

Mid-Term Review of the Second Voluntary Replenishment 2008-2010 Cáceres, Spain, 30 March - 1 April 2009

PROGRESS REPORT ON HEALTH SYSTEM STRENGTHENING

(refers to document GF/PSC8/03, Strategic Approach to Health Systems Strengthening)

- 1. Since its inception, The Global Fund has supported the strengthening of health systems to improve outcomes for HIV/AIDS, TB and Malaria and to achieve the Millennium Development Goals 4, 5 and 6.
- 2. The Global Fund's commitment to Health System Strengthening (HSS), which is articulated in its Framework Document¹, states that the Global Fund will support programs that address the three diseases in ways that will contribute to strengthening health systems.
- 3. Further, the Global Fund's Strategy² identifies HSS as one of its Strategic Initiatives and states that the Global Fund will further elaborate its approach to the funding of health systems strengthening activities.
- 4. Since 2002, in eight rounds of funding, the Global Fund has used various approaches to generate demand for HSS and encouraged countries to submit requests for HSS investments. These are summarized in Annex 1.
- 5. With its decision made in November 2007 (GF/B16/DP10)³, the Board provided the Global Fund broad flexibility with HSS actions eligible for funding without budget ceilings to facilitate appropriately framed requests to address capacity constraints and bottlenecks, which hinder effective delivery and scale-up of interventions to improve HIV/AIDS, tuberculosis and malaria outcomes.
- 6. Study Area 2 (SA2) of the Five-Year Evaluation has acknowledged increased Global Fund investment in HSS, but recommended clearer definition of the scope of HSS activities that the Global Fund could support with "operational global division of labor regarding the financing of and technical support to HSS".
- 7. The Global Fund has worked with partners to bring clarity on the scope of HSS activities it can finance. The consultations have been influenced by a wealth of studies and by developments in other agencies, many of which have been re-examining their role in the international health system agenda⁴.





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¹ The Framework Document of the Global Fund to Fight AIDS, TB and Malaria. Geneva, 2002

² A Strategy for the Global Fund : Accelerating Efforts to Save Lives. Geneva, 2007

³ Decision Points of the Global Fund Board's 16th Meeting. Kunming, China, 12 - 13 November 2007

⁴ The Global Fund's Strategic Approach to Health System Strengthening, Background Note #4 for July 2007 Consultation, WHO, 2007.

- 8. As an overall trend, countries' demand for HSS funding has been growing (USD 912 million in Round 7, USD 1,236 million in Round 8⁵), indicating the importance of mobilizing an adequate level of resources to meet the increased needs. However, in Round 8, only 53% of submitted proposals with HSS component where recommended for funding, and only 39% and 48% of the total requested funding for HSS investments in Round 7 and Round 8 respectively were approved. This indicates that enhancing the provision of technical assistance to countries by technical partners is necessary for improving the quality of HSS applications. Further, analysis of Round 8 HSS applications has revealed overemphasis on strengthening the service delivery function (76% of the total HSS investment request), undermining the importance of sustainable interventions such as strengthening the planning and policy-making functions, and facilitating demand generation for health services⁷. Collectively these findings suggest that technical partners' increased support for facilitating country-level demand generation for HSS investments might be beneficial⁸.
- 9. In line with the Board recommendation, the Global Fund has strengthened its grant monitoring and evaluation framework by including health system strengthening monitoring indicators, endorsed by development partners, in its updated Monitoring and Evaluation Toolkit. The Toolkit includes a minimum set of recommended indicators, proposed measurement tools and approaches to strengthening countries' Monitoring and Evaluation systems. It is designed to augment countries capacities in monitoring and evaluating HSS programs.
- 10. The Global Fund Secretariat has recently created two new technical positions Advisor on Health System Strengthening and Technical Officer, Health Systems Strengthening and has implemented an active work program in relation to HSS that includes:
- (1) revising HSS funding guidelines in consultation with technical partners,
- (2) supporting evidence-generation on HSS through the Global Fund's Five-Year Evaluation Study, and
- (3) creating a cross-Secretariat technical working group on HSS as a coordinating mechanism to more effectively implement multiple components of HSS activities. The Secretariat has also identified several priority focus areas to further improve the effectiveness and efficiency of HSS investments. These areas are described below:
 - Enhancing strategy for further improving the effectiveness of HSS investments

The Global Fund intends to intensify collaboration with technical and donor partners in order to reach common understanding on conceptual and operational frameworks for HSS and to facilitate the development of global coordinating mechanisms for HSS financing and programming. The consensus-based frameworks and coordinating mechanisms will be reflected in the Global Fund's application documents.

• Improving performance measurement framework for HSS

As a performance-based funding agency, the Global Fund pays particular attention to grant performance, including the performance of HSS interventions. The Secretariat intends to further develop the HSS performance measurement framework by optimizing its strategy on monitoring and evaluating HSS program implementation. In collaboration with technical

⁵ Due to limited time for more in-depth analysis, Round 8 data is based only on the proposals where HSS was included as a separate component, but excludes HSS interventions integrated into the disease-specific applications.

⁶ The report of the Technical Review Panel (TRP) on Round 8 provides two different data for the number of HSS proposals recommended for funding in R8 (24 and 25). Additional clarification reveled that the correct number is 24 proposals, which corresponds to 53%, not 56% as mentioned in the TRP report.

⁷ TRP Round 8 Report.

⁸ Analysis of Round 8 HSS Applications. The Global Fund, Geneva, 2009.

partners, the HSS monitoring indicators will be revised and evaluative research methodology will be applied to the Global Fund supported HSS programs to further enhance the quality of implementation and scale-up.

• Generating HSS evidences and Strengthening Technical Capacity through Learning

The Global Fund-supported programs contain ample information on innovative approaches to HSS interventions. The knowledge generated through analyzing programmatic data is a public good with significant potential to assist the international health community to more effectively apply evidence-based best practices. The Global Fund is working with technical partners on generating and disseminating evidence identified through programmatic research. As a learning organization, the Global Fund is committed to continuously strengthening Secretariat's capacity. The recently created Knowledge Management Unit (KMU) is leading the efforts to enhance staff's awareness and technical capacity in specific HSS areas. The KMU is developing regular induction courses and in-depth specialized training modules for staff members, provides byweekly science digest and organizes technical seminars to bring the most advanced external knowledge on health systems strengthening into the Secretariat.

Annex 1: Options Offered to Countries to Access HSS Investment

Funding Rounds	Demand Generation for HSS Investments
Rounds 1-3: Applying for HSS expenditures through a 'crosscutting' or 'integrated' component.	'Integrated' proposals had low application and low success rates: only one proposal was approved out of a total of ten submitted.
Round 4: "Integrated" component but with increased information on what could be requested for HSS, described as "a comprehensive response to the three diseases that focuses on system-wide approaches and cross-cutting aspects to strengthen health systems".	
Round 5: A separate funding window for HSS in addition to disease-specific funding windows	Only three out of 30 HSS applications were approved by TRP:
	 The conceptualization of what constitutes an HSS proposal were too vague and too broad; Linkages between health systems and disease control programs were superficial and not convincing.
Round 6: No separate component/funding window for HSS. Applications for HSS activities could only be included within the disease component for which such activities were deemed necessary.	 The overall quality of the HSS elements proposed within the many of the Round 6 proposals remained low. Lack of justification for proposed HSS activities on the basis of specific constraints faced by countries.
Round 7: Same approach as Round 6, but introduced the notion of a health system 'strategic action' within a disease component.	 Significant increase in demand for HSS investments: 113 proposals with HSS Strategic Actions with cumulative demand for USD 912 mln. Not so high approval rate: request for USD 364 million (39% of the total HSS demand) was approved
Round 8: HSS funding framework was refined to integrate requests for HSS within a disease proposal or, to use a distinct cross-cutting HSS section within a disease proposal.	 Further increase in demand for HSS investments: 45 proposals with HSS component, with cumulative demand for USD 1,236 million. HSS needs were insufficiently justified by adequate constraints/gaps analysis; Insufficient focus on equity and efficiency through integrated responses. Increased, but still insufficient approval of requests: US\$ 591 million (48% of total demand for HSS funding) and 24 proposals with HSS components (53% of all proposals with HSS components) were recommended for funding.