

GLOBAL FUND OBSERVER (GFO), an independent newsletter about the Global Fund provided by Aidspace to over 10,000 subscribers.

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"I don't have the reputation of being a flashy Hollywood person. I don't have the reputation of being vindictive. I am a professional person," said Michel Kazatchkine, the Global Fund's new Executive Director. Fluent in French, English and Russian, Kazatchkine was profiled in a recent *Boston Globe* article.

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**1. NEWS: Global Fund Board Meeting Makes Progress on Many Fronts**

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The Global Fund's Board completed a three-day meeting in Geneva on Friday that reached solid agreement on multiple strategic issues that could easily have led to dissent.

Board members agreed on a new Chair from the private sector; a new Vice-Chair from an African NGO; an ambitious new target for fundraising; a new concept that each grant should normally have one Principal Recipient from government and one from outside government; a new method whereby countries can obtain financial support for well-developed national strategies for tackling HIV/AIDS, TB or malaria; a new approach to appointing Local Fund Agents; and more.

The Board meeting took place just two days after Dr. Michel Kazatchkine, the Fund's new Executive Director, took office.

The mood at the meeting was constructive and collegial – which was not the case at the previous regular meeting, in Guatemala last November. The November meeting was dominated by the failure of the Board to find a candidate for Executive Director who was supported by a two-thirds majority of both "donor" and "recipient" Board members. (The Board later chose Dr. Kazatchkine at a special meeting in February.) The two meetings prior to Guatemala, in Marrakech in December 2005 and in Geneva in April 2006, had also been stressful, as the Board grappled with criticisms of the Secretariat's leadership and then coped with the decision of the then Executive Director to leave at the end of his contract.

Last week's Board meeting dealt primarily with discussing and voting on multiple strategy issues that had been worked on over the past two years by the Board's Policy and Strategy Committee. The decisions made are summarized below. The full text of all decisions made is available at [www.theglobalfund.org/en/files/boardmeeting15/GF-BM15-Decisions.pdf](http://www.theglobalfund.org/en/files/boardmeeting15/GF-BM15-Decisions.pdf).

*[Note: The Fund holds two board meetings per year. The meeting held in Geneva from April 25-27 was the fifteenth such meeting. GFO was present, with observer status.]*

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## **2. NEWS: Global Fund Board Chooses New Chair From Private Sector**

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The Global Fund has chosen a new Chair who comes from the private sector, and a new Vice-Chair who comes from an African NGO. This is the first time that both positions have come from sectors other than government.

The new Chair is Rajat Gupta, a US citizen born in India who has represented the private sector on the Global Fund board for the past five years. Gupta served from 1994 to 2003 as CEO of McKinsey & Co., described by *Newsweek* as "by far the most influential consulting firm in the world". He is also the Board Chair of the Indian School of Business, and Chair of the Public Health Foundation of India, a public/private partnership to establish seven schools of excellence in public health that will train over 10,000 professionals each year.

Gupta's father was deeply involved in India's struggle for independence, for which he went to jail several times. Both of Gupta's parents died by the time he was eighteen. He won scholarships to the Indian Institute of Technology and Harvard Business School. After graduating from Harvard in 1973 he went straight to McKinsey & Co., where he has been based ever since. Mr. Gupta has served as special advisor on management reforms to the Secretary-General of the UN.

The new Vice-Chair is Elizabeth Mataka, a Zambian citizen who represents developing country NGOs on the GF Board. For the past sixteen years she has worked at the community and national level on HIV/AIDS issues. At various times in her career she has worked in government, the private sector and the NGO sector. She currently serves as Executive Director of the Zambia National AIDS Network (ZNAN), which is one of several GF Principal Recipients in Zambia. She has been a member of the Zambia National AIDS Council since its inception.

"The Global Fund is in the business of saving lives, and like the private sector we have a very strong focus on results," said Dr. Michel Kazatchkine, the Fund's new Executive Director. "We want to make sure the world is getting the best possible return on the investment we've been entrusted with. Having a chair from the private sector and a vice-chair from an African citizens' group underlines our accountability to best business practices, and to social justice."

Gupta takes over the role of Chair from Dr. Carol Jacobs, Chair of the National Commission for HIV/AIDS of Barbados. Mataka succeeds Dr. Lieve Fransen, Head of Human and Social Development for the European Commission's Directorate General of Development. Gupta and Mataka will serve for two years.

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### 3. NEWS: Global Fund Board Agrees on Ambitious New Growth Target

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The Global Fund will need to at least triple in size by 2010 – reaching a spending target of \$6 billion per year – to meet projected demand, the Fund’s Board agreed on Friday. Further increased demand from developing countries for Global Fund financing could potentially raise this figure to \$8 billion.

“A Global Fund of \$6 to 8 billion per year is an inspiring challenge to the entire Global Fund community – to the people in more than 130 countries who are doing the hard work of saving lives, to their technical partners, and to funders who provide the financing to make that work possible. Let us all work together toward this goal.” said Dr. Michel Kazatchkine, the Fund’s new Executive Director. “The Board’s vision of tripling or even quadrupling the size of the Global Fund is a strong vote of confidence for our work. Programs we support are currently saving 3,000 lives per day. The increase in funding will allow the world to do much, much more, to reach G8 and UN goals like providing AIDS treatment to all who need it, having every African child sleep under a bed net, and cutting the death toll of TB in half.”

The Board called upon stakeholders to encourage and mobilize strong demand for Global Fund financing. The Board recognized that raising \$6 to 8 billion per year will require significant additional contributions from new and existing public and private sources, as well as innovative financing mechanisms such as UNITAID, Global Fund Debt Conversion and Product (RED), and called on stakeholders to contribute to this effort.

Donors will meet in Berlin, Germany, in September to secure initial pledges of funding for the period 2008 – 2010. Eighty percent of the Global Fund’s resources have so far come from the G8 countries. While these countries are expected to provide a dominant share of the Global Fund’s resource needs, the replenishment conference in Berlin is also expected to draw pledges from new donor countries.

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### 4. NEWS: Main Decisions Made at Global Fund April Board Meeting

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Key decisions made by the Global Fund Board at the meeting that ended on Friday were as follows.

1. **New Chair and Vice-Chair chosen:** See article above.
2. **Growth Target for the Global Fund:** See article above.
3. **Two or more PRs per grant should be the norm:** The Board recommended (but did not require) that starting with Round 8, each proposal submitted to the Global Fund should specify both a government Principal Recipient (PR) and a non-government PR. The Fund refers to this concept as "dual-track financing". If a proposal does not include both types of PR, it should contain an explanation for this. The Board noted that the possible benefits achieved through dual-track financing include increased absorption capacity (from taking full advantage of the implementation capacity of all domestic sectors, both governmental and non-governmental), accelerated implementation and performance of grants, and the strengthening of weaker sectors.
4. **National-Strategy Applications – a new way to apply to the Fund:** The Board decided to create a new way in which countries can apply for Global Fund support, in addition to the current rounds-based approach. In this new approach, a country that has developed a solid national strategy for tackling HIV/AIDS, TB or malaria will be able to apply for Global Fund support for implementation of this strategy. However, the Fund's requirements for "National-Strategy Applications" will be very strict. The strategy must be inclusive, costed, comprehensive and prioritized, and must include a workplan and budget. And the strategy must have successfully undergone a rigorous technical certification by an "independent review mechanism" (IRM). A key objectives of this whole approach is to make it possible for a country that has developed a high-quality national strategy to submit that strategy for

certification by a single IRM and then to obtain support for the implementation of that strategy from the Global Fund and from other funding sources. This approach is intended to support alignment and harmonization, by being flexible enough to fit with the preferred timing cycles and planning approaches both of the applicant country and of the various funders. The Board called upon partners to develop a shared certification approach for national strategies and to allow the use of certified strategies as the basis for applications for funding. The Board hopes to agree at its November meeting on detailed plans for implementation of National-Strategy Applications, including specifying which organizations can serve as IRMs and what criteria they should follow when certifying national strategies.

5. **New rules for new LFAs:** The contracts of all Local Fund Agents (LFAs) expire in November of this year. After many board members expressed dissatisfaction with the effectiveness of LFAs, the Board agreed on the need for a number of changes. The Fund will soon invite bids from organizations wishing to serve as LFAs from November. In the past, LFAs have focussed primarily on monitoring and evaluating PR performance at a financial level. In the future, they must also show that they can effectively monitor and evaluate PR performance at a programmatic level, and that they can monitor and evaluate PR oversight of sub-recipient activities. LFAs must also act in a timely, open and reliable manner (which has not always been the case), and they must have clear lines of communications with PRs, CCMs, and in-country partners. The performance of the new LFAs will be much more rigorously assessed than in the past. LFAs that do not perform well may be required to pay penalties, and/or may have their four-year contracts terminated mid-way through. Applications to serve as LFAs will be considered not only from large private sector entities, but also from civil society entities, possibly acting together in consortia.
6. **Whistleblower hotline:** The Fund has had for some time an Office of the Inspector General (OIG), whose role is to investigate possible cases of misconduct within the Global Fund, Principal Recipients, and Sub Recipients. The Board asked the OIG urgently to implement an independent hotline to enable "whistle-blowers" to contact the OIG confidentially and, if necessary, anonymously. (Note: Current procedures for contacting the OIG are listed at [www.theglobalfund.org/en/about/oig/contactus](http://www.theglobalfund.org/en/about/oig/contactus).)
7. **Community systems strengthening:** The Board recommended (but did not require) that starting with Round 8, each proposal submitted to the Global Fund should include elements designed to strengthen the community systems that are necessary for the effective implementation of GF grants. ("Community systems" refer to structures and systems for the delivery of HIV, malaria or tuberculosis services at the community level – services such as home-based care, outreach prevention, orphan care, training, etc.)
8. **Simplified CCM access to funding:** The Board asked one of its committees to propose, by November, how CCMs could obtain simplified access to funding to cover the CCM's own activities. The Board also called for increased transparency by CCMs about how they plan to ensure access by civil society to such funding.
9. **Rolling Continuation Channel, for funding after Phase 2:** Last November, the Board approved the establishment of a method (known as the "Rolling Continuation Channel", RCC) that will sometimes permit a CCM to apply for up to six years of further funding for a grant that is approaching the end of Phase 2. The Fund will consider such applications about four times per year. Grants will only be eligible for consideration if the Secretariat determines that they have been performing very well, are expected to have measurable impact, and are receiving significant support from other funding sources. Only one-quarter to one-third of grants are expected to meet this eligibility standard. At last week's meeting, the Board agreed that the Secretariat will gather data regarding the performance thus far of each candidate grant; the TRP will then review the data and recommend to the Board whether to approve the grant for RCC funding; and the Board will then make the final decision via electronic vote. Grants approved in Round 4 and later that in Phases 1 plus 2 have a term of less than five years will not be eligible for RCC funding.
10. **Eligibility of Upper-Middle Income countries:** The Board has been arguing for years about whether and when the Fund should provide HIV grants to Upper-Middle Income countries

(UMICs). Some Board members want the Fund to focus almost entirely on the poorest countries; others say that grants also should be given to all UMICs with reasonably high HIV incidence rates. The problem has been in deciding where the cutoff should be. The Fund has a rule that UMICs are only eligible for HIV/AIDS grants if they have a ratio of (HIV prevalence multiplied by 1000) to (Gross National Income in US dollars) that is greater than 5.0. Recently, three UMICs with very high HIV/AIDS prevalence rates – South Africa, Botswana and Equatorial Guinea – have become ineligible according to this rule, because they have a ratio that has moved below 5.0, not because of reduced HIV incidence or stronger economies, but because their currencies have strengthened against the US dollar. Last week, the Board agreed, with great difficulty, that UMICs should be eligible if the epidemic has a "measurable impact" on population demographics such as life expectancy, or if the epidemic in a vulnerable population is such that there is a risk of accelerated spread within that vulnerable population. Details should be finalized at the November Board meeting.

- 11. Use of pooled purchasing service:** The Board instructed the Secretariat to more strictly require PRs to use the Fund's Price Reporting Mechanism to report details of their procurement of health products, and specified that the reported data should be externally audited. The Board also agreed that the Fund will establish a pooled-purchasing service involving one or more external procurement agents. When a PR wishes to make use of a procurement agent, payments out of the grant in question will be made by the Fund's Trustee direct to the procurement agent, without going first to the PR. Usually, use of procurement agents will be voluntary. But where a PR has shown inadequate procurement capacity, the Fund may insist that it use a procurement agent. Where a PR uses a procurement agent, the PR will also be provided with voluntary access to procurement capacity-building services and supply-chain-management assistance. The costs of these services will be covered by the PR, normally out of grant funds. Other entities in the PR's country will also have access – at their own expense – to these services.
- 12. Credit Suisse:** The *Boston Globe* reported in February that the Fund's then Inspector General stated in a confidential 2006 report to the Board that the spending habits of the Fund's then Executive Director – often based on use of a special account that the Fund maintained with Credit Suisse – had created "potential risks" for the Fund. Neither the then Inspector General nor the then Executive Secretary is still with the Fund. The Secretariat responded at the time that the Inspector General's report was "of extraordinarily poor quality". At last week's meeting, the Board reviewed two unpublished independent analyses of the Inspector General's work, and concluded that none of the activities examined by the Inspector General involved fraud or misappropriation of funds. The temporary successor to the former Inspector General was asked to prepare a comprehensive account, based on all the source materials and reports, with the expectation that the Fund would publicly release that account by the end of May.
- 13. New Inspector General:** The Board agreed a procedure for recruiting a new Inspector General, and specified that this person will report independently and confidentially to the Board while maintaining an administrative reporting line to the Executive Director.
- 14. Earmarked donations:** In the past, the Fund has not permitted donors to specify how their particular donations should be made use of by the Fund. The Board agreed that from now on, private donors could require that their donations be made use of for a specified grant that has already been approved by the Fund, or for a mix of such grants grouped by region and/or disease, and/or for the procurement of specific goods and services. Under certain circumstances, such "earmarking" may also be used by public mechanisms such as UNITAID; but, as always, it cannot be used by governmental donors.
- 15. Disclosure of non-approved proposals:** With effect from the Board's decision in November 2007 as to which Round 7 proposals to approve, the Fund will provide public access at its website not just to the proposals that the Board approved, but also to the proposals that the Board chose not to approve.
- 16. Board voting re "No Go" decisions:** The Board resolved that when the Secretariat makes a "No Go" recommendation regarding a proposal that the Fund is considering for Phase 2

renewal, the grant in question will indeed be terminated unless that recommendation is blocked by at least four board members from the "donor" block plus at least four from the "recipient" block. (In the past, just one of these two groups could block the No Go recommendation.)

- 17. Funding of CCMs:** The Fund currently has a policy that under certain circumstances, CCMs are permitted to apply part of a GF grant to cover certain CCM operating costs for a period of up to two years. The Board resolved last week that this time limit could be extended beyond two years, but only to the end of the grant or the end of 2007, whichever comes first.
- 18. Resource mobilization strategy:** For the first time in the Fund's five-year life, the Board approved a resource mobilization strategy. The strategy focuses on raising funds from the following sources, in decreasing order of importance: public donors (contributions from national governments); investment returns (the return gained on money that the Fund has received but not yet disbursed); private sector (cash and non-cash contributions from foundations, corporations and individuals); and innovative financing mechanisms (various new mechanisms that aim to mobilize resources distinct from official development assistance and private sector contributions). The Board approved the recruiting of 18 additional staff in 2007 to help pursue these options.
- 19. Health-systems strengthening:** The Fund has always supported the idea of HIV/AIDS, TB and malaria proposals that deal, in part, with the need to strengthen health systems. In Round 5, the Fund also permitted proposals that focussed entirely on health-systems strengthening. (Few such proposals were submitted, and even fewer were successful.) At last week's meeting, the Board agreed that at its next meeting, in November, it will decide, based on input from two committees and outside parties, how best to handle health-systems strengthening in the future.
- 20. Transition from Administrative Services Agreement with WHO:** At its meeting last November, the Board agreed to start preparing for a likely termination of the Fund's Administrative Services Agreement with WHO, prior to making a firm decision at last week's meeting on whether to implement termination. (Under the Agreement, WHO is responsible for certain aspects of Global Fund administration. If the Agreement is terminated, new procedures will be put in place that the Fund controls more directly.) At last week's meeting, the Board deferred making a final decision until its November 2007 meeting, partly because of the complexity of resolving how best to handle pension plans.
- 21. Debt2Health:** The Board agreed that the Fund should start a two-year pilot debt-conversion project, known as "Debt2Health", in up to four countries. Under this scheme, a debtor country that owes money to a creditor country can, if both parties agree, have its debt forgiven if the debtor country contributes an agreed fraction (say, one half) of the debt, in local currency, towards covering the cost of future Global Fund-approved grants in the debtor country. The availability of this money will not be allowed to be a factor in whether such grants are approved by the Fund. The pilot project will probably take place in Indonesia, Kenya, Pakistan and Peru, and could generate up to \$250 million. Germany is the first creditor country likely to be involved.
- 22. Report re Corporate KPIs:** The Board reviewed the Fund's 2006 performance against previously-agreed targets for fifteen Corporate Key Performance Indicators (KPIs). For five KPIs, 2006 results exceeded targets. For a further five, results were within 10% of the target. For four, results fell short of the target by more than 10%. And for one, results are not yet available. For those where the target was not met, the Board accepted the reasons given by the Secretariat.
- 23. New TRP members:** The Board agreed to expand the Technical Review Panel (TRP) from 29 to 35 members, and approved various new members.

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**5. REPRINT: *Boston Globe* Profiles Fund's New Executive Director**

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*On 22 April 2007, the Boston Globe ran the following article by John Donnelly.*

World health fund has new director, new challenges

The fight to save tens of millions of lives from AIDS and other infectious diseases has reached a critical crossroads, and Michel Kazatchkine stands in the middle of it.

Kazatchkine, the former French HIV/AIDS ambassador who did his postdoctoral work at Harvard Medical School, tomorrow will take over the Global Fund to Fight AIDS, Tuberculosis, and Malaria – a critical start-up humanitarian group that most Americans have never heard of.

"You all set?" Anthony Fauci, director of the US National Institute of Allergy and Infectious Diseases, asked him earlier this month in a visit in Fauci's office.

"Anxiety is growing," Kazatchkine said, laughing slightly.

Kazatchkine will lead a financing organization that in its first five years has committed \$7.1 billion to 136 countries, including \$1.9 billion from the United States, its largest benefactor. But the Global Fund, along with the US government's own ambitious AIDS program, is trying to address the difficult question of how to sustain the work for decades to come.

"We're still in an emergency response, and yet we have to start building [each] country's ownership of the programs," Kazatchkine said during one of two below-the-radar trips to Washington in the last month, part of what he called his "listening tour."

That adjustment, he believes, could be most difficult for the US government program – known as PEPFAR, for the President's Emergency Plan for AIDS Relief – which he praised as "starting faster and more efficient" than the Global Fund, but lagging behind the Fund in letting developing countries take the lead.

Under the Global Fund model, countries submit proposals, the Fund reviews them, and approved programs begin. The Geneva-based organization was designed to have a small staff, now at 300 people, so it wouldn't become another United Nations-like bureaucracy. PEPFAR, by contrast, acted more like a general directing an army, setting targets, selecting programs, sending scores of US experts into countries, and looking for local partners along the way.

While the Fund has become indispensable in many countries, its model hasn't worked well in several areas. In a few high-profile cases, government officials have either stolen millions, can't account for the money, or have allowed it to sit in bank accounts. And nongovernmental groups, especially faith-based organizations, have had little influence and little funding in many countries.

Some critics and supporters of the Fund have said that Kazatchkine also must forge a different path from his predecessor, Sir Richard G. A. Feachem. Feachem has been praised as an articulate voice in the fight against the killer diseases but he also faced criticism for his spending. An internal inspector general report, first reported by the *Globe* earlier this year, detailed office parties that cost thousands of dollars and limousines that cost as much as \$900 a day.

Taking a \$1.85 Metro ride recently – from Fauci's office in Bethesda, Md., to a meeting in downtown Washington – Kazatchkine insisted that he wasn't taking public transportation for the benefit of the reporter who accompanied him. "I am a public servant," he said. "I'm sure people will look at how I behave."

He added, "I don't have the reputation of being a flashy Hollywood person. I don't have the reputation of being vindictive. I am a professional person."

Kazatchkine, 61, was born in Courbevoie, France, outside Paris. Russian was spoken in the house. His father was a Russian native who had resisted the Nazis and was imprisoned in a concentration camp, where he contracted tuberculosis. Kazatchkine remembers his father only as sickly; he died when Kazatchkine was 20. His mother, working as a dressmaker at home, supported the family.

He attended medical school in Paris, studied immunology at the Pasteur Institute, and completed his postdoctoral work at Harvard and St. Mary's Hospital in London.

From 1977 to 1980 at Harvard, he worked in the laboratory of a giant in the immunology field, K. Frank Austen . "He already had some excellent training," said Austen, who is now 79 and still at Harvard. "He settled in and played a major role."

Austen and his students were exploring how specific proteins first warn the body of microscopic threats. At the time, little was known about these proteins, which acted as a kind of a fire alarm for a person's immune system. Kazatchkine was the lead author in three studies published in leading scientific journals.

But he wasn't always in the lab. One of his best memories involved the culinary experience at Fenway Park.

"I don't think that hot dogs are particularly tasteful, but they were tasteful in context," he said. "And they serve beer in those plastic glasses, and when the glasses are half empty, they are easy to spill, no?"

Soon after leaving Harvard, in 1983, Kazatchkine, then a clinical immunologist, treated a French couple just back from Africa with high fever and severe immune deficiency. It was his introduction to HIV, the virus that causes AIDS. In 1985, he started a Paris clinic specializing in AIDS. That eventually propelled him to senior positions in France, including director of the French National Agency for AIDS Research from 1998 to 2005.

But he always saw AIDS patients – until now. He left his practice to take on his new duties.

"I wrote 220 letters to 220 patients to apologize," he said. "That has been one of the most difficult decisions of my life. But it's too much to continue seeing them. I also have to show the Global Fund that I'm becoming fully committed."

His early goals include quadrupling donations to \$8 billion annually by 2010; developing stronger ties with other organizations fighting the three diseases; and committing to "full accountability and transparency" of Fund operations.

Fauci told him the Fund needed to better define its mission. "There's a sort of vagueness about it," Fauci said.

When the meeting ended, Kazatchkine showed a small group with him how to exit the National Institutes of Health campus. He had been here many times before and had known Fauci for years, but he had come this time with new responsibility, and that weighed on his mind.

"It's very important that we start with a strong and trusting relationship," he said, entering the Metro.

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This is an issue of the GLOBAL FUND OBSERVER (GFO) Newsletter.

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GFO Editor and Aidspace Executive Director: Bernard Rivers ([rivers@aidspan.org](mailto:rivers@aidspan.org), +1-212-662-6800)

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