

## Appendix 2

# Key Informant Interview Topic Guides

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# Key informant interview topic guide: global-level

**NB:** each topic guide was adapted to the expertise and experience of the key informant.

Information about the interviewee			
Interviewee ID		Gender	
Category (e.g. GHI, bilateral, academic, etc.)		Any previous relevant roles (mention category)	
Level (global, regional, country)		Detail of country/region	
Name of interviewer		Date of Interview	

**Introductory piece:** highlight the six GHIs as focus of our work, but also their place within the wider global health ecosystem, and the timeframe is 10-20 years, with a mandate of *‘articulating a clear vision of what the GHI ecosystem should seek to achieve over the next 15-20 years to strengthen health system capacities and deliver health impacts’*.

GHIs for the purpose of this study: The recommendations of this study will be primarily aimed at the 6 major GHIs identified by the FGHI/Wellcome Trust and include the following:

- Gavi, the Vaccine Alliance
- The Global Fund to Fight AIDs, TB, and Malaria (GFATM)
- The Global Financing Facility for Women, Children and Adolescents (GFF)
- Unitaid
- Foundation for Innovative New Diagnostics (FIND)
- Coalition for Epidemic Preparedness Innovations (CEPI)

The study has received ethical approval from the University of Geneva. You will not receive any compensation or acknowledgement for your participation in this interview. The interview is semi-structured, so you are free to digress from the questions I ask, however, I may re-direct you if we are going off-topic. This interview is not of a sensitive or emotive nature. However, you are free to refuse to answer any question, skip a question, and stop the interview at any time. If it is OK with you, we/I will audio-record this interview to transcribe the data after the call. The recording will be destroyed once the project concludes. Are you OK with this?

## **Challenges and Strengths for current ecosystem and GHIs**

1. Looking at the current status quo in global health architecture, but also looking forward over the next 1-2 decades, **what do you think are the main challenges and strengths that we face?**

- How do you think these challenges are seen **from a country perspective?**
- How do you think **broad trends in disease burden, economic growth and other factors** will change this picture over the next 10-20 years?
- What do you think about **trends in domestic financing** and how they will change the picture over this timeframe?

2. **How do you think the current mandate of the GHIs fits within this picture?** How do they need to evolve?

*If talking to a GHI: "What do other actors think of [your GHI]? What are the main critiques that you hear? What are your views about those critiques?*

- **How could GHIs evolve? How should they evolve?** Are there good and bad scenarios?
- Are there **areas of the current global health ecosystem / GHIs that you think are more successful than others at the moment?** ...or have the prospect of success in the longer term?
- Have you seen **any positive examples of changes**, big or small, in the way that the current eco system is operating? What were they?

#### **If we think about reform, or changing the status quo....**

3. **Where does the power to make changes to the global health architecture or to keep the status quo sit in the current system?**

- Would you describe it as **concentrated or diffuse?** (follow up on how, why etc).
- Is this **changing or quite stable?** (if changing, where to, etc)
- Are there **competing narratives or discourses when you think about how GHIs will evolve?** What are they? Which is most influential? Who is driving them and to what effect?
- Are there any **proposals for change in the system** that are currently being discussed which you think have promise for sustaining positive change? What are they?
- What do you think are the **key features or preconditions for a proposal for change** to be likely to succeed?
- **Previous attempts at reform:**
  - what has been proposed / tried in the past to address some of these challenges and what do you think has been more/ less successful?
  - is there a pattern in how these have gone wrong or succeeded? Are there any themes that we can discern?
  - what actors block or support change and how?
  - what role have country actors played in this in the past?
  - do you think any of these dynamics are changing, and if so, how?

*Have you had any direct experience of any of these reforms? What happened? Who really wants change? And who does not want it?*

- What are the **lessons for us** in these previous attempts?

#### **4. Their own view**

In your view, what should the GHIs be seeking to achieve in the next phase (10-20 years)? What is your **vision for them?**

- What the **key changes** are that should be made in the next 20 years to have a GHI and global health architecture that supports UHC across all countries?
  - What would the **signs of a well-functioning global health ecosystem** be?
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# Key informant interview topic guide: Pakistan case study

## Interview Details

<b>Date &amp; Time of Interview</b>	
<b>Name of Interviewer</b>	
<b>Interview Location</b>	

## Participant Details

<b>Title and Full name</b>	
<b>Designation</b>	
<b>Institution</b>	

GHIs for the purpose of this study: The recommendations of this study will be primarily aimed at the 6 major GHIs identified by the FGHI/Wellcome Trust and include the following:

- Gavi, the Vaccine Alliance
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- Coalition for Epidemic Preparedness Innovations (CEPI)

## Part A. Understanding the current context

To what extent would GHIs' current mandates and ways of working need to evolve to effectively, efficiently and equitably contribute to strengthen health system capacities and deliver health impacts?

- |   |
|---|
| <ol style="list-style-type: none"><li>1. Based on your experience and expertise, how are funding priorities set between GHIs and country government?</li></ol> <ul style="list-style-type: none"><li>• How well does this match with current disease burden of the country and other contextual needs (private sector/ economic challenges etc)?</li><li>• What are the plans and foreseeable trends for domestic financing over next 15-20 years, and how well have these been incorporated in setting country funding priorities with GHIs?</li></ul> |
|---|

<p>2. What are the main problems that you would identify with how GHIs are functioning as well as key strengths, in terms of:</p> <p>Funding streams provided (supplies, TA, additional financing, monitoring etc)</p> <p>Efficiency of funding?</p> <p>Approach to co-financing?</p> <p>Aligning with country plans and targets?</p>
<p>3. What are the main problems and key strengths with how GHIs are functioning, in terms of:</p> <p>Accountability of financing and targets between GHIS and country</p> <p>Alignment between GHIs and other partners for aid delivery and targets</p> <p>Narratives about what is the role of GHI</p>
<p>4. Where does power and authority lie in setting aid targets, disbursements and review of aid channeling through GHIs?</p>
<p>5. To what extent are there competing narratives about role of GHIs or is there common understanding?</p>

## Part B. Mapping a path forward

What needs to be done differently? What changes are required to support this?

**N.B.** Recommendations may cover a spectrum of ambition, and include both long-term changes and short-term wins. They should focus on the GHI ecosystem as a whole rather than specific institutions, and may potentially include: the improvement, expansion, or merging of current mechanisms; the creation of new mechanisms; the elimination of existing mechanisms; governance structure reforms; strategic reforms / revisions to current mandates; or the strengthening of alignment, coordination and cooperation.

<p>1. Can you describe some strengths and achievements of recent efforts to strengthen GHI coordination and alignment (such as SDG 3 GAP and UHC2030)? What are their weaknesses?</p>
<p>2. What other reform proposals are either under development or need to be considered to strengthen GHI efficiency, effectiveness and equity? What has hindered past reform efforts?</p>
<p>3. What lessons learnt from the COVID-19 pandemic could be used to strengthen GHI efficiency, effectiveness, and equity? Could be used towards more coordinated and coherent health systems?</p>
<p>4. What are the opportunities and risks of GHI funding reform pathways, compared to maintaining the status quo? Impacts should be considered over a 15-20 year time horizon.</p>
<p>5. How can reform efforts be given the greatest chance of success? I.e. What is required (incentives for both donors, recipient countries, behaviors, and the GHIs themselves) and by whom?</p>
<p>6. How should the success of the GHI ecosystem be <i>measured</i> over the next 15-20 years?</p>

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# Key informant interview topic guide: Senegal case study

*The guide presented here is a generic guide. It has been adapted to the profiles of informants, depending on the global health initiatives in which they are or are not involved.*

## Details of the interview

Date and time of interview	
Name of the person who runs the interview	
Location of the interview	

## Participant details

Title and name	
Affiliation	

## Introduction

Thank you for your availability. I am a researcher on a Wellcome Trust-funded project entitled “Reinventing the Future of Global Health Initiatives”.

The purpose of this interview is to shed light on a 20-year vision of GHI and propose recommendations on what the GHI ecosystem should seek to achieve to build the capacity of the health system and sustainably impact health.

We have selected experts whose experience in the research, policy, or practice of GHI is important to the process.

## Consent

The study received ethical approval from the University of Geneva and the National Council for Ethics of Scientific Research (CNEPS). You will not receive any compensation or recognition for your participation in this interview. The interview is semi-structured, so you are free to move away from the questions I ask, however, I can redirect you if we deviate too much from the subject. This interview is not sensitive or emotional in nature. You are free to refuse to answer a question, and to stop the interview at any time. If you agree, we will record this interview to transcribe the data afterwards. The recording will be destroyed once transcribed. Do you agree?

The process will last about 1 hour.

Do you have any questions before you start?

## **Background**

We are interested in the GHI ecosystem as a whole. However, the recommendations of this study will focus primarily on the 6 large GHIs identified by the FGHI/Wellcome Trust as the most likely to change. These six GHIs are:

- Gavi, the Vaccine Alliance
- The Global Fund to Fight AIDs, TB, and Malaria (GFATM)
- The Global Financing Facility for Women, Children and Adolescents (GFF)
- Unitaid
- Foundation for Innovative New Diagnostics (FIND)
- Coalition for Epidemic Preparedness Innovations (CEPI)

## **Part A. Background and Experience**

*Reminder for the researcher of the guiding question: To what extent do GHIs' current mandates and working methods need to evolve to contribute effectively, efficiently and equitably to health system capacity building and health impact?*

### **EXPERIENCE IN GLOBAL HEALTH INITIATIVES**

Current position, function and structure

Professional background in different GHIs: type of GHI, position occupied, duties

### **IMPLEMENTATION OF THE GLOBAL HEALTH INITIATIVES CONCERNED**

Description of the initiative(s) concerned: Type of initiative, objectives, duration, location, Actors: targets, stakeholders; Governance; Implementation context; Institutional/political environment, socio-political context

Achievements: Activities, results, perceived effectiveness, advantages and disadvantages, adaptations

### **IMPLEMENTATION CHALLENGES**

Financing: financing process, who decides, on what basis?

Coordination and alignment at the national and global levels: priorities; actors and governance bodies; Activities

Method: Tools and instrument

Solutions provided

## **Part B. Lessons learned**

**Lessons learned:** financing, type of arrangement, instrument/tool, priorities

**Action to be capitalized, continued or avoided:** what needs to be consolidated, sustained in terms of funding, method, priorities, actors

**Identification of needs and priorities**

## Part C. The Future

*Reminder for the researcher of the guiding question: What changes are needed to contribute effectively, efficiently and equitably to health system capacity building and health impact, and how can they be delivered? What should be done differently?*

**Please note:** The recommendations can cover a range of ambitions and include both long-term and short-term changes. They need to focus on the GHI ecosystem as a whole rather than on specific institutions, and can potentially include: improving, expanding or merging existing mechanisms; the creation of new mechanisms; elimination of existing mechanisms; reforms of the governance structure; strategic reforms/revisions of current mandates; or strengthening alignment, coordination and cooperation.

**Changes to the GHI ecosystem to ensure it remains relevant and fit for purpose over the next 15-20 years**

- Objective of changes to be made/finals/guidelines
- Priorities (international and local level): which and defined how and by whom
- Necessary environment (institutional and political)?
- Specific actions needed
- Actors and stakeholders to be involved, place/representation in international fora
- What method: Tools on which to rely; Instruments to be implemented
- Type of change: developments vs reforms?
- Challenges to anticipate
- Type of support needed: stakeholder training, SSR, national programs, new directives/regulation...
- Financing: diversifying sources? (State contributions, domestic resources, innovative financing (taxation, etc.); Adequate funding circuit
- Possibilities for measures of success: Monitoring – evaluation: indicators to be proposed?

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## Key informant interview topic guide: South Africa case study

### General introduction

Good morning/afternoon, my name(s) is [insert name]. Thank you for your time. This is a consultation to inform a Wellcome Trust - funded project entitled 'Reimagining the Future of Global

Health Initiatives', which aims to outline a 20-year vision and recommendations of what the GHI ecosystem should seek to achieve to strengthen health system capacities and deliver health impacts. We are conducting regional multi-stakeholder consultations with purposely selected stakeholders who have experience with the GHIs either through research, policy, or practice.

You would have read the participant information leaflet and completed the consent process. Do you understand why we are having this interview?

**If no**, (I am more than willing to rephrase who I am, why I am here and what I intend to do). I am open to discuss and/or answer any questions you might have.

**If yes**, I would like to know if you are able spend at least 30-60 minutes to participate in this interview?

Thank you for your willingness to participate in this study. I can assure you that the information shared in these sessions will be used to improve the teaching, learning and assessment activities.

**Please know that:**

- Your participation in this session is completely voluntary. You do not need to answer any/all questions that you are not comfortable with. You can also choose to decline to participate or to ask to no longer participate in the interview at any time, even if you have agreed to take part initially. It is your choice, and it is my ethical obligation to ensure that you understand this.
- The information you share in the interview is confidential. No personal information will be shared with individuals' outside of this project. The information I collect will be analysed anonymously and used confidentially.
- I value your views and intend to only use the information you share with us to contribute to ensuring improved teaching, learning experiences.
- You are welcome to ask any questions throughout this session. I will do my very best to try to answer all your questions. I will also do my best to ensure that you are not discriminated against by myself or anyone else should you say anything that deviates from my views. To ensure that we conduct the interview in a respectful manner I will start off by setting some ground rules for the interview.
- I will be recording the interview, but the recording will be saved in a secure place and will not be distributed to anyone other than the study team.
- Do you have any questions?

At this point, I would like to know if you are comfortable and willing to participate in the interview? There is no correct or incorrect answer. Remember that you are not obliged to be a part of this. It is your choice, and I would like to respect that.

**Consent:**

Before I start, I will be recording the interview, do you consent to having the interview recorded?

☐ YES ☐ NO (please emphasise that saying no is not prohibited or frowned upon. You all have choices and you should feel free to exercise them. If NO, indicated that the answers will be written by hand.)

Do you have any questions before we begin?

Is this a good time for everyone to begin now or would you like some time to reflect and think about what you are being asked to be a part of? I do not mind spending a few minutes to process and reflect on what is being asked of us.

### Interview guide Questions:

**Please can you tell us a bit about your current work/ position**

[probe on how this relates to GHIs, health systems, aid architecture]

## Part A. Understanding the current context

*To what extent would GHIs' current mandates and ways of working need to evolve to effectively, efficiently and equitably contribute to strengthen health system capacities and deliver health impacts?*

**Based on your experience and expertise, what inefficiencies and inequities exist within GHIs and the wider global health architecture, that hinder health system strengthening and the delivery of health impacts?**

*[Something on the perceived strengths and weaknesses of different types of GHI]  
[what are they good at, bad at, challenges they need to adapt to]  
[what features do they share, what is unique to different ones]e.g. Power base, funding base, remit, democratic standing, aim and vision]  
[how do they relate to the other "animals" in the global architecture?] is this positive/ negative?*

### **Sub-questions (probe, if they do not mention):**

1. How is coordination and alignment at country and global levels ensured? (incl. across GHIs and other major funders i.e. iNGOs, and bilateral, multilateral, or philanthropic funders)
2. How are their funding priorities set?
3. Can you describe some financing streams and incentives (including grant mechanisms and approach to co-financing)? Are these effective?
4. How do you perceive the governance of GHIs?
5. Are their processes and ways of working effective?
6. Is the approach to mutual accountability adequate? Including:
  1. Financial accountability
  1. Decision making accountability
  1. Common indicators and sharing of data
7. Is the approach to results measurement adequate?

**What have been the main financing streams, grant mechanisms and incentives over the last five years? What has been the approach to co-financing?**

**What challenges do different GHIs face in evolving from their original vision? Are there examples of where this has and has not successfully occurred in your opinion?  
e.g. in light of changing disease burdens**

**What has facilitated or hindered *coordination* and *alignment* efforts?**

Can you describe some [strengths and achievements of] recent efforts to strengthen GHI coordination and alignment (such as SDG 3 GAP and UHC2030)? Are there any particularly important reforms / milestones / landmarks that we should look into?
What are their current weaknesses (in terms of coordination and alignment)?
Where (and with whom) does the decision-making power lie, within the current GHI ecosystem?
How do the actors interact? (i.e. GHI to GHI, GHI to MoH, GHI to donor etc)
What factors have enabled LMICs to transition away from GHI funding? (or conversely, what has held countries back)?
What are the benefits and challenges between Vertical vs. Horizontal vs. Diagonal programming? Is there a need for all? How should this need be balanced?
What problems have been exposed and what lessons learnt from the COVID-19 pandemic could be used to strengthen GHI efficiency, effectiveness and equity?

## Part B. Mapping a path forward

*What changes are needed to effectively, efficiently and equitably contribute to strengthen health system capacities and deliver health impacts? and how can they be delivered? What needs to be done differently?*

**N.B.** Recommendations may cover a spectrum of ambition, and include both long-term changes and short-term wins. They should focus on the GHI ecosystem as a whole rather than specific institutions, and may potentially include: the improvement, expansion, or merging of current mechanisms; the creation of new mechanisms; the elimination of existing mechanisms; governance structure reforms; strategic reforms / revisions to current mandates; or the strengthening of alignment, coordination and cooperation.

<b>In your view, is a <i>reform</i> of the current GHI ecosystem needed?</b>
Mention any key reforms undertaken previously.
<b>In your view, what changes would help the current GHIs continue to make as effective a contribution as possible within the broader global health ecosystem over the next 15-20 years [in the context of an evolving global health landscape and disease burden]?</b>
<p>What specific actions are required, at what level?</p> <p>Consider different aspects:</p> <ul style="list-style-type: none"> <li>i. Coordination and alignment</li> <li>ii. Priority setting</li> <li>iii. Financing streams and incentives</li> <li>iv. Governance arrangements</li> <li>v. Approach to accountability</li> <li>vi. Approach to results measurement</li> </ul> <p>How would you rate these in terms of feasibility and desirability?</p>
<b>What implications does this have for other key global health funders? How can/should they support the changes needed?</b>
<b>What would a healthy or well-functioning GHI ecosystem look like?</b>
<b>What are the opportunities and risks of different pathways, compared to maintaining the status quo? Impacts should be considered over a 15-20 year time horizon.</b>
<b>How can reform efforts be given the greatest chance of success? i.e. What is required (incentives for both donors, recipient countries, behaviours, and the GHIs themselves) and by whom?</b>
<b>What trends in broader rhetoric /practice should be capitalised on to create a favourable environment for GHI reform?</b>
<b>How should the success of the GHI ecosystem be <i>measured</i> over the next 15-20 years?</b>

<b>Do you have anything to add?</b>

“Feel free to send me suggestions for further interview participants and any documents.”