UGANDA COUNTRY COORDINATING MECHANISM FOR THE GLOBAL FUND

Standard Operating Procedures (SOP) and Principles for Stakeholder Engagement

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1. Introduction

About the CCM:

The Uganda Country Coordinating Mechanism (CCM) serves as the primary governance and coordination platform for the Global Fund at the country level. It oversees the development, submission, and oversight of funding requests, ensuring inclusive participation from government, CSOs, key population networks, development partners, the private sector, and communities affected by HIV, TB, and malaria.

The Uganda Country Coordinating Mechanism (UCCM) is the national board responsible for overseeing Global Fund grants and programmes for fighting HIV & AIDS, Tuberculosis, and Malaria in Uganda.

As an international financing mechanism, the Global Fund provides financial resources to help countries reduce the impact of AIDS, Tuberculosis, and Malaria by facilitating the implementation of strong and sustainable programmes through in-country partners. Using a performance-based approach, the Global Fund relies on Country Coordinating Mechanisms (CCMs), Principal Recipients (PRs), and other in-country partners to ensure resources are efficiently used to help those most in need.

The Global Fund uses a Performance-Based Funding approach through the work of CCMs, PRs, and other partners that work together to ensure that funding effectively serves men, women, and children affected by these three diseases.

Country Coordinating Mechanisms (CCMs) are central to the Global Fund's commitment to local ownership and participatory decision-making. CCMs include representatives from both the public and private sectors, including governments, multilateral or bilateral agencies, non-governmental organizations, academic institutions, private businesses, and people living with or affected by HIV, Tuberculosis, and Malaria.

These country-level multi-stakeholder partnerships develop and submit grant proposals to the Global Fund based on priority needs at the national level. After grant approval, they oversee progress during implementation.

For each grant, the CCM nominates one or more public or private sector organizations to be Principal Recipients (PRs) for receiving the approved grant funds and managing grant implementation.

This SOP integrates:

- Global guidance on effective CSO and community engagement
- The Global Fund's CCM Policy on principles (national ownership, transparency, rights-based programming, inclusive membership, and ethics)
- Uganda-specific governance frameworks: the CCM Governance Manual, Oversight Plan, Strategic Plan

The result is a unified operational framework for stakeholder engagement for the Uganda CCM.

2. Purpose, Scope & Objectives

The purpose of the SOPs on stakeholder engagement is to;

1) Define clear, transparent and inclusive procedures for stakeholder engagement in CCM processes.
2) Ensure meaningful, equitable, and evidence-based participation of CSOs and community representatives.
3) Strengthen two-way accountability between CCM representatives and their constituencies.
4) Integrate community priorities into national strategic plans, funding requests, and grant-making decisions.
5) Align CCM engagement with global best practices and Uganda's health priorities.

Scope:

The SOPs apply to to all CCM members, constituency focal points, Technical Working Groups (TWGs), the CCM Secretariat, and participating stakeholders in CCM-led Global Fund and national health processes.

Objectives

The SOPs serve to achieve the following objectives;

a. Implement a structured selection and on-boarding process for community and civil society representatives to enhance diversity and legitimacy.
b. Embed stakeholder input at every stage of funding request development, from country dialogue through approval.
c. Strengthen participation of stakeholders in National Strategic Plan (NSP) development to ensure community-informed priorities.
d. Institute robust feedback loops and accessible communication channels.
e. Monitor engagement quality through performance indicators and adapt SOPs annually.

3. Guiding Principles

The SOPs shall be guided by the following principles;

1) **National ownership & inclusivity**: Aligns with the Global Fund's emphasis on country-led and inclusive programs
2) **Representation & diversity**: Ensure representation across disease areas, populations, gender, geography, and relevant expertise
3) **Transparency & ethics**: Document all processes, publish COI and governance policies, and apply them rigorously
4) **Accountability**: Representatives must engage their constituencies transparently and deliver feedback
5) **Evidence-based decisions**: Ground discussions in epidemiological data, implement monitoring findings and community feedback.
6) **Sustainability & capacity building**: Strengthen long-term participation via training, mentorship and institutional support

4. Stakeholder Mapping & Representation.

The CCM shall undertake the following steps to ensure the effective mapping of stakeholders of the CCM to improve representation.

a. Conduct or update stakeholder mapping at least annually, identifying key actors across disease, health system strengthening, research, private sector, and affected communities.
b. Document capacities, advocacy strengths, geographic reach, and evidence base of stakeholders.
c. Use the map to inform nomination of representatives, stakeholder consultation plans, and engagement strategies.

5. Selection & Appointment of Representatives.

The selection and appointment of the CSO representatives to the CCM shall be guided by the CCM guidelines on election of Board members. However, the CCM shall undertake the following processes to ensure stakeholder engagement.

- Launch a public call for constituencies to nomination or elect representatives, clearly communicating eligibility criteria and desired qualifications (e.g., technical skills, advocacy experience, representation).
- Constituencies (e.g., CSOs, key populations, people living with HIV/TB/malaria) must oversee nomination and selection through transparent, documented processes.
- Ensure balanced representation: gender, geography, key populations, and type of organization. Uganda's CCM currently invites 1 member + 1 alternate from national CSOs, international CSOs, and one each for HIV, TB, and malaria constituencies.
- Require nominees to sign a Code of Conduct and declare any COI.

6. Engagement in Funding Request Development.

The CCM shall undertake steps to ensure that stakeholders are meaningfully involved in Funding request applications and processes. This shall be guided by CCM policies, SOPs on grant writing. However, as a bare minimum, the CCM shall;

1. Involve representatives from the country dialogue phase, ensuring early consensus building.
2. Support Constituencies to hold pre-dialogue consultations to collect community priorities, review data, and align messages.
3. Establish TWGs by disease and population, ensuring CSO/community representation with equal voice.
4. Provide access to data, technical support, and inclusive scheduling.

7. Participation in National Strategic Planning

The CCM shall ensure that CCM members effectively participate in the development of National Strategic Plans. To achieve this, the CCM shall;

- Ensure community representation on NSP working groups, steering committees, and policy forums.
- Provide access to draft NSP documents, host dedicated consultations, and ensure constituencies have input based on evidence and epidemiological analysis.
- Link NSP outcomes with Global Fund strategy planning cycles and community-identified priorities.

8. Representation in Decision-Making Platforms

For effective CCM discussions, the CCM shall ensure that representatives gather input before meetings, articulate shared constituency positions, and report back following structured timelines. The CCM shall also put in places mechanisms and support the representatives to record, track, and integrate feedback into future planning.

9. Feedback & Accountability Mechanisms

Representatives shall share written reports from the constituency meetings soon after CCM meetings, following a feedback calendar aligned with CCM's annual schedule. The CCM shall ensure that Constituencies track agreed actions and follow-up progress and that consolidated feedback is reviewed during CCM meetings and integrated into continuous improvement processes.

10. Conflict of Interest Management.

The CCM shall enforce a published COI policy applicable to CCM members, alternates, and Secretariat staffs, require COI disclosure at on boarding and regularly and address conflicts through recusal or replacement as per COI policy. The CCM shall ensure application of ethics oversight via the CCM Ethics Committee

11. Monitoring, Evaluation & Learning

The CCM shall define and monitor performance indicators including but not limited to the following:

1. Diversity of participation (by constituency type, gender, geography).
2. Timeliness and quality of feedback.
3. Evidence of community priorities included in funding proposals or NSPs.
4. Satisfaction levels via periodic surveys.

The CCM shall also conduct self-assessments of CCM performance and implement improvement plans, review and update the SOP annually based on lessons learned, performance metrics, and evolving Global Fund guidance