# CONSTITUENCY CONSULTATION PUBLIC & PRIVATE SECTOR, CIVIL SOCIETY AND KEY POPULATIONS OCTOBER 19, 2023

#### **INTRODUCTION/BACKGROUND:**

Country Coordinating Mechanism is national level forum that submits funding applications to the Global Fund on behalf of the country. CCM includes representatives from government, private sector, technical partners, civil society including people living with and/or affected by diseases and key populations. CCM coordinates the development of the national request for funding, nominates the Principal Recipient, oversees the implementation of approved grants, approves any reprogramming requests and ensures linkages and consistency between Global Fund grants and other national health and development programs.

Private sector constituencies have been paid huge importance by the Global Fund while designing, planning and implementation of grants. Accordingly, CCM Secretariat conducts consultations with all the private and govt. sector constituencies each year. The constituency consultation was planned in Karachi on October 19, 2023 at PC Hotel. The purpose of consultation was to orientate all the public sector provincial stakeholders on functioning of GF, CCM the implementation of GF Grants in the province and get inputs from civil society. All the PRs, and SRs both the public and private sector were invited to participate in the meeting. Provincial AIDS and TB programs, Department of Health, District Health Authority and other private sector provincial stakeholders were engaged in the consultation. This activity is considered extremely essential as the GF attaches lot of importance for civil society especially PLWDs & KAPs. This has provided them the information related to GF funding in Pakistan and will help to create close coordination amongst each other resulting in efficient, effective and timely implementation of the GF Grants.

#### **OBJECTIVES OF CONSTITUENCY CONSULTATION:**

There were two key objectives of this consultation,

- To provide an opportunity to the people living with and/or affected by three diseases/their associated family members, and being key affected populations who have been attaining services from any center supported by the Global Fund and get feedback from beneficiaries to improve services and address issues being faced by the communities in accessing diagnosis/treatment services and also get inputs for future planning.
- To orientate all the private sector stakeholders on GF Guidelines as well as functioning of CCM, role and responsibilities of CCM members.

## AGENDA OF THE MEETING:

S. No	Description	Time	Facilitation	
1.	Recitation from Holy Quran	10:00 AM		
2.	Introduction of Participants	10:05	Participants	
3.	Welcome & Opening Remarks	10:15		
4.	Presentation about GFATM, CCM Pakistan and Update on		CCM Coordinator	
	New Funding Request (2024-2026), and upcoming CCM	10:30		
	Elections			
	Working Tea	11		
5.	Presentation – Current & Future interventions in Sindh -			
	TB PRs	11:00	TB PRs (10 minutes each)	
	a) CMU – NTP, b) MC		(10 mmates each)	
	Interactive Session with Beneficiaries/ PLWDs/KPs -	11:20	Participants	
	Questions and Answers Session			
6.	Presentation - Current & Future interventions in Sindh -	11:50	HIV/AIDS PRs	
	HIV/AIDS PRs		(10 minutes each)	
	a) UNDP, b) NZ			
	Interactive Session with Beneficiaries/ PLWDs/KPs -	12:10	Participants	
	Questions and Answers Session			
7.	Presentation - Current & Future interventions in Sindh-	12:40	CMU- Malaria	
	Malaria PRs			
	a) DOMC, b) TIH			
	Interactive Session with Beneficiaries/ PLWDs/KPs -	1:00	Participants	
	Questions and Answers Session			
8.	Vote of Thanks	1:30		
	Lunch	1 1		

# **PROCEEDINGS OF THE MEETING:**

The meeting started with recitation of some verses from Holy Quran. After the recitation, Dr. Ghulam Sarwar Provincial Manager-DGHS Sindh welcomed all the participants on the behalf of DG Health Sindh. He thanked and appreciated CCM secretariat for holding this important event in Karachi with Public and private sector and key populations.

After that, Dr. Skindar Memon, PPM, SACP thanked CCM Secretariat for playing a significant role for bringing civil society on one plate form. He specially appreciated the support being provided by the Global Fund for prevention and treatment of HIV/AIDS in Sindh.

Furthermore, Dr. Samreen Ashraf, Deputy Director CDC-TB said that I would like to directly talk to our beneficiaries from TB services. She said that prior to the funding from GF, Government of Sindh was providing services to the TB patients, however, GF has strengthened the Govt. response by providing sufficient funding. She said that Government of Sindh is providing infrastructure to the private sector partners for improving and enhancing the TB services. She said that services are also being provided at BHU level.

After the guest speakers, Mr. Hafiz Hamad Murtaza CCM Coordinator thanked all the PRs and public and private sector SRs for supporting CCM to organize this activity in Karachi. He gave brief presentation about GFATM, CCM Pakistan and update on New Funding Request (2024-2026), and upcoming CCM Elections. He shared objectives of holding this consultation with private sector. He also elaborated the responsibilities of PRs and SRs in implementation of Global Fund grants.

Sr. no.	Questions/Discussion	Answers
1	Abdul Hameed Provincial M&E	CCM coordinator Mr. Hafiz Hammad Murtaza
	Surveillance Coordinator raised his	said that he will share your concerns with GF and
	concern and requested that;	hopefully we will get good response.
	• There is need to increase Malaria	
	disease component funding as you	
	all know that 35 districts of Sindh	
	province has been suffering since	
	last year. Due to insufficient	
	resources we are unable to expand	
	our interventions in all districts.	
2	Dr. Salman Khan TB Consultant WHO	CCM coordinator Mr. Hafiz Hammad Murtaza
	Pakistan asked about the CCM	briefly explained to all the participants about
	election process, strategy and voting	CCM election process strategy and voting
	mechanism.	mechanism.

**Questions/Answers - Interactive Session with Participants:** 

At the end of the interactive session, CCM Coordinator requested to all representatives of all the Principal Recipients for brief presentations in Urdu/Sindhi on their respective programmatic areas,

disease prevalence and interventions/various services being provided in various geographic areas of Sindh for the key populations as well as general public.

## Presentation on Current & Future interventions in Sindh - TB PRs (CMU-NTP and MC):

The PRs of TB disease components were asked to present their work which they are doing in Sindh for prevention, diagnosis and treatment of TB with targeted populations. They were asked to present their work in Urdu or Sindhi for facilitation of beneficiaries and not to use power point presentations in English. Both the PRs gave detailed presentations on their interventions in Sindh. PRs talked about various services being provided in various geographic areas of Sindh for the key populations as well as general public. PRs also talked about the data being reported from various sites and the hurdles being faced during the implementation.

### Questions/Answers - Interactive Session with Beneficiaries/PLWDs/PWIDs/KAPs:

A session of half an hour was given to the beneficiaries of TB disease to share their experience of how they reached on the service delivery outlet, what kinds of difficulties faced while reaching on the service delivery site, what kind of services provided to them and they were asked to share their point of view on satisfaction level for various services provided. The beneficiaries shared the following concerns about the service delivery in Sindh province;

Sr.	Area	of	Improvements	Way Forward
no.	/Suggesti	ions/Feedback		
1	<ul> <li>Kiran TG and share</li> <li>PRs.</li> <li>She to report hospit</li> <li>The p rather</li> <li>request</li> <li>provid report</li> <li>There</li> <li>betwe</li> </ul>	appreciated the pre- ed some areas of it old that there is nee- ting mechanism. States are not provi- tals are not provi- tatients get the rep- than X-Ray rep- st that X-Ray rep- st that X-Ray ded to the patients tracking ID. is need to impro- ten PRs and hospita	rogram interventions mprovement for the ed to improve X-Ray he shared that Govt. ding X-Ray report. ort tracking ID only bort. It is humbly report should be a timely rather than we the coordination l staff. ce issue in hospital.	<ul> <li>The representative from MC responded that they will work on it and try to solve all these discussed issues. He added further that;</li> <li>MC is going to start the screening of drugs users with the collaboration of Nai Zindagi Trust.</li> <li>Static X-Ray centers are being initiated in Karachi in next GC-7.</li> </ul>
	The s <sub>l</sub>	pace is very short f	or the patients.	

	• Kiran also shared that some necessary
	nutrition supplements should be provided to
	the patients along with medicines.
2	CCM member Mr. Aslam shared his views
	regarding TB program.
	• He endorsed Kiran's suggestion regarding
	nutrition supplements. Some necessary
	supplements should be provided to TB
	patients.
	• He also shared that private hospital doctors
	are prescribing unnecessary tests for TB
	patients which are very expenses. If test are
	necessary then these tests should be free of
	cost for the patients.

It was found that none of the beneficiaries shared any inconveniences faced during the whole process of diagnosis, treatment or follow up. All the patients showed their profound satisfaction provided by all the PRs and SRs.

# Presentation on Current & Future interventions in Sindh – HIV PRs (UNDP and NZ):

The PRs of HIV disease components were asked to present their work which they are doing in Sindh for prevention, diagnosis and treatment of HIV with targeted populations. They were asked to present their work in Urdu or Sindhi for facilitation of beneficiaries and not to use power point presentations in English. Both the PRs gave detailed presentations on their interventions in Sindh. PRs talked about various services being provided in various geographic areas of Sindh for the key populations as well as general public. PRs also talked about the data being reported from various sites and the hurdles being faced during the implementation.

#### **Questions/Answers - Interactive Session with Beneficiaries/PLWDs/PWIDs/KAPs:**

A session of half an hour was given to the beneficiaries of HIV disease to share their experience of how they reached on the service delivery outlet, what kinds of difficulties faced while reaching on the service delivery site, what kind of services provided to them and they were asked to share their point of view on satisfaction level for various services provided. The beneficiaries shared the following views about the service delivery in Sindh province;

Sr. no.	Area of Improvements	Way Forward
	/Suggestions/Feedback	
1	A participant Mr. Azhar Anjum shared that some following ponits;	
	<ul> <li>He asked about the criteria of distribution of food items which were distributed among HIV patients. He said that food items were distributed last month but some HIV patients could not get these food items. It is request to PRs to contact with TGs community before distribution food items.</li> <li>These food items should be distributed among all HIV positive patients.</li> <li>He also shared that some patients received two food items parcels.</li> </ul>	• Dr. Umar Riaz from UNDP explained the criteria of the distribution of food Items. He said that these lists are prepared and provided by SR (APLHIV)/CDC on the basis of patient's social Economic status (family income etc). He also shared that all the beneficiaries had received two quarters food Items. He also shared that as per our mandate we cannot contact with any TGs directly. He suggested to the participants that if you know any needy persons then you let them inform to visit nearest ART center and share your detailed information's. You can also contact APLHIV helpline for any complaint.
2 3	<ul> <li>One of the participants has requested to PRs/SRs that the timing of ART center should be extended from 1:00 PM to 5:00 PM because some patients return from job in evening. They should be facilitated.</li> <li>He further said that the behavior of staff at ART is not cooperative and friendly.</li> <li>One of the participants has requested to open ART center in district Malir.</li> <li>CCM Coordinator asked about the quarterly target of food items.</li> </ul>	<ul> <li>CCM coordinator assured that he will send email to PRs/SR and GF as well for the following observation;         <ol> <li>Timing of ART center</li> <li>One window operation in evening timing</li> <li>Staff behavior at ART center</li> </ol> </li> <li>Dr. Umar said that due to the limitations of GF budget we have limited resources for this activity. These beneficiaries are being increased gradually.</li> </ul>
4	• CCM member Mr. Aslam said that we also should focus on awareness raising for	

general public. We should formulate and		awareness campaign through Social Media,
initiate advocacy campaign for this cause.		Radio, Mosques announcements, Mobile
		messages etc.
	•	UNDP representative responded that we will
		work on it but on the other hand Key
		population is the main concern. He also said
		that before starting campaign we should keep
		in mind the confidentiality of the patients.

It was found that none of the beneficiaries shared any inconveniences faced during the whole process of diagnosis, treatment or follow up. All the patients showed their profound satisfaction provided by all the PRs and SRs.

# Presentation on Current & Future interventions in Sindh - Malaria PRs (DOMC and TIH):

The PRs of Malaria disease components were asked to present their work which they are doing in Sindh for prevention, diagnosis and treatment of Malaria with targeted populations. They were asked to present their work in Urdu or Sindhi for facilitation of beneficiaries and not to use power point presentations in English. Both the PRs gave detailed presentations on their interventions in Sindh. PRs talked about various services being provided in various geographic areas of Sindh for the key populations as well as general public. PRs also talked about the data being reported from various sites and the hurdles being faced during the implementation.

#### Questions/Answers - Interactive Session with Beneficiaries/PLWDs/PWIDs/KAPs:

A session of half an hour was given to the beneficiaries of Malaria disease to share their experience of how they reached on the service delivery outlet, what kinds of difficulties faced while reaching on the service delivery site, what kind of services provided to them and they were asked to share their point of view on satisfaction level for various services provided. The beneficiaries shared the following views about the service delivery in Sindh province;

Sr. no.	Area	of		Imp	orovements		Way Forward
	/Sugge	stions/Feedba	ck				
1	CCM	coordinator	asked	the	following	•	Dr. sohail briefly updated all the participants
	questions regarding Malaria interventions;						that we are working in 78 districts along with

	<ul> <li>Global fund grant's interventions/activities are being implemented in how many districts?</li> <li>Did any district repeat through this grant?</li> <li>Are mosquito's nets effective or not?</li> </ul>	<ul> <li>ITHH (DOMC=37 &amp; ITHH=41) and SRs respectively. He also said that we are working in all flooded affected districts. But due to limited funding we are facing some problems.</li> <li>Program Manager Sindh IHHN Mr. Hashmat Jatoi shared that mosquito's nets are very effective.</li> </ul>
		• CCM Coordinator said that I will send email to TIH management that they must appoint third party monitors in those areas where they are working rather than own MEAL Officers, so we could assure quality of the program. He added further that campaign must be implemented in flood affected areas as early as possible.
2	• Participants raised the issue that he faced and shared his story. He said that medicine is out of stock in district Dadu.	• Dr. sohail said that district Dadu recently included in GF grant implemented districts and functional now. Medicine is not out of stock but infected cases rate is very high. As per our data, 6 to 7 thousand cases have been reporting on daily basis. We are working on it; hope we will get better results in coming days.
3	• Dr. Sarwar shared that we have very short stock of medicine in some district due to delay in procurement process. Is there any possibility that we can locally purchase all the medicine?	<ul> <li>CCM Coordinator said that you cannot purchase locally. This is not our mandate or GF to change procurement policy. This is the responsibility of the Government.</li> <li>He also shared the field visit observation and area of improvements with all the participants. He shared; <ol> <li>It was found that there is lack of management/coordination between</li> </ol> </li> </ul>

			staff lasing field side
			staff during field visit.
			ii) There is need to arrange all facilities
			(Medicines, management and staff
			etc) for the patients before starting
			new Malaria center.
			iii) There is need to initiate awareness
			campaign along with all stakeholders.
			iv) Outreach camps and door to door
			visits should be conducted on
			regularly basis.
			v) Govt. should take lead for this
			activity.
4	• A participant from district Dadu has	•	CCM coordinator responded that firstly, this
	requested to the govt. officials and PRs to		is the responsibility of the every individual.
	commence the activities (Spray and		Please do cover stagnant water places.
	Awareness campaign) for the prevention of	•	We mobilize and empower communities to
	malaria.		take ownership of the fight to end malaria. We
			drive action from political, private sector, and
			community leaders to accelerate malaria
			prevention and treatment and save lives.
		•	PRs need to fix all these issue highlighted by
			the participants.
5	Dr. Sarmad requested to CCM coordinator	•	CCM Member Mr. Aslam said that please
	and CCM Member Mr. Aslam to increase		share this through email to CCM secretariat.
	GF Grant for Malaria so we can expand		We will discuss in next CCM meeting.
	malaria control activities in all districts of		we will discuss in next COW meeting.
	Sindh.		

It was found that none of the beneficiaries shared any inconveniences faced during the whole process of diagnosis, treatment or follow up. All the patients showed their profound satisfaction provided by all the PRs and SRs. At the end of the meeting, Mr. Aslam CCM Member thanked all the participants for attending the meeting. Community members concluded the meeting and said that there should be some follow up of these inputs. Community appreciated the initiative and desired that CCM shall arrange such consultations on regular basis in smaller cities.

# **PHOTO GALLERY:**











