



Independent observer
of the Global Fund

Three Excerpts from Aidspan's Round 11 Applying Guide

This article contains three excerpts from Volume 2 of “The Aidspan Guide to Round 11 Applications to the Global Fund” (see previous article).

Excerpt #1: Describing the country’s national disease programme

In Section 3.1 [of the proposal form], you are being asked to do four things: (a) describe the disease epidemiology; (b) describe the current national prevention, treatment, care and support strategies; (c) explain how these strategies are consistent with the current pattern and burden of the disease; and (d) describe the improved outcomes these strategies are expected to produce. We suggest that if the strategies have changed recently because of changing epidemiology, this should be explained. If the understanding of the epidemiology has changed recently, or if the level of political commitment to having a truly epidemiologically based strategy has changed recently, this should also be explained here.

To do all this in a maximum of two pages means that applicants will need to be succinct. We offer the following suggestions concerning how your response can be organised. These suggestions assume that there is a strategic plan in place guiding the na

Feedback

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tional response.

- Briefly summarise the epidemiology (you

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will have the opportunity to provide more details later in this section).

- Provide the title of the strategic plan, as well as the dates covered by the plan.
- Indicate when the plan was developed.
- Briefly list the objectives and/or priority areas of the plan.
- Under each objective or priority area: briefly describe the main strategies; explain how the strategies are consistent with the epidemiology; list the target populations; and briefly describe the expected outcomes.
- If there have already been some achievements as a result of the national strategy, briefly describe these, either under each objective or priority, or in a separate section. Alternatively, or in addition, describe what outcomes are expected when the strategic plan is fully implemented.

Excerpt #2: Discontinued activities (from existing grants):

The guidance from the Global Fund on the pro

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posal form encourages applicants to use the consolidated p

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proposal development process as an opportunity to re-programme funding from previous grants. No official guidance is given as to what situations might warrant such re-programming.

There are a few situations in which a CCM might propose that activities resourced through existing Global Fund grants be discontinued if its Round 11 consolidated proposal is approved.

One situation is when a strategy has been found to be ineffective, or has never been evaluated and is thought to be minimally cost effective. One example of this could be a mass communication campaign involving television, radio and billboards encouraging the general population to change behaviour. Another example could be programming for the general population of young people when only a few young people are at high risk.

A second situation is when national funding is used to fund activities that were previously funded with Global Fund grants. Examples of this could be an increase in governmental funding of opiate substitution therapy for heroin dependence, or increased governmental food supplementation for people living with HIV.

A third situation is when a change in practice occurs such that a certain set of activities is no longer needed. For example, campaigns to encourage people to attend voluntary counselling and testing services may no longer be needed as the number of people under treatment increases. Or, pamphlets on PMTCT may no longer be needed as testing practices in antenatal clinics change.

Excerpt #3: Performance framework

In the Performance Framework, the applicant is required to provide information on key indicators including, for each indicator, baselines numbers and targets for each reporting period or each year of the proposal.

The Global Fund Secretariat told Aidspace that all impact and outcome indicators listed in the logframe see Section 4.3 (a) should also be included in the performance framework. While the logframe may also contain other indicators focusing on outputs and processes, only a selected number of these indicators should be included in the performance framework preferably those that focus on outputs.

Typically, performance frameworks include 3-10 impact and outcome indicators the number is often at the high end of the range for MARPS proposals and between 10 and 15 output indicators.

In its report on lessons learned from its review of Round 10 proposals, the TRP said that applicants should focus more on outcome and impact indicators, and should make sure that these indicators are meaningful. In addition, the TRP said, applicants should ensure that they include in

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To do all this in a maximum of two pages means that applicants will need to be succinct. We offer the following suggestions concerning how your response can be organised. These suggestions assume that there is a strategic plan in place guiding the national response.

- Briefly summarise the epidemiology (you will have the opportunity to provide more details later in this section).
- Provide the title of the strategic plan, as well as the dates covered by the plan.
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- Briefly list the objectives and/or priority areas of the plan.
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Excerpt #2: Discontinued activities (from existing grants):

The guidance from the Global Fund on the proposal form encourages applicants to use the consolidated proposal development process as an opportunity to re-programme funding from previous grants. No official guidance is given as to what situations might warrant such re-programming.

There are a few situations in which a CCM might propose that activities resourced through existing Global Fund grants be discontinued if its Round 11 consolidated proposal is approved.

One situation is when a strategy has been found to be ineffective, or has never been evaluated and is thought to be minimally cost effective. One example of this could be a mass communication campaign involving television, radio and billboards encouraging the general population to change behaviour. Another example could be programming for the general population of young people when only a few young people are at high risk.

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In its report on lessons learned from its review of Round 10 proposals, the TRP said that applicants should focus more on outcome and impact indicators, and should make sure that these indicators are meaningful. In addition, the TRP said, applicants should ensure that they include indicators to measure the quality of interventions.

The framework itself is relatively easy to complete; extensive instructions are included in the template. Here are some things to watch out for, based on an analysis Aidsplan did of TRP comments on about 30 performance frameworks attached to Round 10 proposals:

- Ensure that the indicators in the performance framework are aligned with the goals, objectives and SDAs described in Section 4.3. (Concerning one Round 10 TB proposal, the TRP said, “The only impact indicator provided reflects treatment success rates, while the proposal aims to increase the number of cases notified.”)

- Ensure that your indicators are meaningful. (Concerning one Round 10 HIV proposal, the TRP said, "Number of sex workers benefiting from at least one preventive activity' is not an adequate indicator of the possible impact of behaviour change communication activities.")
- Where possible, use outcome indicators rather than process or output indicators. (Concerning one Round 10 HIV proposal, the TRP said, "The [absolute] number of HIV-positive pregnant women who receive complete ARV prophylaxis would have been better expressed as a proportion of the total number of HIV positive-pregnant women.")
- Where possible, use indicators that are already being used by national plans or strategies.
- Ensure that you include information in the performance framework on how indicators will be measured. (Concerning one Round 10 TB proposal, the TRP said, "It is unclear how the indicator Attitude of people towards tuberculosis, social cost and stigma' is to be measured. Is it by a stigma survey?")
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