

THE GLOBAL FUND BOARD DISCUSSES THE DEVELOPMENT OF ITS NEXT STRATEGY

The Board of the Global Fund to fight HIV, tuberculosis (TB), and malaria discussed the development of its next strategy at its 44th Board meeting. The discussion was based on the GF/B44/07 document issued by the Secretariat. The strategy is a multi-year roadmap that will direct the Global Fund's actions. The current strategy will expire in 2022. The Board focused on the schedule and the high-level issues related to its strategy development.

The Global Fund plans to finalize the post-2022 strategy framework by the first quarter of 2021, so that the partnership can use it to develop a business case that will serve as a basis for resource mobilization, culminating in the Seventh Replenishment scheduled for the third quarter of 2022. The Global Fund endeavors to collect the input of all stakeholders. Constituencies and an external evaluation highlighted the continuous relevance of three elements of the current strategy: maximizing impact against the three diseases, strengthening health systems, and promoting human rights and gender equality. While some constituencies emphasized new elements such as global health security, climate change, or social determinants of health, others cautioned against unduly increasing the Global Fund's scope. Critics explain that the Global Fund should focus on its core mandate: to fight HIV, TB, and malaria.

Information for this article comes from the documents that the Global Fund Secretariat shared with the Board constituencies ahead of the Global Fund's 44th Board meeting, as well as some constituency statements that Aidspan has seen.

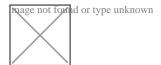
Schedule of post-2022 strategy development

Constituencies have been discussing the Global Fund strategy since the beginning of the year 2020.

(Aidspan wrote about the African, Latin America and the Caribbean and the South-East Asia constituencies input in the Global Fund strategy earlier).

The Board discussed the schedule for the strategy development (Figure 1). For the remainder of 2020, the Global Fund Board will weigh in with input at the second Board retreat, which will be held before the end of the year. (The previous Board retreat occurred in beginning of November 2020.) Partnership forums, which are meetings with representatives of different constituencies, and other Global Health stakeholders will take place in the first quarter of 2021. Input from these forums will be summarized into a strategy framework that will be discussed by the strategy committee in the first quarter of 2021 and submitted to the Board for approval in the second quarter of 2021. The Secretariat will develop the strategic narrative for the remainder of the year. In early 2022, the Global Fund will develop an investment case that will be used for the Seventh Replenishment Conference in the third quarter of 2022.

Figure 1: Schedule for the strategy development



Source: Global Fund Secretariat

Current situation with the three diseases and Global Fund funding

The Global Fund has aligned its objectives and timelines to the Sustainable Development Goals (SDGs). SDG 3.3 aims to end HIV, TB, and malaria as epidemics by 2030. The report stated that the world is off track to meet that target; meeting the target will require about a 90 percent reduction in new infections to meet incidence and mortality goals. The mortality due to those three diseases has declined faster than incidence (new cases per year).

For HIV, there are still large gaps in prevention towards adolescent girls, young women, and key populations. More than 60 percent of new infections occur among key populations, including men who have sex with men, sex workers, and persons who inject drugs. According to the report, progress towards Prevention of Mother to Child Transmission (PMTCT) and pediatric treatment is uneven across regions.

With regard to TB, the report stated that the focus would be on finding missing cases. Also, gaps remain in the detection and treatment of multi-drug resistant TB (MDR-TB). There is a need for shorter and oral MDR-TB regimens. (Current MDR-TB treatment lasts between 18 and 24 months.)

With regard to malaria, the number of cases decreased globally since 2013. The flat curve conceals increases in almost every high burden area, offset by declines in a few countries such as India. Malaria deaths remain concentrated: the ten highest burden countries account for two-thirds of all deaths. The number of malaria deaths are stagnant or rising in five countries: the Democratic Republic of Congo (DRC), Burkina Faso, Tanzania, Uganda, and Angola. Also, insecticide resistance is on the rise: in 2017, about a quarter of the 80 reporting countries announced that mosquitoes had become resistant to all four current insecticide classes.

In terms of funding, the Global Fund accounts for 8 percent of global HIV and TB funding, but 40 percent of global malaria funding. Government funding accounted for approximately 60 percent of global spending on health.

However, domestic and international resources will be constrained by the COVID-19 epidemic.

Emphasizing resilient health and community systems in the new strategy

The next Global Fund strategy will focus on its comparative advantages or areas of strength. The Global Fund was created to fight HIV, TB, and malaria; it will continue to do so in a way that helps build health and community systems and promotes equity, human rights, and gender equality. While some voices added global health security, the effect of climate change, others cautioned against a scope that is too wide.

Some voices also insisted on innovation and flexibility in implementation as the Global Fund applies its sustainability, transition, and co-financing in the aftermath of COVID-19. Other voices proposed reinforcing global health security to fight current and future pandemics that could derail the fight against HIV, TB, and malaria. They highlighted the potential of better partnerships with multi-lateral and international organizations and in-country institutions such as civil society, communities, other government sectors, and the private sector.

Many constituencies stated that the COVID-19 pandemic highlighted the dual importance of health and community systems. Strengthening health systems will help fight HIV, TB, and malaria and sustain gains obtained in the last two decades of the fight against those three diseases. Community systems allow other community members—including people living with or affected by the three diseases—to reach out, educate and link other community members to diagnosis or care, especially the vulnerable and marginalized. Strengthening health and community systems will help the Global Fund partnership improve the quality of care and save lives.

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