

MOPAN ASSESSMENT REPORT

The Global Fund

to Fight AIDS, Tuberculosis
and Malaria

PART I
Analysis Summary



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2021-22

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EXPLANATORY NOTE

MOPAN is the only collective action mechanism that meets member countries' information needs regarding the performance of multilateral organisations (MOs). Through its institutional assessment reports, MOPAN provides comprehensive, independent, and credible performance information to inform members' engagement and accountability mechanisms.

MOPAN's assessment reports tell the story of the multilateral organisation (MO) and its performance. Through detailing the major findings and conclusions of the assessment, alongside the MO's performance journey, strengths, and areas for improvement, the reports support members' decision-making regarding MOs and the wider multilateral system.

This document is published under the responsibility of the Multilateral Organisation Performance Assessment Network (MOPAN). MOPAN is an independent body that is governed by a Steering Committee composed of representatives of all its member countries and served by a permanent Secretariat. The Secretariat is hosted at the Organisation for Economic Co-operation and Development (OECD) and is bound by its administrative rules and procedures. It is independent in terms of financing and the content and implementation of its work programme.

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PREFACE

ABOUT MOPAN

The Multilateral Organisation Performance Assessment Network (MOPAN) comprises 21 members* that share a common interest in assessing the performance of the major multilateral organisations they fund.

Through its assessments and analytical work, MOPAN provides comprehensive, independent, and credible information on the effectiveness of multilateral organisations. This knowledge base, on the one hand, contributes to organisational learning within and among the multilateral organisations, their direct beneficiaries and partners, and other stakeholders. On the other hand, MOPAN’s work helps Network members meet their own accountability needs, as well as inform their policies and strategic decision making regarding the wider multilateral system.

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ABOUT THE ASSESSMENT OF THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA

This report provides a diagnostic assessment and snapshot of the Global Fund to Fight AIDS, Tuberculosis and Malaria (the Global Fund), and tells the story of the Global Fund's performance, within its mandate. It is the second MOPAN assessment conducted for the Global Fund, following the first completed in 2015/16. Building upon previous assessments in 2015/16, this assessment covers the period from 2017 to December 2021.

The assessment of the Global Fund was conducted through a rigorous process and took a collaborative approach, by integrating the perspectives of a wide range of stakeholders. This collaborative approach provides multilateral organisations and Network members with a robust source of evidence-based guidance on the areas for improvement to achieve enhanced organisational performance.

The assessment draws on multiple lines of evidence (documentary, survey and interviews) from sources within and outside the organisation to validate and triangulate findings across 16 key performance indicators which are broken down into more than 220 individual indicators. The standard assessment framework has been developed based on international best practice, and further customised considering the specific mandate and priorities of the Global Fund. Moreover, the assessment framework has also been revisited to capture the COVID-19 impact on the Global Fund's mandate and operations, as well as to gauge to what extent the Global Fund has been able to adapt and leverage its internal processes to respond to COVID-19 in an agile manner.

The following operating principles guided the implementation of this assessment. MOPAN's Methodology Manual¹ describes in detail how these principles are realised.

Operating principles

MOPAN will generate credible, fair and accurate assessments through:

- **implementing** an impartial, systematic and rigorous approach;
- **balancing breadth with depth**, adopting an appropriate balance between coverage and depth of information;
- **prioritising** quality of information over quantity;
- **adopting a systematic approach**, including the use of structured tools for enquiry/analysis;
- **providing transparency**, generating an "audit trail" of findings;
- **being efficient**, building layers of data, seeking to reduce burdens on organisations;
- **ensuring utility**, building organisational learning through an iterative process and accessible reporting;
- **being incisive**, through a focused methodology, which provides concise reporting to tell the story of an organisation's current performance.

Source: MOPAN 3.1 Methodology Manual, www.mopanonline.org/ourwork/themopanapproach/MOPAN_3.1_Methodology.pdf

1. MOPAN 3.1 methodology manual can be accessed on http://www.mopanonline.org/ourwork/themopanapproach/MOPAN_3.1_Methodology.pdf.

The assessment report is composed of two parts: the Analysis Summary and the Technical and Statistical Annex.

Part I: Analysis Summary is structured into four chapters. **Chapter 1**, which introduces the organisation and its context, is followed by **Chapter 2**, which presents a high-level overview of key findings. **Chapter 3** takes a detailed look at findings; and **Chapter 4** provides information about the assessment methodology and its process.

Part II: Technical and Statistical Annex of the Global Fund (2022) contains the detailed underlying analysis of each score, the list of supporting evidence documents, as well as the summarised results of the external partner survey that fed into this assessment.

STAGES OF THE MOPAN ASSESSMENT CYCLE

Stage 1: INCEPTION	The inception phase seeks to ground the assessment in an understanding of an organisation's mandate, operating model and infrastructure; how it addresses cross-cutting issues; and how it interprets and tracks results and performance.
Stage 2: EVIDENCE COLLECTION	This stage focuses on the collection of robust, relevant evidence against the assessment framework from three streams (document review, interviews and surveys) to minimise information gaps and ensure that assessment findings are credible.
Stage 3: ANALYSIS	In this phase, the data collected are synthesised and analysed to derive findings that are supported by clear and triangulated evidence. Complementary data are collected as needed.
Stage 4: REPORTING	As the assessment report is being drafted, the organisation verifies factual findings, and both the organisation and the Institutional Lead (IL) comment on the analysis. The MOPAN Secretariat and an external expert, where possible, carry out quality assurance. Key findings are presented to organisation and MOPAN members. A written response from the organisation's management concludes this stage.

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The assessment was conducted in co-operation with Itad Limited/Universalialia. Dr. Tim A. Clary led the assessment and is the principal author of the report. A team comprised of Esther Rouleau, Ekaterina Shaleva, Joseph Thompson, and Danielle Freed also supported the assessment and contributed to the final report. The report also benefitted from an external peer review, conducted by Sam McPherson and Katrina Rojas, and external quality assurance, provided by Dr Julia Betts. Moira Reddick provided quality assurance for the areas related to sexual exploitation and abuse and sexual harassment.

The external partner survey was administered by Cristina Serra-Vallejo from the MOPAN Secretariat, who, together with Tanya Singh, also supported the implementation and finalisation of the survey.

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ABBREVIATIONS AND ACRONYMS

A2F	Access to Funding	NGO	Non-governmental organisation
ACT-A	The Access to COVID-19 Tools Accelerator	NSP	National Strategic Plan
AFC	Audit and Finance Committee	OECD	Organisation for Economic Co-operation and Development
AFD	Annual funding decision	OIG	Office of the Inspector General
AGYW	Adolescent girls and young women	OPEX	Operating expenditures
AIP	Annual Implementation Plan	OPM	Operational Policy Manual
AMA	Agreed management action	P&A	Performance and accountability
C19RM	COVID-19 Response Mechanism	PCE	Prospective Country Evaluation
CCM	Country Coordinating Mechanism	PCFC	Policy to Combat Fraud and Corruption
COE	Challenging operating environment	PEPFAR	President's Emergency Plan for AIDS Relief
CRG	Community, Rights, and Gender	PPR	Pandemic Preparedness and Response
DoA	Delegation of authority	PR	Principal Recipient
ERM	Enterprise Risk Management	PSEAH	Prevention of sexual exploitation, abuse, and harassment
ESCC	Environmental sustainability and climate change	PU/DR	Progress Update / Disbursement Request
GAC	Grants Approval Committee	RSSH	Resilient and sustainable systems for health
GAVI	The Vaccine Alliance	SDG	Sustainable Development Goals
GMD	Grant Management Division	SEA	Sexual exploitation, and abuse
GOS	Grant Operating System	SEAH	Sexual exploitation, abuse, and harassment
HRG	Human rights and gender	SI	Strategic Initiative
HSS	Health system strengthening	SO	Strategic Objective
IATI	International Aid Transparency Initiative	SOP	Standard operating procedure
IRM	Integrated Risk Management	SPH	Strategy and Policy Hub
ISA	International Standards on Auditing	STC	Sustainability, transition, and cofinancing
KP	Key population	TB	Tuberculosis
KPI	Key Performance Indicator	TERG	Technical Evaluation Reference Group
KVP	Key and vulnerable populations	ToR	Terms of reference
LFA	Local Fund Agent	TRP	Technical Review Panel
M&E	Monitoring and evaluation	UHC	Universal health coverage
MDB	Multilateral development bank	UN	United Nations
MEC	Management Executive Committee	UNAIDS	Joint United Nations Programme on HIV and AIDS
MECA	Monitoring and Evaluation and Country Analysis	UNGA	United Nations General Assembly
MEL	Monitoring, evaluation, and learning	UNGASS	United Nations General Assembly Special Session
MI	Micro-indicator	USD	United States dollar
MO	Multilateral organisation	VfM	Value for money
MOPAN	Multilateral Organisation Performance Assessment Network	WHO	World Health Organisation
NFM	New Funding Model		

THE GLOBAL FUND
PERFORMANCE AT A GLANCE



THE GLOBAL FUND: PERFORMANCE AT A GLANCE

For the Global Fund, 2020 and 2021 were pivotal years. Perhaps at no other time has the Global Fund faced as many daunting challenges as since the onset of the COVID-19 pandemic. The first human cases of COVID-19 were identified in December 2019, and by March 2020, the [World Health Organisation \(WHO\)](#) declared a [pandemic](#). Not only did the Global Fund have to contend with its own operational challenges, such as remote work and travel shutdowns, it also had to grapple with sustaining, if not increasing, gains against HIV, tuberculosis (TB), and malaria. The Global Fund's decision not to revise downwards its targets for HIV, TB, and malaria testifies to its commitment to the three diseases. Further, it bore the responsibility of providing approximately USD 4.2 billion in COVID-19 grants to countries in need. That it was able to do so, while ensuring alignment with country-led processes, is a testament to its agility, responsiveness, and diligence.

In November 2021, the Global Fund Board approved a new strategy for 2023-28. While leaving the Fund's mandate relatively unchanged (its primary goal is still to end AIDS, TB and malaria), it has new contributory and evolving objectives and a clear emphasis on a people-centred approach. These new developments will require the organisation to revisit some facets of its business model, such as staff qualifications, its internal structure, and operating guidelines to ensure that it remains fit for purpose. The findings of the MOPAN assessment are intended to contribute to that discussion.

The evolution of the Global Fund is ongoing as is the global health landscape. Since it was founded 20 years ago, the Global Fund has steadily sought ways to improve its performance and mature as an organisation, while remaining focused on its core mandate to fight the three devastating infectious diseases. However, as an organisation designed to address three specific diseases, it has had to find a balance between that primary goal and contributing to universal health coverage (UHC). This has become increasingly pressing in light of both the United Nation's 2019 Political Declaration on UHC, as well as the gaps in health systems revealed by the COVID-19 pandemic. The Global Fund has remained a committed partner within this context as new partnerships emerged (e.g. the Global Fund is a founding partner with WHO of the Access to COVID-19 Tools Accelerator or ACT-A) while other long-time partners, such as the Joint United Nations Programme on HIV and AIDS (UNAIDS), are reviewing and revising their strategies. Furthermore, in its 2023-28 strategy the Global Fund is strengthening its commitment to building resilient, sustainable systems for health (RSSH) and seeking to hasten the shift away from siloed interventions towards integrated, people-centred models to help countries progress towards delivering UHC.

The Global Fund boasts strengths that can serve as examples for other organisations – such as operational effectiveness, inclusivity and, in particular, partnership. Partnership is one of the Global Fund's four core principles.¹ At the country level, this manifests itself in the commitment to ensuring that funding requests are led by in-country stakeholders and involve a broad range of stakeholders throughout the country dialogue process. Indeed, while the Global Fund may set general parameters for the grants it funds, it is ultimately its partner countries who drive those decisions. This approach requires the Global Fund to continually assess whether its internal- and external-facing operations are fit for purpose and, further, to question whether it is well-placed to respond to the particular stressors and challenges of the COVID-19 pandemic. Finally, it should be noted that the Global Fund's principle of inclusive partnerships in the composition of its Board, at the country level via Country Co-ordinating Mechanisms (CCMs), its Partnership Forum, and in its insistence that the populations it serves have a seat at the table for all discussions, is both ground-breaking and atypical. While upholding and implementing the partnership principle can be challenging, it has nevertheless advanced how development work is done, empowered communities and civil society and, it could be argued, more broadly influenced the countries in which it has funded grants.

1. Partnership, country-ownership, performance-based funding, transparency.

The Global Fund’s continued success, including overcoming COVID-19 challenges, is critical for all global health stakeholders. The Global Fund has been and remains one of the largest funders of global health. It accounts for approximately 25% of all international financing for HIV programmes (10% of available resources), 77% of all international financing for tuberculosis (12% of available resources), and 56% of all international financing for malaria programmes (39% of available resources). That it is has been able to raise and manage that level of funding, while also significantly raising the profile of communities and civil society and its ability to participate in decision-making processes, makes it a vital organisation within the global health architecture, especially with respect to the three diseases. Its success, or lack thereof, has implications for all vested stakeholders across the global health landscape, as well as those interested in bringing about societies which are more transparent, inclusive, and democratic. Similarly, its ability to mitigate the impacts of COVID-19 not only on its on-going programmes, but to ensure that health systems are better prepared to manage the next pandemic is crucial. As part of the global COVID-19 response, it approved more than USD 4 billion in grant support to low- and middle-income countries for:

- reinforcing their national COVID-19 responses
- mitigating COVID’s impact on HIV, TB and malaria programmes
- perhaps most importantly, making improvements to health and community systems to help fight COVID-19, HIV, TB and malaria.

Because it had pre-existing grants in more than 100 countries, it was able to either quickly reprogramme some of that funding or provide additional funding through its implementing partners (Principal Recipients); thus providing a rapid response, especially important during the early stages of the pandemic. While the full impact of the COVID-19 pandemic on HIV, TB, and malaria treatment and prevention coverage is still to be determined, some initial results have shown that, for the first time in the Global Fund’s history, key programmatic results across the three diseases declined. The easy choice for the Global Fund would have been to revise its targets for the three diseases downward. However, that would have called into question its commitment to the people it serves – the poor, the vulnerable, the marginalised, and those without access to health care, all disproportionately affected by COVID-19. Instead, through its partnership it bolstered its responses to show both flexibility and resolve in addressing the short-term challenge of COVID-19, while adhering to its long-term goal of ending the HIV, TB, and malaria epidemics.

Alongside the areas in which the Global Fund performs well, there are others that it needs to strengthen. Despite being strategic objectives in its 2017-22 Strategy, the building of resilient and sustainable systems for health (Strategic Objective 2) and promoting and protecting human rights and gender equality (Strategic Objective 3) underperformed in comparison to its other two strategic objectives. As noted above, the global health landscape has evolved to focus on UHC, and underpinning those efforts is the need for resilient and sustainable systems for health. For most of the assessment period, which includes the Global Fund’s 2017-22 Strategy, its Strategic Objective 2 “Build Resilient and Sustainable Systems for Health” did not have the same results as, for example, Strategic Objective 1 “Maximize Impact Against HIV, TB, and Malaria” nor Strategic Objective 4 “Mobilize Increased Resources”. While this may be due in part to country counterparts not prioritising RSSH within their funding requests, it does call into question it being a co-equal Strategic Objective. Indeed, within the new strategy (2023-28), RSSH is now a mutually reinforcing contributory objective to the overall goal of ending AIDS, TB, and malaria with a change in wording to “Maximising People-centred Integrated Systems for Health to Deliver Impact, Resilience and Sustainability”. Similarly, the results for Strategic Objective 3 (Promote and Protect Human Rights and Gender Equality) as part of the 2017-22 Strategy are mixed, and it too is now a mutually reinforcing contributory objective (Maximising Health Equity, Gender Equality and Human Rights).

Further work is needed to fully embed a culture of learning. While the Global Fund has recently taken steps to strengthen its approach to learning, particularly learning from evaluations, it endorsed those steps only at the end of the assessment period. For example, there was no overarching monitoring and evaluation (M&E) framework nor an

evaluation strategy; although M&E documents were under development during the assessment, as well as a revision to its independent evaluation structure and function. Of particular concern is that evaluation results are not consistently shared, neither internally within the Global Fund Secretariat, nor are they proactively shared with external partners, particularly at the country level. The Global Fund generates a tremendous amount of data, information, lessons learned, and best practices and there are obvious benefits to the global health community in sharing and learning from the Global Fund's efforts.

Looking forward. As it looks to its future, including its role in strengthening and accelerating the 2030 Agenda for Sustainable Development, and the possible epidemiological, environmental, and financial transformations within its implementing countries, the Global Fund will need to remain agile and responsive. To date, it has shown its capability and capacity to do so, and it must remain prepared to evolve its strategic objectives, its operating model, and, perhaps, its core principles as new challenges emerge.

ABOUT THE GLOBAL FUND

The Global Fund to Fight AIDS, Tuberculosis and Malaria (or the Global Fund) was created in 2002 to raise, manage and invest the world's money in response to three of the deadliest infectious diseases the world had encountered. The vision of the Global Fund, per its 2017-22 Strategy, is "A world free of the burden of AIDS, tuberculosis and malaria with better health for all"² and its mission is to attract, leverage and invest additional resources to end the epidemics of HIV, TB and malaria and to support attainment of the Sustainable Development Goals (SDGs).

As an international financing organisation, the Global Fund mobilises and invests more than USD 4 billion a year via its grants to support programmes developed and run by local counterparts. Since its creation to April 2022, the Global Fund has disbursed more than USD 54.2 billion in the fight against HIV, TB, and malaria and for programmes to strengthen systems for health across more than 155 countries, including regional grants. In response to the COVID-19 pandemic it has approved more than USD 4 billion to support 108 countries and multi-country programmes. It is one of the largest funders of global health.

All Global Fund staff are based at the Secretariat in Geneva, Switzerland. It does not have offices in the countries in which it invests its grants; thus, it works with and relies on a number of in-country partners (primarily Principal Recipients or PRs, Country Coordinating Mechanisms or CCMs, and Local Fund Agents of LFAs) to ensure successful implementation and oversight of activities. As of April 2022, it has approximately 700 full-time employees, as well as those of defined duration, temporary employees, and contractors/consultants. The Secretariat staff represent more than 100 nationalities with a wide variety of professional backgrounds.

KEY FINDINGS

The Global Fund continued to evolve and mature during the 2017-22 assessment period. It has consistently reviewed its internal structures to ensure that they are fit for purpose when faced with new situations and challenges, which has been of particular importance during the COVID-19 pandemic. There is still room for improvement, however, especially in terms of how it can learn more effectively from the findings which its programmes generate, and how it can help its partners do so. Nevertheless, it appears to be on a steady upward curve in meeting its own goals and objectives and contributing to improvements in the global health landscape.

² In its 2023-28 Strategy, the Global Fund's vision is "a world free of the burden of AIDS, tuberculosis and malaria with better, more equitable health for all" and its mission is "to attract, leverage and invest additional resources to end the epidemics of HIV, tuberculosis and malaria, reduce health inequities and support attainment of the Sustainable Development Goals."

Of note is that in November 2021, the Global Fund's Board approved a new strategy for 2023-28 which, while not significantly deviating from past efforts, places greater emphasis on a people-centred approach and incorporates new areas of concern such as pandemic preparedness and response (PPR), and environmental sustainability and climate change (ESCC). It has also begun efforts in strengthening its monitoring, evaluation and learning (MEL) systems by moving forward with the development of an overarching M&E framework. While these efforts came at the end of the assessment period, they are recognised here for their potential to further improve the five performance areas which were part of the MOPAN assessment, namely:

- strategic management
- operational management
- relationship management
- performance management
- results.

It will be of great interest to examine during its next MOPAN assessment how those recent developments have shaped the Global Fund's journey.

Strategic Management: a fluid approach, including significant recent developments, with a need to ensure equal prioritization amongst all higher-level objectives.

The Global Fund continues to evolve its Strategy, organisational architecture, and supporting systems to deliver its vision. In November 2021, a new strategy (2023-28) further emphasised certain principles, such as a people-centred approach, while notably adding PPR to its objectives. Both its current and forthcoming strategies clearly position it within the global health landscape, but only with the development of its new strategy were the Global Fund's comparative advantages clearly articulated. Interviewed stakeholders recognised them as being the Global Fund's inclusivity, particularly of communities, its focus on results, and adaptability.

The Global Fund's organisational architecture and operational model support implementation and provide accountability for results, although there is room for improvement. Particular concerns are:

- that objectives such as human rights and gender (HRG) and RSSH have been under-resourced in terms of Secretariat staffing;
- that staff have not been sufficiently capacitated to better engage with country stakeholders;
- that, even though Country Teams form the basic organisational unit for managing grants, there are notable limitations for internal collaboration across divisions and departments given the complexity of the grants and limited bandwidth of staff to fully engage with all of the differentiated countries (High Impact versus Core versus Focus); and
- that ESCC issues are only addressed explicitly in the new strategy, although there have been some previous efforts in this area.

The Global Fund intends to contribute to both the wider global development agenda and disease-specific objectives. Linkage to global commitments, such as the SDGs, has not, however, been plain to see during the 2017-22 strategy period. An M&E framework is under development and should provide a better overview of contributions. The Global Fund's financial framework is also evolving. It now uses a holistic approach to programming and operational expenditure budgets, though results are still to be fully evaluated.

Operational Management: fit for purpose, responsive to emerging challenges, with some areas still a work in progress.

The Global Fund has developed processes to ensure that its organisational structure remains fit for purpose and supports the Strategy. For example, the new Strategic Workforce Planning Initiative, the introduction of 360degree feedback, and internal restructuring have made it more responsive to emerging needs, such as those stemming from COVID-19. However, challenges remain in managing poor staff performance and ensuring that top talent is promoted.

The Global Fund has a robust and increasingly diverse resource mobilisation strategy, implemented through its replenishment cycle and domestic resourcing policies. Its funding model uses transparent criteria that consider a country's income level and disease burden to ensure that allocations are aligned with the Global Fund's aim of having the greatest impact and respond to countries' needs. The Global Fund's control framework resulted in a grant absorption rate of 81% against a 75% target for 2018-20, and the portfolio optimisation process it has introduced reallocates underutilised funds to grants with higher absorption. It also introduced the COVID-19 Response Mechanism (C19RM) in response to the pandemic.

The Office of Inspector General (OIG) is responsible for providing assurance of the Global Fund's internal controls. However, resolution of nearly one-third of the AMAs by the Secretariat is long overdue (more than six months) as of November 2021. The implementation of the AMAs was affected by the COVID-19 pandemic. The percentage of long overdue AMAs was much lower (approximately 8.7%) prior to the COVID-19 pandemic (November 2019). Although the Global Fund has an anti-corruption and fraud policy, and functioning whistleblowing mechanisms, its Board has raised concerns over delays in the policy's implementation. Its roll-out has begun and is expected to be completed in 2024.

The Global Fund has recently adopted a victim/survivor-centred approach to sexual exploitation, abuse and harassment (SEAH), but it is too early to assess how effectively it has been applied. It offers regular training on related topics, and its Codes of Conduct contain explicit SEAH-related prohibitions and are aligned to international best practice. While dedicated SEAH resources and structures are being established at the Secretariat, measures need strengthening at the country level, especially embedding prevention measures within programmes. Sexual exploitation and abuse and sexual harassment are often conflated in Global Fund's strategic documents, making it hard to distinguish between the approaches to preventing and responding to each.

Relationship management: a robust core principle which requires vigilance to ensure it remains relevant and applicable.

Partnership is a core founding principle of the Global Fund and guides its operations and interactions. The organisation interacts with international partners at the global level, and with in-country stakeholders through CCMs whose inclusivity is one of the distinguishing features of the organisation. The Global Fund has committed to joint planning, programming, and to budget transparency. When a country submits a funding request and designs interventions (the Global Fund, in general, neither develops country strategies nor designs interventions), the potential implementing country is required to consult with partners and build upon existing programming and national plans. The process of ensuring alignment between Global Fund objectives and country priorities is robust and includes reviews by CCMs, implementing partners, Global Fund Secretariat Country Teams, and independent technical experts.

There are a few areas which the Global Fund could strengthen to ensure that its partnership model remains fit for purpose. For example, the opportunity to strengthen South-South cooperation beyond grant activities should not be overlooked. Although there were two South-South Strategic Initiatives (SIs) during the 2017-19 and 2020-22 funding periods, these were comparatively small SIs.

And while accountability is recognised by stakeholders as a principle that the Global Fund abides by, there is limited documentation that unequivocally states that one of those accountabilities is to its beneficiaries (e.g., implementing

countries, and the end-users of supported programmes). Clear recognition of this accountability merits further attention. Finally, the Global Fund has strong processes in place to identify, assess and report on risks, and reports to its Board on 22 types of risks. It has recently updated its Risk Appetite Framework, allowing the organisation to take on increased levels of risk in the context of COVID-19 in pursuit of its strategic goals and targets.

PERFORMANCE MANAGEMENT: AN AREA FOR IMPROVEMENT, WITH STRENGTHENING EFFORTS ALREADY UNDERWAY

The Global Fund is a performance-based organisation and defines results to guide its operations, including funding decisions; although there have been, at times, challenges in implementing some of those decisions. It has invested in improving the quality and availability of data and shifted its focus from project-level goals to higher-level results. There is clear accountability for achieving Key Performance Indicators (KPI), including at country level through grant-specific performance frameworks. However, existing tools are not fully effective at measuring all outcomes (RSSH in particular), as outcome-level results may not be reflected within the three-year grants. Reporting processes ensure most data are available for corporate reporting and planning, though limitations in the design of some performance data have led to poor operational use/uptake. While performance data inform intervention adjustments, it is not clear if it is used consistently as it is ultimately the responsibility of country stakeholders to follow up on actions and on Country Teams (CTs) to feed lessons into the next funding cycle.

To address challenges in the current evaluation framework, a new model for evaluation was approved at the November 2021 Board meeting with the intent of contributing to better integration of M&E mechanisms. Beyond this, the Global Fund needs to strengthen its organisational culture of learning from evaluations, including establishing a mechanism for distilling and disseminating lessons learned that goes beyond the publication of evaluations and management responses, especially for sharing information with in-country partners.

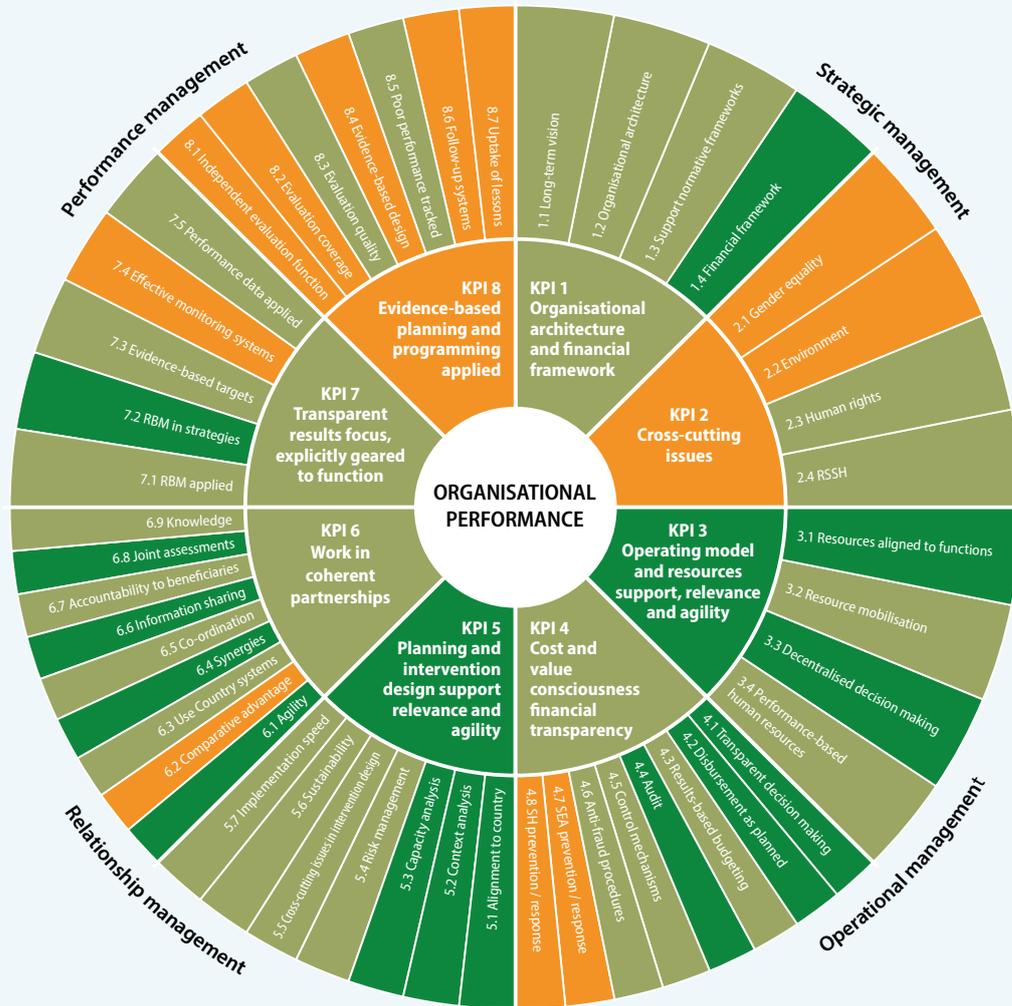
Results: generally on track and the decision not to revise targets downwards when faced with the COVID-19 pandemic attests to the Global Fund's commitment.

Progress across Global Fund KPIs has been mixed. Only Strategic Objective 4 (mobilising increased resources), which also includes the Global Fund's financial performance, was consistently on track for all of its KPIs. The decision not to revise targets in light of COVID-19 attests to the Global Fund's commitment to the three diseases, but has led to gaps between results and targets. Strategic Objective 1 (Maximise impact against HIV, TB and malaria) has been particularly affected. The Global Fund also has had issues with meeting targets for KPIs on gender equality and women's empowerment, human rights, and RSSH. Furthermore, when it comes to programming and corresponding KPI results for key and vulnerable populations (KVPs), reviews commissioned by the Technical Evaluation Reference Group (TERG) identified some areas of concern, such as a lack of well-targeted interventions and the need to involve KVPs more closely in implementation.

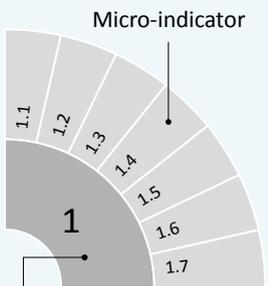
Monitoring data for the efficient delivery of results are positive for both resource and cost-efficiency. Implementation is timely, although some inefficiencies in grant development processes, misalignment of budgets and timelines, and weak co-ordination between and within grants can still lead to delays. There has been notable progress towards financial sustainability through increased domestic resource mobilisation, but less so in ensuring commitment and capacity for programmatic sustainability. Although the Global Fund has supported transition readiness (i.e., a shift from Global Fund to domestic financing) in some countries, challenges remain in planning for long-term sustainability.

So that readers can take in the Global Fund's performance ratings at a glance, they are summarised in graphic form (Figure 0.1). The graphic breaks down scores for each MOPAN KPI and micro-indicator (MI) across all five performance areas. It also zooms in on the scoring boundaries and shows an example of the composition of KPIs and MIs.

FIGURE 1: THE GLOBAL FUND'S PERFORMANCE RATING SUMMARY



How to read these charts



Key Performance Indicator

- **Highly satisfactory** (3.51-4.00)
- **Satisfactory** (2.51-3.50)
- **Unsatisfactory** (1.51-2.50)
- **Highly unsatisfactory** (0-1.50)
- **No evidence / Not applicable**



PART I

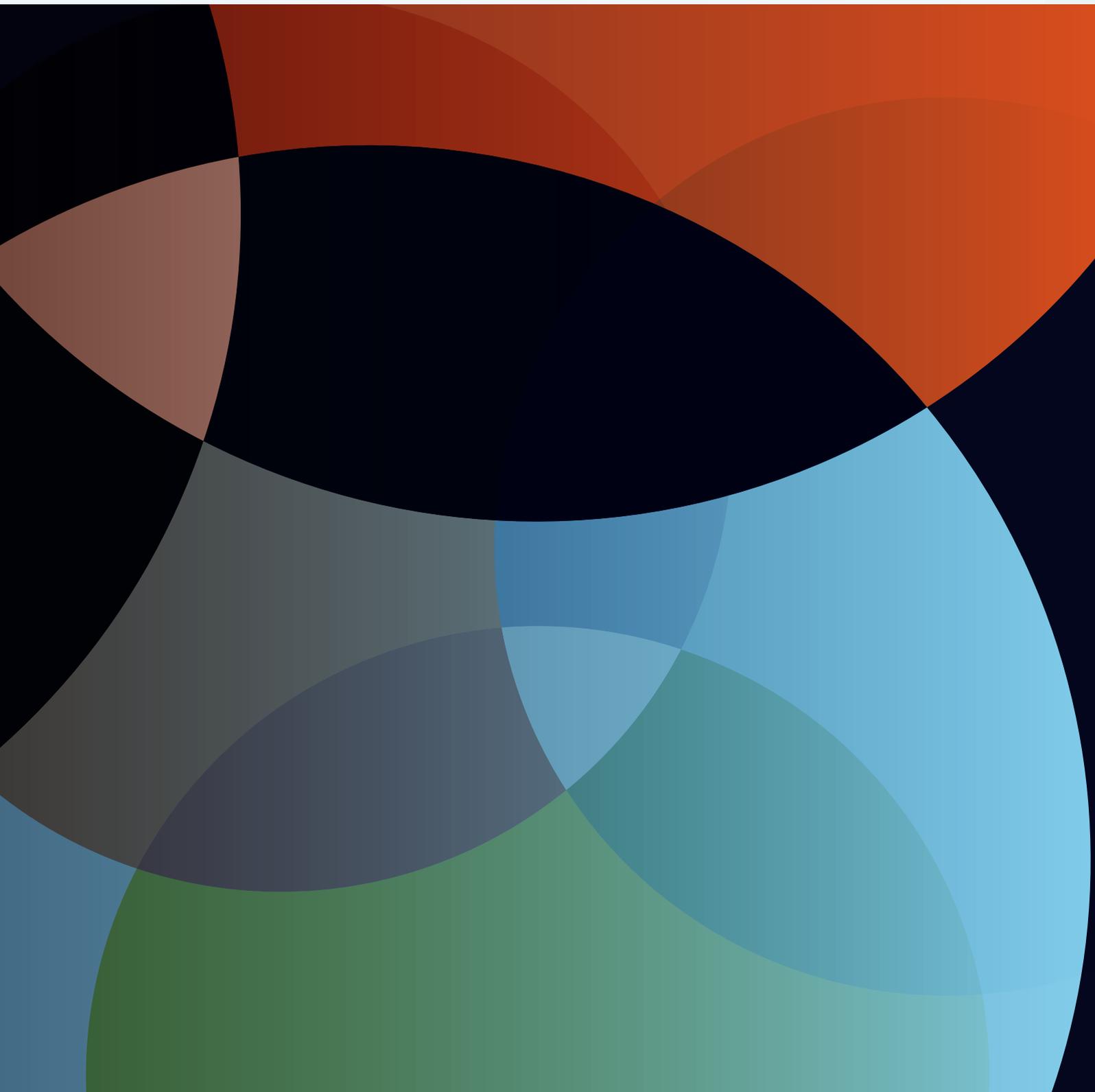
Analysis Summary

Key findings

Part I introduces the organisation being assessed and its context. It then provides a high-level overview of key findings, followed by further details. Finally, it outlines the main tenets of the assessment process and methodology.



BACKGROUND TO THE ORGANISATION



INTRODUCING THE GLOBAL FUND

Mission and mandate

The Global Fund to Fight AIDS, TB and Malaria (or the Global Fund) was created in 2002 to raise, manage and invest the world's money in response to three of the deadliest infectious diseases the world had encountered. The idea for the Global Fund arose from a wellspring of grassroots political advocacy coming face-to-face with the urgent need for global leadership. The idea for the Global Fund was initially discussed at a G8 summit in Japan in 2000. Commitments began to coalesce at the African Union summit in April 2001 and continued at the UNGASS in June of that same year, as well as the adoption of the UNGA Special Resolution on HIV/AIDS in August 2001. A Transitional Working Group, encompassing countries from the global south and donor countries, NGOs, the private sector and the UN system, was established to determine the principles and working modalities of the new organisation, and the Global Fund came into being in January 2002.

As an international financing organisation, the Global Fund mobilises and invests more than USD 4 billion a year to support programmes run by local experts. In partnership with governments, communities and civil society, technical agencies, the private sector and people affected by the diseases, it seeks to overcome barriers and embraces innovation. Implementing countries take the lead in determining where and how to best address the three diseases based their national strategic plans. The Fund operates according to four overriding principles; namely, 1) partnership; 2) country ownership and being responsive to country needs; 3) performance-based funding; and, 4) transparency. All audits and investigations by the OIG are openly published and the Global Fund also fully supports and participates in the International Aid Transparency Initiative (IATI).

Per its 2017-22 Strategy, the vision of the Global Fund is a world free of the burden of AIDS, TB and malaria with better health for all, and its mission is to attract, leverage and invest additional resources to end the epidemics of HIV, TB and malaria and to support attainment of the SDGs.¹ Further, as noted in its strategy and other core documentation, the Global Fund fully aligns with partner plans and with the SDGs adopted by all member states of the United Nations in September 2015 (the 2030 Agenda for Sustainable Development). As such, the Global Fund contributes to the 2030 Agenda through the principle of shared responsibility, the approach of inclusive, multisectoral participation, and the priorities as outlined in the SDG goals. The 2017-22 Strategy emphasises its contribution to achieving SDGs 1, 3, 5, 10, 16, and 17 and recognises the need to work across sectors with the strategic enablers of innovation, differentiation along the development continuum, and mutually accountable partnerships. The Strategy is supported by four core objectives (Figure 2).

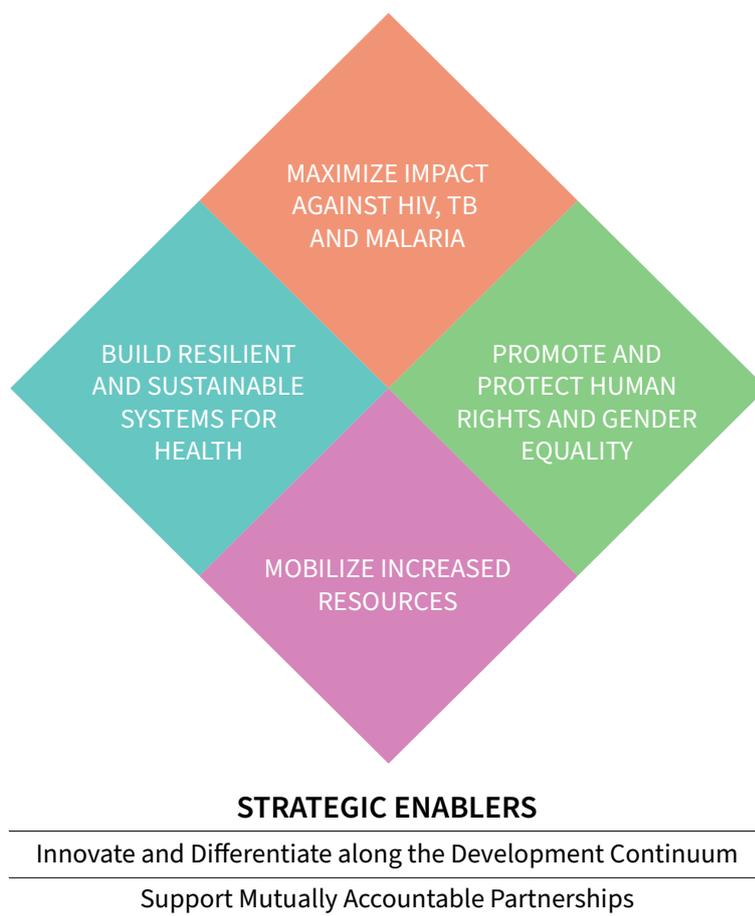
Each of the four strategic objectives (SOs) are underpinned by a number of sub-objectives and supported by two strategic enablers. The strategic objectives and sub-objectives provide a path outlining how the Global Fund will work with partners to ensure that the response globally and at country level is inclusive, impactful and sustainable. Achieving progress in any of these strategic objectives is interlinked with the others. The Global Fund measures progress on implementation of this strategy through KPIs undertaken at all levels of the Global Fund partnership.

The Global Fund's current strategy expires in 2022 and, as such, it developed and approved its new strategy in November 2021. Throughout 2020, the Global Fund held multiple consultations, meetings, retreats (most were done virtually) culminating in the 6th Partnership Forums in February and March 2021 and attended (virtually) by approximately 350 representatives from across the Global Fund partnership. These forums brought together stakeholders to review inputs, evidence, and guidance received on strategy development to help identify areas of future focus for the next Global Fund Strategy.

1. Per its 2023-28 Strategy, the Global Fund's vision is "a world free of the burden of AIDS, tuberculosis and malaria with better, more equitable health for all" and its mission is "to attract, leverage and invest additional resources to end the epidemics of HIV, tuberculosis and malaria, reduce health inequities and support attainment of the Sustainable Development Goals."

FIGURE 2. THE GLOBAL FUND'S 2017-22 FOUR STRATEGIC OBJECTIVES

INVESTING TO END EPIDEMICS



Source: (GF, 2016a)

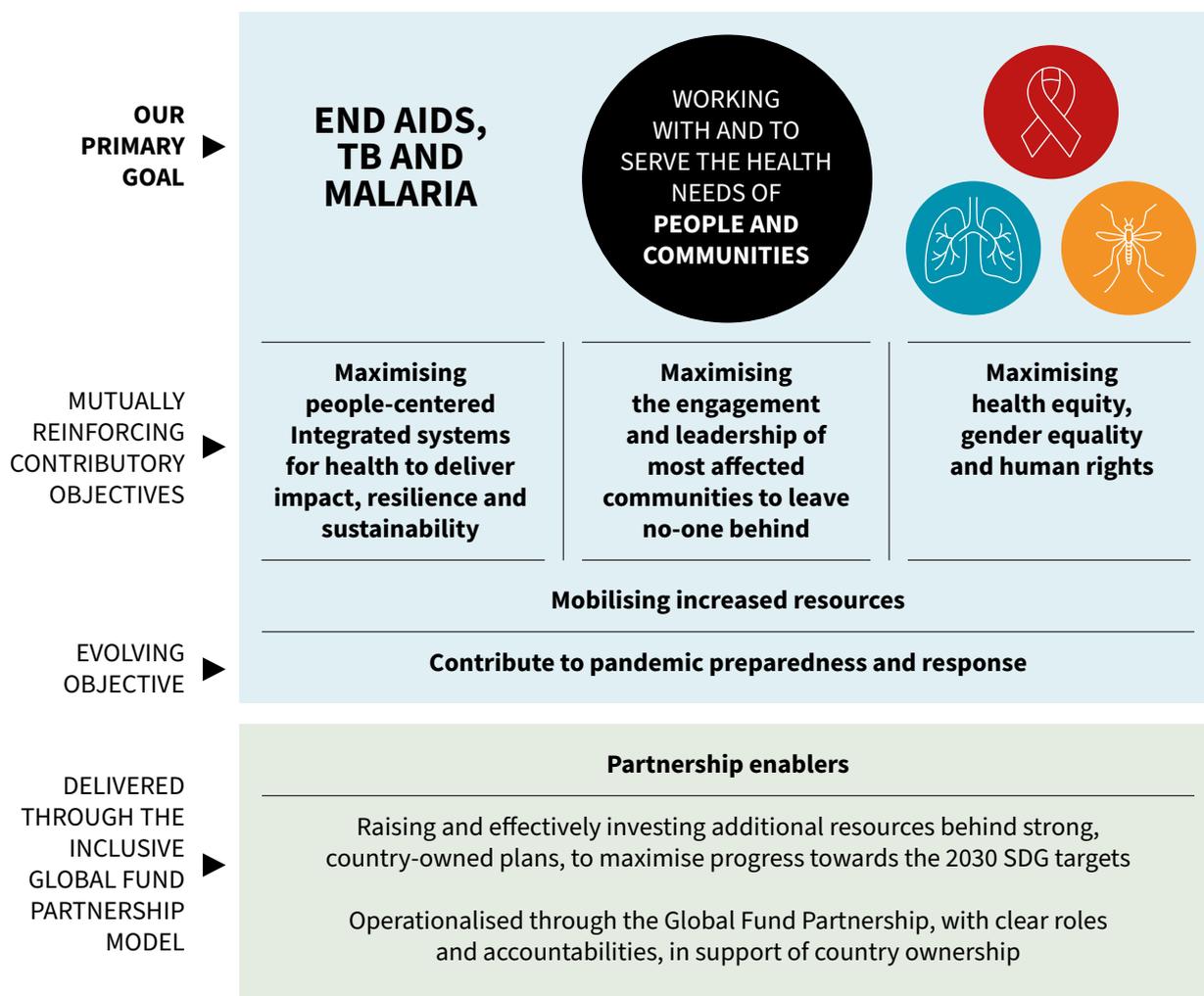
The 2023-28 strategy, while not significantly different from the previous one, places communities front and centre as a core priority (Figure 3). The primary goal remains the focus on HIV, TB, and malaria, while RSSH and HRG are contributory objectives and PPR an evolving objective.

Governance arrangements

The Global Fund is an international financing institution initially formed as a Swiss foundation in 2002. Its status has evolved through an ongoing process of legal recognition by various national governments and international organisations. They include:

- The Swiss Federal Council: It accorded the Global Fund international organisation status comparable to that of UN organisations, through the 2004 Headquarters Agreement.
- The United States: It first recognised the Fund as a tax-exempt organisation under Section 501(c)(3) of the Internal Revenue Code. Then, through an executive order in 2006, it designated the Global Fund a public international organisation in accordance with the United States International Organisations Immunities Act.

FIGURE 3. THE GLOBAL FUND'S 2023-28 STRATEGY FRAMEWORK



Source: (GF, 2021a)

- The European Commission: Through a 2014 Commission Decision, it considers the Global Fund an international organisation for the purposes of managing European Union funds.
- States which are implementers of Global Fund programmes in accordance with the Agreement on Privileges and Immunities of the Global Fund to Fight AIDS, TB and Malaria, a treaty pursuant to the Vienna Convention on the Law of Treaties, or through provisions in their own national legislation.²

The Global Fund is overseen by its Board which embodies its partnership approach to global health and includes members (voting and non-voting) from constituencies such as several Ministries of Foreign Affairs, bilateral donors (the European Commission, the Foreign, Commonwealth and Development Office of the United Kingdom, PEPFAR, etc.), UN organisations (UNAIDS, WHO, etc.) private foundations (e.g. the Bill and Melinda Gates Foundation), other multilateral organisations (the World Bank), and regional representation from the implementing countries and communities the Global Fund serves. The Board incorporates leading stakeholders in an inclusive, effective way in its fight to help end the three epidemics. The Global Fund's guiding philosophy and the day-to-day work of the Board embrace shared responsibility and a strong commitment by all involved. The core functions of the Board include:

2. Not all implementing countries have granted Privileges and Immunities to the Global Fund.

- strategy development
- governance oversight
- commitment of financial resources
- assessment of organisational performance
- risk management
- partnership engagement, resource mobilisation and advocacy.

The Board includes 20 voting members, with implementing partners and donors equally represented. NGOs, communities affected by the three diseases, the private sector, and private foundations are also represented. In addition, there are eight non-voting members, including the Board Chair and Vice-Chair; representatives of partner organisations (such as WHO and World Bank), and Additional Public Donors. The Board (and its standing committees) function according to Global Fund bylaws, the Operating Procedures of the Board, most recently updated in November 2019, and Committees and the committees' respective Charters. The Board's three standing committees are: 1) Audit and Finance; 2) Ethics and Governance; and, 3) Strategy. It also has five advisory and operational structures which either report directly to the Board or via an intermediary Committee. They are the:

- [Global Fund Secretariat](#)
- [Technical Evaluation Reference Group \(TERG\) which reports via the Strategy Committee](#)
- [Technical Review Panel \(TRP\) which reports via the Strategy Committee](#)
- [Office of the Inspector General](#)
- [Privileges and Immunities Advisory Group which reports via the Ethics and Governance Committee.](#)

Organisational structure

The staff of the Global Fund Secretariat conduct day-to-day operations, focusing on the core business of managing grants and collaborating broadly with partners for the collective aim of achieving impact. The work of the Global Fund staff includes, for example:

- managing grants
- finance, controlling and accounting
- co-ordinating strategy, policy, and data management
- donor relations, advocacy, private sector engagement and communications
- ensuring ethical accountability
- co-ordinating the application process
- integrating gender, human rights, and key population issues into the funding cycle
- sourcing and supply chain management
- operationalising domestic resource mobilisation and financing
- risk management
- legal and governance support
- human resources.

All Global Fund staff are based at the Secretariat in Geneva, Switzerland. It does not have offices in the countries in which it invests via its grants. As of April 2022, there are approximately 700 full-time employees, as well as those of defined duration, temporary employees, and contractors/consultants. The Secretariat staff represent more than 100 nationalities with a wide variety of professional backgrounds. Figure 4 on page 23 provides an overview of the Global Fund's Secretariat's organisational structure as of April 2022.

The current Executive Director for the Global Fund is Peter Sands who assumed his post in March 2018. A former Chief Executive Officer of Standard Chartered PLC, Mr. Sands, as the Executive Director of the Global Fund, is responsible

for the overall leadership and management of the Global Fund's operational and administrative functions. Working under the guidance of the Global Fund Board, he defines the partnership's strategic vision, and is accountable for its implementation and the results achieved. He is currently serving his second and last four-year term per Global Fund Board approval in March 2021.

Finances and operations

TABLE 1. LARGEST GOVERNMENTAL DONORS TO THE GLOBAL FUND, 2001-22, BY CONTRIBUTION

Donor	USD millions
United States	19 848
France	7 149
United Kingdom	6 019
Germany	4 858
Japan	4 238
Canada	3 122
European Commission	3 121
Sweden	1 717
Italy	1 406
Netherlands	1 387
Norway	1 316
Australia	807
Spain	768
Denmark	430
Belgium	360
Ireland	322
Russian Federation	317
Switzerland	292
Saudi Arabia	108
China	75

Source: (GF, 2022a)

TABLE 2. LARGEST NON-GOVERNMENTAL DONORS TO THE GLOBAL FUND, 2001-22, BY CONTRIBUTION

Donor	USD millions
Bill and Melinda Gates Foundation	2 743
Product (RED)	544
Chevron Corporation	60
Comic Relief	42
United Methodist Church	24

Source: (GF, 2022a)

TABLE 3. THE GLOBAL FUND'S ALLOCATIONS FOR THE 2020-2022 PERIOD ACROSS THE THREE DISEASES

	HIV	Malaria	Tuberculosis
Amount in USD (millions)	6 355	4 061	2 242

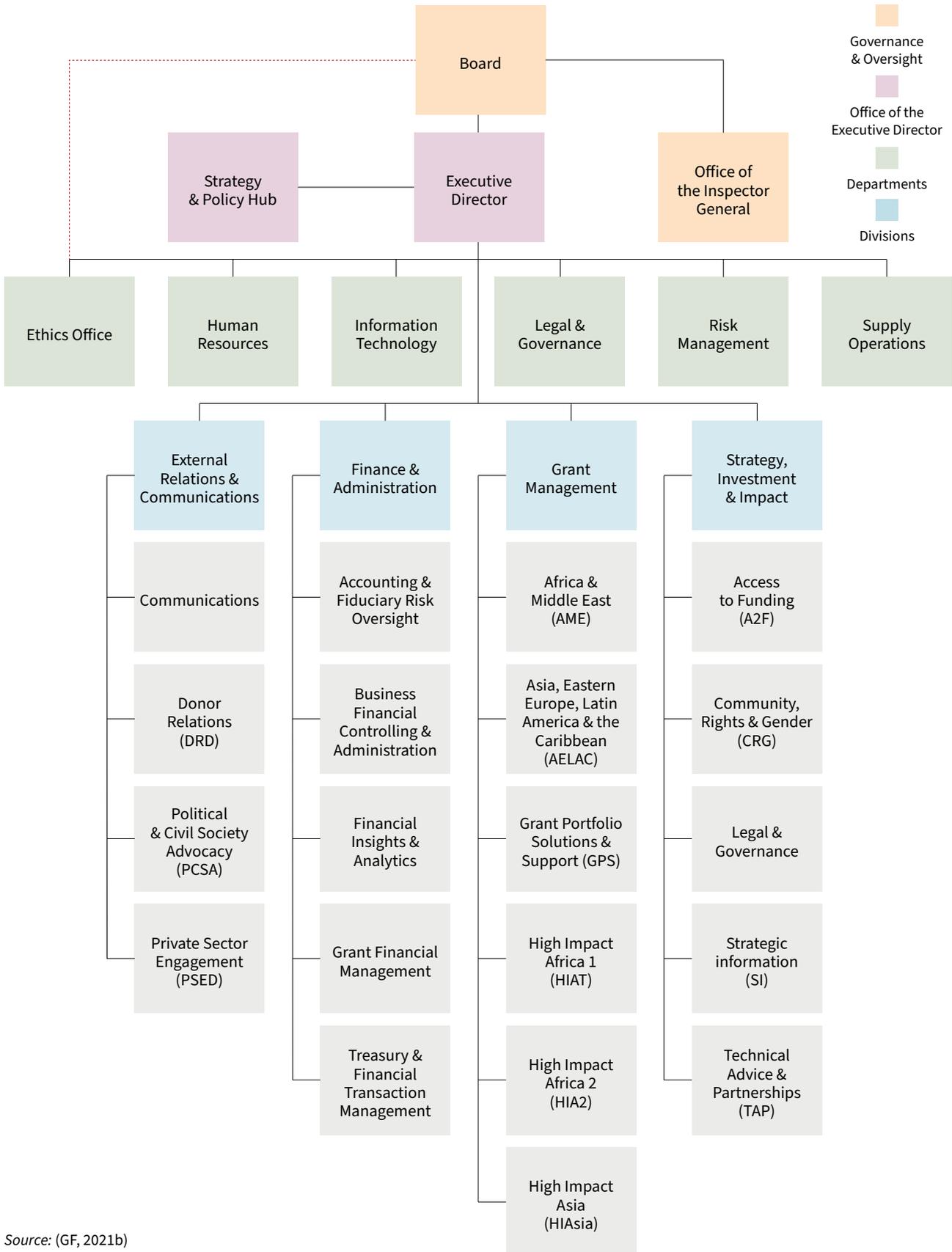
Source: (GF, 2020a)

The Global Fund operates on the basis of voluntary contributions from governments (Table 1), the private sector and foundations (Table 2) through its three-year replenishment cycle. At the launch of the replenishment period, donors pledge funds, while the Global Fund continues to raise funds during the three-year cycle. It raises approximately USD 4 billion per year with more than 90% of its funding coming from donor governments and the rest from the private sector and foundations.

As of 31 December 2020, operating assets exceeded operating liabilities by USD 6.5 billion. Despite the pandemic, key donors continued to sign the contribution agreements they had pledged made during the Sixth Replenishment Conference in October 2019. At that time, pledges increased from USD 12.2 billion from the 201719 replenishment period to USD 14.02 billion for the 202022 period. As a result of ongoing resource mobilisation efforts and support for the COVID-19 response, donors have since pledged nearly USD 4 billion for 2020 and 2021. The trend line for contributions is harder to discern as a portion of the 2020-22 contributions is still outstanding. The pledge conversion KPI appears to be on track.

The Global Fund from its founding through April 2022 had signed more than USD 65 billion worth of grant funding for the three diseases and RSSH, as well as an additional approximately USD 3.8 billion to address COVID-19. The Global Fund Board has approved a total of USD 12.71 billion for HIV, TB, and malaria country grants, and USD 890 million for catalytic investments for the 2020-22 allocation period. Of these funds, the Global Fund had planned for USD 8.9 billion in grants to be approved in 2020, with the remaining funds scheduled for later start dates. However, the Secretariat, accelerated its grant-making efforts and exceeded the original target, with USD 9.2 billion of funding in 2020.

FIGURE 4. THE GLOBAL FUND SECRETARIAT’S ORGANISATIONAL STRUCTURE (as of December 2021)



Source: (GF, 2021b)

For 2020, the Global Fund's operating expenditures were USD 299 million at the budget rate, which was within the Board-approved limit. The largest operating expense was for Secretariat staff at USD 151 million. Other significant expenditures were for Local Fund Agents (LFAs) (USD 48 million), professional fees (USD 44 million), and office infrastructure (approximately USD 23 million). Operating costs as a percentage of total expenditure decreased to 6.9% in 2020 (2019: 8.5%) driven by a 32% increase in grant expenditure compared to 2019. For 2021, the Board approved an annual operating cost budget of USD 315 million.

In 2020, the COVID-19 pandemic significantly affected the Global Fund Secretariat's usual operations, requiring a major effort in delivering key priorities and core operations remotely, while maintaining budget discipline and efficiency. Significant savings were realised in cost categories such as staff, travel and meetings while additional efforts and resources were utilised especially for reinvestments to strengthen the IT systems to increase agility and integrate grant life-cycle processes, and remote panel reviews of the grants (GF 2020c). Operating costs as a percentage of total expenditure decreased to 6.9% in 2020 (from 8.5% in 2019) driven by a 32% increase in grant expenditure compared to 2019. For the year 2021, the Board has approved an annual operating cost budget of USD 315 million (GF 2020c).

SITUATIONAL ANALYSIS

The Global Fund, as one of the largest donors to international global health, is firmly embedded in the global health landscape. Its partnerships are wide and varied. It has also participated in situation rooms (usually hosted by a UN organisation), designed to coordinate responses to the three diseases.

More recently, it was a founding member of the Access to COVID-19 Tools (ACT) Accelerator, a global collaboration to accelerate development, production, and equitable access to COVID-19 tests, treatments, and vaccines. Indeed, for the Global Fund, COVID-19 had a profound, systemic effect on the organisation and its internal and external context.

Given its role as the world's largest multilateral provider of grants for global health and its focus on fighting infectious diseases and strengthening systems for health, the Global Fund was well-positioned to help countries respond to the COVID-19 pandemic and mitigate the knock-on impact on HIV, TB and malaria. In alignment with WHO's overall leadership and co-ordination of the global COVID-19 response, the Global Fund adopted a four-pronged response to the pandemic:

1. adapt HIV, TB and malaria programmes to mitigate the impact of COVID-19 and safeguard progress;
2. protect front-line health workers, who include community health workers, by providing them with personal protective equipment (PPE) and training;
3. protect healthcare systems against collapse by supporting them urgent reinforcement of supply chains, laboratory networks and community-led response systems;
4. fight COVID-19 by supporting control and containment interventions such as testing, tracing isolation, treatment and communications.

The Global Fund has worked with global, regional and country partners to mobilise resources, raising to date USD 3.8 billion towards a target of USD 10 billion. The Global Fund aims to deliver new medical tools – underpinned by resilient, sustainable healthcare systems – that reach those most at risk. And it supports countries in mitigating the impact of COVID-19 on programmes to fight HIV, TB and malaria.

Examples of spending approved thus far include:

- COVID-19 diagnostics
- protection of health and community workers through personal protective equipment provision (PPE)
- procurement and provision of medical oxygen and other COVID-19 therapeutics

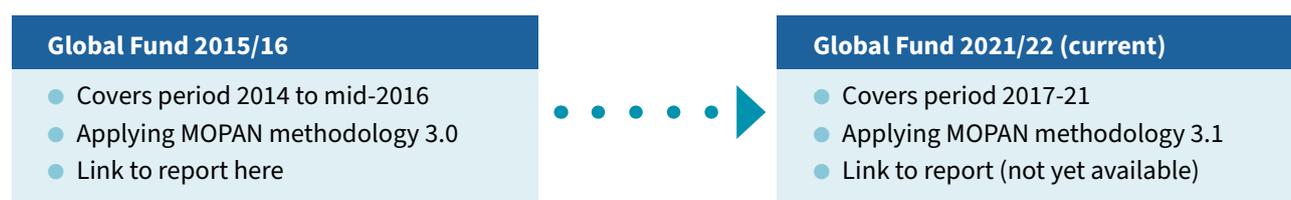
- training of front-line health workers on managing COVID-19, and on adapting HIV, TB and malaria programmes
- reinforcing health and community systems
- strengthening laboratories, including diagnostic instruments and consumables, minor infrastructure (including electricity supply) plus transportation of samples
- strengthening community-led communications and contact tracing
- direct support to countries' COVID-19 response strategies primarily through the procurement of automated molecular antigen test kits, PCR tests, and approved treatments.

The Global Fund provided support to many low- and middle-income countries to respond to COVID-19, using many of the same laboratories, disease surveillance systems, community networks, trained health workers and supply chains put in place to fight HIV, TB and malaria. Within the Secretariat and with its partners the Global Fund is introducing new tools to streamline the way data is collected for decision-making purposes. For example, Principal Recipient (PR) reporting is being enhanced to improve visibility on C19RM investments with quarterly Pulse Checks and there is a specific SI which focuses on supply chain KPIs for COVID-19, as well as the Global Fund's three core diseases. There is continuing work to incorporate COVID-19 within the Global Fund's monitoring and oversight framework, as well as additional mandatory and risk-based activities to provide comprehensive programmatic assurance. Chapter 3 addresses the profound, systemic effect of COVID-19 on the organisation, and its internal and external context.

PREVIOUS MOPAN ASSESSMENTS

The 2015-16 MOPAN assessment of the Global Fund covered the period from 2014 to mid-2016. This was MOPAN's first assessment of the Global Fund and it applied the MOPAN methodology 3.0. The current assessment will be MOPAN's second assessment of the organisation. It applies the new MOPAN methodology 3.1, which includes a greater focus on integrated measures related to major agendas in the multilateral system (e.g., the 2030 Agenda, Preventing and responding to sexual exploitation, abuse, and harassment (PSEAH), United Nations Development System (UNDS) reform) (Figure 5).

FIGURE 5. MOPAN ASSESSMENTS

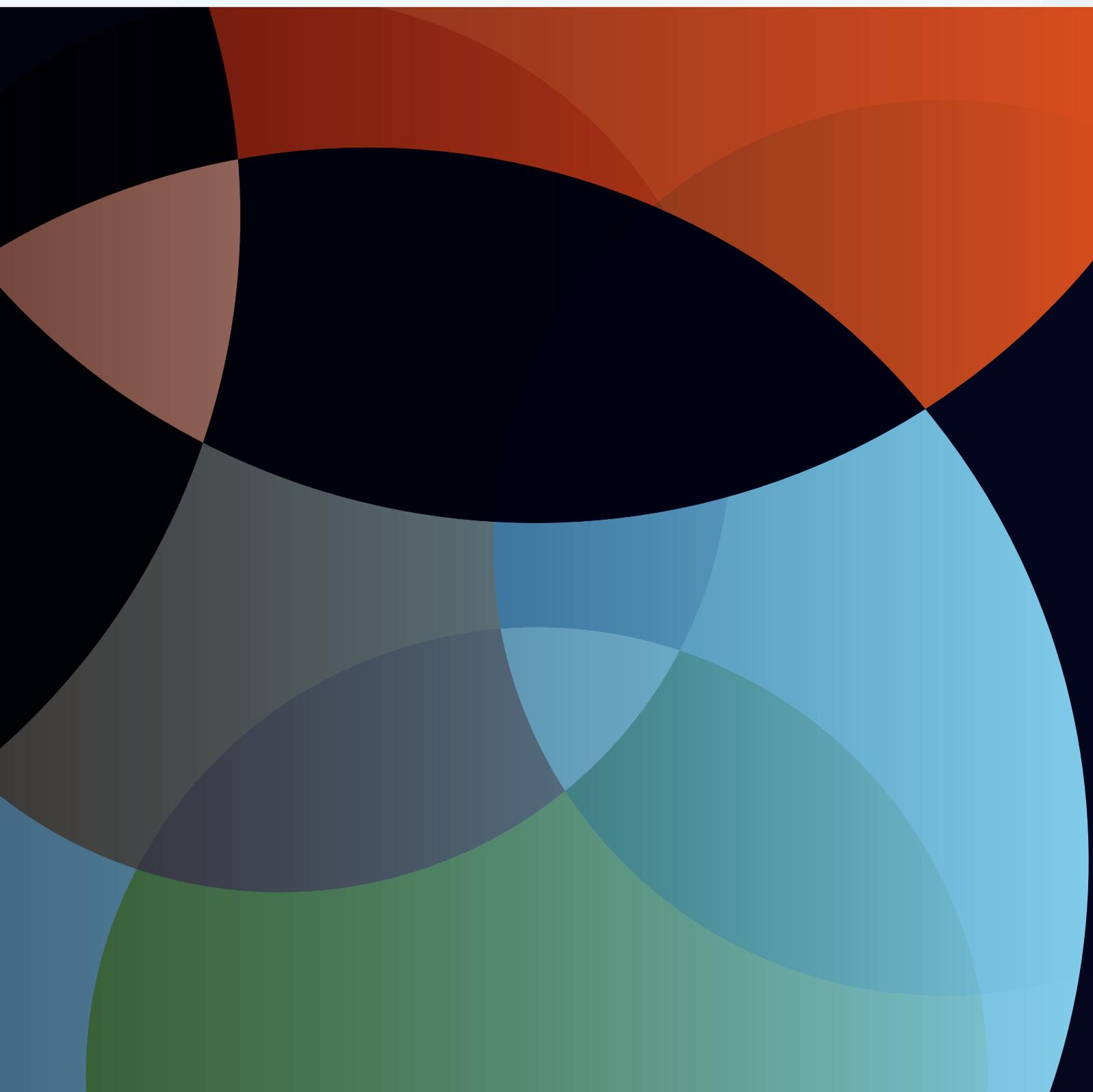


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OVERVIEW OF KEY FINDINGS



ASSESSMENT SUMMARY

This section considers questions deemed particularly relevant to the Global Fund. The questions draw on the findings of this assessment:

- How does and how will the Global Fund fit into the global health landscape as it seeks to build resilient, sustainable systems for health (RSSH)?
- What is and should be the Global Fund’s role in learning in the greater health and development community?
- What are the limits of the Global Fund’s principle of country ownership and how might this principle affect its primary goal of ending AIDS, TB, and malaria as public health threats?

As for its assessments conducted in 2020 and 2021, MOPAN also gives further consideration to the Fund’s response to the COVID-19 pandemic, and how the pandemic has transformed the Global Fund’s mandate, mission, operations, and activities.

How does and how will the Global Fund fit into the global health landscape as it seeks to build resilient, sustainable systems for health?

Building resilient and sustainable systems for health (RSSH) is a Strategic Objective as part of the Global Fund’s 2017-22 Strategy. It subsumes seven operational objectives, including, for example, strengthening community systems and responses, leveraging critical investments in human resources for health, and strengthening and aligning to robust health strategies and national disease specific plans. These operational objectives generally align with the World Health Organisation’s six health system building blocks (WHO, 2022a);¹ although there are slight differences.

Debate over the benefits and drawbacks of programming health interventions “vertically” (i.e. through disease-specific programmes) rather than “horizontally” (i.e. through a broader health-system approach) predates the Global Fund (Lancet, 1997a), and continue to be frequently discussed (CGD 2020a). Strengthening health systems became part of the Fund’s founding Framework Document, which states that “the Global Fund supports programmes that address the three diseases in ways that will contribute to strengthening health systems” (GF 2001g).

In 2013, the Global Fund designed and introduced a new way of approaching RSSH investments in conjunction with a New Funding Model (NFM). RSSH support under the NFM was rolled out in March 2014. This new focus placed emphasis on an integrated approach in which investments in national disease programmes and cross-cutting RSSH are complementary.

In January 2015, the Global Fund’s Technical Evaluation Reference Group (TERG) commissioned a Health Systems Strengthening (HSS) Thematic Review. Its purpose was to enrich discussions in the Global Fund Secretariat and Board about operational modalities that could improve RSSH investment and implementation and help shape the 2017-22 strategy (GF, 2015a). In that regard, the Global Fund did consider RSSH as part of Strategic Objective 2 (SO2), and also refers to it in its vision statement (“a world free of the burden of AIDS, tuberculosis and malaria with better health for all”).

What this assessment has shown, however, is that the Global Fund has not performed as well in supporting RSSH as in addressing the three diseases or raising additional resources. Indeed, MOPAN KPI 9, particularly its MIs 9.1 and 9.5, found that SO2 showed only partial progress during the reporting period. The aspects of RSSH that have seen the most gains account for the majority of RSSH investments (strengthening data systems for health, countries’ capacities to analyse and use data, and in-country public sector financial management and procurement and supply chain

1. Per the WHO 2022a, the six health system building blocks are: a) leadership and governance; b) service delivery; c) health system financing; d) health workforce; e) medical products vaccines, and technologies; and, f) health information systems.

systems). However, even in these areas, there is evidence to suggest that there are challenges that limit the health impact of Global Fund investments. Some challenges can be attributed to the COVID-19 pandemic (e.g. the inability to provide technical assistance, the shift in priorities in the emergency response, supply chain disruptions). However, RSSH reviews noted even before 2020 that the majority of RSSH investments are being used to fill short-term gaps in various health system components that are needed for the disease programmes to function. Remedying this last issue is of distinct importance given that RSSH has gained strategic importance in the Global Fund and is reflected in its increase of funding across its portfolio.

Similarly, with the COVID-19 pandemic and the large amount of funding which was distributed to countries via the C19RM, those funds were primarily used for a few categories (e.g. approximately 66% of awards are allocated to health products) rather than the broader category of improvements to the health and community systems. While the assessment team recognises the limits of the Global Fund’s ability to dictate interventions to its implementing countries because of the principle of country ownership, there are multiple opportunities during both the application and review process to help countries shape their grant applications better to move toward longer-term solutions, if there is a sufficient commitment and corresponding resources to do so.

Such efforts are becoming even more pressing in light of the UN’s strong re-commitment to achieving Universal Health Coverage by 2030. In October 2019 the UN General Assembly reached consensus and issued Resolution 74/2 in which it “reaffirm[s] that health is a precondition for and an outcome and indicator of the social, economic and environmental dimensions of sustainable development and the implementation of the 2030 Agenda for Sustainable Development, and strongly recommit to achieve universal health coverage by 2030...”. Although the resolution also re-affirms the UN’s commitment to ending AIDS and tuberculosis, and controlling and eliminating malaria, its clear and primary focus is on universal health coverage and how to obtain that goal by building “...health systems that are strong, resilient, functional, well governed, responsive, accountable, integrated, community-based, people-centred and capable of quality service delivery, supported by a competent health workforce, adequate health infrastructure, enabling legislative and regulatory frameworks as well as sufficient and sustainable funding.”

Other organisations have also stepped up their efforts. Most international development partners, including multilateral development banks (MDBs), have committed to the UHC goal. Many were already working on various components of the health systems building blocks prior to the 2019 resolution. For example, the U.S. Government has dedicated approximately USD 10 billion during the last several years toward strengthening procurement and supply chain management systems through its Global Health Supply Chain Program. The World Bank and other multilateral development banks have engaged with ministries of finance and health to address broader non-disease specific objectives such as health sector reform, health financing, and efforts to strengthen the health workforce, and other international organisations with specific mandates, such as GAVI (the Vaccine Alliance), have incorporated RSSH in support of their vision (GAVI 2021a).

The Global Fund is beginning to articulate its comparative advantage in the RSSH space more clearly. Although the Global Fund in its strategy for 2023-28 has as its primary goal to end AIDS, TB, and malaria, it recognises that its success in achieving that goal is supported by four mutually reinforcing contributory objectives, including the need to build the resilience and sustainability of systems for health through investments that drive impact against the three diseases and related conditions, including coinfections and comorbidities. The documentation which was developed in support of the upcoming strategy does make a number of references to the Global Fund’s comparative advantages in RSSH. These include:

- the ability to substantially finance and support RSSH investments that deliver the Global Fund’s HIV, TB, and malaria goals;
- the use of integrated, people-centred investments with community systems strengthening (CSS) playing a strong role;

- investments in areas such as CSS, data generation and use, procurement and supply chains, including market shaping, and diagnostic and laboratory networks to support case management and disease surveillance; and
- the ability to invest in and strengthen community systems capacity.

The new strategy recognises that the Global Fund's success in achieving its primary goal will depend on the extent to which it leverages the strengths and benefits of its unique partnership model. Thus, in collaboration with its partners it will seek to accelerate a shift from siloed interventions to more integrated, people-centred models of prevention, treatment and care, so that holistic health needs are met and countries are supported toward delivering UHC. This re-envisioning and re-positioning of RSSH within its upcoming strategy should better define for the Global Fund and its partners its place, plans and principles for addressing RSSH within the global health landscape. What will need to be considered, though, is how it will operationalise that commitment in terms of further integrating RSSH into the grant application process, how it can sustain RSSH investments across multiple funding cycles, and whether it will either have or obtain sufficient specialised internal human resources to successfully implement those ambitions.

What is and should be the Global Fund's role in learning within the greater health and development community?

A learning organisation supports actively questioning assumptions, seeking evidence, reflecting, and exploring a range of solutions to development problems. Learning in organisations can occur at multiple levels and involve multiple stakeholders. The Global Fund is no different. Indeed, the Global Fund has taken a proactive and robust approach to learning in some aspects, notably when it comes to learning within the Secretariat. For example, it is in the process of rolling out a learning agenda for community rights and gender (CRG) and RSSH to improve staff capacities in these areas. Similarly, one of the objectives of the Global Fund's People Strategy has been to "develop and deploy a learning and development framework that enables employees at all levels to have the competencies and skills to execute the Strategy 2017–22". This objective is supported by the human resources strategic objective 'Learning and Leadership Development', which has entailed the roll out of a learning programme to help employees deliver on the Global Fund Strategy. Of particular usefulness, according to staff, are the lessons and best practices that Country Teams have generated from the operational knowledge they gained while overseeing the implementation of activities within countries, and shared in various forums. However, Secretariat staff acknowledged that the sharing of this knowledge externally (i.e. outside of the Global Fund Secretariat and its partnership) could be improved.

The Global Fund has untapped potential to produce and share the knowledge it is generating more broadly with its partners. This wider sharing of knowledge and lessons learned is repeatedly cited in the MOPAN assessment as a systemic issue that needs to be rectified. One could question whether the Global Fund should have a role in knowledge production, as it is a financing institution and not a technical agency. However, one of the Global Fund's core principles is partnership with governments, civil society, communities affected by the diseases, technical partners, the private sector, faith-based organisations, and other funders. This is perhaps how the question about the Global Fund's knowledge production and sharing, and learning roles should be framed (i.e. that it has an implicit obligation to produce and share knowledge as a partner) along with its other explicit and implicit principles of country ownership, transparency, and accountability.

The COVID-19 pandemic has highlighted the Global Fund's potential as a leader in knowledge production. It generates a significant amount of monitoring data, evaluations and results from its TERG reviews. It would therefore be a tremendous missed opportunity if the knowledge it produces is not shared more widely. Slightly more than 60% of the MOPAN survey respondents either "strongly agree" or "agree" that the Global Fund has been active in providing relevant knowledge and thought leadership on COVID-19, which suggest that it does, indeed, have the capacity to contribute significantly to knowledge production and learning.

The Global Fund needs to expand its commitment to learning and support an organisational culture conducive to it. Other development partner organisations working in the health sector have made learning one of their fundamental principles. The WHO has recently embarked on a consultative process to develop the organisation’s first-ever Learning Strategy (WHO 2022b). USAID has as one of its core values a commitment to learning (USAID 2022a). GAVI has as one of its four “strategic enablers” that will contribute to delivering on its new strategy the use of evidence, evaluations and improved data for policies, programmes and accountability (GAVI 2022a). While the Global Fund does have in its new strategy the Partnership Enabler of operationalising the 2023-28 Strategy “...through the Global Fund Partnerships, with clear roles and accountabilities in support of country ownership”, this is not quite the same explicit commitment to learning as the aforementioned organisations. This MOPAN report notes multiple shortcomings in regards to learning:

- many documents cite the current lack of an organisational culture of learning from evaluations;
- there was no evidence of a formal dissemination mechanism to partners, peers or other stakeholders;
- Board members said lessons learned from the TERG strategic reviews were not considered during the strategy development process.

Recent developments present exciting opportunities for the Global Fund’s future in monitoring, evaluation, and learning. A new model for independent evaluation was approved at the November 2021 Board meeting that is designed to contribute to more integrated M&E mechanisms across the organisation, and to facilitate learning. It will be operationalised starting at the end of 2022. It is expected that the newly created Independent Evaluation Panel will ensure that evaluations are of high-quality and utilisation-focused, and co-ordinate all evaluation work. It is also anticipated that lessons learned will be more widely disseminated and applied. The creation of the position of an Evaluation and Learning Officer is expected to bring a focus on dissemination to various audiences and to systematise the process. Thus, while this assessment was critical of the Global Fund’s deficiencies in regard to learning, it has clearly also seen that the Global Fund demonstrates a willingness to evolve its processes, procedures, and policies to respond to changing needs.

What are the limits of the Global Fund’s principle of country ownership and how might this principle affect its primary goal of ending AIDS, TB, and malaria as public health threats?

The principle of country ownership has been in place since the Global Fund’s founding 20 years ago and is recognised as one of the enablers for partnership in its upcoming Strategy (2023-28). The Global Fund states its principle of country ownership (GF 2022c) as follows: “...people determine their own solutions to fighting these three diseases, and take full responsibility for them. Each country tailors its response to the political, cultural and epidemiological context.” The principle is embodied in the make-up of the Country Coordinating Mechanisms (CCMs) which are national committees that submit funding applications to the Global Fund and oversee grants on behalf of their countries. They are a key element in the Global Fund partnership and include representatives of all the stakeholders involved in the response to the diseases (academic institutions, communities and civil society, faith-based organisations, governments, multilateral and bilateral agencies, non-governmental organisations, people living with the diseases, the private sector and technical agencies).

While the principle of country ownership can reinforce a sense of accountability and should result in a greater probability of programmatic sustainability, there may be limits to this principle both in theory and in practice. In theory, the principle of country ownership has to contend with multiple lines of the Global Fund’s accountability, including to its donors and to contributing toward achieving higher level global commitments (e.g. the Sustainable Development Goals). In other words, a fundamental dilemma can exist between what an implementing country wants to implement, and what the Global Fund’s donors and other stakeholders believe is necessary not only for the country, but to ensure that global commitments are met. While this issue is mitigated, in part, by the Global Fund’s robust review process of grant applications, it cannot be eliminated without the Global Fund taking a more directive approach.

The country ownership principle may also become increasingly difficult to adhere to in practice as marginalised groups become the priority. One reason may be the need to focus efforts on specific key populations to contain epidemics, even as countries move along the development continuum (i.e. their income levels trend upward). For instance, upper-middle income countries are required to focus 100% on maintaining or scaling-up interventions for key and vulnerable populations (GF 2016b). In some countries, however, such as Eswatini with the highest estimated HIV prevalence in the world, transgender people or sex workers do not benefit from any legal protection (UNAIDS 2022a). Similarly, in Uganda with one of the highest absolute numbers of people living with HIV, same-sex sexual acts are subject to imprisonment. And of the 195 countries which responded to a recent UNAIDS' survey, only 18 (approximately 9%) stated that they had anti-discrimination laws and/or provisions for people who use drugs (UNAIDS 2022b).

The potential reluctance of in-country counterparts to engage with marginalised communities is not limited to HIV. Malaria is often of high prevalence among migrant groups and ethnic minorities; and TB has been described as a barometer of social welfare and reflective of a poor quality of life, poor housing, overcrowding, under-nutrition, smoking, alcohol abuse, lack of education, and large families (PUBMED 2019a).

Issues of country ownership have not only recently become challenging. CCMs have also historically contended with such issues, and still need to address them. The Global Fund has stated that “CCMs may be formed from existing national structures but must meet at a minimum the CCM eligibility requirements...” (GF, 2018a). These six eligibility requirements (which contain several sub-requirements) are in addition to the seven principles to which CCMs are expected to adhere and the five core functions which they are expected to perform if they are to continue to receive funding from the Global Fund. While the CCM Evolution Initiative which started in 2018 and continues to be rolled out aims to take a more differentiated approach to working with CCMs than previous efforts, it still appears to be primarily driven by Global Fund priorities; though the process is now structured to be more collaborative. What might possibly be more effective in ensuring CCM functionality and sustainability is for the Global Fund to greatly reduce the number of principles, requirements, and functions it expects from CCMs to a few core ones which are considered “mission critical” and then focus its efforts on asking CCMs what their goals are for their evolution and assist them in reaching them.

Other reviews (GF 2019a, GF 2020b) have shown both the strengths and limitations of country ownership, and this assessment notes them as well. However, this assessment adds an urgent message that a full and frank discussion is needed to clarify what that principle should be for the Global Fund now and in the future. The results of that discussion would have implications for the Global Fund's partnership model and would better define the expectations that its stakeholders could have of it. Without this discussion, it may become increasingly difficult for the Global Fund to manage its multiple relationships and ensure the success of reaching its strategic goal.

A brief account of the Global Fund's COVID-19 response

The Global Fund's support to fight COVID-19 added up to nearly USD 4 billion by the end of the assessment period (December 2021). A significant majority of this consisted of grants (nearly 90%) funded by new monies raised to support the COVID-19 Response Mechanism (C19RM). The remaining funds resulted from a reprogramming of interventions within pre-existing grants. This support has reached more than 100 countries and also includes more than 20 multicountry programmes. The C19RM funds three components:

- a) the COVID-19 response
- b) COVID-19 related adaptation of programmes to fight HIV, tuberculosis and malaria
- c) strengthening health and community systems.

In its guidance, the C19RM also suggests that any COVID-related grants should incorporate cross-cutting activities that bolster community responses to COVID-19.

To date most funds (approximately 75%) have been used to reinforce national COVID-19 responses including purchasing critical tests, treatments, oxygen and medical supplies; protecting front-line health workers with training and personal protective equipment (PPE); and supporting control and containment interventions. The remaining approximately 25% of funding has been used to mitigate COVID-19's impact on HIV, TB and malaria programmes, and to make urgent improvements to health and community systems to help fight COVID-19. C19RM 2020 in-country execution and utilisation of funds was estimated at 63%-70% after an average implementation period of 6-8 months. Additional data should be forthcoming as the Monitoring and Oversight (M&O) framework was largely operationalized with more than 90% of PRs having submitted Pulse Checks for all High Impact and Core countries. It was anticipated that based on the received data, countries' performance would be reviewed by the Investment Committee in December 2021-January 2022. Additionally, Spot Checks were currently in progress with data collection completed in 26 countries and a total of 39 countries were expected to be completed by the end of 2021 (GF 2021c).

Box 1: The Global Fund's main strengths and areas to improve identified in the MOPAN 2021 assessment

Main strengths

- A culture of continual reflection to ensure that its operational model evolves and remains fit for purpose.
- Agility of response, particularly during the COVID-19 pandemic.
- Inclusive partnerships at all levels.
- Strong alignment with country strategic plans and priorities.
- Financial frameworks and processes (e.g. allocations, portfolio optimisation, and efficiency measures) ensure good resource utilisation.

Areas for improvement

- Define more fully its role within the context of UHC and health systems strengthening.
- Address cross-cutting issues such as human rights, gender equality, and environmental sustainability and climate change.
- Strengthening its ability to be a learning organisation and sharing knowledge generated with all stakeholders.
- Negotiate the limits of country ownership and achieving both its vision and contributing to global targets and goals.
- Take an organisational approach to the protection from sexual exploitation and abuse (SEA) and sexual harassment (SH) that treats them as related but separate issues requiring distinct capacities, resources and mechanisms.

THE GLOBAL FUND'S FUTURE TRAJECTORY

MOPAN's 201516 assessment found that the Global Fund fully met the requirements of an effective multilateral organisation. Among the key strengths it identified were clear strategic direction, organisational restructuring, and the adoption of a new funding model that led to improved performance, as well as vibrant and effective partnerships. Its focus on results-based planning, management and reporting were driving efforts to improve country-level data. The assessment also found that the Global Fund provided strong global leadership in the response to HIV/AIDS, TB and malaria. It was deemed fit for purpose and able to adapt to future needs.

However, the 2015-16 assessment also revealed areas where performance could be strengthened. This is particularly the case around evidence-based results measurement and health systems strengthening. It was also noted that the Global Fund delivered its support through structures over which it had limited influence, and which at times suffered from weak capacity, particularly in the case of CCMs, although it also recognised that the Global Fund had systems to assess partners' capacity at the country level and increasingly sought to build their capacity. In its management response, the Global Fund singled out areas it wanted to further improve. Those included supporting RSSH, a core pillar of the Global Fund 2017-22 Strategy, and strengthening the systematic use of evaluations. As this assessment will show, the identified gaps were only marginally addressed until near the end of assessment period when the Global Fund approved both its new strategy for 2023-28, as well as the introduction of a new model for independent evaluation that seeks to increase evaluation quality and utility.

The COVID-19 pandemic presented both a significant challenge and an opportunity for the Global Fund. The global crisis began while the Global Fund was in the midst of developing its new strategy for 2023-28. The impact of COVID-19 has put vulnerable people further at risk and, in 2020 for the first time in the Global Fund's history, key programmatic results declined across the three diseases. Recognising the need to respond to these challenges, the Global Fund developed its new Strategy with a focus on getting back on track in its progress against the three diseases, as well as contributing to the SDG target of achieving UHC. It intends a greater focus on making catalytic, people-centred investments that spur faster progress. Its vision, as noted in its new Strategy, is a world free of the burden of AIDS, TB and malaria with better, more equitable health for all.

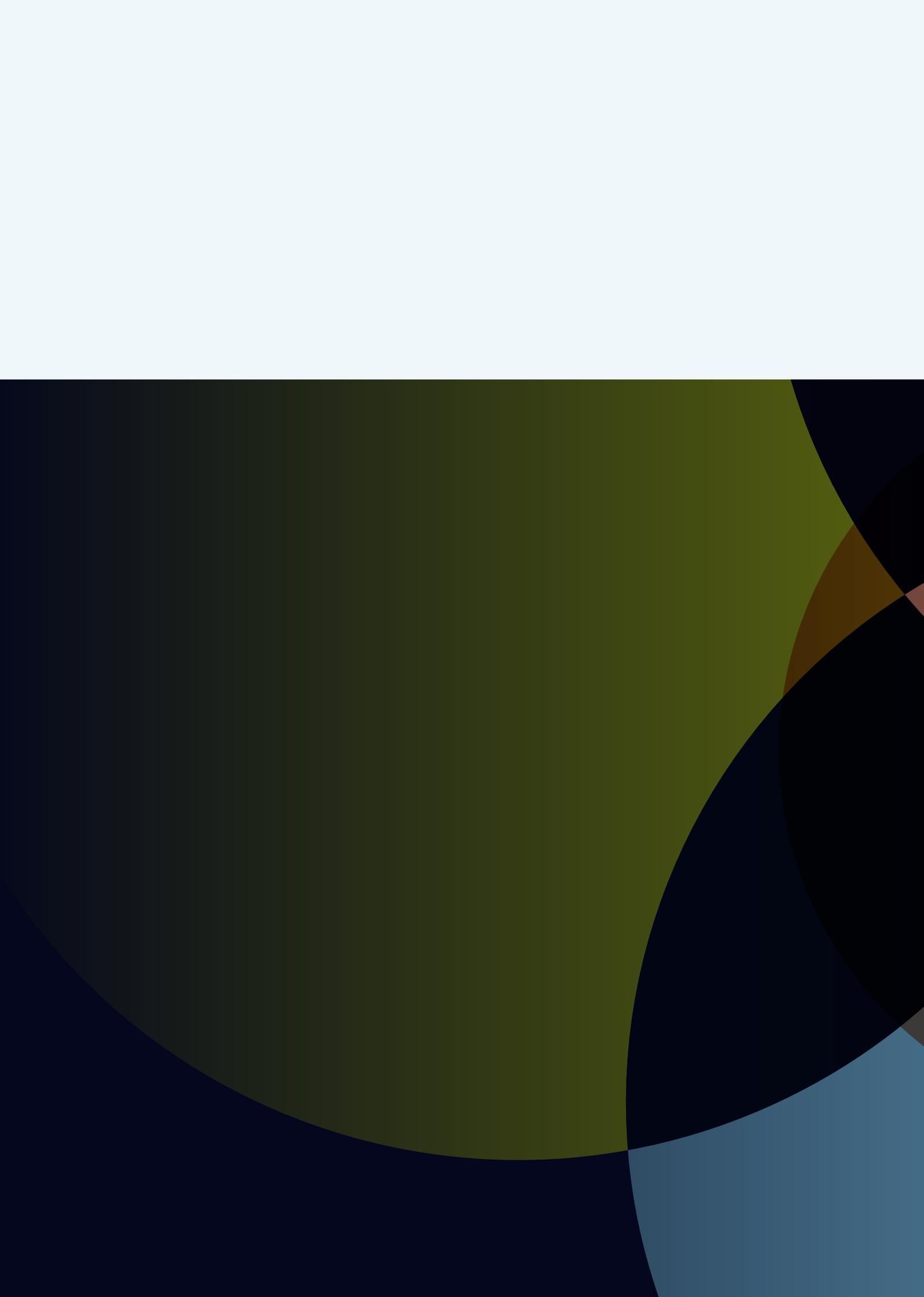
Its future success in achieving its primary goal is underpinned by four mutually reinforcing contributory objectives. First, it seeks to build the resilience and sustainability of systems for health and seeks to accelerate the shift from siloed interventions to more integrated, people-centred models. Second, the new Strategy builds on the Global Fund partnership by maximising the engagement and leadership of affected communities, to ensure that no one is left behind, and that services are designed to respond to the needs of those most at risk. Third, the Global Fund aims to respond to the crucial need to maximise health equity, gender equality and human rights by deepening the integration of these dimensions into its interventions. Fourth, the Global Fund will seek to mobilise increased donor and domestic resources, particularly in light of COVID-19, while simultaneously pursuing greater value for money (VfM). Finally, the upcoming 2023-28 strategy responds directly to the changes in the global health context arising from the COVID-19 pandemic by introducing an evolving objective for Pandemic Preparedness and Response (PPR). This objective enables the Global Fund to:

- play its part alongside its partners in the global response to COVID-19
- strengthen the resilience of health systems and HIV, TB, and malaria programmes to pandemic threats
- support countries and communities
- respond to new pathogens of pandemic potential
- address the multifaceted threats to health arising from climate change.

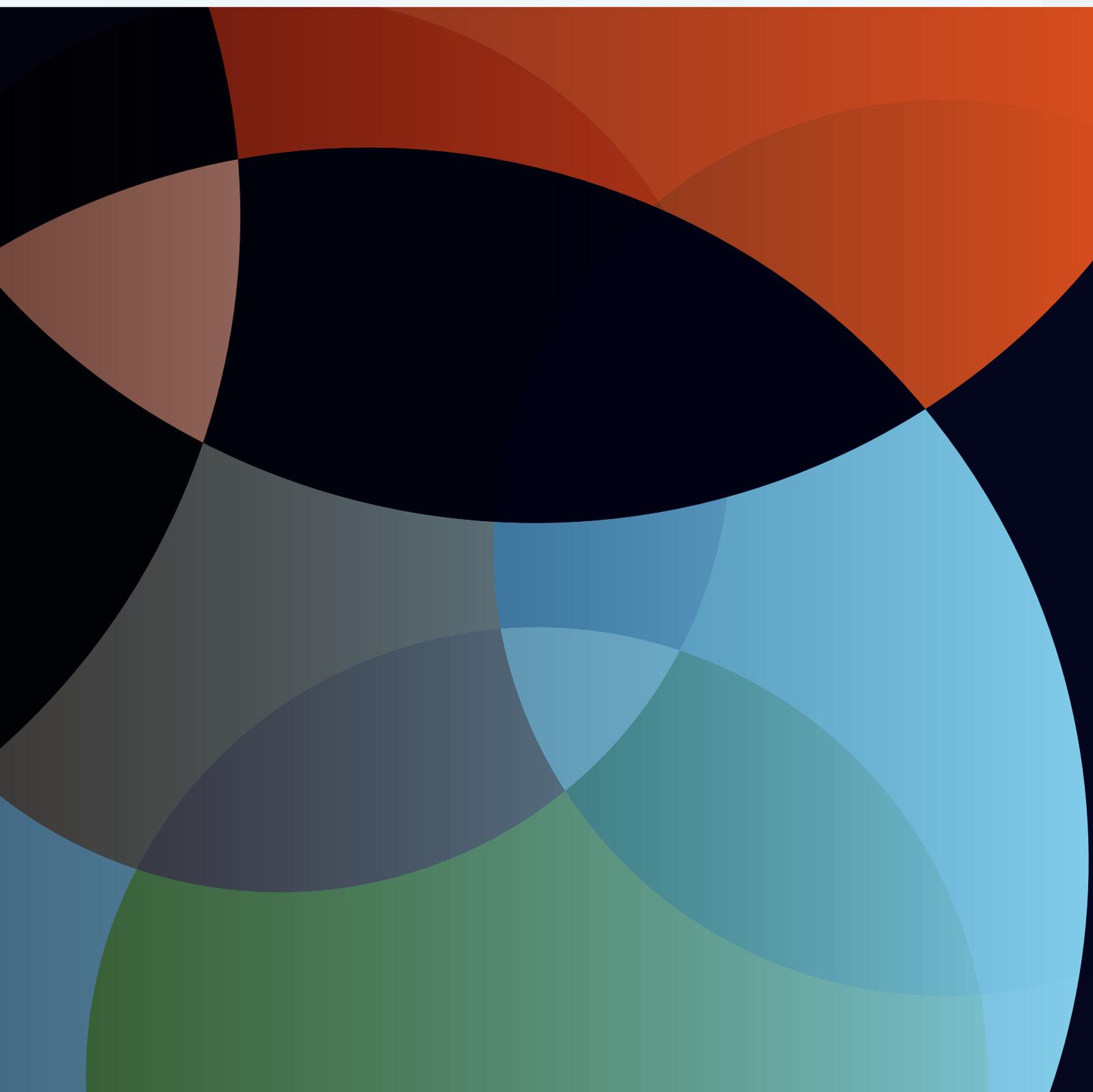
The Global Fund has set for itself an ambitious, interesting, and challenging path to follow and it is incumbent on all global health stakeholders to watch its journey closely and provide support and correction, when needed.

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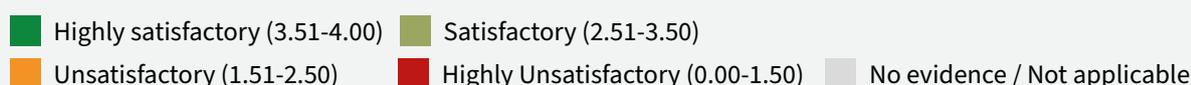
DETAILED LOOK AT FINDINGS



This chapter provides a more detailed assessment of the Global Fund’s performance across the five performance areas – strategic management, operational management, relationship management, and performance management and results – and the KPIs that relate to each area, accompanied by their score and rating. It illustrates findings and highlights feedback from stakeholders (e.g., from the survey).

The MOPAN performance scoring and rating scales are listed below in Figure 6.

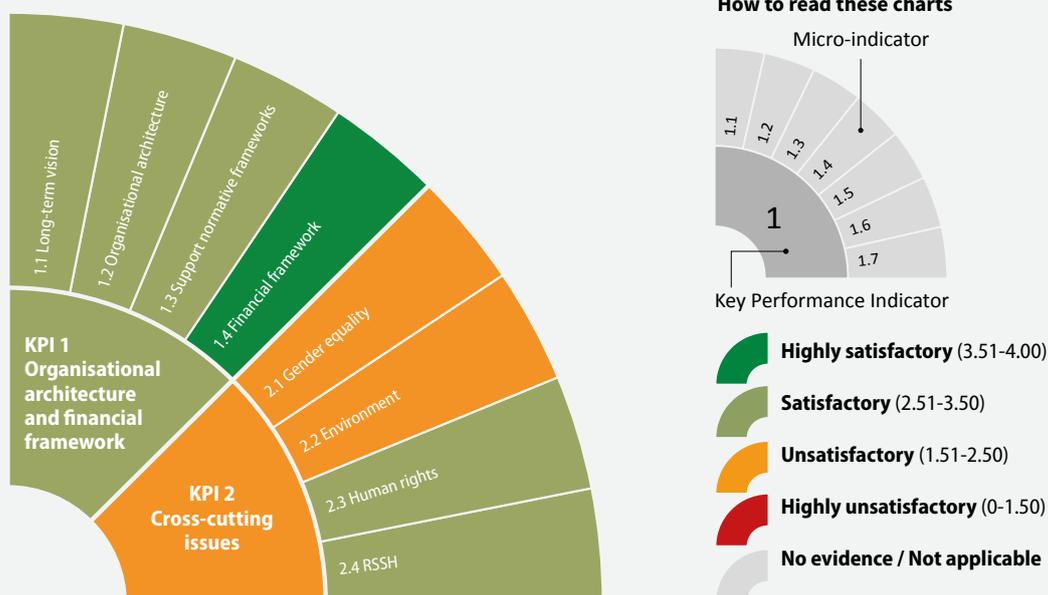
FIGURE 6. MOPAN 3.1 PERFORMANCE SCORING AND RATING SCALE



Assessment key findings draw on information from the three evidence sources (document reviews, interviews and a partner survey – see Chapter 4 for more information). Further analysis per MI and detailed scoring, as well as the full survey results, can be found separately in Part II: Technical and Statistical Annex of the MOPAN Assessment of the Global Fund (2022).

STRATEGIC MANAGEMENT

KEY FINDINGS



In general, the Global Fund’s strategic management supports its ability to achieve its vision, goals, and objectives. In particular, its organisational architecture and framework were found to be mainly “Satisfactory” or “Highly satisfactory”. Of importance to note is that strategic management is an area in which the Global Fund continues to evolve with the introduction of a new, holistic method for financial planning, as well as the Board approval in November 2021 of the Global Fund’s 2023-28 Strategy. Further, while its specific comparative advantages were not distinctly articulated in any one statement or document previously, that has been resolved both in its new strategy and supporting documents. Given that many of its stakeholders were able to clearly articulate these comparative advantages, having them documented supports those assertions.

Two of the Global Fund’s core objectives in its 2017-22 Strategy were to “Build Resilient and Sustainable Systems for Health” and to “Promote and Protect Human Rights and Gender Equality”; yet, it falls short in addressing cross-cutting issues. It has specific gaps in addressing gender equality, the environment, and RSSH. Human rights issues are integrated in the Global Fund’s results framework, but there is only one indicator to monitor gender equality commitments (of the more than 40 indicators, including sub-indicators); though other indicators are sex-disaggregated. This appears to be insufficient. Similarly, the 2017–22 Strategy does not address issues of ESCC; though, there were some limited efforts undertaken by Global Fund departments in this area. Thus, ESCC was deemed an area which needs significant strengthening. Finally, key informants expressed concerns that RSSH is not prioritised to the extent that it should be in grant making nor has historically there been sufficient RSSH human resources within the Secretariat. It is anticipated that these three areas will be remedied, if not before, during the implementation of its new Strategy as they have been further emphasised in that document.

The **strategic management** performance area explores whether there is a clear strategic direction in place that is geared to key functions, intended results and the integration of relevant cross-cutting priorities. This area is assessed through two key performance indicators specified below:

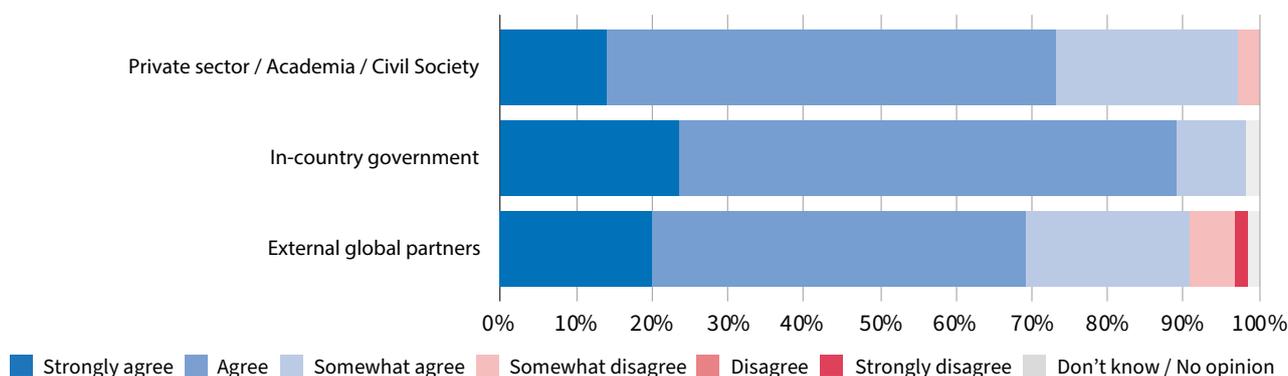
KPI 1: Organisational architecture and financial framework enable mandate implementation and achievement of expected results

Performance rating: Satisfactory	Score 3.46
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The Global Fund’s current and upcoming strategy are thorough and clear in positioning the Global Fund within the evolving global health landscape. They both have delineated the Global Fund’s vision, mission, objectives and enablers to achieve its mandate. The process for developing the Global Fund’s strategies ensured substantial input from a vast array of stakeholders and it is through this public review, as well as the ongoing review by its governance bodies, that the Global Fund ensures that its Strategy remains relevant. While its specific comparative advantages were not distinctly articulated in any one statement or document previously, this has been resolved via its new Strategy and supporting documents. It is clear from stakeholder interviews and the partner survey that the Global Fund has many comparative advantages (see Figure 7 below). The clear articulation in the new documents will further support that understanding.

The Global Fund’s organisational architecture and operational model both broadly support the implementation of its long-term vision and provide accountability for results. Its operating model is regularly reviewed to ensure its continued relevance. This includes ongoing reviews by the Management Executive Committee (MEC), the Strategy

FIGURE 7. THE GLOBAL FUND’S STRATEGIES DEMONSTRATE GOOD UNDERSTANDING OF COMPARATIVE ADVANTAGE



Source: Responses to the MOPAN external partner survey of the Global Fund, October-November 2021.

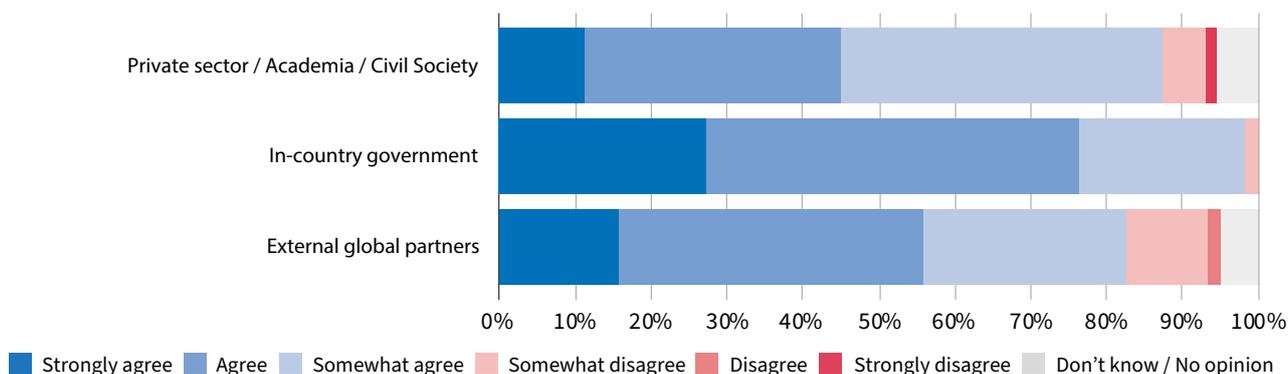
Committee, as well as full strategic reviews done every two to three years. However, feedback on the operating model's effectiveness from both the Strategic Review 2020 and staff is mixed, with the Strategic Review noting that the model does not deliver solutions to a number of long-standing challenges that primarily relate to co-ordination of action across multiple objectives and how to achieve evidence-informed prioritisation when stakeholders have diverging levels of capacity and differing priorities. Thus, the model continues to evolve both from choice and necessity.

A theme of thinly stretched staff either without the capacity or support to work horizontally across the organisation seems apparent. For example, key informant expressed a concern that some areas which have been deemed higher-level and/or cross-cutting objectives (such as community rights and gender, and RSSH) have been given less priority in resourcing. Per key informants, there continues to be a need to invest in staff capacity to engage with countries, specifically in understanding country contexts and having the diplomatic skills to engage with senior leadership. This has become more apparent with both the ongoing COVID-19 pandemic, as well as with the upcoming strategy and some of the new areas of focus. Some of these concerns were reflected in the survey as given in Figure 8 below. As part of this concern key informants and other reviews (GF 2020b) noted that individuals and teams were not sufficiently able to collaborate and cooperate across the organisation.

An overarching M&E framework is under development which will provide a holistic overview of the Global Fund's results as part of its next strategy. Currently, while the Global Fund clearly contributes to the greater global development agenda, specifically a number of SDGs and disease-specific objectives, the linkages to those global commitments were not made distinctly evident in its 2017-22 Strategy. While the Global Fund's Strategy (2017-22) does list the Sustainable Development Goals (SDGs) to which it contributes along with the disease-specific objectives to which it is aligned, the explicit linkages between its internal measures and the SDGs are still being developed.' Given the Global Fund's significant contributions toward these overarching commitments, it appears that the strengthening of its approach to M&E, as well as its new strategic documents will remedy that gap.

The Global Fund's overall financial framework is currently undergoing its own evolution. Recognising the need for a more integrated and transparent approach for its planning and budgeting, the Global Fund recently instituted a new system which requires a system-wide and holistic approach for bringing together its programming and operational expenditure (OPEX) budgets. While the results of this new approach have yet to be evaluated, it aims to optimise resources and ensure that the Global Fund's ability to deliver results is tied to how it allocates its internal resources. Per stakeholders, this new approach, while requiring increased levels of co-ordination and collaboration, appears to, at least initially, be resulting in more cohesion between the various financial streams.

FIGURE 8. THE GLOBAL FUND'S COUNTRY TEAMS ARE SUFFICIENTLY EXPERIENCED AND SKILLED TO SUCCESSFULLY MANAGE GRANTS IN THE DIFFERENT CONTEXTS OF OPERATION



Source: Based on responses to the MOPAN external partner survey, Global Fund, October-November 2021.

KPI 2: Structures and mechanisms support the implementation of global frameworks for cross-cutting issues at all levels, in line with the 2030 Sustainable Development Agenda principles

Performance rating: Unsatisfactory

Score 2.46

Human rights and gender (HRG) is one of four strategic objectives of the 2017-21 Strategy. While improving, efforts to address HRG issues still need strengthening. Accountability mechanisms, in terms of monitoring, evaluations, and auditing, for HRG are strong; there is coverage of HRG by TERG reviews and audits, although internal reporting on gender equality is limited to Adolescent Girls and Young Women (AGYW). Human resources for CRG has increased to 25 staff in 2021 from 3 in 2013, and there is additional gender expertise within the Secretariat and its Advisory Bodies. Likewise, gender expertise in the TRP has grown significantly, which has led to more recommendations to applicants for integrating HRG in grant making. Ninety-six percent of survey respondents agreed that the Global Fund promotes human rights.

Following the launch of CRG Accelerate (a re-organisation of the CRG department with the intent to provide more effective, focused and embedded support and advice) in 2019, accountabilities for HRG across the Secretariat have been strengthened with increased responsibilities delegated to the Grant Management Division (GMD). CRG has also developed a network of focal points who provide support to Country Teams, as well as technical guidance on gender equality but evidence of the guidance's use is mixed. Efforts are underway to make the guidance more user-friendly. CRG is also in the process of rolling out a learning agenda to increase staff capacities for HRG in GMD; though this is still a work in progress. Some concerns remain, however, that, per key informants, the level of financial resources dedicated to HRG are not commensurate to the importance it is given in the Strategy. Similarly, while human rights issues are appropriately integrated in the Global Fund's KPI framework, there is only one indicator (of the more than 40 indicators and sub-indicators) to monitor gender equality commitments which is at odds with "Promote and Protect Human Rights and Gender Equality" as one of its core objectives of the 2017-22 Strategy. Even so, there are continued efforts to improve the use of disaggregated data, including by sex, as well as three operational objectives aimed at addressing HRG issues in Global Fund grant programming.

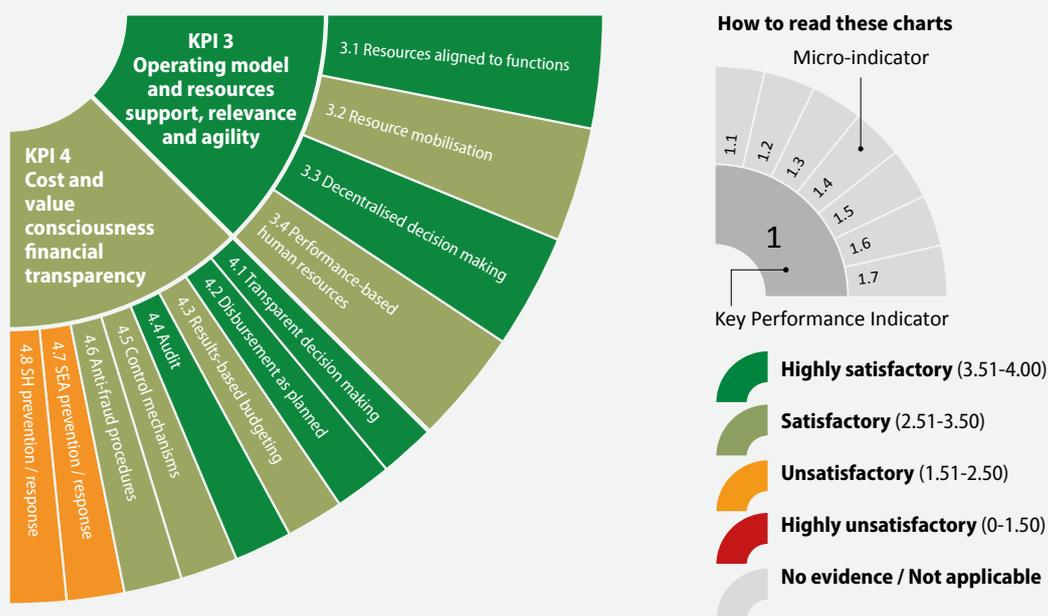
The 2017-22 Strategy does not address issues of environmental sustainability and climate change. In recent years, the Global Fund's Supply Operations Department has addressed environmental issues through its Responsible Procurement Framework. In addition, the RSSH team, the Health Product Management specialists and Supply Chain Team have supported the integration of healthcare waste management in grant making. The Global Fund developed guidance on healthcare waste management and provided training to country teams on it. These efforts, though limited, are hoped to improve the way in which grants address ESCC issues. Further, in December 2021, the Global Fund adopted a corporate statement on ESCC through which the organisation commits to addressing ESCC issues more comprehensively, and this approach is firmly embedded in the 2023-28 Strategy. With the addition of ESCC to its 2023-28 Strategy, the Global Fund is expected to further integrate ESCC issues in grant making, for example by supporting countries to build climate-resilient health systems. Beyond capacity in healthcare waste management and responsible procurement, the human and financial resources dedicated to ESCC are currently limited, and the Secretariat agrees that more expertise in this area will be required to ensure the successful implementation of new commitments on ESCC.

Building RSSH is a strategic objective of the 2017-22 Strategy however, key informants expressed concerns that it is not prioritised in grant making to the extent that it should be, nor have there historically been sufficient human resources for RSSH. Staffing has increased in recent years, including through the creation in 2021 of a Health Finance department, but high staff turnover in the RSSH team remains a challenge. The recent launch of an RSSH development and learning agenda aims to improve capacities for RSSH. In recent years, the Global Fund has released several guidance tools to support the integration of RSSH in grant making, but awareness and use of these tools varies by country. In addition, the tools are still too broad to meaningfully support the prioritisation of RSSH investments. Interviewees noted that this is likely because the Global Fund's approach to RSSH is so broad.

The Global Fund has improved the quality of indicators used to monitor RSSH commitments (with further improvement expected in the new KPI framework) and have strong mechanisms in place to report against RSSH objectives, including through internal monitoring and independent evaluations/audits. However, concerns regarding diffuse accountabilities for RSSH in the corporate Performance and Accountability (P&A) framework remain.

OPERATIONAL MANAGEMENT

KEY FINDINGS



The Global Fund has developed processes to ensure that its organisational structure remains fit for purpose and supports the implementation of its Strategy and has strengthened its internal control mechanisms in recent years. Starting with its allocation-based funding model based on transparent criteria, it ensures that funding decisions are made in line with global goals and commitments to the three diseases. Further, in 2019, it adopted an integrated budgeting process, whereby organisational units work jointly to develop a budget that is aligned with the Global Fund's priorities. It also introduced in the 2017–19 funding cycle a new portfolio optimisation process through which it reallocates underutilised budget funds to grants with higher absorption rates. This ensures funds are invested to achieve higher impact. These combined efforts led to grants absorbing and utilising funds, and demonstrating progress toward the Global Fund's strategic vision.

Though the COVID-19 pandemic has slowed that progress the Global Fund evolved both its processes and structure with the introduction of the COVID-19 Response Mechanism (C19RM). It enables the Fund to address the impact of the pandemic, without jeopardising gains against the three diseases. For example, to secure business continuity during the COVID-19 pandemic, the Global Fund further decentralised decision-making processes, which has resulted in a more agile response.

In terms of its staff (i.e., the Global Fund Secretariat), the roll-out of the Strategic Workforce Planning has provided the conditions for a potentially more flexible and responsive staff which can respond to emerging needs such as COVID-19. Nevertheless, as this assessment has already observed, there have been issues with staffing levels and ability, particularly related to CRG and RSSH. Staff performance is tied to individual objectives set in staff development plans, which are in turn linked to departmental and organisational objectives. The Global Fund has also

made progress in rolling out its learning and development programme. However, managing poor staff performance and ensuring that top talent progresses to leadership positions remain a work in progress.

The OIG is responsible for investigating cases of fraud or misconduct within Global Fund financed programs and by grant implementers within scope of its Charter. The Global Fund has guidelines for staff to report suspected cases of misconduct and there are clear standard operating procedures (SOPs) for management to handle these cases. The Global Fund has a policy on anti-corruption and fraud as well as functioning whistleblowing mechanisms. However, the Board has raised some concerns over the implementation of the policy such as concerns around the uncoordinated approach across the Secretariat and Global Fund operations and continuous challenges in the recovery of non-compliant expenditures faced by Country Teams; though its roll-out has begun.

An organisation-wide Operational Framework on the Protection from Sexual Exploitation and Abuse, Sexual Harassment, and Related Abuse of Power was approved in July 2021, almost three years after the Global Fund had committed to the outcomes of the London summit in 2018. The revised Codes of Conduct for Global Fund stakeholders contain explicit PSEAH-related prohibitions and are aligned to international best practice. However, SEA and SH are conflated in the Framework, which may pose a limitation to Global Fund’s approach given they are distinct issues requiring different capacities, resources and mechanisms to address. While dedicated resources and structures are being established, especially at the headquarters level, measures are yet to be strengthened to ensure operationalisation at the country level.

The **operational management** performance area gauges to what extent the assets and capacities organised behind strategic direction and intended results ensure relevance, agility and accountability. This area is assessed through the two key performance indicators specified below:

KPI 3: Operating model and human and financial resources support relevance and agility

Performance rating: Highly satisfactory

Score 3.60

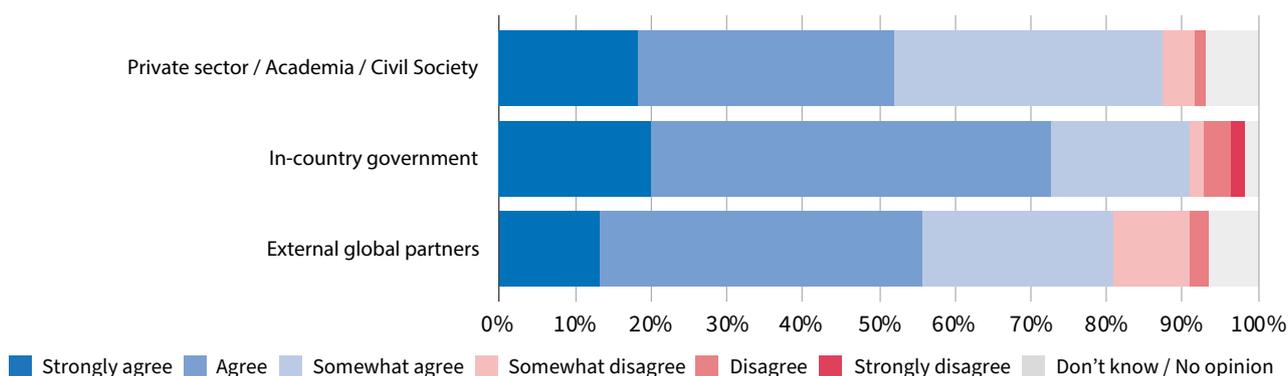
In recent years, the Global Fund has developed processes to ensure that its organisational structure remain fit for purpose and supports the efficient implementation of its Strategy. The Strategy Implementation Team is responsible for organisational planning and prioritisation and works in close collaboration with the Management Executive Committee (MEC) and teams across the Secretariat to ensure cross-organisational collaboration in the implementation of the Strategy. Furthermore, in 2019, the Global Fund adopted a new integrated budgeting process, whereby the Strategy and Policy Hub (SPH), finance and human resources work jointly to develop a budget that is aligned with organisational priorities. Further, the roll out of the strategic workforce planning has provided the conditions for a potentially more flexible and responsive staff which can respond to emerging needs such as COVID-19. Finally, the Global Fund has actively engaged in internal restructuring exercises, including creating a C19RM Secretariat, to ensure that its structure remains fit for purpose. This includes, among others, the creation/merging of the External Relations and Communications Division (ERCD) team to manage donor relations in an increasingly complex donor landscape. A new Health Finance Department was added to support domestic resource mobilisation (DRM) and health financing. These exercises were carried out in a context of increasing macro-economic challenges, where it is important to achieve programmatic results, and to prepare for transitioning away from dependence on external financing, including Global Fund grants.

Anchored in Strategic Objective 4 (SO4), the Global Fund has a robust resource mobilisation strategy. At its sixth replenishment, launched in 2019 for the 2020-22 cycle, the Fund raised USD 14 billion in donor pledges – a 15% increase over the previous replenishment cycle. In response to the COVID-19 pandemic, donors pledged an additional USD 4 billion for a total of more than USD 18 billion. Combined this represents 129% of its pledge target. The Global

Fund has signed agreements with multiyear payment schedules and the conversion of pledges into contributions is on track. The Global Fund has strong processes in place to promote domestic resources mobilisation, with co-financing requirements that consider specific country needs. Corporate targets on co-financing surpassed sustainability, transition, and co-financing (STC) Policy requirements by 129%,¹ and commitments increased by 41%² in the 2018-20 cycle on the previous period. In addition, the Global Fund continues to diversify its resource base by engaging with the private sector and philanthropies.

The Global Fund has a clear delegation of authority matrix for Annual Funding Decisions (AFDs). To ensure business continuity during the COVID-19 pandemic, the Global Fund has further decentralised decision-making processes, with the aim of a more agile response. Some of the results of this decentralised process can be seen in Figure 9 below as survey respondents perceive and agree that Country Teams have the authority to make decisions regarding country grants. In addition, the organisation has introduced in the 2017-19 funding cycle a new portfolio optimisation process through which underutilised funds are reallocated to grants with higher absorption rates. The reallocation of funds is done through a prioritisation framework (approved by the Strategy Committee), which ensures that the reallocation of funds is strategically invested to achieve higher impact.

FIGURE 9. THE GLOBAL FUND STAFF/COUNTRY TEAMS CAN MAKE CRITICAL PROGRAMMING DECISIONS FOR THE COUNTRY GRANTS



Source: Based on responses to the MOPAN external partner survey, Global Fund, October-November 2021.

Performance and Development is central to the Global Fund's approach to human resources. Structured around three key elements (agreed upon objectives, staff development plans, and on-going informal check-ins between staff members and their line managers to discuss performance), key informants noted that the recently introduced Performance and Development system is an improvement over the previous system, which saw performance assessment as a one-off event rather than a continuous process to manage staff performance. The performance assessment system is tied to a staff development programme whose design was informed by organisational needs. The recent introduction of 360-degree feedback mechanisms, per key informants, is also a welcomed addition to the Global Fund's human resources management. The Global Fund has also made progress in rolling out its learning and development programme. Nonetheless, managing poor performance and ensuring that top talent progresses to leadership positions remain a work in progress.

1. 2021 KPI report to the Board. Cohort of countries reviewed by GAC in 2020.

2. Increase in commitments for the implementation period of the 6th Replenishment.

KPI 4: Organisational systems are cost- and value-conscious and enable transparency and accountability

Performance rating: Satisfactory

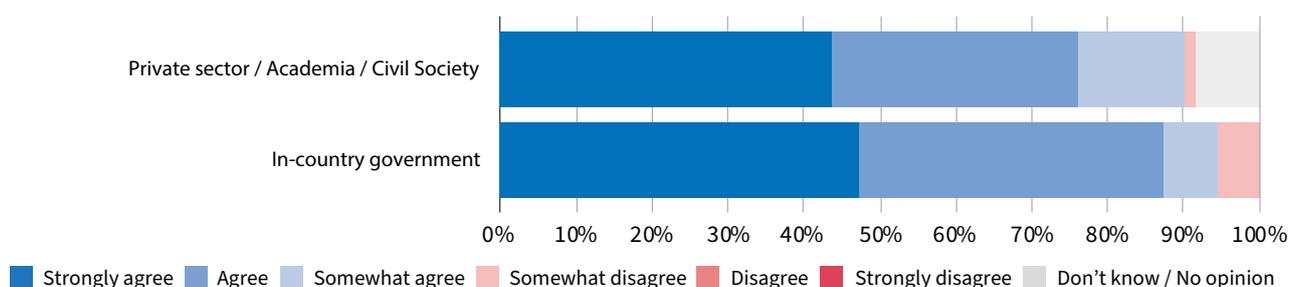
Score 3.37

The Global Fund has relevant and transparent resource allocation criteria that are designed in line with strategic priorities and in consideration of different contexts. The organisation’s allocation-based funding model was introduced in the 2014-16 funding cycle and refined over the years. It uses transparent allocation criteria that consider a country’s income level and disease burden to ensure that allocations are made in line with strategic objectives related to the three diseases, and respond to the greatest needs. The model also requires accountability of all partners and is flexible enough to be applied to different contexts. In acknowledging that strategic objectives cannot be achieved through country allocations alone, the Global Fund offers catalytic funding through three types of grants: 1) matching funds, which are provided to the country and complement country allocations; 2) multicountry funds; and 3) Strategic Initiatives with the aim to increase overall performance and results of country grants through different workstreams such as innovation, improved service delivery, human rights, etc. However, respondents indicate that the current allocation formula is less suited to the needs of countries where the disease burden is concentrated among key populations who may be overlooked if, for example, they live in a higher-income country. However, the allocation methodology does include an adjustment to account for the needs of key populations in low prevalence HIV settings.

Allocated resources are clearly disbursed in line with targets and absorbed by partners in an efficient manner. Any variances that are observed are reported in financial reports.³ The Global Fund has transparent resource allocation criteria that are clearly communicated to partners. During each funding cycle, countries are given an overview of the funding amount they will receive if their grant is approved and once approved, it is subject to clearly outlined AFD and disbursement processes. Grant absorption rates are strong and, despite a few gaps, disbursements to partners are efficient. The Global Fund closely monitors grant absorption and allocation utilisation through the Strategic KPI Framework. According to the mid-2021 Strategic Performance Report, the overall grant absorption rate was at 81% for 2018–20, which is above the 75% target. However, the Strategic Review 2020 found that RSSH grants tend to have lower absorption rates than average. Allocation utilisation (i.e. ensuring grant funding is allocated to countries through grants), on the other hand, reached 96% of the sixth replenishment disbursed or forecasted. In the survey, 92% of respondents agree that the Global Fund provides reliable information on when financial allocations and disbursements will happen and for how much. Any variances observed are attributed to external factors, more recently as a result of COVID-19. For example, the 2020 Annual Financial Report confirms there were savings incurred from reduced travel due to the global pandemic.

3. Analysis was done primarily at the policy level rather than examining individual grants.

FIGURE 10. GLOBAL FUND MANAGING FINANCIAL RESOURCES SURVEY RESULTS



Source: Based on responses to the MOPAN external partner survey, Global Fund, October-November 2021.

The Global Fund does not have a corporate budget detailing resource allocation by strategic objectives, but instead relies on a regularly updated and robust allocation methodology. There is no corporate budget providing detailed budgetary information per outcome area and no available information on expenditure per outcome area. Countries decide how to allocate resources within the resource envelope communicated to them. As a result, allocation letters and subsequent funding requests are aligned with the three diseases (SO1), but not necessarily with other Strategic Objectives such as gender equality and human rights. For example, the funding request form does not require applicants to specify expected amounts of investments for gender equality and human rights, even though this is a Strategic Objective of the Strategy.

Interviewees explained that the Global Fund as a grant-making organisation does not use the term ‘results-based budgeting’ (which implementing countries are responsible for), but rather ‘results-based financing’ (RBF). In particular, the Global Fund has adopted RBF by tying funding disbursements to the achievement of outcomes in the three diseases. In 2021, the Global Fund introduced three new OPEX budget⁴ categories to bring greater differentiation to resourcing, as follows: 1) core operations; 2) cyclical enablers; and 3) priorities. Funding is then allocated to each budget category. The third category includes six organisational priorities to enable the achievement of results.⁵ The allocation methodology, as mentioned above, is also regularly updated to ensure it stays fit-for-purpose and continues to consider grant effectiveness.

External audits of annual financial statements are conducted in accordance with international standards. They are accompanied by a management response that provides an action plan to address gaps. However, it is not made publicly available. Annual financial statements are subject to external audits conducted in accordance with International Standards on Auditing (ISAs) and the International Ethics Standards Board for Accountants Code of Ethics for Professional Accountants. Recently, the Comprehensive Auditor’s Report to the Board of Directors (2020), which was accompanied by a management response (with an action plan) submitted to the Board, confirmed there were no material misstatements in the annual financial statements (KPMG, 2020). The report was not made public beyond the Board; however, the auditor assessment of key audit risks and internal control systems is published on the Global Fund’s public website.

The Global Fund’s internal controls are improving and there are clear guidelines to handle cases of misconduct, as outlined in the Employee Handbook and Code of Conduct for Global Fund Employees, but gaps in implementation remain. The Ethics and Integrity Framework of the Global Fund to Fight AIDS, TB and Malaria (2014) covers multiple types of misconduct, including fraud and sexual misconduct. The Ethics and Integrity Case Management SOPs (2020) provides management with clear guidelines for addressing misconduct from case management to investigation and referral or escalation. There is also guidance for staff outlined in the Employee Handbook and Code of Conduct, which specifies the obligation of employees to report observed illegal or unethical conduct and explains how and who to report it to. The Audit of the Global Fund Key Organisational Controls (2021) confirms that internal controls have continued to mature and have shown an improvement compared to 2019. This was in part due to the launch of the P&A framework, which has contributed to enhancing the maturity of 52 business processes. However, the audit also identifies gaps in the implementation of internal controls, including controls supporting implementation readiness in grant making and controls in market shaping processes. Finally, the Global Fund tracks AMAs and presents a progress report to the Board on a bi-annual basis. The report includes the number of ‘open’ AMAs and actions taken to address them. Resolution of nearly one-third of the AMAs by the Secretariat is long overdue (more than six months) as of November 2021. The implementation of the AMAs was affected by the COVID 19 pandemic. The percentage of long overdue AMAs was much lower (approximately 8.7%) prior to the COVID-19 pandemic (November 2019).

4. The OPEX budget specifies funding for operational expenses.

5. These are: 1) Proactively mitigate impact of COVID-19; 2) Launch next cycle of grants & accelerate support to national programmes in COVID-19 context; 3) Drive efficiency & effectiveness; 4) Invest in people & build strategic capabilities; 5) Finalise the next Strategy & prepare for implementation; 6) Build Global Fund brand & prepare for 7th replenishment.

The Global Fund has a comprehensive Policy to Combat Fraud and Corruption (PCFC) and in general, effectively reports irregularities through its whistleblowing mechanisms. However, reporting by GMD Country Teams is not always systematic. The PCFC, adopted in 2017, is publicly available and applies to all Global Fund activities. There are multiple bodies responsible for overseeing its implementation such as the Ethics and Governance Committee, the Audit and Finance Committee (AFC), the Executive Director, the Inspector General, and the Ethics Officer. In 2006, the Global Fund also adopted a Whistleblowing Policy (later updated in 2019) and Procedures that cover both Global Fund employees, as well as third parties involved in Global Fund activities. The Policy outlines several means through which irregularities can be reported and individuals can also report potential wrongdoings through OIG's *I Speak Out Now!* Platform. The OIG is then responsible for reviewing all reports made by whistle-blowers, ensuring proper follow-up, or referring the case to another entity, as appropriate. There is evidence of the process working effectively with 51% (98) of all potential wrongdoings (194) reported to the OIG between January and September 2021 being reported through a whistle-blower, compared to 47% in 2020.

While the 2019 Audit Report: Managing Ethics and Integrity at the Global Fund commended the organisation for setting processes in place for implementation, it also flagged concerns around the uncoordinated approach across the Secretariat and Global Fund operations, which were backed by the Board. Grant Management Country Teams in particular, continue to face challenges in the recovery of non-compliant expenditures, as identified in the 2020 Audit Report 'Global Fund Recoveries Management Processes'. This was the case four years after issues were first identified in the 2016 Audit Report 'Recoveries'. For example, on average, it took Country Teams twice as long to issue Demand Letters compared to the required timeline of 120 days. Sometimes, letters were not even issued to implementers; in 2020, this amounted to USD 0.67 million. This is in part due to the Country Teams' continuous non-adherence with existing policies and procedures. The 2020 Audit Report rated the effectiveness of the process and controls on recoverable amounts to be only partially effective despite efforts to improve them such as raising awareness on anti-fraud and corruption and offering compulsory training for all Secretariat staff and LFAs. There is a need for independent monitoring controls across the whole chain of the recovery process from notification through to monitoring and resolution. An Implementation Plan⁶ was developed in 2021 to help operationalise the PCFC including actions such as updating the fraud risk management guidelines and tools for fraud risk assessments, embedding the guidelines into risks management tools and processes, and training staff, LFAs, and service providers on the updated approach.

The Global Fund has made progress in institutionalising a PSEAH⁷ approach at HQ and country level. It approved an organisation-wide operational framework in mid-2021. At the time of the review, however, measures were yet to be strengthened to operationalise the approach, particularly at country level. The framework was put into place almost three years after the organisation had committed to the outcomes of the London summit in 2018, notably to taking a victim/survivor-centred approach to SEA. The Global Fund included explicit PSEA-related prohibitions in all its Codes of Conduct which Global Fund officials need to certify annually that they have read and understood. The urgency to accelerate progress to institutionalise the PSEAH approach and further clarify roles and responsibilities through the adoption of an Operational Framework was felt more greatly after the OIG SEA investigation⁸ in Ghana completed at the end of 2020.

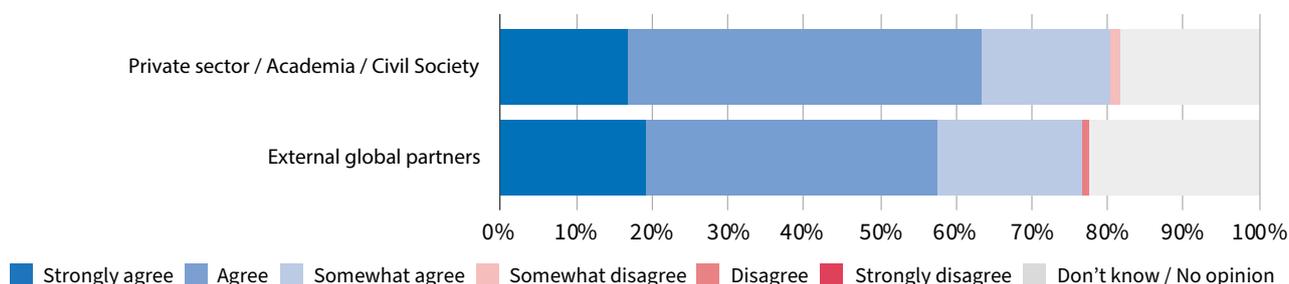
Mechanisms are currently being developed to track the status of the Framework's implementation. However, while there are already dedicated resources and structures to support its operationalisation at HQ, measures are yet

6. The Implementation Plan to operationalise the PCFC includes several actions such as updating fraud risk management guidelines and tools for fraud risk assessments, embed such guidelines into risks management tools and processes, and train staff, LFAs, and service providers on the updated approach.

7. The Global Fund defines sexual exploitation and abuse in line with the UN Secretary-General's Bulletin (2003): Sexual exploitation is "any actual or attempted abuse of a position of vulnerability, differential power, or trust, for sexual purposes including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another", while sexual abuse means "the actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions."

8. Refer to Part II for more information on the OIG investigation.

FIGURE 11. GLOBAL FUND MANAGING RELATIONSHIPS (SEAH) SURVEY RESULT



Source: Based on responses to the MOPAN external partner survey, Global Fund, October-November 2021.

to mature to support PSEAH efforts in country. Given the Global Fund's headquarters-centric model, due diligence processes in the field are particularly important in preventing and responding to SEA. The appointment of CCM and PR PSEAH Focal Points, the introduction of clear due diligence processes and the organisation of regional SEAH awareness raising workshops for implementers are efforts in the right direction. Yet, more can be done to strengthen Global Fund's focus in this area; for example, clarifying the goals and targets for its outreach and awareness raising efforts, and strengthening compliance checks. Also, there is no available information on the timeliness of response to SEA allegations. Initial data demonstrate that the number of allegations has increased from previous years, which might be an indication partners are becoming more aware of the available reporting channels and feel empowered to use them. Data from MOPAN's partner survey are somewhat sparse, with no in-country government responses and a relatively high percentage of 'Don't know/No opinion' responses from others (18%-22%), as shown above. Of those who have responded, only 17%-19% 'strongly agree' that the Global Fund requires partners to apply clear standards for PSEAH vis-à-vis host populations, which reflects the fact that many of these efforts have yet to mature and embed.

The Global Fund's approach to preventing and responding to sexual harassment⁹ is closely related to its approach to preventing and responding to sexual abuse, with both issues covered under the Operational Framework.

More work, however, is needed to further clarify the organisation's approach to addressing sexual harassment in light of the specific nature of the issue. Structures are not yet mature enough to fully differentiate between the Global Fund's approach to SEA and sexual harassment. This is important as different capacities, resources and complaint pathways are required to prevent, protect and respond to each issue.

As with SEA, Human Rights, and Ethics, the Ethics Officer conducts regular and mandatory training and awareness raising of sexual harassment policies, both through workshops based on case studies and internal communications for Global Fund officials. The current PSEAH Training and Awareness Activities Register, however, does not make a distinction between sessions focused on SEA and ones focused on sexual harassment, making it difficult to measure Global Fund's distinctive progress in building awareness about sexual harassment alone. Furthermore, while there are multiple mechanisms to seek advice or report allegations of sexual harassment, including informally, they are overlapping with the mechanisms for SEA. The Annual Implementation Plan (AIP) classifies the focus areas as 'Secretariat-facing' and 'country-facing', as well as falling under 'Prevention' or 'Response' but it does not further break down actions focused on SEA or sexual harassment, instead talking about PSEAH as a whole. This makes assessing Global Fund's performance in addressing sexual harassment challenging. The Operational Framework provides some clarity by outlining four key groups who have referral mandates if the allegation relates to sexual harassment (as opposed to SEA): 1) The Ethics Office (if the subject of investigation is an implementer, PR, sub-recipient, CCM Member, or counterparties such as suppliers);¹⁰ 2) the Ethics and Governance Committee of the Board (if the subject is the Executive Director, the Inspector

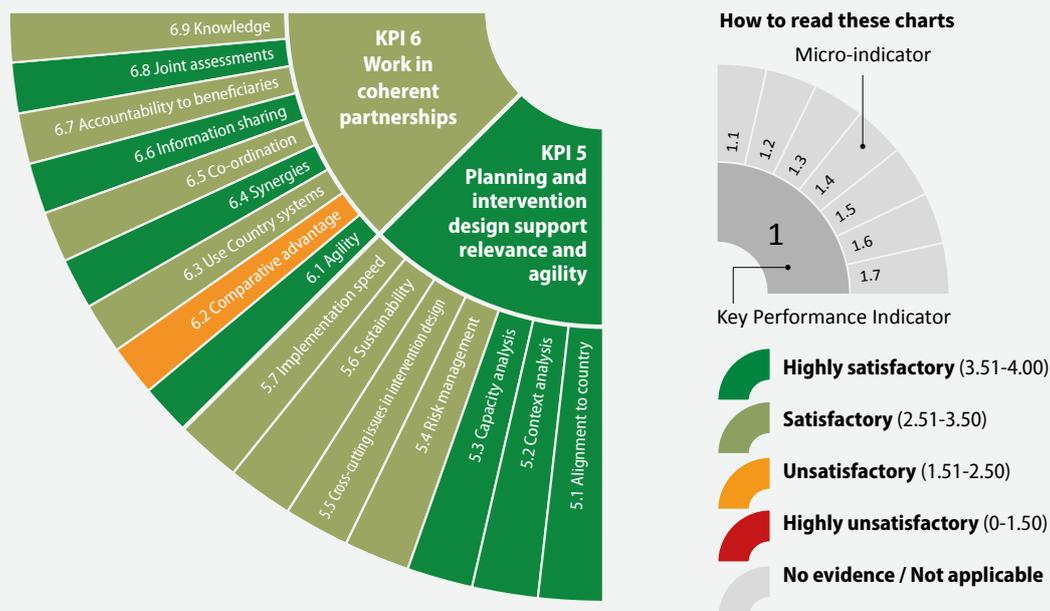
9. The definition of sexual harassment as it appears in the Framework is drawn from the Uniform Definition by the UN: Sexual harassment is "any unwelcome conduct of a sexual nature that might reasonably be expected or be perceived to cause offense or humiliation; Sexual harassment may involve any conduct of a verbal, nonverbal or physical nature, including written and electronic communications, and may occur between persons of the same or different genders."

10. In the case of governance officials, the Ethics Officer advises the Ethics and Governance Committee of the Board.

General, or the Ethics Officer; 3) the Chief of Staff (if the subject is a staff member from Human Resources), and 4) Human Resources (if the subject is other Global Fund staff and consultants). Overall, evidence on specific capacities, structures, and resources to address SH is limited and this makes it difficult to accurately assess Global Fund's progress in this area.

RELATIONSHIP MANAGEMENT

KEY FINDINGS



Partnerships are one of the cornerstones of the Global Fund and this principle is clearly articulated in many of its core documents. Since its inception more than 20 years ago, the Global Fund has emphasised that it operates within a partnership model drawing upon a wide variety of stakeholders, including governments, communities and civil society, the private sector, people affected by the three diseases, to ensure the success of its programmes. These partnerships operate at both the global level through several fora, including the composition of its Board, and at the country level through Country Coordinating Mechanisms (CCMs). CCMs and their inclusivity are one of the distinguishing features of the Global Fund. Its operationalisation of this principle, though, while generally strong, could be deepened in certain areas.

The application of the partnership principle within the programme cycle begins with ensuring grant alignment with national priorities through both the requirement of demonstrating linkages to national strategic plans and through the country dialogue process. The country dialogue process is where people affected by the diseases can share their experiences and help define the programmes to meet their needs and the needs of their communities. It is where decisions are made about which services the Global Fund will be asked to fund. Successful funding applications are clearly linked to national goals and interventions are situated within the operating context.

The Global Fund has outlined its various roles and responsibilities and of its partners and has operationalised those responsibilities in positive and reinforcing actions such as joint planning, programming, and ensuring transparency of budgetary information. Despite this, there remain a few areas which the Global Fund could strengthen to ensure that its partnership model remains fit for purpose. The Global Fund by the nature of its partnership model has to manage multiple accountabilities, including those to its donors and to its beneficiaries, which sometimes have divergent priorities. Further, there may be differing priorities within these broad stakeholder groups. For example, its donors may disagree, and there is the question of how to define a beneficiary (is it the host-country government,

communities and civil society, or service user?). While accountability is a principle to which the Global Fund adheres, there is limited documentation which states that one of those accountabilities is to its beneficiaries. Perhaps this has been an oversight, as all key informants believe that the Global Fund operates as accountable to its beneficiaries, but as noted, those beneficiaries can be numerous.

The **relationship management** performance area looks at whether and to what extent the Organisation engaged in inclusive partnerships to support relevance, leverage effective solution and maximise results. This area is assessed through the two key performance indicators specified below:

KPI 5: Operational planning and intervention design tools support relevance and agility in partnerships

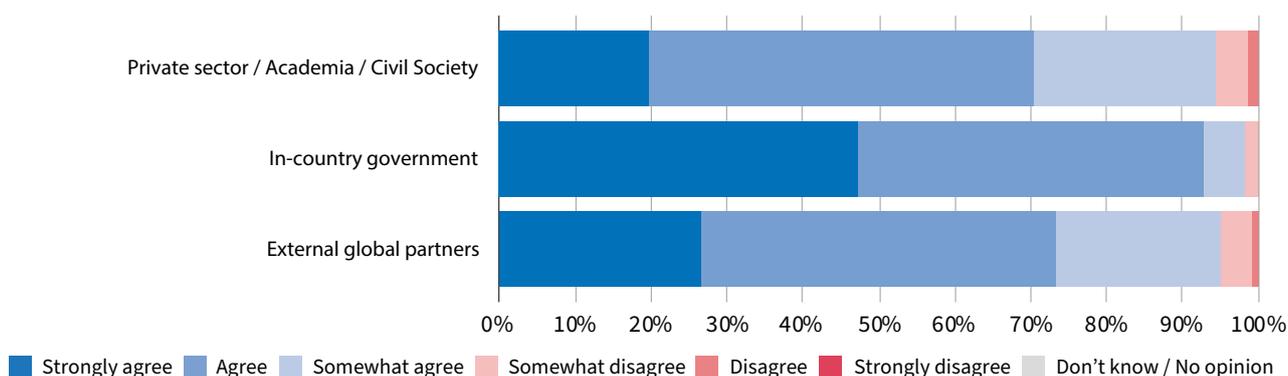
Performance rating: **Highly satisfactory**

Score **3.51**

Global Fund grant review and approval processes are robust in ensuring there is alignment with country needs and national priorities. At the corporate level, the Global Fund Strategy commits to tracking the needs of beneficiaries through KPI 5 (HIV prevention programmes for key populations in the organisational Strategy 2017-22). The operational policy manual also emphasises the role of national strategic plans (NSPs) in informing funding applications by stating that funding requests should consider how they will build on existing national systems and avoid duplication of efforts if awarded Global Fund financing. At the country level, the instructions for funding applications specify that applicants need to identify KVPs when considering the country context. They further stipulate that the request should be developed through an inclusive engagement with these same groups and requires applicants to make clear references to the country context, particularly the NSPs. GMD interviews confirm that Country Teams build the grant around the NSP and use it as the main reference document to inform the design of their grant application. When assessing the application, the TRP considers if the proposed interventions will scale up programmes for KVPs and the extent of their engagement and empowerment in decision-making, programme design, service delivery, advocacy, and accountability efforts. As can be seen in Figure 12 below, survey respondents strongly believe that the Global Fund grants are responsive to the needs of beneficiaries.

Overall, grants are designed and implemented by taking into account the operating context. Grant applicants are asked to position their interventions within the local context and have the option to request programme revisions in case of significant changes. For example, applicants are requested to provide information on the epidemiological context on the three diseases, the overall health and community systems (and the linkages between them), and the socioeconomic-related barriers in access to services. Interviews confirm that during the funding request preparation Country Teams prepare a portfolio analysis that feeds into an analysis of the country context and identify

FIGURE 12. RESULTS OF THE SURVEY ON WHETHER GLOBAL FUND GRANTS MEET NEEDS



Source: Based on responses to the MOPAN external partner survey, Global Fund, October-November 2021.

recommendations for the CCMs when preparing applications. However, a few informants acknowledged there is no special treatment for Challenging Operating Environments (COEs)¹¹ and there are challenges in managing expectations of the Board and TRP, which raises a question about the need to have full alignment and the wish to implement grants efficiently. There may be a need to better distinguish between the type of support provided (e.g. a COE grant) and the level of effort required to ensure alignment and allow for more flexibility in the Board and TRP's expectations. Nuancing expectations based on the type of grant will lead to more effective use of resources and allow Country Teams to focus their attention where it is most needed. For example, informants report that an expectation is that there will always be a full CCM (i.e., including representatives from all sectors involved in the disease response such as academic institutions, communities and civil society), but this may not be possible in countries in challenging operating environments where members are hard to recruit. During implementation, a programme revision can be triggered for a number of reasons specified in the OPM. For specific country contexts such as COE countries, the manual provides more agility; that is, countries can submit programmatic revision requests any time during grant implementation, if warranted.

Global Fund's funding processes and decision criteria are clear with capacity gaps identified during grant design and mitigation strategies considered prior to grant submission. The capacity assessment process is comprehensive and helps guide implementing partners about the areas they will be assessed against in their application. At the time of the funding application, each nominated PR undergoes a capacity assessment conducted by the LFA. In cases where no capacity assessment is conducted, a clear rationale must be included in the application package. If significant gaps are identified that cannot be mitigated in the short term, the Global Fund reserves the right to reject the nominated PR and request a replacement from the CCM. PRs are then responsible for assessing their proposed sub-recipients and other implementers below the sub-recipients with the expectation that the same level of assessment applied to PRs will be applied to the lower levels. There may be cases where the Global Fund Secretariat decides to undertake the assessment if, for example, if the PR has capacity issues or is not sufficiently independent to conduct an assessment.

The Global Fund has strong processes to identify and report on risks (e.g. strategic or operational), but the implementation of risk mitigation actions still requires improvement. Organisational risk frameworks and processes have matured over the years. Since the adoption of its Risk Management Policy in 2014, the Global Fund launched its first Risk Appetite Framework,¹² which defines the level of risk the organisation is willing to take to achieve its strategic objectives in 2018, and two years later updated its Enterprise Risk Management (ERM) Framework which outlines a 'three lines of defence model' in addressing risk in 2020. The organisational risk management processes and their application have significantly improved in recent years, including being more agile to respond to crises, such as COVID-19. The current organisational risk appetite of the Global Fund is focused on providing flexibility to the Secretariat to make informed risk trade-off decisions at the grant and portfolio level such that more challenging contexts are allowed a higher level of risk while striving to keep the overall risks below the Risk Appetite thresholds at the organisational level through planned mitigations and assurance activities.

The Integrated Risk Management Module (IRM), an online platform used by Country Teams to monitor operational risks, does not fully support comprehensive risk management beyond risk identification. The OIG Audit of Global Fund Internal Financial Controls (2021) found limitations in the IRM module around the prioritisation of risks and mitigation actions. Secretariat staff confirmed that a risk prioritisation exercise has been completed and that the IRM rebuild project, expected to be delivered in July 2022, would allow Country Teams to better track mitigation actions in the IRM module. Furthermore, the Global Fund analyses political risks, although this is not done systematically. A review by the MOPAN assessment team of the Organisational Risk Register reveals that political risks are considered in root causes analyses for only two of the 13 risks related to grants. In fact, the Policies and

11. The Global Fund defines COEs as countries or regions that experience disease outbreaks, natural disasters, armed conflicts and/or weak governance.

12. Revisions to the Risk Appetite Statements were approved by the Global Fund's Board in November 2021.

guidance reviewed, including the 2014 Risk Management Policy, the updated ERM Framework (2020) and the OPM on Risk Management across the Grant Lifecycle (2018) do not mention political risks. Finally, the Global Fund effectively manages reputational risks and ensures that the implementation of mitigation actions is on track. The organisation does not yet assess PSEAH risks in its grants but plans to start doing so in 2022 through the Organisational Risk Register (ORR). In November 2021, the Global Fund added 'SEAH and Misconduct' as a new ORR risk to be monitored with the roll out of the project and SEAH risk mitigations were first reported by the Ethics Officer in the May 2021 ORR.

The Global Fund's Strategy, as well as grant materials and approval process, include a consideration of human rights, gender, and RSSH, but these documents do not ensure sufficient country-level awareness of their significance. The Strategy includes four KPIs focused on cross-cutting issues¹³ and the Modular Framework Handbook which details intervention packages for RSSH and the three diseases for integration into grant applications includes mandatory core indicators around these issues. Funding instructions also refer extensively to 'gender', 'human rights' and RSSH and encourage applications to include a justification behind their choice of interventions and indicators through an HRG lens. Finally, the TRP's Terms of Reference (ToRs) includes criteria for assessing cross-cutting issues. However, while having strategic-level KPIs and documents around these issues is one way to ensure they issues are integrated into grants, their availability and accessibility is not sufficient to ensure countries use them effectively. There is also a need for more country-level awareness of the value of integrating cross-cutting issues in grants. This is especially true for RSSH activities, which are broad and complex, and which require a common country vision from the start to push the issue forward. Existing roles such as public health and monitoring and evaluation (PHME) specialists and CRG and RSSH focal points can provide tailored support to countries during country dialogue to ensure they consider all available guidance in their grant design.

The Global Fund has strong processes in place to ensure that grants are guided by requirements for sustainability and co-financing but needs to continue to track progress. The Global Fund's commitment to sustainability is formalised in the STC Policy adopted in 2016, which underscores the importance for countries to sustain and scale up programmes in an effort to move toward UHC. The Policy also introduced a co-financing requirement and committed to supporting upper middle-income countries to initiate the process of transition out of Global Fund financing and toward full domestic financing of the national response. The Funding Request Form for the 2020-22 allocation period requires applicants to indicate how they will meet their co-financing commitments and how challenges related to sustainability and transition will be addressed. There is evidence of positive change with the Global Fund largely surpassing its co-financing targets. In fact, the TERG Review of the STC Policy concludes that effective skills and tools are already in place to support countries to make the transition; however, more attention is still needed in regions where few countries are planning for transition and the measurement of STC commitments is not comprehensive as given in the KPI Framework. Interviews confirmed there is ongoing work to enhance the monitoring of the STC Policy.

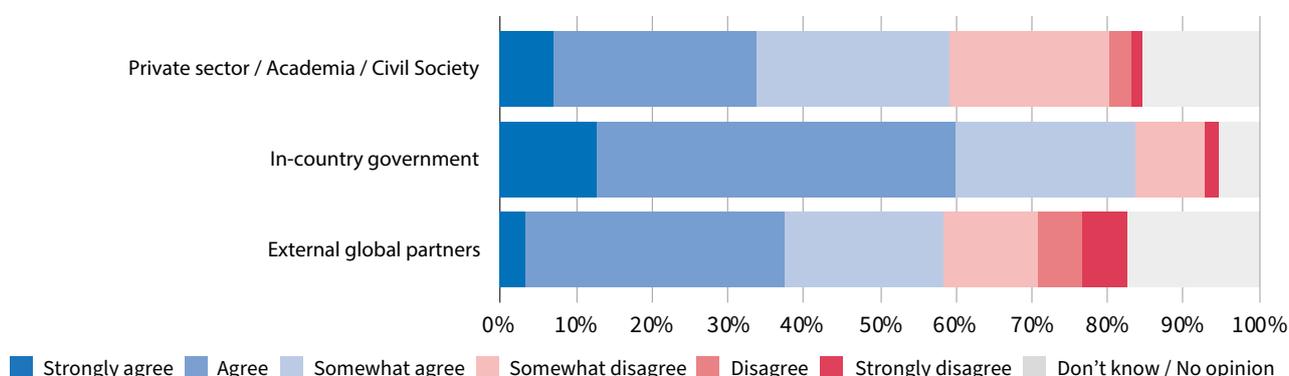
The Global Fund has mechanisms to track grant performance and if needed, adapt them to local contexts and needs during implementation. Performance monitoring mechanisms such as the grant oversight tool ('dashboard') and the PR progress update and disbursement requests (PU/DRs) are used by CCMs to monitor performance in key areas such as financial, programmatic and management. Interviewees also confirm that Country Teams regularly monitor grant performance frameworks to track progress and inform the Secretariat of any implementation issues.

Programme revisions (formerly 'reprogramming') are another mechanism through which grants can be adapted to local contexts to achieve maximum impact.¹⁴ Recently, as part of the business contingency planning for COVID-19, delegation matrices were developed for the first time in order to outline the people responsible for making decisions when key staff was unavailable. GMD recently launched a process to identify bottlenecks to take off speed during an

13. 1) KPI 9 on gender and age equality, 2) KPI 9a on human rights barriers to services, 3) KPI 9b on key populations and human rights in MICs, and 4) KPI 9c on key populations and human rights in transition countries.

14. Programme revisions can include extensions, additional funding revisions, programme revisions, budget revisions or administrative revisions.

FIGURE 13. RESULTS OF THE SURVEY ON THE GLOBAL FUND'S MANAGEMENT OF RELATIONSHIPS



Source: Based on responses to the MOPAN external partner survey, Global Fund, October-November 2021.

implementation cycle and address any challenges with delays. The access to funding (A2F) and allocation team also reports a positive trajectory in the speed with which funds are integrated in grant revisions over the years.¹⁵ Survey results are more nuanced with only 41.5% of survey respondents either stating that they ‘Strongly agree’ or ‘Agree’ that the Global Fund’s processes do not cause unnecessary delays for grant recipients as shown in Figure 13 above. This may reflect the fact that efforts to improve implementation speed are still at an initial stage and it will take time for their effects to be felt across the portfolio by all grant recipients.

KPI 6: Working in coherent partnerships directed at leveraging and catalysing the use of resources

Performance rating: Satisfactory

Score 3.25

Partnership, including joint planning and programming, is operationalised at the country level primarily through support to CCMs. Procedures and mechanisms for programmatic changes are well-defined in the Global Fund’s OPM. As reflected in its framework documents, partnership is at the centre of how the Global Fund does business. Its model for planning and programming relies heavily on a bottom-up approach which is driven by country partners and their participation and input to the CCMs. Further, it is made clear in documentation that the Global Fund has a commitment to support programmes that reflect national ownership, respect country-led implementation processes, and ensure all members have an equal voice. These ideas were echoed by staff who noted that the Global Fund model of working through CCMs “...has proven to be robust” and works well with communities and civil society. For programme revisions, the OPM notes that the goal of a grant revision is to allow Global Fund investments to adjust to programmatic requirements...to ensure the continued effective and efficient use of Global Fund resources...”. The OPM further defines when and under what circumstances (or triggers) a grant revision may occur, as well as the processes and requirements for that revision, a decision tree to determine the type of grant revision to pursue, the criteria for determining the appropriate approval authorities, and the responsibilities of partners. For example, with a grant revision the PR initiates the request, the CCM endorses the request, the LFA may be requested to review the revision documentation, and the Country Team reviews the request and will facilitate approvals with the Board and Grants Approval Committee (GAC), when applicable. All these types of grant revisions and the procedures for requesting approval are provided in the OPM and staff believe they operate well. For example, grant flexibilities allowed countries with current Global Fund grants to meet immediate COVID-19 response demands by either using up to 5% of their current grant value where there were savings, and/or reprogramming up to 5% of the value of a grant. It was estimated that nearly USD 500 million could be reprogrammed for COVID-19 as part of this approach.

15. For example, the process now takes two months compared to over six months in previous cycles.

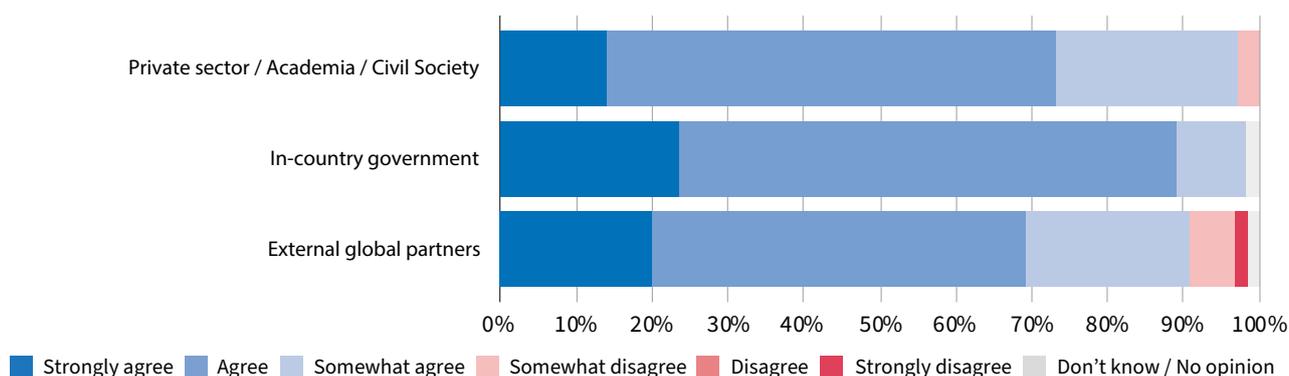
The Global Fund’s comparative advantages are only clearly articulated in its new strategy (2023-28) and supporting documents. Thus, there was not a clear and explicit statement on the comparative advantage that it brings to a given partnership for most of the review period nor could it be fully determined whether the Global Fund’s resources/competencies are aligned to its perceived advantage. Though there is discussion of the Global Fund’s comparative advantage, it is not clearly articulated until the development of the new strategy. Indeed, one document notes that partners, via the Global Fund’s Partnership Forum, requested it to be more clearly expressed. However, within the survey (see Figure 14 below), 53.4% of respondents either ‘Strongly agree’ or ‘Agree’ that the Global Fund’s work with partners is based on a clear understanding of its comparative advantage, another almost 30% ‘Somewhat agree’.

Further, staff noted that the Global Fund does bring several comparative advantages to its partnerships, such as

1. a clear focus on its mandate
2. an ability to contribute to building health systems, the movement toward UHC, and Sustainable Development Goal 3 broadly
3. its flexibility and adaptability, demonstrated in its response to the COVID-19 pandemic and partnering with counterparts in the ACT-A
4. a willingness to consider and respond to new donor concerns (e.g. climate change, sexual exploitation, abuse, and harassment, etc.)
5. its market shaping abilities both in scale and scope and lowering prices for all partners
6. its ability to leverage co-financing, both internationally and domestically; and,
7. perhaps, most importantly, that its CCMs have given all partners at the country level a forum to discuss issues regarding the three diseases (and now COVID-19).

The Global Fund provides several unequivocal statements about how it will support principles of collaboration with countries in their development agenda, but is less clear about how it will support partnerships between countries. To date, most South-South cooperation has been done via Sis. between countries has primarily been done through Strategic Initiatives. The Global Fund during the 2017-19 funding period, supported a South-South Peer Review, Learning and Funding SI with an approximate value of USD 14 million, as well as a number of regional and global workshops. Another South-South SI received USD 7 million in funding for the 2020-22 period. However, it should be noted that: 1) SIs are not typically part of the ‘core’ programmatic funding and are, thus, not guaranteed a continued focus; and, 2) the 2019 TERG Review of Partnerships examined six different models of technical assistance partnerships none of which was developed for collaboration between countries. Staff who were knowledgeable about the Global Fund’s South-South partnerships believed that they worked fairly well which aligns with the survey results. Several

FIGURE 14. GLOBAL FUND STRATEGIES DEMONSTRATE GOOD UNDERSTANDING OF COMPARATIVE ADVANTAGE



Source: Based on responses to the MOPAN external partner survey, Global Fund, October-November 2021.

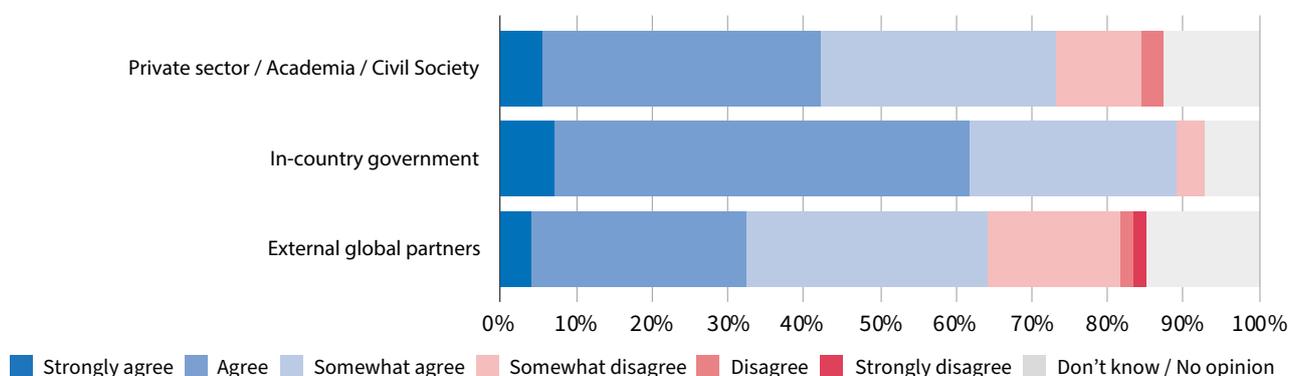
Global Fund framework documents state that the Global Fund will promote partnerships among all relevant players within the country, and across all sectors of society. Its Strategy also provides an accountability framework to enable the Global Fund and its partners to measure the effectiveness of the partnership through the ability to deliver results.

As can be seen in Figure 15 below, approximately 42% of survey respondents either ‘Strongly agree’ or ‘Agree’ that the Global Fund grants support countries in further developing partnerships. Another 30.5% ‘Somewhat agree’, with 12.6% choosing to ‘Somewhat disagree’ and another 12.6% either ‘Don’t know’ or have ‘No opinion’.

Throughout the Global Fund’s framework documents there are multiple statements about how it works in partnership and leverages resources, including domestic financial resources through its STC Policy, to produce results. However, recent reviews note that this co-ordination and leveraging could be strengthened. The Global Fund’s framework documents show that the organisation was established on the basis of partnership and the idea of making available and leveraging additional financial resources to combat HIV/AIDS, TB and malaria to support attainment of the SDGs. Further, the Global Fund plays a role in raising additional resources, including expanding innovative financing approaches, assisting countries to leverage domestic resources, and bringing in new private sector donors. More specifically, the Global Fund encourages investments through joint platforms to address high priority areas at the country, or sub-regional levels to leverage the capabilities of development finance institutions, as well as the additional funding they can provide. Finally, the overarching goal of the Global Fund’s country engagement on co-financing is to leverage additional domestic financing in line with overall health needs, National Strategy Plan targets, and the fiscal capacity of the country.

Recent TERG reviews, for example, however, highlight that there continues to be a need to strengthen this area. For example, the TRP in its review identified that in the funding requests there is a need for significantly increased co-ordination across partners and that the Global Fund will need to work differently in the 2020-22 allocation cycle and beyond, to intensify synergistic efforts with partners, donors and domestic resources, to leverage the full potential of its replenishment and to maximise the impact of funding from different sources. Given the various international fora in which it participates, the relationships it has developed within its partnership model, and the success it has had via its STC policy, many of these issues can be resolved. However, the lack of country presence, exacerbated by the COVID-19 pandemic, may limit the Global Fund’s ability to fully leverage and co-ordinate with partner contributions (financial, technical, programmatic) at the country level.

FIGURE 15. THE GLOBAL FUND GRANTS SUPPORT COUNTRIES IN FURTHERING DEVELOPMENT OF THEIR PARTNERSHIPS (FOR EXAMPLE, THROUGH SOUTH-SOUTH CO-OPERATION)



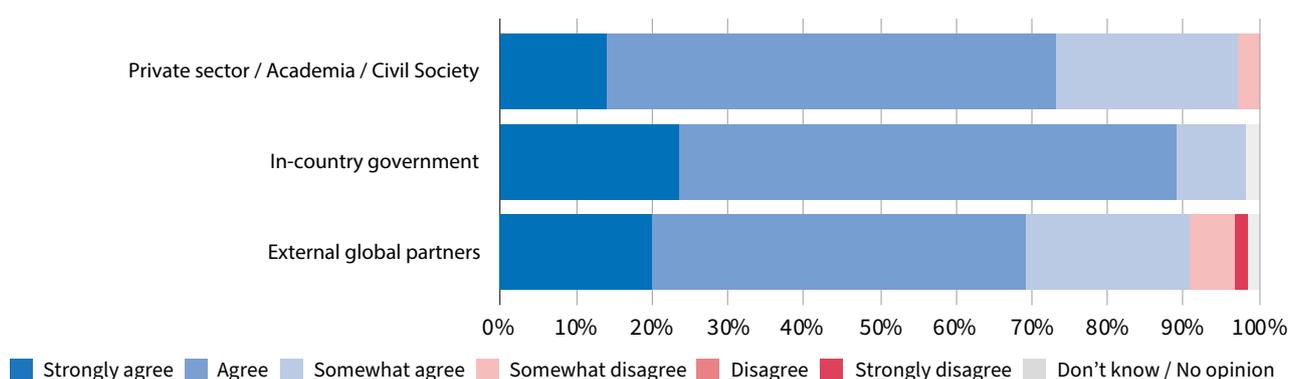
Source: Based on responses to the MOPAN external partner survey, Global Fund, October-November 2021.

At the country level, the Global Fund engages through CCMs with key development partners to support external coherence. The assurance of external coherence thus depends on CCMs, which vary in how well they function. CCMs are the key organisational unit by which planning, design, implementation, monitoring and reporting is co-ordinated with relevant partners at the country level. The Global Fund through its CCM Policy requires all CCMs to co-ordinate the development of all funding requests through transparent and documented processes that engage a broad range of stakeholders, including CCM members and non-members. Further, the Global Fund requires all CCMs to oversee the performance of the Principal Recipients to ensure that agreed targets are met and to endorse any proposed programmatic revisions. However, as numerous evaluations, reviews, studies and other Global Fund documents have noted, the functioning of CCMs can vary widely both based on the host country and the lifecycle of the CCM (i.e., whether members are new or experienced) Therefore, information gaps can occur at the country level when CCMs and their corresponding Secretariats have neither the bandwidth, the capacity, nor the interest in assuming these responsibilities. While this may be mitigated by the Global Fund having additional country partners (e.g., donors, technical agencies, LFAs, etc.) with whom it can engage, the CCM remains the focal point.

Within the Global Fund Secretariat two main groups (with Secretariat support) are tasked with ensuring information needs are fulfilled prior to grant signing. These two groups are the TRP and the GAC. The TRP evaluates every request for funding submitted to the Global Fund and is comprised of an independent group of experts in HIV, TB, malaria, HRG, health systems and sustainable financing. The GAC is a committee of senior management at the Global Fund, as well as representatives of technical, bilateral and multilateral partners and has, among other functions, the responsibility for the final review of a grant proposal before recommending it to the Board of the Global Fund for approval. As part of its review, the GAC determines the final programmatic scope to ensure strategic investment of Global Fund resources, aligned with the national strategy, and focused on key populations, human rights, gender, and high transmission geographies as appropriate. The Global Fund also participates in Situation Rooms for the three diseases. The Situation Rooms allow for close monitoring and support for co-ordination amongst partnerships and aim to improve targeting and effectiveness. Thus, again at the global level the Global Fund is well-positioned to ensure external coherence as long as accurate country-level information is provided to it directly or via its partners.

The Global Fund has made transparency of information one of its founding principles and its adherence to the International AID Transparency Initiative (IATI) guidance has been affirmed. It provides timely and quality responses to partner requests on analysis, budgeting and management. Transparency is highlighted as one of the Global Fund's key principles. Further, as noted in its 2018 "Donor Group revised process for public donor seat allocation", "The Global Fund operates with a high degree of transparency in all of its work. The Global Fund fully participates in the IATI and supports international efforts to improve aid transparency and accountability. The Global Fund bases its work on programmes that operate in a transparent and accountable manner based on clearly defined responsibilities."

FIGURE 16. THE GLOBAL FUND SHARES KEY INFORMATION WITH PARTNERS ON AN ONGOING BASIS



Source: Based on responses to the MOPAN external partner survey, Global Fund, October-November 2021.

Several thousand Global Fund documents have been submitted and made available through IATI. Furthermore, the Aid Transparency Index 2020 ranked the Global Fund eighth of all organisations reviewed, with an overall score of 86.5 and an overall rating of ‘Very Good’. It did not receive full scoring, though, for failing to provide disaggregated budgets, project budgets, and project budget documents. While the Global Fund’s Annual Reports are available publicly, as well as its mid- and end-year strategic performance reports, and a specific web page for exploring data, the process for responding to ad hoc partner queries appears to be less defined at the corporate level as it is dependent on what type of information is being requested. Within the MOPAN survey 68.3% of respondents either ‘Strongly agree’ or ‘Agree’ that the Global Fund shares key information with partners on an ongoing basis. Another 21.5% ‘Somewhat agree’.

Although accountability to beneficiaries was cited by stakeholders as one of the Global Fund’s key principles, there is limited documentation which explicitly states this principle, and this merits review. Further, because of the Global Fund’s financing mechanism role, that accountability is indirect and there are multiple accountabilities which sometimes causes tensions between partners. There were few documented explicit references of accountability to beneficiaries/affected populations (e.g. 2020 Code of Conduct for Global Fund Employees, Ethics and Integrity Framework). The aforementioned Codes of Conduct, for example, state that employees should “Be guided in their actions and decisions by the Global Fund’s commitment to the principle of accountability and act in the best interest of the Global Fund and its beneficiaries.” Though several OIG audit reports allude to accountability to beneficiaries, those reports are not core operational guidance. Other documentation which notes specific accountability is that for CCMs and their members; “As individuals, CCM members are accountable to the core constituency and, as a group, the CCM is accountable to the nation...”.

Interviewed staff at all levels stated that the Global Fund is accountable to its beneficiaries even if that accountability is difficult to define. Additionally, per key informants, that accountability has to be balanced against other accountabilities such as those to the governments/taxpayers of donor countries, the in-country governments in which there are grants, and the Global Fund’s wider partnership, including its governance structure. As a few staff noted, these different accountabilities can cause tension among constituencies as they can be in variance (e.g. the principle of country ownership and extent to which government and communities and civil society are duty bearers for accountability). Further, Global Fund grants are implemented through PRs which, usually, work with sub-recipients and sometimes sub-sub recipients. Thus, the level of accountability for the Global Fund usually is ensuring that PRs, as well as CCMs adhere to their respective Codes of Conduct, as well as accountability pursuant to grant agreements and CCM funding agreements, respectively. Finally, within the grant application form specific sections are utilised for applicants to present information on how beneficiaries will be addressed by a Global Fund grant and those criteria are considered in reviewing funding applications. Some staff expressed concerns that this lack of an explicit statement had undermined the ability of communities and civil society to ensure that their concerns were adequately addressed during the funding request development process.

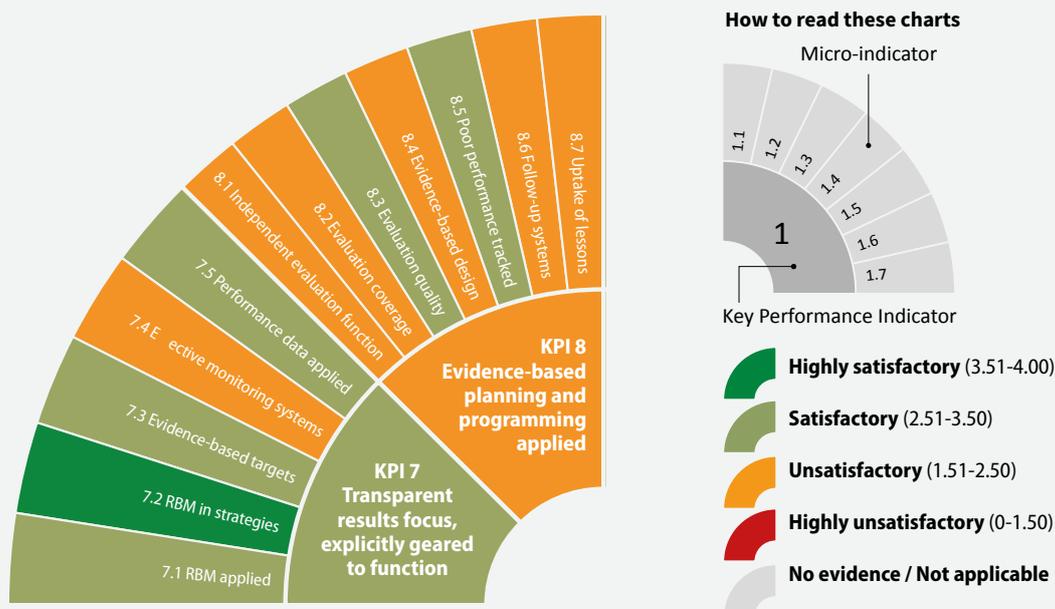
At the country-level most joint/national programme reviews are undertaken by the CCM as part of its oversight responsibilities and the Global Fund Secretariat and its partners are encouraged to participate in joint reviews, monitoring, and evaluation as well. With the exception of underperforming CCMs, these are suitable structures and processes. CCMs are required to oversee the performance of the PRs to ensure that agreed targets are met and drive improvements in grant performance in support of national programmes. For PRs there are certain indicators for implementation which encourage joint planning and review such as the number of joint planning and review meetings, joint TB and HIV planning to integrate the delivery of TB and HIV services, and joint monitoring and supervision visits. The MOPAN survey shows that 52.9% of survey respondents either ‘Strongly agree’ or ‘Agree’ that the Global Fund jointly monitors progress on shared goals with local and regional partners. At a broader level, the Global Fund, per its Strategic Framework for Data Use for Action and Improvement at Country Level (2017-22), has stated that it aims to support annual programme reviews and co-ordinated joint partner missions in countries, undertake targeted joint partner missions on specific thematic areas to help solve specific bottlenecks and document progress, strengthen

existing platforms of routine programme reviews, support joint evaluations, and work within joint forums to review success and implementation challenges, and identify actions. The Global Fund has, thus, put in policies, processes, and systems which generally are fit for purpose to ensure co-ordinated efforts with its partners. However, a notable gap is that CCMs may not fulfil their role in these efforts if they have not been capacitated to do so. While other Global Fund country-level partners can participate in joint reviews in lieu of CCMs, this undermines both the standing and purpose of CCMs and could call into question the need for their continuation.

The Global Fund does not define for itself an explicit role in knowledge production. While some data that it produces helps inform decision-making, there are concerns about the quality, quantity and consistent use of its knowledge products. Staff noted that the Global Fund does not develop technical guidance, but applies the guidance developed by its partners in the countries where it works. Particularly useful are the lessons learned and best practices, which are derived from the operational knowledge of the Country Teams and are then shared in various fora. While Secretariat staff acknowledge that the sharing of this knowledge externally could be improved, in general, they believed that it has been effective in strengthening the response to the three diseases. Most external interviewees who were asked whether the data and information they received from the Global Fund Secretariat was used for decision-making and subsequent actions stated that it was and were appreciative of the Secretariat's efforts in this regard. Similarly, approximately 61% of MOPAN survey respondents either 'Strongly agree' or 'Agree' that the Global Fund provides high-quality inputs to the global policy dialogue. Another 21.7% 'Somewhat agree'. The Global Fund, therefore, has become recognised by its partners as a major de facto producer of knowledge both operationally and technically. The next step would seem to be a clear recognition of this role and a strengthening of the structures and processes which would allow systematic knowledge sharing with all of its partners.

PERFORMANCE MANAGEMENT

KEY FINDINGS



The Global Fund is a performance-based funding agency. It uses performance data based on results to guide its operations, including funding decisions. But one of its challenges is that key data can be missing or erroneous due to flaws in the reporting process and human resource constraints. Over time, the organisation has shifted its focus from project-level goals to higher-level results. There is clear accountability for achieving results, including

for Country Teams at the country level. All relevant staff are trained in results-based management (RBM) at the start of the funding cycle and throughout the implementation of the grant. While beneficiaries are not directly consulted in the process of setting specific targets, they are involved in the overall grant design. However, while the Global Fund has various tools and methods for measuring and managing results, some grant management activities are not clearly linked to corporate-level results. Existing tools are not fully effective at measuring the outcomes of RSSH interventions in particular, as they may not be observed within the three-year grant cycle which can be too early to measure them and due to the complexity of tracking RSSH outcomes with various organisational units responsible for their measurement.

There is a sub-optimal organisational culture of learning from evaluations across the partnership due to the absence of an overarching M&E framework and underdeveloped structures for disseminating and following up on evaluation findings. The evaluation function of the Global Fund, or the TERG, is an advisory body that consists of independent experts. However, the TERG does not have full discretion in deciding the evaluation programme. Furthermore, the evaluation programme is only partly funded by core funds with the rest covered by catalytic funding. In the absence of an evaluation policy, there is an evaluation plan produced both on an annual basis and a multiyear basis. There are also clear mechanisms to feed lessons in the design of new funding proposals, but it is ultimately the responsibility of the CCMs (and PRs) to follow up on actions and on Country Teams to feed lessons into the next funding cycle. Some evidence exists to suggest that lessons from past grants have informed new designs, but it is not clear how consistent this is across the whole portfolio. In fact, there are limited mechanisms for distilling and disseminating lessons learned. The new independent model for evaluation approved in November 2021 aims to contribute to the better integration of various M&E mechanisms across the organisation and focus on facilitating wider learning.

The **performance management** performance area assesses the existence of systems geared to managing and accounting for development and humanitarian results and the use of performance information, including evaluation and lesson-learning. This area is assessed through the two key performance indicators specified below:

KPI 7: Strong and transparent results focus, explicitly geared to function

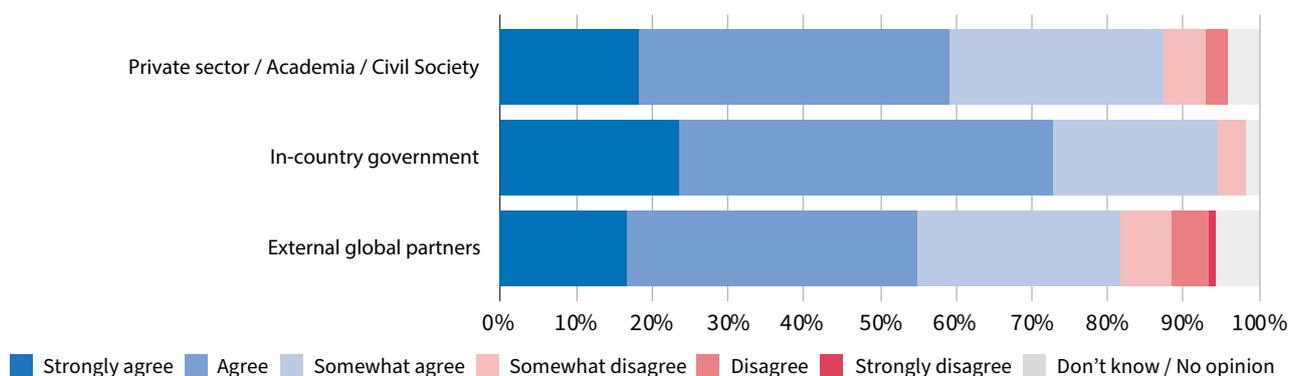
Performance rating: Satisfactory

Score 3.05

The Global Fund is a performance-based agency that is committed to supporting strategies and interventions that focus on clear and measurable results and uses results at all levels of decision-making, but the results focus may not always permeate down to grant activities Since its adoption in 2004, the Global Fund's KPI Framework, which drives the organisation's focus on results, has shifted its focus from project level goals to higher level results. The Global Fund's Accountability Framework clarifies staff roles and responsibilities for the different strategic KPIs with focal points across the Secretariat responsible for providing data used for results reporting which is validated via three control points. Most survey respondents agree that the Global Fund's grants prioritise a results-based approach with almost 98% agreeing in both the private sector/academia/civil society and in-country government groups. At the grant level, there are also detailed performance frameworks developed by the Country Teams for each grant. However, they are not sufficient to ensure strong links between strategic KPIs and grant management activities. For example, at the time of the assessment, three of the seven sub-strategic objectives on RSSH were not being measured either through the KPI Framework or other defined performance metrics.

Global Fund's strategic KPIs effectively guide the organisation in its allocation decisions due to their relevance, but work to measure RSSH for effective decision making is still developing. Strategic Performance Reports provide a biannual update to the Board on KPI results against targets, including trends over time and areas of strong and poor performance. The strategic KPI Framework is also updated on a regular basis to ensure it stays fit-for-purpose, including

FIGURE 17. RESULTS OF THE SURVEY ON GLOBAL FUND RESULTS-BASED MANAGEMENT



Source: Based on responses to the MOPAN external partner survey, Global Fund, October-November 2021.

undergoing independent reviews. However, the approach to measure RSSH in an integrated way across departments is just beginning and there are still challenges in the KPI design and monitoring of RSSH objectives. While most targets and indicators are adequate to capture causal pathways between interventions and outcomes, this is not the case for all RSSH objectives. Currently, RSSH interventions are being implemented across multiple organisational units at different levels of measurement maturity, which makes it hard to standardise the data and make funding decisions across the portfolio. While indicators for HIV, TB, and malaria are generally informed by NSPs and global targets, the causal pathways between RSSH activities and results are not always adequately captured. The Global Fund's IT system and in-country structures may not be optimally designed for the measurement of RSSH activities due to the fact that any results are unlikely to be observed on an annual basis (when other grant reporting occurs). In fact, activities often take much longer than the standard grant cycle of three years to be completed. Work Plan Tracking Measures (input and process level measures) were designed to be used by Country Teams to track implementation, where no indicators for material RSSH activities existed, but their use was found to be inconsistent. The process of collecting and cleaning data from across the organisation so that it is readily available for reporting is resource intensive and currently, relies heavily on individual staff knowledge which can limit its quality, accuracy, and completeness. Work is ongoing to identify the critical resource needs for robust data collection as part of the new strategy implementation planning, with the OPEX budget, the SIs funds and grant funds available to meet the required costs.

While the Global Fund relies on performance data to develop strategic documents and new interventions, it faces challenges in consistently using this data for real-time decision-making. Interviews indicate that there is no specific system for monitoring poorly performing grants and that their identification depends instead on specialists within the country teams awareness. This creates difficulties in addressing poor performance in a comprehensive and timely manner. Furthermore, Board members noted that country-level data is rarely, if ever, shared with them even though they have oversight and authority to reallocate funding based on the performance data. The shift of the Secretariat's KPI team from Finance to the SPH, has already created synergies for more effective performance management.

KPI 8: Evidence-based planning and programming applied

Performance rating: **Unsatisfactory**

Score **2.23**

The Global Fund's current evaluation function, the TERG, is not fully autonomous due to the TERG Secretariat's organisational location within the Global Fund Secretariat, partial discretion of the evaluation programme, and the nature of their funding. The expert group, which consists of independent advisors, has three main functions, as originally specified in their ToR: 1) providing an independent assurance function by overseeing independent

evaluations, 2) facilitating organisational learning, and 3) providing independent advice on M&E to the Secretariat, Board, and its Committees.¹⁶ While in theory, the TERG is institutionally independent and reports directly to the Steering Committee and Board, in practice, it faces challenges around its structural and behavioural independence. The TERG evaluation programme is funded by core funds; however, the Prospective Country Evaluations (PCEs) were funded under catalytic investments. Going forward, the budget will be fully funded under OPEX.¹⁷ Interviews indicate that a mix of stakeholders feed into the evaluation programme with, for example, the TERG consulting widely within the Secretariat and the Strategy Committee. The TERG evaluation plan is then presented to the Strategy Committee for approval. The new evaluation model to be transitioned to in 2022 and initiated in 2023 aims to improve the independence of the evaluation function by fully financing the evaluation programme by core funds and by integrating all evaluation work to be managed by an Evaluation Unit in the Secretariat under the oversight of the Independent Evaluation Panel. The Panel, which will report to the Board, will adapt a transparent and systematic approach to what is being evaluated.

There is no evaluation policy or an overarching M&E framework to guide Global Fund’s evaluation work and ensure full coverage of operations, quality of evidence, and use of findings. Currently, evaluative coverage is uneven across the portfolio which limits its strategic use. Since 2017, the TERG has spent more than two-thirds of its time on the implementation and management of PCEs, taking attention away from its other two main functions, promoting organisational learning and providing independent M&E advice to the Global Fund. There is also limited TERG oversight of evaluations due to ineffective co-ordination with the organisation on what is defined as an internal study (commissioned by the Monitoring, Evaluation, and Country Analysis Team) and what evaluation should be managed independently (commissioned by the TERG). Interviews confirm that the TERG does not have a clear overview of the various evaluations conducted across the organisation, which often leads to duplication across teams and programmes. The new independent model for evaluation was approved in the November Board meetings in 2021 and aims to contribute to a more strategic approach to how topics are identified, for both accountability and learning purposes. In addition to the ambitions for the new evaluation function cited above, the Global Fund will aim to strengthen the role of evaluations in providing alternative measurement approaches in areas difficult to measure quantitatively, such as gender and human rights. This means ensuring evaluations are better planned at the onset alongside the KPI Framework and incorporated into Strategic Performance reporting.

There is a process of quality assurance in place, but it is not adequate to ensure high quality evaluations at all times due to insufficient resources, lack of co-ordinated approach across the organisation and no adequate mechanisms to ensure evaluation quality. The quality assurance process is currently managed by the TERG and its Secretariat, but their capacity to produce high quality evaluations has been constrained by insufficient resources (i.e. a lack of full-time staff dedicated to the evaluation function). The group is comprised of members who are compensated for 15 to 20 working days a year, which is not sufficient to provide the necessary oversight and quality control, at least in the long-term. The independent assessment of the TERG notes that often, members are heavily involved in managing evaluations, but not sufficiently engaged in providing guidance and quality assurance. Per key informants, there is limited communication between the TERG and Monitoring and Evaluation and Country Analysis (MECA) team on topics to be considered for evaluations often leading to overlap. The introduction of a multi-year calendar in 2020 has helped in ensuring there is a clear rationale for why certain topics have been chosen to be evaluated. Finally, none of the sample of publicly available evaluations reviewed include a discussion of ethical issues, a key element to consider when assessing evaluation methodologies that may involve, for example, sensitive information. This may be due to issues around team selection and contextualising evaluations within the Global Fund’s sphere of influence. The new evaluation function will aim to strengthen the quality of evaluations, including, but not limited to, publishing annual reports to the Strategy Committee (SC) and Board that comment on the quality of evaluations.

16. The Global Fund (2016), Terms of Reference: Technical Evaluation Reference Group, (accessed 17 December 2021).

17. Kruse, S-E., Broekmans, J. (2019), *Independent Assessment of the TERG (Technical Evaluation Reference Group)*, (accessed 17 December 2021), Internal.

Organisational learning systems are still developing and will be formalised under the new evaluation model. Currently, the Global Fund has no formal requirement in place for staff to demonstrate how lessons from past interventions have been considered in the design of new funding requests. This is done informally through the TERG and Fund Portfolio Managers who facilitate and encourage the integration of past lessons in upcoming funding applications. However, it is the ultimate responsibility of the CCMs (and PRs) to consider them in the funding application which leads to inconsistent uptake. The Global Fund aims to improve the learning culture across the organisation by the recruitment of a dedicated learning officer as part of the new evaluation model whose role will be to ensure lessons learned are more widely disseminated and applied across the partnership and beyond.

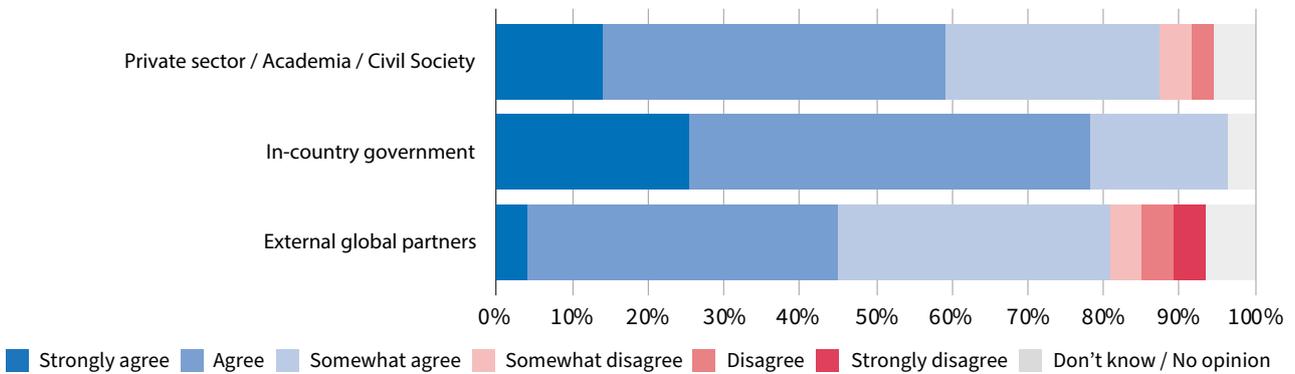
There is a system to identify poorly performing grants, but its use is inconsistent across the portfolio. The Global Fund's approach (and follow up process) is not always tailored to the specific country context or applied consistently. Country Teams are required to report grant progress biannually through country portfolio reviews to provide a systematic review of risks but the process is not fully customised to the type of portfolio or grant. Some grants may require a more frequent monitoring such as on a quarterly basis, which is currently the case only for grants rated of higher risk. The introduction of monthly 'spot checks' and 'pulse checks' triggered by the COVID-19 pandemic show early signs of addressing the ongoing issue of data timeliness. They were launched to better understand how programmatic implementation is progressing in real time, as well as being impacted by COVID-19. That being said, the follow up process of mitigating actions is more inconsistent compared to the grant status monitoring process. The MEC is the body responsible for navigating the mitigation measures once they are formally notified of an underperforming grant but, interviews indicate that not all actions identified are actively followed up as there is no clear process of how to track them consistently.

There is no clear accountability system to ensure follow up and use of all evaluation recommendations. While there is now a formal process for developing management responses and a systematic follow up across evaluations, there is no specific action plan with clearly stated responsibilities and accountabilities; yet the TERG Secretariat follows up with other units at regular intervals to ascertain the implementation of relevant recommendations. Further, there does not seem to be a standard way of outlining timelines for the implementation of recommendations in management responses. While timeframes are included, they differ in their level of detail from assigning a specific time period against each recommendation to broadly stating the next steps in relation to the upcoming allocation cycle. This may be because there is no formalised system to track the status of evaluation recommendations (e.g. no publicly available annual report) apart from an internal database managed by the TERG Secretariat and reviewed by the TERG. Finally, while a process exists for the public dissemination of the evaluations, the process is not always uncomplicated as all parties need to agree to make the information publicly available.

The uptake of lessons and best practices is hindered by the lack of a complete repository of evaluations and their recommendations and the absence of a formal mechanism for disseminating lessons both internally¹⁸ and externally. The independent assessment of the TERG finds that the body of experts is well-placed to play a role in organisational learning processes, but it has fallen short on that commitment. There is no comprehensive repository of evaluations and recommendations available for use and no evidence of wider and systematic dissemination to partners, peers and other stakeholders; the process instead appears to vary by the type of evaluation and sharing of lessons happens on an ad-hoc basis. Under the new evaluation model, there are plans to create a dedicated, full-time role for an Evaluation and Learning Officer, whose focus will be on disseminating evaluation lessons to different audiences. As shown in Figure 18, survey data show that all in-country government respondents 'Agree' that the Global Fund learns lessons from previous experiences; however, 12.5% of external global partners 'Disagree' with 4% strongly disagreeing. There is increased attention on facilitating 'learning' with the introduction of the new evaluation model.

18. Beyond the publication of some reports on the Global Fund's website.

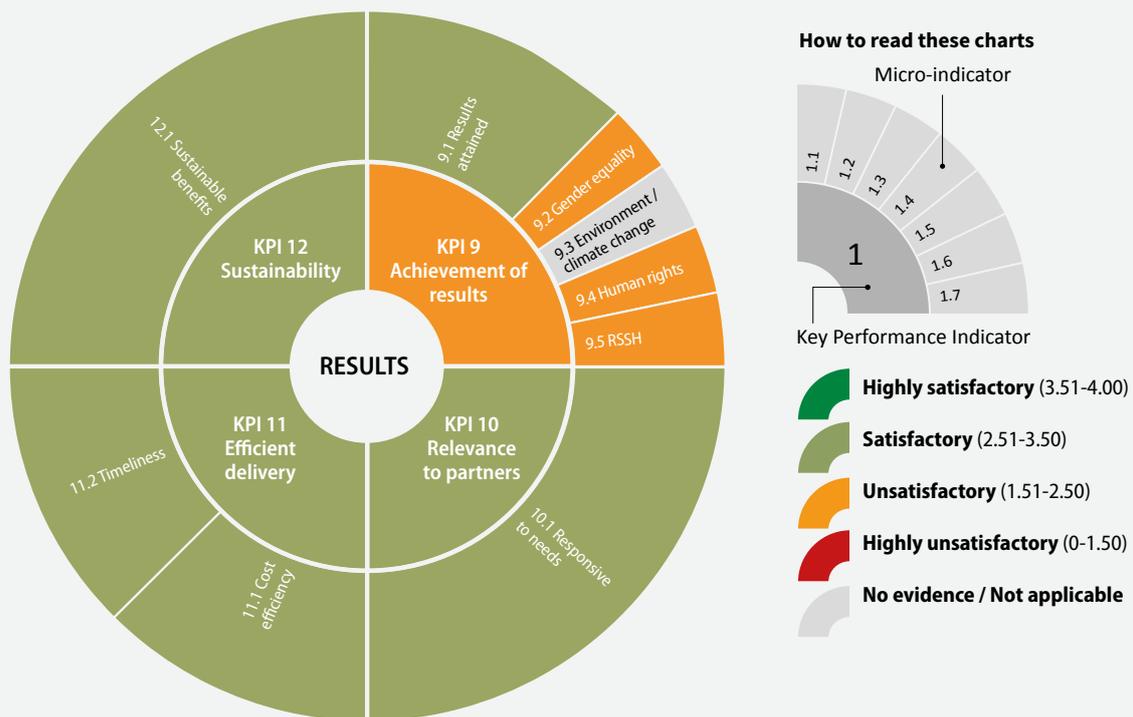
FIGURE 18. RESULTS OF THE SURVEY ON LESSONS LEARNED IN THE GLOBAL FUND



Source: Based on responses to the MOPAN external partner survey, Global Fund, October-November 2021.

RESULTS

KEY FINDINGS



Progress across the Global Fund’s Strategic KPI Framework for the assessment period has been mixed, according to the documentation reviewed. The organisation is responsive to the needs and priorities of partners. While the impact of COVID-19 has caused delays, the Global Fund has put mitigation measures in place. It has made notable progress towards financial sustainability, but more limited progress in programmatic sustainability. The primary source of data are the Global Fund’s Strategic Performance Reports which provide updates on performance against the strategic Global Fund KPIs. In the most recent report (mid-2021), only one SO 4 (Mobilize Increased Resources) remained consistently on track. In contrast, mixed results were identified for SO 1 (Maximize Impact Against HIV, TB and malaria). However, the impact of the COVID-19 pandemic on this SO cannot be understated. Clearly, the pandemic negatively affected the ability of the general population, and more specifically immunocompromised individuals, to access and use health services as both the supply of services (e.g., staff illness or shifting of services) and demand for services (e.g., less utilisation because

of fear of infection) were reduced. Yet the Global Fund did not revise its targets to account for COVID-19 effects and this can be considered a demonstration of its strong commitment to combatting the three diseases. Where there are greater concerns are for SO 2 (RSSH) and SO 3 (HRG). Even prior to the COVID-19 pandemic, results for these two SOs showed some underperformance in terms of the Global Fund (and its partners) in sufficiently addressing the cross-cutting issues of RSSH and HRG. The reasons for this are many, but, generally these two SOs, except for a few specific initiatives, were both more difficult to conceptualize and implement, and had less emphasis in programming and corresponding resources. What this points to is an organisation very capable of mobilising and investing resources to address the three core epidemics, but having greater challenges in addressing the greater supporting environment. The Global Fund's new 2023-28 Strategy should clarify its approach, as RSSH and HRG will be mutually reinforcing contributory objectives in support of its primary goal of ending AIDS, TB, and malaria rather than stand-alone Strategic Objectives.

The data examined for the delivery of results is positive in terms of efficiency and timeliness; however, here, too, COVID-19 has had an impact. Adaptive measures put in place in response to the pandemic were regarded as appropriate, flexible, and 'light lift'. Similarly, data on allocation utilisation, absorptive capacity, and domestic investments have consistently been 'on track'; though, PCEs identified some resource-inefficiencies and concerns during the grant design stage. Of particular importance, is that improvements were noted in the move from the New Funding Model (NFM) 2 to NFM3, which streamlined processes and provides support for that decision. Per documentation, there has been good progress in the financial sustainability of national disease programmes via domestic resource mobilisation, despite a few areas for improvement. However, although the Global Fund has supported transition readiness in some countries, challenges remain in planning for programmatic sustainability, and despite efforts to engage with communities and civil society, the sustainability of KVP programmes remains a concern. With the considerable focus of the 2023-28 Strategy on maximising the engagement and leadership of the most affected communities, as well as its overall emphasis on a people-centred approach, there should be greater future opportunities for ensuring that the interventions and activities which the Global Fund has supported through its grants will endure.

The **results performance** area explores to what extent relevant, inclusive and sustainable contributions to humanitarian and development results are achieved in an efficient manner. This area is assessed through the four key performance indicators specified below:

KPI 9: Development and humanitarian objectives are achieved and results contribute to normative and cross-cutting goals

Performance rating: Unsatisfactory

Score 2.50

The Global Fund's core mandate is to work through its partnerships to mobilise and invests funds (SO 4) to accelerate the end of AIDS, tuberculosis, and malaria as epidemics (SO 1). In this regard, it has succeeded despite many obstacles, including the COVID-19 pandemic. However, it has not fared as well in achieving its goals for its two more cross-cutting objectives (SO 2 and SO 3) which are to build resilient and sustainable systems for health, and promote human rights and gender equality. The Global Fund through its replenishment cycle, per its Strategic Performance Reports, has continued to either achieve or exceed the targets it has set for itself in terms raising and allocating funds, including those related to domestic resource mobilisation. Similarly, with the exception of reducing new infections, it has demonstrated that its use of funds have, indeed, maximised its impact against HIV, tuberculosis, and malaria. Although the COVID-19 pandemic has, to a certain extent, undercut its ability to reach its targets for the three diseases, it did not revise those same targets demonstrating a firm commitment to SO 1 in its 2017-22 Strategy. Indeed, in the next iteration of its Strategy for 2023-28 it has made ending AIDS, tuberculosis, and malaria its primary goal.

Where it had more challenges was in achieving the targets as part of its KPIs for Strategic Objective 2 (RSSH) and Strategic Objective 3 (HRG). While the percentage of grant funding for RSSH continues to increase, this assessment

has noted numerous issues, primarily derived from the Strategic Review 2020 (SR2020), which the Global Fund needs to address to improve its results in this area. First and foremost, as noted in the SR2020, the Global Fund through its grant development, review, and approval process has not clearly defined for itself those interventions which it will fund in support of RSSH (i.e., moving from health systems support to health systems strengthening) nor has it provided specific enough guidance to its in-country partners (e.g., CCM, PRs, etc.). This lack of clarity has, most likely, led to a reluctance among implementing countries to apply for RSSH grants and, likewise, for Country Teams not to more strongly promote them (in addition to issues with low absorption rates). As noted, there has been a tendency to embed RSSH efforts within disease-specific grants which has led to RSSH efforts being subsumed to fill programmatic gaps rather than focusing on efforts which would lead to better progress toward UHC. There also appears to be a need to internally commit sufficient human resources both in terms of quantity and quality to ensure that technical assistance can be provided to those countries who choose to pursue an RSSH grant. Finally, as noted in the SR2020, and this is not unique to the Global Fund, there is a need to improve the KPIs it uses to measure progress against SO 2 to ensure a holistic and accurate picture is provided to its stakeholders. For the upcoming Strategy 2023-28, RSSH has been re-formulated as a mutually reinforcing contributory objective (Maximizing People-centred Integrated Systems for Health to Deliver Impact, Resilience, and Sustainability) in support of the primary goal (End HIV, TB and Malaria) and this should give more clarity to the organisation as to the priority to give to RSSH, as well as how to successfully operationalise RSSH efforts.

Similar to RSSH, the results for SO 3 (HRG) have been mixed; however, it should also be noted that three KPIs under this SO had, yet, to be reported at the time of this assessment. While grant funding for human rights has shown progress and surpasses its target, that target was set at 3% for investments in removing human rights related barriers in HIV and HIV/TB grants and 2% for TB grants. When HRG is given special emphasis, though, such as through the “Breaking Down Barriers” initiative, significantly better progress can be achieved demonstrating the importance of raising HRG’s prominence both within the Secretariat and with participating countries. Likewise, with programming for adolescent girls and young women (AGYW) promising results can be achieved when the Global Fund strategically invests and focuses its efforts on gender-sensitive programming. Despite these efforts, there remain several barriers to consistent, sustained, and effective HRG programmes. Per SR2020, programmes were found to focus primarily on key population (KP) service coverage and outcome targets rather than specific interventions to reduce human rights or gender-related barriers. Further, engagement of key populations and communities was found to be strong during the design of the funding requests but generally tended to be more limited during implementation of, for example, HIV prevention interventions.

The root cause for many of these issues, per the documentation reviewed, points to a lack of strategies, policies and plans to address HRG, and a mixed understanding about what works and why. All of the above suggests that the Global Fund can play a substantial role in addressing HRG in grants when efforts are made to ensure it is a priority for the Secretariat and the grants, and there is sufficient technical knowledge and capacity for these issues to be addressed. While that did not completely occur during the implementation of the 2017-22 Strategy, there were some encouraging results and there are additional opportunities for further addressing HRG in the 2023-28 Strategy. Specifically, the new Strategy introduces an explicit objective to maximise the engagement and leadership of affected communities, to ensure that no one is left behind, and that services are designed to respond to the needs of those most at risk. It has elevated the principle of centring its work around the communities which it serves to the core of its new Strategy. It also seeks to maximise health equity, gender equality and human rights by deepening their integration into its grants for the three diseases, including through leveraging its voice, in collaboration with its partners, to challenge harmful laws, policies and practices. While “Maximizing the Engagement and Leadership of the Most Affected Communities to Leave No One Behind” and “Maximizing Health Equity, Gender Equality and Human Rights” are now mutually reinforcing contributory objectives as part of the new Strategy, it could also be argued that because of the Global Fund interweaving its people-centred approach throughout, the Global Fund’s commitment to human rights, communities, and gender has always been part of its core principle of partnership. It appears that going forward, the focus on the individuals the Global Fund serves and addressing their HRG needs will move further to the forefront.

KPI 10: Interventions are relevant to the needs and priorities of partner countries and beneficiaries, as the organisation works towards results in areas within its mandate

Performance rating: Satisfactory

Score 3.00

On the whole, the Global Fund appears to be responding to the needs and priorities of partner countries and beneficiaries. The M&E data from a combination of the Strategic Performance Reports (e.g., the KPI for alignment of investment has consistently been “On-track” or “Achieved”) and TERG-commissioned reviews (e.g., the STC Review showed that the country dialogue process for ensuring alignment was, in general, functioning well) both point to an alignment process at the grant design stage that enables country programmes to ensure adopted approaches are responsive and relevant to their contexts. When considering programming tailored towards key and vulnerable populations, RSSH, and HRG, however, some areas of concern were identified. There are gaps with the monitoring data, as most Global Fund KPIs that address key and vulnerable populations are off track. The PCEs, in contrast, noted some positive developments overall in work for key populations, but noted that programming focused primarily on service coverage for key populations and outcome targets rather than specific interventions to reduce human rights or gender-related barriers. Similarly, when RSSH and HRG are not well-articulated and/or not prioritised in NSPs, the alignment process is difficult as the NSP provides the foundation for the subsequent grant proposals. It should also be noted that there are many external factors in the development of NSPs which are outside of the Global Fund’s manageable interest, thus, it is at least partially reliant on the country driven processes and technical partners to ensure the inclusion of RSSH and HRG as priorities. Overall investments in reducing HRG-Equity barriers were also found to decline during grant making, particularly for HIV prevention; thus, the ability to sustainably and sufficiently address related HRG issues is undermined.

KPI 11: Results are delivered efficiently

Performance rating: Satisfactory

Score 3.00

The Global Fund has shown itself to be an organisation which ensures that its grant funding is used efficiently even during the particular challenges of the COVID-19 pandemic. However, there is still room for improvement, especially in the absorption of funding for cross-cutting issues such as RSSH and HRG. Relevant monitoring data on allocation utilisation, absorptive capacity, resource mobilisation, domestic investments and other relevant Global Fund KPIs have consistently been scored ‘on track’ over the review period and their have been considerable and consistent efforts to increase allocative and technical efficiency. The impact of COVID-19 has affected these in different ways and the Strategic Performance Reports provide a comprehensive overview of how the pandemic has disrupted results. However, even prior (and certainly during) the COVID-19 pandemic, there were inconsistencies in the noted efficiencies with some interventions (e.g., HRG, RSSH, and some KP-related activities) notably receiving less priority. Of particular concern, is that the grant revision process does not appear to be used for its original intent (maximising impact) and that, instead, countries use it as a financial management tool to shift resources for low-absorption interventions to later years in the grant cycle. Most of the interventions that are considered “low-absorption” are related to RSSH and/or HRG-equity, which further undermines their status within the grants.

In terms of timely implementation, an examination of the whole review period shows that several issues had adverse effects. This includes:

- Grant revisions: considered burdensome and used primarily as a financial management tool
- Concurrent Global Fund processes: country programmes often had to oversee grant closeout at the same time as initiating new grant design.
- PR selection and set up: lengthy selection and contracting of implementers delayed implementation of activities, as well as transitions from international to domestic PRs.

- Misalignment of timelines for matching funds: approval and disbursement of matching funds did not always align with the timelines for the main grants and their selection.
- Aligning budgets and implementation complex: the advantages of input-based budgeting, in terms of risk management, did not always outweigh the complexity of subsequent changes to implementation plans.
- Weak co-ordination within and between grants: co-ordination challenges particularly affected RSSH investments, in part due to resources for RSSH activities being spread across grants, because responsibility for the aspects of health systems being targeted often lies outside of the disease programmes, and the complexity and long timeframe for their implementation.
- Slow to innovate: The Global Fund is considered slow at offering support for new interventions/innovations.

What the above-noted challenges point to is an organisation with numerous complex processes which may not always align either internally or with external systems. Certainly, the COVID-19 pandemic and the needed urgent response have not aided in ensuring that these challenges can be addressed in a timely fashion. However, what the Global Fund has demonstrated is a constant system of review, reflection, evolution, and improvement and the approval (and future implementation) of its new strategy provides an inflection point to ascertain whether all of its intended results can continue to be delivered efficiently.

KPI 12: Results are sustainable

Performance rating: Satisfactory

Score 3.00

Both the Strategic Review 2020 and the Thematic Review of the STC Policy report good progress toward financial sustainability through domestic resource mobilisation, whereas programmatic sustainability, particularly for RSSH investments and KVP programmes, remains a concern. The reviews commissioned by the TERG, the Global Fund's independent evaluation body, report notable progress in countries' uptake of programme costs. Through its STC policy, the Global Fund has successfully applied a co-financing requirement, which has been met by nearly all countries. In addition, the Global Fund has provided support for facilitating in-country dialogue to emphasise the importance of domestic resources for health. However, the Strategic Review 2020 notes that the macro-economic contractions linked to the COVID-19 pandemic risk hindering the ability of countries to meet domestic health financing targets. Therefore, while the co-financing requirement can be considered successful against the measure used to track domestic commitments, financial sustainability remains fragile in the face of external shocks.

The Strategic Review 2020 also noted that the Global Fund invests a significant amount of its resources in RSSH and it is the largest multilateral grant-making organisation for RSSH. However, even though these resources appear significant, they are only a tiny fraction of the estimated amount needed yearly until 2030 to strengthen health systems in support of UHC. In addition, the Strategic Review found that the majority of grant resources dedicated to RSSH are used to cover operational costs of diseases programmes rather than to support health systems strengthening. The “sustainable” portion of RSSH, thus, remains in questions and could weaken gains made under SO1 and progress towards UHC.

The Review also noted that the Global Fund has provided support for the implementation of transition readiness assessments and the development of sustainability plans, but such support has mostly been provided in regions where countries are transitioning, mostly Asia, Europe, Latin America and the Caribbean (AELAC) which could result in implementing countries in other regions not receiving timely assistance to prepare sustainability plans. The Evaluation TERG Thematic Review on STC acknowledged the importance of working with key populations to ensure progress in reducing the impact of the three diseases. The evaluation found that little progress has been made to establish processes and legal frameworks enabling state funding of civil society organisations for key populations, a key linkage to accessing these populations; thus, this specific programming remains at risk.

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ABOUT THE ASSESSMENT



THE ASSESSMENT APPROACH

The approach to MOPAN assessments has evolved over time to adjust to the needs of the multilateral system. The MOPAN 3.1 methodology, applied in this assessment, is the latest iteration.

Starting in 2020, all assessments have used the MOPAN 3.1 methodology,¹ which was endorsed by MOPAN members in early 2020. The framework draws on the international standards and references points, as described in the MOPAN Methodology Manual. The approach differs from the previous 3.0 approach (used in assessments since 2015) in the following ways:

- Integration of the 2030 Sustainable Development Agenda into the framework.
- Two new MIs for the prevention and response to SEA/SH.
- The incorporation of elements measuring key dimensions of reform of the United Nations Development System (UNDS Reform).
- A reshaped relationship management performance area, with updated and clearer key performance indicators (KPIs) 5 and 6, which better reflect coherence and which focus on how partnerships operate on the ground in support of partner countries (KPI 5), and how global partnerships are managed to leverage the organisation's resources (KPI 6).
- A refocused and streamlined results component.
- A change to how ratings (and their corresponding colours) are applied, based on scores defined for indicators. Compared to the previous cycles conducted under MOPAN 3.0, the threshold for a rating has been raised to reflect the increasing demands for organisational performance in the multilateral system. The underlying scores and approach to scoring are unaffected. This approach was already implemented in MOPAN 3.0 (2019 cycle).

MOPAN conducted Annual Surveys from 2003 to 2008 and used a methodology titled the MOPAN Common Approach during 2009-14. The MOPAN 3.0 Approach was first adopted for 2015-16 cycle of assessments.

In 2019, MOPAN 3.0 was relabelled as MOPAN 3.0* to acknowledge a change in how ratings (and their corresponding colours) were aligned with the scores defined for indicators. Compared to previous cycles conducted under MOPAN 3.0, the threshold for ratings was raised to reflect increasing demands for organisational performance in the multilateral system. The underlying scores and approach to scoring remained unaffected.

In applying the MOPAN Framework, COVID-19 is also be considered from three perspectives:

- How the organisation has leveraged its internal processes to respond to COVID-19 in an agile and flexible way,
- The extent to which risk management frameworks contributed to an MO's preparedness to respond to the crisis, and
- How COVID-19 has been reflected in the organisation's strategies, operations and results targets.

Table 4 lists the performance areas and indicators used in MOPAN 3.1.

1. MOPAN 3.1 Methodology Manual, 2020 Assessment Cycle, http://www.mopanonline.org/ourwork/themopapproach/MOPAN_3.1_Methodology.pdf

TABLE 4. PERFORMANCE AREAS AND KEY PERFORMANCE INDICATORS

Aspect	Performance area	Key performance indicator (KPI)
Organisational effectiveness	Strategic management	KPI 1: Organisational architecture and financial framework enable mandate implementation and achievement of expected results
		KPI 2: Structures and mechanisms support the implementation of global frameworks for cross-cutting issues at all levels, in line with the 2030 Sustainable Development Agenda principles
	Operational management	KPI 3: Operating model and human and financial resources support relevance and agility
		KPI 4: Organisational systems are cost- and value-conscious and enable financial transparency and accountability
	Relationship management	KPI 5: Operational planning and intervention design tools support relevance and agility in partnerships
		KPI 6: Working in coherent partnerships directed at leveraging and catalysing the use of resources
	Performance management	KPI 7: Strong and transparent results focus, explicitly geared to function
		KPI 8: Evidence-based planning and programming applied
Development/humanitarian effectiveness	Results	KPI 9: Development and humanitarian objectives are achieved and results contribute to normative and cross-cutting goals
		KPI 10: Interventions are relevant to the needs and priorities of partner countries and beneficiaries, as the organisation works towards results in areas within its mandate
		KPI 11: Results are delivered efficiently
		KPI 12: Results are sustainable

Source: MOPAN 3.1 Methodology Manual, 2020 Assessment Cycle,

http://www.mopanonline.org/ourwork/themopanapproach/MOPAN_3.1_Methodology.pdf

APPLYING MOPAN 3.1 TO THE GLOBAL FUND

Interpretations and adaptations to the methodology

This assessment has used the MOPAN 3.1 methodology, but the KPIs, MIs, and elements have been interpreted so as to be meaningful given the Global Fund's specific mandate. These modifications were initially noted in the assessment Inception Report (see Table 5 on page 72) and then further refined during the data collection process (see italicised, underlined text in Part II, Annex A). Five elements from the MOPAN framework were not used as they were specific to United Nations organisations.

The assessment framework primarily covers the Global Fund Secretariat; though, some parts of the assessment area also applied to its partners (e.g. Principal Recipients, Sub-recipients, Country Co-ordinating Mechanisms etc.), especially in regard to accountability to beneficiaries and ensuring prevention of sexual exploitation and abuse. This application of the framework is primarily noted in Part 2, Annex A within relevant micro-indicators.

TABLE 5. INCEPTION PHASE INTERPRETATIONS OF THE MOPAN 3.1 METHODOLOGY

1.4. Financial Framework supports mandate implementation	Changes in 1.4 elements reflect that earmarked funding is generally not applicable. Earmarked funding is only applicable to private sector. Instead, the assessment looks at disbursement and expenditures by PR.
2.1.-2.4. Corporate/sectoral and country strategies respond to and/or reflect the intended results of normative frameworks for...gender equality and women’s empowerment / environmental sustainability and climate change/human rights including the protection of vulnerable people (those at risk of being “left behind”)	The Global Fund does not have specific “country strategies”. As such, National Strategic Plans (supported by the Global Fund) and country funding applications are assessed here, with particular reference to the MI under review.
3.2. Resource mobilisation efforts consistent with the core mandate and strategic priorities	Deleting references to “country plans” within elements. Global Fund utilises a co-financing policy to encourage additional domestic financing for both health and the three diseases. In addition, the Global Fund supports broader efforts to strengthen domestic resource mobilisation, efficiency and value for money of existing health spending, and country health financing. This strategic focus has recently been increased with the development of the new Health Finance Department. The first three elements should be applied to the Global Fund’s resource mobilisation and replenishment process, led by the External Relations and Communications Division.
3.3. Resource reallocation/programming decisions responsive to needs can be made at a decentralised level	When not financially material (dependent on level of investment), flexibility is delegated to Country Teams (CTs) and the Country Coordinating Mechanism (CCM), which submits reprogramming in line with country ownership principle. When material, the TRP is engaged. Assessments here has been made on that basis.
4.3. Principles of results-based budgeting applied	These are aggregated by activity, disease, and region. Assessment is limited to the financial/disbursement function.
4.7. and 4.8. Prevention of and response to sexual exploitation, abuse, and harassment (SEA and SH)	This issue is relevant for the Global Fund Secretariat, individual Global Fund consultants, the OIG and at the country level (e.g., CCM members) taking the approach that PRs are accountable for Sub-recipients (SRs) and Sub-sub recipients (SSRs). Noted that SEA and SH are usually considered together in the Global Fund but, they are assessed in a differentiated manner where possible. A review of documentation suggested that all of the elements under these MIs are largely aligned with the Global Fund’s ongoing efforts to address SEA and SH, and did not require significant adjustment or interpretation.
5.1. Interventions/strategies aligned with needs of beneficiaries and regional/country priorities and intended national/regional results	The Global Fund generally does not develop specific “country or regional strategies”; though it may have some regional strategies and Strategic Initiatives which are designed by the Secretariat. Additionally, some multicountry grants (MCGs) may be pre-shaped and others may be in response to a Request for Proposals (RFP). As such, National Strategic Plans (supported by the Global Fund) and country/MCG funding applications and their corresponding guidance and processes are used for assessment here unless specifically noted.

5.2.-5.7. for KPI5. Operational planning and intervention design tools support relevance and agility within partnerships	The Global Fund does not design interventions but provides funding to support country-designed interventions via funding requests which are then independently assessed by a review panel of technical experts. As such, the assessment team refers to funding applications, Global Fund-designed modular frameworks of possible interventions, iterative negotiations with Country Teams based on TRP recommendations, and subsequent Portfolio Optimisations when assessing intervention designs here. These processes and associated guidance form the basis for assessment.
6.2. Partnerships are based on an explicit statement of comparative or collaborative advantage e.g., technical knowledge, convening power/partnerships, policy dialogue/advocacy	The Global Fund is a funding mechanism/manager; thus, comparative or collaborative advantage is assessed with this lens (i.e., it is neither a traditional donor nor a technical agency).
6.6. Key information (analysis, budgeting, management, results etc.) shared with strategic/implementation partners on an ongoing basis	Information is both aggregated and disaggregated and there are many different avenues through which information is shared with partners. Level of aggregation / disaggregation varies according to the needs.
6.7. Clear standards and procedures for accountability to beneficiaries implemented	As a funding mechanism, the Global Fund has limited direct engagement with beneficiaries. Accountability lies primarily with the CCM and Principal Recipients (PRs).
7.2. Corporate strategies, including country strategies, based on a sound RBM focus and logic	The Global Fund does not have specific “country strategies”. As such, National Strategic Plans (supported by the Global Fund) and country funding applications are assessed here. The assessment team is cognisant that there is limited scope for results-based management (RBM) to be incorporated in this context, however, and RBM is more applicable to the Global Fund’s overall approach of linking disbursements with performance.
7.4. Monitoring systems generate high quality and useful performance data in response to strategic priorities	Assessing the % of grant programming budget allocation to monitoring in comparison to other organisations is important here, as well as what are the most important data for decision-making, their sources, and any possible data gaps.
8.1. A corporate independent evaluation function exists	The TERG is considered the independent evaluation function.
8.4., 9.1.-9.5., and 10.1. on intervention design	The Global Fund does not design interventions but provides funding to support country-designed interventions. As such, the assessment team refers to country funding requests when assessing intervention designs here recognising the iterative process of grant negotiations between countries and corresponding Country Teams based on TRP recommendations. Those guidelines and processes will form the basis for assessing interventions.

Lines of Evidence

This assessment relies on three lines of evidence: a document review, a partner survey, and staff and Board interviews and consultations. The assessment team collected and reviewed a significant body of evidence:

- **A document review:** This comprised publicly available documents primarily published between 2017-21, as well as guidelines and policies that are “current and in force”, a few internal (i.e., not publicly-available) documents. Most were in final form, though, because a number of significant developments occurred during the assessment period (e.g., the development of a new strategy) the Team also reviewed draft documents which were believed vital to a full understanding of the organisation. All documents were available in English. A total of 279 documents were reviewed.

- **An online survey.** Partners surveyed fall into the following categories:
 - external global partners: 49%;
 - in-country governments: 22%;
 - private sector / academia / civil society: 29%.

A total of 246 partners responded to the survey from an effective sample size of 518 yielding a response rate of 47.5%. The survey was administered by MOPAN and was conducted over a period of 6 weeks, starting on 4 October 2021 and closing on 15 November 2021. For more details, see Part II, Annex C: Results of the MOPAN external partner survey.

- **Interviews and consultations:** These were undertaken virtually between September – December 2021 as follows:
 - Headquarter interviews with 65 staff; and,
 - Board/Committee interviews with 11 individuals representing all primary constituencies.

Discussions were held with the institutional lead of the Global Fund assessment as part of the analytical process. These served to gather insights on current priorities for the organisation from the perspective of MOPAN member countries.

General information about the sequence and details related to these evidence lines, the overall analysis, and scoring and rating process as applied to the Global Fund can be found in the MOPAN 3.1 methodology.

METHODOLOGY FOR SCORING AND RATING

The approach to scoring and rating under MOPAN 3.1 is described in the *2020 Methodology Manual* (MOPAN 2020a), which can be found MOPAN’s website.

Each of the 12 KPIs contains several MIs, which vary in number. The KPI rating is calculated by taking the average of the ratings of its constituent MIs.

Scoring of KPIs 1-8

The scoring of KPIs 1-8 are based upon an aggregated scoring the MIs. Each MI contains a several elements, which vary in number, that represent international good practice. Taking the average of the constituent scores per element, a score is then calculated per MI. The same logic is pursued at aggregation to the KPI level, to ensure a consistent approach. Taking the average of the constituent scores per MI, an aggregated score is then calculated per KPI.

Scoring of KPIs 9-12

The scoring of KPIs 9-12 is based upon a meta-analysis of evaluations and performance information, rated at the MI level and aggregated to the KPI level. For KPI 9, results against the mandate and contribution to cross-cutting results are given equal weight. KPIs 9-12 assess results achieved as assessed in evaluations and annual performance reporting from the organisations.

 Highly satisfactory (3.51-4.00)	 High evidence confidence
 Satisfactory (2.51-3.50)	 Medium evidence confidence
 Unsatisfactory (1.51-2.50)	 Low evidence confidence
 Highly Unsatisfactory (0.00-1.50)	
 No evidence / Not applicable	

Rating scales

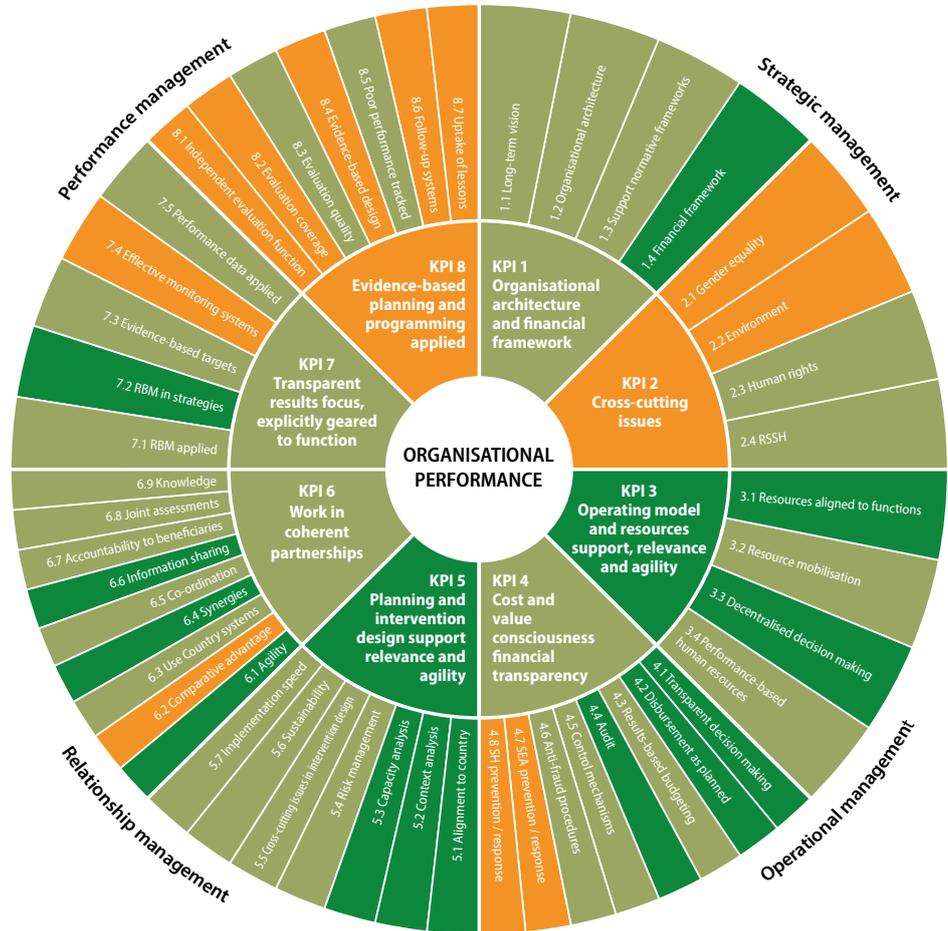
Whenever scores are aggregated, rating scales are used to translate scores into ratings that summarise the assessment across KPIs and MIs. The rating scale used under MOPAN 3.1 is shown in Figure 1.

A score of “N/E” means “no evidence” and indicates that the assessment team could not find any evidence but was not confident of whether or not there was evidence to be found. The team assumes that “no evidence” does not necessarily mean that the element is not present (which would result in a zero score). Elements rated N/E are excluded from any calculation of the average. A significant number of N/E scores in a report indicates an assessment limitation (see section 4.5 Limitations). A note indicating “N/A” means that an element is considered to be “not applicable”. This usually owes to the organisation’s specific nature.

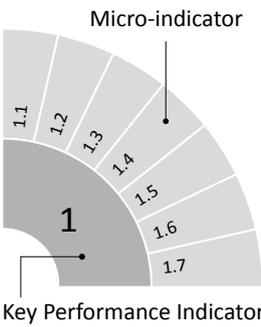
FIGURE 19. THE GLOBAL FUND'S PERFORMANCE RATING SUMMARY (PREVIOUS RATING SCALE)

Changes to MOPAN's rating system

MOPAN's methodology is continuously evolving, and a recent notable change concerns how ratings (and their corresponding colours) are applied based on the scores at MI and KPI levels. Compared to the pre-2019 rating scale, applied in Figure 19, the threshold for each rating has been raised to reflect the increasing demands of organisational performance in the multilateral system. The underlying scores and approach to scoring are unaffected.



How to read these charts



- **Highly satisfactory** (3.01-4.00)
- **Satisfactory** (2.01-3.00)
- **Unsatisfactory** (1.01-2.00)
- **Highly unsatisfactory** (0-1.00)
- **No evidence / Not applicable**

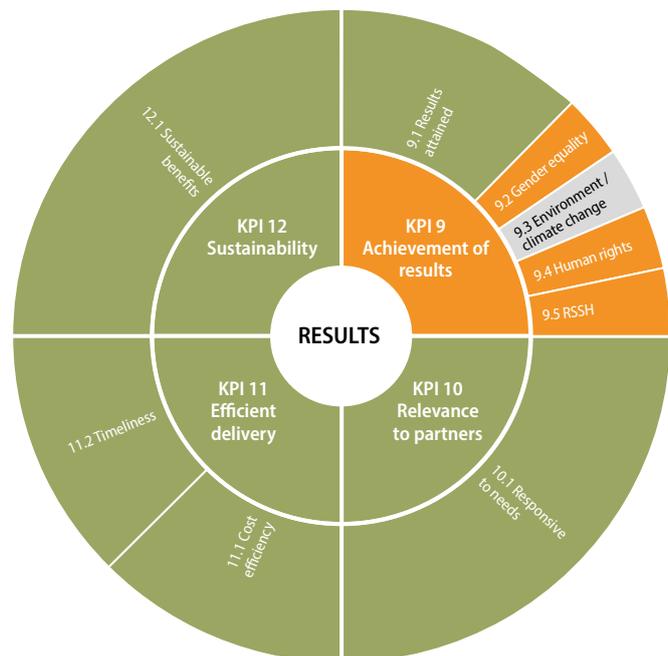


TABLE 6. ASSESSMENT PROCESS

ASSESSMENT PHASE	Inception July-September 2021	Evidence collection October- December 2021	Analysis January-March 2022	Reporting April 2022 ongoing
Key activities	<ul style="list-style-type: none"> Adaptation of indicator framework Preparation of evidence collection – survey partners, key informants and key documents for review 	<ul style="list-style-type: none"> Key Informant Interviews Document Review Partner Survey 	<ul style="list-style-type: none"> Triangulation Preliminary Findings Presentations Evidence documentation 	<ul style="list-style-type: none"> Report Drafting Quality Assurance Presentations
Key activities Timeline	<ul style="list-style-type: none"> Scoping Interviews <i>July 2021</i> Draft Inception Report to MOPAN Secretariat <i>September 2021</i> Final Inception Report <i>September 2021</i> 	<ul style="list-style-type: none"> Interim Document Review (IDR) to MOPAN Secretariat <i>October 2021</i> Document gaps reviewed by Global Fund <i>October 2021</i> Key Informant interviews <i>November-December 2021</i> Partner survey launch & closure <i>October-November 2021</i> 	<ul style="list-style-type: none"> Draft Summary Analysis Table (Annex A) and Evidence File to MOPAN Secretariat <i>January 2022</i> Preliminary Findings to Global Fund and ILs <i>February-March 2022</i> Feedback received from Global Fund’s MEC <i>April 2022</i> 	<ul style="list-style-type: none"> Draft Assessment Report to MOPAN Secretariat <i>April-May 2022</i> Second Draft Assessment Report to Global Fund/ILs <i>June 2022</i> Final Assessment report <i>July 2022</i>

Limitations

The assessment applies a standardised framework that provides a picture of the organisation’s performance. Thus, any general strengths and limitations of the MOPAN 3.1 methodology, which are laid out in MOPAN 3.1, Section 8, apply to this assessment, too. In addition, there are a few limitations specific to this assessment of the Global Fund, and subsequently the confidence that can be ascribed to the findings.

Documentation issues: The main limitations affecting the assessment of the Global Fund occurred during the document review and can be classified into three sub-categories of issues: a) overabundance; b) recency; and, c) incompleteness or absence.

One of the Global Fund’s core principles is transparency and, while as an operating principle it is of benefit to all of its stakeholders, for reviewers of its performance it can lead to an inundation of documents, especially when the time frame for the assessment is foreshortened. Thus, a triage system had to be applied in which some documents may not have received as thorough a review as if there had been fewer documents and a greater time frame.

As noted throughout the assessment, the November 2021 Board meeting was important in that several key documents were approved, including the Global Fund’s new Strategy and changes to its evaluation function. This approval occurred approximately one month prior to the end of the data collection period for the assessment, as well as at

month 59 of the overall 60-month review period. The assessment, where possible, did acknowledge these upcoming changes; however, these new documents and corresponding policies and procedures are yet to be implemented. Therefore, for several MIs, the evidence confidence (see Annex A) was rated either Medium or Low because while the documentation now exists, it is too recent to assess implementation and impact.

Finally, there were several MIs (e.g., 4.8, and a few under KPI 8) for which there was either limited documentation or a lack of documentation because these items are still a “work in progress”. In these cases, the assessment team reviewed the available documentation and relied on other data sources, primarily the key informant interviews. While the key informant interviews were always insightful, having the additional evidence base of solid documentation would have resulted in the assessment team having more confidence in applying the scoring. Accordingly, in Annex A (Part 2), “evidence confidence” is marked as “medium” or “low” for those indicators.

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