

Regional Malaria CSO Platform, GMS:

Review

October 2017



MALARIA
FREE MEKONG
A Platform of NGOs

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Quotes

“It is clear that our CSO partners have made a large contribution to the success of RAI-1. The Regional Malaria CSO platform has been a watchdog for the proper implementation of the grant and played an important catalytic role.”

Prof. Arjen Dondorp
Chair, RAI RSC

“Expanding access to malaria prevention and case management services to those who are underserved is a priority. With the support of CSOs, we are able to better serve mobile, migrant, ethnic and vulnerable populations. Eliminating Malaria in the Great Mekong Sub-region will be impossible without the full support and involvement of community-based organizations.”

Eric Fleutelot
Regional Counsellor in Global Health
Embassy of France in Thailand
Member, RAI RSC

“The RAI RSC and the Global Fund Secretariat clearly recognize that NGOs are doing tremendous work on the ground for the benefit of all malaria at risk Mobile, Migrants, Ethnic community, and other Vulnerable Populations. We have achieved things that we thought were impossible with the commitment of many CSOs and the unique contribution by the Regional Malaria CSO Platform in the GMS.”

Izaskun Gaviria
Fund Portfolio Manager, The Global Fund

Acknowledgements

We would like to thank first and foremost the dedicated members of the CSO Platform. We gratefully acknowledge the Raks Thai Foundation and the RAI RSC, RSC secretariat, UNOPS and APLMA for their ongoing support to the CSO platform and for enabling this review.

We are particularly grateful to the Communities Delegation of the Global Fund to Fight AIDS, TB and Malaria, Global Fund CRG department, Global Fund RAI fund portfolio manager for their ongoing advice and support.

We also thank Mr Shreehari Acharya, Regional Malaria CSO platform coordinator and Mr. Bijaya Shrestha, Ph.D. Scholar, Mahidol University, Thailand, for their support to conduct this review.

Executive Summary

Since its establishment in 2014, the Regional Malaria Civil Society Organisation (CSO) Platform in Greater Mekong Sub-region has created a vibrant network with more than 50 organizations in the Greater Mekong Sub-region (GMS) that ensures strong links with malaria dialogue at country, regional and global level. The Platform is recognized by the Global Fund Artemisinin Resistance Initiative (RAI), Regional Steering Committee (RSC) as a key constituency in the region and was instrumental in ensuring civil society issues were integrated into, and funding for civil society secured, in the next Global Fund to Fight AIDS, TB and Malaria (Global Fund) grant (RAI-2 E). To date, more than six regional consultations have been held and a number of field visits facilitated bringing together CSO representatives from five GMS countries: Myanmar, Cambodia, Thailand, Viet Nam and Lao PDR. These consultations have positively contributed to cross-country learning and sharing as well as discussions around best practices and challenges. They have also facilitated the development of country and regional advocacy agendas.

The CSO Platform has succeeded in ensuring greater recognition of the importance not just of the role of CSOs in expanding service coverage to hard-to-reach populations, but also in increasing meaningful engagement in national dialogues, including the preparation of the RAI-2 E Global Fund grant. The Platform has achieved much in the first three years in terms of improving coordination, highlighting neglected issues, challenges and gaps and ensuring good information and communication across national and regional stakeholders as well as increased cross border coverage and programme focus. It will be important in the next phase that the Platform focuses on documenting evidence of the excellent work being done by CSOs to advocate to policy makers for change as well as work as part of national programmes, to ensure a strong and sustainable malaria response.

The following are a set of strategic, implementation and institutional recommendations coming out of this review:

Strategic recommendations

- In order to ensure sustainability after 2020, it is imperative that CSO responses are integrated into national responses, including national health budgets and domestic financing during the next three-year period, rather than be separate to national responses and viewed as competition. It is important to use existing systems and people rather than create new ones. Including national authorities in NGO and CSO Platform country-level planning meetings, where appropriate, would be a strategic approach.
- The CSO Platform should continue the role of watchdog, ensuring transparency and accountability of governments, UN agencies, technical partners, the private sector and CSOs. This includes accountability on the progress of implementation, with particular emphasis where implementation is lacking.
- For sustainability, there is a need for better liaison and integrated service delivery with CSOs working on other health issues such as HIV, TB, maternal child health, dengue fever and other regional issues.
- It is important to continue having a voice in the RAI RSC and at Global Fund Board level through collaboration with the NGO and Communities Delegation,

as this has been very effective thus far. However, the CSO Platform should ensure it is viewed as an entity separate from the RAI RSC, and not only related to the Global Fund and its grants.

- The CSO Platform should strengthen its strategic linkages with all regional organizations and networks, particularly around the issue of sustainable transition as the HIV and TB sectors are battling with the same issues. A united advocacy front will strengthen the CSO position.
- As the next phase is very much focused on implementation to reach the hardest-to-reach populations, the CSO Platform needs to make sure that organizations who work on social justice and human rights for migrants, ethnic communities and other hard-to-reach populations are part of the platform. It is essential that CSO Platform should not be limited to service delivery organisations.
- The CSO Platform should continue to ensure the issues of social justice, human rights, equity and gender are kept high on the regional malaria agenda.
- The CSO platform should increase direct communication and collaboration with the community representatives in each country CCM.

Implementation recommendations

The CSO Platform should:

- Document evidence of success and barriers as a priority during the next phase of the Platform. There is an urgent need to show national governments the evidence that it is effective and efficient to invest in CSO's as partners.
- Raise awareness of the importance of investing in building capacity of CSOs themselves rather than just providing support for delivery of services.
- Focus on activities that can show concrete outputs during the RAI-2 E phase and in so doing, set focused and achievable outcomes.
- Integrate the results of a recent regional mapping of the location of vulnerable/marginalised populations and the CSOs working on health geographically close to them, into planning.
- Ensure stronger connection with the media at national and regional level to increase awareness and understanding of the important role CSOs are playing in malaria elimination.
- Prioritize up to three advocacy issues and focus on them across the CSO Platform to demonstrate impact (*see Section 4.9 below*).
- Work with the Global Fund, RAI RSC secretariat and UNOPS (Regional PR) to document the CSO Platform as a best practice for ensuring CSO involvement in Global Fund processes.
- Develop an effective online platform and increase the social media coverage for the ongoing sharing of information between CSO members and other stakeholders.

Institutional strengthening recommendations

- In order to avoid inherent conflict of interest, a hosting organization should be sought for the CSO Platform that is not in receipt of funding from the RAI grant as an implementer. It would also be strategic to consider an organization with a broader health and/or migrant focus.

- Conflict of interest should be carefully considered when selecting the next two CSO Representatives to the RSC. These individuals ideally should not be working with an organization that is a recipient of a RAI grant so they can represent the platform on the RSC and other related committees impartially.
- Funding should be raised to support a CSO Platform Secretariat that would include a full-time Coordinator and support staff to ensure a professional and strong structure.
- The CSO Platform should develop a yearly action plan and budget involving members in a participatory process.
- Current leaders within the CSO platform could mentor newer members from the region to ensure sustainability and change of roles over time.

1. Evolution of the CSO Platform

The Global Fund to Fight AIDS, Tuberculosis and Malaria allocated USD\$ 100 million to tackle artemisinin resistance in the Greater Mekong Sub-region (GMS) through the Regional Artemisinin resistance Initiative (RAI) and covers 5 countries (2014-2017): Myanmar, Cambodia, Thailand, Viet Nam and Lao PDR. The RAI Regional Steering Committee (RSC) was created in 2013 as a multi-stakeholder governance body to oversee and provide strategic guidance to this regional grant, following the Global Fund “Country Coordinating Mechanism” model. It is composed of national government representatives as well as regional level stakeholders (including multilateral/bilateral organizations, civil society, and private sector).

RAI RSC was created in late 2013. There was no formal CSO constituency at that time and CSO were not sufficiently engaged in preparation of RAI-1. The Malaria CSO Regional Platform was established after finalization of RAI-1 implementation arrangement in late 2014. By December 2014, there was a growing drug resistance malaria crisis in the region as well as large-scale recognition that the most at-risk groups for malaria were hardest to reach. In order to build a strong civil society voice and effectively respond to the drug resistance emergency and bring legitimacy and credibility to the two CSO representatives at the RAI RSC, a small group of committed individuals organized a CSO consultation meeting that brought together 47 participants from Thailand, Myanmar, Cambodia, Vietnam and Lao PDR. Funding for the meeting was provided by the RAI RSC secretariat, 5% Initiatives, Roll Back Malaria (RBM), the Global Fund, Community Right and Gender department.



Figure 1 Louis Da Gama, CSO representative RAI RSC

“Malaria Elimination can only be achieved by effectively engaging communities in the ownership of elimination agenda. When communities recognize the importance of elimination to their health and well-being, they will be the strongest advocates and implementers of the strategy.”

Civil society organizations must learn to work better together with the government and private sector as one seamless group, to eliminate malaria. We must all learn to be more inclusive and work more effectively with Malaria vulnerable populations especially mobile migrants and ethnic minorities.”

Louis Da Gama

RAI RSC, CSO representative 2014 - 2017



Figure 2 Promboon Panitchpakdi, CSO representative RAI RSC

“The past three years have been truly a great experience for me seeing how civil society implementing agencies began as almost a silent voice. I was very happy to see the change led by Louis Da Gama's leadership and commitment to the civil society engagement. The CSO Platform that began as an information sharing space has risen to become a key-networking channel among CSO implementers. I see the platform growing stronger, bringing about new ideas of how things could be done differently, yet collectively resulting in greater impact.”

Promboon Panitchipakdi
Director, RaksThai Foudation
RAI RSC CSO representative 2014 - 2017

The meeting also outlined the unique role of CSOs in reaching the last mile and major challenges and barriers for achieving impact in malaria elimination and containment of artemisinin resistance in and between the countries attending. These challenges included issues such as poor access to services, lack of skilled human resources, use of monotherapy, shortage of RDT kits and anti-malarial drugs, poor active case detection, low compliance, lack of political will and funding, and little to no strategies to reach marginalised groups. In addition, the lack of coordination between civil society organisations (CSOs) and government and the lack of organized community engagement in malaria responses at the national level was identified as low, and yet critical to success.



Figure 3 Regional CSO consultation, Thailand, December 2014

The important role that CSOs could play was highlighted including communicating feedback from community and target populations, monitoring implementation of programmes, incorporating human rights, equity and gender issues, raising awareness at the community level, and political advocacy. In order to do that, the meeting decided to form a CSO Platform Working Group to coordinate with stakeholders at country level and provide information on implementation issues and feedback to the RSC CSO



Figure 4 1st Regional CSO platform working group members

representatives. All CSOs were given the opportunity to be the host, Raks Thai volunteered to be the first host of the platform and provide its staff as a volunteer coordinator for the platform as Promboon Panitchpakdi was the CSO representative at the RAI RSC. The Platform objective was primarily to provide a common space to civil society organizations across the five GMS

countries for communication, harmonized programmatic interventions, capacity strengthening and coordinated actions for advocacy to address malaria issues affecting vulnerable populations such as migrants/mobile groups, ethnic communities, forest and farm workers, etc. The goal and objectives of the Platform have since been defined as follows:

Goal

Provide a platform to the civil society organizations for information sharing, for coordinated actions on advocacy and programmatic interventions, and for capacity strengthening.

Objectives

1. To maintain regular coordination among all malaria stakeholders including NGOs, ethnic health organizations and national programs; and link them with the networks in the GMS.
2. To review the existing malaria programme activities including gaps, challenges, solutions and provide technical support for advocacy, communication and resource mobilization at the country and regional level
3. To gather the evidence-based findings and advocate to policy makers.
4. To develop and maintain a communication channel in order to keep and share the updated malaria information and advocacy activities in the GMS region.

Until December 2016 the CSO platform was hosted and coordinated by Raks Thai Foundation. In 2017, at the time of this evaluation, the CSO Platform Coordinator position is hosted by Asia Pacific Leaders Malaria Alliance (APLMA) and the platform has more than 50 organizations and networks from Thailand, Myanmar, Cambodia, Vietnam and Lao PDR as well as a selection of regional and relevant organisations. Currently, the CSO Platform is in a process of finding a more permanent host.

2. Purpose of this Review

The purpose of this review is to evaluate the CSO Platform and through it, the civil society engagement efforts undertaken in the GMS from 2014-2017.

This review will present findings on the effectiveness of CSO engagement, advocacy and representation efforts in the context of the RAI Regional CSO platform, and will formulate recommendations to strengthen civil society engagement in malaria responses for the second phase (RAI-2E grant) that will cover 2018-2010.

3. Methodology

The evaluation consisted of: 1) a desk review including all available documentation - consultation reports, grant proposals and other reports; 2) a survey sent out to all CSO Platform members was responded to by 27 members and; 3) a small number of key informant interviews including the PR UNOPS, donors, Global Fund Secretariat, CRG Team and FPM, RAI RSC secretariat and academia. The intention of the review was to collect feedback from NGOs, CBOs, mobile migrant organizations and networks, ethnic communities and networks, academia and community advocates, working in malaria in the GMS, especially those with experience working in Global Fund grants. The following presents the findings and the general conclusions from the process. Recommendations have been included in the Executive Summary.

4. Findings

4.1 CSO Platform

The total number of respondents was 27 with most respondents representing international and local non-government organisations. The majority of respondents came from Cambodia, followed by Myanmar, Thailand, Viet Nam and Lao PDR. 80% of respondents were male, 20% female.

96% of respondents said the CSO platform had helped them do better in their work a great deal (48%) and somewhat (48%). Only 4% said it had not helped them much. Specifically the CSO platform helped respondents by increasing learning from other stakeholders both within their country and regionally; enabling respondents to better highlight important issues and challenges for advocacy nationally and regionally; and through provision of good quality information, ensured people keep up-to-date on important matters.

Figure 2: What country are you from? (n=24)

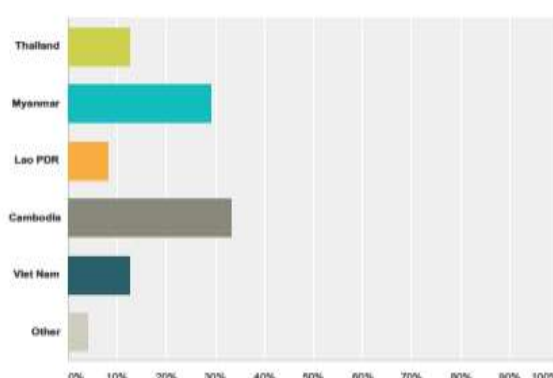


Figure 3a: Has the CSO platform helped you to do your job better? (n=23)

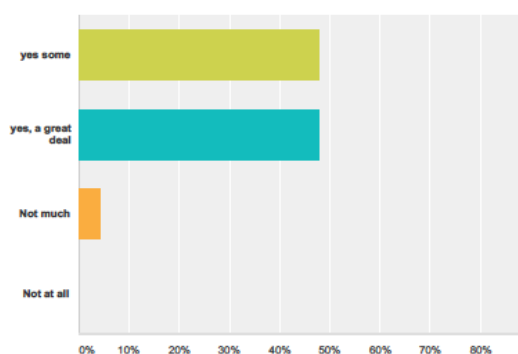
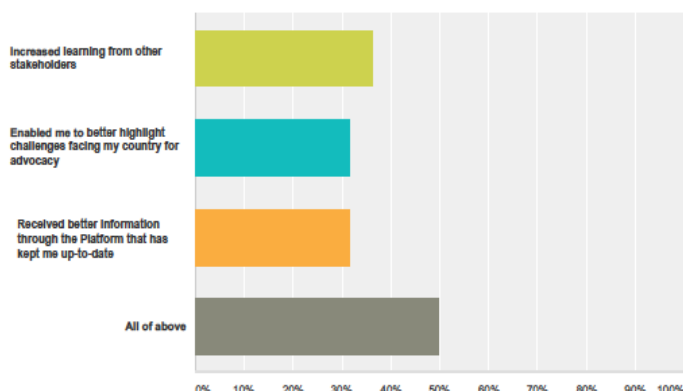


Figure 3b: How has the CSO Platform helped me? (n=22)



4.2 Effectiveness, efficiency and impact

Over three quarters of respondents felt the CSO platform had enabled them to be more effective and efficient in their malaria work (85% and 80% respectively). 70% of respondents reported being able to have a greater impact in their country as a result of being part of the Platform whereas 30% did not.

Figure 4: Has being part of the CSO Platform enabled you to be more effective? (n=23)

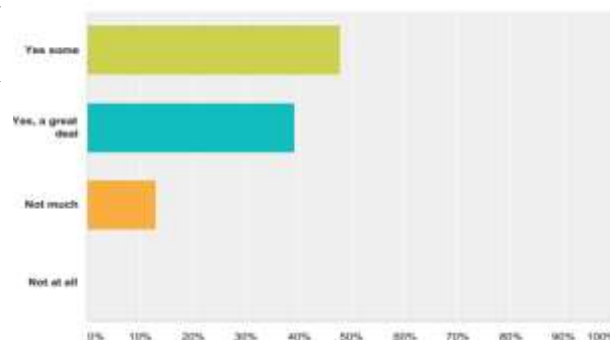
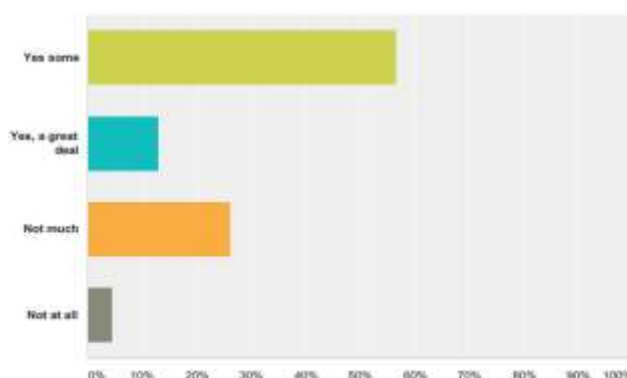
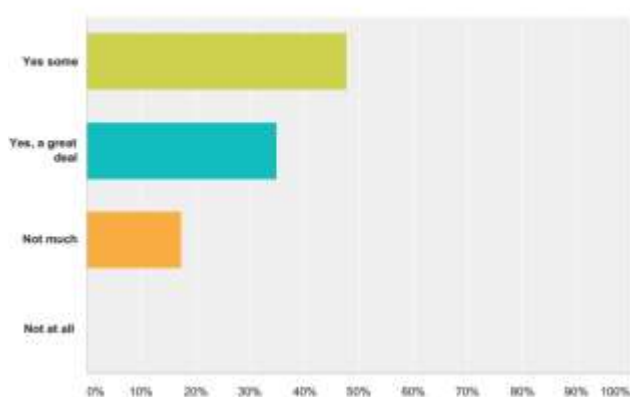


Figure 5: Has being part of the CSO Platform enabled you to be more efficient? (n=23)



Respondents noted a number of ways the platform has enabled them to have greater impact at the country level. Countries are at different stages in their malaria responses and in their track record of civil society engagement, so impact, and what constitutes impact, varies from country-to-country. Despite the different stages, positive change has been noted in each country. For example, respondents in some

countries noted the impact of the CSO platform has meant better advocacy and facilitation in programme and budget planning, capacity building and learning from others about how to bridge the gap between civil society responses and national programmes and, as a result align well in achieving national goals and targets.



Figure 5 Malaria advocacy by CSOs

Through the CSO consultations and the country field trips members were able to see first hand that there are shared challenges across different countries. A number of respondents noted they were able to learn concretely about challenges, opportunities, practical strategies for programme implementation and advocacy as well as understand policies, guidelines and epidemiological trends that have been immediately transferable and applicable in their countries. Integration of new strategies, in particular on human rights and gender equality, into existing malaria programmes was highlighted as a tangible impact. In one country, inspired by the CSO Platform model, a country-level consortium of malaria organisations was formed which increased effective collaboration.



Figure 6 Regional CSO Consultation, Thailand, May 2-16

Increased information sharing including best practices and common challenges has led to improved cross border coordination and collaboration at grassroots level. Respondents in one country noted specific impacts in relation to recognition of the importance of village health volunteers and an integrated package of health care that now includes malaria being implemented by the village health volunteers. Through the



Figure 7 Regional CSO consultation, Cambodia, October 2016

Platform, civil society are more aware of the limited capacity of the Department of Health particularly in hard-to-reach areas.

From the consultations and the field trips, as well as identifying common challenges, the issue of artemisinin resistance as an issue affecting many countries, particularly in rural areas was identified and experienced in the

different contexts. As a direct result, CSO's in some countries have been able to successfully advocate for increased support in order to roll out programmes that are helping to reach the malaria elimination threshold level. Respondents also noted increased capacity among CSOs, greater recognition by government of their important role in the malaria response and in some countries the CSO Platform has increased in-country collaboration between CSOs as they have met more often and experienced a more coordinated and focused collaboration towards common goals. Lastly, the issue of avoiding duplication of effort regionally was noted.



Figure 8 Public Private Mix (local drug store in Cambodia), a site visit, 2016

The impacts of such cross-country learning can be challenging to document as attributed to tangible outcomes, but cannot be underestimated in its influence of programmes and advocacy.

“The site visits provided unique opportunities for our organisation to learn more about malaria implementation. Following two years of learning, we were able to apply successfully to become a sub-recipient in Vietnam, the first time CSO is working on Malaria under the Global Fund in Vietnam.”

Dr Khuat Thi Hai Oanh

Executive Director, SCDI Vietnam

Focal person, Regional malaria CSO platform, Vietnam

4.3 Coordination

Respondents were asked if they felt there was sufficient coordination in their country in the implementation of RAI-1 and the preparation of RAI-2. 43% of respondents said yes and 43% said no. When asked if they were adequately able to contribute to the funding request preparation process for RAI-2, 74% said yes.

Figure 7: Was there sufficient coordination among country partners in your country in the RAI-1 grant implementation and funding request preparation for RAI-2 (n=23)

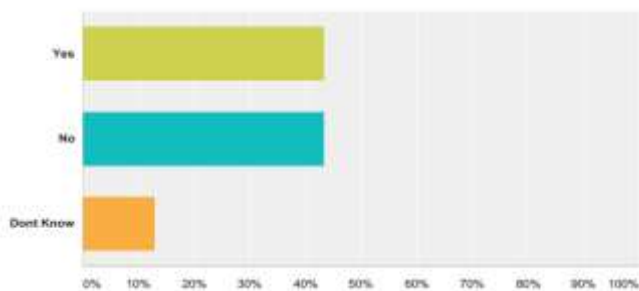
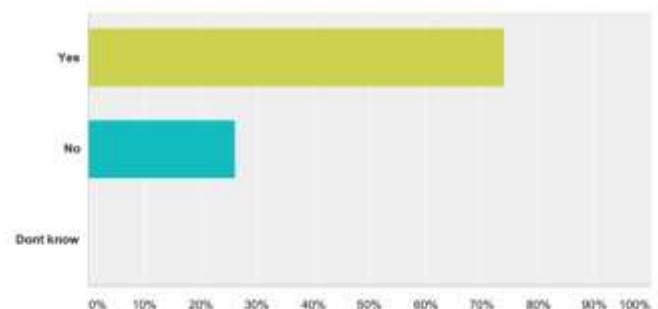


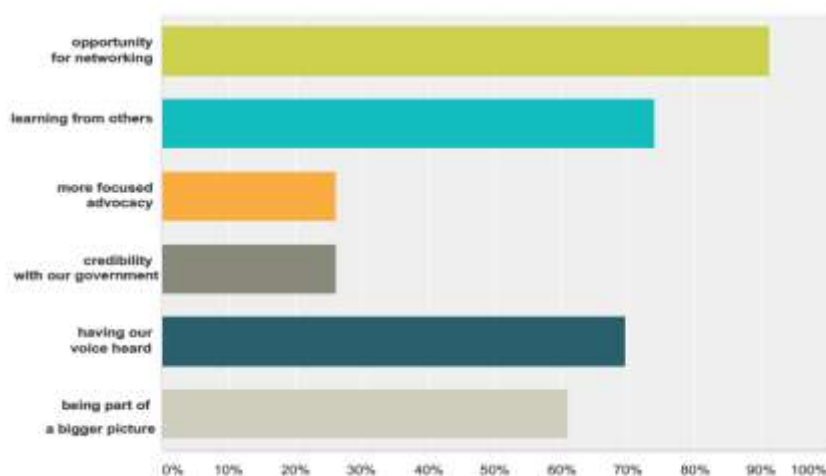
Figure 8: Were you able to adequately contribute to the funding request preparation process for RAI-2? (n=23)



4.4 Benefits of being part of the CSO Platform

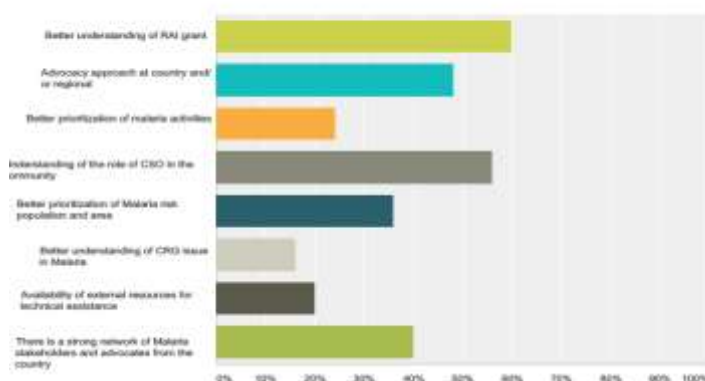
Main benefits of being part of the CSO Platform included the opportunity for networking and to learn from others; having the voices of civil society heard; being part of the bigger picture on malaria advocacy and policy change; more focused advocacy and heightened credibility with governments.

Figure 9: What are the main benefits to you of being part of the CSO platform (n=23)



When asked the top three things people had learned as a result of being part of the CSO Platform, the most popular included better understanding of RAI grants; increased understanding of CSO role in the community and advocacy approaches at country and/or regional level; that there was a strong network of malaria stakeholder and advocates from their country and also learned how to better prioritise malaria risk populations.

Figure 10: What are the top three things you have learned as a result of being part of the CSO platform?(n=23)



"The Regional Malaria CSO platform in the Greater Mekong Subregion (GMS) is an excellent example of what can be achieved with vision, determination, dedication, financial resources and a genuine collaborative spirit and inclusive process. We have proven that it is possible to create a transparent and accountable constituency that represents the needs of the communities impacted by Malaria so that the CSO representatives are able to bring the challenges being faced and the solutions being recommended by the vulnerable populations to the decision-making process of the CCM. We ask the Global Fund secretariat to document this process as an example of best practice in their CCM evolution discussions."

Ms. Lina Kharn

Senior BCC Advisor, URC Cambodia

4.5 Support for work at community level and with government

75% of respondents reported that being part of the CSO Platform had been helpful to the work they are doing at community level whereas 20% reported it had not helped that much. 47% reported that being part of the CSO Platform had been helpful to bring about positive changes on malaria with their government. However, 40% reported it had not helped that much and 13% it had not helped at all.

Figure 11: Has being part of the CSO Platform been helpful to the work you are doing at community level?(n=23)

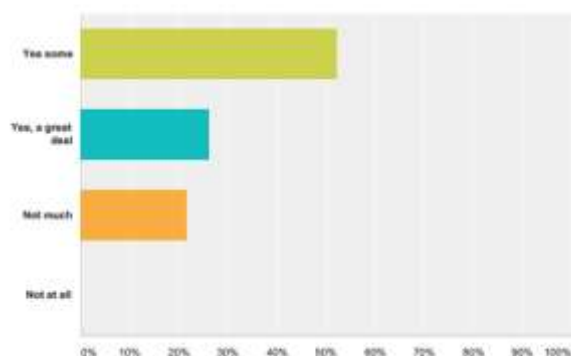
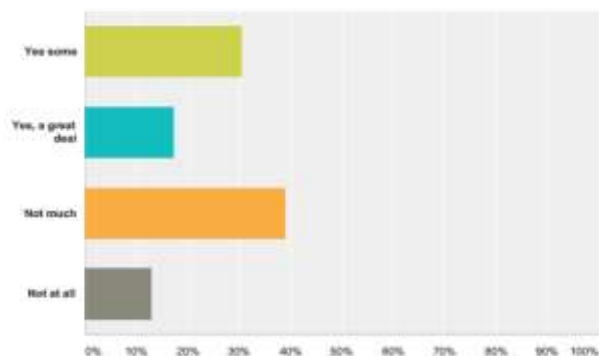


Figure 12: Has being part of the CSO Platform been helpful to bring about positive changes on malaria with your government? (n=23)



At the community level, respondents noted many of the same issues highlighted under impact above. Increased learning, collaboration, cross-border information sharing including IEC materials innovation were noted. CSO Platform members in some countries were able to engage communities including mobile and migrant populations and village health workers meaningfully by supporting their implementation and ensuring their voices were heard in the country dialogue process around RAI-2. Being part of the CSO Platform also meant better access to technical support for community-level organisations as they were more easily accessible and identified. The need for increased attention by the CSO Platform to community level implementation was also noted.



Figure 9 CSO visit to ethnic community in Cambodia, 2016

For positive changes on malaria with governments, respondents noted such change takes time. The most common change cited by respondents is greater recognition of the importance of both the role CSO's play in expanding service coverage to hard to reach populations and the increased engagement of civil society in national dialogue, including in the preparation of RAI-2.

However, some respondents noted there

was not much influence on the government and there is much work to be done for CSOs to be seen as supportive and usefully integrated into national programmes, rather than adversarial and working in parallel.

“Civil society organizations, and the networks of local volunteers they support on the ground, are making tremendous strides against malaria in the region. They are the last mile for us to achieve malaria elimination, working to reach populations at risk in the region’s most challenging areas in close partnership with national programs. The CSO Platform has done some excellent work in bringing these organizations together and giving them a voice at regional level.”

Amelie Joubert,
Executive secretary, RAI RSC

4.6 Notable achievements

When asked to highlight the most significant achievements of the platform, respondents noted increased CSO engagement and participation in the RAI-2 funding request; a credible space where CSOs can advocate; shared information and communication on CSO issues at country level and across the region; improved collaboration and coordination; and increased cross border coverage and programme focus. In addition to those mentioned above, specifically, the CSO Platform has:

"Malaria in our region is primarily a disease of the rural poor, and as such elimination can only be achieved through the effective engagement and empowerment of affected communities. Understanding and strengthening community systems must be at the core of our work, and as such the Civil Society platform is a prerequisite for success. Without such a platform, the necessary capacity building, knowledge sharing, and innovation will simply not take place. The APLMA Secretariat remains strongly supportive of the role of civil society, and the civil society platform in line with the priorities expressed in the Leaders Elimination Roadmap, endorsed by 20 heads of government across the region."

Dr Ben Rolfe
Chief Executive Officer, Asia Pacific Leaders Malaria Alliance

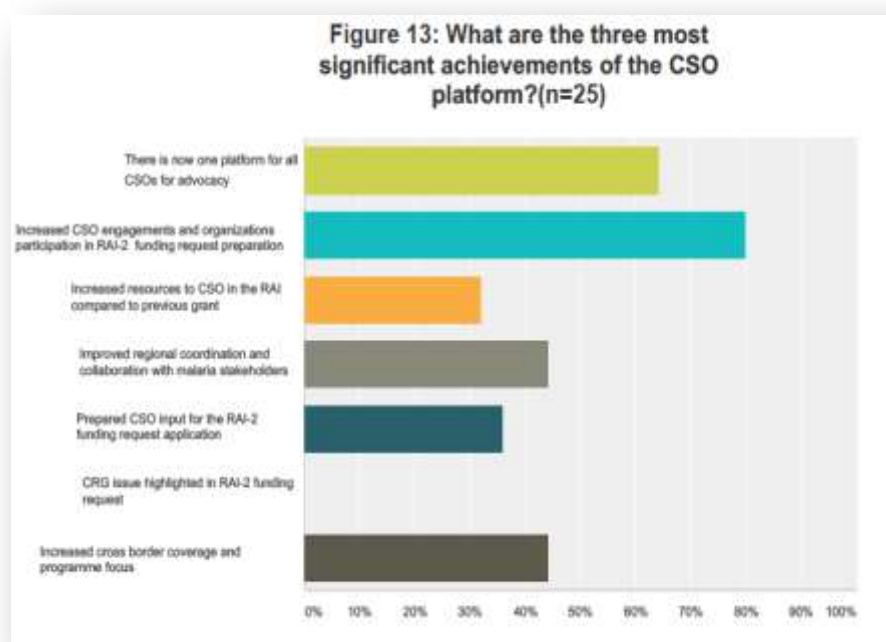
- Concretely influenced the outcome of the RAI-2 grant that stipulates 50% of the budget should go to CSOs, thereby substantially increasing funding available to CSOs. In some countries this included funding for CSOs for the first time.
- Improved regional coordination and collaboration with The United Nations Office for Project Services, Asia Pacific Leaders Malaria Alliance, Asia Pacific Council of AIDS Service Organisation and Global Fund Advocates

Network Asia Pacific and other stakeholders

- Identified CSOs to work on malaria and actively engaged them in the preparation for RAI-2E, including in some countries where previously there was no CSO involvement to work on community responses to malaria
- Ensured the issues of human rights and gender are highlighted in RAI-2E funding request, which was not the case in the previous grant
- Prioritised operational research-focused CSO activities in RAI-2E
- Increased CSO engagements and organizations involvement in RAI-2E malaria response at country and regional level focusing on cross-border areas
- Prioritised mobile migrant and ethnic communities as malaria key populations and contributed to increased investment to malaria volunteers
- Increased financial and technical resources to the CSOs
- Increased cross border coverage and programme focus
- Secured resources for private sector engagement (through CSO) for malaria services in RAI-2 E

"Work of Malaria Civil Society Organization (CSO) platform has proven that meaningful and effective community engagement is possible as part of a constituency consultation process prior to each CCM meeting so that CSO representatives are speaking on behalf of the community and not themselves. It is possible to achieve a genuine inclusive process for malaria at national and regional level."

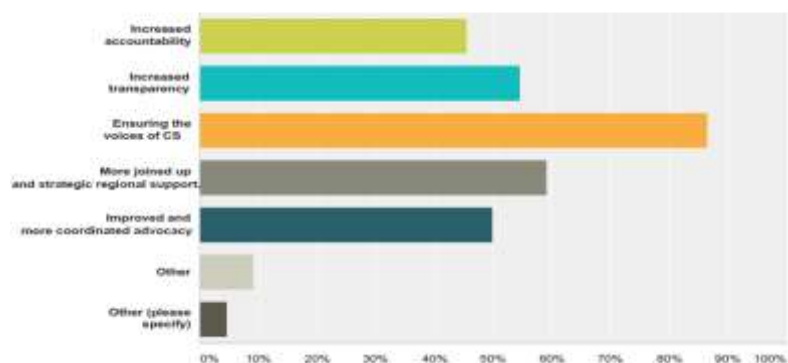
Viengakhone Souriy
Director, Lao Positive Health Association



4.7 Representation, institutional support and sustainability

90% of respondents felt their views and needs were represented to a great extent (53%) or somewhat (35%) on the RAI RSC. 85% of respondents felt their issues were adequately addressed through the CSO Representatives at the RSC. When asked if there were any issues raised during the country consultations that had not yet been resolved by the CSO Representatives on the RSC, 60% said no. Of those who said yes, one respondent mentioned that decisions are still dominated by governments and to that extent; the CSO voices are not still strong as other stakeholders. A need for better feedback from the CSO Representatives was mentioned. It was also noted that current leaders could mentor newer members from the region to ensure sustainability and change of roles over time.

Figure 14: What has the impact of having CSO Representatives on the RSC been? (n=22)



When asked about the impact of having CSO representatives at the RSC the biggest impact has resoundingly been ensuring the CSO voices and issues of CSO are well represented in the Global Fund process. Respondents also mentioned the impact of having improved and more coordinated advocacy and increased transparency and accountability. The strategic and well prepared input and contribution of the CSO Platform Representations on the RSC was very much appreciated at the level of the RSC. It was also noted that is important to ensure ideological arguments are backed up by evidence where possible.

76% of respondents rated the consultation with Platform members and the feedback by the CSO Representatives on the RSC as excellent or good. 20% rated it as average or poor. Specific suggestions for improving the consultation included:

"The CSO platform, led by Louis da Gama and supported by Promboon Panitchpakdi transformed the perceptions of all stakeholders including the public sector towards the critical role of CSOs. Today CSOs are seen as important partners and part of the solution rather than competitors for financial resources. It was through CSO representatives efforts that the RSC and GF decided to allocate high proportions of funding to CSOs under RAI-2E."

Dr. Siddhi Aryal
Director, Malaria Consortium Asia

- providing sufficient time for review and feedback on issues;
- providing summaries of issues to CSO implementers ahead of the RSC meetings and timely summaries following the meetings to support country-level action on important items. Also making these notes accessible in an online platform for reference and follow up;
- having a skilled facilitator to ensure good discussion and participation at meetings;
- increased communication and meetings;
- participatory development of a CSO Platform yearly action plan and budget
- having an Asia-Pacific consultation rather than focusing always on the RAI/GMS countries;

100% of respondents felt the CSO Platform should continue. In terms of support for the Platform, nearly 70% of respondents felt that the current institutional support comprising a volunteer part-time Coordinator was insufficient and suggested that fundraising be carried out to ensure a stronger structure to professionally manage and coordinate activities with a full-time staff. Other suggestions included registering the CSO Platform as a legal entity and setting up a structure with annual membership fees. It is also important moving forward that those fulfilling the role of the CSO Platform representatives are able to dedicate the necessary time to the role, and also that conflict of interest is well managed to ensure that full participation of Representatives is possible on the RSC and the various committees.

4.8 Forward looking: areas of focus

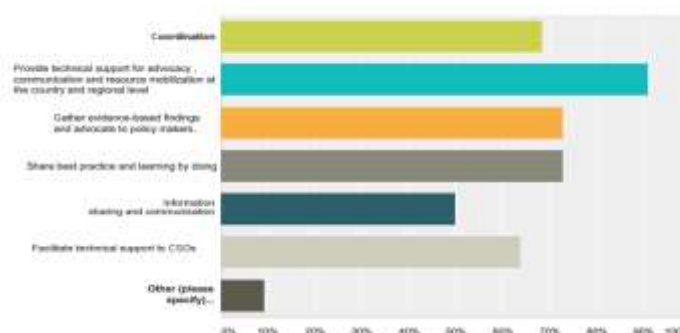
When asked what the main focus of the CSO Platform should be for the next three years respondents mentioned:

provision of technical support for advocacy; community and resource mobilisation; ensuring evidence-based findings for advocacy; shared best practices; facilitate technical support to CSOs; and coordination.

Respondents highlighted the need to focus on documenting concrete evidence of civil society achievements and challenges during RAI-2. Until now the CSO Platform has focused on improving coordination, highlighting gaps and challenges and ensuring good communication and has not been able to focus on gathering evidence. In this next phase, it is imperative that the CSO Platform focuses on gathering strong evidence to use for advocacy with policy makers and to make sustainable change.

Specific areas suggested for attention of the CSO Platform include support for the provision or brokering of technical expertise and actively and consciously engaging representatives of the national malaria control programme in ongoing dialogue.

Figure 15: What should be main focus of the CSO platform be for the next three years? (n=22)



“Community and civil society representatives have important roles to play in decision-making platforms. In the region’s malaria elimination response, communities and civil society not only contribute in effective programme implementation. Their voices are needed in spaces like the RAI RSC to ensure issues of human rights, gender, and vulnerable communities - issues which would make or break the effectiveness of the so-called last-mile responses, are given their due importance and are addressed.”

Rodelyn M. Marte
Executive Director, APCASO

For the CSO Platform itself, respondents suggested holding in-country CSO Platform meetings regularly (every quarter or twice yearly) and at least one regional CSO Platform meeting per year where updates and information can be shared. The development of an online platform for the ongoing sharing of information was also suggested together with the development of a yearly plan, budget and report.

4.9 Sustainability and transition

There was concern among respondents for what would happen after 2020, with some believing there would not be support for CSOs in the current model. A strong and strategic recommendation is for CSO Platform members to ensure they work closely with the national malaria control programmes at national and district level, transferring capacity to government systems where possible rather than working outside and in parallel to the system. This will ensure sustainability of services and approaches in reaching those most in need after 2020. In addition, the need to gather and document evidence of success as well as challenges needs to be prioritised and shared with national malaria programmes and other national actors regularly.

“At the RSC level, the CSO and Private Sector are working very closely, sharing common governance best practices and evidence-based activities and it should be continued”

François Desbrandes
Deputy Director, Access to Medicines Malaria Program – SANOFI
Private Sector Representative at the RSC

A strong advocacy agenda needs to be developed and consistently rolled out across the region that includes advocacy for:

- More financial and technical input from governments on malaria
- Inclusion of civil society in elimination programmes to strengthen the position of civil society in the transition period.
- Recognition of importance of the role of CSO as vital and unique partners with government (backed up by evidence)
- Task-shifting from government to communities in the diagnosis, treatment and follow up to malaria cases
- Increased capacity building for CSOs and in particular community-based organisations
- A clear and comprehensive transition plan for each country with support from the CSO Platform
- A CSO engagement manual

4.10 Challenges along the way

In one country, despite the CSO Platform consultation in the development of RAI-2E, the CCM allocated a majority of the grant funding to INGOs in many key provinces with a high malaria prevalence that were not part of the CSO Platform and may not have the best technical expertise on malaria or experience with grant implementation.

This is viewed by some NGOs in-country as not capitalizing on the expertise and



Figure 10 Temporary home of migrant workers, Surin Province, near Thai-Cambodia border



Figure 11 Mobile workers temporary home in farm, Cambodia

commitment of the main CSOs and is disappointing. In one country, despite sustained efforts by CSOs to change the policy and allow CSOs to test and treat for malaria, it was not achieved. The CSO Platform needs to show clear evidence to convince policy makers within the government, as well as technical partners.

5. Conclusions

The CSO Platform has hugely succeeded in ensuring civil society in the GMS region has a voice and is recognized as an important partner, not just for service delivery but also for decision-making, advocacy and innovation. The first Global Fund RAI concept note was developed without strong CSO engagement, as the Regional Malaria CSO platform was not established at that time. There was a significant contribution of the platform in preparation for the RAI2E concept note development

through country and regional consultations. However, there is still much work to be done to fully integrate and ensure civil society and their efforts are seen as integral parts of the national response to malaria at a country level. Recommendations for the CSO Platform as it further develops are presented in the Executive Summary of this report.