



Independent observer
of the Global Fund

Global Fund Sets Ambitious Fundraising Target of \$15 Billion

The Global Fund wants to raise \$15 billion for 2014–2016. The Fund announced the target in a [news release](#) issued on the eve of the pre-replenishment meeting in Brussels, Belgium on 9–10 April.

The \$15 billion target is an increase of almost 50% over what was pledged for 2011–2013.

“We have a choice: we can invest now or pay forever,” said Mark Dybul, Executive Director of the Global Fund. “Innovations in science and implementation have given us a historic opportunity to completely control these diseases. If we do not, the long-term costs will be staggering.”

Activists said that the \$15 billion is the minimum amount that should be raised. (See last section of this article.)

The Global Fund estimates that \$87 billion is required for 2014–2016 to bring the HIV, TB and malaria epidemics under control in low- and middle-income countries. This includes contributions from implementing countries, the Global Fund and other international donors.

The estimates are contained in a paper entitled “Needs Assessment” published by the Global Fund on 8 April. The Global Fund worked with UNAIDS, the World Health Organization, the Stop TB Partnership and the Roll Back Malaria Partnership to come up with its estimates.

The Global Fund estimates that of the \$87 billion required, \$37 billion (43%) could come from implementing countries and \$24 billion (27%) from donors other than the Global Fund. This leaves a gap of \$26 billion (30%). The paper says that, in theory, the Global Fund could be asked to finance all of this gap if implementing countries submitted requests to cover the full unmet need.

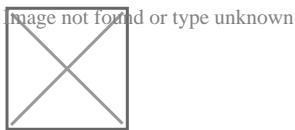
The Global Fund also says that a contribution of \$15 billion from the Fund for 2014–2016 would allow implementing countries and international donors “to cover 87% of the total funding needed to effectively fight the three diseases.”

The \$37 billion estimate for implementing countries for 2014–2016 represents what the paper calls “ambitious but realistic assumptions that countries will continue efforts to boost domestic financing” for the three diseases. The Global Fund is assuming that domestic financing will grow by almost 50% from the current level of about \$8 billion a year.

The \$24 billion estimate for donors other than the Global Fund assumes that financing from these sources will remain relatively constant at current levels. The Global Fund warns that this may be an optimistic assumption given the financial pressures currently facing many donors.

The figure below, taken from the Needs Assessment paper, explains how the Global Fund arrived at its estimate of 87% of resource needs being covered if the Global Fund can raise \$15 billion for 2014–2016.

Figure: Potential global coverage of resource needs, 2014–2016



In terms of diseases, the \$87 billion estimate breaks out as follows: HIV \$58 billion (67%), TB \$15 billion (17%) and malaria \$14 billion (16%).

The Global Fund estimates that a total of \$10.4 billion has been pledged for 2011–2013. The Resource Needs paper says that if the Global Fund were able to raise and invest \$15 billion in 2014–2016, it would result in significant gains compared to just maintaining funding at current levels. For example, 17 million TB and multi-drug-resistant TB patients would receive care in 2014–2016, compared to 14 million if funding were maintained at current levels.

According to the Fund’s news release, an investment of \$15 billion would prevent millions of new cases of malaria, and would save approximately 196,000 additional lives each year compared with current funding levels by preventing a resurgence of malaria. It would also mean preventing more than one million new infections of HIV each year – saving billions of dollars in care and treatment for the long term. Antiretroviral therapy could become available to more than 18 million people in affected countries by 2016, up from eight million in 2012.

Position of Global Fund advocates

According to the Global Fund Advocates Network (GFAN), advocates support the call for \$15 billion for the Global Fund for 2014–2016, but say that this is the minimum amount that should be raised. Advocates called for an ongoing mobilisation effort to raise the “additional” \$11 billion (i.e., the \$26 billion gap minus the \$15 billion).

GFAN made this comment in a [position paper](#) released on 8 April.

GFAN said that some of the reasons why the \$15 billion should be considered a minimum is that in the Global Fund’s resource needs paper, the assumptions concerning the level of domestic funding are “extremely ambitious” and the assumptions regarding funding from donors other than the Fund are “very optimistic.”

GFAN said that the Needs Assessment paper rightly describes that “we are at a crossroads – facing the choice between risking the gains made against the three diseases or accelerating progress to save millions more lives and billions of dollars of additional costs over the long-term.”

This article was modified shortly after it was first posted on GFO Live in order to add comments from the Global Fund Advocates Network.

The Needs Assessment paper is available on the Global Fund website [here](#). The \$10.4 estimate for 2011–2013 comes from another paper on the same site, entitled “Outcome of the Global Fund’s Third Replenishment.”

This is one of a series of GFO articles on the documents released by the Global Fund for the pre-replenishment meeting in Brussels

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