

Has the global fund been successful?

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Case Report

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The Global Fund to fight AIDS, Tuberculosis and Malaria is a partnership created in 2002 to raise, manage and invest the world's money to respond to three of the deadliest infectious diseases. As an international organization, the Global Fund mobilizes and invests more than US\$4 billion a year to support programs run by local experts in more than 100 countries. The activities of the partnership are controlled by the Global Fund Board, which comprises 28 members, operating through the Audit and Finance, Ethics and Governance and Strategy Committees [1, 2].

Collectively, the Civil society, Friends of the Global Fund, Government donors, Implementing Partners, Private and nongovernment partners, and Technical and developmental partners have contributed to the success of Global Fund [3]. The Civil society's grass-roots efforts advocating for increased resources for the response to HIV led to the creation of the Global Fund [4]. The four friends of the Global Fund raise awareness and undertake advocacy efforts worldwide [5]. Government donors donate funds in three-year cycles known as Replenishments, while the implementing partners (Principal Recipients), carry out Global Fund supported programs [6, 7]. The private sector and nongovernment partners contribute funding, innovation, expertise and advocacy to the Global Fund as the Technical and developmental partners offer technical expertise and support resource mobilization [8, 9].

Global Fund operates through a five-stage process including: fund generation, country decision on investment by the Country Coordinating Mechanism, plan reviewing and approval by independent panel of experts, implementation by local experts and partners, and Grant monitoring by Local Fund Agents. The Global Fund records increased replenishments from government and private donors, which support the successful implementation of programs aimed at combating HIV, Tuberculosis and malaria [10]. By providing 69% of all international financing for tuberculosis, Global Fund contributed to the reduction of mortality rate of tuberculosis between 2000 and 2017 by 42% [11]. Global Fund provides nearly 60% of all international financing for malaria by investing in malaria control programs in more than 100 countries from 2002-2018, using a comprehensive approach of education, prevention, diagnosis and treatment, facilitating reduction in global malaria death rate by 60% [12]. This achievement may be attributed to the increase in the number of people who slept in mosquito-treated nets from 29% in 2010 to 51% in 2017 probably as a result of the global increased awareness on the benefits of using mosquito-treated nets [13].

In addition, the Country Coordinating Mechanism, has also achieved success with planning to fight the three diseases, as

evidenced by 40% yearly reduction in mortality due to AIDS, Tuberculosis and malaria since 2002 in countries where the Global Fund invests; this feat is strongly associated to the unique mix of its members, comprising people affected by the diseases, medical experts, government and civil society however, 36% of people with active tuberculosis are still missed yearly due to inadequate surveillance system on morbidity, but through an investment called catalytic funding, the Global Fund is supporting innovative programs, gathering evidence and expanding the most successful approaches to find cases of missed tuberculosis while adding TB screening to other routine check-ups during medical visits [14, 15]. Had the Country Coordinating Mechanism included statisticians in their team, there could have been lesser missing cases of active tuberculosis.

Furthermore, The Global Fund's work through the technical review panel has merits and demerits. For the merit, an independent panel of experts may bring their experience and objectivity to bear into the program, which could ensure that affected communities are treated equally. On the other hand, the panel may have challenges appreciating the peculiarities of the affected communities and may need members of the affected communities to join hands towards solving the problem. The smart effective investments of the panel have saved 32 million lives and provided prevention, treatment and care services to people. Thus, strengthening local health systems. This achievement is positively associated to the rigorous process undertaken by the panel to evaluate the technical merits of all requests for funding.

Using local experts and partners affords the opportunity to appreciate the problem. Through provision of anti-retroviral therapy and prevention of mother to child transmission of HIV and addressing risk factors for HIV transmission, AIDS-related mortality and new infections have been reduced by half [16]. Also, with the aid of scientific advances and innovative ideas, these experts conduct evidence-based programs for key populations at risk for the three diseases, in order to remove barriers to health services and provide support to secure their meaningful engagement as stated in the Global Fund Strategy 2017-2022 [17].

The Global Fund attained success with making goal-oriented decisions through the efforts of the Local Fund Agents who work closely with the country team at the Secretariat to evaluate and monitor activities before, during and after the implementation of a grant [18]. However, these agents may not be completely transparent about reporting the statuses of grants awarded hence, there is a need to check their activities regularly.

Finally, though the Global Fund partnership has been successful since inception, improving Government commitment and adopting a differentiated care approach to ensure services are more accessible and tailored to at-risk populations, will more effectively combat these infectious diseases, some of which have mutated into newer and more dangerous forms?

References

1. Geneva CH: The Global Fund (2019) Global Fund Overview; <https://www.theglobalfund.org/en/overview>
2. Geneva CH: The Global Fund (2019) Board; <https://www.theglobalfund.org/en/board/>
3. Geneva CH: The Global Fund (2019) Partners & structures; <https://www.theglobalfund.org/en/partners-structures/>
4. Geneva CH: The Global Fund (2019) Civil Society; <https://www.theglobalfund.org/en/civil-society/>
5. Geneva CH: The Global Fund (2019) Friends of the Global Fund; <https://www.theglobalfund.org/en/friends/>
6. Geneva CH: The Global Fund (2019) Government Donors; <https://www.theglobalfund.org/en/government/>
7. Geneva CH: The Global Fund (2019) Implementing Partners; <https://www.theglobalfund.org/en/implementing-partners/>
8. Geneva CH: The Global Fund (2019) Private & Nongovernment Partners; <https://www.theglobalfund.org/en/private-ngo-partners/>
9. Geneva CH: The Global Fund (2019) Technical & Developmental Partners; <https://www.theglobalfund.org/en/technical-developmental-partners/>
10. The Global Fund (2019) Results Report. Geneva CH: The Global Fund 2019: 70.
11. Geneva CH: The Global Fund (2019) Tuberculosis; <https://www.theglobalfund.org/en/tuberculosis/>
12. Geneva CH: The Global Fund (2019) Malaria; <https://www.theglobalfund.org/en/malaria/>
13. The Global Fund (2019) Results at a glance. Geneva CH: The Global Fund 2019: 2.
14. Geneva CH: The Global Fund (2019) Results & Impact; <https://www.theglobalfund.org/en/impact/>
15. Geneva CH: The Global Fund (2019) World TB Day: Tracking a contagion; <https://www.theglobalfund.org/en/specials/2017-03-20-world-tb-day-tracking-a-contagion/>
16. Geneva CH: The Global Fund (2019) HIV & AIDS; <https://www.theglobalfund.org/en/hivaids/>
17. Geneva CH: The Global Fund (2019) Key Populations; <https://www.theglobalfund.org/en/key-populations/>
18. Geneva CH: The Global Fund (2019) Local Fund Agent; <https://www.theglobalfund.org/en/lfa/>

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