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AIDSPAN RELEASES ITS ASIA PACIFIC REPORT

Aidspan has made public its second-ever regional [report](#): a snapshot of countries and one regional initiative in the Asia Pacific region. Stigma and discrimination, underutilization of civil society in service delivery, increased rural to urban migration which complicates disease management, and funding gaps in the national responses for the three diseases are some of the issues highlighted in this report.

[Asia Pacific Report 2015](#)

The Asia Pacific report provides an overview of the history and current status of Global Fund support in the region and summarizes the main cross-cutting issues facing the Asia Pacific countries. It also includes profiles of select countries identified as priority countries based on their burdens of disease and country contexts.

The country profiles focus on each country's political and socio-economic background; epidemiological profiles for HIV, TB and malaria; and investments towards the three diseases and health systems strengthening with a focus on past and current Global Fund grants, looking as far back as 2010. Also included in the profiles is an illustration of trends in grant performance of select Global Fund grants.

Countries included in the report are Cambodia, Laos, Vietnam, Myanmar, the Philippines, Indonesia, Malaysia, Timor Leste, Multicountry Western Pacific (which includes 11 Pacific Island countries), Papua New Guinea, Fiji and Solomon Islands. The report also includes an overview of the Regional Artemisinin Resistance Initiative (RAI), a \$100 million regional grant which aims to support a coordinated effort to address multi-drug-resistant malaria in five countries: Myanmar, Cambodia, Thailand, Vietnam and Laos.

Information on both the region and specific countries was obtained via a review of the literature and key documents, and interviews with in-country stakeholders.

The Global Fund rolled out the new funding model (NFM) in 2014 to replace the rounds-based approach.

Even though a majority of the people interviewed complained about the time and energy needed to complete the various processes under the NFM, there was consensus that the NFM was better than its predecessor. Prior knowledge of a country's allocation, increased focus on high and direct-impact activities, and the link between grant performance and funding were some of the positives associated with the NFM.

Notable successes within the region include a growing intention by each of the countries to increase domestic financing towards the three diseases; anti-discrimination clauses in HIV-specific laws enshrined in almost every country in Asia and South Pacific; the increased role of civil society in service delivery; and improved governance and oversight within the country coordinating mechanisms (CCMs).

However, the countries of the Asia Pacific region continue to face significant barriers in ending the epidemics. Legal, policy and socio-economic barriers pose a threat to service delivery and especially to the vulnerable and key populations. Stigma and discrimination, and human rights abuses against the most vulnerable are also prevalent in this region. In addition, there is a growing concern that governments of countries such as Malaysia and Indonesia may no longer pay for services targeting key populations once the countries become ineligible for Global Fund support.

The report calls for stronger legal protections like the implementation of existing anti-discrimination laws; increased involvement of the civil society – especially the faith-based organizations – in service delivery; increased technical support to civil society; and innovative approaches to financing. In addition, the report states that strengthening of the national health systems ought to be prioritized to enhance sustainability of the results long after the Global Fund programs conclude.

Ann Ithibu is one of the members of the Aidsplan team that worked on development, design and data collection for this report.

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