

FUNDING REQUEST

Tailored to Material Change

SUMMARY INFORMATION			
Applicant			
Component(s)			
Principal Recipient(s)			
Envisioned grant(s) start date		Envisioned grant(s) end date	
Allocation funding request		Prioritized above allocation request	

IMPORTANT:

To complete this funding request, please:

- Refer to the accompanying **Funding Request Instructions: Tailored to Material Change**;
- Refer to the *Information Note* for each component as relevant to the funding request, and other guidance available, found on the [Global Fund website](#);
- Ensure that all mandatory attachments have been completed and attached. To assist with this, an application checklist is provided in Annex of the Instructions;
- Ensure consistency across documentation before submitting.

Applicants are encouraged to submit a joint funding request for eligible disease components and resilient and sustainable systems for health (RSSH).

Joint TB/HIV submissions are compulsory for a selected number of countries with highest rates of co-infection. See the related [guidance](#) for more information.

This funding request includes the following sections:

Section 1: Context related to the funding request

Section 2: Program elements proposed for Global Fund support, including rationale

Section 3: Planned implementation arrangements and risk mitigation measures

Section 4: Funding landscape, co-financing and sustainability

Section 5: Prioritized above allocation request

SECTION 1: CONTEXT

This section should capture in a concise way relevant information on the country context and highlight the need for material change to programming. It should refer to the existing and latest sources of information available, particularly (but not limited to) national health plans and other national strategy documents. This information is critical for justifying the choice of interventions under the funding request.

To respond, refer to additional guidance provided in the *Instructions*.

1.1 Background: Material Change triggers

Indicate below the area(s) of change that most accurately describes the need for revising the programming of certain areas.

Refer to the *Instructions* and the [Operational Policy Note on Access to Funding and Grant-making \(forthcoming\)](#) for material change definition and triggers.

1. Epidemiological contextual updates

Are there any relevant changes in the country's epidemiological context as compared to the previous funding request (e.g. important changes in trends in incidence/notification rates or prevalence, key drivers of the epidemics, emerging high risk behaviors, drug/insecticide resistance, or coverage of interventions in the general population or specific key populations based on the latest surveys or other data sources)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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2. National policies and strategies revisions and updates

Are there new approaches adopted within the national policy or strategy for the disease program (e.g. Test and Treat guidelines for HIV, short-term regimens for MDR-TB, shift in interventions from Malaria control to pre-elimination, expanded role of the private sector)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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3. Investing to maximize impact towards ending the epidemics

Referring to available evidence and inputs from technical partners and key stakeholders, does the current program continue to be relevant, and is it progressing and generally on track to achieve results and impact?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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4. Alignment with 2017 – 2022 Global Fund Strategy Objectives 2 and 3

Objective 2 to Build Resilient and Sustainable Systems for Health

Are changes in Resilient and Sustainable Systems for Health (RSSH) investments needed in order to maximize Reproductive Maternal Neonatal and Child Health impact, (RMNCH) or other RSSH areas?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Objective 3 to Promote and Protect Human Rights and Gender Equality

Is there a need for intensifying efforts to address human rights and gender-related barriers to services and to ensure appropriate focus on interventions that respond to key and vulnerable populations?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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5. Effectiveness of implementation approaches

Are the current implementation arrangements effective to deliver on the program objectives and anticipated impact (including the Principal Recipient and the main sub-recipients)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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6. Sustainability, transition and co-financing

Are there changes in domestic or international financing (e.g. due to withdrawal of a major donor or significant increase in domestic allocation/funding), resulting in material impact on funding availability for programmatic interventions and sustainability?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is your country's 2017/2019 Global Fund allocation for the disease component is significantly lower as compared to the current grants' spending levels ¹ ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Others:	
Specify:	

¹ We suggest to compare the new allocation amount with the current spending on a yearly basis, past and/or forecasted. For example using the last year spending multiplied by 3.

1.2. Summary of country context

Given the above,

- a) Describe the reasons for programmatic changes which form the basis of your funding request, as applicable (e.g. refocusing to high impact interventions, epidemiological changes, alignment with the latest normative guidelines, changes to funding landscape, etc.)
- b) As applicable, specify how these changes relate to key and vulnerable populations and human-rights and gender considerations;
- c) Describe how the request builds on lessons-learned from existing and other donors' programs.

(maximum 1 page per component)

[Applicant response]:

SECTION 2: FUNDING REQUEST (Within Allocation)

This section should describe and provide a rationale for the program elements proposed for this funding request. Attach and refer to completed **Programmatic Gap Table(s), Funding Landscape Table(s), Performance Framework and Budget**.

To respond, refer to additional guidance provided in the *Instructions*.

2.1 Funding request

Describe the funding request for the disease program(s) by specifying the changes to the current funded program, taking into account the existing programmatic and financial gaps that now need to be addressed, and how the changes in certain program areas affect the scope/scale of the Global Fund investments.

Additionally, outline in particular:

- a) The changes to the (i) Performance Framework such as impact on targets, geographic coverage, or the diversity/quality of the service packages, (ii) budget
- b) How the proposed revisions will ensure:
 - i. continued scale up where feasible;
 - ii. effective and efficient use of Global Fund investments;
 - iii. maximum impact for ending epidemics HIV/AIDS, TB and malaria;
- c) How the proposed investment ensures appropriate focus on building resilient and sustainable systems for health, and key and vulnerable population programs as applicable.

For joint applications: ensure the answer appropriately reflects the separate disease programs in addition to cross-cutting modules where appropriate, and expected coordination and resulting efficiencies and impact achieved from the joint programming.

Ensure also that that the funding request meets the focus of application requirement² as outlined in the allocation letter

(maximum 3 pages per component)

[Applicant response]:

² Refer to the [Global Fund 2017 Eligibility List](#) for income level. LMI and UMI countries have specific requirements in terms of the focus of applications as set forth in the Global Fund [Sustainability, Transition and Co-Financing Policy](#).

SECTION 3: OPERATIONALIZATION AND RISK MITIGATION

This section describes the planned implementation arrangements and foreseen risks for the proposed program(s).

To respond, refer to additional guidance provided in the *Instructions*.

3.1 Implementation arrangements summary

Do you propose major changes from past implementation arrangements, e.g. in key implementers or flow of funds or commodities?

Yes No

If yes,

- a) Outline the reasons and the key changes from past implementation arrangements to give an understanding of grant operationalization. You can provide an updated **Implementation Arrangements Map**;
- b) Detail how representatives of women's organizations, key populations and people living with the disease(s) as applicable will actively participate in the implementation of this funding request;
- c) Include a description of procurement mechanisms for the grant(s).

(maximum ½ page)

[Applicant response]:

3.2 Key implementation risks

Using the table below, outline key risks foreseen, including those that were provided in the *Key Program Risks* table shared by the Global Fund during the Country Dialogue process. You can also add key operational and implementation risks, which you identified as outstanding from the previous implementation period, and the specific mitigation measures planned to address each of these challenges/risks to ensure effective program performance in the given context.

Applicant response in the table below.

Risk Category (Functional area)	Key Risk	Mitigating actions	Timeline

Add rows for additional key risks as necessary

SECTION 4: FUNDING LANDSCAPE, CO-FINANCING AND SUSTAINABILITY

This section details trends in overall health financing, government commitments to co-financing, and key plans for sustainability.

Refer the Funding Landscape Table(s) and supporting documents as applicable. To respond, refer to additional guidance provided in the *Instructions*.

4.1 Funding Landscape and Co-financing

a) Are there any current and/or planned actions or reforms to increase domestic resources for health as well as to enable greater efficiency and effectiveness of health spending? If yes , provide details below.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b) Is this current application requesting Global Fund support for developing a health financing strategy and/or implementing health-financing reforms? If yes , provide a brief description below.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
c) Have previous government commitments for the 2014-16 allocation been realized? If not , provide reasons below.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
d) Do current co-financing commitments for the 2017-19 allocation meet minimum requirements to fully access the co-financing incentive, as set forth in the Sustainability, Transition and Co-financing Policy? ³ If not , provide reasons below.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
e) Does this application request Global Fund support for the institutionalization of expenditure tracking mechanisms such as National Health Accounts? If yes or no, specify below how realization of co-financing commitments will be tracked and reported.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(maximum 2 pages)		

[Applicant response]:

³ Refer to the [Sustainability, Transition and Co-Financing Policy](#)

4.2 Sustainability

Describe below how the government will increasingly take up health program costs, and actions to improve sustainability of Global Fund financed programs. Specifically,

- a) Explain the costs, availability of funds and the funding gap for major program areas. Specify in particular how the government will increasingly take up key costs of national disease plans and/or support health systems; including scaling up investments in programs for key and vulnerable population, removal of human rights and gender-related barriers and enabling environment interventions.
- b) Describe actions to improve sustainability of Global Fund financed programs. Specifically, highlight key sustainability challenges of the program(s) covered by the funding request, and any current and/or planned actions to address them.

(maximum 1 page)

[Applicant response]:

SECTION 5: PRIORITIZED ABOVE ALLOCATION REQUEST / UPDATE

Prioritized Above Allocation Request

Provide in the table below a prioritized above allocation request which, if deemed technically sound and strategically focused by the TRP, could be funded using savings or efficiencies identified during grant-making, or put on the Register of Unfunded Quality Demand to be financed should additional resources become available from the Global Fund or other actors (e.g. private donors and approved public mechanisms such as UNITAID and Debt2Health). This above allocation request should include clear rationale and should be aligned with the programming of the allocation for maximum impact. The request should reflect the order in which interventions will be funded if additional resources become available. In line with the Global Fund's Strategy to maximize impact and end the epidemics, the prioritized above allocation request should be ambitious (for example, representing at least 30-50 percent of the allocation amount).

[Component] – *Copy the table as needed, if your funding request includes more than one component*

Module	Interventions	Amount requested	Brief Rationale, including expected outcomes and impact (how the request builds on the allocation)
<i>Add rows as needed</i>			
TOTAL AMOUNT			

Relevant Additional Information (optional)

Provide any additional contextual information relevant to the prioritized above allocation request (e.g. any explanations that further clarify linkages to the allocation funding; any considerations or data that informed the request or updates of the request; etc.)

[Applicant response]: