



International
Network of People
who Use Drugs

COVID-19 Response Mechanism (C19RM) Community Consultation Guide

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Community Consultation Guide

Introduction

This brief is designed to support key population-led organisations to engage in and contribute to the preparation of funding requests for the C19RM 2.0. An important way to identify and amplify community needs and priorities is to hold community consultations, document and submit needs and priorities to the CCM and document the process of engagement.

Being able to access funding through the C19RM is an **important opportunity** to strengthen and fund key population-led organisations and responses to COVID-19. According to the C19RM Guidelines, countries **must** consult with key populations, community and civil society organisations **prior** to submitting funding requests to the C19RM and those requests must be endorsed by all members of the Country Coordinating Mechanism (CCM).

The C19RM funds: reducing disruptions to service delivery caused by COVID-19 (mitigation); changing current programme strategies to improve access to high quality services (adaptation); and speeding up interventions that will allow countries to meet their targets (catch-up).

It is important to propose interventions designed to support and expand **community systems**. Eligible interventions must address COVID-19 related issues and can cover:

- negative impacts on health service delivery for key populations,
- responses to human rights and gender issues,

- community-led monitoring,
- community-led advocacy and research,
- social mobilisation, building community linkages and coordination,
- organisational capacity building, planning and leadership development,
- responses to gender-based violence.

The GF Community, Rights and Gender (CRG) department has given examples of eligible activities. Some of the proposed interventions include, but are not limited to:

- strengthening existing drop-in centres, safe spaces and community clinics,
- supporting integration of COVID-19 responses in health service delivery,
- community-led COVID-19 testing, countering COVID-19 misinformation or vaccine hesitancy,
- community-led monitoring and reporting on quality of services, stock-outs, and human rights violations,
- raising awareness on the potential rights violations against key populations in the context of COVID-19,
- equipping key populations with personal protective equipment (PPE) and other strategies to ensure the safety of community health service providers,
- nutritional support and essential health commodities,
- facilitating access to peer support groups and other online/phone-based counselling,
- capacity building of community-led organisations to monitor, train and advocate.

Up to 25% of the CCM's 2021 funding is available to support increased engagement with communities and to coordinate with national response bodies and plans. Work with your CCM representative to request funds for more community engagement. Do this as early as possible!

Organising and managing the consultation process

The first step in developing a submission to the C19RM is facilitating consultation and dialogues with key population representatives, that is gay and bisexual men, transgender people, male and female sex workers, people who use drugs and people living with HIV. Consultations should be inclusive and transparent. Consultations should identify the priority needs and record solutions to strengthen community-led responses.

Consultations could be organised face-to-face, virtually or through outreach at community hotspots. Reach out to other key populations and consider running joint consultations, or coordinate to make a joint submission, with all different community needs consolidated into a single document. This will have greater impact and strengthen the chances of community needs being included in the funding request.

Consultations should be organised as soon as possible; the sooner the consultations take place, the greater the chance that suggestions can be considered and included in the final submission. Check the [C19RM tracker](#) to see when your country is expected to submit its funding request and submit inputs **five days ahead of the deadline**.

Once a facilitator has been identified, they should rapidly read through the C19RM guidance documents, including the country allocation letter sent in April 2021. Resources are in the annex of this document.

Planning the consultations

The consultation process is a two-step process. The first step is to identify the needs of community and then prioritise those needs for funding, while the second step should focus on proposing interventions to meet these needs.

The consultation facilitator will be responsible for:

- *Preparing the meeting agenda:* see suggested draft agendas in the text box below.
- *Identifying participants to engage in the consultation process:* consider identifying 15 to 20 participants for the consultation.
- *Preparing invitation letters to participants, as well as defining consultation objectives:* Communicate consultation objectives clearly in simple language in the invitation letter with an attached agenda.
- *Facilitating discussions to identify and prioritise needs and define solutions:* most likely the consultations will need to be held online so ideally participants have reliable access to the internet. Some guiding questions are listed below.

Implementing the consultation meetings

The consultation meeting will be a three-step process:

1. Identify key issues and barriers,
2. Prioritise the most important issues and barriers to address,
3. Define the responses to be funded under the C19RM.

Proposed agenda

1. Welcome address
2. Objectives and expected outputs
3. Brief overview the C19RM
4. Identifying and prioritising needs
5. Defining relevant interventions to respond to priority needs
6. Next steps and Closing

Step 1: Identification of key issues and barriers

Use the guiding questions below to stimulate discussion. The facilitator should also remind participants to focus on COVID-19 related issues and barriers.

Guiding questions should address these themes:

- Health service delivery,
- Human rights and gender related barriers to services,
- Community-led monitoring,
- Community-led advocacy and research
- Social mobilisation, building community linkages and coordination,
- Organisational capacity building, planning and leadership development,
- Responses to gender-based violence.

Suggested guiding questions:

- What are the main barriers as a result of COVID-19?
- How have these barriers negatively impacted accessibility and quality of services/human rights/community-led monitoring/community mobilization/network capacity building/gender-based violence?
- What evidence is currently available and what additional evidence do we need to confirm this?

Step 2: Prioritisation for response

Given there may be many issues and barriers, it will be important to select a few that participants agree are a priority.

A suggested prioritisation exercise: give each person a set number of votes to cast across the issues. For example, if each person has five votes, they can distribute them among five different options or cast them for one issue (five votes for one priority issue), two options (two votes for one issue and three for another issue; or four votes for one issue and one for another issue), etc. This voting method can easily be done in a face-to-face meeting with a flipchart and sticky notes or online using a mural-type platform (see for example <https://www.mural.co>).

Step 3: Defining solutions

Once there is agreement on the priorities, it will be important to propose how to address these with clear and specific interventions. The facilitator should invite participants to discuss and agree on the proposed interventions to overcome each of the priority issues or barriers.

Suggested guiding questions to stimulate discussion on proposed interventions:

- What interventions can be used to overcome the priority issue that was identified?
- Where will this intervention be implemented? Who will be the implementers? Who will benefit? How many people will be affected by the intervention?
- Are there obstacles that might limit implementation of the intervention?
- What resources will be needed to implement the intervention? Consider financial resources, human resources and technical support.

Documenting the outcomes of the consultation process

Documentation of the consultation is needed to demonstrate that the community was consulted. It will be important to record the number of participants as well. Use the system you normally use, for safety and security of the community, to record participant information.

It will be important to prepare a report with community inputs and priorities. The report should not exceed 6 pages and should include:

- background information including the meeting objectives and number of participants,
- a list of guiding questions used and responses to those guiding questions,
- a list of issues and barriers that were identified and selected by the participants, in order of priority,
- a list of proposed interventions to address the priority issues and barriers.

Also consider using the form below to summarize the list of issues and barriers as well as the proposed interventions to overcome those as an annex to the report.

Summary list of community priorities		
Location & Date		
Number of participants		
Populations		
Activity category	Issues / barriers	Proposed intervention
Health service delivery to key populations		
Community-led monitoring		
Community-led advocacy and research		
Social mobilization, leadership development and coordination		
Institutional capacity building, planning and leadership development		
Responses to gender-based violence		
Responding to barriers to access health services related to human rights		

Follow-up actions

Sharing the report

Once the consultations have been held and the report finalised, the results should be sent to CCM representatives and the CCM Secretariat to advocate for their integration in the C19RM country funding request. The report can also be sent to:

- Principal recipients,
- GF Portfolio Manager and other members of the Country Team,
- Global key population networks
- Regional Platforms,
- UNAIDS and WHO country representatives

Advocating for community priorities

Make sure to follow up and keep the pressure on the CCM to include the community's suggestions in the final submission to the C19RM and track progress on preparation and submission.

- Mobilise allies in support of the community's proposed interventions, such as UNAIDS, WHO and others who can influence the CCM,
- Share the report of your consultations with global key population networks so they can support your requests and follow community engagement,
- Reach out to anyone you know on the CCM writing team or working group preparing the country submission or advocate for being on that writing team or working group. If this is not possible, make sure there is still ongoing consultation with communities,
- Find out what interventions are (not) being integrated in the funding request and the amount of funding requested for community priorities compared to the total amount requested by the CCM,
- Ask for a copy of the final funding request to the C19RM prepared by the CCM.

Additional resources

- [C19RM Technical Information Note](#)
- [COVID-19 Guidance Note: Community, Rights and Gender](#)
- [COVID-19 Guidance Note: Human Rights in the Times of COVID-19](#)
- [Key Population's engagement in the COVID-19 Response Mechanism \(C19RM\)](#)

Technical Assistance

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CRG Regional Platforms

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The International Network of People who Use Drugs (INPUD) is a global peer-based organisation that seeks to promote the health and defend the rights of people who use drugs. INPUD will expose and challenge stigma, discrimination, and the criminalisation of people who use drugs, and their impact on the drug-using community's health and rights. INPUD will achieve this through processes of empowerment and advocacy at the international level, while supporting empowerment and advocacy at community, national and regional levels.

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www.inpud.net



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