Francophone countries are a strategic area of focus for the Global Fund. The sustained commitment of francophone nations, coupled with strategic partnerships and increased domestic financing, has led to transformative results.

France, Belgium, Switzerland, Luxembourg and Canada joined the Global Fund to fight against AIDS, tuberculosis and malaria, three diseases that seemed unstoppable a decade ago. To date, the Global Fund has invested approximately US$8 billion in francophone countries which make up approximately 20 percent of the overall Global Fund portfolio.

As of the end of 2016, the Global Fund partnership has saved 2.7 million lives in francophone countries.¹

Key Results in Francophone Countries

<table>
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<tr>
<th>1.3 MILLION</th>
<th>2 MILLION</th>
<th>256 MILLION</th>
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<tbody>
<tr>
<td>PEOPLE ON ANTIRETROVIRAL THERAPY</td>
<td>PEOPLE TREATED FOR TUBERCULOSIS</td>
<td>MOSQUITO NETS DISTRIBUTED</td>
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The majority of Global Fund investments in La Francophonie are in West Africa, which carries a significant proportion of the world’s malaria and HIV burdens. Global Fund investment in these countries therefore tends to skew toward those two diseases, with 47 percent of total investments directed to HIV programs and 41 percent directed to malaria.

Malaria

About 313 million people are at risk for malaria in francophone countries. West Africa, which is predominately francophone, is disproportionally affected by malaria, and accounts for half of the global burden. The Global Fund partnership is making significant strides against the disease, which has led to a 66 percent decline in malaria mortality rates between 2000 and 2015 in francophone Africa. During the same period, malaria mortality rates dropped dramatically in Burkina Faso and Viet Nam – 70 percent and 89 percent respectively.

The Global Fund works with communities to ensure that young children and pregnant women in particular are protected by mosquito nets. In 2015, Benin, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Comoros, Côte d’Ivoire, Democratic Republic of the Congo, Guinea, Madagascar, Mali, Rwanda, Senegal and Togo all reported that more than half of the population at risk of malaria had access to an insecticide-treated net. Thanks to effective partnerships, the Global Fund is supporting mass distribution campaigns, allowing countries to achieve for the first time the milestone of universal coverage of insecticide-treated nets. In Togo, the successful implementation of the 2017 mass campaign has resulted in distribution of nets to 98 percent of the population.

The threat of malaria isn’t limited to West Africa. Drug-resistant malaria has emerged across the Greater Mekong region, which makes prevention and early treatment all the more important. In Cambodia, four out of five WHO-approved artemisinin-based combination therapies have failed. In response to this challenge, the Global Fund launched the Regional Artemisinin-resistance Initiative (RAI) to support countries to procure and distribute essential commodities, leading to a sharp drop in malaria deaths.

HIV

The HIV burden is lower in francophone African countries than in the rest of the continent; however, they account for 12 percent of all new HIV infections in sub-Saharan Africa. Through Global Fund-supported programs, antiretroviral therapy coverage in francophone Africa significantly increased from 4 percent in 2005 to 44 percent in 2016. AIDS-related deaths decreased by 78 percent in Rwanda and by 76 percent in Cambodia. Incidence rates declined by 91 percent in Côte d’Ivoire and 66 percent in Cameroon since 2000.

1 The Global Fund supports programs in 28 francophone countries: Benin, Burkina Faso, Burundi, Cambodia, Cameroon, Central African Republic, Chad, Comoros, Congo, Côte d’Ivoire, Democratic Republic of the Congo, Djibouti, Equatorial Guinea, Gabon, Guinea, Haiti, Lao (People’s Democratic Republic), Madagascar, Mali, Mauritania, Mauritius, Morocco, Niger, Rwanda, Senegal, Togo, Tunisia and Viet Nam.

Children under 5 are the most vulnerable to malaria. The Global Fund encourages using a comprehensive approach that combines education, prevention, diagnosis and treatment to protect them. In Niger, the Global Fund’s investments in integrated health care systems and malaria prevention programs have led to a significant decline in malaria cases in children under 5, which is contributing to a steep decline in child mortality. The 2016 seasonal malaria prevention campaign reached about 1 million children in Niger.
Tuberculosis
Through Global Fund-supported programs, TB mortality rates dropped by 62 percent in Viet Nam and 60 percent in Central African Republic between 2000 and 2016. These countries, along with Cambodia and the Democratic Republic of the Congo, are among the 30 nations considered to have a high burden of TB.

The partnership with Expertise France helped increase the success rate of the short regimen for multidrug-resistant TB by more than 30 percent. The Global Fund provides funding for multidrug-resistant TB treatment and Expertise France provides funds to the International Union against Tuberculosis and Lung Diseases for technical assistance in nine countries: Benin, Burkina Faso, Burundi, Cameroon, Central African Republic, Côte d’Ivoire, Democratic Republic of the Congo, Niger and Rwanda. In partnership with Stop TB and Unitaid, Global Fund support has helped expand rapid diagnostic testing across the region, increasing case detection and providing important TB/HIV integrated diagnostics.

Resilient and Sustainable Systems for Health
Strong health systems are essential for ending HIV, TB and malaria as epidemics, accelerating progress toward universal health coverage, and helping countries prepare for emerging threats to global health security. Following the Ebola outbreak in Guinea, which ended in May 2015 with the last known case, the Global Fund’s investments in the country focus on improving health infrastructure, strengthening supply chains, providing better access to health information and establishing an ambitious community health system to bring services closer to the people.

Global Fund investments complement bilateral donors’ efforts to strengthen community organizations in fighting the three diseases. The French Development Agency (AFD) and Expertise France have invested heavily in building the capacity of community organizations, many of which have become sub-recipients or Principal Recipients of Global Fund grants.

Challenging Operating Environments
Challenging operating environments are countries or regions affected by poor governance, disasters or conflict.

Countries in the Sahel are increasingly forced to dedicate a significant amount of their national budgets to address security threats. The Global Fund invests in the region to integrate health services in emergency responses and increase access to care for the most vulnerable populations.

Despite massive challenges, Haiti has made tremendous progress. With Global Fund support, antiretroviral therapy coverage has more than doubled between 2010 and 2016. Between 2010 and 2015, malaria incidence and mortality rates decreased by more than 40 percent. The Global Fund is collaborating with the World Bank to renovate 50 national health facilities.

Senegal has deployed 25,000 community health workers to provide lifesaving treatment in hard-to-reach rural areas. This initiative has yielded transformative results. Malaria mortality rates fell by 57 percent between 2000 and 2015, and 33 districts have reached the pre-elimination stage, an important milestone in the fight against malaria. The percentage of TB cases successfully treated and managed by community health workers reached 97 percent in 2016 – outperforming overall national success rates.
Overcoming Human Rights Barriers to Services

The Global Fund puts a strong emphasis on expanding comprehensive health and other support services for key populations and promotes their meaningful engagement throughout the planning and implementation of grants. Benin, Cameroon, Democratic Republic of Congo, Cote d’Ivoire and Senegal are among the 20 countries selected through a consultative process to receive intensive support over the next six years to develop inclusive responses to the three diseases.

Morocco’s Country Coordinating Mechanism (CCM), the body that designs and oversees implementation of Global Fund grants in the country, includes sex workers, men who have sex with men and people who inject drugs. These communities are disproportionately affected by HIV and TB, and often face stigma and discrimination. Their participation, insight and lived experience is essential to designing programs that reflect the needs of key populations.

Women and Girls

Adolescent girls and young women disproportionately suffer the burden of the HIV epidemic and TB co-infection in many contexts across sub-Saharan Africa. The Global Fund and partners are expanding innovative programs to meet this population’s unique needs and has committed an additional US$55 million for 2017-2019 for 13 of the most affected countries, including Cameroon. Approximately 60 percent of Global Fund investments benefitted women and girls in 2016.

Domestic Financing

Domestic financing is key to maintaining the gains achieved in the past 15 years, and to ensuring sustainability of national health programs. The Global Fund implements co-financing policies to increase domestic spending on health and reinforce country ownership. These efforts have already catalyzed an additional US$6 billion globally in domestic funding commitment for 2015-2017, which includes a 34 percent increase in domestic commitments for HIV, TB and malaria programs in francophone countries. During the Global Fund’s Fifth Replenishment Conference, francophone leaders President Macky Sall of Senegal, President Patrice Talon of Benin, President Alassane Ouattara of Côte d’Ivoire and President Faure Gnassingbe of Togo stepped up by making their first contributions to the Global Fund.

The number of women in the Democratic Republic of the Congo living with HIV who received antiretroviral therapy increased by 17 percent between 2010 and 2014. The Global Fund supports women-led community organizations working to address gender-based violence – a major driver for HIV transmission and a barrier to quality care. The country is making significant progress against the disease: incidence rates dropped by 85 percent and mortality rates decreased by 68 percent between 2000 and 2016.

About the Global Fund

About the Global Fund: The Global Fund is a 21st-century partnership designed to accelerate the end of AIDS, tuberculosis and malaria as epidemics. As a partnership between governments, civil society, the private sector and people affected by the diseases, the Global Fund mobilizes and invests nearly US$4 billion a year to support programs run by local experts in more than 100 countries. The Global Fund’s operating costs are approximately 2 percent of grants under management, reflecting an exceptionally high degree of efficiency. By challenging barriers and embracing innovative approaches, we are working together to better serve people affected by the diseases.

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