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Community Engagement Report

The involvement of MSM and transgender community in the
Global Fund New Funding Model in Cambodia

November 2015



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ACRONYMS AND ABBREVIATIONS

AIDS	Acquired Immune Deficiency Syndrome
AEM	AIDS Epidemic Model
BC	Bandanh Chaktomok
CCC	Country Coordinating Committee
CHAI	Clinton's Health Access Initiative
CPN+	Cambodian Network of People Living with HIV
CCC-OC	Country Coordinating Committee-Oversight Committee
CSO	Civil Society Organization
CSS	Community System Strengthening
FEI	France Expertise International
FI	Friends International
FoNPAMs	Forum of Networks of People Living with HIV and Most-at-Risk Populations
GF/GFATM	Global Fund/Global Fund to Fight AIDS, Tuberculosis and Malaria
HACC	HIV/AIDS Coordinating Committee
HIS	Health Information System
HIV	Human Immunodeficiency Virus
IBBS	Integrated Behavioral and Biological Survey



ID (Card)	Identification (Card)
KAP	Key Affected Population
KII	Key Informant Interview
MHSS	Men's Health Social Services
MSM	Men who have Sex with Men
M&E	Monitoring and Evaluation
NAA	National AIDS Authority
NCHADS	National Center for HIV/AIDS, Dermatology and STD
NFM	New Funding Model
NGO	Non-Governmental Organization
NSP	National Strategic Plan (Non-Health)
OD	Operational District
RHAC	Reproductive Health Alliance of Cambodia
SOGI	Sexual Orientation and Gender Identity
UNAIDS	Joint United Nations Programme on HIV/AIDS
USG	United States Government
WHO	World Health Organization

EXECUTIVE SUMMARY

Introduction

The Global Fund's New Funding Model contains a country dialogue process which is a significant opportunity for key affected population including MSM and transgender organizations to meaningfully involve in all the stages, and engage with several Global Fund personalities. However, the complexity of the model poses a challenge to the communities and civil society organizations to know when and how they can best participate. This limited substantial knowledge on the process may create gaps in their engagement. The engagement of key affected population which includes MSM and Transgender was defined by a meaningful participation in an ongoing and consultative process of the country dialogue. In Cambodia, the engagement opportunities are embodied in:

- i) Knowledge and understanding on the Global Fund Country Processes;
- ii) Engagement with the country dialogues;
- iii) Engagement with the Country Coordinating Mechanisms;
- iv) Engagement with the Global Fund Country Team.

In 2014, the Communities Delegation of the Board of the Global Fund to Fight AIDS, Tuberculosis and Malaria, used its findings of the global review of KAP's engagement to establish a Framework on Participation which includes: Communication and Transparency; Representation and Accountability; Influence; Safety and Confidentiality; Resources and Strengthening of Systems and Capacities; and Culture, Respect and Authenticity.

In Cambodia, the Country Dialogue process was led by an HIV Steering Committee under the Country Coordinating Committee. It included a balanced representation of various stakeholders including KAP Representatives and chaired by UNAIDS Country Director with back up from the United States Government. The concept note development process started in June 2014 lasted in January 2015 when the concept note was officially submitted to GF. However, the grant making continues over a period between July 2015 and October 2015 and the last stage of grant implementation will continue till the end of grant timeline by end of 2017.

Objective

The objective of the assignment is to document the engagement of the MSM and Transgender communities into the country dialogue of the GF's New Funding Model in Cambodia, emphasizing on the experiences of the MSM and transgender communities in relation to GF's New Funding Model Concept Note development, the level of their engagement and recommendations on how APCOM and the Global Fund address these gaps.

This document has been funded by grant 2014097 to the Consortium of MSM and Transgender Networks by the Robert Carr civil society Networks Fund.



Methods

The study employed a qualitative methodology. However, key quantitative elements were also explored to support all qualitative analysis. The data collection methods comprised of literature review of key relevant documents and key informant interviews and group. In total, there were 13 participants involved in interviews and various docs were examined to collect data.

Data Analysis

A simple data analysis was conducted manually by following the themes as elements of the participation framework. All interview records both transcript and audio in all completed interview examined according to the themes.

Findings

A. Overall Engagement

KAP representatives and focal points had good opportunity engaging in concept note development process which lasted for a period of June 2014 to January 2015. In this process certain number of MSM and Transgender population who are representatives in Country Coordinating Committee and network focal points participated in various events including CCC monthly meetings, HIV Steering Committee monthly meetings, policy dialogues, national consultations on strategic plan development (Health Sector and non-health), KAP consultations, focus group discussions, site visits, meetings with GF Country Team, country dialogue workshop, the review and endorsement of the draft concept note along the CCC before it was submitted to the GF. However, there was very limited participation of KAP and MSM and Transgender in the grant negotiation stage. However, there will be obvious opportunity for all KAP/MSM and Transgender to be actively engaged during the grant implementation stage to between from October 2015 and December 2017.

B. Communications and Transparency

There were various means of communications between KAP/MSM and Transgender representatives and focal points with CCC and other stakeholders including GF country team. CCC Secretariat was central in all communications via sending emails, hard copy of invitation, focus group discussions, consultations, sites and community visits. All communications were made clear, open and transparent using local and English language and there was technical assistance from the consultants in facilitating KAP engagement over the period of country dialogue. Efforts and resources such as funding from the GF, USAID, UNAIDS, FEI5%, etc. were invested in ensuring maximum participation of KAP/MSM and Transgender engagement through capacity building activities and technical assistance. However, the decision making on budget allocation and cuts were not involving KAP/MSM and Transgender. Before each workshop or meetings which required both English and Khmer language, a preparatory session was always organized to prepare KAP beforehand. MSM and Transgender representatives used their own existing networks to share information and they helped each other to get to well understand the issues once they get it from CCC.



The gaps and challenges that MSM and Transgender population faced with all their communications included limited knowledge of English, social media technology skill such as creating and using email, etc. Majority of MSM and Transgender population was also not well aware of their current representatives. In relation to the budget allocations and cuts, there was concern about limited engagement of KAP/MSM and Transgender in such critical issue.

C. Representation and Accountability

Representation of KAP/MSM and Transgender was with its accountability starting with a transparent selection by their members. The two current representatives showed strong commitment and had intellectual and high capacity in participating in CCC meetings and CCC-OC meetings and other activities. However, there were some concerns raised by the CCC Secretariat on some challenges and gaps such as limited English language (at least one among two), limited technical knowledge on HIV/AIDS, low commitment and lack of necessary skills such as reporting and documentation, etc.

D. Influence

The voice of KAP/MSM and Transgender was heard through their representatives sitting on CCC and CCC-OC. With KAP engagement plan include in the GF-funded project which is managed by CCC Secretariat, MSM and Transgender have the opportunity to document their cases of violence, barriers in accessing HIV and non-HIV services and bring it back to share with CCC as an advocacy effort. More importantly, several consultations and group discussions were conducted with them facilitated by consultants to collect their inputs, concerns and needs in order to present to stakeholders and to inform the concept note.

However, the question still remains on what has been done with the issues raised by the KAP to the CCC, especially if there are some issues that needs to go to the PR or Sub-Recipients (SR) or Sub-Sub Recipients (SSR). In addition, none of KAP representative was include in the write-up of concept note/modular tables (11 modules).

E. Safety and Confidentiality

All issues and concerns raised by KAP/MSM and Transgender were facilitated by only technical consultants who were independent of other institutions that helped created safe environment for them to bring the issues that really reflect their situation. Also, CCC and all stakeholders strictly followed confidentiality in HIV and other sexual status and identity. In case there is any incidence occurs, MSM and Transgender use their existing network to seek help and assistance.

F. Resources for strengthening of systems and capacity

It obvious that there were some gaps of capacity of MSM and Transgender representatives and focal points to fulfill their representation role with accountability soundness that ensure meaningful participation in country dialogue. In addressing such critical issues, CCC has mobilized resources build their capacity in the aim to optimize their engagement. KAP engagement plan was created and incorporated into the project funded by GF and managed by CCC Secretariat. In addition, other resources including FEI5% KAP engagement project, UNAIDS's FoNPAMs initiatives, were also mobilized in the same purpose of strengthening KAP capacity for optimal engagement in the country dialogue. As results, the CCC Secretariat observed that there was improvement of KAP

feedback mechanism and commitment in the CCC representation.

G. Culture, Respect and Authenticity

MSM and Transgender representative and focal points are well respected by all stakeholders. They enjoyed freedom of their culture in all the events within CCC and other stakeholders during the country dialogue process. However, there remain social discrimination and stigmatization by the public.

Conclusions

• Significant and Regular Representation Role of MSM

Current MSM/Transgender Representatives were actively involved in the CCC and over the country dialogue process. At least one among the two has proven high capacity and commitment in the representing their community in various events of the Country Dialogue process.

• Significant Engagement Opportunities for Concept Note Development

The MSM and Transgender engagement was significantly made possible by efforts and resources of involved stakeholders. All communications were done with both local and English language and there were technical assistance for facilitation of maximum participation in the country dialogue process. KAP/MSM/Transgender engagement and capacity building plan were include in the GF-funded project and additional efforts and resources were mobilized among development partners such as UNAIDS, FEI5%, USAID, etc. to facilitate smooth and systematic engagement process.

• Potential Engagement Opportunity during Grant Implementation

Though there was limited opportunity for MSM/Transgender to engage in writing up concept note (11 Modular tables) and during the grant making, there will be greater opportunity for them to authentically participate in the grant implementation as both beneficiaries of the five sub-grant implementation and certain number as representatives or focal points of their community. The five modules of the Concept Note include HIV Prevention for MSM/Transgender, Treatment/care/support, HIS and M&E, CSS, and Removing Legal Barriers.

• Gap: Knowledge and Skills

The MSM/Transgender representatives and focal pints indicated some challenges to have good understanding around HIV epidemiology, policy and strategy, programmatic issues, etc. as well as the non-HIV social issues such as social protection and legal and human rights that prevented them from fully engaging in all process of the Country Dialogue. Also, they lacked some needed skills such as documentation for collecting evidences and case studies, and advocacy skills in order to challenge policy and decision makers.

• Challenges and barriers:

In addition to poverty, generally, MSM/Transgender community who come out publically to involve in activities had low education while those who are well educated try to hide themselves. This is one of the huge challenges



for the representatives and focal points to work and communicate with them on different issues that affect their lives. In addition, it was observed lack of motivation of MSM/Transgender representatives and focal points that preventing them from participating regularly in some key meetings in which decisions were made that affect them subsequently.

Recommendations

- **Improve communications by using existing NGO System, Structure and Networks**

While BC seems not so strong itself organizationally, its connection with NGOs who work directly with MSM/Transgender community experienced some level of confusion particularly during their engagement in Country Dialogue. To avoid this distract in the future, all communications with MSM/Transgender focal points should follow the existing structure and system of NGOs who have better networks and systems in communicating and sharing information with all MSM/Transgender community.

- **Strengthen MSM/Transgender engagement**

Addressing the gaps, challenges and barriers that prevented MSM/Transgender from meaningfully engaging in the Country Dialogue over the concept note development period, by leveraging the learning from the positive lessons of concept note engagement and strengthening into the next stage of the grant implementation, as well as for the future.

There should be increasing transparency and accountability on discussions and negotiations of all programming and budget allocation and more open opportunity for MSM and Transgender to be participating in the process. It should also critical to explore the chance that capable MSM and Transgender representatives could engage in concept writing team for the future.



•Continue Capacity Building/KAP Engagement Plan

The GF-funded capacity building and KAP Engagement plan was good tool in ensuring full and optimal engagement of KAP/MSM/Transgender not only for the country dialogue but for the whole process and business of CCC, CCC-OC and other activates that required engagement of KAP. Obviously, over the grant implementation some of capacity building activities will be achieved.

•Improve Motivation of MSM/Transgender Representatives

The improvement of motivation could be achieved through rigorous selection of MSM/Transgender representatives targeting those who have multi-discipline and skills and sufficient time to be able communicate and represent in mutual ways: between CCC, themselves and MSM/Transgender community. The MSM/Transgender representatives selected from NGOs or CSOs would not need additional financial incentive support as they get already get paid but timing would be a potential challenge for full engagement.

•Continue, Strengthen Capacity and Organization of BC and KP Networks

Ensure continuity of the BC's capacity building by technical support providers; for example the JumpStart Capacity Strengthening Initiative which leverages on strengthening the national network's structure and management. The organisational capacity strengthening should not only focus on MSM and Transgender networks but also those of people living with HIV, sex workers and people who use drugs.

CCC must officially provide additional seats for other key KAP to have a full engagement with KP and provide a platform for raising issues directly to the CCC committees. CCC, NAA, MOH and other technical partners must establish a mechanism that will allow KP to ascertain whether or not their issues adopted in the writing of the concept note, and discussed during the grant making process. CCC and other technical partners to establish a mechanism to report human rights violations during Global Fund process directly to the CCC secretariat.

INTRODUCTION

Global Fund's New Funding Model launched in 2014 believes in meaningful participation of the key affected populations and communities in all the processes that relates to Global Fund's country dialogue.

The Country Dialogue is an ongoing process that occurs at the country level among the government, development partners, the private and public sectors, the networks of key populations (KP) including people living with HIV, civil society and other technical partners. It results to a shared vision amongst partners on how to improve health and fight the epidemic. It describes the inclusive, ongoing consultative processes at the country level that is meant to inform all stages of the New Funding Model processes. The meaningful participation of the networks of key populations and people living with HIV in the country processes renders the concept note robust.

The country dialogue process is a significant opportunity for MSM and transgender organizations to meaningfully involve in all the stages of the NFM, and engage with several Global Fund personalities such as the Country Teams, Fund Portfolio Managers and the Country Coordinating Mechanisms.

However, the complexity of the model poses a challenge to the communities and civil society organizations to know when and how they can best participate. This limited substantial knowledge on the process may create gaps in the engagements of the communities to the Global Fund process, hence, limiting their participation.

Engagement Process within NFM

Global Fund encourages and increases engagement with individuals and organizations that are affiliated with or representing key populations . According to Global Fund, the engagement of key affected population (KAP) in general, and MSM and Transgender in particular in the New Funding Model, was defined by a meaningful participation in an ongoing and consultative process of the country dialogue which lays different stages from national strategic plan development, concept note development, and grant making to grant implementation . To optimize the KAP engagement in its investment plan, GF developed a strategic framework called "Key Populations Action Plan 2014-2017", in response to the recommendations that relates to SOGI strategy. One of its safeguards included in the SOGI strategy was to provide targeted technical assistance to support the meaningful engagement of key affected populations as well as broader communities .

- i) In Cambodia, the opportunities for the MSM and Transgender population to meaningfully engage are embodied in the following:
- ii) Knowledge and understanding on the Global Fund Country Processes;
- iii) Engagement with the country dialogues;
- iv) Engagement with the Country Coordinating Mechanisms;
- v) Engagement with the Global Fund Country Team;

Key questions to these engagement opportunities would be what experiences, approaches, strategies, levels and lessons learnt that MSM and transgender have engaged into these Global Fund related activities. These questions will be framed into each of the six key components of the key populations participation framework provide above and use as guide of all interviews.



Global Fund's Key Population Participation Framework

In 2014, the Communities Delegation of the Board of the Global Fund to Fight AIDS, Tuberculosis and Malaria, presented its findings of the global review of KAP's engagement to the funding model under the following elements that comprise the Framework on Participation:

- Communication and Transparency
- Representation and Accountability
- Influence
- Safety and Confidentiality
- Resources and Strengthening of Systems and Capacities
- Culture, Respect and Authenticity

Global Fund New Funding Model Process in Cambodia

In Cambodia, the Country Dialogue process was led by an HIV Steering Committee Under the Country Coordinating Committee. It included a balanced representation of various stakeholders including KAP Representatives and chaired by UNAIDS Country Director with back up from the United States Government. The key tasks of the HIV Steering Committee are to: 1) design a Country Dialogue roadmap; 2) mobilize resources both technically and financially to support the process (FEI5%, WHO, UNAIDS, USG) and guide the Concept Note development; and, 3) launch the inclusive national dialogue through an open invitation letter by the CCC to join the Country Dialogue for HIV Concept Note inviting interested individuals and institutions to be engaged in the process. The concept note development process started in June 2014 lasted in January 2015 when the concept note was officially submitted to GF. However, the grant making continues over a period between July 2015 and October 2015 and the last stage of grant implementation will continue till the end of grant timeline by end of 2017.

OBJECTIVE

The objective of the assignment is to document the engagement of the MSM and Transgender communities into the country dialogue of the GF's New Funding Model in Cambodia. The document aims to provide emphasis on the experiences of the MSM and transgender communities in relation to GF's New Funding Model Concept Note development, the level of their engagement with the Global Fund bodies, and their collective feedback on the funding model. Also, there will be highlight of recommendations on how APCOM and the Global Fund to address these gaps.

METHODOLOGY

The study employed a qualitative methodology. However, key quantitative elements such as number and percentage of MSM and transgender populations participated into country dialogue process was also explored to support all qualitative analysis. The data collection methods comprised of literature review of key relevant documents and stakeholder interviews including key informant interview (KII) and group interview with MSM and transgender community.

Data Collection

A mixture of a purposive and random sampling was used. For KII, the study participants was purposively identified and interviewed. For group interview with MSM/Transgender, a random selection was done using list of those who participated in different events of the Country Dialogue. In addition, there were self-administration by filling in the interview questionnaire sent through email.

In total, there were 13 study participants, out of which 12 were in Phnom Penh, and 1 was from Geneva, Switzerland. They include as follows:

1. For Key Informant Interview

- a) Four Global Fund and Technical Partners
- b) Three Community Members

2. For Group Interview

There were six persons participating in the group interview:

- Three MSM members
- Three transgender members

Literature Review

Key documents reviewed to collect information include:

- Cambodia HIV Concept Note submitted to Global Fund, January 2015
- Country Coordinating Committee meeting notes/minutes
- Meeting Notes/Minutes of HIV Steering Committee for Concept Note Development
- KAP Consultation Reports
- Report of National Consultative Workshop on Concept Note
- Lists of participants in CCC meetings, HIV Steering Committee meetings, Stakeholders Consultative meeting on HIV/AIDS and



- STI strategic plan in the health sector 2015-2020,
- Bandanh Chaktomok Summary Reports of Self-Assessment conducted by APCOM
 - Global Fund New Funding Model
 - Global Fund New Funding Model Country Fact Sheet: Cambodia
 - Key Populations Action Plan 2014-2017, The Global Fund to fight AIDS, Tuberculosis and Malaria
 - The Global Fund New Funding Model,
 - The Gender Inequality and the Sexuality Orientation and Gender Identity (SOGI) Strategy 2011, The Global Fund
 - Communities Delegation of the Board of the Global Fund to fight AIDS, Tuberculosis and Malaria. A review of engagement of Key Populations in the Funding Model;
 - Summary Documentation: The country dialogue for HIV Concept Note Development Cambodia, June 2014-January 2015
 - Global Report: Results from a study of 11 countries, November 2014

Data Collection tool

The interview guides for both KII and group interviews were developed to include key specific elements from the engagement framework above.

Data Collection

The interviews were conducted from 25 September 2015 to 5 November 2015, with key informants and a mixed group of selected MSM and Transgender through a random selection method using the list of MSM and Transgender participants in a series of events of the country dialogue. Detailed list of interviewees is given in the annex of this document.

DATA ANALYSIS

A simple data analysis was conducted using a manual qualitative data analysis methods. All interview records both transcript and audio in all completed interview examined according to the themes as included in the thematic framework (key populations participation framework) as follows which also includes sub-themes and key words were analyzed under each sections of themes.

- A. Overall Engagement
- B. Communication and Transparency
- C. Representation and Accountability
- D. Influence
- E. Safety and Confidentiality
- F. Resources and Strengthening of Systems and Capacities
- G. Culture, Respect and Authenticity

FINDINGS

A. Overall Engagement

For Concept Note Development from June 2014 to January 2015 In Cambodia, the country dialogue process was designed using the format illustrated in the diagram below (Figure 1) and handled by an HIV Steering Committee established by the CCC, consisting of representatives from the following organizations NAA, NCHADS, WHO, UNAIDS, United States Government (USG Represents USAID, PEPFAR and US CDC)), KAP representatives, CHAI, CPN+, CCC-OC, FI, HACC, RHAC, and KHANA. The key elements of the country dialogue for the HIV Concept Note development include: National strategy development including Health Sector HIV National Strategic Plan, Harm Reduction Strategic Plan and Multi-Sectoral (Non-Health) National Strategic Plan IV; AIDS Epidemic Modeling Exercise; KAP Consultations, Home based care lessons learnt (Evaluation of Home-based care Project funded by USAID), National Consultation of HIV Concept Note, PR selection process, etc. Most of the components that were identified as critical to inform the Concept Note were completed or in advanced stage of development by the time of the National Consultation of HIV Concept Note organized 18-19 November 2014 which brought all stakeholders to get consensus on key elements to be included in the Concept Note. It is important to note that for each of process of this country dialogue and through different opportunities, representatives of key affected population of all their constituencies such as EW, MSM, TG, PWID and PLHIV were actively engaged and meaningfully participated with sharing their views, concerns, challenges and provide recommendations to each of the process . The engagement of MSM and Transgender in the Country Dialogue process of GF's NFM was largely seen through their elected and selected representatives. The elected representatives refer to the official ones who were elected through a transparent and participatory process to sit on the CCC, while the selected ones were done through their networks as invitees to the events that required their participation.

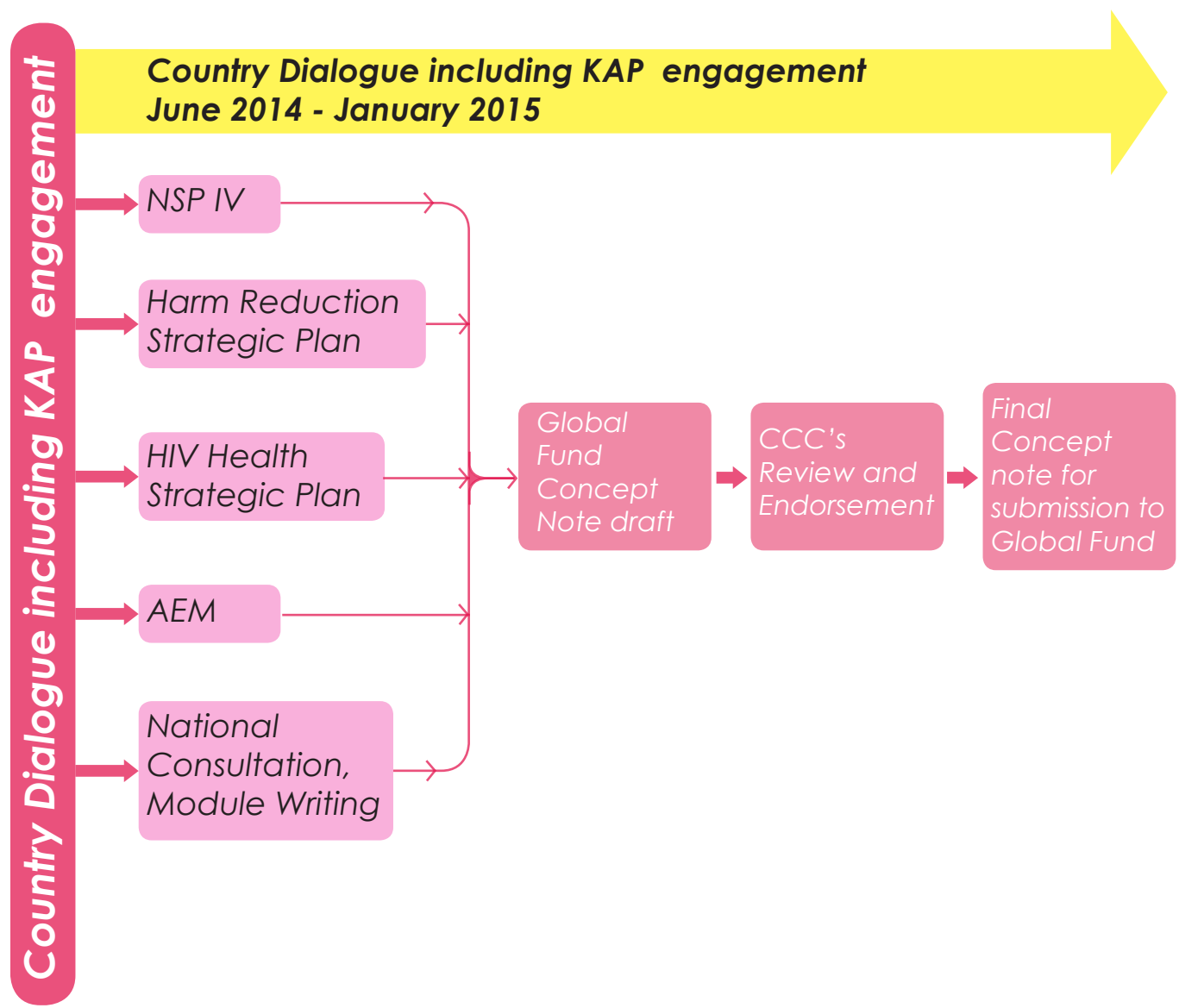


Figure 1. Diagram of the Cambodia Country Dialogue for HIV Concept Note Development



Along with other KAP populations including People Living with HIV (PLHIV), Entertainment Workers (EW), and People Who Inject Drugs (PWID), MSM/Transgender community had good proportion and significant opportunities to be notably involved in the country dialogue process of the GF's NFM over the past year, between March 2014 till January 2015 where the Concept Note of New Funding Model was officially submitted to the GFATM. Below was the list of the opportunities in which elected and selected MSM and Transgender population participated in the country dialogue:

• *CCC and Sub-committees:*

There are two representatives, each for MSM and Transgender, who have been sitting on the CCC and at least one on its sub-committees for the current term, along with other representatives of relevant stakeholders. Mr. Kong Bunthorn who is also the National Coordinator of the MSM and Transgender Network-Bandah Chatomok (BC) - is the full membership, while Pich Socchea is the alternative one. Furthermore, Mr. Kong Bunthorn was also active member of other sub-committees including CCC Oversight Committee and CCC HIV Steering committee. This high level representation role has given remarkable chance for them to particularly advocate with the CCC to take their issues into the account of new funding and grant.

• *National Consultation of KAP:*

In order to improve the understanding of KAP about the GF and the Country Dialogue process, GF provided direct funding to CCC Secretariat for Strengthening Capacity of KAP in fully and meaningfully engaging into NFM Concept Note development. Along with this project, France Expertise Internationale-FEI-'s Initiative 5% (FEI5%) assisted with hiring a consultant to help with this. Among other project activities, a big national consultation was carried on 29 August 2014 in which 160 selected KAP and FBOs representatives were participating, including 20 of MSM and Transgender to learn about the CCC, GF, Country Dialogue Process, New Funding Model, and to identify their barriers in engaging in the GF. That gave a

• *KAP Engagement for Inputs*

Again, a study was funded by FEI5% to collect inputs from KAP including MSM and Transgender through a Focus Group Discussion, Interviews and Consultations for a period from September 2014 to November 2014. This led through a national consultant. The KAP inputs then were also used to inform the Concept Notes in the National Consultation for HIV Concept Development held in the same month. The total number of MSM and Transgender selected to participate in this process was: 15 MSM and 20 TG.

• *Health Sector Strategic Planning National Stakeholders Workshop*

The workshop was held on 21-22 October 2014 and organized by the National Center for HIV/AIDS, Dermatology and STD (NCHADS) to validate and agree upon the key elements of the strategic plan for a period of 2016-202. Along with other KAP, 5 MSM and Transgender representatives were invited. During the workshop, they were encouraged to participate in the group works in which they had opportunity to work on the parts of the strategic plan which are mostly relevant to them. For example, sections on HIV and STI prevention, care treatment, and support. Their feedback was also taken into account by the workshop and NCHADS.



•KAP Orientation Workshop

The workshop was conducted on 17 November 2014, as part of preparation and effort to optimize the participation of KAP (including MSM and Transgender) into the national consultation for HIV Concept Note Development, subsequently carried out for two days following that. The main objective was to prepare KAP representatives for big consultation next two days by providing opportunity to them to learn the country dialogue process means, what elements were included in the CD, how HIV programs and funding were prioritized, how modules were selected, and how and why funding were allocated based on the selected modules. As result 5 of MSM and Transgender community were also present and prepared themselves for the National Consultation.

•National Consultation for HIV Concept Note Development

Following the half-day KAP orientation workshop, the National Consultation for HIV Concept Note which was the culminating event for the national dialogue was conducted from 18-19 November 2014. This was a critical opportunity to review and develop consensus on key modules and prioritize interventions for inclusion into the HIV concept note. The objectives of the HIV Concept Note National Consultation were to validate the findings from the country dialogue to date and agree on the final prioritization of interventions to be included in the Concept Note.

It brought together about 150 representatives of all key stakeholders engaged in HIV in the country including Government institutions (NAA, MoH, NCHADS, and other Ministries), Civil Society, community networks and groups, key affected population, non-governmental organizations, development partners, UN, and other interested institutions and individuals. Along with other KAP, 10 of selected MSM and Transgender group members out of 40 KAP representatives were participating and provided the opportunity to review and validate that their issues identified in the pre-defined modules. They were actively participating in most of the focus group discussions at the community level using the local language and visual and participatory tools for easy communications and gathering of issues relevant to MSM/TG so that this could be incorporated in the Concept Note.

•Concept Note Review and Endorsement

KAP representatives sitting on the CCC had been engaged in the review of the draft concept note which was submitted to CCC following the National Consultation for HIV Concept Note Development, and ultimately participated in the endorsement in the CCC's 69th meeting on 12 January 2015 before it was officially submitted to the GF in early January 2015.

•Other Engagement

Other than the opportunities listed above, MSM and Transgender representatives had other important levels of participation including meetings and consultations with various technical working groups including NAA's Working group meetings for NSPIV development and NCHADS's Technical Working group meetings as consultative process for the Health Sector HIV/AIDS and STI Strategic Plan Development prior to the national stakeholder consultation workshops mentioned above. For Grant Implementation Stage (October 2015-December 2017) According to the GF , the engagement of KAP in general, and MSM and Transgender in particular was not limited by the end where the concept was officially submitted. It is, however, a continuous process, and the



grant implementation stage is also one of the essential elements. According to the agreed timeline between GF and the CCC, this stage lasts until the end of 2017. In Cambodia, based on the HIV concept note, there are at least five sub-grants (Modules) below are counted as the greater potential opportunities on which MSM and Transgender population have chance to keep their engagement during the grant implementation. In addition, MSM/Transgender will also have the opportunity to meet face to face with the GF country team when they come to visit.

•*HIV Prevention for MSM and Transgender Module*

HIV Prevention grant implementation will benefit directly to MSM and Transgender in equipping them with HIV prevention and Life skills, and in ensuring the populations are able to access to needed services of HIV, Sexual and Reproductive Health and STI. Obviously, this is the opportunity on which MSM and Transgender will participate both as direct beneficiaries and as the project implementers.

•*Community System Strengthening Module*

Community System Strengthening (CSS) grant implementation will set up another opportunity for the MSM and Transgender community together with other KAP to strengthen their local networks at the Operational District (OD) level which will be by HACC as a sub-recipient, building on a project template of FoNPAMs developed and implemented by UAINDS before it was transferred to HACC with the GF grant. According to the module concept, this grant will create critical chance for the MSM and TG in mapping out their locations and population size which will be used as strong tool to advocated for services coverage and prioritization.

•*Removing Legal Barriers Module*

Executing the legal framework developed by NAA, this Removing Legal Barriers module will assist all KAP in general and MSM and Transgender in particular to access social protection and legal support through advocating for being entitled for ID poor card and for their right by raising the legal and human right literacy among all stakeholders. The ID poor card is powerful tool for the holders to access to free-of-charge healthcare of the public facilities. Also, this module will enable them to advocate for the local government, commune councils for example, to create local financial account for additional budget allocations for HIV and social protection for the poor and vulnerable people in respective communes. MSM and Transgender will then be playing role as direct beneficiaries and advocate activists for their needs and rights.

•*Health Information System and M&E Module*

This should be another occasion on which MSM and Transgender participants could share their knowledge, practices, experiences and lessons learnt with regards to HIV, STI and Sexual and Reproductive health. Furthermore, the Integrated Biological and Behavioral Survey (IBBS) study which was planned to be conducted in 2016 will highlight findings that will then be used as an evidence to advocate for their needs and rights through this grant implementation on the combined integrated behavioral and biological survey (IBBS) of MSM and Transgender population as the study, in need, will select a sample size of these populations to participate.



• *Treatment, Care and Support Module*

Through this module, MSM and Transgender and their families who are infected and affected with HIV will particularly be able to participate in the service quality improvement or expansion according to the strategic priorities of the health sector HIV strategic plan, while accessing and using HIV treatment, care and support to access to the needed services.

• *During Visits of GF Country Team*

In the GF country team visits, it is almost regular that there was at least one hour meeting with KAP where MSM/TG representatives have attended.

• *Planned National Consultation*

In addition to above activities, the project of CCC KAP Community engagement/Capacity Building incorporated two big KAP national consultations per year, to share information, updates, raise concerns and build capacity of focal points and representatives. In these consultations, about 15-20 MSM and 15-20 TG focal points have been invited with good participation.

• *Community Visits*

The MSM/TG representatives have also made several visits since 2014 to present of their members in communities in the past year. The visits were done in their own province and outside their provinces with the purpose of gathering issues and providing feedback and updates to their members



B. Communications and Transparency

According to the Participation Framework of the Communities Delegation of the GFATM, the communications and transparency in the engagement of the key populations which include MSM and Transgender would refer specifically to appropriate and accessible communication means using clearly local language with sufficient lead time.

• Various ways of communications

Over the process of the HIV Concept Note development, the country dialogue communications mostly were mainly made using the channel of CCC Secretariat with the MSM and Transgender Representatives who sit on the CCC or other focal points, usually used email and telephone call. In addition, a consultant was hired to help facilitate the communications between KAP/MSM and Transgender and the CCC using mechanism such as face-to-face meetings; focus group discussion and consultations; site visits and community visits by the CCC, Principal Recipient, Global Fund Country team, etc.

From the Global Fund perspective, communications from CCC to KAP/MSM and Transgender were also facilitated by a consultant who speaks local language. The consultant was also helpful in making KAP/MSM and Transgender understand their issues and HIV services, programming, policies and strategies so that they could maximize their participation in the country dialogue process. "Communication from the CCC with MSM and TG representatives through the HIV country dialogue process was facilitated by a consultant who has experience working with vulnerable populations and who speaks the local language. Therefore, the consultations were all held in Khmer so that all community members could participate. The country dialogue process was divided into 2 separate workstreams: 1 with technical partners to discuss the medical response to HIV; and 1 with key populations to discuss prevention, treatment and access to services. The separate workstream with only key populations allowed for a safe and open environment for MSM and TG representatives to speak up about the issues which affect their community and access to HIV services", Ximena Navia, Senior Program Officer, Global Fund.

• Clear, Open and Transparent Communication

Not only with KAP and MSM/Transgender community but also with all stakeholder, the Country Dialogue process started by an open forum. On July 7, 2014 CCC with the support from UANIDS launched the event by releasing an open invitation letter (in English) to all stakeholders and to the general public to participate in the nationwide process for Concept Note Development . Mr. Kong Bunthorn who represented MSM/Transgender Community was included in the CCC's HIV Steering Committee who was in charge in the concept note development process in which KAP/MSM/Transgender engagement was included. The Steering Committee held regular monthly meeting over the period from July 2014 to January 2015 and all meeting minutes/notes were documented and widely circulated. In addition, all elements of the country dialogue were documented and enclosed as annex to the Concept Note which was officially submitted in January 2015.

Despite acknowledging some capacity gaps of MSM/Transgender community which will be highlighted in the following section, CCC Secretariat, however, felt that all communications with MSM/Transgender



Representatives, such as hard copy of invitations, electronic mails, etc. were clear and easily understood using both Khmer and English language. This was not only the virtual ones but also in all meetings in which MSM/Transgender Representatives and their selected members were physically present by offering simultaneous translation in Khmer.

"We had a clear means of communications in all issues related to KAP representatives who sit on CCC. We communicated, for example, through emails or hard copies of invitation sent to representatives of MSM and Transgender population and asked them to spread out the information further to their members". Mr. Kith Vanthy, Program Officer, CCC Secretariat.

• *MSM/Transgender Representatives Used existing Networks for communications*

Among their groups, MSM and Transgender are widely open and close to each other in their communications and relationship. They communicated their issues through the representatives and existing networks.

The GF had a good observation on this issue. "MSM and TG groups communicate very openly, frequently and directly with the CCC through their KAP representatives at the CCC. There are 2 KAP representatives at the CCC who are also members of the MSM and TG network in Cambodia and who are strong activists in the community. One of the representatives is a member of the Oversight Committee in the CCC and has a broad view of all 4 GF grants in the country. Key populations also reach out to the GF directly either through emails or in meetings whenever the team is in country. Discussions are facilitated through partners such as UNAIDS or USG", Ximena Navia, Senior Program Officer, Global Fund.

Once the Representatives received information from CCC Secretariat and it needs to spread out to their members, the Representatives employed their existing networks to do so. The community networks include MSM/TG NGOs' outreach activities, drop center centers (for examples MStyle clubs, TG Clubs, etc.). They also followed up by using telephone calls if the members have it. In the interview, Mr. Kith Vanthy said that "in case they had good networks or other connection such as clubs or drop in center, it would be better, but if not then I would say it is hard for their Representatives to communicate with their members, except some who do have telephone that they can call each other".

In the interview, Mr. Kong Bunthorn who is currently their Representative on CCC said that all KAP Representative have tried to help each other in passing on the information to their members using their available networks.

"....when I received information from CCC, particularly if it is in English (few times and some pieces of information were in English), I read it for my understanding and then help translate into Khmer for other KAP Rep including alternates, so that they can understand and can share further to their members...." Mr. Kong Bunthorn, CCC Member for current Mandate, and Coordinator of National MSM/Transgender Network, Bandanh Chaktomok.

Vice versa, the MSM/Transgender community using the same system to send their feedback and voice to CCC through their Representatives taking the channel of CCC meeting which was conducted regularly in every quarter.



There was effort in making sure that all their voices are heard by the CCC. Under CCC Secretariat, there was a project of which key activities were to help KAP (including MSM/Transgender) to collect evidence through documentation of their cases and issues they face in their community in terms of violence and abuse of their rights and barriers preventing them from accessing to needed HIV, STI and other healthcare services and report the issues back to CCC through their Rep using the CCC OC meeting channel or direct report to CCC during its regular meeting as a time slot was always reserved for KAP.

In addition, a stronger national network was initiated and supported technically and financially UNAIDS/Cambodia. It was called Forum of Networks of People Living with HIV and Most-at-Risk Populations (FoNPAMs) which combined all individually constituency-based networks including that of PLHIV, Entertainment Workers (EW), People Who Inject Drugs (PWUD), MSM and Transgender which is BC. FoNPAMs was a great and long term opportunity for all KAP including MSM/Transgender to raise their voice not only for the period of the GF's Country Dialogue purpose but also for an advocacy effort for long and sustained change of the society toward their right, particularly for MSM/Transgender population who have long been marginalized through a social discrimination and stigmatization.

•Gaps and Challenges of Communication

The CCC Secretariat assumed that the limited basic communication skills, narrow knowledge on the issues and non-structured of MSM/Transgender networks were a huge gap and challenge that prevented MSM/Transgender population from having clear understanding all issues that were communicated to them. In the interview, Mr. Kith Vanthy pointed out that CCC was not sure if all matters which were communicated with their Representative were clearly spreading further down to MSM/Transgender community in the same original spirit and meaning because we have limited structure and capacity. Mr. Vanthy mentioned that "... we were not sure how and in what mean they communicated with their members which is one of the challenges we, as CCC Secretariat, currently face among others..." There would be some gap because when we asked certain number of their members most said they did not know who their Representative is. For language we always translated all materials into Khmer but they still had difficulties due to low education level. We do that because we thought that if they do not understand anything their engagement in meeting or workshop or any event will lack of be participatory, consultative and meaningful participation." Mr. Kith Vanthy, Program Officer, CCC Secretariat.

In the interview, Kong Bunthorn said that English language is a great challenge for all Representative of KAP including MSM/Transgender. "Don't assume that our MSM/Transgender are at some extent similar to those of other countries like in Indonesia, Philippines, or Malaysia etc. in terms of English language because the MSM/Transgender in those countries speak very good English and then they could understand the issues very well from the materials or communications in English" Kong Bunthorn, MSM/Transgender Rep on CCC, Coordinator of National MSM/Transgender Network, Bandanh Chaktomok (BC).

"When we had chance to talk to them in large group, for example during the election of their Rep to sit in CCC, we always introduced who their Rep are and who the alternate members are. Currently there are 12 KAP Rep sitting on CCC, out of which 6 are full membership and the other 6 are alternate members. But among their members, majority remain not aware of their Rep. For example, recently when we went to visit Srey Sros Club (Transgender club where transgender populations gather and receive HIV related services) and asked a question do you know who Bunthorn is (Bunthorn is actually currently their rep sitting on CCC), majority knew Bunthorn personally but none learnt that he is on CCC" - CCC Secretariat.

“Recently, in SR when CCC joined an event conducted by CPN+ (with funding support from APN+) and asked what NFM is, none could answer well to the question HIV programming, policies and strategic plan, etc. particularly the technical terminologies were very limited among MSM/Transgender community.” CCC Secretariat,



Besides English language, technology was also a huge barrier. For the basic skill in using email, which is a main communication means was also very limited as most of their constituency members do not have email or do not know how to use it. More importantly, the critical issues facing MSM and Transgender populations include their gap of knowledge on GF's NFM and country dialogue as well as the HIV programming, policies, guidelines, strategic plan, etc.

There was potential conflicting issue in MSM/Transgender communication. While an MSM/Transgender plays role as network members, he/she also a beneficiaries of NGOs/Programs. In the interview, Mr. Kheng Vanneth, Program Manager of MHSS, raised that when the communication, for example an invitation, was going down straight to his MSM/Transgender beneficiaries from MSM/Transgender Rep or BC Coordinator without involving him or his management at MHSS, it would have created challenge for them particularly when they need permission and support from us as we, as an NGO, have to understand the issues and need reference/supporting documents in making our decision if or not to send them or others who may be the right persons. And I felt that was a time consuming because it was a double communication and required additional resources, for example cost for making telephone call, etc.

With regards to the transparency in communication of all issues that matter, certain number of interviewees felt that critical decisions, particularly on funding allocations for each selected modules, was not made nor communicated in an open and in a transparent manner. Without wide spread, the action prevented MSM/TG population from taking part.

Decisions in the budget cuts and programming were also with limited engagement of KAP/MSM and Transgender population .



C. Representation and Accountability

Current representatives of MSM and Transgender to the CCC showed strong commitment and high capacity as they actively participated in all events, and engaged in activities that represented the interests of their groups. Those activities includes the CCC meetings, CCC-OC meetings, FGD, consultations, site visits, GF visits, etc. in each of which they raised issues of MSM and Transgender so that the involved stakeholders could hear.

"The current MSM representative of CCC in Cambodia has a high capacity, intellectually and socially. He is able to communicate well in English and has been a key leader of the KAP representative to CCC. He is also sitting as a member of the CCC-OC. However, the TG representative, due to language barrier of limited English, has got limitations. She is able to represent the issues well of her members in national and small consultations when conducted in the local language. She has been a good coordinator. What needs to improve in the future is to ensure that there is no factionalism among MSM/TG constituencies in order to achieve the common purpose. The factionalism has affected the flow of information and caused some concern on how well the information were feedback to the constituency member. The factionalism may have also affected biased selection of focal points to attend the national consultations" Mrs. Milet Godard, Freelance Consultant.

Not only at this stage, but their representation and accountability started with clear and transparent selection of the representatives of which the process was carried out as a combined whole KAP Representative selection but with separate individual constituencies, i.e. PLHIV, EW, PWID, and MSM/Transgender. The process was obviously done in an open and transparent way. A span of two to three months were given during the election process in 2013, which was supported by the technical assistance facilitator provided by USAID Cambodia to support the CCC Secretariat. The election allowed members of MSM/Transgender to have orientation at a national consultation for one day. Then information were shared publicly and nomination gathered after the orientation. FoNPAMs members decided that TG will serve as alternate and MSM will take a seat for wider representation. This decision was made by their constituency members on a separate meeting before the election process. During the election day, another half day orientation were given to make sure members understood the role and responsibilities of the representatives that they have to elect. Then the election were done in secret ballots.

Starting by identifying an interested NGO or CSO who works directly with one of the KAP beneficiaries and has strong commitment to coordinate the whole process of the election. First, an NGO/CSO Election Coordinator was established and they started by making an announcement through the advertisement (via newspaper or online) of request of interest among the MSM/Transgender population and community-based networks for applying for the position of Representative to be elected by their members. Then the NGO/CSO Election Coordinator set up an Election Committee, of which members have no conflict of interest, to screen the applications and conduct the election. At the end, the elected Rep is announced for a two-year term on CCC. The whole process was documented and a report was then submitted to CCC for endorsement. It was clear that no interference from CCC into such a process. The roles CCC and its Secretariat play were the establishment



of Election Coordinator, ensuring process is transparent and the info was widely spread out, endorsement the elected Rep and keeping all documented process.

However, a key lesson learnt from the previous process was the criteria set forth for the qualified applicants should be clear and focused on the ability for full representation with accountability, and it should not just be because they are interested and showing commitment but it should be adding the rationale that like the Rep of other constituencies and CCC members, the Rep of MSM/Transgender community has the responsibilities in the accountably representing the interest of MSM/Transgender population as they engage with the CCC and other CCC's standing committees which required them to be able to understand the context and technical issues and have skills to speak out both in English and Khmer. The mandate of the CCC is to mobilize a national multi-sectoral response to develop and submit proposals to the Global Fund to scale up the fight against HIV/AIDS, TB and malaria, and to oversee and support the implementation of activities that are initiated by the CCC in line with national program priorities and supported by the Global Fund. The purpose of the CCC is to enhance performance of the Global Fund activities in Cambodia in partnership with stakeholder constituencies, to promote efficient program implementation, to avoid duplication by harmonizing Global Fund activities with other programs throughout Cambodia, and to strengthen coordination among stakeholder constituencies .

Over the past mandate, there were two Representatives for MSM/Transgender population. First was Kong Bunthorn who was entitled to membership, and second was Pich Sochea who was the alternate member and has the voting right and decision making power only in the absence of entitled member. It was observed that both were actively engaged and had constant commitment in CCC and other standing committee meetings, HIV Steering Committee meetings, stakeholders' consultations, national workshops and other events in relation to the country dialogue for the development of HIV concept note.

Nevertheless, according to Mr. Kith Vanthy, the observed issues around the current representation of the MSM/Transgender that would prevent them from being motivated or full participating in all important events and the TG representative herself accepted that their capacity in full engagement was limited because she could not speak English and not well understood all the policy, programming and other technical issues. They faced lack of full understanding the discussed topics during the meetings because mainly CCC meeting and other national workshops used English and even though there was simultaneous translation some technical issues were out of their reach.

- Transgender representative has limited general knowledge
- English language is a huge difficulties for at least one of them
- There is limited technical knowledge on HIV/AIDS programming among them,
- Commitment among them remains a challenge, for example, there was some level of irregular participation in the CCC, CCC standing committees or HIV Steering Committee meetings, etc. There should be more dedicated and motivated MSM and Transgender Representative.
- Lack of needed skills for reporting writing, documentation of case study, facilitation, public speaking, program management, etc.



In addition, MSM and Transgender population remained required more opportunity to have full understanding about the country dialogue and NFM. Of course, the representatives had exposed to numerous times hearing about the NFM and learn much but there was no mechanism that ensures their members are well aware. This could, somehow, prevent bottom engagement of the MSM and Transgender community. During the interview, majority of them reported that not all MSM and transgender members understand the process of country dialogue and NFM, only representatives and focal points who had been provided orientation repeatedly. They requested there should be opportunity such critical message and information about GF, country dialogue and NFM being spread out down to the lowest level at the community.

D. Influence

Generally, the voice of KAP is strong as long as they unite around their Representatives and focal points. Over the country dialogue process, KAP including MSM and Transgender population had several opportunities to participate. Focus group discussions and interviews were conducted with MSM and TG representatives. Their feedback was consolidated into a report titled "Addressing the most needs and concern of key affected populations and PLHIV". The report was presented at a national consultation which was held with representatives of key populations, technical partners, government and other donors. The national consultation was an opportunity for different stakeholders to present the key needs and interventions and prioritize activities for the Concept Note to be submitted to the Global Fund. Once the Concept Note was drafted, it was again shared with representatives of key populations (including MSM and TG representatives) for them to review and ensure that their feedback was incorporated. The Global Fund Country Team frequently meets with representatives of key populations, especially during the Country Dialogue process to understand the feedback and input provided for the Concept Note. In this way, the Country Team ensures that activities for key populations are translated into grant documents and are ultimately implemented.

Through the CCC Secretariat, the Global Fund provides support for several consultation meetings and workshops for communities and key populations. The constituency consultation meetings are a good opportunity for CCC members to reach out to their networks and discuss issues affecting the community. In addition, CCC members regularly organize engagement activities with members of key populations to strengthen their connection to the networks. On a systematic basis, prior to every CCC meetings and country dialogue workshop, strategic plan consultation workshops, or national launching that require their participations, key populations organize preparatory meetings to prepare the discussion, to decide priority areas to bring forward to the CCC and to coach CCC representatives and help ensure that their participation at the CCC is meaningful.

However, the question still remains on what has been done with the issues raised by the KAP to the CCC, especially if there are some issues that needs to go to the PR or Sub-Recipients (SR) or Sub-Sub Recipients (SSR). There is a gap on this and may need to find more evidence that the issues raised have been addressed accordingly.

Even though MSM/Transgender populations were well represented in the CCC and CCC-OC as well few members participated in TWGs for the discussion of policies, strategies and programming of health-related and



non-health HIV issues, none was included in the concept note's module writing team (11 modules) because the team mainly comprised of those from NCHADS, NAA, NGOs and CSOs who could not be real representations of MSM and Transgender community to write up respective eleven modular tables which were the most important elements of the HIV Concept Note. English language was also a barrier that prevented MSM and Transgender representatives and focal points from fully engaging in this modular table writing. This was also confirmed in the documentation of the community experiences with the New Funding Model in Cambodia: Discussions and Recommendations, conducted recently in Phnom Penh, Cambodia.

E. Safety and Confidentiality

All of the discussions and consultations with KAP were facilitated by a consultant and were independent from the rest of the technical conversations. This helped to create a safe environment where community representatives were able to speak up and share experiences amongst their colleagues.

CCC and all members and stakeholders strictly follow the confidentiality of HIV status of all individuals and, in the context of (MSM and) transgender, the right of individuals to express their preference of gender identity was respected, but practically both MSM and transgender population seemed not dare to disclose themselves their (gender) identity/preference, and despite that, they remain respected.

Normally MSM/Transgender used their networks or systems to report/document any cases happened to them in order to find possible and appropriate solutions. Within the CCC only their Representatives have the role to report incidents to any authority/police or networks such Human Rights NGOs but CCC is also willing to support them if they report the cases during the CCC business meetings. However, there was neither policy nor systematic mechanism within the CCC in being accountable for such an incidence.

F. Resources of Strengthening of systems and capacities

As mentioned in the above section, there were gaps of key basic skills that MSM/Transgender Representatives and focal points need to fulfill their representation role with accountability and ensure meaningful participation in the GF's NFM country dialogue. Those skills lack included English language, communication technologies and social media, facilitation skills, documentation and reporting skills, etc.

Responding to the gaps, CCC have been implementing a KAP capacity strengthening project with funding support from the GF for a renewable two-year capacity building activities for KAP Representatives, which also included those of MSM/Transgender constituency. The capacity building project activities include Training on M&E, Reporting writing skills, knowledge improvement of the three diseases for the first year; and for the second year it was about the collection of case studies of their own members, and field visit to their community. More, there was additional financial and technical support from FEI5% and UNAIDS that enabled CCC to hire a technical consultant (Ms. Milet Goddard) to help with the project implementation, and currently continues. The consultant has assisted CCC Secretariat to implement the activities to



support KAP engagement in all national events in relation to the country dialogue, for example, building skills and knowledge on GF, NFM, CD, facilitation skills, problem identification and prioritization, etc. for KAP so that they can be confident to participate meaningfully in national workshop for concept development, national stakeholder consultative meetings (for HIV/AIDS related national health and non-health strategic plan development).

The project also supported KAP's travels and accommodations to event related to Country Dialogue, pre-workshop meeting for preparing KAP Representatives, etc. in the aim to optimize participation in the national workshops they were engaged.

"...because of support of the capacity building project, we have seen improvement of their feedback mechanism and commitment in the CCC representation..." said Program Officer of The CCC Secretariat.

In addition, FEI5% had provided funding to HIV Steering Committee to hire a local consultant, Dr. Srey Mony, to assist in KAP engagement over the country dialogue process. The KAP engagement project had helped KAP population to raise their concerns, needs and challenges in relation to both HIV related and non-HIV related services to present in the Country Dialogue Workshop. As results, some of their needs and concerns were listened and ultimately included in the modules of the HIV concept note. For details of KAP engagement, please refer to the report titled "Addressing the most needs and concerns of key affected populations and PLHIV".

In the interview with selected MSM and Transgender, the group expressed satisfaction that the consultants' technical assistance enabled their maximum engagement because they had learned skills and had opportunity in advance to discuss their concerns and priorities prior to the actual meetings or workshops.

For general capacity strengthening of KAP, UNAIDS has helped built a national network called "Forum of Networks of PLHIV and Most-at-risk population-FoNPAMs" that combined all individual constituencies of MSM, Transgender, People who inject/use drugs (PWID/PWUD), Entertainment Workers (EW), and PLHIV in the aim to:

- Promote greater partnership and collaboration, harmonisation of strategies and activities between community network organisations and promote joint advocacy;
- Create a participatory environment in understanding and identifying key interlinked issues, generate discussion on possible impact to collectively take action;
- Develop initiatives, concepts and ownership through a participatory approach; and
- Represent a joint voice of PLHIV and MARPs at policy level and at national and international levels.

However, according to the rapid assessment of the national MSM and Transgender (BC) network conducted by APCOM in the past few months, the results highlighted huge gaps of organizational capacity. For examples, each of staffing and resource mobilization of the BC got as low as 3 points out of the total scores of 12.

G. Culture, Respect, Authenticity

There were no any concerns or problem in regards to the culture, respect and authenticity of MSM/transgender community in the context of CCC and during their participation in all the events organized and managed by CCC including CCC/OC meeting, national consultation meetings or workshop, and particularly over the period of the country dialogue process for the concept development. As mentioned above, CCC and all members and stakeholders strictly followed the confidentiality of HIV status of all individuals and, in the context of (MSM and) transgender, the right of individuals to express their preference sexuality status was respected, but practically both MSM and transgender themselves seemed not dare to disclose their (gender) status, and despite that, they remain respected.

Generally, there was progress toward the discrimination and stigmatization against MSM/Transgender community for example in the beginning, the hotels were meetings were conducted were not welcoming to the MSM/TG but recently, most places that CCC has chosen for consultations have been sensitized to the presence of TG/MSM. The CCC representatives have also taken the leadership to guide their members on how to conduct themselves in public places.

Despite that, there remain discrimination and stigmatization against MSM and Transgender community among general population. In the interview, Kith Vanthy, Program Officer, CCC Secretariat said that "I have learnt that there were some cases that transgender population was looked down when they applied for an ID card, as the service officers showed a disapproval behavior toward the gender determination of transgender and ridiculously said you can't put your sex as female because your sex organ is not originally identical to the woman's. And in few cases they ended up with not going for applying for ID card; and without ID card they are not able to find job and having legal document for other purposes"

CONCLUSIONS

•Significant and Regular Representation Role of MSM

Current MSM/Transgender Representatives were actively involved in the CCC and over the country dialogue process. At least one among the two has proven high capacity and commitment in the representing their community in various events of the Country Dialogue process.

•Significant Engagement Opportunities for Concept Note Development

MSM/TG Representatives and focal points enjoyed their engagement in CCC and all events of the Country Dialogue including CCC and CCC sub committees meetings (OC and HIV Steering Committee for CN development), KAP Consultations and GFD in collecting inputs, NCHADS's Strategic Plan Development, National Country Dialogue Workshop, etc. FoNAPMs, etc. They participated in all events with safety, confidentiality, influence, and respect.

The engagement was significantly made possible by efforts and resources of involved stakeholders. All communications were done with both local and English language in order to make sure that materials are easily understood and there were technical assistance for facilitation of maximum participation in the country dialogue process. KAP/MSM/Transgender engagement and capacity building plan were include in the GF-funded project managed by the CCC Secretariat. Additional efforts and resources were mobilized among development partners such as UNAIDS, FEI5%, USAID, etc. to facilitate smooth and systematic engagement process by building the capacity of MSM/Transgender Rep and focal points on the knowledge of GF, NFM, CD, facilitation skills, etc. It was also noted there was a system to equip MSM/Transgender Rep and focal points with key specific issues before they participated in almost all national events of the Country Dialogue.

•Potential Engagement Opportunity during Grant Implementation

For the current NFM, though there was limited opportunity for MSM/Transgender to engage in writing up concept note (Modular tables) and during the grant making, there will be greater opportunity for them to authentically participate in the grant implementation as both beneficiaries of the five sub-grant implementation and certain number as Rep or focal points of their community. The five modules of the Concept Note which will implement the sub-grant through PR and SR include HIV Prevention for MSM/Transgender, Treatment/care/support, HIS and M&E, CSS, and Removing Legal Barriers.

•Gap: Knowledge and Skills

The MSM/Transgender Rep and focal pints indicated some challenges to have good understanding around HIV epidemiology, policy and strategy, programmatic issues, etc. as well as the non-HIV social issues such as social protection and legal and human rights that prevented them from fully engaging in all process of the country dialogue. Also, they lacked some needed skills such as documentation needed for collecting evidences and case studies, and advocacy skills in order to challenge policy and decision makers for their rights and needs to be taken into account.

•Challenges and barriers:

In addition to poverty, generally, MSM/Transgender community who come out publically to involve in activities had low education while those who are well educated try to hide themselves. This is one of the huge challenges for the Rep and focal points to work and communicate with them on different issues that affect their lives. For example, most of them could not use some basic technology such as email for communication purpose.

In addition, it was observed lack of motivation of MSM/Transgender Rep and focal points that preventing them from participating regularly in some key meetings in which decisions were made that affect them subsequently.



RECOMMENDATIONS

• **Improve communications by using existing NGO System, Structure and Networks**

While BC seems not so strong itself organizationally, its connection with NGOs who work directly with MSM/Transgender community experienced some level of confusion particularly during their engagement in Country Dialogue. To avoid this distract in the future, all communications with MSM/Transgender focal points should follow the existing structure and system of NGOs who have better networks and systems in communicating and sharing information with all MSM/Transgender community. By doing so, there lots of advantages including avoiding overlapping role between BC and NGOs, saving time and resources, and the action is quicker, etc.

• **Strengthen MSM/Transgender engagement**

Addressing the gaps, challenges and barriers that prevented MSM/Transgender from meaningfully engaging in the Country Dialogue over the concept note development period, by leveraging the learning from the positive lessons of concept note engagement and strengthening into the next stage of the grant implementation, as well as for the future. In need, during the grant implementation PR and SRs will be having more management role but a stronger connection between CCC-OC, MSM/Transgender Rep and focal points, and the PR and SRs would help create greater opportunity through community visits, sites visits and service accessibility.

There should be increasing transparency and accountability around the issues of the discussions and negotiations of all programming and budget allocation and more open opportunity for MSM and Transgender to be participating in the process. It should also critical to explore the chance that capable MSM and Transgender representatives could engage in concept writing team for the future.

• **Continue and Strengthen Capacity Building/KAP Engagement Plan**

The GF-funded capacity building and KAP Engagement plan was good tool in ensuring full and optimal engagement of KAP/MSM/Transgender not only for the country dialogue but for the whole process and business of CCC, CCC-OC and other activates that required engagement of KAP. As CCC Secretariat raised, it was seen improvement of feedback mechanism from KAP/MSM/Transgender to the CCC. However, critical gaps such as improving skills of documentation, basic technology and communications structure between MSM/Transgender with their community should be addressed in this project.

Obviously, over the grant implementation some of capacity building activities will be achieved. For example, the implementation of sub-grant of community system strengthening which will build on the FoNPAMs approach on strengthening the networks of KAP from national down to the district levels.

• **Improve Motivation of MSM/Transgender Representatives**

Lack of motivation would lead to careless engagement of MSM/Transgender Rep. The improvement of motivation could be achieved through rigorous selection of MSM/Transgender Rep targeting those who have multi-discipline and skills and sufficient time to be able communicate and represent in mutual ways: between CCC, themselves and MSM/Transgender community. The MSM/Transgender Rep selected from NGOs or CSOs would not need additional financial incentive support as they get already get paid but timing would be a potential challenge for full engagement.



• **Continue, Strengthen Capacity and Organization of BC and KP Networks**

-Ensure continuity of the BC's capacity building by technical support providers.

-One example of this initiative is the JumpStart Capacity Strengthening Initiative which leverages on strengthening the national network's structure and management in order for it to engage with other networks and organisations effectively. However, organisational capacity strengthening should not only focus on MSM and Transgender networks but also networks of people living with HIV, sex workers and people who use drugs;

-Facilitate the establishment of a structure among MSM and transgender networks and organisations in Cambodia to provide a clear line of communication to their individual members and/or representatives;

-CCC must officially provide additional seats for other key affected populations such as the transgender people, sex workers, people who use drugs, and people living with HIV to have a full engagement with KP and provide a platform for raising issues directly to the CCC committees;

-CCC, NAA, MOH and other technical partners must establish a mechanism that will allow KP to ascertain whether or not their issues adopted in the writing of the concept note, and discussed during the grant making process;

-CCC and other technical partners to establish a mechanism to report human rights violations during Global Fund process directly to the CCC secretariat.

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Equity. Dignity. Social Justice.



We are united in our courage to advocate issues that affect the lives of men who have sex with men and transgender people, including HIV, rights, health and well being.



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