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Stop TB Partnership

Coordinating Board, Osaka, 19-21 February 2002

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Next steps in Resource Mobilisation: Priority Setting and Donor Coordination

A concept paper for the Stop TB Coordinating Board



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Overview

This paper begins by setting forth a clarified version of the role of the Coordinating Board with respect to resource mobilisation and the implementation of the Global Plan to Stop TB. Second, it sets out options to develop a user-friendly guide for fund raising/resource mobilisation and for the allocation of Partnership funds controlled by the Coordinating Board. Third, fully accessing new and existing funding sources is discussed. Fourth, alternatives are proposed for immediate action on donor coordination at the global level. Fifth, this paper provides a time line for action and summarises activities for endorsement by the Coordinating Board¹.

1. THE ROLE OF THE COORDINATING BOARD IN RESOURCE MOBILISATION

The STOP TB Partnership launched the Global Plan to Stop TB in Washington, October 2001, expressing the need for an additional \$ 4.1 billion from now until 2005 to fight TB, thereby taking responsibility for achieving the 2005 targets. Some of the STOP TB Working Groups have substantial resource mobilisation capacity in their own right. However, the Coordinating Board has the ultimate responsibility on behalf of the Partnership for ensuring the funding and implementation of the Global Plan to Stop TB.

According to the Basic Framework document of the Stop TB Partnership, section 2.2.2 Functions, the Board shall formulate priorities for action by the Partnership in line with health policy and technical advice from WHO and in light of the recommendations of the Forum.

The Coordinating Board therefore must be the policy making body for decisions on Partnership wide resource mobilisation priorities and for the allocation of any funds that may be mobilised for use according to Partnership priorities. This paper sets out options for a mechanism by which stand-alone, fundable elements of the Global Plan to Stop TB may be packaged in a user friendly format with information on their ranking according to a series of criteria. The result is a product - updated annually -

¹ Next steps for political and social mobilisation are provided in the separate "STB Advocacy and Communications Strategy" document. Likewise, a separate document describes the function and membership of a composite STB Technical Review Committee (TRC) that could carry out some of the functions described below.



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that will provide guidance to donors and to the Coordinating Board in making decisions on the allocation of funds. The relationships between the Coordinating Board and the other components of the partnership are described in the Global Plan to Stop TB² and illustrated in Annex 1. (Note that the DOTS Expansion Working Group will continue to monitor use of available resources and the size of the resource gap at country level.)

Recommendation 1: *The Coordinating Board should commission an annual categorisation of fundable stand-alone, fundable elements of the Global Plan to Stop TB selected according to Board-approved criteria .*

2. SELECTION, CATEGORISATION AND PACKAGING : CREATING THE DIRECTORY

For year 2002, a three stage process is proposed for selection, categorisation and packaging of stand-alone, fundable elements of the Global Plan to Stop TB. The product envisioned is a directory of projects which can be thought of as a menu. The format of the directory can be determined following a stakeholder analysis carried out by the Secretariat, drawing on resource mobilisation expertise. The directory could be used directly by partners, by the Coordinating Board in choosing priorities for the allocation of pooled funding or resource mobilisation, and by resource mobilisation and marketing experts for the preparation of donor-specific resource mobilisation materials.

The three stages are:

- a) Sort which Global Plan elements should go into the directory. This would use a limited set of criteria such as timing of need for financing, technical feasibility, and degree of dependence on cofinancing. These criteria would be determined by the Coordinating Board on the recommendation of a Technical Review Committee³. Working groups would propose those elements of their workplans which should be considered for immediate inclusion in the directory.
- b) Compile elements of the directory, with information provided on each of a set of characteristics as well as a detailed budget (See options for characteristics and categories in Annex 2 table 1) . More detailed budget information would need to be provided by the Working Groups. Characteristics would also be determined by the Coordinating Committee on the recommendation of a Technical Review Committee.
- c) Produce the directory. This would be undertaken by the Secretariat, incorporating private sector, marketing and resource mobilisation expertise.

² The relationships between the Coordinating Board, Secretariat and Working Groups are described in the Global Plan to Stop TB, Prepublication version, pp 96-97.

³ A proposal for this Technical Review Committee composition and terms of reference are presented in a separate document for presentation to the Coordinating Board meeting in Osaka.



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Starting in year 2003, it is proposed that the Working Groups present their budgets in terms of standalone fundable Global Plan elements which are activity-based and provide a shortlist of those Global Plan elements they wish to propose for inclusion in the 2003 directory. This would shorten the sorting phase into a simple verification and review of the submitted short lists by the TRC prior to compilation of the directory.

The rapidly changing environment makes it impossible to set priorities among elements of the Global Plan to Stop TB from now up to 2005. An annual review cycle is proposed. Working Groups (WG), the Global Drug Facility (GDF) and the Secretariat should calculate their budgets annually using a unit of stand alone Global Plan elements following a given format. Characteristics of pre-selected Global Plan elements can be compiled in a directory for priority setting and resource mobilisation. The directory would comprise those stand alone Global Plan elements which are ready to absorb funds immediately, have no anticipated technical or administrative bottlenecks, and are endorsed by the Working Group as priorities for quick funding. WGs can propose those Global Plan elements which they would most like to see included in the upcoming directory, with the selection to be recommended to the Coordinating Board by the Technical Review Committee for a final decision. This system should be operative by mid-2002

Recommendation 2: The Secretariat should draw on resource mobilisation expertise to carry out a stakeholder analysis to determine the format of the directory. A TRC should develop for approval by the CB: 1. Criteria for pre-sorting elements of the Global Plan to Stop TB, , 2. a model for the directory including relevant characteristic to use in categorising these Global Plan elements. The Secretariat should draw on private sector experience, resource mobilisation and marketing expertise to present a plan for packaging the elements in the directory and a strategy for using the directory as a tool for priority setting by the Coordinating Board when required and to produce targeted resource mobilisation materials in accordance with a resource mobilisation strategic plan.

3. FULLY ACCESSING EXISTING AND NEW FUNDING MECHANISMS

The Coordinating Board should ensure that actions are taken urgently by the appropriate partners to inform and support countries in accessing new resources as they become available, particularly the GFATM. It should also ensure through the work of the partners that all WGs, GDF and eligible countries are fully informed on options for financing elements of the Global Plan to Stop TB. While guarding



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against conflict of interest, partners can inform donors, through expert opinion, about the strengths and weaknesses of country proposals. This can take place through direct consultation with those donor groups or bodies, and/or through the 'directory' described above.

Recommendation 3: *The Coordinating Board should ensure that actions are taken urgently by the appropriate partners to inform and support countries in accessing existing financial resources and new resources as they become available, particularly the GFATM.*

4. Donor Coordination and the Resource Mobilisation Strategic Plan

Based on the Global Plan, the directory and the expertise the partnership has to offer, donors should be approached to stimulate their involvement in achieving the partnership goals. To that end the resource mobilisation component of the Secretariat Workplan should be fully implemented with immediate effect. This should include the recruitment of resource mobilisation expertise and the development of a resource mobilisation strategic plan.

Serious effort should be undertaken to interest the corporate sector in TB control. Funding should be sought for an additional Secretariat staff person as business liaison.

To mobilise resources, the CB, in particular its members from the donor community, should convene a meeting of donors to present the Global Plan and the actions of the partnership for implementation. Such a meeting should promote donor co-ordination, recognising the special roles of the World Bank and the GFATM.

Options for such a meeting include an independent meeting sponsored by a high level patron who will have the political pull to bring in donor representatives at the decision-making level. The Coordinating Board would need to identify and recruit such a potential patron. Alternatively, the donor meeting can be linked to another meeting that is likely to draw a similar level of participant. Examples are as follows:

- Combine with a meeting intended to recruit potential new donors or major donors to the Global Fund.
- Combine with the World Health Assembly in Geneva or the World Bank annual meeting
- Combine with a meeting of philanthropic and charitable organisations, such as the Global Health Council Meeting
- Combine with meeting of business leaders and corporate philanthropies, such as the World Economic Forum at Davos/New York



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- Combine with the G8 meeting in Kananaskis.

Recommendation 4: Obtain resources from public and private sources by fully implementing the resource mobilisation elements of the Secretariat Work Plan. Further, the Secretariat should recruit a qualified individual for a business liaison post to generate resource flow from the corporate sector. The Coordinating Board should instruct the Secretariat on the nature and timing of a donor meeting to promote donor co-ordination and to mobilise commitment to the Global Plan to Stop TB among donors.

TIMEFRAME

ACTION	IMPLEMENTER	COMPLETION DATE
1. Approval of TRC	CB	21-2-02
2. TRC operational	TRC	01-03-02
3. Commission stakeholder analysis to determine best format for a directory of fundable Global Plan elements	Secretariat	15-03-02
Stand alone Global Plan element format developed, sorting criteria established and submitted to CB for no objections clearance	TRC	15-3-02
4. Clearance of Global Plan element format and sorting criteria	CB	20-03-02
5. Global Plan element format and sorting criteria distributed to WGs, GDF and Secretariat	Secretariat	21-03-02
6. Proposals of stand alone Global Plan elements, including detailed budgets, from Working Groups, GDF and Secretariat for inclusion in directory:	WGs, GDF, Secretariat	30-03-02
7. Characteristics and categories for the electronic database developed and submitted to the CB	TRC	30-03-02
8. CB discussion, amendment, and decision on characteristics and categories	CB	15-04-02
9. Creation of directory entries	TRC	30-04-02
10. Packaging of directory entries by RM and marketing professionals	Secretariat	30-05-02
11. Creation of electronic directory and targeting of specific Global Plan elements for specific donors	Secretariat	30-06-02



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12. CB discussion, amendment and decision	CB	15-07-02
13. Directory in full use	All	01-08-02
14. Donor Coordination meeting	CB and Secretariat	15-07-02

Recommendation 5: Endorse or amend proposed timeframe for action.

Activities for Endorsement by the Coordinating Board

Activity 1: Commission an annual categorisation of stand-alone, fundable elements of the Global Plan to Stop TB selected according to Board-approved criteria .

Activity 2: Task the secretariat to draw on resource mobilisation expertise for a stakeholder analysis to determine the best format for the directory.

Activity 3: Appoint and assign responsibility to a TRC to develop the following for approval by the CB: 1. Criteria for pre-sorting elements of the Global Plan to Stop TB, , 2. a model for a directory including relevant criteria for categorising Global Plan elements.

Activity 4: Task the Secretariat to draw on private sector experience, resource mobilisation and marketing expertise to present a plan for packaging the Global Plan elements in the directory, and a strategy for using the directory for priority setting by the Coordinating Board when required, and to produce targeted resource mobilisation materials in accordance with a resource mobilisation strategic plan.

Activity 5: Ensure that actions are taken urgently by the appropriate partners to inform and support countries in accessing existing financial resources and new resources as they become available, particularly the GFATM.

Activity 6: Obtain resources including in-kind contributions from public and private sources by fully implementing the resource mobilisation elements of the Secretariat Work Plan.

Activity 7: Task the Secretariat to recruit a qualified individual for a business liaison post to generate resource flow from the corporate sector.



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Instruct the Secretariat on the nature and timing of a donor meeting to promote donor co-ordination and to mobilise commitment to the Global Plan to Stop TB among donors.

Activity8: Endorse or amend proposed timeframe for action.

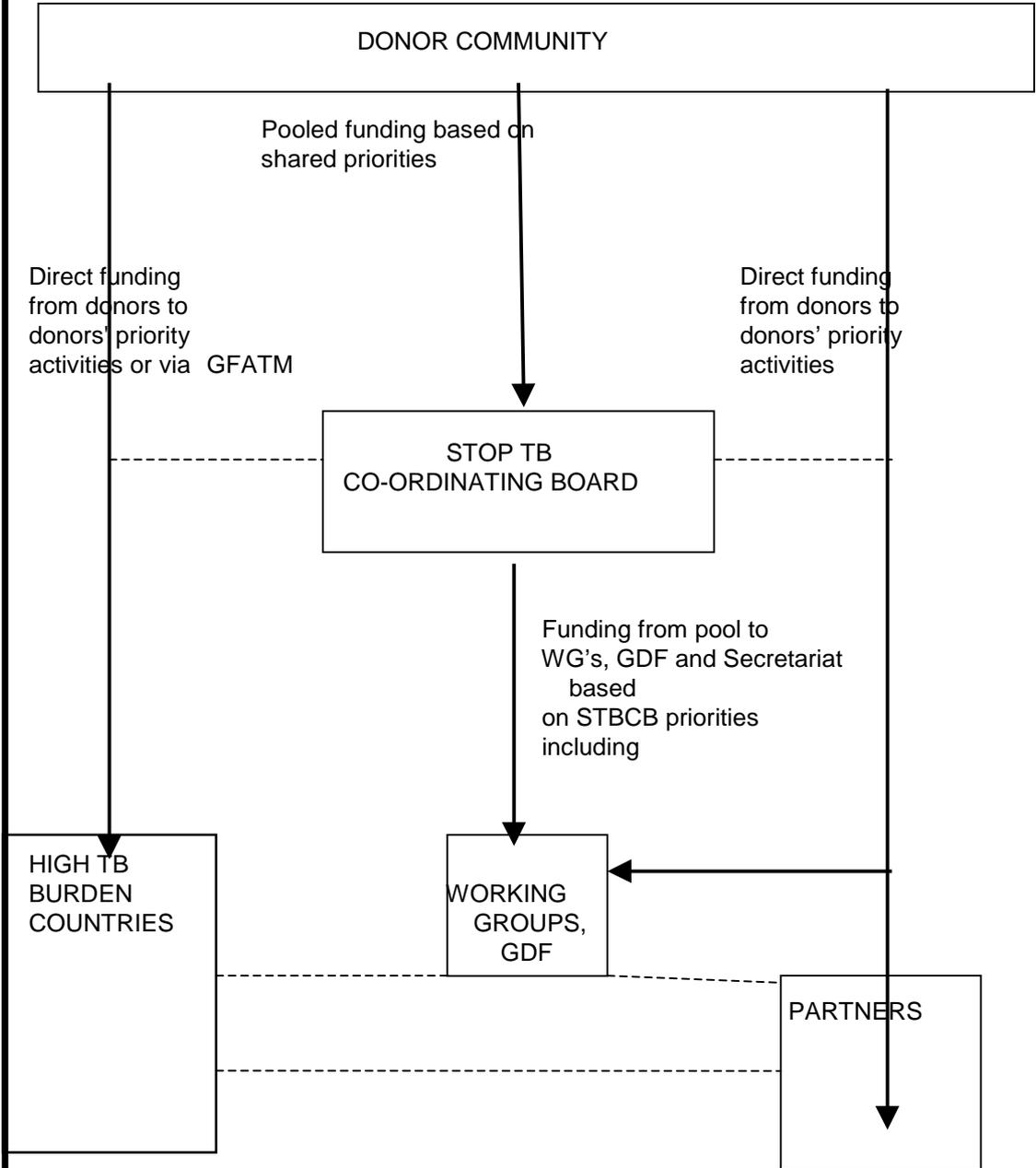
Annex 1



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Position of the CB with respect to donor community, working groups, partners and TB burden countries. Resource flows (arrows) and resource flow information channels (dashed lines) are indicated.

Annex 2

Options for Characterising and Categorising Global Plan Elements

A possible format for a directory could allow that a selection of characteristics (category) can be made to assemble Global Plan Elements with desired characteristics. Options for categories and characteristics are provided in the table below.

Table 1: Options for characteristics and categories for use in the proposed directory

ACTIVITY	IMPLEMENTATION	IMPACT
<p>Origin</p> <p>GDF DOTS expansion TB/HIV MDR Diagnostics GATB Vaccines</p>	<p>Urgency</p> <p>funding required now within budget year within given period</p>	<p>Intended outcome</p> <p>case finding & treatment better DOTS delivery new tool capacity building efficiency coordination</p>
<p>Ownership</p> <p>Partnership priority WG priority Partner priority Country priority: In country plan? In PRSR? Local/community priority</p>	<p>Linkages</p> <p>Links to other items in the directory Links to other initiatives</p>	<p>Sustainability</p> <p>Long range financial plan Link with advocacy plan</p>
<p>Costs</p> <p>< \$ 100k 100k – 1M > 1M</p>	<p>Readiness</p> <p>ready for funding within budget year within given period</p>	<p>Cost-effectiveness</p> <p>Quantifiable plus value where known not quantifiable</p>
<p>Recipient</p> <p>Country NGO WG Partnership</p>	<p>Dependencies</p> <p>stand alone other ABC cofinancing required outside conditions need to be fulfilled</p>	<p>Probability of success</p> <p>Evidence of successful implementation outcome assured > 75% > 50 % cannot be estimated</p>
<p>Nature</p> <p>Disease control Pilot project Operational research Tool development Infrastructure Facilitation</p>	<p>Duration</p> <p>single occasion < 1 year 1 – 3 years sustained</p>	<p>Collateral impacts/benefits</p> <p>other diseases infrastructure co-ordination advocacy</p>



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