



ACCESS, EFFECTIVENESS AND INNOVATION IN THE PROVISION OF TECHNICAL ASSISTANCE TO CIVIL SOCIETY WITHIN THE FRAMEWORK OF THE GLOBAL FUND GRANT IN EL SALVADOR

EXECUTIVE SUMMARY



Regional Platform
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Support, Coordination and Communication



Submitted by:

Alfredo Mejía D.
Studies Coordinator
LAC Platform

Juan José Cabrera Quezada
Consultant
(El Salvador)

INTRODUCTION

The Regional Technical Assistance Center for Latin America and the Caribbean (LAC) is a program from the Peruvian Organization VIA LIBRE, in partnership with the International HIV / AIDS Alliance (UK), which provides technical assistance to civil society organizations and communities in the region since 2008 and has among its objectives to improve knowledge on this subject.

In 2016, the Global Fund approved the "Sustainability, Transitions and Co-financing Policy", which states that countries that have experienced economic growth over the last decade can progressively move from external donor health funding to self-funded systems. Many countries in the region are initiating this process, requiring support and provision of technical assistance as a key strategy.

In this context, the present study aimed to evaluate the civil society organizations and communities' access, effectiveness and innovation in technical assistance delivery and capacity building within the framework of the Global Fund to Fight HIV and Tuberculosis³, between 2014 and 2016, in three Latin America and the Caribbean countries, namely, Bolivia, El Salvador and the Dominican Republic. This document describes the main findings of the study implemented in El Salvador in the response to HIV and TB.

METHODOLOGY

The study was descriptive, exploratory and retrospective, collecting and analyzing mainly qualitative information. The technical assistance analyzed was delimited by that provided by the Global Fund itself, the main recipients of grants, the sub-recipients and other strategic partners of the Global Fund in the country.

Three instruments were designed - a questionnaire, a semi-structured interview and a

³Malaria was excluded from the study because it is in the pre-eradication phase in El Salvador

focal group – to collect data from primary sources. Among the secondary sources, official sources or published documents were consulted. The response to the questionnaire was very poor, therefore the methodology was reinforced mainly through interviews. The requisite ethical principles were observed in the social research.

The information was collected between November 1 and December 16, 2016, during which 15 interviews were conducted with civil society organizations or key actors in the response to HIV and Tuberculosis, 11 of which work in the HIV context and 4 in Tuberculosis; in addition, a focus group was held with the participation of 2 Sub-Recipient organizations for HIV funding and 4 questionnaires were received from organizations on HIV.

Based on the main categories of analysis, a matrix was built for the reorganization of information, and the categorization and identification of accessible, effective and innovative technical assistance experiences. In addition, triangulation was used for the data obtained from primary and secondary sources consulted in order to have a higher explanatory level and to improve the validation of results.

Among the outstanding difficulties found during the data gathering process were that not all of the identified actors participated, that completed questionnaires were not returned, and that some participants expressed difficulty in filling these questionnaires out.

RESULTS

Thirteen (13) cases of technical assistance were identified in the case of HIV, which could be divided into two broad categories: one aimed at administrative and management strengthening for sub-recipient organizations (financial training, accounting and use of programs such as the Comprehensive System of Project Management and the delivery of the accounting management software for organizations), and those aimed at strengthening the preventive approach or the knowledge management component with target populations (Men who have Sex with Men, Female Sex Workers and Transgender Women), more specifically, training in combined prevention strategy, pre and post HIV testing counseling and drug dependence care. See table summarizing

mapping of identified technical assistance experiences.

Regarding the financial capacities for the implementation of technical assistance strategies in the HIV component, the Global Fund grant has allocated 10% of the funds to the strengthening of CSOs; taking in consideration that the amount approved to be implemented between 2014 and 2016 is \$ 13,910,754, the maximum investment in technical assistance for CSOs would be approximately of \$ 1,391,074.

In the case of Tuberculosis, the technical assistance included the strengthening of organizations and communities during the design of the National Multisectoral Strategic Plan (NMSP) and the development of the community strategy prioritized in 21 municipalities. With regards to funding of civil society strengthening strategies by the Ministry of Health - Tuberculosis program, this represents 50% of the funds of the Global Fund's project, aimed at communities. It is worth noting that health personnel are included in this category.

When analyzing the strategies referred to during the study by the Tuberculosis program, many of them did not comply with the parameters established as technical assistance, and were therefore excluded, as was the case of the purchase of motorcycles and clothing for health workers.

	Institution delivering TA	Institution benefitting from TA	Name of Experience Summary of TA Experience	Areas of TA received	Beneficiary Populations	Funding Source	Period
1.	Plan International	Sub-recipients	Strengthening of the basic set of procedures, regulations and guidelines for the development of the grant to sub-recipient organizations in HIV.	Administrative and financial management	MSM, FSW and TW	Global Fund grant	June 2013 – December 2016
2.	Plan International	Sub-recipients	Provision and use of the SIGPRO Comprehensive Project Management System to Sub-recipients of the HIV project.	Administrative management, monitoring and evaluation	MSM, FSW and TW	Global Fund grant	June 2013 – December 2016
3.	PASMO	Sub-recipients	Training for the implementation of the Combined HIV Prevention strategy.	Knowledge management	MSM, FSW and TW	Global Fund grant	June 2013 – December 2016
4.	Plan International	Sub-recipients	Training and skills development for the sustainability of organizations working with HIV.	Self-sustainability	MSM, FSW and TW organizations	Global Fund grant and Plan International	2015
5.	Plan International , RedTrasex, RedLacTrans , Human Rights Ombudsman, UNDP	Sub-recipients	Endorse the creation of favorable legal frameworks for the recognition of human rights in female sex workers and trans women populations, within the framework of the Global Fund grant for HIV.	Advocacy	FSW and TW Sub-recipients.	Global Fund	Continued from this grant.

	Institution delivering TA	Institution benefitting from TA	Name of Experience Summary of TA Experience	Areas of TA received	Beneficiary Populations	Funding Source	Period
6.	Plan International , Contracted ADEPRO RedTraSex	ASPIDH, Entre Amigos, Visión Propositiva, FUNDASIDA, REDSAL CONCAVIS and Orquídeas del Mar	Assistance to elaborate the institutional strategic plan and the acquisition of legal status for CSOs working in HIV.	Strategic plan and legal status	MSM, FSW and TW	Global Fund grant	2014
7.	Plan International	FUNDASIDA, ASPIDH, Visión Propositiva and REDSAL	Strengthening of the accounting system for organizations implementing the HIV project funded by the Global Fund.	Accounting Management	MSM, FSW, TW and PLHIV.	Global Fund	2014
8.	Plan International	Sub-recipients	Training on protection policy and gender issues by Plan International for organizations working on HIV.	Gender, Human Rights and Security	MSM, FSW, TW and PLHIV.	Global Fund and Plan International	2015-2016
9.	Plan International	Sub-recipients	Strengthening CSOs for the creation of multisectoral networks aimed to including the communities' protection issue in the agenda of local key actors as part of the response to HIV.	Advocacy	MSM, FSW, TW and PLHIV.	Global Fund and Plan International	Continued 2014-2016

	Institution delivering TA	Institution benefitting from TA	Name of Experience Summary of TA Experience	Areas of TA received	Beneficiary Populations	Funding Source	Period
10.	RedTraSex	Orquídeas del Mar	Strengthening of human rights for an organization working on the response to HIV with Female Sex Workers within the framework of the Latin American regional project REDTRASEX	Varied	Female Sex Workers	Global Fund	Continued 2014-2016
11.	CCM	CCM	Other technical assistance experiences reported by CCM	Varies	MSM, FSW, TW and PLHIV.	CCM	Continued 2014-2016
12.	CCM PASCA Global Fund	CCM and the PENM editing team	Strengthening of CSOs to include Human Rights perspectives in the TB NMSP.	Human Rights	Community affected by tuberculosis	Stop-TB Global Fund PASCA	2013-2014
13.	Tuberculosis Program	21 municipalities with TB diagnostic gap	Technical assistance to implement the community and of public-private partnership strategy for the prevention and control of Tuberculosis in 21 prioritized municipalities	Tuberculosis detection and diagnosis	21 municipalities with TB diagnostic gap	Global Fund	2014-2016

Table No. 1: *Summary of the outstanding and analyzed experiences of technical assistance in El Salvador*

3.1 Access

Resources for funding Technical Assistance aimed at CSOs that are active in national responses to HIV and tuberculosis during the three years of the study came from the Global Fund, the Government of the United States - through PASCA - and, in a lesser extent, from Plan International as Principal Receiver. Most of the technical assistance activities were performed continuously during the present grant and in specific ways during certain periods.

The main Technical Assistance provider was Plan International. In addition, consultants were hired to provide support in certain strategies, such as ADPRO, which supported the Strategic Plan design for certain organizations. Other organizations such as PASCA, UNDP, El Salvador's Human Rights Ombudsman, among others, have also been involved mainly in the implementation of legal frameworks. The Latin American Network of Female Sex Workers, RedTraSex, is a regional initiative that provided assistance to the social organization Orquídeas de Mar in human rights issues and administrative management.

Of the 13 cases identified, the largest investments were made to benefit the implementation of the project funded by the Global Fund and sub-recipients; the main contributions were aimed at strengthening administrative and knowledge management in order to improve the organizations involved in the response. Principal Recipients provide ongoing technical assistance to Sub-Recipients of grants and conduct administrative and technical monitoring and evaluation with regards to the prevention strategy implementation for prioritized populations.

In the cases of HIV and Tuberculosis, there is no regulatory framework to guarantee the provision of technical assistance to civil society organizations, thus creating concern that many of them will cease to exist when the Global Fund funding is withdrawn.

In the case of Tuberculosis, the Principal and sole Recipient of Global Fund's resources is the country's Health Ministry, so there was no evidence of funding or strengthening for CSOs. In the particular case of Plan International, it is subcontracted to run the detection and diagnostic strategy at the community level by training leaders of 21 municipalities prioritized for its diagnostic gap.

For the design of the strategic TB plan, organizations were trained in the implementation of the human rights axis by PASCA and the Global Fund itself; in a second stage, a consultant was hired to support the plan developing team with resources from the Stop-TB strategy.

A gender perspective was included in most technical assistance cases, paying particular attention to considerations relating to sexual orientation and diverse gender identities. In some cases, such as training on sustainability, expectations were raised with regards to funding for the designed economic profiles that could generate sustainability in organizations, which were not funded and no organization indicated that these projects were used to guarantee their permanence in the response to HIV. Due to this, there is no evidence of the capacity to face a transition stage.

3.2 Effectiveness

The effectiveness of technical assistance interventions in El Salvador seems to be assertive because in most cases the objectives were met, while others faced difficulties. It was possible to strengthen the administrative and financial management of organizations, in addition to the monitoring and evaluation systems, and the preventive strategy to approach the most-at-risk populations.

In general, the assistance strategies for the programmatic application of local networks at the municipal level to support the most-at-risk populations generated satisfaction in organizations. The same applied to multisectoral support for advocacy regarding the approval of regulatory frameworks on sex work and gender identity, but so far these have not yet been approved by the National Legislative Assembly. RedTraSex accompanied and strengthened its partner organization in El Salvador, which has been trained to be a national reference in the approach and subject of sex work.

Monitoring and evaluation in most strategies is done on a continuous basis and has been used for the continuous improvement of the HIV project; however, there are no reports on follow-up activities for strategies such as sustainability, the design of strategic plans and the implementation of accounting software. Sustainability is an essential element of technical assistance to ensure the participation of organizations in the future; therefore, it is perceived with concern that none of the respondent organizations make use the economic profiles designed, which shows the need for an

approach based on the needs and interests of each organization in order to generate projects that are satisfactory and will safeguard the permanence of these organizations in the response.

In the case of Tuberculosis, strategies are part of the programmatic activities, and their success is guaranteed to the extent that these are evaluated by the program. However, the absence of participation by CSOs should generate in the tuberculosis program a need to encourage such participation, as well as the participation of other actors to perform social control and support the activities of this sector.

3.3 Innovation

Innovation is one of the technical assistance elements that is less frequent in the analyzed cases. However, according to the participants, the strategies that comply with a greater number of aspects defining innovation were:

- Training and skills development for the sustainability of organizations working with HIV.
- Support for the creation of favorable legal frameworks to claim for the human rights in female sex workers and transgender women populations within the framework of the Global Fund grant for HIV.
- Provision and use of the SIGPRO Comprehensive Project Management System for the HIV project sub-recipients.

These experiences were considered innovative because they were either original in their implementation in the country, or generated positive social changes, or focused on strengthening strategic capacities. For example, they generated multisectoral work and the strengthening of advocacy capacities within the legal frameworks. SIGPRO is novel because it generated a new way of implementing monitoring and evaluation and, in the case of sustainability, it was novel because it generated in participants the need for funding to ensure their response to HIV.

Conclusions

Despite the fact that Civil Society Organizations in the response to HIV have been strengthened with professionalization activities in administrative and knowledge management for the preventive approach of most-at-risk populations, they are not yet prepared to take action in the Global Fund's transitional phase because they are not self-sustainable.

Regarding **access**, there is no legislation or national regulatory framework to ensure the provision of technical assistance to organizations. Moreover, resources for technical assistance depend almost exclusively on the Global Fund grant and the main agent providing technical assistance is the Principal Recipient, Plan International.

The technical assistance considered **effective** has been the perception of satisfaction and usefulness by the participants in the studies, and because it has generated the involvement of organizations, as in the design of advocacy plans within legal frameworks, sustainability and improved monitoring and evaluation through the use of SIGPRO.

There are specific cases of organizations receiving assistance from regional networks, as is the case of RedTraSex for female sex workers.

Civil society organizations in the response to HIV have not transcend in the knowledge management process, which impedes them to produce information or report it to third parties and use this information in decision-making.

There is evident lack of participation of civil society organizations and communities in the response to TB.

In general, there are few innovative experiences; those experiences considered as such, applied new and practical approaches to strengthen organizations in administrative management, advocacy and sustainability. As a result, changes were generated, increasing the use of technology in organizations, a bill of law and an advocacy plan with multisectoral support and business profiles.