



## New Global Fund Strategy (2023–2028)

### Summary of top-level priorities areas for civil society & communities

*Source:* Input submitted to the Global Fund or made available to the Global Fund Advocates Network (GFAN) by civil society and community constituencies during the Global Fund strategy development process. The inputs include advocacy and position papers and findings from surveys and consultations. (A list of sources is provided at the end of the document.)

Individual inputs had widely varying language, detail and specific 'asks'. This document attempts to group them into some top-level priority areas for attention by the Global Fund in the new strategy. It is updated regularly as more input is made available during the process, which will continue through and after the Partnership Forums in the first quarter of 2021.

**Focus areas are grouped by the following nine categories:**

1. Gender, human rights and equity
2. Key populations
3. Communities
4. Social determinants and holistic approaches
5. Global Fund structures and processes
6. Accountability
7. Funding, sustainability and transition
8. Disease-specific issues
9. Other / miscellaneous

Within each category, the individual entries are shaded in colors meant to indicate how often they are mentioned and prioritized across the inputs. **Blue** = extensive support within the priority area; **orange** = moderate support; **yellow** = small number of references. The cross-cutting nature of many of the inputs is reflected in some entries being listed in more than one category.

Color shadings might change over time for various entries as more input arrives throughout the course of the strategy development process. Also, more entries can be added as needed to reflect incoming inputs.

**Additional inputs, comments and other relevant information** to inform this 'living document' can be submitted through the [GFAN website's strategy development section](#), which is where the most up-to-date version can be found.



## 1. Gender, human rights and equity

*The Global Fund can and should:*

Do more to embed <b>gender equality</b> throughout all its work and remove barriers that continue to impede progress	Increase <b>emphasis on human rights</b> , including by more deeply embedding this focus throughout its work and the grant lifecycle	Recognize and better respond to the impacts of <b>criminalization</b> . This would entail, for example, prioritizing and supporting activities aimed at decriminalizing HIV transmission, the use and possession of drugs, sex work, homosexual acts, etc.
Put a more targeted and effective focus on substantially reducing <b>stigma and discrimination</b>	Target funding and standards to ensure an environment for <b>women in all their diversity to be meaningfully engaged</b> in all aspects of the Global Fund	Do more to promote and protect the right to the highest attainable level of <b>mental health</b>

## 2. Key populations

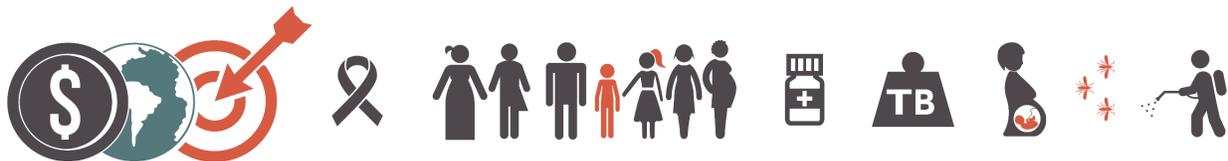
*The Global Fund can and should:*

Place key populations at the <b>centre of HIV, TB and malaria responses</b> – and prioritize them across all aspects of Global Fund work and activities.	Give more attention to and put more focus on <b>adolescents and young people</b> , especially those living with HIV	Prioritize <b>mental health</b> services for key populations and all others living with or affected by the three diseases
Support and prioritize <b>data collection</b> to more accurately determine <b>population size estimates</b> of key populations	Promote the greater input and influence of key populations and their representatives on decisions regarding the <b>financing</b> for services that can benefit them directly (e.g., targeted prevention and treatment services)	

## 3. Communities

*The Global Fund can and should:*

Increase and improve efforts to ensure the <b>meaningful engagement of communities</b> throughout all aspects of Global Fund processes and structures	Prioritize, support and scale up <b>community-led monitoring</b> . This should include increased and targeted support for data collection and advocacy	View communities and other civil society partners and groups as <b>equal partners</b> across the Global Fund spectrum. They should be treated and engaged with as <b>professionals who have expertise</b> and add value at every stage and at every level
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<p>Prioritize and specifically support the <b>strengthening of community-based groups' capacity and leadership</b>. This is the essence of <b>community systems strengthening (CSS)</b>, which has long been a stated Global Fund objective but has yet to be delivered on sufficiently</p>	<p>Take action so that <b>financial and other resources</b> are used more strategically and effectively to ensure that the voices of communities are heard</p>	
<p><b>4. Social determinants and holistic approaches</b>  <i>To improve impact, the Global Fund can and should:</i></p>		
<p>Engage more strongly in addressing <b>social determinants of health</b>, including issues associated with <b>climate change</b></p>	<p>Promote and support <b>integration</b> across different infectious-disease interventions (treatment and prevention) as well as more broadly with services for sexual and reproductive health and rights (SRHR) and non-communicable diseases</p>	<p>Directly address a wide range of <b>non-medical barriers</b> to people's ability to get access to the HIV, TB and malaria services they need – e.g., cultural, social, legal and education</p>
<p>Address <b>comorbidities</b> with HIV, TB and malaria, including non-communicable diseases such as cancer, diabetes, hypertension and mental health</p>	<p>Ensure that increased resources and capacity are available for providing <b>psychosocial services</b> at every stage of the care continuum</p>	
<p><b>5. Global Fund structures and processes</b>  <i>The Global Fund can and should:</i></p>		
<p>Increase and improve efforts to ensure the <b>meaningful engagement of communities</b> throughout all aspects of Global Fund processes and structures, including CCMs</p>	<p>Commit to maintaining a sharp focus on HIV, TB and malaria – and not expand its mandate beyond these three diseases. In the shorter term, as it responds to COVID-19 and possible other issues in the broader health spectrum prior to the implementation of the new strategy, the Global Fund should avoid diverting attention and resources away from the needs and priorities of those living with or highly vulnerable to the three main target diseases</p>	<p><b>Reconsider its eligibility criteria</b> to take into account a wider range of factors, including country willingness to invest and sustain services for all. Simply relying on epidemiological and economic indicators to determine transition timing is insufficient</p>



<p>Increase and improve <b>support to CCMs</b> so that they can be more effective and representative</p>	<p><b>Change the allocation model</b> to reflect the need for differentiated approaches in different countries. This is an example of the type of <b>flexibility</b> needed for future funding decisions</p>	
<p><b>6. Accountability</b></p>		
<p><i>Implementing country governments: services.</i></p> <p>Governments should be held more <b>accountable to sustain services after transitions</b>, including by decreasing barriers to access.</p>	<p><i>Implementing country governments: political accountability.</i></p> <p>The Global Fund should play a bigger and clearer role in holding governments accountable to the <b>commitments they have made</b> regarding the three diseases, including in transition and national development programmes as well as <b>domestic resources</b> (e.g., through co-financing)</p>	<p><i>The Global Fund.</i></p> <p>The Global Fund should increase its <b>institutional accountability</b> across all the work it does and projects it supports, including greater attention to <b>quality</b> of services overall.</p>
<p><b>7. Funding, sustainability and transition</b> <i>The Global Fund can and should:</i></p>		
<p>For countries receiving less funding or transitioning from Global Fund support: Ensure that <b>services are sustained</b> without interruption or degradation.</p>	<p>Reconsider its <b>eligibility criteria</b> to take into account a wider range of factors, including country willingness to invest and sustain services for all. Simply relying on epidemiological and economic indicators to determine transition timing is insufficient.</p>	<p>Before and during transitions, implement policies and procedures to ensure greater input and influence of key populations and their representatives on decisions regarding <b>financing for services</b> that can benefit them directly (e.g., targeted prevention and treatment services)</p>
<p>Put more emphasis on <b>responsible transition</b>. This approach should ensure greater input and influence of communities and key populations in all aspects of transition planning and implementation, including at country level.</p>	<p>Target funding and standards to ensure an environment for <b>women in all their diversity to be meaningfully engaged</b> in all aspects of the Global Fund.</p>	<p>Clearly recognize, highlight and seek to find ways to address the huge <b>resourcing gaps</b> in most Global Fund eligible countries – between available financial resources and what is needed to reach key targets (e.g., ending TB by 2030).</p>



### 8. Disease-specific issues

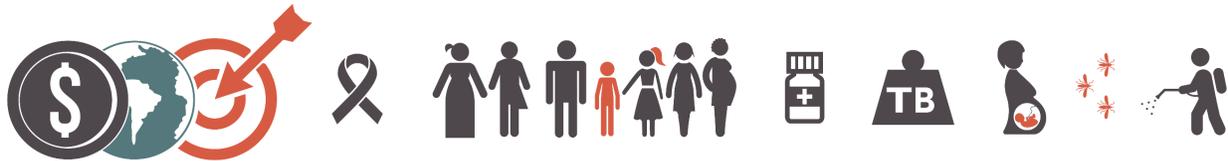
*The Global Fund can and should:*

Keep the Global Fund's unique **focus on the three diseases** while better articulating how this targeted work contributes to wider health and welfare responses.

### 9. Other / miscellaneous

*The Global Fund can and should:*

Take more direct and forceful action to invest in and support innovations, including by ensuring access to the **most up-to-date, safest, effective and convenient diagnostics and treatment** for the three diseases in all countries and at all levels of care.



## List of sources used for input into this summary *(regularly updated)*

**Consortium organized by the Eurasian Harm Reduction Association (EHRA):** Joint input into the Global Fund Strategy Development from key affected communities and civil society from Central and Eastern Europe and Central Asia

**Regional platform for communication in Francophone Africa:** Résultats de l'enquête en ligne menée par la Plateforme Régionale Afrique francophone de Communication et de Coordination de la Société Civile et des Communautés sur le Fonds mondial (PRF)

**Regional platform for communication in Anglophone Africa:** Global Fund Strategy Development – Civil Society Survey Report

**Women4Global Fund (W4GF):** Global Fund Strategy 2022–2028: Accelerating Action to make a difference for women and girls

**Communities Delegation to the Global Fund Board:** Position paper on the Development of Global Fund Strategy 2023–2030 for the 14th Strategy Committee Meeting

**Global Fund Secretariat:** Draft synthesis of first round of input (through 1 September 2020) into its open consultation on strategy development

**United for Global Mental Health:** Briefing: Mental Health and the Global Fund Strategy Consultation

**Global Network of Sex Work Projects (NSWP):** Submission to the Global Fund's online open consultation for strategy development

**Developing Country NGO Delegation:** Constituency communiqué following the 44th Board Meeting

**Communities Delegation:** Full report of community consultations on the New Global Fund Strategy

**Stop TB Partnership:** Preliminary list of key messages presented during a GFAN call on 1 December 2020

**Deutsche Stiftung Weltbevölkerung (DSW):** Summary of key messages presented to German parliamentarians in November 2020