

The Register of Unfunded Quality Demand

February 2015

The Register of Unfunded Quality Demand has been launched

The register is an **innovative tool** that provides a **granular view** of unfunded demand that has been assessed by the TRP as **strategically focused and technically sound**. It is a **living inventory** that will be updated as new demand is processed by the GAC and items are funded.

The register is **not intended as a comprehensive record of global demand** for the three diseases and associated HSS. It contains only demand expressed by applicants to the Global Fund in their concept note, which **in some cases is less than the full needs**.

The register can be a **powerful tool** to mobilize resources

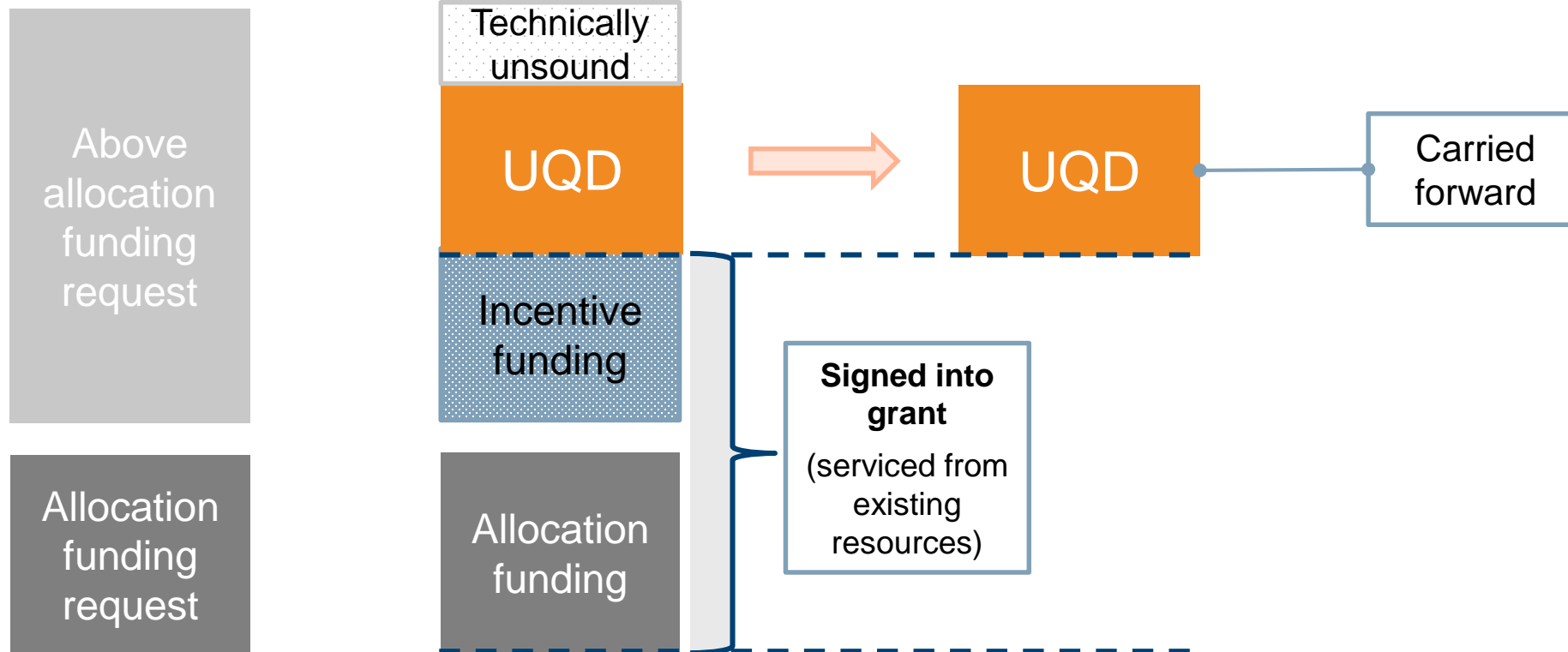
- from donors (private sector, high net worth individuals, emerging economy donors); and
- from in-country stakeholders to advocate for increased domestic financing

Policy framework

1 Concept note submission

2 Concept note review

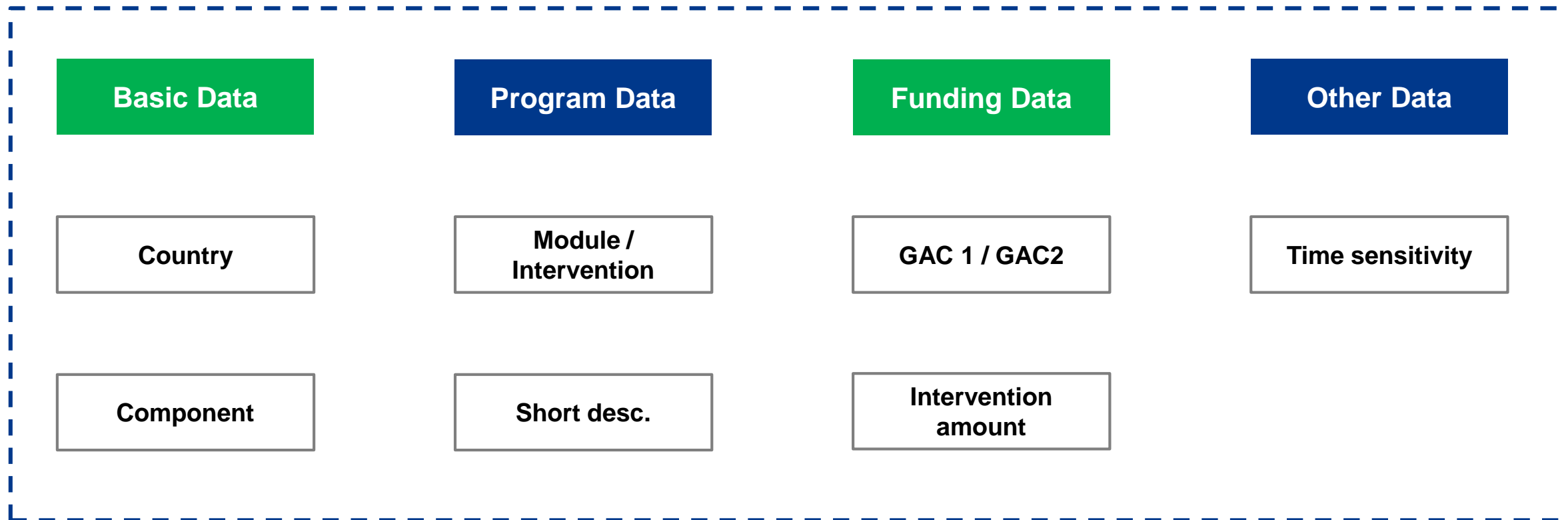
3 Unfunded Quality Demand Register



Register is populated based on quality demand submitted in concept notes

Contents of the published register

Published Register contains key programmatic and financial information



Published register: on-line

<http://www.theglobalfund.org/en/uqd/>

1 Full register of UQD

Register of Unfunded Quality Demand



Full Register of UQD

Source Data										Publication Date: 09 February 2015
Country	Region	Component	Band	UQD Approval Stage	Date Entered	Max Entry Expiration	Module	Intervention	Further UQD Description (if applicable)	Sum of Amount Registered for UQD (US\$)
Total										\$0.00 M \$0.00 M
Afghanistan	SEA	HSS	2	GAC1	17/10/2014	-	-	-	No above allocation request by the country	\$0.00 M
Afghanistan	SEA	TB	2	GAC1	17/10/2014	-	-	-	No above allocation request by the country	\$0.00 M
Afghanistan Total										\$0.00 M
Armenia	ECCA	TB	4	GAC1	17/10/2014	-	Community systems strengthening			\$0.11 M
Armenia	ECCA	TB	4	GAC1	17/10/2014	-	MDR-TB	Case detection and diagnosis: MDR-TB	Upgrade of additional 10 analog mass miniature radi	\$0.38 M \$0.49 M
Armenia Total										\$0.49 M
Bangladesh	HI Asia	HIV	1	GAC1	12/12/2014	-	Community systems strengthening			\$0.25 M
Bangladesh	HI Asia	HIV	1	GAC1	12/12/2014	-	HSS-Health Information Systems	Prevention programs for MSM Behavioral change as part of programs for MSM and 12 new Opioid Substitution Treatment (OST) centres		\$0.43 M
Bangladesh	HI Asia	HIV	1	GAC1	12/12/2014	-	HSS-Health Information Systems	Prevention programs for people Behavioral change as part of programs for HIV and Additional 14,300 MSM and 1,277 TB to be covered, a		\$0.18 M
Bangladesh	HI Asia	HIV	1	GAC1	12/12/2014	-	HSS-Service delivery	Prevention programs for sex workers Behavioral change as part of programs for sex workers. Additional 9,600 sex workers to be covered		\$1.46 M
Bangladesh	HI Asia	Malaria	1	GAC2	12/12/2014	11/12/2017	Case management	Facility-based treatment		\$1.93 M
Bangladesh	HI Asia	Malaria	1	GAC2	12/12/2014	11/12/2017	HSS-Health Information Systems	Robber reporting		\$0.35 M
Bangladesh	HI Asia	Malaria	1	GAC2	12/12/2014	11/12/2017	HSS-Service delivery	Improving laboratory systems		\$0.88 M
Bangladesh	HI Asia	Malaria	1	GAC2	12/12/2014	11/12/2017	Program management	Policy, planning, coordination and management		\$0.70 M
Bangladesh	HI Asia	Malaria	1	GAC2	12/12/2014	11/12/2017	Vector control	Indoor residual spraying (IRS)		\$1.79 M
Bangladesh	HI Asia	Malaria	1	GAC2	12/12/2014	11/12/2017	Vector control	Vector control (Module)	Full coverage in	\$11.90 M
Bangladesh	HI Asia	TB	1	GAC2	12/12/2014	11/12/2017	MDR-TB	Row: Bangladesh - HI Asia - Malaria - 1 - GAC2 - 12/12/2014 - 11/12/2017 - Vector control		\$11.30 M
Bangladesh	HI Asia	TB	1	GAC2	12/12/2014	11/12/2017	TB Case and prevention	Case detection and diagnosis		\$24.60 M
Bangladesh	HI Asia	TB	1	GAC2	12/12/2014	11/12/2017	TB/HIV	TB/HIV collaborative interventions		\$0.39 M
Bangladesh Total										\$56.16 M
Bhutan	SEA	Malaria	4	GAC2	12/12/2014	11/12/2017	-	-	No above allocation request by the country	\$0.00 M
Bhutan	SEA	TB	4	GAC2	12/12/2014	11/12/2017	-	-	No above allocation request by the country	\$0.00 M
Bhutan Total										\$0.00 M
Bulgaria	ECCA	TB	4	GAC2	12/12/2014	11/12/2017	-	-	No above allocation request by the country	\$0.00 M

2 Component analysis

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Component Analysis

1. Select component: HIV, HSS, Malaria, TB, TB/HIV

2. Select UQD approval stage: GAC1, GAC2

3. Select Module: Case management, Community systems strengthening, HSS - Financial management, HSS - Health information systems, HSS - Policy and governance, HSS - Procurement supply chain, Program management

4. Select Intervention (optional): Grant management, IEC/BCC, Improving laboratory systems, Indoor residual spraying (IRS), Institutional capacity building, planning and leadership development, Integrated community case management (ICCM), Intermittent preventive treatment (IPT) in pregnancy, Long-lasting insecticidal nets (LLIN) - Continuous distribution

Amount Registered

3 Country analysis

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Country analysis

1. Select country: Armenia, Bangladesh, Cambodia, Chad, Georgia (Democratic Rep.), Cote d'Ivoire, Cuba, Gabon, El Salvador, Ghana, Guinea, Honduras, Iran, Myanmar

2. Select component: HIV, HSS, Malaria, TB, TB/HIV

3. Select UQD approval stage (optional): GAC1, GAC2

4. Select Region (optional): ECCA, FFA1, FFA2, FFA3, LAC, MENA, SA, SEA, WA

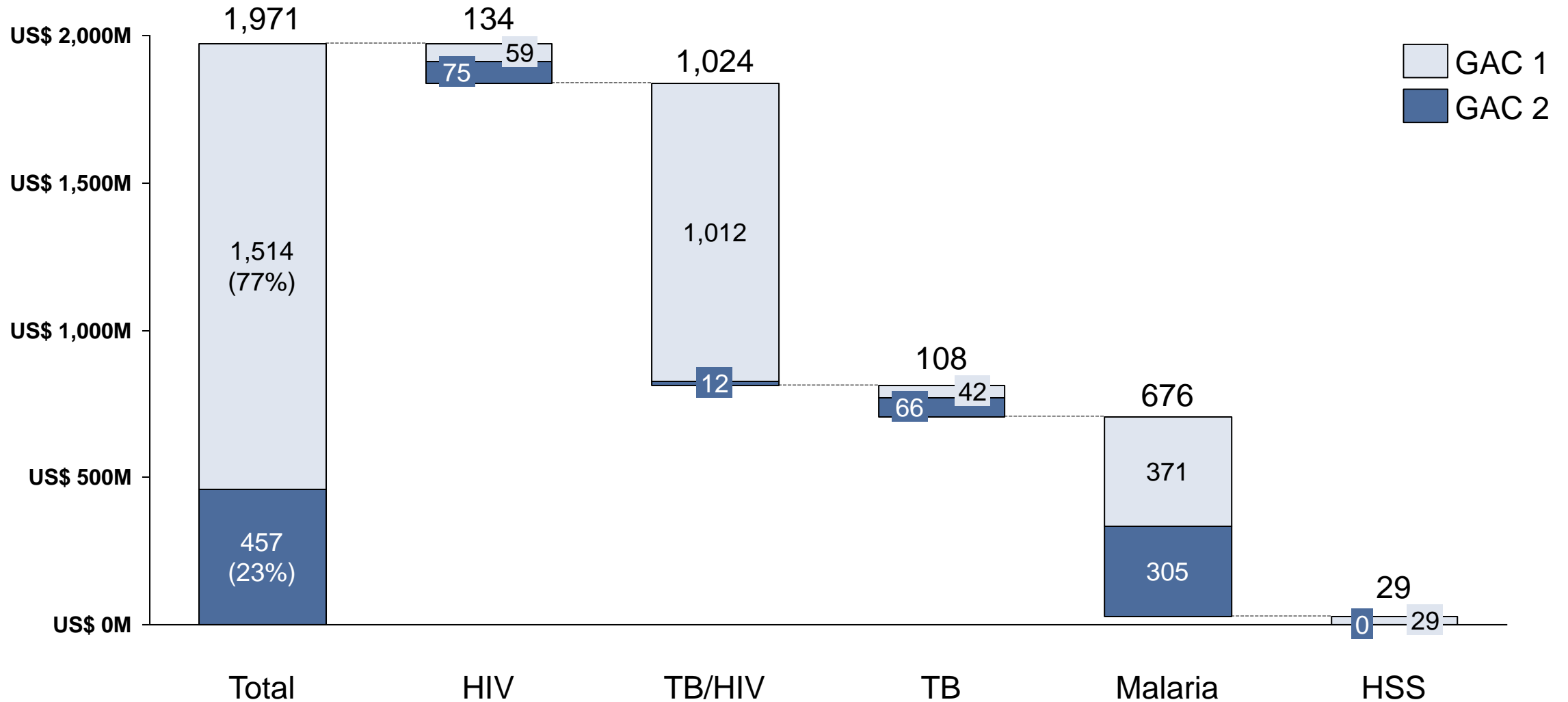
Amount Registered for UQD (US\$)

Country	Component	Module	Intervention	UQD Approval Stage	Further UQD Description (if applicable)	Amount Registered for UQD (US\$)
Armenia	TB	MDR-TB	Community systems strengthening	GAC1	For additional operational research in	80.11M
TB Total			Case detection and diagnosis	GAC1	Upgrade of additional 10 analog mass	80.43 M

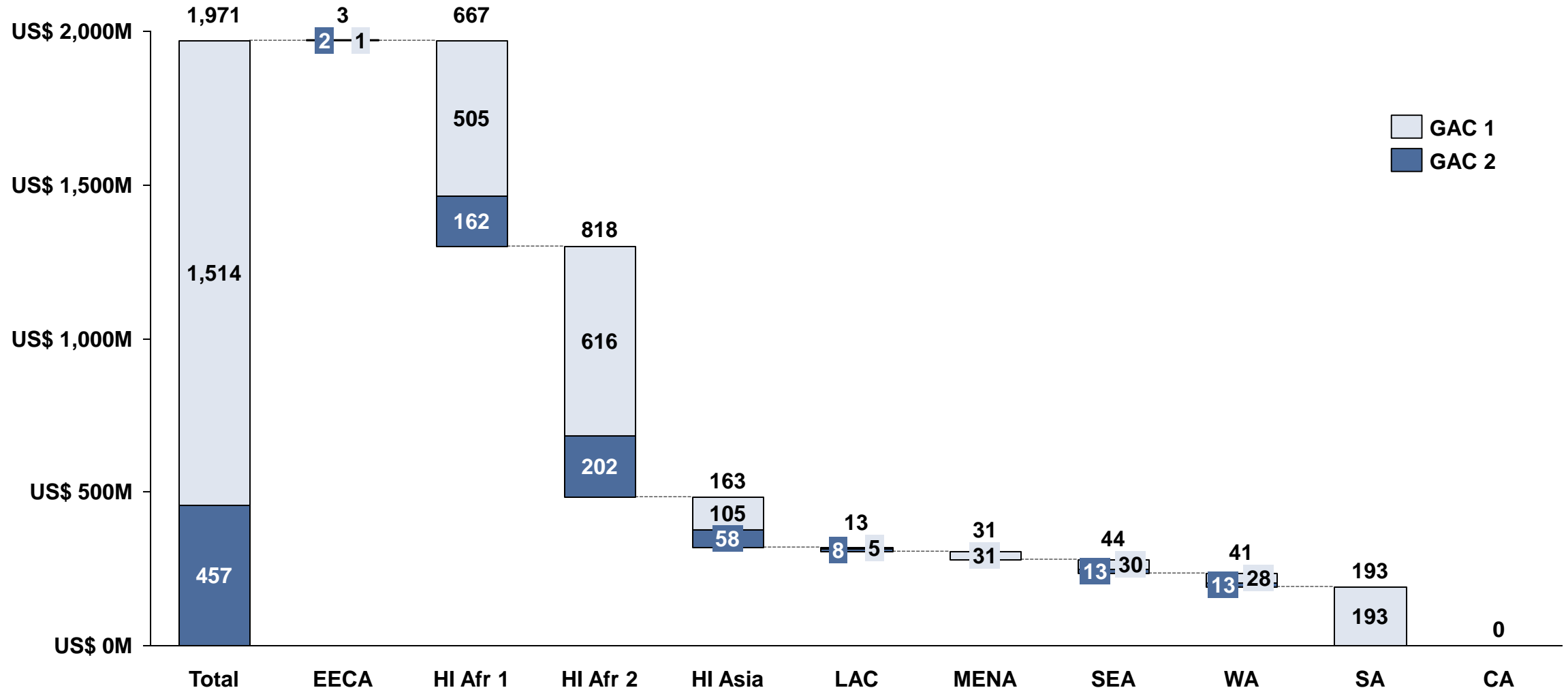
Excel workbook is searchable and analyzable using in-built analysis tools

Break down of UQD by disease level and stage

Currently **US\$1,971 million** of unfunded quality demand entered on register



Break down of UQD by Global Fund region



Two possible funding streams for items on the Register

1. Resources through the Global Fund

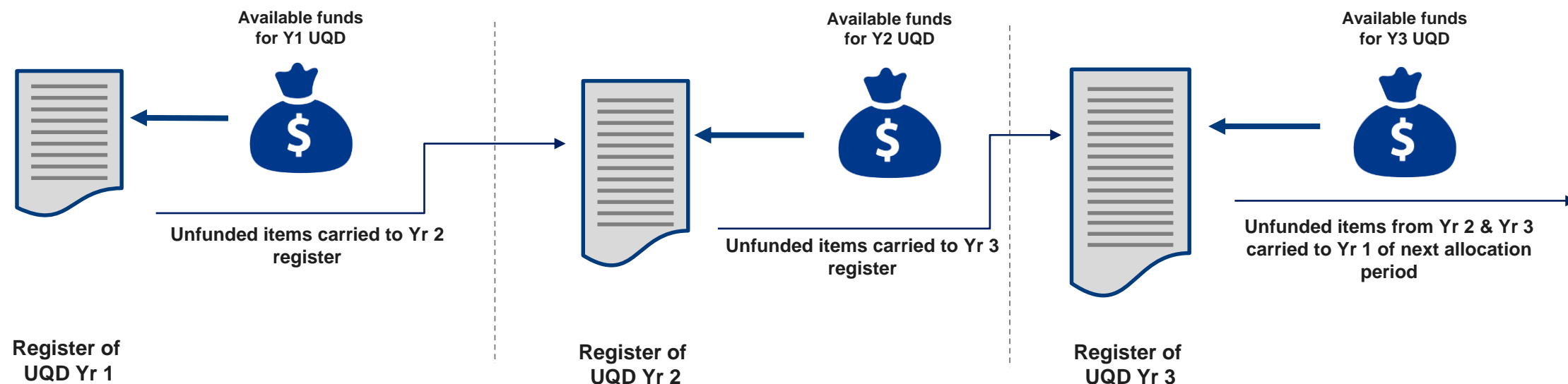
- 1** Any **additional Global Fund resources** that the Finance and Operational Performance Committee (FOPC) approves as available for the register based on an annual assessment
- 2** Additional resources from **eligible non-government donors to specific country disease components**
May include private donors (such as corporations, foundations and individuals) and approved public mechanisms (i.e. UNITAID and Debt2Health)

2. Direct co-investments

Investments in items on register managed through independent processes and engagement with beneficiaries of such co-investments

1 Source 1: Global Fund resources

Annual assessment of resources to finance UQD



- Annual assessment if additional resources available. Secretariat makes recommendation for FOPC decision
- If additional resources available, funds awarded to highest priority demand
- Ensures equal competition and greatest opportunity to secure funding
- “Shelf life” of up to three years (with validation)

2 Source 2: Additional resources from eligible donors

1. Eligible donations under Complementary Restricted Financial Contributions (CRFC)

- Limited to private donors (e.g. corporations, foundations and individuals) and authorized public mechanisms (e.g. UNITAID and Debt2Health)
- Support grants approved by Board and activities of the Secretariat in line with the recipient-driven, Board-determined priorities
- Not result in unreasonable transaction costs for the Global Fund or substantial changes to Global Fund systems and processes

2. Restrictions on CRFC

- Support the UQD of a country or country disease component
- Eligible donors are precluded from prescribing the specific items of such UQD that would be financed by CRFC

3. Points to note

- **CRFC may be excepted from parts of SIIC endorsed process for prioritizing and awarding resources available to UQD, particularly annual assessments of additional resources for UQD and prioritization of items**
- CRFC subject to Amended CFP and standard financial and operational processes
- CRFC made through the Global Fund are subject to funding approval by the Board prior to inclusion into grant
- Unutilized portions of CRFC become unrestricted sources of funds available for the Global Fund grant portfolio
- Total amount of CRFC is less than the total sum of Global Fund financing committed to any grant receiving such contributions, ensuring that the programmatic results of such grants remain primarily attributable to contributions from all Global Fund donors

Validation of unfunded items

1. GAC1: Register captures 'quality demand' interventions from reviewed concept note
2. Interventions are validated during grant-making and descriptions and budgets are updated after GAC2

Interventions may not be added at this point – only those interventions from the concept note are validated

3. If funding is potentially available, either from eligible donors or the Global Fund, then further validation would occur

When and how is the Register shared?

- The Register will be published quarterly on Global Fund internet, if there are new entries
- First version went on-line 11 February 2015
- Interested donors can contact the Global Fund's Private Sector team to engage in more detailed discussions around areas of interest (e.g. region, country, disease component)