



ACCESS, EFFICIENCY AND INNOVATION IN THE PROVISION OF TECHNICAL ASSISTANCE TO CIVIL SOCIETY WITHIN THE FRAMEWORK OF THE GLOBAL FUND GRANT TO THE DOMINICAN REPUBLIC

EXECUTIVE SUMMARY



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1. Introduction

This study on access, efficiency and innovation in the provision of technical assistance associated with the implementation of Global Fund grants to end AIDS, Tuberculosis and Malaria, aimed at civil society organizations and communities in the Dominican Republic over the period 2014-2016, was commissioned by the Latin America and Caribbean Regional Support, Coordination and Communications Platform for Civil Society and Communities (LAC Platform). The study, which has been carried out with funding from the Global Fund's Special Initiative on Communities, Rights and Gender, arose out of the need to prepare for the Fund's transition, as outlined in its Sustainability, Transition and Co-financing Policy. In order to help civil society meet this challenge and achieve greater sustainability, the LAC Platform wanted to draw from experiences of technical assistance in the region over recent years in order to improve practice, thereby contributing more effectively to the strengthening of non-governmental actors, and key populations and affected communities, in particular.

This is a descriptive study providing an overview of technical assistance interventions that have taken place in the national context, which adopts an exploratory and retrospective approach. The methodology used to collect the information was largely qualitative. Similar studies were conducted in Bolivia and El Salvador in order to be able to carry out a comparative analysis.

From its inception until 2016, the Global Fund has invested more than US \$ 160 million in the Dominican Republic. Although the country no longer receives funds for malaria, HIV and tuberculosis remain major concerns. With an HIV prevalence of 0.8% , the epidemic is considered to be stable, although concentrated in key populations (men who have sex with men, sex workers, transgender women, drug users, vulnerable women, women victims of violence, residents in rural communities called 'bateyes' and Haitian migrants). The incidence of tuberculosis is 60 X 100,000 inhabitants, and mainly affects inhabitants of neglected urban areas, persons deprived of their liberty and Haitian migrants. To help the country cope with the two diseases, the Dominican Republic will receive two grants from the Global Fund between 2016-2018: one for HIV, amounting USD \$ 17.6 million; the other, worth USD \$ 8.4 million, is for tuberculosis.

This study was conducted in the Dominican Republic with the support of the Coalition ONGSIDA, a coordinating body of organizations working on HIV and AIDS in the country, which has been involved with organizing and advocacy activities since 1997 and which brings together some 50 member organizations.

2. Methodology

To start with, a framework was designed to define and operationalize the concepts of access, efficiency, and innovation, which were used in developing the tools and in data analysis. In particular, it is worth noting the definition for technical assistance adopted in the course of this study: Activities to support civil society organizations and communities affected by the diseases, aimed at increasing their knowledge, skills and capacities in order to ensure improved impact through their full participation in the national responses.

Following a desk review of secondary sources, the actors in the response were mapped so as to define the universe of the study. Semi-structured interviews and focus groups were conducted with a sample of the organizations, using the tools developed for this purpose. They were selected according to criteria of convenience, referencing, representativeness for the purposes of the study, accessibility and availability. Although the use of a questionnaire addressed to the beneficiaries of technical assistance was initially intended to be used, it was abandoned for lack of responses. Appropriate ethical principles for social research were observed at all times.

Data collection took place from 10 November – 16 December, 2016, during which time

17 interviews and 2 focus groups were conducted with various actors in the national HIV and tuberculosis responses. The information was then recorded, transcribed into text and codified. A matrix was constructed using the main categories of analysis, so as to be able to organize and categorize the information, and to identify experiences of technical assistance that were accessible, efficient and innovative. In addition, data obtained from primary and secondary sources was triangulated in order improve the validity of the results.

Among the difficulties encountered, it is worth noting that participation in the data collection methods was less than expected. Nor was it possible to arrange meetings with representatives of the Country Coordination Mechanism (CCM) and USAID, among others. Moreover, it was problematic defining technical assistance activities within broader, ongoing projects. Furthermore, there was limited access to a number of secondary sources, particularly regarding the costs of the actions.

	Institution delivering TA	Institutions benefiting from TA	Name of the Experience Summary of the TA Experience	AT areas received	Beneficiary Populations	Funding Source	Period
1.	GMS	CCM	CCM Strengthening and Eligibility	Governance	Affected Communities	PEPFAR/ USAID	Nov. 2013 – Jan 2014
2.	GMS	CCM; PRs	Dashboards	Oversight	PRs, SRs, CCM	PEPFAR	Aug 2015
3.	GMS	CONAVIH SIDA/IDCP	Capacity assessment for SR selection	Use of the organizational assessment tool	IDCP	USAID	2014
	IDCP/ CONAVIH SIDA	Sub-Recipients	General support from PRs to SRs	Various	Various	Global Fund	Specific (continuous) ³ 2014-2016
	CONAVIH SIDA	SRs	Training plan	Management strengthening adapted to each institution	Sub-Recipients in general	Global Fund (RCC)	To end 2014
4.	APC	Various	Various	Various	Various	PEPFAR/ USAID	Specific (continuous) Oct. 2014 –Sept. 2016
5.	Socios en Salud (Partners in Health)	PNCT, ASODENAT	Strategies to mobilize Civil Society	Organizational assessment and strengthening plan for ASODENAT	People affected by TB	Not available	2015
	ADOPLAFAM & others	ASODENAT	Strengthening of ASODENAT	Various	People affected by TB	Global Fund	Continuous June 2016 - Dec. 2018
6.	COIN	CBOs	Observatorio de los Derechos Humanos de los Grupos Vulnerables (Observatory of Human Rights for Vulnerable Groups)	Human rights documentation; advocacy	Gay men, MSM, transgender, Female Sex Workers, PLHIV	Global Fund; UNDP	2013-2016 ⁴
7.	RedTraSex	MODEMU	On-line training of trainers course for sex workers	Various	Female Sex Workers	Global Fund	Twice a week for 2 years

Table No. 1: *Summary of main experiences of Technical Assistance analyzed in the Dominican Republic*

3. Results

Taking into account experiences that benefited civil society organizations (CSOs) or affected communities directly, 7 cases of technical assistance to civil society in the Dominican Republic were identified over the course of the 3 years of the study (see Table 1, above). In accordance with the categories of analysis, the following results were obtained:

3.1 Access

Resources for funding technical assistance to civil society organizations active in the national HIV and tuberculosis responses during the three years of the study came from the Global Fund, the Government of the United States and, on a very small scale, some foreign NGOs. It appears that the availability of new resources for technical assistance is decreasing. Most technical assistance activities took place in 2014-15. By the end of 2016, only the accompaniment provided by the PRs and the Asociación Dominicana de Planificación Familiar (Dominican Family Planning Association, ADOPLAFAM by its Spanish acronym), which supports ASODENAT, were still on-going.

Technical assistance providers were international, regional and national. Grant Management Solutions (GMS), a project that provides technical assistance to countries receiving Global Fund grants, played a key role, being responsible for 3 of the interventions. The Red Latinoamericana de Mujeres Trabajadoras Sexuales (Latin-American Network of Female Sex Workers, RedTraSex) is a regional initiative which ran a project strengthening partner organizations, as was the case for the Movimiento de Mujeres Unidas (United Women's Movement, MODEMU by its Spanish acronym), its Dominican partner organization. Other examples were carried out mainly through national sources, with additional contributions provided by Socios en Salud (Partners in Health) from Peru and collaborators with the Advancing Partners and Communities (APC) project.

Of the 7 cases identified, major investments were made for the benefit of the CCM and the Principal Recipients. APC made contributions aimed at strengthening community-based organizations (CBOs), but it closed earlier than had been planned. PRs provide ongoing technical assistance to Sub-Recipients of GF grants, but in a fairly informal way. Other technical support was smaller in scale.

In the case of the tuberculosis project, the situation is somewhat different. For the first time, under the current GF grant, there is an explicit and systematic process aimed at strengthening the Asociación Dominicana de Enfermos y Afectados por la Tuberculosis (Dominican Association of People with and Affected by Tuberculosis, ASODENAT). Since 2016, resources have been invested in an intensive technical assistance program aimed at structuring the organization and helping it become sustainable. However, three years appear insufficient to achieve sustainable results, and the Association is working in isolation.

In most cases, a gender perspective has been included, with particular attention paid to considerations relating to diverse sexual orientations and gender identities. Social and cultural aspects were taken into account to a certain extent, for example, by adapting materials for migrants. However, some participants have a perception that technical support is not developed according to each organization's specific circumstances. They talk of 'ready-made' or 'pre-packaged' products that are not adapted to their needs. Although capacity assessments were carried out, these offer a diagnosis rather than support a process of institutional strengthening. In some cases, organizations have gone through several capacity assessments, conducted by different projects, without receiving the resources needed to meet the gaps identified, thus raising expectations that are left unfulfilled.

3.2 Effectiveness

The effectiveness of technical assistance interventions in the Dominican Republic appears to be mixed. Some cases reached their objectives, while others encountered difficulties. Among other things, monitoring and evaluation systems were strengthened, and quality management processes for CSOs were introduced. The introduction of dashboards and technical support for PRs in the selection of the Sub-Recipients were successful, contributing to the good management of the grants assigned to civil society by the Global Fund and the project's performance. Support to the CCM for its restructuring also met its objectives, although the CCM is inactive due to internal factors, limiting the intended participation of civil society.

Overall, except for those initiatives offering systematic accompaniment (for example, RedTraSex and the PRs' day-to-day activities), follow-up to the assistance provided has been lacking, thereby jeopardizing its sustainability. Such was the case, for instance, with the actions begun by APC, when the program closed without any advance warning

to participant organizations. Likewise, no evaluations have been identified that allow the effectiveness of most interventions to be measured. In the case of GMS, the program underwent an evaluation at a global level, but which does not reflect national-level results, whilst evaluations of projects led by CVC/COIN and RedTraSex are not yet available.

3.3 Innovation

In terms of innovation, there is generally a lack of innovative experiences. However, the on-line course organized by RedTraSex, in which leaders of MODEMU participated, stands out for demonstrating several novel features. Among them are its ability to reach a target group of female sex workers, who otherwise receive little support from other sources, empowering them and enabling them to play the role of trainers. Through the use of audiovisual materials and with the support of assigned tutors, they studied a range of modules which included both individual capacities (HIV prevention, human rights) as well as organizational development (governance, communication, monitoring, advocacy). It thereby demonstrates that, with adequate support, people with low educational attainment can make use of courses using new communication technologies, which have the potential to broaden the reach of interventions and reduce their costs.

Two other innovative experiences were identified, the first of which was the introduction of dashboards for project oversight. Through technical assistance from GMS, the Dominican Republic was the first country to fully implement a computerized tool to assess the performance of projects managed by Principal Recipients (PR). Its user-friendly design has facilitated timely decision-making. It has since been extended to several other countries, and a significant degree of ownership of the tool is evident at PR level, which suggest that it will continue to be used in the future, especially as it has been proposed that it could be adapted for uses beyond Global Fund grants.

The second experience relates to the training on documentation of cases of human rights violations, conducted by the Observatorio de los Derechos Humanos para Grupos Vulnerabilizados (Observatory of Human Rights for Vulnerable Groups, ODHGV by its Spanish acronym). Several organizations of people living with HIV, transgender women, sex workers and marginalized youth participated in training sessions, which have given them the skills to document cases and upload them to the system created for this purpose. The data is used to bring visibility to these issues, to take some cases to

court, or for advocacy campaigns. Thus, new knowledge was developed on a topic that is highly relevant for the groups belonging to the Observatory, seemingly at a low cost.

For these reasons, the study concludes that current funding policies are leaving behind some civil society actors, particularly, associations of key populations and affected communities. A strategy aimed at strengthening them should be made a priority for international and national actors in order to ensure that these groups are able to continue to participate in national responses at the end of the transition period initiated by the Global Fund.

4. Conclusions

In view of the imminent process of its transitioning out of the Dominican Republic and the Latin America region, the Global Fund recommends an assessment of the country's readiness for the transition that should form the basis of a strategy and work plan to meet this goal. The Fund is willing to accompany countries through these transition processes. So as to be able to continue contributing towards national responses, all components of civil society should be prepared for changes in the funding model. Sustainability implies not only financial autonomy, but also the development of institutional capacities that will allow them to face the new environment, and technical assistance is one of the approaches that will allow civil society to prepare itself in this way.

This study demonstrates that the technical assistance landscape in the Dominican Republic is complex, with some examples of large-scale technical cooperation, but also many more modest contributions. All civil society participants acknowledge that, overall, they have benefited from the technical assistance received over the three years under review, but several important limitations remain. In the case of HIV particularly, technical assistance has been restricted to immediate technical needs associated with project implementation and reaching programmatic indicators, leaving aside a perspective of sustainability and maintenance of the response by organizations, beyond Global Fund implementation.

In general, technical cooperation has not touched on more strategic aspects, even though these elements are essential for organizations' sustainability. What is more, assistance was largely directed at management bodies and not at the operational or community level, leaving aside several associations of key populations and affected

communities. The requirement to ensure proper use of resources in the country's HIV program should not obscure the need to strengthen these organizations.

There are very professional and experienced NGOs in the country that are able to organize themselves to ensure their sustainability. A group of service-providers is taking action to achieve this goal, an initiative that deserves all the necessary support to achieve success. However, the option of selling services is not feasible for CBOs, which are oriented towards advocacy and the defense of their rights. They play an indispensable role because of their ability to represent key populations and affected people in decision-making spaces. In this way, they contribute towards improving the effectiveness of interventions, a role that is recognized both by the Global Fund and the national authorities. However, these organizations need institutional support, to which they have little access. International and national actors should make a strategy for their strengthening a priority.

From the examples discussed in the context of this study, it is possible to identify elements of good practice that can be used to build a technical assistance program consistent with this need. Among other factors, the active participation of beneficiaries of interventions in the formulation and implementation of strengthening processes should be encouraged so as to ensure that they correspond to their needs. On the other hand, it is essential to take into account accompaniment, or some other means of follow-up, to ensure technical cooperation objectives are achieved. Finally, new communication technologies offer great potential for technical assistance models capable of reaching key populations and affected communities in greater numbers and at reduced cost.

5. Recommendations

1. Recommendations to the CCM:

- a) Prioritize assessment of the country's transition-readiness, including an assessment of the capacities and needs of NGOs and CBOs active in the national responses, involving all key populations and affected communities. Use the tools and resources from the Global Fund or other donors to provide technical assistance, as necessary.
- b) Promote ASODENAT's participation in training and in organized spaces on HIV/AIDS, which could strengthen work on TB-HIV co-infection, as it is one of the leading causes of mortality in people with HIV.

2. Recommendations to donors:

- a) Allocate resources for technical assistance dedicated to institutional strengthening for associations of key population, including the development of strategies for the diversification of resources and sustainability plans, including various options to achieve this objective.
- b) Optimize the use of new communication technologies in the planning of training and regional experience exchanges, promoting access to online courses, virtual forums in real time and other resources.
- c) Continue to support - with technical assistance, if need be - the structuring and training process of the NGO network for sub-contracting by the state and the private sector for the provision of services to key populations, including prevention services.
- d) In planning technical assistance, prioritize individualized approaches, allowing NGOs benefiting from the intervention to participate in selection of the consultants and the topics to be addressed, and ensure follow-up to any intervention.

3. Recommendations to Dominican Civil Society:

- a) Advocate with donors for the provision of funds aimed at strengthening CSOs and associations of key groups and affected populations in particular, in order to respond to the challenge of transition.
- b) Prepare for the transition phase by participating in an assessment of the country's transition-readiness and prepare an action plan based on this analysis.

¹Ministry of Public Health (2013), Demographic and Health Survey 2013

²CONAVIHSIDA (2014), Resumen Ejecutivo Plan Estratégico Nacional (PEN) para la Prevención y el Control de las ITS, VIH y SIDA 2015-2018 (Executive Summary of the National Strategic Plan (NSP) For the Prevention and Control of STIs, HIV and AIDS 2015-2018)

³Two successive donations

⁴Idem