

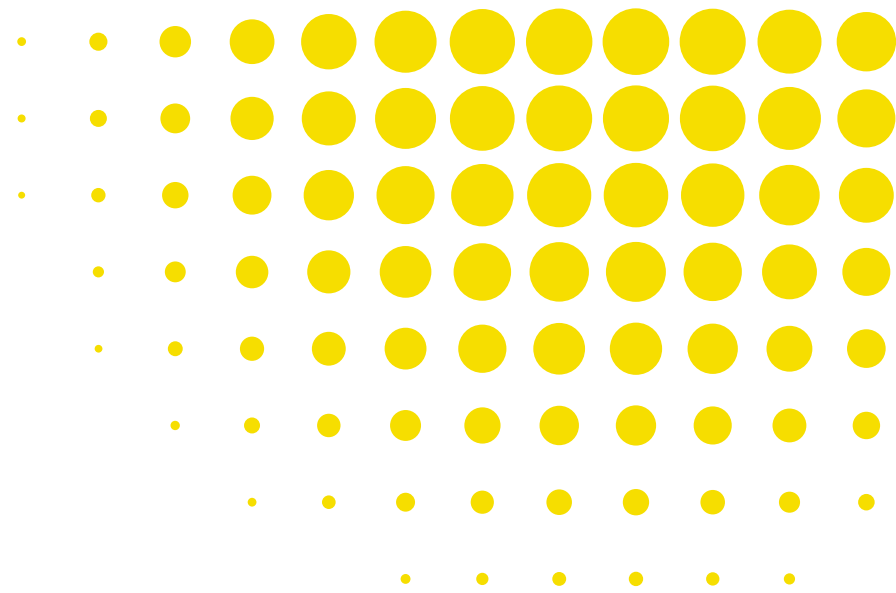
Evaluation Matters

49th Board Meeting

For Input

GF/B49/12

10 – 11 May 2023, Ha Noi, Viet Nam



Content Overview

Part 1: Update on the Independent Evaluation Function

1. Independent Evaluation Panel
2. Evaluation and Learning Office
3. Implementation of the Multi-Year Evaluation Calendar
4. Summary of the discussion from the 21st Strategy Committee Meeting on the update of the new Evaluation Function

Part 2: Closing of outstanding TERG evaluations

1. RSSH HSS Component Mapping Exercise
2. Data-Driven Decision-Making Evaluation

Executive Summary

Context

- Part one of this document is a joint report between the Independent Evaluation Panel (IEP) and Secretariat Evaluation and Learning Office (ELO). Both entities started preliminary work in late 2022, in advance of the formal creation of the IEP at the end of 2022, following the Board decision in November 2021 to transition to a new independent evaluation function ([GF/B46/DP06](#)).
- The focus and attention of the work to date has been on: (1) further defining the vision and operational functioning of the new function, including development of standard operating procedures (SOPs) and (2) implementing the 2023 Evaluation Workplan (GF/SC20A/DP03) as approved by the Strategy Committee in November 2022. Implementation of the workplan includes the launch of the first evaluations as per the Board approved Multi-Year evaluation Calendar, the End-Term Strategic Review of the 2017-2022 Strategy (SR2023), and the evaluation of the Resource Allocation Methodology.
- Part two of this document contains summaries submitted by TERG on the final two evaluations conducted under TERG which includes (1) the Mapping of the Health System Strengthening (HSS) Component of the Resilient and Sustainable Systems for Health (RSSH) Investments and (2) the Evaluation of Data Use for Decision Making.

Questions addressed in this slide deck

1. What have been the key areas of steer from the IEP and input to the SOP development and what is the vision of the ELO and the operational shifts that will be implemented to achieve this vision within the Global Fund?
2. What is the progress on evaluations being conducted in 2023 as per the Board approved Multi-Year Evaluation Calendar?
3. What were the key findings, recommendations, TERG position, secretariat management response and SC comments on the final two TERG evaluations?

Input Sought

This document is for information.

Part 1: Update on the Independent Evaluation Function

Part 1: Content Overview

1

Independent Evaluation Panel: oversight and steer

2

Evaluation and Learning Office: vision of new office

3

Implementation of the Multi-Year Evaluation Calendar :

The End-Term Strategic Review (SR2023)

Resource Allocation Methodology Evaluation

IEP Benchmarking Consultation: Evaluation Policies & Frameworks

To support development of the evaluation function & SOPs



- To contribute to the new evaluation function, from October to December 2022, the IEP conducted a rapid benchmarking exercise.
- The IEP reviewed a purposive sample of evaluation policies and frameworks, as well as key related guidance, to help inform the new evaluation policy and future directions for evaluation within the Global Fund.

Benchmarking Synthesis: Thematic areas that emerged through the review

1. Ensuring the independence, credibility & utility of GF evaluations, methods and processes

Evaluations planned and designed to meet priority learning & accountability needs.

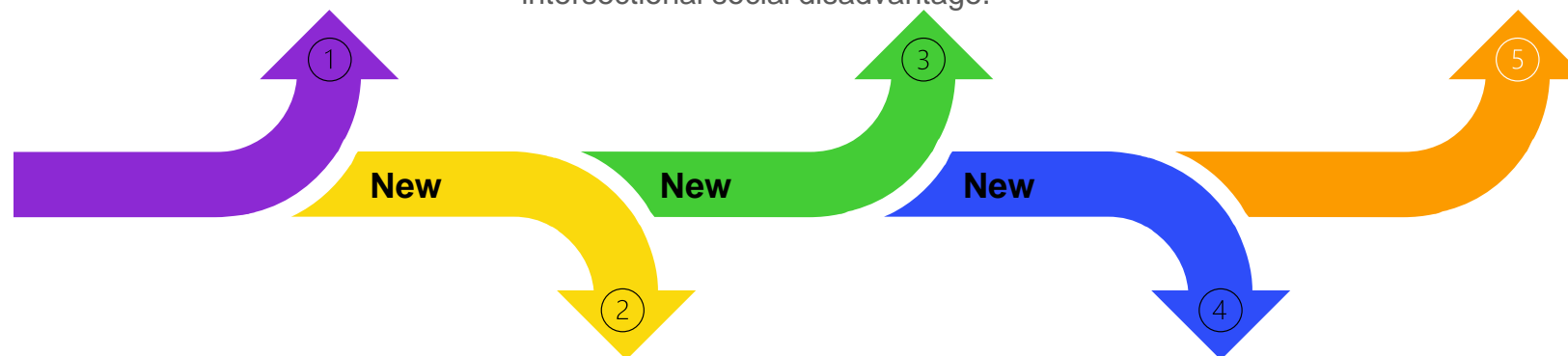
3. Ensuring that beneficiaries have genuine voice and representation in evaluations

Human-rights based approaches to ensure participation, inclusion and fair power relations : evaluations systematically consider factors such as poverty, gender, disability, intersectional social disadvantage.

5. Innovations in learning, use, and dissemination of evaluations

Enhanced use and utility of evaluations. Diversification and innovation of evaluation processes and products.

Evaluation synthesis, meta-evaluation reports, management responses, best practices in reporting and dissemination within GF and to stakeholders.



2. Enhancing the scientific rigour of evaluations

Methodologically rigorous evaluations enhance credibility and the ability to learn effectively. Considering deployment of a broader range of evaluation types including formative evaluation, impact evaluation, real-time learning. Can include capacity building.

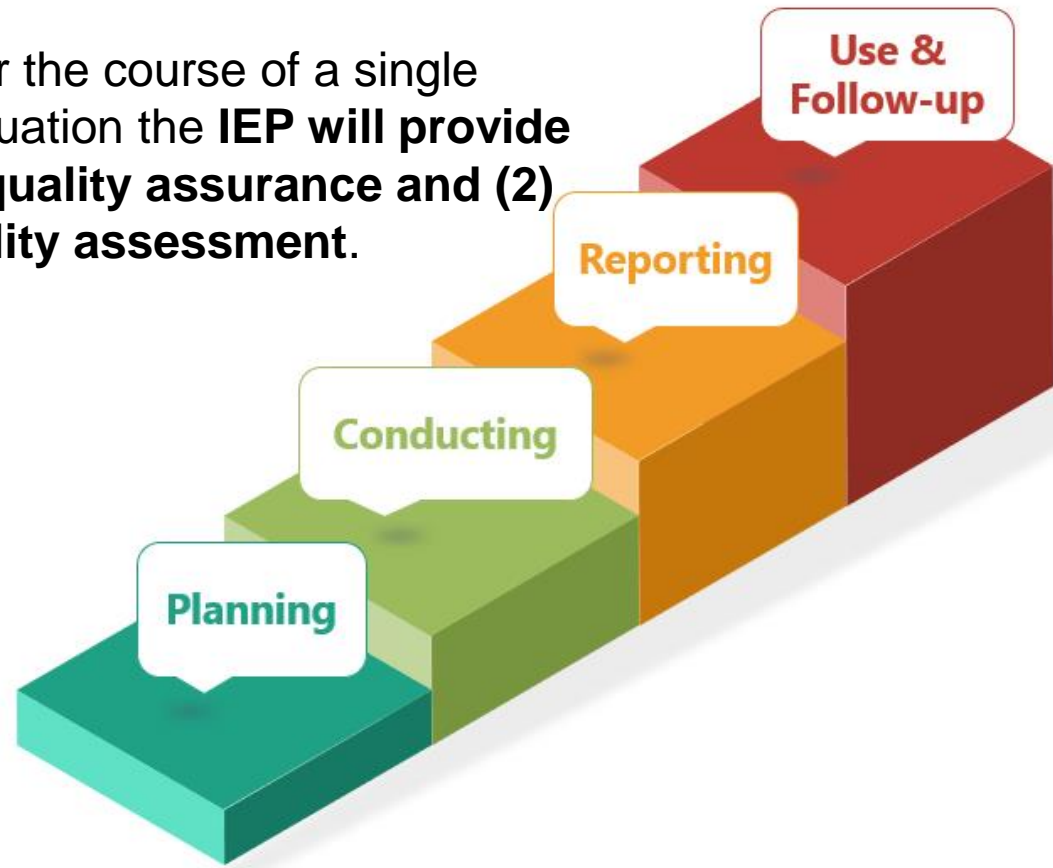
4. Redressing North-South power differentials in evaluation

Proactive steps to reinforce country engagement and ownership, balanced representation of secretariat staff and evaluation officers from the Global South; evaluations led by LMIC teams/ exhibiting South-South collaboration. Can include capacity-building.

IEP Evaluation Quality Assurance & Assessment

The IEP will work with the ELO to strengthen the independence, credibility, and utility of evaluations through the following mechanisms.

Over the course of a single evaluation the **IEP will provide (1) quality assurance and (2) quality assessment.**



IEP Role*

Use & Follow-up

- Development of the IEP Commentary.
- Prepare annual report to SC/Board on capacities, independence and quality of evaluation function.
- Review and comment on ELO evaluation synthesis.

Reporting

- Nominated IEP QualAssess Focal Points** provide independent assessment of the final evaluation report against a defined quality assessment framework.

Conducting

- Nominated IEP QualAssure Focal Points** review and comment on inception report and endorse changes, if any, in evaluation scope from ToR.
- Endorsement of final report.

Planning

- Oversight over overall evaluator selection processes
- Nominated IEP QualAssure Focal Points* engage with ELO Evaluation manager to identify evaluation scope.
- Approve the ToR

Evaluation and Learning Office: Vision, Mission & Functions

Vision

The Global Fund is a learning organization that enables decision-makers and stakeholders across the partnership to utilize and contribute to independent evaluation, learning, and change processes to deliver an accountable strategy to save lives.

Mission

To assure that Global Fund investments and decisions are informed, shaped, by learning and adaptation processes based on timely, relevant, and quality* independent evaluative evidence.

**includes through an ethical and equitable lens; robust and quality-assured scientific designs and methods; useful products.*

Functions

Insights

Create and manage evidence syntheses and curation, briefing products, report repository, and learning advisories.

Methods & Practices

Implement and manage end-to-end evaluation processes, implement tools to assure quality of studies and products.

Partnership & Capabilities

Partner with a broad and diverse array of collaborators, expanding the base of partners for evaluation and learning.

Learning & Adaptation

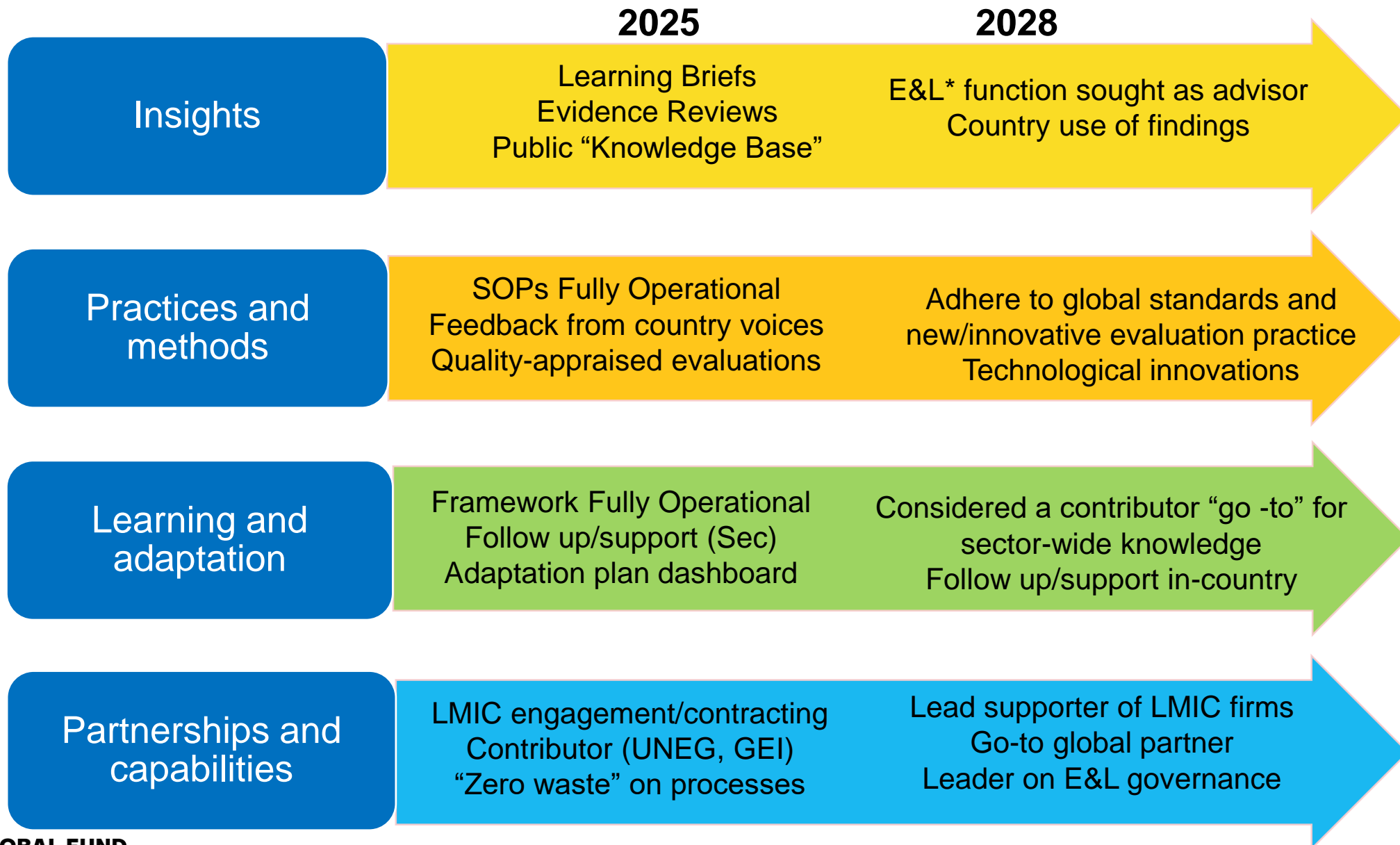
Support learning through evaluation processes, leading to actionable adaptation plans and follow up.

Operational Shifts for Evaluation & Learning



Horizon: Building the Vision

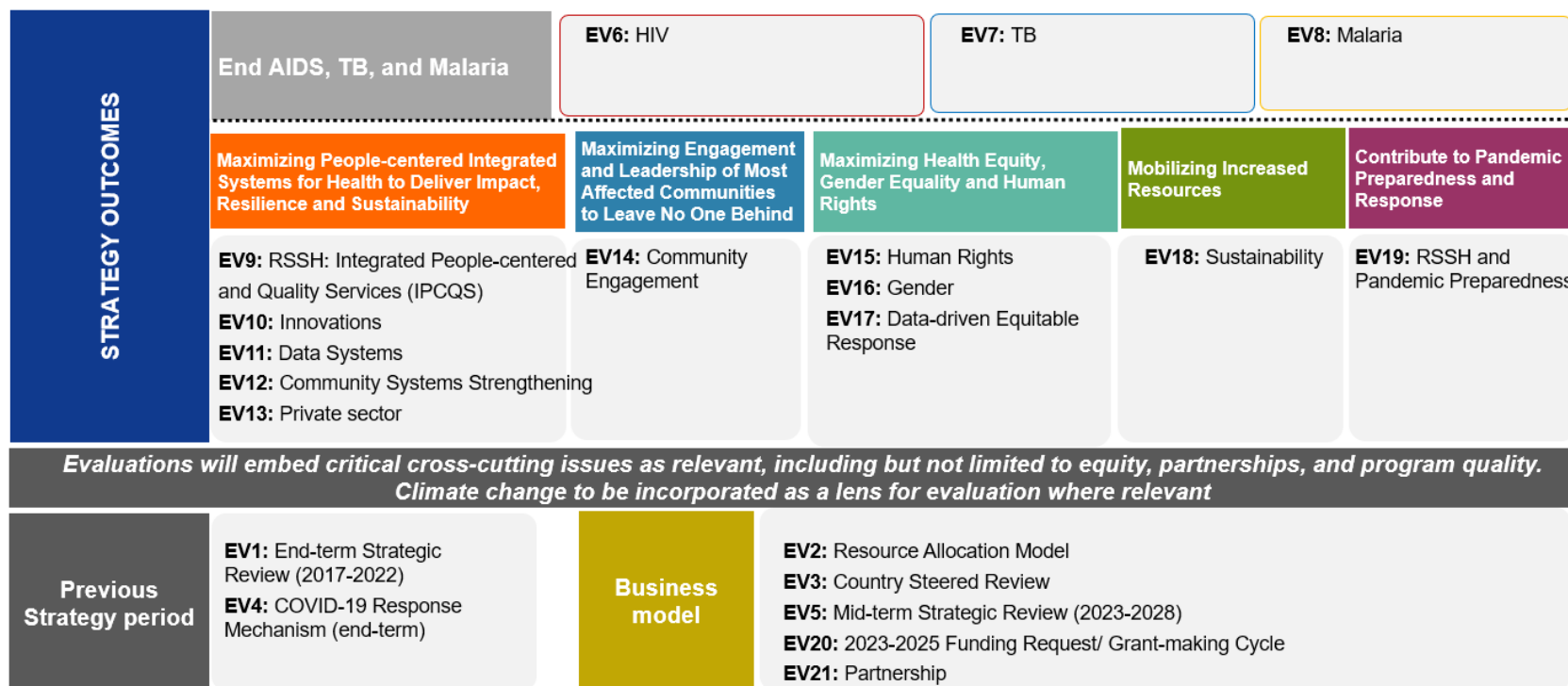
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Implementation of the Board Approved Multi-Year Evaluation Calendar

In November 2022 the Board approved the broad evaluation topic areas in compliment to KPIs for the 2023-2028 Multi-Year Evaluation Calendar as depicted in figure 1 (GF/B48/04). Evaluations scheduled for 2023, as per SC approved evaluation workplan (GF/SC20/DP03) are in progress. The ELO and IEP, in consultation with the Secretariat are further defining timing and scope of evaluations for 2024 for input by SC at 22nd SC Meeting.

Figure 1: Evaluation Topic Areas in the Board Approved 2023-2028 Multi-Year Evaluation Calendar



2023 Evaluations:

EV1: End-term Strategic Review (2017-2022 Strategy) *(more details on next slides)*

EV2: Resource Allocation Model *(more details on next slides)*

EV3: Country Steered Review (scoping and launch 2023 and implementation/first results 2024)

End-Term Strategic Review of the 2017-2022 Strategy

The End-Term Strategic Review is a cyclical evaluation that occurs at the end of each Global Fund Strategy period. Referred to as the SR2023, findings and recommendation to inform the new Strategy implementation, will be discussed with the Secretariat and SC between January to March 2024 and the final evaluation report, IEP Commentary and Secretariat Management Response will be presented to the Board at the 51st Board Meeting.

Main aims of SR2023:

1. To assess the relevance, coherence, effectiveness, outcomes and impact of Global Fund investments against the goals and objectives of the 2017-2022 Strategy.
2. To deliver relevant conclusions and lessons learned, as the basis for recommendations to inform ongoing implementation of the 2023-2028 Global Fund Strategy.

Objectives of SR2023

Focus

To assess the extent to which the Strategic Objectives of the 2017-2022 Strategy have achieved their intended aims.

Performance trends at the end of the Strategy period across the portfolio. Factors facilitating or hindering performance towards strategic objectives, and progress against previous recommendations of SR2020.

To assess the degree to which the Global Fund initiatives, systems, policies and processes played a role in ensuring the relevance, coherence and effectiveness of the Global Fund Strategy.

Examine barriers and enablers to effective operationalization of the Strategy with attention on partnerships, catalytic investments, M&E, select processes and policies, risk management, strategy transition planning and Covid-19 Response Mechanism.

To make actionable recommendations with respect to implementation of the 2023-2028 Strategy and planning process for the 2026-2028 grant cycle.

Key conclusions and lessons that are relevant to affecting the changes identified as key to driving impact in the new Strategy.

Resource Allocation Methodology Evaluation

This evaluation was requested by the Board during the discussions on the global disease split for the 2023-2025 allocation period. The Board requested “an external evaluation of the Global Fund’s approach to resource allocation to maximize impact, to inform evidence-based decision making on these issues ahead of the 8th replenishment” (GF/B46/DP04).

To ensure that findings from the evaluation can be taken into consideration and acted upon in advance of the 2026-2028 allocation period, the final evaluation report will be presented to the Board at the 51st Board Meeting

Scope of evaluation

To provide an independent assessment of the Global Fund Allocation Methodology and process with the aim to inform changes (if any) for the next allocation period to increase impact of Global Fund investments.

Objectives of the evaluation*

To review the Allocation Methodology and the cyclical review process in place that leads to final high-level decisions on country allocations and catalytic investments and advise on where improvements can be made.

Assess and demonstrate whether there are alternative approaches to the current Global Fund Allocation Methodology that will result in greater impact of Global Fund investments.

Describe the pros, cons and implications of any alternative approaches compared to the current allocation methodology.

Part 2: Closing of outstanding TERG evaluations

Part 2: Content Overview

1 **RSSH HSS Component Mapping Exercise**

2 **Data-Driven Decision-Making Evaluation**

TERG evaluation: Global Fund Mapping Health System Strengthening (HSS) Component of the Resilient and Sustainable Systems for Health (RSSH) Investments

1

Key conclusions and recommendations from the consultants' report

Key conclusions:

- There are significant challenges of limited comparability across HSS interventions as they are defined by different donors.
- There are challenges in analyzing how HSS investments are used and operationalized, leading to challenges in mapping interventions in terms of support v strengthening.
- The estimated magnitude of RSSH investment (direct and contributory) using the current GF Secretariat approach to tracking these investments is significantly higher than the cross-cutting investment estimated in this mapping exercise, which could only find evidence that 7% of GF investments are cross-cutting. This is because the GF approach uses a broader definition and set of assumptions than the methodology for this mapping.
- HSS/RSSH investments are well aligned with national priorities and health strategies and Global Fund RSSH investments are generally using national systems at the central level.

Summary of Recommendations:

1. GF and DPs should work towards making RSSH/HSS composition explicit in their resource tracking.
2. GF should work with DPs to ensure standardization of definition and categorization of HSS investments.
3. A more accurate, low-cost and timely measure would be for the Secretariat to track investments using RSSH modules (both budget and expenditure)
4. GF should explore the feasibility of extending PUDR expenditure reporting to enable cross-tabulation of module, intervention, cost category and cost input by budget line item.
5. GF resource tracking system should be shared with country NHA teams to facilitate proper visibility of RSSH investments.
6. GF should continue to support further alignment through the existing country-led process for preparing funding requests and should support and engage in national alignment frameworks led by the government.
7. Over time, the GF should move towards use of national systems for reporting.*
8. Principal recipients of the GF should ensure that they data they provide to the NHA team in MOH is comprehensive, disaggregated and submitted in a timely manner.*

TERG Position - Overall

The TERG largely endorses key findings and high-level conclusions and fully supports two recommendations (7 and 8), with noted caveats for others, out of eight proposed in this mapping exercise. The TERG assesses that the objectives of the mapping exercise in the ToR have been addressed, despite the constraints under which the team had to work, which included unclear and unstandardized definitions and categorization of HSS and RSSH.

TERG recognizes the challenges surrounding these investments including low and poor absorption of funds requiring long-term planning and implementation. One of the intentions in conducting the mapping exercise was to provide clarity on the Global Fund investments with a cross-cutting impact on health systems beyond a single disease as requested by the SC, including the extent of investments in systems strengthening and system support. Further clarity was also needed on the measures in place to track these investments and the overall contribution to national health systems strengthening initiatives beyond disease-specific programs.

TERG wishes to particularly draw the SC's attention to four Strategic recommendations and the associated issues, including the caveats provided by the TERG. Several issues, challenges, and bottlenecks covered in the recommendations have been raised repeatedly in other TERG, TRP and OIG evaluations, observations, and advisories, respectively..

The mapping exercise has been particularly difficult because of variations in definitions and categorization of health systems strengthening (HSS) and Resilient Sustainable Systems of Health (RSSH) investments across different partners and what their components are, including activities categorized as cross-cutting and disease/program-specific RSSH investments, which adds an additional layer of complexity in the analysis. Therefore, the definition of cross-cutting investment has been narrowed for this mapping exercise. Hence the lower numbers of the investment with a cross-cutting impact on health systems beyond a single disease estimate is a logical result of this exercise.

Summary of Secretariat Response

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The Secretariat endorses the publication of the report, along with the TERG Position Paper and the Secretariat management response.

- The Secretariat acknowledges the work of the TERG and the evaluators in undertaking this mapping exercise. However, the Secretariat is not able to endorse all key findings, high-level conclusions and recommendations from the report and the TERG's position paper. Main concerns include the different definitions used to measure cross-cutting HSS interventions and recommendations on contributory RSSH, expenditure tracking and resource tracking exercises (see next slide).
- The Secretariat feels that the report contains several limitations, particularly with respect to how some of the data analysis is presented, which affects its usefulness. While the report provides some useful insights, several of the recommendations will be difficult to action due to a lack of consideration of the cost-benefits and/or mandate of the Global Fund.
- The Secretariat partially or fully agrees with several of the recommendations, including those related to improving the Secretariat's resource tracking methodology, and the need to better align to global and national resource tracking methodologies, working with technical agencies and development partners to harmonize definitions and classification systems and improve the development and use of National Health Accounts systems as resources permit.

The Secretariat highlights four main issues:

- *Different definitions of HSS & RSSH.* The mapping exercise used a narrow HSS definition to review RSSH that is contrary to the SC-approved definition and the one used historically. This led to lower estimates of cross-cutting investments than the Global Fund's estimates. The Secretariat disagrees with the report's conclusion that none of the contributory RSSH (disease module) has cross-cutting effects given clear counter examples (e.g., community health workers, M&E functions and polyvalent diagnostics for TB, Covid-19 and other diseases). Also, for example, a [paper published in Lancet](#) through in-depth analysis in 10 countries found that over a third of the Global Fund's work (including disease modules) also supports health security (having cross-cutting impact).
- *Removal of contributory RSSH.* The Secretariat was requested by SC and the Board to report on both direct and contributory RSSH when estimating how much is being budgeted to support cross-cutting interventions that directly aim to strengthen the health system, and how much of the disease investments are likely contributing to strengthening the health system. Making HIV/TB/malaria investments contribute to systems strengthening is a unique, potentially significant, contribution of the Global Fund. Therefore, we disagree with removing contributory RSSH from the tracking of RSSH investments. We agree that its useful to review the contributory RSSH investments with a view of strengthening the impact of these investments.
- *Expenditure tracking.* While the Secretariat agrees that it would be useful to be able to report on expenditures using more granular data, this would require substantive changes to the Secretariat's financial management systems, and it considers that currently the costs outweigh the benefits. However, the Secretariat will continue to discuss how to improve its expenditure tracking in preparation for the next cycle (Grant Cycle 8 [GC8]), including for RSSH.
- *Strengthening Systems of National Health Accounts (NHAs).* The Secretariat does not have the mandate nor the resources to convene partners at the global level to drive the resource tracking agenda and will continue to rely on technical and development partners. However, the Secretariat is fully supportive of strengthening the use of NHAs and can support this by continuing to encourage PRs to provide timely data to NHA processes at country-level, and through country grants (for example by strengthening public financial management systems).

TERG Evaluation of Data Use for Decision Making 2

Evaluation key messages and recommendations

Key messages:

- GF has invested over USD 1 billion in developing health management information systems (HMIS). This has contributed significantly to the development, strengthening and integration/inter-operability of disease program health systems, tools, and capacities to increase the availability of data for use.
- External support to instill a culture of data use is more successful in countries that have robust governance and coordination mechanisms, systems, support, and appropriate institutional incentives in place to use data throughout the health system.
- Greater partner collaboration is necessary to support governments to take a leadership role in implementing their long-term HMIS strategies for the entire health system. Phased approach is needed across multiple funding cycles to instill a culture of data use, including at the sub-national level.
- Additional attention is required to support countries to collect and use more granular data for priority populations to better target services, and to integrate and use data from the private sector and from community health workers.

Summary of Recommendations:

1. Focus strategic effort on supporting data use at the sub-national level.
2. Phase engagement strategically over multiple allocation periods.
3. Using revised modular framework to shift and increase investments in RSSH/HMIS elements
4. Focus new investment more on data use and support country leadership to strengthen culture of data use.
5. Support multi-year mentoring to strengthen data use habits of decision-makers.
6. Retain investments in digital HMIS platforms.
7. Share successful country tools and templates and support country-to-country learning.
8. Directly support the unit responsible for HMIS strategy to encourage horizontal leadership.

- **The TERG agrees with recommendations 1, 4, 6, 7 and 8 with caveats noted for the others.**
- **Additionally:**
 - Finding C14 around ensuring that private sector data is integrated into the national HMIS has not made its way into the eight recommendations of the consultants. In light of the importance of the private sector in the overall health delivery mechanisms in many LMIC countries, as well as the importance of the private sector in the forthcoming 2023-2028 strategy *“better engage and harness the private sector to improve the scale, quality and affordability of services”* **the TERG feels that greater emphasis should be placed on harnessing and integrating private sector data in the future. The Global Fund Secretariat should be tasked with creating incentives in countries to ensure that efforts to integrate private sector data are incorporated into the HMIS funding.**
 - Similarly, the report found that “efforts to integrate community-based/led monitoring data remains nascent; the latest Data SI is addressing this, but it is early days.” And while this is noted in the recommendation 8, the TERG thinks community-based data collection, monitoring, reporting and analysis deserves greater attention and reiterates the need for the Global Fund to provide more support to country decision-makers and programs to better integrate community-generated data with the health management information systems

Summary of Secretariat Management response

2

- The Secretariat broadly endorses the overall findings, conclusions and recommendations. The Secretariat endorses the publication of the report, along with the TERG Position Paper and the Secretariat management response.
- The Secretariat appreciates the efforts by TERG, country programs and country teams in supporting the “Data Driven Decision Making” review. The Secretariat notes delays which resulted in a compressed time-frame for country selection for case studies; that the numerous concurrent evaluations in 2022 resulted in tensions in country selection; and that the sample size of eight countries is small.
- The evaluation findings and recommendations resonate with ongoing efforts to strengthen data-driven decision-making at country level. The majority of the 8 recommendations are already being fully or partially addressed through ongoing activities being implemented through the DATA SI and through country grants. The current DATA SI (\$35 million over grant cycle 6 (GC6)) will end at the end of December 2023 which impacts the ability of the Secretariat to fully address all the recommendations*.
- The Secretariat notes that the review has not sufficiently acknowledged the GF business model. Comparison between the GF and other partners approach of supporting countries failed to acknowledge the strength in complementarity, difference in approach as well as the GF’s principle of promoting country ownership and support to national systems and minimize creation of parallel systems.
- This review was completed in November 2022 at the same time as the OIG was completing an audit of ‘In-country data systems’. At the time of submission of this document, the audit was being finalized. The OIG audit was focused more on data quality – including accuracy, timeliness and completeness – and the findings point to the need to strengthen use of data. The OIG review is complementary to the TERG review and there is agreement that more can be done to strengthen data use at country-level as it relates to accuracy of data that is being collected. The newly established Programmatic Monitoring Department (PMD) will focus on strengthening data quality and data use for decision-making with the main goal of supporting countries to deliver greater impact.
- The Secretariat agrees with the TERG’s position that there should be more emphasis on harnessing and integrating private sector data into national systems (HMIS and CHIS data systems), however we do not agree that the Global Fund ‘*should be tasked with creating incentives in countries to ensure that efforts to integrate private sector data are incorporated into HMIS funding*’. The inclusion of private sector data is something that must be driven by the government while the Secretariat can advocate for this in collaboration with partners. Rather than ‘creating incentives’, the Secretariat feels that it would be more appropriate to engage in supportive actions with partners and respond to country-specific context.
- The Secretariat agrees with the TERG on the need to further emphasize the importance of community-based data collection, monitoring, reporting and analysis and that while the Secretariat can play a role in advocating its inclusion and integration within HMIS, this requires support from other in-country partners and leadership from host governments.