

**CONSTITUENCY CONSULTATION
PUBLIC & PRIVATE SECTOR, CIVIL SOCIETY AND KEY
POPULATIONS
DECEMBER 15, 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.

CCM Secretariat conducts consultations with all the private and govt. sector constituencies each year. The constituency consultation was planned in Peshawar on December 15, 2023 at Serena 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.

OBJECTIVES OF CONSTITUENCY CONSULTATION:

There were two key objectives of this consultation,

- 1) 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.
- 2) 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	10:30	CCM Coordinator

	New Funding Request (2024-2026), and upcoming CCM Elections		
Working Tea			
5.	Presentation – Current & Future interventions in KPK - TB PRs a) CMU – NTP, b) MC	11:00	TB PRs (10 minutes each)
	Interactive Session with Beneficiaries/ PLWDs/KPs – Questions and Answers Session	11:20	Participants
6.	Presentation - Current & Future interventions in KPK - HIV/AIDS PRs a) UNDP , b) NZ	11:50	HIV/AIDS PRs (10 minutes each)
	Interactive Session with Beneficiaries/ PLWDs/KPs – Questions and Answers Session	12:10	Participants
7.	Presentation - Current & Future interventions in KPK – Malaria PRs a) DOMC, b) TIH	12:40	CMU- Malaria
	Interactive Session with Beneficiaries/ PLWDs/KPs – Questions and Answers Session	1:00	Participants
8.	Vote of Thanks	1:30	
Lunch			

PROCEEDINGS OF THE MEETING:

The meeting started with recitation of some verses from Holy Quran. After the recitation, Mr. Zaheer Khattak Vice Chair, CCM Pakistan welcomed all the participants on the behalf CCM. He thanked and appreciated CCM secretariat for holding this important event in Peshawar with Public and private sector and key populations and CCM Secretariat for playing a significant role for bringing civil society on one plate form.

After the guest speaker, Mr. Hafiz Hamad Murtaza CCM Coordinator thanked all the PRs and public and private sector SRs for supporting CCM to organize this activity in Peshawar. 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.

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

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

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

The PRs of TB disease components were asked to present their work which they are doing in KPK for prevention, diagnosis and treatment of TB with targeted populations. They were asked to present their work in Urdu or Pashtu for facilitation of beneficiaries and not to use power point presentations in English. Both the PRs gave detailed presentations on their interventions in KPK. PRs talked about various services being provided in various geographic areas of KPK 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 KPK province;

Sr. no.	Area of Improvements /Suggestions/Feedback	Way Forward
1	<p>A participant Mr. Imran appreciated the program interventions and shared some areas of improvement for the PRs.</p> <ul style="list-style-type: none">Patients receive microscopy report on next day as the lab opens in evening. Physician told that he calls owner of the private medical store for medicines as medicines are placed there. 	<ul style="list-style-type: none">The representative from PRs responded that Due to the shortage of the staff, it is suggested to provide microscopy services only at evening and we will work on it and try to solve this issue.1. CCM requested to PRs that they should take steps for retention of staff that is trained at facility level.

2.	<ul style="list-style-type: none"> CCM Coordinator briefly discussed the following points with all the PRs and the participants; <ul style="list-style-type: none"> The capacity building of staff on data management is required for proper recording and reporting of all the data sets. Limited Contact tracing implementation needs to scale up. In and out Stock register should be available any time. Rectification of power interruption at gene Xpert sites, including PRL, need prioritization. GeneXpert of the clinically diagnosed pulmonary cases need to be enhanced. This high CD may raise the issue of optimal use of external quality assurance to check the quality of diagnosis in the Lab. There is need to strengthening the EQA system. Regular coordination mechanism to be worked out between ART and TB Clinic
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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 KPK – HIV PRs (UNDP and NZ):

The PRs of HIV disease components were asked to present their work which they are doing in KPK for prevention, diagnosis and treatment of HIV with targeted populations. They were asked to present their work in Urdu or Pashtu for facilitation of beneficiaries and not to use power point presentations in English. Both the PRs gave detailed presentations on their interventions in KPK. PRs talked about various services being provided in various geographic areas of KPK 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 KPK province;

Sr. no.	Area of Improvements /Suggestions/Feedback	Way Forward
1	<p>A participant Mr. Muhammad Farooq shared that some following points;</p> <ul style="list-style-type: none"> He asked about the criteria of distribution of food items which were distributed among HIV patients. 	<ul style="list-style-type: none"> Ms. Zainab Shah from UNDP explained the criteria of the distribution of food Items. He said that these lists are prepared and provided by CDC on the basis of patient's social Economic status (family income etc).

2	<ul style="list-style-type: none"> CCM Coordinator asked about the quarterly target of food items. 	<ul style="list-style-type: none"> Ms. Zainab Shah said that due to the limitations of GF budget we have limited resources for this activity. These beneficiaries are being increased gradually.
3	<ol style="list-style-type: none"> A participant shared his experience that he has faced Discrimination and stigma issues in the health care settings in surgical issues. 	<ul style="list-style-type: none"> CCM Coordinator said to PRs that provision of Health Services should be completely free of Stigma and Discrimination, in Health Care Settings and Community, (especially at higher levels of health care delivery).
4	<p>CCM Coordinator requested to PRs to fix these following issues as early as possible;</p> <ul style="list-style-type: none"> PRs should develop effective and strict monitoring mechanism tools for smooth functioning of the program. There is also need to conduct capacity building for staff. The staff should be aware about TORs. PRs appointed qualified data entry and counselors as early as possible otherwise program can suffer. There is need to develop MIS system for record of HIV testing data. It was highlighted that very poor monitoring system is very poor in ART center. The staff even did not know their TORs. <p>There is no referral mechanism between TB and HIV clinic as vulnerable immune compromised patients are at verge of getting infections due to lack of mechanism of testing</p>	
5	<ul style="list-style-type: none"> CCM member Mr. Zaheer Khattak said that we also should focus on awareness raising for general public. We should formulate and initiate advocacy campaign for this cause. 	<ul style="list-style-type: none"> Representative of PR responded that we are working on it. We will initiate awareness campaign soon through Social Media, Radio, Mosques announcements, Mobile messages etc.

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 KPK - Malaria PRs (DOMC and TIH):

The PRs of Malaria disease components were asked to present their work which they are doing in KPK for prevention, diagnosis and treatment of Malaria with targeted populations. They were asked to present their work in Urdu or Pashtu for facilitation of beneficiaries and not to use power point presentations in English. Both the PRs gave detailed presentations on their interventions in KPK. PRs talked about various services being provided in various geographic areas of KPK 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 KPK province;

Sr. no.	Area of Improvements /Suggestions/Feedback	Way Forward
1	CCM coordinator asked the following questions regarding Malaria interventions; <ul style="list-style-type: none">• Global fund grant's interventions/activities are being implemented in how many districts?• Did any district repeat through this grant?• Are mosquito's nets effective or not?	<ul style="list-style-type: none">• Dr. sohail briefly updated all the participants about Global fund grant's interventions/activities. He also said that we are working in all flooded affected districts. But due to limited funding we are facing some problems. Furthermore, he shared that mosquito's nets are very effective.
2	<ul style="list-style-type: none">• Dr. Sohail requested to CCM coordinator and CCM Member Mr. Zaheer Khattak to increase GF Grant for Malaria so we can expand malaria control activities in all districts of KPK.	<ul style="list-style-type: none">• CCM Member Mr. Zaheer Khattak said that please share this through email to CCM secretariat. We will discuss in next CCM meeting.
3	CCM Coordinator requested to PRs to fix these following issues as early as possible; <ul style="list-style-type: none">• Effective coordination, monitoring and referral mechanism need to be ensured at all levels.• Trainings needs to be imparted on all levels on regular and systematic manner• Cupboards should be provided for maintaining data files.• Stock register should be maintained same time not at the end of the month.• Government should take steps for retention of staff that is trained at facility level.• Designated space must be provided for the testing, medication and record keeping of the program by MS of the hospital.	

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, 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:

