

## Fighting Pandemics and Building a Healthier and More Equitable World

Global Fund Strategy (2023-2028)

## **Executive Summary**



Women wait for a medical consultation at the Cissela Health Center in Guinea. Albert Masias/MSF

Over the last 20 years, the Global Fund partnership has saved 44 million lives and reduced the annual death toll from HIV, tuberculosis (TB) and malaria by 46% since its peak in countries where the Global Fund invests.<sup>1</sup> We, the Global Fund partnership of implementer governments,<sup>2</sup> civil society, technical partners, development partners,<sup>3</sup> the private sector and people and communities<sup>4</sup> affected by the three diseases, have proven that by acting together we can overcome barriers, save lives and dramatically change the course of these three terrible pandemics.

Now we stand at a crossroads. The impact of COVID-19 has been devastating, exacerbating existing inequities, diverting critical resources, slowing access to critical HIV, TB and malaria prevention and treatment activities, and putting vulnerable people further at risk. In 2020, for the first time in our history, key programmatic results declined across all three diseases.<sup>1</sup> With only eight years to go, COVID-19 has knocked us further off course from the Sustainable Development Goal (SDG) target of ending the three epidemics by 2030.

To respond to these challenges, the Global Fund has developed an ambitious new Strategy to get progress back on track against HIV, TB and malaria and contribute to the SDG target of achieving universal health coverage (UHC). To enhance our impact, we will put even greater focus on equity, sustainability, program quality and innovation, take determined action to tackle human rights and gender-related barriers, and leverage the fight against HIV, TB and malaria to build more inclusive, resilient and sustainable systems for health (RSSH) better able to deliver health and well-being, and to prevent, identify and respond to pandemics. Our vision is a world free of the burden of AIDS, tuberculosis and malaria with better, more equitable health for all.



saved through the Global Fund partnership To achieve our mission of ending HIV, TB and malaria as public health threats, we must focus even more on making catalytic, people-centered investments that spur faster progress. We will put particular emphasis on reducing new infections across the three diseases, addressing structural barriers and leveraging innovations in prevention tools and approaches. Against HIV, we will focus on closing HIV prevention and treatment coverage gaps through more equitable service delivery models, better tailored to people's needs, with particular emphasis on key and other most vulnerable groups. Against TB, we must tackle the all-toopersistent vulnerabilities, barriers and gaps that limit access to and quality of TB prevention and treatment programs. Against malaria, we will focus on delivering more people-centered, integrated interventions better aligned to the context and needs of individual communities, while addressing barriers to equitable access, improving the quality of services, tackling resistance and demonstrating the path to eradication. There is no middle ground in fighting pathogens as formidable as HIV, TB and malaria: We either win or lose. Our new Strategy is about recommitting and redoubling our collective efforts, so that we finally defeat HIV, TB and malaria - three pandemics that still kill millions, especially those from the poorest, most vulnerable and most marginalized communities. Ensuring that everyone, everywhere no longer faces the threat of HIV, TB and malaria, is why the Global Fund was founded and how our achievements will ultimately be judged. We must get back on track and achieve this goal.

Our success in achieving our primary goal will be underpinned by four mutually reinforcing contributory objectives that leverage the core strengths and comparative advantages of our unique partnership.

First, we will build the resilience and sustainability of systems for health through investments that drive impact against HIV, TB and malaria and related conditions, including coinfections and comorbidities. We will seek to accelerate the shift from more siloed interventions to more integrated, people-centered models of prevention, treatment and care, so that individuals' holistic health needs are met. With our focus on the poorest and most marginalized, we will support countries as they progress toward delivering truly UHC.

Second, the new Strategy builds on the unique strengths of the Global Fund partnership by introducing an explicit objective to maximize the engagement and leadership of affected communities, to ensure that no one is left behind, and that services are designed to respond to the needs of those most at risk. This principle, that communities are at the center of everything we do, is core to the new Strategy.



Community health workers in Meghalaya state, India, enter a village where they will conduct consultations with patients. More than two million community health workers are on the front lines in countries where the Global Fund invests, providing disease surveillance, prevention, treatment and care to vulnerable and hard-to-reach communities. *The Global Fund/Vincent Becker*  Third, the Strategy reiterates and reinforces the imperative to maximize health equity, gender equality and human rights by deepening the integration of these dimensions into our HIV, TB and malaria interventions, including through expanding the use of data to identify and respond to inequities, scaling up comprehensive programs to remove human rights and genderrelated barriers, and leveraging the Global Fund's voice to challenge harmful laws, policies and practices.

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Fourth, the Strategy recognizes the need to mobilize increased resources, particularly in light of the reverses resulting from COVID-19. Recognizing the unprecedented fiscal challenges faced by implementer and donor countries owing to the pandemic, we will be determined and innovative in our efforts to unlock additional domestic and donor funds, while simultaneously driving relentlessly for greater value for money. In addition, the new Strategy responds directly to the dramatic changes in the global health context by introducing an evolving objective on pandemic preparedness and response (PPR) so that we can bring our partnership's expertise and inclusive model to this new imperative, and in doing so, help protect progress on HIV, TB and malaria. Our PPR objective enables the Global Fund to play our part alongside partners in the global response to COVID-19, to strengthen the resilience of systems for health and HIV, TB and malaria programs to pandemic threats, to support countries and communities to prevent, detect and respond to new pathogens of pandemic potential, and to address the multifaceted threats to health arising from climate change.

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Kenny Espinosa, an HIV activist and community health worker in Bogotá, Colombia, demonstrates how to use an app called TeCuidamos.com. The app, developed with investments from the Global Fund, provides remote access to HIV diagnosis and prevention services for men who have sex with men, transgender people and other vulnerable populations. *The Global Fund/Joe Miguel Rodriguez/Panos* 

Finally, delivery of this Strategy and achievement of our goals will depend on each player in our extraordinary partnership playing their distinct and complementary part. The success of the Global Fund model is based on the principles of country ownership and partnership. Implementer governments are responsible for the critical role of delivering strong, equitable health systems and disease programs that respond to the needs of people and communities; and communities for guiding how their needs can best be met and for delivering programs to ensure that no one is left behind. Civil society, technical partners, development partners and the private sector all play their own unique part. The new Strategy lays out explicit roles and accountabilities for every partner to ensure clarity and shared responsibility for our collective success. The Strategy also highlights where we must change the way we work and strengthen our collaboration to maximize impact and accelerate the pace of implementation. With only eight years to go until 2030, we have no time to lose.

## **Global Fund Strategy Framework Overview**

Full Strategy Framework including an overview of sub-objectives is available on the Global Fund website.<sup>5</sup>



## What Is Different about this New Strategy?

First of all, it is important to stress what remains the same. The primary goal of the Global Fund is still **to end AIDS**, **TB and malaria**. That's what the Global Fund partnership was created to do, and it is against this benchmark that our success will be judged. Our fundamental philosophy also remains the same: The Global Fund works as a partnership and achieves success by supporting implementer governments, affected communities and other in-country stakeholders to have the tools that they themselves determine are needed to fight the three diseases. Our relentless focus on outcomes remains unchanged: Our performance will ultimately be judged by lives saved and infections averted.

But there is also much that is different – so much, that providing an exhaustive list would require repeating much of what is set out in the Strategy Narrative. However illustratively, here are 10 examples of aspects of the Global Fund partnership's Strategy that will change our work to accelerate the pace of implementation:

1.	Across all three diseases, an intensified focus on prevention. We have made better progress on saving lives than on reducing infections, but to end the pandemics, we have to cut new infections dramatically, including among key and vulnerable populations.	Greater emphasis on programmatic and financial sustainability, to ensure the progress we achieve can withstand shocks and reversals, and that the momentum can be sustained.
2.	Much more emphasis on integrated, people-centered services, rising above disease silos to build RSSH that protect people from multiple pathogens, address their holistic needs and underpin health and well-being for all.	Greater focus on accelerating the equitable deployment of and access to innovations, working with partners to take an end-to- end view to rapidly address bottlenecks to deployment to those most in need.
3.	A more systematic approach to supporting the development and integration of community systems for health, recognizing the vital role they play in combatting the three diseases and reinforcing system resilience and sustainability.	Much greater emphasis on data-driven decision-making, by investing in systems and capabilities to enable the rapid generation, analysis and use of high-quality, disaggregated data.
4.	A stronger role and voice for communities living with and affected by the diseases, reinforcing this unique strength of the Global Fund partnership and tackling barriers to effective participation and leadership, to put the most affected communities at the center of everything we do.	Explicit recognition of the role the Global Fund partnership can and should play in pandemic preparedness and response, given the knock-on impact of pandemics on HIV, TB and malaria, the unique positioning of the Global Fund in this arena, and acknowledging the need to define roles and responsibilities in collaboration with our partners.
5.	Intensified action to address inequities, human rights and gender-related barriers, scaling up and strengthening current activities, building on our experience, and raising our level of ambition.	<b>Clarity on the roles and accountabilities of</b> <b>Global Fund partners across every aspect</b> <b>of the Strategy</b> to ensure we hold each other mutually accountable in delivering this Strategy.



A health care worker wears personal protective equipment (PPE) in Madagascar. The COVID-19 pandemic has strained the country's health system, including its ability to fight other diseases such as HIV, TB and malaria. *World Bank/Henitsoa Rafalia* 



- 1 2021 Global Fund Results Report. The Global Fund, 2021.
- 2 Implementer governments include governments at national, sub-national and devolved levels.
- 3 Development partners encompass bilateral and multilateral organizations that contribute resources and expertise (and often on-the-ground implementation capacity), including donors to the Global Fund, donors with bilateral programs and organizations that contribute expertise. They do not include technical partners of the Global Fund, which have their own category.
- 4 Communities living with or affected by HIV, TB and malaria, including key and vulnerable populations.
- 5 https://www.theglobalfund.org/media/11223/strategy\_globalfund2023-2028\_framework\_en.pdf