

**Results
Report
2024**

Colliding Crises

This chapter is part of the Results Report 2024.

2023 was another year of significant progress in the fight against HIV, tuberculosis (TB) and malaria. In countries where the Global Fund invests, there has been a full recovery from the disruptive impact of the COVID-19 pandemic. The results we have achieved in the last year build on our extraordinary track record of progress. Over the last two decades, our partnership has cut the combined death rate from AIDS, TB and malaria by 61%. As of the end of 2023, the Global Fund partnership has saved 65 million lives.



Online Report

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Colliding Crises

This chapter covers the crises that affected our fight against HIV, tuberculosis (TB) and malaria in 2023. These multiple, interconnected and colliding crises that include climate change, conflict and debt, as well as an alarming erosion of human rights, made our efforts to get back on track against the three diseases much more challenging.

Introduction

In 2023, the world was again hit by multiple crises. Even with the waning of the COVID-19 pandemic, we faced other interconnected crises including climate change, conflict, and attacks on human rights, gender equality and civil society. While the impact and dynamics of these crises differ by region and country, the challenges invariably put the poorest and the most marginalized people at greater risk of deadly infectious diseases.

These crises have a direct impact on the progress we make in the fight against HIV, TB and malaria. Sexual and gender-based violence surged across the world.¹

Across Africa, extreme weather events claimed the lives of more than 15,000 people in 2023. In Uganda, the Anti-Homosexuality Act threatens to undermine the progress we have made in the fight against HIV. In Sudan, conflict killed thousands and displaced close to 10 million people.²

The Global Fund partnership acted with agility to support countries and communities to confront these challenges and continue their lifesaving work. We expanded our Breaking Down Barriers initiative to tackle human rights and gender equality challenges. We adapted our interventions to provide agile support through grant flexibilities, reprogramming and provision of emergency funding.

1. Women and girls mired in Sudan crisis suffer surge in sexual violence. UNHCR, 2024. <https://www.unhcr.org/news/stories/women-and-girls-mired-sudan-crisis-suffer-surge-sexual-violence>; <https://data.unhcr.org/en/documents/details/105508>.

2. Sudan: Situation Report. OCHA, 2024. <https://reports.unocha.org/en/country/sudan/>.

The Global Fund partnership acts with agility to support countries and communities to confront challenges and continue their lifesaving work.

Human rights and gender equality

The challenge

Human rights barriers, gender inequality and structural inequities can make people more vulnerable to diseases and make it harder to access HIV, TB and malaria services. The three diseases can also exacerbate inequality, impoverish people, and make them more vulnerable to human rights violations. The rise of interconnected anti-rights and anti-gender movements, alongside shrinking civic spaces, are some of the biggest threats to health and human rights of our time. They have slowed or upended progress toward gender equality for women and girls and rolled back the rights of people in the LGBTQI+ community. Far too many people are left behind and suffer stigma, discrimination and violence.

In 2023, we witnessed an escalation of the global pushback on human rights and gender. In countries such as Uganda and Ghana, we saw bills that criminalized same-sex relations, impacting access to health services for people who need them the most. Across the world, we saw attacks on trans people and a rollback of sexual and reproductive health and rights. Such laws and discriminatory practices jeopardize the delivery of the Sustainable Development Goal 3 of health and well-being for all.

The Global Fund's response

The Global Fund partnership is powered by equity, determined to ensure a healthier, safer and more

equitable world for all. We support person-centered health programming – including facility and community delivery points. Our sexual and reproductive health and rights approach seeks to challenge policy and legal barriers that prevent people from accessing the health services they need. Our investments in human rights include support for community-led monitoring of human rights violations and a referral system for people affected by those violations that enables them to access health services, social protection and legal services.

In 2023 the Global Fund, alongside partners ViiV Healthcare and GSK, established a new Gender Equality Fund. The fund is delivering resources directly to communities and civil society on the frontlines of the fight for gender equality, supporting them to stem the tide of anti-gender movements and make progress toward equality and better health in their communities. This GBP 6 million fund supports women, girls, trans and gender-diverse people to meaningfully engage in decision-making spaces, tackle the root causes of gender inequality and strengthen locally led movements for gender equality.

Since 2018, the Global Fund has invested in the HER Voice Fund, which supports the leadership of adolescent girls and young women in 13 priority countries in East and Southern Africa. It provides small grants to help adolescent girls and young women participate in advocacy and policy processes, directly shaping policies, laws and programs affecting their lives. In 2023, the HER Voice Fund reached over 68,000 adolescent girls and young women, including trans women, women with disabilities, women who use drugs, women who identify as lesbian, and women who are internally displaced. The fund supported their engagement in over 800 key decision-making bodies.

In francophone West and Central Africa, the Global Fund supports the civil society-led fund Voix EssentiELLES to strengthen women and girls' engagement in Global Fund-related processes and national health policies. In 2023, 40 women and girls' organizations based in Burkina Faso, Côte d'Ivoire and Senegal implemented a range of activities under the themes of sexual and reproductive health and rights, prevention of gender-based violence and the response to HIV, TB and malaria.

Since 2017, Breaking Down Barriers has supported programs to remove human rights and gender-related barriers to services, including programs to address stigma and discrimination, in 24 countries. By focusing on funding comprehensive programs that tackle human rights and gender-related barriers to health services, we support communities to fight back against the erosion of human rights and promote gender equality. Breaking



Farida Sonia Tiemtoré is president of Les Héroïnes du Faso, an organization that works to protect the rights of women and girls in Burkina Faso. Les Héroïnes du Faso received support through Voix EssentiELLES, a fund that provides grants to community-based organizations that foster female voices and leadership in decision-making.

The Global Fund/Olympia de Maismont

Down Barriers is an unprecedented investment in health-related human rights. We have increased our investments in this initiative by more than tenfold since 2017, reaching over US\$200 million in 2023.

In 2023, we assessed the progress the initiative is making in removing human rights and gender-related barriers to services. The assessments found that the average score of human rights programming across Breaking Down Barriers countries had increased by 76% for HIV and 256% for TB from the baseline. This means that our programs in these countries have been delivering a more comprehensive set of human rights interventions at a larger geographic scale and population coverage to meet the growing needs of populations in greatest need.

Conflict and humanitarian crises

The challenge

In 2023, the world faced growing conflict and widening humanitarian crises, overlapping with other emergencies and displacing millions. According to the United Nations, the number of people forcibly displaced stood at a record 117.3 million as of the end of 2023. These crises affected the epidemiology and transmission of diseases and are impacting the progress made against HIV, TB and malaria. For instance, as the conflict after the military take-over in Myanmar undermines health services and displaces entire communities, malaria is making a dramatic comeback in Kayin and Kayah states, wiping out years of progress. As conflict escalates, vulnerable people are suffering from increased challenges to access health services.

Emergency funds awarded

\$131.2M



The Global Fund's response

Through innovation, increased flexibility and partnership, the Global Fund seeks to safeguard the gains made against HIV, TB and malaria in countries affected by conflict, while building strong health and community systems that can end the three diseases and prepare the world for future pandemics. To provide a speedier response in humanitarian settings, the Global Fund builds coalitions with partners who have expertise and a comparative advantage in emergencies.

The Global Fund prioritizes health needs in countries affected by humanitarian crises – also referred to as challenging operating environments (COEs). COEs account for approximately one-third of the global disease burden for HIV, TB and malaria and over 34% of the Global Fund's funding allocation over the next three years. We have disbursed US\$22 billion to COEs since 2002.

We put a great focus on equity, sustainability, program quality and innovation while taking determined action to tackle human rights and gender-related barriers to health services. We leverage the fight against HIV, TB and malaria to build stronger and more inclusive health and community systems better able to deliver health services and respond to future health threats. Even in crisis, we must endeavor to leave no one behind. We adapt our model and provide speedier responses, recognizing the need to adapt approaches to each context while maintaining responsible fiduciary oversight of funds and reducing the administrative burden for partners. For example, our COE policy allowed for agile support in Ukraine through grant flexibilities, reprogramming and provision of emergency funding. Investments in the country supported differentiated interventions by civil society and community-based organizations to continue vital HIV and TB programs. Human rights interventions and legal support were adapted to overcome barriers, and laboratory systems were maintained with back-up power generators and essential consumables. In addition, more than US\$25 million in emergency funding meant that essential HIV, TB and opioid substitution treatment services could be maintained for populations in government-controlled areas and in civilian and penitentiary sectors, as well as for internally displaced persons and hard-to-reach communities.

The Emergency Fund

While country allocations are used to support HIV, TB and malaria programs and build resilient and sustainable health and community systems, including

in countries facing protracted crises, the Emergency Fund, established in 2014, provides quick and flexible financing in emergencies to ensure the continuity of existing HIV, TB and malaria programs and services. From 2014 to 2023, support has mainly addressed emergencies triggered by conflict and climate-related disasters, followed by support to address the needs of displaced populations. The Global Fund has approved over US\$130 million through the Emergency Fund in the last 10 years.

Climate change

The challenge

Climate change is the biggest global health challenge of our time. The phenomenon is destabilizing the foundations of human health, deepening inequalities, and leading to the emergence and spread of infectious diseases. The Intergovernmental Panel on Climate Change (IPCC) estimates that 3.3 billion people worldwide are vulnerable to climate change and face greater health risks. The IPCC Sixth Assessment Report (AR6) has starkly highlighted how climate change exacerbates existing health vulnerabilities, leading to more frequent and widespread infectious diseases. A safe and healthy environment is a fundamental human right.³

While the threat of the climate crisis is universal, the speed and severity of the impacts are not. Communities that are the least responsible for climate change are some of the most vulnerable to the damage it causes. These communities often have the fewest resources to manage multiple, compounding climate risks. Additionally, they are often living in countries with a high disease burden. Other vulnerable populations, such as the elderly, children and those with pre-existing health conditions, bear the biggest brunt of extreme weather events.⁴ As climate change continues to intensify, the disparity in health outcomes between privileged and marginalized communities widens, infringing upon human rights and underscoring the urgent need for interventions and an equitable allocation of resources to counter climate change.

Climate change poses a profound threat to the goal of ending AIDS, TB and malaria, saving lives and building a healthier, safer, and more equitable world for all. There is already an almost precise overlap between the communities designated by the IPCC as "highly vulnerable to the effects of climate change" and those

3. Resolution 48/13 adopted by the Human Rights Council on 8 October 2021: The human right to a clean, healthy and sustainable environment. United Nations, 2021. https://digitallibrary.un.org/record/3945636/files/A_HRC_RES_48_13-EN.pdf.

4. Explainer: How gender inequality and climate change are interconnected. UN Women, 2022. <https://www.unwomen.org/en/news-stories/explainer/2022/02/explainer-how-gender-inequality-and-climate-change-are-interconnected>.

Children at the Dubluk Woreda site for internally displaced people in the Borena zone, Oromia region of Ethiopia. According to the United Nations Office for the Coordination of Humanitarian Affairs, nearly 1.3 million people were affected by drought in Ethiopia's Oromia region during the last quarter of 2022, and over 4 million livestock were lost.

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most heavily hit by infectious diseases such as malaria. Climate change could dramatically increase the threat from an existing infectious disease such as malaria, leading to the next global health crisis.

Climate change is a significant driver of extreme poverty and amplifies existing gender inequalities, leading to severe economic and social consequences, particularly for women in highly vulnerable regions. In 2023, Cyclone Freddy in Madagascar, Malawi and Mozambique damaged more than 300 health facilities. In 2024, we are witnessing a relentless sequence of climate-induced disasters, each highlighting the urgent need for robust action. Climate justice requires putting equity, gender equality and human rights at the core of decision-making and action on climate change and safeguarding the health of the planet and its people.

The Global Fund's response

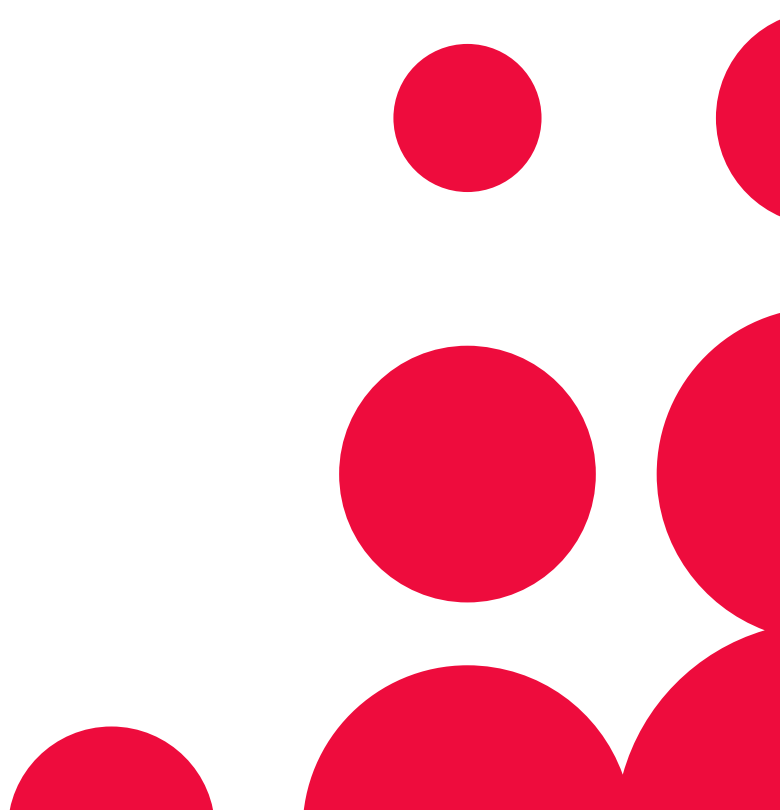
The Global Fund partnership is uniquely positioned to protect the gains humanity has made against malaria, HIV, TB and other infectious diseases. We are strongly committed to supporting the world to prevent future pandemics that may emerge due to the impact of a changing climate. We invest in the nexus between health and climate by supporting low- and middle-income countries to build low-carbon and climate-resilient health systems. We also support the most marginalized communities affected by HIV, TB and malaria, many of whom are also living through extreme weather events. In 2023, the Global Fund announced new strategic partnerships with the World Bank and the Green Climate Fund to accelerate investments in the nexus between climate and health.

Climate change is a key element of the Global Fund Strategy 2023–2028, marking our commitment to address its widespread impact on malaria, HIV and TB and health and community systems. With scale and ambition, the Global Fund can support countries to achieve far-reaching impact in their efforts to address the impacts on health wrought by a changing climate. From 2023 to 2025, 71% of our investments and over 80% of our malaria funding will be directed to the 50 most climate-vulnerable countries, demonstrating the link between vulnerability to disease and climate change.

The Global Fund pursues climate adaptation and mitigation goals to reduce our carbon footprint and protect people from the harmful impacts of climate change on health. To support countries with adaptation, we invest in activities designed to embed climate resilience in health and community systems and climate-proof health facilities and infrastructure. Such investments support disaster risk management for health; vulnerability, risk and impact assessments

and planning; disease surveillance and early warning systems; and climate-sensitive disease control in vulnerable areas. In Mozambique for example, we are supporting the country to develop a new Health National Adaptation Plan, promoting climate resilience and environmental safeguards for health facilities and storage. In the Lao People's Democratic Republic and South Sudan, we are co-financing with the World Bank and other financing partners to collectively invest in climate adaptation measures for resilient health facilities and service delivery in climate disaster-prone areas. In Pakistan, we are supporting the country to build climate-resilient health systems following the devastating floods that took place in 2023.

To bolster mitigation, we support the building of efficient and clean energy solutions in the health sector. We also support the streamlining of supply chains to reduce carbon emissions and lessen the environmental consequences of our partnership's investments. We are investing vigorously in solar projects: In the last seven years, we have supported the solarization of more than 1,000 health centers and storage facilities in 15 African countries, including in Zambia and Zimbabwe. In our grants covering 2024–2026, over 20 countries have included the installation of solar panels on health or storage facilities in their funding requests. We are also exploring ways to reduce the carbon emissions across the value stream of health products, such as mosquito nets, and through the Responsible Procurement Framework. ●



Bangladesh

Case Study

Providing TB services to people displaced by climate change

Bangladesh has one of the largest TB burdens in the world – but the country's response has been consistent and robust. Every year, more than 300,000 people with TB are identified and connected to treatment. Deaths attributed to TB have fallen by 36% since 2015, and the country has sustained a treatment success rate of over 90% for nearly a decade. And yet, the escalating impacts of climate change threaten the country's progress toward eliminating the disease.

Bangladesh is ranked the seventh extreme disaster risk-prone country in the world, according to the Global Climate Risk Index 2021. The country's air quality is among the world's worst. Air pollution is an important risk factor for TB. Bangladesh is vulnerable to cyclones, flooding, extreme heat and rising sea levels. Populations along the coastline bear the brunt of catastrophic storms: homes and essential health infrastructure destroyed by wind, rain and floods, and an increasingly contaminated water supply.

Every year, hundreds of thousands of people move to Bangladesh's capital, Dhaka. According to the International Organization for Migration (IOM), approximately 70% of the people that migrate and settle in the city's poorest areas were forced to leave their homes because of climate-related disasters. In Dhaka, climate migrants live in cramped living quarters with inadequate hygiene – the perfect conditions for TB to spread. In the first six months of 2024, more than 1,060 people who tested positive for TB in Dhaka were new arrivals who left home because of rain and floods.

Bangladesh's National TB Program and BRAC, Global Fund partners in Bangladesh, are adjusting testing and treatment services to meet escalating demand in Dhaka's poorest neighborhoods. This includes increasing case finding activities and supplying preventive medicine for people with TB so that their families and neighbors are less likely to get sick. They are also channeling funds to provide nutritional support to the most vulnerable people in these communities, and procuring mobile X-ray machines that are easy to carry and use in confined spaces.

With resilient, nimble partners, sustained investment and flexible funds to tackle evolving crises, Bangladesh can overcome the challenges posed by climate change and stay on course to end TB. ●

Sirajul Islam wades through a flooded area with his 6-year-old daughter, Sumaiya, near the spot where their family home once stood in the village of Sreeula in Bangladesh. Every year, hundreds of thousands of people in Bangladesh leave their homes because of climate-related disaster and settle in cities, where inadequate hygiene and crowded conditions can fuel the spread of tuberculosis and other diseases.

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Conflict and instability in El Fasher, the capital city of North Darfur, Sudan, is driving hundreds of people from their homes – many have been displaced multiple times in the past decade.

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Sudan

Case Study

Supporting people with essential health care in crisis

Conflict in Sudan has resulted in millions of people being displaced from their homes. An estimated 75% of hospitals in conflict-affected areas in the country are unable to treat patients and medical supplies are depleted nationwide. Millions of people are impacted by malnutrition – a key driver of disease – and lack of access to food.

At the same time, Sudan has been grappling with the health impacts of climate change. Considered one of the world's highly climate-sensitive countries, Sudan has been confronted with drought and increasingly unpredictable levels of rainfall. This has fueled mass migration, displacing people within Sudan and across borders in search of more habitable land and reliable sources of clean drinking water.

In response to these colliding crises, the Global Fund has invested in strengthening health systems and fighting HIV, TB and malaria in Sudan and neighboring countries.

Within Sudan, this includes US\$151 million in new grant agreements to provide malaria, HIV and TB services for Sudanese people, including displaced people. In the coming year, Global Fund partners will distribute 14 million mosquito nets across the country.

A US\$20 million investment through the Global Fund's COVID-19 Response Mechanism is being used to safeguard and reinforce the country's health systems, including strengthening medical oxygen and supply chains, supporting mobile health clinics, and providing essential resources for community health workers and community-based organizations so they can reach more people with lifesaving care.

In countries that border Sudan, Global Fund partners – including ministries of health – are working together to prevent and treat HIV, TB and malaria. For example, in 2023, the Global Fund approved US\$890,000 in emergency funds for UNICEF to procure mosquito nets and other health commodities for Sudanese refugees and returnees to South Sudan. That same year, the Global Fund and the UN Development Programme (UNDP) delivered 100,000 mosquito nets for refugee communities in Eastern Chad alone.

To end HIV, TB and malaria, we need to overcome challenges to reach the most vulnerable people with prevention and treatment services – wherever they are. ●



The full suite of the Results Report 2024 includes:

Summary & Key Results

Health and
Community Systems



HIV:
State of the Fight

Colliding Crises



Tuberculosis:
State of the Fight

Investing for Impact



Malaria:
State of the Fight

Left: Lydia and Victor, who are both living with HIV, were forced from their home due to the war in Ukraine. Here, they consult health care providers at the Dermatological and Communicable Diseases Hospital in Chişinău, Moldova.

The Global Fund/Vincent Becker

Back cover: Four-year-old Adil Shaikh Hassan in the Badawa neighborhood of Erbil, Iraq. Adil's father and grandfather tested positive for TB; soon after, Adil tested positive as well. Adil receives a new pediatric formulation for TB – a drinkable, cherry-flavored medicine designed for children. Global Fund partner IOM visits Adil and his family regularly to check on their progress and prevent infection among the rest of Adil's family members.

The Global Fund/Ashley Gilbertson

The Results Report 2024 was published in September 2024.



**The Global Fund to Fight
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