

# A Community Guide to the Global Fund's Sustainability, Transition and Co-financing Policy

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**Regional Platform**  
for Communication and Coordination  
on HIV/AIDS, Tuberculosis and Malaria  
For Anglophone Africa

## Before we begin...



### SUSTAINABILITY means

Ensuring that programs are able to continue as they are needed, with adequate funding and human resources, and without changes in quality or coverage, threats to human rights, or leaving anybody behind.

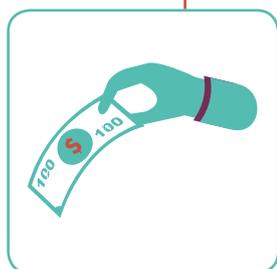
### TRANSITIONS are:

When a country becomes ineligible for further global fund money, and programs must graduate from Global Fund support to domestic reliance. The Global Fund defines transition as the mechanism by which a country, or a country-component, moves towards fully funding and implementing its health programs independent of Global Fund support.



### CO-FINANCING is:

An arrangement where the Global Fund requires countries to contribute a certain level of domestic funding in order to share the costs of HIV, TB and malaria programming and promote greater domestic financing for health. The amount of money that countries must give in order to access Global Fund money varies depending on a country's ability to pay.



## WHY A POLICY ON SUSTAINABILITY, TRANSITIONS AND CO-FINANCING (STC)?

In recent years, many partners – including many civil society organizations and community groups - have been calling on the Global Fund to develop a clear policy around managing handovers in countries that are no longer eligible for funding. There are several examples of transitions that have not gone smoothly and have threatened the health and rights of key and vulnerable populations:

**EXAMPLE 1:** There was a spike in HIV infections among people who use drugs in Romania since the Global Fund departed in 2010. In 2013, about 30% of new HIV cases were linked to injection drug use compared with 3% in 2010.

**EXAMPLE 2:** In the Northern part of Mexico (where injecting drug use is a common risk factor for HIV), the distribution of needles and syringes fell by up to 90% following the exit of the Global Fund in 2013.

**IMPORTANT FOR US!** Transitions can threaten the continuity and coverage of vital health services, especially for key and vulnerable populations. Governments are often reluctant to absorb programs for criminalized and marginalized groups. Civil society and community groups **MUST** ensure that key and vulnerable populations are not left behind when countries transition from Global Fund support. We can do this by advocating for governments, the private sector, and other funding partners to fund organizations and communities that are providing services to key and vulnerable populations.



The Global Fund's STC policy also acknowledges that:

- Economic growth does not necessarily mean that all people in a country have equal access to health and healthcare.
- Inequality is very high in a lot of middle-income countries.
- There is inequity in responses for key and vulnerable populations who are disproportionately affected by the three diseases, particularly where criminalization, stigma and discrimination are common.



## STC Guiding Principles

There are several African countries that are classified as Upper Middle Income (UMI), such as South Africa, Angola, Botswana, Gabon and Mauritius. Although they are richer, there are high levels of inequality in these countries which would threaten the most vulnerable populations if transitions were to occur.

*Are civil society and community groups talking about sustainability and transition in these UMI African countries? Should we be?*

## IN ITS STRATEGY FOR 2017-2022, THE GLOBAL FUND COMMITS TO “SUPPORT SUSTAINABLE RESPONSES FOR EPIDEMIC CONTROL AND SUCCESSFUL TRANSITIONS.”

*Guiding Principles of the Global Fund's STC Policy (and what they mean for us)!*

	STC GUIDING PRINCIPLES	WHAT IT MEANS
	<b>DIFFERENTIATION</b>	<p>This means that the STC policy and its processes should be tailored as much as possible to a country's income level, disease context, disease burden, human rights and gender contexts, and other context-specific factors.</p> <p><i>Why it matters for us!</i> As civil society and community groups, there is an advocacy opportunity for us to ensure that the Global Fund is applying the STC policy properly, in a context-sensitive manner that protects human rights and gender equality!</p>
	<b>ALIGNMENT</b>	<p>This means that requirements related to sustainability and transition should be linked with existing national systems and/or processes.</p> <p><i>Why it matters for us!</i> We must ensure that sustainability and transition thinking is within our national strategic plans (NSPs) for HIV, TB and malaria. We must be part of NSP development and push for this language in decision-making spaces!</p>
	<b>PREDICTABILITY</b>	<p>This means that countries should have as much advance notice and time as possible to adequately plan for transition, including accessing resources for the process.</p> <p><i>Why it matters for us!</i> We have a role to play in mobilizing resources for transitions!</p> <p><b>DID YOU KNOW? The Community Rights and Gender (CRG) Department at the Global Fund has set aside money specifically for technical assistance around sustainability and transitions.</b></p>
	<b>FLEXIBILITY</b>	<p>This means that countries and the Global Fund should be allowed to adapt certain elements of this policy to better suit a particular context.</p> <p><i>Why it matters for us!</i> If you think there are sustainability issues in your country, you have an advocacy role to play in ensuring the Global Fund meets its commitments set out in the STC policy. Request technical assistance or organize your constituency for a consultation around sustainability. The flexibility principle means you have space to make the case!</p>

# What is the Global Fund's Approach to Transitions?

Global Fund financed programs



Country domestic financing incentives



Take up key programs such as interventions for key and vulnerable populations



## OVERVIEW OF THE GLOBAL FUND'S SUSTAINABILITY, TRANSITION AND CO-FINANCING POLICY

LIC/LMIC

LMIC/U-LMIC

U-LMIC/UMI

Support National Strategic Plans to ensure the sustainability of HIV, TB and malaria programs

Support development of Health Financing Strategies in countries with high burden of disease and/or low revenue capture

- Transition Readiness Assessment
- Transition Work Plan
- Transition Work Plan basis for funding request (funding comes from country allocation)

- Once country component becomes ineligible, may receive 3 years of Transition Funding

TRANSITION

### WORKING TOWARDS SUSTAINING PROGRAMS AND EVENTUAL TRANSITION



ALL COUNTRIES SUBJECT TO CO-FINANCING REQUIREMENTS

## IMPORTANT FOR US!

The transition readiness assessment should be an inclusive (including key and vulnerable populations), multi-stakeholder, and country-owned process including communities and civil society, led by the CCM or other multi-stakeholder coordinating body. The aim of the transition readiness assessment is to serve as a tool to stimulate dialogue at country level around transition related needs from both a programmatic and financial perspective. Make sure you are involved!



## IMPORTANT FOR US!

There are specific co-financing rules which require governments to dedicate funding to key and vulnerable populations.

## How Does the Co-Financing Component Work?

Co-Financing Requirements do two main things: They serve to strengthen the overall financing for the health sector and the sustainability of HIV/AIDS, TB and/or malaria programs. Specifically, Co-Financing Requirements:

1. Encourage greater and greater government spending on health to meet national universal health coverage (UHC) goals; and
2. Ensure there are increasing levels of co-financing of Global Fund supported programs over each allocation period, focused on progressively taking up key costs of national disease plans (national strategic plans). This means that governments should commit more and more funding towards Global Fund-supported programs over time.

## CONTACT THE REGIONAL PLATFORM

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