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Next Implementation Period of Guinea TB Grant Will See Some Changes, Including a New PR

For the next implementation period of a single-stream-of-funding TB grant, activities related to the Practical Approach to Lung Health (PAL) have been removed. The funds involved will be diverted to areas where performance has been weak or where gaps were identified during a programme review conducted with partners in November 2012 – for example, diagnosis and treatment of smear-negative cases, improved TB detection in children, lowering the default rates (currently high), strengthening the laboratory network and improving TB/HIV coordination.

As reported in a previous [GFO article](#), Guinea was awarded renewal funding of up to \$4.3 million for this grant (No. GIN-T-MSHP).

Other objectives for the next implementation period are to continue improvements in high quality directly observational therapy, short course (DOTS); and to improve diagnosis and management of TB/HIV co-infection and multiple-drug-resistant TB.

Stakeholders in Guinea were generally supportive of the decision to divert funds from PAL-related activities to other areas.

According to the Grant Approvals Committee (GAC), financial irregularities in the implementation of this grant were recently identified. The GAC did not provide details. However, stakeholders in Guinea said that the “official” line is that the financial irregularities occurred in the management of TB medicines. They added, however, that they believe the irregularities are more widespread. The CCM has not yet been formally notified of the irregularities.

As a result of the financial irregularities, the Global Fund insisted on a change in principal recipient (PR) for the next implementation period. A new PR, not yet named, will take over from the Ministry of Public Health.

Stakeholders told GFO that it may take some time to identify a new PR for two reasons: (1) due to the political instability in Guinea, the CCM has not planned any meetings in the next few months; and (2) widespread corruption in the country may discourage suitable organisations from taking on the role of PR. This may cause delays in grant implementation, stakeholders said.

Once the CCM does take up the issue of identifying a new PR, stakeholders expect there will be a spirited discussion.

The request for continued funding was originally presented in August 2012. The Grant Renewals Panel (predecessor of the GAC), found the request to be weak and invited the CCM to re-submit. The CCM did so on 26 June 2013.

The GAC recommended that a long-term technical assistance plan for the Guinea TB programme be developed by the Global Fund and its technical partners.

Some of the information for this article was taken from Board Decision GF-B29-EDP3 and from B29-ER-02, the Report of Secretariat Funding Recommendations for July 2013. These documents are not available on the Global Fund website. Our regional correspondent for West and Central Africa, Bertrand Kampoer, contributed to this article.

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