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of the Global Fund

GLOBAL FUNDS SEEKS \$17-20 BILLION FROM DONORS FOR 2011-2013

Mother-to-child HIV transmission may be eliminated by 2015; malaria may be eliminated as a public health problem within a decade; TB prevalence could be halved by 2015. However, these health targets can only be achieved if current rates of scaling up expenditure on the three diseases are maintained and, ideally, further accelerated. And that, in turn, requires donors to give the Global Fund between \$17 billion and \$20 billion during 2011-2013.

This is what the Global Fund announced in a news release issued on 8 March 2010 and in several documents released in preparation for upcoming “replenishment” meetings with donors. The Global Fund says that demand for donor support has more than doubled since the last replenishment in 2007 (which raised \$10 billion for the period 2008-2010).

An initial replenishment meeting will be held on 24-25 March 2010 at The Hague, Netherlands. This meeting will provide an opportunity for donors to discuss the Fund’s financial needs for 2011-2013 and the results achieved by the Global Fund to date. The meeting will lay the foundation for the pledging conference that will take place at UN Headquarters in New York on 4-5 October 2010.

The Global Fund has provided donors with three possible resource needs scenarios for the period 2011-2013:

- Resource Needs Scenario 1, which would cost \$13 billion, would allow for the continuation of funding for existing programmes. New programmes could only be funded at a significantly lower level than in recent years.
- Resource Needs Scenario 2, which would cost \$17 billion, would allow for the continuation of

funding for existing programmes, and funding for new programmes at a level that comes close to that of recent years.

- Resource Needs Scenario 3, which would cost \$20 billion, would allow for the continuation of funding for existing programmes, and for well-performing programmes to be scaled up significantly, allowing in turn for more rapid progress towards achieving the health-related Millennium Development Goals (MDGs).

By presenting the first scenario, at \$13 billion, the Global Fund is not forecasting a slackening of demand. Rather, it is attempting to describe the level of demand that could be met with these resources. (If this were any other time, the Global Fund would not present for consideration a scenario which does not provide enough money to meet the current level of demand. However, the Global Fund recognises that the world is experiencing difficult economic circumstances, and that meeting future or even current levels of demand represents a significant challenge.)

The Global Fund has prepared an estimate of the impact of the three resource needs scenarios on services delivered. Details are shown in Table 1, below.

Table 1: Services delivered – Projected numbers through end of 2013

for each of three scenarios

Services delivered	Actual numbers (as of end of 2009)	Projected numbers as of end of 2013		
		Scenario 1 (\$13 billion)	Scenario 2 (\$17 billion)	Scenario 3 (\$20 billion)
People on ART	2.5 million	4.4 million	5.8 million	7.5 million
DOTS treatments provided in the last year	1.4 million	3.9 million	5.2 million	6.8 million
LLINs distributed in the last year	34 million	110 million	147 million	190 million
Orphans and other vulnerable children supported in the last year	1.4 million	2.5 million	3.4 million	4.4 million
HIV+ pregnant women receiving PMTCT in the last year	345,000	610,000	820,000	1.1 million

ART = antiretroviral therapy / DOTS = directly observed treatment, short course (for TB)

LLINs = long-lasting insecticide-treated bed nets

PMTCT = Prevention of Mother-to-Child Transmission of HIV

According to the Global Fund, programmes supported by the Fund are making a significant contribution to attaining the 2015 MDG targets. In this context, 2010 is a decisive year. Money committed now will benefit programs which will have effect on the ground from 2012 to 2015. The Global Fund says that countries are approaching a positive tipping point: If they continue on the current path, the returns will be exponential and the world will reverse the AIDS, TB and malaria epidemics.

“In health, 2010 is a pivotal year to finance the final stretch of the effort to reach the Millennium Development Goals”, said Professor Michel Kazatchkine, Executive Director of the Global Fund. “We have made unprecedented progress but it is fragile. If we lose momentum now there will be a heavy price to pay. A failure to continue the scale-up of investments in health will betray the trust of millions.”

The information for this article is taken from “Resource Scenarios 2011-2013,” available at www.theglobalfund.org/en/replenishment/hague/documents, and the news release issued by the Global Fund on 8 March 2010, available at www.theglobalfund.org/en/media.

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