The Global Fund has invested in eight lusophone countries - Angola, Brazil\(^1\), Cape Verde, Equatorial Guinea\(^2\), Guinea-Bissau, Mozambique, Sao Tome and Principe, and Timor-Leste - since its inception in 2002, and has a long-standing partnership with Portugal, a donor since 2003. These countries have been strong advocates of increased resources for the fight against AIDS, tuberculosis and malaria. Their sustained commitment, coupled with strategic partnerships and increased domestic financing, has led to transformative results.

The Global Fund has invested US$1.75 billion in lusophone countries to date, contributing to save 1.5 million lives. In 2019 alone, these investments have put more than 1.4 million people on antiretroviral therapy, treated nearly 175,000 tuberculosis cases, and distributed over 1 million mosquito nets to prevent malaria.

<table>
<thead>
<tr>
<th>Country</th>
<th>People on antiretroviral therapy for HIV</th>
<th>People with TB treated</th>
<th>Mosquito nets distributed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Angola</td>
<td>91,200</td>
<td>72,600</td>
<td>-</td>
</tr>
<tr>
<td>Cape Verde</td>
<td>2,390</td>
<td>199</td>
<td>-</td>
</tr>
<tr>
<td>Guinea-Bissau</td>
<td>15,900</td>
<td>2,410</td>
<td>101,000</td>
</tr>
<tr>
<td>Mozambique</td>
<td>1,340,000</td>
<td>95,100</td>
<td>796,000</td>
</tr>
<tr>
<td>Sao Tome and Principe</td>
<td>842</td>
<td>142</td>
<td>16,300</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>524</td>
<td>4,240</td>
<td>97,600</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>1,450,856</strong></td>
<td><strong>174,691</strong></td>
<td><strong>1,010,900</strong></td>
</tr>
</tbody>
</table>

\(^{1}\) Brazil is not eligible to Global Fund grants since 2011. Between 2002 and 2011, the Global Fund invested a total amount of US$38.6 million in the country.

\(^{2}\) Equatorial Guinea stopped receiving Global Fund grants in 2011. Between 2002 and 2011, the Global Fund invested a total amount of US$29.9 million in the country.
Angola

In 2016, the Global Fund allocated three grants to help stabilize the health sector, shocked by repeated disease outbreaks (yellow fever, malaria) and budget cuts due to an on-going fiscal crisis. Positive advances have been made in malaria with the roll-out of long-lasting insecticide-treated nets mass campaigns led by the Global Fund and the President’s Malaria Initiative (PMI). The Global Fund also launched the integrated community case management project with the participation of government-sponsored community health workers to provide timely and effective treatment of malaria, pneumonia and diarrhea to children under 5 in remote communities.

However, progress has stalled. In early 2020, the Global Fund and national stakeholders agreed on a series of short-term measures the government of Angola would implement to step up the fight against the three diseases. The roadmap includes, among other actions, strengthening the CCM – the committee responsible for developing and submitting a funding request to the Global Fund, and overseeing grant implementation – increasing domestic investments in health, and greater political engagement.

RESULTS

91,200 People on antiretroviral therapy for HIV in 2019

72,600 People with TB treated in 2019

Cape Verde

In Cape Verde, strong political leadership and a robust health system have resulted in significant gains in the fight against HIV, TB and malaria. The HIV prevalence rate is low, with pockets of higher prevalence among key populations. More than half of adults living with HIV have access to antiretroviral treatment. Cape Verde has also nearly eliminated mother-to-child transmission of HIV. The Global Fund provided financial support to equip the country with GeneXpert machines to enable HIV viral load screening and testing on children. The country has also achieved a dramatic decrease in reported cases of malaria since 2002. In partnership with local authorities, WHO and the RBM Partnership to End Malaria, the Global Fund has led indoor residual spraying operations to contain the disease. Since February 2018, Cabo Verde is malaria-free.

Future health investments in the country will focus on diagnosis and treatment of multidrug-resistant tuberculosis, addressing barriers to health care for key populations and programs that accelerate testing, treatment and suppression of HIV.

RESULTS

2,390 People on antiretroviral therapy for HIV in 2019

199 People with TB treated in 2019

FIGHTING TB IN LUSOPHONE COUNTRIES

Results in 2019 in the six lusophone countries where the global Fund currently invests

175,000 People with TB treated

123,000 Treatment success rate for all forms TB cases

31,000 Children under 5 in contact with TB patients received preventive therapy

2,750 Multidrug-/ rifampicin-resistant cases notified

1,980 Multidrug-/ rifampicin-resistant TB cases that began second-line treatment

33,600 HIV-positive TB patients on antiretroviral therapy during TB treatment

1,340,000 People living with HIV in care screened for TB

274,000 People living with HIV newly enrolled in HIV care on TB preventive therapy
**Guinea-Bissau**

The Global Fund is Guinea-Bissau’s largest financial partner for health, investing nearly US$100 million since 2003 and achieving significant results. In November 2017, the Global Fund provided additional funding of €13.5 million to reduce the incidence of tuberculosis by 25% and halve the mortality rate by 2020 (compared to 2013).

The investment also supported the country with its transition toward universal access to HIV prevention and treatment services by 2020. The Global Fund also provided a €16.1 million grant to support high-impact interventions, key prevention and treatment activities against malaria.

**RESULTS**

- **15,900** People on antiretroviral therapy for HIV in 2019
- **2,410** People with TB treated in 2019
- **101,000** Mosquito nets distributed in 2019

**Mozambique**

Mozambique and global health partners have achieved major impact over the years.

Since 2013, they have implemented together a rapid expansion of HIV treatment, increasing the number of people on antiretroviral therapy from 300,000 in 2012 to over 1.3 million in 2019. In 2019 alone, 95,100 people were treated for TB and nearly 800,000 mosquito nets were distributed.

**RESULTS**

- **1.3 million** People on antiretroviral therapy for HIV in 2019
- **95,100** People with TB treated in 2019
- **796,000** Mosquito nets distributed in 2019

In December 2017, Mozambique and the Global Fund signed six grants, totaling US$515 million, to support the reduction of malaria deaths and cases by 40% by 2022 (compared with 2015) and of new HIV infections and HIV-related deaths by 40% and TB death rates by 50% by 2020. Additionally, the resources support the improvement of the notification rate of all forms of TB (per 100,000 population) from 278 in 2016 to 352 in 2020.

Mozambique is one of the countries included in the Breaking Down Barriers initiative which provides intensive support, including US$45 million in additional funds in 2017-2019 and another US$41 million in 2020-2022 to 20 countries to vastly scale up evidence-based programming to reduce human rights-related barriers to HIV, TB and malaria services. For 2020-2022, the Global Fund has allocated US$751.5 million to Mozambique, a 49% increase from the previous allocation.

**Sao Tome and Principe**

The Global Fund has been supporting Sao Tome and Principe since 2005. Between 2008 and 2014, HIV prevalence has decreased from 1.5% to 0.5% for 15-49-year-olds and from 0.8% to 0.1% for 15-24-year-olds. The prevalence of malaria in the country has decreased from 5% to 0.2% and the mortality rate has fallen to zero since 2005. The country is in control phase on Sao Tome and in pre-elimination phase on Principe.

**RESULTS**

- **842** People on antiretroviral therapy for HIV in 2019
- **142** People with TB treated in 2019
- **16,300** Mosquito nets distributed in 2019

**Timor-Leste**

Timor-Leste has low HIV prevalence rates, but one of the highest estimated incidence and prevalence rates of tuberculosis in Southeast Asia. The country has experienced a dramatic reduction in malaria incidence for nearly 15 years and is on track to achieve malaria elimination status by 2022.

**RESULTS**

- **524** People on antiretroviral therapy for HIV in 2019
- **4,240** People with TB treated in 2019
- **97,600** Mosquito nets distributed in 2019

A health worker at the Centro de Saude dos Pescadores (Health Center of Pescadores) in Maputo, Mozambique, which provides services to fishing communities. The center offers a range of prevention and treatment services for HIV, TB and malaria.
Cumulative Disbursements of the Global Fund in Lusophone Countries
As of December 2019

Africa

- Cape Verde: USD 15.8 million
- Guinea-Bissau: USD 128.3 million
- Sao Tome and Principe: USD 31.3 million
- Equatorial Guinea: USD 29.8 million
- Angola: USD 279.5 million
- Mozambique: USD 1.16 billion

Southeast Asia

- Timor-Leste: USD 67.1 million

South America

- Brazil: USD 38.5 million
The COVID-19 pandemic is having a catastrophic impact on the most vulnerable communities around the world and threatens progress against HIV, TB and malaria.

Under the World Health Organization’s leadership, the Global Fund is using its experience working with partners and governments in more than 100 countries to coordinate our response on a massive global scale.

We are providing guidance, tools and immediate funding of more than US$1 billion to help countries fight COVID-19, mitigate the impacts on lifesaving HIV, TB and malaria programs, and prevent fragile health systems from being overwhelmed.

To date, the Global Fund has approved a total of US$811.2 million to support the COVID-19 response, including US$52.8 million in lusophone countries to support them in procuring personal protective equipment for health workers, strengthening laboratory surveillance and sample transportation capacity, and purchasing laboratory testing materials for COVID-19 preparedness and response.

### COVID-19 in Lusophone Countries where the Global Fund invests

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### COVID-19 cases and deaths trends in the Lusophone Countries where the Global Fund invests

(as of 26 October 2020)

<table>
<thead>
<tr>
<th>Country</th>
<th>Cumulative cases</th>
<th>Cumulative deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Angola</td>
<td>11 Jan 27 Jan</td>
<td>3 Jan 26 Oct</td>
</tr>
<tr>
<td>Cape Verde</td>
<td>12 Feb 3 May</td>
<td></td>
</tr>
<tr>
<td>Guinea-Bissau</td>
<td>19 Jun 18 May</td>
<td></td>
</tr>
<tr>
<td>Mozambique</td>
<td>5 Jul 16 Apr</td>
<td></td>
</tr>
<tr>
<td>Sao Tome and Principe</td>
<td>7 Sep 2 May</td>
<td></td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>23 Sep 3 Jun</td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>14000</strong></td>
<td><strong>300</strong></td>
</tr>
</tbody>
</table>

### Global Fund COVID-19 investments in Lusophone Countries

(as of 26 October 2020)

<table>
<thead>
<tr>
<th>Country</th>
<th>Funds from the COVID-19 Response Mechanism (US$)</th>
<th>Part of funding spent to purchase and distribute diagnostic tests (US$)</th>
<th>Funds from Grant Flexibilities (US$)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Angola</td>
<td>4,956,021</td>
<td>2,698,877</td>
<td>1,581,988</td>
</tr>
<tr>
<td>Cape Verde</td>
<td>288,307</td>
<td>175,400</td>
<td>95,987</td>
</tr>
<tr>
<td>Guinea-Bissau</td>
<td>3,438,952</td>
<td>79,201</td>
<td>864,094</td>
</tr>
<tr>
<td>Mozambique</td>
<td>38,059,779</td>
<td>10,830,462</td>
<td>2,562,791</td>
</tr>
<tr>
<td>Sao Tome and Principe</td>
<td>456,242</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>-</td>
<td>-</td>
<td>524,904</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>47,199,301</strong></td>
<td><strong>13,783,940</strong></td>
<td><strong>5,629,764</strong></td>
</tr>
</tbody>
</table>

Total COVID-19 investments **US$52.8 million**
Health worker Arrelina Nestho performs a malaria test on Manuel dos Santos Moniz, a cook, at the Centro de Saude dos Pescadores in Maputo, Mozambique.

Resilient, Sustainable Systems for Health

Robust systems for health are not only essential to ending HIV, TB and malaria as epidemics, but they yield broader outcomes, delivering health care in a sustainable, equitable and effective way. The Global Fund dedicates one-quarter of its investments to address areas that are critical for stronger health systems, including training for community health workers, and strengthening laboratories, data management and supply chains.

Women and girls

Women and girls continue to be disproportionately affected by HIV, TB and malaria. Gender inequality, discrimination, violence, limited access to education and a lack of tailored services inhibit women’s and girls’ access to health care and fuel new infections. Worldwide, nearly 1,000 young women and girls are infected with HIV every day. The Global Fund has committed over US$60 million in catalytic funding for 2020-2022 for the most affected countries in Southern and East Africa, which includes Mozambique, to support integrated prevention, treatment and care programs for adolescent girls and young women.

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.