The Global Fund

REGIONAL IMPACT REPORT

Global Fund's Investments in the Pacific Region



Countries in the Pacific region are important implementers of Global Fund grants. Sustained commitment and successful partnerships are leading to transformative results.

The Global Fund is partnering with governments, medical experts, advocates, civil society and communities affected by HIV, TB and malaria to fight the three diseases and build resilient and sustainable systems for health. As of May 2019, the Global Fund partnership has invested a total of US\$366 million in 14 island countries in the Pacific region.

New Zealand's investment in the Global Fund represents an exceptional leverage. For every US dollar contributed by the government of New Zealand, the Global Fund partnership has invested US\$102 in the 14 island countries in the Pacific region.

Key results in the Pacific region



Z**O** THOUSAND

4Z THOUSAND

15.2

PEOPLE ON ANTIRETROVIRAL THERAPY PEOPLE
TREATED FOR
TUBERCULOSIS

MOSQUITO NETS DISTRIBUTED

Long-Term Economic Gains

Each dollar invested in fighting the three diseases yields huge economic returns in addition to saving lives and reducing the burden of diseases. The total investment of US\$366 million in the Pacific region is estimated to have spurred US\$6.9 billion in long-term economic gains.

US\$6.9 BILLION

In long-term economic gains

This estimate assesses the economic value of better health and a more productive society by quantifying productivity and consumption gains, including through household savings, and calculating that each person who goes on lifesaving treatment is a potential contributor to the economic health of a community. These extraordinary benefit-cost ratios show the powerful economic effect of smart spending to fight the three diseases.

HIV

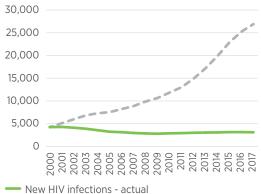
In Papua New Guinea (PNG), the national HIV prevalence is 0.86 percent with a concentrated epidemic among key populations – sex workers, men who have sex with men and transgender people. The current grant covers seven provinces with very high HIV burden and provides prevention for key populations. The Global Fund is the only donor supporting prevention programs for key populations.

HIV prevalence is estimated at 0.1 percent in the 11 island countries that are covered by the Western Pacific grant¹ – Cook Islands, Kiribati, Federated States of Micronesia, Nauru, Niue, Palau, Republic of Marshall Islands, Samoa, Tonga, Tuvalu and Vanuatu.

Despite the low prevalence rate, HIV vulnerability continues to be high due to widespread migration and mobility, sexual networks, a large caseload of untreated sexually transmitted infections (STIs), low knowledge about HIV and STIs, high levels of transactional sex and significant levels of intimate partner violence.

Serious challenges remain in reaching key populations, given the small population size and existing stigma and discrimination. To improve access to HIV care and diagnosis, the current grant focuses on community-based interventions and strengthening STI/HIV services for key populations.

Trends in new HIV infections in Global Fund-supported countries in the Pacific



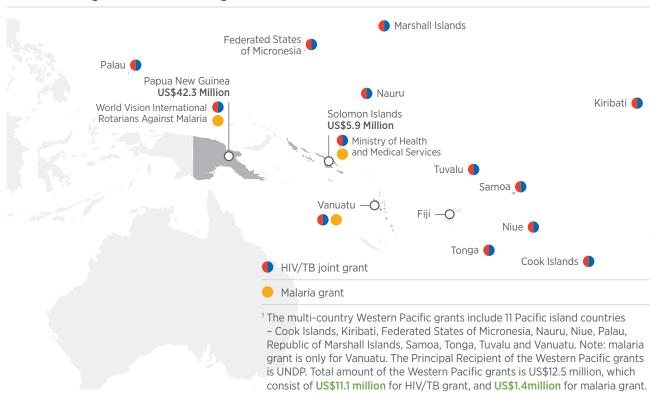
New HIV cases - no ARV therapy - no prevention

Tuberculosis

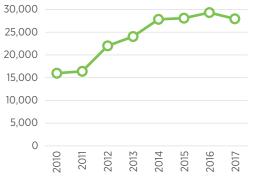
PNG has the highest number of new tuberculosis cases in the Pacific Region and the 30th highest globally. The multidrug-resistant TB burden has remained constant over the last three years. To increase case detection and diagnosis, treatment coverage and multidrug-resistant case finding, the Global Fund supports the national response in PNG. Programs include systematic screening at all basic management units, empowering community TB care delivery, strengthening diagnostic center and microscopy services and expanding GeneXpert sites.

In the 11 island countries that are under the Western Pacific grant, the treatment success rate averages

Current active grants in the Pacific region



Trends in notified TB cases (all forms) in Global Fund-supported countries in the Pacific



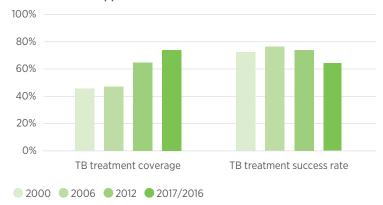
Data for new TB cases all forms when no control is available

86 percent among new TB cases at the regional level.

Overall, the TB treatment coverage in the region increased from 46 percent to 74 percent between 2000 and 2017. However, the treatment success rate has been relatively suboptimal and flat, which is contributing an increase in the rate of drug-resistant TB, particularly in PNG, and could potentially lead to a regional health security issue. The low coverage of drug-resistant tuberculosis diagnosis and treatment in the region has been due to the low capacity and limited availability of resources.

Access to health services and insufficient quality of care have hampered further advancement of TB control in the region. However, with

Trends of TB treatment coverage and success rate in Global Fund-supported countries in the Pacific



GeneXpert machines now installed in PNG and all the 11 island countries under the Western Pacific grant and technical assistance by WHO's TB advisor in Fiji, who is funded by the Global Fund, the current TB grants aim to increase the number of diagnosis, the case notification rate of all forms of TB and treatment success rate in the region.

Malaria

PNG has the highest malaria incidence rate in the world outside Africa with the entire population at risk. The Global Fund is the only donor funding malaria case management (rapid diagnostic tools and treatment) and providing almost universal coverage of long-lasting

insecticidal nets in the country. In the current grant, the Global Fund covers distribution costs for 3 million Long Lasting Insecticidal Nets (LLINs) that have been procured by Against Malaria Foundation (AMF). The partnership of the Global Fund and AMF was essential in reducing the funding gap of PNG between 2014-2016 cycle and the current 2017-2019 cycle.

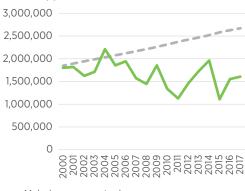
The Solomon Islands also has one of the highest malaria burdens in the region. The Global Fund has been using a "cash-on-delivery" approach for both malaria and TB/HIV grants since 2015. The Ministry of Health and Medical Services pre-finances all local expenditures, and the Global Fund reimburses the Ministry based on the impact achieved. This modality contributes to accountability and ownership, and helps the country prepare for transition and sustainability of the programs. In terms of risk mitigation, all procurement of health commodities and medicines are directly procured through the Global Fund and/or WHO.

Spraying to prevent malaria, Vanuatu



The province of Tafea in Vanuatu was declared malaria free in November 2017. There have been no confirmed malaria-related deaths in Vanuatu since 2012, and no cases of malaria in Tafea province since 2014. The efforts demonstrate the success of partnerships led by the government of Vanuatu to serve rural communities. WHO, the National Malaria Program and the Global Fund are working together to strengthen skills on monitoring malaria incidence and ensuring the elimination status is maintained.

Trends in malaria cases in Global Fund-supported countries in the Pacific



- Malaria cases actual
- Malaria cases no malaria control

The Global Fund / AUSAid

At the 2018 Commonwealth Heads of Government Meeting in London, Solomon Islands reaffirmed its commitment to eliminate malaria by 2030. Alongside the Prime Ministers of Papua New Guinea and Vanuatu, the Prime Minister of Solomon Islands endorsed the Asia Pacific Leaders' Malaria Elimination Roadmap as a framework for shared action.

Women and Girls

The Pacific region has one of the highest gender-based violence rates in the world. About 70 percent of women and girls experience rape or other sexual violence in their lifetime. Violence makes women and girls more vulnerable to HIV. The current Western Pacific grant includes interventions in selected countries to reduce violence against women, implemented in collaboration with the United Nations Population Fund.

Transition and Sustainability

In order to improve efficiency of grant implementation and increase country ownership, the Global Fund introduced in 2015 a simplified grant management approach to the Western Pacific grant, which allows the Pacific Islands Regional Multi-Country Coordinating Mechanism (PIRM CCM) conduct more robust oversight and coordination functions, as well as actively participate in the grant management processes.

To increase sustainability and prepare for transition in Vanuatu, the Principal Recipient (the organization that implements the grant) for the malaria grant is planned to move from UNDP to the Ministry of Health in January 2021. The Global Fund, the Ministry of Health, UNDP and other partners such as WHO and DFAT will be developing a capacity development plan to strengthen the capacity of

the Ministry of Health in 2019-2020. The goal is to explore feasibility of implementing the 2021-2023 malaria grant under a "cash-on-delivery" model by having the Ministry of Health pre-finance the distribution of mosquito nets and other recurrent expenditures, while the Global Fund procures the nets and health products.

The Global Fund eligibility criteria are designed to ensure that available resources are allocated and invested in countries and regions with the highest burden of disease and the least economic capacity to respond to HIV, TB and malaria, and reach key and vulnerable populations that are disproportionately affected by the three diseases. Eligibility is determined by a country's income classification, as measured by Gross National Income (GNI) per capita, and official disease burden categorization.

In the Pacific region, Kiribati,
Federated States of Micronesia, Samoa
and Vanuatu are eligible as they are
upper-low-middle-income countries.
Republic of Marshall Islands, Tonga,
Palau and Tuvalu, which are uppermiddle-income, are eligible under
the policy's Small Island Economy
Exception. The ineligible countries
- Cook Islands, Niue, and Nauru receive funding by being part of the
multi-country Western Pacific grant.

Fiji was allocated US\$4.4 million as transition funding for 2015-2017 and became ineligible from 2018. During the transition period from 2015 to 2017, the Global Fund supported Fiji's national TB program through strengthening of labs and increasing case detection. The Global Fund worked closely with the Ministry of Health and in-country representatives of DFAT and WHO to ensure a transition plan was put in place to mitigate any major risks when Fiji transitioned out of the Global Fund portfolio.



An estimated 94% of Papua New Guinea's population live in areas that are endemic for malaria with women and children under 5 at particular risk. Despite a long rainy season, challenging terrain and limited infrastructure, the country has made strides against malaria. With the support of the Global Fund, Rotarians Against Malaria have delivered 10.5 million insecticide-treated nets in provinces and an additional 1.3 million nets to pregnant women through antenatal clinics across the country. As a result, the number of malaria cases and deaths has fallen significantly since 2007, in some areas by more than 70%.

About the Global Fund

About the Global Fund The Global Fund is a 21st-century partnership designed to accelerate the end of AIDS, tuberculosis and malaria as epidemics. As a partnership between governments, civil society, the private sector and people affected by the diseases, the Global Fund mobilizes and invests nearly US\$4 billion a year to support programs run by local experts in more than 100 countries. By challenging barriers and embracing innovative approaches, we are working together to better serve people affected by the diseases.

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