

Notes

8 September 2022

HIV

All data is based on estimates from the [UNAIDS 2022](#) release, apart from Global Fund disbursements, which are available on the [Global Fund Data Explorer](#). The denominator for the three 95s is people living with HIV.

The aggregate numbers presented as “Global Fund-supported” are limited to countries that received an allocation for either the 2017-2019 or the 2020-2022 cycle, excluding countries only receiving funds through the nongovernmental organization (NGO) rule. Global Fund-supported countries received US\$26.6 billion from 2002 to end-June 2022 to support HIV and AIDS and a portion of HIV/TB programs.

Having received more than US\$1 billion in HIV and AIDS funding from the Global Fund, Mozambique ranks 9th in terms of share of Global Fund investments in HIV; however, the data for disease burden estimate and service coverage were not available from UNAIDS at the time of publication. Not all service coverage data for India was available at the time of publication.

TB

All data is based on estimates from the [WHO Global Tuberculosis Report 2021](#), apart from Global Fund disbursements, which are available on the [Global Fund Data Explorer](#).

The aggregate numbers presented as “Global Fund-supported” are limited to countries that received an allocation for either the 2017-2019 or the 2020-2022 cycle. These countries received US\$8.9 billion from 2002 to June 2022 to support TB programs and a portion of joint HIV/TB programs.

Additionally, they received US\$1.3 billion to support cross-cutting support across three diseases, resulting in a total of US\$10.2 billion. Countries/programs that did not receive an allocation over the 2017-2019 or 2020-2022 cycle received US\$793 million since 2002, resulting in a total disease-specific investment of US\$9.7 billion.

For India, which is a driving country for portfolio level results, due to the improved method for monitoring treatment outcomes, the treatment success rate results from 2014 onwards cannot be compared with the historical results. Additionally, TB patients reported from the private sector to

the national program were excluded since the monitoring system for assessing their outcome was not fully in place.

Malaria

Data is based on estimates from the [WHO World Malaria Report 2021](#) and the [World Malaria Atlas Project](#) data for mosquito net access and use in countries for which estimates are available, and Global Fund disbursements, which are available on the [Global Fund Data Explorer](#).

The aggregate numbers presented as “Global Fund-supported” are limited to countries that received an allocation for either the 2017-2019 cycle or the 2020-2022 cycle. These countries received US\$15.4 billion from 2002 to June 2022 to support malaria programs. Additionally, they received US\$1.3 billion to support cross-cutting support across the three diseases, resulting in a total of US\$16.7 billion. Countries/programs that did not receive an allocation over the 2017-2019 or the 2020-2022 cycle received US\$958 million since 2002, resulting in a total disease-specific investment of US\$16.4 billion.

General note

In line with the Global Fund results reporting methodology, the charts reflect the achievements of national health programs, representing the outcomes, efforts and investments of all partners, domestic and international. For High Impact countries, Country Results Profiles provide further detail, including investment from all funding sources: <https://data.theglobalfund.org/documents>. See a description of the Global Fund results methodology [here](#).