

532 West 111 Street #35, New York, NY 10025, USA Web: www.aidspan.org Email: info@aidspan.org Phone: +1-212-662-6800 Fax: +1-212-208-2543

# The Aidspan Guide to Obtaining Global Fund-Related Technical Assistance

First edition: 11 January 2004

Contents and Chapters 1 to 3 only

by

Sam Avrett and Bernard Rivers

# **Table of Contents**

Preface	1
Chapter 1: Introduction and Background  The Need for Global Fund-related technical assistance  Forms of Global Fund-related technical assistance	3 4
Chapter 2: An Overview of the TA providers Listed in this Guide	6
Chapter 3: How to Use this Guide	7
Chapter 4: Listing of Providers of Technical Assistance	
Category A1: Multilateral agencies claiming Global Fund-related TA experience	
ILO (International Labour Organization)	
PAHO (Pan American Health Organization)	
UNAIDS (Joint UN Programme on HIV/AIDS) UNDP (United Nations Development Programme)	
UNDP/IAPSO (UNDP Inter-Agency Procurement Service Office)	
UNFPA (United Nations Population Fund)	
UNICEF (United Nations Children's Fund)	
UNOPS (United Nations Office for Project Services)	
Category A2: Multilateral agencies NOT claiming Global Fund-related TA	
experience	13
MIM (Multilateral Initiative on Malaria)	13
Category B1: Government organizations claiming Global Fund-related TA experience	11
Belgium – Belgian Technical Cooperation (BTC)	
Croatia – Ministry of Health and Social Welfare	
Dominican Republic – Ministry of Health, TB Program	
France – Ministère des Affaires étrangères de France	15
Germany – GTZ BACKUP Initiative (of the Deutsche Gesellschaft für Technische Zusammenarbeit) Italy – Italian Cooperation (Directorate General for Development Cooperation of the Italian Ministry of Foreign Affairs)	of
U.K. – Department for International Development (DFID)	
U.S. – Department of Health and Human Services (HHS), Agency for International Development (Uand and other departments of the U.S. Government	SAID), 17
U.S. – New York State AIDS Institute	
Category B2: Government organizations NOT claiming Global Fund-related TA experience	
Finland – National Research and Development Centre for Welfare and Health (STAKES), Internatio	nal
Development Collaboration	
U.S. District of Columbia – HIV/AIDS Administration	
Category C1: Large NGOs/companies/etc. claiming Global Fund-related TA	
experience	
Academy for Educational Development (AED)	
AEDES	
Chemonics International Inc	
Deloitte	
Family Health International (FHI)	

The Futures Group	
Guangzhou University of Traditional Chinese Medicine, Tropical Medicine Institute	
International Federation of Red Cross & Red Crescent Societies	
John Snow Inc	
KPMG LLP	
Management Sciences for Health	
Pact Inc.	27
PricewaterhouseCoopers	
RTI International	28
Category C2: Large NGOs/companies/etc. NOT claiming Global Fund-related	I TA
experience	
Constella Group Inc.	
International Center for Equal Healthcare Access (ICEHA)	29 20
Montefiore Medical Center	
Program for Appropriate Technology in Health (PATH)	
Category D1: Medium NGOs/companies/etc. claiming Global Fund-related Ta	Α 04
experience	
ActionAid International	31
The African and American Healthcare Foundation	
AIDS Treatment Access - Cuba	
American Red Cross	
CARE International	33
Columbia University, Center for Global Health and Economic Development	33
Consultants for Health and Development	34
Cooperazione Internazionale (COOPI)	
Duke University Medical Center, Division of Infectious Diseases and International Health	
Faith Orphanage Foundation	
Foundation For Professional Development	
Harvard Medical School Division of AIDS	
HERA	
HIV Community Coalition	
IDA Foundation	
IHSD Ltd	
Instituto Chileno de Medicina Reproductiva (ICMER)	 20
International HIV/AIDS Alliance	
JHPIEGO	
Kenya AIDS NGOs Consortium (KANCO)	
Kenya Consortium to Fight AIDS, Tuberculosis and Malaria (KECOFATUMA)	
Letsatsi Small Business Solutions	42
Malaria Consortium	
AED/NetMark Africa Regional Malaria Program	
Network of People Living with HIV/AIDS in Nigeria (NEPWHAN)	
Open Society Institute / Soros Foundations Network	
Pangaea Global AIDS Foundation	44
Partners in Health	
PASCA Project	
Pathfinder International	
Reseau des Acteurs Intervenant dans la Lutte contre le SIDA et les infections Sexuellement	
Transmissibles (RAIL/SIDA/IST)	46
RNP+ Núcleo RJ	
Sankofa Health Inc	47
Save the Children UK	48
Save the Children USA	
Society for Social Welfare Agriculture and Rural Development (SSWARD)	
Swiss Tropical Institute, Swiss Centre for International Health	
Tata Institute of Social Sciences	
Université Bordeaux, Institut de Santé Publique d'Epidemiologie et de Développement (ISPED).	
Verve Consulting Pvt. Ltd.	
World Vision International	51
Category D2: Medium NGOs/companies/etc. NOT claiming Global Fund-relationship	ed TA
experience	
Advocates for Youth	
Advocates for Fourith	
,	

Concerned Medical and Health Care Professionals	
CREDES ECQ Group Inc	
ICRH (International Centre for Reproductive Health) – Ghent University	
Johns Hopkins University – Center for Communication Programs (CCP), Bloomberg School o Health	f Public
Khulisa Management Services	
MEDoctor Systems Inc.	
Options Consultancy Services	56
Population Media Center	
Red Peg	
Regional AIDS Training NetworkResources For Survival	
SAHARA	
SANIPLAN	
Saving Lives through Alternate Options (SLAO)	60
Southern African AIDS Trust (SAT)	
SSDS Inc.	
Unit for Social Behaviour Studies in HIV/AIDS (UNISA)VVOB	
World Academy of Biomedical Technologies	
Category E1: Small NGOs/companies/etc. claiming Global Fund-related TA	
experience	
AIDS Projects Management Group	
Aidspan	
Asia-Pacific Council of AIDS Service Organizations (APCASO)	64
Center for Health and Culture	65
EASE International	
Health Action International (HAI) Africa	
Helping Hands Unlimited Inc.	
International HIV/AIDS Institute	
Jonas Salk FoundationKIWAKKUKI (Kilimanjaro Women Against AIDS)	
Safina Health Development Network	
Category E2: Small NGOs/companies/etc. NOT claiming Global Fund-relat	ed TA
experience	
Better Days	69
Cellular Immunity Foundation	
Friendly Environment and Human Development Foundation	
Fundacio Institut Catala de FarmacologiaGlobal Health Strategies Pvt. Ltd.	
Global PEERS	
Haight Ashbury Youth Outreach Team & San Francisco Needle Exchange	72
Health Education Resource Organization (HERO)	72
IDA Solutions	
Liberty Research Group	
The Naz Foundation International	
Pharmaceutical Services Inc.	
Premiere International Health Care Inc.	
Public Resources	
Sage Associates Inc.	
University of Pisa, Department of Experimental Pathology	
Category F1: Individuals claiming Global Fund-related TA experience	
Sara Beysolow-Nyanti	
Michael Gibbs	
Sean Hewitt	
Liliana Hidalgo	
Pol Jansegers	
Dominique Kerouedan	
Ruthy D. Libatique	۱ ۵ ۱ ۵ ۱ ۸

	82
Doris Y. Mosley	82
Ben C. Nwobi	
Madeleine Marie-Louise Okome-Nkoumou	83
Chris Onyejekwe	84
Chaals Ossom	84
Mario Pecheny	85
Brigitte Renchon	
Lucy Reynolds	86
Kellie Wilson	86
Category F2: Individuals NOT claiming Global Fund-related TA exp	perience 87
Bertha Allen	
Olivier Appaix	
Hubert Brandon	
Nicky Davies	
Adeyemi Egbeleke	
Michael Fox	
Myrtise Kretsedemas	
Libby Levison	
Harold W. Lischner	
Garth Osborn	
Cristiane Rapparini and Vitória Vellozo	
María Inés Re	
Radhika Rohini	
Haynes W. Sheppard	
Krupa Laxman Shinde	
Karunesh Tuli	
Wendy Wilson	
,	
APPENDICES	96
Appendix 1: Alphabetical Index of TA Providers	96
··	
Appendix 2: Index of TA Providers by Region in which TA has bee	n Provided 100
Providers who have provided Global Fund-related TA in Central/S. America	
Providers who have provided Global Fund-related TA in the Caribbean	
Providers who have provided Global Fund-related TA in the Caribbean	101
	101 102
Providers who have provided Global Fund-related TA in the Caribbean Providers who have provided Global Fund-related TA in Central/E. Europe	101 102 102
Providers who have provided Global Fund-related TA in the Caribbean	
Providers who have provided Global Fund-related TA in the Caribbean	
Providers who have provided Global Fund-related TA in the Caribbean	
Providers who have provided Global Fund-related TA in the Caribbean	
Providers who have provided Global Fund-related TA in the Caribbean	
Providers who have provided Global Fund-related TA in the Caribbean	
Providers who have provided Global Fund-related TA in the Caribbean	
Providers who have provided Global Fund-related TA in the Caribbean	
Providers who have provided Global Fund-related TA in the Caribbean	
Providers who have provided Global Fund-related TA in the Caribbean	
Providers who have provided Global Fund-related TA in the Caribbean	
Providers who have provided Global Fund-related TA in the Caribbean	
Providers who have provided Global Fund-related TA in the Caribbean	
Providers who have provided Global Fund-related TA in the Caribbean	
Providers who have provided Global Fund-related TA in the Caribbean Providers who have provided Global Fund-related TA in Central/E. Europe Providers who have provided Global Fund-related TA in the Former Soviet Union Providers who have provided Global Fund-related TA in N. Africa / Middle East Providers who have provided Global Fund-related TA in Sub-Saharan Africa Providers who have provided Global Fund-related TA in South Asia. Providers who have provided Global Fund-related TA in East Asia Providers who have provided Global Fund-related TA in Southeast Asia Providers who have provided Global Fund-related TA in the Pacific Islands.  Appendix 3: Index of TA Providers by Country in which Based  Argentina Armenia Australia Belgium Brazil Chile China Croatia	
Providers who have provided Global Fund-related TA in the Caribbean Providers who have provided Global Fund-related TA in Central/E. Europe Providers who have provided Global Fund-related TA in the Former Soviet Union Providers who have provided Global Fund-related TA in N. Africa / Middle East Providers who have provided Global Fund-related TA in Sub-Saharan Africa Providers who have provided Global Fund-related TA in South Asia Providers who have provided Global Fund-related TA in East Asia Providers who have provided Global Fund-related TA in Southeast Asia Providers who have provided Global Fund-related TA in the Pacific Islands.  Appendix 3: Index of TA Providers by Country in which Based Argentina Armenia Australia Belgium Brazil Chile China Croatia Denmark	
Providers who have provided Global Fund-related TA in the Caribbean Providers who have provided Global Fund-related TA in Central/E. Europe Providers who have provided Global Fund-related TA in the Former Soviet Union Providers who have provided Global Fund-related TA in N. Africa / Middle East Providers who have provided Global Fund-related TA in Sub-Saharan Africa Providers who have provided Global Fund-related TA in South Asia Providers who have provided Global Fund-related TA in East Asia Providers who have provided Global Fund-related TA in Southeast Asia Providers who have provided Global Fund-related TA in the Pacific Islands.  Appendix 3: Index of TA Providers by Country in which Based Argentina Armenia Australia Belgium Brazil Chile China Croatia Denmark Dominican Republic.	
Providers who have provided Global Fund-related TA in the Caribbean Providers who have provided Global Fund-related TA in Central/E. Europe Providers who have provided Global Fund-related TA in the Former Soviet Union Providers who have provided Global Fund-related TA in N. Africa / Middle East Providers who have provided Global Fund-related TA in Sub-Saharan Africa Providers who have provided Global Fund-related TA in South Asia Providers who have provided Global Fund-related TA in East Asia Providers who have provided Global Fund-related TA in Southeast Asia Providers who have provided Global Fund-related TA in the Pacific Islands.  Appendix 3: Index of TA Providers by Country in which Based Argentina Armenia Australia Belgium Brazil Chile China Croatia Denmark Dominican Republic Finland	
Providers who have provided Global Fund-related TA in the Caribbean	
Providers who have provided Global Fund-related TA in the Caribbean	
Providers who have provided Global Fund-related TA in the Caribbean	
Providers who have provided Global Fund-related TA in the Caribbean	
Providers who have provided Global Fund-related TA in the Caribbean	101 102 102 103 103 105 106 106 107 108 108 108 108 108 109 109 109 109
Providers who have provided Global Fund-related TA in the Caribbean Providers who have provided Global Fund-related TA in Central/E. Europe Providers who have provided Global Fund-related TA in the Former Soviet Union Providers who have provided Global Fund-related TA in N. Africa / Middle East Providers who have provided Global Fund-related TA in Sub-Saharan Africa Providers who have provided Global Fund-related TA in South Asia Providers who have provided Global Fund-related TA in East Asia Providers who have provided Global Fund-related TA in Southeast Asia Providers who have provided Global Fund-related TA in the Pacific Islands  Appendix 3: Index of TA Providers by Country in which Based Argentina Armenia Australia Belgium Brazil Chile China Croatia Denmark Dominican Republic Finland France Gabon Germany Ghana Guatemala India.	
Providers who have provided Global Fund-related TA in the Caribbean	
Providers who have provided Global Fund-related TA in the Caribbean Providers who have provided Global Fund-related TA in Central/E. Europe Providers who have provided Global Fund-related TA in the Former Soviet Union Providers who have provided Global Fund-related TA in N. Africa / Middle East Providers who have provided Global Fund-related TA in Sub-Saharan Africa Providers who have provided Global Fund-related TA in South Asia Providers who have provided Global Fund-related TA in East Asia Providers who have provided Global Fund-related TA in Southeast Asia Providers who have provided Global Fund-related TA in the Pacific Islands  Appendix 3: Index of TA Providers by Country in which Based Argentina Armenia Australia Belgium Brazil Chile China Croatia Denmark Dominican Republic Finland France Gabon Germany Ghana Guatemala India.	101 102 103 103 103 105 106 106 107 108 108 108 108 109 109 109 109 109 109 109 109 109 109

Madagascar	110
Malaysia	
Namibia	
Netherlands	110
Niger	110
Nigeria	
Norway	110
Philippines	110
South Africa	110
Spain	111
Switzerland	111
Tanzania	111
Uganda	111
U.K	111
Ukraine	111
U.S.A	111
Zambia	
Zimbabwe	112
Appendix 4: Index of TA Providers by Language Capacity Other than Eng	lish 113
Providers whose TA staff have professional skills in Arabic	113
Providers whose TA staff have professional skills in Chinese	
Providers whose TA staff have professional skills in French	
Providers whose TA staff have professional skills in Portuguese	116
Providers whose TA staff have professional skills in Russian	
Providers whose TA staff have professional skills in Spanish	118
Providers whose TA staff have professional skills in Other (non-European) Languages	120
Appendix 5: Text of Original Aidspan Letter Regarding the Guide	122

#### **Preface**

"One imperative for our collective success is in-country technical assistance. Countries require TA so that they can achieve their targets to prevent and treat AIDS, TB and malaria, with the help of finance from the Fund and others. This support must be sourced broadly:

- Multilaterals have a strong role to play...[to] ensure development linkages at the
  country level,...mobiliz[e] greater involvement by local business and trade unions,
  [and] ... coordinat[e] this response, both globally and with the range of stakeholders
  at the country level.
- Bilateral support is equally critical. Bilateral programs work on the ground to support countries and their priorities comprehensively. This is necessary to ensure that our funding is not vertical, but supportive of improved health systems. ...
- NGOs and the private sector can also and must provide technical assistance.
   NGOs use modest funds to maximum effect, and they can guide others on how to
   manage funds and leverage capacity. The private sector in-country represents an
   incredible opportunity...[for] implementing ARV workplace programs,... teach[ing]
   others about information management and patient tracking systems,...[and] help[ing]
   maximize the value of funds going to mass media campaigns."

 Richard Feachem, Executive Director of the Global Fund, at the Fund's June 2003 board meeting

This Aidspan publication is one of five free Aidspan guides to be produced during 2004 for Global Fund applicants and recipients, as follows:

- The Aidspan Guide to Obtaining Global Fund-Related Technical Assistance (Released 11 January 2004)
- The Aidspan Guide to Applying to the Global Fund (Due second half of January 2004)
- The Aidspan Guide to Starting Implementation of a Global Fund Grant (Due second quarter 2004)
- The Aidspan Guide to Building and Running an Effective CCM (Due second quarter 2004)
- The Aidspan Guide to Procurement and Supply Management for Recipients of Global Fund Grants (Due second quarter 2004)

All five Guides are due for completion prior to the Bangkok International AIDS Conference in July 2004, and it is hoped that they will feature in some skills-building and/or satellite sessions at that conference.

These Guides are being produced by Aidspan because no larger organization has come forward to produce them. The Global Fund itself is too over-worked and too short-staffed to be able to develop such materials.

#### **Downloads**

To download a copy of any of these Guides, go to <a href="www.aidspan.org/guides">www.aidspan.org/guides</a>. If you do not have access to the web but you do have access to email, send a request to <a href="guides@aidspan.org">guides@aidspan.org</a> specifying which of the currently-available Guides you would like to be sent as attachments to an email.

Aidspan does not have the resources to produce or distribute printed copies of these Guides.

#### Aidspan

Aidspan is a small US-based non-governmental organization (NGO) that works to promote increased support for and effectiveness of the Global Fund to Fight AIDS, Tuberculosis and Malaria (the Global Fund). Aidspan also publishes the Global Fund Observer (GFO) newsletter, an independent emailbased source of news, analysis and commentary about the Global Fund. GFO is sent to 4,500 readers in over 150 countries. To receive GFO at no charge, send an email to receive-gfo-newsletter@aidspan.org. Subject line and text can be left blank.

Aidspan and the Global Fund maintain a positive working relationship, but have no formal connection, and Aidspan accepts no grants or fees from the Global Fund. In particular, therefore, the Global Fund bears no responsibility for the content of this Guide or of any other Aidspan publication.

#### Updates and corrections

Aidspan will publish an updated edition of this Guide during the first half of February 2004. All organizations that are featured in this Guide (or that are not, but wish to be) are invited to provide corrected or new data to Aidspan by the end of January 2004 for inclusion in the February edition. Instructions for doing so will be provided at <a href="www.aidspan.org/quides/submissions">www.aidspan.org/quides/submissions</a> by 13 January 2004. The updated edition will be placed at www.aidspan.org/guides and its publication will be announced in GFO.

#### **Translations**

It is hoped to release French, Spanish and possibly Russian versions of each Guide within a month of the release of the English version. Information of any such release will be posted at www.aidspan.org/guides and in GFO. It is also hoped soon to publish French and Spanish versions of GFO.

#### Acknowledgements etc.

Aidspan thanks the following for their advice during the early stages of development of this Guide: Michael Adelhardt, Richard Burzynski, Jim Cashel, Kieran Daly, Doris D'Cruz-Grote, David Garmaise, Brad Herbert, Bill McGreevey, Kim Nichols, Tim Thomas and the many representatives of TA organizations who submitted data. Aidspan alone is responsible for any shortcomings.

Aidspan thanks its funders for the support they have provided for 2003-4 operations – the Open Society Institute, the Monument Trust, the John M. Lloyd Foundation, the MAC AIDS Fund, and three private donors.

Sam Avrett and Bernard Rivers, authors of this Guide, can be reached at <a href="mailto:savrett@earthlink.net">savrett@earthlink.net</a> and rivers@aidspan.org.

Permission is granted to reproduce, print or quote from this document in part or in whole if the following is stated: "Reproduced from the 11 January 2004 version of 'The Aidspan Guide to Obtaining Global Fund-Related Technical Assistance', available at www.aidspan.org/quides.'

This Guide is based primarily upon data submitted by TA-providing organizations. Aidspan assumes that these organizations were truthful in their submissions. Data provided by these organizations was when necessary translated into English, and was occasionally edited for space reasons or to improve clarity.

Copyright © January 2004 by Aidspan, New York, USA. All rights reserved.

## **Chapter 1: Introduction and Background**

This Guide is intended to be useful to any country or organization that is considering applying to the Global Fund, or whose grant application has been approved by the Fund. It contains the first directory ever published of organizations and individuals that provide Global Fund-related technical assistance.

The Global Fund is a multi-billion-dollar international financing mechanism intended to help advance the fight against AIDS, tuberculosis and malaria by dramatically increasing the availability of funding for practical health initiatives. Funding is allocated to disease prevention, treatment, and care and support. Funded activities include both piloting of new and innovative programs and scaling up of existing interventions. The objective is to make it easier for affected countries to improve availability of health services, build national capacity, promote behavior change, conduct operational research, and gain access to critical health products, such as medicines to treat HIV, tuberculosis, and malaria.

With only a few exceptions, Global Fund grants are available only to programs designed and implemented by multi-sectoral partnerships in developing countries – partnerships defined and termed *Country Coordinating Mechanisms* (CCMs)<sup>1</sup>. These partnerships can include government, non-government and community-based organizations, academic and educational organizations, people living with HIV, tuberculosis, or malaria and related patient and consumer groups, the private sector, faith-based organizations, and multilateral and bilateral development organizations.

During the past two years, the Global Fund has approved three 'rounds' of funding proposals. As of 31 December 2003, the Fund had committed a total of \$2.05 billion, of which it had disbursed \$232 million toward proposals approved in those first three rounds. And as of 9 January 2004, actual contributions into the Global Fund by all donors amounted to the \$2.10 billion.

#### The Need for Global Fund-related technical assistance

This Guide seeks to serve three sets of readers:

- (a) Countries and organizations that plan to apply to the Global Fund in the Fourth or later Round of funding, and that seek TA to assist them with preparing their application. (Round 4 was launched on 10 January 2004, and applications must be submitted to the Fund by 5 April 2004.)
- (b) Countries and organizations that were approved to receive a Global Fund grant in Round 1, 2 or 3, and that seek TA in implementing their grant.
- (c) "Global Fund-related TA providers" (that is, organizations and individuals that seek to provide TA to applicants for and recipients of Global Fund grants) that wish to be aware of and possibly share ideas with other TA providers.

During 2004, the Global Fund will approve Round 4 grants, and also begin approving renewals of Round 1 grants as these grants complete their second year. This will place a considerable financial burden on the Fund unless donor countries significantly increase their funding commitments.

Therefore Round 4 may be the last chance for some time for countries to submit new proposals. Although the Global Fund has awarded grants to more than 100 countries, many eligible countries have never received any funding from the Global Fund – either because they did not apply, or because their applications did not succeed. These include at least eight sub-Saharan African countries, at least five countries in Latin America and the Caribbean, at least five countries from among the Baltic states and the Balkans, and at least ten countries in Asia and the Pacific Islands.

Furthermore, between Round 2 and Round 3, there was an increase in the percentage of proposals deemed ineligible for funding by the Global Fund's Technical Review Panel (TRP), and an overall

\_

<sup>&</sup>lt;sup>1</sup> Normally, the Fund only considers applications from CCMs. But occasionally it will consider applications from NGOs or from groups of NGOs – for instance, in countries where there is no functioning CCM, or in countries where the CCM does not tackle some necessary activity (such as working with drug users), or where a cross-border response is appropriate.

decrease in the amount of funding recommended per round, indicating a possible need for TA to boost both the quantity and quality of funding requests.<sup>2</sup>

More than 100 countries around the world have had grant proposals approved by the Board of the Global Fund. There are several steps between grant approval by the Global Fund Board and ultimate receipt of grant funds by the applicant. These steps include an evaluation by the TRP of the grantee's response to the TRP's questions about the proposal; an assessment of the intended Principal Recipient (PR) and of its plans; and final grant contract negotiations. The assessment of the Principal Recipient is extensive and, as outlined in a 150-page guidance document, includes assessment of institutional and programmatic capacity, financial and management systems, procurement and supply management ability, and capability for monitoring and evaluation. The effort to meet the high requirements of the Global Fund in these various areas is generating a significant demand for TA. (The forthcoming Aidspan Guide to Starting Implementation of a Global Fund, mentioned in the Preface above, is intended to provide assistance regarding these assessments.)

#### Forms of Global Fund-related technical assistance

Many types of organizations have already provided Global Fund-related TA to CCMs and other potential applicants in this process. These include:

- Multilateral agencies, such as WHO, UNDP, World Bank, ILO and UNAIDS.
- Bilateral development agencies, such as DFID, GTZ, USAID, the US CDC, and NORAD.
- In-country and international NGOs, from very large to very small.
- For-profit companies, including corporations contributing pro-bono resources, and corporations seeking to generate revenue from TA.
- Technically qualified individuals able to contribute expertise as volunteers or as paid staff and consultants.

"Global Fund-related TA" – a term used frequently in this Guide – includes all activities designed to assist CCMs, CCM member organizations, and non-CCM applicants to adequately meet Global Fund requirements. This definition can be further elaborated in three ways:

TA can vary according to what TA is provided, including:

- providing information tailored to the needs of the recipient
- providing skilled people short-term or permanent staffing, consultants, experts, researchers, and project managers
- providing funding to support TA-related people and activities
- providing equipment, supplies, and space to support TA-related people and activities.

TA can vary by when the TA is provided, including:

 pre-proposal TA, to provide strategic guidance about whether to apply to the Global Fund, how a proposal or its underlying project might be structured, organizing and facilitating CCMs, identifying and structuring main parties (such as Principal Recipient, sub-recipients, and technical partners), and helping with initial proposal preparation

The Aidspan Guide to Obtaining Global Fund-Related Technical Assistance
11 January 2004 Page 4

<sup>&</sup>lt;sup>2</sup> Between Round 2 and Round 3, the percentage of eligible proposals recommended by the TRP went down from 43% to 39%, and the dollar value of the recommended proposals as a percentage of the dollar value of all eligible proposals went down from 41% to 34%. (See GFO Issue 13 at <a href="https://www.aidspan.org/gfo/archives/newsletter">www.aidspan.org/gfo/archives/newsletter</a>.) Contributory reasons might be that the countries most capable of submitting good applications had already done so; that these countries were not yet ready to submit applications for follow-up projects (or didn't realize that the Fund is very open to additional proposals being submitted long before earlier projects have been completed); and that some applicants simply didn't understand that the type of application they were submitting had almost no chance of being recommended by the TRP.

- proposal support, including help with writing and/or editing a Global Fund proposal that reflects technically sound program and budget plans, and that represents broad input from all the players represented on the country CCM.
- support after the Global Fund has approved the proposal, up to the point of final Global Fund grant negotiations and signature, to assist the CCM in responding to technical questions and to assist the CCM and Principal Recipient through the Principal Recipient assessment
- support once Global Fund grant funding is underway to help Principal Recipients, subrecipients, CCMs, and intended program beneficiaries and consumers to ensure adequate implementation, outcomes, and impact of funded programs.

Finally, TA can vary according to the specialized nature of assistance provided, including

- general assistance, such as:
  - support in sponsoring and organizing meetings, such as meetings of CCMs, proposal-writing teams, and technical expert teams,
  - support for general document writing, editing, translation and production.
  - support for developing linkages, partnerships, and working relationships, such as ensuring the involvement of NGOs or improving the participatory and inclusive functioning of CCMs.
- assistance that is specific to potential Global Fund grants for disease prevention, health promotion, treatment and care, and health products supply and management, including:
  - provision of supporting data, such as country-specific epidemiological and clinical information about HIV/AIDS, tuberculosis and malaria that supports design of programs against these diseases.
  - support in developing and conducting needs assessments and operational research to prepare for Global Fund applications.
  - support in program design, including design of new innovation or pilot projects, and also including design of scale-up programs and national adaptation of successful pilot projects.
  - program planning, including detailed systems analysis and operations planning.
  - Design and integration of monitoring and evaluation plans, and establishment of coordination and reporting mechanisms.
  - budget and accounting support, including detailed program costing, and establishment of financial disbursement and reporting mechanisms.

#### Research methods in developing this Guide

Aidspan researched and wrote this Guide during an eight-week period from early November 2003 to early January 2004, following the Global Fund board decision that Round 4 would be launched on 10 January 2004.

Aidspan's outreach and consultation for this report included five broad phases:

- In early to mid November, development of the project in consultation with a range of experts and advisors (noted in the Preface section of this report). During this period, it became clear that there was no pre-existing directory of TA providers from which meaningful data could be extracted, and that therefore the Guide would have to be compiled completely from scratch.
- In late November, distribution of information about a 15-question survey in four languages to the 4,500 people around the world who receive GFO. (See text in Appendix 5.) Most people who then accessed the survey did so at Aidspan's web site, but other methods were offered to those who do not have web access.

- In early December, communication with up to 10,000 additional people through the
  distribution lists of the Global Health Council, GTZ, the International AIDS Economics
  Network (IAEN), ICASO, the International HIV/AIDS Alliance, NMAC, and more.
- In mid-December, further outreach to TA providers based on an analysis of responses received by the original December 12 survey deadline.
- In early January, data confirmation with those who had responded to the survey.

Notwithstanding this outreach, Aidspan acknowledges that this Guide probably excludes a number of the following types of TA provider:

- Those providers without access to email during December 2003.
- Those who weren't on any of the distribution lists we used
- Those who operate in languages other than English, French, Spanish and Russian (the four languages used in the survey and the contact letter).
- Those who weren't ready as of December to declare their availability to provide TA.
- Those based in a single country who are already in contact with the CCM in that country and do not aspire to providing Fund-related TA in other countries.
- Those government agencies and other large TA providers whose decision-making processes were too slow to enable them to respond in time to the survey.

In cases where large organizations have operating units in multiple countries, Aidspan sometimes received responses from several of these units. Aidspan then sought and obtained agreement on a single listing to represent the entire global operations of each such organization.

Aidspan edited survey responses only for clarity and formatting purposes. Aidspan therefore makes no claims regarding the accuracy of each TA provider's claims and descriptions listed here.

As discussed in the Preface, Aidspan plans to publish an updated version of this Guide in February.

# Chapter 2: An Overview of the TA providers Listed in this Guide

This Guide lists contact information and descriptive text regarding 170 Global Fund-related TA providers. Of these, 135 are organizations and 35 are technically-qualified individuals. Throughout this Guide, these have been organized into twelve categories, as follows:

Category A1: Category A2:	9 1	Multilateral agencies claiming Global Fund-related TA experience Multilateral agency NOT claiming Global Fund-related TA experience
Category B1: Category B2:		Government organizations claiming Global Fund-related TA experience Government organizations NOT claiming Global Fund-related TA experience
Category C1: Category C2:	15 4	Large NGOs/companies/etc. claiming Global Fund-related TA experience Large NGOs/companies/etc. NOT claiming Global Fund-related TA experience
Category D1: Category D2:	42 22	Medium NGOs/companies/etc. claiming Global Fund-related TA experience Medium NGOs/companies/etc. NOT claiming Global Fund-related TA experience
Category E1: Category E2:		Small NGOs/companies/etc. claiming Global Fund-related TA experience Small NGOs/companies/etc. NOT claiming Global Fund-related TA experience
Category F1: Category F2:	18 17	Individuals claiming Global Fund-related TA experience Individuals NOT claiming Global Fund-related TA experience

"Large" organizations are ones that say they have at least 50 staff available to provide Fund-related TA. "Medium" means 5 to 49 such staff, and "Small" means under 5.

The continents and countries in which the 170 TA providers have their primary base of operations are:

Continents:							
Africa	25	Australasia	1	Western Europe	40	Latin America	8
Asia	9	Eastern Europe	3	International	18	North America	66

Countries:							
Argentina	2	Finland	1	Liberia	1	Spain	1
Armenia	1	France	5	Madagascar	1	Switzerland	1
Australia	1	Gabon	1	Malaysia	2	Tanzania	1
Belgium	8	Germany	3	Namibia	1	Tanzania	1
Brazil	2	Ghana	1	Netherlands	3	Uganda	1
Chile	1	Guatemala	2	Niger	1	UK	13
China	2	India	4	Nigeria	3	Ukraine	1
Croatia	1	International	18	Norway	1	USA	66
Denmark	1	Italy	3	Philippines	1	Zambia	1
Dominican Republic	1	Kenya	4	South Africa	7	Zimbabwe	1

## **Chapter 3: How to Use this Guide**

Starting on page 97 are appendices that provide indexes of the 170 TA providers, listing them (a) alphabetically, (b) by global region in which they have provided Fund-related TA, (c) by country in which they are based, and (d) by language capacity.

Readers of this Guide who are seeking potential TA providers may wish to go through the following steps:

- Determine, arising from the discussion under "Forms of Global Fund-related technical assistance" in Chapter 1 above, the reasons why you seek a TA provider and what role you want the provider to play.
- Study all the listings in this Guide, to identify a shortlist of TA providers of interest to you.
- Conduct further research on these TA providers by studying their web sites, and, if possible, by getting advice about them from trusted experts and advisors.
- Contact the TA providers of interest by e-mail. In your e-mail, identify who you are and what your TA needs are. Let them know whether you are contacting just a few TA providers, or many. Then ask the TA provider questions such as the following:
  - Do you have TA experience and/or TA staff in my country and region?
  - Can you provide examples of your work that demonstrate your knowledge and experience related to our TA needs?
  - Have you previously conducted TA for Global Fund applicants or recipients? If so, who are they, and can you provide names of people who will serve as references? Can you provide names of other experts who will attest to the guality of your work?
  - Are you available for a TA project and/or partnership designed to meet our current needs? When would you be able to do the work?
  - Will you need payment? If so, on what terms? Might you be able to help us identify other partners who could pay for the TA costs?
  - Regardless of your availability and cost for a longer-term project, are you available at no charge in the short-term to help us define our TA needs and to clarify the terms of reference for a possible paid TA project?
  - If a TA partnership seems possible, how would be proceed? What would be the first steps? Would you be able to meet with us in person?
  - Who are all of the people available from your organization for TA; and for each of them, what is their expertise and accessibility (skills, experience, languages, availability, contact information, cost, ability to travel)?
  - When would we decide on a contract, and what are your contractual expectations?