



New Global Fund Strategy (post-2022)

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. *[Most recent update: 11 March 2021]*

Focus areas are grouped by the following nine categories:

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

Within each category, the individual entries are shaded in colours 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.

Colour 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 <i>The Global Fund can and should:</i>		
Do more to embed gender equality throughout all its work and remove barriers that continue to impede progress	Increase emphasis on human rights , including by more deeply embedding this focus throughout its work and the grant lifecycle as well as all its structures and systems from CCMs to the Secretariat	Recognize and better respond to the impacts of criminalization . 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 stigma and discrimination	Target funding and standards to ensure an environment for women in all their diversity to be meaningfully engaged in all aspects of the Global Fund	Do more to promote and protect the right to the highest attainable level of mental health
2. Key populations <i>The Global Fund can and should:</i>		
Place key populations at the centre of HIV, TB and malaria responses – and prioritize them across all aspects of Global Fund work and activities. This should include taking more extensive and strategic actions, such as political advocacy, to remove the barriers that prevent key populations from receiving the services and support they need in every context.	Support greater and longer-term investment in regional and multi-country grants , which often offer more opportunities to reach key populations safely and successfully	Prioritize mental health services for key populations and all others living with or affected by the three diseases
Support and prioritize data collection to more accurately determine population size estimates of key populations and the gaps and challenges they face in accessing HIV, TB and malaria services	Promote the greater input and influence of key populations and their representatives on decisions regarding the financing for services that can benefit them directly (e.g., targeted prevention and treatment services)	Give more attention to and put more focus on adolescents and young people , especially those living with HIV
3. Communities <i>The Global Fund can and should:</i>		
Increase and improve efforts to ensure the meaningful engagement of communities throughout all aspects of Global Fund processes and structures.	Prioritize, support and scale up community-led monitoring . This should include increased and targeted support for data collection and advocacy	Ensure that more financing goes directly to communities so that they can fulfil their essential role and maximize their potential in HIV, TB and malaria responses. This is a critical step toward using financial and other resources more strategically and effectively to ensure community leadership.
Prioritize and specifically support the strengthening of community-based groups' capacity and leadership . This is the essence of community systems strengthening (CSS) , which has long been a stated Global Fund objective but has yet to be delivered on sufficiently	View communities and other civil society partners and groups as equal partners across the Global Fund spectrum. They should be treated and engaged with as professionals who have expertise and add value at every stage and at every level	Identify and learn from best practices introduced and implemented by communities, including in areas such as innovation in service delivery during health and economic crises (e.g., COVID-19).



4. Health systems and integration <i>The Global Fund can and should:</i>		
<p>Be the champion of communities, human rights, equity and key populations in all discussions and engagements about health systems and integration at all levels. The Global Fund should ensure that its principles around these issues guide and reflect its demands and expectations with both internal and external partners.</p>	<p>Keep the Global Fund's unique focus on the three diseases while better articulating how this targeted work contributes to and can be integrated with wider health and welfare responses. All action taken to respond to other health priorities (e.g., infectious disease crises such as COVID-19) should be done through the lens of HIV, TB and malaria</p>	<p>Ensure that communities and community systems strengthening (CSS) are included and prioritized in integrated systems for health.</p>
<p>Ensure that human rights and equity are at the centre of all components of global health security work, however that term is defined. Using language that does not include 'security' is an important first step toward upholding these principles and leaving no one behind.</p>	<p>Be a strong and forceful voice in ensuring that universal health coverage (UHC) agendas and plans do not exclude the full range of services needed for effective HIV, TB and malaria prevention, care and treatment.</p>	
5. Social determinants and holistic approaches <i>To improve impact, the Global Fund can and should:</i>		
<p>Engage more strongly in addressing social determinants of health, including issues associated with climate change</p>	<p>Promote and support integration 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 non-medical barriers 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 comorbidities 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 psychosocial services at every stage of the care continuum</p>	
6. Global Fund structures and processes <i>The Global Fund can and should:</i>		
<p>Increase and improve efforts to ensure the meaningful engagement of communities throughout all aspects of Global Fund processes and structures, including CCMs. This requires strategic operational decisions and actions as well as relevant indicators to track progress.</p>	<p>Commit to maintaining a sharp focus on HIV, TB and malaria. 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 even as it responds to COVID-19 and other potential issues in the broader health spectrum.</p>	<p>Change the allocation model to reflect the need for differentiated approaches to one or more of the three diseases in different countries. This is an example of the type of flexibility needed for future funding decisions</p>



<p>Ensure that CCMs are more effective and are as representative as they are intended to be – including in terms of the engagement of civil society, communities and key populations</p>	<p>Reconsider its eligibility criteria 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>Prioritize and emphasize the importance of data and science in all decision-making processes, including those of its partners. This is a necessary step toward making programmes more efficient and effective in reaching those most in need and vulnerable</p>
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7. Accountability

<p><i>Implementing country governments: services.</i></p> <p>Governments should be held more accountable to sustain services after transitions, 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 commitments they have made regarding the three diseases, including in transition and national development programmes as well as domestic resources (e.g., through co-financing)</p>	<p><i>The Global Fund.</i></p> <p>The Global Fund should increase its institutional accountability across all the work it does and projects it supports, including greater attention to the quality of services overall.</p>
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8. Funding, sustainability and transition

The Global Fund can and should:

<p>Put more emphasis on responsible transition. 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>Ensure that services are sustained without interruption or degradation, which is especially important for countries receiving less funding over time or transitioning from Global Fund support.</p>	<p>Reconsider its eligibility criteria to take into account a wider range of factors, including country willingness to invest and sustain services for all. Relying solely 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 financing for services that can benefit them directly (e.g., targeted prevention and treatment services)</p>	<p>Target funding and standards to ensure an environment for women in all their diversity to be meaningfully engaged in all aspects of the Global Fund.</p>	<p>Clearly recognize, highlight and seek to find ways to address the huge resourcing gaps 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>
<p>More proactively promote and support domestic resource mobilization, including by working with all partners in countries to increase the fiscal space for health</p>		



9. Other / miscellaneous <i>The Global Fund can and should:</i>		
Take more direct and forceful action to invest in and support innovation , 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.	Be flexible and open to mobilizing responses to emergency health crises that severely affect access to HIV, TB and malaria services – including in countries that are not eligible for Global Fund support	

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

Civil society and communities pre-meetings to the Global Fund Partnership Forums: Priorities and recommendations discussed by participants at the three regional pre-meetings between 20 and 29 January 2021.

Developed Country NGO Delegation to the Global Fund Board: Strategy Development Constituency Paper (input to the 44th Global Fund Board meeting)



Developing Country NGO Delegation to the Global Fund Board: Position Paper for the Open Consultation on the Development of the Next Global Fund Strategy

EECA Regional Platform for Coordination and Communication: Global Fund post-2022 strategy: Report of the community and civil society consultation in Eastern Europe and Central Asia

Frontline AIDS: Position Paper: Frontline AIDS Global fund strategy 2023-2027

LAC Regional Platform: New Global Fund Strategy (2023-2028): Summary of priority areas identified during the subregional consultations in Latin America and the Caribbean

Implementer Group (IMG) Members: LAC, ESA, WCA, WPR, SEA Developing Country NGO, Communities, and Developed Country NGO Delegations: Statement on the Global Fund's Strategy Development Process, submission for the 44th Global Fund Board Meeting

Asia-Pacific Communities and Civil Society: *The Global Fund that We Still Want:* Statement of Positions on the Post-2022 Strategy of the Global Fund to Fight AIDS, Tuberculosis and Malaria

Civil society pre-meetings in advance of the Global Fund Partnership Forums: Discussions during three virtual gatherings organized by the Global Fund (EECA-LAC, 20-21 January; Africa/MENA I, 25 January; Asia-Pacific/MENA II, 28-29 January)

Global Fund Partnership Forums: Discussions during three virtual gatherings involving civil society and other stakeholders in the Global Fund partnership (EECA-LAC, 9-11 February; Africa/MENA I, 17-19 February; Asia-Pacific/MENA II, 3-5 March)