



Independent observer  
of the Global Fund

## GLOBAL FUND NOMINATES NEW PRINCIPAL RECIPIENT FOR HIV AND TB PROGRAMS IN CENTRAL AFRICAN REPUBLIC

The International Federation of Red Cross and Red Crescent Societies (IFRC) has been nominated to oversee implementation of HIV and TB programming in Central African Republic (CAR) to ensure that essential emergency services are maintained.

IFRC is currently the principal recipient (PR) on a 15-million-euro malaria grant, which is underwriting a mass distribution campaign for long-lasting impregnated nets and the testing and treatment of uncomplicated malaria cases in accessible and functional health sites.

A decision on the nomination is expected in June, subject to approval from the Board, and work on the joint HIV/TB grant could begin as early as July to provide continuity of care and services “to respond to the current crisis,” the Fund portfolio manager for CAR, Mark Saalfeld, told Aidspan in a written answer to a question.

IFRC replaces the national HIV commission and TB programs as principal recipient on the grant. The Global Fund declined to say how large the new grant would be, pending completion of negotiations that are due to start in early June. Access to health services in the country of 4.5 million has been drastically curbed amid an escalating conflict begun in March 2013 that has sent tens of thousands fleeing over its borders and displaced hundreds of thousands more. Widespread inter-religious clashes have killed more than 2,000 people and there is no part of the country spared the deepening humanitarian emergency.

Many of the proposed activities to be supported by the Fund will be in the capital, Bangui, where displaced populations have taken refuge under the protection of African, European Union and French peacekeepers.. In addition, activities will be supported in other areas of the country where health sites are

functioning and accessible.

Among the activities to be supported by the grant is the purchase of anti-retrovirals to respond to the needs of the estimated 14,000 people currently under treatment. Rapid diagnostic tests and drugs to prevent opportunistic infections and mother-to-child transmission are other commodities to be procured under the grant.

The grant talks will also assess the possibility of funding medically prescribed nutritional support for the most vulnerable cases on treatment in partnership with the World Food Program (WFP) and management of HIV/TB co-infection.

IFRC was appointed PR for the malaria grant in August 2013 (see article [here](#)) because of its experience “operating in fragile states and complex humanitarian emergencies”.

The decision to expand its responsibilities to include HIV/TB programming is a direct response to the current crisis and prioritizes life-saving activities and treatment.

“The grants are being designed flexibly to respond to emerging needs for life-saving activities and treatment and to risks with a view to maximizing impact,” Saalfeld said.

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