The Global Fund COVID-19 Update to the Board

44TH BOARD MEETING, 11-12 NOVEMBER 2020 | GENEVA, SWITZERLAND
This document is an annex to the **COVID-19 Response and Business Continuity** informal paper, presented to the Board at the 44th Board Meeting (11-12 November 2020). The slides contained provide further context and background support to the paper.
Agenda

- Recap of the COVID-19 context
- The Global Fund’s response
- Looking ahead
Recap of the COVID-19 context
The Global Fund’s response
Looking ahead
The COVID-19 pandemic continues to escalate rapidly, as seen through global and regional epidemiological trends.

Over 42 million confirmed cases and over 1.1 million confirmed deaths globally as of October 2020.

The Americas remain heavily affected by the pandemic, accounting for 36% of daily cases and 48% of daily deaths. The majority of countries in Latin America are experiencing sustained community transmission.

The pandemic continues to expand in Africa, although the rate of growth has recently slowed - daily change in the WHO African Region is currently 0.4%, down from over 3% at the end of July.

Daily cases are increasing exponentially in much of Europe, with a lagged increase in deaths.

Although cases in India appear to be declining after a first peak; with over 7.9 million recorded cases, it is the most affected country in Asia.

The ten most affected countries with current GF grants are India, Colombia, Peru, South Africa, Iran, Iraq, Bangladesh, Indonesia, Philippines and Ukraine.

Source: World Health Organization Coronavirus Dashboard
Around the world, both national lockdown and national Covid-19 response have improved since May. Less than half of countries (39%) remain in national lockdown and 79% of countries have costed response plans.

### National Lockdown (%)

<table>
<thead>
<tr>
<th>Period</th>
<th>High Impact</th>
<th>Latin America</th>
<th>Western Africa</th>
</tr>
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<tbody>
<tr>
<td>1 May - 1 Jun</td>
<td>15</td>
<td>12</td>
<td>15</td>
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<tr>
<td>1 Jun - 1 Jul</td>
<td>15</td>
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<tr>
<td>1 Jul - 1 Aug</td>
<td>17</td>
<td>20</td>
<td>20</td>
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<tr>
<td>1 Aug - 1 Sep</td>
<td>21</td>
<td>21</td>
<td>20</td>
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<tr>
<td>1 Sep - 1 Oct</td>
<td>20</td>
<td>20</td>
<td>20</td>
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### National COVID-19 response plan in place (%)

<table>
<thead>
<tr>
<th>Period</th>
<th>High Impact</th>
<th>Latin America</th>
<th>Western Africa</th>
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</thead>
<tbody>
<tr>
<td>1 May - 1 Jun</td>
<td>54</td>
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<tr>
<td>1 Jun - 1 Jul</td>
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<td>1 Jul - 1 Aug</td>
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<td>1 Aug - 1 Sep</td>
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<tr>
<td>1 Sep - 1 Oct</td>
<td>43</td>
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High Impact Africa 2, Latin America, and Western Africa report the highest disruption in Grant Implementation among all Global Fund regions in the latest survey results (1 Oct 2020).

### Grant Implementation Disruption by Region

- **High Risk**
  - HIA 2
  - LAC
  - WA
  - CA
  - SE Asia
  - HIA 1
  - SA
  - HI Asia
  - EECA

- **Low Risk**

Source: Global Fund COVID-19 Country Monitoring Tool. All data updated following 1 October edition of data shared by countries.
We are seeing levels of disruption in service delivery, national stocks, and supply chain.

**Level of disruption to service, products and in-country systems**

### As of 1 October

<table>
<thead>
<tr>
<th>Service Delivery</th>
<th>HIV</th>
<th>TB</th>
<th>Malaria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disruption Level</td>
<td>Low</td>
<td>Moderate</td>
<td>High</td>
</tr>
<tr>
<td>Disruption Level</td>
<td>2.2</td>
<td>1.9</td>
<td>2.2</td>
</tr>
</tbody>
</table>

### National Stock

<table>
<thead>
<tr>
<th>National Stock</th>
<th>HIV</th>
<th>TB</th>
<th>Malaria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disruption Level</td>
<td>Low</td>
<td>Moderate</td>
<td>High</td>
</tr>
<tr>
<td>Disruption Level</td>
<td>2.3</td>
<td>2.0</td>
<td>2.1</td>
</tr>
</tbody>
</table>

### Supply Chain

<table>
<thead>
<tr>
<th>Supply Chain</th>
<th>Distribution</th>
<th>Warehouse</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disruption Level</td>
<td>Low</td>
<td>Moderate</td>
</tr>
<tr>
<td>Disruption Level</td>
<td>1.5</td>
<td>1.3</td>
</tr>
</tbody>
</table>

**Implementation Challenges**

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<tr>
<th>Group</th>
<th>Comment</th>
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| Community Service | Community-based service are mostly impacted still, while attendance at health facilities continues to be depressed.
| Supply Chain | While still a persistent issue, procurement issues and delays due to the breaking down of the global supply chain were not reported as much as in previous rounds. However, distribution is being increasingly cited as an issue.
| HIV | Prevention, testing (HTS) and PLWHIV groups are still the most impacted. Reaching KPs has remained difficult as typical hotspots remain closed—this is particularly true for SW and less a problem with PWID.
| TB | Routine activities are largely unimpacted, with active case finding still most impacted. Improvement in several countries, but there is still depressed turnout at health facilities due to Covid-19 fears and transportation issues.
| Malaria | The most cited disruptions in malaria programs were the inability to do large scale trainings, workshops, and other meetings. LLIN and other distribution campaigns are largely unaffected, though some slight delays may be incurred.

**Source:** Global Fund COVID-19 Country Monitoring Tool
Modelling predicts HIV, TB and malaria deaths could as much as double in the next year due to COVID-19, derailing years of progress.

**HIV/AIDS**
- Additional **AIDS-related deaths** in 12 months over 2020-21 vs 2018 as a result of COVID-19 (in Sub-Saharan Africa), due to:
  - Access to treatment disrupted, thus increased mortality / reduced PMTCT
  - HIV testing reduced, thus possible increased incidence
  - Community-based service delivery scaled back, having a direct impact on KPs

**Tuberculosis**
- Additional **TB deaths** in 2020 vs 2018 as a result of COVID-19 (globally), due to:
  - Lab services disrupted, hence lower case notifications/increase missing cases
  - TB patients at higher-risk, therefore higher TB/COVID-19 mortality
  - Similarity between COVID-19 and TB, hence stigma in providing care

**Malaria**
- Additional **malaria deaths** in 2020 vs 2018 as a result of COVID-19 (in Sub-Saharan Africa), due to:
  - Bednet distribution delayed, thus increase in infections
  - Drug stock-outs leading to reduced anti-malarial availability
  - Similarity in initial symptoms, hence stigma in seeking and providing care

**SOURCE:** The Global Fund Results Report 2020
The COVID-19 pandemic continues to also affect the Secretariat with the volatile crisis situation in Geneva (1/2)

The crisis situation in Switzerland remains very volatile with a huge spike over the past 2 weeks and reaching a peak of ~9000 positive cases/day, creating a risk for the organization and staff:

- The Geneva Canton is now in a lockdown, effective 2 November, for at least 4 weeks.
- Swiss government and Geneva Cantonal measures are changing regularly.
- Switzerland is also on the high-risk travel list of many countries.
The COVID-19 pandemic continues to also affect the Secretariat with the volatile crisis situation in Geneva (2/2)

...affecting Secretariat regular operations in various ways

| Limited in-person capacity | From 19 October, for **safe physical distancing** following government guidelines, staff was asked to work from home (recommended) with cases rising. From 3 November, **the GHC is closed** with Geneva in lockdown  
|                          | Over the course of October, **20 staff members** have tested positive for COVID-19 – far more than in the first phase of the pandemic up to October |
| Travel & border restrictions | The **internal travel ban** affects the way we operate with countries, donors & partners  
|                          | **Travel & quarantine restrictions** also created **disruption in recruitment** together with increased surge recruitment and **relocation** challenges  
|                          | In addition, due to **extended period of working remotely** and in some cases outside the Geneva area, there was a need to investigate **regulatory (legal/tax) implications** |
| Workload demands | COVID-19 has created an **increase in workload demands and stress**, as teams engage in our crisis response and take on additional activities, on top of an **already busy year in the grant cycle & strategy development**  
|                          | This has led to some **delays in long-term HR activities planned to decrease these risks**, mostly due to **reduced capacity** of Secretariat counterparts |
| Family & health constraints | This crisis has also added tensions of **increased home demands**, along with **family and health constraints**, **reducing Secretariat capacity** (e.g. balancing WfH with no available childcare)  
|                          | Some staff **family members/friends** are also being **impacted negatively by COVID-19** in their home countries |
Recap of the COVID-19 context

The Global Fund’s response

(a) Keeping our people safe
(b) Protecting our core mission
(c) Helping countries we invest in respond to COVID-19
(d) Our role in the global COVID-19 response

Looking ahead
THE GLOBAL FUND’S RESPONSE: (a) KEEPING OUR PEOPLE SAFE

Internally, the Situation Response Team continues to focus on duty of care for our staff’s safety and ensuring business continuity

Context for the Situation Response Team & the Keep Our People Safe stream

- In response to the COVID-19 disruptions to our workforce, the Secretariat established early on a dedicated Situation Response Team under the Head of Human Resources' lead

- With a cross-functional governance structure in place for the Global Fund and the GHC Partners, this group continues to meet regularly for decision-making, oversight and monitoring of the situation and response measures, with weekly updates to the MEC and Board

- Regular Board updates have been well attended with an ED progress report and a Q&A, to complement update emails and COVID-19 reports and sessions with Committees in March & July

- The SRT follows established and GHC-aligned principles of evidence-based decision-making for a proportional response to ensure duty of care to keep our people safe and business continuity to deliver on our mission – all in consideration of 4 defined sources of information, including national authorities, the Geneva hospital and the WHO

- Even with materialized disruptions in our HR capacity, we continue to rise to the occasion to mitigate risks, focus prioritization, and redeploy resources to successfully continue operations

- The response has followed and adaptive and phased approach, with: 1) an escalation period in the GHC since end of February, 2) a decision to move to 100% teleworking on March 16, 3) a de-escalation period to return to the workplace in phases starting with up to 20% on June 8, followed by 45% on July 6 and 4) a return to teleworking effective 19 October, with full closure of the GHC on 3 November after a lockdown in Geneva and a spike in cases and hospitalizations across Switzerland
THE GLOBAL FUND’S RESPONSE: (a) KEEPING OUR PEOPLE SAFE

We continue to successfully support our workforce and business operations in light of the disruptions…

The Secretariat has ensured continuous engagement and support to all staff and the business through various levers, including:

- **Dedicated COVID-19 inbox**: Managed by Situation Response Team for 100% timely responses to staff questions.
- **Pulse surveys**: In September, a staff survey analyzed staff feedback on GF leadership culture during COVID-19.
  - Engagement scores at 95% - an all-time high.
  - Leadership scores at 79%
  - Communication scores at 90%
  - Wellbeing scores at 45% - an all-time low.
- **Business Contingency Plans**: Implementation of BCPs for all business processes in Performance & Accountability framework – outlining risk disruption scenarios & mitigation plans, prioritization, interdependencies management, and more under oversight & review by cross-functional screening team, SRT and MEC.
- **Triggers & Measures**: Defined & monitored prior to each step of the crisis in alignment with GHC Partners.
- **Increased communication**:
  - Six successful virtual Town Halls with record-high participation of ~650-760 staff
  - At least bi-weekly all-staff emails from Head of HR
  - Panel discussions for mental health support
  - HR and Staff Counsellor psychological support
  - Support guides for managers on work-life balance, teleworking, emotional resources, and more
  - HR team trained on supporting domestic violence & building resilience

- **HR Processes**: Pushed the SwissCovid App to GF phones, recommending its use in order to minimize risk of transmission through contact tracing.

Continued adaptation to minimize risk impact on the organization (e.g. virtual onboardings, on-time remote pay-roll, investment mgmt. like health insurance, Global Fund provident fund, and more)
… and monitor the situation to mitigate continued risks related to our people

### Continued risks

- **Workload & capacity**: the Workload Analysis showed an 11% decrease in staff capacity, with peaks of 25-40% in certain areas of the organization at the peak of the crisis – all combined with increased workload due to grant making & strategy development year and additional activities introduced in response to the COVID-19 pandemic.

- **Staff productivity & risk of burnout**: there is an increased risk of staff burnout and productivity loss due to COVID-19 impact on employees or their family members, and a partially virtual environment. In early July, staff annual leave balance were on average 40-50% higher than previous years, and we had >$1MM in accrued leave. There is a risk of employees not taking time to rest, shifting to home working without daily face-to-face interactions with colleagues and blurring balance between home and work.

- **Keeping our people safe in the GHC**: There is an increased risk of staff falling sick as well as possibility of partial lockdown that could lead to important productivity loss.

- **Crisis management**: The sustainability of the crisis management continues to be demanding given the lasting and rapidly changing nature of the crisis & government/travel measures.

### Mitigation actions

- To mitigate these risks, the SRT & security team continue to monitor the situation daily with recurring meetings 2x/week.

- HR & MEC continues to support managers and staff through aforementioned resources/actions to mitigate workload, capacity & people risks – ensuring that department capacity needs are addressed while balancing burnout risks.

- Many activities shifted online for business continuity, such as virtual hiring and onboarding, learning and development workshops, and country, donor and partner interactions.

- A successful annual leave campaign was put in place to encourage staff to take leave & rest for sustainability of their work. End of August data showed a significant improvement in terms of staff taking leave, while still remaining flexible to address emergency requests.

- We continue to reinforce GHC safety measures in place, and all COVID-19 cases have followed self-isolation & contact tracing procedures, preventing any GHC transmission.

- Most risk mitigation activities are embedded in business-as-usual processes, and we continue to compensate efforts impacted by the crisis through streamlined crisis response measures.
# Recap of the COVID-19 context

# The Global Fund’s response

(a) Keeping our people safe

(b) Protecting our core mission

(c) Helping countries we invest in respond to COVID-19

(d) Our role in the global COVID-19 response

# Looking ahead
Despite COVID-19 disruptions, grant-making and funding request development is continuing as per normal (1/2)

US$ allocation under review, by TRP window, as of 23 October, 2020

- In Windows 1 and 2, 110 out of 120 funding requests \((92\%)\) were recommended for grant-making, representing \$9.4 billion in allocation funds. \$1.9 billion was under review in October (and November as needed)
- \$255 million in catalytic matching funds and \$124 million in catalytic multi-country funds were also recommended for grant-making
- Approximately 58 funding requests, with a value of \$1.3 billion, are still in development and will be reviewed in 2021

Source: GOS; Allocation amount is current program split (if agreed) or communicated allocation
Despite COVID-19 disruptions, grant-making and funding request development is continuing as per normal (2/2)

Grants under review at Grant Approvals Committee, as of 23 October, 2020

- 171 grants representing $9.3 billion are currently registered for GAC recommendation, and Board approval, in the second half of 2020.
- With COVID-19 impacting in-country capacity there is a risk that not all grants will be signed on time, potentially resulting in a higher volume of bridge letters or extensions than in the previous cycle.
- The Secretariat is focusing all available resources on supporting grant-making, grant review and grant signing in these final few months of 2020.
THE GLOBAL FUND’S RESPONSE: (b) PROTECTING OUR CORE MISSION

We are on track for the adapted Strategy development process despite the COVID-19 disruptions

Since the Strategy development process was adapted to the context of COVID-19 in March 2020, the process has successfully been adjusted to the new environment and continues to be driven forward, with:

- **Adapted SC and Board process**
  - Adapted SC and Board consultation process, with series of SC cluster calls and Board retreats taking place over Q4 2020
  - Extensive background documents to support Constituency preparation, distilling evidence, input and context

- **Open Consultation & Website Launched**
  - Almost 250 responses from individuals and stakeholder groups; input continuing through 2020
  - Responses span all regions, across stakeholder groups, responses in 5 languages
  - Wealth of landscaping analyses and background materials produced, with partner input
  - Website visited > 3,200 times, 84% returning visitors, 109 countries reached
  - > 700 downloads of open consultation, landscaping and other background documents

- **Constituency and Partnership Consultations**
  - Assistance provided to 24 Constituencies, Implementer & Donor Groups for their consultations
  - >20 stakeholder groups in GF partnership assisted with consultations (e.g. GFAN, W4GF, Friends, ACB, Youth Council, JWG)
  - CRG topic consultations to be hosted in Q4; many more continuing externally across GF partnership

- **Partner Strategy Development**
  - Continued engagement across partner organizations and GAP to align, coordinate and ensure respective strategy development processes work together for strengthened impact
Thoughtful deployment of business contingency plans & flexibilities supported continuity of programs, Secretariat processes, and staff wellbeing…

Business contingency plans (BCPs)

BCPs were developed by each division/department, focused on:

- **Internal Secretariat operations**
- **Grant facing processes**

They established a graded response based on:

- **Extent of disruptions**, especially due to potential reduction in Secretariat capacity
- **In-country disruptions** and travel restrictions

BCPs supported:

- Program continuity (current implementation & design and approval of new grants)
- Greater prioritization for impact
- Continuity of key Secretariat processes
- Wellbeing and safety of Global Fund staff

Flexibilities

- **Countries / implementers**
  - Extended timelines for grant reporting
  - Provided additional rolling funding request submission windows and TRP reviews
  - Supported CCMs to conduct remote reviews (8-10 CCMs benefited from these flexibilities)

- **Health products**
  - Streamlined QA on pre-shipment testing
  - Extended delivery deadline for health products
  - Advance Ordering Mechanism for C19 health products

- **IT Systems**
  - Robust arrangement for delegated approvals
  - Enhancements to facilitate remote working & systems adaptation to accommodate business flexibilities
  - Rolling out IT Business Contingency Management System and heightened IT security

- **Resourcing of new workstreams**
  - Enabled timely and effective C19RM staffing

Each flexibility is tied to 1) **level of disruptions**, 2) Review and approval **due process** as required and 3) **monitoring mechanism**
THE GLOBAL FUND’S RESPONSE: (b) PROTECTING OUR CORE MISSION

...including through a robust IT response to COVID-19 disruptions

**Operationalize teleworking capabilities**
- MS Teams roll out to 700+ users with training, tips & digital workplace guidance
- Enablement of remote working: including IT equipment and assistance for a monthly average of 15,000+ virtual meetings across four different platforms.
- Continued success of virtual sessions including the Board, Audit and Finance Committee, Strategy Committee, GAC, TRP sessions and all staff Town Halls.
- Door-to-door delivery of new and/or replaced equipment for staff during the teleworking period & remote to on-site online printing capability
- Provision of mobile devices to Global Fund consultants
- Our Digital Workplace team are in the process of launching ‘Get the most out of meetings’ guidance, support and video to enhance the virtual working experience.

**Ensure critical business function continuity & flexibility**
- IT BCP in place, aligned to organizational requirements & being implemented
- Identified ‘32’ COVID-19 related needs from seven departments including cross cutting needs. 47% of these activities completed as at 23 October 2020
- Assessed and commenced 33 BCP related initiatives across IT functions and one additional cross cutting response. 70% of these activities completed as at 23 October 2020
- Focus on secure remote connectivity to key digital platforms such as Office 365, Oracle, Kyriba, Salesforce, ServiceNow, Tableau, Coupa, BlueJeans, and the external website.
- Validation that third party vendors continuity and disaster recovery plans meet our requirements.

**Support to country teams and civil societies**

**IT support to PRs, SRs, CCMs and Civil Society**

As of 23rd October 2020:

- 810 licenses deployed across 58 countries
- MS Teams licenses rolled out to 54 countries totaling 698 licenses
- BlueJeans licenses rolled out to 25 countries totaling 112 licenses
- 4G routers & data cards also dispatched

**The focus has been on enhancing the security and flexibility of key platforms, alongside specific COVID-19 interventions for finance and on GOS and Wambo.**
- Activate Multi Factor Authentication (MFA) for all Global Fund users
- Work initiated on an email encryption project with a secure email gateway to protect against phishing, email fraud and other threats to users.
- We have enhanced our cybersecurity incident response, including an on-call cyber forensic team provided by a key vendor.
- Vendor security resources have been onboarded to support key activities including security patching and remediation – to manage increased vulnerabilities during COVID-19 identified
- Roll out of security training course to all staff (E.g. Email compromise training)
Since we remain in a crisis situation, Business Contingency Planning (BCP) flexibilities also remain essential.

**Current situation:**

- **COVID-19 situation continues to remain fragile in the countries we support** and Europe is also witnessing a second large wave with increased infections - return to pre-COVID-19 state is even more protracted at this stage.
- Countries continue to have travel restrictions and been in and out of national or local lock-downs, which limits the GF, technical partners and GF’s assurance providers to provide adequate support or oversight.
- Workload peak for Funding Request/Grant Making in Q4 2020/Q1 2021.
- **Supply side disruptions** for ATM health products likely to be protracted and worsen if COVID-19 disruptions continue.
- **Unmet demand for COVID-19 supplies** (diagnostics, PPEs and therapeutics).
- **Data gaps** to measure extent of impact of COVID-19 on essential health services including ATM to initiate adequate mitigating actions.

**Path forward:**

- Thanks to Board and Executive Director approval, the Secretariat will continue its operations under the Business Contingency plans at least until 31 March 2021, and retain the flexibilities approved under the BCP including some of the Board approved provisions (C19RM, limited exceptions to QA policy):
  - Prioritization of key deliverables/processes.
  - Manage and secure IT systems.
  - Implementing SO initiatives to ensure commodity security.
  - Delegation of authority process ensuring resilience.
- The approved governance mechanism through **Situation Response Team** will continue to ensure agility and ensure decisions are taken at the appropriate level to adequately manage ensuing risks.
- The Secretariat will continue to focus on **wellbeing and safety** of Global Fund staff and the implementers of Global Fund-supported programs (PRs/SRs/front-line workers).
We continue to monitor disruption on Secretariat Performance & Accountability processes to actively mitgate risks

While we saw disruptions in Secretariat operations due to COVID-19…

…we continue to actively mitigate disruptions through various mechanisms

- The Performance & Accountability team continues to assess progress on all major GF business processes each quarter, reporting on pre-defined metrics
- The Business Contingency Planning monitoring of risk levels, disruption scenarios and flexibilities used has been streamlined and tied to the P&A reporting process, with some defined limited processes monitored more regularly on a monthly basis
- The Situation Response Team, Core Operations and Secretariat Enabling Functions continue to act on any identified risks or bottlenecks, to ensure we can continue to deliver on our core mission

Results from internal P&A Analysis on COVID-19 disruption to Secretariat processes, Q2 Survey*

- Of core grant-facing processes are experiencing moderate or higher-level disruption: 76%
- Of processes foresee further or increased disruption: 50%
- Of processes facing disruption are enacting flexibilities and changes to ensure business continuity: 64%
- Increase in roles being filled compared to last year with significant challenges to onboarding (to be confirmed ahead of committee meeting): 33%

* All figures (except recruitment figures) are an extract of the Q2 Performance & Accountability progress report. Q3 results reporting currently being consolidated; preliminary results showing lower disruption than Q3
Core business risks: There still are four key risks we currently face

1. Monitoring the true extent of disruptions:
   - Data gaps on the extent of disruptions have significantly limited ability of various stakeholders to measure the adequacy of mitigating actions: LFA COVID-19 Monitoring Survey; Key Results/Indicator Monitoring; Partner Collaboration

2. Ensuring quality of funding requests and grant-making:
   - Competing priorities between current grant implementation, funding requests / grant-making and managing grant revisions (C19RM) present challenge of delays in execution and rigor to established standards: Strong GF Partnership and TRP engagement; BCP Flexibilities for funding requests and grant-making

3. Securing IT and Communication:
   - Very high dependency on IT and communication systems and tools to ensure business continuity due to remote working, and heightened IT security risk due to phishing attacks: Extended IT support to Secretariat/CCM-PR/governing structures to facilitate remote working and continued collaboration; IT Business Contingency Management Systems; enhanced diligence on key financial operations; enhanced IT security

4. Delivering sufficient supply of ATM health products:
   - Supply side constraints and delays in delivery across all product categories, data gaps to triangulate reports of risks of stockouts and disruptions in government/partner supported procurements: Proactive management for early order placement for ATM to mitigate disruptions - currently well mitigated; strengthening coordination with partners to improve demand forecast
## Recap of the COVID-19 context

## The Global Fund’s response

(a) Keeping our people safe  
(b) Protecting our core mission  
(c) Helping countries we invest in respond to COVID-19  
(d) Our role in the global COVID-19 response

## Looking ahead
Since the start of the COVID-19 crisis, the Global Fund has deployed over $800 million to support countries in their response

- The Global Fund has deployed $811 million (up to 23 October 2020) to support countries’ COVID-19 responses
- This includes $217 million in grant flexibilities and $594 million through the COVID-19 Response Mechanism (C19RM)
- Funding has been deployed across 107 countries and 13 multi-country regions
The Secretariat made grant flexibilities operational in early March (<100k infections were registered globally), allowing countries to take advantage of rapid Global Fund decision-making.

Uptake by countries was immediate: half of all approvals to date made in March & April.

Source of funds predominantly from savings (>90%); very little reprogramming was used.

Use of savings is attractive for countries: funds are readily accessible for COVID-19 responses and are usually already in-country.

Our grant flexibilities have provided rapid support to countries since March to mobilize resources to fight COVID-19 (1/2)

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Grant flexibility amounts approved and # of decisions made per day, Y axis on left: Amounts, Y axis on right: # of decisions

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Our grant flexibilities have provided rapid support to countries since March to mobilize resources to fight COVID-19 (1/2)
Our grant flexibilities have provided rapid support to countries since March to mobilize resources to fight COVID-19 (2/2)

Grant flexibility amounts approved in 2020 per period, blue bars = total

- Total approved: $217 million (by 23 October 2020)
- 342 grant flexibility approvals, 94 countries & 13 regional grants; covering all Global Fund Regions
- Funding has gone towards the expected activities: infection control, diagnosis, information campaigns and training, protecting Global Fund disease programs
- While the average of approved amounts is much smaller compared to C19RM approvals, grant flexibilities provide a very fast decision-making process in reaction to emerging needs. Most countries have used flexibilities more than once
- July approvals were offset by adjusting earlier decisions where former grant flexibilities are now financed through C19RM, thus balance is zero
C19RM has provided $594 million in funds to Global Fund-supported countries fighting the pandemic

In addition to the $217 million of grant flexibilities, the Global Fund has approved a total of $594 million for C19RM (by 23 October 2020) to support the COVID-19 response.

$594 million from C19RM has funded:

- $200 million (34%) for mitigating COVID-19’s impact on HIV, TB and malaria programs;
- $328 million (55%) for reinforcing national COVID-19 responses; and
- $67 million (11%) for urgent improvements in health and community systems.

The target of approving $500 million by 31 July was achieved successfully.

This also includes funding of $117 million for COVID-19 diagnostics and $201 million for Personal Protective Equipment (PPE).

All awards have been consistent with WHO technical guidance and were made based on Country Coordinating Mechanism (CCM)-endorsed requests.
Selected country cases show how Global Fund resources have directly supported countries in the COVID-19 environment (1/2)

Burkina Faso (HIV)

- The network of 17,000 CHWs, supported by the Government of Burkina Faso and the Global Fund, was trained and mobilized for COVID-19 contact tracing at community level.
- The Government, the CSO PR for the GF grant and community representatives met together to prepare the contingency plan for continuity of services, and submitted a joint order for PPE.

Panama (HIV)

- Since April 2020 Panama has supported ARV home delivery. With financial support from the Global Fund, PEPFAR and other donors, Panama is working with peer navigators and fast delivery transport companies to deliver treatment to PLHIV to homes across the country.
- For those who still want to pick up treatment from health facilities, the delivery schedules are maintained.
Patients in Myanmar with suspected COVID-19 infection are also receiving a chest X-ray to detect TB.

In addition, TB patients receive medication for three months to avoid multiple visits to health facilities. Patients are monitored through mobile phone calls to avoid crowding in health facilities.

All staff in direct contact with TB patients received personal protective equipment.

Sputum transportation was strengthened so to avoid that presumptive patients need to visit testing sites.
## COVID-19 response risks: There are still various key risks that we are actively mitigating

<table>
<thead>
<tr>
<th>Risk</th>
<th>Risk Drivers</th>
<th>Mitigation Plans</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Inadequate resources to support adequate response to COVID-19</strong></td>
<td><strong>Demand and supply side constraints for COVID-19 health products:</strong> Challenges in demand planning and forecasting given the evolving nature of pandemic. Supply side constraints and challenges in securing sufficient volumes of highly demanded health products for low and middle income countries.</td>
<td>Global Partnership as part of ACT Accelerator. Leveraging Global Fund business for preferential supplier agreements.</td>
</tr>
<tr>
<td></td>
<td><strong>Evolving nature of COVID-19 response and mitigation plans:</strong> Shift from mitigating impact of lock downs and travel restrictions to mitigating impact of COVID-19 on service delivery including catch-up plans, innovations for community engagement, and addressing human rights- and gender-related barriers to seeking health services.</td>
<td>Maintaining agility and flexibility with C19RM and grant flexibilities.</td>
</tr>
<tr>
<td><strong>Competing priorities and diversion of attention from core mission</strong></td>
<td><strong>Operational burden on Secretariat/Partner/CCM attention:</strong> Competing priorities to implement current grants to maximal potential, developing ambitious and quality funding requests and finalizing grant revisions to incorporate C19RM funds.</td>
<td>Streamlining decision-making process and extension of BCP flexibilities only where necessary. BCP and end-to-end C19RM monitoring as an early warning tool.</td>
</tr>
<tr>
<td><strong>Rapid deployment &amp; Limited control on downstream dependencies</strong></td>
<td><strong>Warehousing, distribution and use of Dx/PPE (funded by grant flex or C19RM):</strong> COVID-19 diagnostics and PPE prone to misappropriation due to high demand and limited supply. Procurement related risks (quality, fair pricing, irregularities) for in-country procurements.</td>
<td>Use of national systems for warehousing and distribution. Preferential use of Wambo / PPM / UNICEF channels. Risk based targeted reviews by LFAs.</td>
</tr>
<tr>
<td></td>
<td><strong>Use of funds and absorption:</strong> Risk of diversion of funds and low absorption perceived to be low.</td>
<td>All C19RM investments governed by same assurance framework as parent grants.</td>
</tr>
</tbody>
</table>
To mitigate the risks to our COVID-19 response, various activities are put in place to ensure proactive monitoring and risk assurance.

**Monitoring the situation and impact**

- **Global Fund COVID-19 Country Monitoring Survey** is completed by Local Fund Agents every 2 weeks from the beginning of May for 106 countries consolidating the views of various in-country stakeholders. It identifies potential risks and disruptions to programs due to COVID-19.

- A sub-set of **performance framework indicators** will be reported by PRs monthly in 39 selected high-impact and core countries contributing the most to Global Fund results. This will provide additional monthly monitoring of COVID-19 disruptions to service delivery for HIV, TB and malaria in Global Fund-supported programs.

- **Spot checks to verify the level of disruptions to service delivery caused by COVID-19 at facility and community level** will be conducted by LFAs in 38 selected high-impact and core countries in Q4 2020-Q1 2021.

**Adapting and tailoring assurance activities**

- **LFA Guidance on Risk and Assurance, including Financial Risk Management, during COVID-19** was released. It outlines contingency measures to address challenges in executing assurance activities caused by COVID-19 disruptions, including risk-based prioritization of LFA services and aligning assurance activities with any new emerging risks and challenges, mitigating impact of delays and facilitating remote reviews.

- **GF’s Grant Operating System was updated** to monitor LFA verifications pending due to COVID-19 disruptions.

**Assurance over new activities / funding**

- **LFA Guidelines for COVID-19 Funding related assurance activities** were released. They provide guidance on various assurance activities to be performed in countries which receive COVID-19 funds, whether through C19RM or grant flexibilities, special emphasis is placed on the assurance with respect to funding area *Actions to reinforce the response to COVID-19*, in particular procurement reviews in case of local procurement, supply chain and service delivery reviews for all goods/services/treatments.
We are also seeing that the majority of Local Fund Agents are experiencing low or moderate levels of disruption in their services.

To what degree are the LFA services and deliverables impacted by the COVID-19 pandemic*

Key points

- Local Fund Agents continue to provide assurance services with 99% experiencing low or moderate levels of disruption of their services. Currently only one country is experiencing a high level of LFA capacity disruption.

- Travel restrictions (68% of countries) and access to information (47% of countries) continue to be the key barriers affecting timely delivery of LFA services.

- As of 30 September 2020 the LFA service completion was on a similar level compared to the same period in 2019 even though in some cases LFAs had to adjust their way of working to respond to the COVID-19 challenges.

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Lessons learned from the few months of C19RM deployment indicate our support remains critical to countries

Lessons are reviewed on a regular basis to inform process streamlining and improvements

**Lessons learned so far from the first few months of C19RM include:**

- **Launching two complementary mechanisms** was a useful way to balance need for emergency interventions and more robust processes.

- **C19RM** was slower than anticipated to get going, but has been **highly effective in converting funding requests into approval decisions:** While it took 55 days to set up the more robust processes for C19RM, the turnaround time of 10 days from start of funding request review to the applicant being notified of the decision is achieved in 81% of the cases.

- Requiring that **C19RM funding requests be channelled through CCMs has been vital**, but also not without challenges: this ensured inclusivity of the process, but preparing funding requests during lockdowns and some cases of CCMs not sufficiently in tune with the national responses presented challenges.

- **Countries’ perceptions of their needs are evolving as the pandemic progresses**, which is noted in the quality of the funding requests: As countries gain a better overview of their response needs, including for diagnostics and PPE, the quality of funding requests increases.

- Some of the Global Fund’s **operational processes need further streamlining and adaptation to enable the speed and flexibility required** in a crisis and to minimize transaction costs. Incorporating C19RM funds in regular grants through grant revision has been more burdensome and time-consuming than anticipated. A deep-dive identified methods to further streamline processes and increase efficiency, while also permitting for reprogramming with C19RM Investment Committee oversight, to adapt to evolving pandemic
Using the Global Fund’s pooled procurement mechanism on the Wambo requisition platform for C19RM has helped countries and Principal Recipients access COVID-19 commodities

Background and context:

- During the initial phase of the COVID-19 pandemic, the Global Fund decided to make Wambo available for countries to procure high-performing COVID commodities in order to balance the need to respond quickly while providing visibility, control and compliance.

- Wambo has allowed PRs to get immediate access to GF existing supplier agreements (e.g., Abbott, Cepheid, SD Biosensor Dx tests) and procurement platforms (e.g., UNICEF).

- From May until August, WHO designated Global Fund as the sole procurement channel for Abbott and Cepheid COVID-19 tests for GF-eligible countries (UNICEF was the sole channel for Roche and Thermo Fisher tests).

- For other products, including antigen rapid tests, personal protective equipment (PPE) and oxygen, Principal Recipients are encouraged but not required to use Wambo.

Key insights:

- **3.2M** diagnostic tests procured through Wambo (2.2M PCR and 1M RDTs) with total value of **$49M**

- **$67M** of Personal Protection Equipment (PPE) procured through Wambo

- **78** countries used Wambo for C19RM procurement for diagnostics (70 countries), PPE (43 countries) and Oxygen (3 countries), all using Global Fund grant funds
# Agenda

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<th>Recap of the COVID-19 context</th>
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<tr>
<td>The Global Fund’s response</td>
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<td>(a) Keeping our people safe</td>
</tr>
<tr>
<td>(b) Protecting our core mission</td>
</tr>
<tr>
<td>(c) Helping countries we invest in respond to COVID-19</td>
</tr>
<tr>
<td>(d) Our role in the global COVID-19 response</td>
</tr>
<tr>
<td>Looking ahead</td>
</tr>
</tbody>
</table>
Continuing to leverage our Partnerships (e.g., WHO Consortium & ACT-A across diagnostics, therapeutics and the Health Systems Connector) – a few specific examples:

- Gates Foundation and others have reserved capacity of 120M antigen rapid tests (Ag RDTs) over 6 months
- Collaborating with UNICEF to procure Ag RDTs and therapeutics

**Diagnostics**

- In-scope products (focused on tests):
  - COVID-19 PCR tests
  - Instruments
  - Testing software
  - Swap & extraction kits

**PPE**

- In-scope products:
  - Health equipment such as:
    - Face masks / shields
    - Protective clothing
    - Gloves
    - Goggles

**Therapeutics**

- In-scope products:
  - Approved therapeutics

**Oxygen**

- In-scope products:
  - Oxygen therapy (e.g., ventilators)
  - Oxygen concentrators

**Partner collaboration**

- Procured 2M+ diagnostic tests (Abbott & Cepheid) as part of WHO Dx Consortium
- Made available $200M+ for PPE through C19RM, which countries are procuring locally and via PPM (UNICEF)
- Beginning to procure up to $50M in antigen RDTs (~10M tests) for low- & middle-income countries globally
And we have taken initial actions based on lessons learned from the Global Fund’s COVID-19 commodity response thus far.

### Reminder: Takeaways from July

- As we move past **the initial emergency phase**, the Global Fund should try to **return towards a more business-as-usual approach**.

- We must **make strides to adapt our current processes** while **using surge resourcing to ensure value delivery** across the three diseases and COVID-19.

### Actions we have taken

- The Global Fund is working with other Partners in the Consortium to move to a **coordinated procurement approach**, which will help the Consortium work more effectively with suppliers to allocate constrained volumes.

- We improved the diagnostic **allocation model** with feedback from countries on their **testing capacity**.

- We have **approved surge resources** within Supply Operations to support the COVID-19 response.
The Global Fund is also a founding partner of the ACT-Accelerator and is playing a leading role in its operations.

Global Stewardship ACT-A Council

Facilitation group to oversee & report progress, mobilize resources, engage with stakeholders

Public sector and private not-for-profit partners, such as:

- EU, Canada, France, Germany, Italy, Japan, Norway, Spain, UK
- BMGF, WEF, Wellcome Trust, coordination hub from WHO

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Vaccine Partnership

- CEPI (co-convener)
- WHO (lead on product allocation)

- Research
- Foundations
- International organizations

GAVI (co-convener)

Therapeutics Partnership

- Therapeutics Accelerator (co-convener)
- WHO (lead on product allocation)
- Global Fund (lead on procurement and deployment)

- Research
- Industry
- Regulators
- Funders
- International organizations
- CSOs & communities

UNITAID (co-convener)

Diagnostics Partnership

- FIND (co-convener)
- WHO (lead on product allocation)

- Research
- Industry
- Regulators
- Funders
- International organizations
- CSOs & communities

Global Fund (co-convener)

Health Systems Connector

World Bank & Global Fund (co-conveners)
The Secretariat developed a COVID-19 community and civil society engagement mitigation plan (1/2)

The Secretariat developed an internal plan to **mitigate the impact of COVID-19 on community & civil society engagement** in Global Fund processes.

**The objectives are:**

1. Maintain **robust community & civil society engagement** in country dialogues, funding request development and grant-making
2. Monitor **human rights violations** and access to services
3. Maintain **community and civil society advocacy**
4. Ensure **meaningful engagement** in the development of the next **Global Fund Strategy**
5. Engage **private sector partners** to support safe virtual engagement
## THE GLOBAL FUND’S RESPONSE: (d) OUR ROLE IN THE GLOBAL COVID-19 RESPONSE

### The Secretariat developed a COVID-19 community and civil society engagement mitigation plan (2/2)

<table>
<thead>
<tr>
<th>Community and civil society engagement and responses on COVID-19</th>
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</thead>
<tbody>
<tr>
<td><strong>Engagement in Global Fund processes</strong></td>
</tr>
<tr>
<td>▪ CRG Regional Platforms have engaged in a range of regionally specific activities to monitor impact of COVID-19 on communities and services, as well as share best practices for overcoming challenges</td>
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<tr>
<td>▪ GMD held 7 Civil Society Roundtables to hear from communities and civil society on how they are adapting during COVID-19 and what challenges they face; a global civil society roundtable to share cross-regional perspectives scheduled for 5 November.</td>
</tr>
<tr>
<td>▪ A survey was distributed with the CCM Hub to obtain feedback on GF efforts to engage communities and civil society in C19RM; finding will be discussed on a series of calls with communities and CS in October. The survey was sent to over 1800 CCM members from Civil Society/Community and distributed by the CRG Regional Platforms. <strong>283 people</strong> from civil society/community responded. The survey was available in Spanish, French, Portuguese and English.</td>
</tr>
<tr>
<td>▪ The PCSA team has engaged civil society/community in resource mobilization for C19RM to support national responses.</td>
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<tr>
<td><strong>Virtual community engagement</strong></td>
</tr>
<tr>
<td>▪ Providing <strong>virtual technical assistance</strong> through the CRG Strategic Initiative and the Human Rights Strategic Initiative to enhance meaningful engagement of communities</td>
</tr>
<tr>
<td>▪ The Executive Director held 3 virtual meetings with GF Youth Council to discuss experiences during COVID-19 and perspectives on the post-2022 Strategy.</td>
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<tr>
<td>▪ Strategy Development: Adapting approach to community/CS engagement in in light of COVID-19 limitations; Secretariat regularly participating in community/C.S.-led virtual Strategy consultations; increased participation anticipated throughout Q3/Q4</td>
</tr>
<tr>
<td>▪ Virtual pre-meetings being planned for January 2021 to support engagement of community and civil society members attending GF Strategy Partnership Forums</td>
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<tr>
<td>▪ We are working with PCSA, SPH, L&amp;G, CCM Hub, IT and PSE to identify internet connectivity solutions for community and C.S. members participating in 2021’s Partnership Forums</td>
</tr>
<tr>
<td><strong>Engagement with media and Partners</strong></td>
</tr>
<tr>
<td>▪ We provided funding to develop GNP+ Voice platform in partnership with UNAIDS, WHO, UNICEF, Avert, Aidsfonds, and Y+ Global. Launched in Q3.</td>
</tr>
<tr>
<td>▪ ACT-A: The Global Fund has played a leadership role in supporting the principle and roles of civil society and community engagement across streams and generating dialogue across key actors from communities</td>
</tr>
<tr>
<td>▪ PCSA allocated resources to civil society for ACT-A engagement, including supporting the Pan African Network of COVID-19 survivors to document their experiences</td>
</tr>
<tr>
<td>▪ ACT-A HSx: The GF co-convenes this pillar and co-leads the Community Responses workstream within it. The workstream focuses on ensuring ACT-A is cognizant of roles of community/CS in the delivery of COVID-19 tools and the broader COVID-19 response and ensures community responses support provided is “Joined up”</td>
</tr>
<tr>
<td>▪ To date: Costed cross-cutting support to community/CS responses to COVID-19; Mapping where CS/Com responses are relevant and priority used; Organized joint meetings between workstreams in ACT-A working on similar community elements. Next steps: Series of meetings where community led organizations can present experience as relevant to different pillars and propose support mechanisms for community responses</td>
</tr>
</tbody>
</table>
Agenda

Recap of the COVID-19 context
The Global Fund’s response
Looking ahead
Resource mobilization efforts have been ongoing throughout the course of the year…

**Ongoing resource mobilization for COVID-19 response**

- *Pledges made from donors:* Since last discussed, pledges for the COVID-19 response have included Germany, Canada, Denmark, Italy, Sweden and FIFA

- *Additional funds:* These additional pledges will result in additional funds amounting to approximately USD 228 million for C19RM*

**6th Replenishment conversion**

- To the end of September, over US $5.6B in agreements signed against the pledges announced for the 6th Replenishment with 31 out of 58 public donors having so far signed mostly multi-year contribution agreements (expected to increase before the end of the year)

- 22 public donors have paid their 2020 contributions in full (15) or in part (7) with others expected to make their payments in the coming months

- The Secretariat continues to closely monitor and actively mitigate risks related to pledge conversion

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* Subject to AFC approval of an additional amount of USD 53 million as available sources of funds (GF/AFC14/EDP02), and an additional USD 10 million, to be submitted by the Secretariat for a further AFC decision

** All figures are as at end-September 2020 as per Resource Mobilization update to the Board, and at fixed 6th Replenishment exchange rates.
… but despite playing our part with the resources we could mobilize, C19RM funding is now running out

- Based on the Global Fund’s projections, the current funding – including through ACT-A – is expected to be deployed by the end of the year
- Additional contributions are critical to continue fighting the pandemic in Global Fund-supported countries
- Given the remaining pipeline of demand, the Board approved an extension of the C19RM mandate till 15 April 2021

* Subject to AFC approval of an additional amount of USD 53 million as available sources of funds (GF/AFC14/EDP02), and an additional USD 10 million, to be submitted by the Secretariat for a further AFC decision
The Global Fund needs further resourcing in order to fight COVID-19 and protect the gains on the 3 diseases

GF funding need for COVID-19

- As stated in the Global Fund’s June 2020 report on “Mitigating the impact of COVID-19 on AIDS, TB and Malaria”, the Global Fund still needs ~$5 billion to mitigate the impact of COVID-19 on the 3 diseases, boost national COVID-19 response plans, and urgently improve health and community systems

- Without this funding, we risk falling behind on our core mission and fail to deliver on the Global Fund’s 2017-2022 Strategy targets as health and community systems are overwhelmed, treatment and prevention programs are disrupted, and resources are diverted away from core programs

- It is critical for us and our partners to mobilize – we must Unite to Fight

GF mitigation plan as a part of ACT-A total need

Note: All figures in USD billion
- ACT-A total need
- GF implementing countries total need
- GF share

GF share adds to $6 billion; our current funding stands at ~$1 billion, thus ~$5 billion still required

Note: ACT-A therapeutics total estimated need is US$11.6 billion, including community and domestic contributions. Out of this, the total ask of ACT-A is US$7.2 billion. For more information, please refer to the ACTA Tx Investment Case. ACT-A health systems total estimated need is US$15.8 billion. Out of this, the total ask of ACT-A is US$9 billion.
We must mobilize additional resources to continue to play our part in ACT-A

ACT-A total ask and funding gap

<table>
<thead>
<tr>
<th>Category</th>
<th>Total ask¹</th>
<th>Proportion pledged</th>
<th>Funding gap</th>
<th>Urgent gap²</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vaccines</td>
<td>$38B</td>
<td>$4B</td>
<td>$34B</td>
<td>$6B</td>
</tr>
<tr>
<td>Therapeutics</td>
<td>$16B</td>
<td>$3B</td>
<td>$13B</td>
<td>$1B</td>
</tr>
<tr>
<td>Diagnostics</td>
<td>$7B</td>
<td>$0.3B</td>
<td>$7B</td>
<td>$1B</td>
</tr>
<tr>
<td>Health Systems</td>
<td>$6B</td>
<td>$0.3B</td>
<td>$6B</td>
<td>$2B</td>
</tr>
<tr>
<td></td>
<td>$9B</td>
<td>$0.1B</td>
<td>$9B</td>
<td>$2B</td>
</tr>
</tbody>
</table>

Why is an increase in ACT-A funding needed?

- Trillions are being allocated to address COVID-19’s economic and social impact in HIC, but overall investments to address the disease itself have remained modest.

- Of the estimated $38 billion ACT-A “ask” across vaccines, therapeutics, diagnostics and health systems tools, only ~$4 billion – about 10% – has been committed.

- If funding does not increase significantly, COVID-19 will likely continue to spread, with the human & economic costs continuing to spiral. The poorest and most vulnerable will be left behind and unable to access existing & new tools to fight the pandemic.

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¹ As of 21 September 2020
² Currently being reviewed by co-conveners ahead of the 2nd Facilitation Council Meeting

Source: An economic investment case & financing requirements September 2020 – December 2021
Going forward, COVID-19 remains a crisis and remains a major threat to the Global Fund’s mission

- As mentioned during past Board calls and in past Committee discussions, COVID-19 is still a crisis. It continues to cause difficulties in the countries we support, and disruptions to the Global Fund staff.

- To keep progressing against the 3 diseases in a crucial year when an implementation cycle is ending and a new grant cycle begins, the Global Fund must keep its focus on mitigating COVID-19’s impact on AIDS, TB and malaria – the extension of Business Contingency Plans will help with this.

- We will maintain our four-pronged approach to mitigate risks & impact on our core mission programs, with the need to maintain or scale up COVID-19 related mitigation responses reflected in the 2021 OPEX budget.

- The Executive Director will continue to update the Board on our approach to COVID-19 across the various pillars through regular calls and reports as, past updates have been well-received.

- We will return to the Board if over US$500 million in additional contributions are secured, or if any extensions are required beyond the spring of 2021.

- Support from the Global Fund’s partners is critical if we are to remain on track to accomplish our mission of ending AIDS, TB and malaria as epidemics.