



CARICOM - PANCAP/CVC/COIN Multi-Country Regional Global Fund Grant Phase 2

Joint Regional Dialogue



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CARICOM Secretariat
14 September 2022**

Presentation Outline

- **Overview of CARICOM-PANCAP/CVC/COIN Multi-Country GF Phase 2 Grant**
- **Objectives and Participating Agencies**
- **Strategic Priority Areas aligned to Objectives, Outcomes and Outputs**
- **Grant Management**
- **Development of the Funding Request and the Grant Making Process**
- **Planned Activities**

Overview

- **Funding Amount:** US \$6.5 million + **C19RM unspent/reprogrammed funds**
- **Country:** Multi-country Caribbean CARICOM-PANCAP/CVC/COIN
(10- Beneficiary Countries)
- **Program Title:** Sustainability of services for Key Populations in
the Caribbean
- **Implementation Dates:** 1 October 2022 – 30 September 2025
(inclusive)
- **Principal Recipient:** CARICOM Secretariat

THE REGIONAL RESPONSE TO HIV

Caribbean Community Strategic Plan CCS/RI/MS

Caribbean Corporation in Health IV –
CARPHA/PAHO/CCS

Caribbean Regional Strategic
Framework (CRSF) for HIV – PANCAP

PANCAP/CVC/COIN Regional Project
– PANCAP/CVC/COIN



Implementation Arrangement

PR
CARICOM
Secretariat

SRs

PCU
CVC
COIN

SSRs

CARPHA
and
PAHO

CMLF and CRN+

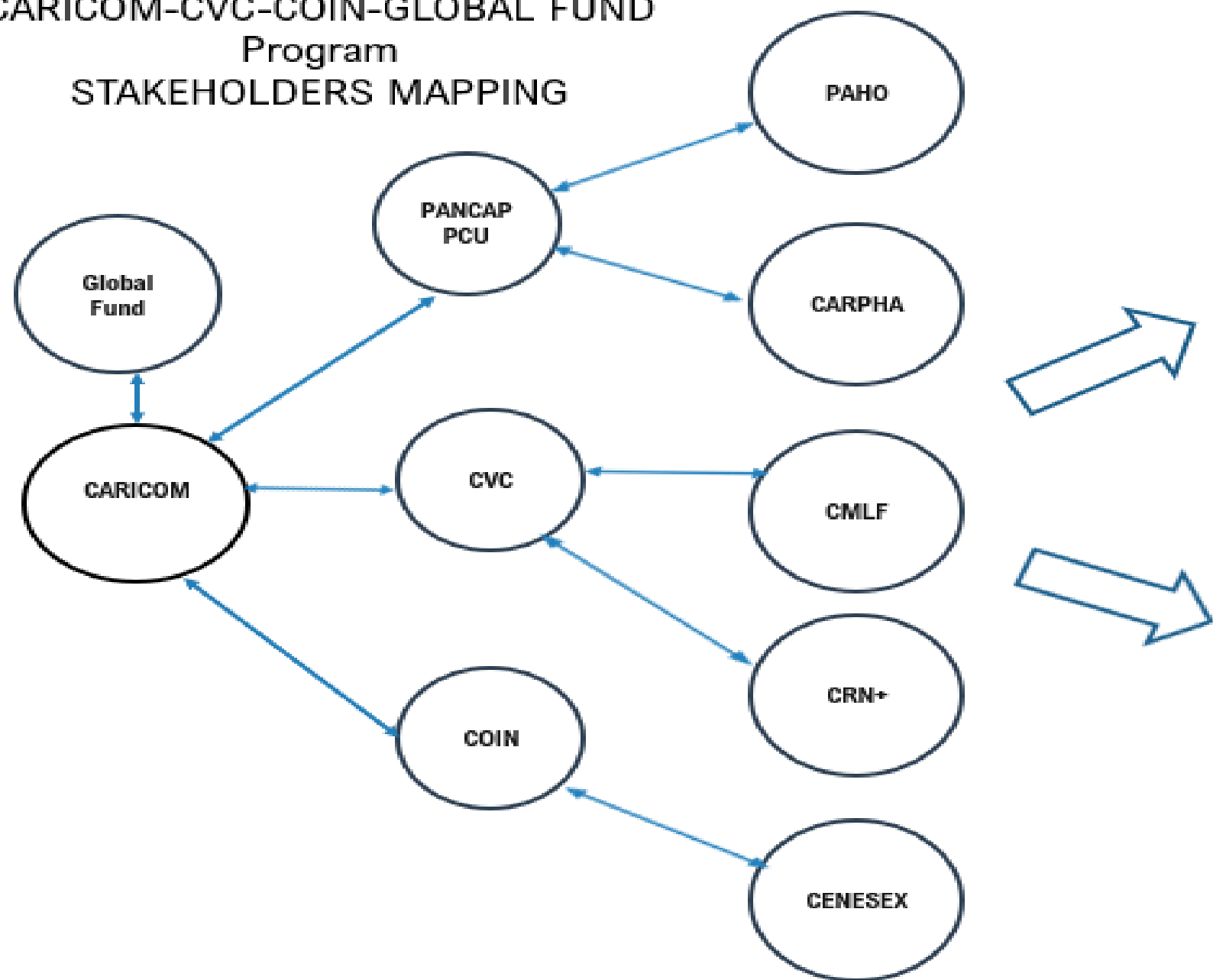
CENESEX

Overview

Sub-Recipients	Sub-Sub-Recipients
PCU (PANCAP Coordinating Unit)	PAHO (PAN American Health Organisation) and CARPHA (Caribbean Public Health Agency)
CVC (Caribbean Vulnerable Communities Coalition)	CMLF (Caribbean Med Labs Foundation) and CRN+ (Caribbean Regional Network of People Living with HIV and AIDS)
COIN (Centro de Orientación e Investigación Integral)	CENESEX (Centro Nacional de Educación Sexual)

10 Beneficiary Countries: Antigua and Barbuda, Barbados, Belize, Cuba, Dominican Republic, Guyana, Haiti, Jamaica, Suriname and Trinidad and Tobago

CARICOM-CVC-COIN-GLOBAL FUND
Program
STAKEHOLDERS MAPPING



**National HIV/AIDS
Institutions/Programs/Polycymaker**

- Antigua and Barbuda
- Barbados
- Belize
- Cuba
- Dominican Republic
- Guyana
- Haiti
- Jamaica
- Suriname
- Trinidad and Tobago



Key Populations

- Men who have sex with Men
- Sex workers
- Transgender personas
- People living with HIV



Objectives

To provide Sustainable Prevention, Treatment and Care Services for Key Populations in the Caribbean Region:

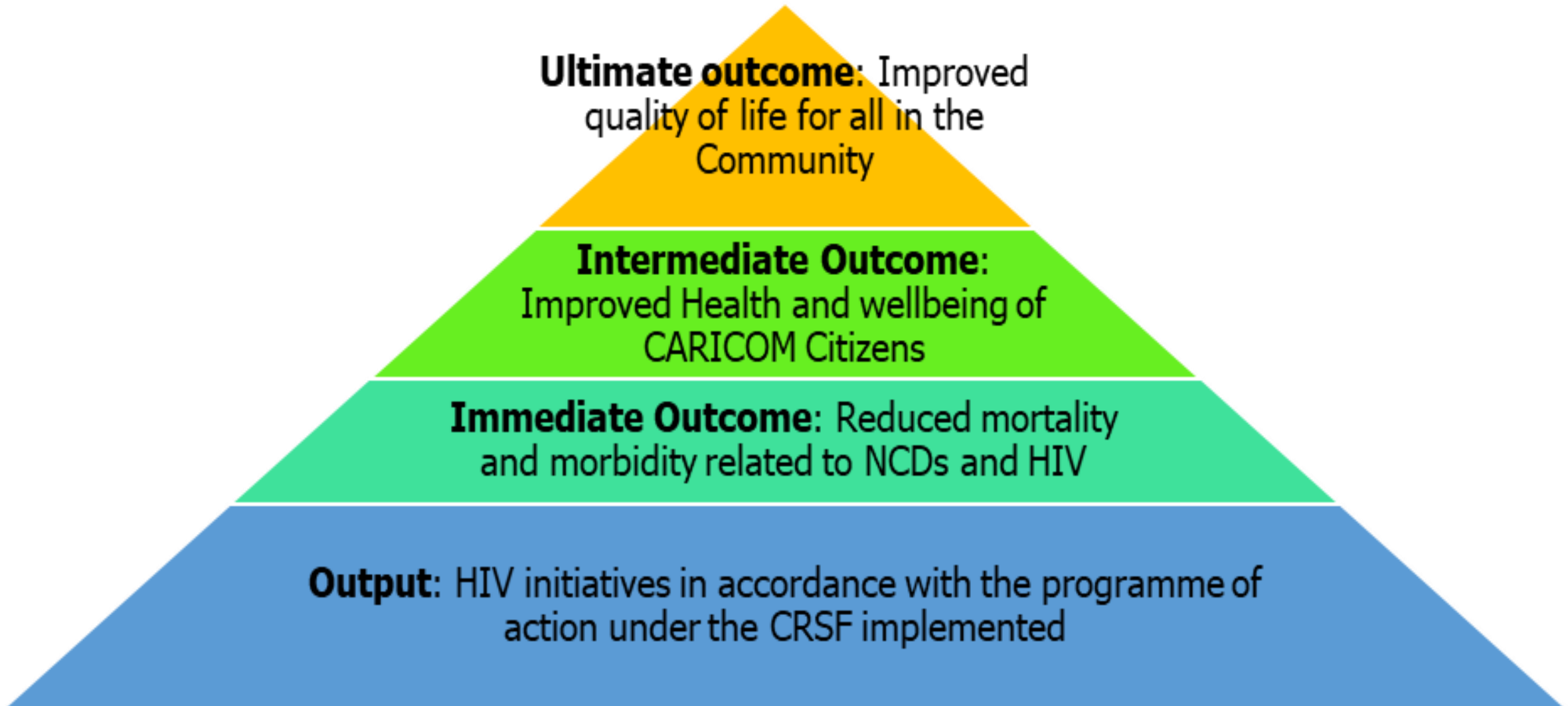
1. To increase domestic resources for effective key population programming

2. To mobilise resources for key population organisations

3. To reduce structural barriers to key population services including stigma and discrimination and gender-based violence

4. To improve knowledge generation and use of strategic information on key populations for decision-making and advocacy by communities and other stakeholders

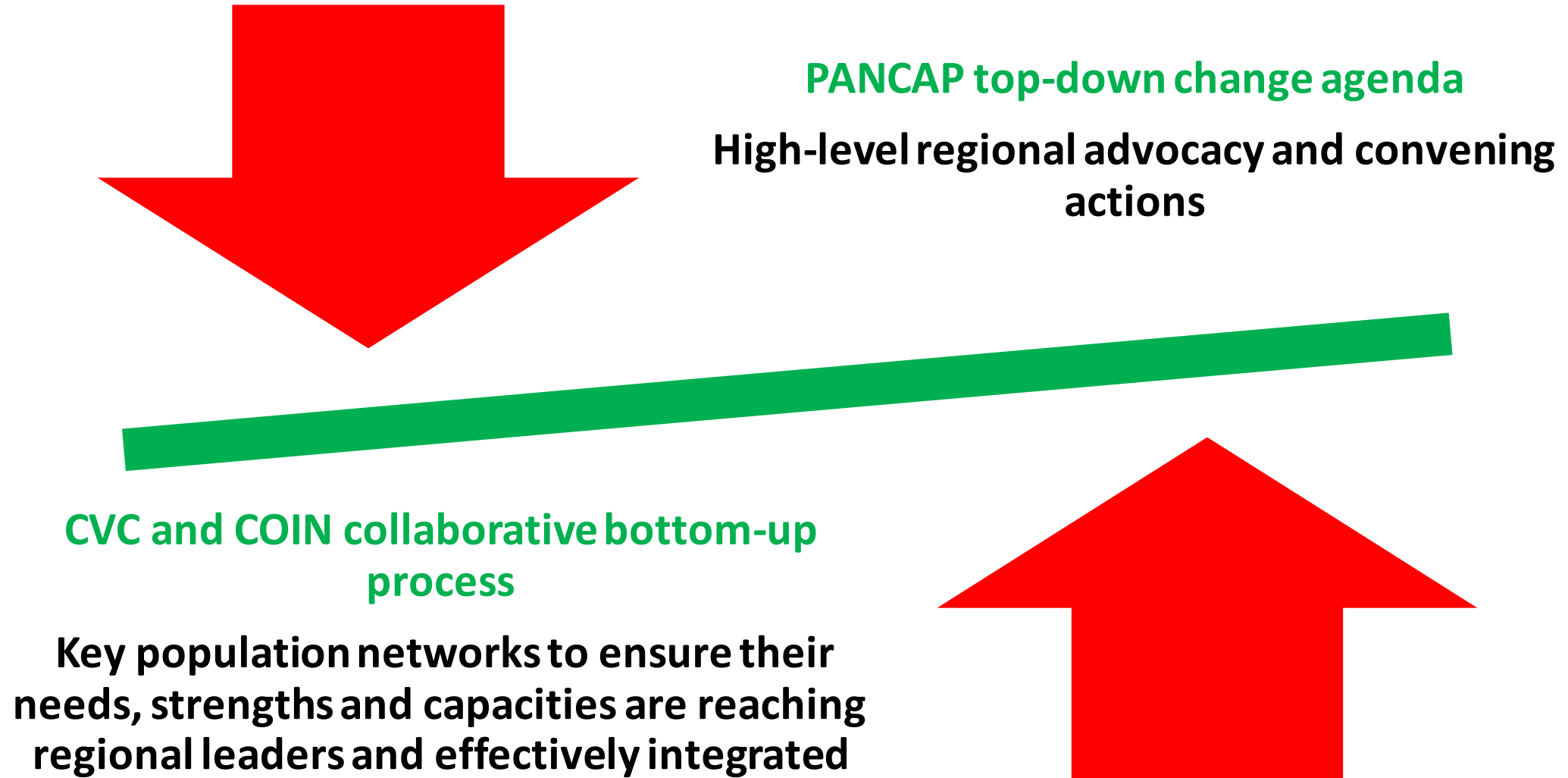
HIV Response within the Caribbean Community Strategic Plan



PANCAP-CVC-COIN MULTI-COUNTRY GRANT LOGIC MODEL

ULTIMATE OUTCOME (1)									
Reduced incidence of HIV in the Caribbean									
INTERMDIATE LEVEL RESULTS (3)									
Increased coverage of essential and differentiated services for KPs and PLHIV including PrEP, HIVST, Index Partner Testing and MMD					Reduced incidence of human rights and gender-based - violations		Strengthened regional Governance of the HIV response		
IMMEDIATE OUTCOME LEVEL RESULTS (7)									
Increased capacity CBO/CSO to deliver essential community-based differentiated services	Improved strategic information to support the implementation of differentiated services for KP and PLHIV	Strengthened commitment for the scale-up and expansion of differentiated services	Increased funding for the delivery of community-based KP differentiated services and HIV Programmes		Improved capacity of Project countries to address gender and human rights violations		Strengthened Regional, multisectoral HIV response governance mechanism	Improved evidence-informed national and regional HIV and KP programmes	
OUTPUT LEVEL RESULTS (10)									
CBO/CSO-targeted development plan	Capacity implemented to support the expansion of differentiated services for KP	Regional Study on HIV and KP funding gap estimates developed to scale-up KP programs and PLHIV differentiated services.	Regional advocacy plans for the scale up of essential and differentiated services developed and implemented	CSO/CBO targeted capacity building strategies implemented to increase funding for KP programing	CBO/CSO-led Advocacy plans developed/ revised and implemented to support increased domestic funding for HIV and KP differentiated services	Evidence-informed National Action plans developed and implemented to support law reform, Gender and human rights and policy changes	Regional Capacity development plan developed and implemented to support Gender and human rights-related law reform and policy changes	Regional, multisectoral governance mechanism reviewed and operationalize d to address the sustainability of the HIV response	Monitoring mechanisms (national/regional/community led) mechanisms implemented to support evidence- informed HIV & KP Programmes

Conceptual Framework to Achieve the Regional Goal Complementarity /Collaboration



Complementary Strategies

Built around five complementary strategies:

1. Strengthen **capacity of national programmes to provide high-quality, appropriate services that reach KPs**, including through strengthened partnerships by KPs and also by strengthening capacity to deliver such services without stigma or discrimination.
2. Strengthen **capacity of CSOs to implement sustainable programmes**, to engage as equal partners, to mobilize resources and manage contractual arrangements.
3. Promote/facilitate **joint implementation (government and civil society partnerships)** of innovative approaches to prevention and treatment services for KPs, including **self-testing, PrEP, PEP, index partner testing and other differentiated models of care** depending on the country context.
4. **High-level advocacy for enabling environment** to promote human rights and domestic resources for HIV programs.
5. **CSO and community leadership in national level advocacy**, monitoring of quality of service provision.



Consolidating Gains of Key priorities to strengthen the Sustainability of the Regional response to HIV

Strategic Approaches

1. Scale up essential and differentiated services for KPs - Tailored strategies to promote scaling up of PrEP, Self-testing, index partner testing and other evidence-based interventions.

2. Addressing human rights and gender related barriers - Build on efforts: GBV, S&D, including Stigma Index studies, and support implementation of regional actions and advocacy plans.

3. Resource mobilization for essential services for key populations - Strategies include social contracting and targeted technical and financial capacity building to access resources from the public and private sectors

4. Improved HIV response governance and use of strategic information - Leverage collaboration between CS networks and PANCAP to strengthen high level and grassroots advocacy efforts, governance, oversight, and use of strategic information.



Consolidating Gains of Key priorities to strengthen the Sustainability of the Regional response to HIV

Activities

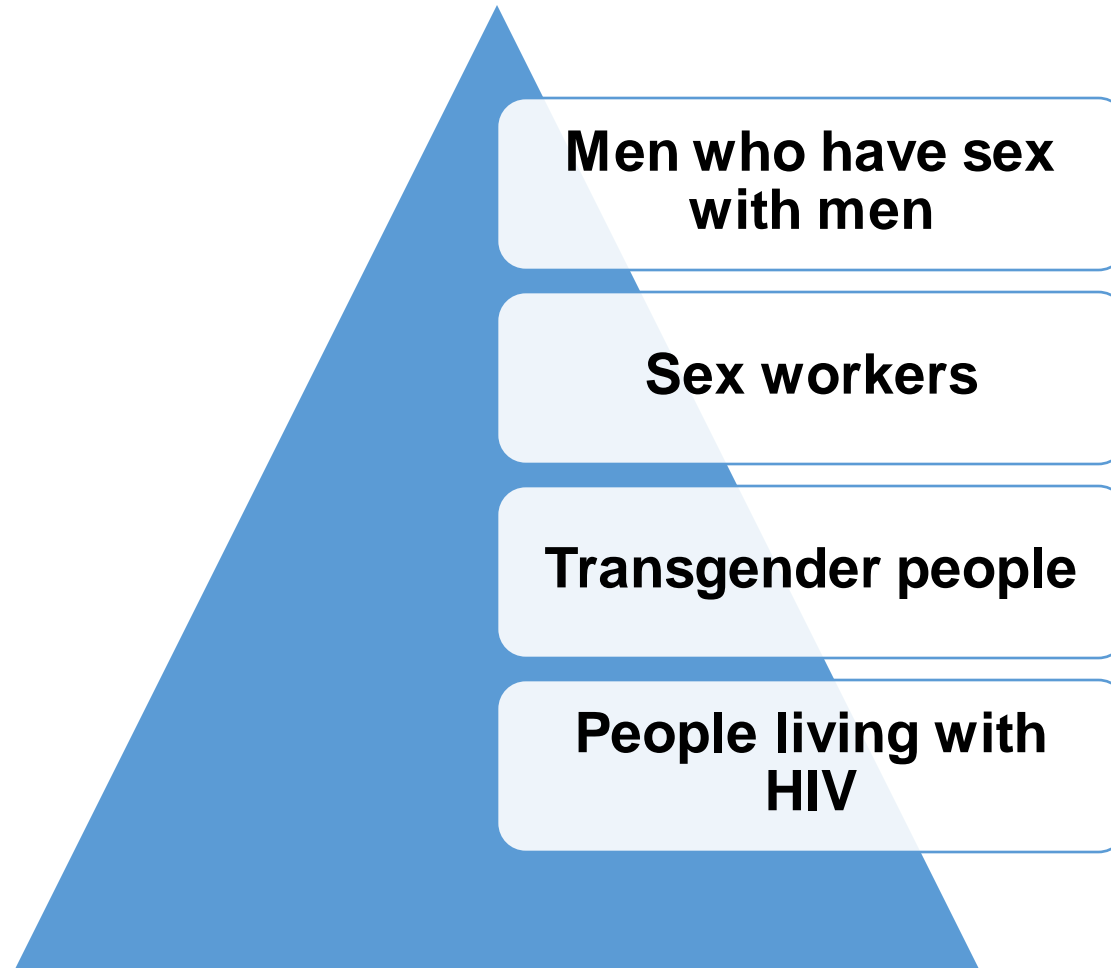
1. Develop policies and implement action plans for policy reform to address human rights and gender related barriers and reduce gaps in KP and HIV programming.

2. Develop and implement community-led advocacy plans for resource mobilization and expansion of differentiated HIV care and KP programming.

3. Capacity building for CBOs and CSOs to support resource mobilization, expansion of differentiate HIV care and KP programming and address human rights and gender-related barriers.

4. Promote availability and use of strategic information for advocacy for KP and HIV programming.

Target Groups/ Direct Beneficiaries



In-direct Beneficiaries



Strategic Priority Areas Alignment to the Objectives, Outcomes and Outputs

Objective 1: Increase Domestic Resources for effective KP programming

Strategic Priority 2: Resource mobilization to implement services for key populations and people living with HIV



Intermediate Outcome 2.1: Increased coverage of essential and differentiated services for KPs and PLHIV including PrEP, HIVST, Index Partner Testing and MMD



Immediate 2.1.1: Increased funding for the delivery of community-based KP differentiated services and HIV Programmes



Output 2.1.1.1: CSO/CBO targeted capacity building strategies implemented to increase funding for KP programming

Objective 1: Increase Domestic Resources for effective KP programming

Key Activities

- **Increase CSOs' sustainability through Social Contracting**
- **Capacity strengthening and targeted TA for CSO and KP networks in resource mobilization**
- **Increase Private Sector support for sustaining the HIV response and resourcing programming for KP**
- **Targeted TA to improve CSOs' capacity to access funding by strengthening their governance structures and internal controls**

Implementing Countries:

- **Cuba**
- **Dominican Republic**
- **Guyana**
- **Haiti**
- **Belize**
- **Jamaica**
- **Trinidad & Tobago**
- **Suriname**

Objective 2: Mobilize resources for KP organizations

Strategic Priority 1: Regional scale up of essential and differentiated services for KPs and PLHIV, including delivery through community-based organizations



Intermediate Outcome 1.1: Increased coverage of essential and differentiated services for KPs and PLHIV including PrEP, HIVST, Index Partner Testing and MMD



Immediate 1.1.1: Increased capacity CBOs/CSOs to deliver essential community-based differentiated services



Output 1.1.1.1: CBOs/CSOs-targeted Capacity development plan implemented to support the expansion of differentiated services for KP



Output 1.2.1.1: Regional advocacy plans for the scale up of essential and differentiated services developed and implemented

Objective 2: Mobilize resources for KP Organizations

Key Activities

- Build capacity of NAP and HCW on service Delivery for KPs
- Develop and implement Advocacy campaigns to support Differentiated Service Delivery i.e. MMD policy, PrEP, HIVST, Aging with HIV
- Build the capacity of selected countries strengthened and expanded to advance the implementation of high impact innovations for HIV prevention through training and horizontal cooperation with specialized partners
- Advocate for and support action to use domestic public financing to better integrate CSOs into national HIV Programming
- Build the Capacity of selected countries to expand and advance the implementation of high impact innovations for HIV prevention through training and horizontal cooperation with specialized partners

Implementing Countries

- Antigua and Barbuda
- Barbados
- Belize
- Cuba
- Dominican Republic
- Guyana
- Haiti
- Jamaica
- Suriname
- Trinidad and Tobago

Objective 3: Reduce barriers to KP services, including GBV and S&D

Strategic Priority 3: Reducing human rights and gender-related barriers



Intermediate Outcome 3.1: Reducing human rights and gender-related barriers



Immediate 3.1.1: Improved capacity of Project countries to address gender and human rights violations



Output 3.1.1.1: Evidence-informed National Action Plans (to include advocacy) developed and implemented to support law reform, Gender and human rights and policy changes



Output 3.1.1.2: Regional Capacity development plan developed and implemented to support Gender and human rights-related law reform and policy changes

Objective 3: Reduce barriers to KP services, including GBV and S&D

Key Activities

- Addressing the specifics of GBV and HR as it relates to KPs
- Reduction of Structural Barriers for Access by Key Populations to Services through integrated Service Delivery and Quality Improvement
- Conduct high-level advocacy with regional governments to implement zero-tolerance approach to GBV
- Community-led advocacy
- Conduct high-level advocacy with regional governments to implement zero-tolerance approach to GBV
- Develop Model Policy for broad anti-discrimination legislation and/or constitutional reform to promote rights-based, gender-responsive national HIV responses
- Conduct capacity building activities for NGOs to engage in the development and implementation of human rights and HIV policies and programmes (Training in basics of advocacy to CSOs and KPs)

Implementing Countries

- Belize
- Cuba
- Dominican Republic
- Guyana
- Haiti
- Jamaica
- Suriname
- Trinidad and Tobago

Objective 4: Improve knowledge generation and use of strategic information about KPs for decision-making and advocacy by communities and other stakeholders.

Strategic Priority 4: Improved regional HIV response governance and use of strategic information for advocacy



Intermediate Outcome 4.1: Strengthened regional Governance of the HIV response



Immediate 4.1.1: Strengthened Regional, multi-sectoral HIV response governance mechanism



Output 4.1.1.1: Regional, multi-sectoral governance mechanism reviewed and operationalized to address the sustainability of the HIV response



Output 4.2.1.1: Monitoring mechanisms (national/regional/community led) mechanisms implemented to support evidence- informed HIV & KP Programmes

Objective 4: Improve knowledge generation and use of strategic information about KPs for decision-making and advocacy by communities and other stakeholders.

Key Activities

- Strengthen regional governance mechanisms to promote data dissemination, information sharing and improve communication to support programme and policy decisions
- Improve the generation, availability, and use of strategic information on key populations to support evidence-informed decisions
- Facilitate knowledge sharing and learning of successful CSOs experiences and models of resources mobilization and partnership development through online learning to build the capacity of CSOs that work with key populations to forge partnerships and mobilize their own resources.
- Undertake community led monitoring interventions to support quality improvement in KP programming.

Implementing Countries

- Antigua and Barbuda
- Barbados
- Belize
- Cuba
- Dominican Republic
- Guyana
- Haiti
- Jamaica
- Suriname
- Trinidad and Tobago



OVERALL GRANT MANAGEMENT

THE GOLDEN TRIANGLE



Mechanisms to Support Routine Project Monitoring

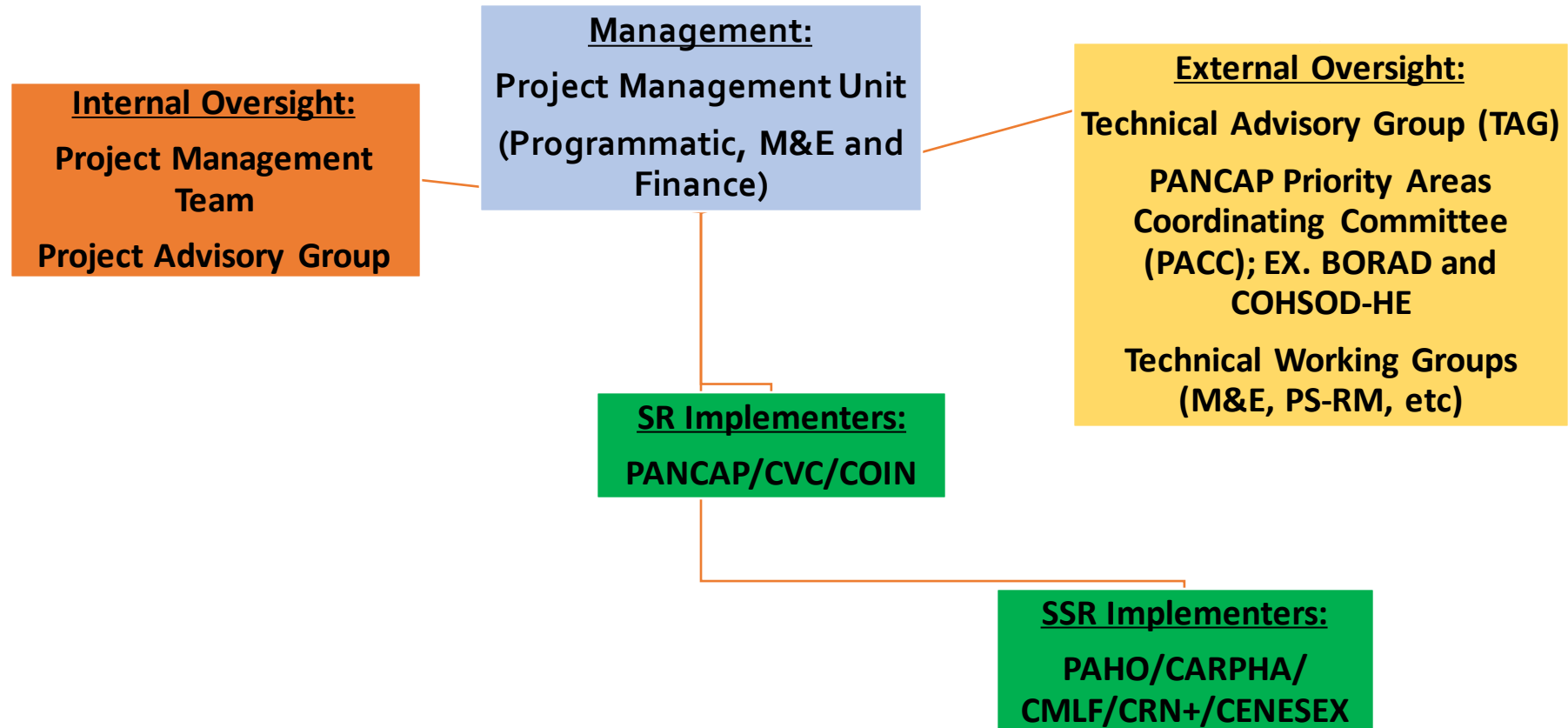
- **Quarterly Assessments** of project performance – Financial and Programmatic reports – **20 days concluding the quarter**;
- **Quarterly Monitoring visits/meetings and Validation Exercises** to validate activities undertaken during the period under review – **within 20 days after the submission of the programmatic and financial reports from SRs/SSRs**
- **Targeted virtual and in-person spot checks and participation in project activities** –
Based on engagement of stakeholders, scope of activity and expected results



GOVERNANCE STRUCTURE



Internal and External Coordination and Partnership





DEVELOPMENT OF THE FUNDING REQUEST AND GRANT MAKING PROCESS

Key Dates – Future Funding: Program Continuation Process

November 2021 to February 2022 - Regional dialogue, including consultations with the Global Fund and partners

1st March 2022 - Funding Request due

Early May 2022 – notification from GAC if request can proceed to final grant

July 2022 – GAC approval of grant

August 2022 – Board approval and signing of implementation ready grants

August 2022 – Signing of the Grant Agreement between the GF and CCS

Ongoing work: Final Year of Current grant (October 2021 – September 2022) - Implementation of HIV and C19RM activities in the current grant.

Phase 2 - Process:

Dates	Actions
9 February 2022	Addressing the Priorities as per GF's Portfolio Analysis Resource Allocation Consolidation of Workplan Consolidation of Budgets Draft Performance Framework
15 February 2022	Submit draft of funding request to the GF, UNAIDS and PAHO for feedback
25 February 2022	Endorsements from the TAG and CCMs (Chair and CS rep.)
1 March 2022	Submit completed funding proposal request, consolidated detailed budget and supporting documents, etc.



PR's WORK PROGRAMME



PROGRAM CONTINUATION – Phase 2

ACTIVITIES	TIMELINES
Roadmap/Workplan	15 th December 2021
Logic Model	20 th January 2022
Development of the Workplan and Budget by the SRs/SSRs	2 nd February 2022 (Workplans) 4 th February 2022 (Budgets)
Preparation of the draft PR Budget – Guidelines/Framework for the Preparation, Review and Approval	4 th February 2022 PAG meets on the 8 th February.
Interventions with SRs/SSRs - Regional Dialogue with key partners, CCMs, NAPs and MOH officials, TAG, etc.	Ongoing (November 2021 – February 2022)
Endorsements from the TAG, CCMs (Chairs and CS reps.), MOH Officials	25 th February 2022



PR's WORK PROGRAMME



PROGRAM CONTINUATION – Phase 2

ACTIVITIES	TIMELINES/2022
Special Meeting of the PACC to discuss the Program Continuation	4 February
Submission of Draft Funding Request, Workplan and Budget to GF, UNAIDS and PAHO	15 February
Consultation with all stakeholders, re: draft funding request	20 February
Submission of Final Funding Request to GF	1 March
GAC Approval and Recommendations	3 May
Revised Workplan and Budget <ol style="list-style-type: none"> 1. Consolidate the following areas of investment to reduce barriers to access, including: <ol style="list-style-type: none"> a. implementation of the Stigma Index 2.0 and use of results; b. mapping of the gender-based violence (“GBV”) response system in each country, and based on mapping, focusing advocacy on closing the gaps in the regional response to GBV; and c. Clarify objectives/results of training, sensitization, and advocacy activities. 2. Include investments in community-led monitoring. 	3 June
Performance Framework – WP/Budget including - Stigma Index Study	28 June

Planned Interventions for the CARICOM-PANCAP/CVC/COIN Project 2022 - 2023

PLANNED ACTIVITIES	2021 – 2023 DATES
Start of Year 3	1 st October 2021
End of the 3-year Grant Cycle	30 th September 2022
Annual Audit Begins	October 2022 – February 2023
LFA Validation and Spot Checks (Year 3)	November 2022 – March 2023
PUDR Submission	November 2022
Monitoring Year 3 WPTMs	October 2021 – September 2022
Regional Scale – Up of Prevention Services Consultancy	June – September 2022
End of Term Evaluation Consultancy	May – September 2022
Program Continuation – fully signed Grant Agreement	30 August 2022
Start of Programme Continuation – Phase 2 Implementation	1 st October 2022

THANK YOU!

Questions, Feedback?

