



Impactful Partnership in Action: Global Fund, Gavi and WHO



Common goals

The World Health Organization (WHO), Global Fund to Fight AIDS, Tuberculosis (TB) and Malaria, and Gavi, the Vaccine Alliance all play vital roles in the achievement of the United Nations Sustainable Development Goal (SDG) 3: Ensure healthy lives and promote well-being for all at all ages. Like all SDGs, SDG 3 cannot be reached by a narrow lens of focus; rather, it necessitates international collaboration and global solidarity, embodied within and across these three life-saving and impactful organizations.

The Global Fund and Gavi are the two largest global health funds, whose impact, work and accountability are enabled through the technical guidance, assistance and pre-qualification of health products provided by WHO. WHO, as the health cluster lead of the United Nations, coordinates health-related actions across the United Nations and partners. While these three organizations each serve a different purpose, they work together in close partnership to achieve SDG 3. Close and effective collaboration between the three organizations ensures synergy and complementarity at global, regional and national levels.

At a glance:

- The Global Fund invests in the HIV, TB and malaria programs, as well as in the health and community systems, of over 110 countries either directly or through multi-country grants. The Global Fund has an annual operating budget of US\$390 million and employs around 1,200 staff in its Geneva Secretariat office, from which it disburses US\$5 billion a year.
- Gavi helps vaccinate more than half the world's children, providing financial and technical support to vaccine programs that since 2000 have helped to halve child mortality in 78 lower-income countries. Gavi has an annual operating budget of US\$183 million and employs approximately 500 staff in its Geneva Secretariat and Washington D.C. offices, from which it disburses US\$2.5 billion a year.
- WHO has, as the convener of global health, provides normative guidance and technical support to countries and the international community. It serves 194 Member States and has a staff workforce of 9,500 people across 6 Regional Offices and 152 Country Offices. Supported by an annual base budget of approximately US\$2.8 billion, WHO holds the mandate to promote, provide and protect the health and well-being of all people, everywhere.

[Cover] Women and children at a health facility in Gomoa East District, Ghana.

Ghana, Kenya and Malawi were the three pilot countries that worked with Gavi, the Global Fund and Unitaaid to introduce the RTS,S malaria vaccine.

The Global Fund/Nana Kofi Acquah

Huge impact

- The Global Fund partnership has cut the combined death rate from AIDS, TB and malaria by 61%, saving more than 65 million lives since 2002.
- Gavi has helped vaccinate a whole generation – over 1 billion children since 2000 – preventing more than 18.8 million future deaths. If fully funded, could protect 500 million children in its next five-year strategic period, saving over 8 million lives.
- Since its founding in 1948, WHO has helped increase global life expectancy from 46 to more than 71 years, through providing up-to-date recommendations on health interventions, ensuring equal access to quality care and health products, supporting countries in building up resilient health systems, eradicating smallpox, eliminating malaria in 41 countries, reducing maternal mortality and prevalence of smoking, as well as leading the global response to health emergencies. Over the next four years, WHO aims to help save 40 million lives.

Shrinking fiscal space means that countries face greater challenges in ensuring sufficient resources are allocated for health services and systems. Coupled with a volatile geo-political context and multiple competing demands on donor budgets, seamless cooperation between the Global Fund, Gavi and WHO is more important than ever. There is a shared commitment to making this work as impactful as possible, minimizing waste and ensuring complementarity of action. We also share a common aim to collaborate when and where it makes sense, to recognize where and why to do things differently, and to concentrate on our shared agility, flexibility and focus on outcomes.

On the outskirts of Yaoundé, Cameroon, Community health worker Amélie plays with 6-month-old Tony-Jason, who is vaccinated against malaria. Tony-Jason's parent's also received mosquito nets to protect the family against the disease.

The Global Fund/Vincent Becker

Areas of collaboration



In addition to collaborating with one another, the Global Fund, Gavi and WHO work with a broad range of global health organizations, with each organization playing a distinct role, including Unitaid, UNAIDS, UNICEF, UN Development Programme, RBM Partnership to End Malaria, Stop TB Partnership, FIND and the World Bank, among others. The sections below focus on the specific areas of shared focus between the Global Fund, Gavi and WHO, uniquely positioned to deliver impact.

Fighting malaria

The Global Fund provides 62% of all international financing for malaria programs. Over the last two decades, the Global Fund invested in the scale-up of evidence-based interventions to treat and prevent malaria, and in strengthening the health and community systems that underpin malaria programs around the world.

Building on existing clinical evidence, Gavi, the Global Fund and Unitaid jointly funded pilots in Malawi, Kenya and Ghana to introduce the RTS,S malaria vaccine – the first vaccine recommended to prevent malaria in children. By December 2024, 17 countries in Africa had introduced the malaria vaccine into their childhood immunization programs with Gavi support, and as part of their national malaria control strategies. While the Global Fund does not fund the vaccine directly, it supports planning and data management activities through national malaria programs included in grants. Malaria vaccines can produce the highest impact when deployed within a suite of WHO-recommended, life-saving malaria prevention efforts financed by the Global Fund, such as seasonal malaria chemoprevention and insecticide-treated mosquito nets. When combined, these interventions have the potential to reduce clinical malaria cases by more than 90%, as observed in recent studies.

Health and community systems

Strong health and community systems are essential for ending HIV, TB and malaria as public health threats, are crucial for tackling current and future epidemics, and ultimately contribute to long-term, sustainable growth and development. These systems for health also enable better immunization programs. By leveraging their unique and complementary strengths, the Global Fund, Gavi and WHO, collaborate closely to build sustainable health systems at country level.

While both Gavi and the Global Fund invest in systems strengthening efforts that underpin to their respective goals (e.g., cold chain equipment for vaccines, supply chain for therapeutics), they increasingly collaborate and jointly invest in broader health systems areas essential for all programs, enabled through WHO technical guidance and assistance.

Key areas of health and community systems that benefit from the Global Fund, Gavi and WHO's collaborative approach include:

- **Service delivery, including human resources for health:** Through WHO guidelines on optimizing health worker programs, the Global Fund and Gavi support countries' investments in community health worker programs to extend life-saving services to their country's most vulnerable and hard-to-reach populations.
- **Procurement and market shaping:** Global Fund and Gavi rely on WHO to prequalify health products, determine the list of eligible

products for procurement, recommend which products should be used, and how these products should be deployed. In 2023, the Global Fund procured products with a total value of almost US\$1.34 billion, and Gavi procured products with a total value of approximately US\$1.4 billion.

- **Regional manufacturing:** Both the Global Fund and Gavi invest in regional manufacturing and procurement, with the aim of supporting sustainable markets and shorter supply chains. WHO provides local production assistance to countries towards prequalification, including for locally produced products. These efforts will improve the resilience of supply chains, reducing the impact of global supply shocks and enhancing responsiveness to future health crises. In June 2024, Gavi launched the African Vaccine Manufacturing Accelerator, a financing instrument that will make up to US\$1.2 billion available over ten years to support the sustainable growth of Africa's manufacturing base.
- **Supply chain:** The collaboration between Gavi, Global Fund and WHO in supply chain strategic planning has significantly enhanced the efficiency and reliability of health commodity distribution and infrastructure, leading to improved health outcomes in low- and middle-income countries.
- **Health impacts of climate change:** WHO, Global Fund and Gavi are working together to define, address and prevent the devastating consequences of climate change on human health. Of the three diseases at the core of the Global Fund's mission, malaria is the most affected by climate change, addressed in collaboration with WHO's evidence-based technical tools and Gavi's funding for malaria vaccines. Alongside malaria efforts, WHO continues to assess country-led planning and help countries design climate-resilient health systems to mitigate the current and potential future impacts of climate change on health, with Gavi and the Global Fund investing in response and prevention.
- **Health data management:** Through WHO's technical guidance and normative support, the Global Fund and Gavi are investing in health management information systems. Through these investments, all three organizations enable countries to collect, share and analyze data, allowing health programs to use that data in real time to deliver quality services and stop an outbreak.

The COVID-19 response and pandemic preparedness

When the COVID-19 pandemic hit in 2020, Gavi and the Global Fund acted quickly, working as standalone organizations as well as within WHO's Access to COVID-19 Tools Accelerator (ACT-A) partnership. Through coordinated efforts, WHO enabled the Global Fund and Gavi to finance equitable access to COVID-19 vaccines, diagnostics and therapeutics, as well as to protect hard-won gains against infectious diseases and support communities to respond to the pandemic. The Global Fund's COVID-19

Response Mechanism (C19RM) has been the largest source of grant funding to low- and middle-income countries for diagnostics and treatments, including medical oxygen, personal protective equipment and other public health measures. COVID-19 vaccines were covered by the COVAX initiative, led by Gavi, WHO and other partners. All three organizations continue to play important but distinct roles in keeping the world safer from future pathogens with pandemic potential.

Fighting cervical cancer

According to WHO guidance, cervical cancer is almost entirely vaccine-preventable and five times more likely to occur in women with HIV, which means that alongside screening for early detection, rolling out the human papillomavirus (HPV) vaccine is critical to preventing infections. The Global Fund has progressively strengthened its collaboration with the global cervical cancer effort through support for access to screening and treatment programs and its relationships with key partners, including WHO's Cervical Cancer Elimination Initiative, which ensures a comprehensive approach of combining prevention, early detection and treatment to eliminate cervical cancer as a public health threat. Meanwhile, the 2023 revitalization of Gavi's HPV vaccine program has yielded significant gains so far, supporting the immunization of more than 14 million girls in 2023 – more than the previous ten years combined. This brings the total number of girls immunized with Gavi support to over 27.3 million since 2014, a substantial improvement in coverage.

Sustainability

Sustainability – including financial, programmatic and political sustainability of health, disease and vaccine program coverage – is a core principle of both the Global Fund and Gavi, with investment approaches adapted over time to address changing needs and reduce aid dependence. While the focus on sustainability has been built into the models of both organizations, recommendations from WHO and the Lusaka Agenda are important in informing the approach. The Lusaka Agenda's five key shifts, for example, resulted in the Global Fund, Gavi and the World Bank's Global Financing Facility (GFF) establishing four workstreams on malaria, health systems strengthening, country engagement and back-office functions.

Key areas linked to sustainability that benefit from the Global Fund, Gavi and WHO's collaborative approach include:

- **Public financial management:** In line with their respective general roles, WHO leads efforts – to generate evidence, enable dialogue, build capacity, provide technical guidance and publish best practices and reforms for public financial management – for better adaption and alignment to health system needs in specific geographic or epidemiological contexts. As frequent financers of health systems in the same country or ministry, the Global Fund and Gavi continue to

align operational and financial strategies and policies in support of countries to increase efficiency and the impact achieved.

- **Health financing:** In collaboration with other UN agencies, WHO leads the support of ministries of health and finance, as well as the broader health financing community, to advance health financing reform and develop policies that enable progress towards Universal Health Coverage. The Global Fund and Gavi work closely with countries, each other and WHO to help achieve long-term sustainability of health programs and national responses, so these programs can maintain gains and continue to expand services even after transition from Global Fund and Gavi support. WHO plays a reinforcing role through its guidance, policy dialogue and technical leadership, while the Global Fund and Gavi have strict policy measures in place to ensure that countries' health financing complements their targeted funding. An area of increasing collaboration between the Global Fund and Gavi is blended financing, which refers to combining grant funds with funding from multilateral development banks and other financial institutions.

Country Case Study: Malawi



In a village in Dedza District in Malawi, residents celebrate the construction of a new health post.

The Global Fund/David O'Dwyer

Today, Malawi boasts a dramatic improvement in the overall life expectancy at birth: from 44.7 years in 2000 to 62.5 years in 2021. This accomplishment is due to impressive leadership by the Government of Malawi through the Ministry of Health. Proudly supporting this achievement is WHO through its country presence. As part of its core mandate, WHO continues to lead the efforts to achieve Universal Health Coverage and strengthen the health system in the country through the provision of technical

support to review existing strategies and develop of successor plans, such as the National Immunization Strategy, as well as in the emergency response to minimize mortality and morbidity during crises such as Cyclone Freddy. Gavi and the Global Fund both invest in Malawi and their funding has been channeled through a joint Program Implementation Unit at the Ministry of Health since 2018.

Over the last two decades, Malawi has made very significant progress in controlling its HIV, TB and malaria epidemics.

- Between 2010 and 2023, HIV incidence and mortality decreased by 79% and 70% respectively, while antiretroviral coverage increased from 27% to 91% during the same period.

- Between 2015 and 2022, the TB mortality rate for all forms (excluding HIV co-infection) reduced from 22 to 9.5 per 100,000 population, while the TB mortality rate among HIV-positive people fell from 46 to 18 per 100,000 population. Treatment coverage greatly increased from 51% to 75% between 2021 and 2023.
- While malaria remains a major public health problem in Malawi, parasite prevalence among children aged 6 to 59 months declined from 24% in 2017 to 10.5% in 2021. Malaria incidence and mortality decreased from 264 to 219 per 1,000 population, and from 47 to 37 per 100,000 population respectively, from 2014 to 2022.

Spotlight on malaria

The support of WHO, Gavi and the Global Fund, aligned with that of the U.S. President's Malaria Initiative, has had a determinant impact on Malawi's fight against malaria.

Malawi was a pilot country for the RTS,S vaccine against malaria and is currently distributing the vaccine through Gavi support. More generally, it is recognized as having one of the most successful expanded programs on immunization in the African region, with sustained high coverage of routine immunization of about 80%. This has been achieved through routine immunization against diphtheria, tetanus, pertussis, hepatitis B, Hib, polio, HPV and cervical cancer, which has now been expanded to include vaccines for malaria. Through end 2023, Gavi had disbursed nearly US\$500 million in Malawi – including for specific vaccines, cold chain equipment, health system strengthening and technical support.

Since 2003, the Global Fund has committed over US\$2.8 billion to Malawi's fights against HIV, TB and malaria. The 2024 to 2027 Global Fund malaria grant will finance a mass insecticide-treated mosquito net campaign that will see 11.8 million nets distributed across all 28 districts; malaria testing and treatment at health facilities and in the community; as well as support for innovation through school-based distribution and the digitalization of data on household registration and distribution status. Through the National Malaria Program, these activities will also be closely coordinated with those led by PMI, including routine insecticide-treated mosquito net distribution, case management and surveillance. •