

The European Commission and the Global Fund to fight AIDS, Tuberculosis and Malaria

A partnership like no other



In 2002, in an act of extraordinary international solidarity and leadership, the world created the Global Fund, to ensure that every person living with HIV, tuberculosis or malaria receives lifesaving treatment and care.

And it was a success: the Global Fund has saved millions of lives, empowered communities, and given life prospects to people who would have otherwise been left behind.

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On the 20th anniversary of the creation of the Global Fund, we want to acknowledge the crucial role of the European Commission (EC) in its establishment and achievements.

Thanks to the EC's political and financial commitment and strategic steering, significant progress has been made in the last two decades toward ending HIV, tuberculosis, and malaria.

In the face of the catastrophic impact caused by COVID-19 on the fight against the three diseases, the EC's leadership remains as critical as ever.

Context of the creation of the Global Fund

By 2000, HIV was spreading fast: in 2000, UNAIDS and WHO estimated the number of people living with HIV or AIDS at 36.1 million. This was more than 50% higher than what the WHO Global Programme on AIDS had projected ten years earlier.¹

Africa was hit hardest: it was home to 70% of the adults living with HIV in the world and had buried three-quarters of the more than 20 million people worldwide who had died of AIDS since the epidemic began.² HIV/AIDS was devastating families, communities, societies, and economies.

The first antiretroviral (ARV) treatment for HIV/AIDS became available in 1996-1997, but with an average cost of up to USD 20 000 per person per year, only richer nations could afford it. Access to treatment was dramatically unequal, spurring an activist movement that would redefine the role of people living with HIV and affected communities in medical care and health governance.

The late 90s-early 2000s were a turning point for access to HIV treatment, and the AIDS response more broadly.

The Global Fund was born from the realization of the scale of destruction caused by HIV/AIDS and other major infectious diseases, at a time where tools to stop them in their tracks were becoming available but were not accessible to people in poorer countries. The choice was simple, yet dramatic: continue letting people die from preventable diseases, or fight back, and scale-up programmes that work. **The European Commission was critical in making the bold decision at the time: the creation of the Global Fund.**

“Our partnership was founded out of the unwillingness to accept the inequalities that made prevention, care and treatment for HIV, TB and malaria available only to the rich. Together with partners, the Global Fund galvanized global solidarity, political leadership, and investments against the diseases, which looked unbeatable at the time.”

— Peter Sands, Global Fund Executive Director, Results Report 2021

¹ UNAIDS: AIDS epidemic updated December 2000, available on: <https://bit.ly/3t8KeYu>

² Ibid

The role of the European Commission in **creating** the Global Fund

The European Commission is a founding member of the Global Fund. Its support stemmed from the acknowledgement of the urgency to tackle HIV, TB and malaria, and reflected the Commission's willingness to make a significant contribution towards improved action against the three diseases. Increased financing and large-scale collective action were one aspect of a multi-pronged strategy, which, in the early 2000s, included increasing the affordability of pharmaceuticals, encouraging R&D, and increasing the impact of existing interventions.

TIME LINE

Late 1990s

Generic competition and differential pricing dramatically reduces HIV drug prices in low-income countries. The EC breaks internal bureaucratic barriers and sets up an inter-service and inter-cabinet taskforce on HIV/AIDS. HIV/AIDS was not the only health emergency. TB had been declared a health emergency in 1993 and drug resistance was becoming a growing problem. Malaria was making a deadly comeback.

January 2000

The UN Security Council puts AIDS on top of the UN's agenda and adopts its first resolution on a health issue.

July 2000

The first International AIDS Conference in Africa (Durban) puts access to treatment centre stage and rallies the world opinion in favour of action: it is possible to treat AIDS, and immoral not to. The EC asserts its leadership to bring the deadliest epidemics to an end by announcing the organisation of a high-level roundtable in Brussels to step up the fight against HIV, TB and malaria. A few days later, G8 leaders meet in Japan, put infectious diseases on the Summit's agenda— a first in G8 history — and pave the road to the establishment of the Global Fund.

September 2000

EC President Romano Prodi convenes the high-level roundtable in Brussels. It feeds into the development of an EC policy framework to tackle the three diseases and results in an agreement with pharmaceutical companies on a tiered pricing mechanism for patented drugs, a drop in ARV prices, the creation of a new clinical trial partnership with Africa (known now as the EDCTP) and a commitment to examine how to fast-track large financing for programmes developed by countries themselves: this would become the Global Fund.

2001

The EC releases its Programme of Action on HIV, malaria and tuberculosis, which will increase the magnitude of the EC's response to the pandemics (additional funding, reduction in key pharmaceuticals' prices, leadership in international fora including the creation of the Global Fund).³ The commitment to create the Global Fund coalesces at the African Union Summit in April, continues at the UN General Assembly Special Session on HIV/AIDS in June, and is endorsed by the G8 Summit in Genoa, in July. The leadership of UN Secretary-General Kofi Annan is critical.

2002

The Global Fund formally came into being in January 2002

³ European Commission: The EU confronts HIV/AIDS, malaria and tuberculosis. August 2006. Available on: aei.pitt.edu/40719/1/DE_131.pdf

The role of the European Commission in **shaping** the Global Fund

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From the onset, the European Commission contributed to shaping the Global Fund, co-defining its strategy, working model, governance principles, financial systems, management structure, and eligibility criteria.

Following the UNGA Special Session, in consultation with the US administration, the EC set up a Transitional Working Group for the creation of the Global Fund in Brussels. The Transitional Working Group gathered representatives of developing and donor countries, the private sector, the United Nations, and unheard of at the time: gathered representatives of affected communities. All its meetings were hosted by the EC, in Brussels. In parallel, EC President Prodi was organising the first funding transfers to the Global Fund.

The EC's pivotal leadership, resource mobilization and monitoring role was further strengthened through active participation in the Board and its standing committees. The very nature of the Global Fund – a multilateral body – was aligned with the EU's commitment to multilateralism as a defining principle of its external policy, including global health.

The EC participated in all strategic and operational decisions including the most innovative ones such as the Global Fund being a financing mechanism, lean and fast, with no entities in country; supporting locally-owned programs; integrating affected communities in its decision-making processes; and disbursing funding on the basis of demonstrated results against agreed-upon targets.

Over time, the EC ensured its own policy priorities would be advanced through the Global Fund board, namely when it comes to tiered pricing and price transparency, human rights and gender equality, and the strengthening of health systems alongside HIV, TB and malaria interventions. The EC also became involved in a few Country Coordinating Mechanisms, which bring together all interested public and private sector stakeholders to manage funding requests, oversee Global Fund grants, and ensure consistency between the Global Fund financed programs, and other national health and development programs.

The EC's involvement in the Global Fund explains why, today still, the EC and the Global Fund share:

- **the same approach: rights-based, integrated, inclusive, country-led and partnership-oriented;**
- **the same goals: ending HIV, TB and malaria whilst strengthening health systems and increasing domestic resources for health, with a view of reaching the 2030 sustainable development goals.**

Testimony of **Dr Lieve Fransen**, Head of Unit for Human and Social Development in the EC's DG for Development (now DG for International Partnerships) when the Global Fund was created. Dr Fransen was providing strategic steering on behalf of the EC during the Global Fund's establishment, and served later as the Commission's first board member, chair of the Fund's Strategy Committee and Ethics and Governance Committee, and finally as the vice-chair of the Global Fund.

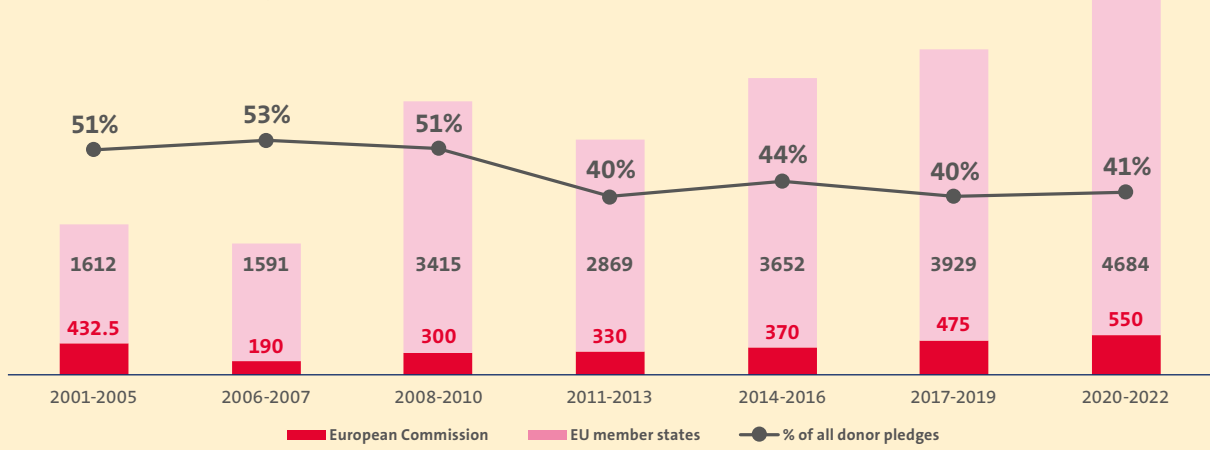
“From the start of the discussions between donors, the UK and the European Commission argued to also include the two other major communicable diseases – tuberculosis and malaria – in the efforts, together with HIV/AIDS, because we felt that those communicable diseases also had a major impact on the populations in the global south but did not have the benefit of activists and affected communities that would move the agendas forward like they did for HIV nor did those diseases have the benefit of having viable markets for the pharma industry to invest in tools and drugs to tackle those diseases as well. From the start and for the first time in history we envisaged parity and equality between the global north and south and full participation of civil society in advocacy and resource mobilization.”

The European Commission's **financial support** to the Global Fund

The European Commission has contributed financially to the Global Fund since its inception, with the first pledge announced by former President of the Commission, Romano Prodi at the landmark G8 Summit in Genoa in 2000 which endorsed the creation of the Global Fund. By 2005, the EC had pledged € 432,5 million. Since its creation, the European Commission has committed more than € 2.6 billion to the Global Fund, contributing to the success of every single replenishment to date.

Together with the additional support from EU countries, the overall EU commitment amounts to more than USD 12 billion, representing 41% of all resources pledged to the Global Fund. The EC's last pledge, for the period 2020-2022, amounted to € 550 million, an increase of 16% compared to the previous pledging period.

Pledges made by EU Member States and the EC (in million €)



The European Commission's support has contributed to building one of the most effective global health institutions, turning the Global Fund into the largest multilateral investor in grants for health systems, and allowing it to achieve extraordinary results in the fight against HIV, TB,

and malaria: health programs supported by the Global Fund had saved 44 million lives as of the end of 2020. Overall, the number of deaths caused by AIDS, TB and malaria each year have been reduced by 46% since 2002 in countries where the Global Fund invests.

Since its creation, the Global Fund partnership has:

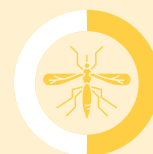
Disbursed more than
US\$ 50 billion
 to respond to HIV, TB and malaria and for programs to strengthen health systems across more than
155 countries



74%
 decline in AIDS-related death rates since 2002



42%
 decline in TB death rates since 2002



47%
 decline in malaria death rates since 2002

Saved 44 million lives

“In June 2001, I addressed the UNGA Special Session on AIDS in my capacity as Minister for Cooperation, Humanitarian Action, and Defense of Luxembourg. AIDS was causing an unprecedented human catastrophe. I called for a strong political engagement involving civil society, affected communities, and in particular women, to stop this epidemic in its tracks. Luxembourg fully supported the EU’s increased leadership as expressed by the adoption of its Programme of Action on HIV, malaria and tuberculosis. I welcomed the momentum in place to pull together substantial financial means to fight HIV/AIDS, and announced Luxembourg’s very first pledge to what we then called “the Fund”.

By 2009, when I joined the European Parliament, the Global Fund was working at steady speed, and delivering extraordinary results. Colleagues and I rallied the support of the Parliament around a resolution on a human rights approach to AIDS/HIV, which called for the EU to increase its contribution to the Global Fund. This support never faded, and led to the adoption, in May 2021, of a resolution on “Accelerating progress and tackling inequalities towards ending AIDS as a public health threat by 2030”.



Neven Mimica, Former EU Commissioner for Development and Peter Sands, Executive Director of the Global Fund, 2019.

The Global Fund and EU-ACP relations

The European Union has a long-standing relationship with African, Caribbean, and Pacific (ACP) countries. ACP States naturally became an essential partner of the Global Fund right after its inception in 2002, due their unwavering commitment to defeat HIV, TB and malaria.

The European Development Fund, which used to be the EU’s main aid instrument for ACP countries, provided up to 60% of the EC’s funding to the Global Fund, and nearly 70% of the Global Fund’s investments worldwide are invested in ACP countries. The fight against the three diseases is to this day a priority of the EU-ACP partnership (Post-Cotonou) agreement.

Today, the COVID-19 global health crisis further emphasized that the European Union must be a major strategic actor in global health, promoting and protecting health as a global public good. The European Parliament’s commitment to uphold global health as an EU priority, and its support for the Global Fund, reflect our collective ambition to prevent the spread of epidemics, protect the most vulnerable and strengthen health systems. We will continue shaping EU Global Health policies, turning EU values into concrete and decisive actions, to uphold the right to health, and ensure that everyone, everywhere has access to health.

As the Global Fund enters its 21st year of existence, I firmly believe that we need to maintain, and even bolster, our support in this highly efficient, life-saving organisation. By further strengthening our strategic partnership with the Global Fund, we will be able to deliver on our pledge to end AIDS, TB and Malaria by 2030, better prepare for future pandemics, and uphold EU values.

– Charles Goerens, Member of the European Parliament

A tipping moment

Despite significant progress, even before COVID-19, progress against HIV, TB and malaria was off track but COVID-19 has reversed hard-won gains in the fight against the three diseases.

Despite its swift response and communities' resilience, the Global Fund showed in its 2020 Results Report⁴ that COVID-19 has overwhelmed health systems. It has thrived on and deepened inequities, worsening human rights-related barriers to accessing health services. Lockdowns have disrupted service provision and increased rates of gender-based violence. Critical resources have been diverted from the fight against HIV, TB and malaria to fight COVID-19.

For the first time since its creation, the Global Fund reported declines in key programmatic results across all three diseases in the countries where it invests:

- **TB:** In 2020, the number of people treated for drug-resistant TB in the countries where the Global Fund invests dropped by 19%, with those on treatment for drug-resistant TB falling by 37%. This means around one million fewer people with TB were treated in 2020 compared with 2019.
- **HIV:** the number of HIV-positive people receiving antiretroviral treatment has continued to grow, but the declines in prevention services and testing in 2020 were alarming. People reached with HIV prevention programs and services declined by 11%, while HIV tests taken declined by 22% compared with 2019. Because of the disruptions resulting from COVID-19, the people at greatest risk of infection have had less access to the information and tools they need to protect themselves.
- **Malaria:** Malaria deaths and cases increased significantly in 2020, mainly due to COVID-19 disruptions. New estimates suggest a child is dying nearly every minute because of this mosquito-borne parasite. Malaria testing fell by 4%.

In February 2022, the Global Fund published its Investment Case⁵, announcing that its target for the Seventh Replenishment is to raise at least US\$ 18 billion to fight HIV, TB and malaria and build stronger systems for health. This sharp increase compared to the previous replenishment reflects the severity of the impact of COVID-19 on the fight against the three diseases.

In 2002, the Global Fund was created to step up the fight against the three infectious diseases that were then killing most people. The European Commission has been instrumental in the creation and development of the Global Fund. Replenishment after replenishment, the EC stepped up its investments, contributing to successful replenishment campaigns. Board meeting after board meeting, the EC contributed to the strategic steering of the Global Fund.

2022 is a tipping moment. Another moment of global solidarity is needed to get the progress against the three diseases back on track, or the vital gains achieved over the past 20 years will be lost. In this context, the EC's longstanding partnership with the Global Fund is more critical than ever. The European Commission must demonstrate leadership again and do whatever it takes to end HIV, TB and malaria as public health threats, save lives, and accelerate progress towards universal health coverage.



Distribution of insecticide-treated nets in Prongyeang, Cambodia.

4 www.theglobalfund.org/en/results/
5 www.theglobalfund.org/en/fight-for-what-counts/

Colophon

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