

STEP UP THE FIGHT

FOCUS ON GLOBAL HEALTH SECURITY



Microbes do not stop at national borders, so an infectious disease threat anywhere is a threat everywhere. Making our world safer from epidemics means strengthening the capacity of countries to prevent, detect and respond effectively to current and emerging health threats.

Strengthening global health security must start by protecting people from diseases they face today. HIV, TB and malaria are three of the world's largest infectious disease killers, accounting for 3 million deaths in 2017 alone.

More people are on the move than ever before, with 258 million people residing in a country other than their country of birth in 2017. Climate change is increasing the exposure of humans to vector-borne diseases. In our interconnected world of rapid global travel, every country is vulnerable to new and drug-resistant "superbugs." While causing tragic deaths and suffering, infectious diseases can also hurt economic growth and trade, increase migration and threaten development and stability.

With a mandate to end HIV, TB and malaria as epidemics, the Global Fund partnership plays a leading role in saving lives, preventing infections and fighting drug resistance for these diseases. Through investments on surveillance and laboratory capacity, training of health-care workers, supply chains and data gathering, the Global Fund is helping countries build resilient and sustainable systems for health to respond to the next infectious disease outbreak.

PROTECTING PEOPLE FROM HEALTH THREATS TODAY

Improved access to HIV treatment has cut the number of AIDS-related deaths in half since the peak in 2005, but under 1 million died from the disease in 2017. Tuberculosis is now the leading cause of death from infectious disease, with 1.3 million deaths per year, not including HIV co-infections. Worldwide, 36% of the 10 million people who get sick with TB were missed in 2017 – meaning they were not diagnosed, treated or reported. Global malaria death rates have dropped by 60 percent since 2000, and the number of children under the age of 5 who die from malaria has been sharply reduced. But the biological threats of drug and insecticide resistance have stalled progress against malaria. After many years of breathtaking progress, malaria is on the rise, with 219 million cases and 435,000 deaths from malaria in 2017. The Global Fund is the world's largest financier of the fight against these diseases, and has saved 27 million lives since its founding in 2002.

THE EVOLVING CHALLENGE OF GLOBAL HEALTH SECURITY

In the last decade, the world has seen dozens of deadly infectious disease outbreaks, including new diseases such as severe acute respiratory syndrome (SARS) and Middle East respiratory

syndrome, or previously rare illnesses like Zika. Old diseases have mutated into newer and more dangerous forms, such as H1N1 and H7N9 influenza and drug-resistant strains of age-old killers like tuberculosis and malaria. The next outbreak is a question of “when,” not “if.”

The 2014-2015 Ebola outbreak in West Africa illustrated how weak health systems can be quickly overwhelmed by the spread of a deadly infectious disease. Robust health systems that focus on prevention, detection and treatment are not only essential for ending HIV, TB and malaria as epidemics, but are our primary line of defense against outbreaks, helping countries prepare for emerging threats to regional or global health security.

BUILDING RESILIENT AND SUSTAINABLE SYSTEMS FOR HEALTH

Strengthening health systems is essential to end epidemics, and is a strategic pillar of the Global Fund. The Global Fund invests about US\$1 billion per year in strengthening health systems – from training of health personnel to improved supply chain and data quality to service delivery integration. The Global Fund supports the WHO TB Supranational Reference Laboratory Network, including funding for biosafety equipment at the newest member of the network, the National TB

Reference Laboratory in Cotonou, Benin, which is working to strengthen the capacity of other laboratories in West and Central Africa.

The Global Fund is supporting Sierra Leone's efforts to rebuild its health system following the Ebola outbreak, with a focus on training health workers, improving procurement and supply chains, strengthening diagnosis and detection techniques and implementing a more effective community approach.



In Nigeria, the Global Fund and partners are investing US\$20 million to support supply chain integration to address structural problems, reduce cost and speed up response times by improving the efficiency of the health product supply chain.

The Global Fund / Andrew Esiebo

The Global Fund / Nana Kofi Acquah



A nurse calls patients waiting to receive TB medication at the Connaughty Hospital clinic in Sierra Leone's capital Freetown. The Global Fund is supporting Sierra Leone to introduce treatment for multidrug-resistant TB, and is working to increase case notification of regular TB.

FIGHTING ANTIMICROBIAL RESISTANCE

Antimicrobial resistance – when organisms develop resistance to antimicrobial drugs – is one of the biggest threats to our future global health and economic security. If new treatments are not found, or if resistant infections are not diagnosed in time, untreated people will transmit the new more virulent strains to others. Mosquitos can also develop resistance to insecticides, reducing our ability to fight diseases. Increased travel, migration and trade means antimicrobial resistance is a global threat.

DRUG-RESISTANT TUBERCULOSIS

Deaths from drug-resistant TB now account for about one-third of all antimicrobial resistance deaths worldwide. Drug-resistant TB represents a potentially catastrophic risk to global health security, including to upper-income countries. Ukraine is one of the 30 countries in the world with the highest burden of multidrug-resistant forms of TB. Fighting TB in Ukraine is essential to the health security of Europe. Papua New Guinea has the highest number of new tuberculosis cases in the Pacific Island Region. To increase case detection and diagnosis, treatment coverage and multidrug-resistant case finding, the Global Fund supports the national response in Papua New Guinea.

The Global Fund provides more than 65 percent of international financing for TB and is a major source of funding for the drug-resistant TB response in low- and middle-income countries.

In addition to regular TB interventions, the Global Fund set aside US\$115 million for the implementation period 2018-2020 to stimulate additional efforts to find missing patients in 13 high-burden countries, representing three-quarters of the missing people with TB globally (Bangladesh, India, Indonesia, Myanmar, Pakistan, the Philippines, DRC, Kenya, Mozambique, Nigeria, South Africa, Tanzania and Ukraine). For the first time, the Global Fund is investing in two multicountry TB grants in the Asia region for the 2018-2020 cycle, which are responding to DR-TB among migrant workers and providing treatment to refugees and internally displaced people. The Global Fund is also rapidly rolling out newer and more effective short-course treatments for MDR-TB.

ARTEMISININ RESISTANCE IN THE MEKONG

The Greater Mekong is ground zero for the emergence of drug-resistant malaria, which threatens a devastating setback for the region and a major shock to health security. If the resistance seen in the Mekong were to spread to India or sub-Saharan Africa it would exact a huge toll in human lives and economic losses.

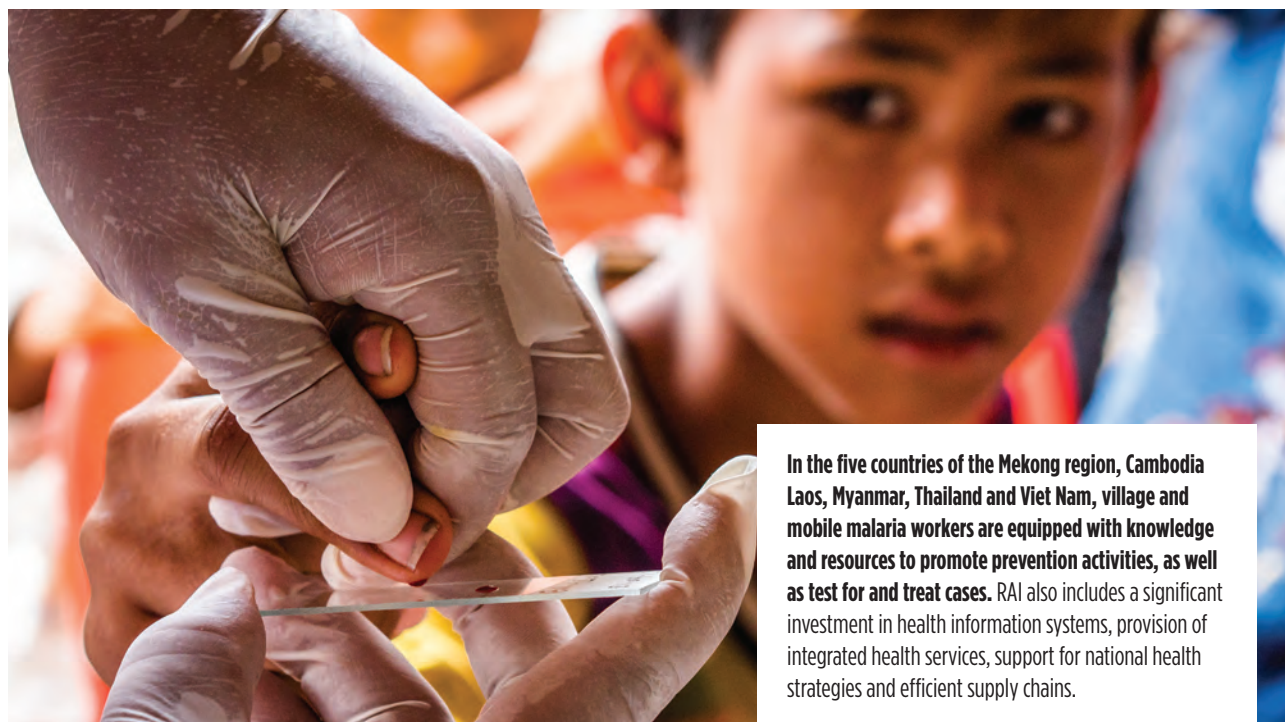
The Global Fund's Regional Artemisinin-resistance Initiative (RAI), our largest regional grant, is a coordinated effort between funders, multilateral agencies, technical partners, scientific researchers, communities, the private sector and governments. It is working: incidence rates have fallen by more than half since 2012, and death rates have plummeted by 84 percent.

HIV DRUG RESISTANCE

HIV strains that are resistant to HIV drugs (HIVDR) are a growing threat that could undermine global progress if early and effective action is not taken. Over 10 percent of people starting antiretroviral therapy have a strain of HIV that is resistant to some of the most widely used HIV medicines. Working with WHO, the Global Fund is putting a bigger focus on HIVDR surveillance, embedding program quality and efficiency, and rapidly expanding the newest treatment regimens that are more effective, cheaper, and less prone to inciting resistance.

QUICK FACTS: THE ECONOMIC COSTS OF INFECTIOUS DISEASES

- ▶ **The 2014-2015 Ebola outbreak in West Africa killed more than 11,000 people and resulted in US\$2.8 billion in economic losses in Guinea, Liberia and Sierra Leone alone.**
- ▶ **It is predicted that drug-resistant TB will cost the global economy approximately US\$17 trillion by 2050 if the problem is not addressed.**
- ▶ **WHO estimates that US\$4 trillion in economic gains would be generated by eliminating malaria by 2030.**



In the five countries of the Mekong region, Cambodia Laos, Myanmar, Thailand and Viet Nam, village and mobile malaria workers are equipped with knowledge and resources to promote prevention activities, as well as test for and treat cases. RAI also includes a significant investment in health information systems, provision of integrated health services, support for national health strategies and efficient supply chains.

HEALTH CARE FOR REFUGEES AND MIGRANTS

At the end of 2017, some 40 million people were internally displaced due to armed conflict, generalized violence or human rights violations; 25.4 million people were refugees. For refugees forced to flee to another country because of conflict or disaster, this often means moving to temporary or crowded camps where disease can easily spread and where health care is difficult to access. Many refugees also lose access to critical medications, such as for TB; drug resistance develops when people go on and off treatment. The Global Fund supports innovative approaches to reach people with prevention and treatment services wherever they go, including refugees and migrants. In the Middle East, we are supporting a regional grant to provide TB, HIV and malaria services in Syria, Yemen, Jordan and Lebanon. In Rwanda, we are working with UNHCR to address health needs for Burundian refugees, including HIV testing, counselling and treatment, indoor residual spraying of homes and schools to ward off mosquitoes, and TB screening and treatment.

EMERGENCY FUNDING

The Global Fund's policy on challenging operating environments provides flexible financing for emergency situations to allow a quick response to outbreaks. During the peak of the Ebola crisis, the Global Fund mobilized emergency funds to support antimalarial interventions in Sierra Leone and Liberia. Uganda and Sudan were also able to access emergency funds to support malaria programs strained by the influx of refugees from South Sudan. In Ecuador, the Global Fund mobilized funding to support HIV programs in response to the arrival of large numbers of Venezuelan migrants. The Emergency Fund also proved to be an effective financing mechanism to assist countries such as Mozambique and Zimbabwe, affected by cyclone Idai.



The Global Fund / Sarah Hoibak

**258 MILLION
INTERNATIONAL
MIGRANTS**

were counted globally in 2017 – people residing in a country other than their country of birth. This represented 3.4% of the world's total population.

STEP UP THE FIGHT

Ending the epidemics of HIV, TB and malaria by 2030 is within reach, but not yet firmly in our grasp. But after years of remarkable progress, new threats such as stalled funding and growing drug resistance have pushed us off track. We now face a decisive moment. Do we step up the fight, or do we allow ourselves to slip back? The Global Fund's fundraising target for the next three-year cycle is at least US\$14 billion. These funds will help save 16 million lives and cut the mortality rate from HIV, TB and malaria in half by 2023, while building stronger systems for health that will enable the achievement of universal health coverage. It is time to step up the fight.

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. By challenging barriers and embracing innovative approaches, we are working together to better serve people affected by the diseases.

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