COMMUNITIES DELEGATION
to the Board of the Global Fund to Fight AIDS, Tuberculosis and Malaria
for the 14th Strategy Committee Meeting

Following consultations with its constituents, the Delegation of Communities Living with HIV and Affected by Tuberculosis or Malaria to the board of the Global fund to Fight AIDS, TB and Malaria is pleased to provide input on the development of the Global Fund Strategy for 2023-30.

How we consulted
The Delegation held nine online focus group discussions with the communities of sex workers, people affected by TB, people affected by malaria, women living with HIV, people living with HIV, men who have sex with men, transgender people, community for children affected by HIV and young people affected by HIV. Participants in each group came from every region of the world. We also received written submissions from online consultations held by Global Network of People Living with HIV, International Community of Women Living with HIV, Global Network of Young People Living with HIV, International Network of People who use Drugs, the Global Network of Sex Work Projects and the Coalition of Children Affected by AIDS.

This paper summarises the feedback received from our communities. We have also produced a more in-depth report.
Communities speak

Key points

Increase focus on health inequities, human rights, social justice, gender equality and other social political and structural barriers within a holistic people-centred approach.

Meaningly involve communities of those living with and affected by HIV, TB and malaria, particularly key populations and vulnerable groups, at all levels of the Global Fund from Secretariat to Board to country-level including Provincial and District.

Fund community-led responses, through directly entering into multi-year service agreements with community-led organizations.

Key Populations refers to specific groups of people and/or communities who are underserved, criminalized and disproportionately affected by HIV, namely: men who have sex with men, transgender people, sex workers and people who use drugs.

Vulnerable groups refer to groups of people disproportionately affected and more at risk for tuberculosis and malaria, such as migrants, indigenous peoples, IDPs, refugees etc.

The Global Fund Strategy for 2023-30 should ensure prioritisation is given to:

Improve its performance of promotion and protection of gender equality and human rights. There is a need to broaden and strengthen the understanding and scope of both gender and of human rights within the Secretariat, the Board and at country-level. The Global Fund can make a significant impact to ensure gendered proposals that fully respect human rights, particularly of key populations and the most vulnerable groups, are funded. It is time to close the gap between the Global Fund policies, theory, implementation and practice on the ground. Funding approval should be contingent on evidence of strong gendered and rights-based programmes and services. Technical support on gender and human rights should be increased and prioritized, especially focused on community organisations where language can be a serious barrier.

“There are many documents on the GF website talking about gender equality but in real terms on the ground, it’s next to none. There is a need for improvement.” - Malaysia
**Place people at the centre of all responses.** Promote a population and people-centred approach that recognizes individuals’ diverse needs, not only for bio-medical care and commodities, but to address other factors that negatively impact the well-being of the individual. Approaches to each of the diseases should be comprehensive holistic and inclusive and should focus on the well-being of the individual rather than on absence of a particular disease. For example, investing in prevention initiatives, alongside care, support and treatment. Meanwhile, synergies should be created or expanded, for further integration of services. Such approaches are critical to achieve results across Sustainable Development Goal 3, including Universal Health Coverage.

**Promote and support advocacy to remove structural barriers to responses to AIDS, TB and malaria.** The Global Fund strategy should facilitate support and resources for advocacy by communities to increase accountability and transparency and to remove the structural barriers (such as criminalisation, stigma and violence) that impede effective action on the three diseases. **Communities are well-placed and have the expertise to conduct advocacy** that is led by those most affected, including in challenging contexts which are crucial for programme success.

**Engage with communities as professionals with valued expertise.** The model of meaningful community inclusion within the Global Fund needs to be strengthened. Community experts should be afforded the same status as other technical experts as they are a fundamental part of a comprehensive and effective response to the three diseases. Their expertise should be valued by country teams, Secretariat and Board alike. This must include **recognition of community expertise as equal partners and stakeholders** within all diverse groups including people living with HIV, those affected by TB, malaria, key populations and vulnerable groups.

**Keep a focus on AIDS, TB and malaria, while situating them in the wider, emerging context of planetary health**. To achieve the global goals set for 2030, the Global Fund should keep its unique focus on the three diseases – recognizing that there remains much to be done, with many countries and regions off track. However, the institution’s work should be positioned within the wider context in which it operates – such as connecting its work to other global issues (such as COVID-19 and climate change or other emerging global issues) and articulating its role within global challenges (such as health security). The Strategy for 2023-30 should clearly articulate how the Global Fund’s work on the three diseases makes a significant contribution to wider responses to health and, in turn, achieves wider health and wellbeing for all. In

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1. Achievement of the highest attainable standard of health, wellbeing, and equity worldwide through judicious attention to the human systems – political, economic, and social – that shape the future of humanity and the Earth’s natural systems that define the safe environmental limits within which humanity can flourish.” Rockefeller Foundation–Lancet Commission on Planetary Health
addition, any action to address emerging issues should be exclusively to protect the core of the Global Fund: HIV, TB and malaria and the achievements to date.

**Prioritise community systems strengthening to support community-led interventions and community-based organizations** thereby contributing to resilient and sustainable systems for health (RSSH). Community-based and led monitoring should be scaled up and community data systems strengthened and linked to the national data systems, in order to improve access and quality of services. More flexible funding channels to support a range of community system and responses (CSR) should be explored and innovative solutions beyond the PR-SR model sought. For example, multi-year service agreements for smaller community organisations and networks (including key population and vulnerable groups organisations), with less burdensome reporting requirements and funding that is not contingent upon government approval. The lack of clarity and understanding among global and country level stakeholders on the aims and scope of CSR needs to be addressed. CSR is under-invested, often with no investment in many RSSH grants, furthermore CSR programmes are often not effectively designed, or implemented, with a sustainability focus.

**Maintain current four strategic objectives** but strengthen delivery of objectives to ‘Promote and Protect Human Rights and Gender Equality’.

The basic structure of the Global Fund’s new Strategy should remain the same as that for 2017-22. The four existing objectives still serve as logical and effective pillars for the institution’s work, adding up to a comprehensive approach. The Global Fund must resist ‘change for change’s sake’, which risks confusion among stakeholders. However, measures should be taken to ensure that issues of gender and human rights are not siloed within one objective. Incentivized programmes on such issues may continue to play an important role and to catalyse focused action. However, such issues should be integrated throughout the organization’s work and embedded into all relevant proposals, programmes and policies for all three diseases.

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3 1) Maximise impact against HIV, TB and malaria; 2) Build resilient and sustainable systems for health; 3) Promote and protect human rights and gender equality; and 4) Mobilise increased resources.
Increase accountability of the Global Fund, including greater attention to the quality of approaches, services and programmes. The 2023-30 Strategy should drive increased accountability at all levels of the Global Fund, from countries to the Secretariat. This should include a monitoring and evaluation approach with key performance indicators that not only address quantity (such as the number of services delivered), but quality (such as the efficacy of such services). This will require a reframing of the understanding of accountability – to extend beyond financing to programmes. This will also involve an exploration of what quality means – such as in terms of gender equality and human rights – and how different stakeholders can be held to account for their achievement. Continued work is needed to source and analyse appropriate data, such as through the disaggregation of programme results according to whether they are community or key population led.

Intensify monitoring and guidance for country-coordinating mechanisms to ensure communities and key-population led networks have an equal say in decision making at country level. The Global Fund should ensure better enforcement of rules for country-coordinating mechanisms (CCM). Conflict of interest policies need particular attention to ensure the voices of communities are not left out. It is essential that the political imbalance of power between Government representatives and community representatives on the CCM are addressed in decision making, accountability and transparency through focused resources for effective inclusive constituency building.

Prioritise and increase investment to deliver comprehensive, integrated, rights-based health services that include sexual and reproductive health and mental health. Universal health coverage must be a priority to ensure that all people regardless of country or status have access to quality health services and treatment.

Renew commitment to responsible transitioning, where communities and countries are supported. The Global Fund must ensure community voices are included meaningfully and valued in the country-level assessment transition planning and throughout the transition period.

“It is critical to have access to data that can be disaggregated to reflect the experiences and challenges facing specific groups, particularly key populations and women and girls.” - GNP+, ICW & Y+
