Global Overview

<table>
<thead>
<tr>
<th>TOTAL DEATHS:</th>
<th>TOTAL CASES:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,545,140</td>
<td>67,530,912</td>
</tr>
</tbody>
</table>

as of 8 December – Source: WHO

As the UK started the roll out of a vaccination program for people who are most at risk, WHO warned the pandemic still had “a long way to run”, and said “equitable vaccine distribution was the right and the smart choice.” At the United Nations General Assembly Special Session on COVID-19, UN Secretary-General called again for a COVID-19 vaccine to be a “global public good available to everyone, everywhere” and regretted the ACT-Accelerator was underfunded. South Africa and India called for the World Trade Organization (WTO) to suspend intellectual property (IP) rights related to COVID-19 to ensure that not only the wealthiest countries will be able to access and afford new COVID-19 tools. A research by the Eurasia Group found the economic benefits of a global equitable vaccine solution alone for just 10 high-income countries would be at least US$153 billion in 2020-21, rising to US$466 billion by 2025. On diagnostics, a research found increased intensity of PCR testing reduced COVID-19 transmission within countries during the first pandemic wave. On therapeutics, Unitaid and partners said they would invest in a ground-breaking clinical trial of COVID-19 medicines that are adapted to the needs of low- and middle-income countries.

WHO reported global malaria gains are threatened by COVID-19, and UNAIDS warned COVID-19 had created additional setbacks in the fight against HIV. OCHA warned the health and non-health effects of COVID-19 would merge with other shocks in 2021. UNCTAD forecasted COVID-19’s economic fallout would long outlive the health crisis. World Bank outlined pandemic could push 72 million more children into learning poverty. In Africa, the Africa Centers for Disease Control and Prevention (Africa CDC) predicted a surge of COVID-19 cases due to festivities, while experts said funding, climate and fear could trouble Africa’s COVID-19 vaccine plans. A new network was created to combat the “infodemic” of misinformation online surrounding COVID-19 and other health emergencies on the continent.

Global Fund Response: At a Glance

- Total funds approved to date: US$824.8 million
- Countries receiving Global Fund support for COVID-19: 106 countries and 14 multicountry programs
- Total funds raised to date: US$230 million
- Fundraising target: An additional US$5 billion over 12 months

- How countries are using COVID-19 Response Mechanism support:
  - 55%: Reinforcing national COVID-19 response
  - 34%: Mitigating COVID-19 impact on HIV, TB and malaria programs
  - 11%: Urgent improvements in health and community systems

- How countries are using grant flexibilities*:
  - 59%: Reinforcing national COVID-19 response
  - 32%: Mitigating COVID-19 impact on HIV, TB and malaria programs
  - 9%: Urgent improvements in health and community systems

* NOTE: Percentages based on data from 15 countries which cover more than 50% of the total amount of grant flexibilities.
The Global Fund responded quickly and at scale to the COVID-19 pandemic and we are playing a critical role in the global response to COVID-19 in the poorest and most vulnerable countries. To date, the Global Fund has approved a total of US$824.8 million to support the COVID-19 response across 106 countries and 14 multicity programs through the COVID-19 Response Mechanism and grant flexibilities. Requests for funding have been approved within 5-10 days in the majority of cases. The timeline for award of funds from the Global Fund’s COVID-19 Response Mechanism (C19RM) has been extended to 15 April 2021. The timeline for implementation of funding from the Global Fund’s COVID-19 Response Mechanism (C19RM) has been extended to end-June 2021.

The Global Fund is working with donors and partners to urgently mobilize an additional US$5 billion to help countries continue to fight COVID-19, mitigate the impact on HIV, TB and malaria, protect health workers and reinforce systems for health. More than US$230 million has been raised so far, and more funds are urgently needed to avoid a critical funding gap in the world’s poorest countries.

As part of the global response to COVID-19, the Global Fund is working with health leaders, partners and governments to ensure the global response to COVID-19 includes lessons learned from the fight against HIV, TB and malaria: protect human rights and address stigma and discrimination, particularly among key and vulnerable populations; fight human rights and gender barriers to health; engage communities in the response; and fairly allocate limited COVID-19 resources and new tools so that no one is left behind.

The Global Fund is a founding partner of the Access to COVID-19 Tools (ACT) Accelerator, a global collaboration of organizations and governments working to accelerate the development, production and equitable access to new COVID-19 tests, treatments and vaccines once available. As part of the ACT-Accelerator, we are a co-convener of both the Diagnostics Partnership (with FIND) and the Health Systems Connector (with the World Bank), and we are a procurement and deployment partner in the Therapeutics Partnership. We also co-lead the WHO Diagnostics Consortium along with UNICEF to negotiate pricing and procure molecular diagnostic tests for COVID-19, and we have opened our innovative online sourcing portal, wambo.org, to all countries and organizations so they also can benefit from the Global Fund’s economies of scale for health products.

Funding Approved

| US$220 million | US$604.8 million | Total approved US$824.8 million |

- **Grant flexibilities**
  - Use of funds remains mostly from grant savings, focused mainly on infection control, diagnostics activities & products, and lab equipment; reprogramming requests approved in small number of cases.

- **COVID-19 Response Mechanism**
  - Funding requests approved: 94 and 33 top-up requests
  - Funding remaining: US$113 million
  - Projected funding gap: US$316 million
  - Demand for funding has exceeded available funds. Countries are continuing to submit urgent requests for funding, and requests are expected to rise.

**NOTE:** Full list of countries with approved funding is available [here](#). The totals in the online table may differ from the table above because countries are only added to the online list once they have been officially notified of funding approval.

The Global Fund is leveraging its extensive health and community networks and its well-established health procurement and distribution system to distribute new COVID-19 tools, medical supplies and training at scale.

**Protecting Front-Line Health Workers:** The Global Fund is providing funding to countries to purchase personal protective equipment such as masks, gloves and gowns. Countries can purchase equipment locally or can place orders for price-assured quality health products through our Pooled Procurement Mechanism or on wambo.org, the Global Fund’s online sourcing portal.

- US$202 million of COVID-19 Response Mechanism funds have been allocated for the provision of personal protective equipment (PPEs)
- 46 countries have purchased PPEs on wambo.org

**Additional Resources:**

- Personal Protective Equipment Procurement
- Key Personal Protective Equipment: Frequently Asked Questions
- List of Personal Protective Equipment and Oxygen Products Available for Procurement via Wambo.org
- Category and Product-Level Procurement and Delivery Planning Guide: Indicative Lead Times
Diagnostics: The Global Fund is the co-lead of the ACT-Accelerator Diagnostics Pillar, along with FIND. We also co-lead the WHO Diagnostics Consortium along with UNICEF to negotiate pricing and procure molecular diagnostic tests for COVID-19. To scale up Ag RDTs, the Global Fund has made available an initial US$50 million from its COVID-19 Response Mechanism to enable countries to purchase at least 10 million of the new rapid tests for LMICs at the guaranteed price. The Global Fund is supporting countries and partners to develop and implement national testing strategies using a combination of PCR and Ag RDT tests.

- **US$117 million** of COVID-19 Response Mechanism funds have been allocated for the provision of diagnostics tests. To date, 6.1 million requisitions for diagnostics tests (PCR and Ag RDT) have been placed across a total of 78 countries, including:
  - **2.4 million** requisitions have been placed for automated PCR diagnostic tests across 78 countries
  - **3.4 million** requisitions have been placed for Ag RDT tests across 18 countries
  - **360,000** requisitions have been placed for manual PCR diagnostic tests

Additional Resources:
- Scaling-up Testing with Antigen-Detection Diagnostics
- Ordering COVID-19 Diagnostics through the Global Fund: Frequently Asked Questions
- List of SARS-CoV-2 Diagnostic Test Kits and Equipment Eligible for Procurement
- PPM Reference Price List for COVID-19 Diagnostics

Treatment: Following WHO recommendation, the Global Fund is supporting the use of corticosteroids for COVID-19. Global Fund implementers can include corticosteroids for COVID-19 in COVID-19 funding requests. Corticosteroids are a standard medication in most countries and available for local purchase, and many countries and partners had existing stock.

ACT-Accelerator:
The ACT-Accelerator is making significant progress. We have advanced our understanding of what works to fight the disease. We have new vaccine efficacy data being announced, new diagnostic tests that provide results in less than 30 minutes and strong evidence that dexamethasone treats the disease, while trials on other new medicines such as monoclonal antibodies are advancing quickly. Further, clinical practice has advanced in understanding how oxygen, PPE, and overall health system capabilities can be best used to improve a patient’s chances of recovery.

By the end of next year, the ACT-Accelerator aims to deliver 500 million diagnostic tests, 245 million courses of treatment and 2 billion doses of vaccine to low- and middle-income countries.

- **Diagnostics Pillar update:**
  - **33 million** PCR and Ag RDT tests have been procured for low- and middle-income (LMICs).
  - The ACT-Accelerator Diagnostics Pillar has secured **120 million** affordable, quality COVID-19 rapid tests for low- and middle-income countries, but the Diagnostics Pillar only has enough funding to purchase 16 million of those tests.
  - Over 50 diagnostic tests are currently being evaluated.

- **Therapeutics Pillar update:**
  - **3.2 million** lifesaving dexamethasone treatments have been supplied.
  - Manufacturing capacities are reserved for scale-up of monoclonal antibodies while research into monoclonal is advancing.
  - Approximately 20 treatments – new medication in development and existing medication repurposed to treat COVID-19 – are under close review, and more are in the development pipeline.

- **Health Systems Connector Pillar update:**
  - The Health Systems Connector (HSC) aims to support countries on key health systems enablers as well as be the vehicle to make oxygen and personal protective equipment available as high priority commodities, especially in low and low-middle-income countries (LMICs). Systems requirements for delivery of COVID-19 tools have been mapped in four out of six world regions.
  - **US$200 million** worth of personal protective equipment (PPE) has been procured for LMICs. This is enough to purchase 73 million daily basic PPE kits of gloves and masks for health workers.
ACT-Accelerator funding update:

Out of the US$38 billion needed, just US$5.1 billion has so far been committed to the ACT-Accelerator (through the Vaccines, Therapeutics, and Diagnostics pillars and the Health Systems Connector) and US$5 billion committed to COVAX.

As of 4 December 2020, US$4.3 billion is needed to accelerate immediate progress, with a further US$23.9 billion required in 2021, if tools are to be deployed across the world as they become available. Without contributions from advanced economies to fill that gap, the ACT-Accelerator will not be able to provide low- and middle-income countries (LMICs) with the lifesaving tests, treatments, and vaccines they need. Now is the pivotal moment to move fast for the mass rollout of these tools. Manufacturing capacity needs to be rapidly reserved, regulatory pathways accelerated, and delivery systems secured. All of this must happen now to avoid long delays in future and corresponding delays to the end of the crisis, but the urgent financing gap threatens the world’s ability to tackle the virus. The ACT-Accelerator Commitment Tracker provides details on total commitments to date.

Diagnostics pillar:
The Diagnostics Pillar requires total funding of US$6 billion. To date, US$675 million has been raised. The Diagnostics Pillar total gap is US$5.3 billion, of which over US$1.1 billion is needed urgently to:

- Accelerate the diagnostic innovation needed to rebuild lives and restore economies by driving development of transformative, low-cost self-tests and digital solutions (US$146 million);
- Catalyze equitable deployment by ensuring countries, businesses and people can take up these products effectively (US$218 million);
- Support countries that cannot shoulder the costs alone by providing procurement funding (US$761 million).

Beyond March 2021, the focus will be on making a mass-produced, US$0.50 test available to everyone, everywhere, with 500 million tests deployed to LMICs by the end of 2021.

Therapeutics Pillar:
The Therapeutics Pillar requires a total of US$6.6 billion through end-2021. To date, US$460 million has been raised. The total funding gap is US$6.1 billion, of which US$730 million is needed immediately. The Therapeutics Pillar investment case beyond March 2021 is built to enable flexible support for R&D, market preparation, and deployment at-scale for any therapeutics assets with positive clinical data.

Health Systems Connector:
The Health Systems Connector requires a total of US$9.5 billion. To date, US$302 million has been raised. The Health Systems Connector total funding gap is US$9.1 billion, of which US$1.7 billion is needed to facilitate access to PPE and oxygen. As country readiness is an absolute prerequisite to the equitable scale-up of other COVID-19 tools, US$89 million is needed urgently to support these health systems activities.

Additional Resources:
- ACT-Accelerator Commitment Tracker
- Chairs’ Summary of the 2nd Meeting of the ACT-A Facilitation Council
- Letter to the G20
- Urgent Priorities & Financing Requirements at 10 November 2020
- ACT-A Status Report & Plan
- ACT-A Economic Investment Case and Financing Requirements
- ACT-A Diagnostics Partnership Investment Case
- ACT-A Therapeutics Partnership Investment Case
- ACT-A Vaccines Pillar (COVAX)
As of 3 December 2020, the Global Fund’s product and delivery outlook shows the overall impact of COVID-19 on health product supply chains for Global Fund grants remains at moderate.

Country-based Local Fund Agents, who monitor grant implementation and progress on behalf of the Global Fund, complete a biweekly survey online to help identify potential risks and disruptions to programs. The tool is not meant to be a rigorous assessment of the country situation. The data is based on in-country stakeholder views but not on verified data. Key insights as of 1 December 2020:

**Countries in lockdown**: Situation seems to have improved on lockdown in the countries where the Global Fund invests. 36% of countries are in nationwide lockdown, down from 39% on 15 November, and back to the level of 15 October – the lowest since May.

**Costed national plans**: 83% of countries have costed response plans in place for their COVID-19 response, the same percentage as on 15 November – the highest reported since May.

**Disruption to health service delivery**: Service delivery returns to relatively normal in countries. However, nearly 15% of countries still report disruption in service delivery for all three components.

Disruption has been mitigated in some countries thanks to increased availability of personal protective equipment for service providers. But decreased attendance at health facilities continues to impact service delivery for all three diseases. Even as supply stabilizes, the demand continues to be depressed.

On HIV, challenges are still being observed in some countries with reports of increasing loss to follow-up among people on treatment, and complete halt or challenges in restarting interventions dedicated to key populations.

On TB, improvement in notification is observed across many settings and community case finding is restarting in a number of settings with volunteers starting to conduct follow-up of patients and defaulter tracing.

On malaria, programs suffer from delays in mass distribution campaigns of long-lasting insecticidal nets. Countries are now adopting door-to-door distribution.

**Global Fund COVID-19 Country Monitoring**

<table>
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<tr>
<th>Date</th>
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</tr>
<tr>
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<td>51% 19% 16% 11%</td>
</tr>
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</tr>
<tr>
<td>1 Dec</td>
<td>39% 25% 25% 25%</td>
</tr>
</tbody>
</table>

**Service delivery disruption**

Average Score of Countries

- **High Risk**: 29% HIV, 26% TB, 46% Malaria
- **Very high disruption**: 2% HIV, 1% TB, 1% Malaria
- **High disruption**: 13% HIV, 13% TB, 13% Malaria
- **Moderate disruption**: 56% HIV, 60% TB, 39% Malaria
- **No/low disruption**: 2% HIV, 1% TB, 1% Malaria
- **Don’t know**: 13% HIV, 13% TB, 13% Malaria
**Disruption to supply of key medicines:** The national stock in TB/HIV medicines has recorded an improving trend since 1 October. The stock situation remains precarious in some settings for antiretroviral medicines, tuberculosis drugs and malaria artemisinin-based combination therapy, where stock in hand is only for a few months. Between 1% and 6% of countries are still experiencing shortages of health products.

**Lab services:** 40% of countries report no or low HIV and/or TB lab services disruption, up from 38% on 15 November. Disruption has been mitigated in some countries thanks to additional cartridges and GeneXpert machines to cope with increased lab demands.
Global Fund Response
Mitigating the Impact of COVID-19 on HIV, TB and Malaria

IN FOCUS  KEY POPULATIONS DRAMATICALLY AFFECTED BY COVID-19 DISRUPTIONS

Reaching key and vulnerable populations with prevention, testing, treatment and care, and supporting them to overcome barriers to services, is essential to ending the epidemics.

The Global Fund is the most important funder of programs for key populations in Latin America and the Caribbean (LAC), Eastern Europe and Central Asia (EECA), Asia and Western and Central Africa. It is also the biggest external investor for harm reduction programs for people who inject drugs. The Global Fund is committed to promoting and protecting human rights and breaking down gender and human rights barriers to health services. The Global Fund supports strengthening of community responses and systems to enable key populations to access critical health services, and promotes meaningful engagement of key and vulnerable populations and networks in the design and provision of key health services.

Communities and local partners are therefore central to the success of the HIV, TB, malaria and COVID-19 response. In low- and middle-income countries, communities and local partners have decades of experience using trusted, local community health workers to provide prevention and care services and to test, track and treat people to fight HIV, TB and malaria – the exact same expertise that is critical now to fight COVID-19.

The Challenge
Ensuring support for key populations has been a long-time challenge for various reasons related to human rights, stigma, gender and other structural barriers to access to services. The COVID-19 pandemic has made the situation even more challenging.

As a result of the new pandemic, sex workers have experienced increased rates of violence, stigma, poverty and homelessness. Transgender women have reported increased police harassment, particularly where sex-segregated lockdowns have been ordered. There has been dramatic increase in gender-based violence (GBV) and intimate partner violence (IPV), which leads to an increased risk of HIV. In many places, closure of schools and community centers have disrupted access to HIV and Sexual and Reproductive Health and Rights (SRHR) services for young people, putting adolescent girls and young women in particular at increased risk of GBV, unplanned pregnancy, forced marriage, and HIV or other sexually transmitted infections. A six-month disruption in access to contraception could cause 47 million women in low- and middle-income countries to not be able to meet their contraceptive needs. Stigma and misinformation about people with TB – as a result of COVID-19 – has increased.

The Global Fund’s response
To support communities and countries to respond to these challenges, the Global Fund and partners are working to increase the following urgent interventions:

- IPV/GBV reporting/referral helplines, and communication campaigns to raise awareness of IPV/GBV & encourage use of response services;
- Training for health workers and law enforcement on IPV and how to document/respond appropriately to disclosures of violence;
- Post-exposure prophylaxis (PEP), emergency contraception and other emergency services for those who have experienced IPV/GBV, including mental health and trauma services;
- Community and facility-level stigma reduction interventions for people with TB;
- Policy review/revision to allow easier access to TB services, including multi-months dispensing and allowing third-party collection of treatment;
- Rapid assessments of safety and security of supported key populations program clients and implementers, and use of the findings to inform adjustments to program delivery;
- Data credits and/or phones for community outreach workers, community treatment supporters, peer educators to facilitate remote support;
- Social protection measures, including nutritional support, for key and vulnerable communities;
- Prioritize support for community-based learning of health service disruptions and human-rights abuses, including service denial;
- Support existing programs to expand and adapt to monitor access to COVID-19 tools;
- Sensitize COVID-19 health care workers on issues of stigma, discrimination, and unconscious bias against key and vulnerable individuals.
Examples of program adaptation:

- For sex workers: In South Africa, virtual platforms have been introduced to expand psychosocial support or counselling by phone, integrating an online medical appointment system and support for those who fear going to health facilities during lockdown. Global Fund partners have reached out to street-based and brothel-based sex workers to deliver packages of personal protective equipment, condoms, lubricants and HIV self-test kits. Sex workers are leading economic empowerment programs, particularly for venue-based sex workers who lost income as a result of lockdown-related closure of brothels.

- For people who inject drugs: In Ukraine, the opioid substitution therapy hotline is used to record human rights violations experienced by people who inject drugs, including barriers created by COVID-19. The use of needle and syringe vending machines is being trialed.

- For adolescent girls and young women: In Malawi, service delivery includes multi-month supplies of antiretroviral therapy, personal protective equipment for peer educators to provide face-to-face care in hard-to-reach communities, a focus on parent-child communication, virtual support groups to provide HIV health services and referral for sexual and reproductive health through text messages and information on gender-based violence and unplanned pregnancy prevention on radio stations.

- For LGBT communities: In Uganda, Global Fund partners provided legal representation for 19 homeless LGBT youth arrested on pretext of violating COVID-19 restrictions.

“Trans people are the most discriminated against and most marginalized. Transgender people fear that between the exit of the health service and the crossroad they will be insulted, and stones will be thrown at them. People face a lot of violence,” says Kiki, the founding president of Positive Vision Cameroon, an organization that works to protect the rights of transgender people, including their right to access health care such as HIV prevention and treatment services.

Both HIV and COVID-19 expose sharp inequities in society and barriers that the most marginalized communities face exercising their right to health care. In addition to the heightened stigma, many people in Cameroon simply couldn’t access health services due to COVID-19 lockdown measures and transport stoppages. With support from the Global Fund, Kiki and colleagues at Positive Action continue to support key populations during the COVID-19 lockdowns, including delivering medicines and food, door-to-door to people most-in-need while providing counseling sessions and mental health support to the most marginalized. Learn more about Kiki's story on Human Rights Day, 10 December 2020, on the Global Fund’s website.
Moldova has made remarkable progress against TB. The TB mortality rate decreased by 39.2% between 2015 and 2019, and the case detection rate increased from 63% in 2010 to 87% in 2019. The treatment success rate for new and relapsed cases registered in 2018 reached 85% – approaching the global target of 90%. Yet the COVID-19 pandemic is threatening this progress. Moldova has reported more than 100,000 cases of COVID-19, of which 10% are health workers. Prolonged restrictions and rigorous infectious control measures have hindered the detection and diagnosis of new TB cases; the number of TB cases reported between March and October 2020 decreased by 46% compared to the same period in 2019.

Without treatment, TB patients could die or become more susceptible to illnesses like COVID-19, and continue to transmit the disease to others. One person with active, untreated TB can spread the disease to as many as 15 other people in a year.

To mitigate the impact of the COVID-19 pandemic on TB and HV programs, the Global Fund has provided nearly EUR 1.3 million to Moldova to:

- Procure 5,000 HIV and TB testing kits and personal protective equipment for health workers and patients;
- Launch a “Targeted TB case detection” strategy to encompass active detection, isolation, and treatment, including symptom screening of TB and potential COVID-19 infected patients, based on the nationally approved diagnostic algorithm for TB and COVID-19 testing;
- Expand video-observed therapy (VOT) of TB to enable the continuity and efficacy of TB treatment by limiting the patient’s interactions or traveling, thus reducing the risk of spreading COVID-19;
- Develop and roll out new recommendations for TB service and primary health care workers regarding TB case monitoring and COVID-19 case triage activities, to minimize the risk of TB patients of acquiring COVID-19;
- Implement the Rights – Evidence – Action (REAct) system (along with several other countries in the Eastern Europe and Central Asia region), which allows communities to record and respond to human rights violations among HIV and TB key populations.
Communications Products

- Stories and videos:
  - Melissa’s story: out of school and at risk of HIV and violence during lockdown [ENG] [FR]
  - The hidden tragedy of COVID-19 on adolescent girls in Malawi [ENG] [FR]
  - A doctor’s plea from the frontline: “It’s time we all made a stand” [Video]

- Op-eds:
  - Without equity, we cannot end COVID-19, HIV or any other pandemic - By Peter Sands, Executive Director of the Global Fund, and Mark Vermeulen, Director of Aidsfonds [ENG]
  - How the lessons the world learned in the fight against HIV can help us defeat COVID-19 - By Peter Sands, Executive Director of the Global Fund [ENG] [FR]

In the News

- Der Tagesspiegel – 25 November 2020 - Covid-19 threatens success in the fight against AIDS
- The Lancet - 27 November 2020 - Maintaining the HIV response in a world shaped by COVID-19
- Reuters - 30 November 2020 - Malaria death toll to exceed COVID-19’s in sub-Saharan Africa
- de Volkskrant - 30 November 2020 - Without equity, we cannot end COVID-19 - by Peter Sands & Mark Vermeulen
- The Telegraph - 1 December 2020 - How the lessons the world learned in the fight against HIV can help us defeat Covid - By Peter Sands
- La Repubblica - 1 December 2020 - Effectiveness is needed in the response against Covid and also against HIV, malaria and tuberculosis - By Peter Sands
- El Pais - 1 December 2020 - The mistakes we’ve made in the battle against HIV - By Peter Sands
- New Europe - 1 December 2020 - The fight against infectious diseases is a global challenge - By Peter Sands
- The Washington Post - 1 December 2020 - America isn’t safe until poor countries have vaccines, too - By Chris Collins
- TVE - 1 December 2020 - There is concern about the “forgetting” of AIDS due to the coronavirus pandemic - with Francoise Vanni
- Deutsche Welle - 1 December 2020 - Coronavirus pandemic slows Africa’s progress against HIV
- Frankfurter Allgemeine Zeitung - 2 December 2020 - Aids, Corona & Co: A break from the front
- TV5Monde - 5 December 2020 - In Malawi, Covid-19 threatens fight against HIV and gender inequalities
- Jeune Afrique - 7 December 2020 - The fight against malaria, a collateral victim of Covid-19
On Social Media

- @GlobalFund - As the world fights #COVID19, we must remember that we haven’t finished the fight against #HIV
- @PeterASands - #AIDS in a time of #COVID19: A thread.
- @antonioguterres - To overcome #COVID19 and end AIDS, the world must stand in solidarity and share responsibility
- @WHO - Everyone should have access to #HIV services during #COVID19
- @UNDP - #COVID-19 has disrupted access to lifesaving healthcare and medicine for people living with HIV
- @cooperazione_it - The global response to #COVID19 should emphasize the need to support the global fight against #HIV
- @brophytalks - Maintaining supports to fight HIV/AIDS, TB and Malaria while tackling #COVID19 #irishaid
- @Aidsfonds_intl - On this #WorldAIDSDay, let us learn from what we got wrong in the fight against #HIV to guide the way we fight #COVID19
- @elpais_america - Opinión | “El Día Mundial del SIDA nos recuerda que mientras luchamos para contener la covid-19, aún no hemos concluido la lucha contra la última gran pandemia que ha golpeado a la humanidad”
- @WHO - #COVID19 could derail global efforts to #EndMalaria
- @BillGates - RT @GlobalFund - Meet Aftab, a multi-drug resistant TB survivor and counselor fighting #TB and #COVID19

Partners Publications

- 30 November: WHO - World malaria report
- 26 November: UNAIDS - Prevailing against pandemics by putting people at the centre
Upcoming Events

- **10 December 2020: Human Rights Day**
  - Launch event of Global Fund Advocates Network Asia Pacific (GFAN AP) documentary “Distanced but not Disconnected: Stories of Community Resilience, Rights and Responsiveness Amidst COVID-19”, co-hosted by GFAN AP, the Asia Pacific Coalition of AIDS Service Organizations (APCASO) and the Swedish Federation for Lesbian, Gay, Bisexual, Transgender, Queer and Intersex rights (RFSL). Speakers: Lady Roslyn Morauta, Global Fund Board Vice Chair; Peter Sands, Executive Director of the Global Fund; Francoise Vanni, Head of External Relations and Communications of the Global Fund; Carl Skau, Head of Department for UN Policy, Conflict and Humanitarian Affairs at Swedish Ministry for Foreign Affairs; Rodelyn Marte, Executive Director at APCASO; Cal Orre, Policy and Advocacy manager at RFSL; Community representatives from India, Indonesia and Vietnam.
  - Launch event of Botswana’s five-year strategy to reduce human rights-related barriers to HIV and TB services. Speaker: Peter Sands, Executive Director of the Global Fund.

- **10-11 December 2020: European Council:** The European Council will take stock of the situation and discuss the overall coordination effort in response to the COVID-19 pandemic, including work on vaccines and testing and the gradual lifting of restrictions.

- **12 December 2020:** Universal Health Coverage Day

- **14 December 2020:** ACT-Accelerator 3rd Facilitation Council meeting. Speakers TBD.

- **17 December 2020:** Global Fund-GLOBAL Citizen briefing focused on the private sector. Speaker: Peter Sands, Executive Director of the Global Fund.

- **Mid/late January 2021:** Roundtable with ACT-Accelerator principals and CEOs co-hosted by Global Citizen and the International Chamber of Commerce (initially planned 9 December 2020). Speakers may include: Peter Sands, Executive Director of the Global Fund; Dr. Ngozi Okonjo-Iweala, Board Chair of Gavi, the Vaccine Alliance; Dr. Jeremy Farrar, Director of the Wellcome Trust; Dr. Kristalina Georgieva, Managing Director of the International Monetary Fund; representatives from governments, private sector, and communities.

- **26-27 January 2021:** 1st G20 Health Working Group meeting

- **26-29 January 2021:** World Economic Forum virtual. This event may include a side-event with the Global Fund and FIND on Diagnostics.