



Independent observer
of the Global Fund

AIDSPAN WHITE PAPER "PROVIDING IMPROVED TECHNICAL SUPPORT TO ENHANCE THE EFFECTIVENESS OF GLOBAL FUND GRANTS" IS PUBLISHED

Before the Global Fund was established five years ago, the critical challenge in the fight against HIV/AIDS, TB and malaria was coping with the shortage of money. But now that the Global Fund is in a position to give grants worth over a billion dollars per year, the critical challenge has shifted. It now consists of two things: developing adequate capacity; and overcoming a range of technical and management barriers to smooth project implementation. One key – but not the only one – to tackling these barriers is the provision of effective technical support (TS) (also known as technical assistance).

Last month, Aidspan published a white paper which tackles two linked questions: What problems arise in the provision of adequate, timely, appropriate and effective TS to projects financed by the Global Fund? And what can be done about these problems? The white paper, entitled “Providing Improved Technical Support to Enhance the Effectiveness of Global Fund Grants”, can be downloaded from www.aidspan.org/aidspanpublications.

The first main problem area discussed in the white paper is that TS needs are usually identified and met too late in the Global Fund grant cycle. Underlying factors here include:

- CCMs and PRs are often in denial regarding grant difficulties
- Even where there is no denial, there is often a reluctance to ask for TS
- M&E systems are inadequate
- The Fund's system for detecting grants in difficulty is insufficiently effective
- Getting TS is time-consuming

Recommendations that the white paper offers for dealing with this include:

- Divide the Fund's grant proposal process into two stages – pre-proposal, and full proposal. And require both stages to include a TS Plan.
- Provide incentives for PRs and CCMs to identify problems early
- Replace the Fund's existing system for detecting grants in difficulty with a three-level online "Grant Progress Reporting System (GPRS)"

The second main problem area discussed is that the TS that is provided often does not meet grantee needs. In particular, it usually does not build local capacity. Underlying factors here include:

- "TS seekers" and appropriate "TS providers" have difficulties finding each other
- TS is too often supplier-driven and too often North-based
- TS too often has a short-term focus
- There is no global knowledge-base on TS
- Language and cultural barriers often prevent effective TS provision
- The main form of TS that is needed is often for someone to provide "proactive coordination" among the in-country stakeholders; but often no suitable person is available to play this role
- TS is rarely evaluated

Recommendations offered for dealing with this include:

- Encourage, within each large country or region, the establishment of a two-level TS provision system
- Create a web-based "TS marketplace"
- Strengthen local TS capacity
- Monitor effectiveness of TS

The third main problem area discussed is that TS is under-funded, and GF partners do not collaborate sufficiently regarding TS provision. Underlying factors here include:

- Nobody has a clear mandate to provide GF-related TS
- GF partner agencies do not communicate/coordinate adequately
- Loss of institutional memory is a major problem
- TS providers are often unaware of each other's lessons learned

Recommendations offered for dealing with this include:

- For each country/disease combination, choose a "lead agency" to coordinate TS issues
- For each country, develop an in-country forum of partners (or strengthen it, if it exists) to discuss TS needs and related issues
- Develop a forum through which TS funders and TS providers can mutually discuss lessons learned and best practice

These issues were discussed at the first "Global Fund Round Table", organized in 2007 by Aidsplan. The meeting consisted of a private "conversation" between twenty leaders representing government, civil society and multilateral agencies. These leaders, including Peter Piot, head of UNAIDS, and Mark Dybul, head of PEPFAR, did not attempt to agree on recommendations. They agreed instead that Aidsplan would

produce this white paper, based in large part on problems that were discussed at the Round Table, and including recommendations generated before and after the Round Table by Aidsplan and others.

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