



Investing in our future

The Global Fund

To Fight AIDS, Tuberculosis and Malaria

Twentieth Board Meeting
Addis Ababa, Ethiopia 9-11 November 2009

GF/B20/4
Attachment 1

Annex A: Agreement on Privileges and Immunities of the Global Fund to Fight AIDS, Tuberculosis, and Malaria

The States Parties to the present Agreement,

Whereas the Declaration of Commitment on HIV/AIDS adopted by the assembled Heads of State and Representatives of Governments at the Special Session of the 2001 United Nations General Assembly dedicated to HIV/AIDS, supported the establishment, on an urgent basis, of a global HIV/AIDS and health fund;

Whereas the Global Fund to Fight Aids, Tuberculosis and Malaria (“the Global Fund”) was subsequently established in Switzerland in 2002 in order to attract, manage and disburse resources to make a sustainable and significant contribution to the reduction of infections, illness and death, thereby mitigating the impact of HIV/AIDS, tuberculosis and malaria in countries in need, and contributing to poverty reduction;

Whereas the Global Fund concluded an Administrative Services Agreement in 2002 with the World Health Organization, pursuant to which Global Fund officials enjoyed privileges and immunities;

Whereas the Global Fund concluded a Headquarters Agreement with the Government of Switzerland in 2004, pursuant to which the Global Fund and its officials enjoy broad privileges and immunities within Switzerland;

Whereas the Global Fund-World Health Organization Administrative Services Agreement was terminated with effect on 1 January 2009;

Whereas it is important to maintain the current organizational structure and decision-making processes of the Global Fund;

Have agreed as follows:

Article 1

Juridical Personality

The Global Fund shall be accorded by each of the States Parties to this Agreement juridical personality, and it shall have the capacity (i) to contract, (ii) to acquire and dispose of immovable and movable property, and (iii) to institute legal proceedings.

Article 2

Property, Funds and Assets

(1) The Global Fund, its property and assets, wherever located and by whomsoever held, shall enjoy immunity from every form of legal process except in so far as in a particular case it has expressly waived its immunity. It is, however, understood that no waiver of immunity shall extend to any measure of execution.

(2) The property and assets of the Global Fund, wherever located and by whomsoever held, shall be immune from search, requisition, confiscation, expropriation or any other form of interference, whether by executive, administrative, judicial or legislative action.

(3) The archives of the Global Fund, and in general all documents belonging to it or held by it, shall be inviolable, wherever located.

(4) Without being restricted by financial controls, regulations or moratoria of any kind:

(a) The Global Fund may hold funds, gold or currency of any kind and operate accounts in any currency;

(b) The Global Fund may freely transfer its funds, gold or currency from one country to another or within any country and convert any currency held by it into any other currency.

(5) The Global Fund shall, in exercising its rights under Article 2(4), pay due regard to any representations made by the Government of any State Party to this Agreement in so far as it is considered that effect can be given to such representations without detriment to the interests of the Global Fund.

(6) The Global Fund, its assets, income and other property shall be:

(a) Exempt from all direct taxes; it is understood, however, that the Global Fund will not claim exemption from taxes which are, in fact, no more than charges for public utility services;

(b) Exempt from customs duties and prohibitions and restrictions on imports and exports in respect of articles imported or exported by the Global Fund for its official use; it is understood, however, that articles imported under such exemption will not be sold in the country into which they were imported except under conditions agreed to with the Government of that country;

(c) Exempt from duties and prohibitions and restrictions on imports and exports in respect of its publications.

(7) While the Global Fund will not, as a general rule, claim exemption from excise duties and from taxes on the sale of movable and immovable property which form part of the price to be paid, nevertheless when the Global Fund is making important purchases for official use of property on which such duties and taxes have been charged or are chargeable, States Parties to this Agreement will, whenever possible, make appropriate administrative arrangements for the remission or return of the amount of duty or tax.

(8) Any goods, supplies, materials, equipment, property, services or funds introduced into, acquired, or used in a country financed by the Global Fund as part of, or in conjunction with, assistance provided under a Global Fund grant, shall be exempt from any and all taxes, including value-added taxes or other similar charges. Such goods, supplies, materials, equipment, property, services or funds are also exempt from any and all tariffs, customs duties, investment or deposit requirements or similar charges, and from currency controls. Such goods, supplies, materials, equipment, property, services or funds may be exported or sold or transferred to another person or entity in the country that is exempt from taxation and shall be exempt from any and all taxes, including value-added taxes or other similar charges, tariffs and customs duties on such export, sale or transfer.

Article 3

Representatives of States and Other Persons Constituting the Organs of the Global Fund

(1) Representatives of States and other persons constituting the organs of the Global Fund at meetings convened by the Global Fund shall, while exercising their functions and during their journeys to and from the place of meeting, enjoy the following privileges and immunities:

- (a) Immunity from personal arrest or detention and from seizure of their personal baggage, and in respect of words spoken or written and all acts done by them in their official capacity, immunity from legal process of every kind;
- (b) Inviolability for all papers and documents;
- (c) The right to use codes and to receive papers or correspondence by courier or in sealed bags;
- (d) Exemption in respect of themselves and their spouses from immigration restrictions, aliens' registration or national service obligations in the State which they are visiting or through which they are passing in the exercise of their functions;
- (e) The same facilities in respect of currency or exchange restrictions as are accorded to representatives of foreign Governments on temporary official missions;
- (f) The same immunities and facilities in respect of their personal baggage as are accorded to members of comparable rank of diplomatic missions.

(2) In order to secure for the representatives of States and other persons constituting the organs of the Global Fund at meetings convened by the Global Fund complete freedom of speech and complete independence in the discharge of their duties, the immunity from legal process in respect of words spoken or written and all acts done by them in discharging their duties shall continue to be accorded, notwithstanding that the persons concerned are no longer engaged in the discharge of such duties.

(3) Where the incidence of any form of taxation depends upon residence, periods during which the representatives of States and other persons constituting the organs of the Global Fund at meetings convened by the Global Fund are present in a State for the discharge of their duties shall not be considered as periods of residence.

(4) Privileges and immunities are accorded to the representatives of States and other persons constituting the organs of the Global Fund, not for the personal benefit

of the individuals themselves, but in order to safeguard the independent exercise of their functions in connection with the Global Fund. Consequently, a State in relation to its representatives, and the Global Fund Executive Director in the case of non-State representatives, not only have the right but are under a duty to waive the immunity of a person in any case where, in the opinion of the State or the Executive Director, the immunity would impede the course of justice, and where it can be waived without prejudice to the purpose of which the immunity is accorded.

(5) The provisions of Article 4(1)-(3) are not applicable in relation to the authorities of a State of which the person is a national or of which he is or has been a representative.

Article 4

Officials

(1) The Global Fund shall from time to time make known to the Governments of all States Parties to this Agreement the names of the officials to whom the provisions of this Article and of Article 8 apply.

(2) Officials of the Global Fund shall:

- (a) Be immune from legal process in respect of words spoken or written and all acts performed by them in their official capacity;
- (b) Be exempt from all forms of taxation in respect of the salaries and emoluments paid to them by the Global Fund;
- (c) Be immune, together with their spouses and relatives dependent on them, from immigration restrictions and alien registration;
- (d) Be accorded the same privileges in respect of exchange facilities as are accorded to officials of comparable rank of diplomatic missions;

(e) Be given, together with their spouses and relatives dependent on them, the same repatriation facilities in time of international crises as officials of comparable rank of diplomatic missions;

(f) Have the right to import free of duty their furniture and effects at the time of first taking up their post in the country in question.

(3) Where it is necessary for Global Fund officials to travel for the exercise of their official functions, applications for visas made by the Global Fund shall be dealt with as speedily as possible.

(4) The officials of the Global Fund shall be exempt from national service obligations, provided that, in relation to the States of which they are nationals, such exemption shall be confined to officials of the Global Fund whose names have, by reason of their duties, been placed upon a list compiled by the Executive Director of the Global Fund and approved by the State concerned.

Should other officials of the Global Fund be called up for national service, the State concerned shall, at the request of the Global Fund, grant such temporary deferments in the call-up of such officials as may be necessary to avoid interruption in the continuation of essential work.

(5) Privileges and immunities are granted to officials in the interest of the Global Fund only and not for the personal benefit of the individuals themselves. The Executive Director shall have the right and the duty to waive the immunity of any official in any case where, in his opinion, the immunity would impede the course of justice and can be waived without prejudice to the interests of the Global Fund.

(6) The Global Fund should co-operate with the appropriate authorities of States to facilitate the proper administration of justice, secure the observance of police regulations and prevent the occurrence of any abuses in connection with the privileges, immunities and facilities mentioned in this Article.

Article 5

Members of the Technical Review Panel, the Technical Evaluation Reference Group and Experts on Mission

(1) The members of the Global Fund Technical Review Panel and Technical Evaluation Reference Group, and Global Fund Experts on Mission (“Experts”), shall be accorded the following privileges and immunities so far as is necessary for the effective exercise of their functions, including during journeys made in connection with their service:

- (a) Immunity from personal arrest or detention and from seizure of their personal baggage;
- (b) In respect of words spoken or written or acts done by them in the performance of their official functions, immunity from legal process of every kind, such immunity to continue notwithstanding that the persons concerned are no longer serving, or employed on missions for, the Global Fund;
- (c) Inviolability for all papers and documents;
- (d) For the purposes of their communications with the Global Fund, the right to use codes and to receive papers or correspondence by courier or in sealed bags;
- (e) The same facilities in respect of currency and exchange restrictions as are accorded to representatives of foreign Governments on temporary official missions;
- (f) The same facilities in respect of currency and exchange restrictions as are accorded to members of comparable rank of diplomatic missions.

(2) Nothing in sub-paragraphs (c) and (d) of Article 6(1) shall be construed to preclude the adoption of appropriate security precautions to be determined by agreement between a State Party to this Agreement and the Global Fund.

(3) Privileges and immunities are granted to the members of the Global Fund Technical Review Panel and Technical Evaluation Reference Group, and Experts on Mission in the interests of the Global Fund only and not for the personal benefit of the individuals themselves. The Executive Director shall have the right and duty to waive the immunity of any such person in any case where, in his opinion, the immunity would impede the course of justice and can be waived without prejudice to the interests of the Global Fund.

Article 6

Settlement of Disputes with Third Parties

The Global Fund shall make provision for appropriate modes of settlement of:

- (i) Disputes arising out of contracts and other disputes of a private character to which the Global Fund is a party;
- (ii) Disputes involving any person referred to in the present Agreement who, by reason of his or her official position of function in connection with the Global Fund, enjoys immunity, if immunity has not been waived.

Article 7

Settlement of Differences on the Interpretation or Application of the Present Agreement

(1) All differences arising out of the interpretation or application of the present Agreement between two or more States Parties or between the Global Fund and a State Party shall be settled by consultation, negotiation or other agreed mode of settlement.

(2) If the difference is not settled in accordance with Article 10(1) within three months following a written request by one of the parties to the difference, it shall, at the request of either party, be referred to an arbitral tribunal according to the procedure set forth in Article 10(3)-(6).

(3) The arbitral tribunal shall be composed of three members: one to be chosen by each party to the difference and the third, who shall be the chairman of the tribunal, to be chosen by the other two members. If either party has failed to make its appointment of a member of the tribunal within two months of the appointment of a member by the other party, that other party may invite the President of the International Court of Justice to make such appointment. Should the first two members fail to agree upon the appointment of the chairman of the tribunal within two months following their appointment, either party may invite the President of the International Court of Justice to choose the chairman.

(4) Unless the parties to the difference otherwise agree, the arbitral tribunal shall determine its own procedure and the expenses shall be borne by the parties as assessed by the tribunal.

(5) The arbitral tribunal, which shall decide by a majority of votes, shall reach a decision on the difference on the basis of the provisions of the present Agreement

and the applicable rules of international law. The decision of the arbitral tribunal shall be final and binding on the parties to the difference.

(6) The decision of the arbitral tribunal shall be communicated to the parties to the difference and, in the case where the Global Fund is not a party to the dispute, to the Executive Director of the Global Fund.

Article 8

Acceptance, Entry into Force and Deposit

(1) This Agreement shall be open for signature by all States, including non-Board members of the Global Fund, and is also open for ratification by all States, including non-Board members of the Global Fund, in accordance with their respective constitutional processes.

(2) The instruments of signature and ratification shall be deposited with the Executive Director of the Global Fund who shall be the depositary of this Agreement.

(3) This Agreement shall enter into force two weeks after the date of deposit of the [tenth] instrument of ratification. For a State ratifying the Agreement after it has entered into force, the Agreement shall enter into force two weeks following the deposit by such State of its instrument of ratification.

(4) The original of this Agreement shall be deposited with the Executive Director of the Global Fund.



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PARTNERSHIP STRATEGY

OUTLINE:

The Partnership Strategy sets out an approach to fully realize the Global Fund partnership model. This paper is a result of an extensive consultation process with global, regional and country partners and takes note of the findings and recommendations from the Five-Year Evaluation. At its Eleventh Meeting in March 2009, the Global Fund Policy and Strategy Committee reviewed the Framework for the Partnership Strategy.

EXECUTIVE SUMMARY:

1. Partnership forms the very basis of the Global Fund model. As a financing mechanism and not an implementing entity with a country presence, the active engagement of and collaboration with a range of partners - including recipient governments, donors, civil society, the private sector, foundations, representatives of communities living with the three diseases, the UN and other technical partners - is essential.
2. As the health and development landscape become increasingly complex, and as the Global Fund expands and matures, it is important to reflect and define the intentions and expectations of the partners and set a strategic vision for the Global Fund, in partnership with others. While the Global Fund model opened up space for the participation of a broad range of stakeholders and set a new standard for inclusiveness and participation, the roles and responsibilities of the Global Fund Secretariat, Global Fund Board and Global Fund partners have not always been clear, strategic or systematic. The Partnership Strategy attempts to instil in all partners a sense of common ownership and responsibility for the Global Fund model.
3. The purpose of the Global Fund Partnership Strategy is to reinforce the importance of effective and cohesive partnerships to the success of the Global Fund and in scaling up programs to treat and prevent AIDS, tuberculosis and malaria. The Strategy also provides an accountability framework to enable the Global Fund and its partners to measure the effectiveness of the partnership through the ability to deliver results on the ground.
4. Six key themes are identified and the challenges that the partnership faces at global, regional and country levels are noted. The strategic thrust, however, is aimed at the country-level and how the partnership can better collaborate, coordinate and support the work at country level.

5. In many countries, the Global Fund in partnership with others have dramatically increased investments in AIDS, TB and malaria in a short time. The continued scale up of these programs will only be met if partners at global, regional and country-level work together.

Decision Point 1: Global Fund Partnership Strategy

The Board approves “The Global Fund Partnership Strategy” (GF/B20/4 Attachment 2) and requests the Secretariat to report on progress of implementation of the strategy to the Policy and Strategy Committee at its next meeting.

This decision does not have material budgetary implications.

PART 1: THE GLOBAL FUND'S VISION ON PARTNERSHIP

1.1 The Global Fund to fight AIDS, tuberculosis and malaria is a partnership established to support implementing countries.¹ In supporting implementing countries, partnership with others formed the very basis of the Global Fund when it was created in 2002 to raise and invest large amounts of additional finance to support the rapid scale up of measures to prevent and treat the three diseases. Not wanting to create another organisation that delivered aid or duplicated the work of existing institutions, the Global Fund was created to join forces with partners from all sectors to mitigate the impact of AIDS, TB and malaria.

1.2 There was an inherent risk in establishing this innovative approach in development and international health financing. The Global Fund would not be another institution delivering development aid; its success would ultimately rely on the engagement of a diversity of partners. But the model was not new to those working in the public health arena. The AIDS movement in particular has demonstrated that when communities from different sectors come together to achieve a common objective, things change.

1.3 The Global Fund continues to constitute a unique public-private partnership bringing together recipient governments, donors, civil society, the private sector, foundations, representatives of communities living with the three diseases, the UN and other technical partners. These partners, united by a common stake in public health, are involved at all levels of the Global Fund model, from membership of the Board through to country coordination and implementation of programs in communities. The partners believe in a shared set of principles when it comes to combating AIDS, TB and malaria, and they share a collective responsibility in ensuring that the international targets on health are met and that the mission of the Global Fund is achieved. This strategy re-emphasizes these principles and reinforces that implementing countries are at the center of the Global Fund partnership.

1.4 As a result of this partnership model, the Global Fund is now the main source of funding of AIDS, TB and malaria programmes internationally. To date, it has committed US\$15.6 billion in 140 countries to support programs responding to the three diseases. What was once inconceivable is now possible: There have been massive gains in reducing the incidence of malaria, the number of people living with AIDS being able to access treatment has increased exponentially and Universal Access is no longer an unattainable goal, and five-million additional cases of infectious tuberculosis have been detected and treated. The international community is on the path to meeting Millennium Development Goal 6, halting and reversing the spread of communicable diseases.

1.5 As a financing mechanism and not an implementing entity with a country presence, the active engagement of and collaboration with a range of partners is absolutely essential. But in the short life-span of the Global Fund, the organisation has evolved into an active participant in global health and development. The increase in financial resources has led to growing influence and responsibility. While the Global Fund plays a catalytic role and not a normative or policy-setting one, it has become an important voice in broader policy debates.

1.6 As the global health architecture grows increasingly complex, a number of challenges have emerged. The Five-Year Evaluation of the Global Fund found that "while

¹ GF/B7/7 Annex 8, Information Only. "The Global Fund Vision of Partnership," Seventh Board Meeting, Geneva 18 - 19 March 2004.

the Global Fund partnership model has opened up space for the participation of a broad range of stakeholders and set a new standard for inclusiveness and participation, the roles and responsibilities of the Global Fund Secretariat, Global Fund Board and Global Fund partners have not always been clear, strategic or systematic.”² The informality of the arrangements, the ambiguity of the roles of partners creating possible areas of duplication and some notable gaps, and the lack of clarity on funding technical assistance, have resulted in a less-than-optimal arrangement of the partnership.³ Therefore, this strategy is proposing a partnership that supports implementing countries based on mutual accountability for the achievement of concrete measurable results.

1.7 The Global Fund is currently reviewing and redesigning its architecture, to a single stream of funding per PR, per disease,⁴ thereby decreasing the burden on implementing countries. In 2010, a critical year for funding health and development, donors will gather for the third Replenishment Cycle and pledge funding for the next three years of the Global Fund. The Replenishment will take the Global Fund and the international community to the end of 2013, one year from the eve of the MDG deadline.

1.8 The Global Fund is a dynamic organization. Through its interaction with partners, the Global Fund can react to an ever-changing global health landscape *and* proactively create systems and processes that respond to that change. In many countries, the Global Fund partnership has dramatically scaled up investment in interventions within a short time.⁵ As the Global Fund expands and matures, it is important to reflect and define the intentions and expectations of the partners and set a strategic vision for the Global Fund partnership.

PART 2: DEFINING THE PARTNERSHIP STRATEGY

Purpose

2.1 The purpose of the Global Fund Partnership Strategy is to reinforce the importance of effective and cohesive partnerships in supporting the rapid scale up of measures to prevent and treat HIV, tuberculosis and malaria. Cognizant of the founding principles of the Global Fund (elaborated below), the Partnership Strategy aims to demonstrate where and how the innovative capacity of partnership is essential. The strategy outlines the crucial role of the Global Fund in partnership with others in scaling up programs and complements the redesign of the Global Fund architecture to make the partnership model simpler and more effective.

2.2 The Strategy also provides an accountability framework to enable the Global Fund and its partners to assess the effectiveness of the partnership through the ability to deliver results on the ground⁶ (see Annex 1).

² Evaluation of the Global Fund Partner Environment, at Global and Country Levels, in Relation to Grant Performance and Health Systems Effects, Including 16 Country Studies. June 25, 2008.

³ While this Strategy addresses many of the concerns and recommendations noted in Study Area 2 of the Five Year Evaluation, for a more comprehensive response, see the Global Fund’s Management Response to the Five Year Evaluation (GF/PSC12/07).

⁴ In September 2009, the Policy Strategy Committee will discuss and review the Architecture with a view to have it endorsed by the Global Fund Board in November 2009. In 2008, the Global Fund Board, “endorses, in principle, the recommendation that future architectural changes shall be based on a ‘single stream of funding per Principal Recipient per disease’ model.” (18th Board Meeting, 7-8 November 2008; GF/B18/DP19).

⁵ “Scaling up for Impact Results Report,” The Global Fund to Fight AIDS, TB and Malaria, March 2009

⁶ The Partnership Performance Framework is the first time the Global Fund and partner organizations have developed indicators against which they will measure their work and outcomes. The initial framework has been developed for Global fund/multilateral partnerships.

2.3 Finally, by outlining the roles and responsibilities required from the Global Fund Board, Secretariat and partners in order to ensure that the Global Fund remains a dynamic and effective institution, the Partnership Strategy attempts to instil in all partners a sense common ownership and responsibility for the of Global Fund model.

2.4 The Strategy is a result of an extensive consultation process with global, regional and country partners⁷ and takes note of the findings and recommendations from the Five-Year Evaluation. At its Eleventh Meeting in March 2009, the Global Fund Policy and Strategy Committee reviewed the Framework for the Partnership Strategy, which outlined the approach the Secretariat would adopt in developing a full Partnership Strategy.

2.5 While the Global Fund is, indeed, a global organisation with all staff in a Geneva-based Secretariat, the strategic thrust is aimed at the country-level. The Global Fund's principle of country ownership of programs is sacrosanct, and this document will highlight how the partnership can better collaborate, coordinate and support the work at country level. The Global Fund partnership *with*, and *in*, implementing countries must be strengthened. Globally, the partners agree upon goals and objectives, but the sense of ownership of the Global Fund by partners at county level varies considerably from country to country. Therefore a challenge persists to ensure that the Partnership is operational at country level.

2.6 The success of the Global Fund in partnership with others will ultimately depend on the lives saved - a goal that will only be met if collectively the partners at global, regional and country-level work together.

Guiding Principles

2.7 The principles of the Global Fund working in partnership with others are based on the founding principles expressed in the Framework Document and include:

- i. The Global Fund values national ownership of the programs it funds and it supports inclusive country-led processes and approaches;
- ii. The Global Fund ensures high quality programming by basing its technical review of proposals on normative guidance, scientific and technical standards developed by relevant technical partners, and uses its convening power to periodically review and update these standards and guidelines.
- iii. The Global Fund stands by the principle of best practice, human rights and proven, evidence-based interventions that are in accordance with the Gender Equality and the Sexual Orientation and Gender Identities Strategies and other relevant documents are supported.
- iv. The Global Fund partnership will continue to be built on a model of transparency, joint ownership, decision-making and commitment of all stakeholders involved in the fight against the three diseases. There should be no obstacles to the participation and involvement of all stakeholders in Global Fund processes and

⁷ Consultations included Kampala Implementer's Meeting (June 2008); Partners Consultation Meeting in Geneva (Sept 2008); Regional Partners Meeting in Maputo (Oct 2008); Board Retreat on Partnership (Oct 2008); Partnership Forum (Dec. 2008); and Bilateral Partners Consultation (May 2009) as well as the "Have Your Say" meeting held at the International Conference on AIDS in Asia and the Pacific in August 2009. A Board Retreat on Partnership was also held in October 2008.

activities, with partners participating in areas where they add the most value, and within clearly defined roles.

- v. Global Fund policies and procedures, especially in-country, should be as simple and light as possible to allow for ease of use by partners.

Strategic Objectives and Emerging Themes

2.8 The Partnership Strategy focuses on six thematic areas that require attention global, regional and country level:

- i. Governance, representation and oversight
- ii. Technical assistance
- iii. Harmonization and alignment
- iv. Resource mobilization
- v. Policy and advocacy
- vi. Communication and information sharing

2.9 **Governance, Representation and Oversight:** The Global Fund has significant convening and catalyzing power at the global level. At country level, the CCM is the country level reflection of the global partnership model of the Global Fund. The absence of a country presence means that the work and collaboration of partners is critical.

2.10 **Technical Assistance:** As a financing institution, the Global Fund does not provide technical assistance (TA) to its grant recipients. Rather, it relies on development partners to engage in every stage of program development and grant implementation. The emergence of *ad-hoc* and supply-driven TA has also contributed to challenges at country level. A new approach for coordinated TA must be rooted in a strong partnership which clearly identifies the roles and responsibilities of different actors at the global and country level.

2.11 **Harmonization and Alignment:** With the growth of Global Fund funding in countries, Global Fund processes have become increasingly complex. These investments can create additional burdens on implementers and partners at the country level when not aligned with country structures. The Global Fund, through its commitments to the Paris Declaration and the Accra Agenda for Action is working to meet harmonization and alignment goals within the broader aid effectiveness agenda.

2.12 **Resource Mobilisation:** Mobilising resources is something the Global Fund partnership has done extremely well - to date over US\$ 20-billion has been pledged, and over \$15-billion committed to countries. However, in light of the current financial crisis, mobilising increased resources could prove challenging.

2.13 **Policy and advocacy:** The success of the Global Fund partnership is the result of the collective advocacy of partners, particularly those living with and affected by the diseases. As a result of the advocacy of national activists, regional networks and global allies, marginalized communities such as women and girls, men who have sex with men, transgenders, sex workers and people who inject drugs are helping set national health priorities, and are able to access funding to implement programs in the response to AIDS, TB and malaria.

2.14 **Communication and information sharing:** The way the Global Fund communicates and shares information has consistently been identified in consultations with partners and in the Five Year Evaluation as an issue that needs attention. Through its website, the

Global Fund reports the details of its work. However, sharing other information with partners, particularly those at country level, remains a challenge.

The Partnership Landscape

2.15 The partnership landscape is complex and the Global Fund engages with partners both formally and informally. Formal agreements include institutional arrangements signed between institutions to reach common goals.⁸ Informal collaborations usually start around specific issues or pilot initiatives and coalesce around policy opportunities or important meetings. Broadly, the existing partnerships can be categorized as operational, technical, enabling or strategic (see Annex 2 for more detail). Some partnerships defy simple categorization and respond to the needs and gaps as they present themselves.

2.16 The most obvious way of reviewing the partnership landscape is by those who engage globally, regionally and at country-level.

2.17 Global Level: The overarching goal of the Global Fund's work with its global partners is to create an enabling environment to support countries in developing and implementing effective programs in the response to AIDS, TB and malaria. Globally, the Global Fund and its partners collaborate and align their respective roles in the global health architecture; develop frameworks that guide the provision of TA to countries; jointly advocate for appropriate and strong policies; mobilise resources; and establish effective modes of communication and information sharing in support of country-led efforts to improve health outcomes.

2.18 From its inception, the Global Fund has had a close relationship with the United Nations. The Working Group established by the Global Fund Board to advise the Executive Director on Global Fund-UN relations has developed the following statement on the Global Fund identity in relation to the UN: "The Global Fund to fight AIDS, Tuberculosis and Malaria is an international financing mechanism that serves to enable countries in their scaling up and sustaining access to prevention, treatment and care for the three diseases and to support the achievement of the health related Millennium Development Goals agreed by the United Nations. In so doing, the Global Fund respects the norm-setting functions of the United Nations as the broad policy reference for its work in health and development, providing legitimacy, credibility and technical guidance for its work. As a public-private partnership, it brings together governments, private sector, non-governmental organizations and communities in joint action with the special agencies, funds and programmes of the United Nations, by mobilizing resources to fund country plans within the context of national strategies."

2.19 Bilateral partners⁹ are donors, Board members, CCM members, providers of technical assistance and implementing partners. Their strong engagement with the Global Fund is essential at all levels, as is their support around issues such as the Global Fund's request for Observer Status in the UN General Assembly. At a global level, the Global Fund engages bilateral development agencies in a continuous dialogue to clarify policy issues, harmonize the Global Fund's procedures with established development practices and to

⁸ To date, the Global Fund has formalized its collaboration with partners through letters of agreement (ILO, 2003; UNDP, 2003; UNICEF, 2004) and memoranda of understanding (UNAIDS, 2009; Stop TB Partnership, 2009; Organisation of the Islamic Conference, 2009; Roll Back Malaria, 2009 pending Board approval). Agreements with other partners (World Bank, African Development Bank and WHO) are under consideration.

⁹ Bilateral partners are defined as technical cooperation agencies and development cooperation agencies of Global Fund partner countries.

identify specific roles bilateral partners may undertake at country level to support the Global Fund process. The Global Fund will enter into partnership agreements with bilateral partners where mutually identified as necessary.

2.20 The involvement of civil society in all aspects of the work and governance of the Global Fund is in one of the founding principles of the organization. Globally, civil society groups play an integral role in resource mobilization, advocacy and policy dialogue. But through their seat on the Board, they also help ensure that needs of vulnerable and marginalized communities help shape the direction of the Global Fund partnership. The Global Fund encourages the private sector to engage in all aspects of its work ranging from resource mobilization to implementing grants to public advocacy.¹⁰

2.21 Another important global partner for the Global Fund is the global network of Friends of the Fund. This global network is comprised of two national and six regional organizations,¹¹ covering a wide geographical scope ranging from the northern to the southern constituencies of the Global Fund are dedicated to raising awareness of and advocating for increased support for the Global Fund.

2.22 Regional Level: The Global Fund has worked with regional hubs in the past, particularly with UN regional offices, and regional offices of NGOs, but it has not fully engaged the numerous regional organising and governance bodies around the world.¹² This includes the African Union and the Regional and sub-regional Economic Communities (RECs), such as the Economic Community of West African States (ECOWAS), the Caribbean Community and Common Market (CARICOM/CARIFORUM), the Gulf Cooperation Council, the Association of Southeast Asian Nations (ASEAN) and the Pacific Islands Forum.

2.23 Currently Global Fund finances are disbursed in 140 countries. Without country offices, the Global Fund must rely on partners and find innovative ways to support the implementation of programmes.

2.24 Country Level: Investing the funds and implementing the programs takes place in countries. The response to AIDS, TB and malaria is largely national;¹³ CCMs meet, discuss and develop proposals in-country; Principal recipients, sub-recipients and sub-sub recipients carry out activities in urban and rural settings within the realm of the national

¹⁰ Examples of global private sector engagement include PRODUCT (RED)TM¹⁰ an initiative which enables the private sector to contribute to a sustainable flow of funds to and raise awareness about HIV in Africa. The Global Fund Corporate Champions Program is another platform through which companies can make a significant financial commitment to the fight against AIDS, tuberculosis and malaria. In January 2008, Chevron Corporation became the first Global Fund Corporate Champion, making a commitment of US\$ 30-million to the Global Fund at the World Economic Forum in Davos, Switzerland.

¹¹ National organizations are Friends of the Fund Japan and Friends of the Fund US. Regional organizations are Friends of the Global Fund Europe, Friends of the Global Fund Africa, Friends of the Global Fund Latin America and the Caribbean, Friends of the Global Fund South and West Asia, Pacific Friends and Friends of the Global Fund Middle East/North Africa.

¹² This includes the African Union and the Regional and sub-regional Economic Communities (RECs), which have formal structures and forums that provide platforms for defining harmonised approaches and influencing decisions and resolutions on common standards, regulations and norms for countries. Other bodies include the Economic Community of West African States (ECOWAS), the Caribbean Community and Common Market (CARICOM/CARIFORUM), the Gulf Cooperation Council, the Association of Southeast Asian Nations (ASEAN) and the Pacific Islands Forum. As well, there are development banks and agencies such as the Asian Development Bank (ADB), African Development Bank (AfDB), Arab Bank for Economic Development in Africa (BADEA), Islamic Development Bank (IDB) and New Partnership for Africa's Development (NEPAD).

¹³ The Global Fund accepts applications from several countries working together to achieve cross-border or regional outcomes, or by a group of island states or countries applying as a region that come together to form a "Regional Coordinating Mechanism" (RCM). Applicants must clearly demonstrate the added value of a cross-border or regional application. Regional proposals have been approved and funded, but they are an exception.

response. The Global Fund partnership plays an important role in all stages of the grant life-cycle - from preparing a proposal to developing a grant agreement to implementing activities. There have been great achievements by countries and partners that must be acknowledged, but in too many instances the role and response by the Global Fund partnership at the country level remains *ad hoc*. In addition, there is sometimes a "disconnect" between global and country-level, where agreements and understandings at the global level are not relayed or translated to their offices working in countries. Increasingly, through Board interactions and other fora, the Global Fund partnership with bilaterals is discussing and addressing this issue. Ultimately, the Global Fund partnership should be held accountable for the successes and failures at country level.

2.25 Whether partners sit on the CCM, provide country-specific TA or help explain Global Fund structures and processes, the role and work of the UN and multi-lateral partners is invaluable in country.

2.26 Bilateral partners are also often members of the CCM. As TA providers and in many countries, influential voices on issues of harmonisation and alignment, they occupy an important place in the health landscape.

2.27 Civil society plays a vital role as PR, SR and SSR and as a powerful voice calling for access to treatment, prevention and care, mobilising resources and ensuring the response to the three diseases reaches those who need it. Civil society players in country bring a sense of reality and immediacy to Board discussion and policy development.¹⁴ This is especially true of networks and organisations of communities affected by the three diseases. They have been and remain an integral part of the Global Fund partnership at all levels, and are particularly recognised for their advocacy and engagement in countries. In some countries, the private sector interacts and contributes to Global Fund processes, through participation on the CCM, as PRs and SRs. The private sector has not been as fully engaged, a gap that the Global Fund Secretariat will work to address. Parliamentarians also play an important role, both as advocates and policy makers. Their advocacy can - and has - influenced funding decisions taken by donor governments.

Part 3: PROPOSED STRATEGY

Governance and Oversight

3.1 The governance mechanisms of the Global Fund, globally and in-country, exemplify the partnership in action. Conceived to be inclusive, representative and participatory, the Global Fund structures include representatives of donor and implementing countries, civil society, communities living with or affected by the diseases, the private sector, private foundations, and technical partners. However, representation on a body - be it the Global Fund Board or a CCM - does not automatically ensure active participation in its deliberations and adequate influence on the decision-making process.

3.2 In many countries, the CCM has helped democratize the national health response. For the first time, stakeholders beyond the public sector have been fully involved in setting the country's priorities. Civil society members in particular have been able to engage in policy-setting and implementation in a way and at a level that didn't before exist; they are literally 'at the table' helping set the agenda for AIDS, TB and malaria responses. This varies from country to country. Ideally, the CCM is the country level mechanism around which partnership and coordination should be built. Global Level

¹⁴ See the Gender Equality Strategy and the Sexual Orientation and Gender Identities Strategy.

3.3 The Global Fund Board is unique in its structure,¹⁵ with representatives from donors, implementers and key partners. However, there is not always active and equal participation by all stakeholders in decision-making. Implementing constituencies in particular face challenges around communicating to their constituency, engaging in Board processes and feeding back to those they represent.

3.4 By providing better support to implementing constituencies,¹⁶ not only will the constituencies be strengthened, but so will the Board. The Global Fund and partners are committed to facilitating and supporting a process that allows for equal and strong involvement from each constituency. The Global Fund will also work with its Board constituencies and partner organizations such as UNAIDS, GAVI and the World Bank to identify ways to facilitate synergies between constituencies' engagement in the governing bodies of different organizations.

3.5 The direct exchange and collaboration between the Global Fund Board and the governing bodies of partner organizations must also be strengthened. The leadership of many key partner organizations do sit on the Board and the Executive Director of the Global Fund has a seat on the governing bodies of various partner organizations. In an effort to strengthen the engagement of all key partners in decision-making, the Global Fund Board has created one additional non-voting seat on the Board to represent the constituency of key partners (Partners Constituency) whose mission is directly related to the Global Fund and who are not currently represented on the Board.¹⁷ Beyond this, the Global Fund will seek to strengthen its governance ties with the key international partners including UN agencies¹⁸ to enhance joint collaboration and cultivating a joint vision on reducing the impact of HIV, tuberculosis and malaria.

Regional Level

3.6 The make-up of the Global Fund Board implementing constituencies is based on the WHO system.¹⁹ Adopting that system was practical, but poses some challenges. A number of Board implementing constituencies, for example, the Eastern and Southern Africa constituency spanning from Ethiopia to Swaziland, are made up of more than 20 countries. The Board members from a number of constituencies for example Latin America and the Caribbean, the Western Pacific Region and Western and Central Africa represent members who do not share a common working language. These are some of the barriers that have prevented some constituencies from engaging fully on the Board. With regional partners, including the Regional and Economic Communities, the Global Fund will support and facilitate more effective engagement of implementing constituencies on the Board. By

¹⁵ The Global Fund's Board includes representatives of donor and recipient governments, non-governmental organizations, the private sector (including businesses and foundations) and affected communities. Key international development partners also participate, including the World Health Organization (WHO), the Joint United Nations Programme on HIV/AIDS (UNAIDS), public-private partnerships (Roll Back Malaria, Stop TB, UNITAID) and the World Bank. The latter also serves as the Global Fund's trustee.

¹⁶ The Implementing Voting Block on the Global Fund Board consists of seven regional groupings of implementing country governments and one seat each for representatives of developed country NGOs, developing country NGOs, and of communities living with and affected by the diseases.

¹⁷ The Board has invited the Stop TB Partnership, Roll Back Malaria and UNITAID to be the founding members of the Partners Constituency. Any key partner that wishes to be represented on the Global Fund Board through the Partners Constituency can make a formal request to the Board, which will determine the appropriateness of their inclusion in the Partners constituency.

¹⁸ Currently the WHO is a key partner represented on the Global Fund Board. The Global Fund, however, does not participate on the Board of the WHO.

¹⁹ According to the Global Fund by-laws, developing countries' representatives are "one representative based on each of the six World Health Organization ("WHO") regions and one additional representative from Africa" due to the disease burden in sub-Saharan Africa.

reaching out to new organisations and creating a platform for constituencies to meet, exchange and discuss the governance structures will be strengthened.

Country Level

3.7 The CCM is the country level reflection of the global partnership model of the Global Fund. Each CCM involves all country-level stakeholders, and is the voice and representation of the Global Fund. It is the place where priorities and strategies on the country's response to the three diseases are set and it is the mechanism that oversees the implementation of Global Fund-supported grants.

3.8 In line with the principle of country ownership, the Global Fund promotes leadership by in-country partners at all stages of the grant life-cycle, from program planning and development, through implementation, monitoring and impact evaluation. The partnership has - and can continue to - play a vital role in overcoming the four main challenges of: meaningful representation; funding; risk management and grant oversight.

3.9 Meaningful Representation: The governance processes of the Global Fund were conceived to be inclusive, representative and participatory. At the country level, ensuring the meaningful and representative participation of all stakeholders (particularly civil society and affected communities) in governance through CCMs is priority. But full participation of civil society in CCMs is an ongoing challenge. Lack of capacity and inadequate funding for consultations with local interest groups are two barriers that many civil society representatives face. With the introduction of National Strategy Applications (NSAs)²⁰ there is concern that the role of civil society will be diluted and possibly undermined.

3.10 Improving engagement of civil society organizations in the Global Fund requires renewed engagement from all partners. In addition to technical assistance and support, civil society organizations and particularly groups representing vulnerable populations need a strong voice and support from bilateral and multilateral partners. Multilateral and bilateral partners and foundations have a role to play in calling for the inclusion of underrepresented groups. Trade unions, networks representing marginalised communities, community-based organisations, parliamentarians, and other civil society groups do not always have information about or access to the CCM. This is also true of faith-based organizations, which provide considerable health infrastructure in some countries. To support processes for participation at country level, the Global Fund will update and promote guidelines to ensure that the inclusion of vulnerable populations in CCMs is understood, support networks to build capacity of civil society networks and develop an accountability structure to measure the extent to which civil society representatives on a CCM are meeting their responsibilities.²¹ (For more detail, see Annex 3).

3.11 There are also challenges surrounding private sector involvement. While in some countries, the private sector is an engaged partner and implementer, in most cases, the private sector plays a minor role in many CCMs and the national disease response. The

²⁰ The initial funding of grants in the NSAs First Learning Wave will cover a period that shall not exceed two years. The Global Fund Secretariat will later propose to the Policy and Strategy Committee modifications to existing policies in order to launch a broader roll-out of the NSA procedure.

²¹ Often civil society representatives do not report back to their constituencies on activities undertaken as a representative on the CCM - either because they do not have the funding or structure to do so or because they do not fully understand their role and responsibility as a CCM member. Carrying out an open, clear and transparent selection processes is also an issue that needs attention.

Global Fund has developed a strategy to enhance partnership with the private sector as an implementer and contributor to good governance.²²

3.12 Multilateral and bilateral partners hold many different and overlapping roles depending on the country and context: they are often members of the CCM; part of technical working groups; and provide technical assistance. Their roles and responsibilities will be clarified in the accountability framework and in an upcoming Global Fund/bilateral compendium.

3.13 Funding: Revisions to the existing CCM funding policy will allow for more flexibility and increased funding for CCMs. The new model incorporates elements of performance-based funding in governance and management while maintaining a simple application process. The funding policy, to be discussed in Board Committees in September 2009, will respond to identified deficiencies in the funding of oversight;²³ constituency engagement; CCM alignment;²⁴ and equitable gender representation.

3.14 Risk Management: Partners have helped identify and address high-risk situations as part of the Global Fund's risk-management model. The model calls for systematically informing CCMs of situations where investments may be at risk. The model also asks the Global Fund to alert in-country partners and partners at regional and global headquarters.

3.15 Grant Oversight: One of the most crucial and underutilized program oversight bodies at country-level is the CCM. The Global Fund is investing in providing support to CCMs in their oversight functions, as well as in other areas of governance by increasing funding to CCMs and developing oversight tools such as guidance on grant oversight, improving communication to CCMs on oversight and providing funding so that CCMs can perform their governance and oversight functions more effectively, and with measurable results. (See Annex 3 for more detail.)

Technical Assistance (TA)

3.15 A number of challenges persist in relation to the provision of and financing for TA and numerous attempts have been made to address the need for appropriate and timely TA.²⁵ While the Global Fund does not currently directly fund its partners to provide TA, the Five-Year Evaluation of the Global Fund found that an efficient and effective system for the provision of technical support to Global Fund grants does not yet exist.²⁶ At country level, confusion regarding roles and responsibilities for TA and the funding for TA is even more pronounced.

²² An Enhanced Strategy for Partnership with the Private Sector, 2009.

²³ Increased funding will allow CCMs to perform their governance and oversight functions in a planned manner and with measurable results, including improving the quality of support provided to CCMs on oversight by better understanding CCM capacities and performance, and in turn developing evidence-informed strategies for their technical assistance; and expanding and strengthening channels of communication with CCMs. The Global Fund will also support CCMs that develop oversight tools including putting in place governance manuals and oversight plans, establishing a CCM oversight committee and including necessary activities and budget for oversight in the CCM annual budget.

²⁴ In line with Paris Declaration and Accra Agenda for Action commitments, the Global Fund continues to support aligning CCMs with other relevant in-country structures where appropriate. Alignment with other structures will support national harmonization and alignment efforts. This will also better position countries to manage new funding processes including NSAs and single-stream funding.

²⁵ The issues have been analyzed in detail, most recently in the Five Year Evaluation and in follow-up action related to that review mechanisms such as EARS, GIST, PEPFAR's Grant Management Solutions and the German back-up initiative, have all had some successes but none have been able, nor were they intended, to provide the comprehensive global solution that is required.

²⁶ The Five-Year Evaluation of the Global Fund, Study Area 2: Final Report, June 2008.

3.16 TA provision can occur at three stages of the grant lifecycle: proposal development, pre-implementation (between grant approval and signature), and during the implementation phase. Funding for TA in 2008 by bilateral and multilateral partners, in addition to the TA budgets in grant proposals²⁷ is estimated to be approximately \$41-million.²⁸

Global Level

3.17 Globally, partners are actively addressing the issue of TA coordination and provision through a number of coordinating mechanisms.²⁹ A number of activities are being completed on TA, including a joint public database that captures useful feedback on TA,³⁰ an analysis with technical partners on the cost of services to provide TA that are outside the normative mandate in order to inform direct financing discussions, and work with bilateral and multilateral partners to clearly define roles and responsibilities related to TA provision.³¹

3.18 There remains a reluctance to pay international TA providers from grant resources. At times, this highlights tensions that can develop in countries when the role of technical agencies to support countries is thought to be fully funded whereas the need for time-bound, specific technical support for Global Fund grants requires additional financing. The lack of attention to capacity building and to TA coordination to meet the demand is among the factors contributing to a perceived problem of “unfunded mandates” among technical partners.

3.19 Building on current research on TA,³² the Global Fund, with partners, will conduct a number of targeted studies at country level on planning, accessing and financing TA. A separate paper on TA provision will be drafted for consideration by the Global Fund Board (and relevant committees) at the May 2010 meeting. This paper on TA will seek to address the role of the Global Fund in the facilitation, funding and utilization of TA by countries (for more detail, see Annex 4). The Global Fund Secretariat is also working closely with partners such as UNAIDS, WHO, Stop TB Secretariat and Roll Back Malaria Secretariat to further clarify the coordination and development of TA plans to support countries as part of the Global Fund’s strategy to address technical assistance issues. The Global Fund is developing a new architecture pending Board approval. The new architecture will be heavily dependent on engagement of partners at the global and country levels and all concrete plans for partner roles and responsibilities in the new architecture will be reflected in the implementation plan for the Partnership Strategy.

²⁷ Over the years, the Global Fund has attempted to address TA needs by introducing a budget line in the proposal form to cover the costs of TA. However this budget line is often under utilized as countries are often reluctant to pay international TA providers from grant resources.

²⁸ “Landscape for Technical Assistance Related to HIV/AIDS, Tuberculosis and Malaria,” McKinsey & Company, commissioned by Bill & Melinda Gates Foundation, 2009. The figure cited is a rough estimate given that this information is not easily accessible.

²⁹ For example, through the Coordination of AIDS Technical Support (COATs), RBM Harmonization Working Group, the Stop TB Partnership TBTEAM, and WHO Joint Working Group, CSAT.

³⁰ The database is a joint project with UNAIDS, Roll Back Malaria and the Stop TB Partnership. It will capture feedback on TA received/provided and focus TA provision on countries with repeated unsuccessful proposals or implementation problems.

³¹ Partnership agreements will include a template to clarify the respective roles and responsibilities of specific agencies in relation to technical support and set accountability structures and transparent evaluation of the quality of services provided. A compendium of Bilateral partners will be developed by the Global Fund to document the type of technical support provided and how this support can be accessed at country level.

³² Research carried out on the issue of TA includes the McKinsey & Company study, GTZ’s “Technical Support mechanisms for Global Fund Processes,” (2008) and ongoing research by UNAIDS on making Technical Support work at country level.

Regional Level

3.20 Staff of UN agencies at the regional level particularly UNAIDS and WHO have provided technical support to countries in support of Global Fund proposals. The same agencies have also organized various workshops on behalf of the Global Fund to improve proposals writing and the monitoring and evaluation of Global Fund programs. Mock Technical Review Panels (Mock-TRP) are also organized by these agencies.

3.21 In 2005, UNAIDS established regional Technical Support Facilities (TSF) as regional facilities to build capacities and provide timely, high-quality and short-term TA at competitive rates in support of national AIDS responses. Most publications on progress and financing of the three diseases at regional level have also been undertaken by the UN agencies.

3.22 As providers of technical support, TSF's have posed a number of challenges.³³ While the Global Fund does not have regional presence, its partnership with UN agencies and some of their regional offices could contribute to addressing the challenges around TA.

Country Level

3.23 Receiving TA on a timely basis is one of the biggest challenges to the partnership at country level. The most effective way of ensuring efficient and timely use of TA budgets is for bilateral and multilateral partners to engage actively with CCMs on grant implementation challenges and emerging TA needs of PRs, SRs and SSRs.³⁴ In-country partners typically have the skills needed to identify TA needs and where to access TA resources and this must be part of country plans for partnerships to be effective.³⁵

3.24 All members of the Partnership need to do their part to improve the situation. The Global Fund will support partners to develop operational plans which include TA needs as part of specific Service Delivery Areas with activities identified across the different stages of grant implementation, while ensuring priority is given to existing local capacities.³⁶ Partners should prepare and plan to provide country-level TA in line with agreed roles, and should provide targeted support for countries that have repeatedly failed to access funding. In addition, they should support CCMs to build their capacity to coordinate and review TA provision against agreed upon timelines. The current CCM Guidelines task the CCM with the responsibility to coordinate and develop TA plans at country level. The CCM Guidelines are currently under review, and the role of the CCM in TA coordination will be revisited, to reflect the findings and recommendations of an in-depth study of TA that the Secretariat is currently implementing with McKinsey and the Gates Foundation.

3.25 A crucial role of the country-level partnership during proposal development lies with the technical agencies, particularly the UN and partnerships hosted by WHO such as Roll Back Malaria and Stop TB Partnerships, in identifying priorities for response to the disease. This technical support should focus on each institution or group's comparative

³³ These challenges include the lack of capability within countries to manage TA, difficulties in scheduling the delivery of TA through effective plans of technical support needs. For more, see review of ongoing and recently completed evaluations and studies of technical support to AIDS program implementation. Global Implementation Support Team (GIST), Nov.2008.

³⁴ For Round 7 alone, TA budgets in grants amounted to US\$ 69 million over five years.

³⁵ Evaluation of the Global Fund Partner Environment, at global and country levels, in relation to grant performance and health systems effects, including 16 country studies.

³⁶ One way to do this is to encourage technical support by twinning local and international TA providers and maintaining longer term linkages and follow-up with development agencies.

advantage so that the best support is obtained from the most appropriate partner. The Global Fund's revised, formal agreements with key technical agencies (such as UNAIDS, Roll Back Malaria and Stop TB) and other strategic multilateral partners clarify roles and responsibilities of each partner will ensure better harmonization of partner support at country level (for more on how these agreements will be made operational, see Annex 4). Technical support plans should be based on a sound gap analysis of national strategies and be produced in close collaboration with all in-country partners, including national AIDS authorities and other national coordinating bodies for the three diseases.

3.26 Bilateral partners play a key role in providing technical assistance to national programs that also benefit grant implementation directly. In many cases bilateral partners also provide direct assistance at various junctures of the grant life cycle at country level. Increased knowledge about the capacity of these partners and how country stakeholders can take advantage of such assistance is urgently required. The Global Fund will work with bilateral partners to ensure that country partners are fully aware of the services and technical assistance available to them.

3.27 CCMs play an equally critical role in the grant negotiation phase. As the "owner" of Global Fund financing in-country, the CCM must in principle approve all substantive changes made to a funding request. CCMs need to better understand PR capacities and expected implementation challenges. This will facilitate early identification of and planning for TA needs not already covered by the grant.

3.28 While the capacity-development needs of PRs, SRs and SSRs are starting to be addressed, more needs to be done in this area, including assessing the needs of grant recipients, addressing the national M&E systems³⁷ of countries, and developing a more coherent approach to working with partners by including activities in partnership framework agreement and MOUs where appropriate (for more on how these agreements will be made operational, see Annex 4). Transparency with regard to the PR assessment and the PR's assessment of SR and SSR capacity will also allow partners to respond to capacity needs. To this end, information on LFA assessments will be provided to and discussed with CCMs and PRs using agreed communication protocols. The Enhanced Financial Reporting system, which is a good measure to assess PR oversight of implementation at SR level, will be made available to partners using agreed protocols to assist in addressing capacity gaps.

Harmonization and Alignment

3.29 With the growth of Global Fund funding in countries, Global Fund processes have become increasingly complex. These investments can create additional burdens on implementers and partners at the country level when not aligned with country structures or harmonized with other partners' support.

Global Level

3.30 As part of a collective effort on aid effectiveness in the follow-up to the Paris Declaration and the Accra Agenda for Action, the Global Fund is following through its commitment by taking part in monitoring the Paris Declaration on Aid Effectiveness (coordinated by the OECD); working with partners to improve data quality and consistency

³⁷ The description of the state of M&E in country is based on the findings of the Five Year Evaluation and detailed explanations can be found in "The Five Year Evaluation of the Global Fund to Fight AIDS, Tuberculosis and Malaria: Synthesis of Study Areas 1, 2 and 3". March 2009.

through monitoring; and identifying successes and challenges in implementing results-based management frameworks in countries with a focus on impact towards the MDGs.

3.31 Another significant global effort in line with the Paris Declaration on Aid Effectiveness and the Accra Agenda for Action is the International Health Partnership and related initiatives (IHP+). Along with a number of other agencies and bilateral partners, the Global Fund is a signatory of the IHP Global Compact and is committed to the principles of harmonization, alignment and coordination.³⁸

3.32 An important initiative on streamlining international cooperation in global health involves strengthening of health systems (HSS).³⁹ As one of the major investors in HSS, the Global Fund participates in WHO-led initiative aimed at improving the overall effectiveness and efficiency of HSS investments and programming. The Global Fund, GAVI and the World Bank (with technical support from WHO) are working to harmonize their HSS strategies and funding frameworks. For implementing countries this will mean the creation of common health systems' definitions. Harmonized funding guidelines and timeframes, harmonized technical assistance provision mechanisms and harmonized approaches and reporting systems.

Regional Level

3.33 Following the Paris Declaration, UN agencies have strategically been pursuing a joint agenda for increased harmonization and alignment of their country systems. This has translated to regional initiatives being developed. For instance, in Africa, the WHO Africa Regional Committee Meetings endorsed the principle of a coordinated response to address the "proliferation of parallel systems within the same environment."⁴⁰ As a consequence the AfDB, UNAIDS, UNFPA, UNICEF, WHO, and World Bank have developed a regional mechanism known as Harmonization for Health in Africa (HHA). A similar mechanism is being established in other regions, providing an entry point for Global Fund partners to engage on these issues.

Country Level

3.34 The Global Fund has developed an action plan to improve the effectiveness of its funding according to the Paris Declaration principles⁴¹. This action plan focuses on three key areas: coordination of program staff salaries; alignment to national level cycles and systems; and increasing transparency of funding information at national levels.

3.35 The current re-design of the Global Fund's grant architecture aims to simplify Global Fund processes, improve alignment and harmonization and more effective management of the current growth of the Global Fund's portfolio. This review has resulted

³⁸ A partner of the IHP+, the Global Fund is working with partners to develop a shared validation approach for national strategies as part of the National Strategic Applications' preparation process. NSAs aim to increase aid effectiveness by having partners mobilize around a single common agenda - the development, financing and implementation of robust national strategies to address HIV, TB and malaria.

³⁹ The Global Fund's Framework Document states that the Fund will support programs that address HIV/AIDS, TB and Malaria in ways that will contribute to health systems strengthening (HSS). Further, the Global Fund's Strategy 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.

⁴⁰ 56th Session of the WHO Regional Committee for Africa, 28th August - 1st September, 2006.

⁴¹ The aid effectiveness action plan and coordinated support to salaries were approved by the 10th PSC meeting. (GF/PSC/10/05, GF/PSC/10/06).

in two main developments: National Strategy Applications⁴² and the “Single Stream of Funding” grant architecture.⁴³

3.36 When successfully implemented, the new “Single Stream of Funding” architecture promises significant reinforcement of partnerships, particularly at the country-level. Several proposed features will serve to strengthen the role of CCMs in program oversight, coordination and planning. The Global Fund’s explicit architectural shift from more fragmented, project-style funding to program-based approaches will benefit from and depend on well-functioning and dynamic partnership support to national programs and coordinated implementation systems.

3.37 In several countries, the Global Fund is collaborating with implementing governments and multi- and bilateral partners through Sector Wide Approaches (SWAs) where the Global Fund supported programs are integrated into the national strategy. In a few cases, Global Fund financing is also pooled with other partners’ funds. The lessons learned from SWA contexts have fed into the development of the National Strategy Application approach.

3.38 Country-level partners have an important role to play in harmonized program oversight. Joint missions with other partners and annual joint reviews of national program implementation are key components of a harmonized approach to oversight which reduces country stakeholder burden and increases transparency between all partners. The Global Fund Principal Recipients participate in joint reviews along with in-country partners. The joint review reports will become increasingly important for periodic program reviews of Global Fund support when the implementation of the new architecture is rolled out.

Resource Mobilization

3.39 Mobilising resources is something the Global Fund partnership has done extremely well. However, in light of the current financial crisis, mobilising increased resources could prove challenging.

Global Level

3.40 The clearest example of partnership for resource mobilization is the Global Fund’s Replenishment process, which introduced the notion that all stakeholders could participate in a mechanism aimed primarily at securing increased and long-term financial commitments from donors. It includes *all* donors, both public and private, as well as national and civil society stakeholders and multilateral institutions. The process reinforces the idea of partners’ joint commitment to the success of the Global Fund and a mutual responsibility for its financial feasibility and sustainability. The Global Fund Partnership must focus on strengthening and supporting these relationships and this process.

3.41 The financial and economic crises are expected to negatively impact both public and private resources for health financing. In this environment, donors will seek maximum impact and leveraging of their contributions. Partnerships that are geared toward

⁴² National Strategy Applications (NSA) allow applicants to submit national strategies for HIV/AIDS, tuberculosis and malaria for Global Fund financing. The principle was endorsed on 25-27 April 2009 at the 15th Board Meeting (GF/B15/DP7). At the 18th Board Meeting, the Board authorized the Secretariat to launch “the First Learning Wave” - a phased roll-out of the NSA procedure - in a limited number of countries (GF/B18/DP20).

⁴³ A PR will have one single funding agreement which encompasses all of the funds under its management for each disease.

increasing the impact and effectiveness of funds deployed will therefore be of particular value (see Annex 6 for more detail).

3.42 The Global Fund will continue to engage in partnerships such as the H8 to advocate for greater attention to health issues and focus on priorities for financial investment at the international level. Involvement of these partners and other stakeholders in G8⁴⁴ and G20 processes and preparations is crucial to effective advocacy efforts.

3.43 In nurturing existing funding sources and leveraging new ones in both the public and the private sectors, the Global Fund will ensure that resource mobilization is well coordinated to avoid duplication and confusion among key donor groups (see Annex 6 for more detail).

Regional Level

3.44 Regional organisations have contributed to support for the Global Fund model, policies and resource mobilisation. As the Global Fund moves into its replenishment process, regional bodies that have been involved in an *ad hoc* fashion or not at all, must be more consistently and actively engaged. Friends of the Fund organizations have already played a crucial role in resource mobilization and a process is underway to increase the synergies between the networks to support resource mobilization efforts.⁴⁵

3.45 The impact of financial and economic crisis will be deeply felt by developing countries. Regional bodies that represent developing countries can play an important role in advocating for sustained and increased funding for health during regional meetings and on global platforms.

Country Level

3.46 Country-level partners share the common understanding that public funding is a key component of the response to the three diseases. Donor contributions are mostly part of Official Development Assistance (ODA) commitments and meant to complement national commitments made to health funding. This remains a policy and advocacy priority for the Global Fund and partners. Bilateral and multilateral partners, private sector partners and civil society organizations are instrumental in advocating for increased commitments for health funding.

Policy and Advocacy

3.47 The success of the Global Fund partnership is the result of the collective advocacy of advocates, particularly those living with and affected by the diseases. At the country level, advocacy has resulted in an expansion of the usual stakeholders in health, with civil society and members of the private sector engaging in Global Fund-processes and structures, including the CCM. As a result of the brave and bold advocacy of national activists and partners, marginalized and vulnerable groups such as women and girls, men who have sex with men, transgenders, sex workers, and people who inject drugs are being given a voice in setting the priorities of the country's response, and access to funding in order to implement programs in the AIDS, TB and malaria responses. But numerous challenges - including ensuring engagement is meaningful and inclusive - remain and the

⁴⁴ The Group of Eight (G8) is made up of Canada, France, Germany, Italy, Japan, Russia, the United Kingdom, and the United States.

⁴⁵ A publication explaining the role and responsibilities of the various Friends organizations will be released in 2009.

Global Fund Partnership needs to improve coordination between National Disease Committees, UN Theme Groups as well as other technical working groups and CCMS and ensure that the rights of vulnerable communities are observed and supported.

Global Level

3.48 The Global Fund Partnership has developed policies and strategy positions on key issues and communities. The Gender Equality Strategy, the Sexual Orientation and Gender Identities Strategy, Dual-Track Financing, Health Systems Strengthening and Communities Strengthening Systems are some of the areas where the Global Fund has sought to address health challenges from a human-rights base. These strategies and policies have been initiated by, discussed, debated and developed through and with the Partnership.⁴⁶ WHO, including through the Stop TB and Roll Back Malaria Partnerships, and UNAIDS are key global partners for policy guidance.

3.49 These policies are only be effective, if partners continue to advocate around them and work to ensure that they are understood and operationalised in countries. Finding a balance between country-ownership and developing and operationalising a policy that was developed and endorsed in global discussions can be challenging. Unless there is meaningful engagement and participation by those in country on the policies being developed, policies endorsed by the Global Fund Board (even though it has representatives from the Global North and South) will always be perceived as “top down” and prescriptive. The Partnership Forum, a formal part of Global Fund governance that brings a broad range of partners from country and regional levels in Global Fund policy making together, is a forum where some of these tensions are addressed.

Regional Level

3.50 In the past, regional organizations have shown support for the Global Fund; the Africa Union and WHO Regional Committees have championed declarations and resolutions on the Global Fund, the MDGs and the three diseases. The Global Fund needs to more intensively engage regional partners and proactively work with them to support scaling up the response to AIDS, TB and malaria.

3.51 Regional bodies, if engaged, can also be strong allies in a number of Global Fund priorities, such as gaining observer status at the UN General Assembly, and policy initiatives such as supporting the decriminalisation of marginalised communities and supporting the lifting of travel restrictions for HIV-positive people. Ensuring that the objectives set out in regional documents, such as the Abuja Commitment to Action,⁴⁷ are met is also an area where regional partners can play a role in mobilizing relevant stakeholders and take a strong advocacy position.

3.52 The Friends of the Fund network, with its eight organizations representing both donor and implementing partners,⁴⁸ is well-positioned to disseminate the priorities of the

⁴⁶ Along these lines, the Global Fund is currently analyzing its portfolio and consulting with partners and communities on how to mobilize demand in order to increase access and funding for prevention, treatment and care services for people who inject drugs. The Global Fund is the largest donor globally for harm reduction, investing close to US-\$1-billion in HIV grants that include a harm-reduction component.

⁴⁷ One commitment made by member states of the African Union at the Abuja conference (2006) was to allocate 15 per cent of their annual budgets to the health sector.

⁴⁸ National organizations are Friends of the Fund Japan and Friends of the Fund US. Regional organizations are Friends of the Global Fund Europe, Friends of the Global Fund Africa, Friends of the Global Fund Latin America and the Caribbean, Friends of the Global Fund South and West Asia, Pacific Friends and Friends of the Global Fund Middle East/North Africa.

Global Fund generally, and the Partnership Strategy, specifically. The primary focus of “Friends” - building and renewing commitment around Global Fund policy and increased contributions from both the public and private sectors - will contribute greatly to the advocacy agenda.

Country Level

3.53 The introduction of Dual-Track Financing is an important policy development at the Global Fund. While the intention of Dual Track Financing is to support more civil society and private sector PRs, thus far, grants have often been implemented by large international organizations. Often the exclusion of local NGOs as PRs is due to the lack of capacity and experience and here partners have an important role to play in supporting and developing the capacities of NGOs (see Annex 7 for more detail).

3.54 In countries, partners have and should continue to advocate for the involvement and inclusion of vulnerable and affected communities; engage with government partners beyond the health and finance ministries to include ministries of gender, social development and foreign affairs; and promote a response to AIDS, TB and malaria that meets the needs of those affected, including women and girls, MSM, transgenders and people who inject drugs.

3.55 Country level partners have an important role to play in contributing to global policy developments from a country perspective. They also play a role in ensuring the wide dissemination of the Global Fund policies and facilitating dialogue around their effective implementation.

Communication and Information Sharing

3.56 The way the Global Fund communicates and shares information has been identified as an issue that needs urgent attention both in consultations with partners and in the Five Year Evaluation. Through its website, the Global Fund has been transparent in reporting the details of Global Fund resources and spending. Through periodic regional meetings, the Global Fund communicates “what’s new” with the Global Fund. The Global Fund also convenes “road shows” to better inform partners of Global Fund processes and proposal development. However, information from and about the Global Fund can be difficult to access and is often inconsistently shared and interpreted. The increasing complexity of Global Fund processes, particularly at country level, has resulted in greater need for clearer, consistent communications on the new policies and initiatives of the Global Fund. While global level communications with partners has improved, this has not always resulted in clearer communication with the country level, both from the Global Fund and through its bilateral and multilateral partners. The Global Fund and partners need to ensure that consistent messages are provided clearly and information is accessible to partners at global, regional and country levels.

Global Level

3.57 The Global Fund is ultimately responsible for the exchange and transmission of necessary communications, but this can only be done effectively with and through partners. The Global Fund is currently undertaking a review of the means and flow of communication with partners and implementers in order to develop a plan for improved, more systematic and streamlined, coherent and consistent communication flows with each group of stakeholders. This plan will ensure that all teams within the Global Fund Secretariat and the Board speak “with one voice” by coordinating communication

initiatives and messages across the organization. It will also aim to simplify and make accessible information about grant proposals and implementation. The review will also describe the role to be played by partners (governments, implementers, multilaterals, foundations, disease specific coalitions, Friends networks).

3.58 Much of the communication will be shared through internet-based platforms to enable wide dissemination and continuous dialogue with implementing and technical partners. However, recognizing the limited abilities many organizations and individuals have in accessing internet-based information, there will be a substantial increase in the number of printed publications. The Global Fund will also communicate results, successes and the impact of Global Fund-supported programs in countries through activities such as media trips to programs, publishing case-stories, large-scale communications projects similar to the photo project "Access to Life," and organizing other related events. The Secretariat is also developing a Global Fund messaging platform to define key messages on architecture review and other ongoing policy developments.

3.59 As a major partner in global health initiatives, the Global Fund Partnership will continue to actively generate evidence on the impact of investments on health-related targets and the MDGs, and the effects of disease-specific investments on broader healthcare systems. The scope of technical partnerships⁴⁹ will be expanded so that the partnership can undertake additional analytical work including operational research, impact assessment, resource tracking, demand generation analysis and thematic evaluations and will disseminate evidence to the global health community.

Regional Level

3.60 Regional meetings - organized by the Global Fund and/or partners - are important gatherings to convey information with in-country partners on grant management, progress and opportunities for collaboration. These meetings also allow for discussion and dialogue on broader health and development issues affecting specific regions and countries. and disease-related information to partners in country.

3.61 The Friends of the Fund networks, which cover a wide geographical scope ranging from the northern to the southern constituencies of the Global Fund, can contribute by developing messages that are tailored for audiences in their region in order to document and disseminate the impact of the Global Fund in the region.

Country Level

3.62 To date, the Global Fund has shared information through its website and various publications. This information can be difficult to access and is often inconsistently shared and interpreted.

3.63 Communicating in the language of the country is an important element of effective communication. Strengthening the language capability so that the Global Fund can deliver more content in languages relevant to implementers is a priority.⁵⁰ The Global Fund web site will strengthen its French, Spanish, Russian, Chinese, and Arabic sections and will add a section for Portuguese.

⁴⁹ These partnerships currently include but are not limited to multilaterals (eg. WHO, World Bank, UNAIDS, UNICEF and GAVI), but also target bilateral partners and academia.

⁵⁰ The PSC will be discussing a paper on Language Diversity at the 12th PSC Meeting, September 2009.

3.64 Fund Portfolio Managers (FPMs), along with being managers of grants, are in effect ambassadors of the Global Fund in country. They are often the focal point for communication with bilateral partners, multilateral organizations, NGOs and other civil society organizations and private sector partners. FPMs are in regular contact with partners, but communication can vary depending on the country and context. In order to improve and standardize communications with country partners, the role of FPMs in country-level partnership is being reviewed (for more detail, see Annex 8). The Country Programs Cluster is currently finalizing a policy for FPM communication with country partners which will become institutional policy in all Regional Teams by January 2010 (See Annex 8).

3.65 Media outreach to implementing countries will gradually be scaled up, focusing on informing and building a support network for developing country reporters and editors interested in health issues. This will be done in partnership with organizations with experience and capacity for such activities.⁵¹ This outreach will provide better understanding and appreciation for the Global Fund's purpose in implementing countries; recognize the work and commitment of implementing partners and communities, and encourage national leaders from all walks of life to support the Global Fund's mission. Partners from the Global South are best placed to support the Global Fund's efforts to mobilise resources and scale up the response to AIDS, TB and malaria. The results achieved thus far are because of *their* efforts and they can most authoritatively and convincingly speak to the impact of the Global Fund partnership.

PART 4: COORDINATION AND IMPLEMENTATION

4.1 A cross-cluster implementation plan for the Partnership Strategy will be developed by the Global Fund Secretariat and submitted for information to the Policy and Strategy Committee in March 2010. The implementation plan will include roles and responsibilities of all partners, timeframe for implementation, monitoring, evaluation and reporting. Update and progress on the implementation plan will be shared with the relevant Board Committee as outlined in the timeframe developed as part of the implementation plan. The implementation plan will elaborate on the role of the CCM in strengthening the partnership at country level and strengthening the role of civil society within the partnership at country level.

4.2 Coordination within the Secretariat of the Partnership Strategy and implementation plan will be led by the Partnership Unit in the External Relations and Partnerships Cluster. This work will focus on building and consolidating partnership with constituencies in implementing countries, with multilateral and bilateral organizations, and with civil society and the private sector. The Partnership Unit will improve the performance of the partnership model and coordinate partnership development efforts across the Secretariat.

4.3 *Partnership Performance Framework.* The majority of Global Fund agreements are formal performance-based arrangements with a financing component.⁵² However, notwithstanding the contractual relationships with PRs and CCMS, agreements with Global Fund partners, for the most part, have been informal and without a financing component. While the principles of performance and delivery of results are fundamental to the Global Fund model, the lack of a financial component with partners means that performance cannot be linked to funding. In this regard, the development of a performance-based partnership approach, through a Partnership Performance Framework, is innovative.

⁵¹ For example, the Kaiser Foundation, Thomson Reuters Foundation, InterPress Service, and Irin News.

⁵² Examples include the Global Fund-Principal Recipient agreements and the forthcoming CCM Funding Policy.

4.4 Informed by the recommendations of the Five Year Evaluation, The Global Fund Partnership Performance Framework is being designed to achieve a balance in mutual partner accountability through an agreed performance framework that is not directly tied to Global Fund financing. The objective of the Partnership Performance Framework is to provide a mechanism through which the effectiveness of the Global Fund partnership model can be assessed at country level within key areas of success, i.e. access to funding and enhanced performance of grants. The Partnership Performance Framework outlines the collective accountability of all partners in the Global Fund partnership and measures the effectiveness of the partnership model.

4.5 Following a review of the existing Global Fund MoU's, seven key overarching service delivery areas (SDAs) common to all agreements⁵³ were identified. The six thematic areas that guide the objectives of the Partnership Strategy are fully aligned with the seven SDAs common to the MoUs signed with partners.⁵⁴ These seven service delivery areas form the basis for the development of the draft Partnership Performance Framework. The objective of each SDA was extrapolated to ensure continued focus on improving grant performance and the partnership at the country level.⁵⁵ These objectives were informed by regional operational plans already developed between the Global Fund and partners in Asia and Western Africa.⁵⁶

4.6 The 10 proposed indicators integrated in the Framework are high-level, outcome indicators that focus on assessing the performance at country level of the partnership between the Global Fund and other multilateral institutions. Most of the proposed indicators are existing indicators already in use for reporting by the Global Fund Secretariat (e.g. aid effectiveness; success rates of requests for funding). The remaining indicators utilize data already collected by the Global Fund and partners *but not necessarily reported on* (e.g. National Strategy assessments, disbursement rates). The use of existing indicators and data collection are in line with the light approach and do not require additional monitoring and evaluation from our PRs or LFAs. It should also be noted that while the Partnership indicators are focused on outcomes, they do draw on data collected for process and output level indicators included in the new CCM performance framework developed for use with CCM funding. Thus the partnership framework captures important country level partnership activities through the CCM, including activities in program oversight, engagement of civil society and the private sector, and alignment of processes and structures. The proposed indicators are included in the draft Partnership Performance Framework in Annex 1.

4.7 As a first step, a baseline will be established (as the Global Fund is using existing indicators with available data). Then, on an annual basis, the Global Fund, under the coordination of the Partnership Unit and the partner organisation, will provide the results for the indicators. The partnership will be periodically reviewed.

⁵³ These areas include: (1) Strategic analysis and policy advice; (2) Capacity building; (3) Joint resource mobilization; (4) Governance; (5) Aid Effectiveness; (6) Systems Strengthening; (7) Communication and Advocacy.

⁵⁴ SDAs are broadly categorized in MoUs under Inclusive leadership and ownership; Technical Support; Aid Effectiveness; Joint resource mobilization; Advocacy; Strategic Analysis and Policy Advice; and Communications and Information Sharing. Six Themes in the Partnership Strategy are Governance, representation and oversight; Technical assistance; Harmonization and alignment; Resource mobilization; Policy and advocacy; and Communication and information sharing.

⁵⁵ Key, strategic areas and objectives in the Partnership Performance Framework are included in Annex 1.

⁵⁶ Operational Plans for support to countries with GF grants have been completed by UNAIDS in Asia and the Pacific and West & Central Africa. Operational Plans for support to countries with GF grants have been completed by WHO through three regional offices: WPRO, SEARO and EMRO.

4.8 The Partnership Performance Framework can be viewed as a tool to assess for Global Fund partnerships and document partner engagement. The targets incorporated in the Framework will be linked to selected countries where partnerships will be operationalized and monitored. By comparing the results with targets, it will be possible to highlight areas of work and collaboration that require further attention. In turn, this review will trigger further analysis on the impact the Global Fund engagement with multilateral partners has on the grant-life cycle at country level.⁵⁷

4.9 The results of the review using the Partnership Performance Framework will provide a baseline for substantive and structured interactions with multilateral partners wherein a roadmap to overcome the identified obstacles will be agreed upon.

⁵⁷ Partner operation plans and any other data collected at lower level (input-process-output) will serve as data sources for this analysis.

Annex 1: INDICATORS FOR SUCCESS AND MONITORING

Service Delivery Areas (SDAs) for Multilateral Partners

Service Delivery Area ⁵⁸	Objective
1. Strategic Analysis and Policy Advice	To provide technical support and capacity building support to countries to develop national strategies that respond to epidemiological assessments.
2. Capacity building/Capacity development	To build capacity in countries for continuous access to funding that meet funding needs within national strategies.
3. Joint resource mobilization	To coordinate efforts between the Global Fund and partners to mobilize resources at the global and country level to support county-level implementation
4. Governance	To support governance structures to improve oversight of grant implementation through a representative structure
5. Aid Effectiveness	To improve GF aid effectiveness with partners' implementation structures and supporting program-based approaches.
6. Systems Strengthening	To support countries in the assessment of Health Systems Strengthening (Finance, Procurement, Human Resources and Monitoring & Evaluation) and Community Systems Strengthening and to plan and budget for support based on assessments.
7. Communication and Advocacy	To improve communications between partners including systematic information sharing

⁵⁸ Technical Assistance has been integrated throughout each SDA. Monitoring and Evaluation is included within Systems Strengthening. These Service delivery areas common to the revised MoU's signed by the Global Fund and UNAIDS, Stop TB partnership and Roll Back Malaria.

Partnership Performance Indicators linked to SDAs

No	Indicator ⁵⁹	Responsible	SDA 1	SDA 2	SDA 3	SDA 4	SDA 5	SDA 6	SDA 7
1	% of countries with agreed national health/disease strategies that include assessments of key HSS elements (procurement, human resources, finance, M&E), gender and vulnerable populations	GF	x						
2	% of countries with costed TA Plans developed in coordination with partners	GF		x	x				
3	% of successful requests for funding to the GF	GF	x	x	x				
4	Ratio of successful peer reviewed proposals against all successful proposals (round based)	Partners	x	x	x				
5	% of GF grant ⁶⁰ whose grant ratings have improved or maintained excellence compared to last year	GF		x	x	x	x	x	
6	% of CCMs that have implemented (in an inclusive manner) at least 50% of planned activities with documented participation of entire CCM ⁶¹	GF				x			
7	GF disbursement rate during the last year	GF					x	x	
8	% of grants aligned to national M&E system	GF					x	x	
9	Proportion of grants that include distinct CSS and HSS elements	GF						x	
10	% of countries undertaking joint annual reviews and publishing the reviews	Partners							x

Note: The Partnership Performance Indicators provide a diagnostic tool to assess the collective accountability of all partners and assess the effectiveness of the partnership. Measures on outcome indicators will lead to further analysis of process and output indicators linked through CCM Funding model and operations-related indicators.

⁵⁹ As the issue of Technical Assistance has been integrated throughout each SDA, the indicators chosen will provide data on more than one SDA

⁶⁰ In targeted countries

⁶¹ CCM Governance Indicator

Annex 2: THE PARTNERSHIP ENVIRONMENT

Broadly, the existing partnerships can be categorized as operational, technical, enabling or strategic, with each partner falling into one or more of these groupings. But many partnerships defy simple categorization and in the history of the unique Global Fund model, many partners fall into more than one category, outlined below. Some partnerships have come into existence out of policy debates. For example, with technical support and facilitation provided by WHO, the Global Fund, GAVI and the World Bank are engaged in multilateral consultations on harmonizing Health Systems Strengthening (HSS) strategies and funding frameworks, reflecting a major global level partnership effort. The leadership of these four partners creates a strong impetus for international health agencies to collaborate on converging strategic and technical approaches to HSS for more effective collective action and better joint outcomes.

- a. *Operational Partnerships* - Operational partnerships may be generated at the global level, but these partnerships are directly related to in-country activities. They are not limited to formal agreements outlining specific operational issues linked to conditions. Operational partnerships could also involve fee-paying activities such as those with the Local Fund Agents.
- b. *Technical Partnerships* - Technical partnerships developed at the global level are often applied locally by partners who have signed Memoranda of Understanding (MoU) with the Global Fund (ie. UNAIDS, Stop TB Partnership and Roll Back Malaria). Technical partnerships also function without formal MoUs, such as with the World Health Organization, the World Bank and many civil society organizations. Technical partners offer expertise that complements the financial capacity of the Global Fund and is of great value to its core processes.
- c. *Enabling Partnerships* - Enabling partnerships create a conducive environment for Global Fund activities whether aimed at increasing financial resources, creating the right political environment for sound programming (e.g. advocacy on human rights issues), or building a strong constituency in implementing countries. Partners have been critical in providing capacity development for stigmatized and vulnerable communities, enabling them to operate more effectively within CCMs and as implementers.
- d. *Strategic Partnerships* - These partnerships are designed to further the strategic aims and positioning of the Global Fund (e.g. the involvement with the H8⁶²).

⁶² The Health Eight or "H8" refers to leaders of the eight global international health agencies: WHO, World Bank, GAVI, UNICEF, UNFPA, UNAIDS, The Global Fund, and the Bill and Melinda Gates Foundation. The leaders meet biannually to discuss the challenges to scaling up health services and improving health-related MDG outcomes.

Annex 3: GOVERNANCE AND OVERSIGHT

A few key issues related to Governance and Oversight are listed below. They are indicative of the kinds of issues that will be elaborated upon and help inform the development an implementation plan for the Partnership Strategy. The activities and areas listed below are by no means exhaustive.

Country Level

In order to ensure more **meaningful representation** on CCMs, the Global Fund will take a number of actions to support processes for participation at country level, including:

- Reviewing and updating proposal guidelines to ensure that country's inclusion of vulnerable populations in CCMs is understood and adopted;
- Promoting the guidelines concerning inclusion of vulnerable populations in CCMs and developing enforcement mechanisms;
- Ensuring that CSOs are aware of the availability of funding to support their participation on the CCMs;
- Supporting international networks to build capacity of civil society representatives on the CCM; and
- Developing an accountability structure to measure the extent to which civil society representatives on a CCM are meeting their responsibilities⁶³
- CCMs must have their own website so that CCM discussions and announcements are available to all stakeholders.

On **grant oversight**, the Global Fund, with the support of partners will:

- a. provide increased resources for CCMs to perform their governance and oversight functions in a better planned manner, and with measurable results (through the CCM funding policy above);
- b. review CCM guidelines to clarify the oversight role of CCMs, including the roles of the different partner constituencies represented in the CCM membership;
- c. improve the quality of support provided to CCMs on oversight by better understanding CCM capacities and performance, and in turn developing evidence-informed strategies for their technical assistance;
- d. Expand and strengthening channels of communication with CCMs.

Developing innovative oversight tools could include, putting in place a CCM governance manual and oversight plan; establishing a CCM oversight committee; including necessary activities and the budget for oversight in the CCM annual budget; requiring CCMs to post their oversight and field verification reports on respective webs sites (to this end all CCMs must have their own website so that CCM discussions, oversight activities, and announcements are available to all stakeholders).

⁶³ Often civil society representatives do not report back to their constituencies on activities undertaken as a representative on the CCM - either because they do not have the funding or structure to do so, or because they do not fully understand their role and responsibility as a CCM member. Carrying out an open, clear and transparent selection processes is also an issue that needs attention.

Annex 4: TECHNICAL ASSISTANCE

A few key issues related to Technical Assistance are listed below. They are indicative of the kinds of issues that will be elaborated upon and help inform the development an implementation plan for the Partnership Strategy. The activities and areas listed below are by no means exhaustive.

The Global Fund's revised, formal agreements with key technical partners (such as UNAIDS, Roll Back Malaria and Stop TB) and other strategic multilateral agencies clarifying roles and responsibilities of each partner will ensure better harmonization of partner support at country level. Partnerships with the private sector to provide technical and management support will also be sought. The Global Fund will also continue to engage with bilateral partners already providing technical support and seek to engage additional technical support from other bilateral partners. Specific agreements developed with partners will be made operational at country level by:

- a. Supporting national partners with provisions of evidence-based approaches for the development of technically sound proposals, including gender analysis and the assurance of programming sensitive to the needs of women and girls, men and boys;
- b. Enhancing the capacity of CCMs to develop strategic and well thought-out technical assistance plans and reflecting all activities and necessary costs in work plans and the budgets;
- c. Facilitating the involvement of private sector organisations to budget for technical assistance in their core competencies as a co-financing initiative and for health systems strengthening;
- d. Planning and budgeting for program technical assistance during proposal development;
- e. Including related Health Systems Strengthening activities in national strategies and subsequent requests for funding to the Global Fund through proposals and future funding architecture avenues;
- f. Ensuring both principle recipient (PR) and sub-recipient (SR) technical assistance plans are in place.

Annex 5: HARMONIZATION AND ALIGNMENT

A few key issues related to Harmonization and Alignment are listed below. They are indicative of the kinds of issues that will be elaborated upon and help inform the development an implementation plan for the Partnership Strategy. The activities and areas listed below are by no means exhaustive.

Country Level

The Global Fund is rolling out three policies in close cooperation with bilateral and multilateral partners as well as national governments:

- a. Coordination of salaries and compensation for program staff: This will require bilateral and multilateral donors and governments to discuss collectively in country the importance of a coordinated approach, and for country technical partners to facilitate the development of salary scales that are reasonable to the country context;
- b. Alignment to country cycles and systems: This policy aligns Global Fund grant cycles to those used in-country, particularly for national Principal Recipients which will involve capacity development of national institutions to improve the quality of country systems with support from technical partners;
- c. Improved in-country financial reporting and transparency: This involves improved communication between the Global Fund, health ministries and national planning authorities, with a view to increasing the predictability and transparency of finances.

Partners can provide a key contribution to harmonization and alignment of Global Fund programs at the application stage. The more the proposal derives from an approach that is integrated in the national disease strategy and its national implementation structures the more likely will the grant implementation also be aligned and harmonized.

Annex 6: RESOURCE MOBILISATION

A few key issues related to Resource Mobilisation are listed below. They are indicative of the kinds of issues that will be elaborated upon and help inform the development an implementation plan for the Partnership Strategy. The activities and areas listed below are by no means exhaustive.

Resource mobilization for the Global Fund has always benefited from strong partner engagement and commitment particularly in the current financial climate and the following will be needed:

- a. Board members and senior staff need to understand their fundamental roles in the various types of partnership, this is particularly important for philanthropic giving and donors with large contributions where contacts need to be at the most senior level;
- b. Partners such as the 'Friends of the Fund' organizations, civil society and other advocates need to stay closely aligned with Global Fund messaging and data to ensure coherent information reaches the donors;
- c. Government donors need to be open to facilitating relationships with key private sector partners where they can be helpful, and vice versa;
- d. Donors represented on the Board need to remain flexible and open to change as regards Board representation to ensure new donors can be accommodated appropriately as they emerge;
- e. The Global Fund will ensure that resource mobilization is well coordinated to avoid duplication and confusion among key donor groups. Given the large number of partnerships and actors involved, a strategic approach is needed to ensure that messages are clear and consistent and actions taken under different partnerships are mutually reinforcing.

In order to ensure that messages on resource mobilization are coherent, consistent and aligned, the Global Fund will:

- a. Work with its partners to ensure coherent messages for donors, especially on roles and responsibilities, and to overcome traditional competition among institutions that have common overall interests and obtain funds from the same sources;
- b. Ensure that Board members and senior staff understand their fundamental roles in the various types of partnership, which is particularly important for philanthropic giving and donors with large contributions where contacts need to be at the most senior level;
- c. Work to align its messaging closely with that of partners such as the 'Friends' organizations, civil society and other advocates to ensure hat coherent information reaches the donors;

- d. Reach out to new sovereign funding sources but above all concentrate on nurturing current ones. In safeguarding these relationships the broader engagement of many bilateral donors in country activities and other Global Fund processes will build stronger ties and secure longer term commitments;
- e. Nurture existing private sector relationships, especially those that offer opportunities for co-investment and service contributions (e.g. such as that agreed with Standard Bank) to increase cooperation in this area and continue to strengthen and engage consumer-based initiatives such as Product (RED);
- f. Ensure the Global Fund is well-placed to benefit from smaller, targeted fundraising activities such as Idol Gives Back, and the malaria initiative with the Faith-based community in the US, and areas where the UNF relationship is essential;
- g. Develop new partnerships, for example with high net worth individuals, to ensure a strategic approach as regards whom to target;
- h. Engage new partners and access funds that are not part of ODA budgets such as through the Debt2Health initiative.

Annex 7: POLICY AND ADVOCACY

A few key issues related to Policy and Advocacy are listed below. They are indicative of the kinds of issues that will be elaborated upon and help inform the development an implementation plan for the Partnership Strategy. The activities and areas listed below are by no means exhaustive.

The introduction of Dual-Track Financing is one of the most important policy developments at the Global Fund. While the intention of Dual Track Financing is to support more civil society and private sector PRs, thus far, grants have often been implemented by large international organizations. Often the exclusion of local NGOs as PRs is due to the lack of capacity and experience and here partners have an important role to play in supporting and developing the capacities of NGOs. Some steps to be taken in this area include:

- a. Implementing plans whereby large international NGOs mentor local NGOs to become PR and to build in a transition strategy;
- b. Providing guidance to local SR interested in becoming PRs on the steps to be taken and competencies they need to develop to ensure successful transition;
- c. Working with the large implementing NGOs and international partners to develop a long term strategy to increase the number of indigenous NGO PRs; and
- d. Discussing and working with technical partners and bilateral donors to facilitate and ensure that the technical assistance needs of civil society are fully funded.

Globally, partners should be involved in advocacy on AIDS, TB and malaria, with a focus on:

- a. Improving coordination between National Disease Committees, UN Theme Groups as well as other technical working groups and CCMS;
- b. Recommending changes to policies and operations that will improve the effectiveness of their programming;
- c. Performing the in-country watchdog role;
- d. Ensuring that the rights of vulnerable populations are observed and supported; and
- e. Identifying the needs of local, regional and national networks and collaborating with technical partners, bilateral agencies and international NGOs to fund their work.

Annex 8: COMMUNICATIONS AND INFORMATION SHARING

A few key issues related to Communications and Information Sharing are listed below. They are indicative of the kinds of issues that will be elaborated upon and help inform the development an implementation plan for the Partnership Strategy. The activities and areas listed below are by no means exhaustive.

The following outlines what is being proposed for FPMs in communicating with country partners.

Meetings with the CCM: With each trip to the country, the FPM will either attend a full CCM meeting when such a meeting is organized or meet more informally with CCM members outside of a CCM meeting. The purpose of such meetings includes: (1) Briefing the CCM on new developments at the Global Fund; (2) Updating the CCM on the country portfolio situation and performance; (3) Discussing structural and grant-management issues [e.g. communication between the LFA and the CCM, choice of PRs, grant-performance, funding decisions, funding outlook at country-level] (4) Addressing CCM questions, in particular around decisions made in relation to the country portfolio; (5) Discussing assistance needs for grant implementation and sources of technical support.

Meeting with UN partners: In many countries, the UN serves as a host to the FPM during field missions, providing not only logistical support (car, working station at the UNAIDS/WHO Office) but more importantly information about political and organizational dynamics at work in and around Global Fund grants. FPMs will take advantage of missions to the country to meet and discuss with UN representatives and coordination entities such as the UN Theme Group on HIV and meetings organized by the UN Resident Coordinator. The FPM will attend technical meetings on issues of relevance to grants (e.g. salary-scales, alignment, etc). Such meetings will allow the Global Fund's in-country partners—and in particular WHO, UNAIDS, UNDP, UNICEF, and the World Bank—to get a better understanding of the evolution of the portfolio and the role that they can play to support performance and scale-up.

Meeting with CSOs and Private Sector: There are currently two tracks for Secretariat discussion with in-country partners: (1) through FPMs and (2) through Civil Society and Private Sector Officers. FPMs will continue to share information with partners through CCMs and with SRs and SSRs on a regular basis. The Secretariat has recruited Civil Society Officers and Private Sector Officers who will spend considerable time strengthening the engagement and role of civil society and private sector at country level.

Debriefing meetings: FPMs strive to hold debriefing meetings with in-country partners at the end of each one of their missions to take stock of issues and propose resolutions, to share the likely way in which points discussed during the visit will be followed up on, to answer questions and to ensure that the way forward is discussed with all partners.

From Global Fund Secretariat Office: In practice phone calls and other communication with country partners happen mostly around specific issues related to grant performance, documentation requirements, and more generally around needs for in-country support to implementers). Outside of trips and meetings, FPMs in Geneva will interact on a weekly or monthly basis with CCMs on key issues to be addressed and on day-to-day clarifications

required by the Global Fund or by the CCM (e.g. possibilities of grant reprogramming, disbursement decisions, delays). FPMs are also committed to being in regular contact, at a minimum on a monthly basis, with in-country UNAIDS and WHO counterparts.

Information sharing with partners: FPMs have a responsibility to partners in terms of information sharing on grant performance (as viewed from the Global Fund's perspective) and its implications, but also in relation to clarifying the Global Fund's rules and procedures to implementers and partners. The revision and publication of the Global Fund's Operations Manual in the first half of 2009 has helped FPMs in conveying Global Fund processes in a clear and consistent way. The upcoming Users' Manual, which will be focusing on the role of partners and implementers in dealing with Global Fund grants, will further help FPMs play this role to its full and will be distributed online and through USB keys to all interested partners.

The Global Fund is also developing a framework for communicating with partners other than through FPMs which will be included as part of a broader strategy on improving communications with implementers and other partners. Some activities under discussion, which will be further outlined in the Partnership Strategy implementation plan, include:

- Creating a Global Fund Support Center online using a variety of media (e.g. online, phone) to obtain information quickly and easily on grant-related issues;
- Partnering with key technical partners to disseminate Global Fund messages through existing publications or in-country information centers; and
- Distributing offline access of strategic Global Fund information, such as the User's Manual and other grant-related documents.

LIST OF ABBREVIATIONS

ADB	Asian Development Bank
AfDB	African Development Bank
ASEAN	Association of Southeast Asian Nations
AU	African Union
BADEA	Arab Bank for Economic Development in Africa
BSEC	Black Sea Economic Cooperation
CAEU	Council of Arab Economic Unity
CARICOM/CARIFORUM	Caribbean Community and Common Market
CCM	Country Coordinating Mechanism
COATs	Coordination of AIDS Technical Support
CS	Civil Society
CSS	Community Systems Strengthening
DFID	UK Department for International Development
EARS	Early Alert and Response Systems
EMRO	WHO Regional Office for the Eastern Mediterranean
FBO	Faith-based Organization
FLW	First Learning Wave (National Strategy Applications)
FPM	Fund Portfolio Manager
GAVI	Global Alliance for Vaccines and Immunization
GIST	Global Implementation Support Team
GTZ	German Technical Cooperation Agency
HHA	Harmonization for Health in Africa
HSS	Health Systems Strengthening
IDB	Islamic Development Bank
IDU	Injecting Drug Use
IHP+	International Health Partnership Plus
LFA	Local Fund Agent
MDGs	Millennium Development Goals
M&E	Monitoring & Evaluation
MOU	Memorandum of Understanding
MSM	Men Who Have Sex with Men
NEPAD	New Partnership for Africa's Development
NGO	Non-governmental Organization
NSA	National Strategy Application
ODA	Official Development Assistance
OECD	Organization for Economic Cooperation and Development
OIC	Organization of the Islamic Conference
PEPFAR	US President's Emergency Plan for AIDS Relief
PR	Principal Recipient
PS	Private Sector
PSM	Procurement and Supply Management
REC	Regional Economic Community
SDA	Service Delivery Area
SEARO	WHO Regional Office for South-East Asia
SR	Sub-recipient
SSR	Sub-sub-recipient
TA	Technical assistance

TB	Tuberculosis
TBTEAM	Technical Assistance Mechanism of the Stop TB Partnership
TRP	Technical Review Panel
TSF	Technical Support Facility
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNDP	United Nations Development Programme
UNICEF	United Nations Children's Fund
UNF	United Nations Foundation
UNFPA	United Nations Populations Fund
UNGA	United Nations General Assembly
UNITAID	International Drug Purchase Facility - UNITAID
WHO	World Health Organization
WPRO	WHO Regional Office for the Western Pacific
5YE	Five Year Evaluation of the Global Fund to Fight AIDS, Tuberculosis and Malaria



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To Fight AIDS, Tuberculosis and Malaria

Twentieth Board Meeting
Addis Ababa, Ethiopia 9-11 November 2009

GF/B20/4
Attachment 3

Memorandum of Understanding

Between

*The Roll Back Malaria Partnership and The Global Fund to Fight AIDS,
Tuberculosis and Malaria regarding their collaboration*

Background

The Roll Back Malaria ("RBM") Partnership is a global health initiative, composed of hundreds of public sector and private sector partners, united in efforts to scale up malaria interventions at country level and to reach populations not normally covered by malaria programs. It acts primarily as a convening and coordinating mechanism and is the leading global forum for mobilizing action and resources in the worldwide fight against malaria.¹ The RBM Partnership aims to achieve its mission by the collaborative efforts of its members and is not a separate legal entity. WHO provides hosting arrangements for the Partnership Secretariat and administrative and fiduciary support pursuant to its mandate as the global coordinating agency for public health.

The Global Fund is a unique global public/private partnership dedicated to attracting and disbursing additional resources to prevent and treat HIV/AIDS, tuberculosis and malaria. This partnership between governments, civil society, the private sector and affected communities represents a new approach to international health financing. The Global Fund works in close collaboration with other bilateral and multilateral organizations to supplement existing efforts dealing with the three diseases

Each year, malaria causes nearly one million deaths, mostly among children under 5 years of age, and an additional 189 to 327 million clinical cases, the majority of which occur in the world's poorest countries. Almost half the world's population, that is 3.3 billion people, is at risk of malaria. Weaknesses in health systems, growing drug and insecticide resistance, climate change and war are serious threats to the achievement of international malaria goals.

¹ Its constituencies are as follows: Malaria Endemic Countries; Multilateral and Development Partners; OECD Donor Countries; Foundations; NGOs; Private Sector; Research and Academia. The Global Fund and UNITAID are ex officio non voting members of the RBM Board. The UN Secretary General's Special Envoy on Malaria is also a member of the Board.

Through this Memorandum of Understanding, The Global Fund and the RBM Partnership (see definition, *infra*, p. 2)) set forth their mutual intention to collaborate to strengthen the global response to malaria and to accelerate progress towards universal coverage of interventions for prevention and treatment of malaria by 2010 and the achievement of the malaria-related Millennium Development Goals (MDGs) by 2015. In recognition of their complementary strengths and shared commitment, the RBM Partnership and The Global Fund commit to working together on overarching agreed objectives and on clear terms for the review and management of their collaboration. Furthermore, the The Global Fund and the RBM Partnership will work together to ensure equitable access to malaria prevention and treatment.

This Memorandum of Understanding provides a framework for collaboration and allows for the development of more detailed plans that enhances the roles of both The Global Fund and the RBM partners in strengthening support to regional and national malaria programmes. This Memorandum of Understanding articulates objectives for cooperation in core activity areas, drawing on the complementary functions of the RBM Partnership and The Global Fund.

In this Memorandum of Understanding, the term “the RBM Partnership” refers to its partners individually or jointly (recognizing their respective mandates and comparative advantages), as well as their convening and coordinating mechanisms and structures. These include: the RBM Board and its Subcommittees; RBM Working Groups and Task Forces; the RBM Secretariat; and the RBM Sub-Regional Networks, as the case may be.² The engagement of RBM partners with The Global Fund, however, is not limited to the provisions of the present Memorandum of Understanding and not all individual RBM partners are necessarily involved in every RBM Partnership activity covered by this MOU. The RBM Secretariat and relevant partners will develop in collaboration with The Global Fund follow-up operational arrangements under the framework of this Memorandum of Understanding.

For the purpose of this MOU, partner means a member of the RBM Board or Board constituency, with the exception of the Global Fund in its capacity as *ex officio* member of the Board.

Overarching Objectives

The RBM Partnership and The Global Fund will commit to working together in a collaborative partnership based on the following objectives:

To achieve universal coverage of malaria prevention and treatment interventions by 2010

The Global Fund, as a financial mechanism, provides a large portion of the resources to malaria-endemic countries to achieve universal coverage. The RBM Partnership works to support countries in their efforts to move rapidly towards universal coverage and the malaria-related Millennium Development Goals.

² Since this MOU is between the RBM Partnership and the Global Fund, for purposes of this MOU the Global Fund is not included in the references herein to the RBM Partnership.

Empowering inclusive national leadership and ownership

The Global Fund supports country ownership and leadership through a performance-based funding process that responds to country-proposals, based firmly on country needs and priorities. The RBM Partnership works to support countries as they develop, implement and monitor evidence-based strategies in accordance with WHO recommendations and guidelines and to support national efforts to make the funding from all partners work³.

Alignment and Harmonization

The RBM Partnership and The Global Fund strive to harmonize support to national programs and align financial and monitoring and evaluation processes to increase aid-effectiveness. The importance of harmonization and alignment in increasing aid-effectiveness have been highlighted by the OECD/DAC, and agreed to in the Paris Declaration⁴ then in the Accra Agenda for Action⁵. In addition, the RBM Partnership will work towards the operationalization of the Three Ones Principle⁶ so as to ensure maximum impact of Global Fund support. By moving towards financing national plans, consolidating grants, defining shared monitoring indicators with major partners (as guided by WHO's technical normative framework), The Global Fund and the RBM Partnership will work together to link the principles of performance-based funding, multi-stakeholder participation and national ownership with harmonization and alignment. Towards the same end, the RBM Partnership and The Global Fund will work towards establishing common, consolidated reporting requirements (that are synchronized in their timing, frequency and comprehensiveness, and result in one comprehensive report based on shared information systems). Further, The Global Fund and the RBM Partnership will work together on assuring equitable access to malaria prevention and treatment for all those who need it, in particular women and girls.

Advocacy

The Global Fund and the RBM Partnership recognize the specific contributions of each in addressing the common challenge of malaria, and support, in particular, their respective efforts to raise resources for this common goal. The RBM Partnership collectively guides and supports global advocacy efforts to ensure high-level political support for a comprehensive response to malaria. It works closely with civil society, which is represented within the RBM Partnership, non-governmental organizations and other constituencies. The Global Fund, in fulfilling its mandate to raise significant additional resources to mitigate the impact of malaria coordinates closely with the RBM Partnership and its partners on advocacy efforts. The Global Fund and the RBM

³ In addition, the World Bank and the U.S. President's Malaria Initiative are major funders of malaria programmes in endemic countries.

⁴ The Paris Declaration, endorsed on 2 March 2005, is an international agreement that over one hundred Ministers, Heads of Agencies and other Senior Officials signed: the Declaration commits countries and organizations to increase efforts to harmonize, align and manage foreign aid with a set of monitorable actions and indicators.

⁵ The Accra Agenda for Action is a statement adopted by Ministers of developing and donor countries responsible for promoting development and Heads of multilateral and bilateral development institutions adopted on 4 September 2008 in Accra, Ghana. It reaffirms and strengthens efforts to improve and measure aid effectiveness.

⁶ The Three Ones include: One agreed malaria coordinating mechanism. One strategic plan for malaria. One monitoring and evaluation system.

Partnership complement each other in reaching decision-makers and key influencers around the world and achieving maximum synergies in advocacy and resource mobilization.

Partnerships

Promoting partnership arrangements and inclusiveness has been a defining feature of both the RBM Partnership and The Global Fund. This approach has spanned the public and private sectors and civil society. The Global Fund is a financing mechanism, without a country presence of its own, which by its very nature relies on support from technical and other partners for effective in-country operations. The RBM Partnership, whose technical and non-technical partners operate in many countries and across many sectors, provides a network of support structures that can facilitate the effective and efficient use of Global Fund resources. In short, the RBM Partnership helps countries make the resources of The Global Fund work.

Core Activity Areas

1. Support to Global Fund Processes

- 1.1 The RBM Partnership and The Global Fund will work to keep malaria a priority on the global health agenda, including in the UN and among the G8 and the G20, as well as national and regional agendas. They will cooperate to mobilize various constituencies and to recognize the unique contribution of each. Both will advocate individually or jointly to make sure that sufficient resources are mobilized for a comprehensive and sustainable response to malaria, that includes the resources to address the cost of technical and implementation support and harmonization, as well as the direct financing of national and regional programmes.
- 1.2 The Global Fund is committed to funding programmes that are driven by scientific evidence, in particular the norms and standards articulated by WHO. The RBM Partnership and The Global Fund will support development and funding of programmes that cover the needs of at-risk populations, including the poor, populations of humanitarian concern, people living with HIV, children and pregnant women, and including cross-border programmes.
- 1.3 The Global Fund will solicit suggestions from the broad RBM Partnership member network to identify members for the Fund's Technical Review Panel (TRP). The Global Fund will solicit suggestions, in particular from WHO, with respect to the content of and participation in comprehensive technical briefings. The Global Fund and the RBM Partnership recognize that the TRP is an independent body and that the technical review process is subject to policies and procedures specified by The Global Fund.
- 1.4 The RBM Partnership and The Global Fund are committed to work on generating high-quality proposals from as many affected countries as possible, and to work on the implementation and monitoring of existing grants. Additionally, the RBM Partnership and The Global Fund will agree to establish procedures for

- accelerating malaria grant signature (reducing the current average number of days), improving disbursement and program performance, including specific timelines for signature. They will endeavor to share relevant information and collaborate to prevent and resolve bottlenecks to ensure that funded programmes are implemented effectively and satisfy applicable standards. RBM partners and the RBM Secretariat⁷, will provide support to multi-country programmes funded by The Global Fund.
- 1.5 The Global Fund and the RBM Partnership will endeavour to exchange to the fullest extent possible, and in a timely manner, all strategic information that is relevant to the achievement of their mutual objectives (e.g. information sharing between The Global Fund's Portfolio Managers and the Harmonization Working Group of the RBM Partnership to identify/address bottlenecks and to improve performance of Global Fund financed programmes).
 - 1.6 The RBM Partnership and The Global Fund will support multi-stakeholder membership of Country Coordinating Mechanisms (CCMs) so as to promote ownership by a broad range of national stakeholders. The Global Fund Secretariat will provide information to assist in this regard. Among the stakeholders should be representatives of National Malaria Control Programmes, civil society organizations (CSOs) working on malaria, malaria experts, and others capable of ensuring evidence-based approaches in the design and implementation of different types of malaria programmes.
 - 1.7 The RBM Partnership, and The Global Fund will support CCMs to coordinate and integrate supported programmes with National Malaria Control Programmes.
 - 1.8 The RBM Partnership will support The Global Fund and its in-country partners by sharing technical information, including epidemiological and other data, to help in the development of Global Fund policy priorities including information relevant for assessing country eligibility for Global Fund support; in this regard, The Global Fund and the RBM Partnership, led by its technical partners, will harmonize, to the greatest extent possible, data sharing.
 - 1.9 The Global Fund, as an ex-officio, non-voting member of the RBM Partnership Board, will be invited to send a representative to attend all meetings of the RBM Partnership Board to participate in all discussions of The Global Fund's interest and concern. RBM, as a founding member of the Partners Constituency of The Global Fund Board, will support the consideration by The Global Fund Board of issues of relevance to the RBM Partnership, thereby helping to build greater consensus among stakeholders working to achieve the Millennium Development Goal of combating HIV/AIDS, malaria and other diseases.
 - 1.10 In order to further strengthen the work of The Global Fund and the RBM Partnership, and to coordinate support at regional and country level, The Global Fund and the RBM Partnership will coordinate and, where possible, hold

⁷ The RBM Secretariat's Sub-Regional Focal Points assist with catalyzing and coordinating partners.

their meetings at regional and country level at times that would facilitate the participation of each in the other's meetings.

- 1.11 In order to operationalize their closer and more functional collaboration, The Global Fund and RBM Partnership, facilitated by their Secretariats, will establish regular direct communications (e.g. teleconferences). The Global Fund and the RBM Partnership will share an updated list of relevant focal points, by region and, if possible, country, to facilitate more frequent and effective communication at the operational level.

2. Implementation Support

- 2.1 The Global Fund and the RBM, Partnership will work together to build capacity of national stakeholders and in particular, the National Malaria Control Programmes, the non-governmental, civil society and community sectors; this will include strengthening their ability to participate more fully in CCMs.
- 2.2 The RBM Partnership and The Global Fund encourage national ownership of program implementation and agree that country programs are ultimately responsible for identifying, coordinating and integrating resources for technical and implementation support. To this effect, the RBM Partnership will work with country programs to help ensure that adequate plans and technical support resources are built into proposals for Global Fund funding and programs already supported by Global Fund funding, and that such resources are used effectively. The Global Fund will encourage, as appropriate, the use of resources to finance necessary technical and implementation support.
- 2.3 The RBM Partnership's engagement at global, regional and country level will support national stakeholders throughout The Global Fund grant life cycle; in particular by providing constructive reviews and comments to the Principal Recipient (PR) and CCM on grant performance for results-based sustained accountability. Such support, aimed among other things at maximizing the quality of grant proposals and overcoming implementation bottlenecks, requires information not only on performance during previous grant cycles, but also timely data on implementation progress, bottlenecks and gaps. The Global Fund and the RBM Partnership will endeavour to share progress report data and other relevant information as soon as it is available.
- 2.4 The Global Fund and the RBM Partnership, will work with country programs to identify early technical and implementation support needs at the country and regional level (recognizing programmatic and financial gaps), sharing information through joint country, regional and global meetings.
- 2.5 The Global Fund and the RBM Partnership recognize the unique role and contribution of RBM partners in technical and implementation support by facilitating the provision of high quality technical assistance, supporting countries to meet applicable norms and standards established by WHO, by

- providing operational tools, and ensuring that technical and implementation assistance is effective.
- 2.6 RBM and The Global Fund recognize the importance of health systems strengthening and building the capacity in operational research for achieving the objective of universal coverage and commit to jointly fostering better integration and coordination between national health systems and malaria programs.
- 2.7 The Global Fund and the RBM Partnership recognize the importance of procurement and supply chain management (PSM) and the respective contributions of each in these areas. A large portion of Global Fund grant budgets is used to procure commodities. The RBM Partnership, through its partners, supports in-country supply chain management and procurement activities, such as forecasting, procurement guidelines for quality control/quality assurance, and pooled procurement. Both The Global Fund and the RBM Partnership will work to ensure that PSM processes are strengthened and sufficiently funded to enable countries to achieve the 2010 and 2015 malaria targets and universal coverage with malaria interventions. Particular emphasis will be placed by the RBM Partnership on supporting the Global Fund's Voluntary Pooled Procurement mechanism, and country engagement in it, in light of the high volume of commodities required to achieve the 2010 targets.
- 2.8 Acknowledging the essential technical support and other resources provided by the RBM Partnership to help make Global Fund-financed programs more effective, The Global Fund and the RBM Partnership agree to explore approaches for the financing of these activities. The Global Fund and RBM Partnership also agree to collaborate in mobilizing resources for the costs required for the continuation of technical support to countries for the design, implementation and monitoring of programs funded by the Global Fund, including initial roll-out, evaluation and subsequent implementation of AMFm. Increased access to ACTs, the objective of the AMFm, represents one component of a comprehensive response to the global problem of malaria.⁸

3. Monitoring and Evaluation

There are two major areas for collaboration for monitoring and evaluation (M&E) within this Memorandum of Understanding: (i) monitoring the implementation and impact of the overall response to malaria, and (ii) monitoring the actual implementation of the MOU.

⁸ Following the publication of a proposal by the Institutes of Medicine of the National Academies, the RBM Partnership developed the technical design of the AMFm and invited the Global Fund to consider hosting and managing the facility. The AMFm is an innovative financing mechanism designed to expand access to affordable artemisinin-based combination therapies (ACTs) for malaria, thereby contributing to saving lives and reducing the use of inappropriate medicines. The AMFm aims to enable countries to increase the provision of affordable ACTs through the public, private and NGO sectors. By increasing access to ACTs and displacing artemisinin monotherapies from the market, the AMFm also seeks to delay resistance to the active pharmaceutical ingredient, artemisinin.

- 3.1 Monitoring the effectiveness of the response:
- 3.1.1 Monitoring implementation of malaria strategies and programmes to ensure that they are effective in reducing the epidemic and its impact is a central focus of the RBM Partnership. Equally, evaluating and reporting the results, effect and impact of the programs it supports are a fundamental component of The Global Fund's model and mandate.
- 3.1.2 At global level, The Global Fund acknowledges the respective responsibilities and expertise of RBM partners in monitoring and evaluation in relation to malaria and will draw on this support in the ongoing development of its own monitoring and evaluation framework. Through participation in the Monitoring and Evaluation Reference Group (MERG)⁹, The Global Fund Secretariat can access this expertise and draw on RBM partners for assistance in implementation of monitoring and evaluation.
- 3.1.3 At the country level, The Global Fund is committed to providing ongoing resources to recipients on the basis of demonstrated needs and positive results. Countries require assistance in meeting the challenges of performance-based financing of programmes. Monitoring and evaluation experts of RBM partners can provide support in establishing and strengthening national monitoring and evaluation systems and contribute to the design of monitoring and evaluation plans. This includes supporting adoption of country indicators that are aligned to international measures, particularly reflecting WHO norms, standards and guidelines and making consistent data available on a regular basis on key national malaria prevention and treatment interventions, while providing data required for decision making and programme management at a local level.
- 3.1.4 In evaluating its own performance, including its overall contributions to global malaria resource flows and the achievement of results in the fight against malaria, The Global Fund will have access to data collated by the RBM Partnership, subject to respective legal requirements, including information on existing country and international resources found in the Joint Malaria Data Warehouse, and the impact of the respective contributions to the overall response. Similarly, the RBM Partnership will have access to data collected by The Global Fund (including process data that are related to grant performance, progress against workplans, etc).
- 3.1.5 Country Coordinating Mechanisms (CCMs) have a central role in overseeing the implementation by the Principal Recipient (PR) of Global Fund supported programs. The RBM Partnership can support CCMs and PRs to fulfill these functions, as part of its overall support for country-driven monitoring and evaluation processes and consistent with its objective of building national capacity to monitor performance and to use this information effectively.

⁹ The Roll Back Malaria Monitoring and Evaluation Reference Group (MERG) was established in 2003 in order to provide support on monitoring and evaluation for malaria at the global, regional and national levels. MERG provides guidance on implementation related to monitoring malaria control activities and has developed a core set of indicators and standard data collection methods to ensure consistency and harmonization in malaria information reported through major national-level household surveys.

- 3.1.6 The RBM Partnership can assist in coordinated and integrated efforts to strengthen M&E systems. Additionally, the RBM Partnership can support The Global Fund and national stakeholders in the monitoring of gender-specific indicators for malaria and also ensure that all indicators and targets (including those that may change during the course of a grant) are in line with national plans.
- 3.1.7 The Global Fund reviews ongoing progress of grant implementation, both centrally and through Local Fund Agents (or “LFAs”), who receive and review reports from PRs. LFAs and the RBM Partnership will provide access to the extent possible to each other's information at country level subject to their respective legal requirements. In order to identify and ensure timely response to implementation bottlenecks, The Global Fund will facilitate, to the extent possible, the RBM Partnership's access to findings of LFA reports, thereby supporting grantees in the implementation and monitoring of programmes.

3.2 Monitoring the implementation of the Memorandum of Understanding

3.2.1 The RBM Partnership, and The Global Fund will develop a monitoring and evaluation framework that will provide an ongoing assessment of the implementation of this MoU. The Framework will focus on assessing adherence to the principles that are laid out in the MoU and will monitor implementation of the defined Partnership Objectives.

3.2.2 Any disagreement with respect to the interpretation or implementation of this MoU should be resolved, in accord with the principle of subsidiarity, at the level of management where the problem occurs, bearing in mind the overarching principles underlying this MoU. Where differences cannot be resolved through consultation between the parties directly affected by the dispute at the relevant level of management, or at that of their supervisors, it shall be referred to the persons occupying the positions of the signatories to this MoU with appropriate consultation with their Boards.

Terms

The collaboration agreements specified in this Memorandum of Understanding will be reviewed regularly and will be supplemented by more detailed work-plan agreements. This Memorandum of Understanding is a living document and The Global Fund and RBM Partnership agree that as the collaboration develops the agreement will strengthen accordingly and provide the basis for future cooperative arrangements. The RBM Partnership and The Global Fund agree to adhere to the principle of mutual accountability and responsibility for the implementation of this Memorandum of Understanding.

The Global Fund and RBM Partnership will communicate and share information in advance of arrangements they make that could have direct implications for or directly

impact on the other party and to make those arrangements in keeping with the provisions of this Memorandum of Understanding.

The Global Fund and RBM Partnership will nominate global coordination focal points, who will serve as the main channels of communication and information in relation to this Memorandum of Understanding.

The RBM Partnership Board has requested the Executive Director of the RBM Partnership to sign this MOU with the Executive Director of The Global Fund.

Effective Period

This Memorandum of Understanding replaces the existing "Memorandum of Understanding between The Global Fund to Fight AIDS, Tuberculosis and Malaria and the Roll Back Malaria Partnership regarding Principles of Collaboration" and will be valid from the date of signature by both parties and will be reviewed on an annual basis, at which time the collaboration framework will be evaluated and revised as appropriate.

Signed:

Awa Marie Coll-Seck
Executive Director
RBM Partnership

Michel Kazatchkine
Executive Director
The Global Fund to Fight AIDS, Tuberculosis
and Malaria

Date: _____

Date: _____



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Twentieth Board Meeting
Addis Ababa, Ethiopia 9-11 November 2009

GF/B20/4
Attachment 4

TRANSLATION AND INTERPRETATION FOR GLOBAL FUND GOVERNANCE PROCESSES (PSC Paper GF/PSC12/10)

OUTLINE:

Following up on PSC discussions at its 11th meeting in March 2009, this paper presents costed proposals for the translation of Global Fund governance-related documents and increased interpretation at governance meetings. Based on the outcome of the discussions at the 12th PSC meeting, relevant decisions will be prepared for consideration by the Board at its Twentieth Meeting in November 2009.

EXECUTIVE SUMMARY:

With regards to diversifying language use for Global Fund governance processes a number of options are presented for PSC consideration:

- i. Translation of executive summaries of committee papers into supplementary languages;
- ii. Translation of committee documentation into supplementary languages;
- iii. Interpretation of committee meetings into supplementary languages; and
- iv. Interpretation of Board pre-meetings into supplementary languages.

For each of these options the associated time and budgetary implications are explored. It is suggested that the Chair and Vice-Chair of the relevant committee / the Board, (in liaison with the Secretariat Focal Point), decide which languages translation and interpretation should be into. It is also suggested that all options should be applied based on a needs assessment of committee / Board members.

PART ONE: BACKGROUND

1.1 At its 11th meeting the PSC considered the use of different languages within the Global Fund governance and oversight structure, namely the Board, its committees, the Partnership Forum and reports issued by the Office of the Inspector General (OIG)¹. In its discussion, the PSC:

- recognized the need to remove barriers for effective participation by all partners in Global Fund governance processes;
- emphasized the necessity of combining guiding principles with a pragmatic approach and operational realities;
- took note of costs and other implications related to increased translation and interpretation services, particularly the fact that the time available for performing work between governance meetings will decrease; and
- recognized the need to address this issue incrementally, giving priority to the committee level.

1.2 The PSC identified a number of areas it regarded as particularly important and requested that costed proposals be presented for consideration at its 12th meeting.

PART TWO: COSTED PROPOSALS

Proposal 1: Translation of executive summaries of committee papers

2.1 At its 11th meeting, the PSC felt that translating executive summaries of committee papers into different languages would be an effective way to respond to the multi-lingual environment within which the Global Fund operates and to facilitate consultation and discussion within constituencies in preparation of committee meetings. Limiting translation to executive summaries only, rather than full papers, would reduce both costs and the time required for the translation process. At present, all PSC papers include an executive summary. FAC and PC papers have traditionally not included executive summaries, but it would be a reasonably simple task for these to be added.

2.2 It is proposed that once the new leadership and membership of the standing committees has been confirmed, committee chairs and members are asked to notify the Secretariat of their translation needs, to allow for appropriate arrangements to be made for the first round of committee meetings in 2010. The intention is that the languages requested via this needs assessment will not be solely restricted to the UN official languages. Costings below for UN languages are therefore indicative. It is suggested that the decision on which languages to translate executive summaries into be taken the Chair and Vice-Chair of a committee, in liaison with the Secretariat Committee Focal Point.

Cost implications

Table One: Costs of translating executive summaries²

	1 supplementary language US\$	2 supplementary languages US\$	All 6 UN languages US\$
Translation of exec summaries	1'183	2'365	5'914
Total per year per committee	2'366	4'732	11'828
Cost for 6 committees 2 x per year (including ad hoc)	14'196	28'392	70'968

¹ GF/PSC11/11, available at <https://www.theglobalfund.org/protected/committees/PSC>.

² For further background costing information see Annex 1, Tables A and B.

Time implications

2.3 The minimum amount of time required to translate and provide Secretariat quality control of a set of executive summaries of papers for one committee is 5 working days.

2.4 Following established practice for the translation of draft Board decision points prior to Board meetings, executive summaries of all papers for the respective meeting should be grouped into one document, the translation of which would be forwarded to committee members once finalized. Full committee papers should continue to be circulated as they become available, as is current practice, and should not be held back from circulation until relevant translations of executive summaries are available.

Proposal 2: Translation of a limited number of key committee documents

2.5 The PSC proposed that papers on particularly key or technical issues be translated into relevant additional languages in their entirety. It is suggested that the decision on which papers to translate and what languages to translate them into is taken by the Chair and Vice-Chair of a committee, in liaison with the Secretariat Committee Focal Point.

Cost implications

Table 2: Costs of translation of one committee paper³

	1 supplementary language US\$	2 supplementary languages US\$	All 6 UN languages US\$
Translation of 1 committee paper	1'042	2'084	5'208

Time implications

2.6 With an average length of a committee paper of 14 pages⁴, the minimum time required for translation and Secretariat quality control will be 7 working days.

2.7 It is proposed that English versions of papers continue to be circulated as they are finalized, with translations to follow once ready.

2.8 At present, the Secretariat does not yet have a team in place to quality control translations. For this reason, such work is carried out by bilingual staff members in addition to their normal duties. Therefore, the capacity to provide quality control of translations is currently limited. Committee chairs will have to keep this capacity issue in mind when deciding to which extent to translate committee papers.

Proposal 3: Interpretation at committee meetings

2.9 Based on the expressed needs of committee members, interpretation into French was introduced for all PSC, PC and FAC meetings. As with the translation of executive summaries it is proposed that when the new leadership and membership of the standing committees has been confirmed, committee chairs and members are asked to notify the Secretariat of their interpretation needs to allow for appropriate arrangements to be made for the first round of committee meetings in 2010. Again, the intention is that the languages requested via this needs assessment will not be solely

³ For further background costing information see Annex 1, Table C.

⁴ Based on an average of the last FAC, PSC and PC meetings documentation.

restricted to the UN official languages. Costings below for UN languages are therefore intended to be indicative. It is suggested that the decision on which languages to interpret committee meetings into be taken the Chair and Vice-Chair of a committee, in liaison with the Secretariat Committee Focal Point.

Cost implications

Table 3: Costs of interpretation at committee meetings⁵

<i>Interpretation US\$</i>	<i>Technical US\$</i>	<i>Room hire US\$⁶ (1 extra day is required for room set-up)</i>	<i>TOTALS</i>
One two-day meeting			
Interpretation provided into <i>one</i> extra language			
9'600 ⁷	5'252	N/A	14'852
Interpretation provided into <i>two</i> extra languages			
19'200	6'080	2'664	27'944
Interpretation provided into <i>all</i> UN languages			
48'000	8'560	4'500 ⁸	61'060
One three-day meeting			
Interpretation provided into <i>one</i> extra language			
14'400	7'878	N/A	22'278
Interpretation provided into <i>two</i> extra languages			
28'800	9'120	3'552	40'584
Interpretation provided into <i>all</i> UN languages			
72'000	12,840	6'000 ⁸	89'340

Proposal 4: Interpretation at Board pre-briefings

2.10 At the Nineteenth Board Meeting in May 2009, interpretation into French was provided at the PSC, FAC and PC pre-briefings. However, this service was scarcely used. The PSC is therefore asked to consider whether this service should be provided at future Board pre-briefings. One possible approach could be to provide such services on the basis of expressed need only, whereby Board delegations would be asked to specify their interpretation needs prior to each meeting. (For logistical purposes it would be useful if these expressions could be made 6 weeks before the meeting.) The Chair and Vice-Chair of the Board, in liaison with the Secretariat, could then decide into which languages interpretation should be provided.

Cost implications

2.11 Below table shows the cost for the provision of interpretation in one meeting room for the duration of the Board pre-meetings, which would allow interpretation at the core committee briefings (PSC, FAC and PIC). For the purposes of this calculation, it has been assumed that there will be two Board meetings per year.

⁵ For further background costing information see Annex 1, Section 2.

⁶ If interpretation into more than one language was to be offered, committee meetings can no longer be held at the Global Fund Secretariat as the available meeting rooms are not large enough to accommodate the necessary translation equipment.

⁷ Since the cessation of the ASA with the WHO, the cost of interpretation fees has significantly increased.

⁸ If interpretation into 6 languages is provided, a larger more expensive meeting room will be required.

Table 2: Costing of interpretation at Board pre-briefings

<i>Interpretation US\$</i>	<i>Technical US\$</i>	<i>TOTAL PER YEAR US\$</i>
Interpretation provided into <i>one</i> extra language		
9'600	5'252	14'852
Interpretation provided into <i>two</i> extra languages		
19'200	6'080	25'280
Interpretation provided into <i>all</i> UN languages		
48'000	8'560	56'560

2.12 In the past, there has regularly been overlap in timing between pre-briefings. Should provisions be necessary for interpretation in two parallel meeting rooms, as was the case for the May 2009 Board meeting, the costs given above should be doubled.

Annex 1

SECTION 1: BACKGROUND COSTING FOR TRANSLATION SERVICES

Table A: Translation costs per word into UN languages

Language	Cost per word
French	0.14 €
Spanish	0.14 €
Russian	0.13 €
Arabic	0.13 €
Chinese	0.14 €
TOTAL	

Translation of Executive Summaries:

A full set of committee documentation generally contains about 12 papers⁹
Multiplied by an average of 530¹⁰ words per executive summary = 6360 words

Table B: Costing of translation of Executive Summaries

Language	Cost per Committee Meeting US \$
French	0.19 \$ x 6360 words = 1'208
Spanish	0.19 \$ x 6360 words = 1'208
Russian	0.18 \$ x 6360 words = 1'145
Arabic	0.18 \$ x 6360 words = 1'145
Chinese	0.19 \$ x 6360 words = 1'208
Average cost for one language	0.186 x 6360 = 1'183
All UN Languages per Committee Meeting	5'914

Translation of Committee Documents:

The average length of a committee document is 14 pages¹¹.
14 pages x 400 words per page = 5600 words

Table C: Costing of translation of Committee Paper

Language translated into	Cost per committee document US\$
French	0.19 \$ x 5600 words = 1'064
Spanish	0.19 \$ x 5600 words = 1'064
Russian	0.18 \$ x 5600 words = 1'008
Arabic	0.18 \$ x 5600 words = 1'008
Chinese	0.19 \$ x 5600 words = 1'064
Average cost for one language	0.186 x 5600 = 1'048
All UN languages	5'208

SECTION 2: BACKGROUND COSTING OF INTERPRETATION OF COMMITTEE MEETINGS AND PRE-BOARD MEETINGS

An interpreter costs US\$ 1'200 per day. To cover one day of translation 4 staff members are required.

PSC, PC and FAC meetings generally last 3 days:

US\$ 1'200 x 4 translators x 3 days = US\$ 14'400 per language per 3-day meeting for PSC, PC and FAC

⁹ Based on an average of the last 4 rounds of FAC, PSC and PC meeting documentation.

¹⁰ Based on an average of a sample of 10 PSC papers from the last 3 meetings.

¹¹ Based on an average of last FAC, PSC and PC meetings.

EC Meetings generally last half a day:

Despite the fact meeting last for half a day only interpreters need to be hired for a full day.

US\$ 1'200 x 2 interpreters x 1 days = US\$ 2'400 per language per meeting for EC

TOTAL = US\$ 14'400 x 3 (3-day PSC, FAC, PC) + US\$ 2'400 (0.5-day EC) = US\$ 45'600 per language per round of PSC, PSC, FAC and EC meetings.

Costing for technical support and equipment per day:

For 1 Language	For 2 Lang's	For 3 Lang's	For 4 Lang's	For 5 Lang's	For 6 Lang's
US\$ 2'221	US\$ 2'626	US\$ 3'040	US\$ 3'452	US\$ 3'865	US\$ 4'280

Costing for Room hire:

To hire a room large enough to accommodate translation 2 interpretation booths would cost US\$ 888 per day.

If more than two additional languages are to be provided a larger room would be required to accommodate additional interpretation booths. Cost = US\$ 1'500 per day.

PSC, PC, FAC would need the room for 4 days (1 day set-up 3 days meeting) US\$ 888 per day x 4 days = US\$ 3'552 per meeting.

OR US\$ 1'500 per day x 4 days = US \$ 6'000 per meeting for larger room.

EC would need room for two days (one day set up one day meeting) US\$ 888 x 2 days = US\$ 1'776 per meeting