

# Update on resource mobilization for UQD

February 2015

Geneva

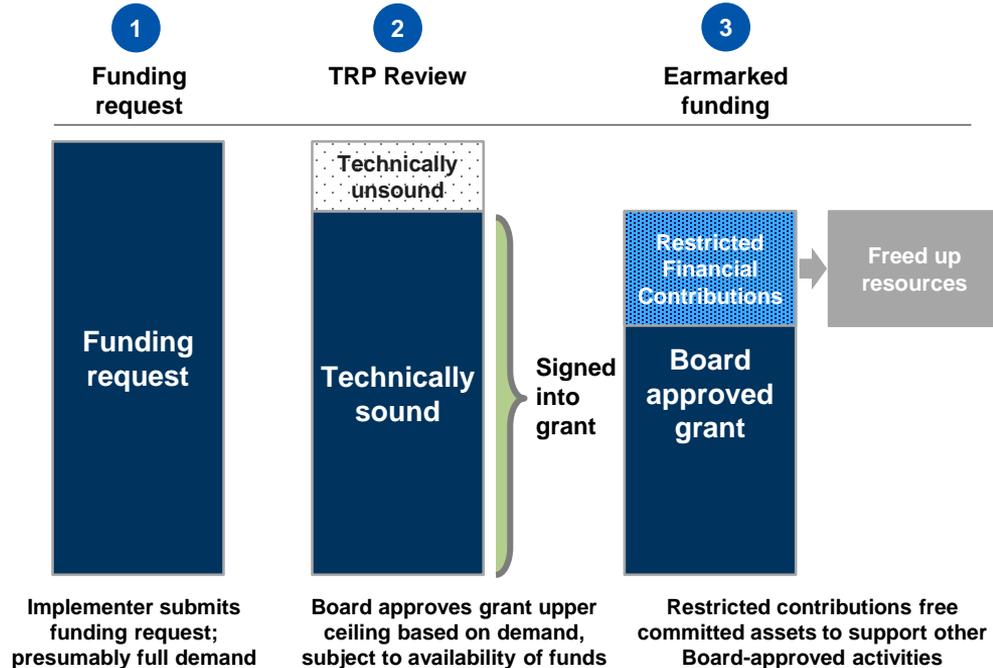
Webinar with GFAN and partners

# Overview

- 1) Policy framework for PS donor and authorized public mechanisms contributions to UQD
- 2) The UQD Register in the broader resource mobilization strategy

# The former Policy on restricted financial contributions (PRFC)

An overview of the notional earmarking mechanism



## Overview

- PS, D2H, UNITAID
- Contribution to Board-approved grants and Secretariat activities
- Not resulting in unreasonable transaction costs, system changes or deviation from GF rules
- Restrictions at level of disease, region, grant, procurement component

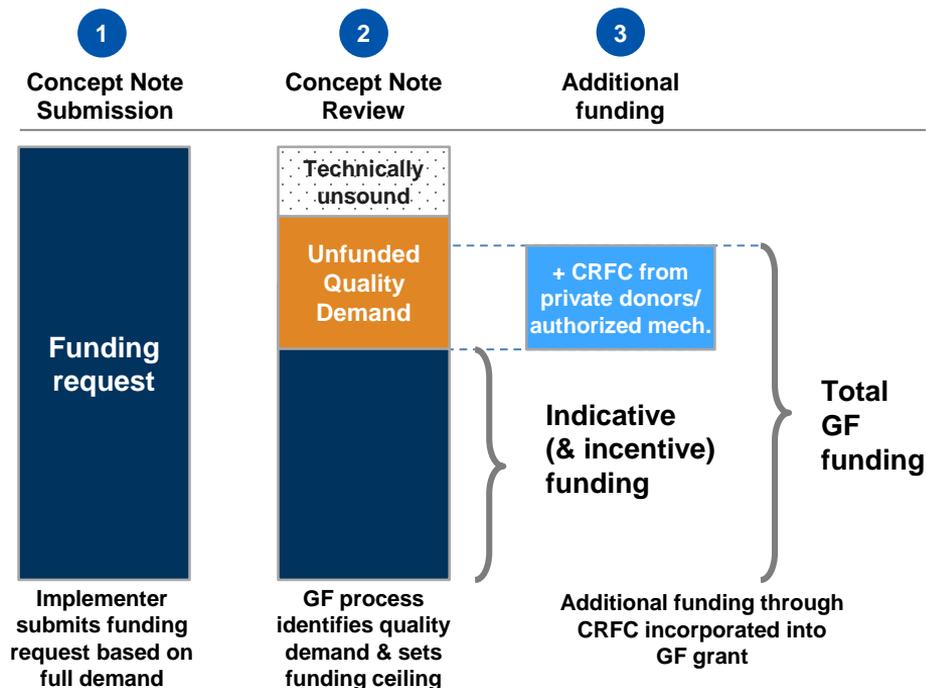
## Results (2008-2016)

- PS – USD 333 million
- D2H – USD 106 million
- UNITAID – USD 39 million

**Restricted financial contributions are contributions provided by private donors &/or authorized public mechanisms with restrictions on how they may be used.**

# Complementary restricted financial contributions (CRFC)

An overview of how certain categories of donor could ' earmark ' to UQD



## Principles

- GF process to ensure quality & complementarity with GF investment
- Similar vetting process & reporting requirements for all private donors regardless of the type of contribution so no significant transaction costs, system changes or deviation from GF rules
- Restrictions remain at level of disease, region, grant, procurement component

## Projections

- US\$ 200 million additional funding for the current allocation period (1% of initial GF allocation amount for 2014-2016)

**Complementary restricted financial contributions enable eligible donors to target contributions towards UQD/part of UQD to complement the country's initial allocation and any incentive funding.**

# Complementary restricted financial contributions (CRFC)

## Overview of the policy

### 1. Comply with Guiding Principles

- Limited to those from private donors and authorized public mechanisms
- Support grants approved by Board and activities of the Secretariat in line with the recipient-driven, Board-determined priorities
- Not result in unreasonable transaction costs for the Global Fund or substantial changes to Global Fund systems and processes

### 2. Restrictions on CRFC

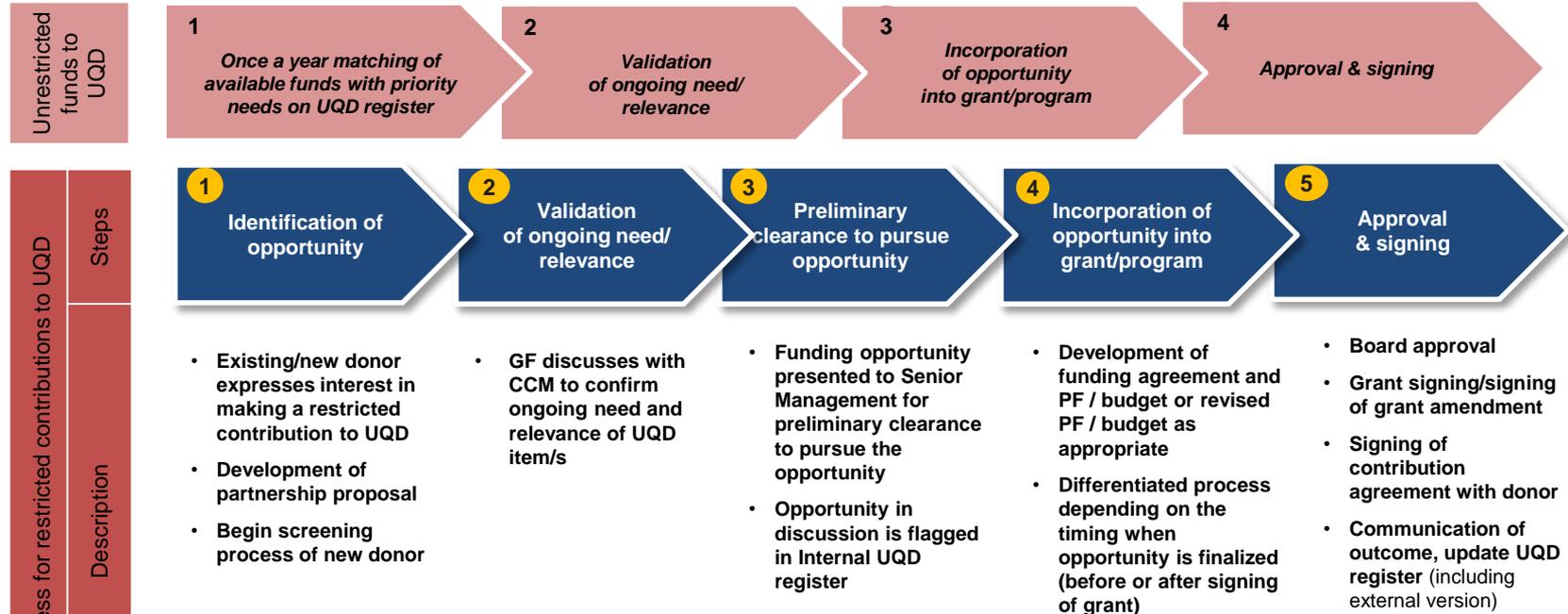
- Support the UQD of a country or country disease component
- Eligible Donors are precluded from prescribing the specific items of such UQD that would be financed by CRFC

### 3. Key points to highlight

- **CRFC may be excepted from parts of SIIC endorsed process for prioritizing and awarding resources available to UQD, particularly annual assessments of additional resources for UQD and prioritization of items**
- CRFC subject to Amended CFP and standard financial and operational processes
- CRFC made through the Global Fund are subject to funding approval by the Board prior to inclusion into grant
- Unutilized portions of CRFC become unrestricted sources of funds available for the Global Fund grant portfolio
- Total amount of CRFC is less than the total sum of Global Fund financing committed to any grant receiving such contributions, ensuring that the programmatic results of such grants remain primarily attributable to contributions from all Global Fund donors.

# Complementary restricted financial contributions

## Process overview



# Overview

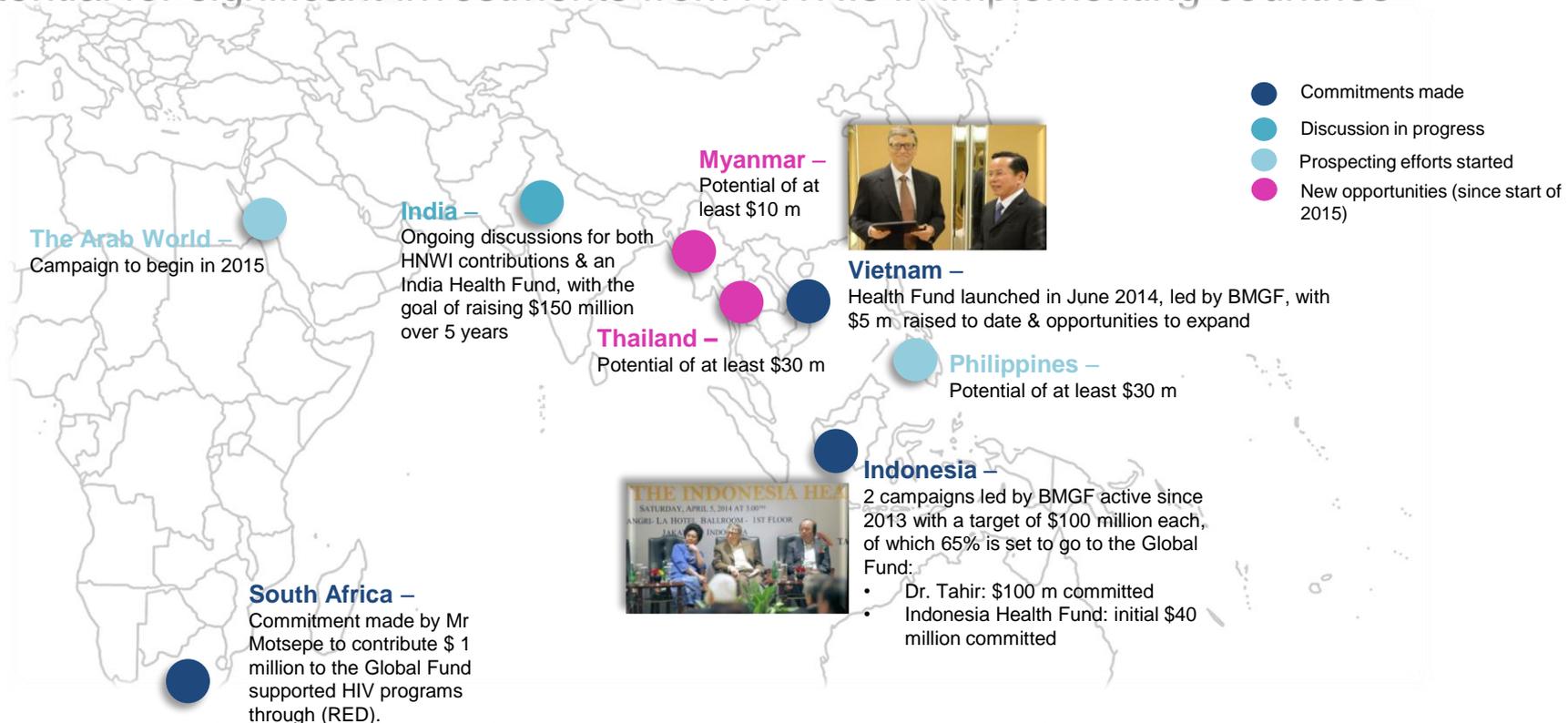
- 1) Policy framework for PS donor and authorized public mechanisms contributions to UQD
- 2) The UQD Register in the broader resource mobilization strategy

# The UQD register is an additional tool for resource mobilization and complements existing efforts

- Work ongoing to secure additional **public donor pledges** over 2015-16. Based on FOPC assessment of available resources, additional resources will be allocated to UQD per SIIC framework.
- Additional **private donor pledges** have been secured and work ongoing to secure additional pledges:
  - **PRODUCT (RED)™ and Partners** increased their pledge by \$30 Mil. for the current period after a successful campaign around World AIDS Day 2014 → pledges from PRODUCT (RED)™ and Partners continue to be notionally earmarked to AIDS grants in Africa
  - **New pledges received from M-A-C AIDS Fund, GoodBye Malaria and Comic Relief** for total of \$12 Mil.
  - Opportunities in the pipeline with Anglo American plc. and others
- Since approval of Amended policy on restricted contributions and publication of UQD register generating interest, for e.g.:
  - Early indication from **new and existing private sector partners interested in investing in UQD**
  - **Renewed interest in the Debt2Health scheme:** Germany, Spain, Switzerland in discussion
- Work ongoing towards a **global HNWIs engagement strategy**
  - HNWIs, particularly those in implementing countries, interested in gaining local recognition in their own country → **essential for Global Fund to offer the possibility that HNWI invest in unmet quality needs of programs in their country of interest**

# Update on HNWI engagement

## Potential for significant investments from HWNIs in implementing countries



# How the Global Fund and advocates can work together to mobilize resources for UQD

- **Encourage** countries to express their full expression of demand in concept notes
- **Communicate** effectively about the UQD register
- **Highlight** success stories about contributions to UQD
- **Support** Global Fund and country stakeholders' efforts to raise domestic and other resources for UQD

# Back-up

UQD of countries of interest to HNWI and in discussion with other PS donors

# Countries of potential HNWI interest

Viet Nam TB/HIV

Country	Component	Module	Intervention	UQD Approval Stage	Further UQD Description (if applicable)	Amount Registered for UQD (US\$)
Viet Nam	TB/HIV	HSS - Health information systems an	Analysis, review and transparency	GAC1	Strengthening strategic information: su	\$0.61 M
	TB/HIV	HSS - Health information systems an	Other	GAC1	Validation of CAD4TB (computer assiste	\$3.44 M
	TB/HIV	MDR-TB	Case detection and diagnosis: MD	GAC1	Funds needed to secure the 2014 basic I	\$9.28 M
	TB/HIV	MDR-TB		GAC1	Entry fully funded from incentive fundi	\$0.00 M
	TB/HIV	Prevention programs for other vulne	HIV testing and counseling as part	GAC1	HTC among key populations: equipmen	\$1.20 M
	TB/HIV	Prevention programs for people wh	Behavioural change as part of pro	GAC1	Expand interventions to national scale f	\$18.71 M
	TB/HIV	TB care and prevention	Case detection and diagnosis	GAC1	Expand intensified case finding and care	\$15.06 M
	TB/HIV	Treatment, care and support	Treatment monitoring	GAC1	Ensure quality of ART: Accelerated roll-	\$1.92 M
	<b>TB/HIV Total</b>					<b>\$50.23 M</b>
<b>Viet Nam Total</b>						<b>\$50.23 M</b>
<b>Grand Total</b>						<b>\$50.23 M</b>

# Countries of potential HNWI interest

## Philippines HIV

Country	Component	Module	Intervention	UQD Approval Stage	Further UQD Description (if applicable)	Amount Registered for UQD (US\$)
Philippines	HIV	Community systems strengthening	<b>Institutional capacity building, pla</b>	GAC1	Will allow the country to improve key p	\$0.00 M
	HIV	Prevention programs for MSM and T	<b>Behavioral change as part of progr</b>	GAC1	The GAC recommended that US\$2,223,4	\$0.00 M
	HIV	Prevention programs for people who	<b>Behavioral change as part of progr</b>	GAC1	Will allow the country to reach 80% cov	\$0.00 M
	HIV	Treatment, care and support	<b>ART</b>	GAC1	ART to enroll 7,381 patients by 2017	\$2.22 M
	<b>HIV Total</b>					
<b>Philippines Total</b>						<b>\$2.22 M</b>
<b>Grand Total</b>						<b>\$2.22 M</b>

# Countries of potential HNWI interest

Indonesia Malaria

Country	Component	Module	Intervention	UQD Approval Stage	Further UQD Description (if applicable)	Amount Registered for UQD (US\$)
Indonesia	Malaria	Vector control	Long-lasting insecticidal nets (LLIN)	GAC2	-	\$3.70 M
	<b>Malaria Total</b>					<b>\$3.70 M</b>
<b>Indonesia Total</b>						<b>\$3.70 M</b>
<b>Grand Total</b>						<b>\$3.70 M</b>

# Countries of potential interest to CIFF

## Tanzania HIV/TB

Country	Component	Module	Intervention	UQD Approval Stage	Further UQD Description (if applicable)	Amount Registered for UQD (US\$)
Tanzania (United Republic)	TB/HIV	Community systems strengthening	Other	GAC1	Support expansion to other regions and	\$1.55 M
	TB/HIV	HSS - Health information systems an	Surveys	GAC1	To support THIS-4 Survey, HIVDR survey	\$15.25 M
	TB/HIV	MDR-TB	Case detection and diagnosis: MD	GAC1	To identify and treat MDR-TB patients p	\$6.32 M
	TB/HIV	PMTCT	Other interventions for PMTCT- P	GAC1	Expansion of PMTCT services in other re	\$34.12 M
	TB/HIV	Prevention programs for general pop	Condoms as part of programs for g	GAC1	This will target sexually active age grou	\$8.00 M
	TB/HIV	Prevention programs for MSM and T	Condoms as part of programs for I	GAC1	Increase service coverage among men v	\$0.84 M
	TB/HIV	Prevention programs for sex worker	HIV testing and counseling as part	GAC1	To increase coverage of combined prev	\$1.80 M
	TB/HIV	TB care and prevention	Case detection and diagnosis	GAC1	To ensure notification of TB cases accor	\$9.15 M
	TB/HIV	TB/HIV	Other	GAC1	Scale up of Isoniazid Preventive Therap	\$4.00 M
	<b>TB/HIV Total</b>					<b>\$81.04 M</b>
<b>Tanzania (United Republic) Total</b>						<b>\$81.04 M</b>
<b>Grand Total</b>						<b>\$81.04 M</b>