

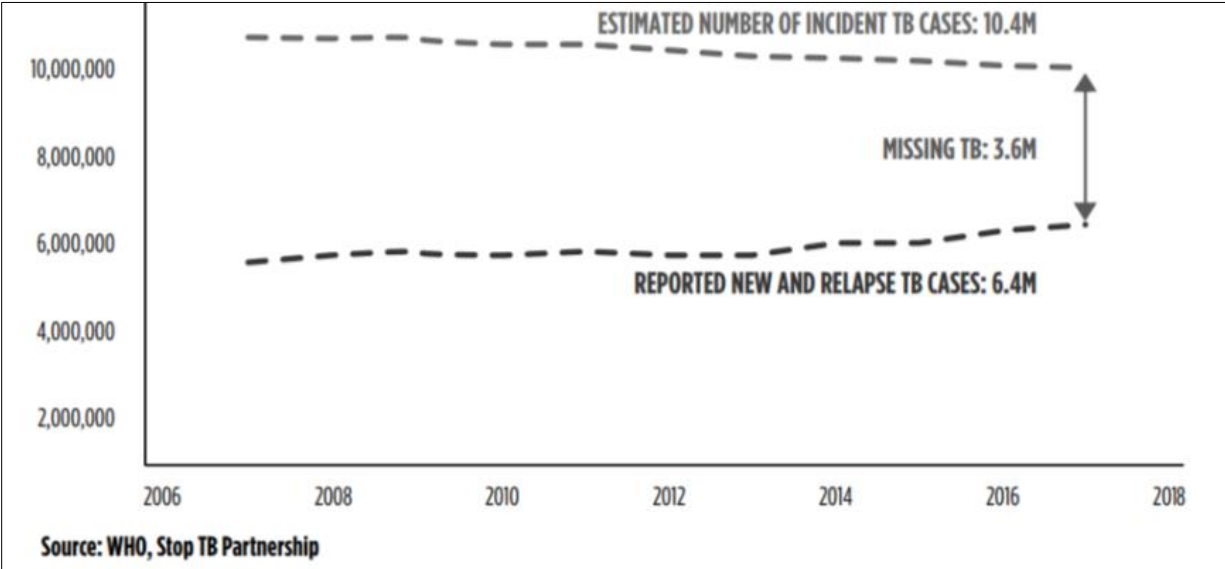
The Basics: A Global Partnership to Fight Diseases of Poverty

Just twenty years ago, HIV/AIDS, tuberculosis, and malaria were wreaking havoc on populations across the globe, killing millions in a worldwide crisis. But the world came together to change the future. Countries pooled their resources and created the Global Fund to Fight AIDS, Tuberculosis and Malaria. Now almost two decades later, that international partnership has **helped save 27 million lives.**¹

The Global Fund focuses on three infectious diseases that disproportionately affect people in poor countries and communities: HIV/AIDS, tuberculosis, and malaria.

Tuberculosis (TB)

TB is a disease caused by a bacterium and spread through air when people who are infected cough, sneeze, or spit. TB is curable, but without access to accurate diagnosis and effective treatment, it is deadly. Since 2015, **TB is the leading cause of death from infectious disease**, and causes 1.6 million deaths per year.² Over 10 million people become sick with TB every year, and of those, 4 million people are missed by their health care system.³



Source: The Global Fund. (2019). Step up the fight: Investment Case Sixth Replenishment 2019. "Each year, nearly 4 million people infected with TB are "missed" by the healthcare system."

¹ The Global Fund. (2019). Step up the fight: Investment Case Sixth Replenishment 2019. Available at https://www.theglobalfund.org/media/8279/publication_sixthreplenishmentinvestmentcase_report_en.pdf

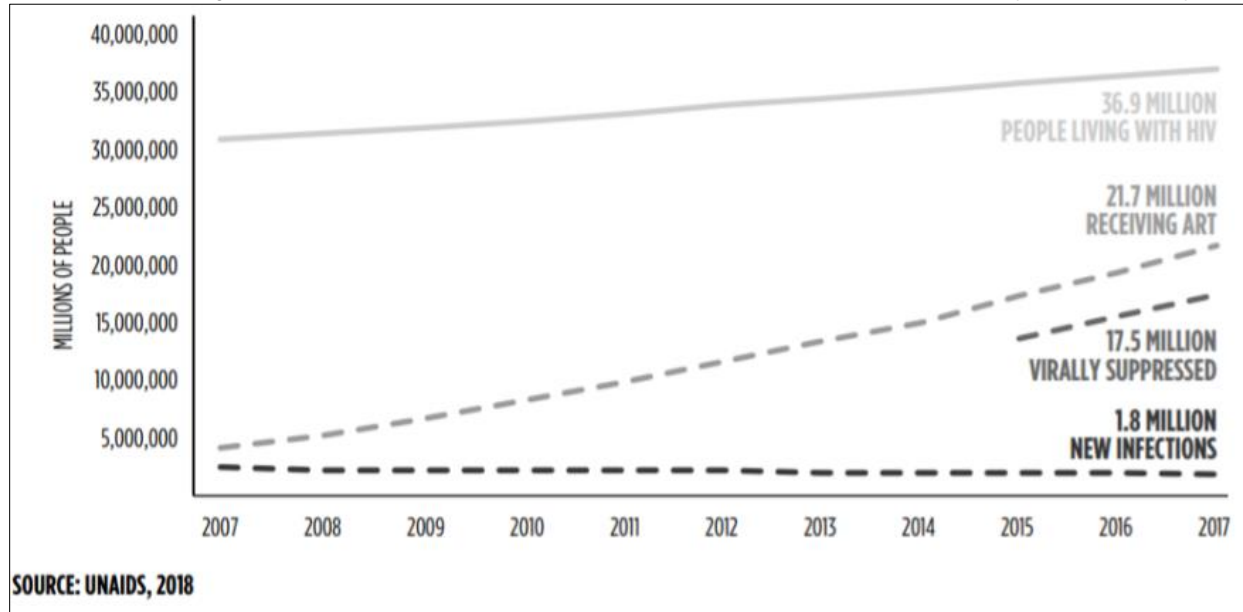
² World Health Organization. (2018). Global Tuberculosis Report. Available at https://www.who.int/tb/publications/global_report/en/

³ Ibid.

HIV/AIDS

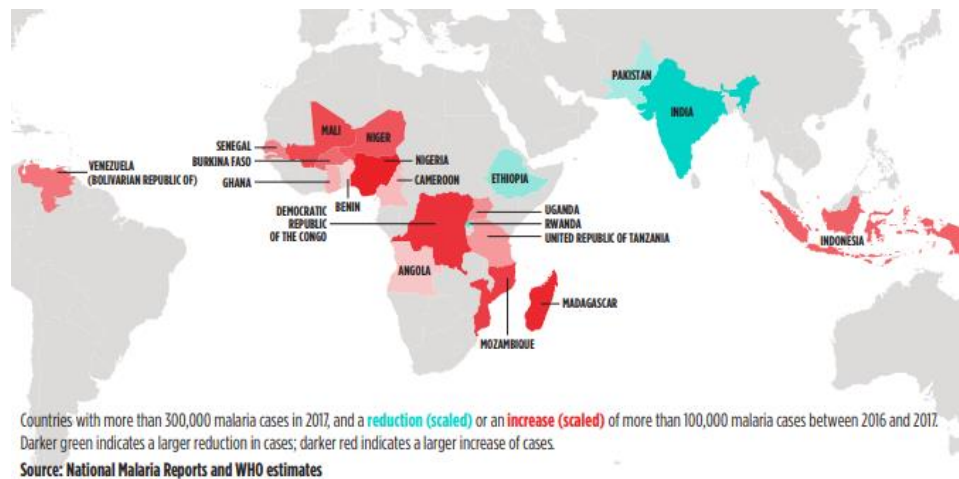
The world has made extraordinary progress in combatting HIV/AIDS through the scale-up of effective treatment programs, including anti-retroviral therapy. AIDS-related deaths have declined 51 percent since the peak of 1.9 million deaths in 2004, but nearly 1 million people each year still succumb to the disease.⁴

There have been great strides in treatment of HIV/AIDS, however, 1.8 million people are newly infected each year.⁵



Malaria

Deaths from malaria have dropped 60 percent globally since 2000. Investments through the Global Fund and the U.S. President's Malaria Initiative (PMI) have enabled the rapid scale-up of rapid diagnostic tests, treatment, and prevention measures such as sleeping under an insecticide treated bed net. Still, annually there are 219 million cases of malaria per year, and 435,000 deaths, the overwhelming majority of which occur among young children in sub-Saharan Africa.⁶ Prevention and treatment of malaria has been scaled up in recent years but more needs to be done to protect the most vulnerable.



⁴ UNAIDS. (2018). Global HIV & AIDS Statistics – 2018. Available at <https://www.unaids.org/en/resources/fact-sheet>

⁵ The Global Fund. (2019). *Step up the fight: Investment Case Sixth Replenishment 2019*.

⁶ World Health Organization. (2019). Malaria fact sheet. Available <https://www.who.int/en/news-room/fact-sheets/detail/malaria>

How the Global Fund Works to Fight AIDS, Tuberculosis and Malaria

As a multilateral partnership, the Global Fund pools funding from donor countries and private sector contributions. Countries that are affected by the three diseases develop and submit proposals, and the Global Fund provides funding as well as oversight and accountability.

The Global Fund is guided by several key concepts:⁷

<p>Country Ownership</p>	<p>The Global Fund works to ensure that the countries implementing programs to fight AIDS, TB, and malaria determine the best use of resources, and that the voices of the communities are reflected in decision-making. At the country level, funding proposals to the Global Fund are developed by a Country Coordinating Mechanism (CCM). This body is not just government officials, but includes representation for civil society organizations, faith-based organizations, and people directly affected by the diseases. The Global Fund also implements a system of “dual-track financing,” which means that funding does not go just to government ministries, but also to non-governmental organizations who are often better positioned to reach poor, rural, and marginalized communities.</p>
<p>Inclusive Governance Structure</p>	<p>This inclusive model at the country level is mirrored in the Global Fund’s governance structure. The board of directors of the Global Fund includes representation not just from donors and technical agencies, but from the recipient countries affected, civil society in both the global north and south, and communities directly affected by the diseases. Each of these constituencies has a voice and vote on the board, which sets priorities and makes strategic decisions about the use of the Global Fund’s resources</p>
<p>Transparency and Accountability</p>	<p>The Global Fund is a model of aid transparency and accountability. Each proposal to the fund is reviewed by a Technical Review Panel, and independent group of health, development, and finance experts who evaluate the merit of each proposal and may request changes to adhere to best practices. In each country the Global Fund works with a Local Fund Agent (typically an accounting firm) to monitor and evaluate the implementation of programs. The independent Office of the Inspector General (OIG) safeguards the use of Global Fund resources, and the results of any OIG audit or investigation are made publicly available. Together these mechanisms provide a strong system of transparency and accountability so that donors and recipient countries can trust that resources are put to good use.</p> <p>In a recent study, researchers from Georgetown University examined whether the Global Fund’s participatory approach had any broader effects on country governance. They found that increased aid from the Global Fund was associated with better control of corruption, government accountability, political freedom, and rule of law – not just related health programs, but more broadly. This link between Global Fund aid and good governance holds up even when controlling for other relevant factors.</p>

⁷ The Global Fund. (2019). *Step up the fight: Investment Case Sixth Replenishment 2019*.

Leverage

As a multilateral institution, the Global Fund uses its size and partnerships to maximize the health impact of every dollar spent. The Global Fund requires and supports countries to co-invest their own domestic resources alongside Global Fund programs. Countries have responded by providing a **41 percent increase in co-financing commitments** in the current grant cycle. By pooling resources, the Global Fund is able to leverage its role as a major purchaser of drugs and other commodities to get more value for its money. **The Global Fund saved \$205 million in 2017 alone through this “pooled procurement” approach**, and an agreement reached last year with AIDS treatment providers will save \$324 million by the end of 2021.

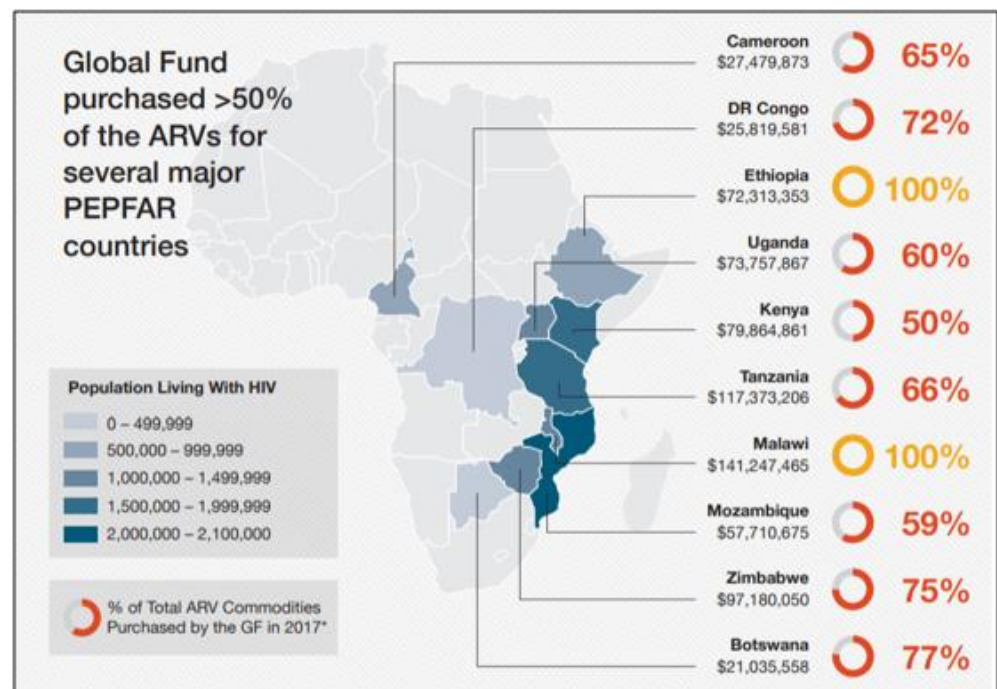
While guided by these key concepts, *impact of the programs is the utmost goal*. The Global Fund and its partners have a relentless focus on impact, and regularly report key indicators across programs to demonstrate how contributions to the fund ultimately result in better health for people in poor countries. In 2017, in countries where the Global Fund invests:

- 17.5 million people are on antiretroviral therapy for HIV
- 5 million people were tested and treated for TB
- 197 million mosquito nets were distributed
- **And 27 million lives have been saved to date by the Global Fund**

United States Leadership

The U.S. is the biggest donor to the Global Fund. By law, the United States cannot provide more than one-third of the Global Fund’s total budget, which requires other donors to step up. At the last pledging conference in 2016, other donors responded by significantly increasing their contributions. Germany and the United Kingdom, Italy and Japan all increased their pledges to the Global Fund by 33 percent.

U.S. leadership has been instrumental in the Global Fund’s success, and the success of the Global Fund is key to achieving our global health and diplomacy goals. U.S. bilateral aid programs for HIV/AIDS, TB, and malaria also work closely with the Global Fund



Source: The Foundation for AIDS Research

on the ground to complement each other's strengths. The President's Plan for Emergency AIDS Relief, the U.S.'s flagship global health program, relies heavily on the Global Fund to reach its goals. In 2017, the Global Fund spent 886 million dollars on anti-retroviral (ARV) treatment drugs for HIV/AIDS in countries where PEPFAR operates, and the Global Fund is frequently the primary purchaser of ARVs for an entire country.⁸

With a strong record of achieving impact, **the Global Fund enjoys strong bipartisan support** in Congress. In January, a bipartisan group of 137 members of the House of Representatives, led by Representatives Barbara Lee (D-CA) and Chris Smith (R-NJ), wrote to Secretary of State Mike Pompeo urging the U.S. to increase its pledged funding to the Global Fund.⁹ Last year a bipartisan group of 18 Senators led by Senators Lindsay Graham (R-SC) and Patrick Leahy (D-VT) also asked Secretary Pompeo to maintain strong U.S. leadership and funding for the Global Fund.¹⁰

Challenges and Opportunities to End the Epidemics

*The progress in the fight against AIDS, TB, and malaria has been nothing short of remarkable, but key challenges remain.*¹¹

<p>Drug and insecticide resistance</p>	<p>As programs to fight AIDS, TB, and malaria have scaled up, the diseases themselves are fighting back. Progress against malaria is stalling, and resistance to artemisinin (a malaria treatment drug) and insecticides present a growing threat in the regions hit hardest by the disease. HIV/AIDS programs are also grappling with drug-resistance; 10 percent of people starting anti-retroviral treatment in sub-Saharan Africa have a strain of HIV that is resistant to at least one of first-line drugs available.</p> <p>The biggest challenge in drug-resistance is in TB. Drug-resistant TB makes up one-third of all global deaths from antimicrobial resistance, and only 25 percent of those afflicted with multidrug-resistant (MDR) TB are diagnosed and treated.</p>
<p>Marginalized populations</p>	<p>As the world has made progress in global health, the burden of disease increasingly concentrated in particularly vulnerable populations. A failure to tackle stigma and discrimination associated with the HIV/AIDS has halted progress against new infections and deaths among marginalized groups, including adolescent girls and young women. Nearly 1,000 adolescent girls and young women are infected with HIV every day. Young women aged 15-24 are up to eight times more likely to be HIV positive than young men in some African countries.</p>

⁸ The Foundation for AIDS Research. (2019). A global response to HIV requires the Global Fund. Available at: <https://www.amfar.org/infographics-global-fund/>

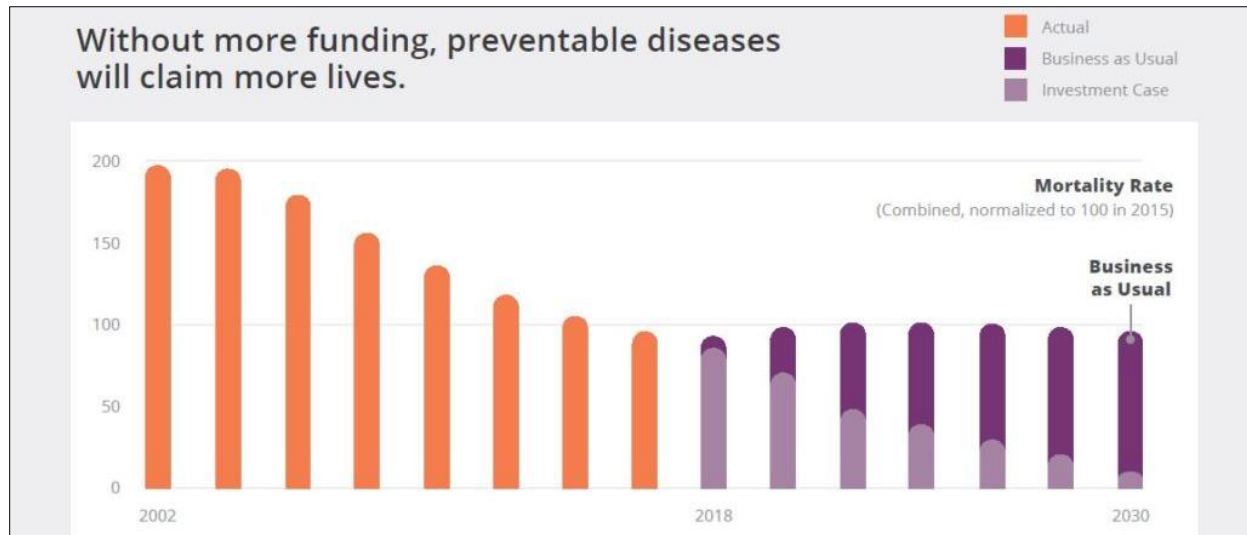
⁹ You can view the letter and full list of signers here: <https://results.org/wp-content/uploads/1-2019-House-GFATM-Letter-to-Sec.-of-State-Pompeo-with-signatures.pdf>

¹⁰ You can view the letter and full list of signers here: <https://www.theglobalfight.org/wp-content/uploads/2018/10/Global-Fund-6th-Replenishment.pdf>

¹¹The Global Fund. (2019). *Step up the fight: Investment Case Sixth Replenishment 2019*.

Global Fund Replenishment: An Opportunity to Step up the Fight

The Global Fund now has a plan to support countries to save 16 million lives in the next three years (2020-22). **A \$14 billion investment is the minimum needed to get back on track toward ending the epidemics.** And there is no simple “maintenance” option; without this new investment, these diseases will claim more lives.¹²



With a commitment of \$14 billion from donor governments over the next three years, the Global Fund will support countries to:

- Save 16 million lives
- Cut the death toll in half
- Stop 234 million infections or cases of HIV, TB, and malaria
- Unlock an additional \$46 billion in funding from lower-income countries fighting these epidemics¹³

Donors to the Global Fund will gather in October for a funding replenishment conference hosted by the government of France. As the Global Fund’s biggest donor, U.S. leadership is essential to the Global Fund reaching its funding goal. **This leadership must continue, with the U.S. coming to the table with at least \$4.68 billion toward the \$14 billion minimum target.**

Fiscal Year 2020 Appropriations

This spring, all members of Congress had the opportunity to address the leadership of the congressional committees that make funding decisions for the critical anti-poverty programs in the international affairs account. RESULTS advocated from January to June to urge both House and Senate members to weigh in through submitting personal requests in writing and by speaking personally to the Chairs and Ranking Members of the State and Foreign Operations

¹² The Global Fund. (2019). Step up the fight: Investment Case Sixth Replenishment 2019.

¹³ *Ibid.*

subcommittee of Appropriations. You can read more on our [Appropriations webpage](#) or on the [updated blog](#) following actions to these leaders that oversee foreign aid funding.

Members of Congress that are part of the select group known as the State and Foreign Operations Subcommittee of Appropriations in either the [Senate](#) or the [House of Representatives](#) are particularly important in fighting the proposed funding cuts to foreign aid from the administration. This fiscal year 2020 (FY20), RESULTS supports increasing funding in the State and Foreign Operations Appropriations bill for the Global Fund.

Fiscal Year	FY17	FY18	FY19	RESULTS' FY20 Request	President's FY20 Request	House FY20	Senate FY20
Global Fund to Fight AIDS, TB, and Malaria	\$1.35 billion	\$1.35 billion	\$1.35 billion	\$1.56 billion	\$958 million	\$1.56 billion	TBD

**Highest historical funding for the Global Fund was in FY14 for \$1.65 billion.*

The Stories

Whether you are speaking with members of Congress, hosting an outreach event, or looking for some inspiration, use the links below to find stories to help when advocating for investments in funding for tuberculosis research, prevention, and treatment.

Inspiring Stories

- [When my brother got TB, doctors said there was no hope. How could that be?](#)
A patient in California is diagnosed with extensively drug-resistant TB—his family calls for more research and new drugs to treat the disease at home and abroad.
- [Unlikely Team of TB Heroes Locate Missing TB Cases in Tanzania](#)
An unconventional team of traditional healers, people recovering from drug use, and volunteer health workers locate TB cases in the remotest parts of Tanzania.
- [Facing the World's Most Deadly Disease](#)
Dedicated volunteers and community health workers spread awareness in their communities and provide support to people infected with TB.
- [Breaking the Chains of HIV in West Africa](#)
In West Africa, peer groups, faith-based coalitions, and community clinics work to reduce the stigma of HIV and encourage people to seek and adhere to treatment.
- [PrEPed to Prevent HIV](#)
In Uganda, the Global Fund supports methods to prevent HIV, including condoms and Pre-exposure Prophylaxis (PrEP), to reduce the risk of new HIV infection.
- [The Edge of Elimination: Racing Drug Resistance in the Mekong](#)
Drug resistant strains of malaria are emerging in the greater Mekong region of Southeast Asia. The Global Fund is working to eradicate these strains before they can spread to other regions and end millions of lives.

Inspiring Videos

- [Beating Malaria, Mile by Mile](#)
In Chad, the Global Fund helps provide access to medicines which can mean the difference between life and death for individuals, particularly children.
- [Powerful Photographs of Extensively Drug-Resistant TB](#)
TED Prize winner James Nachtwey shares his award-winning photographs to bring attention to the global tuberculosis crisis—and the fact that it is preventable.
- [8 Million Reasons to Invest in Global Health](#)
We are on the right side of the tipping point to control the HIV, TB, and malaria epidemics and a full replenishment for the Global Fund will save up to 8 million lives over the next three years.
- [Preventative Medication Saves Lives in Niger](#)
In Niger, seasonal malaria chemoprevention (SMC) has significantly reduced malaria cases in children under five.
- [Women and Girls At Risk of HIV in South Africa](#)
Nicolet is a young woman living with HIV. Where she grew up in South Africa, more than 2,000 young girls are infected with HIV every week.