

Annex II

TERMS OF REFERENCE

Host and grant management of the Robert Carr Civil Society Networks Fund

1. Introduction

This document describes the Terms of Reference for a Fund Management Agent (FMA) with substantial managerial experience to host and manage the Robert Carr Civil Society Networks Fund (RC-NF). This fund has been designed in close collaboration with the founding donors (Bill & Melinda Gates Foundation, Norway, UK, US) as well key members from the global and regional civil society networks working on AIDS¹.

2. Background

Funding environment

As the global response to AIDS has grown and matured, ironically services to meet the needs of those most affected by HIV have not grown at the same pace as funding and political attention. Despite the substantial growth in resources since 2000 (growth which is now flat lined and even declining) the capacity of countries to meet the needs of populations most impacted by HIV has not kept pace. In recent years donor approaches have altered so that HIV responses in general are becoming squeezed (with attention focused on “new” issues, such as maternal and child health or health systems), and new modalities emerging which result in funds being directed principally to local needs and thus by-passing the regional and global structures that are essential to build quality, well-focused responses. The other important shift in donor modalities leads to a preference for funding in bulk – small, strategic funding opportunities are now rare, as most donors try to move money in relatively large volumes to avoid internal transaction costs.

Despite the importance of civil society, and the regional and global networks representing grassroots work, there has been an overall trend that donors do not provide core funds or multi-year support to these groups, and funding is also haphazard and poorly coordinated. These issues undermine opportunities to develop a more strategic and coordinated civil society response to AIDS, and hamper opportunities for greater collaboration and joint working across networks dealing with similar or over-lapping issues. The inadequacy of support for community systems and mobilization limits opportunities to deliver the ambitious targets set in the UNAIDS Strategy 2011-2015 “*Getting to Zero*” and the 2011 Political Declaration on HIV/AIDS² both of which rely on the effective role and contribution of communities line. Insufficient support for civil society is also totally out of step with the approach of the Strategic Investment

¹ Global and regional networks that at different stages have contributed to the preparations of the design of the RC-NF include: Ecumenical HIV/AIDS Alliance, Global Network of People Living with HIV (GNP+), Global Network of Sex Work Projects (NSWP), International HIV/AIDS Alliance, International Coalition of AIDS Service Providers (ICASO), International Community of Women Living with HIV/AIDS (ICW), International Network of People who Use Drugs (INPUD), International Treatment Preparedness Coalition (ITPC), The Global Forum on MSM & HIV, the HIV Young Leadership Fund, the World AIDS Campaign (WAC), African Black Diaspora Global Network (ABDGN), AIDS and Rights Alliance for Southern Africa (ARASA), Eurasian Network for People who use Drugs (ENPUD), African Sex Workers Alliance, Caribbean Vulnerable Communities Coalition (CVC), African Men for Sexual Health and Rights (AMSHer), National Empowerment Network of People Living with HIV/AIDS in Kenya (NEPHAK), Asia Pacific Transgender Network (ATPN), and Eurasian Harm Reduction Network.

² *Intensifying our Efforts to Eliminate HIV/AIDS*, Political Declaration of the 2011 UN General Assembly

Framework³, which is now underpinning emerging responses to AIDS, including the recently approved Global Fund Strategy, "Investing for Impact" (2012-2016).

Focus of the RC-NF

Inspired by the life and work of Dr Robert Carr, the RC-NF takes as its principle focus **inadequately served populations**. This term is used to refer to those populations who shoulder the burden of HIV in a given context, yet receive inadequate responses and insufficient resources to meet their needs and to reverse the impact of the epidemic. There is often a profound dissonance between the impact of HIV on particular populations and the level of service delivery in place to meet their real needs.

For a number of years UNAIDS (and others) have urged countries to "Know Your Epidemic". This is essential to know which populations are most affected and have greatest need. Inevitably the populations whose needs are greatest, and those who are inadequately served, will vary between and within countries, regions and localities. Fundamental to "knowing your epidemic" is being able to identify those people who are living with HIV, as well as those (sub)populations most affected and at risk.

Despite the stress on knowing the unique epidemic dynamics, many countries have scaled up their programmes and delivered most resource and service to groups whose needs are less urgent, yet they rarely manage to provide the resources and services needed by those populations most impacted or in need. Part of the problem the Fund aims to address is the dissonance between the real lived need of communities and the policies and programmes that seek to deliver an effective response to AIDS.

In every nation that reliably collects and truthfully reports surveillance data, gay men and other men who have sex with men, women and men who use drugs, prisoners, sex workers of all genders, and transgender people have higher HIV risk, mortality and/or morbidity when compared to the general population. These are not the only key populations, however. In a number of localities women and girls, people living in rural areas, or others could be among those that are inadequately served, if there is a particularly high level of HIV impact, and insufficient responses.

In some settings there is a relatively high level of investment in services (although rarely proportional to the need) but the services provided are perverse and not targeted to the real needs of these populations (e.g. services rescue sex workers, or force drug users to be "rehabilitated"). Similarly if there is a particularly high level of HIV impact in a particular locality (e.g. a prison or an urban settlement), but nationally scaled up services do not reach these localities, then these populations will also be "inadequately served" since there are services that cannot meet their real needs.

There are also populations that are truly under-served – notably transgendered people who rarely receive HIV prevention or care services addressed to meet their needs. Often the most marginalised communities can only become visible through trans-national (regional or global) efforts since the level of marginalisation and stigma is so great at local level that it becomes impossible for groups to organise or feel safe being visible. This despite the very high rates of HIV, and acute HIV needs that they face.

³ "Towards an improved investment approach for an effective response to HIV/AIDS", B. Schwartländer, et al, www.thelancet.com, Published online June 3, 2011, DOI:10.1016/S0140-6736(11)60702-2

It is important to stress that the gap between need and service must be defined locally using good “Know Your Epidemic” practices and a profound understanding of the need for scaled up community mobilisation as a vital component of the response. The needs are not only found among the key populations usually cited (and listed above). In many settings there are “sub-groups” of key populations who are particularly poorly served, such as young men who have sex with men and women who inject drugs, as well as among prisoners, whose vulnerabilities are intensified by being incarcerated or in other closed settings. There are also often less obvious sub-populations whose needs are often not met, such as women and girls living in urban settlements in major cities of countries experiencing hyper-endemics. In all contexts women, men and children living with HIV are key populations whose needs must be fully addressed.

Process to design the Robert Carr Civil Society Networks Fund

Over the past two years the Free Space Process partners (FSP), a consortium of 11 global HIV networks⁴ supported by International Civil Society Support (ICSS), have been working together with UNAIDS, and more recently additional regional HIV networks, to address these constraints and create a new funding mechanism, previously known as the Networks Capacity Building Fund (NCBF). The aim was to address emerging gaps in resources for global and regional civil society and community networks, in particular the core funding needs of networks of key populations and people living with HIV. This new funding mechanism aims to be evidence informed, strategic and result focused, and to strengthen the quality of support to civil society groups and communities living and affected by with HIV at the country level so that national responses are more effective in meeting their needs. In particular there is substantial concern that, despite the increase in resources for more action on AIDS, many of the populations most in need of services are inadequately served by local HIV responses. Civil society networks are uniquely placed to understand these populations, since they have good reach to the community level, and are usually representative of those people facing the most extreme impact of the epidemic.

The broad intent is that the RC-NF will attract and disburse resources through global and regional civil society networks. The expectation is that the work of these networks will impact on national HIV responses by strengthening the ability of local communities to play their part in delivering a more effective response to AIDS, provided by civil society, and delivered by government engaging with civil society groups. This will be achieved through highly effective advocacy work – giving voice to lived realities and emerging priorities – and by fostering collaboration and effectiveness between networks through enhanced synergies and division of labour. It is envisaged that this new fund, providing sustainable, multi-year support for these networks, will be in place by mid 2012 and will have the systems in place for effective transparent grant allocation in 2012..

This effort to develop this new RC-NF mechanism can be tracked back to the International AIDS Conference in Vienna (July 2010). A joint working group of donors and networks was established following this meeting and started to explore the dynamics under-pinning this situation, and began to discuss options to secure ongoing funding for the global and regional networks. In October 2010, at the time of the Global Fund Replenishment Conference, a larger meeting was held, hosted by US AIDS Ambassador Eric Goosby and UNAIDS Executive Director Michel Sidibe. At this meeting it was decided to take a two-stage approach to move forward, looking most immediately at the

⁴ The FSP brings together Ecumenical HIV/AIDS Alliance, Global Network of People Living with HIV (GNP+), Global Network of Sex Work Projects (NSWP), International HIV/AIDS Alliance, International Coalition of AIDS Service Providers (ICASO), International Community of Women Living with HIV/AIDS (ICW), International Network of People who Use Drugs (INPUD), International Treatment Preparedness Coalition (ITPC), The Global Forum on MSM & HIV, the World AIDS Campaign (WAC) and the HIV Young Leaders Fund (HYLF). The partnership is supported by International Civil Society Support (ICSS).

“emergency” short term funding needs to sustain FSP partners through 2011, and in parallel developing a new long term funding mechanism (which could be accessed by a more expanded range of partners) to meet the needs of global and regional community-based networks relevant in the AIDS response.

Under the guidance of the joint Working Group co-chaired by UNAIDS and ICSS and moderated by Ambassador Mogedal, a consolidated funding proposal was made to donors by 9 global networks (and in some instances their regional partners (this was all FSP partners except the International HIV/AIDS Alliance). While this funding proposal was for the networks’ 2011 budgets the dialogue to mobilize resources explored options and appetite for the longer term mechanism. The “emergency” resource mobilization mostly resulted in donors continuing (and in some cases modestly increasing) their contributions to networks they already supported. However, the process did enable the US government to deliver \$1.5 million to 5 FSP partners via through a simple “pass through” mechanism administered by UNAIDS.

Ambassador Mogedal stood down from her moderation role and a new Working Group was established, which had continuity with the original group and brought in a different group of donors who had expressed interest in supporting the new longer term Funding Mechanism that would pool, rather than earmark, resources. New civil society representatives were selected to represent networks beyond the FSP partners. The new joint Working Group sought a design team to develop a proposed design (or options) to establish the RC-NF. The design team has used a number of consultation approaches with civil society networks and donors, as well as reviewing other models for host, governance and management arrangements to develop the design of this new Fund.

3. Objective of the Fund Management Agent

The objective of the Fund Management Agent is to host the RC-NF and provide robust programme and financial management to enable the Fund to meet its goal that “Networks have sufficient and predictable resources to enhance the quality and effectiveness and gender equity of AIDS responses reaching inadequately served populations at local level, through global and regional action”, and to achieve the following outcomes of this Fund:

- Improved capacity of global and regional networks to support meaningful participation of inadequately served populations, in influencing policy at global, regional, and national levels such as: meeting universal access targets, ensuring high quality and equitable care, treatment and prevention support.
- Improved organizational capacity and technical expertise of inadequately served populations to design, access, deliver and monitor a full spectrum of prevention, treatment, care and support services that respond to evolving community needs.
- Improved organizational capacity and technical expertise of inadequately served populations to reduce policy and regulatory barriers, combat human rights abuses, stigma & discrimination and support access to legal services to meet community needs.
- Community organisations play a central part in ensuring that at local level all responses to AIDS have sufficient, strategically targeted investments to deliver results.

4. Scope of the Fund Management Agent

The Fund Management Agent (FMA) will have overall responsibility for ensuring effective and efficient management of the Carr Fund under the oversight of the governing body - the International Steering Committee (ISC), which will bring together founding donors and representatives of civil society networks. The governing body (ISC) will oversee the activities and procedures of the Fund, and will be responsible for guiding key issues

including communicating with new donors that would like to contribute to the Fund. The FMA will host and provide programme management and fiduciary responsibility for the duration of the fund.

5. Selection Process for the Fund Management Agent

The FMA will be selected through a fair and transparent process in line with international public procurement directives and procurement requirements of the founding donors. The process will be managed by UNAIDS, who will convene a Selection Committee that includes members of the RC-NF Working Group and other experts. The FMA should be a registered, independent not for Profit Organization. Organizations based in the global South are particularly encouraged to apply. Selection criteria will be a combination of both financial and non-financial factors and will be carried out in two stages:

- **Technical** – a detailed technical proposal as well as short biographies or abridged CVs of key personnel.
- **Commercial** – a detailed breakdown of costs including staff costs; admin and overhead costs; communication; travel and incidentals as well as any other indirect costs.

Respondents to this Request for Proposals to become the FMA of the RC-NF will remain responsible for all costs and expenses incurred by them, their staff, and their advisors. .

6. Requirements

It is a requirement of the RC-NF that the FMA has extensive knowledge and experience of working with donors; regional and global civil society networks, in particular organisations and networks run by key populations and people living with HIV.

The FMA will be responsible for defining its work programme under the oversight of the International Steering committee. Specifically it will be responsible for:

Hosting

- Receiving and administration of multiple donor funds.
- Developing and implementing transparent and cost effective administration procedures and systems for managing the RC-NF, including the selection of any staff required to conduct the business of the FMA in managing the RC-NF.
- Producing whatever documentation is required by donors to the RC-NF, including applications and timely reporting to secure ongoing, predictable resources for the Fund.
- Ensuring appropriate screening of potential grant beneficiaries, this should include fiduciary risk assessments as well as an assessment of beneficiaries' capacity to absorb and manage funds and deliver on expected results. Any risks identified should be reported to the ICS with a clear plan of how they will be monitored and managed.
- Based on decision by the ICS, drawing up grant agreements and ensuring timely disbursement of funds to recipients.
- Providing all the logistical and administrative support to the ICS and the Program Advisory Panel (PAP) needed for delivering on their mandates.
- Providing logistical support for selection and implementation of an independent Evaluation of the RC-NF as requested by the ISC.

Grant management

Responsibilities will include, but not be limited to, the following:

- Ensuring that grant recipients have systems for Monitoring and Evaluation (M&E), and that wherever possible the Indicators for M&E of grantee performance are compatible with those of the overall RC-NF Results Framework.
- Providing ongoing monitoring and support to grant recipients in line with donor requirements and advice from the ISC. Where strategic changes to the RC-NF initiatives are required, or where timeframes and budgets may require revision, the governing body (ISC) should be informed and given the opportunity to input.
- Collating and synthesizing reports for submission to the ISC, ensuring that all reporting is aligned with the results framework indicators.
- Working with the governing body to define a ToR (including indicators and realistic targets and milestones) for the overall monitoring of the RC-NF.
- Providing financial management, reporting & control and ensuring that financial propriety is maintained and that funds are spent for the required purpose.
- Appraising all annual reports and project completion reports.

Communication

- Working with the ICS to develop and implement an external relations and communication strategy.
- Putting in place a knowledge management strategy that will facilitate appropriate levels of information sharing amongst grant recipients as well as external stakeholders.
- Establishment and maintenance of good working relationships with selected grant recipients and other key stakeholders.
- Ensuring open and transparent communication on and publication of the activities and results of the RC-NF, both by the FMA and the RC-NF beneficiaries.

7. Reporting

The FMA will report to the International Steering Committee which will be made up of representatives from donors and civil society networks. The FMA will provide regular progress reports to the governing body, and attend governing body meetings on a six monthly basis to review progress and plan for the next six months. The reports should reach the governing body at least two weeks before the meeting.

8. Conflicts of Interest

Candidates for the FMA role are responsible for declaring any conflicts of interest between concerned parties. In particular this should include any conflict of interest between the candidates and members of the Working Group and/or the ICS and the Selection Committee. Any Candidate who fails to comply with this obligation could be

disqualified from the selection process. Candidates will also need to clarify how they will deal with potential situations of Conflict of Interest should they be selected.