

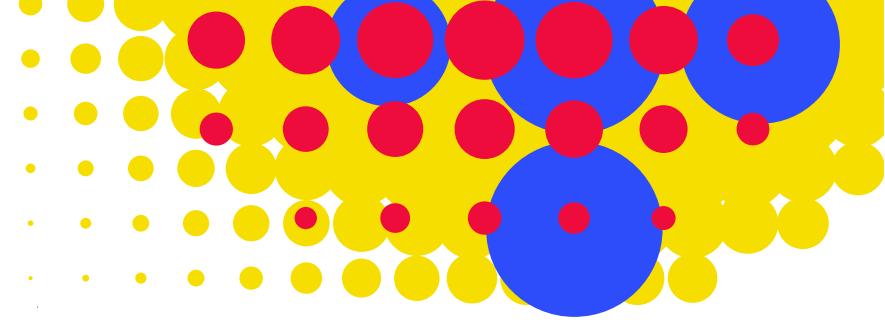


KPI C1 – Community Engagement Survey

GFAN Call

15 May 2024

What this slide deck covers:



- Background: What is KPI C1?
- What are we measuring?
- How are we measuring KPI C1?
- Results from First Survey: *Satisfaction with Funding Request Development**
- Second Survey: *Satisfaction with the grant making process**
- Tentative timeline for Surveys.

* for countries that submitted in W1-3

The Background...

The Global Fund's new **strategy aims to prioritize community engagement** and leadership for those most affected by HIV, TB, and malaria. In recognition of the criticality of this, the Board approved the development of the first ever Key Performance Indicator (KPI) which would measure the level of sustained community engagement across the Global Fund grant cycle: **KPI C1**.

This KPI responds to multiple assessments which have shown that community engagement **across the full grant life cycle remains variable** with weaknesses more pronounced during grant making, grant implementation and oversight.

The 2022 TERG Evaluation on Community Engagement and Community-led Responses recommended minimum standards be provided for community engagement across the grant life cycle and this KPI, along with other data sources to validate the results of the survey, seeks to measure satisfaction of communities with engagement across three key stages of the grant cycle:

Funding Request development, Grant Making, and Grant Implementation.



KPI C1 aims to measure the level of satisfaction of communities with their engagement across the grant cycle in all countries eligible to receive a Global Fund allocation.

What are we measuring?

Through desk review and community consultation, community engagement is measured through the following elements to determine progressive depth of engagement:

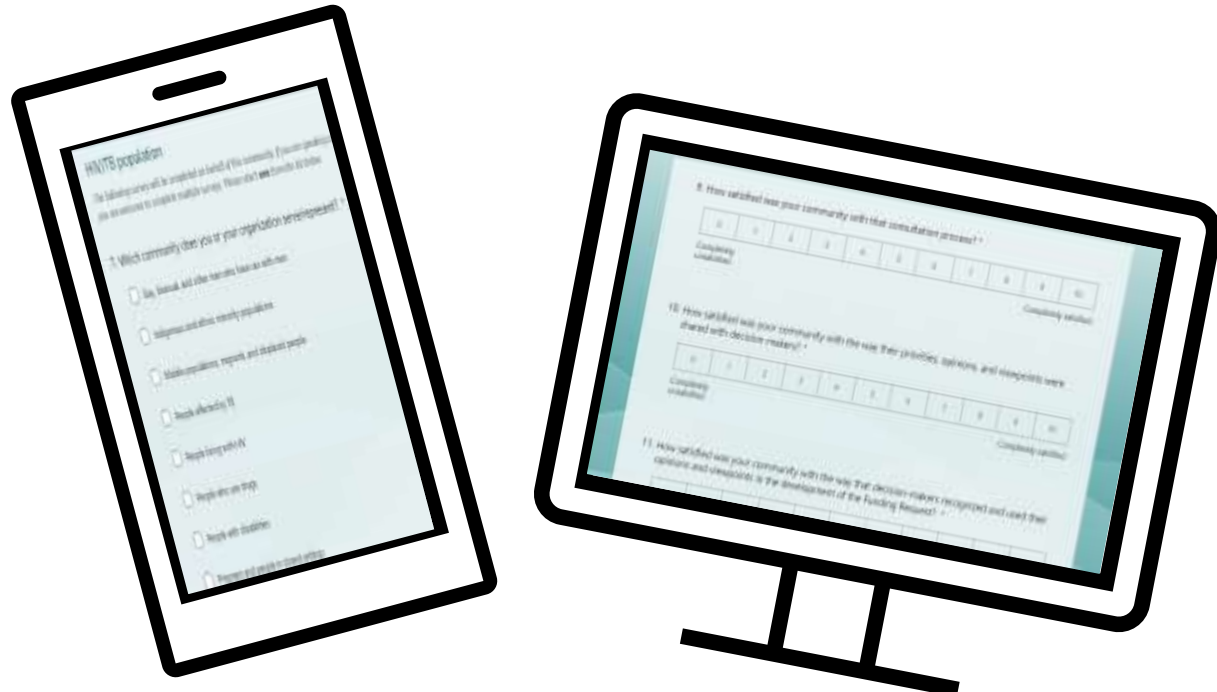


How are we measuring KPI C1?

To effectively measure KPI C1, we have launched the newly developed

Community Engagement Satisfaction Survey

designed to comprehensively measure satisfaction across three key grant stages, aligning with our commitment to promoting and enhancing inclusive and sustained community involvement.

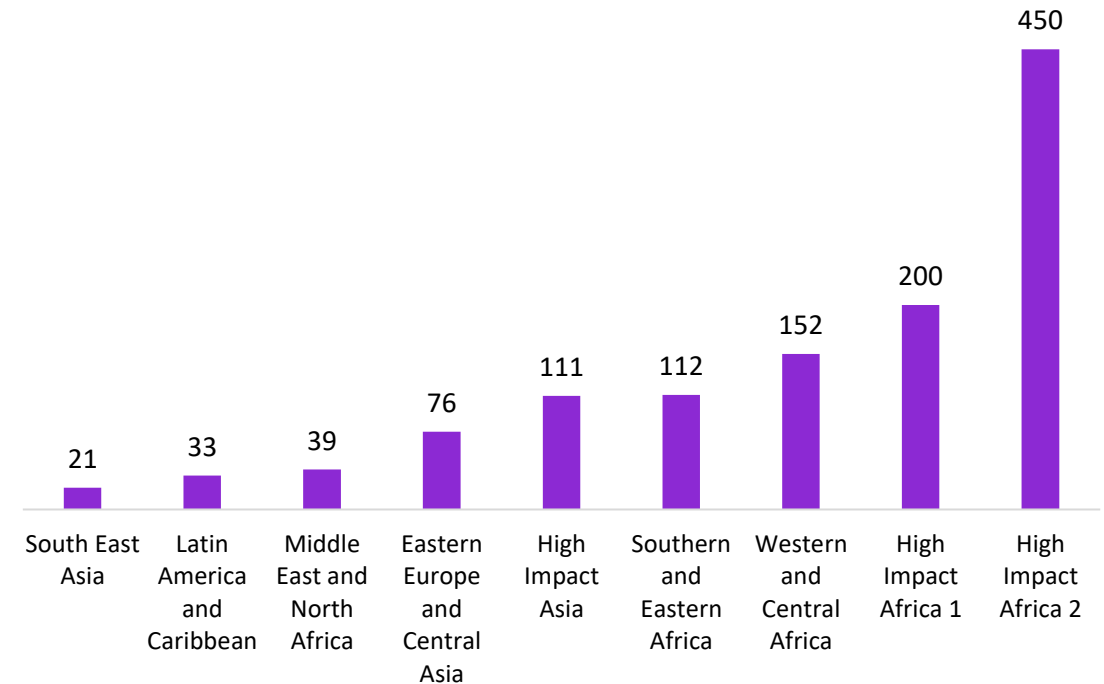


KPI C1 Performance Summary

Results from First Survey

- **KPI C1 result: 68%** (N=883). The KPI target for funding request development stage is not met.
- It is important to note that the reported results are based on a reasonable but poorly distributed sample size for the FR development process at Windows 1 through 3 only.
- As such, it is not yet possible to make definitive conclusions regarding relative levels of satisfaction of across key variables such regions, disease, and across/between the diverse range of communities who responded to the survey.
- Observations can be made on the following slides, however with the above noted limitations recognised.

Count of responses by region
N=1,194*

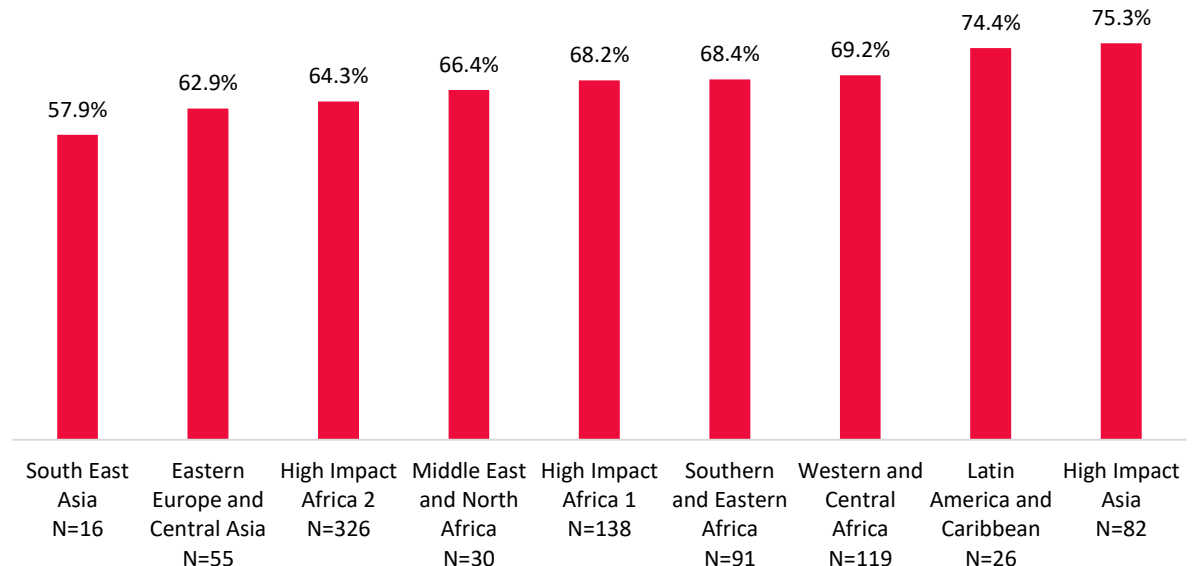


KPI C1 Performance Summary

Regional Variations

- Emerging is a potential variation in levels of satisfaction across regions.
- Communities from countries in **High Impact Asia** and **LAC** reported the **highest level of satisfaction at 75.3%** (N=82) and **74.4 %** (N=26) respectively, compared to EECA and SE Asia which achieved 62.9% (N=55) and 57.9% (N=16).
- At this stage and until a complete data set is available, the number of countries submitting to Windows 1-3 from each region needs to be considered before making any conclusions, as does variability in the number of responses from countries included in the current cohort.

Average satisfaction score by region

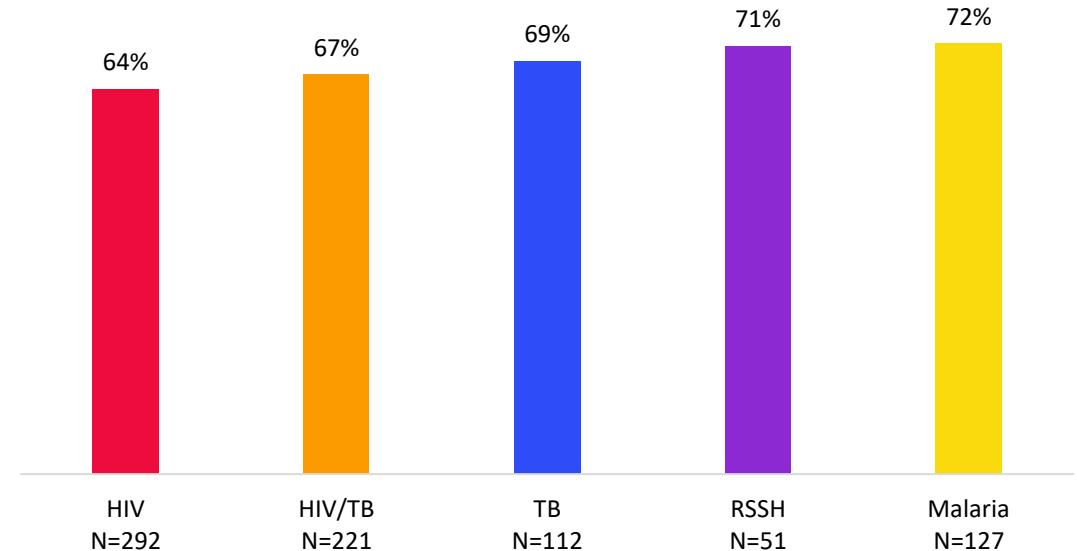


KPI C1 Performance Summary

Disease Variations

- In terms of disease components, communities engaged in the development of malaria and RSSH components reported the highest satisfaction levels with **72%** (N=127) and **71%** (N=51) followed by TB 69% (N=112), HIV/TB 67% (N=221). Communities who engaged in development of HIV components reported the lowest level of satisfaction **64%** (N=292).
- Should this trend remain evident at the portfolio level, it will be important to understand whether such variations are the result of 'lower expectations' of communities engaged in malaria, or a material difference in the degree to which GF processes facilitate their engagement.
- The ELO commissioned thematic evaluation planned for late 2024 may provide this opportunity.

Average satisfaction score by disease component
N=883



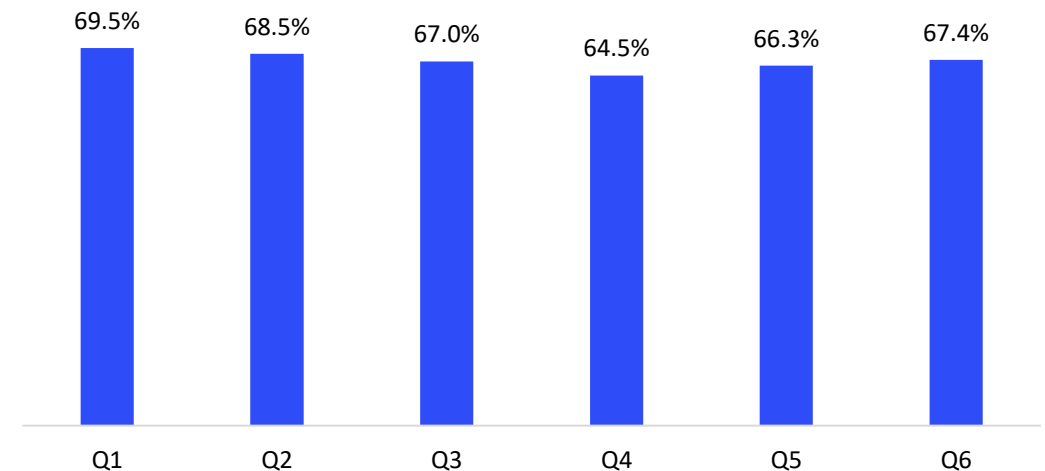
KPI C1 Performance Summary

Variations by Question

- Community respondents reported the highest levels of satisfaction with the **overall process 69.5%** (Q1, N=883) **but dropped to 64.5%** (Q4, N=883) when asked how their opinions were recognized and used in the development of funding requests.
- The divergence here likely reflects the complexities of 'being satisfied' in different aspects related to community engagement.

Key: Survey Questions
Q1: How satisfied was your community with that consultation process?
Q2: To what extent were you satisfied with the opportunities your community had to share their priorities, opinions, or viewpoints during the development of the country's Global Fund Funding Request?
Q3: How satisfied was your community with the way their priorities, opinions, and viewpoints were shared with decision-makers?
Q4: How satisfied was your community with the way that decision-makers recognized and used their opinions and viewpoints in the development of the Funding Request?
Q5: How satisfied was your community with the degree of influence their contribution had in the development of the Funding Request?
Q6: To what degree did your engagement in the Funding Request process provide an opportunity to build trust with decision-makers?

Average satisfaction score by question
N=883

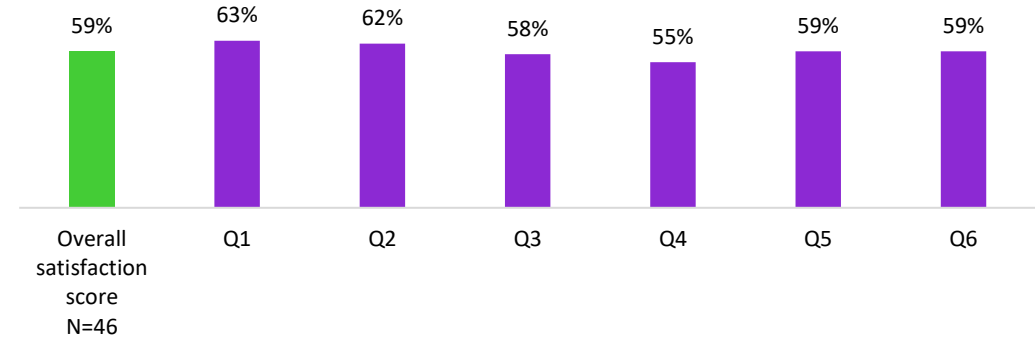


KPI C1 Performance Summary

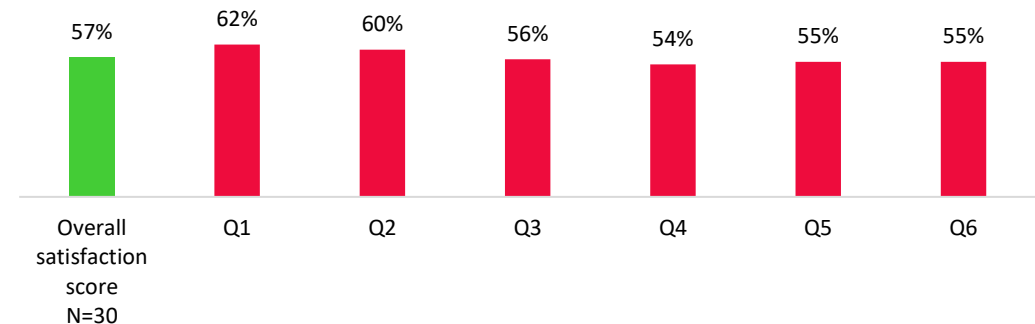
Variations within Communities

- Within disease components there are provisional variations in satisfaction evident within communities. For example, **people who use drugs reported a lower satisfaction score with the overall process of 59%** (N=46) compared to 64% (N=292) for all respondents whose communities engaged in HIV components.
- Importantly, 67.4% of respondents reported that their community's engagement in the Funding Request process provided an **opportunity to build trust** (Q6) with decision-makers however this was only 59% for people who use drugs and 55% for trans and gender diverse communities (N=30). This warrants further focus in subsequent reporting and in thematic evaluations as it implies that potential longer term and broader benefits to communities in terms of legitimacy and access are evident even in contexts where their direct and immediate influence over GF processes has been sub-optimal.

People who use drugs



Transgender and gender diverse people

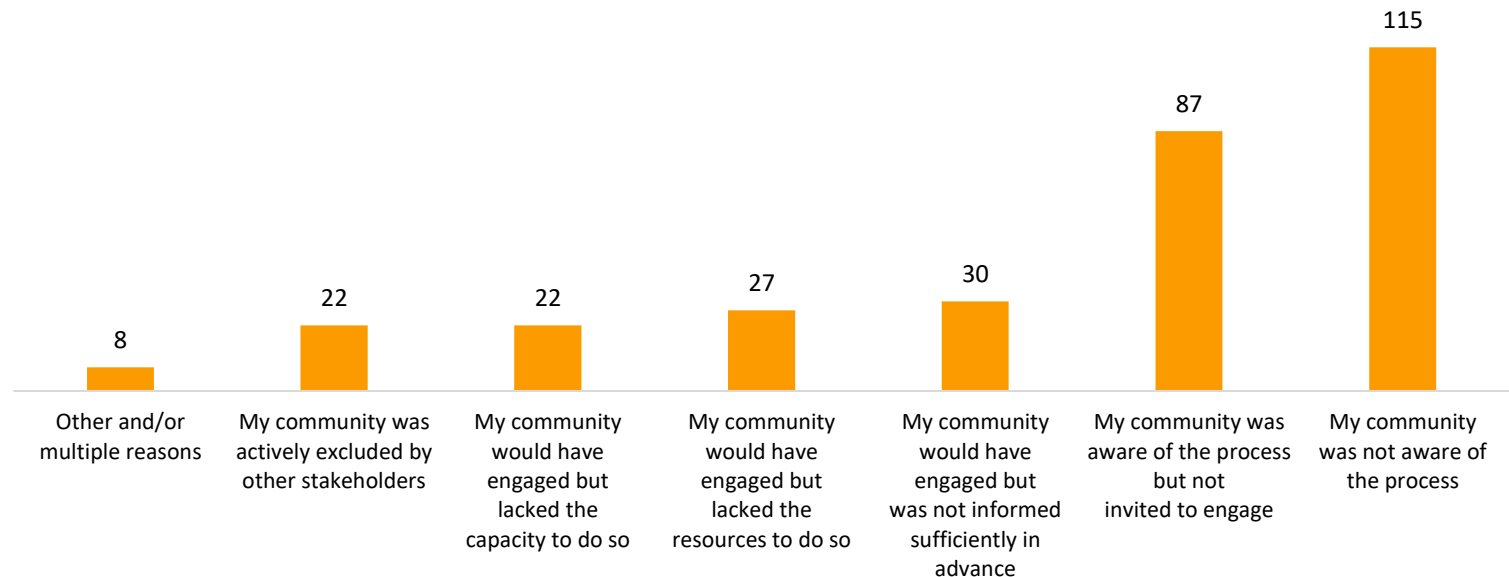


KPI C1 Performance Summary

Respondents reporting non-engagement

- **311 out of 1,194 respondents** indicated their community was not consulted in FR development.
- Communities with the highest proportion of respondents reporting that they were **not consulted in FR development** are people with disabilities (57% of 23 respondents); young people (46% of 56 respondents) and mobile populations, migrants and displaced people (45% of 22 respondents).
- The most common reason stated for non-engagement (37%, 115 of 311 respondents) **was lack of awareness of the process** (see graph)

Count of: Which of the following statements best describes why your community was not engaged in the development of the Global Fund Funding Request process?
N=311



Here is the Second Survey...

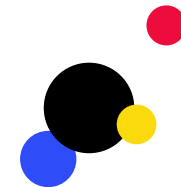


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Tentative Survey Timeline...

Tentative timeline for the surveys:

- W1-3 Funding Request survey. *(Completed December 2023 to January 2024).*
- **W1-3 Grant-Making survey, May 2024 - deadline 16 June 2024**
- W4-6 Funding Request survey, November 2024
- W4-6 Grant-Making survey, May 2025
- W1-6 Grant Implementation survey, September 2025



Regional Learning Hubs



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Satisfaction of communities with
engagement in Global Fund Grant
Making process

