



Independent observer
of the Global Fund

How the mighty are fallen: the tragedy of Uganda

Dear subscribers,

We start this Editorial by bringing you the [Joint Statement by the Leaders of the Global Fund, UNAIDS and PEPFAR on Uganda's Anti-Homosexuality Act 2023](#). The statement from the three organizations, issued on 29 May, expresses their deep concern about the harmful impact of the Ugandan Anti-Homosexuality Act 2023 on the health of its citizens and its effects on the AIDS response that has been so successful in the past, Uganda being a global leader in how to mount an effective HIV program.

Many of us will remember the incredible success story of Uganda when the fight against AIDS first came to the forefront of people's awareness. "Uganda and President Yoweri Museveni have been leaders in the fight to end AIDS," the statement points out. "Progress has been made thanks to the implementation of large-scale prevention, diagnosis, treatment and care programs, all provided on the principle of access to health care for all who need it, without stigma or discrimination. This approach has saved lives. The strong health systems built to support the AIDS response serve the entire population of Uganda. This was evident as community health workers and health systems developed for the AIDS response played a key role in tackling COVID-19 and other disease threats. Maintaining this is vital: Failures in the HIV public health response will have system-wide impacts that could negatively affect everyone."

So sad, therefore, to see that Uganda's HIV response is now seriously compromised. As the three organizations say: "The Anti-Homosexuality Act 2023 will obstruct health education and the outreach that can help end AIDS as a public health threat. The stigma and discrimination associated with the passage of the Act has already led to reduced access to prevention as well as treatment services. Trust, confidentiality, and stigma-free engagement are essential for anyone seeking health care. LGBTQI+ people in Uganda increasingly fear for their safety and security, and increasing numbers of people are

being discouraged from seeking vital health services for fear of attack, punishment and further marginalization.”

What can we, stakeholders in the global HIV response, do to support Uganda and her most vulnerable populations? Sanctions such as cutting international aid will have the opposite effect since they will be unlikely to impact parliamentarians and law makers but will undoubtedly mean that defenceless beneficiaries are deprived of much-needed services. It's a dilemma and one which has no easy or immediate solution.

On to this issue of the Global Fund Observer.

We start with a very unusual and quite fascinating story of the Office of the Inspector General (OIG) report that won't go away even though it was published two years ago! This is because the subject of the investigation, a subcontractor to Pakistan's TB program, refuses to accept the OIG's findings and has taken the Global Fund to court. You can read all about it here – [Pakistan TB grant recipient refuses to accept OIG findings and takes the Global Fund to court in South Africa](#). What makes it especially interesting and relevant is that the Secretariat only recently updated the 49th Board on the Privileges and Immunities Annual Report. Clearly a topic very dear to the Secretariat's heart, given this court case.

We take a more in-depth look at some of the Committee and Board papers, such as those pertaining to the COVID-19 Response Mechanism (C19RM). We bring you an update on C9RM funding, financial performance and extension to end 2025. It is surprising therefore to see that despite its poor performance with a shockingly low expenditure rate of 37% in-country allocation, the Global Fund has nonetheless applied to the Pandemic Fund for more resources. Has it bitten off more than it can chew? Read our article [Low absorption rates for C19RM implementation](#).

Moving on, we have four OIG reports to report back on. The first, [In-country data and data systems](#), presents findings and agreed management actions that cut across the entire Global Fund portfolio. It reports on inadequate programmatic data quality that reduces performance monitoring and capacity to adapt programs to changing contexts; deficient procurement and supply chain data that negatively impact the ability to mitigate stock-outs and expiries; health information systems that are not effectively used to support data quality; and supervision and assurance on data that remain weak, thus limiting the reliability of results. It's an important report, if a somewhat dry read.

However, the other three OIG reports are much more compelling reading, unfortunately for the wrong reasons. [Unveiling Sexual Exploitation and Abuse: A Comparative Analysis of Health Programs in South Africa, Uganda, and Zimbabwe](#) tells the story of three Global Fund grant Sub-Recipients in three African countries who exploited the most vulnerable beneficiaries under their care. It's great that the OIG continues to produce these investigations and the more it publishes, the more countries will hopefully be encouraged to come forward.

Our article on the Global Fund's [Tech Collective: The digital solution for improving healthcare systems](#) describes the innovations launched by the Rockefeller Foundation with the Global Fund to leverage data and technology to improve global health systems. And we finish with news of a training held with Supreme Audit Institutions to strengthen [Gavi support to vaccination in Nigeria](#).

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.

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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 us, Ida Hakizinka or Arlette Campbell White in English, French or Spanish at ida.hakizinka@aidspan.org or acampbell.white@aidspan.org.

The Aidspace Editorial Team

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