



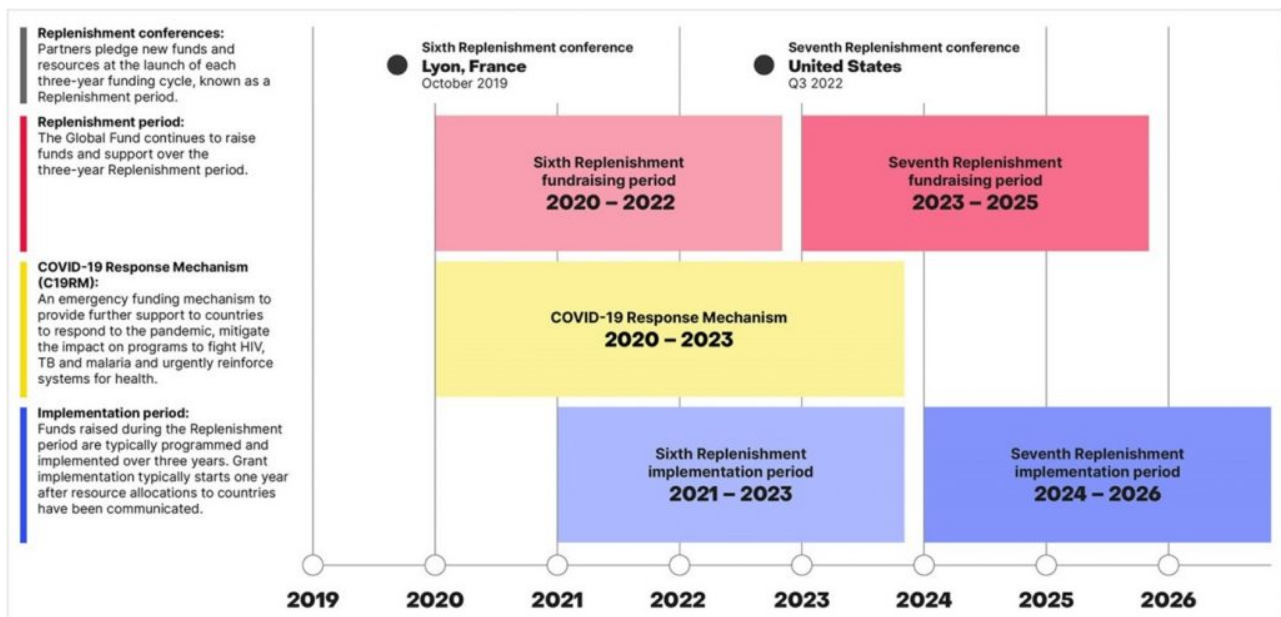
Independent observer
of the Global Fund

A view from different angles: The Global Fund's upcoming 8th Replenishment (Part 1)

With inputs from the West and Central Africa and Eastern and Southern Africa (WCA/ESA) constituencies courtesy African Constituency Bureau (ACB), Developing Country NGO (DCNGO) delegation, and UNAIDS constituencies as well as the Global Fund Advocates Network (GFAN) and the Global Fund Secretariat's Donor Relations Department.

Every three years, the Global Fund partnership has a formal fundraising drive called Replenishment, enabling the organization to allocate funds for the subsequent three-year funding cycle. (Figure 1).

Figure 1: Replenishment Cycle



Source: [The Global Fund to Fight HIV, Tuberculosis and Malaria](#)

To understand how the partnership is preparing for the next one – the 8th Replenishment due to be held in 2025 we interviewed or administered a written questionnaire to:

- Cecilia Senoo, Board Member and Yolanda Paul, Alternate Board Member, Developing Country NGO (DCNGO) Delegation to the Global Fund Board
- Dr. Thembisile Xulu, Eastern and Southern Africa (ESA) and Dr Ibrahim Tajudeen, West and Central Africa (WCA), Global Fund Board: Communications Focal Points. [Hereinafter, mention will be made as WCA/ESA Constituencies as it was a joint response, courtesy the African Constituency Bureau for the Global Fund.]
- Lee Ali Abdelrahman Abdelfadil and Julianna Hills, UNAIDS Constituency
- Katy Kydd Wright, Director, Global Fund Advocates Network (GFAN)
- Dianne Stewart, Head, Donor Relations and Deputy Director of External Relations and Communications, Global Fund Secretariat

Discussions included lessons learned from the 7th Replenishment, anticipated challenges in the 8th Replenishment, and the impacts of the organization’s evolution, and a shifting donor landscape, on how Replenishment is approached.

Background

A [Global Fund Replenishment](#) aims to raise a specific amount which is spelt out in the organization’s Investment Case, which is shared earlier in the year of Replenishment (anticipated in February 2025 in the case of the 8th Replenishment). The Investment Case projects the funding needs for the upcoming grant period based on data from technical partners and countries, taking into account the amount likely to be available through other sources, including other donors and the mandatory co-financing provided by implementer countries. For the 7th Replenishment, the Global Fund partnership [Investment Case](#) in 2022 aimed to mobilize US\$18 billion, “the minimum required to get the world back on track toward ending HIV, tuberculosis (TB) and malaria and to make the world more equitable and safer from future threats and is in

line with the projected resource needs identified by the Global Plans [from technical partners for HIV, TB and malaria].” The Investment Case quantifies the infections averted – or not – based on the amount of funds raised. It is clear up front to donors that failure to match the Replenishment goal will have very real consequences in terms of lives lost to HIV, TB, malaria, and sub-optimal health systems.

Fundraising does not start and stop with a given Replenishment Conference, and the partnership continues to mobilize funds and convert pledges into actual funding across the grant cycle. However, the Replenishment is tied directly to another important tenant of Global Fund financing: Allocation, which since 2013 splits the funds raised at the Replenishment Conference between eligible countries for the three-year grant cycle based on a complex evidence-based procedure, known as the allocation formula. An important part of the allocation formula is the Global Disease Split (GDS), a Board decision that determines the percentage of overall funding that HIV, TB, and malaria will each get.

The Investment Case and GDS use different modelled scenarios of Replenishment outcomes – low, on target, and high – to understand the impact of Replenishment on the three diseases.

While Replenishment is tied closely to decisions on Allocation and GDS, it is important to remember that they are not synonymous. Our focus is on the Replenishment, and is a two-part series carried in this issue. In addition to the inputs from our interviews and written questionnaire, we also include some constituency feedback from recent Global Fund meetings.

The relevance of Replenishment one year out

Though Replenishment is still a whole year away and many grants are still in their first year of implementation, there are many decisions by the Board, Committees, and Secretariat that lead up to Replenishment (including at the October 2024 meetings of the Strategy, Audit and Finance, and Ethics and Governance Committees as well as at the upcoming November 2024 Board meeting). Even when not the primary topic of conversation, the Replenishment and resource mobilization loom large in the room at these meetings.

As you can see from the interviews below, the entire partnership is eager to facilitate a successful 8th Replenishment, enabling Global Fund implementer countries to maintain – if not improve – outcomes of the fight against HIV, TB, and malaria. The current donor landscape and competing funding priorities, are a particular source of anxiety.

Lessons learned from the 7th Replenishment

The Secretariat and WCA/ESA Constituencies affirmed that the 7th Replenishment was being thoroughly examined across the partnership, with WCA/ESA Constituencies acknowledging that, “The Global Fund Secretariat is making concerted efforts to apply the lessons learned from [the 7th Replenishment] to prepare for the next Replenishment. A review process documented best practices, which were presented

at Committee and Board meetings.”

The circumstances of the 7th Replenishment were anticipated to be difficult but were even more unpredictable than expected, with Katy Kydd Wright, GFAN stating that, “The challenges that we faced in the 7th Replenishment were, as usual, some things that we didn’t know were going to happen like the war in Ukraine... What’s the impact of, for example, [Queen Elizabeth’s] funeral and all world leaders all being together right before [the replenishment] is happening?”

So also, Dianne Stewart of the Secretariat mentioned that the campaign and process for the 8th Replenishment needs “...to take into account the volatility of the environment in which we are operating and has us planning early but [staying] fairly flexible. The overarching message was [to be] agile.” The WCA/ESA Constituencies added that takeaways from the 7th Replenishment included that, “Advocacy played a crucial role in securing donors’ commitments despite a challenging geopolitical crisis and weak economic/financial environment, with a focus on showcasing success stories and demonstrating the impact of contributions. A major lesson was the need to diversify funding sources, reducing reliance on a few major donors by engaging implementing countries, emerging economies, private foundations, and innovative financing mechanisms.”

The importance of engaging communications also came up from several sources. Yolanda Paul, DCNGO, said that key lessons included, “... the need to share and emphasize more the stories on the ground – stories of what’s actually happening at the country level and what would happen if we do not get the funding we need. We need to emphasize the loss of lives – lives that have value and should not be ignored,” while fellow DCNGO member Cecilia Senoo called for, “solid evidence-based messaging for amplification by the partnership that reinforces the Global Fund’s unique role and added value in delivering health impact alongside other global health partners.” Julianna Hills, UNAIDS flagged that there is, “... a need within a broader context of evolving global health architecture... to have more concerted and hyper-communicative engagement because of what [Replenishment] means and entails for key donors.”

The 7th Replenishment was not a standalone event in terms of donor or partnership engagement, though, and it was clear that the work put into relationship management was a critical component. Dianne Stewart of the Secretariat shared that, “One of our key lessons from the 7th Replenishment was how vital it was to have these close, nurtured relationships with all of our partners in each of the donor capitals. I include the people in the governments themselves around the decision-makers but also the civil society advocates in those countries, the wider network of communities and voices... Those partnerships are invaluable.” The WCA/ESA Constituencies also noted that, “Broader stakeholder engagement, involving governments, civil society, the private sector, and communities, [were] essential for the success of the 7th Replenishment. African civil society groups, such as WACI Health and GFAN Africa, unified regional efforts through coordinated campaigns, amplifying advocacy across the continent. Also, the active engagement of the [people living with HIV] at global, regional and national level contributed a lot.” Cecilia Senoo, DCNGO, emphasized the role of civil society too, noting, “The [Global Fund] understands the importance of nurturing political champions, fostering community involvement, and amplifying civil society expertise and voices to position its work with stakeholders to co-create an inclusive and compelling [8th] Replenishment campaign to be launched in early 2025.” Katy Kydd Wright, GFAN underlined that, “What we see as

important is to make sure people are reminded of the progress and results with some context about what needs to be different... such as better and more dedicated funding for communities.”

Anticipated challenges for the 8th Replenishment

Katy Kydd Wright, GFAN acknowledged that, “Every Replenishment has been harder than the one before.” Cecilia Senoo, DCNGO, noted that the 8th Replenishment’s context is, “a most challenging period, characterized by significant external volatility. A surge in elections favouring conservative parties has intensified political instability in key donor and partner nations. Economic shifts and fiscal limitations are further straining already stretched donor budgets, while also impacting domestic health investments in partner countries. Moreover, the global health and development landscape is increasingly complex and competitive and we are seeing a great shrinking of civil society space and more punitive legal frameworks.” Lee Ali Abdelrahman Abdelfadil, UNAIDS echoed similar concerns: “There are issues around political commitment, social enablers, [key population] programming.” The WCA/ESA Constituencies flagged that for the 8th Replenishment, challenges include, “Economic and geopolitical pressures, tight fiscal space for implementers, and competition for limited resources” and also highlighted how multiple Replenishments such as that of the Global Fund and GAVI are slated in the same year, and will have “potential effects on the [Global Fund’s] 8th Replenishment if not well managed in an innovative and strategic manner.” And these are not the only ones up for replenishment. The Center for Global Development in its report described a “[replenishment traffic jam](#)” (Figure 2).

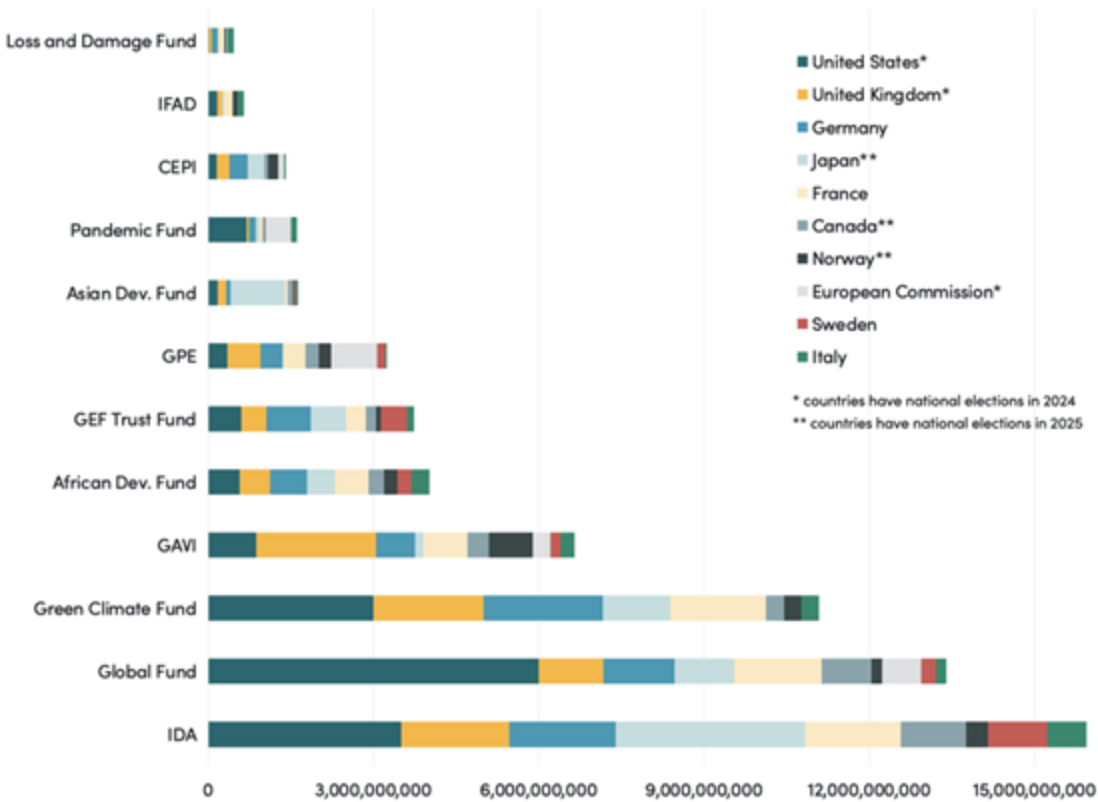
Figure 2: Replenishment Traffic Jam



Source: [Center for Global Development](#), 2024

This is all the more significant given that the CGD had pointed out that 10 government donors account for the major part of resources across global health initiatives. A glance at the image below also shows that unlike the others, the Global Fund is heavily reliant on US government pledges.

Most Recent Replenishment Pledges to Funds by Top 10 Donors



Source: [2024-2025 Replenishment Traffic Jam](#), Center for Global Development, February 8, 2024

In the lead up to the 26th Strategy Committee Meeting in October 2024, constituency feedback at the time on its reports pointed out that the results of the 7th Replenishment had left money on the table: the full US pledge of US\$6 billion for the 7th Replenishment could only be accessed if other donors pledged correspondingly high amounts – which they failed to do – effectively leaving US\$1.2 billion of US resources on the table. We hope the donor community is able to learn from this.

The Global Fund is already gearing up for the 8th Replenishment, with Dianne Stewart of the Secretariat remarking, “... you can never be prepared too early for the potential changes in the Replenishment campaign. We are already warming up and ensuring we have all the strongest possible partnerships in place for a fundraising campaign.” Lee Ali Abdelrahman Abdelfadil, UNAIDS noted the early start: “[Replenishment] has started earlier and there is a more concerted effort to create space for dialogue,” and that, “The Global Fund Board, Committee Leadership and Secretariat have created so many avenues for feedback in various formats; written, verbal and more space for feedback... which reflects a willingness to listen to the Board constituents.”

It’s important to also acknowledge the shifts in donor landscape over the last three years, the response to which Julianna Hills, UNAIDS stated is “much more overt, pragmatic and in the open dialogue than before.” The shift in the donor landscape as described by the WCA/ESA Constituencies includes, “increased awareness of global health security, diversifying funding sources beyond traditional

government donors, pushing sustainable health financing models, geopolitical tensions, growing support for equity-focused initiatives, data driven [and] evidence-based approaches to inform funding decisions, [and] promotion of digital data platforms.”

Yolanda Paul, DCNGO pointed out the “complete shift to stronger country ownership and bolstering health system strengthening...requires governments to also understand the decisions they make, for e.g. dangerous laws, which endanger lives and the impact of these decisions.”

WCA/ESA Constituencies cautioned that “geopolitical tensions, such as conflicts and trade issues, are also influencing donor priorities, and that competing priorities, such as climate change and conflict, could potentially shift resources away from global health funding.”

Cecilia Senoo, DCNGO echoed this concern noting that, “Amidst challenges and multiple crises, there is a worrying trend of global health priorities being overshadowed. With all these challenges, the Global Fund must be resourced fully to complete the unfinished business” and called for “all hands to join....to co-create an inclusive and compelling 8th Replenishment campaign to be launched in early 2025.”

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