



Issues of strategic importance from the African Constituencies

Ethiopia, Addis Ababa May 5th -6th, 2015.

The two constituencies to the Board of the Global Fund, representing countries in West and Central Africa and in East and Southern Africa, met together over two days in Addis Ababa, Ethiopia. The discussion focused on both implementation and strategic issues. We offer the following outcomes from the strategic discussions as input to the Global Fund's Partnership Forum and development of the next Global Fund strategy for 2017-2021.

These inputs are intended to make the Global Fund even stronger as it supports our efforts to battle three epidemic diseases. Africa holds the greatest disease burden, and so strongly appreciates the support from the Global Fund and its many donors. It has helped us to save millions of lives, and is well placed to assist us in defeating these diseases so that we can save many more.

1. Health systems Strengthening (HSS)

Health system's strengthening is priority number one for the African Constituencies. We strongly believe that investments in HSS will yield the maximum impact of the Global Fund's other investments in disease-specific programming. The need for the Global Fund to invest significantly in HSS has long been hampered by lack of appropriate metrics to track and measure the impact of such investments and lack of clarity on what HSS entails. We therefore:

- a) Strongly urge the Global Fund to work with technical partners and lead the process of developing the right metrics and indicators for measuring health system performance that will make it easier to make the case to its donors for greater investments in HSS.
- b) Strongly urge the Global Fund to ensure that once these metrics and indicators are defined, they are appropriately reflected in current and future processes to measure the performance of Global Fund investments.
- c) Pledge our commitment to work with the Global Fund to provide greater clarity on what HSS means, the distinction if any, between HSS and Community Systems Strengthening (CSS), and what investments into HSS and/or CSS would entail.

- d) The Global Fund should support enhanced coordination of HSS/CSS among other development partners at country level in order to minimize duplication and maximize impact.
- e) Strongly urge the Global Fund to make investments in strategic areas of the health system within African countries that will directly impact on the performance and sustainability of Global Fund investments and/or its ability to measure that impact. Such strategic areas include Health Information Systems, Procurement and Supply Chain Management; and Health workforce.

2. Women and Girls

In the African region, women and girls suffer a disproportionate burden for HIV/AIDS. Structural and societal barriers contribute to this disadvantage but also contribute to their inability to access life-saving interventions for the other diseases. As a result, women and young girls in the region are not just bearing a disproportionate disease burden, but are driving the epidemic. Greater attention to women and girls in current and future Global Fund Strategy is Priority Number two for the African Constituencies. We strongly propose:

- a) That greater emphasis should be placed on **women, girls** and **adolescents** as priority populations at the center of efforts to increase coverage, effectiveness and impact.
- b) Consideration is given to interventions that **address structural barriers** that directly impact on the success of disease-specific interventions.

3. Challenging Operating Environments (COE)

COE are increasingly an area of strategic importance to the Global Fund. Challenging environments may come about as a result of long standing political, social and environmental issues or from unanticipated emergency situations. The African region is home to countries where COE are prevalent. Such environments may compromise the ability of investments by the Global Fund to achieve the intended impact or worse still derail progress that may have been made in the past. There is therefore need to respond effectively to such COE, whether they are a result of long-standing social, political or environmental problems or are acute in nature. We strongly urge the GF to:

- a) Develop institutional and operational frameworks to respond effectively to COE that allow for the needed flexibility for any investments to have impact. This includes clearly defining what COE are.
- b) Communicate progress made so far in developing the frameworks to institutionalize the Global Fund's response to COE for input and discussion in the right for a of the Global Fund's governance structure.

- c) Increase and expand the investment in the emergency fund in order to sustain the gains.

4. Increasing domestic financing

We propose that the GF, leveraging its position as a significant contributor to country programs dealing with AIDS, tuberculosis and malaria:

- a) Fully utilizes existing accountability mechanisms for implementation of regional frameworks and domestic funding commitments such as those implemented by the AU.
- b) Develops and/or supports the development of comprehensive advocacy strategies that target key decision makers within countries responsible for making budget allocation decisions such as Ministries of Finance and Parliamentary Committees and ensure the Global Fund is aligned to country budgeting processes.

5. The Allocation Approach

African countries agreed that the Funding Model has been a major improvement in the Global Fund's grant making model. It has brought predictability into planning and budgeting for the three diseases and better alignment with country processes. However, as the region that bears the greatest disease burden for AIDS, tuberculosis and malaria and the one with the greatest unmet need for interventions, the African Constituencies feel strongly that the current allocation formula is not optimal. We strongly propose:

- a) That the Global Fund revisits and revises the current allocation approach by giving more weight to disease burden (and unmet need) and than any other consideration. Measures of burden must include efforts to maintain gains already achieved.
- b) That the Global Fund reconsiders the necessity of provisions in the current funding model such as incentive funding and Unfunded Quality Demand.

The African Constituencies are committed to supporting the GF secretariat to undertake the necessary analyses that will make the case for more impactful allocation of resources.

6. Managing Transitions from LMIC to MIC status

Transitions from country income to status from the level to another are inevitable and welcome. However African Constituencies feel that such transitions should not be viewed as events but rather as gradual processes during which countries and their funding partners jointly plan for an orderly transition. A key part of the process of determining which countries qualify for graduation from LMIC to MIC status is cost analysis. We

strongly discourage the current practice of such analyses being undertaken without fully involving the affected countries and propose that:

- a) The GF should ensure ownership and full participation of countries in the analytical processes that inform the decisions for graduation and transition.
- b) Local academic institutions should be involved in such processes to improve ownership and acceptability of the findings and decisions and longer term follow up within their own countries.
- c) The emphasis should be on strong and sustainable programs and systems.

7. Concept Note Development

The process of concept note development is critical to the successful implementation of the funding model. It is equally critical that concept notes are aligned to national health strategic plans. In order to improve efficiency in the concept note development process we propose that:

- a) The Global Fund should effectively participate in gap analyses and in JANS reviews with other development partners and to ensure that such plans are aligned and harmonized with the Global Fund's goals. This will greatly minimize duplication of such processes as is current practice. Effectively engaging in the National Health Strategic Planning and review processes is a worthy investment into country processes that will not only strengthen the quality of the plans and by extension national health systems, but will reduce the high cost of developing concept notes.