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EECA NGOs Express Concerns About Recent Developments at the Global Fund

A group of 18 networks and NGOs from Eastern Europe and Central Asia (EECA) have written to Mark Dybul, incoming Executive Director of the Global Fund, to express concerns about what they perceive as negative impacts of recent developments at the Fund. The [letter](#) was sent by email on 17 December.

The organisations said that over the last decade, the Global Fund has played a beneficial role in responding to the HIV epidemic among people who use drugs in the EECA, which is the region of the world where the HIV epidemic is most concentrated among the drug user population. The Global Fund supported not only the provision of syringes and medicines, the organisations said, but also programmes to reduce stigma, mobilise communities and build capacity. In a region where people living with the diseases have traditionally been criminalised and excluded, the organisations wrote, the Global Fund pushed for their human rights and full inclusion.

However, according to the organisations, recent developments at the Global Fund – such as the cancellation of Round 11, the introduction of 55% rule, the restructuring of the Global Fund Secretariat (including disbanding the Civil Society Partnerships Team), and the introduction of the New Funding Model (NFM) – are cause for concern.

With respect to the NFM, the organisations said that there is a risk that middle-income countries will no longer be able to access funding, and that this would be disastrous in a region where national governments remain reluctant to support targeted prevention and treatment services for most-at-risk populations (MARPs). In the EECA region, the organisations said, only two countries – Kyrgyzstan and Tajikistan – are still classified as low income.

The organisations said that the level of access of middle-income countries, especially those with concentrated epidemics, to Global Fund money should not be lower than it was before the beginning of “the Global Fund crisis.” The organisations pointed out that three of the top five countries with the highest HIV burdens are middle-income, and that eight of the ten countries with the highest TB burdens are middle-income. In addition, they said, only about a third of HIV-positive people live in low-income countries.

The organisations said that the 55% rule should be eliminated because it would reduce funding available through existing grants for most middle-income countries with concentrated HIV epidemics, as well as limit their opportunities to obtain new funding. (This rule, which was adopted by the Global Fund Board in November 2011, says that each year 55% of all funding must go to low income countries.)

In their letter, the organisations made several recommendations concerning the NFM, including the following:

- Programmes funded within the NFM should include community systems strengthening as well as interventions to address gender inequality and issues related to sexual orientation and gender identity.
- Services for MARPs should not be de-prioritised in applications under the indicative funding pool.
- “Critical enablers” such as stigma reduction, gender equality and community mobilisation should be funded as part of a comprehensive MARPs package.
- Civil society representatives should be fully involved in the concept note development stage and all other stages of proposal development.
- It should be clear how non-CCM and regional proposals will be addressed and funded.
- The percentage of funding that goes to TB should be increased to 20% (from the proposed 16%) to reflect the changing paradigm of the TB response and the growing menace of multiple-drug-resistant TB and TB/HIV co-infection.
- A department responsible for supporting civil society engagement should be re-instituted within the Global Fund Secretariat.

The organisations also said that either the “NGO Rule” should be expanded to cover all three diseases or the OECD DAC list eligibility filter should be eliminated. Under the Global Fund’s current eligibility policy, CCMs in upper-middle-income countries not listed on the OECD’s DAC list of official development assistance recipients are not eligible to apply for funding for HIV, although NGOs in these countries can submit non-CCM proposals. (The OECD-DAC is the Development Assistance Committee of the Organisation for Economic Co-operation and Development.)

The 18 organisations that signed the letter to Dr Dybul were: AIDS Action Europe; AIDS Foundation East-West (AFEW); All-Ukrainian Charity Foundations “The Coalition of HIV-Service Organizations”; All-Ukrainian Network of PLWHA (AUN); Association of Harm Reduction Programs “Partner Network,” Kyrgyz Republic; Association Positive Initiative (Moldova); East Europe & Central Asia Union of PLWH; Eurasian Harm Reduction Network (EHRN); Hungarian Civil Liberties Union; International HIV/AIDS Alliance in Ukraine; NGO “Association of Substitution Treatment Advocates of Ukraine” (ASTAU); NGO Mothers for Life (Moldova); NGO New Life (Moldova); NGO “Positive People Armenian Network”; Armenia Open Health Institute, Moscow; Regional Centre for Community Policies (Moldova); Russian Health Care Foundation; and Russian Harm Reduction Network (ESVERO).

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