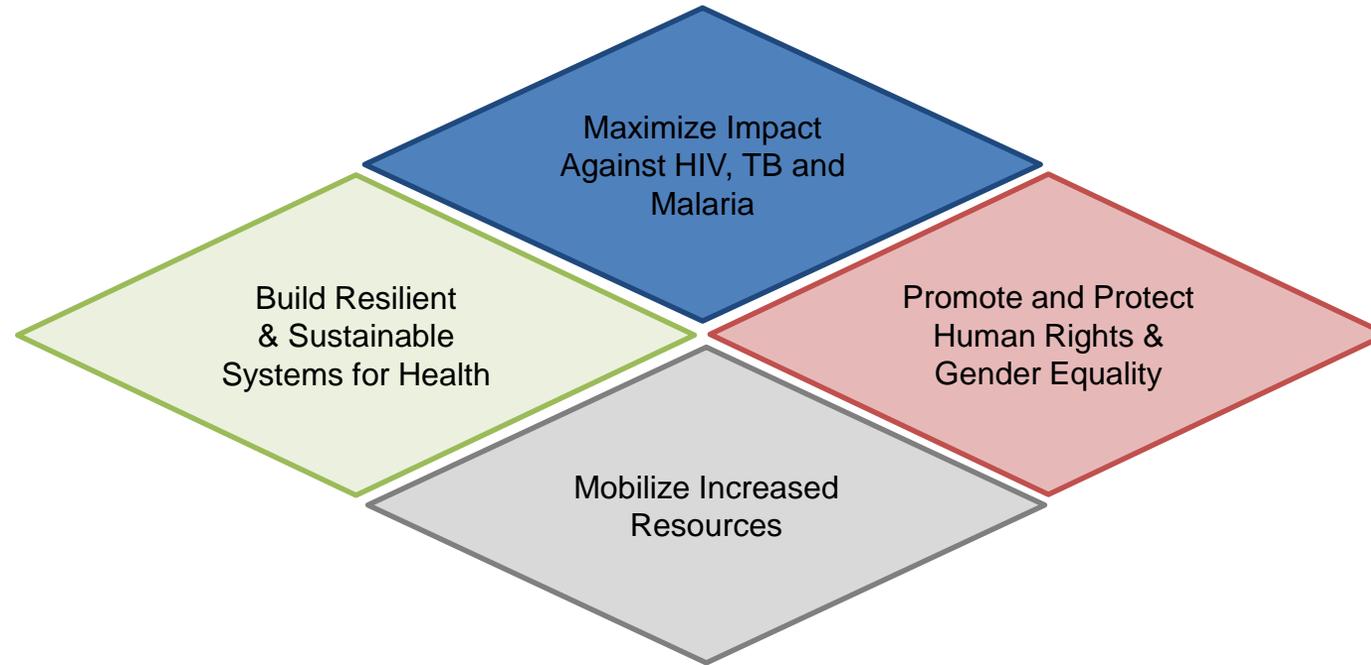


Leveraging Global Fund Investments in RSSH for Childhood and Adolescent TB

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Global Fund Strategy 2017 – 2022

“Investing to End Epidemics”

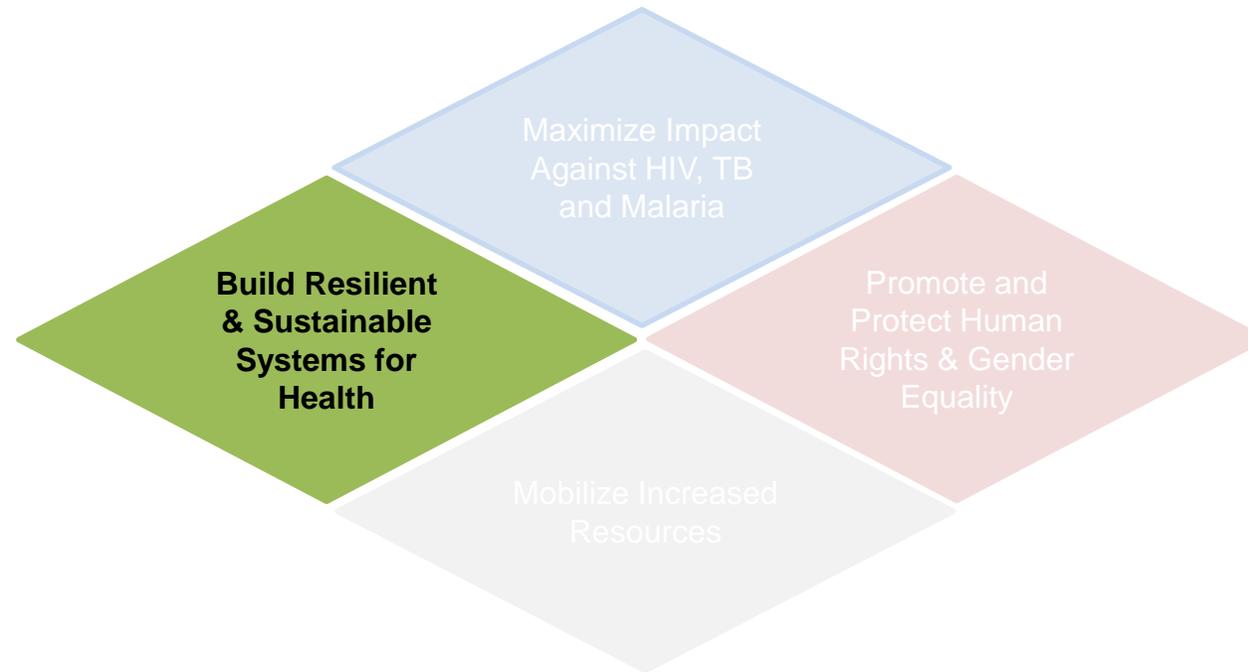


Strategic Enablers

Innovate and Differentiate along the Development Continuum

Support Mutually Accountable Partnerships

Building Resilient and Sustainable Systems for Health (RSSH)



Strengthening systems for health is critical to attain universal health coverage and to accelerate the end of the epidemics

1. **Strengthen community responses and systems**
2. **Support reproductive, women's, children's, and adolescent health, and platforms for integrated service delivery**
3. Strengthen global and in-country procurement and supply chain systems
4. **Leverage critical investments in human resources for health**
5. Strengthen data systems for health and countries' capacities for analysis and use
6. Strengthen and align to robust national health strategies and national disease-specific strategic plans
7. Strengthen financial management and oversight

Support for RMNCAH and platforms for integrated service delivery

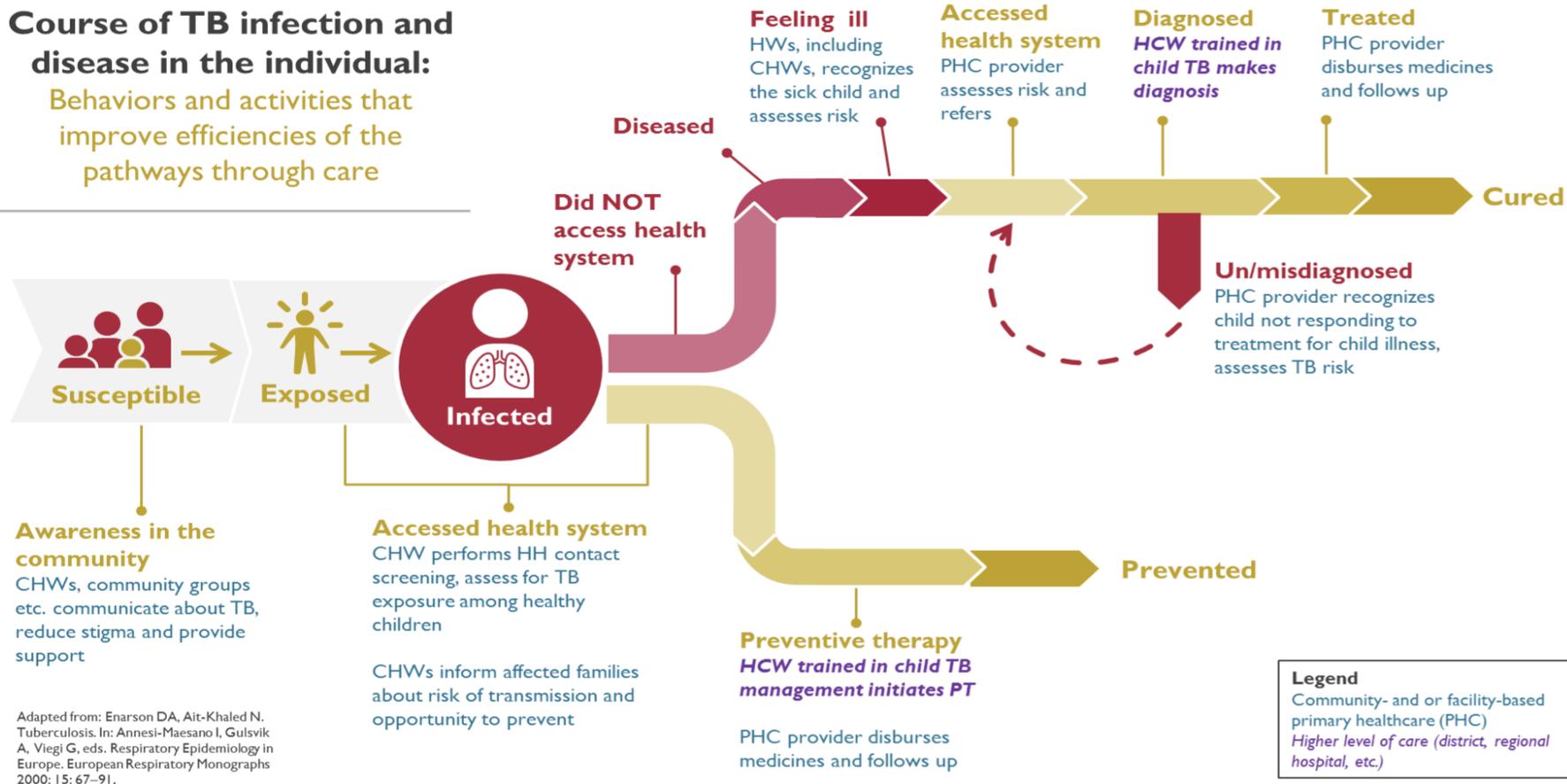
TB programming as part of integrated, people-centred care for mothers and children

- Global Fund strategy emphasizes importance of evidence-based integrated services for women, newborns, children and adolescents
- Four platforms of integrated service delivery prioritized for co-investment:
 - Antenatal care (ANC), integrated community case management (iCCM), integrated SRH-HIV services, adolescent health
- Countries must critically evaluate what packages of services and models of delivery are most appropriate and feasible
 - Three important opportunities in MNCH service delivery where TB-related activities should be included:
 - During ANC/PNC
 - During child immunizations, well child visits and growth monitoring events
 - During the case management of sick children including IMCI and iCCM
- Investments should also support integration in policies and build the capacity of national ministries of health to align separate financial, management and institutional processes

Strategic opportunities to improve the prevention, detection and management of TB through RSSH investments

Course of TB infection and disease in the individual:

Behaviors and activities that improve efficiencies of the pathways through care



Adapted from: Enarson DA, Ait-Khaled N. Tuberculosis. In: Annesi-Maesano I, Gulsvik A, Viegi G, eds. Respiratory Epidemiology in Europe. European Respiratory Monographs 2000; 15: 67-91.

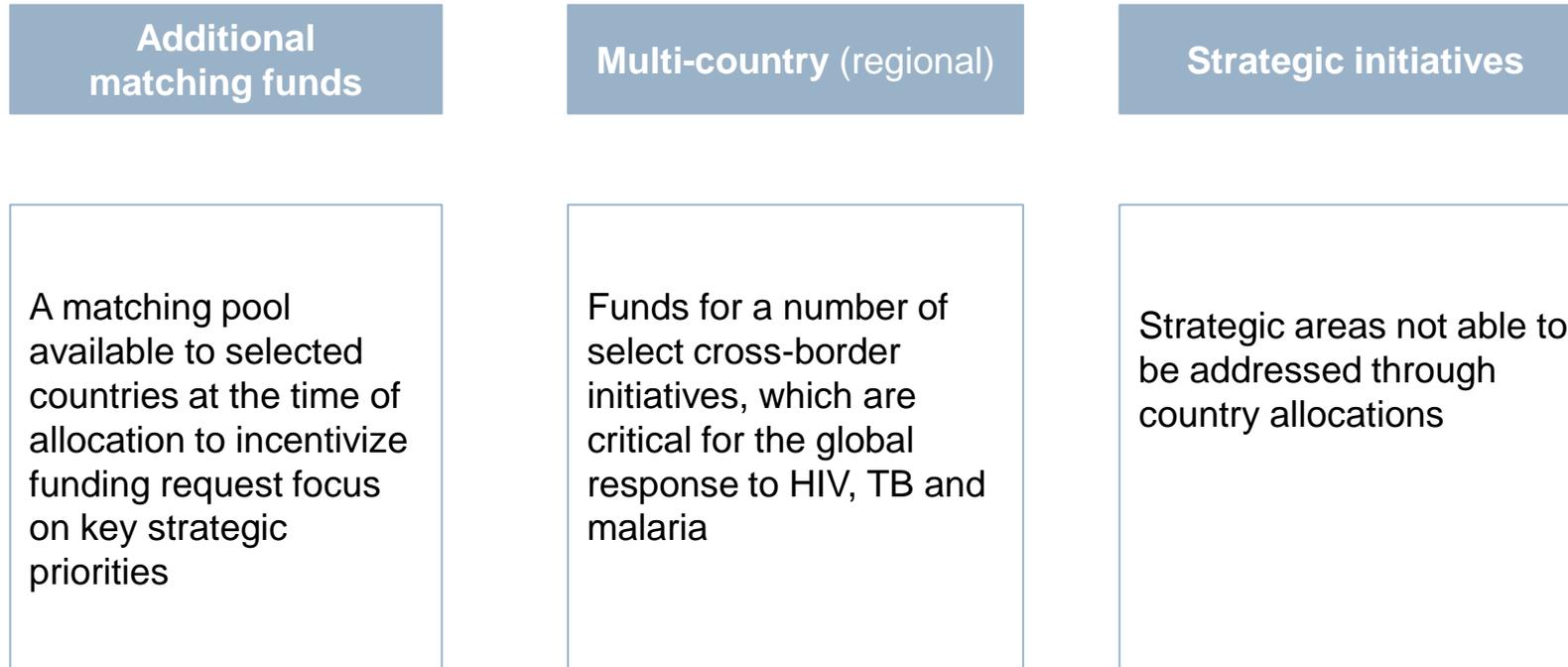
Current Global Fund funding opportunities

Leveraging RSSH investments for childhood and adolescent TB

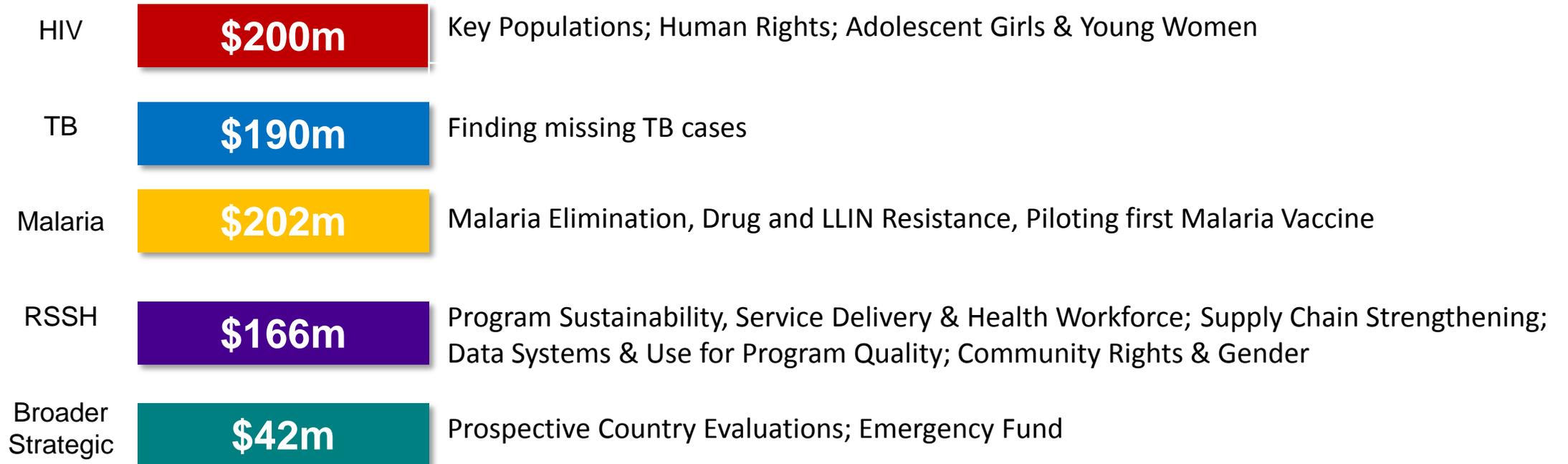
- \$11.1b is currently available for the 2017-2019 allocation period
- Country allocations (\$10.3b)
 - HIV, TB, malaria, HIV/TB, RSSH
- Catalytic investments (\$800m)
 - Matching funding
 - Multi-country initiatives
 - Strategic initiatives
- Co-financing requirement and incentive to increase country ownership and build the sustainability of programs

Three categories of Catalytic Investments

Matching Funds, Regional, Strategic Initiatives



Priority areas for catalytic investments



Illustrative Modality	Total Funding (US\$ m)	% of Funding
Matching Funds	356	44.5%
Multi-County Proposals	272	34.0%
Strategic Initiatives	172	21.5%
Total	800	

Types of Matching Funds for RSSH

	Catalytic priority for matching funds	Epidemiological Context / Focus Countries
RSSH	Integration of service delivery & health workforce Improvements	7 countries with fragmented systems of services (poor continuity and QoC) and where HIV, TB and malaria outcomes are particularly poor: Afghanistan, Benin, Guinea, Liberia, Niger, Sierra Leone, Zambia .
	Data systems, generation and use	13 countries: Bangladesh, Burkina Faso, Congo (Democratic Republic), Cote d'Ivoire, Indonesia, Malawi , Mozambique , Myanmar, Pakistan, Tanzania , Togo, Ukraine.

Matching Funds: HRH & Service Delivery

Suggested Approaches and Interventions

Aim: enable scale up of integrated approaches to allow for better delivery of HIV, TB and malaria interventions

- **Evidence-informed country HRH policies developed and implemented** to overcome barriers to improvement of health outcomes related to the three diseases in integrated context
- **Community-based health workforce** policy development and implementation, including geospatial mapping, remuneration policies and integrated service delivery mechanisms, including iCCM and enhanced ability to identify missing cases
- **Inclusion of disease interventions** (including PMTCT, EID and pediatric TB) into integrated service delivery platforms including ANC, post-natal care and iCCM, and associated quality of care initiatives

Expected Outcomes

- HIV, TB and malaria interventions included in good quality, scaled-up integrated service delivery platforms
- HRH and CHW policies in place in all countries, informed by evidence-based assessment
- More impactful investments that are harmonized and aligned, and leverage domestic/other funding

Types of strategic initiatives for RSSH

Strategic Initiative	Objective
Sustainability, Transition and Efficiency	Accelerate the implementation of Global Fund's Sustainability, Transition, and Co-Financing Policy.
RSSH: Technical Support, South to South, Peer Review and Learning	Support health systems and effective HIV, tuberculosis and malaria programming.
RSSH: Data Systems, Generation and Use for Programmatic Action and Quality Improvements	Strengthen health information systems and surveillance; enable country systems to collect, report on and use data; support program impact and thematic evaluations and epidemiological reviews.
Procurement and Supply Management	Strengthen supply chain through renewed strategic efforts that enhance and promote advances in the supply of medicines to improve universal access.
Community, Rights and Gender	Build upon progress made in strengthening engagement of civil society and communities most affected by the three diseases in Global Fund processes.
Prospective Country Evaluations	Document the results of Global Fund-funded programs and share lessons learned.
Emergency Fund	Support the provision and continuity of essential prevention and treatment services for HIV, tuberculosis, and malaria during emergency situations that cannot be funded simply through the reprogramming of existing grants.

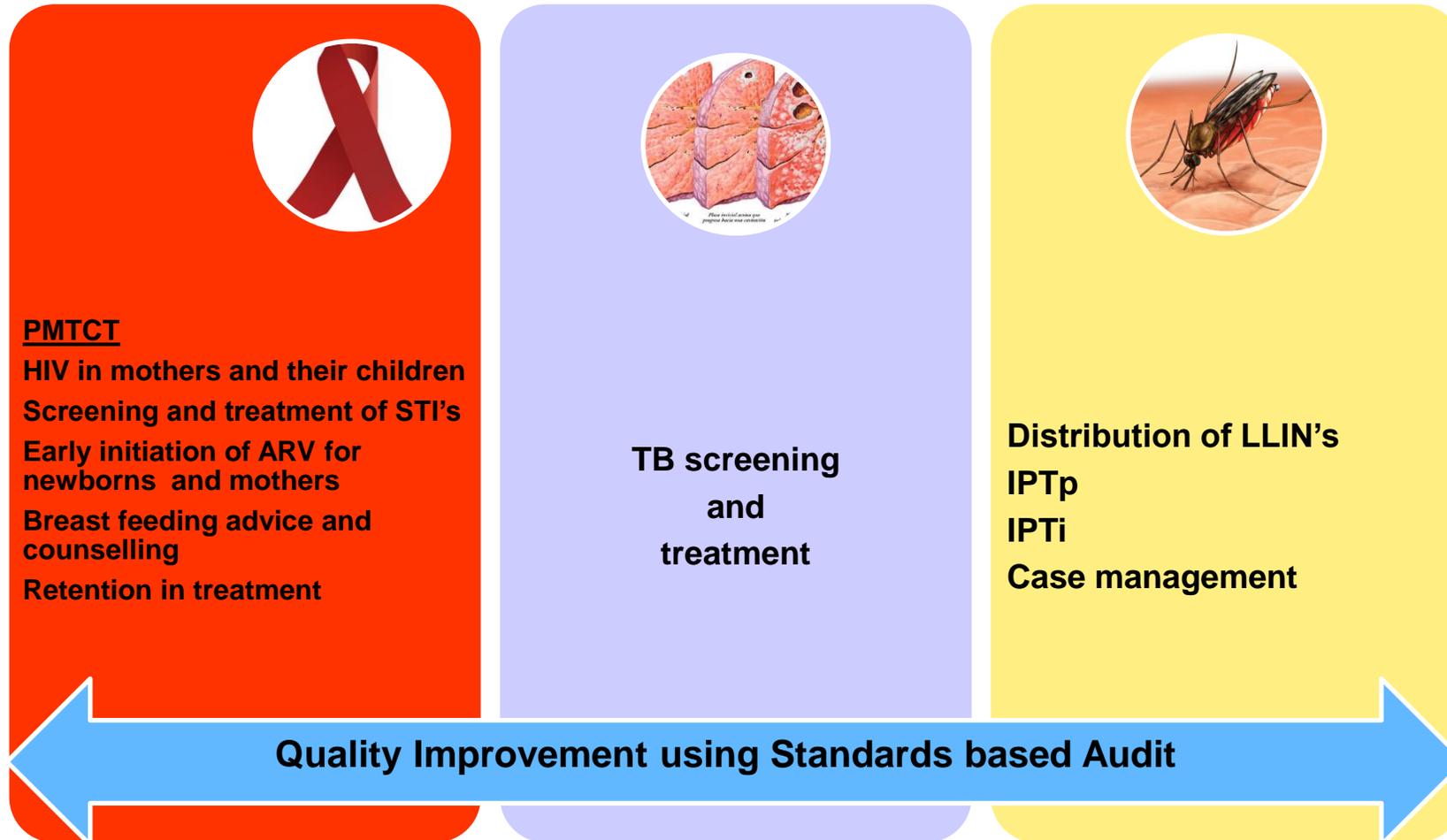
Catalytic investments: HRH & Service Delivery

Strategic Initiatives 1.1 (*Sustainability*, USD15 million) and 1.3 (*Technical Support*, USD 14 million)

Currently working with technical partners to design initiatives focused on:

- Strengthening cross-program integration governance and practice
- Integrated care for adolescent girls and young women
- Strengthening implementation of HIV, TB and malaria interventions during ANC/PNC (PQE)
- Development of additional HRH guidance on role community health workers in relation to the three diseases
- Supporting countries to develop well-costed and prioritized national health strategies and national disease-specific strategic plans

Program Quality and Efficiency through integration across ANC and PNC



Coordination at country level is needed to enable integration and leverage funding opportunities

- Engage in discussions on national health sector plans and disease strategies
- Advocate for the integration of RMNCAH and disease specific policies
- Reach out to Country Coordinating Mechanism (CCM) to participate in the country dialogue process and preparation of Global Fund funding request and/or program revision
- Advocate that funding requests include – and prioritize – evidence-based interventions for RMNCAH and integrated service delivery
- Encourage increased domestic financing to complement investments