Report of the Executive Director
Context for the 19th Board meeting

Financial and economic crisis

2008

- Ambitious demand and disbursement targets met
- Strong results and progress towards MDGs (“Green Report”)
- Increasing Global Fund role in health systems strengthening
- ASA transition

2009

- Anticipated high demand for further scale-up
- Financial constraints
- Implementation of new initiatives
- Post-ASA organizational development
Thank you
Report of the Executive Director
Thank you
Welcome to new Board members
## End 2008 results: top 3 indicators

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<th>Indicator</th>
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<td>HIV: People on ART</td>
<td>770 000</td>
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<td>TB: DOTS treatment</td>
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<td>54%</td>
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</table>
HIV prevention: expanding coverage

HIV counselling & testing
62 million people

STI cases treated
4.4 million

Behaviour change communications
91 million people reached

Condoms distributed in 2008
450 million

Prevention of mother-to-child transmission of HIV
445,000 HIV+ pregnant women
Expenditure on HIV prevention, 2008 EFR

- BCC - community outreach: 40%
- BCC - Mass media: 6%
- PMTCT: 15%
- Testing and Counseling: 17%
- STI diagnosis and treatment: 6%
- Condom distribution: 12%
- Blood safety and universal precaution: 4%
- BCC - community outreach: 40%
Impact: HIV


HIV prevalence among most-at-risk populations in Georgia 2004-2007

Reniers G. et al, AIDS 2009

Nineteenth Board Meeting
Geneva, 5-6 May 2009
End 2008 results: top 3 indicators

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Global estimate: about 500,000 new MDR-TB cases a year

Estimated number of people receiving treatment for MDR-TB through GF-supported programs at end 2008

Nineteenth Board Meeting
Geneva, 5-6 May 2009
Impact: TB

TB Prevalence per 100,000

TB Mortality per 100,000

Philippines
India
Lao PDR
Indonesia
China
70 million insecticide-treated nets distributed by end 2008
Malaria impact: cases in sampled health facilities in Ethiopia between 2003 and 2007

Otten M et al. Initial evidence of reduction of malaria cases and deaths in Rwanda and Ethiopia due to rapid scale-up of malaria prevention and treatment. *Malaria Journal*, 2009
Portfolio: US$ 7.6 billion disbursed through 600 grants in 140 countries

Approved Global Fund resources by disease component
December 2008

- Malaria: 30%
- HIV/AIDS: 56%
- TB: 14%

Approved Global Fund resources by region
December 2008

- Sub-Saharan Africa: 60%
- East Asia & Pacific: 13%
- Eastern Europe & Central Asia: 7%
- Latin America & the Caribbean: 8%
- South Asia: 7%
- Middle East & North Africa: 5%
Approved Global Fund resources by income level December 2008

- Lower Middle: 28%
- Middle: 8%
- Upper: 3%
- Low: 64%

Budget distribution by implementing entity 2007 calendar year

- NGO/CBO/FBO: 32%
- UNDP: 6%
- Other Multilateral: 3%
- Private sector: 3%
- Government (MoH-68%; Others-32%): 56%
Distribution of grant budgets by standard cost category, calendar year 2007

- Planning & Administration, 14%
- Human Resources, 13%
- Commodities & Products, 17%
- Infrastructure & Equipment, 11%
- Training, 12%
- Drugs, 27%
- Other, 5%
## Cross-cutting health systems support

<table>
<thead>
<tr>
<th>Funding stream</th>
<th>Year(s)</th>
<th>Approved total ($m)</th>
<th>Lifetime total ($m)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Round 7</td>
<td>2007</td>
<td>186</td>
<td>363</td>
</tr>
<tr>
<td>RCC</td>
<td>2007-08</td>
<td>191</td>
<td>450</td>
</tr>
<tr>
<td>Round 8</td>
<td>2008</td>
<td>283</td>
<td>592</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td><strong>660</strong></td>
<td><strong>1 405</strong></td>
</tr>
</tbody>
</table>
## Disbursement history

<table>
<thead>
<tr>
<th></th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disbursed ($ billion)</td>
<td>0.1</td>
<td>0.23</td>
<td>0.63</td>
<td>1.05</td>
<td>1.32</td>
<td>1.73</td>
<td>2.25</td>
<td>-</td>
</tr>
<tr>
<td>Target</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>1.4</td>
<td>1.7</td>
<td>2.2</td>
<td>2.9</td>
</tr>
<tr>
<td>Rate</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>94%</td>
<td>102%</td>
<td>102%</td>
<td>-</td>
</tr>
</tbody>
</table>
Grant signing

Round 7
- 85/90 grants signed before 12/12/08
- 5 extensions, signed by February 2009

Round 8
- 92/94 approved grants had completed TRP clarification process by May 1, 2009
- Indonesia HIV grants signed mid-April
Efficiency gains in negotiating Phase 1 of Round 8 grants
## Grant performance 2008-09

<table>
<thead>
<tr>
<th>Region</th>
<th>A</th>
<th>B1</th>
<th>B2</th>
<th>C</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>East Asia &amp; the Pacific</td>
<td>38 (59%)</td>
<td>21 (33%)</td>
<td>4 (6%)</td>
<td>1 (2%)</td>
<td>64</td>
</tr>
<tr>
<td>South Asia</td>
<td>22 (56%)</td>
<td>14 (36%)</td>
<td>2 (5%)</td>
<td>1 (3%)</td>
<td>39</td>
</tr>
<tr>
<td>Eastern Europe &amp; Central Asia</td>
<td>34 (64%)</td>
<td>17 (32%)</td>
<td>2 (4%)</td>
<td>0</td>
<td>53</td>
</tr>
<tr>
<td>Latin America &amp; the Caribbean</td>
<td>32 (67%)</td>
<td>12 (25%)</td>
<td>4 (8%)</td>
<td>0</td>
<td>48</td>
</tr>
<tr>
<td>North Africa &amp; the Middle East</td>
<td>12 (29%)</td>
<td>20 (48%)</td>
<td>7 (17%)</td>
<td>3 (7%)</td>
<td>42</td>
</tr>
<tr>
<td>SSA: East Africa</td>
<td>19 (43%)</td>
<td>16 (36%)</td>
<td>9 (20%)</td>
<td>0</td>
<td>44</td>
</tr>
<tr>
<td>SSA: Southern Africa</td>
<td>16 (35%)</td>
<td>17 (37%)</td>
<td>11(24%)</td>
<td>2 (4%)</td>
<td>46</td>
</tr>
<tr>
<td>SSA: West &amp; Central Africa</td>
<td>30 (45%)</td>
<td>26 (39%)</td>
<td>8 (12%)</td>
<td>2 (3%)</td>
<td>66</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>203 (50%)</strong></td>
<td><strong>143 (36%)</strong></td>
<td><strong>47 (12%)</strong></td>
<td><strong>9 (2%)</strong></td>
<td><strong>402</strong></td>
</tr>
</tbody>
</table>
**Phase 2**

- More than 120 countries have accessed Phase 2 funding in 351 grants
- Large majority of grants performing well (A1 and B-rated)
- No “no go” decisions in 2008

**Rolling Continuation Channel**

- Five waves completed; 6\(^{th}\) and 7\(^{th}\) waves under way
- In Waves 1 to 7, 35 per cent of the 202 eligible grants qualified for RCC
- Of the 52 qualified grants so far, 70 per cent have been approved, with a total value of more than US$ 1.5 billion
Risk Management

- Risk Management Framework
- Specific risk framework for Country Programs
- Additional Safeguards Policy
- Inspector General
PQR: Reported efavirenz 600mg prices compared to other price information sources

Efavirenz 600mg: Comparison of Prices Reported by GF, Other Sources, and MSF Manufacturer Survey 2004-2008YTD

Notes: There are likely significant differences in the inclusion or exclusion of shipping, insurance, and other charges in unit prices across the different sources.

Sources: GF prices from PRM and PQR; Other Sources from WHO’s GPRM; MSF Lowest price is lowest price for WHO Prequalified reported in “Untangling the Web of ARV Price Reductions”
Report of the Executive Director
Return on Investment (by 2012) in millions:

<table>
<thead>
<tr>
<th>Invest</th>
<th>Scenario</th>
<th>ARV</th>
<th>DOTS</th>
<th>ITN</th>
</tr>
</thead>
<tbody>
<tr>
<td>$13.5 bn</td>
<td>1</td>
<td>1.6</td>
<td>12.4</td>
<td>194</td>
</tr>
<tr>
<td>$16.0 bn</td>
<td>2</td>
<td>2.3</td>
<td>14.4</td>
<td>213</td>
</tr>
<tr>
<td>$16.4 bn</td>
<td>3</td>
<td>3.6</td>
<td>18.8</td>
<td>242</td>
</tr>
</tbody>
</table>

Mid-Term Review
ASA transition

- Employment contracts
- Human resources framework
- Provident Fund
- Health insurance
- Grade and salary structure
- Payroll
- Accounting
- Procurement
- Security services
- Travel service
- Occupational health and safety
Report of the Executive Director
Staff survey

• **Response rate of 77%**

• **Small improvement in most areas since 2007** (e.g. working across units, management, supervision, diversity) although *slightly weaker on others* (e.g. opportunities for learning and development, performance management).

• 3 very positive areas: *reward and recognition, employee engagement, and collaboration and teamwork.* High scores on *salary and benefits*, and feeling that *recognition* is given for a job done well.

• **Four categories are significantly below benchmark:**
  – Career advancement and development
  – Confidence in senior leadership’s ability to provide a clear sense of direction to staff
  – Organizational change
  – Internal communication

• These issues are viewed:
  – *more favourably* among those with < 2 years service and Grade Levels 1 and 2 as well as Grades 8, 9, 10.
  – *less favourably* among those with > 2 years service and Grades 3 to 7.
Secretariat efficiency gains

• Reinforcing a culture and message of efficiency

• Travel
  – Policy on business class entitlement changed from 6 hour → 9 hour journey
  – 10 day advance bookings

• Other areas for savings
  – Procurement
  – Publications, document-sharing, printing, copying
  – Facility rental and catering
  – Phone usage
Report of the Executive Director
Partnership Forum – Dakar – December 09
Board of Pacific Friends
February 09
Access to Life - Madrid
## The AMFm since New Delhi

<table>
<thead>
<tr>
<th>Date</th>
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<tr>
<td>Nov 08</td>
<td>Global Fund Board approves AMFm Phase 1 policy framework and implementation plan</td>
</tr>
<tr>
<td>Feb 09</td>
<td>RBM HWG holds consultative workshop with countries in Nairobi</td>
</tr>
<tr>
<td>March 09</td>
<td>Call for applications sent to 11 countries</td>
</tr>
<tr>
<td>April 17, 09</td>
<td>AMFm formally launched in Oslo</td>
</tr>
<tr>
<td>1 July 09</td>
<td>Deadline for applications</td>
</tr>
<tr>
<td>Aug/Sep 09</td>
<td>TRP assessment and report submitted to Board</td>
</tr>
<tr>
<td>Nov 09</td>
<td>Board approval</td>
</tr>
<tr>
<td>From Jan 2010</td>
<td>Grant amendment/signing for Phase 1, supporting interventions begin, confirmed orders of co-paid ACTs and distribution of ACTs in countries</td>
</tr>
<tr>
<td>Nov 10-Jan 11</td>
<td>End point for data collection for independent evaluation</td>
</tr>
<tr>
<td>2011</td>
<td>Board decision on further rollout</td>
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NSA First Learning Wave

7 countries have been invited to submit an NSA (8 disease components)