



Independent observer
of the Global Fund

World AIDS Day today, 1 December: and the GFO kicks off its Campaign for Plain Global Fund English...and French...and Spanish...

Dear subscribers

We would first like to open this issue by commemorating World AIDS Day, today, 1 December, when we collectively set some time aside to think about those we have lost, those who continue to be affected by HIV, the gains we have made, and how much more we have to do before we can say that we rest on our laurels.

Today is the start of a week-long set of events and activities in various countries to raise awareness about HIV, show our support for those living with the disease, and remember those who have lost their lives.

In a press release issued on 29 November, UNAIDS issued a stark warning that if leaders fail to tackle inequalities the world could face 7.7 million AIDS-related deaths over the next 10 years. UNAIDS further warned that if the transformative measures needed to end AIDS are not taken, the world will also stay trapped in the COVID-19 crisis and remain dangerously unprepared for the pandemics to come. “This is an urgent call to action,” said UNAIDS Executive Director Winnie Byanyima. “Progress against the AIDS pandemic, which was already off track, is now under even greater strain as the COVID-19 crisis continues to rage, disrupting HIV prevention and treatment services, schooling, violence-prevention programmes, and more. We cannot be forced to choose between ending the AIDS pandemic today and preparing for the pandemics of tomorrow. The only successful approach will achieve both. As of now, we are not on track to achieve either.”

The warning comes in a new report by UNAIDS launched ahead of World AIDS Day entitled [Unequal, unprepared, under threat: why bold action against inequalities is needed to end AIDS, stop COVID-19, and prepare for future pandemics](#).

Thirty-three years ago, the World Health Organization designated 1 December as World AIDS Day. This year marks 40 years since the first AIDS cases were reported, but HIV still threatens the world. According to WHO, the estimated number of people living with HIV globally in 2020 was 37.7 million, 680,000 people died from HIV-related causes in 2020, 1.5 million people were newly infected with HIV in 2020 and 73% of people living with HIV received lifelong antiretroviral therapy in 2020.

This year also marks 20 years since the Global Fund was set up to tackle HIV and defeat AIDS. In that time, over 77 million people have become infected with HIV and over 36 million have died from AIDS-related illnesses worldwide. In countries where the Global Fund invests, AIDS-related deaths have dropped by 65% in the last 20 years. The Global Fund has committed over \$24.6 billion in 587 grants to the fight against HIV/AIDS and commendable efforts are being undertaken in various countries to strengthen the fight against HIV/AIDS pandemic amidst the challenges introduced by the COVID-19 pandemic.

Nevertheless, there can never be a better time to highlight the inequalities existing than now when the world is off track from delivering on the shared commitment to end AIDS by 2030 not because of a lack of knowledge or tools to beat AIDS but because of structural inequalities that obstruct proven solutions to HIV prevention and treatment. Indeed, similar inequalities in access to COVID-19 vaccines are threatening the progress made on the fight against HIV/AIDS and putting the lives of people living with HIV in the world's poorest nations at risk. The COVID-19 pandemic has exacerbated these inequities, severely impacting the most vulnerable communities, exposing the deep inequalities that drive HIV, and threatening decades of progress due to the additional challenges introduced by COVID-19 such as making it harder for people to access essential HIV and sexual and reproductive health services. Inequalities still exist in access to HIV prevention, testing, treatment, and care services for the most marginalized communities and this is affecting the achievement of the '95-95-95' global HIV target set for 2030.

On a lighter note, in Special Issue 1006, we finished the Editorial with a plea to the writers of Global Fund reports, updates, and other papers to simplify their English. We have now translated our 'rant' into a light-hearted article that examines some (but far from all!) of the major linguistic transgressions; and we have chosen to start our issue with this article, given the importance of the topic.

Several people indicated that they agreed with us that it was time to address the increasingly convoluted language in Global Fund documents, especially Board documents. And we are not alone in thinking this, given the African Constituencies Bureau's recent article on the topic where they compare the Global Fund to the Tower of Babel! So, we hope you enjoy our article, and please feel free to share any other linguistic confusion with us ([A deep dive into Global Fund language: Trying to make sense of the impenetrable and incomprehensible](#)).

Our second article is another in the popular series hosted by Alan Whiteside, in which he and Ann Ithibu look further into the concept of establishing an African Commission for Inquiry into COVID-19 ([A COVID-19 Commission of Inquiry can improve pandemic preparedness in Africa](#)). Their argument is that such a body could help with future pandemic preparedness and response on the continent. Let us know what you think about this.

We then go on to present you with several articles updating you on Board papers presented and/or discussed at the Board meeting in November. There are always too many papers to comment on all of

them in one sitting (and it would result in a very indigestible GFO issue). Hence, our remaining five articles cover the [Prospective Country Evaluations](#), the [Technical and Review Panel Report](#), an update on the Office of the Inspector General's progress in resolving [Agreed Management Actions](#), a breakdown of the [2022 Operating Expenditure Budget](#), and an [Update on Global Fund Country Funding and Portfolio Optimization](#).

We are also very sorry to announce that after nearly six years we are losing Ann Ithibu. While it is time for her to spread her wings and move on to more glorious pastures, we will be so sorry to miss Ann, both as a respected colleague and very dear friend. We are glad to say that she will continue to write for GFO. Meanwhile, we wish her all the very best in her new role and hope that her new employers realize what a treasure they have in Ann.

We hope you enjoy this issue; and please look out for our last issue this year before Christmas and the New Year, on 15 December.

As ever, Aidspace and our editorial team, under the leadership of Ida Hakizinka, does its best to ensure the accuracy of data and statements in our published articles ? and hence our inclusion of hyperlinks ? but if you, the reader, identify an error or important omission, please notify us and provide us with your data source; and we shall be happy to publish a correction or amendment.

If you enjoy the GFO and find it relevant to your work, please encourage your colleagues to colleagues to [subscribe!](#)

Don't forget: if you are aware of an interesting development relevant to disease programmes or health systems and that you feel is worthy of global discussion, do let me know together with the name of a person prepared to write about this. Suggestions and comments can be sent to me in English, French or Spanish. My email address is: christelle.boulanger@aidspan.org.

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