

# COMMUNITIES DELEGATION

to the Board of the Global Fund to Fight AIDS, Tuberculosis and Malaria

## Development of Global Fund Strategy for 2023-30

The Delegation of Communities Living with HIV and Affected by Tuberculosis or Malaria to the Board of the Global Fund to Fight AIDS, Tuberculosis and Malaria welcomes the opportunity to provide initial input on the development of the Global Fund Strategy for 2023-30. At this stage, we wish to highlight key issues related to two areas:

### Focus of the 2023-30 Strategy

With consideration of the guiding questions provided to the Board<sup>1</sup>, and in relation to the focus of the Global Fund Strategy for 2023-30, the Communities Delegation emphasizes the need to:

1. **Respect the strengths and protect the gains of the 2017-22 Strategy<sup>2</sup>:** While further progress is needed, the Global Fund's current strategy catalysed historic levels of investment and achievements. It also represented a step-change in the organisation's commitment to the rights, roles and needs of communities. In 2023-30, the Global Fund must protect its gains and remain an unequivocal champion for communities.
2. **Maintain community engagement at all levels:** The Global Fund must continue its principle and practice of engaging communities – including key populations - at all levels of the institution, from Country Coordinating Mechanisms to the global Board. The 2023-30 Strategy should maintain and strengthen the Global Fund's existing models for engagement. It should also facilitate further opportunities to support communities to maximise such entry points, such as through access to technical support to strengthen leadership and representation capacity.
3. **Keep a focus on AIDS, TB and malaria, while situating them in the wider, emerging context:** 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 climate change) 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.
4. **Promote integrated health services that are people-centred.** While applying an AIDS, TB and malaria lens, the Global Fund Strategy for 2023-30 should 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, such as economic empowerment and mental health. Approaches to each of the diseases should be comprehensive, for example, investing in prevention initiatives, alongside care, support and treatment. Meanwhile, synergies should be created or expanded, such as with integration with services for areas such as cancer or sexual and reproductive health and rights. Such approaches are critical to achieve results across Sustainable Development Goal 3, including Universal Health Coverage.

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<sup>1</sup> *Global Fund Strategy Development*, 43rd Board Meeting, the Global Fund to Fight AIDS, Tuberculosis and Malaria, 2020.

<sup>2</sup> *Global Fund Strategy 2017-2022: Investing to End Epidemics*, the Global Fund to Fight AIDS, Tuberculosis and Malaria.

5. **Maintain the four existing strategic objectives<sup>3</sup>, while strengthening the integration of gender equality and human rights:** 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 catalyze focused action. However, such issues should be integrated *throughout* the organization’s work, with them embedded into all relevant, proposals, programmes and policies for all three diseases.
6. **Implement existing good practice policies and guidance:** The Global Fund should continue to respect country ownership, whereby the enforcement of its policies is neither appropriate nor feasible. However, in 2023-30, it should ensure its existing, extensive and high quality policies and guidance (such as on gender equality and programming for key populations) are more systematically operationalized within funded programmes. There is a need to close the gap – between the Global Fund’s theory (as set out in written resources) and practice (as articulated in countries’ proposals and as seen in actual programmes). The Global Fund should take more stringent measures to enact its principles, even when they evoke controversy. For example, the meaningful engagement of key populations should be ensured even in countries that criminalize such populations.
7. **Emphasise the building of resilient and sustainable systems for health (RSSH) that fully incorporate and strengthen community systems:** From 2023 – in particular in light of the challenges highlighted by Covid-19 - stronger emphasis is needed on RSSH. This should be based on greater clarity and consensus on what RSSH actually is and, in particular, how such systems incorporate community systems. Recognition should be given to the value of community-led and key population-led responses to the three diseases, and of community-based interventions (such as community-based monitoring). These should be acknowledged, resourced and integrated - as an intrinsic part of well-functioning and sustainable systems for health.
8. **Promote 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 remove the structural barriers (such as criminalisation, stigma and violence) that present persistent barriers to effective action on the three diseases. Communities are well-placed to conduct advocacy that is led by those most affected, including in challenging contexts, such as countries undergoing transition and sustainability.
9. **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 that includes 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 and their impact on people’s lives. This will 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 its achievement. It will also involve continued work to source and analyse appropriate data, such as through the disaggregation of programme results according to whether they are community or key population-led.

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<sup>3</sup> 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.

10. **Acknowledge and respond to the experiences of the Covid-19 crisis.** The new Strategy should be based on a realistic understanding of the impact of Covid-19 on the Global Fund and the three diseases, such as in terms of additional pressure on health systems and the diversion technical resources. However, Covid-19 should not be used as an excuse for reversing the gains – in a context where the targets for AIDS, TB and malaria were *already* off track. Instead, experiences should inform a deeper understanding, such as of how social and structural determinants affect people’s access to services and how community systems can provide unique access to marginalized communities. They should also be used to shape the future potential roles of the Global Fund, for example in demonstrating how it can quickly adapt HIV, TB and malaria programmes for preparedness and response to urgent disease outbreaks.

### Process for the 2023-30 Strategy

In relation to the process and timeframe to develop the Global Fund’s Strategy for 2023-30, the Communities Delegation emphasizes the need to:

11. **Move ahead with strategy development.** It is recognized that the Global Fund’s Strategy for 2023-30 will be developed during a period of unpredictability. However, the process should proceed, with energy and enthusiasm. Now is not the time to prevaricate or postpone. It is the time to show how the Global Fund will continue, develop and thrive in a changing world.
12. **Ensure meaningful engagement of communities.** The process to develop the Global Fund’s Strategy for 2023-30 should make all efforts to ensure the meaningful engagement of communities. Where consultations are held virtually, they should be conducted with and through communities’ existing infrastructure - such as key population networks and TB and malaria civil society platforms – which have established access to constituents. Virtual consultations could present an opportunity to reach a larger number and range of community stakeholders, including those deemed ‘hard to reach’ for such processes and those on the frontline of responses. Consultations could be segmented (such as for specific geographies or key populations), with community facilitators ‘translating’ the guiding questions into a format with which communities can engage.