C19RM Monthly Update to the Board

Report for May 2022
Publication Date: 22 June 2022
Geneva, Switzerland
Executive Summary for May Report

1 Development of C19RM Reporting
C19RM Reporting continues to evolve. Monthly reports provide updates on awards, progress in absorption/funds utilization and procurement pipeline, while quarterly reports provide a more detailed analysis as data becomes available. For previous versions of Board reports, please visit this page.

2 Update on COVID-19 Epidemiological Situation
High Impact Asia portfolios have the highest number of confirmed cases. Southeast Asia confirms the trend with an increase in new registered cases. Overall, the progression of new COVID-19 cases in the last month keep showing a declining trend, which might be linked to COVID-19 seasonality.

3 C19RM 2021 Awards
As of 03 June 2022, C19RM has awarded or recommended for Board approval US$3,443 million to 124 applicants, for a portfolio average of 26.8% of the 2020-2022 allocation with the following breakdown: 76% to reinforce national COVID-19 responses, 13% for urgent improvement to health and community systems, and 12% for HIV, TB and malaria mitigation.

4 Finance Update
C19RM 2020 absorption is at 60% (US$536 million) for Core and High Impact portfolios, and on target to reach 63%-70% with expenditures currently under validation in grant closures and expenditure reports. 96% of C19RM 2021 awards (US$3,288) are integrated into grants, 67% of the cumulative budget has been committed, and disbursements increased to 49% of cumulative budget until 30 June 2022. In-country absorption (March-22 Pulse data) remains low at 26% due to lower-than-expected demand. An action plan for reinvesting C19RM funds and portfolio optimization (US$800M) is in place to improve C19RM funds impact and absorption.

5 Health Products Update
Health Products represent 65% of C19RM 2021 awards. Out of a total of US$3,443 million awarded by 03 June:
- **Diagnostics** represent 23% of awarded C19RM 2021 funds (US$801 million) and is showing weak demand in some countries due to perceptions about status of the pandemic. The Global Fund supports technical capacity-building through Project STELLAR to improve national diagnostic governance, scale up, increase testing and surveillance coverage, and strengthen data management.
- **Oxygen** represents 16.5% of C19RM 2021 funds (US$568 million). US$187 million has been invested in non-oxygen therapeutics.
- **IPC/ PPE** represents 18% of awarded C19RM 2021 funds, with US$35 million dedicated to IPC program strengthening.
Executive Summary for May Report

6 C19RM Reprogramming Update

Reinvesting C19RM Funds
The operationalization of reinvesting C19RM funds, building on C19RM Investment Committee decisions, is ongoing and on-track. Updates on C19RM guidelines and key documents have been completed, and information sessions with key internal stakeholders have taken place (external sessions upcoming). Supply Operations has provided an update on available funds in the PPM pipeline and Financial Forecast results will inform countries and Country Teams to identify funds forecasted to remain unutilized to ensure absorption.

7 Risk Assurance – M&O

Risk Assurance – M&O
The second C19RM M&O review cycle is being completed in June 2022. The process has already started to identify actions for a sub-set of countries prioritized in this review cycle (Bangladesh, Cote d’Ivoire, Guinea, Indonesia, Malawi, Mozambique, Nigeria, Uganda). Data collection from Spot Checks for the second round has started in 36 countries: it is progressing to support the development and strengthening of analytical reports for the next review cycle in September 2022. Minimum mandatory assurances also continue to be implemented, with a focus on activities relating to procurement, supply chain, and oxygen.

8 Country Case Studies

Country Case Studies – TB Disruption, Mitigation and Recovery from COVID-19
Within High Impact Asia, Bangladesh provided a remarkable example of a country able to successfully mitigate the significant COVID-19 impact on TB results by scaling up responses; thereby surpassing TB targets.
Development of C19RM Reporting
**REPORT FOCUS**

Development of C19RM Monthly Reporting

Last month’s report covered key selected data points updates from financial and programmatic performance, COVID-19 program disruption, award and pipeline updates, key messages across C19RM control and containment, reinvesting C19RM funds, OIG audit overview and country case studies. These sections will continue to be updated on subsequent reports and provide additional analysis on emerging themes. Greater details on these core sections will be included as relevant data becomes available.

<table>
<thead>
<tr>
<th>Last Report</th>
<th>This Report</th>
<th>Subsequent Reports...</th>
</tr>
</thead>
</table>
| **Provide updates on key data points.** | • Update on the COVID-19 Epidemiological Situation.  
• C19RM 2021 Awards  
• Finance Update  
• Updates on Health Products Pipeline  
  • Overview  
  • Diagnostics  
  • Oxygen  
  • Therapeutics  
  • ICP/PPE  
• Reinvesting C19RM Funds  
• Risk Assurance: M&O  
• Case studies on country-implementation | **Future reports will cover topics as relevant data become available.** |
| **Last Report provided updates on key data points, country case studies and pivotal thematic updates - hybrid approach:**  
• Update on the COVID-19 Epidemiological Situation  
• C19RM 2021 Awards  
• Financial Update  
• Key Messages across C19RM Control and Containment  
  • Diagnostics  
  • Oxygen  
  • Therapeutics  
  • Paxlovid/Test and Treat  
  • ICP/PPE  
• Reinvesting C19RM Funds  
• C19RM 2021 OIG Audit  
• Case studies on country-implementation | Based on C19RM Monthly Board Report differentiated approach, a more detailed Quarterly Report will be provided, including analysis on relevant thematic areas and data from USG Report:  
• **Quarterly Reports:** focusing on programmatic data / results, findings and insights from Spot Checks and Pulse Checks, lessons learned, strategic actions taken to address challenges and bottlenecks and key issues and messages from operationalization of C19RM.  
• **Monthly Reports (Key data),** including updates on awards, progress in absorption / funds utilization and procurement pipeline. |
2 Update on COVID-19 Epidemiological Situation
COVID-19 Burden in Regions the Global Fund Supports

High Impact Asia remains the region with the highest confirmed cases followed by Southern Asia. Whereas disruptions have considerably hindered progress in programs for the three diseases, program adaptations have started to show signs of recovery and resilience.

UPDATE ON COVID-19 EPIDEMIOLOGICAL SITUATION

Number of New COVID-19 Cases per Global Fund Region

<table>
<thead>
<tr>
<th>Region</th>
<th>New cases since last Board report</th>
</tr>
</thead>
<tbody>
<tr>
<td>AELAC-SEA</td>
<td>12,957</td>
</tr>
<tr>
<td>AELAC-LAC</td>
<td>194,317</td>
</tr>
<tr>
<td>AELAC-EECA</td>
<td>192,003</td>
</tr>
<tr>
<td>AME-WA</td>
<td>944</td>
</tr>
<tr>
<td>AME-SEA</td>
<td>12,957</td>
</tr>
<tr>
<td>AME-MENA</td>
<td>7,099</td>
</tr>
<tr>
<td>AME-CA</td>
<td>578</td>
</tr>
<tr>
<td>HIAsia</td>
<td>361,057</td>
</tr>
<tr>
<td>HIA-2</td>
<td>171,586</td>
</tr>
<tr>
<td>HIA-1</td>
<td>2,085</td>
</tr>
</tbody>
</table>

According to WHO, as of 1 June 2022, there have been 524,467,084 confirmed cases of COVID-19, including 6,285,171 deaths reported to WHO worldwide. Confirmed cases in the Global Fund portfolio are 150,710,800, while deaths are 2,161,208. High Impact Asia has 72.3 million confirmed cases, an increase of more than new 350,000 cases in one month. New cases have also been recorded in Southeast Asia leading to a total of 32.9 million with an increase of 3% in the last month.

Confirmed cases in Latin America and Caribbean remain at over 17 million while those in *High Impact Africa 2 continue to rise to over 5.7 million while the **MENA region is at over 3 million. Overall new COVID-19 cases progression in the last month keep showing a trend downturn, which might be linked to COVID-19 seasonality. Nine Global Fund implementing countries are also among the top 25 countries in the world with the highest cumulative cases. These include India, Russian Federation, Vietnam, Iran, Colombia, Indonesia, Ukraine, Malaysia, Thailand.

SUMMARY

- According to WHO, as of 1 June 2022, there have been 524,467,084 confirmed cases of COVID-19, including 6,285,171 deaths reported to WHO worldwide. Confirmed cases in the Global Fund portfolio are 150,710,800, while deaths are 2,161,208. High Impact Asia has 72.3 million confirmed cases, an increase of more than new 350,000 cases in one month. New cases have also been recorded in Southeast Asia leading to a total of 32.9 million with an increase of 3% in the last month.
- Confirmed cases in Latin America and Caribbean remain at over 17 million while those in *High Impact Africa 2 continue to rise to over 5.7 million while the **MENA region is at over 3 million. Overall new COVID-19 cases progression in the last month keep showing a trend downturn, which might be linked to COVID-19 seasonality. Nine Global Fund implementing countries are also among the top 25 countries in the world with the highest cumulative cases. These include India, Russian Federation, Vietnam, Iran, Colombia, Indonesia, Ukraine, Malaysia, Thailand.

Data Source: WHO
C19RM 2021: Awards
C19RM 2021 Fast-track Requests Awarded

- The Global Fund has awarded US$735 million to 49 applicants via Fast-track. Applicants to Fast-track have requested an average of 7.3% of their 2020-2022 allocation.
- Notification Letters with confirmation of awards are sent to applicants in an average of 9.1 business days.

C19RM 2021 Full Funding Requests Awarded

- US$2,708 million awarded to 124 applicants, including funding recommended for Board approval, for a portfolio average of 21.1% of 2020-2022 allocation (excluding previously approved Fast-track applications).
- An Unfunded Demand of US$1,064 million in demand pipeline registered from 74 applicants.

C19RM 2021 Awards by Priority Area, WHO Pillar and ACT Accelerator Pillar

- C19RM Board Priority Areas: US$3,443 million has been awarded or recommended for Board approval with the following breakdown: 76% to reinforce national COVID-19 responses, 13% for urgent improvements to health and community systems, and 12% for HIV, TB and malaria mitigation.
- WHO Pillars: C19RM awards are primarily directed towards Pillar 5: National laboratories (26%), Pillar 6: Infection prevention and control (22%) and Pillar 7: Case management (25%). The remaining investments are mostly awarded into Pillar 9: Maintaining essential health services and systems (12%).
- ACT-A Pillars: 84% of the US$3,443 million C19RM awards is directed towards ACT-A Gap Filling Activities.
**C19RM 2021 Status of Awards Submissions and Pipeline**

US$3,443 million (94%) of C19RM 2021 funding is awarded or recommended for Board Approval to 124 applicants (either Fast-track or Full Funding request) for a portfolio average of 26.8% of 2020-2022 allocation.

**Full Funding requests:** US$2,708 million was awarded or recommended for Board approval to 124 applicants.
**Fast-track requests:** US$735 million was awarded to 49 applicants.

Including Unfunded Demand of US$1,064 million (registered from 74 applicants), the total of IC Decisions is up to US$5,052 million. This includes US$544 million of activities not approved.

**Demand pipeline: currently no requests** have been submitted, neither are under review for potential C19RM 2021 funding. US$48 million is projected for submission or resubmission.

### C19RM 2021 Awarded & Requested Amounts

<table>
<thead>
<tr>
<th>Total requested amount</th>
<th>Investment Committee Decisions</th>
<th>Available Funds</th>
<th>Demand in excess of available funds</th>
</tr>
</thead>
<tbody>
<tr>
<td>$5,100</td>
<td>$5,052</td>
<td>$3,673</td>
<td>$883</td>
</tr>
<tr>
<td>$3,443</td>
<td>$544</td>
<td>$1,064</td>
<td>$48</td>
</tr>
<tr>
<td>$1,064</td>
<td>$48</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Activities
- Since the last report, we have made one award (US$14 million). A total of **21 additional funding** requests have been submitted in 2021: all of them have been awarded for a total of **US$210 million** (including **US$63 million** for Diagnostics, **US$59 million** for Oxygen support and **US$40 million** for TB cartridges). **US$48 million** of requests is still **projected** to be submitted.
- Available funds have increased to **US$3,673 million** with a new pledge from the **UK (US$73.5 million)** and additional pledges from Canada (US$26 million) and Germany (US$193 million). The **Fast-track ceiling** has also been increased by the AFC to **US$1,168 million**.

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All values are in US$ million and rounded. For received submissions even incomplete submissions are reported. The full submitted amount is considered.

*Pipeline includes: submissions under review, in screening, projected resubmissions and remaining eligible applicants.*
US$3,443 million (94%) of C19RM 2021 funding is awarded or recommended for Board approval. Demand pipeline is robust in funding requests received/in process showing demand exceeds supply of available funds:

- Country demand is high with most applications requesting an amount equivalent to 30% of 2020-2022 allocation or more.
- Unfunded demand of US$1,064 million is registered from 74 applicants.

For values in screening and under review only complete submissions are considered. Values under Full Funding request awards also include values recommended for board approval.

All values are in US$ million and rounded.
C19RM 2021 Fast-track Drill Down

• **US$735 million is awarded** to 49 applicants via Fast-track (with an average amount equivalent to 7.3% of applicants 2020-2022 allocation). This represents 63%* of the total Fast-track mechanism ceiling.

• In total, **61 Fast-track requests** have been received, including 4 to be resubmitted due to incomplete documentation or withdrawn.

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**Fast-track awards**

- **$735 (63%)**
- **$433 (37%)**
- **$1,068***

**Award by region**

- **High Impact Africa 2**: $273
- **AME**: $119
- **High Impact Africa 1**: $118
- **High Impact Asia**: $200
- **AELAC**: $25

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*The Fast-track ceiling has been increased by AFC on 30 March 2022.

(All values are in US$ million and rounded.)

**OVERVIEW: AWARDS AND SUBMISSIONS**

Recent awards values may be adjusted slightly as Detailed Budgets are finalized.

For values in screening and under review only complete submissions are considered.
C19RM 2021 Award by Priority Area

Award by priority area: Investments are mainly directed towards reinforcing COVID-19 national response.

Out of the Full Funding requests awarded or recommended for Board approval, we continue to see prioritization of reinforcing the COVID-19 national response likely due to the rapid increase in cases across several countries.

C19RM 2021 Awards by Priority Area

- **Total Award**
  - $3,443
  - $735
  - $2,709

- **Mitigate COVID-19 impact on HIV, TB and malaria programs**
  - $735

- **Reinforce COVID-19 national response**
  - $711
  - $1,894

- **Urgent improvement to health and community systems**
  - $2,709
  - $400

- **Fast-track**
  - $75.7%
  - $2,605

- **Full Funding**
  - 11.6%
  - $1,894

- **Urgent improvement to health and community systems**
  - 12.7%
  - $437

- **Program management costs are included in Reinforce. Recent awards values may be adjusted slightly as Detailed Budgets are finalized.**

- **Values above include Fast-track awards and Full Funding requests awarded and/or recommended for Board approval.**

**All values in the charts are in US$ million and rounded.**

(by as of 3 June 2022)
C19RM 2021 Investments in Mitigation

- Out of the US$3,443 million awarded (including recommendations for Board approval), US$400 million (12%) is invested in mitigating the impact of COVID-19 on HIV, TB and malaria programs.
- Investments in mitigating the impact of COVID-19 are primarily covered within the core HIV, TB, malaria grants (2020-2022 allocation); malaria grants (2020-2022 allocation) incorporated a significant amount of PPE needs for mass campaigns and community activities.

C19RM 2021 Awards in Mitigation

All values in the charts are in US$ million and rounded. Recent awards values may be adjusted slightly as Detailed Budgets are finalized. Values above include Fast-track awards and Full Funding requests awarded and/ or recommended for Board approval.
C19RM 2021 Award by Priority Area

Award by priority area: Fast-track investments are mainly directed towards reinforcing COVID-19 national response.

Full Funding investments show a more balanced picture across the three priority areas.

C19RM 2021 Fast-track Awards by Priority Area

<table>
<thead>
<tr>
<th>Priority Area</th>
<th>Award Amount</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reinforce COVID-19 national response</td>
<td>$735</td>
<td>96.8%</td>
</tr>
<tr>
<td>Urgent improvement to health and community systems</td>
<td>$22</td>
<td>2.9%</td>
</tr>
<tr>
<td>Mitigate COVID-19 impact on HIV, TB and malaria programs</td>
<td>$711</td>
<td>0.2%</td>
</tr>
</tbody>
</table>

C19RM 2021 Full Funding Awards by Priority Area

<table>
<thead>
<tr>
<th>Priority Area</th>
<th>Award Amount</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reinforce COVID-19 national response</td>
<td>$2,709</td>
<td>69.9%</td>
</tr>
<tr>
<td>Urgent improvement to health and community systems</td>
<td>$399</td>
<td>14.7%</td>
</tr>
<tr>
<td>Mitigate COVID-19 impact on HIV, TB and malaria programs</td>
<td>$1,894</td>
<td>15.4%</td>
</tr>
</tbody>
</table>

All values in the charts are in US$ million and rounded.

Program management costs are included in Reinforce.

Recent awards values may be adjusted slightly once Detailed Budgets are finalized.

Values above include Fast-track awards and Full Funding requests awarded and/ or recommended for Board approval.

OVERVIEW: AWARDS AND SUBMISSIONS

(as of 3 June 2022)
C19RM 2021 Award by Health Products

Health product investments are more balanced across key Health Products.
Approximately 65% of awards to date are expected to use wambo as the procurement channel.

C19RM 2021 Awards by Type

All values in the charts are in US$ million and rounded. Recent awards values may be adjusted slightly as HPMTs are finalized. Note that these values exclude C19RM 2020 carryover amounts, which are removed, if found in 2021 HPMTs. Values above include Fast-track awards, Full Funding requests awarded and/ or recommended for board approval.

Differences in values between Global Fund defined health products are accounted for by a more limited set of products that are included under these categories.

*Other Health Products include: non-PPE disinfectants, Waste management and genomic sequencing.

**Other non-Health Product investments include: most activities within “Mitigating COVID-19 impact on HIV, TB and malaria” and “Urgent improvements to health and community systems” as well as non-health product awards within “Reinforce COVID-19 national response”.

OVERVIEW: AWARDS AND SUBMISSIONS

(as of 3 June 2022)
C19RM investments are primarily directed towards Pillar 5: National laboratories (26%), Pillar 6: Infection prevention and control (22%) and Pillar 7: Case management (25%).

The remaining investments are mostly invested into Pillar 9: Maintaining essential health services and systems (12%).

All values in the charts are in US$ million and rounded. Recent awards values may be adjusted slightly as Detailed Budgets are finalized.

Values above include Fast-track awards, Full Funding requests awarded and/or recommended for board approval.
OVERVIEW: AWARDS AND SUBMISSIONS

C19RM 2021 Award by ACT-A Pillars

84% of US$3,443 million of C19RM 2021 investments are directed towards ACT-A Gap Filling Activities, given most awards to date are via Fast-track and Full Funding request prioritize reinforcing the COVID-19 response. These investments are split across the Diagnostics Pillar (US$955 million or 28%), the Therapeutics Pillar (US$851 million or 25%), and Health Systems and Response Connector (US$1,099 million or 32%).

The share of complementary activities has increased with Full Funding requests forming the majority of awards.

C19RM 2021 Awards by ACT-A Pillar

All values in the charts are in US$ million and rounded.

Recent awards values may be adjusted slightly as Detailed Budgets are finalized.

Values above include Fast-track awards, Full Funding requests awarded and/or recommended for board approval.
Finance Update
C19RM 2020: Current in-country utilization of 60% for Core and High Impact based on validated expenditures – on track to reach the expected target of 63%-70%

As of 31 May 2022
US$ million

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>C19RM 2020 Total Awards</td>
<td>990</td>
<td></td>
</tr>
<tr>
<td>C19RM 2020 Expenditures</td>
<td>568</td>
<td>(94%)</td>
</tr>
<tr>
<td>Focused</td>
<td>32</td>
<td>(6%)</td>
</tr>
<tr>
<td>Core &amp; High-Impact</td>
<td>536</td>
<td>(94%)</td>
</tr>
</tbody>
</table>

- **C19RM 2020 in-country absorption is 60% for Core and High Impact** (with a denominator of US$895 million) and on target to reach the expected utilization range of 63%-70% with expenditures currently under validation in the grant closures & forthcoming expenditure reports.

- Unused C19RM 2020 funds are transferred to C19RM 2021 with a use by date of 31 December 2023.

- The in-country absorption including for Focused portfolios is 57%.
C19RM 2021: Strong performance on the upstream awards (96%), but downstream is slower than expected (49% disbursed & 26% spent*) & urgent targeted reprogramming & optimization of funds is underway to get back on track

As of 31 May 2022

- 96% of awards (US$ 3,288 million) are integrated into grants.
- 67% of the cumulative budget until 30 June 2022 has been committed, including orders placed in wambo.org, the Global Fund's online procurement platform.
- Total cumulative disbursements of US$1,096 million on 31 May 2022, representing 74% of commitments, and 49% of the cumulative budget until 30 June 2022
- In-Country Absorption based on the March-22 Pulse data remains low at 26% due to lower-than-expected demand
- The secretariat has developed an action plan to prioritize reprogramming and portfolio optimization of US$800M to improve impact and absorption of C19RM and get back on track
- Focus for the next 18-months remains to mitigate the impact of the pandemic on HTM and the overall health system by accelerating targeted investment in key priority areas

*Important Note: Pulse data is only available for High Impact/Core countries representing 92% of total awards. The pulse check compliance rate for Mar-22 is 96%. Consequently, the reported expenditure remains a representative execution rate triggering the action plan on reprogramming and optimization.
Health Products Update
## Health Products Update

Countries are being supported to convert approved funds into products to accelerate delivery and implementation in the evolving context of the pandemic.

<table>
<thead>
<tr>
<th>Country Demand</th>
<th>Supply/Logistics</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Overall</strong></td>
<td></td>
</tr>
<tr>
<td>• Very low incremental demand in converting awards into PO (48% of PPM in PO or process of approval).</td>
<td>• Limited manufacturing supply constraints.</td>
</tr>
<tr>
<td>• Slower progress (and less visibility) on non-PPM awards; some volumes being rechanneled to PPM (e.g., PSA).</td>
<td>• Logistics challenges including scarce sea/air freight capacity and impact of changing COVID-19 controls measures, particularly in China impacting malaria, PPE) – but also intermittent and recurring port congestion in some countries that may results in vessels being diverted to neighboring countries or waiting for substantive time to be offloaded.</td>
</tr>
<tr>
<td>• Opportunities for reprogramming for shifts in demand reflecting the perceptions of status of COVID-19 pandemic.</td>
<td></td>
</tr>
<tr>
<td><strong>Diagnostics</strong></td>
<td></td>
</tr>
<tr>
<td>• Demand weak (and weakening) in some countries.</td>
<td>• After some months, some recent country demand uptake of the much lower priced Antigen RDTs approved by Stringent Regulatory Authorities:</td>
</tr>
<tr>
<td>• Increasing focus on ‘bi-directional’ testing approaches.</td>
<td>o Lowest prices per test (average between US$1-2).</td>
</tr>
<tr>
<td>• Supporting development of ‘test &amp; treat’ approaches in anticipation of oral antivirals.</td>
<td>o Self-tests available at US$1-5 per test with lead time of 1 to 4 weeks.</td>
</tr>
<tr>
<td>• Coordinated TA support through Project Stellar/ACT-A-Diagnostics.</td>
<td>o Shelf-life extensions to 24 months.</td>
</tr>
<tr>
<td><strong>Infection Prevention and Control</strong></td>
<td></td>
</tr>
<tr>
<td>• Demand weakening as COVID-19 control measures relaxed.</td>
<td>• High product availability despite manufacturing capacity reductions.</td>
</tr>
<tr>
<td><strong>Case Management/Therapeutics</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Oxygen</strong>:</td>
<td><strong>Oxygen</strong></td>
</tr>
<tr>
<td>• Technical complex specifications of PSA plants results in lengthy award to orders to delivery.</td>
<td>• Manufacturing timelines, infrastructure requirements and global freight challenges drive long lead-times for PPM/wambo PSA plant orders.</td>
</tr>
<tr>
<td>• Project BOXER providing technical assistance to 34 countries (increasing from 30 countries in April), supported by and aligned with ACT-A &amp; O2 Working Group.</td>
<td></td>
</tr>
<tr>
<td><strong>Therapeutics</strong>:</td>
<td><strong>Therapeutics</strong></td>
</tr>
<tr>
<td>• WHO allocation proposal ongoing for COVID-19 Therapeutics.</td>
<td>• Letter of intent signed with Pfizer for nirmatrelvir-ritonavir. Final contract negotiations nearing finalization.</td>
</tr>
<tr>
<td>• 43 countries have opted in for nirmatrelvir-ritonavir, allocation proposal was sent to countries on June 15. Countries are expected to provide feedback by July 6.</td>
<td>• Molnupiravir visible on Wambo/PPM, other WHO approved COVID-19 Therapeutics to be listed when available.</td>
</tr>
<tr>
<td>• Molnupiravir allocation completed, 23 countries have opted in with one (Namibia) planning with Global Fund funding.</td>
<td>• WHO’s Paxlovid allocation proposal was shared with countries who opted in on 16 June 2022.</td>
</tr>
</tbody>
</table>
Orders for US$760 million* (April US$741 million) of COVID-19-related health products have been placed through the PPM/wambo.org since 2020, with US$520 million delivered (April US$453 million)

- US$2.8 billion has been awarded since 2020 for the procurement of COVID-19 health products, including through C19RM 2021. Dx: US$801 million (April US$782 million); PPE: US$491 million (no change since April); O2: US$568 million (April US$543 million).
- US$259 million products delivered through PPM with C19RM 2020 funds.
- US$261 million (April US$194 million) products delivered through PPM with C19RM 2021 funds; US$240 million (April US$288 million) products are being delivered.

* Reporting on aggregate value of orders and split by category is being refined over time to reflect any savings achieved on completed orders and to exclude procurement of non-health products.

** Based on Procurement Service Agent data as of 30 May 2022.

*** Production includes process through to importation clearance and pick-up for transfer to flight/vessel.

**** Dollar value of deliveries by month may change slightly over time due to potential reporting lags as well as revisions over time.

CUMULATIVE HEALTH PRODUCTS UPDATE | PPM

Cumulative PPM Procurement Pipeline**

Cumulative PPM Deliveries by Month****
Non-PPM Procurement¹ Reported at May 2022

For Top 45 Countries (only)

<table>
<thead>
<tr>
<th>Region</th>
<th>Total Non- PPM Budget</th>
<th>Total Reported PO Amount</th>
<th>Conversion</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIA1</td>
<td>92</td>
<td>14</td>
<td>15%</td>
</tr>
<tr>
<td>HIA2</td>
<td>192</td>
<td>25</td>
<td>13%</td>
</tr>
<tr>
<td>HIA</td>
<td>249</td>
<td>17</td>
<td>7%</td>
</tr>
<tr>
<td>AME</td>
<td>163</td>
<td>29</td>
<td>18%</td>
</tr>
<tr>
<td>AELAC</td>
<td>28</td>
<td>7</td>
<td>25%</td>
</tr>
<tr>
<td>Total</td>
<td>724</td>
<td>92</td>
<td>13%</td>
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<tr>
<th>Product Category</th>
<th>Total Non- PPM Budget</th>
<th>Total Reported PO Amount</th>
<th>Conversion</th>
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<tr>
<td>Diagnostics</td>
<td>63</td>
<td>22</td>
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<tr>
<td>PPE</td>
<td>115</td>
<td>19</td>
<td>17%</td>
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<td>Oxygen</td>
<td>347</td>
<td>35</td>
<td>10%</td>
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<td>Covid Tx³</td>
<td>68</td>
<td>7</td>
<td>10%</td>
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<tr>
<td>Other</td>
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<tr>
<td>Total</td>
<td>724</td>
<td>92</td>
<td>13%</td>
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Summary Points

- Conversion of Non-PPM budget to purchase orders is at 13% of three-year total with significant procurements in the pipeline such as US$37 million in Pakistan for PSA plants and Nigeria for about US$21 million for PPE and oxygen. AELACs conversion is driven by Ukraine’s reporting waiver as their budget accounts for 72% for the region.

- The total of Purchase Orders reported in May for US$92 million is an increase of US$16 million from the last reporting in April.

- From the previous Board report, Diagnostics remained stable with US$63 million, PPE increased slightly to US$115 million, and Oxygen expanded to US$347 million. COVID-19 Therapeutics saw the largest increase to US$68 million from US$58 million in April.

- Oxygen represents 48% total non-PPM budget; with PSA plants alone accounting for 37% of this total budget.

- Secretariat efforts continue to re-channel funds where procurement has not progressed, either from Wambo/PPM or non-PPM channels (i.e., US$8 million X-ray equipment for Ukraine) or non-PPM to Wambo/PPM (particularly as it relates to PSA plants; e.g., US$1 million for Cambodia; US$1 million for Liberia).

¹ Non-PPM reporting excludes any investments or subsequent purchase orders related to ‘non-reportable items’; this includes disinfectants, scrubs, and repurposed/existing medicines; accounts for an additional US$99 million of current budgets
² Budgets as per aggregated C19RM 2021 HPMTs available and uploaded into the aggregate too at 6 May 2022; reported PO Amount as per PR Procurement Progress Reporting templates submitted against 10 May deadline for procurement through end of April 2022
³ COVID-19 Tx includes any procurement related to novel COVID-19 medicines as well as other supportive hospital equipment (e.g., x-ray, patient monitor, blood gas analyzer, etc.)
Workplan completed and implementation in progress

With initial submission of Deep Dives analysis

Planned stakeholders' engagement

1. Improve national diagnostic governance.
2. Scale up and increase testing and surveillance coverage.
3. Strengthen data management and galvanize longer-term strengthening of laboratory systems.

Countries

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<th>23</th>
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<td>With completed stakeholders' engagement</td>
<td>With initial submission of Deep Dives analysis</td>
<td>Workplan completed and implementation in progress</td>
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Sierra Leone not moving ahead

The Global Fund supports technical capacity-building through the Centrally Managed Limited Investment (CMLI) Project STELLAR
## Work Areas

### Policy & Governance
- Shift COVID-19 to routine standard of care
- Introduce COVID-19 multi-disease algorithm (e.g., TB, malaria, viral pneumonia)
- Lab System guidance updates

### Access to Testing
- Decentralize testing to all regions & facilities
- Task shift to nurses & community pharmacists
- Self-testing introduction and expansion

### Surveillance
- Integrate COVID-19 surveillance into flu surveillance systems
- Scale-up genomic sequencing capacity

### Data Management
- Address reporting challenges for data systems
- Expand data systems to all sites
- Link siloed COVID-19 data systems

### Procurement & Supply Chain
- Update logistics systems and expand to sites
- Integrate PSM across disease areas
- Establish improved forecasting model

### Systems Strengthening Beyond COVID-19
- Integration of sample referral networks
- Integrate data systems across disease areas

### TA Support Alignment with MoH Priorities

<table>
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<tr>
<th>Current MOH Priorities</th>
<th>Identified Areas of TA Support Requested by MoH</th>
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<tbody>
<tr>
<td>Shift COVID-19 to routine standard of care</td>
<td>Draft guidelines and algorithm for deployment</td>
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<tr>
<td>Introduce COVID-19 multi-disease algorithm (e.g., TB, malaria, viral pneumonia)</td>
<td>Supporting MoH to define most impactful settings for test deployment and subsequent strategy development</td>
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<tr>
<td>Lab System guidance updates</td>
<td>Establish improved coordination mechanisms</td>
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<tr>
<td>Decentralize testing to all regions &amp; facilities</td>
<td>Deployment planning, support &amp; coordination of antigen testing trainings/scale up</td>
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<tr>
<td>Task shift to nurses &amp; community pharmacists</td>
<td>Develop SOPs and training materials for deployment</td>
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<tr>
<td>Self-testing introduction and expansion</td>
<td>Develop Integrated Disease Surveillance and Response action plan and/or genomic surveillance program plan</td>
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<tr>
<td>Integrate COVID-19 surveillance into flu surveillance systems</td>
<td>Coordinate national and step-down trainings for surveillance activities</td>
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<tr>
<td>Scale-up genomic sequencing capacity</td>
<td>Support at national level to ensure timely data reporting and utilization</td>
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<tr>
<td>Address reporting challenges for data systems</td>
<td>TA on gap identification for data system integration</td>
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<tr>
<td>Expand data systems to all sites</td>
<td>Coordinate refresher trainings and site improvements</td>
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<tr>
<td>Link siloed COVID-19 data systems</td>
<td>Quantification &amp; Forecasting exercises</td>
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<tr>
<td>Update logistics systems and expand to sites</td>
<td>Update PSM tools for cross-disease stock monitoring</td>
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<tr>
<td>Integrate PSM across disease areas</td>
<td>Develop integrated sample referral network guidelines</td>
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<tr>
<td>Establish improved forecasting model</td>
<td>Coordinate HCW training on new case management and/or data integration guidelines</td>
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<tr>
<td>Integration of sample referral networks</td>
<td></td>
</tr>
<tr>
<td>Integrate data systems across disease areas</td>
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</tbody>
</table>

7 countries prioritizing support for bi-directional testing: DRC, Gambia, Ghana, Lesotho, Malawi, Mali, Zambia

**Diagnostics – Project STELLAR**

**TA Support for effective and timely utilization of existing and/or reinvested C19RM funds for key implementation activities**
Oxygen Update

Current awards include:
- Awards for oxygen and clinical health products amount to US$752 million representing 22% of the C19RM 2021 total funds awarded.
- US$568 million (up from US$561 million in April) requested for O2 products and US$187 million (up from US$183 million in April) for other therapeutics.

PSA* Oxygen Plants
Data shows steady progress

May 2022
- Technical assistance for medical oxygen, provided through Project BOXER, addresses the need for technical capacity-building and support in the operation of PSA plants. Technical Assistance is provided to 34 countries (an additional 4 countries compared to April 2022), supported by and aligned with ACT-A & O2 Working Group.
- The project supported LMIC address technical challenges of building medical oxygen capabilities.
- Oxygen is a lifesaving intervention for COVID-19 but also maternal health. Ensuring greater access to medical oxygen is a big step forward to strengthen acute clinical care and reinforce countries preparedness for future pandemics.

Substantial country demand for O2
Over US$560 million requested for O2 products, including O2 production, storage and distribution, and patient delivery. One of the highest C19RM investment categories.

* Pressure Swing Adsorption plants
IPC/PPE Update - Summary

C19RM launched in April 2020 with strong focus on PPE. C19RM upgraded and heightened emphasis on IPC/PPE investments via Fast-track.

- Global PPE production capacity faced unprecedented challenges with increased global demand especially in both HIC and LMIC. Global supply chains also have significant challenges from COVID-19 restrictions, high fuel costs, restricted market conditions (container availabilities for large volume commodities, vessel schedules etc.) and the incremental impact from global events.
- Preliminary discussions with Country Teams and PRs indicate that the availability of PPE at country level is satisfactory due to the following factors: (1) support from C19RM in 2020 and 2021, (2) decrease in price, (3) evolution of needs in the context of epidemic transition towards lower demand compared to what was anticipated.

Price
- Further 13% price reductions in Q1 2022 with overall product price reductions of 60% since beginning of peak demand in early 2020.

C19RM Awards for IPC/PPE
- IPC/PPE represents around 18% of total awarded C19RM 2021 funds.
- Out of the US$2.8 billion awarded for the procurement of COVID-19 health products, IPC/PPE and disinfectants account for: US$573 million.
- US$35 million is dedicated to IPC program strengthening (building HR capacity, developing facility-level IPC infrastructure and coordination and national/sub-national level).

Procurement
- Significant variability across countries. Changes in COVID-19 waves, with increasing vaccination rates, as well as decreased restrictions, have slowed needs and demand for PPE.
- High product availability despite manufacturing capacity reductions due to decreasing global demand through 2021 (including in high-income countries).
- M&O data shows improvement in rate of PPE order initiation via PPM, with 57% approved funds (with 41% approved in April) reported as converted into orders*.
- A thematic deep dive in June to assess IPC/PPE needs given epidemic transition and expected savings, with the aim to plan adjustments and reprogramming to maximize impact and use of C19RM funds.

* price reductions of 60% 2022 vs. 2020 impact on this meaning the same quantities can be procured with less funds or more can be procured with the same funds.
Investments in IPC/PPE represent 17.7% of the total of C19RM 2021, out of which 94.2% is budgeted for health products.

Total IPC / PPE budget for C19RM 2021 ($M)

- IPC/PPE Total: 610
- PPE: 491
- IPC Supplies and consumables: 84
- Non-HP IPC: 35

Supplies/consumables

Supplies and consumables are procured locally. PRs are not required to report on order placement and deliveries for supplies and consumables. Consequently, there is no order placement data for 12.6% of IPC/PPE investments.

IPC program strengthening

Only 5.8% of investment in IPC/PPE is outside of health products, in IPC program strengthening.

Source: C19RM 2021 Awarded Detailed Budget Data
US$184 million (out of US$380 million of quarter-to-date budget) in PPE orders have been reported as placed with lower budget conversion for non-PPM compared to PPM.

**Budget conversion**

PPM budget conversion against the Quarter-to-date (QTD) budget is 57% compared with 25% for non-PPM, based on reported data.

Challenges with the quality and timeliness of non-PPM reporting make data for this channel less reliable.

The remaining Quarter-to-date budget is US$196 million.

The remaining 3-year budget is US$286 million.

**PSM costs**

PSM costs represent a much larger percentage of the orders placed (38%) than initially budgeted (16%).

*The quarter-to-date (QTD) budget refers to the US$ amount budgeted for health products to be ordered by the end of that quarter. As a cumulative metric it sums up all previous quarters, including the current quarter. This representation is used for analysis purposes as the health products budget is for a three-year implementation period from January 2021 to December 2023.*

*Data source: HPMT for budget, Wambo for PPM orders, non-PPM reporting for non-PPM, and PSA for deliveries (cut-off date 25 April 2022). Pulse Checks Q1 2022*
6 Reinvesting C19RM Funds
Reinvesting C19RM Funds

Information Sessions
- Secretariat information sessions: ongoing support to Country Teams
- External information sessions with key in-country stakeholders (LFAs, PRs, CCMs) will take place in June/July.
- Secretariat support to in-country C19RM reinvesting workshops: Nigeria successfully conducted in-country workshop with key stakeholders (outcomes outlined on next slide). C19RM Secretariat will support CTs to hold other workshops.

Strategic Prioritization and Deployment of Funds
- Strategic prioritization to maximize impact and use of funds: C19RM is currently focused on a dynamic approach to implementation. Allows countries opportunities and flexibilities for strategic prioritization in the context of evolving pandemic and changing demand for COVID-19 health products.
- Secretariat to update guidance on key priorities for C19RM reinvestment in line with evolving epidemiological context, including reinforcing system capabilities and strengthening preparedness for future pandemics – e.g., Oxygen investments; multi-pathogen Lab strengthening; Surveillance; Supply Chain; Waste Management; TB/COVID-19 bidirectional testing and Medical equipment; Test and Treat with oral antivirals; CHWs; HIV, TB and malaria mitigation and recovery; etc..

Guidelines and Documents
- C19RM Guidelines have been updated and published on the Global Fund website.
- An Operational Update sharing programmatic and process information to optimize C19RM investments has been sent to CCMs, PRs and LFAs on 20 May.
- In addition, the C19RM Technical Information Note has been updated and shared with CCMs, PRs and LFAs to include strategic priorities for implementing countries to consider when making reinvestment decisions.

Additional Key Updates
- Supply Operations has provided:
  • Updated reference prices with notable reductions in reference prices for key COVID-19 commodities since C19RM Investment Committee approvals (especially PPE and Ag-RDTs)
  • Visibility on procurement conversation rates for PPM and with Grant Management Division on non-PPM
- Finance is finalizing forecasting exercise to support countries and Country Teams identify funds which will remain unutilized. Finance is providing internal updates on C19RM budget conversion and grant absorption to inform the potential scope for reinvestment and future C19RM Portfolio Optimization.
The Country Team held an in-country workshop on C19RM Reprogramming with key stakeholders on 11 May, in Abuja. The workshop focused on reviewing status of implementation, bottlenecks and areas for refocusing funds. The CCM, PR and in-country stakeholders are working on reprogramming options/areas.

Nigeria has the largest C19RM award (over US$260 million).

Potential Areas for Reinvestment of C19RM Savings

- **Community and Decentralized Integrated Testing**: Scale-up testing rates for COVID-19, increase Ag-RDT coverage in areas without testing, leverage community mobilizers to drive testing demand in hotspots for COVID-19 testing, leverage HIV, TB and malaria interventions.

- **HIV, TB and Malaria Adaptations**: Identify gaps in critical program adaptations, including covering additional service and management costs related to pandemic disruptions.

- **Disease Surveillance and Lab System Strengthening**: address funding gaps on roll out of LIMS, strengthening National Sample Referral Network and effective deployment of lab, O2 therapy and supportive hospital equipment.

- **Supply Chain Strengthening**: updating the national strategic approaches to sustainable health waste management; accelerate integration of COVID-19 commodities onto NHLMIS; warehouse improvements and upgrades.

- **HRH Surge Capacity**: Enabling acceleration of implementation through investment in HR capacity at national and local levels.

- **Additional Freight Costs**: Review the latest additional freight costs considering impact of COVID-19 on global supply chain.
7 Risk Assurance – M&O
The M&O framework has been operationalized.

The Secretariat continues to focus on the use of data analytics and its continuous improvement, leveraging feedback and lessons learned to strengthen data collection tools and analytical output.

RISK ASSURANCE, MONITORING AND OVERSIGHT

Pulse Checks

Q1-2022 reporting period closed on 6 May for a cohort of 45 HI/Core portfolios. 91% of reports submitted on time and 99.5% have been received ready to be analyzed.

Supply Chain & Health Services Spot Checks

Round 2 Spot Checks started on 9 May. Data collection is underway in 36 countries out of a revised cohort of 41 countries for this round.

Strengthened Processes for Monitoring & Oversight

Second cross-cutting review held in June with a focus on using data from recently established mechanisms to identify issues and support problem solving.

Assurance Activity

Minimum mandatory assurance activities continue to be implemented in line with C19RM guidelines.
Round 2 Supply Chain & Health Services Spot Checks data collection has started in majority of countries.

**Round 2 Progress Update**

Ministries of Health in **36 out of 41 countries granted authorization** to collect data. Approval is expected imminently for the **remaining 5 countries**.

Data collection has started in **36 countries** from **16th May 2022** and is progressing well.

Analytical reports are being developed to bring together multiple data sources, to strengthen level of analysis for third M&O review cycle.

**Project Methodology**

1. **Preparatory activities**
   - Desk Review
   - Sampling
   - Questionnaire development
   - Data submission.

2. **Country Introduction**

3. **Country authorizations**
   - MoH approvals

4. **Data Collection**
   - Data collection from selected Health and Storage facilities
   - 12 - 16 weeks

5. **Data Cleaning & Dissemination of Final Results**
   - Data QC, KPIs analysis, and key findings shared with In-country stakeholders and Global Fund Secretariat

*Learnings from Round 1 Supply Chain and Health Services Spot Check are shared in the February 2022 Monthly C19RM Report to the Board.*
Second Cross-cutting Review Held to Identify Emerging Issues and Support Course Correction

The second C19RM M&O review cycle has been running from late April, culminating in country Deep Dives in June 2022. The review process is used to drill down on implementation progress and challenges in a subset of prioritized countries and to agree on follow-up actions.

Prioritized countries:
1. Bangladesh
2. Cote d'Ivoire
3. Guinea
4. Indonesia
5. Malawi
6. Mozambique
7. Nigeria
8. Uganda

Summary of issues discussed:
- Progress in order placements and deliveries.
- Changes in demand for products within countries.
- Complexities with procurement and implementation of PSA plants.
- Progress in HIV, TB and malaria mitigation and impact on programmatic results.
- Opportunities for reinvestment.

*Country Report / Deep Dive for Malawi is included in this report.
Minimum mandatory assurances for C19RM continue to be implemented.

Minimum mandatory assurances apply to the 45 countries with the largest C19RM 2021 awards, which in combination account for ~90% of the C19RM 2021 investment portfolio.

The table provides a status update on minimum mandatory assurances as of April 2022.

To date, the focus has been in execution of assurance activities relating to procurement, supply chain and oxygen, shifting to programmatic assurance activity.

Mapping as per NL

- **HF and SC spot checks**
- **LFA oxygen review**
- **LFA procurement review**
- **LFA waste mgt review**
- **LFA finance spot checks**
- **LFA programmatic spot checks**
- **LFA SC spot checks**

**Status**

- **Done for Q3 2021**
- **Implemented**
- **Partially cleared/Ongoing**
- **No update provided**

### Countries Assurances

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</table>

**Total**: 45

**2021 Awards**: 39

**2021 Investment Portfolio**: 33

**2021 Period**: 17
TB Disruption, Mitigation / Adaptation, and Recovery from COVID-19

(Presented at the GAC/CTAG Monthly Review Meeting on 2 June 2022)
53% of 2020-2022 allocation in High Impact Asia was allocated to tuberculosis, compared to 18% for the Global Fund portfolio overall.

Countries in High Impact Asia also account for 55% of tuberculosis cases worldwide.

### 2020-2022 Allocation by disease

- **HIV**
  - Total portfolio: $6,355M (50%)
  - High Impact Asia: $632M (33%)
- **Tuberculosis**
  - Total portfolio: $2,243M (18%)
  - High Impact Asia: $1,024M (53%)
- **Malaria**
  - Total portfolio: $4,061M (32%)
  - High Impact Asia: $278M (14%)

### Estimated number of TB cases (all forms) worldwide

- **2020**
  - $3.3M (33%)
- **2019**
  - $10.3M (54%)
- **2018**
  - $10.0M (32%)
- **2017**
  - $10.1M (18%)
- **2016**
  - $10.2M (14%)
- **2015**
  - $10.3M (33%)
- **2014**
  - $10.6M (54%)
- **2013**
  - $10.7M (34%)
- **2012**
  - $10.8M (55%)
- **2011**
  - $10.9M (34%)
- **2010**
  - $10.9M (50%)

**Countries outside GF portfolio**

**Other countries in GF portfolio**

**High Impact Asia countries**
Tuberculosis treatment outcomes are normally published within one year after case notification. However, the number of cases notified provides a suitable proxy for number of cases treated.

A drop of 25% was seen in number of cases notified in 2020 compared to 2019. However, significant recovery has already been seen in 2021 provisional results.

Number of tuberculosis cases (all forms) notified and treated in High Impact Asia countries

Source: WHO, DASH team analysis
**TB Case Notification**

Based on unofficial results up to Q4 2021*, full catch-up to 2019 levels could happen in 2021 for India and Bangladesh, and in 2022 for the rest of the HI Asia portfolio.

* Source: HI Asia Regional Team data, DASH team analysis
Country Case Study: Bangladesh

Presented at the GAC/CTAG Monthly Review Meeting

2 June 2022
Bangladesh - C19RM Awards Overview

Bangladesh has been awarded a Fast-track (US$10.7 million), a Full Funding Request (US$35.5 million) and a Supplementary Request (US$4.4 million) in 2021 and more recently an Additional Fast-track (US$7.9 million).

COUNTRY PROFILE: Bangladesh

*Other Health Products include: non-PPE disinfectants, waste management and genomic sequencing.

**Other non-Health Product investments include: most activities within 'mitigation' and 'urgent' as well as non-health product awards within 'reinforce'.
Bangladesh faced a severe COVID-19 situation:

- 168 million population and eight most populous country in the world.
- Cumulative burden: 1.95 million COVID-19 cases and 29,127 deaths (May 2022).
- Bangladesh has been heavily impacted by the pandemic in 2021 in comparison to 2020. Peak 7-day average death toll in August 2021 (248 deaths, 14,242 new cases per day).

TB program was on-track prior to COVID-19:

- 6% annual increase in TB case notifications (160,875 – 2009; 291,595 - 2019).
- Increase in treatment coverage from 44% (2009) to 75% (2019).
- Treatment success rate consistently high and above global averages: DS-TB 94%; DR-TB 78% (2016 cohort).

Significant COVID-19 impact on TB results:

- 61% decline in TB notifications in Q2 2020, compared to corresponding quarter of 2019; 21% decline in annual DS-TB notification and 22% on DR-TB notification.
- 2-month “general holiday” with movement restrictions: limited field work, community outreach activities, limits on ability to visit health facilities for routine care.
- Shared TB/COVID-19 stigma and discrimination within health facility, family and community: discouraged TB presumptive and patients to seek diagnosis.
- Initial service disruptions due to re-deployment of medical staff and COVID-19 infection of medical workers.
- Increase in workload at health facilities and laboratories: increase in laboratory tests, sample transportation, community mobilization and contact tracing, coordination between COVID-19 and TB.
**Bangladesh: TB Mitigation / Adaptation**

**National Strategy**

COVID-19 mitigation strategy balanced economic interests and public health measures.
- Information campaigns, community-based awareness raising, mandatory mask wearing, digitalized contact tracing.
- Integrated testing capacity and consistent availability of tests.
- Facility preparedness (hospital and ICU bed availability) for treatment.
- Mass vaccine campaign and rapid vaccination of 70% target population.

**Disease Program Strategy**

C19RM funded interventions formed integral part of the overall country strategy
- Diagnostic network expansion (lab equipment), including bi-directional testing in 71 labs.
- Community and private sector engagement for both COVID-19 and TB screening, referrals, and testing.
- Increased outreach + awareness raising
- Treatment and support: Oxygen equipment, Nutritional support, Social support.

**Effective mobilization of resources for implementation of COVID-19 strategy.**
- 81% of total COVID-19 Response Strategy covered, through domestic funding, loans and grants.
- Total Global Fund C19-funding: US$76.5 million (4% of need) - 2021 award is 35% of HIV, TB and malaria allocation.
- 100% of available COVID-19 funding requested + substantial UQD.

**Funded interventions complemented with strategic enablers**
- Program adjustments: Interim guidance to ensure continuity of essential services.
- Situational analysis and targeted approach.
- Clear government leadership.
  - Political advocacy to prioritize TB.
  - Integrated COVID-19 and TB approach.
  - Staff motivation.
- Front-line workers’ capacity and confidence building (incl PPE).
- Effective collaboration with partners.

**2021-2023 C19RM funding by interventions**

- COVID Diagnostics and testing
- Case management, clinical operations and therapeutics
- Mitigation for TB programs
- Laboratory systems
- COVID-19 CSS: Social mobilization

$65.4 m
Opportunities created by COVID-19

- Implementation of village-wise micro plan for active case finding.
- Strengthening the sputum transportation system
- Continuing to undertake data analysis to facilitate data-driven decision-making (sub-national analysis as part of TB surveillance).

Missed opportunities due to COVID-19

- Optimization of GeneXpert diagnostic network (now ongoing)
- Establishment of a virtual platform for trainings and to ensure effective coordination at all levels.