
Introduction:
The Global Fund to fight AIDS, Tuberculosis and Malaria (the Global Fund) was established in 2002 as a performance-based funding mechanism, in which continued disbursements are contingent upon a country’s ability to demonstrate progress in grant implementation. From 2004 to 2008, the Global Fund approved tuberculosis grants in 110 low- and middle-income countries, totaling US$2.2 billion in funding for TB control worldwide. This study reviews 108 Global Fund TB grants in 88 countries in order to identify grant-related and country-specific factors that impact the performance quality of Global Fund TB grants with a minimum duration of 9 months. Performance was measured as the ratio of major output indicators to corresponding targets, such as the number of smear-positive TB cases detected and treated.

Key Findings:
- According to progress reports submitted by recipient countries, output indicators for Global Fund TB grants met on average 89% of the corresponding targets set in country grant proposals.
- Grants were less likely to perform well in countries with political instability and in countries with a high prevalence of TB.
- Successful completion of a grant’s second year comprehensive evaluation and duration of funding were both positively associated with performance.
- Grant performance tended to increase sharply after the first 15 months of funding, reaching around 95% by month 22.
- Other factors associated with performance were the extent to which a grant budget responds to need (measured as Phase I budget per smear-positive TB case) and type of local fund agent (the independent organization hired by the Global Fund to provide oversight of the grants).

Analysis:
- The relationship between grant performance and the successful completion of second year comprehensive evaluation suggests that the Global Fund’s performance-based financing approach motivates recipients to perform well.
- Grants exceed their targets in their fifth year, suggesting that more ambitious targets can be set. On the other hand, targets for the first two years of funding may be overambitious, particularly in high-burden countries.
- Grant performance as measured in the study depends on the targets set by individual countries. This might explain in part why high-burden countries had on average lower grant performance, since they tended to set more ambitious targets.

Takeaways:
- Since grant performance improves with time, countries should strive to establish sustainable TB control programs.
- Recipient countries need to set ambitious but attainable targets throughout the period of funding.
- Good performance can be achieved even in low-income settings and in countries with weak health system.

GHDonline Recommendations:
- Share your experience with Global Fund-supported TB grants in a new discussion, including tips for successful applications
- TB Impact Measurement: Policy and recommendations for how to assess the epidemiological burden of TB and the impact of TB control (Resource)
• Advocacy Strategy for Adoption and Dissemination of the WHO Policy on TB Infection Control in Health-Care Facilities, Congregate Settings and Households: Recommended Actions at International and National Levels (Resource)