

SEA CONSTITUENCY

Newsletter

DECEMBER 2024

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Global Fund News

The Global Fund Global Fund and Stop TB Step Up Collaboration to Fight Tuberculosis, the Biggest Infectious Disease Killer



On 6 November 2024, The Global Fund and the Stop TB Partnership have announced an enhanced collaboration to combat tuberculosis. This partnership aims to accelerate efforts to end TB as a public health threat by 2030, focusing on increasing funding, improving access to treatment, and promoting innovative approaches to TB prevention and care.

The strengthened collaboration between these two organizations seeks to address critical gaps in TB care and prevention, particularly in low- and middle-income countries where the burden is highest. By pooling resources and expertise, the Global Fund and the Stop TB Partnership plan to support countries in implementing effective TB programs, scaling up access to essential services, and advancing research and development for new tools to fight the disease.

This initiative underscores the importance of coordinated global action in the fight against TB and reflects a shared commitment to achieving the targets set in the United Nations Sustainable Development Goals. Through this partnership, the organizations aim to mobilize greater political and financial commitment, ensuring that efforts to combat TB are sustainable and impactful in the years leading up to 2030.

Call for Expressions of Interest: Independent Member of the Audit and Finance Committee of the Global Fund

On 10 December 2024, The Global Fund announced a call for two independent experts to join its Audit and Finance Committee (AFC). These roles, focused on financial audit and forensic investigation, are pro-bono positions for the 2025–2028 term, starting in May 2025.

The AFC plays an important role in overseeing the Global Fund's financial management, audit processes, and corporate operations. The new members will join a team of 12 representatives from the Global Fund Board and two non-voting ex-officio members, along with a neutral Chair and Vice-Chair.

Members will attend three two-day in-person meetings annually in Geneva, Switzerland, with additional work between sessions, such as conference calls and document reviews. The positions include an honorarium, as well as travel expenses and per diems for in-person meetings.

This opportunity highlights the Global Fund's commitment to transparency and financial excellence. Interested candidates are encouraged to apply and support the fight against AIDS, tuberculosis, and malaria.

For more information, please visit here.

Gavi and Global Fund Malaria Vaccine Guidelines

The Global Fund and Gavi have taken a major step forward in malaria prevention by releasing <u>Guidelines on Gavi and Global Fund support for complementary interventions to facilitate the deployment of malaria vaccines.</u> This vaccine complements existing malaria interventions such as vector control, chemoprevention, case management, surveillance, and program management.

The new guidelines outline how the Global Fund and Gavi will collaborate to enhance malaria vaccine rollout. They include details on co-financing requirements, activities to strengthen health systems, and a mapping of relevant Global Fund modules and Gavi investment areas.

This partnership aims to ensure the effective implementation of the malaria vaccine alongside other critical interventions, helping to accelerate progress in malaria control and elimination efforts.

Malaria and Climate: Reprogramming for Grant Cycle 7

Climate change is a global health challenge that has the potential to exacerbate malaria transmission, hindering our progress in the fight against this disease. To support countries in their efforts to reach national targets for malaria control and elimination and to address the imperative of climate change, the Global Fund has developed Malaria and Climate: Reprogramming Examples for Grant Cycle 7.

This document provides opportunities to use Global Fund grant funds to support the introduction of climate change-related interventions into malaria programs. Priority interventions for Grant Cycle 7 malaria grants include promoting collaboration across sectors and using data to adapt national malaria strategies and identify vulnerable populations impacted.

The relevant interventions from the <u>Global Fund Modular Framework</u> and reprogramming examples are also provided to illustrate how climate change-related interventions can be integrated.

For more information, contact your Country Team.

SEA Constituency

Global Fund Board Takes Unprecedented Set of Decisions to Strengthen Sustainability and Gears Up for Eighth Replenishment



In November 2024, the Global Fund's Board convened its 52nd meeting in Lilongwe, Malawi, acknowledging the nation's significant advancements against HIV, tuberculosis (TB), and malaria. Representing South East Asia Constituency were Dante Harbuwono (Board Member), Aishath Samiya (Alternate), Aqsha Nur (Focal Point), Rinzin Rinzin (Bhutan), Manaj Biswas (Bangladesh), Raghuram Rao (India), Bayu Muliawan (Indonesia), Bayu Kurnia (technical expert), and Abdul Hameed (technical expert).

The Board unanimously approved comprehensive policy revisions to enhance sustainability and prepare for the Eighth Replenishment. The decisions include adjustments to the Eligibility Policy and Allocation Methodology, the Sustainability, Transition, and Co-Financing Policy, and Catalytic Investment.

SEA Constituency also initiated important bilateral meetings to advance regional interests with the UK, Global Fund Youth Council, Malawi's Minister of Health, Global Fund Secretariat, UNAIDS, WHO, African Constituencies, Private Sector, Japan, and Roll Back Malaria.

Global Fund's Committee Committee Leadership and Membership Selection Process 2025-2028

The South East Asia Constituency has successfully completed the selection process for candidates to serve on the Global Fund Committees for the 2025–2028 term. The approved list of candidates, finalized on 4 December 2024, has been submitted to the Global Fund Secretariat.

The nominees for the three key committees are as follows:

- Mr. Bayu Teja Muliawan (Indonesia), Mr. Sonam Wangda (Bhutan), Mr. Sunil Kumar Yadav (Nepal), and Mr. Shri Simrandeep Singh (India) for the Audit and Finance Committee (AFC);
- Mr. Mongal Gurung (Bhutan), Dr. Hermawan Saputra (Indonesia), Ms. Shaina Abdulla (Maldives), and Dr. Prakash Ghimire (Nepal) for the Ethics and Governance Committee (EGC); and
- Dr. Suriya Wongkongkathep (Thailand), Ms. Deki Yangzom (Bhutan),
 Dr. Roshan Pokhrel (Nepal), and Ms. Maimoona Aboobakuru
 (Maldives) for the Strategy Committee (SC).

The work of the Global Fund Board is carried out through these committees, which provide oversight and strategic direction in financial management, governance, and health investments. The selection process, led by the Constituency Board Member and Alternate, identified candidates with exceptional leadership skills, expertise in global health, and a strong commitment to tackling HIV/AIDS, tuberculosis, and malaria.

This process highlights the region's dedication to strengthening its representation and advancing its contributions to global health initiatives.

Country Story: Germany and Indonesia Sign Landmark €75 Million Debt Conversion Agreement to Strengthen Public Health



On 16 December 2024, Germany and Indonesia, supported by the Global Fund, signed a historic €75 million Debt2Health agreement to strengthen Indonesia's public health systems. This is the largest debt swap under the initiative, aimed at combating infectious diseases and enhancing health system resilience.

Half of the converted funds will directly support Indonesia's fight against tuberculosis (TB), addressing its status as the country with the second-largest TB burden globally. Investments will enhance screening, procure diagnostic tools, and expand outreach programs. Other funds will bolster malaria control, improve health infrastructure, and promote local medicine production.

The Debt2Health mechanism, pioneered by Germany in 2007, transforms national debt into health investments, facilitating sustainable financing for health. Germany has played a key role in 10 out of 14 such agreements globally.

Peter Sands, Executive Director of the Global Fund, praised the agreement as a model for innovative financing that aligns health investments with domestic funding transitions, ensuring long-term impact against AIDS, TB, and malaria.

Upcoming Events

New Year 2025

As 2024 comes to a close, it is a time to reflect on the progress made and the dedication shown throughout the year. With 2025 just around the corner, even greater achievements are within reach in the year ahead.





Wishing everyone a joyful, healthy, and successful New Year!

What is the South East Asia (SEA) Constituency newsletter?

It is a monthly publication created to disseminate information from the Global Fund Board and Alternate Members of the SEA Constituency and the members.

Who are the recipients of this newsletter?

Primary recipients are Country Coordinating Mechanism (CCM) Chairs and Coordinators. It is also available to the broader public, including health providers, NGO members, and other interested individuals.

What will you find in the newsletter?

Updates on Global Fund Board-related matters, the latest Global Fund news, and country-specific initiatives for HIV, tuberculosis, and malaria.

Can this newsletter feature my organization's stories, activities, or opportunities (e.g. conferences or workshops)? Absolutely! Please send your stories related to HIV, tuberculosis, or malaria by the 25th of each month to seaconstituency@gmail.com to be published in the following month's edition.

How can I or my colleagues get the newsletter?

Simply fill out this form, and you will receive the newsletter every month directly in your email.

Stay informed and connected with the latest updates, insights, and news from the SEA Constituency. Our monthly newsletter, created by the dedicated support team, provides valuable information and highlights key activities within the constituency.

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The Global Fund to Fight AIDS, Tuberculosis, and Malaria

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