Aidspan

Independent observer of the Global Fund

LESSONS LEARNT FROM WINDOW 1 SHOW COUNTRIES STILL GRAPPLE WITH TRANSLATING HIV PROGRAM AMBITIONS INTO GLOBAL FUND FUNDING REQUESTS

Background

One of the ways in which the Joint United Nations Programme on HIV and AIDS (UNAIDS) provides technical support to countries' HIV responses is through its Technical Support Mechanism (UNAIDS-TSM). This supports UNAIDS Country Offices and their clients, the countries and beneficiaries themselves, in developing and delivering national HIV programs.

As well as support in many aspects of HIV programming, a significant part is through assistance in funding request development. Countries preparing their Global Fund Grant Cycle 7 (GC7) funding applications can request consultants to lead or draft various components of the funding request and, through the UNAIDS-TSM Virtual Support Desk (VSD) mechanism, UNAIDS-TSM can provide backstopping and technical support, including peer review of deliverables.

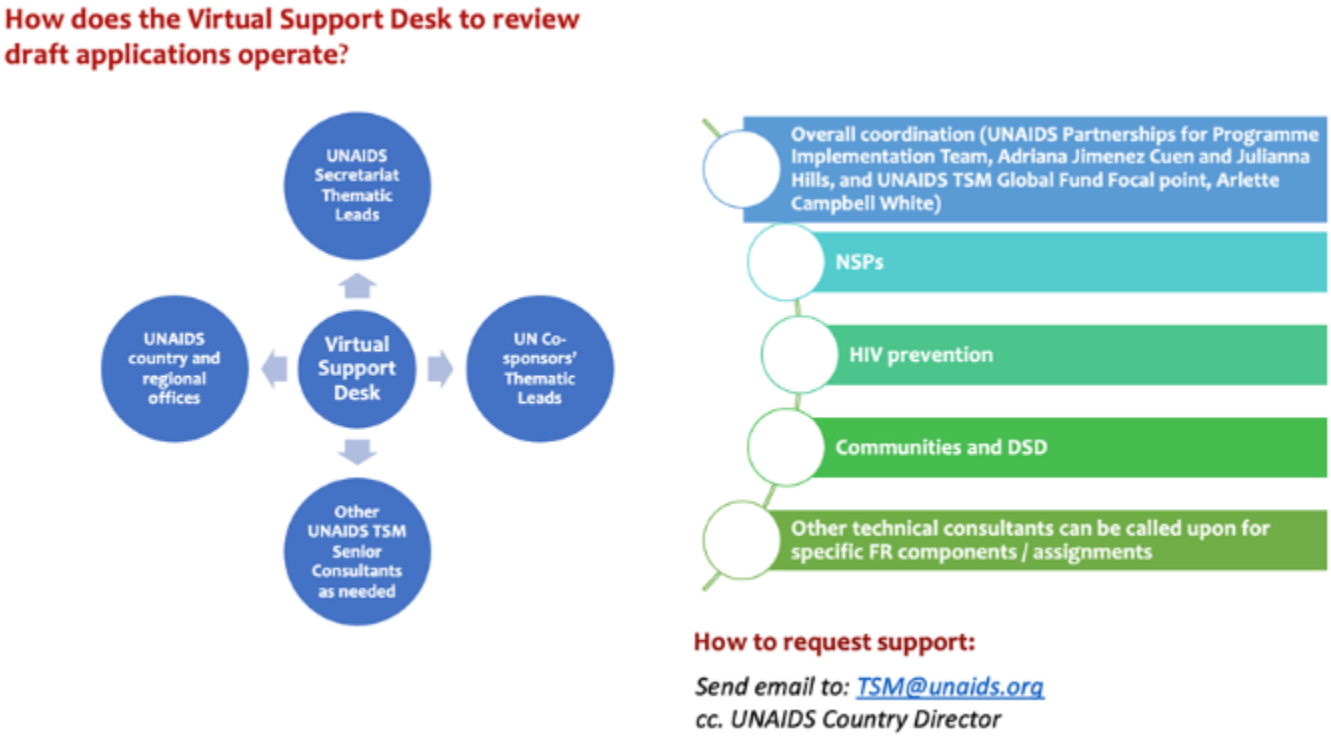
Virtual Support Desk

The VSD has three primary functions:

1. Virtual review of national strategic plans (NSPs), draft Global Fund applications and other supporting material.
2. Virtual support to UNAIDS TSM in-country technical missions, including backstopping andmentoring local consultants, and providing international TA.
3. Strategic learning and skill-building.

Under item 1 above, the VSD can coordinate the peer review of draft NSPs, other HIV program 'building blocks' (Stigma Indexes, Gender Assessments, HIV programme reviews, etc.) and Global Fund funding request applications for GC7. This is done through leveraging the technical expertise of Joint Programme partners such as the United Nations Population Fund, World Health Organization, etc. The VSD can support funding request preparation and launch phases, as well as the implementation phase; and it can provide thematic expertise (i.e., in HIV prevention, human rights and gender, community-led responses, costing, etc.) as appropriate.

For the review of deliverables, it can harness and consolidate the feedback of multiple peer reviewers including technical experts from the UN Joint Programme.



Secondly, the VSD provides virtual support to UNAIDS TSM in-country technical missions, Identifying the best thematic consultants and coaching local ones. This is done in a number of ways: assignment 'kick off' emails and calls to launch both administrative and technical elements of TA; mentoring, backstopping and trouble-shooting if needed during an assignment; and peer review of some or all products on request at any stage of the application process.

The third element of the VSD's work, strategic learning and skill-building, includes Identifying lessons learnt and best practices for replication and sharing; establishing a Community of Practice to provide a resource centre of helpful materials and documentation brought together in one place; and holding webinars and clinics on specific topics, e.g., prioritisation, differentiated service delivery (DSD), community-led responses and monitoring, Global Fund costing and budget tables, etc.

However, probably the most significant aspect of VSD work in 2023 is the opportunity to afford countries to have multiple iterations of their draft funding requests and accompanying annexes reviewed by a broad range of technical and thematic experts.

Key lessons learnt from Window 1 peer reviews

The VSD reviewed 15 draft funding requests, all but one country eventually submitted under Window 1 and one postponed to Window 2. Some countries submitted more than one draft to be reviewed, enabling

the VSD to assess whether and to what extent its earlier comments had been taken into account and how the draft had improved between iterations.

General Comments and Red Flags	
Last-minute requests for peer review imply countries are not well prepared and have started the FR process late	• At the Mock TRP (Nairobi, March 2023), six with eight working days left, ten FR drafts fr space of three working days and with less th provided nine peer reviews (of the ten, one request to review it!) in the five working day This is not sustainable for Window 2, which • For Windows 2 and 3, the VSD should push cannot promise peer reviews. • As a result of running out of time, some cou missing annexes and even missing some C
Failure to follow the GF instructions/template	All but two countries did not send in their Perform Budget, Prioritised Above Allocation Request (PA impossible to comment on consistency across the
Failure to submit all related documents/annexes	Many countries did not complete their narrative fo misalignment and garbled language, inconsistenc a relevant, succinct FR.
Poorly written and organized drafts	• Follow the narrative guidance, including reg • On formatting: a badly formatted, messy dra does not inspire confidence in the technical
Weak rationale and consistency	• A good rationale, and consistency in prioritis guiding documents is very important, and ke • Failure to provide evidence of current perfor exceeded as justification for scaling up, sca
Interventions misaligned with budget	• Systematically number activities in the FR ir of activities, many of which probably wouldn • Some countries narrative was not reflected and key population activities.

Use of jargon and meaningless phrases	• Some FRs were very ‘wordy’. It is relatively verbiage from GF guidance documents, tha My fingers itched to edit the two FRs that I r substance, I think.” Less is more! • In places, many drafts had a lot of bullet lists (saying what countries thought the Global F thought/analysis behind the words.
Repetitions in resilient and sustainable systes for health (RSSH) sections, whereas RSSH is cross-cutting	• Most countries struggled with this key Anne • Many FRs still addressed RSSH on an indiv approach with many repetitions between dis address all components would have been a human resources for health (HRH) such as • CHWs cut across many public health issues Countries should use the CHW programmat • There should be ONE consolidated RSSH A Coordinating Mechanism should make the f • However, it should be noted that at the Ban some inconsistency in the RSSH instruction
One the five funding modalities/approaches, the “Tailored for NSP” approach caused the most problems	• Three countries submitted draft FRs Tailore NSP. • Timing/readiness of the revised NSP (or ad submission. • Countries are meant to be using their NSPs country with a brand new NSP, the duration reviewed all fall short of the duration of the p • Consequences of this misalignment of the N any case, they are poorly aligned (in conten reviewed. • Conclusion: for three out of four FRs this m This is because (i) NSPs were under revisio versions of NSPs used for developing FRs w acceptable, this is a subjective assessment specifics of several parts of the FRs were n

Conclusion

The foregoing is just an example of some of the main lessons learnt from Window 1 draft FRs. A more detailed paper has been prepared on these experiences and it is to be hoped that Window 2 and 3 countries may reap the benefits of some of these earlier lessons. Most countries were unaware of the Technical Review Panel’s example of a Full Review HIV/TB Funding request, the fictitious country Jasmania; this provides a very clear example of what a Full Review Funding Request should look like and is barely 50 pages in length (excluding those 20 annexes, of course!).

It remains to be seen if the lessons learnt are taken into account by the remaining countries…but we shall let you know after Window 2 closes at the end of May!

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