



Publisher of *Global Fund Observer*

532 West 111 Street #35, New York, NY 10025, USA
Web: www.aidspan.org Email: info@aidspan.org
Phone: +1-212-662-6800 Fax: +1-212-208-2543

The Aidspan Guide to Applying to the Global Fund

Second edition: 21 March 2004

by

David Garmaise and Bernard Rivers

Table of Contents

Preface	3
Chapter 1: Introduction and Background.....	4
Overview of the Global Fund	4
Are you an Eligible Applicant?	4
Are you Ready to Apply?	9
The Steps Between Applying for a Grant and Receiving the First Payment.....	10
Some Key Concepts to be Used in all Applications	13
Some Warnings.....	13
Chapter 2: Lessons Learned from the Third Round of Funding	15
Strengths	15
Strengths Identified Most Often	15
Other Frequently Identified Strengths.....	17
Strengths Identified Less Frequently	20
Weaknesses	21
Weaknesses Identified Most Often.....	21
Other Frequently Identified Weaknesses	25
Weaknesses Identified Less Frequently.....	33
Chapter 3: Step-by-step Guide to Filling Out the Proposal Form	34
Importance of the “Guidelines for Proposals”	34
Guidance on Use of the Different Formats of the Proposal Form.....	34
General Guidance on the Proposal Form	36
Guidance on Specific Sections of the Proposal Form	37
General Information Page.....	37
Section 1: Eligibility	38
Section 2: Executive Summary.....	39
Section 3: Type of Application	40
Section 4: Components Section	45
Section 5: Component Budget Section	60

Preface

This Aidspan publication is one of five free Aidspan guides to be produced during 2004 for Global Fund applicants and recipients, as follows

- ***The Aidspan Guide to Obtaining Global Fund-Related Technical Assistance***
(First edition 11 January 2004)
- ***The Aidspan Guide to Applying to the Global Fund*** – this document
(First edition 7 March 2004; Second edition 21 March 2004. The second edition contains new information provided in boxes labelled "New information" towards the end of Chapter 1, plus improved layout, plus other minor changes.)
- ***The Aidspan Guide to Surviving Global Fund Assessments and Negotiating a Global Fund Grant Agreement*** (Provisional title)
(Due second quarter 2004)
- ***The Aidspan Guide to Building and Running an Effective CCM***
(Due second quarter 2004)
- ***The Aidspan Guide to Procurement and Supply Management for Recipients of Global Fund Grants***
(Due second quarter 2004)

All five Guides are due for completion prior to the Bangkok International AIDS Conference in July 2004, and they will feature in a satellite session at that conference. These Guides are being produced by Aidspan because no larger organization has come forward to produce them. The Global Fund itself is too over-worked and too short-staffed to be able to develop such materials itself.

Downloads

To download a copy of any of these Guides, go to www.aidspan.org/guides. If you do not have access to the web but you do have access to email, send a request to guides@aidspan.org specifying which of the currently-available Guides you would like to be sent as attachments to an email. Aidspan does not have the resources to produce or distribute printed copies of these Guides.

Aidspan

Aidspan is a small US-based non-governmental organization (NGO) that works to promote increased support for and effectiveness of the *Global Fund to Fight AIDS, Tuberculosis and Malaria* (the Global Fund). Aidspan also publishes the *Global Fund Observer (GFO)* newsletter, an independent email-based source of news, analysis and commentary about the Global Fund. GFO is sent to 5,000 readers in over 150 countries. To receive GFO at no charge, send an email to receive-gfo-newsletter@aidspan.org. Subject line and text can be left blank.

Aidspan and the Global Fund maintain a positive working relationship, but have no formal connection, and Aidspan accepts no grants or fees from the Global Fund. *The Global Fund bears no responsibility for the content of this Guide or of any other Aidspan publication.*

Acknowledgements, Permissions, Feedback

Aidspan thanks its funders for the support they have provided for 2003-4 operations – the Open Society Institute, the Monument Trust, the John M. Lloyd Foundation, the MAC AIDS Fund, and three private donors.

David Garmaise, co-author of this Guide, can be reached at dgarmaise@rogers.com. Bernard Rivers, co-author and Executive Director of Aidspan, can be reached at rivers@aidspan.org.

Permission is granted to reproduce, print or quote from this document in part or in whole if the following is stated: "Reproduced from the 21 March 2004 version of '*The Aidspan Guide to Applying to the Global Fund*,' available at www.aidspan.org/guides."

Readers are invited to email rivers@aidspan.org with suggestions for improvements in the next edition of this Guide.

Chapter 1: Introduction and Background

The *"Aidspace Guide to Applying to the Global Fund"* is intended to be useful both to those who need less than is provided in the application guidelines provided by the Global Fund (because they just want to find out whether they should even consider applying), and to those who need more.

It discusses factors that lie behind some of the questions asked in the proposal form, and distils conclusions that can be drawn from a detailed analysis of the successful proposals that were submitted to the Fund in Round 3 (all of which are available at www.aidspace.org/globalfund/grants and www.theglobalfund.org).

The Guide is not intended to be a "cheat sheet." The objective is to de-mystify the process and to provide a clearer feeling of what is expected. It is based on the premise that there is no single "correct" way of completing the proposal form. It encourages the applicant to clearly describe their plan to tackle HIV, TB or malaria, and to make a convincing case (if true) that the plan is viable, is capable of delivering the anticipated results, and is something that the applicant is committed to and capable of implementing.

Chapter 2 of the Guide contains an analysis of the most common strengths and weaknesses of proposals submitted to the Global Fund in Round 3. The information in Chapter 2 is based on comments made by the Technical Review Panel (TRP). Chapter 3 consists of a step-by-step guide to filling out the proposal form.

Overview of the Global Fund

The effort of the Global Fund to mobilize and disburse new levels of resources against AIDS, tuberculosis and malaria has captured the world's attention. Beyond its significant role in securing and channelling new funding commitments, the Global Fund also acts as a catalyst for improvements in the way that countries and the world fund and implement programs for public health.

The Global Fund is a multi-billion-dollar international financing mechanism intended to help advance the fight against AIDS, tuberculosis and malaria by dramatically increasing the availability of funding for practical health initiatives. Funding is allocated to disease prevention, treatment, and care and support. Funded activities include both piloting of new and innovative programs and scaling up of existing interventions. The objective is to make it easier for affected countries to improve availability of health services, build national capacity, promote behaviour change, conduct operational research, and gain access to critical health products, such as medicines to treat HIV, tuberculosis, and malaria.

A key distinguishing feature of the Fund is that it does not say "We will give you a grant if you use it in the way that we instruct." Instead, the Fund in effect says "What will you do with the grant? What results will you achieve? If we believe that you can indeed achieve those results, if we believe that the results represent good value, and if we have enough money, we'll give you the grant."

With only a few exceptions, Global Fund grants are available only to programs designed and implemented by multi-sectoral partnerships in developing countries – partnerships defined and termed *Country Coordinating Mechanisms* (CCMs). These partnerships are expected to include government, non-government and community-based organizations, academic and educational organizations, people living with HIV, tuberculosis, or malaria and related patient and consumer groups, the private sector, faith-based organizations, and multilateral and bilateral development organizations.

During the past two years, the Global Fund has approved three rounds of funding proposals. As of 15 February 2004, the Fund had committed a total of \$2.05 billion, of which it had disbursed \$245 million toward proposals approved in those first three rounds. And as of 24 February 2004, actual contributions into the Global Fund by all donors amounted to the \$2.12 billion.

Are you an Eligible Applicant?

The Global Fund provides grants to help developing countries tackle HIV/AIDS, TB and malaria. Table 1, below, lists all countries that have ever been eligible to apply for Global Fund grants. If you

represent a Country Coordinating Mechanism (CCM) in one of the countries listed with a "Yes" in Column 2 of the table, you are eligible to apply. (See below the table for a discussion regarding applications by organizations and groupings that are not CCMs.)

Click on each country name in Table 1 to see a Data Sheet containing all Round 1, 2 and 3 approved and rejected proposals from that country. The Data Sheet contains links to each full proposal and/or its Executive Summary, to the TRP's comments regarding approved proposals, to contact names, and more.

Column 2 shows which of these countries are eligible to apply to the Global Fund in Round 4. The meanings of the entries in this column are:

- Yes – L: Classified as "Low Income" by the World Bank. Fully eligible to apply for grants from the Global Fund in Round 4.
- Yes – LM: Classified as "Lower-Middle Income" by the World Bank. Eligible to apply for grants from the Global Fund in Round 4, but must meet additional requirements, including providing co-financing from sources other than the Global Fund, focusing on poor or vulnerable populations, and moving over time towards greater reliance on domestic resources. (These concepts are further explained in [Chapter 3, Section 1](#) below.)
- Yes – UM: Classified as "Upper-Middle Income" by the World Bank. Most such countries are not eligible to apply for grants from the Global Fund in Round 4. However, Botswana is allowed to apply in regards to HIV/AIDS, TB and malaria, and Gabon is allowed to apply in regards to malaria, based on their high disease burden. Both countries must meet additional requirements, including providing co-financing from sources other than the Global Fund, focusing on poor or vulnerable populations, and moving over time towards greater reliance on domestic resources. (These concepts are further explained in [Chapter 3, Section 1](#) below.)
- No: Not eligible to apply in Round 4, but was eligible to apply in one or more of the earlier Rounds.

Countries not shown in the table are not eligible to apply in Round 4.

Column 3 shows whether the country is known by Aidsplan to have (or at one point to have had) a CCM. The meanings of the entries in this column are:

- Yes – A: Members of the CCM are listed by the Global Fund at www.theglobalfund.org/en/files/CCMMemberships.xls
- Yes – B: No CCM is specified at www.theglobalfund.org/en/files/CCMMemberships.xls, but other Global Fund documents refer to (or have referred to) a CCM.
- No: The country does not have a CCM known to Aidsplan.

Round 1 grants were approved by the Fund's board on 25 April 2002; Round 2 grants were approved on 31 January 2003; and Round 3 on 15 October 2003.

Table 1: Countries that are or have been eligible to apply to the Global Fund

All money amounts are in US dollars

For meanings of entries in Columns 2 and 3, see previous page

Country	Eligible for Round 4?	Known CCM?	Round 1 grant value, Years 1-2	Round 2 grant value, Years 1-2	Round 3 grant value, Years 1-2	Total
Afghanistan	Yes – L	Yes – A	\$0	\$3,125,605	\$0	\$3,125,605
Albania	Yes – LM	No	\$0	\$0	\$0	\$0
Algeria	Yes – LM	Yes – B	\$0	\$0	\$6,185,000	\$6,185,000
Angola	Yes – L	Yes – B	\$0	\$0	\$25,259,000	\$25,259,000

Country	Eligible for Round 4?	Known CCM?	Round 1 grant value, Years 1-2	Round 2 grant value, Years 1-2	Round 3 grant value, Years 1-2	Total
Argentina	No	Yes – B	\$12,177,200	\$0	\$0	\$12,177,200
Armenia	Yes – LM	Yes – A	\$0	\$3,166,641	\$0	\$3,166,641
Azerbaijan	Yes – L	Yes – B	\$0	\$0	\$0	\$0
Bangladesh	Yes – L	Yes – A	\$0	\$6,010,140	\$17,169,684	\$23,179,824
Barbados	No	Yes – B	\$0	\$0	\$0	\$0
Belarus	Yes – LM	Yes – A	\$0	\$0	\$6,818,796	\$6,818,796
Belize	No	Yes – A	\$0	\$0	\$1,298,884	\$1,298,884
Benin	Yes – L	Yes – B	\$2,389,185	\$13,521,404	\$1,383,931	\$17,294,520
Bhutan	Yes – L	Yes – A	\$0	\$0	\$0	\$0
Bolivia	Yes – LM	Yes – B	\$0	\$0	\$14,500,232	\$14,500,232
Bosnia and Herzegovina	Yes – LM	No	\$0	\$0	\$0	\$0
Botswana	Yes – UM	Yes – B	\$0	\$18,580,414	\$0	\$18,580,414
Brazil	Yes – LM	No	\$0	\$0	\$0	\$0
Bulgaria	Yes – LM	Yes – B	\$0	\$6,894,271	\$0	\$6,894,271
Burkina Faso	Yes – L	Yes – B	\$0	\$14,630,495	\$0	\$14,630,495
Burundi	Yes – L	Yes – B	\$4,877,000	\$13,792,126	\$0	\$18,669,126
Cambodia	Yes – L	Yes – A	\$11,242,538	\$12,889,081	\$0	\$24,131,619
Cameroon	Yes – L	Yes – B	\$0	\$0	\$34,566,421	\$34,566,421
Cape Verde	Yes – LM	Yes – B	\$0	\$0	\$0	\$0
Central African Republic	Yes – L	Yes – B	\$0	\$8,199,750	\$0	\$8,199,750
Chad	Yes – L	Yes – B	\$0	\$1,263,969	\$10,408,844	\$11,672,813
Chile	No	Yes – B	\$13,574,098	\$0	\$0	\$13,574,098
China	Yes – LM	Yes – B	\$28,893,662	\$0	\$32,122,550	\$61,016,212
Colombia	Yes – LM	Yes – B	\$0	\$3,482,708	\$0	\$3,482,708
Comoros	Yes – L	Yes – B	\$0	\$1,534,631	\$751,700	\$2,286,331
Congo (Dem. Republic)	Yes – L	Yes – A	\$0	\$6,409,630	\$59,766,462	\$66,176,092
Congo (Rep.)	Yes – L	Yes – B	\$0	\$0	\$0	\$0
Costa Rica	No	Yes – B	\$0	\$2,279,501	\$0	\$2,279,501
Cote D'Ivoire	Yes – L	Yes – B	\$0	\$18,099,398	\$3,900,850	\$22,000,248
Croatia	No	Yes – A	\$0	\$3,363,974	\$0	\$3,363,974
Cuba	Yes – LM	Yes – B	\$0	\$11,465,129	\$0	\$11,465,129
Djibouti	Yes – LM	Yes – B	\$0	\$0	\$0	\$0
Dominican Rep.	Yes – LM	Yes – B	\$0	\$14,698,774	\$2,636,816	\$17,335,590
East Timor	Yes – L	Yes – A	\$0	\$2,300,744	\$967,650	\$3,268,394
Ecuador	Yes – LM	Yes – B	\$0	\$7,453,979	\$0	\$7,453,979
Egypt	Yes – LM	Yes – B	\$0	\$2,480,219	\$0	\$2,480,219
El Salvador	Yes – LM	Yes – B	\$0	\$14,775,073	\$0	\$14,775,073
Equatorial Guinea	Yes – L	Yes – B	\$0	\$0	\$0	\$0
Eritrea	Yes – L	Yes – B	\$0	\$2,617,633	\$8,124,910	\$10,742,543
Estonia	No	Yes – B	\$0	\$3,908,952	\$0	\$3,908,952
Ethiopia	Yes – L	Yes – B	\$10,962,600	\$93,298,823	\$0	\$104,261,423
Fiji	Yes – LM	No	\$0	\$0	\$0	\$0
Gabon	Yes – UM	Yes – B	\$0	\$0	\$3,154,500	\$3,154,500
Gambia	Yes – L	Yes – A	\$0	\$0	\$11,907,243	\$11,907,243
Georgia	Yes – L	Yes – A	\$0	\$4,018,312	\$645,700	\$4,664,012
Ghana	Yes – L	Yes – A	\$5,079,485	\$4,596,111	\$0	\$9,675,596
Guatemala	Yes – LM	Yes – B	\$0	\$0	\$8,423,807	\$8,423,807

Country	Eligible for Round 4?	Known CCM?	Round 1 grant value, Years 1-2	Round 2 grant value, Years 1-2	Round 3 grant value, Years 1-2	Total
Guinea	Yes – L	Yes – B	\$0	\$11,698,205	\$0	\$11,698,205
Guinea-Bissau	Yes – L	Yes – B	\$0	\$0	\$1,503,587	\$1,503,587
Guyana	Yes – LM	Yes – B	\$0	\$0	\$11,541,797	\$11,541,797
Haiti	Yes – L	Yes – A	\$24,388,847	\$0	\$15,522,392	\$39,911,239
Honduras	Yes – LM	Yes – A	\$20,470,016	\$0	\$0	\$20,470,016
India	Yes – L	Yes – A	\$5,650,999	\$38,876,000	\$2,667,346	\$47,194,345
Indonesia	Yes – L	Yes – B	\$36,792,183	\$0	\$0	\$36,792,183
Iran (Islamic Republic of)	Yes – LM	Yes – A	\$0	\$5,698,000	\$4,000,000	\$9,698,000
Iraq	Yes – LM	No	\$0	\$0	\$0	\$0
Jamaica	Yes – LM	Yes – A	\$0	\$0	\$7,560,365	\$7,560,365
Jordan	Yes – LM	Yes – B	\$0	\$1,778,600	\$0	\$1,778,600
Kazakhstan	Yes – LM	Yes – A	\$0	\$6,502,000	\$0	\$6,502,000
Kenya	Yes – L	Yes – A	\$2,871,689	\$52,177,419	\$1,812,250	\$56,861,358
Kiribati	Yes – LM	No	\$0	\$0	\$0	\$0
Korea (DPR)	Yes – L	Yes – B	\$2,294,000	\$0	\$3,227,300	\$5,521,300
Kyrgyzstan	Yes – L	Yes – A	\$0	\$6,170,874	\$0	\$6,170,874
Laos	Yes – L	Yes – B	\$4,462,816	\$1,524,338	\$0	\$5,987,154
Lesotho	Yes – L	Yes – B	\$0	\$12,557,000	\$0	\$12,557,000
Liberia	Yes – L	Yes – B	\$0	\$12,192,274	\$12,140,921	\$24,333,195
Macedonia (Former Yugoslav Rep.)	Yes – LM	Yes – A	\$0	\$0	\$4,348,599	\$4,348,599
Madagascar	Yes – L	Yes – B	\$1,120,476	\$3,779,247	\$18,647,566	\$23,547,289
Malawi	Yes – L	Yes – B	\$58,685,440	\$20,872,000	\$0	\$79,557,440
Maldives	Yes – LM	Yes – A	\$0	\$0	\$0	\$0
Mali	Yes – L	Yes – B	\$2,023,424	\$0	\$0	\$2,023,424
Marshall Islands	Yes – LM	No	\$0	\$0	\$0	\$0
Mauritania	Yes – L	Yes – B	\$0	\$1,929,203	\$0	\$1,929,203
Micronesia	Yes – LM	No	\$0	\$0	\$0	\$0
Moldova	Yes – L	Yes – B	\$5,257,941	\$0	\$0	\$5,257,941
Mongolia	Yes – L	Yes – B	\$644,000	\$1,271,623	\$0	\$1,915,623
Morocco	Yes – LM	Yes – B	\$2,842,364	\$0	\$0	\$2,842,364
Mozambique	Yes – L	Yes – B	\$0	\$54,157,547	\$0	\$54,157,547
Myanmar	Yes – L	Yes – A	\$0	\$6,997,137	\$28,683,587	\$35,680,724
Namibia	Yes – LM	Yes – A	\$0	\$30,707,125	\$0	\$30,707,125
Nepal	Yes – L	Yes – B	\$0	\$6,988,925	\$0	\$6,988,925
Nicaragua	Yes – L	Yes – B	\$0	\$8,702,180	\$0	\$8,702,180
Niger	Yes – L	Yes – B	\$0	\$0	\$13,290,406	\$13,290,406
Nigeria	Yes – L	Yes – A	\$28,168,386	\$27,650,874	\$0	\$55,819,260
Pakistan	Yes – L	Yes – A	\$0	\$10,478,500	\$8,317,370	\$18,795,870
Panama	No	Yes – A	\$440,000	\$0	\$0	\$440,000
Papua New Guinea	Yes – L	Yes – A	\$0	\$0	\$6,106,556	\$6,106,556
Paraguay	Yes – LM	Yes – A	\$0	\$0	\$1,194,902	\$1,194,902
Peru	Yes – LM	Yes – B	\$0	\$35,872,171	\$0	\$35,872,171
Philippines	Yes – LM	Yes – A	\$0	\$10,679,249	\$3,496,865	\$14,176,114
Romania	Yes – LM	Yes – A	\$0	\$40,206,024	\$0	\$40,206,024
Russian Federation	Yes – LM	No	\$0	\$0	\$37,937,518	\$37,937,518
Rwanda	Yes – L	Yes – B	\$8,079,268	\$0	\$27,936,036	\$36,015,304

Country	Eligible for Round 4?	Known CCM?	Round 1 grant value, Years 1-2	Round 2 grant value, Years 1-2	Round 3 grant value, Years 1-2	Total
Saint Vincent & the Grenadines	Yes – LM	No	\$0	\$0	\$0	\$0
Samoa	Yes – LM	No	\$0	\$0	\$0	\$0
Sao Tome and Principe	Yes – L	Yes – A	\$0	\$0	\$0	\$0
Senegal	Yes – L	Yes – B	\$10,285,714	\$0	\$0	\$10,285,714
Serbia / Serbia & Montenegro	Yes – LM	Yes – B	\$2,718,714	\$0	\$2,428,986	\$5,147,700
Sierra Leone	Yes – L	Yes – B	\$0	\$2,569,103	\$0	\$2,569,103
Solomon Islands	Yes – L	No	\$0	\$0	\$0	\$0
Somalia	Yes – L	Yes – B	\$0	\$8,890,497	\$5,601,215	\$14,491,712
South Africa	Yes – LM	Yes – A	\$41,095,529	\$8,414,000	\$15,521,456	\$65,030,985
Sri Lanka	Yes – LM	Yes – A	\$8,057,600	\$0	\$0	\$8,057,600
Sudan	Yes – L	Yes – B	\$0	\$32,936,275	\$7,842,140	\$40,778,415
Suriname	Yes – LM	Yes – A	\$0	\$0	\$0	\$0
Swaziland	Yes – LM	Yes – B	\$0	\$30,610,400	\$1,348,400	\$31,958,800
Syrian Arab Rep.	Yes – LM	No	\$0	\$0	\$0	\$0
Tajikistan	Yes – L	Yes – B	\$1,474,520	\$0	\$1,521,040	\$2,995,560
Tanzania	Yes – L	Yes – B	\$17,359,076	\$0	\$23,951,034	\$41,310,110
Tanzania / Zanzibar (Sub-CCM)	Yes – L	Yes – B	\$781,220	\$1,116,285	\$959,482	\$2,856,987
Thailand	Yes – LM	Yes – B	\$37,932,554	\$22,353,183	\$911,542	\$61,197,279
Togo	Yes – L	Yes – B	\$0	\$14,185,638	\$5,232,319	\$19,417,957
Tonga	Yes – LM	No	\$0	\$0	\$0	\$0
Tunisia	Yes – LM	No	\$0	\$0	\$0	\$0
Turkey	Yes – LM	Yes – A	\$0	\$0	\$0	\$0
Turkmenistan	Yes – LM	No	\$0	\$0	\$0	\$0
Uganda	Yes – L	Yes – B	\$36,314,892	\$30,052,861	\$70,357,632	\$136,725,385
Ukraine	Yes – LM	Yes – B	\$24,970,211	\$0	\$0	\$24,970,211
Uzbekistan	Yes – L	Yes – B	\$0	\$0	\$5,182,832	\$5,182,832
Vanuatu	Yes – LM	No	\$0	\$0	\$0	\$0
Vietnam	Yes – L	Yes – A	\$10,000,000	\$0	\$13,388,402	\$23,388,402
West Bank and Gaza	Yes – LM	No	\$0	\$0	\$0	\$0
Yemen	Yes – L	Yes – A	\$0	\$4,159,632	\$0	\$4,159,632
Zambia	Yes – L	Yes – B	\$76,290,000	\$0	\$0	\$76,290,000
Zimbabwe	Yes – L	Yes – B	\$17,016,250	\$0	\$0	\$17,016,250

In rare cases, the Fund also accepts applications from entities other than CCMs, as follows:

- (a) In countries in which a CCM exists, proposals from individual organizations (such as non-governmental organizations) are eligible only if they satisfactorily explain that they originate from one of the following (using the precise wording provided by the Global Fund):
- "Countries without legitimate governments (such as governments not recognized by the United Nations);"
 - "Countries in conflict, facing natural disasters, or in complex emergency situations (which will be identified by the Global Fund through reference to international declarations such as those of the United Nations Office for the Coordination of Humanitarian Affairs [OCHA]);" or

- "Countries that suppress or have not established partnerships with civil society and NGOs."

In elaboration of this third possibility, the Fund explains that "if a non-CCM proposal was provided to a CCM for its consideration, but the CCM either did not review it in a timely fashion or refused to endorse it, the steps taken to obtain CCM approval should be described. Additionally, arguments in support of its endorsement and documentary evidence of the attempts to obtain CCM approval should be provided. Any non-CCM proposal must demonstrate clearly why it could not be considered under the CCM process and provide documentation of these reasons." This is discussed further in [Chapter 3, item 3.5.3](#) below.

- (b) In countries in which a CCM does not exist, individual organizations may apply directly, but should provide evidence "that the proposal is consistent with and complements national policies and strategies." In one or two countries, there is some dispute as to whether a CCM exists – one or more groups may have identified themselves as the CCM, but other key players, or the Global Fund Secretariat, may not have accepted their validity.

In the rest of this Guide, it will be assumed that you represent a CCM unless stated otherwise.

Are you Ready to Apply?

Logically speaking, things should happen in the following order:

- (a) A country determines its national strategy for tackling HIV/AIDS, TB or malaria.
- (b) The country then designs one or more projects designed to implement that strategy.
- (c) The country then submits proposals (to places such as the Global Fund) seeking financial support for one of those projects.

Thus, when you write a proposal to the Global Fund, you should, in theory, be in a position to describe a national strategy and a project, both of which have already been designed.

But all too often, what actually happens is that the project – and in some cases even the national strategy – is invented in the course of writing the proposal. This is what we describe as "the tail wagging the dog."

If you have been asked to write a proposal to the Global Fund on behalf of your CCM, but minimal thinking has been carried out regarding the national strategy or regarding the project for which funding is being sought, you should consider carefully whether it is worth the effort you are about to undertake. The TRP, which will review your proposal, will quickly detect if the tail is excessively wagging the dog. However, a moderate amount of tail-wagging-the-dog appears to be taking place on a widespread basis and appears to be acceptable.

At a more practical level, other things should be in place before you apply:

- You need to have access to the people who can help you answer some of the more complex questions in the proposal form.
- You need to be able to show a draft outline of your proposal to at least a few key members of the CCM, to ensure that you are on the right track.
- It would be good to have access to advisors (domestic and/or international) who can comment on whether the draft needs further editing.
- You need to have enough time for the whole exercise – time enough to ensure that the national strategy and project design are clear, to write the proposal, to get the proposal endorsed by the CCM as a whole, and to get it signed by individual CCM members. It's hard to imagine this all being done in much less than a month. Sometimes it requires considerably more.
- You should start by printing and reading the Global Fund's "Guidelines for Proposals: Fourth Call for Proposals," and by printing and keeping for reference the "Proposal Form: Fourth Call

for Proposals." These are accessible for download, in six languages, at www.theglobalfund.org/en/apply/call.

The Steps Between Applying for a Grant and Receiving the First Payment

Round 4 applications (i.e. completed proposals) must be submitted to the Fund by 5 April 2004. From May 3-14, the TRP will review the proposals and make recommendations to the Board. The Board will then make its decisions at its June 28-30 meeting.

As this Guide went to press at the start of March 2004, \$904 million was forecast to be available for the first two years of Round 4 grants, with more expected by the time grants are approved. The amounts required for the first two years of Rounds 1, 2 and 3 were \$613 m., \$884 m. and \$623 m. respectively.

When the Global Fund Secretariat receives each proposal, it reviews whether the proposal is eligible – i.e. that it has been completed properly, and that the organization or group submitting the proposal is qualified to do so. If the proposal is eligible, it is passed to the TRP, after translation (if necessary) into English.

New information:

The TRP is an independent group of 26 experts. Membership as of mid-March 2004 is Andrei Beljaev (Russia); Jonathan Broomberg (South Africa); David Burrows (Australia); John Chimumbwa (Zambia); Kaarle O. Elo (Finland); Mary Bourke Ettlign (USA); Paula I. Fujiwara (USA); Peter Godfrey-Faussett (UK); Wilfred Griekspoor (Netherlands); Hakima Himmich (Morocco); David Hoos (USA); Lee-Nah Hsu (USA); Michel D. Kazatchkine (France); Fabio Luelmo (Argentina); Giancarlo Majori (Italy); Munar (first name not known) (Colombia); Pierre-Yves Norval (France); David H. Peters (Canada); Antonio Pio (Argentina); Jayasankar Shivakumar (India); Godfrey Sikipa (Zimbabwe); Stephanie Simmonds (UK); Richard L. Skolnik (USA); Standing (first name not known) (UK); Michael J. Toole (Australia); Stefano Vella (Italy). Biographical details on some of these are available at www.theglobalfund.org/en/about/technical.

When the TRP members review the proposals, they do so in their personal capacities – they do not share the information with or accept any instructions from their employers or their national governments.

By the end of their two-week meeting, if they operate as in previous Rounds, the TRP will have divided all the proposals into four groups:

- Recommended (Category 1): Proposals recommended by the TRP for approval, for which the TRP seeks no clarifications or only minor ones.
- Recommended (Category 2): Proposals recommended by the TRP for approval subject to the applicant satisfactorily responding to a number of requests by the TRP for clarification.
- Not Recommended (Category 3): Proposals not recommended by the TRP in their present form, but regarding which applicants are encouraged to submit improved applications in future rounds.
- Not Recommended (Category 4): Proposals not recommended by the TRP for funding, and regarding which the TRP provides no encouragement that applicants should re-apply in future rounds.

In allocating each proposal to one of the above Categories, the TRP takes into consideration only technical factors, such as whether the project described in the proposal is technically sound, whether it is one that the specified organization(s) are capable of implementing, whether it represents good use of the money, etc. The TRP is required to ignore the question of whether it believes the Global Fund has enough money to pay for all the proposals that it is recommending.

Table 2 shows that in previous Rounds, 37% of eligible proposals were recommended by the TRP for approval.

Table 2: Recommendation Rates in Rounds 1, 2 and 3

	Number of eligible proposals	%
Round 1: Submitted	204	
Of which, Recommended for approval	58	28%
Round 2: Submitted	229	
Of which, Recommended for approval	98	43%
Round 3: Submitted	180	
Of which, Recommended for approval	71	39%
Rounds 1 + 2 + 3: Submitted	613	
Of which, Recommended for approval	227	37%

In Rounds 1, 2 and 3, the Board established the impressive precedent of approving all Category 1 and 2 proposals without going through them on a proposal-by-proposal basis. Clearly, there were some Category 1 or 2 proposals that some board members did not like, or that came from countries with governments that some board members did not like. But the Board de-politicized the process – and thus avoided potentially endless arguing – by following the advice of the TRP.

In Rounds 1 and 2, this process was rendered easier by the fact that the Fund had plenty of "start-up" funds available. However, in Round 3 there was only just enough money available, as is likely to be the case in Round 4. In Rounds 5 and 6 it is far from certain that there will be enough money available to pay for all Category 1 and 2 proposals.

New information:

At its meeting on 18-19 March 2004, the Global Fund board agreed a policy that will be applied in situations where the money available is not sufficient to finance the first two years of all grants recommended for approval by the TRP. (Note that paying for Years 3 to 5 of existing grants will take priority over paying for Years 1 to 2 of new grants. Thus, there will be an increased chance of insufficient funds to finance new grants once extensive grant renewals are taking place. This will not be the case for Round 4, but it will be the case for Round 5 and later.)

When insufficient financing is available, the board will proceed as follows:

- If possible, finance all proposals in TRP Category 1, then all proposals in Category 2A, then all proposals in Category 2B.
- If there is not enough money to finance all proposals in a particular category, assign all proposals in that category a score ranging from 1 to 8 based on the country's disease burden and poverty level. Proposals from countries with a "very high" disease burden (defined below) get 4 points, and those from any other eligible country get 1 point. And proposals from countries defined as "low income" by the World Bank get 4 points, from "lower middle income" countries get 2 points, and from "upper middle income" countries get 0 points. Thus, each proposal gets 4 or 1 point based on disease burden, plus 4, 2 or 0 points based on poverty level. Total possible points are 8, 6, 5, 4, 3 or 1.
- If possible, finance all those proposals that have 8 points. Then, if possible, finance all those that have 6 points. Then all those that have 5 points. And so on, until there is a score which cannot be fully financed.
- In Round 5 and later (but not in Round 4), it is possible that there will also be a score based on repeated past failures, or on not having previously applied.
- The definition of "very high" disease burden is as follows: For HIV/AIDS: if the country's ratio of adult HIV seroprevalence (as reported by UNAIDS, multiplied by 1000) to Gross National Income

per capita (Atlas method, as reported by the World Bank) exceeds 5. For tuberculosis: if the country is included on the WHO list of 22 high burden countries, or on the WHO list of the 36 countries that account for 95% of all new tuberculosis cases attributable to HIV/AIDS. For malaria: if the country experiences more than 1 death due to malaria per 1000 people per year.

- Grants recommended by the TRP but for which financing is not available will not be approved. Thus, presumably, the only chance for those proposals is if they are resubmitted in future rounds, where they will be competing against proposals newly generated in that round.

Once a proposal is approved, the Secretariat enters into a lengthy and complex process of: (a) ensuring that the applicant answers, to the satisfaction of the TRP, any questions that the TRP asked regarding the proposal; (b) assessing the ability of the proposed Principal Recipient(s) to perform the role that the proposal assigns to it/them; and (c) negotiating grant agreement(s) with the Principal Recipient(s). It is only after this multi-month process that the first cash disbursement is sent. Thus, although proposals have to be submitted by April 5, it is unlikely that funding will be sent and the project started much before the end of 2004.

Each approved proposal is approved in principle for five years, but funding is only assigned for the first two years. Funding for Years 3-5 of approved proposals will be approved – or not – during the second year of project implementation. Funding the renewal of already-started projects will depend on performance in implementing the first two years of the grant.

New information:

At its meeting on 18-19 March 2004, the Global Fund board agreed the detailed policy that will be applied when grants are coming towards the end of their second year and are ready to seek funding for Years 3-5. This will first happen in late 2004. For each such grant, the procedure will be as follows:

- The objectives for Years 3-5 of the grant must be "broadly consistent with the original approved proposal," though some reprogramming may be negotiated with the Secretariat.
- The Secretariat will collect a considerable body of information about how successfully the grant was implemented during Years 1-2. This information will relate to "grant performance, financial accountability and contextual considerations." The information will be compiled and recorded in Grant Fact Sheets and Grant Score Cards, which will be made publicly accessible both before and after they are filled in by the Secretariat.
- The grant will then be considered for renewal. The maximum grant to be provided in the renewal contract will normally be the five-year amount originally approved, less the amounts disbursed during Years 1-2.
- If the Secretariat recommends that the grant be renewed, the TRP and board do not need to be involved. If the Secretariat recommends that the grant be discontinued, this will have to be reviewed by the TRP and confirmed by the board.
- The decision whether to renew will normally be taken by the Secretariat 20 months after the grant's start date. For Round 1 and 2 grants, the definition of the start date might be adjusted to reflect "program realities".
- The grant renewal decision might be taken earlier than the twentieth month in cases where grant implementation has proceeded unexpectedly quickly, or where there have been severe exchange rate fluctuations.
- The grant will only be renewed if there is funding available to pay for the renewal.

Some Key Concepts to be Used in all Applications

Throughout this Guide, we use the term “proposal” to describe the application that you are submitting to the Global Fund, and we use the term “project” to describe the activities that you will be implementing if your proposal is accepted for funding.

The Global Fund application form makes extensive use of terms such as goal, objectives, activities, impact / coverage / process / output indicators, baseline data, targets, etc. Most of these are discussed on pages 13-14 of the Guidelines document. A brief description is:

- The goal is a broad achievement, often at a national level, that you want to happen as a result of the project for which funding is being sought and, often, of other projects – e.g. “Reduced HIV-related mortality.”
- Objectives are more specific things, linked to the goal, that you want this particular project to achieve – e.g. “Improved survival rates in people with advanced HIV infection in four provinces.”
- Services are the broad things that will be done to achieve the objectives – e.g. “Scaling up of access to antiretroviral therapy.”
- Activities are the more specific things that will be done as part of each service – e.g. “Developing an adherence support programme for people taking antiretroviral therapy.”
- Indicators are things that you can measure to show the extent to which services or activities are being delivered, or goals or objectives are being achieved. Coverage indicators measure how many people the services are reaching; impact indicators measure the extent to which benefits are resulting among the people to whom the services are being delivered.
- Baseline levels are values that indicators have before the project starts.
- Target levels are values that you anticipate indicators reaching at different times in the future, as a result of the project.

Some Warnings

Warning 1: The application form is long and complex

The Round 4 Proposal Form is 36 pages long, plus informational appendices. It's true that no single applicant has to complete all parts of the form, and that the Round 3 form was of a comparable length. But still, both the length and the complexity are daunting. It is considerably harder to fill in the form than it would be to complete a fairly sophisticated tax return, even in cases where the data is available, which often it will not be.

Warning 2: Application form questions are occasionally ambiguous

A few of the questions and requirements in the application form are ambiguous. One example: It's not clear what are the consequences if not all CCM members sign the proposal. The Guidelines for Proposals says "Proposals should be endorsed [i.e. signed] by the full CCM membership;" but the Form itself says "CCM members who have not been involved should not sign the proposal." Another example: In cases where a National CCM has agreed in writing to the formation of a Sub-National CCM, it's not clear whether the National CCM also has to agree in writing with the content of the actual proposal submitted by that Sub-National CCM.

The Fund's web site says that queries about the application process should be sent to proposals@theglobalfund.org, though this is not mentioned in the Form or Guidelines. The Secretariat has informed GFO that at of late February 2004, it has received and responded to over 120 queries.

Warning 3: Each of the four formats of the Proposal Form has disadvantages

The Proposal Form is available in four formats – read-only PDF file, editable Word file, Online, and CD-ROM. Each of these has disadvantages, and which one is best for you depends on a number of factors. This is discussed further in "[Guidance on Use of the Different Formats of the Proposal Form](#)" in Chapter 3.

Chapter 2: Lessons Learned from the Third Round of Funding

This chapter contains information on the most common strengths and weaknesses of proposals submitted to the Global Fund for the third round of funding. The information is based on comments made by the Technical Review Panel (TRP). People who are planning to submit applications to the Global Fund should review the strengths described in this section to get a sense of what constitutes a solid proposal. And, of course, they should examine the weaknesses to ensure that they know what problems to avoid when preparing their applications.

This chapter is divided into two sections, one on the strengths and the other on the weaknesses. The section on strengths starts with a list of the most common strengths that were identified in Round 3, and is followed by a detailed discussion of each strength. Many examples of the TRP observations for specific countries are listed; these examples have been paraphrased – i.e., they are not direct quotes. The section concludes with a list of some of the less frequently identified strengths. The section on weaknesses is organized in a similar fashion, except that the names of the countries have not been included in the example shown.

Throughout the section on Strengths, hyperlinks are provided to take the reader direct to relevant documents. All the documents linked to are in English unless otherwise stated.

Strengths

The strengths identified most often in the TRP comments on the proposals submitted during the third round of funding were as follows:

1. The proposal was clear and well-documented; the strategy was sound.
2. There was good involvement of partners and other sectors in the implementation plan.
3. There was a strong political commitment to implement the project.
4. The project targeted high-risk groups and vulnerable populations.

Other strengths identified fairly frequently were as follows:

5. The proposal demonstrated complementarity – i.e., it built on existing activities.
6. The proposal demonstrated sustainability – i.e., national budgets were identified to help sustain the activities once Global Fund support terminated.
7. The goals, objectives, activities, outcomes and budgets were well aligned.
8. The monitoring and evaluation plan was solid.
9. The budget was well detailed.
10. There was good collaboration among programmes addressing the three diseases.
11. The project was realistic and achievable.
12. The proposal contained a good situational analysis.
13. The proposal reflected comments made by the TRP during earlier rounds of funding.

The observations of the TRP concerning each of these strengths are further described below.

Strengths Identified Most Often

1. Strength: The proposal was clear and well documented; the strategy was sound

The reviewers commented very favourably on proposals that were well thought out and reflected a solid strategic approach; that were well structured; that were clearly written; and that contained a detailed workplan with clear objectives. They also praised proposals where each section was complete and all necessary documentation was provided.

FOR EXAMPLE:

- ⇒ See particularly the proposals from Guyana – HIV/AIDS ([proposal](#) (578 KB), [TRP comments](#)), Liberia – Malaria ([proposal](#) (1,619 KB), [TRP comments](#)), Philippines – HIV/AIDS ([proposal](#) (1,547 KB), [TRP comments](#)), Somalia – TB ([proposal](#) (1,053 KB), [TRP comments](#)) and Multi-Country Americas OECS – HIV/AIDS ([proposal](#) (516 KB), [TRP comments](#)).

2. Strength: There was good involvement of partners and other sectors in the implementation plan

The reviewers were impressed by proposals that involved a wide range of partners and inter-sector collaboration in the implementation of the projects. Some of the specific partners and sectors that were listed in these proposals were: local, national and international NGOs; organizations and networks of persons living with HIV/AIDS; organizations representing vulnerable groups, such as drug users, women and sex trade workers; religious leaders and institutions, including faith groups; trade unions and traditional medicine societies; academia; other government departments; international organizations, such as the World Health Organization (WHO), the United Nations Children's Fund (UNICEF), the World Bank and the Global TB Drug Facility (GDF); development organizations; rural organizations; and the private sector. Reviewers also praised projects that included the involvement of peer educators.

The reviewers commented favourably on proposals that talked about collaboration and partnership between government services and NGOs or communities (including people living with HIV/AIDS), especially for the implementation phase of the project.

FOR EXAMPLE:

- ⇒ Gabon – HIV/AIDS ([proposal in French](#) (2,880 KB), [TRP comments](#)): The project involves community mobilization through networks of NGOs and community-based organizations.
- ⇒ See also Bolivia – HIV/AIDS ([proposal](#) (2,383 KB), [TRP comments](#)); Bolivia – Malaria ([proposal](#) (2,448 KB), [TRP comments](#)), China – HIV/AIDS ([proposal](#) (1,882 KB), [TRP comments](#)), India – HIV/TB ([proposal](#) (741 KB), [TRP comments](#)), Papua-New Guinea – Malaria ([proposal](#) (1,418 KB), [TRP comments](#)) and Togo – TB ([proposal in English](#) (1,967 KB), [proposal in French](#) (2,257 KB), [TRP comments](#)).

The reviewers were impressed with proposals that outlined the prominent role that NGOs and communities would play in the implementation of the projects.

FOR EXAMPLE:

- ⇒ Belize – HIV/AIDS ([proposal](#) (6,454 KB), [TRP comments](#)): Local NGOs would be implementing key aspects of targeted prevention work, including behaviour change strategies, education of key professionals, and youth counselling.
- ⇒ Pakistan – Malaria ([proposal](#) (2,444 KB), [TRP comments](#)): The project would be totally managed by existing community-based institutions (such as Village Development Committees, and Basic Development Needs Programmes).
- ⇒ India – HIV/TB ([proposal](#) (741 KB), [TRP comments](#)): The involvement of cured TB patients and persons living with HIV/AIDS as outreach worker for home or community based care programmes would help to strengthen the links between the health centres and the community.

The reviewers noted the positive effects of inter-sectoral collaboration.

FOR EXAMPLE:

- ⇒ Guyana – Malaria ([proposal](#) (1,968 KB), [TRP comments](#)): The inter-sectoral collaboration is conceptually innovative for Guyana, whose malaria control up to now was based on spraying and diagnosis and treatment by the control programme alone.

3. Strength: There was a strong political commitment to implement the project

The reviewers considered that strong political commitment was a significant asset to any proposal. Most often, this commitment was evidenced by increased government funding or support for the fight against the disease being addressed by the proposal.

FOR EXAMPLE:

- ⇒ Paraguay – TB ([proposal, English](#) (1,573 KB), [proposal, Spanish](#) (1,352 KB), [TRP comments](#)): Increased funding and dedicated staff.

Governments sometimes demonstrated their commitment by providing funds to directly subsidize the purchase of antiretroviral therapies.

FOR EXAMPLE:

- ⇒ See Cameroon – HIV/AIDS ([proposal summary](#) (159 KB), [TRP comments](#))

In some instances, the government commitment was evidenced by policy development.

FOR EXAMPLE:

- ⇒ Georgia – Malaria ([proposal](#) (1,557 KB), [TRP comments](#)): The President issued a decree on the fight against malaria.
- ⇒ Uzbekistan – HIV/AIDS ([proposal](#) (1,895 KB), [TRP comments](#)): The government implemented progressive legislation.
- ⇒ Rwanda – Malaria ([proposal](#) (1,468 KB), [TRP comments](#)): The government reduced the taxes and tariffs on mosquito nets.
- ⇒ Tajikistan – TB ([proposal](#) (1,990 KB), [TRP comments](#)): The government committed to implement Directly Observational Therapy.
- ⇒ Togo – Malaria ([proposal, English](#) (1,534 KB), [proposal, French](#) (1,635KB), [TRP comments](#)): The government removed all tariffs on mosquito nets.

Some governments signalled their commitments by participating actively in the CCMs.

FOR EXAMPLE:

- ⇒ Chad – HIV/AIDS ([proposal, English](#) (867 KB), [proposal, French](#) (1,389 KB), [TRP comments](#)): The Prime Minister chaired the CCM.
- ⇒ Eritrea – HIV/AIDS ([proposal summary](#) (248 KB), [TRP comments](#)): There was ministerial participation in the CCM.

4. Strength: The project targeted high-risk groups and vulnerable populations

The reviewers commented favourably on all proposals that included a strong focus on vulnerable communities (including the poor) and groups at risk for contracting HIV, TB or malaria.

Other Frequently Identified Strengths

5. Strength: The proposal demonstrated complementarity – i.e., it built on existing activities

The reviewers noted with satisfaction proposals that would scale up already existing programmes; that would be a good fit with, be integrated with, or link with existing programmes; and that would complement programmes funded by earlier Global Fund grants.

6. Strength: The proposal demonstrated sustainability – i.e., national budgets were identified to help sustain the activities once Global Fund support terminated

Reviewers applauded proposals that demonstrated sustainability, by governments committing to long-term funding for the project (beyond the end date of the project); by governments committing to increasing their contributions to the fight against one or more of the three diseases over time; or by governments allocating additional funds immediately to the project (as a sign of their commitment).

FOR EXAMPLE:

- ⇒ Algeria – HIV/AIDS ([proposal, English](#) (2,786 KB), [proposal, French](#) (1,145KB), [TRP comments](#)): Increasing national budgets for HIV/AIDS over time.
- ⇒ Cameroon – Malaria ([proposal](#) (1,023 KB), [TRP comments](#)): The government is adding resources to the malaria programme.
- ⇒ Georgia – Malaria ([proposal](#) (1,557 KB), [TRP comments](#)): Proposal includes well-articulated sustainability plan.
- ⇒ Multi-Country Americas OECS – HIV/AIDS ([proposal](#) (516 KB), [TRP comments](#)): Governments will assume full responsibility by the end of Year 5.
- ⇒ Philippines – HIV/AIDS ([proposal](#) (1,547 KB), [TRP comments](#)): Shift over time to increasing use of domestic resources.

7. Strength: The goals, objectives, activities, outcomes and budgets were well aligned

Reviewers commented positively on proposals where the various elements of the workplan and budget were in sync with each other. The most common observation was that the activities were clearly linked to the objectives and goals.

FOR EXAMPLE:

- ⇒ See Bangladesh – TB ([proposal](#) (1,378 KB), [TRP comments](#)), China – HIV/AIDS ([proposal](#) (1,882 KB), [TRP comments](#)), Iran – HIV/AIDS ([proposal](#) (1,901 KB), [TRP comments](#)) and Kenya – TB ([proposal](#) (2,130 KB), [TRP comments](#)).

Reviewers also lauded proposals where the budget information was consistent with the activities.

FOR EXAMPLE:

- ⇒ See Serbia/Serbia and Montenegro – TB ([proposal](#) (3,505 x KB), [TRP comments](#)) and Sudan – HIV/AIDS ([proposal](#) (7,872 KB), [TRP comments](#)).

Finally, reviewers praised several proposals where the outcomes and indicators were well aligned with the goals and objectives.

FOR EXAMPLE:

- ⇒ See Congo DR – HIV/AIDS ([proposal, French](#) (4,685 KB), [TRP comments](#)) and Belarus – HIV/AIDS ([proposal](#) (2,742 KB), [TRP comments](#)).

8. Strength: The monitoring and evaluation plan was solid

The reviewers were pleased with proposals that contained strong monitoring and evaluation (M&E) plans.

FOR EXAMPLE:

- ⇒ China – HIV/AIDS ([proposal](#) (1,882 KB), [TRP comments](#)): Excellent M&E framework and plan.
- ⇒ Uzbekistan – HIV/AIDS ([proposal](#) (1,895 KB), [TRP comments](#)): Clear M&E plan with data sources verified.

- ⇒ See also Guyana – HIV/AIDS {[proposal](#) (578 KB), [TRP comments](#)}, Jamaica – HIV/AIDS {[proposal](#) (2,190 KB), [TRP comments](#)} and Somalia – TB {[proposal](#) (1,053 KB), [TRP comments](#)}.

The reviewers were also pleased to see M&E plans that were based on existing systems.

FOR EXAMPLE:

- ⇒ Multi-Country Americas OECS – HIV/AIDS {[proposal](#) (516 KB), [TRP comments](#)}: M&E based on an existing system for collecting and processing data using indicators and measurement tools developed in collaboration with UNAIDS, the Caribbean Health Research Council and the Caribbean Epidemiology Centre.

9. Strength: The budget was well detailed

The reviewers reacted favourably to proposals that contained detailed and well-presented budgets.

FOR EXAMPLE:

- ⇒ Guyana – HIV/AIDS {[proposal](#) (578 KB), [TRP comments](#)}: Excellent detailed budgets that are also very easy to understand.
- ⇒ See also Bangladesh – TB {[proposal](#) (1,378 KB), [TRP comments](#)}, India – HIV/TB {[proposal](#) (741 KB), [TRP comments](#)}, Somalia – TB {[proposal](#) (1,053 KB), [TRP comments](#)}, Swaziland – TB {[proposal](#) (518 KB), [TRP comments](#)} and Tanzania – HIV/TB {[proposal](#) (523 KB), [TRP comments](#)}.

The reviewers were also impressed with budgets that contained solid information on the costs of commodities, particularly antiretroviral therapies.

FOR EXAMPLE:

- ⇒ Liberia – Malaria {[proposal](#) (1,619 KB), [TRP comments](#)}: Estimates of commodity needs and costs detailed and accurate.
- ⇒ Multi-Country Americas OECS – HIV/AIDS {[proposal](#) (516 KB), [TRP comments](#)}: Reasonable antiretroviral (ARV) prices already negotiated.

10. Strength: There was good collaboration among programs addressing the three diseases

The reviewers commented positively on proposals for one of the three diseases that incorporated collaboration with programmes addressing one or both of the other two diseases. In most cases, the collaboration was between HIV/AIDS and TB.

FOR EXAMPLE:

- ⇒ See East Timor – TB {[proposal](#) (521 KB), [TRP comments](#)}, Guatemala – HIV/AIDS {[proposal, English](#) (779 KB), [proposal, Spanish](#) (2,103 KB), [TRP comments](#)} Haiti – TB {[proposal](#) (1,465 KB), [TRP comments](#)} and Togo – TB {[proposal in English](#) (1,967 KB), [proposal in French](#) (2,257 KB), [TRP comments](#)}.

In one instance, the reviewers cited a collaboration between Malaria and TB.

FOR EXAMPLE:

- ⇒ See Vietnam – Malaria {[proposal](#) (1,986 KB), [TRP comments](#)}.

11. Strength: The project was realistic and achievable

The reviewers applauded proposals that contained reasonable, realistic and achievable goals and objectives and indicators.

FOR EXAMPLE:

- ⇒ Congo DR – HIV/AIDS {[proposal, French](#) (4,685 KB), [TRP comments](#)}: Reasonable goals and targets based on successful recent experiences.
- ⇒ See also Angola – Malaria {[proposal summary](#) (173 KB), [TRP comments](#)}, Eritrea – HIV/AIDS {[proposal summary](#) (248 KB), [TRP comments](#)}, Iran – HIV/AIDS {[proposal](#) (1,901 KB), [TRP comments](#)} and Guinea-Bissau – TB {[proposal, English](#) (678 KB), [proposal, French](#) (759 KB), [TRP comments](#)}.

12. Strength: The proposal contained a good situational analysis

The reviewers were favourably impressed by proposals that contained a solid description the current situation in the country.

FOR EXAMPLE:

- ⇒ Benin – Malaria {[proposal, English](#) (2,042 KB), [proposal, French](#) (2,056 KB), [TRP comments](#)}: Good situational analysis and baseline data are provided.
- ⇒ Guyana – HIV/AIDS {[proposal](#) (578 KB), [TRP comments](#)}: Good situational analysis of the HIV situation in the country with a good gap analysis of programs and finances.
- ⇒ Rwanda – HIV/AIDS {[proposal](#) (1,367 KB), [TRP comments](#)}: Strategic plan identifies gaps that will be met by this proposal.
- ⇒ Vietnam – Malaria {[proposal](#) (1,986 KB), [TRP comments](#)}: Excellent situational analysis of their problem.
- ⇒ See also East Timor – TB {[proposal](#) (521 KB), [TRP comments](#)}, Gambia – Malaria {[proposal](#) (832 KB), [TRP comments](#)} and Uzbekistan – HIV/AIDS {[proposal](#) (1,895 KB), [TRP comments](#)}.

13. Strength: The proposal reflected comments made by the TRP during earlier rounds of funding

The reviewers noted with satisfaction proposals that responded to comments, clarifications and recommendations made by the TRP in earlier rounds of funding.

Strengths Identified Less Frequently

The following is a list of some of the other strengths identified by the reviewers:

- ⇒ The proposal contained innovative strategies, some of which could lead to best practices.
- ⇒ The proposal built on the national strategic plan or other existing programmes.
- ⇒ The CCM was strong and had wide sectoral representation.
- ⇒ Procurement systems were either already in place or were included in the proposal.
- ⇒ The Principal Recipient (PR) was a strong organization, with experience managing similar programmes.
- ⇒ The proposal included capacity building measures.
- ⇒ The proposal was consistent with Poverty Reduction Strategy Papers (PRSPs) and Sector Wide Approaches (SWAps).
- ⇒ The project will significantly expand care.
- ⇒ The proposal included good financial management and governance plans.
- ⇒ The rights of persons living with HIV/AIDS and vulnerable groups were respected and/or promoted.

Weaknesses

The weaknesses identified most often in the TRP comments on the proposals submitted during the third round of funding were as follows:

1. The workplan was inadequate. There was insufficient, unclear or questionable information on one or more of the following: the rationale, the strategic approach, the objectives or the activities.
2. The budget information was inaccurate, questionable and/or not sufficiently detailed.

Other weaknesses identified frequently were as follows:

3. The various sections of the proposal were not well aligned.
4. The monitoring and evaluation plan was either missing or inadequate.
5. The budget (and therefore the project) was imbalanced; too much or too little was allocated to one or more sectors or activities.
6. The treatment, care and support component of the proposal was missing or inadequate.
7. In HIV/AIDS and TB proposals, there were either no joint activities or insufficient joint activities involving both diseases.
8. The project was too ambitious; some or all of the goals and objectives were not realistic.
9. The use of partners and other sectors in the implementation of the project was inadequate or unclear.
10. The impact and/or outcome indicators were inappropriate or poorly defined.
11. The project did not focus sufficiently on vulnerable groups.
12. The proposal did not demonstrate complementarity or additionality; it was not clear how the project related or added to existing programmes.
13. The proposal did not contain a good situational analysis and/or provide adequate baseline information.
14. The plan for procurement and supply chain management was inadequate.

Not surprisingly, some of the weaknesses are the flip side of the strengths identified by the TRP (see above). The observations of the TRP concerning each of the weaknesses are further described below.

Weaknesses Identified Most Often

1. Weakness: The workplan was inadequate. There was insufficient, unclear or questionable information on one or more of the following: the rationale, the strategic approach, the objectives or the activities

Problems with the workplans were identified in about three out every five proposals submitted for Round 3. The following is a summary of the major such weaknesses identified:

- many objectives and activities were insufficiently described or unclear;
- the rationale for some objectives and activities was inconsistent or unclear;
- the strategic approach was insufficient or unclear;
- some objectives or activities were inappropriate;
- some key objectives or activities were missing; and
- there were inconsistencies in the text.

These are now discussed in further detail.

Description of Objectives and Activities

With respect to the objectives and activities that were insufficiently described or unclear, the reviewers used the following phrases to describe the problems:

- activities poorly or vaguely defined;
- activities not clearly articulated;
- activities redundant;
- objectives too broad;
- objectives overlapping;
- activities need more detailed description, particularly with respect to how they will be carried out;
- workplan superficial, with little detail; and
- weak workplan raises questions about whether the project is ready to be implemented.

The reviewers frequently focussed on weaknesses in the description of activities for interventions designed to reach specific populations.

FOR EXAMPLE:

- ⇒ Not clear how the interventions will access the targeted populations.
- ⇒ No information on how the outreach activities will be carried out. Who will conduct these activities?
- ⇒ No information on what services will be provided to the sex workers.
- ⇒ No indication of the number of patients who will benefit.
- ⇒ No information on how the needs of the orphaned children will be met.
- ⇒ Not clear how the illegal immigrants will be reached.

In many proposals, the reviewers found that there was insufficient information provided on the capacity building programmes included in the workplan.

FOR EXAMPLE:

- ⇒ No description of the curriculum for the training programme.
- ⇒ No information on how many persons are to be trained each year.
- ⇒ Who will conduct the training?
- ⇒ No information on what steps are involved in developing and implementing the training programme.
- ⇒ How will the quality of the training be ensured?
- ⇒ No explanation of how the number of community agents trained will go from zero to 1,500 in two years.

The reviewers found that adequate information was lacking in other areas as well.

FOR EXAMPLE:

- ⇒ No description of the key messages to be used for the multi-media health education campaign.
- ⇒ What systems will be put in place to use the large numbers of people trained?

- ⇒ No details on the DOTS expansion plan even though this is the core of the proposal.
- ⇒ No information on how the micro-financing scheme would work.
- ⇒ No activities included concerning how to manage detected TB cases.

Rationale for Objectives and Activities

The reviewers observed that some objectives or activities lacked adequate justification.

FOR EXAMPLE:

- ⇒ What is the justification for active case finding and X-ray diagnosis given that these are not key priorities of the DOTS strategy?
- ⇒ Why is a pilot going to be carried out in one district for five years before a decision is made to scale up?
- ⇒ It is not clear that a separate TB research unit is justified.
- ⇒ There is no explanation of why a new building and new equipment is required to implement the project.
- ⇒ No rationale is presented for the quantities of leaflets and posters included in the proposal.
- ⇒ No rationale given for why a regional approach is needed.
- ⇒ No explanation is given for the substantial increase in training costs in Years 4 and 5.
- ⇒ Why does the proposal call for local manufacturing of malaria nets when that is 45-80 percent more expensive than importing and may lead to serious quality problems?

Strategic Approach

The reviewers found that some proposals contained no overall strategic approach or framework, or contained a strategy that was weak or questionable.

FOR EXAMPLE:

- ⇒ The strategic approach to reaching mobile economic migrants with services is poorly explained.
- ⇒ It is not obvious that providing a large quantity of malaria nets free of charge will stimulate the local markets.
- ⇒ The proposed strategy does not focus on behaviour change.
- ⇒ Need to focus on TB case management before dealing with multi-drug-resistant TB.

Appropriateness of Objectives and Activities

The reviewers questioned the appropriateness of some of the proposed objectives and activities.

FOR EXAMPLE:

- ⇒ Is distributing materials really the best way to reach the target populations?
- ⇒ The proposal includes activities that are not in line with WHO recommendations.
- ⇒ It is not reasonable for all major goods to be purchased in the first quarter of the first year.
- ⇒ Given the increasing data on resistance to chloroquine in Africa, why is the proposal calling for the use of this drug to treat malaria?
- ⇒ Producing one brochure is not sufficient by itself to constitute a workplace programme.
- ⇒ Why conduct an efficacy study when the sensitivity of the drugs is already known?

- ⇒ There is an emphasis on KAP studies, which are no longer considered the most effective methodology for dealing with behavioural issues.

Missing Objectives and Activities

The reviewers sometimes identified key objectives or activities that were not included in the proposals.

FOR EXAMPLE:

- ⇒ The proposal does not contain any harm reduction activities to address the needs of drug users.
- ⇒ The proposal fails to include activities concerning the upgrading of facilities.
- ⇒ There are no activities included that will allow for a knowledgeable central programme team to be developed.
- ⇒ The proposal is missing a component concerning how to reach illegal immigrants.
- ⇒ The proposal does not address how adherence among drug users will be supported.
- ⇒ Is there any justification for not making condoms available in prisons?
- ⇒ The proposal does not include a distribution plan for the malaria nets.
- ⇒ There are no activities included to ensure that people in peripheral areas of the countries will access services.

Inconsistencies

Finally, the reviewers pointed out instances where a table says one thing and the accompanying text something different; or where statements in the project summary contradicted the information in later sections.

2. Weakness: The budget information was inaccurate, questionable and/or not sufficiently detailed

Note: Budget issues concerning the cost of drugs and other commodities are covered in the section on procurement below (#14).

Over half of the proposals submitted in Round 3 contained problems with the budget. The following is a summary of the major weaknesses:

- the budget was incomplete or not detailed enough;
- there were inconsistencies or errors within the budget; and
- specific budget items were unclear, questionable or not adequately justified.

These are now discussed in further detail.

Incomplete Information

The reviewers found that some proposals did not contain a detailed budget or were missing some information; and that for some proposals there were insufficient details provided on major budget items.

FOR EXAMPLE:

- ⇒ No detailed breakdown of unit costs or quantities.
- ⇒ The budget lacked sufficient detail to be able to justify it.
- ⇒ Administrative costs were expressed only as a percentage.
- ⇒ The budget breakdown over five years was not shown.

- ⇒ Large lump sums shown with no breakdown.
- ⇒ There was nothing in the budget to cover the costs of many of the M&E activities.
- ⇒ Intermediate level budgets linking activities and costs by component and by beneficiary should have been included, but were not.

Inconsistencies or Errors

The reviewers found that many budgets were incorrectly filled out. Some of the problems they identified were: errors in addition and multiplication; incomplete or no unit costs; incomplete or no quantities; costs wrongly categorized; and inconsistencies between one part of the budget and another.

FOR EXAMPLE:

- ⇒ The proposal contained inconsistencies between the annual budget and the quarterly budget.
- ⇒ Either the unit costs or the volumes are incorrect because the figures do not add up.

Questionable Items

The reviewers identified a number of individual budget items that, in their view, were unclear, unjustified or at least questionable.

FOR EXAMPLE:

- ⇒ The costs of one malaria drug were budgeted at 10 times its actual price.
- ⇒ A large amount was allocated to "Other" with no explanation of what that included.
- ⇒ The per-diems shown for meetings were very high.
- ⇒ \$45 million was allocated for an unproven technology.
- ⇒ The overhead costs were very high.
- ⇒ It is not appropriate to allocate 10 percent for overhead for the PR, over and above the administrative costs already included in the budget.
- ⇒ The costs shown for insecticides seem low.
- ⇒ Contingency costs of \$300,000 are not justified.
- ⇒ The costs shown for condoms were too high.

For a number of proposals, the reviewers found that the assumptions used to create the budget were not adequately justified. One reviewer commented that applicants should provide detailed assumptions for every line item, including unit costs and volumes.

Other Frequently Identified Weaknesses

3. Weakness: The various sections of the proposal were not well aligned

The reviewers found numerous instances where items described in one area of the proposal were not reflected in another area, or were inconsistent with another area. The most common problem was discrepancies between what was in the budget and what was in the description of the activities.

FOR EXAMPLE:

- ⇒ The detailed budget says that no funds are required for 2005, but the activities mention costs for that year.
- ⇒ Expansion from nine to only 15 facilitators, as spelled out in the description of the activities, is not consistent with what the budget says.

- ⇒ The M&E budget does not match the evaluation activities that are planned.
- ⇒ The information presented in the budget tables is not substantiated by the description of the activities.

Another problem was the lack of consistency between the objectives and the activities.

FOR EXAMPLE:

- ⇒ The activities do not really relate to the objectives to which they are linked in the proposal.
- ⇒ The proposal fails to indicate which activities go with which objectives.
- ⇒ The objectives say that the malaria nets will be used one way, while the activities say that they will be used in a quite different way.
- ⇒ The objective for HIV treatment is to offer care to 95 percent of those who need it; but the actual numbers shown in the activities do not translate into 95 percent coverage.

The reviewers spotted other discrepancies between the different sections of the proposal.

FOR EXAMPLE:

- ⇒ The description of the activities does not mention condoms, but condom distribution is included as an indicator.
- ⇒ The requested budget is too high for the objectives and activities as described.
- ⇒ It is difficult to link the indicators of activities to the outcomes shown for the objectives.
- ⇒ The indicators are often not appropriate to the activities.
- ⇒ The objectives as stated do not relate to the goal.
- ⇒ One of the objectives has no targets.
- ⇒ The budget allocations for activities among vulnerable populations seems low when compared against the indicators.

4. Weakness: The monitoring and evaluation plan was either missing or inadequate

Some proposals failed to include an M&E plan. In other proposals, the reviewers found that the M&E plan was very weak and/or lacking in detail.

FOR EXAMPLE:

- ⇒ Vague description of what will be measured and how it will be done.
- ⇒ The plan is not convincingly defined.
- ⇒ The plan is insufficiently detailed to be workable.
- ⇒ No relevant baseline information was provided.
- ⇒ The methodology is flawed.
- ⇒ No M&E costs are provided beyond Year 2.
- ⇒ It is not clear whether sufficient funds have been allocated to undertake the data collection.
- ⇒ The plan as presented does not adequately measure the process and outcome indicators.

The reviewers also identified problems with the information systems in existence or being proposed.

FOR EXAMPLE:

- ⇒ The information system portion of the plan is not well formulated.

- ⇒ The existing information systems capabilities in the country do not give confidence that the M&E plan can be carried out effectively.
- ⇒ The sources of information are too vaguely described.

5. Weakness: The budget (and therefore the project) was imbalanced; too much or too little was allocated to one or more sectors or activities

The reviewers found that in some cases the budget amounts allocated to one or more sectors or activities was either inappropriate or not adequately justified.

FOR EXAMPLE:

- ⇒ The costs shown for training and administration are too high in relation to the overall budget.
- ⇒ Almost half of the funds are earmarked for the private sector, but there is insufficient information to justify this.
- ⇒ The allocation of funding to NGOs at 10 percent is low compared to the government at 80 percent, given that many of the community initiatives described in the proposal will require NGOs to succeed.
- ⇒ The private sector and academic organizations receive a significant share of the budget, yet they were not mentioned in the proposal.
- ⇒ Considerable resources are allocated to laboratory upgrading and patient subsidies for viral load testing and drug resistance; most of these resources would be better spent to provide free ARVs.
- ⇒ Although the proposal says that public-private partnerships will be used, 85 percent of the funds are allocated to the government.
- ⇒ One-third of the budget is for IEC materials, but the proposal does not contain a clear IEC plan.
- ⇒ Fifty percent of the funds are being used for training.
- ⇒ Most of the funds are for staff salaries and travel.

6. Weakness: The treatment, care and support component of the proposal was missing or inadequate

The reviewers were critical of the fact that several HIV/AIDS proposals lacked a treatment component. Other common problems identified by the reviewers were as follows:

- The criteria for deciding which persons would receive ARVs was either missing or unclear.
- It was not clear if ARVs would be provided free of charge to the poor.
- There were no targets, or very low targets, for the number of people who were to receive ARVs.
- Drug policies and management strategies were not spelled out.
- It was not clear whether or how children would be accessing ARVs.
- It was not clear what kind of care would be provided to persons living with HIV/AIDS.

The reviewers identified a number of other concerns with respect to the treatment, care and support component.

FOR EXAMPLE:

- ⇒ The treatment plan is unclear.
- ⇒ There are no treatment guidelines.

- ⇒ The treatment regimens for multi-drug resistant TB need to be clarified and properly budgeted.
- ⇒ The HIV treatment goals are too minimal to support the prevention targets.
- ⇒ There is no discussion of specific training for clinicians on HIV primary care and ARVs.
- ⇒ It is not clear the management of ARVs will be done according to WHO guidelines..
- ⇒ There is no mention of treatment for STIs or opportunistic infections.
- ⇒ The quantities of drugs required are not spelled out.
- ⇒ There is no mention of drug replacement therapy.
- ⇒ The ARV protocols for the prevention of mother-to-child transmission need to be spelled out.
- ⇒ Having only one treatment facility in the country may not be sufficient.
- ⇒ The choice of drugs for malaria prophylaxis and treatment is questionable.
- ⇒ The ARV regimens are not described.
- ⇒ The proposal contains no plans for drug distribution.
- ⇒ Laboratory monitoring of ARV is not included.
- ⇒ There is no information on what assistance will be provided to drug users to help them adhere to the treatment regimens.

7. Weakness: In HIV/AIDS and TB proposals, there were either no joint activities or insufficient joint activities involving both diseases

Because of the obvious links between HIV/AIDS and TB, the reviewers were critical of HIV/AIDS and TB proposals that did not make those links. The reviewers wanted to see joint activities between projects (or existing programmes), or at least activities to address TB in HIV/AIDS projects and vice-versa.

FOR EXAMPLE:

- ⇒ The opportunity to integrate HIV services, such as voluntary testing and counselling (VCT), with TB services was missed.
- ⇒ This HIV/AIDS proposals fails to include any interaction with the TB programme that is already seeing many people who would benefit from ARVs.
- ⇒ None of the objectives or indicators address the key links between HIV and TB.
- ⇒ TB-HIV coordination not discussed.
- ⇒ TB management should be integrated into HIV/AIDS care and support.

8. Weakness: The project was too ambitious; some or all of the goals and objectives were not realistic

In the opinion of the reviewers, some projects were simply too ambitious. The reviewers identified targets, objectives, activities, timelines and indicators that they thought were unrealistic.

FOR EXAMPLE:

- ⇒ Year 1 and 2 targets for nets and net treatments are completely unrealistic.
- ⇒ It is not realistic to go from an unknown success rate to 85 percent in two years.
- ⇒ The proposal is too ambitious concerning timelines and short-term goals.
- ⇒ Attempting full coverage of ARVs in two years is too ambitious.
- ⇒ Some objectives are not achievable or measurable in the short term.

- ⇒ These are ambitious objectives for a country with a poor infrastructure.
- ⇒ Highly ambitious impact indicators at this stage of the HIV and TB epidemics.
- ⇒ Increase of 70 percent in one year for the number of women receiving drugs for the prevention of mother-to-child transmission of HIV is unrealistic.
- ⇒ Highly ambitious expansion of the training plan.
- ⇒ Scale up of parts of the proposal are too rapid.
- ⇒ Coverage targets for the objectives are too ambitious, and should be modified and spread more gradually over the life of the project.

9. Weakness: The use of partners and other sectors in the implementation of the project was inadequate or unclear

The reviewers commented fairly frequently on the absence of information on NGOs as implementing partners.

FOR EXAMPLE:

- ⇒ The involvement of NGOs not well described.
- ⇒ Who the NGO partners would be is not indicated.
- ⇒ Given the importance of the role of civil society in the project, a more detailed description of their roles and responsibilities is required.
- ⇒ There is no information on how the NGOs will be selected.
- ⇒ The ability of local NGOs to deliver the technical aspects of the plan is not described.
- ⇒ The allocation of resources to NGOs is insufficient in light of the activities that are planned for them.

The reviewers also frequently noted the lack of details on the involvement of the private sector.

FOR EXAMPLE:

- ⇒ The private sector is not mentioned in the information, education and counselling activities even though 90 percent of malaria cases are treated in the private sector.
- ⇒ The role of the private health sector is unclear.
- ⇒ The proposal does not include any discussion of a strategy for engaging the private sector.
- ⇒ The role of the private sector in procurement, distribution and implementation is very unclear.

The reviewers also identified other problems with respect to the involvement of partners and sectors.

FOR EXAMPLE:

- ⇒ There are no credible implementation partners, and no evidence that the government can go it alone.
- ⇒ The partners seem to be mainly academics and researchers rather than community mobilisers.
- ⇒ The proposal does not mention how external partners, such as the World Bank and AusAID, are being utilized.
- ⇒ Although academic institutions have 75% of the budget, there is no explanation of their roles and responsibilities.
- ⇒ The multi-sectoral approach is not clearly described (beyond meetings).

10. Weakness: The impact and/or outcome indicators were inappropriate or poorly defined

The reviewers found that in a number of proposals the indicators were simply not appropriate.

FOR EXAMPLE:

- ⇒ The indicator for delaying sexual initiation to 22 years for men and 19 years for women is not realistic and needs further analysis.
- ⇒ Using biochemical examinations in multi-drug resistant TB patients is not appropriate.
- ⇒ The indicators for services to sex workers and their clients, and for the education of traditional practitioners, are too low.
- ⇒ Some indicators are not relevant.
- ⇒ It is unlikely that the percentage of commercial sex workers using condoms will be measurable through outreach services.

In other instances, the reviewers found that there was insufficient or confusing information on the indicators.

FOR EXAMPLE:

- ⇒ Poor identification of the indicators.
- ⇒ Many indicators have no actual targets.
- ⇒ The indicators are unclear.
- ⇒ Information for many of the indicators is missing.
- ⇒ The indicators for ARV access are confused: 500 patients in Year 5 does not translate into 90 percent coverage.
- ⇒ (From a TB proposal) There is no mention of the key outcome indicators: cure, completion, failure, default and transfer rates.

Finally, the reviewers noted instances where the indicators did not adequately support the objectives or activities.

FOR EXAMPLE:

- ⇒ The impact indicators do not fully reflect the stated objectives.
- ⇒ No indicators are spelled out for the objectives and activities.
- ⇒ Indicators to measure key activities were missing.

11. Weakness: The project did not focus sufficiently on vulnerable groups

The reviewers found that in a number of proposals, vulnerable groups were either not addressed or were addressed inadequately. (Note: The examples listed below pertain to HIV/AIDS proposals unless otherwise indicated.)

FOR EXAMPLE:

- ⇒ The vulnerable groups are not well articulated. The proposal needs to focus more on women, returnees, the military, traders and other mobile populations.
- ⇒ No services have been designed for women even though women represent 60 percent of the infections.
- ⇒ The proposal mentions sex workers as the most vulnerable population, but fails to include activities addressing sex workers.
- ⇒ The services for orphans are not defined.

- ⇒ The proposal has no focus on injection drug users, and limited focus on sex workers.
- ⇒ The activities focus more on providing financial support to social institutions than to reaching target populations.
- ⇒ The programming for vulnerable groups is not described.
- ⇒ (HIV/TB) The vulnerable groups are not addressed in the proposal.
- ⇒ The proposal address one vulnerable group, but fails to address injection drug users, sex workers and men who have sex with men.
- ⇒ (TB) Much of the budget is for equipment and the development of guidelines, rather than for activities targeting the vulnerable groups.
- ⇒ The proposal fails to address prisoners.

In some cases, the reviewers found that the information on how vulnerable groups would be addressed was insufficient.

FOR EXAMPLE:

- ⇒ The section on injection drug users is weak. More activities needed.
- ⇒ There is no information in the proposal on how the vulnerable population will be recruited into the youth centre.
- ⇒ Returnees need specific programmatic approaches.
- ⇒ There is no description of how the outreach to the vulnerable groups will be done.

12. Weakness: The proposal did not demonstrate complementarity or additionality; it was not clear how the project related or added to existing programmes

The reviewers found that in a number of instances the proposals did not adequately explain how the proposed objectives and activities would materially add to or complement existing programmes.

FOR EXAMPLE:

- ⇒ The proposal fails to describe how the project would relate to other activities in this area.
- ⇒ Poor description of how the proposal would complement existing activities.
- ⇒ The proposal overlaps with other processes to expand VCT (e.g., WHO).
- ⇒ The proposal makes no reference to existing TB services.
- ⇒ No clear value added to national or regional programmes.
- ⇒ The role of the VCT component of the proposal is not clearly delineated from existing centres delivering care to pregnant women, providing mother-to-child prevention and providing STI care.
- ⇒ The proposal does not explain how the proposed activities would interact with existing national prevention activities.
- ⇒ No information on how the proposal would add to existing condom distribution programmes.
- ⇒ The proposal is not consistent with the existing national strategy.
- ⇒ The proposal says nothing about scaling up the experience of already existing NGOs.

In some cases, the reviewers raised questions about the links between the Global Fund proposal and activities being funded from other sources.

FOR EXAMPLE:

- ⇒ The proposal does not explain how the proposed activities would complement the World Bank loan.

- ⇒ More details are required concerning the complementary role of the Global Fund monies with other sources of funding, especially concerning M&E.
- ⇒ The complementarity of these activities with those supported by recently increased donor resources for malaria is not clear.

The reviewers identified problems with some of the regional proposals.

FOR EXAMPLE:

- ⇒ There are no links with existing national TB control programmes.
- ⇒ It is not clear how the proposed services will add to existing national services.

Finally, the reviewers pointed out that in some proposals, there was insufficient information on how they linked to other proposals that (a) were approved by the Global Fund or (b) were being submitted to the Fund.

13. Weakness: The proposal did not contain a good situational analysis and/or provide adequate baseline information

The reviews found that the situational analysis in a number of the proposals was less than adequate.

FOR EXAMPLE:

- ⇒ No situational analysis was included.
- ⇒ The situational analysis was very weak.
- ⇒ The situational analysis does not indicate what is currently happening for each of the objectives, and what the gap is that needs to be funded.
- ⇒ The situational analysis for all of the countries covered by this proposal is based on one reference paper.
- ⇒ The situational analysis is not based on available epidemiological evidence.
- ⇒ The proposal demonstrates no understanding of the nature and causes of the HIV/AIDS epidemic in the region, or of the accepted approaches to prevention, treatment and care.

The reviewers also found that many proposals contained either no baseline data or incomplete data.

FOR EXAMPLE:

- ⇒ There is missing baseline data.
- ⇒ The baseline data provided do not help to understand how the defined targets will be reached.
- ⇒ The current epidemiological situation is not identified.
- ⇒ The reported burden of disease is not specific to the targeted areas.
- ⇒ The TB baseline data is inaccurate. The proposal does not refer to published data.
- ⇒ There is no information on the burden of multi-drug resistant TB.
- ⇒ It is not clear whether the baseline figures are actuals or estimates.
- ⇒ There is no information on the current in-country TB drug distribution system.

14. Weakness: The plan for procurement and supply chain management was inadequate

The reviewers found that some proposals contained no plan for procurement and supply chain management. In other cases, the reviewers said that the plan was too vague or not detailed enough.

FOR EXAMPLE:

- ⇒ The arrangements for procurement are weak.
- ⇒ The vagueness of the procurement plan does not inspire confidence in existing systems and infrastructures.
- ⇒ It is not clear whether the drugs purchased will be consistent with the GDF (Global TB Drug Facility).
- ⇒ No details are provided with respect to procurement and supply chain management. This is problematic, given the country's lack of experience procuring ARVs, and given the supply chain issues in a country that is particularly geographically dispersed.
- ⇒ There is no centralized processing to reduce the price of commodities.
- ⇒ The proposed procurement system is weak; it vaguely implies that the WHO will do it.
- ⇒ The procurement and supply management section has information taken from existing documents that do not specifically address the mechanisms for procuring TB drugs.
- ⇒ The country should be applying to the GDF for drugs.

The reviewers also identified problems concerning the funding, pricing and costs of drugs and other products.

FOR EXAMPLE:

- ⇒ Where will the funding come from for the nets purchased in Year 3?
- ⇒ The cost shown for individual drugs are not accurate.
- ⇒ The ARV prices should be lower.
- ⇒ The unit costs shown for the TB medications are extremely high.
- ⇒ The unit costs for the first line ARVs vary within the proposal.

Weaknesses Identified Less Frequently

The following is a list of some of the other weaknesses identified by the reviewers:

- The human resource plan and/or capacity building plan was absent or inadequate.
- The evidence of co-financing was missing or inadequate.
- The proposal was poorly written and organized.
- The financial management and/or governance plans were inadequate.
- There were problems concerning the PR. It was not identified, or not located in the country, or lacked the necessary capacity.
- Some of the methodologies were questionable.
- The roles and responsibilities of the various players were unclear.
- It was not clear whether the political commitment was there.
- The country's readiness to implement was not clearly established.
- The CCM was not sufficiently representative.
- Elements of the proposal were unclear.
- There was insufficient information concerning sustainability.
- Information about external donors for the project was missing, incomplete or unclear.
- The absorptive capacity to take on this project was not demonstrated.

Chapter 3: Step-by-step Guide to Filling Out the Proposal Form

The purpose of this chapter is to provide guidance on how to fill out the Proposal Form for Round 4. First, we explain the importance of reviewing the Guidelines for Proposals for Round 4 before starting to prepare your application. Then we provide general guidance on the Proposal Form as a whole. But the bulk of this chapter is devoted to providing guidance on specific sections of the Proposal Form.

Throughout this Guide, we use the term “proposal” to describe the application you are submitting to the Global Fund, and we use the term “project” to describe the activities that you will be implementing if your proposal is accepted for funding.

For the purposes of this Chapter, we assume that all proposals will be for a five-year period (the maximum allowed), though they can be for a shorter duration.

Importance of the “Guidelines for Proposals”

Before you start filling out the Proposal Form, we suggest that you thoroughly familiarize yourself with the “Guidelines for Proposals: Fourth Call for Proposals,” a guidance document produced by the Global Fund specifically for the fourth round of funding. In addition to describing who is eligible to apply and what types of proposals can be submitted, the Guidelines contain the following sections, each of which provides very useful information:

Scope of Proposals (Section III). This section explains that your project can focus on one or more of the three diseases; that your proposal needs to address social and gender issues, such as gender inequalities, and stigma and discrimination; that your proposal should address systematic cross-cutting issues, such as capacity development and infrastructure development; that your proposal should contain an appropriate balance between different types of interventions (e.g., prevention, care and treatment); and that your proposal should contain interventions implemented by a wide variety of partners. It also provides examples of the types of activities that the Global Fund supports.

Criteria for Proposal Review (Section IV). This section outlines the key elements that the TRP looks for in proposals.

Proposal Development (Section V). This is the largest section in the Guidelines. First, it highlights the importance of the participation of the CCM members in the preparation of your proposal. Then, it provides guidance on key elements that need to be included in your proposal – namely, identification of needs; the proposed strategy, as defined by the goals, objectives, services, main activities and indicators; implementation arrangements; monitoring and evaluation (M&E); procurement and supply management; and budget information.

Proposal Application and Review Process (Section VI). This section provides information on how and where applications should be submitted; and on the steps involved in the review of applications.

Guidance on Use of the Different Formats of the Proposal Form

The Global Fund has provided the Proposal Form in four formats. Their features, strengths, and weaknesses are as follows:

Read-only PDF version: The PDF form is of no value when it is time to fill in the application, because it is not editable. Its only value is as something that can be printed out so that applicants can read all of the application form. The PDF version is available in English, Spanish, French, Russian, Chinese and Arabic. It can be downloaded from www.theglobalfund.org/en/apply/call.

Editable Word version: In Round 3, this was the only format available. In Round 4, the Word version was not made available until early March, nearly two months after the launch of Round 4. It is available in English, Spanish, French, Russian, Chinese and Arabic. The Word version can be

downloaded from www.theglobalfund.org/en/apply/call/application. If you use this version, you should submit your application electronically, *but you must also submit a hard copy of your application*. See Section VI.A of the Guidelines for Proposals for the email and postal addresses that you need to use to submit your application.

Advantages:

- The user can edit it easily.
- The user can create new "master drafts" through copying-and-pasting from earlier drafts where different people worked on different parts of the proposal.
- It is simple enough that it does not have "bugs" in the way that complex software can.
- It contains significant amounts of built-in "Help" information.

Disadvantages:

- It does not have built-in intelligence. Thus, it cannot calculate totals and percentages, and cannot omit questions based on answers to earlier questions.
- If you submit your proposal to the Global Fund in this format, the Fund will have to do a lot of work to get your answers into its database.

Online version: This is a browser-based version that can be used by anyone who has access to an Internet connection and who has been provided by the Global Fund with an ID and password. (To register, go to <http://pgms.synisys.com/pafsm/index.jsp>.) The Online version is available in English, Spanish and French. If you use the Online version, *you must also submit a hard copy of your application*.

Advantages:

- It has considerable built-in intelligence, presenting the user with only those questions that appear to be relevant based on earlier answers. It computes totals and percentages as needed, and automatically copies data from one part of the form to other parts when appropriate.
- Answers are stored in a structured database that the Global Fund can use effectively.
- You can click on "Help" at any time for useful context-specific help messages.
- You can click on "English", "French" or "Spanish" at any time to see the questions re-appear in the language specified.

Disadvantages:

- It is unpleasantly slow for users who have a good broadband Internet connection, and it is impossibly slow for users who do not have such a connection.
- It does not permit team-writing, in which one writer completes one part of the application and other writers simultaneously complete other parts. Yet team-writing is conducted by the majority of applicants, and is reflective of the whole partnership approach that the Fund advocates.
- It has various less serious design weaknesses that are discussed later in this chapter.

CD-ROM version: This can be obtained on a by request from proposals@theglobalfund.org or from many WHO and UNAIDS offices. Or it can be created by downloading some large files from www.theglobalfund.org/en/apply/call/application. (The download is only feasible for those with a broadband connection.) The CD-ROM version is available in English, Spanish and French. When you are ready to send your final data to the Global Fund (electronically), follow the instructions on the "ReadMe.doc" file that comes with the CD-ROM version. Note, however, that *you must also submit a hard copy of your application*.

Advantages:

- It is similar, though not identical, to the Online version, and has the same built-in intelligence.
- Answers are stored in a structured database that the Global Fund can use effectively. (However, the database has to be sent to the Fund.)
- It does not have slowness problems in the way that the Online version does.
- You can click on "English", "French" or "Spanish" at any time to see the questions re-appear in the language specified.

Disadvantages:

- It does not permit team-writing.
- According to the Global Fund, "you might experience some problems using this application in certain environments especially in connection with incompatible versions of Access installed on your computer."
- If you click on Help, you receive a message saying that no context-sensitive help is available.
- It has various less serious design weaknesses that are discussed later in this chapter.

Conclusion:

Our recommendation is that applicants proceed as follows:

- (a) Go to www.theglobalfund.org/en/apply/call/application and download the Word version of the Application Form in your preferred language..
- (b) Have your writing team use the Word version of the Form until what you want to say is 100% final and you have created a master Word file that contains what you want the proposal to say.
- (c) Then laboriously copy-and-paste your final text and numbers from the Word version into the Online or CD-ROM version of the application form. Don't leave this exercise too late. (If you encounter serious technical problems, submit the Word file to the Global Fund.)

This approach is recommended for three reasons. First, by working with the Word version, you can at any time send drafts to colleagues, and you can create new drafts by cut-and-paste from earlier drafts that were created by different members of the proposal-writing team. Second, you avoid most of the disadvantages discussed above. Third, there are some bugs in the Online and CD-ROM versions. It would be most unfortunate if you had entered huge amounts of text into the Online or CD-ROM version and then either found that it all got lost, or that some part of the Form did not work and you had to start from scratch.

Note: For the remainder of this chapter, in the "main text" we have assumed that you are working with the Word version. Information that is specific to the Online and CD-ROM versions has been placed in boxes.

General Guidance on the Proposal Form

In any given round, your country may apply to the Global Fund for funding to address more than one of the three diseases covered by the Fund. There are several ways in which you can do this. The most common method is to submit separate proposals for each disease. It is also fairly common to submit a proposal that addresses HIV and TB together, since they are inter-related in many ways. As well, you can submit an integrated proposal covering all three diseases. See Section III.A of the Guidelines for Proposals for more information.

(The Global Fund uses the term "component" to identify which disease or diseases are being targeted. The Proposal Form lists five possible components, as follows: HIV/AIDS, Tuberculosis, Malaria, HIV/TB, and Integrated.)

You may, if you wish, address more than one component in the same proposal. This approach has rarely been successful in the past and we do not recommend it. Generally speaking, for the purposes of this Guide, we have assumed that the proposal you are submitting covers just one component.

If you are submitting more than one proposal, and if some of the information that you need to provide does not change for each proposal, you may copy and paste the relevant texts from one proposal to another.

If you do decide to address more than one component in the same proposal, please note that the Global Fund requires that there be a separate Components Section (Section 4) and a separate Components Budget Section (Section 5) for each component.

The following are some general tips concerning how the Proposal Form should be filled out:

- ⇒ Be sure to read the “How to use this form” section at the beginning of the Proposal Form. It contains useful guidance.
- ⇒ Where the Proposal Form calls for one or two paragraphs of text, it is not a good idea to write six or seven paragraphs. This will not be viewed favourably by the TRP. If you feel that it is necessary to write at significantly greater length than what is called for, do it in the form of an attachment.
- ⇒ You may want to add a list of acronyms or abbreviations used frequently in the proposal (including a description of what each acronym and abbreviation stands for) right after the general information page at the beginning of the Proposal Form, or as an attachment.
- ⇒ It is a good idea to alter the footer in the Proposal Form in order to add some information that identifies your proposal.
- ⇒ If you are adding attachments to your proposal, we suggest that small attachments be included in the same Word file as the proposal, rather than in separate Word files. This will help to ensure that when your proposal is printed out for the TRP, the small attachments will be included and the reviewers will not have to search for them.
- ⇒ All expenditures should be shown in US dollars.

ONLINE AND CD-ROM VERSIONS

1. It is possible to add an attachment only in contexts in which the Proposal Form requires one, rather than when the applicant chooses to provide one.

2. It is not possible to alter the footer.

Guidance on Specific Sections of the Proposal Form

Below, we provide guidance on a step-by-step basis, except for some steps that we feel are self-explanatory. In some instances, steps have been grouped together. The structure of this section follows the order of the Proposal Form – i.e., sections, steps and items (sub-steps). We have used the same headings as are used on the Proposal Form, except that some of the headings have been abbreviated for space reasons. For some of the steps, we have included for illustrative purposes extracts from proposals that were approved in the third round of funding. These are not verbatim extracts; they have been adapted or condensed. You should not assume that the level of detail provided in these extracts is necessarily appropriate for your proposal. Also, these extracts illustrate approaches taken by specific applicants; other approaches are possible and may be more suitable to your particular circumstances.

General Information Page

At the beginning of the Proposal Form, there is a page on which you should specify the Proposal Title, the Country or Countries, the Type of Application, and the Proposal Components. In certain cases, such as Regional proposals, you can specify more than one country. See Section II.B of the Guidelines for Proposals for more information about answering the questions on this page.

ONLINE AND CD-ROM VERSIONS

1. In the Online version, if you specify that this is a Non-CCM application from a country which in fact has a CCM, you are warned of this and are provided with some contact details for the CCM.
2. In the CD-ROM version, you cannot change anything on this page once you have first saved it. It is particularly unfortunate that you cannot change the Proposal Title, because in practice this is often not finalized until near the end of the proposal-writing process.
3. In the Online version, you cannot change the "Type of Application" once you have saved it. Even choosing the "Reset All" option to empty out all your data does not in fact empty out the "Type of Application." Thus, if you make a mistake on this point, there appears to be nothing you can do to reverse it.
4. In the Online version, if you click on the "Reset All" button (which will empty out all your data), the system rightly asks you twice if you are sure. But with the CD-ROM version, if you click on the "Reset Proposal" button, there is no request for confirmation at all. Thus, a single mistaken click can lead to the loss of all your data.

Section 1: Eligibility

The Global Fund requires that you indicate whether your country is "low income," "lower-middle income," "upper-middle income," or "high income," as classified by the World Bank. Proposals from countries classified as low income are fully eligible for funding from the Global Fund. Proposals from countries classified as lower-middle income or upper-middle income have to meet certain requirements. Proposals from countries classified as high income are not eligible for funding. For more information, see [Chapter 1, "Are you an eligible applicant"](#) in this Guide, and also Section II.A of the Guidelines for Proposals. For the lists of eligible countries, again see [Chapter 1, "Are you an eligible applicant"](#), and also Annex A of the Guidelines for Proposals.

ONLINE AND CD-ROM VERSIONS

Once you specify your country, the Proposal Form automatically indicates whether your country is low income, lower-middle income, upper-middle income, or high income.

Step 1.1 – Lower-Middle Income and Upper-Middle Income Country

This step is where authors of proposals from lower-middle income and upper-middle income countries provide information on the additional requirements that must be met. For proposals covering multiple countries, the information required in this step must be provided for each country.

Item 1.1.1 – Co-financing and greater reliance on domestic resources

The Global Fund requires that proposals from lower-middle income and upper-middle income countries demonstrate that the government is prepared to invest domestic resources to ensure the sustainability of the activities once the project itself comes to an end. In Round 3, the TRP was particularly impressed with proposals that showed governments funding a progressively greater share of the activities as the project matured. See [Strength #6](#) in Chapter 2 of this Guide for examples of proposals that provided evidence of sustainability.

Applicants are required to provide information on the amount of co-financing in Table 1.1. Figures are required for each of the five years of the proposal; the figures for Year 1 and Year 2 need to be firm, while the figures for the three subsequent years can be estimates. The first three rows of the table should be used to provide information on domestic resources that will be used to co-finance the

project. Figures have to be provided for domestic resources from (a) government sources (enter this in Row 2) and (b) other sources (enter this in Row 3).

In Row 4, the Global Fund requires that you indicate the total amounts being requested from the Fund (for this proposal). The figures in this row must match the totals in Table 5.2a in Section 5 of the Proposal Form.

Row 5 should be used to show the domestic co-financing percentage. The required percentage is arrived at by dividing the total domestic resources that will be used to co-finance the project (Row 1) by the total costs of the project (Row 1 + Row 4).

Row 6 should be used to provide the ratio of domestic resources (Row 1) to Global Fund financing (Row 4). We suggest that this be shown to the second decimal point. The first part of the ratio is calculated by dividing domestic resources (Row 1) by Global Fund financing (Row 4). The second part of the ratio should remain constant (at "1"). To take a hypothetical example, if domestic resources for Year 1 are \$2.16 million and Global Fund financing for Year 1 is \$4.0 million, the ratio would be shown as "0.54 :1."

ONLINE AND CD-ROM VERSIONS

1. All totals are automatically entered wherever they are required. As well, all percentages and ratios derived from dollar amounts that you enter will automatically be calculated as you enter the figures.
2. If you represent a lower-middle or upper-middle country and you do not specify sufficient co-financing, or if you do not demonstrate an increasing reliance on domestic resources over time, additional questions appear asking you for explanations.

Item 1.1.2 – Poor or Vulnerable Populations

The Global Fund requires that proposals from lower-middle income or upper-middle income countries focus on poor or vulnerable populations. You need to describe here (a) the poor or vulnerable populations that your proposal is targeting; (b) how these populations were identified; and (c) how they will be involved in planning and implementing the project. In its review of Round 3 applications, the TRP commented favourably on proposals that included a strong focus on vulnerable communities. It commented unfavourably on proposals in which vulnerable communities were not addressed at all or were addressed inadequately, or in which there was insufficient information on how vulnerable groups would be addressed. See [Weakness #11](#) in Chapter 2 of this Guide for examples of the TRP's findings.

Section 2: Executive Summary

The Proposal Form recommends that the Executive Summary be filled out last, because it summarizes the information in the rest of the proposal. Our own experience, however, has been that it's a good idea to produce a draft of the Executive Summary about half-way through the proposal-writing process. There is a lot of value in being forced to summarise the project in about two pages, even though the summary may have to go through several drafts before it is satisfactory. That exercise leads to everyone having a clearer sense of the "story" that the proposal has to tell. Once that has been achieved, you can go back to the rest of the proposal and ensure that it is consistent with that story.

Step 2.1 – Component and Funding Summary

In Table 2.1, the Global Fund requires that you indicate the amounts being requested from the Fund for each component and for each year of the proposal. The amounts shown for each year should correspond to the total amounts shown in Table 5.2a in Section 5 of the Proposal Form

ONLINE AND CD-ROM VERSIONS

1. Table 2.1 will be automatically generated using figures from Table 5.2a.
2. If you have already indicated that your proposal covers just one component, you may not see Step 2.2 – Proposal Evaluation.

Step 2.2 – Proposal Evaluation

You are asked to indicate whether you want the proposal to be evaluated as a whole or as separate components. If, as we suggest above, you submit a separate proposal for each component, then this step becomes irrelevant.

Step 2.3 – Proposal Summary

The Global Fund requires that you provide a 4-6 paragraph narrative summary of the proposal, including quantitative information where possible.

You need to include a description of the goals, objectives and key service delivery areas (for each component), including expected results and the timeframes for achieving these results. You also need to indicate who the beneficiaries are and how they will benefit from the proposal. This information should be taken from Step 4.4 (Programme Strategy) in Section 4 of the Proposal Form. The challenge will be to describe it succinctly, since the entire narrative summary should only take 4-6 paragraphs.

In previous rounds, many applicants wrote an Executive Summary that was far longer than the length requested by the Fund. Winston Churchill once wrote a letter in which he said, "I apologize for writing to you at length, but I don't have time to write briefly." In the Executive Summary, we urge you to take the time to capture the highlights of your proposal in a brief way. Not only does this help the hard-working members of the TRP, but it also provides you with a summary that will be enormously helpful to you in the future.

If there are several components in your proposal, you need to describe any synergies expected from the combination of different components. There is additional guidance concerning this requirement on the Proposal Form. If you are submitting more than one proposal in Round 4, we suggest that you describe the synergies between or among the proposals.

Finally, you are required to indicate whether the proposal is designed to scale up existing efforts or to initiate new activities; to explain how lessons learned and best practices have been reflected in the proposal; and to describe innovative aspects of the proposal. Much of this information can be taken from Step 4.3 (National context for this Component) in Section 4.0 of the Proposal Form.

Although it is not specifically requested on the Proposal Form, we suggest that you also explain how this proposal relates to other projects from your country funded by the Global Fund in previous rounds. This is particularly important if this proposal scales up the previous projects.

Section 3: Type of Application

There are five steps in this section, one for each of the five different types of application. At the start of this section, you are once again asked to indicate the type of proposal being submitted (this was covered earlier in this chapter, under "General Information Page") and you are directed to the step that relates to your type of proposal.

ONLINE AND CD-ROM VERSIONS

You will be taken automatically to the step that relates to your type of proposal.

Step 3.1 – National CCM Section

Fill out this step if your proposal is being submitted by a National CCM.

Item 3.1.1 – Has the National CCM applied previously to the Global Fund?

Self-explanatory.

Item 3.1.2 – Has the National CCM composition changed since the last submission?

Only answer this if you answered "Yes" to 3.1.1.

Item 3.1.3 – Did the National CCM build upon an existing body or is it a new mechanism?

Only answer this if you answered "No" to 3.1.1.

Item 3.1.4 – Describe how the National CCM operates

Item 3.1.5 – Do you have plans to enhance the role and function of the National CCM?

The Proposal Form provides ample guidance for these two items.

Item 3.1.6 – National CCM Membership Section

In Table 3.1.6A, the Global Fund requires that you provide the names of the Chairperson and Vice Chairperson of the CCM, along with contact information for both.

The Fund also requires that you complete Table 3.1.6B for each member of the CCM. The meaning of the table is fairly self-explanatory. Under "Type", you are expected to choose one of the types listed. Similarly, under "Main role in National CCM and Proposal Development," you are expected to choose one of the roles listed (or choose "other" and describe a role which is not listed). If you're not sure what to specify, put "Review", because every CCM member must at least review proposals before they are approved by the CCM. Note that the "Title" field refers to their job function (as in "Executive Director"), not to the first part of their name (as in "Mr." or "Professor").

ONLINE AND CD-ROM VERSIONS

The use of Table 3.1.6B is not intuitive. Ignore the field named "Members details." Instead, for the first CCM member, enter the information for each field from "Agency/Organization" to "Main role."

Under "Type" and "Main Role," you must choose from drop-down lists.

When you have entered all the fields for a CCM member, click on "Save member". The details for that person will then appear as one line in the table above the data-entry fields. Then click on "Add new member" to start the data-entry for the next CCM member.

If you want to edit or delete a CCM member from the list, click on their name in the list. Then either edit their entry in the data-entry fields, or click on "Delete member".

Warning: In the Online and CD-ROM versions, if you leave any field blank, you will not be able to save any data for that person. Thus, if you don't know the email address of a CCM member (or if they don't have one), you will not be able to add that CCM member.

Item 3.1.7 – National CCM Endorsement of Proposal

The Global Fund requires that some or all members of the CCM should sign that they agree with the following statement:

"We the undersigned hereby certify that we have participated in the Country Coordinating Mechanism process and have had sufficient opportunities to influence the process and this application. We have reviewed the final proposal and support it. We further pledge to continue our involvement in the Country Coordinating Mechanism if the proposal is approved and during its implementation"

Warning: Unfortunately, ambiguous instructions are provided here. The Guidelines for Proposals say "Proposals should be endorsed [i.e. signed] by the full CCM membership." But the Form itself says "CCM members who have not been involved should not sign the proposal." We recommend that all members of the CCM sign the proposal, but that if any member cannot agree with the above

statement, he/she provide a brief explanation next to his/her signature. This could range from "I did not participate because I was out of the country" to "I cannot endorse the proposal because I was provided with no opportunity to be involved and I do not agree with some of the key features."

You need to use Table 3.1.8 to list all of the CCM members and provide space for their signatures. You will need to add more rows to the table to list everyone. (This table should have been numbered 3.1.7 because it is part of Item 3.1.7.)

ONLINE AND CD-ROM VERSIONS

Table 3.1.7 is automatically created listing all of the specified CCM members, with a place for them to place their signatures.

Step 3.2 – Sub-National CCM Section

Fill out this step if your proposal is being submitted by a Sub-National CCM.

Item 3.2.1 – Explain why a sub-national CCM mechanism has been chosen

Item 3.2.2 – Describe how this proposal is consistent with national strategies and/or the National CCM plans

Self-explanatory.

Item 3.2.3 – Sub-National CCM Membership Section

Fill in Tables 3.2.3A and 3.2.3B using the comments provided under 3.1.6, above.

Item 3.2.4 – Sub-National CCM Endorsement of Proposal

The Global Fund requires that some or all members of the Sub-National CCM sign that they agree with the following statement:

"We the undersigned hereby certify that we have participated in the Sub-National Country Coordinating Mechanism process and have had sufficient opportunities to influence the process and this application. We have reviewed the final proposal and support it. We further pledge to continue our involvement in the [Sub-National] Country Coordinating Mechanism if the proposal is approved and during its implementation"

ONLINE AND CD-ROM VERSIONS

1. Table 3.2.3B mistakenly refers to the "Main Role in National CCM." This should read "Main Role in Sub-National CCM."
2. With respect to Item 3.2.4, you will not be able to add "Sub-National" to the statement on the Online and CD-ROM versions. This means that the members of the Sub-National CCM will be signing a document incorrectly saying that they will continue their involvement in the (National) CCM. This will cause confusion.

The second instance of the words "Sub-National," shown above in square brackets, is mistakenly omitted on the Proposal Form. We suggest that you add these two words to the statement before completing your application.,

Warning: Unfortunately, ambiguous instructions are provided here. The Guidelines for Proposals imply that proposals should be signed by the full Sub-National CCM membership. But the Form itself says "Sub-National CCM members who have not been involved should not sign the proposal." We recommend that all members of the Sub-National CCM sign the proposal, but that if any member cannot agree with the above statement, he/she provides a brief explanation next to his/her signature. This could range from "I did not participate because I was out of the country" to "I cannot endorse the proposal because I was provided with no opportunity to be involved and I do not agree with some of the key features."

You will need to use Table 3.2.4 to list all of the Sub-National CCM members and provide space for their signatures. You will need to add more rows to the table to list everyone.

Warning: The Proposal Form and the Guidelines for Proposals refer to the need for a letter of agreement from the national CCM. But it is not clear whether this is a letter agreeing to the existence of the Sub-National CCM, or a letter agreeing with the contents of the proposal created by the Sub-National CCM. We are of the opinion that if a Sub-National CCM submits a proposal which is consistent with national-level policies and strategies and with any applicable sub-national policies, then the Sub-National CCM could take the position that it is not required by the Global Fund to show the proposal to the National CCM or to obtain the National CCM's approval of the contents of the proposal. Instead, one or other of the following two steps could be undertaken:

- (a) a letter could be included, as an annex, in which the Chair or Vice-Chair of the National CCM states his/her agreement that the Sub-National CCM has the right exist and to submit a proposal; OR
- (b) the Sub-National CCM could show that it was set up in a country where the government devolves considerable decision-making power to states, provinces or administrative divisions.

ONLINE AND CD-ROM VERSIONS

Table 3.2.4 is automatically created listing all of the specified Sub-National CCM members, with a place for them to place their signatures.

Step 3.3 – Regional Coordinating Mechanism Section (includes Small Island States)

Fill out this step if your proposal is being submitted by a Regional Coordinating Mechanism (Regional CM).

Item 3.3.1 – Explain why a Regional CM mechanism has been chosen

Item 3.3.2 – Describe how this proposal is consistent with national strategies and/or the Regional CM plans

Self-explanatory.

Item 3.3.3 – Regional CM Membership Section

Fill in Tables 3.3.3A and 3.3.3B using the comments provided under 3.1.6, above.

Item 3.3.4 – Regional CM Endorsement of Proposal

The Proposal Form refers sometimes to "Regional CCM," and other times to "Regional CM." The latter is the correct term. Note as well that the instructions at the top of 3.3.4 mistakenly say "CCM members must sign this page..." This should read "Regional CM members must sign this page..."

ONLINE AND CD-ROM VERSIONS

Table 3.3.3B mistakenly refers to the "Main Role in National CCM." This should read "Main Role in Regional CM."

The Global Fund requires that some or all members of the Regional CM should sign that they agree with the following statement:

"We the undersigned hereby certify that we have participated in the Regional ~~Country~~ Coordinating Mechanism process and have had sufficient opportunities to influence the process and this application. We have reviewed the final proposal and support it. We further pledge to continue our involvement in the [Regional] ~~Country~~ Coordinating Mechanism if the proposal is approved and during its implementation"

On the Proposal Form, the statement contains errors; it includes the words that we have struck out, and omits the word we have added in square brackets. We suggest that you make the necessary changes to the text before completing your application.

**ONLINE AND CD-ROM
VERSIONS**

You will not be able to make any changes to the statement that Regional CM members have to sign.

Warning: Unfortunately, ambiguous instructions are provided here. The Guidelines for Proposals imply that proposals should be signed by the full Regional CM membership. But the Form itself says "Regional [C]CM members who have not been involved should not sign the proposal." We recommend that all members of the Regional CM sign the proposal, but that if any member cannot agree with the above statement, he/she provides a brief explanation next to his/her signature. This could range from "I did not participate because I was out of the country" to "I cannot endorse the proposal because I was provided with no opportunity to be involved and I do not agree with some of the key features."

You will need to use Table 3.3.4 to list all of the Regional CM members and provide space for their signatures. You will need to add more rows to the table to list everyone.

Warning: The Proposal Form says that a proposal from a Regional CM must include "a letter of agreement from the national CCM". (This should read "from each national CCM.") This leaves open the possibility that a letter from the Chair or Vice-Chair of each CCM would suffice. However, the Guidelines for Proposals state that "The full CCM membership of every country involved should endorse the proposal and reflect the endorsement in the minutes of the appropriate CCM meeting. Proposals should also include a description by the Chair of each CCM involved of how the regional proposal complements existing initiatives in each country." Thus, the Guidelines document – but not the Proposal Form – appears to require signatures approving the proposal from each member of each CCM. We believe that this requirement is excessive. The time taken to obtain signatures from all members of the Regional CM, and from all members of all CCMs within the region, plus minutes from all CCMs, could be longer than the time taken to write the proposal in the first place. We suggest that Regional CMs follow the guidance on the Proposal Form, and interpret this to mean that endorsement from the national CCMs can come in the form of a letter from the Chair or Vice-Chair of each CCM, and need not come from the full membership. However, we suggest that, in addition, applicants follow the guidance in the Guidelines for Proposals with respect to the need for a letter from the Chair or Vice Chair to indicate how the regional proposal complements existing initiatives in each country.

Step 3.4 – Regional Organizations Section

Fill out this step if your proposal is being submitted by a Regional Organization.

In Table 3.4, you need to indicate the name of the Regional Organization.

Item 3.4.1 – Contact information

In Table 3.4.1, the Global Fund requires that you provide the names of the primary and secondary contacts of the Regional Organization, along with contact information for both.

Item 3.4.2 – Rationale

The Global Fund requires that the authors of regional proposals explain how their project will add to what is already happening at the national level in the countries covered by the proposal. In Round 3, reviewers were critical of regional proposals that did not provide a description of this "value added" dimension.

Item 3.4.3 – CCM endorsement details

Each proposal submitted by a Regional Organization must receive the agreement of the full CCMs of each country covered by the proposal. We interpret this to mean that agreement must be provided in the form of CCM minutes, not in the form of a document signed by every member of every relevant CCM.

The Global Fund requires that the CCMs be listed in Table 3.4.2, and that the minutes of the meetings of all of the CCMs – the meetings in which the proposal was agreed to – be annexed to the proposal. Each annex should be numbered, and the numbers should be shown in Table 3.4.2. (This table should have been numbered 3.4.3 since it is included in Item 3.4.3.) The Proposal Form explains that if no CCM exists in a country included in the proposal, evidence of support for the proposal should be provided from relevant national authorities. The term “relevant national authorities” is not defined, so use your judgement.

Step 3.5 – Non-CCM Section

Fill out this step if your proposal is being submitted by an organization other than a CCM (or other than a regional organization). In Table 3.5, you need to indicate the name of the applicant.

Item 3.5.1 – Contact information

In Table 3.4.1, the Global Fund requires that you provide the names of the primary and secondary contacts of the applicant, along with contact information for both.

Item 3.5.2 – Indicate the type of your organization

Self-explanatory.

Item 3.5.3 – Rationale for applying outside an existing CCM

If there is an existing CCM in your country, the Global Fund requires that you provide a rationale explaining why you are applying directly instead of going through the CCM. Note that the Guidelines for Proposals specify in more detail than the Proposal Form one very important situation in which a non-CCM application can be submitted in a country that has a CCM. The Guidelines state that "If a non-CCM proposal was provided to a CCM for its consideration, but the CCM either did not review it in a timely fashion or refused to endorse it, the steps taken to obtain CCM approval should be described. Additionally, arguments in support of its endorsement and documentary evidence of the attempts to obtain CCM approval should be provided. Any non-CCM proposal must demonstrate clearly why it could not be considered under the CCM process and provide documentation of these reasons."

There was an important precedent established in Round 3 when a Thai NGO had its proposal approved despite Thailand having an active CCM. The TRP commented, "In the context of a recent military/police crack down on drug trafficking and on individual drug users, a coalition of PWA and IDU NGOs submitted this proposal outside of the CCM process, after determining that the full CCM would not support a prevention proposal targeted towards IDUs, despite support from individual members of CCM. The proposal has very strong backing from national and international NGOs and academic institutions working on HIV/AIDS in Thailand. ... A strong rationale for submission outside of CCM is provided."

Item 3.5.4 – Non-CCM proposals from countries in which no CCM exists

You need to fill out this step if there is no CCM in your country. The Proposal Form provides clear guidance.

Item 3.5.5 – All non-CCMs proposals should include as Annexes additional documentation describing the organization

The Proposal Form provides a list of the types of documentation the Global Fund is looking for. Note that these are just examples. You may provide other types of documentation.

Section 4: Components Section

At the beginning of this section on the Proposal Form, the Global Fund reminds you that a separate Section 4 needs to be completed for each component of your proposal. If, as we suggest earlier in

this chapter, you submit separate proposals for each component, then you will only need to complete one Section 4 for each proposal.

Step 4.1 – Identify the component addressed in this section

Self-explanatory.

Item 4.1.1 – Indicate the estimated start time and duration of the component

The Global Fund requires that you indicate in Table 4.1.1 the start date and end date of your project. You need to indicate both the month and the year for each. The Global Fund points out that its Board will consider recommended proposals at its meeting of 28-30 June 2004, and that funds are usually not released until at least two months after Board approval. In our view, in most cases it is unlikely that funds will be released before November or December 2004, because of the time it takes to obtain answers to the TRP's follow-up questions, to perform the assessments of the proposed Principal Recipient (PR), and to negotiate a grant agreement with the PR. You should take this into consideration when you set a start date for your project.

Step 4.2 – Contact persons for questions regarding this component

Self-explanatory.

Step 4.3 – National context for this Component

In this step, the Global Fund is looking for some information on the situation in your country with respect to the disease(s) being addressed in this component. This information is important because it helps the reviewers understand what the context is, and what the problems are that the proposal is attempting to address. Generally speaking, the information that you provide in Step 4.3 constitutes what the TRP reviewers refer to as a “situational analysis.” In its review of Round 3 proposals, the TRP was critical of proposals that contained no situational analysis or a weak situational analysis; or that failed to provide baseline epidemiological information. See [Weakness #13](#) in Chapter 2 of this Guide for more details. On the other hand, the TRP praised proposals that contained strong situational analyses and baseline data. See [Strength #12](#) in Chapter 2 of this Guide for examples of countries whose proposals were praised.

Item 4.3.1 – Disease burden

This item is fairly self-explanatory. We suggest that wherever possible you use epi fact sheets or national data to describe the disease burden.

Item 4.3.2 – Describe the political commitment in responding to the disease

Provide whatever evidence you can of your government's commitment to respond to the disease(s). Strong political commitment is a significant asset to any proposal. Governments can demonstrate political commitment in a number of ways, including, for example:

- ⇒ by providing funds for the fight against the disease(s) being addressed by the proposal;
- ⇒ by adopting progressive policies and laws; and
- ⇒ by participating actively on the CCMs.

See [Strength #3](#) in Chapter 2 of this Guide for specific examples of political commitment identified by the TRP in its review of Round 3 proposals.

In this step, the Global Fund would also like you describe any internationally agreed-to targets that apply to your country. There is an example on the Proposal Form of a regional commitment that is relevant to Africa. If your proposal is targeting HIV/AIDS, we suggest that you also cite relevant targets from the UNGASS Declaration of Commitment on HIV/AIDS.

Item 4.3.3 – List the national disease control strategies consulted in the preparation of the proposal, and describe how lessons learned from the implementation of these strategies have been incorporated in this proposal

Item 4.3.4 – List any broader development initiatives (e.g., Poverty Reduction Strategy Papers, Highly-Indebted Poor Countries initiative) ongoing in your country and describe the links between this proposal and these initiatives

Item 4.3.5 – Describe how the proposal will contribute to broader efforts to reach the Millennium Development Goals

These items are largely self-explanatory. The Proposal Form provides a link to the website where you can find a copy of the Millennium Development Goals.

Item 4.3.6 – Describe the links to international initiatives

In this poorly-worded question, the Global Fund appears to be asking you to describe the links between past, present or future efforts to fight the disease(s) in your country and relevant international initiatives. The Proposal Form provides examples of such initiatives.

One of the example listed is the World Health Organization/UNAIDS “3-by-5” initiative. If your proposal contains an HIV/AIDS treatment component, we suggest that you indicate that this is the result of the fact that your country is committed to reaching the 3-by-5 goals. If your country’s previous proposals to the Global Fund did not contain a significant treatment component, you should stress that Round 4 support is critical to expand access to antiretroviral therapies.

Item 4.3.7 – Is there a sector-wide approach (SWAp) or other fund pooling mechanism in place in the health sector?

If you answer “yes” to this question, the Proposal Form explains what additional information is required.

Note: A SWAp is a process in which funding – whether internal or from donors – for a particular sector supports a single policy and expenditure programme, under government leadership, using common approaches across the sector. (This information was taken from the website of the U.K. Department for International Development at www.keysheets.org/red_7_swaps_rev.pdf.)

Item 4.3.8 – Is there a World Bank Multi-Country HIV/AIDS Program?

This item is for HIV/AIDS proposals only. If you indicate that there is a World Bank Multi-Country HIV/AIDS Programme operating in your country, you need to provide additional information (as described on the Proposal Form). This is important because it helps to demonstrate the complementarity (and possibly synergy) between the World Bank programme and this proposal.

Item 4.3.9 – Indicate names and types of key agencies providing technical assistance to the national response

If there are technical agencies providing significant technical assistance to the national response to the disease(s) in your country, you are required in Table 4.3.9 to name and describe these agencies (first two columns) as well as the nature of the assistance they are providing (third column).

Item 4.3.10 – Earmarked financial contributions to the national response to this disease

The Global Fund requires that you indicate in Table 4.3.10 the total financial contributions already earmarked for the national response to the disease(s). You need to show the domestic contributions (Row 1) and the external contributions (Row 2) as well as the totals from both sources combined (Row 3). You are required to show figures for eight years (2001 through 2008). You should show actual expenditures for the first three years (2001-2003) and expenses planned for the next five years (2004 to 2008). You should not include in Table 4.3.10 any of the funding that you are requesting from the Global Fund in this proposal.

Item 4.3.11 – Total resource needs

The Global Fund requires that you indicate in Table 4.3.11 the total resources needed to combat the disease(s) in your country as well as what portion of the total resources needed is unmet by funding already earmarked. In this table, you need to show figures for five years (2004-2008). Row 1 (“Total resources available”) should contain figures identical to those in Row 3 of Table 4.3.10. In Row 2 (“Total need”), you should indicate how much money is needed to combat the disease(s). The figures in Row 2 should include funding that you are requesting from the Global Fund in this proposal. (The figures in Row 2 may, of course, be higher than what you are seeking in this proposal.) The figures for Row 3 (“Unmet need”) are derived by subtracting the figures in Row 1 from the figures in Row 2.

ONLINE AND CD-ROM VERSIONS

1. In Table 4.3.10, Row 3 is automatically computed based on what you enter in the other two rows.
2. In Table 4.3.11, Rows 1 and 3 are automatically computed.

The Global Fund also requires that you explain how you arrived at the estimate of total needs. Some guidance on this point is provided on the Proposal Form.

Item 4.3.12 – Describe plans to ensure that any Global Fund resources received would be additional to the existing planned resources

As the Proposal Form explains, the Global Fund wants to make sure that any funds it provides will be additional to funds already earmarked for the disease(s) and will not replace such funds. You are required to explain here how you will ensure that the funds from the Global Fund will indeed be additional.

Item 4.3.13 – Analysis of gaps in coverage of key service delivery areas

The Global Funds wants some information on gaps in the current response to the disease(s) in your country. In 4.3.13, the Global Fund requires that you list all key delivery service areas for this component that are included in national strategic plans to address the disease(s) in your country, BUT that are either (a) not currently available or (b) not available on a “sufficiently wide scale.” Unfortunately, neither the Proposal Form nor the Guidelines for Proposals defines what is meant by “sufficiently wide scale.” We suggest that you list any service delivery area where you feel that there are significant gaps in coverage.

Item 4.3.14 – Does this application focus primarily on scaling up existing interventions, introducing new interventions, or both?

If your answer to this question is “scaling up,” you also need to answer four additional questions (4.3.14.1 through 4.3.14.4). If your answer is “new,” you need to answer four additional (but different) questions (4.3.14.5 through 4.3.14.8). If your answer is “both,” you need to answer all eight additional questions.

The four “scaling up” questions:

In 4.3.14.1, you need to explain how the interventions in your proposal build on existing programs.

In 4.3.14.2, you need to explain how you decided which interventions (from among the existing interventions) would be included in your proposal.

In 4.3.14.3, the question as written makes no sense. It says “Indicate the major barriers to scaling up the interventions that have been identified as proven and effective have not previously been scaled up.” Presumably the word “but” or “and” should be have been added before “have not previously been scaled up.”

In 4.3.14.4, you need to describe innovative aspects (if there are any) to how you plan to scale up the interventions.

The four “new” questions:

In 4.3.14.5, you need to describe how the new interventions in your proposal complement and build on existing programmes. In Round 3, the TRP identified a number of proposals that did not adequately explain how the proposed objectives and activities would materially add to or complement existing programmes. See [Weakness #12](#) in Chapter 2 of this Guide for more details. On the other hand, the TRP praised proposals that would scale up already existing programmes; that would be a good fit with, be integrated with, or link with existing programmes; and that would complement programmes funded by earlier Global Fund grants. Here are some brief extracts adapted from Round 3 proposals to give you a sense of how this step might be described:

The proposed project will strengthen and fill programmatic gaps in the implementation of the national programme for comprehensive HIV/AIDS prevention and control...

In the counties covered by this proposal, the project will strengthen existing health services...

Funding from the central and local governments will support mobilization of government agencies, human resources development, communication, surveillance, and awareness raising. Government funding will also provide 100% of OI management costs. The government will also provide generic domestically-manufactured ARV drugs to 100% of patients in the Global Fund project...

The project will strengthen the role of health systems in HIV/AIDS care, including referral systems and other linkages to non HIV-specific services. The project will provide the capacity development, management and supervision supports necessary to develop and sustain this role, and to increase the responsiveness of rural health services. The use of HIV/AIDS as an entry point to rural health systems development will have additional benefits with regard to their provision of other non-HIV services...

The project will strengthen surveillance of co-infection for HIV and TB and referral to treatment for TB...

In 4.3.14.6, you need to describe how the new interventions were identified.

In 4.3.14.7, you need to explain why these new interventions were not previously widely used.

In 4.3.14.8, you need to describe innovative aspects (if there are any) to how you plan to implement the new interventions.

Item 4.3.15 – Does this application complement earlier grants from The Global Fund?

If you answer “yes” to this question, the Global Fund requires that you explain how this proposal complements earlier grants.

Step 4.4 – Program Strategy

Warning: In the English version of the Word form, a blank step "4.4" has mistakenly been added by the Global Fund. As a result, all step and item numbers that should start with "4.4" through "4.7" have been incremented so that they start with "4.5" through "4.8". You can fix this problem by removing the blank item "4.4." The step and item numbers that follow will revert to 4.4 through 4.7. In what follows, we use the correct numbering.

In many ways, Step 4.4 is the heart of your proposal. It is in this step that you will describe your strategic approach and your workplan – i.e., what you intend to do in the course of your project. This section contains the goals, objectives, services and activities for your project as well as the indicators that you will use to measure success. Section V.B.2 of the Guidelines for Proposals provides important guidance on what the Global Fund is looking for in Section 4. Please read it before starting to fill out this step. Additional guidance is provided on the Proposal Form itself, including some useful explanations of the terms used in the tables in Step 4.4.

In Round 3, problems with the workplan were identified by the TRP in about three out of every five applications. In fact, this was the weakness most often identified. The TRP found objectives and activities that were insufficiently described or unclear; that lacked a clear rationale; or that were inappropriate. It found that in some proposals key objectives or activities were missing. For more information, see [Weakness #1](#) in Chapter 2 of this Guide. On the other side of the ledger, the TRP praised proposals in Round 3 that were clear and well documented, and that contained detailed workplans with clear objectives. See [Strength #1](#) in Chapter 2 of this Guide for examples of countries whose proposals contained solid workplans.

ONLINE AND CD-ROM VERSIONS

In the on-line version, explanations of the terms used in the tables in Step 4.4 is available if you click "Help." But this feature does not appear to be available in the CR-ROM version.

The Proposal Form explains that you need to use Table 4.4 (and the questions that follow Table 4.4) to describe your strategy for this component. In fact, Table 4.4 is divided into three parts (A, B and C) and you will need to use some or all of the parts of the table multiple times. (Note: After we describe what is required for each of the tables in Step 4.4, we provide a recommendation concerning how you might organize the tables in your proposal.)

Warning: The Proposal Form says that you also need to include as an annex "a detailed action plan for the first 12 months, and an indicative action plan for the second year." Section V.B.6 of the Guidelines for Proposals says that "The detailed supporting information should include an action plan and budget for the first year (broken down by quarterly periods) and an indicative plan and budget for the second year..." However, no template is provided for the detailed action plan (even though the Round 3 Proposal Form provided a template) and nowhere is the term "indicative plan" defined.

Table 4.4A

The Global Fund requires that you use Table 4.4A to indicate the goals for this component of your proposal, the indicators that will be used to measure achievement of these goals (impact indicators), and, for each indicator, baseline data and 2-5 years targets.

The Proposal Form explains that the goals should be "broad and overarching" and should "reflect national disease programme goals." The Form provides several examples. Here is another hypothetical example of a goal statement, adapted from a Round 3 proposal:

To reduce the spread of HIV/AIDS, reduce morbidity and mortality, and mitigate the social and economic impact of the epidemic

Your goal statement should be succinct. Enter your goal statement in Table 4.4A where it says "Code 4A."

In Round 3, the Global Fund indicated that there should only be one goal per component. Although that is not a requirement for Round 4, we suggest that your proposal will be much simpler to prepare if you stick with one goal per component. Please note that if you have more than one goal in the same component, you need to prepare a separate Table 4.4A for each goal. (Note: The Online and CD-ROM versions of the Proposal Form state that each component should have a maximum of four goals.)

Next, you need to list the impact indicators. These are national behaviour and disease surveillance indicators that will allow you measure the impact of your proposal. In Annex A of the Proposal Form, the Global Fund has included a list of globally agreed-to indicators for measuring the impact of disease-fighting initiatives. You may select your indicators from the list in Annex A, or you may use other indicators. You can use as many indicators as you like. We suggest that you stick to the indicators in the Global Fund list because we suspect that selecting other indicators may hold up your application (while the new indicators are evaluated and discussed). If you do decide to use other indicators, you should ensure that they are adequately described either in Table 4.4A or in text that you insert after Table 4.4A.

Next, you need to show baseline data, the 2-5 year target for each indicator, and the year in which the target will be reached. Baseline data refers to the latest existing data for that indicator, taken from whatever reliable source you have, possibly the latest surveillance survey. The 2-5 year target refers to the target you want to reach at or toward the end of your proposal. Here are a couple of hypothetical examples to illustrate how this portion of Table 4.4A can be filled out:

- ⇒ If the indicator is "Reduced number of deaths from TB (all forms) per 100,000 population each year," the baseline data might be 870, and 2-5 year target might be 525, to be reached in 2008.
- ⇒ If the indicator is "Reduced percentage of sex workers who are HIV infected," the baseline data might be 6.1%, and the 2-5 year target might be 2.2%, to be reached in 2007.

ONLINE AND CD-ROM VERSIONS

In Table 4.4A, the list of indicators appear as a drop-down menu from which you can select. If you select "other" from the menu list, you need to describe the indicator right in the table.)

Warning: An empty field appears under each option selected from the drop-down list. This empty field should be ignored except, of course, if you choose "Other."

If precise baseline data is not available, you can enter an estimated figure, or you can indicate that this information is to be collected. If you do the latter, then your targets need to be expressed in terms of a percentage decrease from baseline. Here is a hypothetical example:

- ⇒ If the indicator is "Reduced percentage of young people aged 15-24 who are HIV infected," in the baseline column you could indicate "to be collected;" the 2-5 year target might be "reduced by 20% of baseline," to be reached in 2008.

ONLINE AND CD-ROM VERSIONS

1. The Online and CD-ROM versions only permit numbers (not text) to be entered in the "Baseline" and "2-5 year target" fields. This weakness provides a strong argument not only for using the Word version for creating draft versions of the proposal, but also for then submitting the proposal in the Word version rather than attempting to copy-and-paste from the Word version into the Online or CD-ROM version.

2. If you are using the CD-ROM version, when you have finished specifying the goal(s) and the impact indicators in Table 4.4A, do not click on "Next Screen", because that will take you straight to item 4.4.1 and you will miss the crucial Tables 4.4B and 4.4C. Instead, click on the "Go to Objectives" button at the top of Table 4.4A, which will take you to Table 4.4B. And when you are done with Table 4.4B, click in turn on the "Go to Service Areas" button at the top of Table 4.4B, to be taken to Table 4.4C.

Table 4.4B

The Global Fund requires that you use Table 4.4B to list the objectives for this component of your project. The Proposal Form explains that the objectives should “describe the intention of the programs for which funding is sought” and provides a few example of objective statements. If we use the hypothetical goal statement cited above:

To reduce the spread of HIV/AIDS, reduce morbidity and mortality, and mitigate the social and economic impact of the epidemic

one of the objectives under this goal might be:

To increase the number of people with advanced HIV/AIDS who are receiving antiretroviral therapy

A separate Table 4.4B should be prepared for *each* objective.

Once you have entered the goal statement, the objective number (which you assign yourself) and the objective statement, the rest of Table 4.4B consists of a series of six questions that you need to answer regarding each Objective. The questions are self-explanatory. In all cases, your answers need to be expressed in percentages. If any of the six questions are not relevant to the objective you are describing, we suggest that you leave the answer blank.

Below Table 4.4B, you are asked to describe which target groups will benefit significantly from this objective. Since this information also has to be provided for each objective, you may want to incorporate it right into Table 4.4B.

Table 4.4C

The Global Fund requires that you use Table 4.4C to indicate the key services to be delivered, the indicators that will be used to measure coverage for each key service, the main activities planned for each key service, the key indicator that will be used to measure achievement of each activity, and the implementing partner(s) involved in each activity.

A separate Table 4.4C should be prepared for *each* key service to be delivered.

In Table 4.4C, you need to enter two things with respect to each service: (a) the category of service and (b) a description of the service. The category of service should be selected from the list of service delivery areas found in Annex B of the Proposal Form. (Thus, “service delivery area” and “category of service” are one and the same thing.) Then briefly describe the service that will be delivered. The following is an illustration of how you could fill out these two parts of Table 4.4C, using a hypothetical service adapted from a Round 3 HIV/AIDS proposal:

Category: Antiretroviral treatment and monitoring

Description: Expansion of the provision of antiretroviral therapy to people living with advanced HIV/AIDS. At present, ARV therapy is available only through the central hospital to a limited number of patients. Services will be expanded to seven additional sites.

Next, you need to enter the coverage indicator(s) for the service to be delivered. These are indicators that will measure to what extent you have been successful in increasing coverage for this particular

ONLINE AND CD-ROM VERSIONS

1. In the Online version, if you click on "Add more objectives", the new objective does not appear on a new screen, it is added below the existing objectives. But there is just one "Delete" button, so if you use that button it is not clear which of the several objectives on the screen will be deleted.

2. In Table 4.4B, there is a checkbox to the left of each objective name. It is not clear what this refers to.

3. In Table 4.4C, you need to select the category of service from the drop down list provided.

service. You can show just one indicator or several indicators. You can choose from among the indicators listed in the drop-down list (and in Annex B), and/or you can use indicators that are already being used in your country for this service area. Using the hypothetical ARV service we cited above, the following coverage indicator from Annex B might be selected:

Number of people with advanced HIV infection receiving antiretroviral combination therapy

Next, you need to enter baseline and target figures for each coverage indicator. Referring again to our hypothetical ARV service, the baseline figure would be the number of people currently receiving ARV therapy, and the target figures would be the number of people you expect will be receiving ARV therapy at the end of each of the five years of the project. The figures might look something like this:

Baseline	Year 1 target	Year 2 target	Year 3 target	Year 4 target	Year 5 target
200	550	1,500	3,000	4,500	6,000

If you are describing an entirely new service, you may not have a baseline figure; in that case enter "0" in the Baseline column.

Remember, you need to show baseline and target figures for each coverage indicator.

Next, you need to enter the main activities planned for each service to be delivered. These should be high-level activities that will be implemented in order to deliver the service in question. Some examples of main activity statements are given in Section V.B.2 of the Guidelines for Proposals. Here are some additional examples; these are related to our hypothetical ARV service:

Main activities:

1. Recruit and train nursing and laboratory staff.
2. Improve and expand laboratory services for the diagnosis and monitoring of HIV/AIDS.
3. Review and revise national guidelines for ARV treatment.

Enter the main activities in Table 4.4C where it says "Code 4I." For each main activity, you need to enter (a) the key indicator for tracking progress towards achieving the activity; and (b) the partners involved in implementing the activity.

Warning: The Proposal Form does not describe what the indicators for the main activities should look like, and the Guidelines for Proposals are not very helpful in this regard.

Note concerning the organization of tables in Step 4.4

There are several ways in which you might organize the tables in Step 4.4. We recommend that the tables be shown in the following sequence:

- Table 4.4A
- Table 4.4B for Objective No. 1
- A separate Table 4.4C for *each* service under Objective No. 1
- Table 4.4B for Objective No. 2
- A separate table 4.4C for *each* service under Objective No. 2
- and so on, until you have completed all of the objectives.

ONLINE AND CD-ROM VERSIONS

The sequencing of the tables is pre-determined. You may have to toggle back and forth a bit in order to enter all of the information.

The above sequence assumes that there is just one goal per component of your proposal. If there is more than one goal, simply repeat the sequence for each goal.

Additional Items

Step 4.4 continues with a series of additional information requirements as outlined in Items 4.4.1 through 4.4.12. You only have to provide information for these requirements once (i.e., they apply to the entire component, not to individual objectives, services or activities).

Item 4.4.1 – Describe the quality and type of the training to be carried out

You need to provide information here if any of the activities that you listed in Table(s) 4.4C involve training. The Proposal Form provides some guidance. If you have included training activities under several of the objectives, we suggest that you indicate that the training will be integrated into an overall human resources plan.

Item 4.4.2 – Describe the broad approach for human resources development, including how adequate human resource capacity will be developed to support program scale up

In 4.4.2, the Global Fund is looking for information on your strategy for human resource development, including how your project will assist in strengthening the capacity of the human resources in your country responding to the disease.¹ You may want to start this section by briefly describing the limitations or inadequacy of current human resources. Then, we suggest, you should indicate how your project will address the problem. The following extract adapted from a Round 3 proposal illustrates how one country addressed this issue:

Developing human capacity will be a key element of project implementation at all levels. An assessment will be undertaken of gaps in local capacity to undertake components of the program. The project will identify appropriate sources of technical support to develop capacity. A range of capacity development activities will be developed, including training courses and professional attachments. Methodology for capacity building will be participatory and will involve “training of trainers.” New technologies, such as videoconferencing, will also be used for training and follow up. The CCM will be approached for assistance in providing management or technical teams, using international technical assistance and expertise where appropriate. International experts will be matched with a local counterpart to help with knowledge and skill transference.

Item 4.4.3 – Describe the key risks and assumptions made in preparing this proposal

If your proposal is based on certain assumptions, you need to state them here. Examples could include continued funding for existing programs or funding for another project that needs to be funded before your project can proceed. You also need to identify potential risks to the success of your project. An example of a potential risk is the emergence of antiretroviral resistance. You may also want to explain in this item how your project plans to try to control the risks.

Item 4.4.4 – Describe gender inequities regarding access to the services to be delivered

Item 4.4.5 – Describe how this proposal will contribute to minimizing these gender inequities

In 4.4.4, the Global Fund is asking you to describe gender inequities in your country that are negatively affecting access to the services to be delivered. In 4.4.5, the Global Fund is looking for information on how your project will address these gender inequities. The following extracts adapted from several Round 3 proposals illustrate some of the methods that countries said they would use to address this issue:

The proposal will try to promote gender equality issues by putting emphasis on equal rights for prevention and cure, by actively involving women in health education and awareness activities and by promoting gender equality in employment opportunities...

¹ Many applicants do not realize that it is perfectly OK to use Global Fund money to meet human resource needs – whether to hire new staff, domestic or international, or to pay for the costs of existing staff who will be involved in implementing the project.

Differences between men and women in the ability to negotiate safer sexual behaviour will be considered and prevention campaigns will include development of condom negotiation skills for women...

Gender and sexuality will be crosscutting theme in the orientation and training activities in this project...

The project will include empowerment workshops for young people, commercial sex workers and women specifically. The workshops will include an emphasis on lessening the constraints on women's access to information and education, economic resources and social support, services and technology.

Item 4.4.6 – Describe the populations that are particularly vulnerable to this disease

Item 4.4.7 – Describe how these populations are involved in planning the program and how they will be involved in implementing and monitoring it (including, if appropriate, describe their role as service deliverers)

It is not clear what the difference is among questions 4.4.7, 4.4.10 and 4.4.11.

Item 4.4.8 – Describe how principles of equity will be ensured in the selection of patients to access services, particularly if the proposal includes services that will only reach a proportion of the population in need

The Global Fund is looking for information on how you will ensure that the principles of equity will be followed when you select which patients will have access to the services you are providing in your project (especially if you are not able to provide services to all people who need them).

Item 4.4.9 – Describe how this proposal will contribute to reducing stigma and discrimination against people living with HIV/AIDS, tuberculosis, and malaria, and other types of stigma and discrimination, including gender-based, that facilitate the spread of these diseases

You need to describe how your proposal will address stigma and discrimination. If you have not already built this into your proposal, we suggest that you go back and do so now, because obviously the Global Fund will be looking for this.

Item 4.4.10 – Describe how the beneficiaries of this proposal (e.g., people living with HIV/AIDS, tuberculosis, and/or malaria) and/or affected communities are involved in planning the program and how they will be involved in implementing it (including, if appropriate, describe their role as service deliverers)

It is not clear what the difference is among questions 4.4.7, 4.4.10 and 4.4.11.

Item 4.4.11 – Describe how the communities involved in this proposal are involved in planning the program, and how they will be involved in implementing it (including, if appropriate, describe their role as service deliverers)

It is not clear what the difference is among questions 4.4.7, 4.4.10 and 4.4.11.

Item 4.4.12 – For malaria components only: If the proposal contains anti-malarial drugs or insecticides, include data on drug resistance and/or resistance of vectors in the country or in the target population/area

Self-explanatory.

Step 4.5 – Program and Financial Management

This steps deals with the arrangements that you have made to manage the implementation of your project. Section V.B.3 of the Guidelines for Proposals provides some guidance on this topic. The Guidelines list a number of Global Fund documents related to programmatic and financial management that you should read before preparing your proposal. The Guidelines also explain the

roles and responsibilities of Principal Recipients (PRs) and sub-recipients. In Round 3, the TRP praised proposals in which the PR was a strong organization with experience in managing similar programmes. On the other hand, the TRP was critical of proposals in which the PR was not identified, not located in the same country or judged to lack the necessary capacity to perform its functions.

Item 4.5.1 – Will implementation be managed through a single Principal Recipient or multiple PRs?

The Proposal Form and the Guidelines for Proposals both explain that you can have more than one PR in each component of your proposal.² You are required to list the PRs for this particular component in Table 4.5.1, to indicate their respective areas of responsibility, and to provide the name of contact persons for each PR, as well as contact information for these persons. If you have identified just one PR, we suggest that in the “Area of Responsibility” column you indicate “entire component” or “entire project.”

Item 4.5.2 – Describe the process by which the CCM nominated the Principal Recipient(s)

Self-explanatory. Note the requirement, as outlined on the Proposal Form, to attach as an annex the minutes from the CCM meeting at which the PR was nominated.

Item 4.5.3 – Describe the relevant technical, managerial and financial capabilities for each nominated Principal Recipient.

Item 4.5.4 – Has the nominated PR(s) previously administered a Global Fund grant?

Item 4.5.5 – If yes, describe the performance of the nominated PR in administering previous Global Fund grants

Item 4.5.6 – Describe other relevant previous experience(s) that the nominated PR has had

You need to provide information for these four items for each of the PRs. The items are fairly self-explanatory. Note the additional requirements that the Proposal Form spells out for items 4.5.3 and 4.5.6.

ONLINE AND CD-ROM VERSIONS

1. Click on “Add New Recipient” to enter the name of the first PR.
2. With respect to the area of responsibility for each PR, you are required to select one of the five components that appear on your screen (i.e., HIV, TB, Malaria, HIV/TB, or Integrated). The area of responsibility may already be selected for you if you indicated earlier in the Proposal Form that your proposal includes only one component.
3. Click on “View/Enter Details” the name of the contact person for the first PR and his/her contact information. Next, you need to provide information for the first PR for Items 4.5.3, 4.5.4 and, if necessary, 4.5.5. Then, click on “Back to List.” If you have more than one PR, repeat the entire process for each additional PR. Finally, scroll down and respond to Items 4.5.2, 4.5.7 and 4.5.8.

Item 4.5.7 – Describe the proposed management approach

In this item, the Global Fund requires that you describe the roles and responsibilities of the different partners in managing the implementation of the project. Here is an illustration of what the information for this step could look like, adapted from a Round 3 proposal:

The CCM will have overall responsibility for the success of the project and will manage relations with the Global Fund Secretariat. The CCM will meet quarterly to approve new

² Zambia, which had a number of proposals approved in Round 1, is using four different PRs; their system appears to be working well.

proposals and to review progress and problems relating to ongoing activities. The CCM will appoint an HIV/AIDS Sub-Committee, which will have two principal responsibilities: (1) To review and make recommendations to the full CCM on requests for funding, including new proposals and updated annual work-plans for existing partners; (2) To monitor programme progress and expenditures on a quarterly basis, based on summary quarterly reports prepared by the PR. The Sub-Committee will be responsible for bringing information on implementation delays or other problems noted in these reviews to the attention of the full CCM at its quarterly meeting. On an annual basis, the PR will prepare a summary of available data for review by the full CCM. This summary will review the current state of the epidemic, implementation progress, financial expenditures and barriers to effective and efficient implementation. The CCM will use this information to determine whether changes in programme direction and/or resource allocation are necessary. If so, the CCM will negotiate the recommended changes with the GFATM.

The PR will execute its daily functions through a Project Management Unit (PMU). The PMU will execute a Memorandum of Understanding (MOU) with each implementing partner who is approved to receive funds. The MOU will indicate the mechanism of disbursement and accounting for funds and the expected outputs of each undertaking. In addition, it will spell out the roles and responsibilities of the PR and the implementing partner and specify financial regulations governing the use of GFATM funds and reporting commitments. Once an MOU has been signed with an implementing partner, the PMU will be responsible for disbursing the funds, and for monitoring funds utilization on a monthly basis. It will also receive quarterly progress reports from the implementation agencies. Quarterly financial and activity progress reports will be forwarded to the HIV/AIDS Committee of the CCM for technical and financial review. On an annual basis, the full CCM will review programme progress and proposed work-plans for the upcoming year and approve or disapprove additional disbursements.

To access funding, all implementing agencies must submit a detailed proposal and workplan to the CCM. The Sub-Committee will review the proposal for technical, logistical and budgetary soundness and make a recommendation to the CCM to approve funding, request modifications or disapprove funding. When the CCM has approved a proposal, it will notify the LFA and the PMU, which will then prepare the MOU and release funds. The lead implementing agency for any activity may work in collaboration with other partners for the purpose of implementation but will retain the responsibility for successful implementation and financial accountability. All implementing agencies must submit monthly financial reports and quarterly progress reports to the PMU. Review of these reports will be carried out by the HIV/AIDS Sub-Committee and forwarded to the CCM for action as required.

Item 4.5.8 – Explain the rationale behind the proposed arrangements

See the guidance provided on the Proposal Form.

Item 4.5.9 – Are sub-recipients expected to play a role in the project?

Section V.B.3 of the Guidelines for Proposals explains that you can nominate sub-recipients that will implement parts of your project and that will receive funds through the PR. Consult the Guidelines for additional information. If sub-recipients will be involved, proceed to the next item. If do not plan to have any sub-recipients, you can go directly to Step 4.6.

Item 4.5.10 – Have the sub-recipients already been identified?

If yes, you need to respond to items 4.5.11 and 4.5.12. If no, proceed to item 4.5.13.

Item 4.5.11 – Describe the process by which sub-recipients were selected

Item 4.5.12 – Describe the relevant technical, managerial and financial capabilities of the sub-recipients

These items are fairly self-explanatory. Note the additional guidance on the Proposal Form for item 4.5.12.

Item 4.5.13 – Describe why sub-recipients were not selected prior to submission of the proposal

Item 4.5.14 – Describe the process that will be used to select sub-recipients if the proposal is approved

If you have not yet selected your sub-recipients, you need to respond to these two self-explanatory items.

Step 4.6 – Monitoring and Evaluation

Section V.B.4 of the Guidelines for Proposals provides some guidance on what the Global Fund wants to see included in Step 4.6. It also mentions two Fund documents on M&E that we suggest you consult before you complete this step.

In this step, you are asked to describe the main elements of your M&E plan, primarily through the use of Table 4.6, which is actually two tables: 4.6A and 4.6B. As the Proposal Form points out, these tables are closely linked to Tables 4.4 (A, B and C), and you will need to copy some information from Tables 4.4 (A, B and C) to Tables 4.6 (A and B).

Table 4.6A

In Table 4.6A, you are required to enter the goal statements and impact indicators that you identified in Table 4.4A. If your proposal only has one goal, show the goal statement in the first row under the “Goal” column and show all of the impact indicators for that goal under the “Impact Indicator” column (one indicator per row). If your project has more than one goal, show the second goal, and the impact indicators for that goal, in the rows below the impact indicators for the first goal. And so on, for each goal.

ONLINE AND CD-ROM VERSIONS

Any relevant information that you entered in the tables in Step 4.4 will automatically be entered in Tables 4.6A and B.

In the last three columns of Table 4.6A, you need to show, for each indicator, the technical partners involved in measuring the indicator, the source of the data for that indicator, and the frequency of data collection. The Proposal Form provides some guidance concerning these items. This is fairly straightforward. Taking one of the hypothetical examples used earlier in this chapter, if the goal statement is:

To reduce the spread of HIV/AIDS, reduce morbidity and mortality, and mitigate the social and economic impact of the epidemic

and one of the impact indicators is:

Reduced percentage of sex workers who are HIV infected

next to that indicator, you would need to list the organizations involved in measuring the percentage of sex works infected with HIV, and you would need to show the data source for that information and how often the data will be collected. The last two items might look something like this:

Data source	Frequency of data collection
Prevalence surveys conducted in representative sex worker populations	Annual

Table 4.6B

You are required to complete a separate Table 4.6B for *each* objective.

In the first two rows, enter the goal statement, the number of the objective and the objective statement. This information should be taken from Tables 4.4A and 4.4B. Then, you need to enter the first service delivery area for that objective; this information comes from Table 4.4C. Note: It is the service delivery area that is shown here, not the service to be delivered. The service delivery area is the information that you showed in Table 4.4C next to the heading "Category."

Next, you need to list each of the coverage indicators that you identified for this service delivery area; this information also comes from Table 4.4C. Next to each coverage indicator, you need to enter some new information: the source of the data for that indicator, and the frequency of data collection. To illustrate, using our hypothetical example again, if the goal statement is:

To reduce the spread of HIV/AIDS, reduce morbidity and mortality, and mitigate the social and economic impact of the epidemic.

and the objective statement is:

To increase the number of people with advanced HIV/AIDS who are receiving antiretroviral combination therapy

and the service delivery area is:

Antiretroviral treatment and monitoring

and the coverage indicator is:

Number of people with advanced HIV infection receiving antiretroviral combination therapy

next to the coverage indicator, you would need to show the data source for information on the number of people with advanced HIV infection receiving antiretroviral combination therapy, and how often the data will be collected. The last two items might look something like this:

Data source	Frequency of data collection
Reports from the seven sites where ARVs are available	Monthly

Once you have finished listing all of the coverage indicators for the first service delivery area, and the data sources and frequency of data collection for each coverage indicator, then you need to show similar data for the second service delivery area. If there are more than two service delivery areas, you need to expand the table to show similar data for each additional service delivery area.

Additional Items

After the tables, Step 4.6 continues with two additional information requirements, outlined in Items 4.6.1 and 4.6.2.

Item 4.6.1 – Describe how the plan complements or contributes towards existing efforts to strengthen M&E plans and/or relevant health information systems

This is self-explanatory. However, we suggest that you read the guidance on the Proposal Form above item 4.6.1, which talks about the importance the Global Fund places on the development of nationally owned M&E plans and systems.

Item 4.6.2 – Describe any capacity building that might be required to implement the M&E plan

In this item, the Global Fund is looking for a description of capacity building measures that you believe are needed to implement your M&E plan. These capacity building measures should already be incorporated into your proposal (and should therefore have been mentioned in Step 4.4 – Programme Strategy).

Step 4.7 – Procurement and Supply Management

The Global Fund requires that you provide information on your plans for procuring and managing the supply of health products included in your proposal. Section V.B.5 of the Guidelines for Proposals provides some guidance on the Global Fund's approach to procurement and supply management. The Guidelines indicate that if your proposal is approved for funding, you will be required to submit a more detailed procurement plan than the one you will include in your proposal. The Guidelines suggest that you review the Global Fund's policies on procurement and supply management prior to completing this step. These policies are available on the Fund's website via www.theglobalfund.org.

In Round 3, the TRP identified a number of proposals where the procurement and supply-chain management plan was either missing or not sufficiently detailed. See [Weakness #14](#) in Chapter 2 of this Guide for more details.

See the guidance on the Proposal Form concerning what is included in the term “health products.”

Item 4.7.1 – Will procurement and supply management of health products be carried out (or managed under a sub-contract) exclusively by the Principal Recipient or will sub-recipients also conduct procurement and supply management of health products?

Item 4.7.2 – Approach to procurement of health products

Item 4.7.3 – Approach to supply management of health products

The questions posed on the Proposal Form are self-explanatory.

Item 4.7.4 – Describe the capacity that exists to ensure compliance with the Global Fund's policies in each of the following areas, and any capacity building and/or technical assistance needs

The Proposal Form lists six areas (also called “topics”). You are required to write one paragraph for each area.

Item 4.7.5 – Drug donation programs

Self-explanatory.

Item 4.7.6 – Does the proposal request funding for the treatment of multi-drug resistant TB?

This item is for tuberculosis and HIV/TB components only. See the additional guidance on the Proposal Form.

Section 5: Component Budget Section

Please refer to Section V.B.6 of the Guidelines for Proposals for information on what the Global Fund is looking for in Section 5.

In Round 3, the TRP identified major weaknesses in the budget information contained in about half of the proposals submitted. The TRP found that in many cases the budget was incomplete or not detailed enough; that there were inconsistencies or errors within the budget; or that specific budget items were unclear or inadequately justified. We suggest, therefore, that you put a lot of effort into getting Section 5 right. See [Weakness #2](#) in Chapter 2 of this Guide for more information on the problems identified by the TRP. Please also see [Strength #9](#) in Chapter 2 of this Guide for examples of proposals that contained budgets praised by the TRP as being detailed and well-presented.

At the beginning of this section of the Proposal Form, the Global Fund reminds you that a separate Section 5 needs to be completed for each component of your proposal. If, as we suggest earlier in this chapter, you submit separate proposals for each component, then you will only need to complete one Section 5 for each proposal.

In Section 5, the Global Fund requires that you provide summary budget information for the five years of the project. The Fund also requires that you provide a more detailed budget for the first two years of the project (see Step 5.1 below).

Step 5.1 – Full and detailed Budget as an attachment to the Proposal Form

The Global Fund requires that a full and detailed budget be included as an attachment. (The Proposal Form uses the terms “annex” and “attachment” interchangeably.) On the Proposal Form itself, the Fund provides only limited guidance, including (a) that the detailed budget should reflect and be consistent with the broad budget categories in Table 5.2 (see Step 5.2 below) and “preferably” the activities of the component; (b) that the detailed budget should include assumptions and formulas used to estimate major budget items; (c) that the detailed budget should cover the first and second year of the proposal; (d) that the budget for the first year may be broken down by quarters; and (e) that a detailed one-year action plan and an indicative plan for the second year need to be provided with the detailed budget. (See the discussion earlier under Step 4.4 regarding the detailed and indicative action plans.)

Additional guidance is provided in Section V.B.6 of the Guidelines for Proposals. The Guidelines say that the budget should be “supported by sufficient detail to enable a proper evaluation of the amount being requested.” They also say that “to the extent possible, the detailed budget format should be derived from the proposed PR’s usual budget formats and should facilitate the use of normal accounting and reporting systems during programme implementation.”

In Round 3, the TRP was critical of proposals that did not provide sufficient detail, or that did not provide a breakdown of unit costs and quantities. Therefore, wherever possible within the usual budget format used by your PR, we suggest that you adopt the following guidance:

- ⇒ Ensure that the detailed budget contains a separate section for each objective in the proposal.
- ⇒ In each section, organize the information by the service to be delivered.
- ⇒ Within each service to be delivered, organize the information by main activity.
- ⇒ For each activity, provide the information by budget category (as defined by Table 5.2a of the Proposal Form).
- ⇒ For each budget category, provide information for each cost item. For example, under Human Resources, you could have a separate line for each position for which you are seeking funding. Under Infrastructure and Equipment, you could have separate lines for items such as computers, photocopy machines and vehicles.
- ⇒ For each cost item, show the unit measure (e.g., unit, per day, per year); the unit cost; the number of units (for each of the five years of the project); the total number of units for the five years combined; the cost (for each of the five years of the project); and the total costs for the five years combined.

If there are administrative costs that apply to the project as a whole, these can be presented in a separate section.

We suggest that you ensure that any costs in your detailed budget related to M&E, procurement and supply management, and technical assistance are shown on separate lines. The reason for this is that in Step 5.3 of the Proposal Form, the Global Fund requires that you include summary information on these particular costs. If they are on separate lines in your detailed budget, they will be easier to identify and pull out.

We suggest that the detailed budget also include a summary section, with tables showing (a) the total costs for each year (and for the five years combined) for each section of the detailed budget; and (b) the total costs for each year (and for the five years combined) by budget category (Human Resources, Infrastructure and Equipment, etc.). It is important to ensure that the total costs for each year for each budget category match the figures presented in Table 5.2a on the Proposal Form.

We suggest that you check your addition and multiplication carefully; that you make sure there are no inconsistencies between different parts of the budget; and that you ensure that each cost is accurate and can be readily justified. In Round 3, the TRP identified a number of problems in this area.

Step 5.2 – Budget Summary

In Table 5.2a, also sometimes referred to as Table 5.2, the Global Fund requires that you provide summary information on the budget for the proposal, by category and by year. The categories are defined in the text located above the table. If your proposal is accepted, the Global Fund will approve funding for the first two years only. Funding for the third and subsequent years will depend on performance in implementing the project and on the availability of resources at that time.

Table 5.2a is fairly straightforward. People who worked on applications for Round 3 will notice two changes to this table:

1. The M&E category has been removed. The Global Fund expects that M&E costs will be included in the other categories (e.g., human resources, training). Note, however, that in Step 5.3 below, you are required to summarize all M&E costs.
2. The “administrative” category has been expanded to include “planning and administration.”

ONLINE AND CD-ROM VERSIONS

1. The budget categories are defined in the pop-up window that you get when you click on the category name.
2. Once you have completed Table 5.2a, another table is automatically generated showing the percentage breakdown of costs for each of the budget categories.)

If you are entering any costs in the “Other” category, you are required to explain what these costs are for.

Step 5.3 – Funds requested for functional areas

In Step 5.3, the Global Fund requires that you indicate the costs for three functional areas: M&E, procurement and supply management, and technical assistance. These costs are to be entered in Tables 5.3a, 5.3b and 5.3c respectively. It is important to note, as indicated on the Proposal Form, that these costs are *not* additional to the costs in Table 5.2a. They must already have been included in the costs in Table 5.2a.

In Table 5.3a, enter the costs for M&E. See the Proposal Form for guidance on what is included under this heading. You will need to extract the M&E costs from the costs shown for the various budget categories in Table 5.2a.

In Table 5.3b, enter the costs for procurement and supply management. See the Proposal Form for guidance on what is included under this heading. You will need to extract the procurement and supply costs from the costs shown for several of the budget categories in Table 5.2a including, of course, the commodities and products category, and the drugs category.

In Table 5.3c, enter the costs for technical assistance. See the Proposal Form for guidance on what is included under this heading. You will need to extract the technical assistance costs from the costs shown for the appropriate budget categories in Table 5.2a.

To assist you in filling out Tables 5.3a, b and c, you can consult the detailed budget that you prepared to fulfil the requirements outlined above in Step 5.1. If your detailed budget covers only the first two years (which is all that the Global Fund requires to be submitted), you will need to project third, fourth and fifth year costs based on the first two years’ costs. (You had to do that, in any event, to complete Table 5.2a.)

Step 5.4 – Partner Allocations

The Global Fund requires that you indicate in Table 5.4 how the project’s resources will be allocated to the various categories of implementing partners (as shown in the table.) The allocation must be shown in percentages, not actual dollars.

Step 5.5 – Key Budget Assumptions for Requests from the Global Fund

In this step, the Global Fund is looking for additional information on how you arrived at some of the budget figures.

Item 5.5.1 – Specify in the tables below the Drugs and Commodities & Products unit costs, volumes and total costs, for the FIRST AND SECOND YEARS ONLY

In this step, you are required to enter unit costs, volumes and total costs for two of the budget categories: drugs, and commodities and products.

Enter the information for drugs in Table 5.5.1A. See the guidance for this table on the Proposal Form. Note that the information is required for each of the first two years, and that the table is split in two for this purpose.

In the first column of Table 5.5.1A, enter the treatment category. The categories are listed on the Proposal Form below the table. In the second column, enter the average cost to treat one person for Year 1 (or for the course of treatment if it is less than one year) for all of the drugs that you are planning to procure that fall within that category.³ In the third column, enter the number of persons years (or treatment courses if the treatment is for less than a year) that you are planning to procure. This figure should be equal to the number of people that you plan to treat in Year 1. In the last column, enter the total costs (column 2 multiplied by column 3).

ONLINE AND CD-ROM VERSIONS

1. The treatment categories, and the commodities and products categories, are listed right in the tables.
2. The total costs are computed automatically.

If you are procuring drugs in more than one category, you need to repeat the above process for each category. If you are planning to use sources other than those specified at the beginning of Item 5.5.1 to procure your drugs, you need to provide a rationale.

Then, you need to provide the information for Year 2 in the second half of Table 5.5.1A.

Enter the information for commodities and products in Table 5.5.1B. Again, the table is split in two to allow you to show Year 1 and Year 2. In the first column of Table 5.5.1B, enter the commodity and product category. The categories are listed on the Proposal Form below the table.

In the second column, define the unit that you are using for your purchase of commodities and products within that category. The Proposal Form provides a couple of examples. In the third column, show the unit cost. In the fourth column, enter the quantity that you plan to purchase. In the last column, enter the total costs (Column 2 multiplied by Column 3).

Item 5.5.2 – Justification for Drugs and Commodities and Products

The Proposal Form provides some guidance for this item. The Global Fund is looking for information here concerning any assumptions or formulas you used to arrive at the volumes of drugs or commodities and products shown in Tables 5.5.1A and B. The following extract adapted from a proposal approved in Round 3 shows how one country responded:

At present, there is no national sero-prevalence data or recent census data with which to accurately project the percent of HIV-infected persons. For planning purposes, available data have been compared and combined to make a reasonable estimate. National seroprevalence has been estimated at 2.5 percent, with approximately one-third of this group requiring ARV treatment. Based on an estimated adult (15-49) population of 900,000 persons, of which approximately 22,500 persons are believed to be HIV-infected. An

³ The Global Fund has included on its website, at www.theglobalfund.org/en/apply/call, a costing model and a user's guide that may assist applicants whose proposals include antiretroviral therapy. The model uses Excel spreadsheets that allow the users to enter a range of variables that influence the cost of antiretroviral programs; the model then generates costs estimates in the format required for the Global Fund Proposal Form.

estimated 7,000 persons could immediately benefit from ARV treatment. This group is expected to grow to more than 12,000 persons in the next five years as the currently infected reach more advanced stages of immuno-suppression. In addition, new persons will enter the HIV-infected cohort for several years until prevention efforts have had time to make a significant impact.

Item 5.5.3 – Human Resource costs

Self-explanatory.

Item 5.5.4 – Other key expenditure items

If there are any other budget categories – other than human resources, drugs, and commodities and products – that form a significant share of the total budget, the Global Fund requires that you explain here how these amounts have been budgeted for the first two years.

Reminder

If you skipped Section 2: Executive Summary, now is the time to go back and read that section.