

January 2024

Unitaid's Small Grants model

Making a difference for community engagement, advocacy and building demand for new health products

Introduction

This document is developed to provide a broad overview of the small grant model across Unitaid-funded projects as guidance for project stakeholders.

Small grants are a type of funding used in some Unitaid programmes to support community-based organizations and local civil society organizations to develop advocacy and health literacy tools and materials, build capacity and organizational development, and increase demand for the introduction of new health products. These grants are intended to be catalytic, flexible, and not to be administratively burdensome to reduce barriers to access to achieve project outcomes.

Why are Small Grants to Communities and Civil Society Organizations Important?

Small grants for community engagement provide financial resources to support local communities and civil society organizations to develop advocacy and health literacy tools and materials, build capacity and organizational development, and additional community-led activities to increase the demand for the introduction of new health products.

Unitaid's Strategy builds on the successes of the past, but it encompasses an even stronger engagement and collaboration with affected people and communities to ensure they are part of every step of Unitaid's work. Equity, partnerships, and community engagement are key to Unitaid's continuing success. Working with affected people and communities throughout the process, Unitaid can make the identification, design, and introduction of key health products better and more effective - Unitaid Strategy 2023-2027.

The effective engagement of Communities and Civil Society (CCS) in Unitaid programmes is crucial to both the development and implementation of projects towards scale-up of Unitaid-funded interventions as well as to ensure that the Unitaid portfolio responds to the needs of key and vulnerable populations by embedding community engagement, advocacy activities and building demand within its work.

Why should Small Grants be Included in Proposals to Unitaid and Funded Programmes?

A small grant mechanism can enhance communities' ability to contribute to the success of Unitaid-supported programmes. Successful implementation of Unitaid-funded projects with small grants, as outlined below, demonstrates the significant scope for this type of mechanism to have a central role in resourcing and increasing community engagement across most, if not all, programmes. A key advantage of small grants is capacity building and strengthening of local community and civil society entities to bolster capacity for reporting to donors and to demonstrate accountability and transparency. This is important as some entities may not have access to funds that support capacity and local ownership otherwise.

Small grants to support community engagement have played a successful role in Unitaid-funded Programmes to date, including:

- In the context of TB grants: IMPAACT4TB, and CaP-TB (see box below)
- In the context of work on Intellectual Property in the context of HIV, TB, and HCV: ITPC often incubates emerging organizations or projects, providing technical support, mentorship, office space, relationship building and more through a small grants mechanism which typically ranges from US\$ 5,000 15,000 providing essential funds for community organizations.

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• In the COVID-19 response: Unitaid and FIND jointly launched a Request for Proposals (RfP) to support advocacy for COVID-19 test-and-treat approaches through small grants and the establishment of a community of practice (CoP). The 21 advocacy partners helped to develop a network is to advocate for improving the uptake of test and treat (T&T) models. FIND is considering the use of this model for other programmes.

Lessons from Small Grants within Unitaid TB Grants

The <u>IMPAACT4TB Advocacy Small Grant programme</u> for national and sub-national civil society organizations (CSOs), as part of a Unitaid-funded grant to the Aurum Institute, led by Treatment Action Group (TAG) <u>successfully supported CSO partners from 12 countries</u> (Brazil, Cambodia, Ethiopia, Ghana, India, Indonesia, Kenya, Malawi, Mozambique, South Africa, Tanzania and Zimbabwe) to reinforce national level advocacy by trained CSO partners, develop plans to facilitate Tuberculosis preventative treatment (TPT)/3HP scale-up and increase community demand generation.

- In 2019, 9 small grants worth >US\$ 90,000 combined were awarded to CSO partners in Cohort 1.
- In 2020, up to 12 small grants worth >US\$ 120,000 combined were awarded to CSO partners in Cohort 2 (includes 3 extension grants from the first cohort)¹.

Grants focused on demand creation in communities, <u>treatment literacy</u>, <u>community-led monitoring of services</u>, national-level policy change, media engagement, and parliamentary advocacy.

Lessons from implementing IMPAACT4TB small grants included:

- Ensure the right amount of funding is allocated. Small grants in some instances were too
 small. For some community groups, absorption capacity over time is greater than the amounts
 allowable under the small grant cap. The average award size of US\$ 10,000/group is enough for
 meaningful work but ultimately limited the scope of activities which some partners could
 undertake.
- Be flexible with the budget and ability to reprogramme. Assess the level of need and budget
 for additional funding in under-resourced areas i.e., demand creation, messaging, community
 mobilization and qualitative research to understand what works. For example, COVID-19 delayed
 the implementation of many activities under CSO advocacy small grants, including World TB Day
 campaigns and activities. TAG worked with partners to reprogramme small grant awards and
 adjust programming.
- Create space for autonomy and meaningful engagement. A small grants mechanism creates space for autonomy where CSOs can design projects that speak to country context and the needs of communities while also targeting specific project objectives. In other words, the grants programme is oriented around a common goal that serves the Unitaid project objectives while allowing CSO partners to choose strategies and approaches that will work for project settings and creating space for meaningful engagement while balancing ground up/top-down decisions about what is funded.
- The benefits of small grants are broad and can be catalytic in nature.
 - Firstly, small grants by providing financial resources and technical support may encourage CSOs to start working in an area or areas where they have not worked previously. For example, under Cohort 1, CSOs working on HIV were targeted to draw them into the

¹ Full list of the IMPAACT4TB civil society partners and cohorts: www.impaact4tb.org/civil-society-engagement/.

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- space of the TB response given the initial project focus was on TPT for people living with HIV.
- Second, in doing so, the work of CSOs involved was documented, creating a track-record, which CSOs could rely on, enabling application for other longer-term funding from other donor mechanisms. As a result, at the level of project administration, the person, group, or organization responsible for the small grants programme should understand that part of their role is to support small grant recipients to identify and apply for longer term grants through other donor mechanisms to continue the work beyond the scope and timeframe of Unitaid's supports.
- Building trust and partnership. Grantees should think about how to build reciprocal, collegial relationships between CSO partners and project country teams. This was sometimes a challenge for IMPAACT4TB. In some instances, there was tension between CSOs and country teams who may have assumed a lack of technical knowledge. In those instances, when a supportive connection between project country teams and CSOs was forged, there was great success in changing the working relationship. For example, in Malawi a trusting relationship between the KNCV team in Malawi and the IMPAACT4TB CSO partners in Malawi was already in place, which meant that advocates could respond to the nitrosamine impurity situation in lockstep with technical partners. TAG, responsible for operationalization of the small grants underscored that if it had the chance to do things differently, it would have invested more time in forging connections between CSO partners and the IMPAACT4TB country teams. One successful example of this approach was in Ghana where the TB Voice Network (sub-grantee) moved into the same office complex as Aurum Institute Ghana and subsequently is now receiving separate Global Fund and TB Reach grants to continue its work.
- Partner coordination and communication. A small grants programme should develop platforms or mechanisms such as face-to-face meetings, training programmes (e.g., on-line platform IMPAACT4TB) and WhatsApp groups to bring grantees together as a cohort to learn from one another, act together and coordinate messaging. While grants are awarded to individual organizations, those organizations should be thought of as a collective engaged in seeking answers to the specific questions that the project seeks to address.

Other lessons come from the Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) <u>Catalyzing Pediatric TB Innovations (CaP TB) Advocacy Small Grants project</u>. Advocacy grants were provided to 10 CSOs from 8 countries (Cameroon, Democratic Republic of Congo, India, Kenya, Malawi, Tanzania, Uganda, and Zimbabwe). The approach and type of interventions were tailored to national and local contexts and realities and were implemented over a 10- to 12-month period starting in Q4 2020. Lessons include:

- Small grants drove change through increased awareness, engagement of decision makers on neglected areas, foundational measures to increase accountability on quality of services, and the development of TB champions for future advocacy. And, despite the short timeframe of these small grants, several countries were able to achieve policy change by engaging decision makers and amplifying the voices of TB communities.
- Factor in some of the limitations encountered:
 - Advocacy small grants should run for the life of the project. Both EGPAF country offices and implementer CSOs expressed that advocacy small grants should be planned at the start of the project rather than being initiated midway or toward the end of the project. As such, grants should be well structured and integrated from the start of the project, embedded into the project theory of change with clear goals set and associated indicators to measure the impact of community engagement across the project as part of the M&E Framework, and supported by action plans and resources.

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- Larger envelopes for funding advocacy are needed. Activities were limited by small budgets.
- Success in catalysing community and CSO TB advocacy work and in contributing to the overall
 community and CSO TB strategic work. Some interviewed CSOs recognized that, given their size
 and operational capacity, it would be difficult for them to be a lead grantee of Unitaid grants
 because of the large administrative burden that a Unitaid grant would entail. Hence the small
 grant format helped to "put money directly into the hands of community partners".
- Establish mechanisms for collaboration with other implementing partners to ensure communities are well integrated into the projects and that evidence generated is used and applied i.e. real time learning across projects.

Including Small Grants within a Programme Application/Grant

While the inclusion of small grants should be considered, no two projects are the same and as such, any guidance on how to include small grants within a programmatic priority proposal and grant, the duration of funding, selection processes and reporting requirements must by necessity be generic i.e., the generic expression of interest (EOI) template in Annex 1.

One previous example of the programme application process for awarding grants was the IMPAACT4TB advocacy small grants programme, which was flexible enough to respond to changing circumstances:

- In 2019, TAG launched an EOI along with an application procedure for CSOs from project countries to apply to participate in an advocacy capacity strengthening workshop on TB preventive therapy. Following the workshop, these CSO partners were invited to develop and submit advocacy proposals for small grants funding.
- In 2020, TAG launched a second EOI and identified a second cohort of CSO partners from project countries. Due to COVID-19, the in-person capacity-strengthening workshop was transformed into a sixweek online course on TPT and the fundamentals of advocacy, which was completed by 70 advocates. These CSOs went on to develop advocacy plans eligible for small grants funding.
- In January 2022, a more detailed outline of the process for small grants was included in the IMPAACT4TB request for a costed extension submitted by the AURUM Institute to Unitaid. Specifically:
 - TAG continued to provide training and information to the >20 CSO partners trained and funded through competitive advocacy small grants under the main IMPAACT4TB project while also identifying new partners through an EOI. Milestone: Expression of Interest launched.
 - CSO partners who completed the above-mentioned training programme were eligible to apply for small grants funding. During the costed extension, the bulk of funds for advocacy small grants was directed toward regional CSO networks in a position to advocate for TPT in multiple countries. Some small grants funding was reserved for national level partners to advance advocacy and demand generation in key countries. Examples of regional networks with whom TAG might work included Eastern Africa National Networks of AIDS and Health Service Organizations (EANNASO), APCASO [Asia Pacific], and TB Europe Coalition [East and Central Asia].
 - Through a competitive proposal process, CSO partners who received small grants would undertake treatment literacy, demand creation, and advocacy work to promote 3HP and 1HP implementation with

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- a focus on children and household contacts². Projects were encouraged to make use of approaches successfully deployed to support TPT uptake among people living with HIV during the main IMPAACT4TB project, including community-led monitoring, differentiated service delivery (adapted to children and households), and advocacy directed toward national governments and donors. Milestone: advocacy small grants issued to CSO partners through competitive proposal process.
- TAG organized CSO partners into global campaigns to support access to rifapentine-based TB preventive treatment, focused initially on calling for rifapentine manufacturers to expedite the development of a child-friendly 150 mg functionally scored, dispersible rifapentine tablet. Global efforts included advocacy to secure commitments for TPT and for pediatric TB at the 2023 UN High-Level Meeting on TB. Milestone: Civil society statements and/or advocacy letters on TPT.

Budgeting for Small Grants

- To include a small grants mechanism in a grant/project, consideration needs to be given to the amount of funding provided; the number of grants per cycle and how many funding cycles will be included in the budget; as well as whether grants would be made solely to country-based CSO partners or a combination of regional and country-based ones This funding must be adequate to set up the mechanism and to cover the planned time period. Typically, small grants cover 12 months but at times it may be more useful to decrease or increase the period, depending on the proposed activities. Small grants may also need to cover related or additional needs, for example, fundraising for continuation or transition of the mechanism, if applicable.
- If the lead organization does not have direct experience managing a similar mechanism, it is strongly
 advised that a third party from project countries or ideally with regional reach is engaged to manage
 the mechanism or at least support these activities. Third party partners may include experienced
 treatment and health advocate groups and networks or may also be experienced consultants with
 experience working with communities and creating similar mechanisms.
- The funding amounts depend on several factors, including project size, number of countries, planned demand, advocacy, and community engagement activities. Small grant amounts per partner per country range between USD 5,000 and 30,000 and up, with, for example, the COVID 19 test & treat project setting an upper limit of USD 100, 000. Some evaluations and best practice reports noted that the smaller funding awards/amounts limit the scope, delivery, and success of grants.
- Funding can be performance based (i.e., milestone-based small grants) resulting in high performers
 getting continued and even increased budgets. It is important to note that small grant by design do not
 carry extensive financial reporting requirements (light touch reporting advised) as this provides an
 opportunity for CSOs to retain a part of the funding as an opportunity for organizational strengthening.

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² 3HP is a short-course TPT regimen that combines two antibiotics used to treat TB—isoniazid and rifapentine—taken only once a week for 12 weeks. 1HP = one month of isoniazid and rifapentine taken together once a day.

Small Grants Resources/References

- Annex 1 provides a generic Expression of Interest for Grantee Small Grants which is useful to grantees establishing a small grants application process.
- The <u>International Treatment Preparedness Coalition (ITPC, formerly the HIV Collaborative)</u> and the Asia Pacific Network of People Living with HIV/AIDS (APN+) under the <u>AUSAID Regional HIV/AIDS</u> <u>Capacity Building Program 2007-2011.</u>
- Stop TB Partnership through the Challenge Facility for Civil Society (CFCS) support TB Affected Community and Civil Society.
- Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) and Unitaid (2022). Investing in Advocacy for Effective Childhood TB Responses. Lessons learned from CaP TB Advocacy Small Grants project, January 2022. https://www.pedaids.org/wp-content/uploads/2022/03/CaP-TB-Advocacy-Small-Grants-project-v3.pdf

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Annex 1: Expression of Interest: Small Grants for (add title) project

Please fill out the blue cells below. Please submit your expression of interest to (add email, and submission deadline date and time).

1. Your Group, Org	anization or Networl	K
a. Country		
b. Name and acrony group/organization	,	
c. Mission statemer group/organizatio	nt of your	
d. Is the group/netw legally registered country? Please share documents as ar	to operate in the your registration	Yes □ No □ If No, please explain and provide background on why your group/network/organization is not registered
e. Please indicate v your group/organ works with: peop affected by disea populations, won people, or other v marginalized pop you are an active	nization/network le living with and uses, key nen and girls, young vulnerable or oulation of which	Group/organization/network works with: Address: Contact Person name and title: Tel: Email:
at time of submis To qualify a organization, yo	ne age of your r and/or president	
engagement tool	•	Yes □ No □ Description:
h. Does your organization have a bank account?		Yes □ No □
i. Contact informati	ion	Name: Title: Email: Phone:

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2. Grant Amount Requested			
Please indicate the estimated amount for this proposal in USD.			
Note that the amount for small grant ranges from US\$ X to US\$ X (add amounts).			
3 Your Project			
a. What is the expected outcome of your			
project? What change will occur as a			
result of your proposed work?			
b. Please describe up to six key activities you plan to implement during this project.			
For each proposed activity, please indicate why this activity is needed and how it will help achieve/			
contribute to the expected outcomes.			
We are particularly interested in funding for the following types of activities: demand creation in			
	ity-led monitoring of services, community mobilization,		
	donor advocacy, scale up advocacy, media engagement,		
messaging, disease day campaigns and act	ivities, and qualitative research to understand what works.		
Please note that this list is not exhaustive.			
Activity 1			
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Activity 2			
Activity 3 Activity 4			
Activity 5			
Activity 6			

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