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# Technical Evaluation Reference Group Position Paper: Strategic Review 2020

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December 2020

Geneva, Switzerland.

# Executive Summary

## Context

The Strategic Review 2020 (SR2020) was commissioned by the Technical Evaluation Reference Group (TERG) of the Global Fund. It was carried out between November 2019 and August 2020. The scope of work and the strategic evaluation questions were developed in consultation with the Global Fund Secretariat and the Strategy Committee (SC). The review had three main objectives:

- A. **Main Objective 1:** To assess the outcomes and impact of Global Fund investments against the goals and objectives of the 2017–2022 Strategy at its mid-term;
- B. **Main Objective 2:** To assess operationalization and implementation of the current Strategy at its mid-term and suggest approaches for strengthening implementation and impact during the remaining period of the current strategy; and
- C. **Main Objective 3:**<sup>1</sup> To provide an evidence-informed rationale for integrating lessons learned during the first half of the 2017–2022 Strategy, and how to position the Global Fund within the global field of health development organizations in its post-2022 strategic cycle.

## Input Sought

The TERG requests the SC to consider the Strategic Review 2020, the TERG Position Paper and the key findings, conclusions and recommendations, and request its submission to the Global Fund Board.

## Input Received

The Strategic Review 2020 was initiated and conducted with substantial contributions from the Global Fund Secretariat, with particular input from the SR2020 Secretariat Working Group, the Strategy and Policy Hub and the Strategic Information Department respectively.

The SR2020 obtained evidence through a mixed method and theory based analytic approach. It also obtained evidence from recent thematic reviews, the Prospective Country Evaluations (PCEs) and the strategic reviews conducted in 2015 (SR2015) and 2017 (SR2017) commissioned by the TERG.

Based on the review's findings, SR2020 came up with three high-level conclusions listed below in relation to the findings across Main Objective 1 and 2.

**High-level conclusion 1:** There has been mixed progress towards the Global Fund SOs:

- **SO1:** Good progress has been made towards SO1 in terms of lives saved, but significant gaps remain in scaling up interventions to achieve targets for reducing new cases/infections.
- **SO2:** Despite progress in some areas, this is uneven and most Global Fund investments in RSSH are used to support operational costs for the three disease programs rather than strengthening health systems to make substantive progress towards UHC and programmatic sustainability.
- **SO3:** There has been limited progress in addressing equity, human rights and gender issues across the Global Fund portfolio, albeit with variation by geography, disease and KVP group. COVID-19 appears likely to reverse some of the gains made. Alongside the need to substantially accelerate progress in all areas to meet 2030 goals, 'more of the same' will not be sufficient. More attention to addressing the underlying policy and socio-economic drivers of the epidemics is required as part of an approach that places increased emphasis on sustainability and equity.

**High-level conclusion 2:** The evidence clearly shows that the Global Fund's business model has continued to evolve during the period of the current Strategy and has strengths in several areas. However, to date, the model still does not deliver solutions to a number of long-standing challenges that primarily relate to coordination of action across multiple objectives and how to achieve evidence-informed

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<sup>1</sup> The phrasing of MO3 is different from the original one in the RFP which said: "To provide recommendations to inform implementation of the remaining phase of the 2017-2022 Strategy and the development of the post-2022 Strategy." The wording was changed during the inception phase of the review.

prioritization when stakeholders at both international and country level have diverging levels of capacity and differing priorities.

**High-level conclusion 3:** The Global Fund business model does not always work to create strong and clear incentives for partners and other stakeholders to improve program results. Opportunities to do so through the structuring of contracts, arrangements, and processes are often missed.

**The TERG endorses these three high-levels conclusions** and agrees that moving forward cannot be business as usual. This is not only because of identified challenges for meeting targets but also the significant consequences the COVID-19 pandemic will have on the Global Funds strategic targets in the short and medium term and the COVID-19 impact on economies. The Global Fund has made a huge contribution not only to reducing the burden of the three diseases but also to the broader health development agenda. It must therefore give priority to addressing the issues raised in this review and minimize the tensions between strategic priorities to ensure that, as much as is possible, the Fund's policies, business model and practices are efficient, effective, resilient and flexible to meet the challenges ahead.

Building on the review findings and conclusions, and discussions with the Global Fund Secretariat and TERG, the SR2020 report lists five main strategic recommendations. The strategic recommendations 1 and 2 focus mainly on actions that should currently be implemented while strategic recommendations 3, 4 and 5 focus mainly on what should be reflected in the next strategy. There is also a more detailed set of operational-level recommendations, including, who should take responsibility for their implementation. All conclusions and recommendations from the SR2020 report are listed below in part 2 of this document within Table 1 and Table 2, while TERG's position on the report's conclusions and recommendations are provided in part 3: discussion and TERG position.

**Key Issues:** The TERG has identified several key issues, including some long-standing challenges, referred to repeatedly across the report that it considers should be given priority attention. These include:

1. Greater prioritisation of funding decisions based on better prioritised NSP's informed by solid evidence and analysis, commensurate prioritised investments within the Global Fund portfolio (Operational Recommendation 1.4);
2. The establishment of an overarching monitoring, evaluation and learning (MEL) framework to address current gaps in the system leading to improved program results (OR 2.1 and 2.9);
3. Achieving agreement and greater clarity on what is realistic and within the scope of the Global Fund to achieve in RSSH and clear metrics to monitor and measure results;
4. A stronger, integrated focus on human rights and gender (SO3), which are core to achieving impact, and clear metrics to monitor and measure results. The COVID-19 pandemic has highlighted the numerous challenges to already weak health systems to reach the poorest and most vulnerable, and the consequences of not doing so.
5. With partnerships, develop performance-based approaches towards achieving improved results, through better tools, metrics, transparency and accountability arrangements; and
6. Differentiation – “there is considerable merit in utilising the concept of the development continuum as a framework for guiding the application of all differentiated policies, processes and approaches (OR 2.7 and 5.2).

## Report

### Part 1: Background

1. The Strategic Review 2020 (SR2020) was commissioned by the Technical Evaluation Reference Group (TERG) of the Global Fund, as part of its workplan approved by the Strategy Committee (SC). It was carried out between November 2019 and August 2020. The scope of work and the

strategic evaluation questions were developed in consultation with the Global Fund Secretariat and the SC. The review had three main objectives:

- **Main Objective 1:** To assess the outcomes and impact of Global Fund investments against the goals and objectives of the 2017–2022 Strategy at its mid-term;
  - **Main Objective 2:** To assess the operationalization and implementation of the current Strategy at its mid-term and suggest approaches for strengthening implementation and impact during the remaining period of the current strategy; and
  - **Main Objective 3:** To provide an evidence-informed rationale for integrating lessons learned during the first half of the 2017–2022 Strategy, and how to position the Global Fund within the global field of health development organizations in its post-2022 strategic cycle<sup>2</sup>.
2. **Methods and Approaches:** A mixed methods, theory-based analytical approach was used to enable an understanding of whether the theory of change (see Section 5 of the SR2020 report), as developed for this review, is working as intended. This involved three main data collection approaches 1) both qualitative and quantitative data collected through an extensive review of secondary data; 2) key informant interviews (KII) and focus group discussions with a range of stakeholders including the Secretariat staff, grant implementers and recipients; and 3) structured case studies in 11 countries.
3. **Key Limitations:**
- i. **COVID-19 pandemic** - The SR2020 consultant team had completed much of its literature review, KIIs, and six of the country case studies by the time many countries had limited access and the Secretariat closed in mid-March 2020 due to the COVID-19 pandemic. Following this, the team faced challenges in accessing information and stakeholders for interviews, conducting case studies, and with the working arrangements of team members. The impact and implications of the COVID-19 pandemic were not included at the time of commissioning this review nor during the main period of their information gathering for the obvious reason that this pandemic had not yet struck. However, at the request of TERG, the consultants have attempted to factor the implication of the pandemic in as much as is possible given it was not part of their main information gathering.
  - ii. **Limited representativeness of countries analyzed** - Given the highly variable contexts in which the Global Fund operates and the differences in the nature of Global Fund support across countries, the limited representativeness of countries analyzed constrains the ability to extrapolate conclusions on how findings may apply to other settings.
  - iii. **Availability of data on results.** SR2020 comes at the mid-point of the strategy period, but most grants and initiatives influenced by it started in 2018. Difficulties were encountered in obtaining information on the outputs, outcomes, and impacts of Global Fund investments for this strategy period (i.e. from 2017 onwards). Some related information on results, e.g., results in 2019 was not yet available by mid-2020 and there were also several gaps in the information that was collected.

## Part 2: Conclusions and Recommendations from the SR2020 Report

4. The SR2020 came up with three high level conclusions in relation to the findings across Main Objective 1 and 2. Drawing on the learnings from across the full scope of the review, and in discussions with the Global Fund Secretariat and the TERG, the SR2020 review then identified five main strategic recommendations, together with eighteen operational recommendations that suggest approaches for strengthening implementation during the remaining period of the current

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<sup>2</sup> See footnote 1

strategy and for consideration in development of the next strategy. The strategic recommendations 1 and 2 focus mainly on actions that should currently be implemented while strategic recommendations 3, 4 and 5 focus mainly on what should be reflected in the next strategy. The main conclusions and recommendations from the SR2020 report are listed in the table 1 and table 2 respectively below.

**Table 1: SR2020 High-level Conclusions**

<b>SR2020 High-level Conclusions</b>	
<b>High-level Conclusion 1:</b>	There has been mixed progress towards the Global Fund Strategic Objectives (SOs)
<b>SO1:</b>	Good progress has been made towards SO1 in terms of lives saved, but significant gaps remain in scaling up interventions to achieve targets for reducing new cases/infections.
<b>SO2:</b>	Despite progress in some areas, this is uneven and most Global Fund investments in RSSH are used to support operational costs for the three disease programs rather than strengthening health systems to make substantive progress towards Universal Health Coverage (UHC) and programmatic sustainability.
<b>SO3:</b>	There has been limited progress in addressing equity, human rights and gender issues across the Global Fund portfolio, albeit with variations by geography, disease and key and vulnerable population (KVP) groups.
<b>High-level conclusion 2:</b>	The evidence clearly shows that the Global Fund’s business model has continued to evolve during the period of the current Strategy and has strengths in several areas. However, to date, the model still does not deliver solutions to a number of long-standing challenges that primarily relate to coordination of action across multiple objectives and how to achieve evidence-informed prioritization when stakeholders at both international and country level have diverging levels of capacity and differing priorities.
<b>High-level conclusion 3</b>	The Global Fund business model does not always work to create strong and clear incentives for partners and other stakeholders to improve program results. Opportunities to do so through the structuring of contracts, arrangements, and processes are often missed.

**Table 2: SR2020 Recommendations**

<b>SR2020 Strategic Recommendations</b>
<b>Strategic Recommendation 1:</b> Start now to strengthen the processes by which geographies, populations and intervention mixes are prioritized in National Strategic Plans (NSPs) and Funding Requests to ensure that Global Fund investments are evidence based and reflect an appropriate balance across the SOs, value for money (VFM) criteria and organizational theory of change (ToC).
<b>Operational Recommendations - for current strategy period</b>
1.1. Establish a mechanism to: (a) track whether and how Technical Review Panel (TRP) recommendations are acted upon; and (b) systematically action TRP recommendations, with clear justification provided where this has not been possible.
1.2. Assess, at the country level, the extent to which technical partners can be engaged and may bring sufficient resources to provide capacity support (e.g. financial, human, technical) for national program design, as well as implementation and impact. Where existing partners do not have and are unable to meet

Global Fund expectations in terms of skills/mandate/capacity, the Secretariat should identify and engage other partners and/or employ Secretariat capacity to meet these needs.
<b>Operational Recommendations – for next strategy period</b>
1.3. Work with technical partners to strengthen support for the development of NSPs to ensure that they are evidence-based, highly targeted and prioritized within an anticipated resource envelope (and/or with scenarios).
1.4. Building on operational recommendation 2.2 (below), refine the funding model to ensure that prioritization decisions are based on solid evidence and analysis and reflect the Global Fund’s strategic priorities and a balance across VFM criteria.
1.5. Use catalytic investments selectively in areas where there is clear added value, as determined on a thematic (e.g. prevention, adolescent girls and young women (AGYW), human rights and gender (HRG)), country, or regional basis.
<b>Strategic Recommendation 2:</b> Strengthen the partnership’s focus on achieving results as a priority during the remainder of this strategy period, as the basis for enhancing impact from the start of the next strategy period. This should include establishing strong incentives to enhance performance across the business model.
<b>Operational Recommendations - for current strategy period</b>
2.1. Develop an overarching Monitoring, Evaluation & Learning (MEL) framework.
2.2. Strengthen processes to monitor and manage for VFM.
2.3. Strengthen tools to manage direct service providers: 1). For technical partners and 2). For PRs and SRs/implementers
2.4. Reform the grant-rating and funding-decision processes to strengthen incentives to improve the programmatic performance of grants in line with the new Strategic Objectives.
2.5. Continue to address organizational disincentives to proportionate risk-taking.
2.6. Continue to strengthen CCMs as a mechanism for coordination and oversight where they show promise, but design and adopt alternative mechanisms where CCMs do not work well.
2.7. Study the implications to the business model of working across different contexts and in meeting different needs.
<b>Operational Recommendations – for next strategy period</b>
2.8. Consider new grant modalities with longer-time horizons on grant agreements.
2.9. Build on and consider relevant activities for the new strategic MEL framework at the corporate level.
2.10. Ensure that the Secretariat is adequately resourced and working arrangements are in place to meet evolving demand.
<b>Strategic Recommendation 3:</b> Strengthen the Global Fund’s ability to adapt to the range of possible contexts that it might operate in post COVID-19, which should be an important new emphasis in the next strategy.
<b>Strategic Recommendation 4:</b> The current SOs 1, 2 and 3 should remain at the forefront of the next strategy. However, the next strategy should make it clear that the SOs are mutually dependent with each

critical to achieving the other. The business model should adapt to shift the priorities within each SO and enhance coherent management across the three SOs.
<b>Operational Recommendations – for next strategy period</b>
4.1. Develop a Theory of Change (ToC) to clarify and articulate how the Global Fund partnership will achieve the Strategic Objectives, as well as position the Global Fund to engage in wider global health agendas.
<b>Strategic Recommendation 5:</b> For the next strategy, position programmatic and financial sustainability for the three disease responses as a high-level strategic priority and ensure mechanisms are in place to operationalize this priority.
<b>Operational Recommendations - for current strategy period</b>
5.1. Strengthen and expand the key ‘pillars’ of work on sustainability across the portfolio, differentiated by country positioning along the development continuum.
<b>Operational Recommendations – for next strategy period</b>
5.2 Further embed differentiation throughout the business model to ensure that context sensitive approaches are utilized to achieve all four SOs.

### Part 3: Discussion and TERG Position

**The TERG endorses the three high-level conclusions and agrees that moving forward cannot be business as usual.**

5. This is first and foremost because there are still challenges with achieving the 2030 ‘End of Disease’ targets. The COVID-19 pandemic will also add an additional stress on achieving the Global Fund’s strategy targets and impact in the short and medium term. Finally, the medium and long term economic, financial and health systems impact of COVID-19, while still unclear, will be large and potentially change how global organisations choose to work together to meet systemic challenges of this magnitude. The Global Fund has made a huge contribution not only to reducing the burden of the three diseases but also to the broader health development agenda. The gains made should not be reversed. It should therefore give priority to addressing the issues raised in this review to ensure, as much as possible, that the Fund’s policies, business model and practices are efficient, effective, resilient and flexible to meet the challenges ahead.
6. The TERG highlights that the consultants’ position on the limitations of the Lives Saved as an indicator to evaluate the impact of the 2017-2022 Global Fund Strategy was not raised in their conclusions. Their views are detailed in Annex 4.i. of vol. 2 of the SR2020 report. While the consultants discussed their reservations with the appropriate Secretariat staff and with the TERG during interactions on the SR2020, they did not highlight this in their final summary report and conclusions. The TERG is of the view that there would be some value in reviewing the appropriateness of the Lives Saved as a performance indicator going forward and assessing if there could be a better metric including more directly estimating mortality due to the three diseases.

**The TERG in large part endorses the recommendations which flow from the conclusions, with some reservations and qualifications discussed below.**

7. The report highlights the interrelated nature of many of the issues and recommendations. In this context the TERG particularly draws attention to Strategic Recommendation 4 “The current SOs 1, 2 and 3 should remain at the forefront of the next strategy. However, the next strategy should make it clear that the SOs are mutually dependant, with each critical to achieving each other. The business model should adapt to shift priorities within each SO and enhance coherent management

across the three”. While this recommendation is directed at the next strategy period, the TERG suggests that attention should be given to implementing this recommendation also for the second half of the current strategy to move beyond the tendency to view implementation of the SOs as discrete or siloed activities with SO 1 being seen as having priority.

8. The TERG agrees that key to operationalising this recommendation is the development and endorsement of a Theory of Change (ToC) by the Board (Operational Recommendation 4.1). The development of a ToC would aid the much-needed agreement on the positioning of RSSH and HRG/equity as facilitators of impact and sustainability. It would also articulate the assumptions made on the role of partners in supporting countries, help to clarify and articulate how the different elements of the business model and critical enablers will achieve the strategic objectives, ensure that investments maximise Value for Money (VfM) and could underpin the new MEL framework. It would also draw the linkages from the Fund’s strategic objectives to other global health agendas. However, as this would be the first time the Global Fund has used a ToC, it should be regularly reviewed for relevance and adjusted in the light of emerging evidence.
9. Recommendation 3 on the emphasis for the future, while supported by TERG, was at a disappointingly high level and lacking in detail. The TERG draws attention to Annex 4.xiv “*Alignment of Global Fund strategic priorities, policies and investments to broader global health goals*” and Annex 4.xv “*Future Strategic Positioning*”. These annexes contain thoughtful analyses of the Fund’s significant contribution to the wider development agenda and useful insights into the changes that the Fund, as an integral part of the global health architecture, needs to consider as it faces the challenges of the future including its role and contribution to UHC and global health security. Some, but not all, of the matters raised in these annexes have been integrated into the body of the main report.
10. The TERG had some ambivalence in relation to Strategic Recommendation 5, which recommends that the next strategy position programmatic and financial sustainability for the three diseases response as a high-level strategic priority. The TERG agrees that sustainability is a very important issue, logically links with Recommendation 4 and should underpin all that the Global Fund does. However, the TERG does support operational recommendation 5.2, which also links to Recommendation 4, on further differentiation of the business model.
11. The TERG has identified many key areas and issues, including some long-standing challenges, referred to repeatedly across the report and captured in some of the recommendations that it considers should be given priority attention. A time of major challenge and uncertainty can also provide the opportunity to rethink and resolve issues that may have seemed intractable in the past. These issues are identified and discussed below.
12. **Greater prioritisation of funding decisions:** The TERG acknowledges that despite the significant evolution of the Global Fund’s business model it still needs to deliver solutions to a number of long-standing challenges. The TERG agrees with the review’s conclusion that one of the critical barriers to achieving better impact on the three diseases relates to issues with prioritisation. Prioritisation is influenced by a range of different components of the business model including evidence informed NSP’s developed with the help of partners (both in-country and global); the design and focus of the MEL system; the role the TRP in improving grant design; and balancing trade-offs between programme impact and fiduciary risk. One area of focus that must continue as a priority for the Global Fund is the strengthening of civil society organizations (CSO’s) and community-led systems, which have a key role to play in accessing and supporting marginalised and vulnerable people. With significant gaps remaining in scaling up interventions to achieve targets for reducing new cases/infections, another related area is ensuring the appropriate balance of support for prevention and treatment. This should be based on the particular stage of the epidemic in the country. The TERG welcomes the work that the Secretariat is already doing in these areas and encourages them to continue to work to strengthen these components. Funding decisions must be based on solid evidence and analysis, reflect the Global Fund strategic priorities combined with a balance across VfM priorities. (SR1 and OR1.4 and OR2.2).



13. **Overarching monitoring, evaluation and learning (MEL) framework:** The TERG has been a proponent of the Global Fund having an overarching MEL framework for several years and welcomes efforts of the Strategy Committee and the Secretariat to move towards having such a framework in place for the next strategy. Placing greater emphasis on independent evaluation and organisational learning should also be accompanied by allowing the space for Global Fund teams to apply more adaptive strategies to managing and supporting Global Fund grants.
14. **Differentiation:** The TERG acknowledges that the Global Fund has made significant progress in implementing its differentiation policy. More attention should now be given to other aspects of differentiation especially looking into different lengths of grant agreements to allow for longer time horizons to implement RSSH, HRG and equity interventions, that don't lend themselves to three-year cycles. Where implementers have some assurance that their activities will be funded for, say, six years, they can introduce greater innovation and provide more consistent support without spending precious implementation time to re-tender and re-contract and focus on results that require more than 2-3 years to measure. An additional area of differentiation that needs further examination and response relates to ensuring that grants are made more appropriate for decentralised and devolved systems of government
15. **Resilient and Sustainable Health Systems (RSSH):** The TERG recognizes that despite significant investments in RSSH, progress against the seven operational objectives has been limited and uneven. RSSH receives less focus and prioritization than the disease-specific areas, including through FR/grant making, grant implementation, and MEL processes, as well as in partner arrangements. RSSH remains a divisive area of investment, where some believe that the GF should only focus on the three diseases as a core mission, whereas others believe that RSSH is a fundamental enhancer to achieving this. Based on strong evidence that health systems weaknesses are some of the most critical barriers to achieving disease impacts, the TERG strongly supports the review's conclusion that the next strategy should clearly "*identify what is realistic and within the scope of the Global Fund to achieve, and where this might link with the efforts of others operating in this space*" and where the Global Fund is seen to have a comparative advantage. The TERG urges the Strategy Committee and the Board to come to a resolution on this topic now. This would be an essential contribution not only to achieving the core mission of the Fund but to also better align with other agencies involved in the Global Action Plan towards a more integrated approach to health and development including contributing to the evolving broader global health security agenda. The TERG notes that the impact of the COVID-19 pandemic on basic health services, particularly in LIC's, may involve a pragmatic acceptance in the short-term of the importance of providing support for health systems with the medium and longer-term aim of shifting funding to strengthening and sustainability.
16. **Equity:** Equity is critical to achieving the Funds disease goals and promoting gender equity of which human rights is a key aspect. Progress on these issues is significantly dependant on political will and leadership and the Global Fund has only limited influence here. However, the TERG recognises the important role played by the Community Rights and Gender (CRG) department in mainstreaming these issues within the work of the Global Fund. Despite this work the report highlights limited progress in SO3 partly due to a widely held misunderstanding that equity involves trade-offs with efficiency or effectiveness. The reverse is correct, equity is concerned with "giving everyone equal access to services based on need in order to improve efficiency, effectiveness and to achieve impact". The TERG agrees that the current lack of appropriately disaggregated data and understanding of the barriers to accessing health services does not facilitate the promotion of gender equity and human rights and this must be addressed. The impact of COVID-19 has clearly exposed the failure of health systems to address the needs of vulnerable and marginalised populations in particular and the consequences not only for these groups but for the whole population. Looking to the future, addressing equity of access will be a key component of any health security agenda.
17. **Partnerships:** Partnership is one of the Global Fund's core principles and a real strength. However, the partnerships do not work as optimally as they need to in order to ensure greater effectiveness of their combined efforts towards achieving disease impact. The SR2020, as well as

the 2018 Partnership Review, highlight a number of partnership related challenges. The TERG endorses the SR2020's high level findings that "there are still issues with coordination, accountability, and transparency of how Technical Assistance (TA) is delivered at the country level. There are also challenges to operationalizing working relationships between partners for RSSH at the global level as there is no working forum (such as a Situation Room) in which to address RSSH issues as they relate to the diseases. There is significant overlap of concomitant goals between the Global Fund Strategy and UHC, SDG and wider health goals. While the Global Fund is collaborating more closely with other organizations in pursuit of these goals, the objectives and rationale for how these collaborations drive impact at country level are not always clear. There is also partnership engagement 'gaps' in strategically important areas, such as the private sector, prevention and RSSH." (SR2020, Vol 1, page 26).

## **Annexes**

### **Annex 1: Relevant Past Decisions**

The following summary of relevant past Board decision points is submitted to contextualize the decision point proposed above.

	<b>Summary and Impact</b>
<b>GF/B34/DP03</b> Strategic Review 2015 (November 2015)	Based on the recommendation of the SIIC, the Board acknowledged the results and recommendations of the Strategic Review 2015 (SR 2015) commissioned by the TERG, as presented in GF/B34/10, and requested the Secretariat to consider the TERG's recommendations as it prepares its next strategy narrative. The results of SR 2015, presented at the 34th Board meeting in November 2015, and other TERG evaluations informed the development of the new Global Fund Strategy.
<b>GF/B35/DP04</b> Global Fund Strategy 2017 – 2022: Investing to End Epidemics (April 2016) <sup>3</sup>	The Board approved the Global Fund Strategy 2017 – 2022, which outlines the following four strategic objectives, each supported by several sub-objectives: (i) maximize impact against HIV, TB and malaria; (ii) build resilient and sustainable systems for health; (iii) protect and promote human rights and gender equality; and (iv) mobilize increased resources.
<b>GF/SC05/08</b> Strategic Review 2017 (October 2017)	The main objectives of the SR 2017 were (1) to review progress in delivering the 2012-2016 Strategy and (2) to assess the Global Fund's readiness to implement the new 2017-2022 Strategy. The Strategy Committee acknowledged the Strategic Review 2017 report and position paper, as presented in GF/SC05/08 (the "SR 2017") and accordingly recommended the SR 2017 to the Board for endorsement.
<b>GF/SC/02/09</b> TERG Evaluation Plan 2017 – 2022 (October 2016)	The TERG Evaluation Plan 2017-2022 aims to assess the effectiveness, efficiency, equity and impact of the Global Fund's investments and progress on implementation of the Global Fund Strategy 2017-2022, in order to provide strategic guidance and an independent assurance function to the Global Fund Board and Committees. Strategic Reviews are key activities of the plan.

### **Annex 2: Strategic Review 2020, Final Report, Vol I**

### **Annex 3: Strategic Review 2020, Annexes, Vol II**

### **Annex 4: Relevant Past Documents & Reference Materials**

- Strategic Review 2015 (November 2015), GF/B34/DP03
- Strategic Review 2017
- Global Fund Strategy 2017 – 2022: Investing to End Epidemics (April 2016), GF/B35/DP04

<sup>3</sup> <https://www.theglobalfund.org/board-decisions/b35-dp04/>

## **Annex 5 – List of Abbreviations**

CRG	Community, Rights and Gender
COVID - 19	Corona Virus Disease 2019
CSOs	Civil Society Organizations
GHS	Global Health Security
GMD	Grant Management Division
HRG	Human Rights and Gender
KPI	Key Performance Indicator
LIC	Low Income Countries
LTA	Long-Term Agreements
MEL	Monitoring Evaluation and Learning
QA	Quality Assurance/quality-assured
RFP	Request for Proposal
RSSH	Resilient Sustainable Systems for Health
SDG	Sustainable Development Goals
SOs	Strategic Objectives
SR2020	Strategic Review 2020
TA	Technical Assistance
TAP	Technical Advice and Partnerships
TB	Tuberculosis
TRP	Technical Review Panel
TERG	Technical Evaluation Reference Group
UHC	Universal Health Coverage
VfM	Value for Money