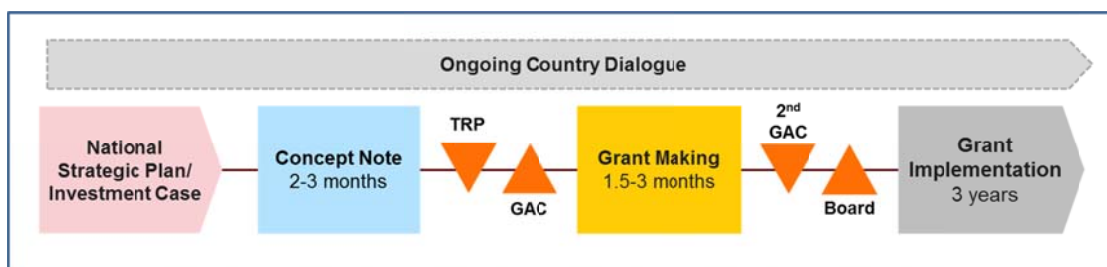


ANNEX 2: Information Note- Country Dialogue

Defining Country Dialogue

1. “Country dialogue” refers to the ongoing process that occurs at the country level to develop health strategies to fight the three diseases and strengthen health and community systems. It includes national strategic planning processes, mid-term and program reviews and other partner-led processes.
2. Country Dialogue should be open, inclusive and participatory and include implementers; the government – including the National Ministries of Health, Finance and Planning; the private sector; the public sector; civil society; academia; networks of key affected populations¹⁸ including women’s organizations; people most who are vulnerable based on the epidemiological context, including people living with the diseases; bilateral, multilateral and technical partners and other key stakeholders.
3. Country Dialogue is nationally owned and led, and is not Global Fund-specific. The Global Fund is as an active participant in this process. The process should enable CCMs to identify program components for which Global Fund financing can be requested. The basis for these components should be a robust national strategies developed through an open, inclusive and participatory processes. Country Dialogue should also facilitate multi-stakeholder involvement during the grant-making stage and inclusive discussions surrounding oversight of Global Fund grant implementation.



Outcomes of Country Dialogue

4. Country Dialogue outcomes should include strengthened multi-stakeholder involvement in the development of health sector strategies and national disease strategies, and the improved coordination, relevance, and effectiveness of the disease program response. Specifically, strong engagement of civil society organizations, in particular key affected populations and community-based organizations is essential to Country Dialogue.
5. The development of a concept note to be submitted to the Global Fund is one output of Country Dialogue. However, it should be embedded in the context of the broader, ongoing Country Dialogue with all relevant stakeholders that results in national health sector and disease strategies. Through this process, CCMs can ensure that funding requests are aligned to national strategies and national planning cycles; that high impact and evidence-based interventions are prioritized in concept notes and that key Global Fund requirements are met for example related to the protection and promotion of human rights and gender equality, and the inclusion of key affected populations.

¹⁸ Defined KAP in the NFM include: women and girls, MSM, Transgender, PWID, SW, prisoners, refugees and migrants, people living with HIV, adolescents and young people, OVCs and populations of humanitarian concern

6. In cases where the national strategy is weak, outdated, was not developed in an inclusive and participatory manner, and/or does not meet partner-led criteria (such as the JANS criteria), the Country Dialogue process should be used to identify and address these gaps in order to produce a strong national strategy. Where the national strategy is weak or outdated, country dialogue will lead to the determination of a full expression of prioritized demand as the basis for a concept note, based on the strategic investment guidance from technical partners. In the case of HIV/AIDS, an investment case can be developed as the basis for the concept note.

Key elements in the Country Dialogue process

7. Country Dialogue should ultimately result in a robust health sector strategy, through which synergies between the three diseases and other health priorities are achieved. The ideal goal is that this strategy is fully costed and has been developed through a multi-stakeholder process. In order to achieve this the following elements are critical:
 - **Documented evidence of impact:** Conducting program evaluations and other research to determine outcomes and impact of programs including capacity assessments of health and community systems to deliver services;
 - **Disease and health sector landscape:** Forging a common understanding of a country's disease and health sector landscape including latest epidemiological studies and identifying data gaps; areas for coordination and partnership; and any weaknesses in health or community systems that could affect disease programs;
 - **Human Rights and Inclusion:** Ensuring meaningful participation of people living with HIV, TB or malaria and key affected populations in design, implementation, and monitoring of Global Fund-supported programs, including an assessment of any legal or policy barriers to service access, and designing programs to address those barriers; and
 - **National, Donor & Global Fund investments:** Mapping the funding landscape and ensuring alignment and complementarity between donor and national funding in the overall budget for the disease response.

Role of the Global Fund in Country Dialogue

8. Country Dialogue will vary across all countries based on national planning processes for the health sector and for each of the three diseases. The Global Fund Secretariat will take an active role in Country Dialogue, through increased engagement with country stakeholders, and will work with partners to ensure support at key points in the process. Active engagement will occur prior to the development of the concept note and continue during grant-making and grant implementation to maximize the impact of approved funding.
9. Spending more time in country will provide the Secretariat with the opportunity to conduct extensive dialogue with all partners and to engage them in reviewing available analyses of impact data to facilitate their work in guiding the development of the concept note. Examples include participating in program reviews or mid-term reviews and participating in donor coordination meetings or facilitating safe spaces for secure consultations with key affected population networks and civil society where necessary.

Country Dialogue during Concept Note Development

10. A robust, inclusive and participatory Country Dialogue will allow the preparation of Concept Note aligned to national strategies, and the following outcomes:
 - **Good governance:** a properly functioning and inclusive CCM and defined roles and responsibilities in concept note development. This includes ensuring meaningful participation of key affected populations, and, where relevant, that partner support is mobilized and expectations defined in terms of technical guidance and support in prioritization;
 - **Alignment:** a timeline for concept note development and submission based on funding needs, national strategy and in-country planning cycles, Technical Review Panel review windows as determined for the next three years;

- **Willingness to Pay commitment**: A commitment from relevant ministries represented in the CCM to increase national financing for the disease response, in order to receive willingness to pay component of indicative funding allocation;
 - **Country-level Program split**: an agreed split of indicative funding between the eligible diseases to be requested from the Global Fund; including a possible allocation to cross cutting component such as Health Systems strengthening efforts;
 - **Portfolio Analysis**: the inclusion in the concept note on feedback from the Global Fund Secretariat on past performance, risk and compliance with Global Fund's minimum standards for PR and CCMs;
 - **Differentiation**: determining the most appropriate funding model and application process based on various factors such as type of applicant, size of investment and risks factors;
 - **Implementation Arrangements**: defining the implementation arrangements soonest possible in line with past performance, risk and compliance with minimum standards for PRs, and the identification capacity building measures as relevant;
 - **Concept Note**: a concept note presenting a full expression of quality demand.
11. The CCM will lead the development of the concept note. While the Secretariat will not be involved directly in the writing of the concept note, they will be available to provide feedback to and iterate with the CCM and partners on specific aspects of the concept note. In exceptional cases, the Secretariat may facilitate an early engagement with the TRP as necessary.
 12. Concerns amongst CCM members about representation of all stakeholders during the concept note development process should be addressed within the CCM. If the concerns cannot be resolved they can be escalated to the Fund Portfolio Manager, who can involve management and other departments within the Secretariat as required.

Country Dialogue during Grant Making

13. Grant-making is participatory process, led by the PR, involving the same key actors (including but not limited to the CCM, implementers, technical partners, key affected populations and civil society) that took part in the design of the concept note. The CCM provides oversight of the grant-making process, the development of implementation plans, and the selection of SRs.
14. The continued involvement of these key actors during grant-making will ensure that as implementation details are defined, activities are focused on target groups and effective interventions are designed to reach the objectives of the national strategy:
 - key affected population and civil rights groups will assist in ensuring barriers to accessing health services are addressed
 - Involvement of implementers will ensure activities are implement-ready with risks to implementation addressed in the design stage.
 - involvement of technical partners and national authorities will help ensure the design of proven effective interventions aligned with national strategies
15. During grant-making the PR and the Fund Portfolio Manager will work with the CCM to monitor deadlines, discuss changes which may need to be made to the interventions, and resolve bottle-necks to a timely start of grant activities.

Country Dialogue during grant implementation

16. Ongoing Country Dialogue during grant implementation will ensure the PR is supported in a successful implementation of the grant and that implementation continues to be aligned to national health sector strategies. It includes the following activities:
 - CCM continue to meet all minimum requirements including participation and in the implementation of oversight plans. The PR and members of the CCM are involved in program reviews and ongoing discussions to improve the national disease strategies;

- PR share information on the ongoing implementation of grants with CCM and work with CCM to resolve implementation bottle-necks and mobilize technical assistance;
- CCMs ensure strong and ongoing dialogue with their constituencies. Technical partners provide ongoing support to CCM partners, including the mobilization and use of Global Fund CCM funding to support oversight;
- The FPM provides ongoing feedback to the PRthe CCM and technical partners, on grant performance and key implementation risks; and
- Opportunities to reprogram grants to enhance the effective use of Global Fund resources are pro-actively identified based on reviews of national strategies, new evidence and changes in national context.

Roles and Responsibilities in Country Dialogue

17. An illustrative list of roles in country dialogue is summarized below:

CCM or RCM	<ul style="list-style-type: none"> • Lead the development of concept notes and process to nominate PR(s) • Base request for funding on national strategy processes • Determine optimal timing of funding requests • Convene inclusive dialogue among the three disease programs as well and Health and Community Systems stakeholders in order to agree on program-split • Provide oversight of grant-making and grant implementation through oversight plan.
Key affected Populations	<ul style="list-style-type: none"> • Provide ongoing and meaningful input into development of strategy and funding request through pre-dialogue caucuses • Ensure the final concept note and grant-making takes into account needs and perspectives from all key population groups in line with the socio-epidemiological context of the country • Help identify and monitor legal or policy barriers to services as well as barriers to service uptake related to the quality of services and/or program design • Help identify key components related to Community Systems Strengthening efforts to be included in the funding request
Ministry of Health / Planning/ Finance	<ul style="list-style-type: none"> • Full involvement in CCM processes and key role in ensuring a country dialogue occurs • Ensure coordination of various planning processes across donors with respect to disease response • Define and follow up on willingness to pay commitment
Technical Partners: in country	<ul style="list-style-type: none"> • Discuss disease / health sector landscape with in country stakeholders, including mapping of donor commitments and ensuring alignment. • Support the development of an accessible depository (knowledge base) of country studies, available data, etc. • Assist in identification and prioritization of strategic investments for robust NSPs and CN / documentation of national prioritization process • Input in discussions around disease split & cross-cutting Health and Community Systems Strengthening efforts • Review program performance and impact data & current trends of epidemiological context • Provide technical support to country • Support key populations meaningful engagement by providing special “safe space” meetings with KAP in contexts where their security is not assured • Ensure domestic or regional experts are included as needed, for instance to support KAP with identifying human rights barriers to access or CSS needs
Technical Partners: global level	<ul style="list-style-type: none"> • Collaborate with Secretariat to develop Strategic Investment guidance • Provide input to Secretariat ahead of TRP review processes • Participate as external members in Grant Approval Committee

	<ul style="list-style-type: none"> • Provide and help coordinate technical support and guidance to countries and regions • Assist in ensuring relevant networks and civil society are invited to Country Dialogue discussions or are being meaningfully represented • Provide technical feedback to TRP
Secretariat	<ul style="list-style-type: none"> • Support an inclusive dialogue process • Facilitate access to technical assistance • Engage with countries to determine specific access to funding timelines • Provide feedback on performance of existing grants and strategic investments through the Portfolio Analysis, the iterative process and on-going feedback during implementation • Communicate availability of funding and apply qualitative factors to determine funding levels • Discuss split between diseases and cross-cutting Health Systems Strengthening efforts
Principal Recipients	<ul style="list-style-type: none"> • Lead a participatory grant-making process • Share information on-going implementation with CCM and other stakeholders • Work with CCM to align Global Fund investments with national strategies
Other Funders	<ul style="list-style-type: none"> • Involvement in country dialogue and co-ordination • Assist in development of funding landscape