CRG TA request.

- Do you think this scenario meets the criteria for short-term technical assistance? Why? Why not?
- What organization could support this TA request?
- What activities would be carried out to achieve these objectives?
- What would be the desired result of this TA request?



### Honing our skills; Mock TA request development

This session was designed to build the capacity of participants to design technical assistance requests. In small groups around each table, a TA request form was shared, and participants were guided with the help of the facilitator to fill in and report back in plenary. When participants reflected back on their experience they noted that they got stuck at various points because they didn't have all the information. They were advised to submit what they have to the Platform, as the Platform is there to support and guide them through the process.

### Sustainability, transition planning and domestic resources.

The purpose of this session was encourage participants to be proactive in engaging with emerging issues such as sustainability, transition and counterpart financing as well as domestic resources. The panel session featured Olayide Akanni from Journalists Against AIDS in Nigeria discussing counterpart financing, Nana Gleeson from BONELA in Botswana talking about transition and sustainability issues and Linda Mafu (Global Fund) talking about domestic resource mobilization.

Ms. Akanni shared about the experience of Nigeria, where the 2014-2016 allocation was cut by 15% -\$170.61 million- for failing to meet the counterpart financing commitment. She recommended a broad-based country wide domestic resource mobilization strategy which clearly articulates how federal and state level financial contributions are regularly captured. She also suggested that it was critical to “promote a shared understanding among the various stakeholders of the various clauses and conditionalities in each grant agreement”.





Ms. Gleeson described the country's experience of preparing to implement the country's final malaria grant and cautioned that key populations were particularly vulnerable to transitions and that African advocates should be looking at case studies from Latin America and the Caribbean and Eastern Europe as examples of good practices and potential pitfalls. Many in the room were shocked to find out that the Global Fund was pulling out of countries- especially in Africa.

Ms. Mafu shared some key achievements for 2017. Namely, national dialogues on health financing held in Togo, Benin and Senegal and finalization of sustainability plans in Kenya and Tanzania. For 2018, the countries that have been identified as the high priority countries for domestic resource mobilization: Ethiopia, Kenya, Tanzania, Zambia, Zimbabwe, Uganda, Benin, Togo, Burkina Faso, Senegal, Cote D'Ivoire, Cameroon, Niger, Nigeria, Malawi and Liberia. She highlighted key advocacy pillars such as civil Society, Friends and Foundations, GFAN, champions and influencers and members of parliament. Below are some key mobilizing moments for 2018.



## Key mobilizing moments in 2018

Event	Date
IPU General Assembly meeting	March 2018
Commonwealth Summit including the Global Malaria Summit organized by Malaria No More	April 2018
World Health Assembly meeting	May 2018
African Union Heads of States Summit	July 2018
International AIDS Society Conference	July 2018
United Nations General Assembly High Level Meeting on Tuberculosis	September 2018
World Lung Health Conference in The Hague	October 2018

## Know your Global representatives

This session focused on how to engage with NGO and community delegations to the Global Fund Board and other platforms. Speakers were:

- Austin Obiefuma (Stop TB and Union),
- Abdulai Sesay (Global Fund Communities Delegation)
- Rosemary Mburu (Civil Society Engagement Mechanism - CSEM)
- Ibrahim Umoru (Global Fund Communities Delegation)



## Keeping an eye on the CCM

This session was a recap of the key outcomes of the CCM meeting held on the 23rd and 24th of April, 2018. The purpose was to get participants to understand key outcomes from the CCM meeting and what next steps to expect. Ibrahim Umoru and Stephen Mc Gill made presentations covering points from the meeting. They are summarized below:

- The need for countries to freely share experiences and how other countries can learn from others on how they are dealing with similar problems
- The need to build on the capacity and knowledge base of CSO CCM representatives
- The importance of the dashboard as a management tool for CCM oversight
- Funds absorption challenges and how countries can overcome them
- Need for CCM members to understand their roles and also effective constituency engagement
- The need for countries to look for alternative funding and not to rely on the Global Fund
- Need for open dialogue and clear guidelines for CSOs engagement for improved programming and impact

## What next?

In this session, participants were tasked to discuss what the platform should do to support civil society and communities. Inputs have been collected below:

- Sharing information by email and What's App group
- EANNASO should develop case studies from different countries and disseminate widely
- Share success stories on transition
- EANNASO should use YouTube videos to share information
- Establish civil society focal points to support information dissemination
- Support mentorship for AGYW
- Develop Tools (for e.g. dashboards)
- Conduct analysis of funding requests to see how much is going to civil society
- Facilitate group discussions through national networks
- Webinars
- Continue with newsletters, updates, reports and publications

## 6.0 DAY 3:

### ADOLESCENT HEALTH, HIV/AIDS AND SRHR IN ANGLOPHONE AFRICA COUNTRIES, STRATEGIZING FOR MEANINGFUL ENGAGEMENT, EXPERIENCE SHARING AND ROADMAP FOR ACTION TOWARDS MEANINGFUL ENGAGEMENT

This day was set aside purposeful for AGYW only for Improvement in acces to technical assistance, strategizing for meaningful engagement through sharing best practice and advocacy tools/messaging and roadmap for action towards the meaningful engagement of AGYW constituences in health policies and programs.

#### Agenda setting

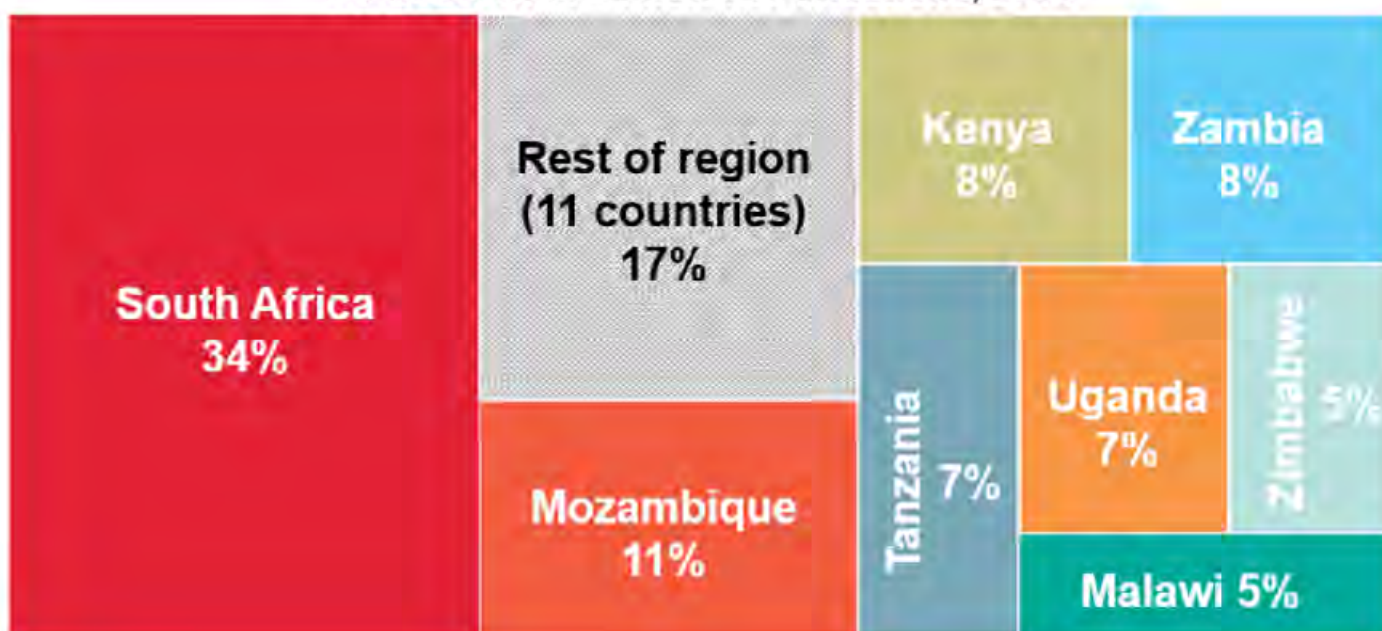
Madam Yvonne Kahimbura introduced the agenda and set objectives for the forum. Shakira Choonara was the facilitator for the 3 concecutive sessions. There was a welcome address from Madam Brenda of Youth Advocates Ghana, she encouraged participants to contribute to the various sessions as it would be interactive. Madam Cecilia Senoo also addressed the gathering and urged all present not to forget grass-root involvement in all the AGYW Programs.

#### Adolescent health/AIDS and SRHR in Anglophone Africa countries

This session was chaired by Shakira Choonara and presented by her on behalf of Jacqueline Makokha from UNAIDS.

She presented the status of HIV/AIDS among Youth aged 10-24 both men and female. South Africa has the largest percent of new infections 2016, of 34%, Kenya and Zambia 8%, Uganda and Tanzania 7%, Malawi and Zimbabwe 5% then Mozambique 11%. She further said that AGYW doubles for new HIV infections of 4000 daily compared to their peer men of 1800 daily, She also shared that More females are getting infected... but males are more at risk of dying than females, and so many data.

**Distribution of all new HIV infections, 2016**







Presenter came up with the idea of group work according to data shared, discussion questions were, why this is happening? what are we currently doing to rescue the situation? How can we solve this.

Some issues on why new infections are among the youth that the participants raised were: youth afraid to test for HIV, no youth friendly services, stigma and so many. Suggestions were raised such as Training of young leaders and health providers, counselling services to be provided to young people living with HIV, Open discussions for inspiration, to have youth friendly services at all health centers, Comprehensive Sexuality Education (CSE) to be included in schools curriculum, Youth

to be mentored and given opportunity/ space during policy formulation, design of programmes and engagement in the development of National Strategies Plan processes and all other related issues that affects their health.

Dr Felicia Owusu Antwi from UNAIDS, Ghana shared with participants some vital statistics on HIV/AIDS prevalence worldwide. She emphasized the need for Early Infant Diagnosis as it is one area that we are not doing too well. Looking ahead, she stated that adolescent and children services must be improved, there must be integration of HIV/AIDS services into all packages, focus on gender and proper prioritization of issues.

## Strategizing for meaningful engagement

Mrs Linda Mafu from Global Fund urged youth to form partnerships in the fight against HIV, she stated that it's very important to know statistics of HIV prevalence, have facts to help or support during advocacy and campaigns. She added, Global Fund has invested in reducing new HIV incidences among AGYW in Sub-Saharan Africa hence a joint effort with other partners and stakeholders in fighting against HIV among the youth.

Uliane Appolinario shared opportunities available for AGYW TA and how Global Fund has improved access to technical assistance from the CRG-SI TA program, the program provides support to civil society and community organization to meaningfully engage in Global Fund related processes throughout the life cycle of GF processes. She further emphasized that AGYW have also the opportunity to ask for this support as they wish to see stronger participation and inclusion of AGYW in all Global Fund supported programs. She also insisted on having evidence and facts (HIV prevalence rates) in their regions/countries plus understanding their needs as they seek for TA support.

## READY Best Practise

Miss Patricia Humura from Peer to Peer, Uganda and Ntombifuthi Shongwe, from Swaziland Network of young positive (IPs AIDS Alliance) and Lubna Bhayani from International HIV/AIDS Alliance provided briefs about READY project, shared goals and purposes of READY project which is supported by International HIV/AIDS Alliance. The project targets Adolescent and young people (10-24yrs) living with and most affected by HIV. The project empowers and enhances knowledge sharing about HIV hence the youth have freedom to make healthier choices and access services and commodities related to their sexual and reproductive health and rights.

The purpose of the project is ;

- 1) Get young people ready to make informed decision about their health and rights
- 2) Get parents and caregivers ready to support young people to talk about sexuality
- 3) Get service providers ready to provide youth friendly services
- 4) Get decision makers ready to champion access to information, services and commodities for Adolescent Girls and Young women living with HIV.

Patricia from Uganda shared on how READY project is working in her country, shared some facts/statistics for Uganda outcomes of the project so far that they have drafted National HIV and AIDS roadmap, they have Parents and Adolescent symposium to champion priorities of adolescent health through positive parent hood measures. Futhi Shongwe from Swaziland also shared the achievements of READY in their country, AGYW have managed to participate on key policy forum (SWANNEPHA pushing senate to pass the sexual offences and Domestic Violence Bill) (SODV). They have tailored health services, they have managed to achieve the program of keeping girls in school and hence the community norms has changed.



## Experiences sharing: Successes, best practices and challenges for AGYW constituencies in engaging in relevant country processes.



This session was facilitated by Glory Chagama. Some beneficiaries of Her Voice Fund and PITCH Project, shared experiences from their various projects as well as strategies being employed to facilitate their work such as involvement of religious leaders and surveys using mystery clients to evaluate service delivery, their shared outcomes of the activities conducted in their respective countries, Challenges and some lessons learned. presenters were Charles Siwela (Youth Engage, Zimbabwe), Naima Zubeir (Shakirina Youth, Mombasa Kenya), Gloria Moses (Kenya PITCH Project) and Kelvin Makura (Zimbabwe PITCH Project).

Generally these projects target Adolescents Girls and Young Women with inclusion of KP (LGBTI and Sex Workers for the PITCH project). The common lessons learned, that AGYW needs to be involved in the formulation of policy at national level but also there is a need of understanding the diversity within young people such as KP and others.

## Inspirational Talks



Lucy Wanjiku Njenga (Positive Young Women, Kenya), Uwase Nadege (Youth Rep on GF Communities Delegation) and Sibulele Sibaca were the ones who gave out the talk. Sibulele Sibaca from South Africa shared her story how she had lost her parents at a tender age due to AIDS disease and at the time she was unaware of the cause of her parents' illness, and eventually found out when she heard people gossiping about her father "They said he had died of AIDS. "I was devastated." She said! In South Africa, the community's response to her tragedy made a devastating situation even worse for Sibulele and her brother. "I'd always been skinny, and my mother battled to get me to eat. But when my parents died, rumors spread that I was also HIV-positive. I hated the way I looked and had a very poor self-

image." Determined not to be another victim, Sibulele has channeled her experience into a passion to de-stigmatise HIV. Soon after finishing school, Sibulele became a peer educator and motivator for HIV prevention and awareness. Today, she's a young woman on a mission to keep the next generation HIV free. Two years ago, she founded the Sibulele Sibaca Foundation, which empowers orphaned and vulnerable girls across South Africa. Tackling issues related to gender, self-esteem and empowerment, Sibulele has spoken at multiple high-level platforms, addressing the late President Mandela and the leaders of the G8 among others. Sibulele's authenticity, courage and contagious passion have made her a trusted voice for her generation.



Madam Lucy Wanjiku shared on how they struggled until they manage to get a sit on their Country Coordinating Mechanism, she said it is not easy but it can be done and it's really worth it once achieved!

She encouraged AGYW to fight for their rights to know what belongs to them and fight for it and for them to win they need to work together as a team and not as an individual. She also suggested that for meeting like this it's better for the youth meeting to start instead of it being at the last day as they wish other stakeholders to hear their voice and discuss on how AGYW issues can be solved.

Nadege Uwase didn't have so many things to say but insisted on what other speakers said and encouraged AGYW to fight for their rights and to engage on different forums and to look for the space so that their voices can be heard. She requested GF to think on having the Her Voice Fund in Rwanda and also expand in other countries, sometimes data provided by the countries doesn't speak the reality on what is happening to the grassroots.



### **Planning Session: A roadmap for action towards the meaningful engagement of AGYW constituencies in health policies and programs**

This session focused on designing country specific road map to 2018/19. Discussions centred on upcoming policies and programs relevant to the health of the youth and how they can be engaged in the processes. All participants shared their views AGYW were encouraged to reach out to CRG-TA, to coordinate with CSO CCM representatives in order to get more information on CCM meetings and how the young people can engage in those meetings, Utilize the CSO's Mentors to know more about Global Fund processes and programs, to be involved in National strategic plans development and mid-term reviews, to get in touch with various ministries like for health, gender and youth (National processes), to be involved in Global fund request, proposal writing, Grants making and Grants implementation and Monitoring. They also suggested that they need to make sure that AGYW have space in the CCM and their inputs should be valued not only to have a space but to build their capacity so that their inputs can be incorporated and considered during decision making processes. There is a need to create Adolescent Sexual Health Forums for AGYW to engage, to map out youth led organization and create linkages with Her Voice Fund Ambassadors. To use their social media platforms to spread the information about the fund so that AGYW at their specific countries to have access and benefit from the fund.

## Closing

The 3-day conference came to a successful end, with a vote of thanks given by Miss Esenam of Curious Minds, Ghana. She said the three day meeting was very productive, she argued everyone in that meeting to share the experiences and lessons learned from the three days meeting with other youth back home in their respective countries.

Miss Yvonne thanked all the participants for their brilliant ideas and sharing experience, best approaches on how to ensure AGYW have an opportunity to participate in Global Fund processes and national processes. She thanked partners like International AIDS Alliance, Aidsfund and CRG Global fund and SAT the implementing partners for the endless support they have been providing to ensure their project is a success. She also urged AGYW Ambassadors to keep in touch with EANNASO /SAT for further support and how they can stimulate more demand for AGYW to access her voice Fund Grant.



## NOTES



# ANNEX 1 : AGYW AGENDA

## AGYW MEETING AGENDA

Day 1: 25<sup>th</sup> April 2018 – Morning session: AGYW groups will participate in the morning session of the Regional Platform meeting, in order to have a broader understanding of the Global Fund, its key policies and priority areas, as well as the importance of having civil society involved in the processes, towards a better impact.

TIME	SESSION	SPEAKERS	SESSION CHAIR
13:15 – 13:30	<b>Introduction and icebreaking exercise</b>	n/a	Yvonne, EANNASO Uliane Appolinario, TGF
13:30 – 14:30	<b>Panel 1: Engaging AGYW groups in program and policy design towards a more effective HIV/AIDS response</b> <ul style="list-style-type: none"> <li>» The Global Fund strategy to reduce incidence of HIV/AIDS among AGYW in 13 HIV high burden countries.</li> <li>» Bringing AGYW groups to the center of the discussion: Why meaningful engagement is important to a human-centered approach to health?</li> </ul>	<b>Heather Doyle,</b> The Global Fund  <b>Uliane Appolinario,</b> The Global Fund	Yvonne Kahimbura, EANNASO
14:15 – 15:00	<b>Panel 2: Her Voice Fund: Overcoming barriers to participation, contributing to program quality</b> <ul style="list-style-type: none"> <li>» What is the Fund?</li> <li>» Who is eligible?</li> <li>» How to apply?</li> <li>» Website presentation</li> </ul>	<b>Glory Chagama,</b> Hervoicefund  <b>Gertrude Dendere-Chibwe,</b> SAT	Lucy Wanjiku Njenga
15:00 – 15:45	<b>Panel 3: Building leadership: Introduction and induction of AGYW Ambassadors to Her Voice Fund</b> <ul style="list-style-type: none"> <li>» Roles and expectations: What does it mean to be an Ambassador?</li> <li>» Opportunities for learning</li> <li>» Group work: Country Grouping to identify activities for AGWY to engage in at country level and what activities ambassadors can support.</li> </ul>	<b>Shakira Chonara,</b> SAT	Uwase Nadege Youth Rep on Communities
15:45 – 16:15	<b>Group exercise:</b> Visioning AGYW Ambassador's role in their countries	<b>Uliane Appolinario,</b> The Global Fund	
16:15 – 16:30	Coffee break		
16:30 - 17:00	Report back from exercise and Q&A		

Day 2: 26<sup>th</sup> of April 2018 – Implementation and oversight: skills, tools and resources for meaningful engagement

TIME	SESSION	SPEAKERS	SESSION CHAIR
8:00 – 8:30	<b>Registration</b>		
8:30 – 8:50	<b>Recap of Day 1</b> <ul style="list-style-type: none"> <li>» Help participants integrate key learnings from Day 1 and introduce day 2</li> </ul>	<b>Kataisee Richardson</b>	
8:50 – 9:20	<b>Session 1. Lessons learned from TA provision in the region.</b> <ul style="list-style-type: none"> <li>» Presentation on TA needs assessment study in Anglophone Africa</li> <li>» Exploration of TA experiences among civil society and outlining of key gaps</li> </ul> <p>To provide participants with an understanding of experiences and lessons learned from TA provision across the region</p>	<b>Olive Mumba, EANNASO</b>  <b>Donald Tobaiwa (ZAN and TIMS II)</b>	Zwanini Shabalala (Swaziland)
9:20-10:40	<b>Session 2. How are technical partners resourcing civil society and community groups to support gender and human rights responsive policies?</b> <p>Presentations from TA providers</p> <ul style="list-style-type: none"> <li>» Key areas and countries of focus</li> <li>» Process and timelines</li> <li>» How global technical partners are resourcing and engaging civil society and community groups in their structures towards the formulation of gender and human rights responsive policies and programs</li> </ul> <p>To provide participants with an overview of the different types of TA available and highlight the process for obtaining TA</p>	<b>Gemma Oberth (Global Fund CRG TA)</b>  <b>Revanta Dharmarajah (Alliance)</b>  <b>Dr. Owen Kaluwa (WHO)</b>  <b>Victor Bampoe (UNAIDS)</b>  <b>Ann Ithubi (Aidspan)</b>  <b>Caoimhe Smyth (Stop TB Partnership)</b>	Zwanini Shabalala (Swaziland)
10:40- 11:15	<b>Session 3. Articulating our TA needs</b> <ul style="list-style-type: none"> <li>» TA implementation scenarios</li> </ul> <p>Participants will be provided with TA scenarios, helping to identify and articulate technical assistance needs</p>	<b>Small groups by table</b>	Yvonne Kahimbura
11:15-11:30	Tea break		

Day 2: 26<sup>th</sup> of April 2018 – Implementation and oversight: skills, tools and resources for meaningful engagement

TIME	SESSION	SPEAKERS	SESSION CHAIR
11:30-12:45	<b>Session 4. Honing our skills: Mock TA request development</b> Participants will build their capacity to design technical assistance requests	Small groups by table  Report Back	Kataisee Richardson
12:15-13:15	Lunch		
13:45-14:30	<b>Session 5. Sustainability planning and domestic resources.</b> » Sustainability of Global Fund grants in the region » Counterpart financing and engagement in domestic resource mobilization processes  Participants will have a better understanding of sustainability planning in the region and discuss strategies to encourage additional domestic investments.  *The region has 5 countries that have been prioritized for sustainability and transition planning.	<b>Nana Gleeson</b> <b>Botswana (Transition Planning for Malaria)</b>  <b>Olayide Akaani</b> <b>Nigeria (counterpart financing)</b>  <b>Linda Mafu</b> <b>(Global Fund) DRM efforts in the GF</b>	Tendayi Westerhof (Zimbabwe)
14:30-14:45	Tea Break		
14:45-15:15	<b>Session 6. Know your global representatives.</b> How to engage with NGO and Community Delegations to the Global Fund Board and other global platforms and civil society engagement plan  Participants will have a better understanding of how to engage with NGO/community delegations to the Global Fund Board and other global platform representatives	<b>Abdulai Sessay</b> <b>Abubakar (Communities Delegation)</b>  <b>Austin Obiefuma</b> <b>(SToP TB) (Union)</b>  <b>Rosemary Mburu</b>	Kataisee Richardson
15:15-15:45	<b>Session 7. Keeping an eye on the CCMs</b> » Recap of key outcomes of CCM meeting  Participants will have an understanding of key outcomes from the CCM meeting on 23-24 April steps and next steps	<b>Rhoda Lewa</b>	
15:45-16:45	<b>Session 8. What next?</b> Plenary discussion around what platform should do to support civil society and community engagement in this allocation period.  Needs assessment survey  Participants will have the opportunity to provide specific input to inform the Regional Platform's to civil society and community groups during grant implementation and monitoring.	<b>Kataisee Richardson</b>	Kataisee Richardson
16:45-17:00	Concluding Remarks, Next Steps, Vote of thanks and Closing	<b>Olive Mumba, Magauta Ngoetjane, Her Excellency Mrs. Samira Bawumia</b>	



## Day 3: 27<sup>th</sup> April 2018 – AGYW Meeting

TIME	SESSION	SPEAKERS	SESSION CHAIR
8:30 - 8:40	<b>Introductions and agenda/objective setting</b>	<b>Yvonne Kahimbura, EANNASO</b>	Shakira Choonara, SAT
8:40 - 9:00	<b>Opening Remarks and keynote address</b>	<b>Olive Mumba ED (EANNASO)</b> <b>Brenda Youth Advocates Ghana</b> <b>Her ladyship wife of the Asante King H.E Lady Julia</b>	
9:00 - 9:45	<b>Panel 1: Adolescent health, HIV/AIDS and SRHR in Anglophone African Countries:</b> Trends, opportunities and challenges for improving the health of youth.	<b>UNAIDS representatives from Ghana (Angela Trenton- Mbonde)</b> <b>Q&amp;A (all)</b>	
9:40 – 10:40	<b>Panel 2. Strategizing for meaningful engagement</b> » Improve access to technical assistance via the CRG-SI TA program » Sharing READY Best Practice and advocacy tools/messaging: increasing the visibility and voice of young people to ensure greater accountability of decision and policy makers to the SRHR needs of AGYW.	<b>Uliane Appolinario, Strategic Initiative, The Global Fund</b> <b>Lubna Bhayani, International HIV/AIDS Alliance</b> <b>Patricia Humura Peer to Peer Uganda (IPs AIDS Alliance)</b> <b>Ntombifuthi Shongwe – Swaziland Network of Young Positives (IPs AIDS Alliance)</b> <b>Q&amp;A (all)</b>	Gertrude Dendere-Chibwe, SAT
10:45 -11:00	Tea break		
11:00- 12:00	<b>Panel 3. Experiences sharing: Successes, best practice and challenges for AGYW constituencies in engaging in relevant country processes</b> » Implementing HER Voice Fund towards increased participation of youth in Global Fund processes: the case of Zimbabwe, Kenya » Sharing PITCH project Best Practice: Success, challenges and lessons learnt, case study of Kenya and Zimbabwe	<b>Beneficiaries of Her Voice Fund</b> » <b>Charles Siwela (Youth Engage Zimbabwe)</b> » <b>Nima Zubeir (Shakirina youth Mombasa Kenya)</b> <b>Aidsfonds IPs</b> » <b>Gloriah Moses Kenya PITCH project</b> » <b>Kelvin Makura Zimbabwe PITCH Project</b>	Glory Chagama
12:30 - 13:30	Lunch break		

## Day 3: 27<sup>th</sup> April 2018 – AGYW Meeting

TIME	SESSION	SPEAKERS	SESSION CHAIR
13.30- 14:30	<p><b>Inspirational Talks:</b> Young women leaders at the centre of the HIV Response: Challenges and opportunities</p> <p><b>Panel 4: Sharing new ideas and setting the agenda:</b> What are the opportunities for meaningful engagement of AGYW in national processes supported or linked by the Global Fund?</p>	<p>Sibulele Sibaca Global Fund-HER Campaign Champion, South Africa</p> <p>Uliane Appolinario, The Global Fund</p> <p>Lucy Wanjiku Njenga, Positive Young Women, Kenya</p> <p>Uwase Nadege Youth Rep on Communities delegation</p> <p>Q&amp;A (all)</p>	Shakira Choonara, SAT
14:30 -16:00	<p><b>Planning session: A roadmap for action towards the meaningful engagement of AGYW constituencies in health policies and programs</b></p> <ul style="list-style-type: none"> <li>» Designing a country specific roadmap to 2018/2019 – what are upcoming policy and program processes that are relevant to the health of the youth and how they can be engaged in the processes</li> <li>» Plenary presentations and discussions</li> <li>» Way forward and agreed actions</li> </ul>	<p>Shakira Choonara, SAT</p> <p>Yvonne Kahimbura</p> <p>All participants to present on agreed actions</p>	Gertrude Dendere- Chibwe, SAT
16:00 – 16:30	<p>Concluding remarks and way forward</p> <p>Vote of thanks &amp; closing</p>	<p>GF Representative</p> <p>Shakira Choonara - SAT</p> <p>Nooiliet Kabanyana - EANNASO</p> <p>Lubna Bhayani - AIDS Alliance</p> <p>Voice of a Young person</p> <p>Cecelia Senoo - HFFG Ghana</p> <p>Her ladyship wife of the Asante H.E Lady Julia</p>	Yvonne Kahimbura and Naa Ashiley , EANNASO

## ANNEX 2 : THE AGYW LIST OF PARTICIPANTS

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## NOTES



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