

TRP OBSERVATIONS ON THE "FIRST LEARNING WAVE" OF NSAS

The "first learning wave" of a new Global Fund funding stream, National Strategy Applications (NSAs), was recently completed. NSAs involve submitting a national disease strategy itself – rather than a Global Fund-specific proposal form – as the primary basis of the application for Global Fund financing. (See GFO Issue 110 at www.aidspan.org/gfo for information on which proposals were funded in the first learning wave.)

In the "Report of the Technical Review Panel and the Secretariat on Funding Recommendations for National Strategy Applications of the First Learning Wave," presented at the recent Board meeting in Addis Ababa, the TRP made a number of observations concerning the NSA applications process and the content of proposals.

This article provides a description of the NSA process, followed by a summary of the TRP's comments.

Description of the process

In March 2009, 23 CCMs were invited to express an interest in the first learning wave, and 20 responded. The number dropped to 19 by the time of the next step in the process: the submission of national strategy documentation for desk review.

(In fact, the numbers of CCMs shown above, and elsewhere in this article, are over-stated by one because one CCM, Rwanda, was invited to consider submitting NSAs for two different diseases.)

The desk reviews were carried out in April by a panel of current and former members of the TRP. The purpose of these reviews was to determine whether the national strategy documentation was "sufficiently robust" to form the basis of an NSA. Eight of the 19 CCMs passed this "test," and were invited to submit

an NSA.

Between the end of May and the beginning of July, small groups of TRP members made week-long visits to the countries whose CCMs were invited to submit NSAs. In each country, the TRP members, along with a few national facilitators nominated by the CCMs, formed a Strategy Review Team. Each team conducted a review, the purpose of which was to collect information on areas of the national strategy documentation that the desk review had identified as requiring clarification; and to further evaluate the documentation.

At the end of each visit, the Strategy Review Team conducted a de-briefing with the CCM and other key stakeholders to provide information on the main strengths, gaps and areas identified as needing further clarification in the national strategy documentation. In particular, "critical issues" were identified that required special attention, and CCMs were asked to address these in the NSAs to be submitted.

Seven of the eight eligible CCMs submitted NSAs by the deadline of 31 August 2009. The Global Fund Secretariat undertook a screening process similar to that performed for round-based proposals to determine whether each NSA was complete and eligible. All seven submitted NSAs were judged compliant with the minimum requirements for CCM eligibility.

Finally, five of the seven NSAs were recommended by the TRP for funding.

TRP comments

REVIEW OF NATIONAL STRATEGIES

The TRP said that the national strategies that were not selected at the desk review stage to participate in the next stage of the NSA process "were either so incomplete that they could not be adequately evaluated for soundness, or they had weaknesses in a number of key attributes that were

sufficiently profound that they could not realistically be addressed within the time frames."

The desk reviews identified the following common weaknesses among the national strategies:

- The process of strategy development was not well described.
- The link between disease control strategies and national health sector strategy was inadequately described.
- Documentation to support the strategy budgets and their relationship to national health budgets and the macro-economic frameworks was weak.
- Operational work-plans were insufficiently detailed to address feasibility.
- The issue of sustainability was not addressed.

The TRP noted that the situation analyses presented in the strategy documents were generally sound, with frank discussion of the shortfalls of previous and current programs. However, the TRP said, the proposed approaches to overcoming these shortfalls tended to be conservative ("doing more of the same") rather than bold. Standard recommendations of the technical UN agencies were often not thoughtfully adapted to new challenges and specific country contexts.

The TRP noted that the time frames were very short and that this resulted in the submission of many incomplete strategies. It recommended that for future waves, more preparation time be allocated, and that countries with incomplete national strategies not be invited to participate.

The TRP also recommended that the criteria used to evaluate the national strategy documentation be made available to countries well before the beginning of the NSA process. (These criteria are listed in an

annex to the "Report of the Technical Review Panel and the Secretariat on Funding Recommendations for National Strategy Applications of the First Learning Wave.")

THE NSAs THEMSELVES

The TRP said that the main strengths of the seven NSAs it reviewed were as follows:

- The application form allowed applicants to clearly describe how they addressed, or were planning to address, the critical issues raised during the in-country visit.
- The majority of the critical issues that were raised during the in-country visit were adequately addressed by the time of the submission of the NSA.

The TRP said that the main weaknesses of the NSAs were as follows:

- Budgetary information was presented in different formats, sometimes with excessive details and in a complex structure.
- Linkages between the funding request to the Global Fund and the information contained in the national strategy were not always clearly described in the NSA.

Two of the proposals contained separate sections on health systems strengthening (HSS). The TRP said that the two HSS sections appeared to have little relationship to the disease strategy that they accompanied. They were presented as a menu of activities to be supported by the Global Fund, with very limited explanation as to how they tied into a strategic vision to improve the response to AIDS, malaria and tuberculosis in the country. The TRP said that in their current form, the HSS sections do not add value to the NSAs, and that the NSA process "may not be suited to accommodate a separate HSS section."

The Global Fund will likely refine its policies and procedures based on the experience of the first learning wave, and then do a broader roll-out of NSAs, probably starting in 2010.

The "Report of the Technical Review Panel and the Secretariat on Funding Recommendations for National Strategy Applications of the First Learning Wave" should shortly be available at www.theglobalfund.org/en/board/meetings/twentieth/documents.

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