

Approach Paper

Global Program Review (GPR) of the Global Fund to Fight AIDS, Tuberculosis and Malaria

Abbreviations and Acronyms

AFFm	Affordable Financing Facility for Malaria
AIDS	Acquired immunodeficiency syndrome
AMC	Advance Market Commitments
CAE	Country Assistance Evaluation (IEG)
CAS	Country Assistance Strategy (World Bank)
CD	Country Director (World Bank)
CCM	Country Coordination Mechanism (Global Fund)
CFP	Concessional Finance and Global Partnerships Vice Presidency (World Bank)
CFPMI	Multilateral Trusteeship and Innovative Financing Department (World Bank)
CGIAR	Consultative Group on International Agricultural Research
CODE	Committee on Development Effectiveness (World Bank)
CTR	Controller's (World Bank Vice Presidency)
DAC	Development Assistance Committee (OECD)
DGF	Development Grant Facility (World Bank)
EAP	East Asia and the Pacific Region
ECA	Europe and Central Asia Region
ECG	Evaluation Cooperation Group (MDB)
FRM	Financial Resource Mobilization Department of CFP (now called IDA Resource Mobilization Department: CFPIR)
GFHR	Global Forum for Health Research
GPR	Global Program Review (IEG)
GRPP	Global and/or regional partnership program
HDN	Human Development Network (World Bank)
HIV	Human immunodeficiency virus
HNP	Health, nutrition and population
ICR	Implementation Completion Report (World Bank)
IEG	Independent Evaluation Group, formerly OED (World Bank)
IFFIm	International Finance Facility for Immunization
IHP+	International Health Partnership program
LAC	Latin American and the Caribbean Region
LEG	Legal Vice Presidency (World Bank)
Logframe	Logical framework
M&E	Monitoring and evaluation
MDB	Multilateral Development Bank
MDGs	Millennium Development Goals
MoH	Ministry of Health in client countries of the Global Fund
NGO	Nongovernmental organization
OECD	Organisation for Economic Co-operation and Development
OED	Operations Evaluation Department, now IEG (World Bank)
PBF	Performanced-based financing (of health services)
PEPFAR	President's Emergency Plan for AIDS Relief (of the United States Government)
PPAR	Project Performance Assessment Report (IEG)
PRN	Partnership Review Note
PRSP	Poverty Reduction Strategy Paper
RFP	Request for proposals (for consultancy services)
RMC	Resource Mobilization and Cofinancing Vice Presidency (former name of CFP)
SAR	South Asia Region
SSA	Sub-Saharan Africa Region
TB	Tuberculosis
TDR	Special Programme on Research and Training in Tropical Diseases
TF	Trust fund, or trust funded

TFO	Trust Fund Operations Department of CFP (now part of Global Partnership and Trust Fund Operations Department: CFPTO)
TERG	Technical Evaluation Reference Group (the Global Fund))
TOR	Terms of reference
TRE	Treasury (World Bank Vice Presidency)
TRP	Technical Review Panel (Global Fund)
TTL	Task team leader (World Bank)
UNAIDS	Joint United Nations Program on HIV/AIDS
UNEG	United Nations Evaluation Group
UNICEF	United Nations Children's Fund
VPU	Vice Presidential Unit
WHO	World Health Organization

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1. The Independent Evaluation Group (IEG) is proposing to initiate a Global Program Review (GPR) on the Global Fund to Fight AIDS, Tuberculosis and Malaria for completion in the second quarter of fiscal year 2011. IEG does not normally issue an Approach Paper for Global Program Reviews since these are routine products that follow a standard evaluation framework. However, IEG is issuing this Approach Paper on an exceptional basis because of the complexity of this review and its potential relevance for Bank operations.

IEG's Global Program Reviews

2. IEG has incorporated GPRs into its work program for the last four years (after a pilot phase) in response to the recommendations in its Phase 2 Report on the World Bank's involvement in global programs.¹ Since the pilot phase, IEG has prepared 14 GPRs through FY09 (Annex A). Four of these have been global health programs: the Global Forum for Health Research, the Medicines for Malaria Venture, the Population and Reproductive Health Capacity Building Program, and the Stop TB Partnership.

3. The overall purpose in conducting GPRs is "to contribute to improving (a) the performance of the global and regional programs themselves, (b) the Bank's participation in these programs, and (c) the Bank's management of its overall portfolio of GRPPs."² GPRs also provide IEG's principal client (CODE) with an independent view of the performance of each program and the Bank's engagement with the program.³

4. A GPR is a "review" and not a full-fledged "evaluation". Similar to other IEG products at the project and country levels, a GPR represents a review of a global or regional partnership program (GRPP) based upon a recently completed external evaluation of the program, typically commissioned by the governing body of the program. A standard GPR has the following components:

- a. Assessing the independence and quality of the external evaluation
- b. Providing a second opinion on the effectiveness of the program (including relevance, efficacy, efficiency and governance)
- c. Assessing the World Bank's performance as a partner in the program
- d. Drawing general lessons for the Bank's engagement in GRPPs.

5. Among those GRPPs that have recently completed an external evaluation, IEG has given preference in selecting programs for review to (a) those in which the Bank has substantial engagement; (b) those that are innovative, large or complex; (c) those that are relevant to upcoming IEG sector studies; (d) those for which the Executive Directors or Bank management have requested reviews; and (e) those that are likely to generate important lessons. IEG also aims (f) for a representative distribution of GPRs across sectors in each fiscal year.

1. *Addressing the Challenges of Globalization: An Independent Evaluation of the World Bank's Approach to Global Programs*, Phase 2 Report, 2004.

2. IEG Guidelines for Global Program Reviews, February 14, 2007.

3. IEG also prepares a biennial report for CODE which synthesizes its findings from the most recently completed GPRs and provides an independent view of the Bank's management of its portfolio of Bank-supported global and regional partnerships.

6. The main audience for the present GPR will be the Bank's Board, Senior Management and health sector staff, and the Global Fund. In addition, IEG anticipates broad interest among the major Global Fund partners such as WHO, other global health programs (such as UNAIDS, Stop TB and Roll Back Malaria), large donors such as Gates Foundation and PEPFAR (the U.S. President's Emergency Plan for AIDS Relief), development practitioners, and beneficiary country agencies.

7. GPRs seek to add value to the program and to the Bank beyond what is contained in the external evaluation, while also drawing upon IEG's experience in reviewing a growing number of programs. Like IEG's Project Performance Assessment Reports, GPRs report on key program developments since the external evaluation was completed, including the progress in implementing the recommendations of the evaluation.

8. Finally, GPRs contribute to the leading role which IEG is playing, under the auspices of the OECD/DAC Evaluation Network, in developing international standards and good practices for the evaluation of global programs. GPRs are public goods which are providing lessons not only for the World Bank but also for the wider community of global programs.

The Global Fund and Its Recent Evaluation

Evolution of Program

9. The Global Fund to Fight AIDS, Tuberculosis, and Malaria was founded in 2001 "with the explicit aim that it should be a 'different' international development organization: more able to raise large amounts of financing quickly; more adept at working with and through others in the application of those resources; agile and able to assure accountability, without requiring a large bureaucracy for its own administration and the management of its programs."⁴ In its first five years, the Global Fund has scaled up its activities to reach 113 countries with \$7.0 billion of disbursements and attracted nearly \$11.5 billion in pledges and contributions (Annex C). Its institutional and governance approach have also been different from other GRPPs in including new constituencies and relying more on existing institutional arrangements with development partners rather than building up a field presence of its own. It has sought to promote accountability from its grantees through performance-based funding.

Activities Funded and Reach

10. The Global Fund responds to grant proposals from a variety of proponents — governments, non-governmental organizations, UN agencies, other global programs, the private sector, and the Country Coordinating Mechanisms (CCMs) established for this purpose. CCMs are country-level partnerships of public and private sector representatives, official agencies, academia, and people living with AIDS — who prioritize country needs, develop grant

4. Cited from introduction to the evaluation report on the Global Fund, Study Area 1: Leo Ryan, Eric Sarriot, Peter Badhrach, Brad Dude, David Cantor, Jessica Rockwood, Jennifer Lissfelt and Victor Barnes, *Evaluation of the Organizational Effectiveness and Efficiency of the Global Fund to Fight AIDS, Tuberculosis, and Malaria: Results from Study Area 1 of the Five-Year Evaluation*, submitted by Macro International, October 2007.

proposals, nominate organizations as “principal recipient” for each country grant approved, and oversee progress during implementation.

11. The approved proposals fund investments as well as technical assistance (TA) and studies. The recent summary of the portfolio after seven rounds of proposals may be described as follows:⁵

- By disease: HIV/AIDS (61 percent), malaria (25 percent), tuberculosis (14 percent)
- By income level of recipient country: low income (68 percent), middle income (25 percent), upper-middle income (7 percent)
- By region: SS Africa (57 percent), East Asia (12 percent), Europe and Central Asia (9 percent), Latin American and the Caribbean (8 percent), South Asia (8 percent)
- By type of proponent/implementer: government (60 percent), NGO/private sector (17 percent), multilateral (12 percent), not yet assigned (11 percent)
- By expenditure category: drugs, commodities and products (45 percent); human resources (23 percent); administration (10 percent); infrastructure and equipment (9 percent); monitoring and evaluation (3 percent); other (10 percent).

Governance

12. The Global Fund’s international Board includes representatives of donor and recipient governments, NGOs, the private sector (including businesses and foundations), affected communities, and key international development partners including WHO, UNAIDS and the World Bank. The Board meets at least semi-annually and is responsible for overall governance of the organization, including approval of grants. A broader group of stakeholders participate in a Partnership Forum every other year. Other governance bodies include the Technical Review Panel (TRP), the Technical Evaluation Reference Group (TERG), the Office of Inspector General (OIG)⁶ and four committees.⁷

13. The Global Fund’s Secretariat in Geneva, Switzerland, is responsible for day-to-day operations, including mobilizing resources, administering grants, providing financial, legal and administrative support, and reporting information on the Global Fund’s activities to the Board and the public. About 470 employees representing more than 89 nationalities work at the Secretariat’s headquarters. The administrative costs of the Global Fund (which include both the expenses related to the Global Fund Secretariat and the fees paid to Local Fund Agents for in-country oversight) have comprised approximately six percent of total annual expenditures.

5. These figures are from the Global Fund’s Web site: <http://www.theglobalfund.org/en/distributionfunding/?lang=en>.

6. The TRP, with 35 experts, reviews eligible grant proposals for technical merit and recommends proposals for funding to the Board; TERG provides independent assessment and advice to the Board on technical issues, and to the Secretariat on monitoring and evaluation (M&E); OIG, established by the Board in July 2005, oversees audits and inspections assessing internal controls, and investigations of potential fraud, abuse, and mismanagement of funds.

7. The four committees are (a) Ethics, (b) Finance and Audit, (c) Policy and Strategy, and (d) Portfolio.

World Bank Engagement

14. The World Bank was engaged in the initial establishment of the Global Fund and, after protracted negotiations, agreed to be the administrator of the Global Fund trust funds.⁸ Under the trustee agreement (signed in May 2002), the Bank receives and invests funds from donors, commits and disburses the funds to grant recipients on the instruction of the Global Fund, and provides regular reports to the Global Fund. CFPMI is responsible for managing the trustee operations of the Global Fund Trust Fund, which, having grown rapidly in recent years, is now the largest — and arguably the most complex — trust fund that the Bank currently administers. The Global Fund has reimbursed the Bank about \$2.4 million annually for the expenditures incurred by the four Bank units which are involved in administering the trust fund — CFP, CTR, LEG and TRE.

15. The Bank is a permanent (as opposed to rotating) non-voting “institutional” member of the Global Fund Board (along with UNAIDS, UNITAID and WHO), and a member of two Board committees (Finance and Audit, and Policy and Strategy). In the last few years, the Bank has become increasingly engaged in policy and strategy discussions through membership on these two committees, secondments of Bank staff to the Global Fund, joint sponsorship of workshops, and less formal interactions.

16. The Bank has been a significant lender for HIV/AIDS, TB and malaria control in client countries, as well as health systems strengthening. The potential for Bank staff to be engaged with CCMs, principal recipients (PRs), and other elements of Global Fund support increases where the Bank is financing technical assistance or investment projects relating to the three diseases. However, the extent of direct or indirect Bank staff involvement with Global Fund activities at the country level is unknown.

17. In recent years, the Bank and Global Fund have taken a number of steps to improve coordination and collaboration on country work, using existing mechanisms in the global health architecture such as the Global Joint Problem-Solving and Implementation Support Team (GIST), the International Health Partnership plus (IHP+), the Monitoring and Evaluation Reference Group, the Stop TB Partnership, Roll Back Malaria, and AFFm.

The Recent Global Fund Evaluation

18. The Global Fund has recently completed a comprehensive three-stage evaluation commissioned by the Global Fund Board, covering the first six years of its existence and conducted under the independent oversight of its Technical Evaluation Reference Group (TERG). The evaluation design was organized around 3 study areas:⁹

8. The “financial intermediary” role used to be referred to as “fiscal agent”. The GF has reimbursed the Bank about \$2.4 million annually for the expenditures incurred by the four Bank units which are involved in administering the trust fund — CFP, CTR, LEG and TRE. In its role as financial intermediary, the Bank has no operational, execution, or results reporting responsibilities, except for reporting on disbursements.

9. The entire evaluation cost \$16.2 million. About 6 percent (\$1 million) was spent on Study Area 1 on evaluating the program’s organizational effectiveness and efficiency at the global level; about 12 percent (\$1.9 million) on Study Area 2 on the effectiveness of country-level partnerships; and about 73 percent (\$11.8 million) on Study

- Study Area 1: Organizational Efficiency and Effectiveness of the Global Fund
- Study Area 2: Effectiveness of the Global Fund Partners Environment¹⁰
- Study Area 3: Impact on HIV, TB, and Malaria¹¹

19. The TERG issued competitive tenders for two RFPs, won by two consortia, both led by Macro International:¹²

- For Study Areas 1 and 2, and a synthesis report covering all three Study Areas — Macro International, The Johns Hopkins Bloomberg School of Public Health, Axios international, Development Finance International, the CORE Group, and George Washington University of Public Health
- For Study Area 3 — Macro International, African Population and Health Center, Harvard University School of Public Health, John Hopkins Bloomberg School of Public Health, and the WHO). For this study area, Country-Level Impact Evaluation Task Forces were also established with funding from UNAIDS in 18 sample countries, with broad representation, to provide oversight in approving the country evaluation work plans and budgets and to review the draft and final country reports.

20. The Five-Year Evaluation was initiated in April 2007, based on detailed inception reports approved by the TERG. Study Area 1 was completed in October 2007 and presented to the Board in November 2007. In-country data collection and analysis continued until mid-2008 for Study Area 2 (sixteen countries) and the final report was delivered in June 2008 and presented to the Board in November 2008. The final report for Study Area 3 (which drew on in-depth analyses of 18 countries) and the Synthesis Report¹³ (which synthesized the findings of all three Study Areas) were presented to the Board on May 6–7, 2009.

21. Study Area 3 (the health impact evaluation) was carried out in 18 countries in order to obtain a broad view of progress in different country contexts, making use of a combination of existing and new data. The five main criteria for selecting the countries were (a) regional and disease balance, (b) the availability of existing impact and baseline data, (c) the magnitude of Global Fund disbursements, (d) the duration of programming, and (e) opportunities for harmonization with partners. The evaluation was undertaken based on extensive collection of new data in eight countries (Burkina Faso, Cambodia, Ethiopia, Haiti, Malawi, Peru, Tanzania and Zambia — primary data analysis countries) and largely on the basis of already existing

Area 3 on assessing impacts on the three diseases. A significant portion of the Study Area 3 expenditures was spent on in-country data collection and capacity development for future evaluation efforts.

10. Sangeeta Mookherji, Leo Ryan, James Ricca, Marion Bize, and Tim Dye, *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, Final Report*, submitted by Macro International, June 25, 2008.

11. *Health Impact of Scaling Up Against HIV, Tuberculosis, and Malaria*, submitted by Macro International, May 2009.

12. MACRO, 1785 Beltsville Drive, Calverton, MD 20705, USA.

13. *The Five Year Evaluation of the Global Fund to Fight AIDS, Tuberculosis and Malaria: Synthesis of Study Areas 1, 2, and 3*, submitted by Macro International, March 2009.

information in a further ten countries (Benin, Burundi, DR Congo, Ghana, Kyrgyzstan, Lesotho, Moldova, Mozambique, Rwanda, and Viet Nam — secondary data analysis countries).¹⁴

Areas of Focus for the Proposed Global Program Review

22. The Review will start from IEG’s standard evaluation framework for Global Program Reviews (Annex B), which lays out a standard set of evaluation questions in each of the three substantive areas regularly covered in a GPR. In particular, IEG plans to focus this GPR on learning lessons in each of the three areas: (a) the design and operation of global partnership programs, (b) World Bank engagement in global partnerships, and (c) the evaluation of global programs. In addition, there will be an intensive focus on the Bank’s engagement with the Global Fund at the country level, given the major role of the Global Fund in financing disease-control investments at the country level.

23. IEG’s standard evaluation framework has been designed to cover the wide range of global and regional partnership programs (GRPPs) in which the Bank has been engaged, whether advocacy and knowledge networks, technical assistance programs, or investment programs. Not every GPR is expected to cover every evaluation question in this framework. The intensive focus of this GPR on the Bank’s engagement with the Global Fund at the country level arises from the potential for competition or collaboration between Global Fund-supported activities and the Bank’s lending operations at the country level. Most of GRPPs that IEG has so far reviewed have been network or technical assistance programs that have not had this potential for competition. (See Annex D for the Global Fund and World Bank disbursements for communicable disease projects, by region and for selected countries in each region over the past ten years.)

24. The next three sections provide examples of the most probable areas in which the GPR is likely to draw lessons based on the experience of the Global Fund and the Bank’s engagement with the Global Fund.

Lessons for the Design and Operation of Global Partnership Programs

25. The *raison d’être* of global partnership programs is to achieve better results: the partners have ostensibly come together to achieve objectives that they can only achieve, or achieve more efficiently, by working together. In the absence of a global government that could provide global public goods, global partnership programs have become the principal institutional arrangement for providing global public goods. The World Bank — as the largest, multi-sectoral development finance institution — has either helped to initiate or been drawn into more of these partnerships than any other international organization. It has also become by far the largest trustee of donor funds for global and regional partnerships.

14. Three countries that were part of the initial sample — India, Nepal and South Africa — elected not to participate for various reasons. South Africa was replaced by Lesotho, but India and Nepal could not be replaced since they opted out at a late stage.

26. The Global Fund represents the most ambitious attempt by the international community to date to deliver by means of a global partnership program what it has judged to be the global public good of controlling HIV/AIDS, tuberculosis, and malaria. Guided from the beginning by a few widely promoted principles of development assistance, largely consistent with the 2005 Paris Declaration, it is becoming something of a standard with which to compare other global partnerships and other development assistance.¹⁵ Thus, the experience of the Global Fund provides a range of lessons for the operation of global partnership programs including, in particular, lessons in relation to program design, governance, results-based management, cost-effectiveness, grant criteria and processes, global-country linkages, country-level partnerships, accountability, risk management and sustainability.

27. The governance structure of the Global Fund is arguably the most inclusive of any global partnership program to date. Its governing body comprises representatives of donors, beneficiary countries, private foundations, NGOs, the commercial private sector and affected communities in addition to international organizations. As such, it represents the continuation of a trend which IEG has observed among global partnerships from pure shareholder models of governance (in which only financial contributors are represented on the governing body) to more inclusive stakeholder models. The external evaluation found that this has resulted in broad participation and power-sharing among key constituencies in the fight against AIDS, TB and malaria. But the evaluation also found that the drive for legitimacy has hindered the Board's effectiveness in a number of areas — such as strategy development, risk management, and reconciling contradictions among its guiding principles — although these deficiencies may also be symptomatic of young organizations that are establishing themselves from scratch. The Board has tended to focus on a sequential number of near-term and micro issues such as the grant management process, and Secretariat structure and capacity, to the neglect of longer-term strategic issues.

28. The evaluation also found that the Global Fund partnership has not yet led to effective operational partnerships grounded in negotiated and binding agreements of a strategic or programmatic nature between the Global Fund and other international organizations in global health, with the partial exceptions of UNAIDS, the Stop TB Partnership and Roll Back Malaria. The evaluation concluded that this represents more a failure of governance in the Global Fund Board and in the broader international system than a failure of any particular partner.¹⁶

29. At the country level, the principal innovation of the Global Fund has been the CCMs (Country Coordinating Mechanisms). These are country-level partnerships of public and private sector representatives, official agencies, academia, people living with the diseases that are responsible for prioritizing country needs, preparing grant proposals, nominating organizations as “principal recipients” or PRs for each country grant approved, and overseeing progress during implementation. The evaluation found that the CCM model was widely perceived as one of the

15. For example, the 2008 Evaluation of the GAVI specifically compared aspects of GAVI's performance with those of the Global Fund, as revealed by their respective evaluations. See Abt Associates, *Evaluation of the GAVI Phase 1 Performance (2000-2005)*, pp. 124-126. The aspects compared were (a) strategy, vision, mission and business plan, (b) partnership principles and strategy, (c) governance, and (d) organizational structure and processes.

16. The late Mancur Olson would no doubt feel vindicated that good will in the absence of selective incentives has failed to yield a genuine partnership.

most positive contributions of the Global Fund, to such an extent that CCMs are largely perceived as Global Fund entities rather than as mechanisms for promoting country ownership. Most CCMs would cease to exist if Global Fund financing were withdrawn. While CCMs have succeeded in mobilizing partners for the submission of proposals, their grant oversight, monitoring, and technical assistance mobilization roles have remained unclear and largely unexecuted. The evaluation concluded that the CCMs' future role in these areas and in promoting country ownership is in need of review.

30. The Global Fund was originally designed in 2002 as a financial instrument, not an implementing entity (Box 1). In addition to technical advances that could help control AIDS, TB and malaria, there was a sense at the time, supported by some analysis, that the most affected countries had sufficient capacity to begin taking these technical interventions “to scale” given adequate financial support. If countries required technical assistance to enhance their capacity to spend the additional resources effectively, then other development partners active in disease control would provide this. On the contrary, the external evaluation found that the global partnership framework to provide essential technical assistance in support of the implementation of Global Fund grants was lacking due to inadequate clarification of roles and responsibilities among the different development partners that support Global Fund grants in-country. The experience with the Global Fund provides lessons for improving the interface between technical assistance and investments.

31. The Global Fund has served as an instrument to mobilize impressive resources in the fight against AIDS, TB and malaria. The sustainability of the outcomes resulting from its efforts will depend not only on the sustainability of the Global Fund itself, but also on the complementary activities of its donor partners (in supporting health systems strengthening, for example), and on the capacity of high-burden countries to sustain the recurrent expenditures associated with AIDS, TB and malaria control. The Global Fund now recognizes the importance of health systems strengthening in achieving and sustaining positive disease-control outcomes, and started giving grants for health systems strengthening in 2007, but the Global Fund does not have the resources to do this alone. It is important to learn lessons about how the Global Fund, the Bank, and other international organizations can work together effectively in this area.

Lessons for World Bank Engagement in Global Programs

32. The GPR will focus on the Bank's performance as a partner in the Global Fund and learning lessons for partnering in other programs. It is expected (a) that the Global Fund is here to stay, (b) that it will continue to disburse more than the World Bank disburses for its entire health, nutrition and population portfolio, and (c) that the Bank and Global Fund aim to improve collaboration and strive for greater effectiveness.

33. The Global Fund evaluation found that effective operational partnerships between the Global Fund and other international organizations in global health including the World Bank have been largely absent, notwithstanding positive exchanges and affirmations to work together on communicable disease control. And the Global Fund now recognizes the importance of health systems strengthening in achieving and sustaining positive disease-control outcomes — an area in which the Shakow Report and the Bank's 2007 HNP Sector Strategy have argued that the

Box 1. Guiding Principles of the Global Fund

- A. The Fund is a financial instrument, not an implementing entity.
- B. The Fund will make available and leverage additional financial resources to combat HIV/AIDS, tuberculosis and malaria.
- C. The Fund will base its work on programs that reflect national ownership and respect country-led formulation and implementation processes.
- D. The Fund will seek to operate in a balanced manner in terms of different regions, diseases and interventions.
- E. The Fund will pursue an integrated and balanced approach covering prevention, treatment, and care and support in dealing with the three diseases.
- F. The Fund will evaluate proposals through independent review processes based on the most appropriate scientific and technical standards that take into account local realities and priorities.
- G. The Fund will seek to establish a simplified, rapid, innovative process with efficient and effective disbursement mechanisms, minimizing transaction costs and operating in a transparent and accountable manner based on clearly defined responsibilities. The Fund should make use of existing international mechanisms and health plans.
- H. In making its funding decisions, the Fund will support proposals which:
 1. Focus on best practices by funding interventions that work and can be scaled up to reach people affected by HIV/AIDS, tuberculosis and malaria.
 2. Strengthen and reflect high-level, sustained political involvement and commitment in making allocations of its resources.
 3. Support the substantial scaling up and increased coverage of proven and effective interventions, which strengthen systems for working: within the health sector; across government departments; and with communities.
 4. Build on, complement, and coordinate with existing regional and national programs¹⁷ in support of national policies, priorities and partnerships, including Poverty Reduction Strategies and sector-wide approaches.
 5. Focus on performance by linking resources to the achievement of clear, measurable and sustainable results.
 6. Focus on the creation, development and expansion of government/private/nongovernmental organization (NGO) partnerships.
 7. Strengthen the participation of communities and people, particularly those infected and directly affected by the three diseases, in the development of proposals.
 8. Are consistent with international law and agreements, respect intellectual property rights, such as TRIPS, and encourage efforts to make quality drugs and products available at the lowest possible prices for those in need.
 9. Give due priority to the most affected countries and communities, and to those countries most at risk.
 10. Aim to eliminate stigmatization of and discrimination against those infected and affected by HIV/AIDS, especially for women, children and vulnerable groups.

Source: Macro International, The Five-Year Evaluation of the Global fund to Fight AIDS, Tuberculosis, and Malaria: Synthesis of Study Areas 1, 2 and 3, March 2009, page 10.

World Bank has a comparative advantage.¹⁷ The GPR would contribute to the ongoing articulation of appropriate roles for the World Bank and the Global Fund in communicable disease control — an issue of interest to both the Bank and the Global Fund.

34. At the present time, the Bank and the Global Fund are being urged to collaborate more effectively at the global and country levels both on control of the three diseases and on health systems strengthening. Much of this pressure is being expressed through the “Health 8” — the agencies that are deeply engaged in global health (including the Bank, Global Fund, WHO, GAVI, UNICEF, UNFPA, UNAIDS and the Gates Foundation) — where their senior officials meet to strengthen collaboration in global health for better health outcomes in developing countries.¹⁸

35. The GPR would aim to assess the direct and indirect, formal and informal engagement of the Bank with the Global Fund at both the global and country levels by means of document and portfolio reviews, interviews with key informants (such as country directors and country teams), and surveys of the Bank’s health sector staff working in client countries. The GPR would also attempt to determine what impact the Global Fund is having on the Bank’s own health sector work (policy dialogue, technical assistance, and investments) in these same countries. To what extent is the Global Fund complementing or crowding out other health sector operations.¹⁹ To what extent and how have the Bank’s operations been reformulated to reflect the presence of the Global Fund. Some country directors have reportedly decided to limit Bank-financed operations in health, observing that country officials perceive that grants from global programs like the Global Fund are easier to obtain.²⁰ Others have decided to focus Bank operations only on health systems strengthening — one of the areas that the 2007 Health Sector Strategy Paper has designated as most in line with the World Bank’s comparative advantage.²¹

36. The GPR would not attempt to answer the question of the comparative effectiveness of the Bank’s health sector operations in relation to those of the Global Fund. But the GPR would examine the extent to which the Bank has been coordinating, facilitating, or collaborating with the Global Fund at the country level. Have decisions regarding the level of engagement been

17. Alexander Shakow, “Global Fund – World Bank HIV/AIDS Programs: Comparative Advantage Study,” January 19, 2006, and World Bank, *Healthy Development: The World Bank Strategy for Health, Nutrition and Population Results*, 2007.

18. The Health 8 was formed in 2007 to stimulate a global sense of urgency for reaching the health-related MDGs and to share accountability for progress at the country level. The International Health Partnership (IHP+) is also an attempt to promote harmonization and coordination among aid efforts of various partners and global programs at the country level. This is co-led by the World Health Organization (WHO) and the World Bank.

19. The World Bank Group is one of many large players in international HNP support, accounting for only about 6 percent of the total as of 2006 — down from 18 percent in the 1990s — and is reassessing its comparative advantage in the context of the new aid architecture. See IEG, *Improving Effectiveness and Outcomes for the Poor in Health, Nutrition and Population*, page xiv.

20. These anecdotal reactions of Bank staff to the growth of Global Fund funding came from a focus group discussion that IEGCG held with TTLs of global partnership programs in 2008.

21. *World Bank Strategy for Health, Nutrition and Population Results*, April 24, 2007. While the report lists health systems strengthening among other areas as part of the Bank’s potential comparative advantage, it acknowledges that the Bank’s capacity to contribute in this area requires further strengthening.

made in response to centrally determined policies or guidelines, or have country staff had wide discretion to make such decisions based on country-specific circumstances? To what extent have Bank staff been contributing positively or negatively to the activities and objectives of the Global Fund and to related MDGs? To what extent have the Global Fund's commitments been influencing, positively or negatively, the Bank's own health sector commitments in individual countries?

37. The GPR will aim to bring new information and perspectives to these questions, to provide timely input into the Bank's evolving health strategy²² and to inform debates about the Bank's role in these and other global programs.

Lessons for Evaluating Global Programs

38. The recently completed three-part evaluation of the Global Fund was clearly the largest and most comprehensive evaluation ever of a global partnership program. In the aftermath of this major effort, the Synthesis Report itself says that "global development professionals would benefit from a critical examination of the lessons learned from and about this experience, to inform the design and management of other large-scale evaluations."²³

39. The authors of the Synthesis Report themselves drew three immediate lessons, primarily of a procedural nature, for conducting and managing large-scale evaluations:

- Evaluation implementers should be intimately involved in the design of the evaluation, particularly in identifying the research questions and study designs and methods.
- The evaluation design and implementation team should be intimately involved in determining appropriate timeframes for the evaluation, based on the evaluation questions and methods required.
- Although different evaluation questions might require different skill sets, study designs, and methodologies, the evaluation should not be broken into separate management units, but managed and treated as a comprehensive study to improve coordination and maximize the opportunities for synergy and iteration.

40. Based on an initial review of the Synthesis Report and the three Study Area reports, and drawing on comparisons with evaluations of other global programs that we have reviewed, IEG's global team perceives that there are also potential lessons to be learned and good practices to be discerned in relation to developing M&E policies for global programs, setting up M&E frameworks, planning and programming evaluations, preparing TORs, formulating evaluation questions, and using innovative tools and survey questionnaires to assess organizational effectiveness and country-level partnerships.

22. Recent progress on the steps that the Bank's HNP sector has taken to update its strategy are reported in "Implementation of the World Bank's Strategy for HNP Results: Achievements, Challenges, and the Way Forward: Progress Report," March 19, 2009.

23. Macro International, The Five-Year Evaluation of the Global fund to Fight AIDS, Tuberculosis, and Malaria: Synthesis of Study Areas 1, 2 and 3, March 2009, page 60.

41. The Global Fund has emphasized both country ownership and performance-based financing (PBF), and the scale at which the Global Fund has attempted to implement PBF is unprecedented in the international health arena. However, the external evaluation found that this “focus on results” remains a work in progress and has evolved into a complex and burdensome system that has so far focused more on inputs and outputs than on development outcomes. Lack of country capacity and quality baseline data at the country level have been serious problems. While many countries have had some experience with PBF, they have had to get used to the comprehensiveness and stringency of the Global Fund approach. The Global Fund has learned from its experiences, made important adjustments, and envisages other changes. The Bank and others should also learn from this experience.

42. The evaluation design also contained a number of innovative features worth examination. Its purpose was to assess the combined impact of the Global Fund and other international and national partners on the overall disease burden for the three diseases in each case study country. (Direct attribution of Global Fund-specific investments to reductions was not attempted.) In line with the Paris Declaration, the case studies were designed as country-driven evaluations involving key partners and stakeholders in every phase of implementation. Technical assistance for evaluation capacity building (strengthening existing data collection mechanisms and improving human capacity and skills) was also built into the case study design in order to foster sustainable, high-quality monitoring and evaluation mechanisms that would serve global reporting needs in future. It also aimed to achieve consensus on a model platform of impact evaluation tools and approaches which could be used widely in countries beyond those participating in the current evaluation.

GPR Design, Methodology, Staffing, Products, Timetable, and Resources

43. IEG resources devoted to previous GPRs have been modest, generally involving only one consultant for about 8 weeks (total time not duration). Due to the high profile of the Global Fund, the complexity of its recent evaluation, the need to collect new information (on the engagement of the Bank’s operational staff at the country level), and the importance of the strategic issues going forward, a core team of three persons (a team leader and two specialists) will prepare the present review under the task team leadership of Chris Gerrard, Global Programs Coordinator, IEGCG. All three team members — Edward Elmendorf, Rogerio Pinto, and Elaine Ooi — have extensive Bank experience, and the team leader has previously prepared two GPRs of global health partnerships (Medicines for Malaria Venture and the Global Forum for Health Research).

44. The work will be based at World Bank headquarters in Washington. The methodology will include the following:

- Document review of the Global Fund and World Bank strategies and operations in the health sector, including the role of the health sector in the Bank’s country assistance strategies;

- Portfolio analysis of Global Fund-supported activities and Bank health sector operations, country by country, in order to discern evidence of competition or collaboration;
- Interviews (telephone or otherwise) with key informants such as members of the Global Fund Board, the Technical Review Panel, and the Technical Evaluation Reference Group which oversaw the recent Global Fund evaluation;
- Surveys and structured interviews of World Bank country directors and health sector staff in a sample of countries in which either the Global Fund or the Bank has been involved;
- Possible group discussions or focus groups on issues judged important after analysis of the interviews and surveys;
- A mission to the Global Fund’s headquarters in Geneva to consult with senior staff, those involved with the recently completed evaluation, and those involved in ongoing monitoring and self-evaluation;
- Country visits to a sample of beneficiary countries to consult with government officials and other relevant country stakeholders to get information and views on Global Fund and World Bank activities at the country level, and their consistency with aid effectiveness principles such as country ownership and donor coordination. This may also include possible observation of Global Fund activities and services, if deemed cost-effective while in-country. A selection of countries will be made while the portfolio analysis, surveys and structured interviews with World Bank staff are under way, and in conjunction with IEG’s newly initiated trust fund and donor coordination evaluations (in order to take advantage of possible synergies).

45. Other members of IEG’s global evaluation team in IEGCG will also participate in the larger task team, as well as IEG’s human development coordinator and adviser. Their precise roles are still to be determined but will range from providing advice, helping to design surveys, interviewing Bank staff, and undertaking country visits to writing and reviewing parts of the report.

Proposed Timetable

Item	Date
Approach paper approved by IEG	December 10, 2009
Finalization of questionnaires of World Bank staff	End January 2010
Visit to Geneva headquarters: as mutually convenient	February
Launch of HNP staff survey and CD interviews	February
Final work program	End February
Country visits	March – April
First draft	End June
IEG one-stop review	Early September

Item	Date
Internal Bank review by CFP, HDN and others	Early October
External review by the Global Fund	Early November
Report finalized and distributed to CODE	End November
CODE meeting	December 2010

Consultations and Dissemination

46. Review and dissemination of the draft report will follow normal IEG guidelines for special studies, including two or three peer reviewers prior to the IEG one-stop review of the draft report. (Peer reviewers are currently being identified.) However, for this product, it may be advisable to extend the opportunity to the Global Fund for technical review of early drafts (as was done in the case of IEG's meta-evaluation of the CGIAR in 2003).

47. The final GPR will be distributed to the Bank's Committee on Development Effectiveness (CODE), discussed at a CODE meeting, and then after a suitable period, published and posted on the IEG Web site for broader distribution.

Annex A. List of IEG's Global Program Reviews to Date

Acronym	Program Name	Preparer	Date Completed
1. ProVention	ProVention Consortium	Silke Heuser	June 28, 2006
2. DG	Development Gateway Foundation	Kris Hallberg	June 26, 2007
3. MMV	Medicines for Malaria Venture	A. Edward Elmendorf	June 26, 2007
4. CA	Cities Alliance	Roy Gilbert	June 28, 2007
5. CEPF	Critical Ecosystem Partnership Fund	Lauren Kelly	Nov 7, 2007
6. ADEA	Association for the Development of Education in Africa	Dean Nielsen	Mar 3, 2008
7. PRHCBP	Population and Reproductive Health Capacity Building Program	Denise Vaillancourt and Elaine Ooi	Mar 5, 2008
8. ILC	International Land Coalition	Ridley Nelson	June 25, 2008
9. CGAP	Consultative Group to Assist the Poor	Khalid Siraj	Oct 26, 2008
10. GDN	Global Development Network	Catherine Gwin	May 28, 2009
11. GFHR	Global Forum for Health Research	A. Edward Elmendorf	June 23, 2009
12. GISP	Global Invasive Species Program	Lauren Kelly	September 3, 2009
13. Stop TB	Stop TB Partnership	Bernhard Liese	November 19, 2009
14. GWP	Global Water Partnership	Keith Pitman	January 4, 2010

Annex B. Evaluation Framework for Global Program Reviews

Note: This evaluation framework is a general framework that has been designed to cover the wide range of such programs in which the World Bank is involved, encompassing policy and knowledge networks, technical assistance programs, and investment programs. It is not expected that every global program review will cover every question in this table in detail.

Table B-1. Assessing the Independence and Quality of the Evaluation

Evaluation Questions		
<p>1. Evaluation process</p> <p>To what extent was the GRPP evaluation independent of the management of the program, according to the following criteria:</p> <ul style="list-style-type: none"> • Organizational independence? • Behavioral independence and protection from interference? • Avoidance of conflicts of interest? <p>Factors to take into account in answering these questions include:</p> <ul style="list-style-type: none"> • Who commissioned and managed the evaluation? • Who approved the terms of reference and selected the evaluation team? • To whom the evaluation team reported, and how the evaluation was reviewed? • Any other factors that hindered the independence of the evaluation such as an inadequate budget, or restrictions on access to information, travel, sampling, etc.? 		
<p>2. Monitoring and evaluation framework of the program</p> <p>To what extent was the evaluation based on an effective M&E framework of the program with:</p> <ul style="list-style-type: none"> • Clear and coherent objectives and strategies that give focus and direction to the program? • An expected results chain or logical framework? • Measurable indicators that meet the monitoring and reporting needs of the governing body and management of the program? • Systematic and regular processes for collecting and managing data? 		
<p>3. Evaluation approach and scope</p> <p>To what extent was the evaluation objectives-based and evidence-based?</p> <p>To what extent did the evaluation use a results-based framework — constructed either by the program or by the evaluators?</p> <p>To what extent did the evaluation address:</p> <table border="0" style="width: 100%;"> <tr> <td style="vertical-align: top;"> <ul style="list-style-type: none"> • Relevance • Efficacy • Efficiency or cost-effectiveness </td> <td style="vertical-align: top;"> <ul style="list-style-type: none"> • Governance and management • Resource mobilization and financial management • Sustainability, risk, and strategy for devolution or exit </td> </tr> </table>	<ul style="list-style-type: none"> • Relevance • Efficacy • Efficiency or cost-effectiveness 	<ul style="list-style-type: none"> • Governance and management • Resource mobilization and financial management • Sustainability, risk, and strategy for devolution or exit
<ul style="list-style-type: none"> • Relevance • Efficacy • Efficiency or cost-effectiveness 	<ul style="list-style-type: none"> • Governance and management • Resource mobilization and financial management • Sustainability, risk, and strategy for devolution or exit 	
<p>4. Evaluation instruments</p> <p>To what extent did the evaluation utilize the following instruments:</p> <table border="0" style="width: 100%;"> <tr> <td style="vertical-align: top;"> <ul style="list-style-type: none"> • Desk and document review • Literature review • Site visits and for what purpose: for interviewing implementers/beneficiaries, or for observing activities being implemented or completed • Case studies </td> <td style="vertical-align: top;"> <ul style="list-style-type: none"> • Consultations/interviews and with whom • Structured surveys and of whom • Other </td> </tr> </table>	<ul style="list-style-type: none"> • Desk and document review • Literature review • Site visits and for what purpose: for interviewing implementers/beneficiaries, or for observing activities being implemented or completed • Case studies 	<ul style="list-style-type: none"> • Consultations/interviews and with whom • Structured surveys and of whom • Other
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Evaluation Questions
<p>5. Evaluation feedback</p> <p>To what extent have the findings of the evaluation been reflected in:</p> <ul style="list-style-type: none"> • The objectives, strategies, design, or scale of the program? • The governance, management, and financing of the program? • The monitoring and evaluation framework of the program?

Table B-2. Providing an Independent Opinion on the Effectiveness of the Program

Every review is expected to cover the first four criteria in the following table: (a) relevance, (b) efficacy, (c) efficiency, and (d) governance and management. A review may also cover (e) resource mobilization and financial management and (f) sustainability, risk, and strategies for devolution or exit if the latter are important issues for the program at the time of GPR, and if there is sufficient information available on which to base an independent opinion.

Evaluation Criteria and Questions
<p>Relevance: The extent to which the objectives and design of the program are consistent with (a) current global/regional challenges and concerns in a particular development sector and (b) the needs and priorities of beneficiary countries and groups.</p>
<p>1. Supply-side relevance — the existence of an international consensus that global/regional collective action is required.</p> <p>To what extent does the program reflect an international consensus on the need for action, on the definition of the problem being addressed, on priorities, and on strategies for action?</p> <p>Is the original consensus that led to the creation of the program still present? Is the program still needed to address specific global/regional public concerns?</p> <p>Take into account the origin of the program in answering these questions:</p> <ul style="list-style-type: none"> • Is the program formally responsible for implementing an international convention? • Did the program arise out of an international conference? • Is the program facilitating the implementation of formal standards and approaches? • Is the program primarily donor-driven? Did donors establish the program with little consultation with developing countries? • Is the program primarily Bank-driven? Did the World Bank found the program and then seek other partners?
<p>2. Demand-side relevance — alignment with beneficiary needs, priorities, and strategies.</p> <p>To what extent are the objectives consistent with the needs, priorities, and strategies of beneficiary countries as articulated in the countries' own PRSPs, and in donors' strategies such as the World Bank CASS, and the UN Development Assistance Frameworks?</p> <p>To what extent has the voice of developing and transition countries been expressed in the international consensus underlying the program?</p>
<p>3. Vertical relevance — consistency with the subsidiarity principle.</p> <p>To what extent are the activities of the program being carried out at the most appropriate level — global, regional, national, or local — in terms of efficiency and responsiveness to the needs of beneficiaries?</p> <p>To what extent are the activities of the program competing with or substituting for activities that individual donors or countries could do more efficiently by themselves?</p> <p>Pay particular attention to those programs that, on the face of it, are primarily supporting the provision of national or local public goods.</p>

Evaluation Criteria and Questions
<p>4. Horizontal relevance — the absence of alternative sources of supply.</p> <p>What is the comparative advantage, value added, or core competency of the program relative to other GRPPs with similar or complementary objectives? To what extent is the program providing additional funding, advocacy, or technical capacity that is otherwise unavailable to meet the program's objectives?</p> <p>To what extent are the good and services being provided by the program in the nature of public goods? Are there alternative ways of providing these goods and services, such as by the private sector under regular market conditions?</p>
<p>5. Relevance of the design of the program</p> <p>To what extent are the strategies and priority activities of the program appropriate for achieving its objectives?</p> <p>What are the major activities of the program:</p> <ul style="list-style-type: none"> • Policy and knowledge networking? • Financing country and local-level technical assistance? • Financing investments to deliver national, regional, or global public goods? (See Table B-4.) <p>Has the program articulated an expected results chain or logical framework, along with assumptions that relate the progress of activities with the achievement of the objectives? Does the results chain identify the extent to which the achievement of the objectives depends on the effective functioning of bureaucracies, markets, or collectivities? If so, to what extent are these assumptions valid?</p> <p>For programs providing global or regional public goods, is the design of the program consistent with the way in which the individual efforts of the partners contribute to the collective outcome for the program as a whole — whether “best shot”, “summation”, or “weakest link?”</p>
<p>Efficacy: The extent to which the program has achieved, or is expected to achieve, its objectives, taking into account their relative importance.</p>
<p>6. Achievement of objectives</p> <p>To what extent have the stated objectives of the program been achieved, or has satisfactory progress been made towards achieving these objectives?</p> <p>To what extent are there implicit objectives that are well understood and agreed upon by the partners and to which the program should also be held accountable?</p> <p>To what extent are there any positive, unintended outcomes of the program that have been convincingly documented?</p> <p>To what extent have these assessments by the program or the evaluation been evidence-based?</p>
<p>7. Progress of activities, outputs, and outcomes.</p> <p>To what extent has the program or the evaluation measured the progress of activities, outputs, and outcomes?</p> <p>How did the program or the evaluation aggregate its outputs and outcomes at all levels — global, regional, national, and local — to provide an overall summary of its results?</p> <p>To what extent have factors such as changes in the location of the program, its legal structure, or governance processes affected the outputs and outcomes of the program?</p> <p>To what extent have there been outcomes that can be uniquely attributed to the partnership itself — such as the scale of or joint activities made possible by its organizational setup as a GRPP, or its institutional linkages to a host organization?</p>
<p>8. Linkages to country or local-level activities.</p> <p>To what extent has the program established effective operational linkages with country-level activities, taking into account that:</p> <ul style="list-style-type: none"> • The desired nature of these linkages will vary according to the objectives, design, and implementation of each program? • Positive outcomes at the country or local level are generally a joint product of both global/regional and county-level activities?

<p>Evaluation Criteria and Questions</p>
<p>Efficiency or cost-effectiveness:</p> <p>Efficiency — the extent to which the program has converted or is expected to convert its resources/inputs (such as funds, expertise, time, etc.) economically into results.</p> <p>Cost-effectiveness — the extent to which the program has achieved or is expected to achieve its results at a lower cost compared with alternatives.</p>
<p>9. Efficiency</p> <p>To what extent is it possible to place a monetary value on the benefits arising from the activities of the program?</p> <p>To what extent has the program or the evaluation conducted impact evaluations of representative program activities?</p> <p>To what extent has the program or the evaluation analyzed the program's costs in broad categories (such as overhead vs. activity costs), and categorized the program's activities and associated benefits, even if these cannot be valued in monetary terms?</p>
<p>10. Cost-effectiveness</p> <p>To what extent is the program measuring up against its own business plans:</p> <ul style="list-style-type: none"> • Has the program cost more or less than planned? How did it measure up against its own costing schedule? • Have there been any obvious cases of inefficiency or wasted resources? <p>To what extent is the program delivering its activities cost-effectively in comparison with alternatives:</p> <ul style="list-style-type: none"> • How do actual costs compare with benchmarks from similar programs or activities? • Are the overhead costs of governing and managing the program reasonable and appropriate in relation to the objectives and activities of the program? <p>How does the program compare with traditional development assistance programs:</p> <ul style="list-style-type: none"> • For beneficiary countries, has receiving the development assistance through the GRPP increased the transactions costs compared with traditional development assistance programs? • For donors, has delivering the development assistance through the GRPP reduced donor costs by harmonizing efforts among donors or by reducing overlapping work (such as through joint supervision, monitoring and evaluation)?
<p>Governance and management:</p> <p>Governance — the structures, functions, processes, and organizational traditions that have been put in place within the context of a program's authorizing environment to ensure that the program is run in such a way that it achieves its objectives in an effective and transparent manner.</p> <p>Management — the day-to-day operation of the program within the context of the strategies, policies, processes, and procedures that have been established by the governing body. Whereas governance is concerned with "doing the right thing," management is concerned with "doing things right."</p>
<p>11. Compliance with generally accepted principles of good governance.</p> <p>To what extent are the governance and management structures and processes well articulated and working well to bring about legitimate and effective governance and management?</p> <p>To what extent do governance and management practices comply with the following seven principles:</p> <ul style="list-style-type: none"> • Legitimacy — the way in which governmental and managerial authority is exercised in relation to those with a legitimate interest in the program — including shareholders, other stakeholders, implementers, beneficiaries, and the community at large? • Accountability — the extent to which accountability is defined, accepted, and exercised along the chain of command and control within a program, starting with the annual general meeting of the members or parties at the top and going down to the executive board, the chief executive officer, task team leaders, implementers, and in some cases, to the beneficiaries of the program? • Responsibility — the extent to which the program accepts and exercises responsibility to stakeholders who are not directly involved in the governance of the program and who are not part of the direct chain of accountability in the implementation of the program?

Evaluation Criteria and Questions
<ul style="list-style-type: none"> • Fairness — the extent to which partners and participants, similarly situated, have equal opportunity to influence the program and to receive benefits from the program? • Transparency — the extent to which a program's decision making, reporting, and evaluation processes are open and freely available to the general public? • Efficiency — the extent to which the governance and management structures enhance efficiency or cost-effectiveness in the allocation and use of the program's resources? • Probity — the adherence by all persons in leadership positions to high standards of ethics and professional conduct over and above compliance with the rules and regulations governing the operation of the program?
<p>12. Partnerships and participation</p> <p>To what extent has the program identified a complete list of stakeholders, or “stakeholder map”, including the agreed-upon or perceived roles and responsibilities of the categories of stakeholders identified? To what extent is this a routine programmatic function, updated regularly, and transparently available?</p> <p>Has the program adopted primarily a shareholder model of governance (in which membership on the governing body is limited to financial and other contributors), or a stakeholder model (in which membership also includes non-contributors)?</p> <p>To what extent, if any, is the program's legitimacy being sacrificed in order to achieve greater efficiency, or vice-versa?</p>
<p>13. Programs located in host organizations</p> <p>To what extent is the location of the program in the Bank or other partner organization adversely affecting the governance, management, or other aspects of the program, such as compliance with the principles of transparency and fairness?</p> <p>For which functions is the program manager accountable to the host organization and the governing body of the program, respectively? Are conflicts of interest being managed appropriately?</p> <p>To what extent does the host organization play such a dominant role in the program, thereby reducing the incentives of other partners to participate effectively, or reducing the ability of the host organization to look at the weaknesses of the program objectively?</p>
<p>Resource mobilization and financial management:</p> <p>Resource mobilization — the processes by which resources are solicited by a program and provided by donors and partners.</p> <p>Financial management — the processes that govern the recording and use of funds, including allocation processes, crediting and debiting of accounts, controls that restrict use, accounting, and periodic financial reporting systems. In cases where funds accumulate over time, this would also include the management of the cash and investment portfolio.</p>
<p>14. Resource mobilization</p> <p>To what extent has the program succeeded in raising financial resources commensurate with its objectives? And from what sources — the Bank, bilateral donors, foundations, etc.?</p> <p>To what extent has the program succeeded in diversifying its funding beyond a small number of donors?</p> <p>To what extent are the sources of funding for the program (including donor restrictions on the use of resources) affecting, positively or negatively:</p> <ul style="list-style-type: none"> • The strategic focus of the program? • The outputs and outcomes of the program? • The governance and management of the program? • The sustainability of the program?

Evaluation Criteria and Questions
<p>15. Financial management</p> <p>Are there any issues that have emerged during the course of the review in relation to:</p> <ul style="list-style-type: none"> • The quality of financial management and accounting? • The methods, criteria, and processes for allocating funds among different activities of the program? • Financial management during the early stages of the program?
<p>Sustainability, risk, and strategy for devolution or exit:</p> <p>Sustainability — When applied to the activities of a program, the extent to which the benefits arising from these activities are likely to continue after the activities have been completed. When applied to a program itself, the extent to which the organization or program is likely to continue its operational activities over time.</p> <p>Devolution or exit strategy — a proactive strategy to change the design of a program, to devolve some of its implementation responsibilities, to reduce dependency on external funding, or to phase out the program on the grounds that it has achieved its objectives or that its current design is no longer the best way to sustain the results which the program has achieved.</p>
<p>16. Sustainability of the benefits of the program's activities</p> <p>What is the risk, at the time of evaluation, that the development outcomes (or expected outcomes) of the program will not be maintained (or realized)? This depends on (a) the likelihood that some changes may occur that are detrimental to maintaining or realizing the expected outcomes, and (b) the affect on the expected outcomes if some or all of these changes actually materialize?</p>
<p>17. Sustainability of the program</p> <p>This will depend on a number of factors, such as the continued legitimacy of the program, its financial stability, its continuity of effective management, and its ability to withstand changing market or other conditions.</p> <p>To what extent is there still a sufficient convergence or accommodation of interests among the major partners to sustain the program financially? To what extent has the program developed institutional capacity such as performance-based management, personnel policies, learning programs, and knowledge management that help to sustain a program?</p> <p>In what areas could the program improve in order to enhance its sustainability, such as better marketing of the program's achievements in order to sustain its reputation?</p>
<p>18. Prospects for continuation and strategies for devolution or exit</p> <p>To what extent should the program be sustained?</p> <p>Is the continuation of the program the best way of sustaining the results achieved?</p> <p>Should the design of the program be modified as a result of changed circumstances, either positive or negative?</p> <p>What other alternatives should be considered to sustain the program's results more cost-effectively, in the light of the previous evaluation findings with respect to relevance, efficacy, efficiency, and sustainability:</p> <ul style="list-style-type: none"> • Reinventing the program with the same governance? • Phasing out the program? • Continuing country or local-level activities with or without devolution of implementation? • Seeking alternative financing arrangements, such as revenue-generation, or self-financing to reduce dependency on external sources? • "Spinning off" from the host organization?

Table B-3. Assessing the Bank's Performance as a Partner in the Program

Evaluation Questions
<p>1. Comparative advantage at the global/regional level. To what extent is the Bank playing up to its comparative advantages at the global/regional level — its global mandate and reach and convening power? To what extent is the Bank's presence as a partner in the program catalyzing other resources and partners for the program?</p>
<p>2. Comparative advantage at the country level. To what extent is the Bank contributing multi-sector capacity, analytical expertise, and country-level knowledge to the program? To what extent has the Bank's country operations established linkages to the GRPP, where appropriate, to enhance the effectiveness of both?</p>
<p>3. Oversight. To what extent is the Bank exercising effective and independent oversight of its involvement in the program, as appropriate, whether the program is housed in the Bank or externally managed? To what extent is the Bank's oversight independent of the management of the program? To what extent does the Bank's representative on the governing body have a clear terms of reference?</p>
<p>4. Risks and risk management. To what extent have the risks associated with the program been identified and are being effectively managed? For example, IEG identified the following risks in its global review:</p> <ul style="list-style-type: none"> • Bank bears a disproportionate share of responsibility for governing and managing in-house programs? • Confusion at the country level between global program activities, Bank activities, and Borrower activities? • Representation of NGOs and the commercial private sector on program governing bodies? • Unclear role and application of Bank's safeguards? • Trust-funded consultants and seconded staff representing the Bank on some program governing bodies?
<p>5. Disengagement strategy. To what extent is the Bank engaged at the appropriate level in relation to the Bank's new strategic framework:</p> <ul style="list-style-type: none"> • Watching brief? • Research and knowledge exchange? • Policy or advocacy network? • Operational platform? <p>To what extent is the Bank facilitating an effective, flexible, and transparent disengagement strategy for the program, in relation to the Bank's objectives for its involvement in the program:</p> <ul style="list-style-type: none"> • The program declares "mission accomplished" and closes? • The program continues and the Bank withdraws from all aspects of its participation? • The program continues and the Bank remains engaged, but the degree of the Bank's engagement in some or all aspects (such as financing) declines over time?

Table B-4. Common GRPP Activities

Advocacy and knowledge networking	
1. Facilitating communication among practitioners in the sector	This includes providing a central point of contact and communication among practitioners who are working the sector or area of development to facilitate the sharing of analytical results. It might also include the financing of case studies and comparative studies.
2. Generating and disseminating information and knowledge	This comprises two related activities. The first is gathering, analyzing and disseminating information, for example, on the evolving HIV/AIDS epidemic and responses to it, including epidemiological data collection and analysis, needs assessment, resource flows, and country readiness. The second is the systematic assembling and dissemination of knowledge (not merely information) with respect to best practices in a sector on a global/regional basis.
3. Improving donor coordination	This should be an active process, not just the side effect of other program activities. This may involve resolving difficult interagency issues in order to improve alignment and efficiency in delivering development assistance.
4. Advocacy	This comprises proactive interaction with policymakers and decision makers concerning approaches to development in a sector, commonly in the context of global, regional, or country-level forums. This is intended to create reform conditions in developing countries, as distinct from physical and institutional investments in public goods, and is more proactive than generating and disseminating information and knowledge.
5. Implementing conventions, rules, or formal and informal standards and norms	Rules are generally formal. Standards can be formal or informal, and binding or nonbinding, but implementing standards involves more than simply advocating an approach to development in a sector. In general, there should be some costs associated with noncompliance. Costs can come in many forms, including exposure to financial contagion, bad financial ratings by the IMF and other rating agencies, with consequent impacts on access to private finance; lack of access to OECD markets for failing to meet food safety standards, or even the consequences of failing to be seen as progressive in international circles.
Financing technical assistance	
6. Supporting national-level policy, institutional, and technical reforms	This is more directed to specific tasks than advocacy. This represents concrete involvement in specific and ongoing policy, institutional, and technical reform processes in a sector, from deciding on a reform strategy to implementation of new policies and regulations in a sector. It is more than just conducting studies unless the studies are strategic in nature and specific to the reform issue in question.
7. Capacity strengthening and training	This refers to strengthening the capacity of human resources through proactive training (in courses or on-the-job), as well as collaborative work with the active involvement of developing country partners.
8. Catalyzing public or private investments in the sector	This includes improving regulatory frameworks for private investment and implementing pilot investments projects.
Financing investments	
9. Financing country-level investments to deliver national public goods	This refers primarily to physical and institutional investments of the type found in Bank loans and credits (more than the financing of studies), the benefits of which accrue primarily at the national level.
10. Financing country-level investments to deliver global/regional public goods	This refers primarily to physical and institutional investments of the type found in Bank loans and credits (more than the financing of studies) to deliver public goods such as conserving biodiversity of global significance and reducing emissions of ozone-depleting substances and carbon dioxide, the benefits of which accrue globally.
11. Financing global/regional investments to deliver global/regional public goods	This refers to financing research and development for new products and technologies. These are generally physical products or processes — the hardware as opposed to the software of development.

Annex C. Global Fund: Income and Expenditures, CY 2004–08 (US\$ millions)

	2004	2005	2006	2007	2008	2004-08
Income						
Donor Contributions	1,273	1,488	2,339	2,684	3,693	11,478
Cash contributions received	1,099	1,581	1,650	2,791	2,925	10,046
Receivables (pledges, etc.)	174	-93	689	-107	768	1,432
Net investment income	29	60	126	240	291	747
Amortization of discount on notes and contributions receivable	9	10	20	35	50	124
Total Income	1,312	1,559	2,485	2,960	4,033	12,349
Expenditures						
Grant disbursements	613	1,067	1,321	1,723	2,262	6,986
Global Fund Secretariat	40	59	66	132	162	460
World Bank TF administration	2	2	2	2	2	12
Total Expenditures	656	1,128	1,389	1,858	2,426	7,457
Foreign currency exchange gain (loss)	41	-75	64	57	-79	
Net surplus	697	355	1,160	1,160	1,529	
Net cash inflow	443	453	261	933	499	
Other	254	-98	899	226	1,030	
Funds held in trust, end of year						
Undisbursed grant commitments	1,113	1,570	2,094	2,832	3,110	
Undisbursed administrative budget commitments	76	98	152	204	40	
Uncommitted funds held in trust	1,473	1,345	1,935	2,319	3,725	
Total funds held in trust	2,662	3,013	4,180	5,355	6,875	

Source: Annual Financial Statements, World Bank Administered Trust Fund for the Global Fund to Fight AIDS, Tuberculosis and Malaria, 2005 to 2008.

Annex D. Global Fund and World Bank Disbursements for Communicable Diseases, by Region and for Selected Countries in Each Region (US\$ Millions)

	Global Fund, Rounds 1-8 /1		World Bank, FY2000-09 /2	
	No. of countries	Disbursements	No. of countries	Disbursements
Sub-Saharan Africa	46	4,940.6	39	1,299.6
Ethiopia		589.8		138.0
Tanzania		384.1		66.7
Malawi		284.5		26.7
Zambia		279.5		48.9
Rwanda		270.4		26.1
Nigeria		223.4		166.1
DR Congo		191.3		157.1
Ghana		178.4		66.6
East Asia & the Pacific	12	1,212.3	10	237.8
China		378.5		108.2
Thailand		186.5		–
Indonesia		183.6		38.7
Cambodia		144.6		15.8
Philippines		104.2		28.1
Europe & Central Asia	22	847.2	19	206.5
Russian Federation		297.1		64.0
Ukraine		136.4		31.2
Romania		59.5		13.8
Georgia		36.4		2.2
Kazakhstan		34.8		1.4
Uzbekistan		33.2		15.8
Latin America & the Caribbean	22	741.6	19	290.9
Haiti		144.5		2.1
Peru		88.1		7.9
Honduras		56.8		6.8
Dominican Republic		56.6		8.3
Argentina		25.4		43.2
Brazil		11.0		185.4
South Asia	7	663.8	7	626.0
India		413.4		459.9
Bangladesh		111.1		53.9
Pakistan		51.3		71.5
Nepal		32.5		12.9
Afghanistan		30.3		17.9
Middle East & North Africa	10	124.2	2	22.5
Yemen		29.7		3.6
Morocco		25.5		12.5
Iran		22.3		–
Egypt		12.4		6.5
Tunisia		8.8		–
Grand Total	119	8,529.7	96	2,683.3

/1 From inception of the Global Fund to October 2, 2009

/2 For the for themes: HIV/AIDS, TB, Malaria, and Other Communicable Diseases