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of the Global Fund

Global Fund Board to Discuss New Eligibility Criteria

Two pools of funding are being proposed – “general” and “targeted”

Low income countries may be required to provide at least a minimum level of counterpart financing

Proposed new eligibility criteria will likely be one of the hot topics at the meeting of the Global Fund Board on 11-12 May 2011.

Eligibility criteria are used to determine which countries are entitled to apply to the Global Fund for funding. The current eligibility criteria are based on factors such as country income level, disease burden and whether the proposals focus on at-risk populations. (Applications submitted by country coordinating mechanisms (CCMs) also have to meet certain requirements related to the structure and operations of the CCM.)

The Board is being asked to approve a new set of criteria that encompasses not only eligibility, but also counterpart financing and prioritisation. Counterpart financing refers to the minimum contribution that national governments must make to the disease programmes for which applicants are seeking funding. (Logically, the counterpart financing criteria are part of the eligibility criteria, but the Global Fund treats them as being separate.)

Prioritisation criteria are used to rank proposals recommended for funding by the Technical Review Panel

(TRP) when there is not enough money to immediately pay for all of such proposals. New prioritisation criteria were adopted in 2010, but they applied only to Round10.

Under the current eligibility criteria, the Global Fund can consider applications from low income countries (LICs), lower-middle income countries (LMICs) and upper-middle income countries (UMICs). In recent years, some donors have suggested that at time when resources are scarce, the Global Fund should reconsider whether it ought to be providing money to LMICs and UMICs. This was one of the reasons why the Global Fund Board decided it was time to re-visit the eligibility criteria.

The Board was scheduled to approve new eligibility, counterpart financing and prioritisation criteria at its meeting in December 2010. However, the Board decided that more work and more discussions were required, so this item was re-scheduled for the meeting coming up this month. In the interim, two board committees – the Policy and Strategy Committee, and the Portfolio and Implementation Committee – have been discussing options and have prepared a draft of the proposed new criteria for the Board to consider.

We understand from Global Fund sources that as part of the proposed new criteria, the Board is being asked to approve the establishment of two funding pools (instead of one, as at present). The two pools would be labelled “general” and “targeted,” and applicants would have to choose for which pool they were applying.

Under this “dual pool” concept, there would be different eligibility criteria for each pool.

This concept is not that different from the situation that existed for Round 10 HIV applicants, where they could apply under the “general” stream, or under a special reserve for most-at-risk populations (MARPS) – but not both. However, under the proposed new criteria, the targeted pool would apply to all three diseases.

One issue that may be contentious at the Board meeting is the question of what percentages of available resources should be dedicated to each of the two funding pools.

The Board is also being asked to consider splitting the LMIC category into two tiers: lower LMIC and upper LMIC. Under what is being proposed, the eligibility criteria would be identical for both tiers, but each tier would be treated slightly differently with respect to the counterpart financing criteria and the prioritisation criteria.

Under the current eligibility criteria, some applicants are required to focus on at-risk populations. We understand that under the proposed new criteria, the focus criterion will be expanded to include “high impact interventions.” In other words, applicants affected by this criterion could choose whether to focus on at-risk populations or high-impact interventions. (The term “high-impact interventions” will presumably be defined in the new criteria.)

According to Global Fund sources, under the proposed new criteria, all applicants – including lower income countries – would have to provide some level of counterpart financing. There will likely be some discussion at the Board meeting on whether proposals nominating PRs from civil society should be expected to meet the same counterpart financing requirements as proposals nominating government PRs (or both government PRs and civil society PRs).

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By:David Garmaise

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NEWSMay 6th 2011

ABSTRACT

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