



**REGIONAL COMMITTEE FOR THE  
EASTERN MEDITERRANEAN**

October 2017

**Sixty-fourth Session  
Islamabad, Pakistan, 9–12 October 2017**

**SIDE EVENT**

**GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA**

**Objectives of the event**

The objectives of the event are to:

- share information, policy updates and key decisions taken at the Global Fund Board meetings held in 2016–2017 and discuss implications for the Region;
- provide an overview of what has changed for the new funding cycle 2017–2019 and the implications for Member States in the Region;
- discuss key challenges in implementation of Global Fund grants from the perspective of both implementers and the Global Fund secretariat, especially in a complex operating environment;
- agree on measures to accelerate implementation, in collaboration with partners and stakeholders.

**Background**

Fifteen countries in the Region are receiving financial support from the Global Fund for HIV/AIDS, tuberculosis and malaria, as well as for health systems strengthening and reproductive, maternal, newborn, child and adolescent health. Significant gains were made in the fight against tuberculosis, HIV/AIDS and malaria in the era of the Millennium Development Goals. Sustainable Development Goal 3.3 is ambitious, calling for an end to the epidemics of HIV, tuberculosis and malaria by 2030; achieving this will require strong partnership between WHO, the Global Fund and other health partners along with innovative approaches to reaching all and ensuring that “no one is left behind”.

A new approach employing one regional grant management platform, the Middle East Response Initiative, has been developed to provide essential HIV, tuberculosis and malaria services to eligible country populations in the Syrian Arab Republic and Yemen, and to Syrian refugees in Jordan and Lebanon. The aim is to improve responsiveness to the three diseases in the context of emergencies in these countries. The International Organization for Migration (IOM) has been selected as the primary recipient of this grant.

Several changes were introduced by the Global Fund for the funding cycle 2017–2019, such as new catalytic investment, including matching funds to selected countries and specific strategic initiatives. Revision of the grant end-date, with the decision of the Global Fund not to allow extension, will have consequences for countries in the Region. This may result in loss of resources if no measures are taken to accelerate implementation and conduct timely reprogramming.

Countries are facing challenges in timely implementation of Global Fund resources, such as limited WHO capacity to provide sustained technical support in priority high-burden

countries. Insecurity and political problems hamper implementation in some countries as well as decreasing the Global Fund allocation in the 2017–2019 funding cycle.

### **Expected outcomes**

- Countries are well briefed on the new Global Fund strategy and updated on key decisions from Global Fund Board meetings held in 2016–2017.
- Increased understanding of the need for strong partnership between WHO in the Eastern Mediterranean Region, the Global Fund and other health partners.
- Global Fund-related matters, especially implementation challenges and approaches to addressing them, are identified.

### **Participants**

- Representative of ministries of health of countries eligible for Global Fund financing, including Afghanistan, Djibouti, Egypt, Iraq, Islamic Republic of Iran, Jordan, Lebanon, Morocco, Pakistan, Palestine, Somalia, Sudan, Syrian Arab Republic, Tunisia and Yemen;
- Global Fund secretariat team;
- Partner organizations, including United Nations agencies involved in Global Fund activities and civil society;
- Director, Strategic Partnerships and Cross Cutting Coordination; HIV/AIDS, Tuberculosis, Malaria and Neglected Tropical Diseases (HTM) cluster in WHO headquarters and other key staff from the HTM cluster.