

**OBJECTIVE 3:**

**Increase political support for HIV, TB and malaria, while contributing to climate change, pandemic preparedness and response, and other factors that impact the Global Fund's work, within the evolving global health and development landscape**

**1. Outcomes**

- 1** HIV, TB and malaria responses continue to be prioritized in political commitments on global health and development, including in evolving conversations on health and climate change.

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- 2** The links between HIV, TB and malaria and pandemic preparedness and response, as well as climate change, are consistently recognized and acted upon.

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**2. Rationale**

The shifting geopolitical landscape and the confluence of crises that the world is currently facing are resulting in reevaluations of the global health and development architecture and a sharpened focus on addressing climate change.

**(a) The evolving global health landscape**

Three years after the start of the COVID-19 pandemic, the global health landscape has changed considerably. Countries mobilized quickly to respond to the pandemic, creating COVAX, the vaccines pillar of the Access to COVID-19 Tools (ACT) Accelerator, and using mechanisms such as the Global Fund to drive resources where they were most needed. Since then, a new Pandemic Fund was developed, with broad support from members of the G20 and beyond, housed at the World Bank and designed to support developing countries to strengthen their capacity to prevent and respond to future pandemics. At the same time, the 194 member states of the World Health Organization have been engaged in discussions about a new international accord on pandemic prevention, preparedness and response, with the goal of presenting a draft text of the accord for consideration to the World Health Assembly in 2024.

Other key political conversations will take place over the coming years that are of direct relevance to the Global Fund and our civil society partners. The G7 and G20 continue to be important platforms to solidify long-term investments in health and development. The United Nations General Assembly also continues to play a key role in championing global health issues. These forums provide an opportunity for us to amplify our work, our impact, and the benefits of our partnership model in driving sustained impact.

**(b) Rethinking development assistance**

The shifting economic and development landscape has also prompted calls for the need to rethink approaches to development assistance. Many actors, particularly government leaders and civil society from the Global South, have begun calling for reforms to development assistance and the

global finance and aid architecture to address imbalances of power and access that disadvantage developing countries and increase their dependence. Over the next two years, several key international meetings will take place that have the potential to take some of these conversations further and lead to some meaningful changes in the overall aid architecture, including the 2024 Summit of the Future and the 2025 International Conference on Financing for Development. Working in partnership with civil society and communities will be important to ensure that the responses to HIV, TB and malaria, as well as the Global Fund, continue to be a global priority.

### **(c) Climate change and health**

Climate change is already having an impact on health by increasing death, ill-health, and violence due to climate-related natural disasters and extreme weather. It is increasing food insecurity, hunger, malnutrition, and zoonotic, water- and vector-borne diseases. Climate change is having adverse impacts on mental health and undermining social determinants of health, including access to clean water and sanitation, livelihoods and social support structures. Despite the evidence, the impact of climate change on health has not been high on the agenda of the member states that are party to the UN Framework Convention on Climate Change or the Paris Agreement, nor does it feature prominently within the agreements themselves. However, there are several opportunities in the years ahead to deepen those linkages and advocate for joint action. Many of the traditional civil society partners that the Global Fund works with are not actively engaged in political processes linked to climate change, pointing to the urgent need to build bridges across communities and disciplines.

### **(d) Conflict and challenging operating environments**

Despite having less than 14% of the world's population, challenging operating environments account for approximately one-third of the global HIV, TB and malaria burden. Conflict and instability within and between countries amplifies the risks faced by key and vulnerable populations and makes community and civil society advocacy even more difficult. Ensuring that the voices of communities help shape approaches to conflict and other emergencies at the country level will be key, as is ensuring deeper collaboration with community-led and civil society organizations that advocate on peace and development in key global and regional political forums.

## **3. Key Actions**

Key actions include:

- Monitoring global conversations about the future of development assistance led by the Organisation for Economic Cooperation and Development (OECD) and other key actors and identifying opportunities to engage in them.
- Positioning the response to the three diseases, and the Global Fund, as critical within pandemic preparedness and response, and advocate for enhanced engagement of civil society and communities in human rights-based, gender-transformative and equity-oriented approaches to pandemic preparedness and response, in line with the Global Fund Strategy.
- Supporting community-led and civil society organizations to develop coordinated approaches to, and capacity for, advocacy on pandemic preparedness and response and other key issues.