

Funding model stakeholders

Here's a list of different stakeholders that have critical roles to play in in-country Global Fund processes.

- I Country Coordinating Mechanism (CCM): The Country Coordinating Mechanism is a body composed of representatives from different stakeholders of the three diseases, such as government agencies, private sector groups, civil society organizations, communities affected by or living with the diseases, academe, and international or multilateral development institutions.
- 2 **CCM committees:** To be effective in performing its functions, the CCM often creates executive and technical committees that support decision-making processes within the body. The Executive Committee is often composed of the Chair or Co-chairs and the Vice-Chairs, and other officers of the CCM. Technical Working Groups are thematic and/or disease-specific (for example, the Malaria TWG).
- 3 **CCM Secretariat:** The CCM is supported by a country secretariat for its day-to-day functions. The secretariat organizes and coordinates the activities of the CCM, liases with the Global Fund country team and secretariat, and keeps CCM records and grant documents, among others.
- 4 **Fund Portfolio Manager and the Country Team:** The Global Fund assigns fund portfolio managers (FPMs) to manage grant portfolios, and the FPM, with other technical staffs from the Secretariat, constitute the Country Team that works with the CCM to give guidance on the development of grant requests and on grant implementation.
- 5 Local Fund Agent: The Local Fund Agent (LFA) works with the country team to monitor and evaluate grant programmes before, during, and after implementation. They are tasked to assess principal recipients, review progress of grants, and ensure appropriate use of funds, among others.
- 6 **National Disease Programmes:** Funding requests need to be aligned with country strategies and/or investment cases on HIV, TB, and malaria, making national programmes important to engage with, as they and their attached agencies or facilities have roles in operationalizing grant interventions, gathering strategic information, costing programme activities, or raising resources to co-finance programmes.
- 7 **MOH and National AIDS Commissions**: The Ministry of Health (MOH), or in the case of HIV, the National AIDS Commissions (NAC), which often sit in the CCM as members or as part of the leadership, approve country strategies for the three diseases and are involved in developing investment cases.
- 8 International agencies: International development organizations like WHO, UNAIDS, and other bilateral donors, are part of the CCM as members and often provide technical support to country programmes.
- 9 Programme Implementers: Prior to the submission of the Concept Note, the CCM selects a principal recipient (PR) of the grant that will take the lead in implementing the grant. The PR may be a government agency or a non-government entity, and based on the implementation structure identified in the funding request, PRs engages sub-recipients (SRs) to implement specific components of the grant.



- **Civil society, community groups, & key populations:** Civil society, community groups, key population networks, including organizations that represent those affected by or living with the disease, play a prominent role under the Funding Model. They have representation within the CCM, and their meaningful participation in ongoing community dialogues is necessary to ensure robust country strategy and programmes. Note that there are also key population regional networks and regional civil society platforms like APCRG whose mandates include Global Fund-related technical assistance and information dissemination.
- **Technical Assistance Providers** Within countries, there are groups that offer technical support to ensure the effectiveness of disease programmes and/or to assist civil society, communities, and key populations in engaging in Global Fund processes or in their respective disease responses. These TA providers include the Technical Support Facility of UNAIDS, the French 5%, and USAID.