

NOTES FOR THE RECORD

25th GIST meeting, Geneva 30 April 2008

Attendance:

Chair: Steve Kraus (UNFPA) **Vice Chair:** Elmar Vinh –Thomas (Global Fund, Kirsi Viisainen, Sandii Lwin (Global Fund,); Fritz Lherrison, Luiz Lourdes, Pradeep Kakkattil, George Tembo, Angela Trenton-Mbonde, Aina Helen Saetre, Jenny Berg, (UNAIDS); Olivier Adam, Nadia Fuleihan (UNDP); Ambassador Jimmy Kolker (UNICEF); Teguest Guerma, Brad Hersh (WHO); Andrea Milkowski (GTZ); Ann Lion (OGAC); Jason Wright (USAID); Fareed Abdullah, Paul McCarrick (International AIDS Alliance); Michael O'Connor (ICAD); Richard Burzynski, Natalia Ciausova (ICASO) and Carlos Passarelli (ICTC)

Co-ordinator: Shona Wynd (UNAIDS)

Joining: Mr Peter Godfrey Fausset (TRP member - speaker)

Apologies: Jonathan Brown (World Bank)

Item 1: Welcome by Fritz Lherrison

It is a timely meeting, just after the Global Fund and PCB board meetings. Technical Support (TS) is important, and so also is GIST's role in providing, solving and identifying problems. Principle of TS and CoATS as important tools for GIST, as well as studies that will be undertaken this year. Focus on the identification of problems that are a result of lack of harmonization, but also operational problems, as well as long and short term problems and solutions.

Introduction

DECISIONS:

Agenda approved.

Item 2: Recap of progress since last meeting

COMMENTS:

- ToRs are consistent with GIST review, discussions that took place in New York in October 2007 and with input from PCB in December 2007. PCB has endorsed the ToR.
- The workplan that has been developed reflects the ToR; Objectives are aligned with the ToR, timeframe clear, and it is measurable. Consistent with previous dialogue. Thanks to Global Fund, UNICEF and UNAIDS for their work.
- PCB outcome: A copy of ToR was shared with the PCB for their input. Agreement to report back to PCB in the last meeting this year
- South – South membership: based on recommendation from PCB, the membership was expanded. International Center for Technical Cooperation on AIDS (ICTC) was invited to the GIST. ICTC accepted and is present here today. There is a need for a discussion on how to expand South-South collaboration in technical support.

DECISION:

Consider ToRs as final.

Workplan approved

ACTION:

GIST to report back to PCB on progress in last meeting this year

Item 3: “Quality” Observations from the TRP

The TRP is an independent body, of international experts that reports directly to the Global Fund board. Members of GIST, except UN, can apply to become members of TRP.

The TRP is not implementing, but is reviewing proposals. Track record from previous round is important, so level of implementation and success has an impact on the decisions taken in the TRP.

It was noted that there is a tension between the philosophy of the Global Fund of country driven processes and proposals developed outside the country structure, by professional consultants. But at the same time it was underlined that TRP is making their decisions based on the product in front of them. Important to build local TS, that can “replace” external consultants. But how successful are we in building this capacity? For example there is an outstanding need to build more operational research locally.

Noted a steady improvement in proposals, and pointed at the likelihood that proposals that are not successful in one round, will make it in next round. Underlined that comments made in previous rounds, must be reflected in the next proposal in order for it to be successful. It is important to read the TRP report before starting the process. If the applicants do not agree with the recommendations, it then becomes necessary to explain why they disagree and why they are not included, e.g. has funded proposal that was not example of best practice because it was successfully justified by the country (e.g TB). If a country is rejected several times, look at the reasons for this and do something with it.

The review process is very intense; e.g the group meets during 2 weeks to review 200 components. Process evolved over time. Proposals have to be coherent and easy to understand. Four factors that are important for a good proposal: 1) context/overall picture defined, e.g. national framework 2) the project must follow a logic, with clear objectives, which are followed down to service delivery areas 3) readability, easy to understand what is meant, understand the thinking behind 4) numbers count/ important: gap analysis, a numeric gap is needed.

New developments in the form and guidelines and TRPs response to that:

Dual track financing: welcomed by the TRP, it is a good way to accelerate processes. Challenges: Both tracks are doing very similar activities, however there must be a awareness of how the two are coordinating the response. There will still be need for one consolidated proposal, with two PRs. Civil Society (CS) has a larger task in preparing strong proposals compared to the UN. In response to the question: Does CS have the capacity that is needed? The answer was that the capacity of CS organizations must be built up.

Health System Strengthening (HSS): TRP makes a distinction between HSS and service delivery strengthening, this is also mentioned in the TRP report. TRP recommends that countries read the report from TRP. Disappointed that there is no effort to address the systemic part of the health service. TRP will be cautious in supporting salary funding, but could be incorporated as a part of the HSS.

Gender: discussions on this misplaced. TRP has a clear view of the role of gender. Not ignorant. Large minority with gender expertise, so welcome people with more focused gender knowledge on the TRP.

National strategic plans: TRP feels that country funding should fit into the countries' National Plans and planning cycle. TRP open to meet more frequently, especially if what they are reviewing is a smaller number of bigger proposals, linked to NSPs. This is also the direction of the present discussion that implies that the board will be asked to approve Round 9 at the earlier date in September. It was noted that the increased frequency of proposal rounds could be positive because it gives more flexibility, and the urge to apply for every round will be reduced.

Regional applications: often disappointing result, few good examples. Have to have all signatures from all the countries in the regional application. It is a weakness if country proposal and regional proposals do not cross reference, and argument for the advantage of a regional proposal.

Discussion

The proposal's TS component and budget was discussed, as well as countries own capacity to provide for this. It was argued that this results in difficult decision making for applicants, because they will have to decide if they want to use budget on TS or implementation. Applicants find TS expensive, and often question if it is value for money. The TRP commented and said that it is recommended that TS is more visible in the proposal. CCM will have to take this into account, and be realistic about their needs.

The following question was raised: If there is a move towards funding national strategic plans, how to make sure that NSP are validated? It was also asked if it is not time to include the UN in the TRP. Prof Godfrey Faussett answered that it would lead to a problematic situation and a conflict of interest where those applying for funding would be, in some cases, the same as those deciding. The Board has agreed that there should be a distinction. Global Fund current structure is set up as a funding structure, no staff involved in reviewing the proposals. Hence there will be a need for an external validation of this.

This was followed by a discussion on quality of RCC proposals and Prof Godfrey Faussett pointed to the inflexibility in the mechanism and the lack of validation of successfulness. He argued that more frequent call for proposal could solve the need for RCC.

It was noted that there is a need for clearer communication on what is meant by HSS and CSS and the linking to different components. It was also asked how the GIST can strengthen CS capacity? Prof Godfrey Faussett answered that GIST must be bolder, and give countries the chance, but also be clear on recommendations.

The low representation of CS on TRP was discussed, but the close collaboration was highlighted, so was the need to strengthen CS.

Three issues relate to TRP were discussed: 1) briefing of TRP. This has to be continued process and take place before the review. This year there will be a need for technical guidance in CSS 2) Languages used by the TRP. Argued that this could be expanded, and that it is unfortunate that, at the moment, the work of the TRP is conducted only in English. Proposals can be submitted in any UN language and they will be translated for the TRP. In the event that there is some confusion about the sense, a native/fluent speaker will refer to the original document and interpret for the TRP. 3) The gender issue was discussed and it was argued that male perspective must be included and that gender balance in the CCM will not resolve the need for more gender sensitivity in programs.

Item 4: Global Fund Implementation

UNAIDS presented collaborative work related to round 8

The prioritization of countries, tools and mechanisms developed to improve coordination and harmonization and the Global Fund Roadshows were highlighted as ways of enhancing collaboration. The contribution from WHO in taking this collaboration forward was acknowledged.

The following issues were discussed during the discussion:

- How to plan the Global Fund Roadshow better?
- What do we want to promote for the next PCB? PCB chair has suggested that focus for next board meeting will be on the relationship between UNAIDS and Global Fund, in particular the aid architecture. Next board meeting for Global Fund will focus on HIV/AIDS.
- How to involve the Joint UN Teams at country level to develop their capacity to support Global Fund proposal development?
- The weekly teleconference between partners in the UN and Civil Society¹ has been proven very useful, and facilitate information sharing.
- The value of the convening role of the UN, in bringing together UN and governments.
- Need to disseminate Global Fund information to country, Global Fund requirements are still often misunderstood.
- Need to document what we are doing collectively and individually. The added value has to be documented as we are investing a lot of money and we need to prove that we are providing value for money.
- The importance of being aware of what already exists and use it before we develop new mechanisms.

¹Participant in teleconference call: WHO, UNAIDS, UNFPA; UNICEF, CHAI, GAA, IAA, ISO, Clinton Foundation, CSAT, ILO, Open Society Institution and TSF

- GIST has an important role to play. There is a new framework/perspective for the work in the TS area, this includes systematic peer review, sharing of information, Roadshows etc, and it must be documented. How is the performance-based approach brought to this process? The perspective should include an effort to measure progress and support. GIST to be the platform for this, since it provides a mechanism where feedback can be given in a structured way and issues raised. This includes a continued assessment of partners.
- CSAT seen as a good and effective tool
- GIST important globally, but if replicated at country level global GIST not needed.
- TRP report shows that TS per se does not make a significant difference, but participation in Global Fund Roadshows increases likelihood of a successful proposal application.
- Competition between the UN agencies discussed. Should be resolved through the RC, and UCC etc.
- Could interpersonal skills building in the CCM process be a part of the workshop?
- Global Fund announced that Round 8 forms will stay the same for round 9

Global Fund presented findings related to TS in Global Fund proposals in round 7.

The budget of TS in the proposals amounted to 69 million USD overall (half of which came from the Afro region). 60% of this came from HIV/AIDS proposals, but it is still not a large share of the total budget, and money goes only to a few grants. Hardly any proposal did not include the TS component (see attachment).

The following questions were asked: How much thinking behind requests for TA funds? Are they included because there is a budget line or is there a real strategy behind them?

The chair asked: What is the role of GIST pushing these agendas?

ACTION:

Begin to map what TA the GIST members have been providing to support Round 8

Item 5: TS Update from GIST members

1a) CSAT has been operational since March 2008, covers 6 regions and are now discussing sub-regional hubs. ICASO organized a Round 8 meeting in Casa Blanca. Focus: How CS can benefit from this round, and be involved? Empower and build CS so that they will be able to interact with governments, e.g. CSAT, ICTC and UNAIDS working together in LA. Gaps and challenges: complexity of the system of TS and funding. Need to make this easy to understand. There is the need for a basic needs assessment to be able to help. CSS still unclear, anticipate a huge demand for support in this area. Also look at how it can be built into proposals and how it is linked to other areas? identified a gap related to minority groups and in the Eastern Europe and MENA region.

1b) Short presentation from Safe for AIDS (Peru), one of the CSAT hubs in Latin America.

2) The GTZ presentation covered the phase 01/2007 – 03/2008. In this period 59 requests from 24 countries received and 55 proposals funded.

Supported areas:

- Global Fund proposal development (Round 7 and 8)
- Support to Civil Society Organisations
- Support to CCMs
- Capacity building of other structures than CCMs

Update on Round 8: has focused and promoted pairing of consultants; international and national. Most support has gone to CS.

Presented the review of GTZ:

Main question: How to focus and adapt provision? (see attached slides). Work often on short term assignments, but might move into more long term assignments, to make it sustainable. How can capacity be built in CS? The back up initiative an important tool.

3) AIDS Alliance

Infrastructure and a team fully equipped in place, this includes functional technical hubs and a global team which provides TS to traditional partners and others. TS is provided in 5 languages. IAA is involved with TSFs, working with sub-recipients and CSAT. IAA has supported sub-recipient from CS in 13 countries, different level of support.

Focus: partnership, getting the action going between CSAT and Alliance. There will be an analysis of the work at the later stage. It was noted that if the discussion had not happened in the GIST last year the collaboration between CSAT and IAA would not have taken place. The business model aims at providing cheap TS, e.g. low costs. Providers of TS are also grant managers, PRs or SRs. In the future the Alliance will be calling on new TS providers, through the hubs, and estimates that there are 2-300 consultants not used before in TS, especially in the PR and SR area.

4) USG:

Focus: Short term TS, excluding proposal writing. TS is demand driven, with focus on pairing of regional/local and international experts. GMS contracted 30 assignments within 20 countries. Focus area of work: M&E, strategic planning. Identification of gaps: 1) period between grant approval and signing. There are issues around providing TS in this critical period between finalizing the proposal and signing the grant; 2) lack of provision of long term TA; 3) lack of thought regarding the funding of local costs. 4) Partnering with other TS providers. A number of questions were raised, e.g. How to prioritize requests and move away from “first come, first serve” thinking? How to work with CS before they become part of GF family? Who to call on in specific areas where the provider cannot be involved, how to direct to others?

5) UNAIDS

- Four external reviews of the TSFs concluded:
 - RELEVANCE: latent demand for TA in countries, TSFs play a relevant role
 - CREDIBILITY: clients perceive the TSFs services as useful, timely, reliable and efficient

- SERVICE: most consultants find the contracting, back stopping and information services useful and relevant
- EFFICIENCY: need to scale up, expensive model
- Two new TSFs in the pipeline (South Asia & Eastern Europe and Central Asia)

Other issues:

- TSFs cannot be UNAIDS' only answer to TS provision, need for more information on unmet needs to look at different options.
- Need more engagement from UNAIDS incl. cosponsors for QA, prioritization, and filling gaps (e.g. Joint UN teams – select a few countries where joint team is closely involved in TSF assignments for QA and see what can be achieved)
- Technical Support Division is working on guidance on TS planning – develop a model that can be used in countries
- Unmet demand for TA from civil society – how can partners collaborate with TSFs on this? E.g. CSAT – can they help articulate the need by CS (define e.g. what support needed to support CS PRs and Community Systems Strengthening).
- Measure impact of TA: Need for a review of substantial improvement of national responses in terms of strategic and operational plans, M&E systems, higher levels of Global Fund funding and disbursements (joint effort of TSFs, joint UN teams, ASAP, other partners).
- Working on a new TSF model where a few high-level consultants are contracted for a number of days/year and provide high quality TA and CD of mid-level consultants

6) WHO:

Focus on health sector response to HIV, and global guidance in the response. WHO focuses on building capacity of country offices, and national governments, as well as supporting the building of national strategic plans. It is also a focus to build countries capacity to provide local TA.

7) UNDP:

Primary focus is on provision of TS support in countries where UNDP is PR. In addition, UNDP is building capacity of the PR in 10-11 countries where the PR is a national government entity. . Tools have been developed in this regard for UNDP Country Offices to support national PR functions. Challenges: Decentralized system that makes it hard to get information from the field. Database will improve TS information.

8) UNICEF:

In January UNICEF asked countries to report back on the situation of children and AIDS in the region, if the theme was addressed in previous round and also how gaps were addressed. Most countries reported back, 8 were selected for extra support. A number of countries will receive financial support. 5 countries + Haiti were identified for PMTCT. UNICEF collaborates with WHO in the area of PMTCT and with UNFPA in the are of young people.

9) UNFPA:

Division of labor guides their work. Revitalize the work on young people, and focus on reproductive health and commodity security. UNFPA is in the process of decentralizing and long term TA should be available in the countries on focus areas. There are HIV/AIDS advisors in the regional offices and annual training of staff organized, possible to consider joint training.

Discussion

Before the discussion the co-chair summed up, pointing out greater partnership between members, and also gaps identified, e.g. lack in support and work with community organizations, and the need to focus more on sexual minorities and transgender. Follow up: work on TS model, move away from the first come first principle.

The following areas were touched upon:

- Agreed that it is useful to have a member that sits on the PCB in GIST.
- Funding of NSP could reduce CS involvement. How to minimize the risk?
- Validation criteria and the work on this by WHO/UNAIDS is ongoing
- ASAP, tool in gap analysis and relation to NSP and CS
- Think piece on validation. Looks at experience from GAVI and other experiences.
- Interesting work on technical support plans in UNAIDS. Joint teams play a role here. Will provide information on where countries can access TS, how to harmonize TS and also make sure that providers are not duplicating each others in countries

ACTION:

- Final GTZ study to be shared with group
- GIST to be kept informed on the work ongoing on validation of NSP
- Overview of ongoing TS in different countries to be ready soon.
- In-depth study of TS, to be ready by next PCB
- All member to put information on e-workspace and GIST Secretariat will email relevant information to ensure that members are “pushed” to look at it
- In the event that there is no on-going work looking at harmonizing TS indicators, a sub-group will be established to look at M&E indicators used to evaluate TS, and explore harmonization possibilities. **Members:** Ann

Item 6: CoATS (Coordination of AIDS Technical Support database) update

Company contracted has started the development. Work on search categories finalized.

ACTION:

Members asked to:

- test the first version by end of May
- send last year’s data to UNAIDS for uploading beginning of June.
- have a process in place within own organization for regular updating of information into the system as soon as possible

It was agreed that UNAIDS’ UCCs and M&E advisors will play an important role in coordinating the data entry from the joint teams and respective Country Offices for inputting of TS information into the CoATS database. Joint teams and country offices must be informed by their role and support the process.

Item 7: GIST commissioned studies

Concept notes approved. Two individual studies. It was recommended to include International Action and Cooperation Team (IACT) in the list of key donors, and countries from South America and NGOs in the list of key partners.

DECISION:

Working group established for study 1 (Measuring Quality, Access and Effectiveness of TA Provision): **Members** of working group 1: USAID, UNDP, ICAD, ICTC

ACTION:

GIST Secretariat to call a teleconference to enable working group to finalize ToRs

Item 8: Board meetings

PCB update

Main issues:

- Gender sensitivity: PCB took note of the gender guidelines and acknowledged the importance and asked UNAIDS to develop tool based on the guidelines. UNAIDS to report back to the PCB.
- Second independent evaluation of UNAIDS: Delayed because of discussion related to Cosponsors role in the oversight committee and also not strong enough participation by people living with HIV.
- Selection of new Director: Peter Piot's announced that his term will end at the end of this year. Expectations/competencies defined. Search committee and timeline agreed.

Conclusion from PCB: cooperation between Global Fund and UNAIDS is very important. MoU approved. There will be an extraordinary session of PCB in Geneva to select the EXD in late October 2008, but also a meeting in December.

All documents posted on the web site.

Global Fund Board update:

- There was the announcement of TRP members (request for competences in HSS; GAVI; cross cutting issues). Under representation from SEAP and East Asia region. Recommended that GIST support applicants from these region.
- Grant closure/continuation of services policy approved
- Board seat distribution re-examined
- MoU approved
- AMFM discussion: decided that Global Fund accept to host this
- Creation of MIST for Malaria related TA. Should look closer at how this is working
- Call for round 9 tentatively planned for 1 October

Decision point will be available on the web

Item 9: Principles of TS handed out

DECISION:

WB and WHO logo will be included

Item 10: Indeterminate Quantity contract update

Postponed to next meeting in September

AOB

Next meeting 9 September in Brighton

Kirsi will leave GIST. She will be hugely missed and she was thanked for her contributions to GIST over the past few years. We wish her well in her new position in Global Fund.