

Challenge Facility for Civil Society launches its 7th round. *Strengthening comprehensive responses to TB that engage and are accountable to communities*

The Stop TB Partnership has launched a call for the seventh round of Challenge Facility for Civil Society (CFCS) grants. The CFCS provides grants to technically sound and innovative interventions to support the engagement of communities in national tuberculosis (TB) responses. To date and in an era of top down, biomedical responses to TB, the CFCS has done much to invest in and demonstrate the effectiveness of community responses – US\$ 2.1 million has been awarded to 121 grantees in 41 countries since 2007.

The Stop TB Partnership's Global Plan to Stop TB 2016-2020, in alignment with the World Health Organization's (WHO) *End TB Strategy* and the funding model of the Global Fund to Fight AIDS, Tuberculosis and Malaria challenges the traditional biomedical approaches to TB and calls for integrated and comprehensive responses to TB that are patient-centered and include strong partnerships with communities and civil society.

Communities and civil society still however lack recognition as legitimate partners at national and local levels, which is compounded with a significant lack of resources for community initiativesⁱ. The CFCS has thus transformed from one which supports small scale community initiatives to investing more significantly in community responses that are integrated and part of a comprehensive response to TB.

Community responses are vital components of an efficient and effective TB responseⁱⁱ. To contribute to its vision of *strengthened comprehensive TB responses that engage and are accountable to communities* and its goal to *strengthen community responses that are integrated and part of a comprehensive response to TB* the 3 primary objectives of Round 7 are to:

- 1) Strengthen existing or new national level TB constituencies that engage, represent and are accountable to communities;
- 2) Reinforce the capacities & responses of communities who are part of the TB response; and
- 3) Tighten linkages, collaboration and coordination between communities and government.

Expected Results

Local level: A strengthened, integrated and comprehensive TB response that explicitly responds to community needs.

National level: Effective community engagement, strengthened representation and subsequent accountability to communities in the national TB response, as well as strengthened linkages and partnerships between community groups, public agencies, the Global Fund Country Coordination Mechanism and other actors.

Global level: Documented best practices and evidence based recommendations to enhance community responses that are integrated & part of a comprehensive response to TB, which can be adapted and replicated in other countries.

Grants of up to US\$60,000 will be awarded for a 12 -15 month period and grant implementation will be in two phases. This call for applications is for **Phase I** (Objective 1) **only**. **Phase II** (Objectives 2 and 3) will be managed sequentially and via a separate process.

In **Phase I**, over a three-five month period, selected grantees will conduct assessments to strengthen or build a national TB constituency that engages, represents and is accountable to communities. In **Phase II**, a nine-twelve month period, the reinforced national TB constituency, under the mentorship of the grantee will strengthen community responses, as well as linkages, collaboration and coordination between community, state and other actors.

In Phase I of Round 7, the Stop TB Partnership Secretariat is seeking applications to progress towards Objective 1, *to strengthen an existing or new national level TB constituency that engages, represents and is accountable to communities*. Below are illustrative activities that could fulfil this objective.

- Assess the current community response.
- Conduct a TB gender assessment.
- Conduct a legal and social environment assessment.
- Map community actors that are part of the TB response.
- Identify, based on the assessments and mapping exercise the human resources, system, equipment and infrastructural needs required to establish and sustain a national TB constituency.
- Support the constituency to develop work- and engagement-plans.
- Identify the training and capacity development needs of communities.
- Develop a mentorship program for Phase II.

In Phase II, to progress towards Objective 2, *to reinforce the capacities and responses of communities who are part of the TB response* and Objective 3, *to tighten linkages, collaboration and coordination between communities and government*, a work-plan based on the outcomes of Phase I will be developed by grantees in collaboration with the Stop TB Partnership Secretariat, via a separate process.

Application process: Applicants need to complete the [online application form](#) and are encouraged to carefully examine and follow the [guidelines](#) to filling out the form. No paper applications or electronic applications via email will be accepted.

Available funding (per grant)

- **Phase I:** US\$ 25,000, 3 - 5 month period (approximately)
- **Phase II** US\$ 35,000, 9 - 12 month period (approximately)

Eligibility: Applicants must have experience working on HIV or TB with a focus of civil society and community related issues. They must have a demonstrated understanding of Global Fund to Fight AIDS, Tuberculosis and Malaria processes. They must have a track record in strengthening community engagement and have existing relationships with a range of civil society, community networks and other partners. Countries, where grants will be implemented must also be a recipient of a Global Fund TB or TB/HIV grant **and** be a High Burden TB or MDR-TB or TB/HIV country. [Please see eligible country list here](#).

Review process and funding decisions: To review proposals and select those to be funded, the CFCS has an independent Selection Committee. The committee makes recommendations to the Stop TB Partnership Secretariat and final funding decisions are made by the Stop TB Partnership Coordinating Board.

Languages: Applications can be filled out in English, French, Spanish, Russian and Chinese.

Deadline: 16 October 2015 (11:59 PM Geneva time)

Questions: Please direct questions to cfcs@stoptb.org

ⁱ Getahun H, Raviglione M. Transforming the global tuberculosis response through effective engagement of civil society organizations: the role of the World Health Organization; 2011. <http://www.who.int/bulletin/volumes/89/8/11-086801/en/>

ⁱⁱ Developing Country NGO Delegation Global Fund to Fight AIDS, Tuberculosis and Malaria. Statement on Health and Community System Strengthening: Is health systems strengthening excluding community systems? 2015 <http://developingngo.org/article.php?page=39>