

PACIFIC ISLANDS HIV AND STI RESPONSE FUND 2009–2013

OVERVIEW

Purpose

The Pacific Island HIV and STI Response Fund 2009–2013 (Response Fund) is a multi-donor pooled funding mechanism that supports the implementation of national and regional HIV strategic plans. At this stage, the governments of Australia and New Zealand have contributed to the Response Fund, however, other development partners are encouraged to contribute as well.

The Response Fund aims to contribute to the Pacific Regional HIV and STI Strategy goal, which is to reduce the spread and impact of HIV and other STIs, while supporting people infected and affected by HIV in Pacific communities.

Background

The Response Fund builds on previous support provided through the HIV/AIDS Pacific Regional Initiative and the Pacific Regional HIV/AIDS Project (PRHP). The PRHP was implemented by IDSS Ltd and Burnet Institute in conjunction with the Secretariat of the Pacific Community (SPC), through the Franco-Australian initiative.

There have been many achievements through this project, including the development of national plans, a grants programme that has increased the focus on vulnerable groups, an increase in gender sensitive interventions, and the expansion of the availability of anti-retroviral treatment for people with HIV/AIDS.

Under the Franco-Australian joint initiative and PRHP, SPC received funding to coordinate a regional approach to HIV/AIDS. This assisted with the development of a Regional Strategy on HIV/AIDS endorsed by Pacific Leaders in 2004. This strategy and its implementation plan, the Pacific Regional Strategy Implementation Plan (PRSIP) now form the cornerstone of the regional response to HIV and STIs, and have attracted funding from other donors.

PRSIP takes into account the need to build the capacity of a regional organisation (SPC) in its role of supporting Pacific Island Countries and Territories (PICTs) to implement their responses to HIV and STIs, and recognises the presence of other donors in the region. Within this context, a multi-donor funding facility that aims to work in partnership with PICTs, regional agencies such as SPC, multilateral agencies such as UNAIDS, and other donors is considered more appropriate than the stand-alone project previously supported by AusAID.

The Response Fund design was developed after extensive consultation with national, regional and international implementing agencies.

Pacific Island HIV and STI Response Fund 2009–2013

This initiative acknowledges the importance of harmonising responses to HIV and STIs in the Pacific region in a way that is consistent with the Rome and Paris Declarations, and the Pacific Aid Effectiveness Principles, as adopted by the Pacific Islands Forum Secretariat (PIFS). The proposed approach recognises that an effective response to HIV and STIs in the Pacific region requires capacity building at regional, national (both government and civil society) and community levels. Capacity building includes training, technical support, organisational systems strengthening as well as financial resources.

Capacity building support may be provided by regional technical agencies such as SPC, WHO and UNAIDS or by other sources such as the UN Technical Support Facility or Australian-based

agencies participating in the HIV Workforce Capacity Building Consortium. Decisions on the most appropriate form and provider of capacity building will be determined at the country level, and be supported through national and regional funding allocations.

The Response Fund will provide funding streams that support national and regional implementation (both government and non government), as well as support the governance, administration, and monitoring and evaluation of the Response Fund. The allocation for evaluation will include the evaluation of programmes funded under the Response Fund, as a mean of periodical reviews of the Response Fund.

The Response Fund will be overseen by a Fund Committee responsible for ensuring that interventions are evidence based, and funds are used appropriately and effectively.

SPC will have responsibility for managing processes associated with the Response Fund, and providing secretariat services to the Fund Committee.

Funding Streams

The Response Fund will be allocated six funding streams. The funding streams are:

Funding Stream I – National Strategic Plan Support Grants

Allocation to governments: an allocation to Forum Island Country Governments governments to assist them in implementing their national HIV and STI strategies.

Funding Stream II – Capacity Building Organisations Grants

Allocation for capacity development organisations (CDOs): an allocation for each country where there is an appropriate CDO that can provide capacity development support and efficient administration of grants.

Funding Stream III – Community Action Grants

Allocation of small grants to community-based organisations. In cases where the CDO is funded from Funding Stream II, the CDO will be responsible for the distribution, management and monitoring of these grants.

Funding Stream IV – Competitive Grants

Allocation for competitive grants: competitive pool of funds providing grants to civil society in all PICTs.

Funding Stream V – PRSIP Support Grants

Allocation for implementation of high priority activities identified in PRSIP: an allocation to Pacific regional agencies and multilateral agencies.

Funding Stream VII – Rapid Response Grants

Allocation for contingency for specific, potential urgent functions: a small allocation for either health or organisational related functions. This funding stream is also able to respond rapidly to promote and support innovative ideas both nationally and regionally.

Detail of funding streams

	I National Strategic Plan Support Grants	II Capacity Development Organisation (CDO) Grants	III Community Action Grants	IV Competitive Grants	V PRSIP Support Grants	VII Rapid Response Grants
Eligible grant recipients	<p>Forum Island countries (FIC) governments:</p> <p>Fiji</p> <p>Solomon Islands</p> <p>Tonga</p> <p>Kiribati</p> <p>Samoa</p> <p>Niue</p> <p>Cook Islands</p> <p>Tokelau</p> <p>Vanuatu</p> <p>Palau</p> <p>Federated States of Micronesia</p> <p>Marshall Islands</p> <p>Nauru</p> <p>Tuvalu</p>	<p>Allocated only where CDO has been identified</p> <p>Grants could be extended to other PICTs where needed and a suitable local NGO is identified to implement a project</p> <p>One CDO per country</p>	<p>PICT NGO and community based organisations</p>	<p>Civil society organisations in all PICTs and regional organisations</p> <p>Must have track record in applying for grants</p> <p>Civil society organisations eligible to apply</p>	<p>Funding restricted to Pacific regionally based technical organisations and NGOs</p>	<p>Fund Committee would allocate an amount to be used for specific types of urgent functions including health (surveillance, provision of treatment, etc.) and organisational (e.g. breakdown in an organisation critical to response)</p> <p>Funding may also be used for innovative projects</p> <p>Approval by Fund Committee Chair within fund policies</p>

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Funding allocation	Allocation for each country will be based on criteria such as population, vulnerability to HIV & STI, remoteness, other funding sources, and countries' capacity to use funding	Identified CDO will receive funding for resources that are necessary for carrying out responsibilities as CDO, to support capacity development of small CBOs	Notional allocation per country based on a formula using population, vulnerability to HIV & STI, remoteness, other funding sources, and organisations' capacity to use funding	Allocations set aside as a competitive grant for all governments and NGOs in the 14 countries Grant projects approved independent grants assessment panel (IGAP) to ensure equitable distribution and quality	Allocations set aside to support implementation of PRSIP II priorities by regional organisations Proposals approved by Technical Advisory Group appointed by Fund Committee	Approval by Fund Committee Chair within fund policies

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Grant size	Determined by size of populations, incidence of HIV, and other risk factors	Up to AUD50,000 per CDO per year Organisations with greater capacity and existing track record will be able to access larger grants	Up to AUD10,000 per grant	Between AUD10,000 and AUD50,000 per grant project (with some flexibility) Organisations with greater capacity and existing track record will be able to access larger grants	Up to AUD150,000/year to support PRSIP II priorities	Depending on circumstances; to be decided by Fund Committee
Grant project duration	Based on bi-annual country action plans	Multi-year funding (3 year maximum) with a possible extension based on performance	One year – there may be flexibility depending on performance	Multi-year funding (3 year maximum)	Multi-year funding (3 year maximum)	Depending on circumstances
Selection and approval process	Government must prepare a costed country action plan drawn directly from national HIV & STI plans or would	CDO that can provide capacity development support and efficient administration is	Proposals to be assessed and approved by the National AIDS Committee (NAC) or equivalent and	Grants assessed by independent grant assessment panel (IGAP) against criteria for advertised Round	Fully costed proposal to be developed. Proposals to be appraised by a technical advisory	Needs to be approval by Fund Committee Chair and HIV & STI section head Identified by SPC

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<p>demonstrate direct links to national strategies</p> <p>SPC management assess implementation plan</p>	<p>identified</p> <p>The identified CDO will be provided with a grant to cover the human and administrative needs to service the grants program, identify capacity development needs and work with the government and NAC to improve the overall response to HIV & AIDS in the country</p> <p>Grants awarded by NAC against criteria developed by SPC fund management</p>	<p>administered by the CDO where one exists</p> <p>Where there is no CDO proposals to be reviewed by NAC to ensure they connect to national HIV & STI strategic plan</p>	<p>Proposal consistent with relevant national strategies</p> <p>NAC should sign off on proposals as addressing priorities in national HIV & STI strategic plans</p> <p>Minimum criteria developed by SPC management</p>	<p>group (TAG) and recommendation to the Fund Committee</p> <p>Relevant PICT consulted in development of plans</p> <p>Government & NACs provided with copy of proposal</p> <p>Proposals need to consider relevant gender issues</p> <p>Priority activities should be based on PRSIP & PRSIP annual planning process</p> <p>PRSIP annual planning process to identify priority areas and appropriate</p>	<p>management and recommended to Fund Committee</p>

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					agencies	
Financial management protocols including reporting	<p>Where possible funds should be managed through central government systems</p> <p>Six-monthly reporting on expenditures (unless risk assessment identified otherwise)</p> <p>Funds allocated in two portions (depending on receipt of reporting and expenditures to date)</p>	<p>CDO provided with service contract that states all activities to be addressed and funded</p> <p>Six-monthly funding in line with reporting</p> <p>Recipients acquit and report on completion of activities</p>	<p>Six-monthly reporting on expenditures (unless risk assessment identified otherwise) or projects shorter in duration</p>	<p>Six-monthly reporting on expenditures (unless risk assessment identified otherwise)</p> <p>Funds allocated in two portions per year (depending on receipt of reporting and expenditures to date)</p>	<p>Six-monthly reporting on expenditures</p> <p>Other financial reporting limited to certification of expenditures</p> <p>Funds allocated in two portions per year (depending on receipt of reporting and expenditures to date)</p>	<p>Six-monthly reporting on expenditures</p> <p>This may vary depending on nature of activity funded</p>

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Activity reporting	Six-monthly on implementation of activity Reporting format should use current government format. If none exists, SPC will facilitate development appropriate to national government	Six-monthly reports on implementation	Reporting directly to NAC through CDO Where there is no funded CDO direct reporting to NAC through SPC Six-monthly or completions reports for shorter projects	Six-monthly reporting on implementation More frequent if risk management assessment identified otherwise, and also if it is a new organisation without a track record	Six-monthly reporting on implementation Agencies should provide information to contribute to national reporting	Six-monthly reporting on implementation or completion report depending on duration of project This may vary depending on the type of activity funded
Frequency of funding rounds	Bi-annual planning	CDO appointed in identified countries for a 3-year period	Multiple funding rounds per year if appropriate to spread activity across year	Annual funding round depending on funds available	Annual funding round depending on funds available	When required
Agreement	Agreement with SPC (include agreement to performance assessment and if	Agreement with SPC (include agreement to performance assessment and if	Agreement with CDO where there is a CDO If no CDO agreement with	Agreement with SPC (include agreement to performance assessment and if	Agreement with SPC (include agreement to performance assessment and if	SPC (include agreement to performance assessment and if warranted, external

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warranted, external audit by SPC, Fund Committee or donors) Court action taken if deliberate misuse of funds	warranted, external audit by SPC, Fund Committee or donors) Court action taken if deliberate misuse of funds	SPC Court action taken if deliberate misuse of funds	warranted, external audit by SPC, Fund Committee or donors) Court action taken if deliberate misuse of funds	warranted, external audit by SPC, Fund Committee or donors) Court action taken if deliberate misuse of funds	audit by SPC, Fund Committee or donors) Court action taken if deliberate misuse of funds