



The Anglophone Africa Civil Society and Communities CCM Shadow Report

GHANA



STRENGTHENING
AFRICA'S COUNTRY COORDINATING MECHANISMS
THROUGH EMPOWERMENT OF
MARGINALIZED COMMUNITIES

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Introduction

Effective Country Coordinating Mechanisms (CCMs) are a vital part of the Global Fund architecture at country level. CCMs are responsible for submitting requests for funding and for providing oversight during implementation. With the introduction of the Global Fund's New Funding Model (NFM) in March 2014, CCMs play an even more important central role, convene stakeholders to engage meaningfully in inclusive country dialogue, agree on funding split, and participate in the development of National Strategic Plan (NSP) discussions for the three diseases at country level. With the enhanced responsibility, the NFM also introduced more rigorous CCM assessment processes. Previously, CCMs submitted a self-assessment attached to their proposal. Now, CCM assessments are conducted by an external evaluator – either the International HIV/AIDS Alliance or Grant Management Solutions. Further, CCMs are also mandated to have a performance improvement plan to accompany their assessment, ensuring that areas of weakness are addressed in an open and transparent manner.

Problem Statement

Despite the importance of CCMs in Global Fund decision-making at country level, studies have flagged issues with CCM membership balance, poor representation and limited constituency feedback.^{1,2} Further, the recent audit report from the Office of the Inspector General (OIG) found several persistent shortcomings with CCM performance:

- 10% of the 50 countries reviewed did not have the required oversight committee;
- more than half of the countries did not have specific information on roles, timelines, and budget in their oversight plans, or they had oversight plans that were outdated;
- 62% of the CCMs were non-compliant with the requirement of seeking feedback from non-CCM members and from people living with and/or affected with the disease;
- more than half of the 45 CCMs that have oversight bodies did not adequately discuss challenges with the PRs to identify problems and explore solutions;
- 58% of the CCMs had not shared oversight reports with country stakeholders and The Global Fund Secretariat in the previous six months; and
- 26% did not share the oversight reports with relevant stakeholders in a timely manner that could have ensured well-timed remedial action.

In light of the OIG CCM Audit, and the enhanced role of CCMs in country level disease governance in the Funding Model, there is a need for a wide range of stakeholders to be empowered to demand improved CCM performance. While the move to have an external evaluator to conduct CCM Assessment & Performance Improvement Plans is an improvement, the fact that these CCM Assessment & Performance Improvement Plans are not public is an obstacle to accountability. Vested stakeholders and communities must be able to use CCM assessments and improvement plans as accountability mechanisms to demand better performance.

About the research

¹ Oberth, G. (2012). Who is Really Affecting the Global Fund Decision Making Process?: A Community Consultation Report. *AIDS Accountability International*. Cape Town, South Africa. Online at http://aidsaccountability.org/?page_id=8094

² Tucker, P. (2012). Who is really affecting the Global Fund decision making processes? A Quantitative Analysis of Country Coordinating Mechanisms (CCMs). *AIDS Accountability International*. Cape Town, South Africa. Online at http://aidsaccountability.org/?page_id=8094

AAI and EANNASO will collaborate as a technical team supporting in-country civil society to complete research and the development of 2 types of reports.

The Country CCM Shadow Reports: These reports drill down into issues at country level and assess CCM performance from the perspectives of both CCM members as well as the perspective of other stakeholders such as principal recipients and sub recipients. The report is based on the GFATM CCM Audit Progress Assessment Tool but also include various other questions that are seen to be lacking in the existing audits by Geneva. The reason why the research is considered a shadow reporting exercise is that methodologically and in terms of content we are hoping to build and improve on the methods being used by Geneva at this time. Shadow reports are used to supplement and/or provide alternative information to that which was submitted in the original reports. In this work, our aim is the same: to supplement and/or provide alternative information to that found in the original CCM audits.

The Civil Society CCM Scorecard: A comparative analysis that ranks the participating countries against each other in terms of their performance. Using the AAI Scorecard methodology, data from the Country CCM Shadow Reports is analysed and countries are graded on their performance, as a means to uncover best and worst practice, who is ahead, who is falling behind, and other similarities and differences that might make for good entry points for advocacy.

Expected Outcomes

Long term: More accountable CCMs.

Medium term: Increased transparency around CCM performance and improvement plans.

Short term: Empowered civil society and community groups who can do effective shadow reporting.

Rationale for a Civil Society CCM Scorecard and Country CCM Shadow Reports

1. The OIG CCM Audit reveals persistently poor CCM performance in a number of areas.
2. Transparency is limited, as CCM Assessment & Performance Improvement Plans are not currently made public.
3. Current CCM Assessment & Performance Improvement Plans lack questions that speak to quality of performance such as meaningful engagement, use of documentation and information, etc.
4. Civil society needs to be further engaged with the CCM Assessment & Performance Improvement Plans in order to hold stakeholders accountable.
5. Civil society watchdogs and affected communities must have the tools, knowledge and information they need to hold CCMs accountable.
6. Civil society watchdogs need to be able to measure the performance of their CCM members who represent them.

The Civil Society CCM Scorecard and Country CCM Shadow Reports will not duplicate the Global Fund supported Eligibility and Performance Assessments (EPAs). This is because whilst EPAs are consultant facilitated self-assessments of CCMs that are largely driven by the Global Fund to facilitate accountability using a top down approach; the Civil Society CCM Scorecard and Country CCM Shadow Reports will be undertaken by civil society in country, using a bottom up approach. In addition, the Civil Society CCM Scorecard and

Country CCM Shadow Reports will seek to interview both CCM members as well as implementing partners (principal recipients (PRs) and sub-recipients (SRs)) interact with CCM. The research for the Civil Society Scorecard and the Country CCM Shadow Reports will be facilitated by civil society resident in country so the exercise will both empower civil society and sustain the culture of demanding accountability from CCMs in country and can be replicated across other grant implementers.

Focus Countries

Nine countries participated in the research: Ghana, Kenya, Malawi, Nigeria, Rwanda, Swaziland, Tanzania, Uganda and Zambia.

Methodology

The technical team (AAI and EANNASO) developed a questionnaire based on the Global Fund Eligibility and Performance Assessments (EPAs) questionnaire (called the Progress Assessment Tool).

Local civil society, who do not sit on the CCM and do not receive Global Fund money, were identified to do conduct the research at country level, including data collection and analysis. We selected 3 local watchdogs in each of the 9 countries for a total of 21 local watch dogs to be trained, mentored and supported to do the research. The training also equipped civil society with skills to enable them to engage with the CCM Secretariat to plan and schedule the interviews and FGDs. Civil society conducted interviews to collect data using a mix of questionnaire interviews and focused group discussions (FGD). Comprehensive questionnaires with open ended questions and FGD guides were provided to civil society; these allowed for probing and discussions whilst collecting data.

First, the core group of respondents from the CCM for the interview and focus group discussions were drawn from a cross section of CCM members representing the respective governments, faith based, civil society, private sector, key populations, people affected by the diseases, the bi lateral and multi-lateral partners and the CCM secretariat. Civil society conducting the research were expected to undertake a minimum of eight face to face interviews and conduct one focus group discussion of not less than six CCM members.

These interviews and a FGD collectively included all of the following sectors: government, faith based, civil society, private sector, key populations, people affected by the diseases, the bi lateral and multi-lateral partners and the CCM secretariat.

Secondly, civil society also conducted a FGD of 10-12 non CCM members mainly drawn from implementing government and civil society PRs and SRs. The second FGD enabled the research to get the perspectives of non CCM members who have interacted with the CCM. Key areas of discussion included:

- How they have benefitted from the oversight function of the CCM;
- How, when and the outcomes of the oversight field visit;
- If the oversight reports and outcomes are formally shared and published through the CCM website
- Whether women and KPs are adequately represented on the CCM;
- If civil society members were elected/selected in an open and transparent manner;
- An understanding of the level of meaningful participation of KPs in CCM leadership;
- An understanding of the level of meaningful participation of KPs informal and ad hoc committees;
- The methods of soliciting KP input and then this feedback to the larger constituency;

- Conflict of Interest (Col) e.g. how grant implementers (SRs) who are also CCM members manage Col in CCM meetings etc.

One aim was to build the capacity of the local civil society watchdogs to engage with a variety of different research techniques and data gathering modalities, so the following will contribute to this objective:

1. Civil society received training on FGDs at the workshop;
2. Civil society completed hard copies of the questionnaires at country level and then also captured the data online into a survey monkey.
3. Civil society developed their own 2-3 page analysis of each of the 2 FGDs, talking about key findings (estimate 5-8 findings) and recommending strategic entry points for advocacy (estimate 3-5)
4. In addition to this, civil society wrote their own 5-8 page analysis of all of the data as they understood and interpreted it and submitted this to the technical team. This analysis formed the basis of all of the research they conducted, and informed the technical teams analysis of the data.

Sub-grants were made to each of the local watchdogs to support their implementation of the shadow reporting. The content from the country data collectors, once entered into the survey monkey tool, was analysed by AAI, presented to EANNASO and country teams at a meeting in Kigali, Rwanda in February 2017, and feedback from this meeting and from email correspondence from country teams was included to develop the final reports.

Several strategic interviews were conducted by AAI in Geneva with GFATM staff to inform the analysis.

Analysis

The Narrative Shadow Report from Ghana was submitted directly and was not vetted by the CCM.

CCM Performance

a) A transparent and inclusive concept note development process

The transparency and inclusiveness of the concept note development with the CCM Ghana had quite a mixed reaction from both non-CCM members and from CCM members. The responses show that the concept note development is consultant-driven and the selection of members to the concept note development committee is highly guided by the technical competence of representatives. Little emphasis is placed on experiential input, thus the low engagement of KAPs who are mostly not involved in the draft stage as a result of the low technical capacity of KAP representatives on the board and groups such as MSM and FSW who are excluded even from the CCM based on the legalities of their existence as a group. However, the drafts are discussed and voted on by the entire CCM. CSOs raised concerns about the low engagement of CSOs in the drafting stage with the result that their concerns are mostly ignored. The most challenging aspect is the validation of budget which mostly comes very late into the concept submission period, offering CSOs little time to properly discuss concept notes and budget. Below are highlights of some views shared by non-CCM members and CCM members.

- **Non-CCM**
 - *“The mandate of CCM is clear but they have not performed well because they use consultants to develop their concept with little consultation of the CSOs. When it comes to budgeting, CSOs are completely taken off”.*
 - *Another respondent explained CCM excluded CSOs in the final budgeting.*
- **CCM**
 - *“Give 7/10 because I see people who come to speak for people. For example commercial sex workers are not represented by CSWs”*
 - *“MSM is not represented by themselves but by WAPCAS [West Africa Project to Combat HIV/AIDS]”.*
 - *“The MSMs and CSW are not represented because they are not organised and they are not legal”.*

- *“CSOs lack opportunity to participate in budgetary preparation and priorities are not represented’.*

b) An open and transparent Principal Recipient selection process

Although the issues of Principal Recipient selection process was not part of the interview guide, and thus not thoroughly addressed by the guide used, the responses largely commented on a highly transparent process devoid of conflict of interest in the selection of PRs by CCM Ghana. Members whose organisations are vying for PRs are mostly excluded from serving on the selection board and members of the selections board are mandated to declare any conflict of interest before any business of PRs are discussed or voted on. According to the respondents, the policy guiding their selection is so strictly observed sometimes to the detriment of most qualified organisations who by virtue of the conflict of interest policy cannot take up a particular PR role. Sometimes, by virtue of the position of a member on the CCM whose organisation qualifies for PR the member decides not to take up the bid of PR to avoid any speculative conflict of interest. Some Non-CCM members however had different views on the openness of the PR selection process indicating CCM member’s organisations always have the lion’s share. Here are some views captured as presented by respondents:

- **Non-CCM**

- *“There are representatives in CCM whose organisations are implementing Global Fund projects. The representatives in CCM’s organisations have had a good growth at astonishing rate”.*
- *“When Dr X used to be a member of the oversight committee on malaria, she use to get projects”.*
- *“Mr X refused a cheque from TB for his organisation because he was then the chairman of CCM”.*

- **CCM**

- *“There is a form that members sign to declare their conflict of interest and they would be evaluated further to ensure the inclusion for the conflict of interest issues”.*
- *“There is the over use of the CI in keeping people out of decision making”*

c) Oversight planning and implementation

The oversight planning and implementation are guided by Global Fund guidelines. Guidance is usually given to CSOs on the selection procedures. CCM Ghana since 2015 reduced its membership from 74 to 25 members with two main oversight committees (malaria and TB / HIV committees). The membership is composed of CSOs, faith-based organisations, the business community, government and academia. The only KAP currently

represented are the PLHIVs and a rep from the TB affected community however, groups such as MSMs and FSWs are represented by some interested CSOs who advocate on their behalf. The selection process for oversight memberships is generally described as transparent and their activities are rated as of good quality. The oversight group generally monitors PR and SR activities through their quarterly reports and field visits. An innovation for the oversight implementation process is the introduction of the dashboard which provided timely accountability of the activities of the PRs concerning the fund usage. The various responses points to the active involvement of CSOs on the oversight planning and implementation. However the non-CCM group acknowledges the disadvantage of fragmented interests of CSOs in engaging the CCM. A few of the views shared are as follows:

- **Non-CCM Members**

- *“The representation of CSOs at CCM is very important, however CSOs have not been proactive in engaging the CCM. The CSOs are not forceful in such. Their voice is much needed in CCM’s engagement”.*
- *“CSOs are very fragmented in their representation on CCM; they usually hold individualised interests in the representation rather than the collective interest”.*

- **CCM members**

- *“The CCM Ghana membership was modelled on the structure, guidelines and directives from Global Fund”.*
- *“CCM Ghana has 25 members from CSOs, government, faith-based, business, academia etc”.*
- *“Yes the CCM Ghana has two oversight committees set up (Malaria Oversight Committee and TB/HIVAIDS Oversight Committee)”.*
- *“Yes the CCM is in my personal view doing its best in this regard. Right from the Concept Notes development and grant negotiations”*
- *“KPs are adequately represented.”*
- *“Ensures that the funds are judiciously utilised and results achieved.”*
- *“Through its oversight committees the CCM is able to monitor the activities of PR and sub-grantees”.*
- *“Reports from the oversight committees are shared for the benefit of all members.”*

- d) Membership of affected communities on the CCM**

The CCM Ghana membership for affected communities covers PLWHIV and TB. However, KPs such MSM, FSW, the adolescence groups although recognised by the CCM, they are

represented by interest groups such as WAPCAS and the likes. This is because the CCM hold the view that, groups such as MSM, FSWs are not legally recognised groups and thus cannot be admitted to the CCM following the constitution of the CCM and the legalities involved in engaging such a group. The other view that affects their inclusion is their low technical capacity of representatives from the KAPs. Many are of the view that CCM activities are quite technical and require persons of appreciable technical capacities. This they find less in affected communities, thus they believe the interest organisations are better placed to represent them. A few of the views gathered were as follows:

- “NAP+ (i.e. the National Association of persons Living with HIV) the lacks capacity to fully engage in CCM meetings”.
- “Weak CSOs participation, lack of coordination between CSOs”.
- “MSM and FSW are represented by West Africa Project to Combat HIV/AIDS (WAPCAS) because MSM do not operate as a legal entity and so advocacy groups represent them”.

e) Processes for non-government CCM member selection

The processes for non-government CCM members is defined in the governance manual. Non-government CCM members are made up of KAPs, CSOs and the private sector. The CSO constituencies seem more organised and have transparent, free and fair elections to select their representatives on the CCM.

In the case of the private sector, one cannot tell how the representative was selected and how many private sector entities have knowledge of who represents them on the CCM. In the case of the KAPs their representation is by proxy advocacy organisations who represent them. It is also not clear how the proxy organisation is selected.

In the case of the faith-based organisations, the selection is by consensus building and it is rotational. (Currently it's the Christian Council that represents them, in the next CCM it may be the Islamic Council).

f) Management of conflict of interest on CCMs

The CCM in Ghana has a conflict of interest policy that guides work. In all situations or sessions of the CCM, members are asked to declare their conflict of interest, even in the selection of members for the oversight committees.

Question 2: EPA Tool & Process

In the original Geneva Eligibility and Performance Assessment process, the views of non-CCM members were not sought in the tool and process. The original process was a self-assessment and also dwelt basically on face-to-face interviews with the CCM secretariat and leadership without the views of other members of the CCM. KAPs, CSOs and other representatives of CCM views were not factored into the assessment. The tool, beyond finding out whether the policy exists, does not probe whether they were practically being implemented or the status of implementation.

Question 3: PIP Tool and Process

The PIP is a useful tool for monitoring the development of plans. It ensures the documentation of the plans that guide the CCM processes ranging from oversight, membership, structures, conflict of interest, engagement, to communication. It also provides the opportunity for verifying the activities and assessing the gaps that need to be addressed.

The major deficit is it is a tool that could best monitor the situation only at the secretarial level since it requires clear filling of documentations of existing plans. Except for the communication plan of which there is a follow-up on its implementation, none of the other items provide means for verifying its implementation. The tool is very easy to use, provided the responding officers have the needed documentation of plans.

Question 4: CCM Scorecard & Shadow Report Tool & Process

The tool, though it follows a logical trend, is elaborate, lengthy and going through takes time, so some respondents eventually lost interest. Some virtually had to rush us through because we had gone way beyond the time we stipulated in the consent forms.

The number of questions / responses been sought cannot be effectively exhausted within 45 minutes as suggested for face-to-face engagements.

Some of the questions are repetitive. Some follow up / probing questions were, with all respect, unnecessary in our view. For example questions number 30 - 32 and few others of

the face-to-face questionnaire. Even when the respondent has no idea about the issue, the questionnaire still goes ahead to ask the respondent how that can be improved.

The scope of the questionnaire is generally wide, encompasses all important elements of the six GF eligibility requirements, giving room for a lot of information shared with and from the respondents. The insistence on the inclusiveness and participation of CSOs and KAPs probing the composition of the CCM by sector representation and their impact on the platform is welcome.

The additional information sought for in this current tool, at a glance, gives you the real state of the CCM. It delves into the functionality of the various structures with respect to governance at the CCM and also reinforces inclusion and active participation in the CCM dialogue. Also the issue of constituency representation and quality of engagements within constituencies are addressed, as is the need for technical assistance, what kind of assistance, and the value as in how much funding is required. This helps the researcher to arrive at clearer conclusions and recommendations that are relevant and responsive to the issues and findings from the study.

a) CCM Functions & Performance: In the eight individual responses from Ghana, they all agreed their CCM fulfilled its mandate (7 rated it “good” and 1 “acceptable”). They elaborated on the oversight role of their CCM by saying: **1.** “Yes the CCM with regard to oversight is doing well. It has representations from all sectors including PLWD and KAPs. The proceedings at CCM allows everybody to freely express themselves and participate actively in discussions at the CCM. Over 45% of CCM members are CSOs representatives and are also play key role on the 2 oversight committees set up to monitors grant activities in Malaria and TB/HIV. It is quite inclusive and discussions are done in a open and transparent manner.” **2.** “Yes to a large extent. Its processes are inclusive and there is wide participation for all sectors and KAPs. Gender balance, yes. The there is an Executive committee of 7 that sits to address issues in the absence of the general assembly of the CCM. Lines are clearly defined and everybody knows his or her role.” **3.** “Yes the CCM is delivering on its mandate, allows and encourages participation from all sector representatives. Very transparent and inclusive proceedings also open sharing of information. Allows participation of KAPs and PLWDs.” **4.** “The CCM have oversight of GF resources and to ensure purpose of fund is achieved to make a difference in the lives of people. Coordinate all aspects of Global fund resources. Inclusiveness, yes but as to whether everybody understands the issues as they are presented and also be able to contribute meaningfully. Do people really understand their roles? Everybody has the mandate to talk, free to express their views. I think the CCM processes are participatory.” **5.** Yes the CCM Ghana has two oversight committees setup (Malaria Oversight committee and TB/HIV AIDS oversight committee). CCM Ghana has 25 members from CSOs, government, faith-based, business, academia etc. Executive committee of CCM meets occasionally to address any urgent issue in-between CCM meetings. CCM follows guidelines for selecting. Oversight committees submit their quarterly reports and this is discussed at CCM meetings.” **6.** “The CCM Ghana membership was modelled on the structure, guidelines and directives from Global Fund. Initially CCM was led by Ministry of Health (MOH). Later, it moved to a separate, independent and rented accommodation. Early years of CCM had membership size of more than 74 but this reduced as expectations were not met. In 2015, CCM developed a constitution for its membership size to 25. The decision to 25 memberships took a long debate. This new membership is inclusive and has CSOs, PLWD and KPs representations. There are two (2)) oversight committees. Before 2015, they recorded low attendance to meetings because members have to attend meetings with their own resources but later, Global Fund agreed to fund meetings of CCM

and this has increased attendance rate and participation.” 7. “Yes the CCM is in my personal view doing its best in this regard. Right from the Concept notes development and grant negotiations. Identification and selection of PRs. KPs are adequately represented. Ensures that the funds are judiciously utilized and results achieved. Through its oversight committees the CCM is able to monitor the activities of PR and sub-grantees. Reports from the oversight committees are shared for the benefit of all members. The 2 committees are the Malaria and TB/HIV. However there could be some improvements; there will be the need to increase the frequency field visit and supervision, because on the field you have the opportunity to interact with a wide range of actors and stakeholders.” 8. “The CCM basically superintends and monitors coordinates the activities of the Global fund. It is the overarching body that coordinates GF country concept notes, grant writing etc. Yes fulfils its oversight mandate to a large extent. There is the Executive committee made up of 7 members and 2 oversight committees: one for TB and HIV and the other for malaria. There is fair representation and inclusiveness, in that, KPs are represented through network organisations. Even though FSWs are not represented he thinks their views are fairly represented but thinks that CCM should give special attention in the area of capacity building so representative can make a more meaningful impact. Open transparent deliberations and free information flow.”

Asked to elaborate, the answers were: 1. “Oversight committees are very active and share their reports from the field regularly.” 2. “Just on track, the CCM is delivering on its mandate within the limited resources available.” 3. The CCM plays a very critical oversight responsibility with the involvement of the CSOs and all stakeholders.” 4. “We have oversight committees that is open to all and they are playing their roles well • There is adequate space for everybody to participate.” 5. “The CCM has gone through various processes over the years and I think it has achieved some successes in strengthening the capacity and work within Ghana.” 6. “CCM is a human institution; no perfect institution.” 7. “However there could be some improvements; there will be the need to increase the frequency field visit and supervision, because on the field you have the opportunity to interact with a wide range of actors and stakeholders.” 8. “You can’t get a perfect system but I think the CCM role in oversight is just ok.”

- **Regional Programming:** Asked whether their country’s CCM mandate should be extended regionally, 7 said yes and 1 said no. On what processes could be put in place to harmonise regional programmes, they suggested: 1. “Sharing country programs with each other and forming joint monitoring teams.” 2. “There is the need for countries involved in such arrangements to share project information to facilitate monitoring and evaluation.” 3. “I

don't know." 4. "The CCM in Ghana should be briefed or have knowledge of the project and what it seeks to achieve. • They could share project milestones and monitoring outcomes of the project." 5. "The CCM in-country should provide oversight. There should be mechanism to ensure participation and peer support to each country." 6. "Abidjan-Lagos Corridor Project originally funded by World Bank with five countries (Ivory Coast, Ghana, Togo, Nigeria, Benin). Proposals were endorsed by CCM in each country, harmonize linkages between countries. The project has ended and lessons were learnt from each country. It will be good to have similar project under the CCM country oversight." 7. "Countries have to share their project brief with other countries. There is the need for the host country of the project to have some oversight on the project within its catchment area." 8. "Inter-country transparency in information sharing on projects • Countries could complement each other's monitoring efforts."

- **CCM Membership & Leadership:** How non-performing CCM members were dealt with is outlined here: 1. "Non-performing CCM members should be cautioned or reported to the sector or constituency they represent for the necessary action." 2. "The leadership can query the non-performing members." 3. "There are clear regulations from our organizations so a non-performing member will be replaced." 4. "Unfortunately, as it is now they have to continue for their full term until their constituencies replace them." 5. "The best way to address non performing members is to replace them. Members are encouraged to attend meetings and meaningfully participate in decision making." 6. "CCM has attendance and minutes records of members participation in meetings. Sometimes participants do not make contributions openly but engage remotely. It is difficult to say who is not performing. Non performing members can only be replaced at the end their tenure." 7. "They should be reported to their constituency and ultimately removed if they fail to: attend meeting regularly, make fruitful contributions, and provide timely feedback to their constituents."

All eight respondents agreed this could be improved by: 1. "there will be the need to develop performance criteria and standards to be clearly spelt out, so members can even assess themselves to see if they are performing or not." 2. "The need to encourage regular attendance of meetings, participation and contribution to critical discussions on the floor. The documents sent by CCM are mostly bulky in content. The need for simplified or abridged versions for easy reading and comprehension." 3. "there should be clear regulations from the CCM which then can guide members to be mindful." 4. "Performance criteria should be developed and monitored." 5. "It will be intimidating to sack members for non-performing. There was an issue of how to assess performance; is performance assessed only by attendance and speaking in meetings? We need clear cut guidelines to

assess performance to ensure members are not intimidated and vilified. Not speaking in meeting cannot be attributed to non-performance. It is a difficult situation to handle.” 6. “There should be a criteria for assessing their performance.” 7. “Need for constituencies to select the persons with the requisite expertise and also have time to commit to the work of CCM.”

Seven of the eight Ghanaians rated their chair as “good” and one did not respond. Explaining their evaluations of their chairs, they wrote: 1. “Very dynamic and experienced.” 2. “Good but over-zealous.” 3. “Very punctual at meetings and gives room for discussions before decisions are taken.” 4. “Very active and also allows everybody to freely express their views.” 5. “He is assertive, forceful and passionate with the issues. He is also CSOs person.” 6. “Very active. He is from CSO constituency and helping also to push the CSO agenda.” 7. “Wonderful and nice person. Demonstrates enthusiasm and keenness in CCM work. Allows everybody to freely express their views. Very active.” Five out of eight Ghanaians voted that their vice-chair was “good” while three voted they were “acceptable”. Explaining further, they wrote: 1. “Also very experienced and has considerable knowledge in grants management at various levels.” 2. “Very good but does not have time to attend meetings. She is a very busy person.” 3. “Very articulate and knows exactly her roles in the work of the CCM.” 4. “Very good but is a very busy person, not always present at meetings.” 5. “She is good but work as chief director at Ministry of Finance which makes her very busy and does not attend CCM meetings regularly. Anytime she comes to meeting, she makes very important contributions to the discussion.” 6. “She is good, intelligent busy, busy. She is a fire-brand anytime she attends meetings.” 7. “She may be a busy person anyway but the expertise and experience she comes to the table with is huge. She has been involved in grants management and has some considerable experience in dealing with GF.” 8. “I have not seen much of her. Not present at most meetings but has demonstrable technical ability.” All eight respondents said the chair and vice-chair had changed over the past decade.

- **Conflicts of Interest:** Six respondents said they were unaware of conflicts of interest in the CCM, while two said such seldom occurred. Conflicts of interest within the CCM were elaborated so: 1. “As far as I am concerned, at meetings members are asked to declare their conflict of interest or otherwise. If there is, the person is made to step aside.” 2. “At every level of engagement of the CCM, members are made to declare their conflict of interest in the consideration of any matter.” 3. “We have a policy on conflict of interest which members are expected to declare, if one finds him or herself in that situation.” 4. “In all situations or sessions of the CCM, members are asked to declare their conflict of

interest. Even in the selection of members for the oversight committees.” 5. “CCM has conflict of interest policy. Conflict of interest issues are raised during meetings and persons affected excuse the discussion and does not participate in decision making and voting.” 6. “CCM has conflict of interest policy and members are encouraged to voluntarily excuse discussions where they have conflict of interest. There has not be able violation of this policy as said by the CCM Secretary - ‘The Net has not caught any fish’.” 7. “There is a policy. At the commencement of each meeting, members are asked to declare their conflict of interest in the matter and this has been followed.” 8. “Members are always reminded at meetings to declare the conflict of interest in any consideration on the CCM. There’s been several instances where members have excused themselves when they identified conflict of interest in taking a decision on a matter.”

Asked whether, to avoid conflicts of interest, Principal Recipients (PRs) should be prevented from sitting on CCMs, the respondents replied: 1. “PRs should be CCM members.” 2. “Because the PR receives and manages the funds, they are always on the defensive on any matter regarding their program roll out.” 3. “PRs should not be members of the CCM since they could be compromised and my take certain decisions to their advantage.” 4. “PRs should be CCM members and there should be no qualms about that. It is the PRs that are on the ground and is able to raise the technical issues for consideration of the CCM.” 5. “NO! This enhances check and balances. PRs should not be made permanent members, they can be members but cannot vote in meetings.” 6. “PRs can be CCM members. Conflict of interest maybe on and off. CCM was holding PRs to their programmatic performance. People cannot be in conflict because they are implementers-it is issue determined. CCM decisions are consensus based and voting so if a decision concerns a PR, he / she is excused from discussion and voting.” 7. “Why not? They have the technical ability and have structures way down to the districts and communities.” 8. “I do not see any reason why they can’t be CCM members.”

- EPA & PIP Tools & Processes: Four Ghanaians said the EPAs could be improved on, three disagreed and one did not respond. Suggestions on EPA improvements were laid out so: 1. “Unfortunately I do not know what the current assessment entails.” 2. “I have not seen the assessment. Such developments to be disseminated among members or better still involve everybody from the beginning.” 3. “In my country the CCM is doing very well and I think they are up to the task Yes there is room for improvement by following certain learning outcomes from other CCMs outside the country.” 4. “I have not seen the current assessment. In the event of undertaking any assessment of the CCM I think adequate notices should be sent. All CCM members should be made aware of the exercise and what

it entails. There shall also be the need for the outcomes of the assessments to be disseminated to all.” 5. “The demands do not reflect the work being done in CCM. Demands of country team is problematic. They visit several times within a year and isn’t helping with the secretariat work.” 6. “I must say I have not sighted this assessment you are referring to. All I know is an external consultant came down sometime to carry out some assessments with the CCM. Some of us were informed of the exercise and asked to cooperate when contacted.” 7. “I don’t know about the EPA. Have not seen it. These assessments, once completed, should be widely circulated for all members to be abreast with it. May be the assessment processes could include engagements with members and not the secretariat alone.”

Six Ghanaians said they did not know whether the PIP addressed their CCM’s performance gaps, one said it did not, and one abstained, and five out of seven said they thought it could be improved; how to do so was outlined thus: 1. “The PIP has to be disseminated widely among CCM members so they can all track progress overtime. Training on what the PIP is, is critical for understanding.” 2. “There shall be the need to involve all representatives and constituents when developing the PIPs.” 3. “This is just a document, it does not necessarily help to practically address performance gaps.” The others had not seen the PIP or had no idea what it was.

- **Constituency Consultation:** On how constituency consultation was being done, the responses were: 1. “Quarterly meetings are organised for example for my group where myself or the alternate member shares relevant information of happenings in the CCM. In most instances minutes from the CCM members are also shared with groups via email.” 2. “It is by consensus-building among the religious entities and their representatives. Faith-specific consultations are held and candidates are proposed. The slot for the substantive member and alternate rotate per agreed among religious bodies. For example in this current CCM the Substantive member is from the Christian council and the Alternate is a Muslim.” 3. “Consultation is being done by appointing leaders of key stakeholders who also disseminate the information to their members at their level. The difficulty has been the requisite funding for the constituency engagements and meetings.” 4. “The representatives of constituencies share information/ minutes from CCM with members via email and in some cases meetings are held. These consultations however are not funded.” 5. “The CCM guideline is that the various representatives should be able to meet their constituencies before and after meeting for briefing and feedbacks. Lack of logistics-insufficient funding does not enable representatives hold face to face meetings Representatives utilize emails and other social platforms to reach members.” 6. “Global fund does not fund constituency

consultations, this is a big challenge. Sharing of minutes through emails. Some constituencies have Whatsapp platforms where all members engage. Occasionally, constituencies hold face to face meetings with members.” 7. “Regular meetings with the CSW and MSM constituency facilitated by WAPCAS. WAPCAS represents KPs because the elite CSWs who have competence to discuss the issues do not want to be seen (stigma). Training and working sessions with constituencies on how they can engage. Engagement with implementing partners. Engagements with constituencies however comes at some cost.” 8. “In the cases of KPs, MSMs, the representative network leads the consultations among the groups to select the CCM member and alternate. In the case of the FSWs the representative is not an FSW but an advocacy organisation. The more KPs represent themselves on the CCM the better in terms of influence and then also raising the critical issues pertaining to their cause. Unfortunately the FSWs are not organised.”

All eight agreed it could be improved as follows: 1. “regular meetings and timely sharing of information are critical.” 2. “A lot more could be done. That is to reach out to the traditional authority and other groups visibly missing on the CCM platform.” 3. “I suggest that funds be made available for the constituencies’ engagement so as to improve participation.” 4. “Yes this can be improved. Constituencies consultations should be funded to facilitate regular meetings and sharing of ideas.” 5. “There is the need to develop constituency engagement plan. Global Fund should resource the representatives to do the constituency engagement well. Regular basis intervention should be encouraged.” 6. “There is the need to know stakeholder groupings and source funding from them to help constituency engagements. Capacity-building for members to source for private funding is also important to diversified funding source.” 7. “To improve consultations there will be the need for the CCM to have a budget to cater for active constituency consultations and feedback platforms.” 8. “Need to support the organisation of the KPs so they can represent themselves. Need to disaggregate the KPs groups.”

- **CCM Communications & Transparency:** Following on from this, interviewees discussed how communications and transparency could be improved within CCMs, and between CCMs and other stakeholders 1. “Communication is done mostly via emails and in some instances text messages. In some rare situations you may receive a call from the CCM Secretariat.” 2. “Mainly through, emails, calls and text messaging. My observation is that communication among CCM members is rated at 85%, for non-CCM members is 60% and about 75% with other stakeholders.” 3. “Discussions are made at the meetings and information shared with members. Minutes of CCM meetings also shared.” 4. “Through the mail, and then also minutes of meetings are shared via emails. Other important info alerts

via sms.” 5. “Emails, SMS, Phone Calls, Follow up visits. KPs, hidden populations are difficult to reach. The use of social media to share information, some information is difficult to share openly so the use of anonymous names should be encouraged to share information on social media platforms. Some KPs complain of shortages of condoms and too sticky lubricants, these complains are difficult to come openly.” 6. “CCM has developed calendar of meetings so every member know meeting days. CCM also utilise emails to share minutes and reading documents to all CCM members. CCM also does follow up calls on members. CCM also visits members. For non CCM members, they are granted permission to join CCM meetings when they make formal request or application to come and observe meetings. There is no clear communication plan for non CCM members.” 7. “By emails. Information shared on the CCM website. Quarterly meeting of the CCM also presents an opportunity for information sharing.” 8. “Emails, sms text messaging. For ‘hidden’ KPs rely on social media that is Facebook and twitter for some MSMs. Reports and feedback from constituencies.”

Barriers to effective communications were discussed so: 1. “if one is not connected to internet or relocates to an area where internet connectivity is poor, then one is cut out from receiving mails.” 2. “The main challenge is the CCM chairman and the manner in which he summons meetings without consulting members. I see some not right attitude on the part of the chair, in calling for meetings. In some instances the non-ownership of decisions and I personally think the chair is interested in working with the alternates instead.” 3. “As I indicated, the barrier is lack of funds to organise constituencies’ consultations to disseminate information to members both verbal and written.” 4. “There are basically no barriers I see.” 5. “CCM holds quarterly meetings where PRs develop targets and indicators, prepare the dashboard and openly display for assessment. News and reports are circulated through emails for members. Meetings are not published in the dailies so non CCM members do not have a chance to know meeting days but when they voluntarily write to observe meetings, CCM grants this request.” 6. “Sometimes reports are voluminous. Reading it can be time consuming.” 7. “Quarterly meetings of the CCM are held in its conference room which in my view is not spacious enough to accommodate.” 8. “As far as I am concerned, there are no barriers. The CCM secretariat is very open and transparent and shares information regularly.”

One respondent said this could not be improved on. Ways this could be done included: 1. “For those that do not have regular internet access there is the need to explore other means of sending mails. May be by post and it should made express mail.” 2. “The Chairman, before he arrives at any decision to summon a meeting should ensure that all

are fairly consulted for their availability or otherwise.” 3. “it can be improved by allocating a budget for constituency engagements/ meetings. This is very critical.” 4. “Of course there is always the need and room for improvements. I think in sharing information the CCM secretariat could either summarize some reports for easy reading. Most documents sent or reviewed are voluminous.” 5. “CCM members can engage some members of constituency and invite some observers to CCM meetings. The use of other communication mechanisms such as social media can also be used to announce meetings.” 6. “CCM should mark or highlight important areas that require feedback to make reading and communication easy among members.” 7. “In the future there shall be need for a bigger meeting room to allow space for as many observers as possible.”

Asked whether the CCM informed Non-CCM members of meetings, five said yes, two said no and one was unsure. This was explained as follows: 1. “I am not sure if non-CCM are written [to] as we are. I may have to find out from the CCM.” 2. “No because the CCM meetings are for CCM members. However notices of meetings and minutes could be shared on its website. Members of the public can participate as observers. It is incumbent on the non CCM member to make efforts to get information from the CCM platform. Maybe also briefings from representatives of the various constituencies.” 3. “For non-members who are willing to sit in the meetings as observers.” 4. “CCM communication or minutes are for the communication of CCM members. For example if you were not in a meeting you have practically no business with the minutes or proceedings since you were not part of the deliberations. On the other hand meeting information is shared on the website for all to access. Also the CCM does not have a mailing list of non-CCM members.” 5. “CCM meetings are not necessarily advertised but non CCM members do participate. The procedure for attending CCM meeting is to write to the Executive Secretary and explain reasons for joining the meeting and CCM will consider it. Representatives of CCM are encouraged to inform non CCM members of upcoming meetings.” 6. “We do not have clear communication plan for Non-CCM members but whenever they know through CM representatives, they notify us and are granted permission.” 7. “The CCM does not directly send information to non-members. However non-members benefit from information sent to them by their representatives on the CCM.” 8. “Yes because CCM members are expected to share all vital information from the CCM to their constituents. So by extension non CCM members are informed.”

c) CCM Meetings & Representation: Six Ghanaians said their CCM allowed observers to attend but not speak, but two demurred; all eight said observers could speak and be heard; while six said observers were encouraged to participate and influence decisions, one

disputed this and one was unsure. Explanations included: **1.** “Observers have no voting rights.” **2.** “Observers do not have voting rights and have to attend meetings at their own cost.” **3.** “Observers do not have voting rights but can participate in the deliberations at the CCM.” **4.** “Majority of CCM decisions are taken by vote and since observers do not vote, I can’t tell if they influence decisions.” **5.** “periodically they participate to observe meetings but have no voting right to influence decision.” **6.** “They are allowed to attend and speak freely. Unfortunately because they do not have voting rights, they are not able to directly influence decisions.” **7.** “Observers are allowed to participate freely in the deliberations, they could influence the discussions and that goes a long way inform peoples choices or preferences but are not allowed to vote.”

On the question of who sat in as observers on the CCM, the responses were: **1.** “Donors and UN agencies, the World Bank, Researchers, civil society.” **2.** “From all sectors.” **3.** “Most of all stakeholders (from all sectors are allowed to participate as observers without voting rights).” **4.** “CSOs and Network organisations, Faith-based Organisations, Donors and Multi-laterals, Researchers from Academia.” **5.** “Donors, diplomatic missions, CSOs, government institutions.” **6.** “Government officials, diplomatic missions, Christian Health Association of Ghana.” **7.** “Most observers are from the CSOs constituency. Others are from academia, donors.” **8.** “Observers are largely from CSOs networks or NGOs and some funding partners, diplomatic missions.”

- **KP Representation:** All eight Ghanaians agreed that KPs were able to attend CCM meetings, seven said they could participate meaningfully and speak and be heard, while five said they could influence decisions, with one disputing this and two being uncertain. In explanation of this, they wrote: **1.** “KPs themselves are not there. They are represented by advocacy groups from the CSO terrain.” **2.** “KPs are represented.” **3.** “KPs are allowed just like every other person to participate in the discussions.” **4.** “MSM and FSW are not legally identified issues within our national laws. These groups are represented by advocacy groups. Over the years, capacity of some MSM and FSW members have been built by their various representative groups. It will be useful to have these individuals selected by their advocacy groups to represent their constituent in CCM. This a difficult decision and there is the need to be careful with it so that we don't frown on our national laws.” **5.** “Need to expand KAPs representation.” **6.** “The fact is he is the only real KP (MSM) on the CCM. The others are from advocacy organisations that mobilise and work with KPs. Even though these representatives seem to be on top of the issues, it may not be like the one wearing the shoes.”

- **PLWD Representation:** All eight Ghanaians agreed that PLWDs could attend CCM meetings, participate meaningfully, speak and be heard, and influence decisions. In explanation of this, they wrote: **1.** “PLWDs are adequately represented.” **2.** “PLWDs are also allowed to freely participate. In the case of Ghana they are very active. Especially the representatives of persons living with HIV and TB.” **3.** “NAP + lacks capacity to fully engage in CCM meetings. They usually have leadership challenges. Weak CSOs participation, lack of coordination between CSOs. MSM and FSW are represented by West Africa Project to Combat HIV/AIDS (WAPCAS) because MSM do not operate as a legal entity and so advocacy groups represent them. CSOs should play active role in concept development, Individual interests supersede group interest.” **4.** “There are representatives from all 3 disease constituencies, malaria, Tb and HIV.”

- **CCM Composition:** On the question of how to improve CCM composition, suggestions were: **1.** “There shall be the need for the CCM to work with organisations that represent KAPs especially MSMs and FSWs to reach them. The CCM should play a key role in organising these groups and facilitating their selection unto the CCM.” **2.** “I think the current composition is ok.” **3.** “By engaging in a wider stakeholder consultations through public seminars for interest groups to have good representation. **4.** “Improvement in composition should not focus on numbers but quality of representation is key. KAPs and PLWDs and CSOs. Constituencies’ selection of candidates should be made very competitive giving way to the right calibre of persons at the CCM table. The CCM Secretariat should be more involved in these selection processes.” **5.** “There should be: Fair representation; Women and children represented; Member and alternate member from every constituency so that they can follow discussions and have their capacity built for future replacement. Representation of MSM and FSW on the board has been debated recently but it bothers on legality.” **6.** “Build CSOs capacity to think as a group. CSOs voice must be one in CCM and represent group interest than individuals and their organisations.” **7.** “It should not also be about numbers but effective representation and contribution to the cause of their constituents. Particularly and in the case of KPs representation, there is the need for a lot more work to be done. In the area of mobilisation and management of these groups and facilitating their constituency engagement. The ideal would be to have for example a FSW chosen from her constituency to represent their interest. Unfortunately a complex mix of factors makes it just impossible for the FSWs to openly come out. Stigma. Persons with disability and young people’s representation should be considered.” **8.** “For now every constituency has a member and an alternate from the same constituency. What could be improved is to empower KPs to organize and be able to represent themselves not lead network organizations.”

- **Gender Mainstreaming:** Six out of eight Ghanaians agreed that gender had been mainstreamed in their CCM, with one dissenting and one uncertain. How gender mainstreaming had been achieved was noted so: **1.** “This CCM has 11 females, there is almost a balance. However, as to how this was done I cannot tell.” **2.** “Yes, here a lot of diplomacy comes into play.” **3.** The CCM is mindful of the integration of gender action plans in its governance documents but yet to come out with concrete guidelines to guide its implementation.” **4.** “Women are free to participate and contribute. Even though there are a lot more men than women the few are doing quite well. They seem to be on top of their game.” **5.** “CCM Ghana has high consideration for women and recognises women mainstreaming but most often men are seen and voices very loud than women. Women are well represented on oversight committees. It could be helpful to have gender experts during concepts development but should be someone who understands the issues because they need to bring male and female agenda to the table. Women are elected from their constituencies to CCM. Issues of transgender are missing, issues of MSM are missing.” **6.** “They need to collect gender segregated data. Gender is not considered in implementation; TB, HIV are gender issues. They are captured in the concept note but not in implementation.” **7.** “Women representation and participation is very encouraging in the Ghanaian context. There is a gender expert on the CCM who represents the interest is women and children. The processes at the CCM allows everybody to participate and women are not excluded. In fact in the case of Ghana they are very loud and constructive. Even the vice Chair is a woman.” **8.** “There is high consideration for gender even though there are more men than women on the CCM. No particular scheme developed.”

How this could be improved on was detailed so: **1.** “The various constituencies in the selection of their representatives should be guided by gender considerations and a lot more women should be encouraged to show interest in serving on the CCM.” **2.** “There will be the need to develop a comprehensive gender policy guiding the CCMs considerations in all matters.” **3.** “Improve consultations and engagements with CCM members and partners.” **4.** “Encourage a lot more women participation.” **5.** “MSM issues cannot be legally included in constitutions and by-laws as it is against the national laws. Gender experts for concept note development should be part of the CCM standing orders.” **6.** “They need to collect gender segregated data Gender is not considered in implementation; TB, HIV are gender issues. They are captured in the concept note but not in implementation.” **7.** “Encourage constituencies to elect females to represent them on the CCM. It is still male dominated platform.” **8.** “There is the need to look at other dimensions of gender, to include bisexuals,

lesbians. Issues of transgender are different from MSMs or issues of inter-sex i.e. hermaphrodites etc.”

Asked whether gender mainstreaming affected CCM concept notes and programmes, three Ghanaians said it had, two disagreed, while three were uncertain. In explanation, they wrote: **1.** “I have not participated in the development of the concept notes before. I can't tell how but I believe gender considerations ensures that issues bothering on gender inherent in dealing with HIV and AIDS are covered or highlighted.” **2.** “Not sure if that will make any impact.” **3.** “No gender policy.” **4.** “TOR [Terms of Reference] for concept note development include gender consideration. Concept notes reflect women, persons with disability and other KPs.” **5.** “Issues of women are clearly captured in the concept note development. Women's issues receive priority.” **6.** “Somehow the CCM in Ghana has quite a number of females on it. The current Vice Chair is a woman. I do not know of any deliberate policy to ensure women's participation.”

Five said gender mainstreaming could be improved on, and asked how to do so, they wrote: **1.** “There is the need for a gender expert on CCM to be involved in development of concept notes.” **2.** “There is the need to generally build the capacity of all CCM members, particularly representatives of women and children.” **3.** “The women and child representative has to push hard in this regard.” **4.** “Because any time gender is mentioned every body's thinks about women, but it goes beyond that; how about hermaphrodites?” Seven out of eight Ghanaians agreed that it was a good idea to have a gender expert on the CCM.

- **CSO Representation:** Four Ghanaians said CSO representation on the CCM was “good,” three said it was “acceptable” and one said it was “unacceptable”. All eight agreed that CSOs were able to attend meetings, seven that they were able to participate meaningfully (with one dissenting), all eight agreed they were able to speak and be heard, and seven said they were able to influence decisions (with one dissenting). Most (5 respondents) said NGO reps had served between three and seven years, most (5 respondents) said KP reps had served between one to three years, half (4 respondents) said FBO reps had served three to five years, most (6 respondents) said PLWHIV reps had served three to seven years, most (5 respondents) said PATB reps had served one to five years, and most (5 respondents) said PAM reps had served one to five years.

c) CSO Functioning & Performance:

- **CSO Rep Selection:** The process of selecting CSO reps to the CCM was as follows: 1. “the process is transparent. It is through election. In the case of NAP+ the person that is voted as the President automatically becomes its representative. This process is also supervised by officers from the CCM secretariat.” 2. “In our case, the CCM writes to all faith-based organizations asking for nominations. Then by consensus the representative is chosen. It is rotational.” 3. “It was transparent by election of representatives and a letter written to the CCM with minutes of proceedings.” 4. “The process is by election and is very transparent.” 5. “Representatives elections are done at the constituency level. As far as I know, those elections are transparent. Sometimes when there any issue, we step in to help resolve representative issues. Electing well qualified representatives to the CCM has been an issue because you cannot decide for the constituencies who to bring to CCM.” 6. “CSOs select representatives through elections. CCM supervises their elections. The level of organizational capacity of CSOs affects the participation and decision making process of the CCM. Representatives should have special expertise and experience in a wide range of skills in designing and implementing programmes, budgeting, evaluation, public speaking and in negotiation to enable them to take part effectively in CCM dialogues. CSOs have not been able to establish a blue print or guidelines to ensure acceptable democratic and transparent process of nominating representative to the CCM. Failure to develop such a roadmap has been a source of disputes in some quarters with regards to CCM membership or representation.” 7. “the process was transparent.” 8. “Through election and supervised by the CCM secretariat. Elections are largely fair and transparent.”

Seven out of eight respondents said this could be improved on: 1. “one way is to make the constituencies’ representative selection very competitive.” 2. “Efforts to deepen the consultations and streamline the nominations from the organisations.” 3. “This is not the case in other groups and I hope they could improve upon it by learning from other constituencies.” 4. “Very competent persons to be encourage to vie for the slots for CSO representatives.” 5. “What can be done will be to indicate clearly and remind constituencies of the nature of CCM work, the technicalities involved and the reason they need a qualified representative to be on CCM.” 6. “CSOs should put forward well qualified for election. Encouraging people with technical capacity to be selected by their constituencies.” 7. “Need to ensure broaden consultations and participation.”

- **CSO Orientation:** How CSO rep orientation on joining a CCM was currently done was noted so: 1. “An orientation workshop is held for all CCM members at the inception. This training introduces to the new members the various governance documents, and policies of the CCM. Also new members get to know their mandate as reps on the CCM.” 2. “There

are orientation meetings for all CCM members/ representatives which is very good.” 3. “Training workshop for newly constituted CCM.” 4. “CCM organizes two days orientation for new members of CCM. The two days orientation is not adequate enough to fully build the capacity of members.” 5. “They give introductory orientations (twice) to new members on CCM in general, capacity building and how to effectively engage. Inadequate knowledge of CCM/GF amongst members. There is the need to do more information dissemination and education so that members can effectively engage in CCM dialogues.” 6. “Members orientation workshop organised at the inception of the CCM.” 7. “Orientation for new CCM Members held (training workshop to introduce the CCM and its functions and expectations from members).”

All eight said this could be improved on, by: 1. “Refresher training to be organised periodically.” 2. “There will be the need for regular trainings and refresher trainings.” 3. “it needs improvement, since the days / duration of the orientation is short and so the activities are packed.” 4. “Regular training and refresher training for members and alternates.” 5. “There is the need for regular training on CCM, learning on the job. Understanding of CCM and its functions, knowledge on how the dashboard works etc need to be on regular basis.” 6. “Targeted training should be organized regularly to improve members understanding of CCM.” 7. “Regularly trainings and refreshers can help.” 8. “Organise refresher training and ensure all-year-round training not one-off.”

- **CSO Engagement:** Asked how CSO reps engaged and fed information back to the CCM and their constituencies, the responses were: 1. “Engagement is done among members at the regional level. Meetings are convened in all ten regions of the country where NAP+ has a presence. These meetings are organised quarterly. The National Representative shares the information with regional executives who also share with other members.” 2. “CCM members or representatives take reports from the CCM to their constituencies and sectors. Issues are also reported same from the ground to the CCM through its representative, disparity in funds allocation and competition among CSOs and other stakeholders.” 3. “There is fine flow of information from constituencies and from the CCM.” 4. “Sharing of reports from CCM with constituencies via emails and in some rare cases meetings are held.” 5. “CSOS participation is low with constraint resources. CSOs have a role in mobilising communities and implementing prevention, care and support activities for the programs. However, the diverse nature of the private sector affects the realization of this goal. There are big CSOs with well-developed systems and services at one end of the spectrum while at the other end we have small organisations operating in rural or small communities where health services do not exist. The vision of role of CSOs in the GF

process seems far-fetched with poor organisation structures and capacity.” 6. “Women and children representatives are effective in receiving feedback from constituencies. NAP+ lacks capacity to sustain their issues and issues raised were not credible enough for understanding. CSOs should have the capacity to hold government accountable to the people by ensuring that government keeps faith in the fight against HIV, TB and Malaria.” 7. “Implementation challenges in the communities. Commodities stock out alerts.” 8. “Don’t know. Can only speak for my group.”

All eight agreed CSO engagement could be improved on, the respondents wrote: 1. “Due to funding constraints the meetings are not organised regularly and timeously. There shall be the need for CCM to support the meetings at the constituency level.” 2. “Need for regular well facilitated constituency engagements and reports/ feedback mechanism to and from the CCM.” 3. “Yes, by empowering CSOs in the remotest areas to also participate in the process.” 4. “CCM members or CSO representatives to be empowered to engage constituents more.” 5. “A lot more needs to be done if CSOs are to create the needed impact in health delivery; and a lot more of CSOs should serve as alternative voice on government to adopt sound policies and implement programs in the most cost effective manner. There is the need to identify the key players in this sector to build meaningful partnership between public and private sector, draw joint agenda and relate to them meaningfully in the fight against the three diseases.” 6. “NAP+ needs to elect competent representatives to CCM.” 7. “Regular information sharing and timely feedback.” 8. “I don’t even know what they are doing now, but I guess regular mails and sharing of information as well as sharing constituency feedback is critical. Regular constituency meetings is also key.”

- CSO Engagement of Rural Communities: How CSOs engaged rural communities was mapped so: 1. “I don’t think it’s different from what we have in the urban centres except for the difficulty in internet access thus emails not appropriate. Other methods may have to be employed to reach constituents.” 2. “For example among the faith-based organisations, the network of churches, branches and various structures are used even to the community level. Some churches have outlets in very remote areas likewise mosques.” 3. “Through our regional and district representatives.” 4. “CSOs engage their constituencies before and after each CCM meetings sometimes through emails, phone calls and even face to face meetings.” 5. “The CSOs report to their constituencies and receive feedbacks from them. CSOs should be able to articulate their views and offer alternative means to achieving results. It is clear that even when a genuine attempt is made, there is lack of focus to ensure that end results are met. The Malaria representative from Upper West Region of

Ghana has demonstrated enough and credible feedback from rural communities affected by malaria.” 6. “There is a representative from the Upper West Region (a medical doctor) who represents the endemic communities in Malaria.”

All eight Ghanaians agreed that engaging rural communities could be improved, and how this could be achieved was laid out so: 1. “That may depend on external factors i.e. when roads and communications networks to these communities are fixed.” 2. “Yes, the structures are already existent but we need to engage them regularly and build their capacity to understand the issues.” 3. “Provision of adequate funding for CSO reps in rural area in order to engage a wide range of community people.” 4. “There should be well coordinated constituency engagement plan where each constituency can engage with CCM involvement.” 5. “CSOs should conduct regular engagements with their constituencies. Funding for this engagements should be sourced.” 6. “I do not know if he has an alternate but then it would be good have another person so in his absence that slot is not left vacant. In the future look at the possibility of getting other indigents to represent their lot.” 7. “I don't even know what they are doing now, but think sharing of information as well as sharing constituency feedback is critical. Regular constituency meetings are also key.”

d) Global Fund Functioning & Performance: Lastly, on the quality of the Global Fund's in-country representative teams, six out of eight Ghanaians rated them “good” and the other two did not know. The six who knew the GF team said it was possible to improve their performance and expanded on this so: 1. “The in-country representative team needs to continuously support to the CCM and its secretariat.” 2. “They deal mostly with the secretariat. That should change. They are quite close to the CCM and very cooperative.” 3. “Very supportive and visits often.” 4. “CCM Ghana has good relationship with Global Fund in country representative team .They conduct regular visits to the CCM secretariat to meet with the officers and even sometimes CCM members.” 5. “CCM thinks that the visit of country team to Ghana is [too] numerous and this is a drain on programming and work in the office.” 6. “The Global Fund country teams have been very supportive. They are very open and critical and always ensuring that the right thing is been done. They ask the right questions. They played a vital role in the introduction of the Dash Board to the CCM. They visit frequently and that's ok by me. It ensure close contact with the base. On how it could be improved, I think. They can device other means of getting information off the ground without necessarily being present physically. Let's make use of the ICT options available. There will be the need for the Country teams to give prior notification and also in that, share their itinerary in detail and what the agenda is. It facilitates smooth operations and allows people to plan.”

Five Ghanaians were unaware of the CCM Hub, while two rated its performance as “acceptable” and one as “perfect”. Four said the Hub’s performance could be improved and three said no. Suggestions on improving its performance were outlined so: **1.** “There will be the need to publicise the activities of the CCM hub in Geneva.” **2.** “The hub should send countries on GF performances and share best practices from other countries.” **3.** “The Hub is CCM global coordinating body. Very little is known about their work. They need to improve communication.”

- CSO Complaints against CCMs: Civil Society Organisations’ major complaints with their CCMs were explored so: **1.** “Funds allocated for CSO work is inadequate. There is the unfortunate issue of stock-outs for some essential drugs for PLHIV.” **2.** “The main complaint is about the seeming side-lining of CSOs when it comes to budgeting and allocation of GF grants in-country.” **3.** “CSOs want the civil society component to be a standalone grant and not subsumed under public sector PRs grants.” **4.** “Funding allocations to CSOs and CSO constituencies are woefully inadequate.” **5.** “Government PRs prefer to work with district and municipal health systems than work with CSOs. CSOs are disadvantaged through funding allocation. CSOs lack opportunity to participate in budgetary preparation and priorities are not represented. Bureaucracy and delay in implementation. Shortages of logistics and equipment such as testing kits, condoms, drugs.” **6.** “CSOs are not satisfied with CCM because government fails to carry CSOs along during implementation. CSOs complain of small budget allocation. There is an element of greed on the part of PRs. CSOs lack capacity to hold government accountable.” **7.** “Not any complaints I know about, because they are very active on the CCM platform, open, transparent manner of proceedings at the CCM ensures full participation. There is a conscious effort to involve everybody, CSOs, Public entities, donors, especially the oversight committees and their functions ensure wider consultations. Very few issues probably, because even at meeting when issues come up in some instances we break into working groups and come up with ideas especially in the disease groups.” **8.** “Not much complaints but CSOs are concerned about the bureaucracy in the government sector which affects funds disbursements and delays projects implementation leading to low burn rate. The funds disbursed to CSOs woefully inadequate and this does not encourage innovations in implementation.”

Seven out of eight said this could be improved on, with one disagreeing. How civil society’s major complaints against their CCMs could be dealt with is suggested so: **1.** “Proper stock management at all levels to avoid stock-outs.” **2.** “CSOs should be brought to the table to participate and also decide its budget.” **3.** “Once the CSO component stands alone, it will

empower CSOs to deliver quality services, engage appropriately with communities and constituents to improve health outcomes.” 4. “There shall be the need for Public PRs implementing programs with CSOs to reconsider the allocations for CSO activities.” 5. “CSOs should appoint their own PRs on fund administration. Proper budgetary allocation for CSOs and programs.” 6. “There will be the need to step up our information sharing.” 7. “Need to involve CSOs during the budgeting stage in order to highlight their priorities for consideration.”

e) Future Risks: The respondents discussed their perceptions of future risks to the Global Fund’s operations in their countries so: 1. “If the GF runs out, how are we going to sustain treatment for persons living with the diseases, TB or HIV or both? There shall be a need for stronger advocacy for the government to begin to mobilise internal resources to deal with these problems.” 2. “Not that I foresee.” 3. “Yes, the risk of ending funds from the GF and how to integrate CCM activities into our national budget in a sustainable manner.” 4. “Yes. That is, if government continues to honour its obligation as far as the fund is concerned. Over-reliance on the GF by country could have dire consequences for the health of the country.” 5. “CCM is involved in developing concept note but not involved in grant making; PRs do not involve CCM in grant making. CSOs prefer to work under PRs who are CSOs than government PRs. Government commitment to global fund processes. Quality representative on CCM. CCM Competition with Ghana Health Service / Ministry of Health.” 6. “Delays from Global fund of releasing funds due to their guidelines and mechanism. Bureaucracy from government system. Judiciary risks, and government PRs struggling to oversee countrywide disease response. Insufficient capacity to ensure that basic health services are in line with normative guidance and national standard • Inadequate monitoring and evaluation, poor data quality and quality of electronic health information system. Systematic weakness and risk in procurement and supply-chain management system.” 7. “No risks.” 8. “Yes, that is if government will remain committed to its side of the bargain with respect GF funding.”

Final issues that were raised were: 1. “I am satisfied with the work of the CCM so far and think that the continuous involvement of CSOs is key for the promotion of better health care delivery in our communities.” 2. “there is the need for the integration of CCM into national health systems.”



CCM role: Asked what they thought the role of the CCM was and how they were performing against that mandate, they responded: “1. Core functions of CCM is prepare funding proposals for global request 2. Oversee implementation of funding request a. Make sure the funds are effectively used for the purpose of collection b. Ensure inclusive decisions making c. Bring on board whoever is concerned about CCM 3. CCM build the capacity of its members 4. Prevent and manage conflict of interest with in PRs and SR selections. Performance: 1. CCMs performance has been excellent a. Because it builds capacity of members b. Get grant for the team on time c. The actions of CCM has been excellent in providing the role of ensuring funding d. Looking at their role in mediating the PRs and SR. NAP+ and NACP issue for example was well mediated by CCM. Some members rated the CCM 7/10 because I see people who come to speak on behalf of the key population other than the key population themselves. For example Female Sex Workers are not represented by FSW themselves. MSM is not represented by themselves but by WAPCAS. The MSMs and FSW are not represented because they are not organized and they are not legal. On the issue of the non-representation of key population, CCM explained that The eligibility criteria is what guide them Because they could not engage them legally because of the legality involved so CCM work through the advocates. The issue is not about their representation but the impact of CCM decisions on the key population. Another person scored CCM 8/10 because the CCM is not given the free role to dictate their roles more especially other use of the funds. They see it as externally controlled in the use of funds.” Asked whether this could be improved, they wrote: “Capacity building for the different constituencies represented is consistently needed on the role of CCM and their own roles.”

Capacity-building: Asked whether capacity-building could play a role in improving CCM performance, they responded: “Education has no end. Capacity helps to prepare and manage conflict of interest. It helps improve knowledge and build capacity on concept note development.”

CSO Oversight: Asked to discuss the role that civil society plays in oversight, they responded: “Yes CSOs have space because the GF consultant guide us how we can select the oversight committees which I think a lot of CSs have taken the lead. Now it is difficult for anyone to do the wrong things because of the implementation of the dashboard which enable us monitor the implementation process and see problems in time to address. CSOs are well represented.” Asked how this could be improved, they said: “Yes,however some KPs who are considered illegal could be brought on board by substituting their advocate

groups with KP representatives since the CCM membership is already filled with 25 members.”

CCM Engagement with PRs: Asked how the CCM engages PRs with regards to oversight, they responded: “1. Basically the PRs have a focal person where the CCM oversight committee members can talk to when the need arises. 2. They do field visits and take note of what is happening on the field. Between the PR and oversight committee, there is no PR which is a member of the oversight committee. The problem is the oversight committee when they make their presentation, we meet the person who works where the challenge is happening and we find them. There is a relationship between the PRs and SRs.” Asked if it could be improved, they wrote: “Members were Ok with current practice.”

KAPS & PLWDs: Asked whether the CCM had KAP and PLWD representation, they wrote: “The oversight committee are represented by people living with the disease. The reason given were that, there are seven requirements that must be met to serve under the oversight committee: 1. Technical capacity 2. Follow and understand the Global Fund procedures 3. Conflict of Interest 4. Have experience with the disease 5. Project management competence 6. The legal representation of the group 7. Elected by constituencies and KAPs such as FWS and MSM who do not have legal representation are not on the board but are represented by their advocates.” Asked what role KAPs and PLWDs played on the oversight body, they wrote: “ey bring on board their experiences on the concept note development stating what they want to be done for them. They engage with their constituencies to bring on board their challenges and issues.”

Asked whether KAPs and PLWDs were able to participate fully in meetings, they responded: “No, not fully: KAPs and PLWD are mostly represented by advocate groups and not themselves. Their priority needs such as capacity building, peer to peer education are mostly under prioritized over medical supplies and hospital equipment. When it comes to budgeting, their participation is usually low due to CCM strong priority for technical capacity and input because CCM sees budgeting as a specialist area and requires technical inputs where KAPs do not have capacity to contribute.” Asked if this could be improved, they wrote: “PLWDs for example were too happy about such development because they feel they have the disease and know their needs and believe their full representation could help bring on board their needed priority in budgetary preparation.”

Constituency Consultation: Asked how constituency consultation was being done, they responded: “The best consultation was the training on the global fund but the time was

short. The best consultation was Nap+ have structures we communicate our information. Because CCM meets every quarter, they send information to our constituency quarterly. For TB Network, they send meeting reports to our constituencies by e-mail. We receive feedback where there is the need. We have created a Whatsapp platform and you make your contact accessible to all members to enable the share their concerns to us.”

Asked if this could be improved on, they responded: “Funding is very important here. CCM has no funding for constituency consultations. All of them do communicate only by emails. The Global Fund demands accountability and the only way CSOs could engage their constituents is by face to face meetings. Our last meeting for example lead CSOs to develop an engagement plan. CSOs were encouraged to map out organizations that can support their engagement plan process. Within the global fund system it is difficult for the CSOs to engage their constituents. If this is an important thing then a minimum budget to could be prepared from the GF to support the process. A budget for such meetings this year to be provided for engagement at least twice a year.”

Asked how communications occurred within the CCM and between the CCM and other stakeholders, they wrote: “Where there is the need for CCM communication they normally do through mails, sms and phone calls. 1. Communication from CCM is one of the best 2. From time to time the keep sharing information. We get all the updates regularly. 3. My worry is feedback. There is no mechanism for feedback and monitoring the feedback.”

Asked what barriers obstructed communications, they wrote: “Communication goes to the grassroot but feedback has not been forthcoming. Responsibility, in the general structure if you send information to members it goes to specific source. There is the need to get some identifiable members who would be responsibility for responding. Engagement in a structured forums for feedback is very important here.

For my area, people fear for victimization. Most of the people are shut down when for instance they are given the wrong drug and the model of hope, they would say don't mention my name for fear of victimization. Information goes over the chair person to all members involved with their constituency. There is the need for information dis aggregation. CCM must be give information that would of interest to CSOs. There is the need to indicate interest of CSOs to members and not just sharing the whole document. Time is always a factor during meetings for AOBs. There is a critical thing concerning the capacity of our constituents to manage information and their interest as the other respondent is saying. Where funding is not forthcoming and it is all about sending information, people's interest wanes.”

Asked if this could be improved, they wrote: “There should be structured engagement forum where people can have face to face meetings there is the need to have information dis aggregated where CSOs areas can be There should be a way to gather information to avoid victimization of people.”

Inclusion: Asked whether there was meaningful engagement by women, girls and LGBTI people, they responded: “We don’t have such in Ghana. The people are represented by interested organizations or advocate organizations. On the question on why they dont give these groups representations, they explained that these groups are not legalized groups and by law exempted by the CCM guidelines. The level the CCM operate, the structure does not allow the engagement of many other groups such as the drug users, FSW, MSM etc.” Asked if this could be improved, they wrote: “There is the need to begin the engagement of these people due to the peculiarity of their issues. Eg. On the issue of access to facilities by the Disabled, their representation can help enforce the policies on disabled with access to facility. There is the need to mobilize such constituencies. The CCM country contest does not permit such inclusions. We are constrained constitutionally about membership size. This could be considered but the missing gap is about legality and constitutional framework of their representation.” Asked whether any groups were missing, they wrote: “MSMs, FSWs, Adolescents, Drug Users, Persons with Disability.”

Consultation & Feedback: Asked which sectors produced the best and most representative consultation and feedback, they wrote: “NAP + and TB Network have performed well because they came through a very though process but have had their capacity built in such a way that they are able to do more than many CSOs. They have been able to mobilize funds just a year we had our capacity built. They have a Whatsapp platform where we share information frequently. We are very organized so much so that many are not doing. We are in touch with our people because that this how I say we are the best. Someone said that NAP+ has been doing very well, they bring a lot of issues to the platform from their constituencies because they make positive noise.” Asked which sectors produced the worst and least representative consultation and feedback, they wrote: “Participants were uncomfortable about the question and felt it will be unfair to judge members who were not around the table.” Asked how feedback mechanisms could be strengthened, they responded: “Budget allocation for constituency engagements at least twice a year.”

Conflicts of Interest: Asked whether conflicts of interest were managed, they wrote: “There is a form that members sign to declare their conflict of interest and they would be evaluated further to ensure the inclusion for the conflict of interest issues. There is the misuse of the conflict of interest in keeping people out of decision making.” Asked how this could be improved on they replied: “The CCM constitution provides sufficient guidelines to deal with conflict of interest.”

Asked whether PRs should sit on CCMs, and whether the MoH should give its CCM seat to Treasury or Finance if they were a PR, they replied: “PRs mustn’t be because of their role they play, as was one person’s view. The reason was that When NAP+ selected NACP as their PR, when they found them not to be treating us right, they found it difficult to deal with our case because they are also members of the CCM. Another person said Yes the MOH must be excluded. He said to him yes PRs must be excluded because when they are represented on the board they beginning to abuse them knowing the ways to go around the issues of the fund. They strongly disagree with their engagement. Then another said, I will say yes because they bring a good contribution to governance. The technicality they bring to the table is enormous. Their engagement helps inform us on the policy issues that guide our governance processes. Their non-engagement would breed conflict. The involvement is necessary due to the technical information they bring on board. However this breeds Col more especially how they deal with CSOs. Most of the time the larger chunks of funds go to the state institutions to CSOs disadvantage. Certain key areas such as advocacy, capacity building that is handled by CSOs can take those areas so that the much technical areas are taken by the government sectors. There is the need for reviewing the process The GF require that 40% of the fund must go that way but it is now lost. The CCM is fighting for CSOs to find way of reaching the affected populations. We need the CSOs backing to push the agenda

CSO have not data backing their implementation. Going forward there must be structure to push the voice of CSOs. The new funding model provides some way of engaging the fund to get a good amount to address their concerns. CSOs are sleeping giants in Ghana. We are all fight individually and that is how we cannot succeed. Without us they are not there. We need to function as one body in demanding our share. Taking NAP +and GNet for example they are excluding other community models that could address the problem such as peer groups but we are only stacked to one model that is by the health facilities. Training lay dispensers could help make impact. The current approach is not making impact and we have to look more than that. There is the need for CSOs to present a position paper or petition to present it to fight their case.”

CCM Leadership & Performance: Asked to discuss CCM Leadership, they wrote: “The chairman`s performance was rated good citing his active participation in meetings and humility to serve. However they were not happy with vice chair. The vice chairman has not been very active in attending meeting. There is not much synergy between the chair and the vice. On the transparency, CCM must let the members know why the vice chair have not been attending meetings. There must be more transparent with issues. The other issues that raised was that executive is just a two member committee. You see more of the chair but the other executive members are less seen.” Asked how this could be improved on, they replied: “There is the need to ensure the elections are treated with much concern in electing members who could really do the work.”

Asked about measuring CCM performance they wrote: “Most stakeholders agree that current assessments of CCMs do not measure the quality of a CCM’s work, but just whether something is done. Last two years the GSM was here, leading the selection of the oversight committee, training and things they did and the consultants who came in. GIZ, Kenya, Ethiopia team have visited for some assessment. The assessment does measure the quality of work by the CCM one, not how well it is done.” Asked if this could be improved, they wrote: “They didn’t know the assessment process and could not offer much comment on that and have very little idea about the assessment and what it contains so they could not provide any comment on how to improve it.”

Global Fund Performance: Asked about the GF in-country representative team, they wrote: “They deal a lot with the CCM secretariat than Members. We can point to the country team experts deal with secretariat. The country team are more concerned with the implementation of the project.” Asked whether this could be improved, they wrote: “They have to also engage the constituencies during their country visits.” Asked about the CCM Hub in Geneva, they responded: “We know earlier there was a desk where countries could interact with but currently we are hearing about the hub but we don’t know their roles and responsibilities. They have no idea about the Hub.”

Peer Review: Asked whether non-member CSOs should have input on CCM EPAs and PIPs, they said: “No idea.” Asked whether fellow CCMS should peer review each others’ EPAs and PIPs, they responded: “No idea.”

Other Issues: Asked to raise any other concerns, they wrote: “The secretariat has only two staff which is not good for the work. This has effect on the functionality of the CCM work. They had plan for a front desk to address the concerns of members but since the budget

can't support that, it was not discontinued. The demand for performance is high and the workload is also high. This makes the work of the secretariat very stressful. We've covered all of the issues but the oversight committee there is no allowances to cater for their engagement. This greatly affects their motivation to work since there is nothing to support their work. Now they pay something small for CSOs membership. We recommend the chair must be given some facilitation allowances and possibly paid salaries The country team has not been helpful in supporting the secretariat work in the name of Conflict of Interest.”

Ghana Orange Data : FGDs for Non-CCM Members

CCM role: Asked what they thought the role of the CCM was and how they were performing against that mandate, they responded: “Non-CCM CSO had divided views about the roles and performance of CCM Mandate. The following views were expressed by those who knew about CCM: • They develop proposal for funds • They coordinate between organisations and the fund. • They select PRs and ensure the disbursement of the funds. • They coordinate reports • They follow up on fund utilisation at operation areas. Others were of the view that • They are not clear of the roles of CCM and how CSOs are selected. Simply the non-CCM members are not aware of the roles of CCM and their mandate. • The mandate of CCM is clear but they have not performed well. Because, they use consultants to develop their concept with little consultation of the CSOs. When it comes to budgeting, CSO are completely taken off. • Another respondent explained CCM excluded CSOs in the final budgeting following exclusion criteria. It was a structural exclusion. The new funding model for example has funds for capacity building for KPs but not for TB due to the exclusion of TB in the budgeting consultations. • The concerns of CSOs are not given priorities. • The CCM programming is focused on the public health system rather than strengthening the CSO part. The public health system is not able to fully utilize funds. We note in the development of country programmes, the concerns of the CSOs are not taken into consideration, it sways towards the public system and not CSOs. When that happens it turns out that the public system cannot spend budget to about 23%.”

Asked if this could be improved, they wrote: “Yes the CCM ought to enhance their visibility to both members and non-members. The criteria for selection of members to the board must be made clearer to all CSOs. CCM ought to engage CCMs more in the concept development so as to capture their issues of interest.”

Capacity-building: Asked whether capacity-building could play a role in improving CCM performance, they responded: “The low knowledge of the CCM by non-CCM members except the few who happened to be employees of SRs who knew about the GF didn’t give them enough grounds to answer this question.”

CSO Oversight: Asked to discuss the role that civil society plays in oversight, they responded: “CSOs have not been proactive in engaging the CCM. The CSOs are not forceful in such. Their voice is much needed in CCM’s engagement. CSOs are very fragmented in their representation on CCM they usually hold individualised interest in the representation other than the collective interest. Since the inception of the CCM this is the first time CSO have had the opportunity to head the CCM and CSOs have to take advantage of the opportunity. The CCM engages consultants to develop the concept. CSOs are practically not involved- the decisions taken are mostly not reflective of CSOs concerns. There are structural challenges that excludes the participation of majority of CSOs. A major challenge to CSOs role in engaging the CCM is the challenge to ensure that the representatives have the technical capacity and competence to represent their constituencies.” Asked if this could be improved they wrote: “Yes I could be done better: CSOs must come together in providing priority list to CCM. The process for the select of representative must ensure quality and must be participatory.”

CCM Engagement: Asked how the CCM engages, they responded: “The majority had no idea on how constituency consultations are done. The few who did had this to say. The constituency consultation depends on representatives of CSOs on CCM Since some have low capacity and competences they are not able to rightly engage their constituents.” Asked if this could be improved, they wrote: “Yes it could be improved if member CSOs on CCM report back to their constituents CSOs research into the issues of need from their constituency before attending CCM meetings. There must be criteria for selection and orientation of members CSOs must have one voice on issues of our priority.” Asked whether civil society was able to engage in GF and CCM processes, they responded: “CSOs are not involved in budgeting and validation of budgets. The process is not participatory and inclusive.” Asked how this could be improved: “The CSO shadow team should generate voices from constituents. They should collate views on priority areas form their constituencies.”

Communications: Asked how communications occurred within the CCM and between the CCM and other stakeholders, they wrote: “Except constituencies that are represented on

the CCM who gets communication from CCM, other stakeholders who are not represented on the CCM or doesn't belong to a constituency are left out the communication process. Participants from the different non-CCM groups present expressed communication with CCM. The representative for coalition of NGOs doesn't communicate CCM issues with their constituencies TB coalition however expressed a good communication between CCM the coalition. The academic representative on CCM hardly communicates with its constituency." Asked what barriers obstructed communications, they wrote: "They could be attributed to the institutional weakness of CSO in CCM representation." Asked how this could be improved, they wrote: "• Yes by building the capacity of CCM to improve their knowledge and skills in communicating with their constituencies. • CSOs should set disease specific platforms to open up discussions • CCM must hold open forums where CSO could participate as observers • CCM should be doing more in communicating through newsletters, brochures etc."

Conflicts of Interest: Asked whether conflicts of interest were managed, they wrote: "There are representatives in CCM whose organisations are implementing global fund projects. The representatives in CCM's organisations have had a good growth at astonishing rate. When Dr. Naa used to be a member of the oversight committee on malaria, she use to get project because her membership Rural watch refused a cheque from TB because he is a chairman of CCM. The current constitution makes it difficult to clarify conflict of interest. What is currently missing from the current conflict of interest policy is that: • There are no guidelines as to how much funding one can get when you enter CCM. • There is no independent monitoring team. • Key decision are taken without validation. • Things are done at the eleventh hour that close the space for CSO's validation of budget. • CSO are mostly not accountable." Asked how this could be improved, they wrote: "• Policy guidelines ought to be provided for the conflict of interest policy • CSO must be supported to play watchdog roles. • CSO can play the monitoring role • The whole process should be transparent • CSO must be accountable to themselves."

Asked whether PRs should sit on the CCM and whether the MoH should surrender its seat to another ministry if it was the PR, they wrote: "PR should be members of CCM. PRs such as the MOH brings on board a great resource in policy formulation and technical support. Government cannot direct funding, if government PRs are CCM members they would greatly influence policy."

CCM Leadership & Performance: Asked to discuss CCM Leadership, they wrote: "CCM leadership develops strategies to help utilize the full funds. They offer consistent help to

programmes. They introduce programme such as the Dashboard to follow the PRs implementation of programmes. They have good leadership style and are innovative. They call house to order in fund utilisation to ensure funds are not returned to chest.” Asked how this could be improved on, they wrote: “There is the need to establish a public accounts hearing in addressing issues of programme areas. Currently a CSO was cut off from malaria funding but the rationale behind that is unknown. There is the need to create space and platforms to update members from CSO and Academia to receive inputs.”

Inclusion: Asked whether there was meaningful engagement by women, girls and LGBTI people, they wrote: “Ghana has had issues with the procurement of substandard condoms. Participants wonder if the process of measuring quality was rigid, this issue wouldn't have occurred. Currently the assessment process is done at the CCM office with little engagement at the field of implementation.” Asked how this could be improved on, they wrote: “The end users of product must be engaged in the quality measures. Visitation must not be limited to the CCM office but must touch the countryside where projects are implemented. The inspector general should have time to stay in the country because his days spent is not enough and not able to do a thorough assessment.”

Peer Review: Asked whether non-member CSOs should have input on CCM EPAs and PIPs, they responded: “• Various CSO platforms needs strengthening for assessment. • Malaria/TB needs to be improved and separate from TB control • There must be strong voice to advocate for CCM • An alternative assessment report is needed to identify loopholes • There must be more CSO engagement • Continuous CCM meetings on TB partnership • Accountability forum on disease platforms.” Asked whether fellow CCMS should peer review each others’ EPAs and PIPs, they responded: “Participants did not have knowledge of such.”

Advocacy: Asked about civil society’s major complaints about their CCM they wrote: “• CSOs are less aware of CCM and its activities • There is lack of communication between non-member CSOs and the CCM • Non-member CSOs faces a lot of funding challenges. The funding module provides very little funds for advocacy compared with the purchasing of logistics and supplies. • CSOs are concerned about the sustainability of programmes • The fund allocation for CSOs activities is very low • They have concerns about the transparency and accountability of the CCM considering their concerns of being sidelined when it comes to budgeting and validation of budgets • The short and late time frame for the preparation and validation of budgets is of major concern • CSOs require their capacity

to be built on accountability of funds • CSOs also demand for leadership thus community system strengthening is a critical part of capacity-building process •

CSOs should have an improved budget allocation as currently most of the funds go to the public service.” Asked what could be done to improve this, they responded: “The recommend that CSOs should do an analysis of the ending model and ensure that the challenges are address and not repeated in the new funding model.”

Other Issues: Asked to raise any other concerns, they answered: “CSO will have to collect evidence of their activities and its impact to push for a case to increase their allocation. CSO should look beyond CCM for TB and Malaria funding.”

Findings

Finding 1:

Both members and non-members of the CCM have very little knowledge of the EPA tool since assessment usually is done by consultants with the secretariat. There is a major gap for CCM members knowing and understanding the assessment processes. Many indicated they do not know or haven't seen any such assessments as the consultants' only deal with the secretariat.

Finding 2:

The concern for the engagement of technically sound representatives on the membership of the CCM and not just the swelling of membership based on the guiding principles on engagement. The CCM sees their work to be much technical and therefore rather sees it as important to engage much more technically qualified members rather than engaging people just because they have a lived experience. One challenging issue that this concern creates is the consideration for the representation of MSMs and FSWs who are always represented by interest NGOs. The CCM currently does not deal with such groups although they have provided training for such constituencies through their interest NGOs. This they discuss as a problem of their legal representation as groups in Ghana. Groups such as FSWs and MSMs are not legally permitted in the country and the CCM considers this as a major challenge as their engagement may be interpreted as a breach of the law.

Finding 3:

The funding processes does not favour the non-governmental PR groups since a major portion of the funding goes to the government sector who most of the time have a low burn-

out rate of the funds. The CSOs see a lot of work in sensitisation, advocacy and constituency engagement which most times is not supported by the funds. The current process of consultants' engagements for the concept note development gives little opportunity for the engagement of CSOs and KAPs in its development process. This provides little opportunity for the inclusion of their concerns for funding.

Recommendations

Priority Area 1:

Training on assessment tools and its importance to the activities of the CCM and the fund. The training must involve CCM members and Non-CCM CSOs who are advocates in the three priority diseases. The knowledge and understanding of the CCM activities, the fund access and the importance of the assessment would better strengthen country watch activities and further contribute to efficient and timely use of resources. This training could be organised by EANNASO in collaboration with the country teams.

Priority Area 2:

EANNASO may have to consider supporting country teams to engage much with the CCM as Observers to CCM meetings and also to share the results of the study. It's important that the results of this survey are shared with CCM members and all who participated in the survey at a round table, so that collectively they can identify areas of strengthening for the effective functioning of the CCM. It would equally be useful for country teams to be resourced to monitor and participate in constituency engagements and report on their activities and how they can influence decisions taken at the CCM

Priority Area 3:

The need to support in-country CSOs and **CGs** to develop tools in monitoring the PR and SR activities, most especially the KAPs' constituencies to follow-up the fund utilisation processes.

Abbreviations

AAI = Aids Accountability International

CCM = Country Co-ordinating Mechanism

CI = XXX

CG = XXX

CSO = Civil Society Organisation

CS = Civil Society

CSW = Commercial Sex Workers

EANNASO = Eastern Africa National Networks of AIDS Service Organisations

EPA = Eligibility Performance Assessment

FBO = Faith-Based Organisation

FGD – Focus Group Discussion

FSW = Females who have Sex with Women

GF = The Global Fund

GFATM = Global Fund for AIDS, Tuberculosis and Malaria

HIV = Human Immunodeficiency Virus

ICC = XXX

IDU = XXX

INGO = International Non-Governmental Organisation

KAP = Key Affected Populations

KP = Key Populations

MDR TB = Multi-Drug-Resistant Tuberculosis

MSM = Males who have Sex with Men

NFM = XXX

NGO = Non-Governmental Organisation

NPO = Non-Profit Organisation

OIG = Office of the Inspector-General

PAM = People Affected by Malaria

PATB = People Affected by Tuberculosis

PIP = Performance Improvement Plan

PLWD = People Living with the Diseases of HIV, TB and malaria

PLWHIV = People Living with HIV

PR = Primary Recipient

PSM = XXX

RFA = Request for Application

SR = Subsidiary Recipient

SSR = Sub-Subsidiary Recipient

TB = Tuberculosis

TNCM = Tanzania National Co-ordinating Mechanism

WAPCAS = West Africa Project to Combat HIV/AIDS