

UNDERSTANDING THE GLOBAL FUND STRATEGY 2023-2028



**A Guide for Communities and Civil Society
Fighting Pandemics and Building a
Healthier and More Equitable World**

JANUARY 2023



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ABOUT THE GUIDE

This Guide has been developed to facilitate the understanding of the new Global Fund strategy 2023 – 2028 amongst communities and civil society organizations involved in the national and regional level responses to HIV, TB and malaria. The Guide elaborates on the mutually reinforcing contributory objectives of the new strategy and the evolving objective on pandemic preparedness and response from the lens of communities and civil society.

Additionally, the Guide expounds on the key investments and strategies for Ending AIDs, TB and Malaria from the perspective of both communities and civil society organizations.

What remains the same in the New Global Fund Strategy 2023-2028?

- The primary goal of the Global Fund is still to end AIDS, TB and malaria.
- The fundamental philosophy of the Global Fund remains the same – that 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.
- The focus on outcomes remains unchanged: it is about lives saved and infections averted.

What is Different in the New Global Fund Strategy 2023 – 2028?

- 1. ACROSS ALL THREE DISEASES, AN INTENSIFIED FOCUS ON PREVENTION.** There has been progress in reducing new infections, but to end pandemics, we have to cut new infections including amongst key and vulnerable populations.
- 2. MUCH GREATER EMPHASIS ON INTEGRATED PEOPLE - CENTRED SERVICES,** rising above disease silos to build Resilient and Sustainable Systems for Health (RSSH) that protect people from multiple pathogens, address their holistic needs and underpin health and well-being for all.
- 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.
- 4. A STRONGER ROLE AND VOICE FOR COMMUNITIES LIVING WITH AND AFFECTED BY 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 centre of what we do.
- 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.
- 6. GREATER EMPHASIS ON PROGRAMMATIC AND FINANCIAL SUSTAINABILITY** to ensure that the progress achieved can withstand shocks and reversals and that the momentum can be sustained.
- 7. 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.
- 8. MUCH GREATER EMPHASIS ON DATA-DRIVEN DECISION MAKING,** by investing in systems and capabilities to enable rapid generation, analysis and use of high-quality, disaggregated data.
- 9. EXPLICIT RECOGNITION OF THE ROLE OF 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 arena, and acknowledging the need to define roles and responsibilities in collaboration with our partners.
- 10. CLARITY ON THE ROLES AND ACCOUNTABILITIES OF GLOBAL FUND PARTNERS ACROSS EVERY ASPECT OF THE STRATEGY** to ensure we hold each other mutually accountable in delivering this strategy

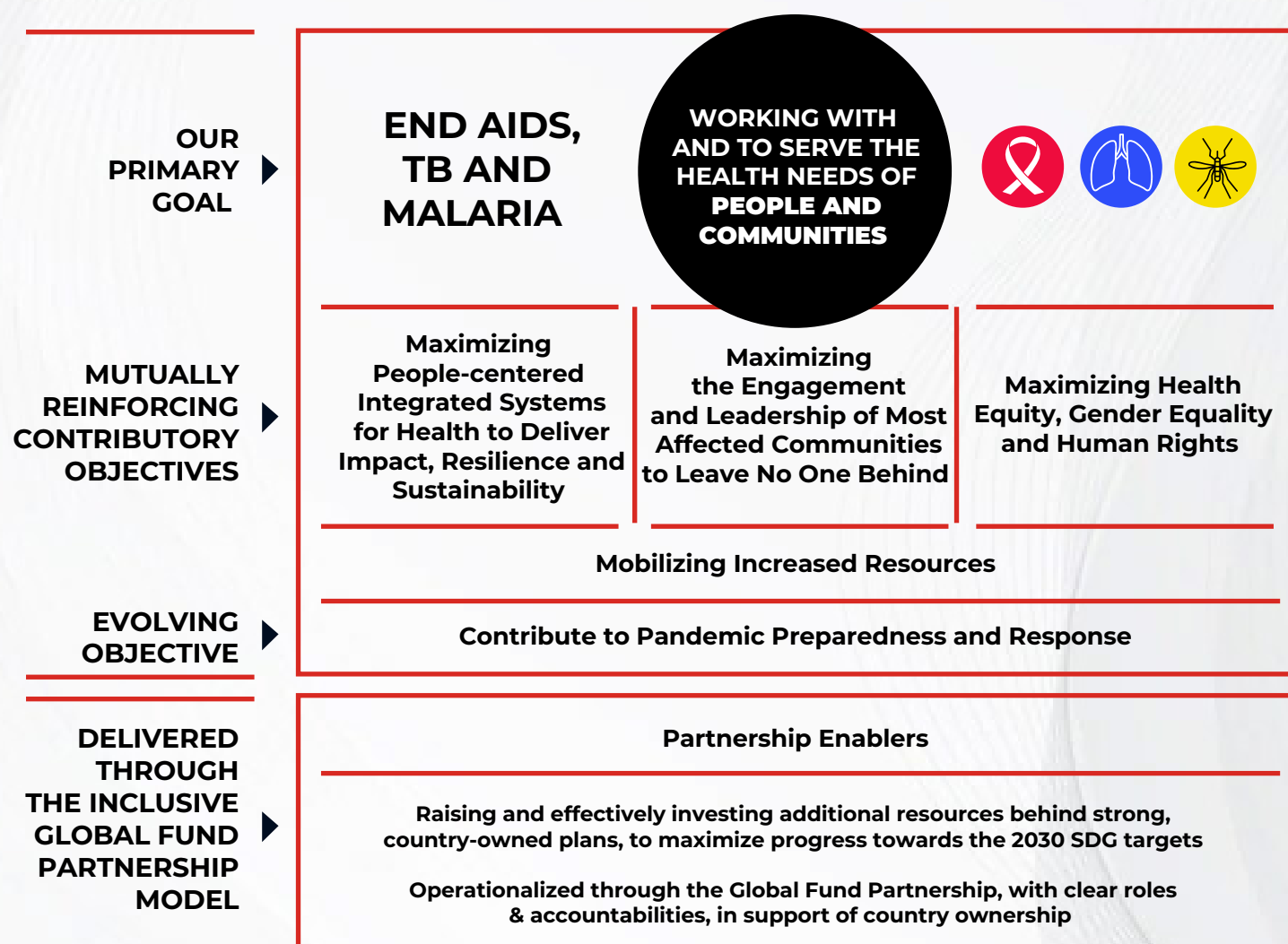
UNDERSTANDING THE NEW GLOBAL FUND STRATEGY 2023 – 2028

The Global Fund Strategy 2022 – 2028 is titled “Fighting Pandemics and Building a Healthier and More Equitable World”. The strategy details Global Fund’s agenda for the 2023 – 2028 period. The strategy is guided by Global Fund’s Primary goal of, “ending AIDS, TB and Malaria” and by four ambitious objectives namely maximizing people centered integrated systems for health to deliver impact, resilience and sustainability, maximizing the engagement and leadership of most affected communities to leave no one behind, maximizing health equity, gender equality and human rights and mobilizing increased resources and an evolving objective “To contribute to Pandemic Preparedness and Response”.

GLOBAL FUND STRATEGY 2023 - 2028	
TITLE	Fighting Pandemics and Building a Healthier and More Equitable World
GOAL	End AIDS, TB and Malaria
VISION	A world free of the burden of AIDS, tuberculosis and malaria with better, equitable health for all.
MISSION	To attract, leverage and invest additional resources to end the epidemics of HIV, tuberculosis and malaria, reduce health inequities and support attainment of the Sustainable Development Goals

2023-2028 Global Fund Strategy Framework Overview

Full Strategy Framework including an overview of sub-objectives is available on the Global Fund website.:



Mutually Reinforcing Contributory Objectives of the Global Fund Strategy: what do they mean?

The new Global Fund strategy has four mutually reinforcing and contributory objectives and a fifth evolving objective of contributing to pandemic preparedness and response.

UNDERSTANDING THE LOGIC BEHIND THE OBJECTIVES OF THE GLOBAL FUND STRATEGY

Objectives	An Elaboration of the Objectives
Maximizing People-Centred Integrated Systems for Health to Deliver Impact, Resilience and Sustainability	<p>The objective recognizes that:</p> <ul style="list-style-type: none"> • Resilient and sustainable systems for health (RSSH) include national health systems, services provided by communities and CSOs, the private sector and other providers which ensure that individuals health needs are met whenever they seek care • RSSH is important for the achievement of good results in the fight against HIV, tuberculosis and malaria, in meeting the health needs of people and communities, to build PPR capacities and to achieve SDG 3.
Maximizing The Engagement and Leadership of Most Affected Communities to Leave No One Behind	<p>The objective recognizes that:</p> <ul style="list-style-type: none"> • Communities are best positioned to guide and implement health programs to effectively and to identify and contribute to addressing structural barriers to HTM outcomes. • Robust engagement of communities ensures that investments are evidence and rights based, gender and age responsive, equitable, and sustainable. • As epidemics become increasingly concentrated among KVP and those frequently not well served by the formal health sector, fortifying the leadership, engagement and capacity of these communities to inform, design and deliver interventions is critical to maximize impact and strengthen local accountability.
Maximizing Health Equity, Gender Equality and Human Rights	<p>The objective recognizes that:</p> <ul style="list-style-type: none"> • Inequities in access to health services and HTM-related outcomes persist between and in Global Fund supported countries • Human rights and gender-related barriers, including stigma, discrimination and criminalization, increase vulnerability to HTM acquisition and limit access to services. • Sustained impact on the three diseases and meaningful progress toward achieving the global targets will depend on Global Funds ability to support equitable responses and to effectively reach those most affected
Mobilizing increased resources	<p>The objective recognizes that:</p> <ul style="list-style-type: none"> • Efficient, effective and equitable use of existing resources and a renewed focus on value for money (VfM) are critical for achieving the Strategy's aims and for the sustainability of investments. • The importance of leveraging on the attention to global health, appreciation of the connection between population health and economic growth, and increased dynamism among global health actors in support of the Global Fund's mission • It is important to increase domestic resource mobilization (DRM) and ensure the sustainability and scale-up of service coverage and service delivery.

Contribute to pandemic preparedness and response (PPR).

The objective recognizes that:

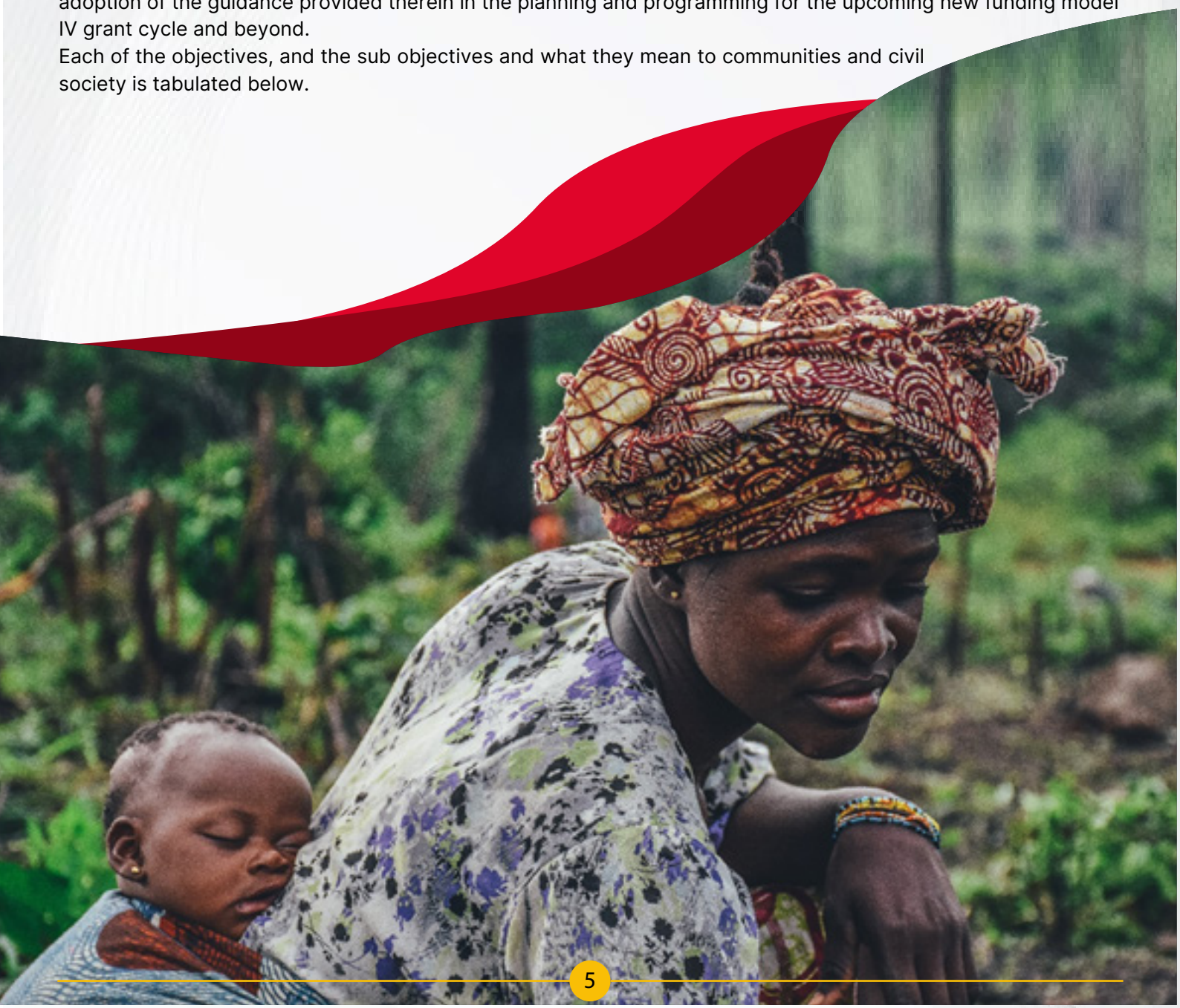
- The COVID-19 pandemic has been the largest single setback towards the achievement of the Global Funds mission of ending the three diseases.
- The pandemic is overloads systems for health, reducing economic growth, constraining domestic resource mobilization and will be the largest single cause of infectious disease mortality in the world in 2021.
- The importance of helping countries respond to this health crisis to getting HTM and broader SDG efforts back on track; and the importance of helping countries better prepare for future pandemic threats
- The Global Fund is uniquely placed to collaborate with partners to support countries to prevent, prepare for and respond to pandemics.

The objectives are defined as mutually reinforcing because they are not stand alone, rather they build and contribute to the success of each other.

Each of the objectives is supported by sub objectives which contribute to the realization of the objective. Sub objectives are further supported by broadly defined interventions which is adapted and adopted by countries, they will contribute to the realization of the objectives of the new strategy.

Each of the mutually reinforcing objectives has been simplified below to facilitate ease of understanding and adoption of the guidance provided therein in the planning and programming for the upcoming new funding model IV grant cycle and beyond.

Each of the objectives, and the sub objectives and what they mean to communities and civil society is tabulated below.



Objective 1: Maximizing People-centered Integrated Systems for Health to Deliver Impact, Resilience and Sustainability - What does it mean for communities and civil society?

This objective has been prioritized to support the realization of the Global Funds goal of ending the three diseases, and to deliver impact, resilience and sustainability; and to promote the achievement of Universal Health Coverage (UHC). The objective also supports catalytic RSSH investments which are people-centered and integrated to holistically look at people's health needs to promote positive results and outcomes in HTM and other health areas, sustainability and long term impact

SUB OBJECTIVES	WHAT DO THEY MEAN FOR COMMUNITIES AND CIVIL SOCIETY?
Sub Objective 1: Deliver integrated-people centered quality services (IPCQS)	This means that we should prioritize programs that consider individuals' health needs holistically, by placing people and communities at the center of services. This requires the integration of services, the implementation of 'one-stop shop health services and no longer working in siloes.
Sub Objective 2: Strengthen and reinforce community systems and community-led programming, integrated within national health and social systems	This calls for meaningful engagement of and advocacy by communities and civil society during the development of national health strategies to ensure that community health strategies including community-led approaches to support the generation and utilization of data for decision-making at all levels; differentiated support for institutional capacity building for community-based and community-led organization and adoption of innovative sustainability mechanisms to enable community-led groups and networks to provide peer-led services
Sub Objective 3: Strengthen generation and use of quality, timely. Transparent, disaggregated digital and secure data	Communities and civil society can advocate for disaggregated data to be collected and made available in a transparent manner to inform programme implementation. Communities and civil society can also support community-led data generation by undertaking research and community-led monitoring to generate evidence to inform advocacy and programming to address programmatic gaps, health inequalities and inequities. Additionally, we must strengthen leadership and management of data.
Sub Objective 4: Strengthen the ecosystem of quality supply chains to improve the end to end management of national health products and laboratory services	This provides opportunity for communities and civil society to advocate for strengthening of national and regional capabilities in procurement, supply chain and laboratory services, health product supply networks and regional and in-country regulatory systems for health products and services.

<p>Sub Objective 5: NextGen market shaping focus on equitable access to quality health products through innovation, partnership, and promoting sustainable sourcing and supply chains at global, national & community levels</p>	<p>Communities and civil society should work with the formal health system to facilitate equitable, sustainable access to quality health products and services . We should also develop partnershipsto facilitate and support in-country procurement and supply mechanisms</p>
<p>Sub Objective 6: Global Fund efforts to strengthen oversight of the overall health systems, better engage and harness the private sector to improve the scale, quality and affordability of services</p>	<p>This means we should strengthen our oversight role at all levels including at the Country Coordinating Mechanism (CCM) to improve on access, quality and affordability of services rendered through the private sector; and to strengthen public-private sector engagement</p>
<p>Sub Objective 7: Deepen partnerships between governments, and non-public sector actors to enhance sustainability, transition-readiness , including through social contracting</p>	<p>This means that communities and civil society will need to partner with government to enhance sustainability, transition-readiness, including through social contracting.</p>

OBJECTIVE 2 Maximizing the Engagement and Leadership of Most Affected Communities to Leave No One Behind: - What does it mean for communities and civil society?

This strategy focuses on reinforcing the engagement and leadership of most affected communities as experts in decision-making, service delivery and oversight by facilitating inclusive Country Coordinating Mechanisms (CCM) processes, evolving Global Fund processes and guidelines to support community-led service delivery, and expanding community partnerships in support of more inclusive, responsive and sustainable HTM responses and systems for health.

SUB OBJECTIVES	WHAT DO THEY MEAN FOR COMMUNITIES AND CIVIL SOCIETY?
Sub Objective 1: Accelerate the evolution of CCMs and community-led platforms to strengthen inclusive decision-making, oversight and evaluation throughout Global Fund-related processes	Community engagement must be strengthened by building the capacities of our representatives on the CCM including on their ability to access and utilize strategic information to inform their advocacy and decision-making
Sub Objective 2: Evolve Global Fund business processes, guidelines, tools and practices to support community-led organizations to deliver services and oversight, and to be engaged as providers of technical expertise	This means communities and civil society to ensure they meaningfully participate in the revision of Global Fund processes on grant financings of community based, community led and indigenous civil society organizations; and the tracking of investments made through community-led organizations.
Sub Objective 3: Support community- and civil society-led advocacy to reinforce the prioritization of health investments and drive toward UHC Build and strengthen the resource mobilization advocacy of civil society and community networks.	This means we strengthen our capacity i.e. skills and use of national data to undertake advocacy to better advocate for domestic resource mobilization for health(DRM), Additionally communities and civil society need to develop and document evidence (research and develop cases studies) on benefits of enhanced public financing of services provided by community-based, community-led and civil society organizations.

**Sub Objective 4:
Expand
partnerships with
communities living
with and affected by
emerging and
related health areas
to support more
inclusive,
responsive and
effective systems
for health**

Expand partnerships with communities living and affected by emerging and health areas such as people with disability and the mental health community to support effective systems for health; and to advocate for their health and rights, to hold decision-makers accountable, and swiftly respond to pandemics.



OBJECTIVE 3: Maximizing Health Equity, Gender Equality and Human Rights - What does it mean for communities and civil society?

This objective supports scaling up programs and approaches to remove human rights and gender-related barriers and leverage the Global Fund's diplomatic voice for more equitable, gender-responsive and rights-based responses.

SUB OBJECTIVES	WHAT DO THEY MEAN FOR COMMUNITIES AND CIVIL SOCIETY?
Sub Objective 1: Scale up comprehensive programs and approaches to remove human rights and gender-related barriers across the portfolio	Communities and civil society should strengthen their capacity to develop and implement, monitor and evaluate the impact of evidence-based programs to reduce human rights and gender-related barriers. Additionally, this will include scaling up programming to confront the criminalization of communities most affected by the three diseases and support enabling legal and policy environments and to support supporting gender transformative programming to advance gender equality and reduce gender related barriers to HTM services.
Sub Objective 2: Support comprehensive SRHR programs and their strengthened integration with HIV services for women in all their diversity and their partners	This means that communities and civil society need to support the integration of HIV and SRHR programs including targeted SGBV prevention and response interventions and systems
Sub Objective 3: Advance youth-responsive programming, including for AGYW and young KVP and their partners Sub Objective 4: Deploy quantitative and qualitative data to identify drivers of HTM inequity and inform targeted responses, including by gender, age, geography, income and for KVP Collect, analyze and use disaggregated quantitative data and qualitative data at national and sub-national levels	<p>This means communities and civil society advocating for the scale up of HIV prevention programming for AGYW and their partners and young KPs within formal and community led service delivery options.</p> <p>This means we must increase our capacity to generate information and evidence by strengthening our qualitative research capacity on human rights and gender related barriers to HTM; to advocated for the strengthening of surveys and programmatic data to capture health inequities and integrate them into national systems</p>

Sub Objective 5:
Leverage the Global Fund's diplomatic voice to challenge laws, policies and practices that limit impact on HTM
Proactively and effectively advocate for the Global Fund's core values at the country level and in relevant high-level diplomatic forums

This means that communities and civil society continue partnering with the Global Fund to challenges laws, policies, and practices that limit HIV programs.



OBJECTIVE 5: Contribute to Pandemic Preparedness and Response (PPR) - What does it mean for communities and civil society?

This objective will support:

- Investments in HTM responses and RSSH, including in laboratories, disease surveillance, community systems for health, information systems and supply chains; and principles of supporting community engagement and addressing human rights and gender-related barriers to access have built the foundation for PPR in many contexts.
- Linking efforts to strengthen PPR with the fight against existing diseases, including COVID-19 and HTM will be more effective than a siloed approach
- The response to COVID-19 and the mission to end the HTM pandemics are integrated with the PPR agenda under an overarching commitment to protecting everyone, everywhere from the deadliest infectious diseases.
- Any future response to a new pandemic would require additional and future Board decisions based upon the specific context.

SUB OBJECTIVES	WHAT DO THEY MEAN FOR COMMUNITIES AND CIVIL SOCIETY?
Sub Objective 1: Scale up investments that build the resilience of HTM programs to current and future threats	This means that communities and civil society will strengthen and continue the delivery of essential HTM programs during pandemics and other health emergencies including increased use people centered differentiated service delivery models, optimizing decentralized and community/ home-based service models, readiness testing via simulation exercises, upscaling medical countermeasure and infection prevention and control measures
Sub Objective 2: Build front-line capacity for detection and rapid response to epidemics and pandemics at facility and community levels	This means that communities and civil society including facility and community health workers and volunteers will enhance their capacity to prevent, detect and respond to epidemics and pandemics
Sub Objective 3: Scale-up and integration of community systems capacity for detection and response	This means that communities and civil society will have to advocate for the strengthening and the scale up of community systems to detect and respond to future threats including community led monitoring (CLM) of preparedness, implementation, service disruptions, commodity stock-outs and human rights violations, and building the capacities of community-based organizations to contribute to RSSH to deliver services and provide information to vulnerable, neglected and at-risk populations.

Sub Objective 4: Build front-line capacity for detection and rapid response to epidemics and pandemics at facility and community levels	<p>This means that communities and civil society will collaborate with their respective programs to strengthen their respective HMIS including integration of community data into the HMIS; as well as to optimize digital health platforms</p>
Sub Objective 5: Strengthen laboratory systems, supply chains and diagnostic capacity to meet HTM program demand and respond to outbreaks	<p>Support the strengthening routine clinical and surveillance data collection at health facility level through promoting targeted improvements in internet-connected devices, integration and interoperability of laboratory information systems, logistics management information systems (LMIS), electronic health records, and HMIS.</p>
Sub Objective 6: Address the threat of drug and insecticide resistance, and encouraging climate, environmentally sensitive and One Health approaches	<p>Communities and civil society support their respective countries build more climate-responsive disease programs and systems for health and to promote the sustainable and responsible management of supplies and safe waste management of health products</p>
Sub Objective 7: Leverage the Global Fund's platform to build solidarity for equitable, gender-responsive and human rights-based approaches	<p>Communities and civil society will need to ensure the integration of human rights and gender based perspectives in PPR and advocated for the needs for the affected communities and key and vulnerable populations (KVPs) in PPR. This will also mean support the expansion of sexual and gender based violence (SGBV) and intimate partner violence (IPV) prevention and response activities.</p>
Sub Objective 8: Champion community and civil society leadership and participation in pandemic preparedness and response planning, decision-making and oversight	<p>This means that communities and civil society will need to advocate for community and civil society representatives to have equal "seats at the table" on PPR platforms, governance bodies, oversight mechanisms and related processes and programs.</p>

Understanding the Primary Goal of the Global Fund: End AIDS, TB and Malaria

The reach the ambitious sustainable development goals (SDGs) targets for HIV, TB and Malaria (HTM), the strategy supports:

- Catalytic people-centered HTM investments that are differentiated to country context and tailored to people's needs, particularly those of KVP.
- Investments based on country-owned plans and aligned with technical partner guidance
- Redoubled focus on incidence reduction and addressing structural barriers to HTM outcomes.

The strategy identifies two key cross cutting strategies and actions for maximizing impact, equity, quality and sustainability, namely:

- Re-double focus on HTM incidence reduction
- Addressing structural barriers to HIV, TB and malaria outcomes

This guide outlines below what these strategies mean for communities and civil society, and how they can support their implementation.

Key Investments for Maximizing Impact, Equity, Quality and Sustainability

KEY ACTIONS FOR RE-DOUBLING FOCUS ON HTM INCIDENCE REDUCTION	WHAT DOES IT MEAN FOR COMMUNITIES AND CIVIL SOCIETY? COMMUNITIES AND CIVIL SOCIETY SHOULD...
1. Each actor in the partnership must challenge itself to consider how existing programs can be better focused to address the specific vulnerabilities that different populations face.	<ul style="list-style-type: none"> • On continuous basis review, adapt and strengthen existing programs to ensure they better target specific vulnerabilities of different populations e.g. adolescent and young people, key and vulnerable population etc. for HIV, TB and malaria
2. Affected communities must help guide the interventions and approaches that will have the most chance of success.	<ul style="list-style-type: none"> • Review their respective disease, population and geographical context and identify challenges and offer solutions. • Determine and prioritize interventions with the most chance of success. • Avoid "cut and paste" replication of interventions from one region or programme to another," without adapting them to their context • Not shy away from innovating new tools and approaches to address their respective disease, population and challenges <p>Ensure that communities and civil society have a seat in decision-making structures in order to best guide interventions and approaches.</p>
3. Behavioral and structural approaches needed to ensure their implementation takes into account the barriers impeding their uptake and use, and to address behaviors and wider societal factors that increase people's risk of infection.	<ul style="list-style-type: none"> • Identify within your communities what the barriers to accessing health services are. • Ensure that biomedical prevention and treatment programs are accompanied and supported by behavioral and structural approaches as a package • Ensure that behavioral and structural interventions respond to specific barriers that affected the uptake/ access to, quality and use of services by communities including key and vulnerable populations

4. The Global Fund will make better use of existing tools and work to equitably scale up and tailor innovations as soon as they are available

- Determine what tools exist and for what.
- Define a minimum package of interventions that address and resolve a structural and behavioral barrier that adversely affects the uptake and use of services by in all populations and across all diseases

5. Prevention programs will be agile and adaptive to respond to people's changing and diverse needs in a rapidly evolving environment, and leverage technological advances and increased connectivity.

- Acknowledge that we live in a rapidly changing environment that calls for flexibilities and continuous adaptations in order to maximize impact. We should not shy from proposing adaptations and changes, and justifying why those changes are needed in ongoing programs.
- Optimize technological advances for cost effectiveness and reach of hard to reach regions and communities



STRATEGY 2 – ADDRESS STRUCTURAL BARRIERS TO HIV, TB & MALARIA OUTCOMES

KEY ACTIONS FOR ADDRESSING STRUCTURAL BARRIERS TO HTM OUTCOMES	WHAT DOES IT MEAN FOR COMMUNITIES AND CIVIL SOCIETY? COMMUNITIES AND CIVIL SOCIETY SHOULD...
1. To address structural barriers to HTM outcomes, The Global Fund will use its leverage to address structural barriers to HTM outcomes.	<ul style="list-style-type: none"> • Identify our respective context, population and disease specific structural barriers to target respective efforts towards them for progress and better health outcomes • Determine what tools and interventions work best for us; including adapting existing tools to our respective geographical, population and diseases context and innovating new ones
2. Invest, co-invest, use tailored co-financing requirements or catalytic investments to incentivize national or global partners to undertake or scale up programs to address structural barriers to HTM outcomes.	<ul style="list-style-type: none"> • Advocate for our respective governments to invest domestic resources interventions and programmes responding to structural barriers adversely affecting progress and outcomes against the three diseases • Advocate for and mobilize resource from domestic and bilateral partners to support catalytic programs to scale up programs addressing structural barriers to HTM
3. Better use our partnership's diplomatic voice to challenge harmful laws, policies and practices, such as to address criminalization of KP or to address police brutality.	<ul style="list-style-type: none"> • Generate relevant evidence to support high level advocacy by internal and external partners and stakeholders in countries to address cultural, structural and legal barriers that affected access to and the uptake of HTM services.

To facilitate the realization of the ambitions SDG targets, the 2023 -2028 Global Fund strategy details strategizing priorities for ending AIDS, ending TB and ending malaria.



Strategic Priorities for Ending AIDS

To support efforts towards ending AIDS, the new Global Fund strategy has adopted three broad strategies illustrated below:

1. Accelerate access to and effective use of precision combination prevention, with behavioral, biomedical, and structural components tailored to the needs of populations at high risk of HIV infection, especially KVP

- a. Close gaps in HIV prevention coverage
- b. Accelerate Access to and use of new HIV prevention options
- c. Evolve and expand the range of platforms for access to and delivery of people centered HIV prevention

2. Provide quality, people-centered diagnosis, treatment and care, to improve well-being for PLHIV, prevent premature mortality and eliminate HIV transmission

- a. Optimize diagnostic pathways to increase availability and access to HIV testing, diagnosis, and immediate treatment initiation, and to meet individuals' needs.
- b. Differentiate and scale up quality HIV treatment services to bridge coverage gaps, sustain continuity of treatment, achieve durable viral suppression, and eliminate all forms of HIV transmission.
- c. Integrate services to prevent, identify, and treat advanced HIV disease, comorbidities, and coinfections.

- d. Evolve care pathways to strengthen therapeutic alliances between the people in care and the health and community systems

- e. Accelerate the introduction of diagnostics, therapeutics, technologies, and service delivery innovations

3. Advocate for and promote legislative, practice, program and policy changes to reduce HIV-related stigma, discrimination, criminalization, other barriers and inequities and uphold the rights of PLHIV and KVP

- a. Strengthen efforts and incentivize action to eliminate HIV-related stigma and discrimination
- b. Integrate effective responses to SGBV, intimate partner violence (IPV) and violence toward KP into HIV programs and services.
- c. Continue to incentivize domestic financing of interventions that address HIV prevention efforts for KP and human rights-related barriers to services.



Strategic Priorities for Ending TB

To accelerate progress toward the 2030 TB targets and recover ground lost due to COVID-19, the Global Fund strategy prioritized interventions are:

1. Focus on finding and treating all people with DS-TB and DR-TB through equitable, people-centered approaches Support early and accurate diagnosis of DS-TB and DR-TB

- i. Scale up efforts to find and treat missing people with DS-TB and DR-TB
- ii. Promote private sector engagement in TB prevention, diagnosis, and treatment
- iii. Support TB services to be more responsive to the needs, values and preferences of people with TB
- iv. Support people with TB access appropriate quality TB treatment and to complete medications

2. Scale up TB prevention with emphasis on TPT and airborne infection prevention and Control

- i. Prioritize screening and testing of household and close contacts of people with TB, and vulnerable and at-risk groups
- ii. Improve access to TPT
- iii. Develop strategies and policies to enhance airborne infection prevention and control
- iv. Support global and local antimicrobial resistance (AMR) efforts, including through One Health approaches
- v. Support the introduction and rollout of effective TB vaccines

3. Improve quality of TB services in the TB care cascade including management of comorbidities

- i. Support national TB programs to conduct analysis of leakages along the cascade
- ii. Promote the development and implementation of quality improvement approaches for TB prevention and care relevant to the context
- iii. Support comprehensive quality TB services that are human rights based, gender responsive, people-centered, and integrated into health and community systems

4. Adapt TB programming to respond to the evolving situation, including through rapid deployment of new tools and innovations

- i. Integrate TB services into key health services and platforms
- ii. Promote a culture of learning, documentation and sharing of experiences
- iii. Rapidly adopt and scale up new recommendations, learnings, tools and innovations
- iv. Strengthen the generation and use of real-time digitalized data and surveillance systems, program monitoring and evaluation at all levels
- v. Leverage the Global Fund's unique role in market shaping to improve access to the latest and most effective TB diagnostic tools and treatments

5. Promote enabling environments, in collaboration with partners and affected communities, to reduce TB-related stigma, discrimination, human rights and gender related barriers to care; and advance approaches to address catastrophic cost due to TB

- i. Design, implement and monitor programs that address barriers to access to TB services,
- ii. Promote equity by supporting differentiated approaches to TB prevention, treatment, & care
- iii. Promote CLM and reporting, community legal empowerment
- iv. Advocate for domestic resources to lower catastrophic direct and indirect costs
- v. Promote multisectoral approaches to address social determinants

Strategic Priorities for Ending Malaria

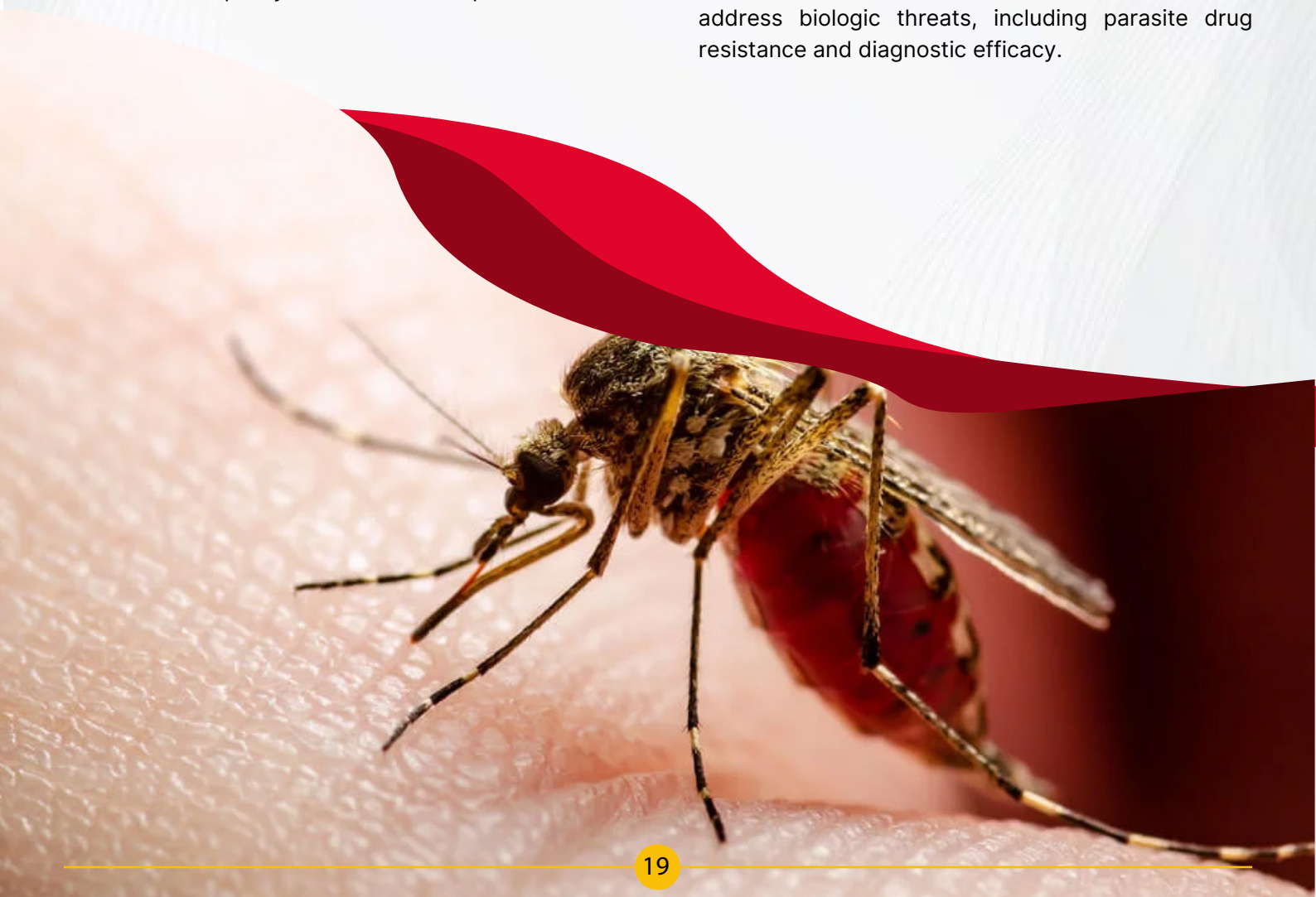
To accelerate progress toward the 2030 malaria goals, the new Global Fund strategy prioritized interventions include:

1. Ensure optimal vector control coverage

- i. Promote sub-national decision-making, evidence-based prioritization and entomological surveillance expansion
- ii. Address barriers hampering the rapid scaleup of new products to fight the ongoing and future impact of insecticide resistance and residual transmission.
- iii. Foster partnership-wide discussions, including with community stakeholders, to align on partnership-wide challenges
- iv. Evolve indicators to improve the tracking of effective vector control coverage
- v. Ensure the quality of vector control products

2. Expand equitable access to quality, early diagnosis and treatment of malaria, through health facilities, at the community level and in the private sector

- i. Expand access to care, ensuring the quality of services and the promotion of people centered, gender-responsive approaches within the context of primary health services.
- ii. Improve the quality and capacity of private health care services
- iii. Build the capacity of national programs to incorporate ongoing assessments of the uptake and use of, as well as the key barriers to accessing, malaria services
- iv. Promote the adoption of effective innovations to address biologic threats, including parasite drug resistance and diagnostic efficacy.



3. Implement malaria interventions, tailored to sub-national level, using granular data and capacitating decision-making and action

- i. Strengthen surveillance and capacity for the use of data for decision making by empowering facility and district leadership to make relevant decisions based on sub-national stratification
- ii. Work across the partnership to ensure indicators are fit for purpose to track progress
- iii. Enhance the voice of malaria stakeholders in discussions on national health priorities
- iv. Account for the impact of climate change on malaria transmission as well as the impact of malaria interventions on the environment
- v. Deploy targeted interventions appropriate for specific epidemiological profiles.

4. Drive toward elimination and facilitate prevention of reestablishment

- i. Support eligible national and regional approaches to accelerate progress toward elimination
- ii. Expand approaches for sharing experiences and best practices
- iii. Support countries to pursue attainment of WHO malaria elimination certification.

5. Accelerate reductions in malaria in high burden areas and achieve sub-regional elimination in select areas of sub-Saharan Africa to demonstrate the path to eradication

- i. Allocate fungible malaria resources to achieve significant reductions in morbidity and
- ii. Create a large-scale effort to eliminate malaria in a contiguous area within SSA]
- iii. Ensure the optimal use of current tools, strong management, and work collaboratively to ensure sufficient financing

WHAT IS THE ROLE OF EANNASO IN THE THE GLOBAL FUNDS NEW STRATEGY

- Strengthen Global Fund partnership model: Ensuring good governance, representation and oversight through Global Fund supported bodies such as the CCM, and providing technical assistance for varied aspects of the grant application and implementation process.
- Advocacy around issues for promoting human rights and gender equity, as well as country access to domestic health budgets
- Capacity development through community system strengthening for civil society organizations, community groups, principal recipients, etc. and emphasizing the importance of sustainability planning and allocation of funds into health programs

- Support meaningful participation of key and vulnerable populations and networks in Global Fund-related processes
- Coordination with countries, civil society and community networks and other partners to ensure that grants from the Global Fund contribute to addressing the comprehensive needs of women, adolescents and children effectively and with quality, in a way that promotes and protects their human rights.

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