

Results Report 2024

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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Investing for Impact

The Global Fund unites the world to save lives, defeat HIV, tuberculosis (TB) and malaria, and build a healthier, safer, more equitable future for all. We bring together world leaders, communities, civil society, health workers and the private sector to find solutions that have the most impact, and we take them to scale worldwide. We disbursed US\$5 billion¹ in 2023 to fight deadly infectious diseases, challenge the inequity that fuels them and strengthen health systems in more than 100 countries.

Introduction

Since our inception over 20 years ago, the Global Fund has disbursed US\$65.4 billion to support programs run by local experts in more than 100 countries to fight HIV, TB, and malaria and strengthen health and community systems. We invest globally, with a particular focus on countries with a higher disease burden and a lower ability to finance their response to the three diseases.

In 2023, the Global Fund disbursed US\$5 billion¹ to fight HIV, TB and malaria, support COVID-19 Response Mechanism (C19RM) activities and strengthen the systems for health that underpin any pandemic response. This is the third year in a row of record investments for the Global Fund.

Global Fund financing

We receive most of our funding (94%) from governments, with the rest of the funding coming from the private sector, foundations, and innovative financing initiatives. The Global Fund fundraises in three-year cycles known as Replenishments, where our donors pledge the resources needed to fund the fight against HIV, TB and malaria, strengthen health and community systems and bolster pandemic preparedness.

To date, the biggest contributors to the Global Fund (on a cumulative basis) are the United States, France, the United Kingdom, Germany, Japan, Canada and the European Commission. Following their public pledge announcements, donors make payments over the

^{1.} When including Strategic Initiative disbursements, this figure would amount to US\$5.1 billion.

Replenishment cycle, based on an agreed payment schedule. As of 31 December 2023, the Global Fund partnership secured commitments from 50 public and 29 private donors for a total of US\$15.7 billion announced pledges for the 2023-2025 allocation period. This is the largest amount ever pledged to the Global Fund – with many public and private sector partners demonstrating their ongoing commitment to the Global Fund by significantly increasing their pledges.

Conversion of Seventh Replenishment pledges in 2023 progressed well, with 28% (US\$3.8 billion) of adjusted pledges received in cash, showing donor confidence. The Global Fund has signed agreements with 77% of donors (61 of 79) as of 31 December 2023, the highest proportion of donor contribution agreements signed within the first year. Most public donors (28 of 50) have signed agreements with multiyear payment schedules.

But above all, the investments made by countries themselves in their health systems are the most fundamental contribution to the fight against the three diseases and building stronger health systems. The Global Fund continues to play a strong role in advocating for and catalyzing domestic investments in health.

Financial sustainability and domestic resource mobilization

The economic challenges emerging from the colliding crises that the world is facing today – debt, inflation, climate change, competing development demands, among others – are especially consequential in lowand middle-income countries, where fiscal space is shrinking. In this context, a strong partnership between countries with the highest burden of disease and the Global Fund is more important than ever.

The Global Fund works with countries as they develop a long-term and realistic path to transition from Global Fund support and strengthen the financial sustainability of their health systems. The Global Fund's Sustainability, Transition and Co-financing Policy incentivizes countries to progressively increase domestic financing for health and the three diseases as well as absorb specific program costs by making a proportion of grants contingent on domestic financing performance. This strengthens health systems, maintains and scales up service coverage, and accelerates the fight against the three diseases. A minimum of 15% – and up to 30% in some countries – of Global Fund allocations are subject to these co-financing requirements.

Keeping the issue of domestic health financing on the global health agenda is critical, particularly in Africa, as this is where over 70% of Global Fund resources are invested. The Global Fund's continued support of the African Union (AU) domestic financing agenda has

been central to advocacy efforts for sustainable health financing in Africa. The Global Fund's advocacy efforts have also helped to increase the political visibility of health financing at global, regional and national levels.

As part of the implementation of the AU African Leadership Meeting Declaration, the Global Fund has supported national health financing dialogues in seven African countries (Burundi, Kenya, Malawi, Mauritius, Mozambique, Rwanda and Zambia). The broad aim of the dialogues was to create a platform for inclusive country-led discussions on domestic health financing, which raises the profile of health financing on the political agenda and ultimately leads to accelerated prioritization and implementation of reform policies. The dialogues have led to high-level political commitments to domestic resource mobilization for health and accelerated implementation of health financing reforms.

The Global Fund also integrates its public financial management strategy in the health sector to drive sustainability and improve health outcomes in countries. Public financial management ensures efficient resource coordination, management, and use for impact and better health results. Additionally, the Global Fund collaborates with ministries of finance and health in various countries to accelerate public financial management maturity and enhance country engagement.

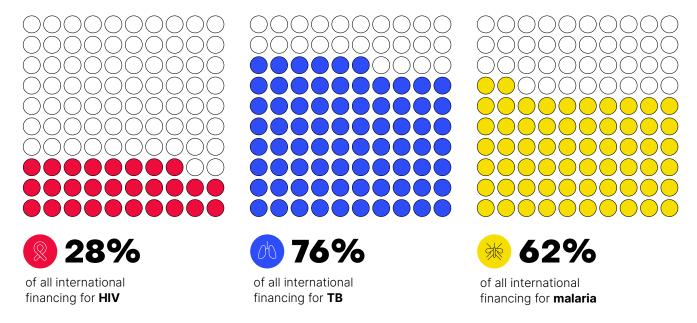
Value for money

Value for money is at the core of our mission to maximize impact against HIV, TB and malaria. The Global Fund supports countries to consider the five dimensions of value for money – effectiveness, economy, efficiency, equity and sustainability – to deliver greater impact and save as many lives as possible. To plan for greater impact from our grants and achieve greater value for money in domestic resource allocation, the Global Fund also supports countries to routinely apply allocative efficiency models and costing tools to inform planning and resource allocation. To encourage the sustainability of country-level disease programs, the Global Fund helps countries choose activities that balance impact and cost. To date, Global Fund strategic initiatives have supported over 200 analyses across 70 countries to find ways to better allocate and utilize limited resources.

Innovative financing

Over the past two decades, significant investments in health – including domestic financing and Global Fund investments – have led to impressive progress in the fight against HIV, TB and malaria. As the Global Fund adapts to a shifting health financing landscape, we are pursuing innovative financial approaches to accelerate the fight against the three diseases while strengthening the resilience and sustainability of systems for health.

International grants provided by the Global Fund in 2023



This data is provided by UNAIDS (for HIV) and the World Health Organization (for TB and malaria).

Where does our funding go?

Disbursements for HIV, TB and malaria grants and COVID-19 Response Mechanism funding



The sum of the values does not add up to 100% due to rounding. Data for Grant Cycle 6 is as of 30 June 2024.



Global Fund private sector partners drive impact – and save more lives.

For example, blended finance allows the Global Fund to combine grant funds with multilateral banks (such as the World Bank) and other financial institutions to build stronger, more resilient health systems that are better equipped to fight HIV, TB and malaria, and support critical health interventions – such as expanding treatment, reforming social health insurance schemes, and reaching vulnerable populations with lifesaving care. Blended finance complements traditional Global Fund grant financing and is part of the Global Fund's overall approach to raising additional resources for health. Blended finance also makes it possible to strengthen alignment with other partners, leveraging borrowing to support the health sector and the three diseases, and tailoring the way we invest to suit a country's programmatic priorities and economic situation. In 2023, the Global Fund initiated blended financing transactions in Colombia, Côte d'Ivoire, Haiti, the Lao People's Democratic Republic and South Sudan.

Innovation and private sector partnerships

Private sector catalytic investments and strategic initiatives spur innovation and encourage focused, evidence-based programming approaches to increase our impact in specific priority areas. Private sector and nongovernment partners have contributed over US\$4.3 billion as of February 2024 to expand the reach of Global Fund investments and save millions of lives. This total includes substantial commitments from the Bill & Melinda Gates Foundation and (RED).

Achieving gender equality is particularly important at a time when we are experiencing a global pushback against gender equality and human rights. Through the Gender Equality Fund, GSK and ViiV Healthcare are supporting the influence of women, girls and gender-diverse communities in national strategy, policy and programming related to gender equality and health. In July 2023, they made a combined commitment of GBP 6 million over three years for the Gender Equality Fund, which will help accelerate progress toward gender equality through community engagement and empowerment. The Bill & Melinda Gates Foundation committed to a 1:1 matching agreement for this donation.

The Global Fund's private sector partnerships with ViiV Healthcare and Fondation CHANEL also supported two other successful community-led gender equality and health partnerships that have achieved remarkable results in a short time. In 2023, the HER Voice Fund reached over 68,000 adolescent girls and young women as a result of 94 grants awarded across 13 priority countries (Botswana, Cameroon, Eswatini, Kenya, Lesotho, Malawi, Mozambique, Namibia, South Africa, Tanzania, Uganda, Zambia and Zimbabwe). In 2023 and 2024, Voix EssentiELLES worked with women and girls in Senegal, Burkina Faso and Côte d'Ivoire through 37 grassroots, women-led community organizations, supporting them to engage in decisionmaking around sexual and reproductive health policies and programs. Voix EssentiELLES will expand to two additional West and Central African countries with funding from Fondation CHANEL.

Digital health is an essential part of building resilient and sustainable health and community systems. In 2023, the Data Science Catalytic Fund supported the digitalization of community health information systems in Burkina Faso, Ethiopia, Rwanda and Uganda. Building on the success of this fund, the Digital Health Impact Accelerator (DHIA) Catalytic Fund was launched in 2024 to further digital health transformation in sub-Saharan Africa. Partners including Anglo American, the Patrick J. McGovern Foundation, Medtronic LABS, Dimagi, Medic, Orange, and Zenysis have contributed to the DHIA's objectives of improving digital data exchange for patient-centered care and catalyzing new solutions

for power and internet connectivity for last-mile health facilities. Insights and successful approaches from countries included in the DHIA – including Burkina Faso, Ethiopia, Rwanda, South Africa and Zimbabwe – will inform the expansion of the initiative across other countries in future grant cycles.

Laboratories – where samples are tested to detect pathogens - are essential elements of strong health and community systems. The Laboratory Systems Integration Fund – supported by The Rockefeller Foundation, the Abbott Fund and IQVIA through (RED) and matched by the Global Fund – has generated US\$54 million to support the development of stronger and well-connected laboratory systems and diagnostics networks to improve service delivery to fight HIV, TB and malaria and respond to future disease threats over the 2024-2026 period. Nine countries have accessed matching funds through the Laboratory Systems Integration Fund, generating an additional US\$17 million in country investment. Nineteen countries have requested technical assistance to help accelerate progress via effective implementation, adoption of innovations and generation of best practices in integrated laboratory systems strengthening. Three regional platforms have been identified and have begun work on addressing cross-cutting issues, reinforcing regional and sub-regional cooperation,

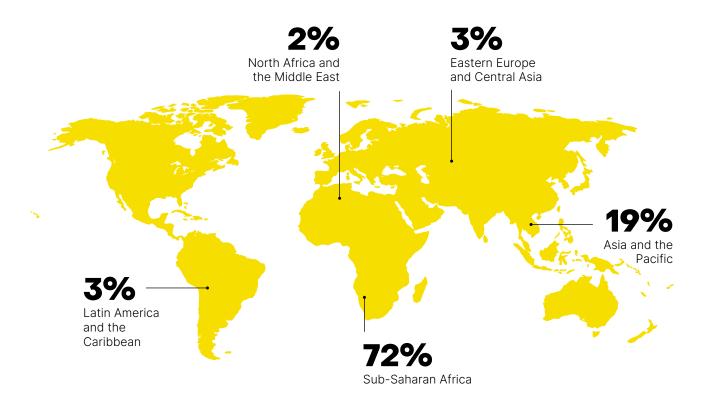
strengthening institutions, and enhancing resource sharing to enable an integrated public health response.

Community health workers are at the forefront of fighting HIV, TB and malaria and other disease threats. The Africa Frontline First Catalytic Fund (AFF) was established in 2023 to enhance community health programs by strengthening systems in eight African countries: Burkina Faso, Côte d'Ivoire, Ethiopia, Kenya, Liberia, Mali, Senegal and Zambia. The AFF will support national governments in five key areas: financing for long-term sustainability; human resources for health; leadership and governance; digital health; and supply chain. The AFF is a US\$100 million fund supported by the Skoll Foundation and the Johnson & Johnson Foundation.

The Global Fund is actively engaged in advancing maternal, newborn and child health. The Takeda Initiative 2 strategic initiative, launched in 2020, addresses the challenges of access to quality maternal and newborn health care and improves outcomes for HIV, TB and malaria in Nigeria, Kenya and Tanzania. By 2023, over 900,000 women and babies benefited from integrated care, with antenatal care attendance improving by 37% on average. The initiative emphasizes sustainability and patient-centered care.

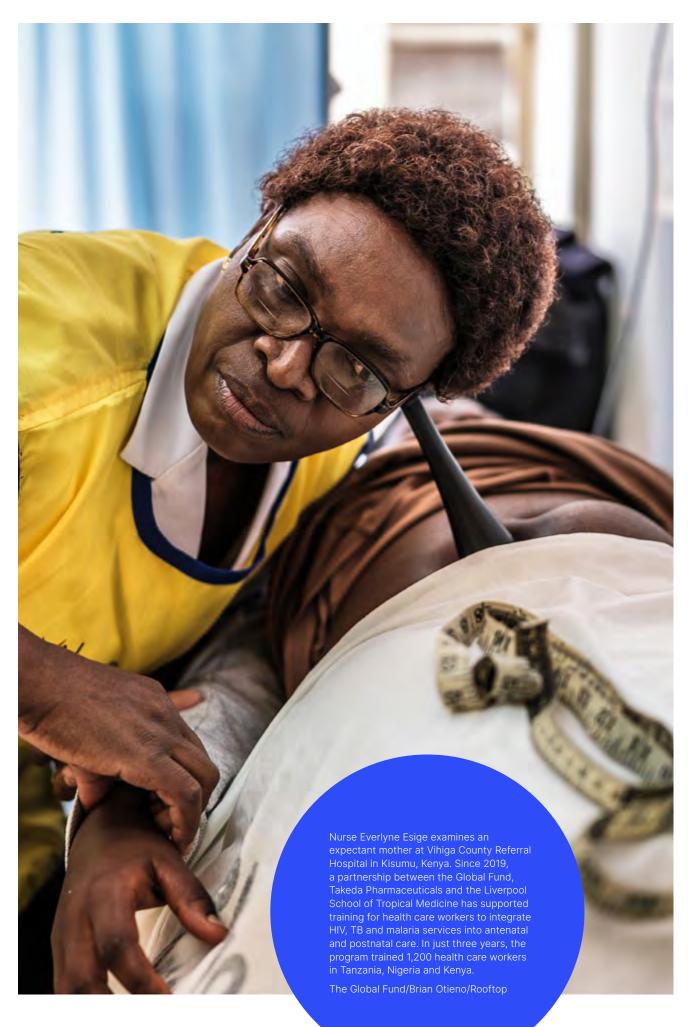
Global Fund investments by region

In 2021-2024 as of June 2024



The sum of percentages across regions does not add up to 100% due to rounding.





How we operate

Equally important to achieving our vision of a world free of the burden of HIV, TB and malaria is how we invest our resources and how we conduct our business.

The Global Fund partnership is powered by the pursuit of equity and the belief that no one should die from preventable and treatable diseases. Aligned with the Lusaka Agenda, the programs we fund are country-led and country-owned, which means countries take the lead in tailoring their response based on their local contexts. Our model is anchored by partnership, making us a global movement of civil society, governments, private sector partners, technical partners and communities affected by the three diseases in more than 100 countries.

Commitment to transparency

The Global Fund operates with a high degree of transparency and accountability in all our work and has zero tolerance for corruption or misuse of funds. In 2024, we were ranked at the top of the "Good" category of a leading international aid transparency index – Publish What You Fund's 2024 Aid Transparency Index. This is an increase of more than 10 points since the last review in 2022.

As part of our ongoing efforts to sustain and improve transparency our Data Explorer platform provides up-to-date, free and open access to the Global Fund's data. In 2023 and 2024, we focused on making detailed documents and data about the performance of our investments easier to find and navigate on the platform.

The Office of the Inspector General (OIG), established in 2005 as an independent entity reporting directly to the Board, safeguards the assets, investments, reputation and sustainability of the Global Fund. Through audits, investigations and advisory work, the OIG promotes good practice, enhances risk management and reports fully and transparently on abuse.

Ethical conduct

The Global Fund has a strict zero-tolerance policy toward any form of abuse. Within the Secretariat, the Ethics Office not only supports ethics-related matters to the Global Fund's employees, but also offers support on matters related to grant implementers, suppliers, Local Fund Agents and Country Coordinating Mechanisms. It also provides support in relation to the Board, Committees, and advisory bodies. Within the Global Fund Board, the Ethics and Governance Committee ensures that the Global Fund and our stakeholders adhere to appropriate standards of ethical behavior.

Evaluation and learning

In 2024, the Evaluation & Learning Office (ELO) published its first two evaluations, under the oversight of the Independent Evaluation Panel (IEP). The first was the Board-requested Independent Evaluation of the Global Fund Allocation Methodology. The findings from this evaluation have informed the Board-level discussions for the next allocation methodology for Grant Cycle 8. The second evaluation was the End-term Strategic Review (2017-2022). The findings and recommendations of this evaluation are being used to prioritize areas of continued focus for the current Strategy and highlight key considerations for the next Replenishment.

To ensure useful, relevant and actionable evaluations, Global Fund colleagues are engaged across the entire evaluation process, from determining which knowledge areas to prioritize, to understanding the data within its context, to reviewing the evaluation report. The process is guided by the independent evaluation and learning function's new Standard Operating Procedures, Quality Assessment Framework and the Evaluation and Learning Principles.

Finances

The Global Fund's 2023 financial statements reflect an effective and efficient use of resources to support programs in more than 100 countries. Operating expenses illustrate optimal budget utilization of 99% for the year 2023, reaching US\$337 million. This is the highest level achieved in the history of the Global Fund. In GC7, our operating expenses² represent 6.2% of our total announced pledges from donors. This is one of the lowest percentages of operating expenses in the global health development space. Full financial data is available in our Annual Financial Report. ●

^{2.} Includes C19RM.



Outside the Sitio Pinagar, Barangay Ransang halfway house in Palawan, the Philippines, members of surrounding Indigenous communities travel for hours on foot through dense, mountainous jungle to receive health care – including malaria tests, nutritional support and pre- and postnatal care.

The Global Fund/Vincent Becker



Supporting countryand community-led efforts to end malaria

The end of malaria is in sight in the Philippines.

In 2002, there were an estimated 70,585 cases of malaria and 180 deaths. Today, 72 of the Philippines' 82 provinces are malaria-free, with nine provinces declaring zero indigenous cases and only one province with active transmission of the disease.

The Global Fund works with the government, private sector partners including the Pilipinas Shell Foundation, Inc., and civil society organizations to fight malaria in Palawan, the last province where the disease is still a threat – focusing on early testing and treatment, distributing insecticide-treated mosquito nets and implementing robust community mobilization campaigns to raise awareness about the disease. Global Fund grants also support health workers and microscopists who visit remote areas to test people for malaria, distribute mosquito nets and hold talks on prevention and treatment with nomadic and Indigenous groups.

Two decades of partnership and investment have brought the Philippines to the brink of elimination – but climate change-fueled drought and storms threaten the country's vision to end malaria by 2030. Typhoons hit the coast with increasing severity each year, destroying homes and health infrastructure and creating pools of stagnant water where disease-carrying mosquitoes thrive. In the mountains and forests, lack of rain has forced some Indigenous people to move, complicating efforts to reach them with medicine and essential health services.

With Global Fund support, the Philippine government is investing in health systems that can withstand and counter the impacts of extreme weather – incorporating malaria prevention and testing into community-based primary health care services and building surveillance networks that feed community data into national health information systems, so that officials can address malaria outbreaks as soon as they crop up.

With sustained, coordinated action on climate change, the Philippines will stand as a model for the fight against malaria – and end the disease within its borders, once and for all. ●



Left: Fadila Yunis Omar with Dr. Bashar Hashim Abbas in Mosul, Iraq. Fadila was screened for TB using a mobile laboratory that was parked just outside her home.

The Global Fund/Ashley Gilbertson

Back cover: Stacy Kayihura works in operations at HealthTech Hub Africa in Kigali, Rwanda. Technology and innovation are key drivers in the fight against HIV, TB and malaria - strengthening disease surveillance, transforming testing and diagnosis and revolutionizing treatment. In Rwanda, investments in digital health and technology have been vital in halting the spread of disease and strengthening frontline care. The HealthTech Hub Africa brings together governments, startups and other technological innovations that can support health systems across the continent.

The Global Fund/Brian Otieno

