

THE GLOBAL FUND'S UNIQUE CONTRIBUTION TO UNIVERSAL HEALTH COVERAGE AND STRONGER HEALTH SYSTEMS

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A review of the evidence and future opportunities

Background

The global community has embarked on an unprecedented effort to achieve Universal Health Coverage — enabling all people to access “the full range of quality health services they need, when and where they need them, without incurring financial hardship.”¹ Globally, important progress has been made in expanding health service access,² but an estimated 3.1 billion people — roughly 40% of the world’s population — still lack access to meaningful health coverage,³ and roughly 2 billion people confront the risk of “catastrophic or impoverishing health spending.”⁴

Given the urgency of expanding meaningful health coverage and the enormity of the health coverage gap, the world needs to leverage every available opportunity to advance towards Universal Health Coverage. This includes taking optimal advantage of the infrastructure established through the more than five-fold increase in development assistance for health over the last two decades.⁵

The Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund) has helped drive the historic surge in international health financing. When they think about the Global Fund, many observers focus on financing for antiretroviral drugs, malaria tests and bednets, and tuberculosis diagnostic machines and medicines. Less understood is the Global Fund’s substantial and growing role in building the health systems needed to achieve and sustain Universal Health Coverage.

This issue brief explores the critical role the Global Fund plays in helping countries advance towards Universal Health Coverage and identifies opportunities for increased impact.

KEY POINTS

- A critical aspect of Universal Health Coverage is providing health services to prevent and treat the deadliest infectious diseases. The Global Fund has achieved dramatic results against AIDS, tuberculosis and malaria.
- Realization of Universal Health Coverage will require strong and resilient health systems. With one third of its resources devoted to supporting health systems, the Global Fund is one of the top global investors in this area.
- A pioneer in building from disease-focused programming to cross-cutting systems investments, the Global Fund demonstrates that fighting diseases and working toward Universal Health Coverage are mutually reinforcing, not in opposition.
- The Global Fund brings a unique model to the global effort to achieve Universal Health Coverage, emphasizing results, engagement of multiple stakeholders, reaching the most marginalized and incentivizing domestic resource investment.
- Global Fund health systems investments in surveillance, detection, medical oxygen and other areas will help countries be better prepared for future disease threats.
- There are opportunities to refine and expand the Global Fund’s positive impact on health systems and Universal Health Coverage. The Global Fund is now planning to increase even further its investments in health systems.

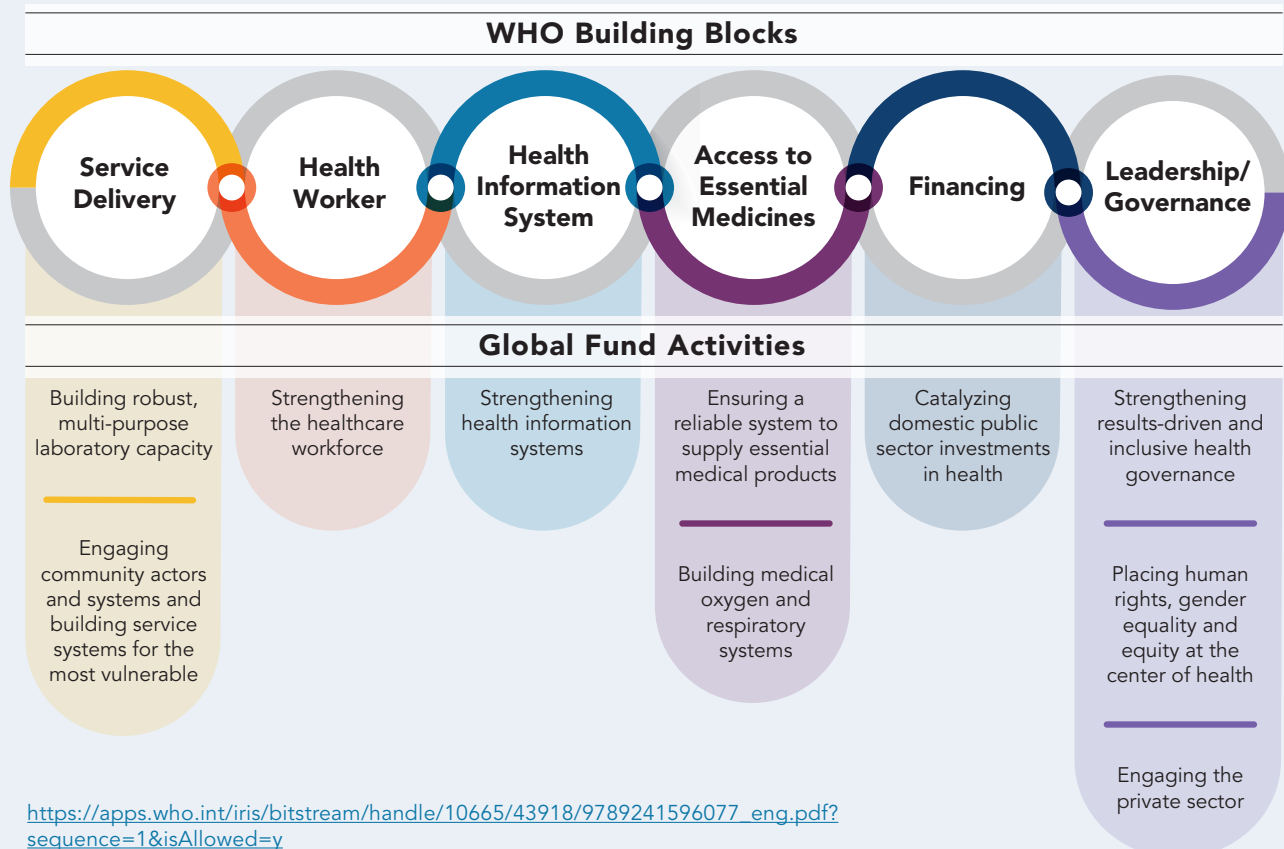
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It looks at 10 health system areas that are critical to Universal Health Coverage. The brief builds on an extensive review of peer-reviewed and grey literature and interviews with more than 40 key informants.^a

How the Global Fund helps build the health systems needed for Universal Health Coverage

During the last two decades, the Global Fund has invested more than US\$55 billion in health systems and services in low- and middle-income countries and saved an estimated 50 million lives.⁶ During the 2021-2023 funding cycle, the Global Fund invested \$4.9 billion, or \$1.5 billion a year, in formal and community health systems through their core grants and COVID-19 response — about one-third of total investments.⁷ An independent review of the Global Fund's investments by Pharos Global Health found that 33% of Global Fund core grants approved during the 2017-2019 and 2020-2022 funding cycles were devoted to pandemic preparedness.⁸ The review summarized here found that the Global Fund is making critical contributions towards nearly all of the WHO building blocks for strong health systems.

GLOBAL FUND: HIGH IMPACT INVESTMENTS IN THE FOUNDATIONS OF UHC



https://apps.who.int/iris/bitstream/handle/10665/43918/9789241596077_eng.pdf?sequence=1&isAllowed=y

During its current funding cycle (2023-2025), the Global Fund aims to do even more to provide cross-cutting support for health systems. The Global Fund's strategy calls for stronger and more purposeful efforts to build resilient and sustainable systems for health, with a specific focus on strengthening primary health care to deliver integrated, people-centered services.^{9, b} The Global Fund is already implementing this new approach and is working with countries to reinvest more than \$2 billion in COVID-19 funding for health systems and pandemic preparedness now that countries have pivoted away from purchasing COVID-19 commodities.

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Strengthening the health workforce

The health workforce is arguably the single most important element of any health system, and no path to Universal Health Coverage is feasible without a strong, resilient, well-prepared health workforce. The world is currently 15 million workers short of the minimum health workforce required. There are especially acute shortages in low-income countries, where health worker density (by population) is 6.5-fold lower than in high-income countries.¹⁰

Global Fund financing helps build a robust health workforce and is helping close health workforce gaps in dozens of countries. A recent mapping of Global Fund support for Joint External Evaluation capacities for pandemic preparedness in 10 countries found that 37% of the organization's investments in detecting health emergencies was dedicated to the health workforce.¹¹

Community health workers represent a unique cadre of health workers and constitute a pillar of the Global Fund's efforts to strengthen the health workforce for people-centered primary health care. Coming from the communities they serve, trained community health workers are trusted sources of advice and health services, linking health services with communities that are not always well served by mainstream service systems, in many cases reaching people with health services beyond HIV, TB and malaria. Numerous studies have found that spending on community health workers is a smart investment, yielding returns that markedly exceed amounts invested.^{12,13,14} In its grants for 2020 - 2022, the Global Fund invested \$583 million in community health workers, doubling the amount in the previous cycle, and total financing for community health workers is projected to reach \$900 million to \$1 billion in the current grant funding cycle for 2023-2025, aligning to national strategies

^a Informants included Global Fund staff, global health experts, national health ministry officials, program implementers, evaluators, community representatives and civil society.

^b According to WHO, integrated people-centered care is a "holistic approach that puts the comprehensive needs of people and communities, not only diseases, at the center of health systems." It means "providing health services at the right time, in the right places in the right way, locating services close to people and communities." People-centered care is respectful and responsive to people's needs. (WHO, Integrated people-centered care, https://www.who.int/health-topics/integrated-people-centered-care#tab=tab_3).

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and with a greater focus on integration of community health workers within broader human resources for health and health sector planning, strengthening national systems needed for these workers to be effective, and supporting countries to develop sustainable financing pathways for community health workers.

These investments are closing health workforce gaps in countries across the world and generating benefits that extend well beyond the Global Fund's three priority diseases. In the Democratic Republic of Congo, more than 30,000 community health workers trained by the Global Fund and Gavi are providing primary health care in their communities, including vaccinations, nutrition and hygiene, and more than 15,000 village-level community associations have been revitalized to plan local health services. In Mali, Global Fund support enabled scale-up of dedicated supervision in 2,300 community health worker sites, with monitoring demonstrating notable improvements in worker proficiency and near-universal (98%) community satisfaction. In Zimbabwe, where the local currency lost much of its value, the Global Fund stepped in to pay the bulk of health worker remuneration and prevent a catastrophic erosion in the country's health workforce.

Building robust, multi-purpose laboratory capacity

Laboratories are a cornerstone of Universal Health Coverage. Well-functioning, well-resourced laboratories ensure prompt and accurate diagnosis of disease, monitor individual and population-level health status and outcomes, and inform and guide health workers in prescribing therapeutic and preventive interventions. The data generated through lab results inform strategic priority setting and national program planning.

In close collaboration with other partners, such as the U.S. Government and the Pasteur Network, the Global Fund makes substantial strategic investments in laboratory capacity in low- and middle-income countries. In 2020-2022, the Global Fund invested \$345 million in strengthening laboratory systems.¹⁵

Strategic laboratory investments by the Global Fund and other partners are generating broad-based health dividends. During COVID-19, PCR machines purchased through Global Fund grants were swiftly repurposed for the rapid diagnosis of COVID-19. Mozambique leveraged Global Fund support through its special COVID-19 Response Mechanism funding channel to renovate or rebuild seven provincial public health laboratories, buttressing diagnostic capacity for all infectious diseases.¹⁶ Similarly, Gabon used Global Fund resources to create a national network of PCR platforms, ensuring access to this cross-cutting diagnostic tool in every region of the country. Global Fund support has helped enable Zambia to develop a national plan to optimize its integrated diagnostic network, including expanding the use of point-of-care PCR testing,

which reduces burdens on centralized laboratories while facilitating faster diagnosis. Building on this record, the Global Fund is working to further emphasize investments in cross-cutting laboratory functions for the 2023-2025 funding cycle, with a specific emphasis on laboratory-related knowledge transfer, methods for rapid generation of high-quality data, removal of laboratory bottlenecks and engagement with the private sector to scale up innovative solutions to lab-related challenges.

Ensuring a reliable system to supply essential medical products

Ensuring that diagnostics, therapies, vaccines and other health commodities are readily available when they are needed is critical to Universal Health Coverage. Each year, the Global Fund purchases over \$2 billion in health products for use in more than 100 countries.¹⁷ At the same time, to ensure that these products reach those who need them and are available without interruption, the Global Fund annually invests roughly \$400 million in strengthening procurement and supply chain management.¹⁸ The Global Fund's investments have enabled remarkable increases in coverage of prevention and treatment interventions for HIV, tuberculosis and malaria.

In addition to their clear effects on service coverage for the three priority diseases, Global Fund investments in procurement and supply chain management are also generating cross-cutting health benefits beyond HIV, tuberculosis and malaria. The same freight systems that transport artemisin-based combination therapy for malaria are available for shipping medicines for hypertension, diabetes or myriad other health problems. Likewise, the warehouses that store antiretroviral medicines, condoms or rapid HIV test kits are also suitable for storing a broad range of other health products. The same is true for systems for distributing medicines to primary care sites and managing inventories, quality control measures and logistical expertise.

In Ghana, Global Fund financing is supporting an end-to-end transformation of the country's health product supply chain to support national efforts to achieve Universal Health Coverage. Malawi is using Global Fund support to transform its Central Medical Stores Trust into an operational center of excellence for ensuring ready access to essential health products across the country's 700 health delivery sites. With Global Fund support, India is leveraging private sector innovations to improve supply chain performance, through the use of dedicated vehicles, courier services and the electronic tracking of vehicles and documentation of delivery.

The challenge going forward will be to adopt procurement practices that maximize national management of the process while obtaining the most advantageous prices and ensuring timely delivery of quality products to patients.

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Strengthening health information systems

The Internet has transformed our world, and the many electronic communications innovations it has spawned have an enormous potential to transform health care and markedly improve health outcomes.¹⁹ Universal Health Coverage will be impossible if multiple arms of the health system cannot communicate with each other or if health systems remain reliant on paper records or other analog data systems.

The Global Fund is actively aiding low- and middle-income countries in adopting and scaling up digital solutions to improve health and well-being, generating benefits that extend far beyond HIV, tuberculosis and malaria. Digital applications contribute to early warning of disease outbreaks, more effective use of data to improve patient health, and the collection and analysis of health data to inform public health decision-making. As most health information software and databases have been built to respond to different diseases, services, health facility types and health system functions (e.g. supply logistics), the Global Fund is working with countries to bring these systems together in a single, integrated, inter-operative system. The Global Fund and the U.S. government are the primary drivers of investments in digital health and in integrated health information systems in resource-limited settings.

The Global Fund's investment in the Health Systems Information Program for West and Central Africa is helping establish integrated systems that enable countries to collect, manage, analyze and disseminate real-time health information — including for malaria, HIV, TB, immunization, disease surveillance, maternal and child health, nutrition and neglected tropical diseases like onchocerciasis, Guinea Worm and lymphatic filariasis. These systems build on recent efforts to generate data to manage and respond to COVID-19. The platform is now being used for real-time tracking of health campaign activities such as immunization — against yellow fever, meningitis and measles — and malaria campaigns in Burkina Faso, Cameroon, Congo, Guinea, Niger and Togo.

Building medical oxygen and respiratory systems

Medical oxygen is an essential component of primary health care and a critical element of Universal Health Coverage.²⁰ It is estimated that three to five million deaths occur from pneumonia and non-communicable respiratory diseases that could have otherwise been prevented with access to oxygen.²¹ Chronic respiratory disease is the third leading cause of death globally, with low- and middle-income countries having the highest rates.²² Among children under five, lower respiratory infections are the leading cause of death.²³ The COVID-19 pandemic vividly underscored the crucial importance of medical oxygen, with one 10-country study of African intensive care units finding that one in two people who died of COVID-19 never received medical oxygen.²⁴

In response to the critical shortage of medical oxygen during the COVID-19 pandemic, a significant share of the Global Fund's \$4.6 billion in extraordinary COVID-19 funding focused on strengthening respiratory care in low- and middle-income countries. As of June 2023, the Global Fund had invested \$641 million in medical oxygen services, including oxygen supplies, distribution systems, hospital equipment needed to administer oxygen supplies and PSA systems and cylinders to generate oxygen. The Global Fund has supported countries in undertaking needed biomedical engineering to install medical oxygen systems, developed clinical guidelines and job aids to support effective use of these systems and provided spare equipment to enhance sustainability.

While initially motivated by a desire to aid in responding to the COVID-19 pandemic, the Global Fund's investment in expanded capacity for medical oxygen and respiratory will generate long-lasting benefits across the health system. In Kenya, the Global Fund procured more than 20,000 medical oxygen cylinders to build respiratory care capacity across the country's 47 counties, 22 oxygen production plants and ancillary equipment and tools to ensure last-mile access to more than 300 health facilities.²⁵ In Bangladesh, where medical oxygen is urgently needed to care for sick newborns and children, ensure delivery of safe anesthesia during surgery and enable critical care, the Global Fund financed 29 PSA oxygen-generating plants as part of a broad national, multi-partner initiative to mainstream medical oxygen throughout the health system.

Further steps are needed to fully realize the benefits of medical oxygen in resource-limited settings. Additional technical support is required to enable assessment of health facilities in low- and middle-income countries for the complex process of developing specifications for sustainable PSA plants.

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Strengthening results-driven and inclusive health governance

Sound, inclusive governance is essential to Universal Health Coverage.²⁶ Effective health governance builds a robust coalition for health, ensures accountability for results and provides meaningful oversight and regulation of efforts to improve health.²⁷ During the 20th century, health governance tended to be predominantly governmental in nature, but there has been a growing emphasis in recent decades on bringing non-governmental voices to decision-making tables. A recent review of governance of global health initiatives found that inclusion of civil society and other non-governmental stakeholders strengthens health advocacy, enables health programs to be informed by the needs and perspectives of people who use health services and improves monitoring of health programs.²⁸

The Global Fund innovative governance approach is being applied to broader health system strengthening, beyond specific programs focusing on HIV, tuberculosis and malaria.

The Global Fund is an early pioneer of this paradigm shift in global health governance and is recognized as a leader in the meaningful participation of civil society, communities and other partners in health decision-making.²⁹ The Global Fund's governing board includes as voting members not only governments from donor and implementing countries, but also affected communities, NGOs, private foundations and the business sector. At the country level, multi-stakeholder Country Coordinating Mechanisms are committees that convene country dialogues, develop funding proposals and monitor grant implementation. In addition to health ministry officials, common participants in Country Coordinating Mechanisms include faith-based organizations, young people, key populations^c and the private sector.

As the Global Fund implements its current strategy, which prioritizes investments in resilient and sustainable health systems, its innovative governance approach is being applied to broader health system strengthening, beyond specific programs focusing on HIV, tuberculosis and malaria. As part of country dialogues towards the development of national proposals for implementation in 2025-2028, the Global Fund is mandating dialogues specifically focused on building resilient and sustainable health systems. In Myanmar, the Country Coordinating Mechanism was expanded to become the Myanmar Health Sector Coordinating Committee, responsible for overseeing efforts to improve maternal and child health and to drive improved health coverage and population-based health status. In Honduras and Paraguay, the Global Fund and Country Coordinating Mechanisms hosted national workshops to define and prioritize health system investments.³⁰ Development of Zimbabwe's proposal for the next cycle of funding included five civil society dialogues as well as civil society input into proposal drafting.

Engaging community actors and systems and building service systems for the most vulnerable

Community engagement goes beyond governance and involvement in Global Fund processes. At the grassroots, where the people who benefit from Global Fund grants live, strong, sustainable community systems are essential if we hope to achieve Universal Health Coverage.^{31,32,33} Community-led, peer-based approaches to health service delivery, protection of human rights and advocacy have a unique and proven ability to improve access and outcomes, with especially pronounced benefits for marginalized populations that are inadequately served by government facility-based service platforms.³⁴

^c Key populations include "gay men and other men who have sex with men, sex workers, transgender people, people who inject drugs and prisoners or other incarcerated people" (UNAIDS, Key populations, <https://www.unaids.org/en/topic/key-populations>).

Since its inception, the Global Fund has funded civil society organizations as integral partners in the fight against AIDS, tuberculosis and malaria, supporting both home-based outreach as well as services in community centers or health clinics. In 2022, approximately 28% of funding went to the community sector.³⁵ By incorporating civil society-led activities in national and regional grants, the Global Fund helps ensure that community efforts complement public sector activities to support achievement of the goals of individual grants. In the Democratic Republic of Congo, Global Fund grants support community-led programs that address water and sanitation, nutrition and other health problems in addition to AIDS, tuberculosis and malaria. The Global Fund supports community-led monitoring of service access and quality in countries such as Malawi, where civil society and academic experts undertake systematic monitoring of service performance across the country.

The Global Fund's support for community-led responses has proven especially critical in addressing the health needs of marginalized or underserved populations. In Mongolia, where men who have sex with men and female sex workers have clearly indicated a preference to receive health services in community-led sites tailored to their needs, the Global Fund supports services provided by civil society organizations that have been specifically designed for these key populations. The Global Fund supports 35 community-led centers (or "safe spaces") for men who have sex with men, transgender women and people who inject drugs in the Philippines, integrating biomedical and mental health services. It also funds prison health services, including a needle and syringe program in all adult detention facilities in Moldova that resulted in a 50% decline in new HIV and hepatitis C infections among prisoners over five years.³⁶ Support from the Global Fund has allowed the implementation of locally tailored programs to bring migrants into health systems, including in Thailand, where community health workers enroll migrants in a program that enables them to receive free care through hospitals, covering not only the Global Fund's three priority diseases but also pregnancy, chronic care and other health problems.

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Placing human rights, gender equality and equity at the center of health

Racism, human rights violations and inequitable gender norms contribute to poor health outcomes, with the burden primarily borne by women, girls, sexual minorities, racial and ethnic minorities and other marginalized populations.^{37,38,39,40} Without effective and sustained action to minimize these and other structural factors that diminish health service access and worsen health outcomes, the vision of Universal Health Coverage to enable healthy lives and well-being for all will never be realized.

As part of its overall support to countries to eliminate legal and other human rights obstacles, the Global Fund in 2017 created the Breaking Down Barriers initiative. The initiative supports 20 countries to markedly

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scale up evidence-based programs to reduce human rights barriers to health services.^d The Global Fund invested \$45 million in the initiative from 2018 to 2020 and an additional \$41 million from 2021 to 2023.

A mid-term assessment found that Breaking Down Barriers had spurred substantial uptake of internationally recognized programs and interventions to address "stigma and discrimination, gender-based violence, punitive laws and policies, abusive law enforcement practices, disrespectful services, and inadequate services for people in prison."⁴¹ All participating countries have developed costed national plans to remove human rights- and gender-related barriers to services. In countries receiving Breaking Down Barriers support, access to justice was improved for people living with or affected by the Global Fund's three priority diseases. Numerous country recipients of Global Fund support implemented measures to address gender inequality and gender-based violence. A key outcome of the Breaking Down Barriers initiative is the empowerment of marginalized communities, as funding has improved their capacity for community mobilization and education and their space to engage in dialogue with key decision-makers.

National approaches included expanded programming to address gender-based violence in Benin, Democratic Republic of Congo and Mozambique; deployment of community paralegals in Tunisia and legal aid clinics in Cameroon to improve access to justice; formation of community advocacy coalitions in such countries as Honduras, Indonesia and the Philippines to change harmful, discriminatory laws and regulations; and the training of more than 1,000 police officers in Jamaica on protecting the human rights of people living with HIV and key populations. In Sierra Leone, a dialogue between government officials and civil society organizations resulted in official agreement to support needle and syringe programs — a decision that has now been communicated to all local police unit commanders across the country.

Although Breaking Down Barriers is improving the situation, the mid-term assessment documented several areas where further efforts are needed, including improving links between health services and access-to-justice activities and further strengthening the ownership of a human rights-based approach by national governments.⁴²

Catalyzing domestic public sector investments in health

Although major new international investments will be needed to achieve Universal Health Coverage, a primary route to reach this goal will be through domestic investments⁴³, as the financing gap

^d The 20 countries supported by the Breaking Down Barriers initiative include: Benin, Botswana, Cameroon, Democratic Republic of Congo (province level), Côte d'Ivoire, Ghana, Honduras, Indonesia (selected cities), Jamaica, Kenya, Kyrgyzstan, Nepal, Mozambique, Philippines, Senegal, Sierra Leone, South Africa, Tunisia, Uganda and Ukraine.

to achieve universal health coverage is estimated by the Global Fund to be roughly 35 times total development assistance for health.^{44,45} While overall government spending on health by low- and middle-income countries has increased^{46,47}, amounts currently invested are substantially short of amounts required to achieve and sustain Universal Health Coverage.^{48,49} In lieu of essential public sector investments, many countries have relied on out-of-pocket expenditures by the users of health services⁵⁰ which often deter people from using the health services they need and also risk impoverishing or further impoverishing already-vulnerable households.

The Global Fund's funding model incentivizes countries to increase domestic investments in health.

The Global Fund's funding model incentivizes countries to increase domestic investments in health. Whereas development assistance for health has traditionally come in the form of unconditional grants or concessional loans, the Global Fund requires that all countries receiving a grant allocate additional domestic resources to health amounting to at least 15% of the grant amount, on top of the level of government funding that went to the three diseases and related health systems investments during the previous three-year period.⁵¹ In Vietnam, for example, the Global Fund is asking that the country expand its AIDS, tuberculosis and malaria financing by \$17.2 million, or 15% of their allocation for 2024-2026, on top of the \$434.2 million that Vietnam committed to spend in 2021-23. In Benin, the Global Fund is asking the country to increase its spending on the three diseases and on health systems strengthening by \$15.5 million in the next three years, in addition to the \$53.3 million that Benin already pledged to contribute in 2021-2023.

The Global Fund has worked with countries to explore innovative means to increase domestic health outlays, for example, inclusion of HIV services in national health insurance packages in the Dominican Republic and Morocco.

Engaging the private sector

While governments have a responsibility to lead national efforts to expand health care access, Universal Health Coverage will not be achieved without the active engagement of private sector actors.⁵² The private sector delivers more than half of health services⁵³ — including 57% in Southeast Asia, 62% in the eastern Mediterranean, and almost 40% in Latin America, the Caribbean, Africa and the western Pacific. The private sector is a driver of innovation in the health field — developing new or improved diagnostic, preventive and therapeutic technologies, creating digital tools to improve health service delivery and the efficiency of procurement and supply chains, and enhancing professional education.

The Global Fund plays a unique role in the global health space by systematically engaging diverse private sector actors.⁵⁴ The private sector constituency is represented on the Global Fund's governing board, involving private actors in the formulation of policy and strategic decisions. The Global Fund works with countries to ensure appropriate governance

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and regulation of all inputs to the health system, including both public and private sector actors. The Global Fund's support for national health information systems enables transparent reporting of and accountability for private sector activities in the health arena, while the Global Fund's innovative approach to commodity procurement, including its use of pooled purchasing, helps ensure that private sector innovations are affordable and accessible in resource-limited settings. The Global Fund encourages countries to use their grant requests to obtain support for diverse pathways for private sector engagement, taking steps to ensure that engagement is country-owned, aligned with nationally determined strategies, focused on clear strategic goals and outcomes and positioned to generate needed evidence – recommended principles for private sector engagement towards Universal Health Coverage.⁵⁵

The Global Fund's engagement of the private sector is yielding concrete health dividends in countries across the world. A special catalytic initiative by the Global Fund and Rockefeller Foundation has supported Burkina Faso to develop a national roadmap for community health digitalization and aided Rwanda in rolling out a new community health information system. A software platform that integrates a broad array of health information is being rolled out in 10 countries, including in Togo, where seven separate data sources have been merged into a single, user-friendly platform.

Moving forward: Accelerating progress toward UHC

This review indicates that the Global Fund is advancing progress towards Universal Health Coverage in two primary ways. First, by catalyzing gains towards ending AIDS, tuberculosis and malaria, the Global Fund is contributing towards a key milestone on the road to UHC and is showing how major global disease threats can be addressed “universally,” reaching all affected citizens in each country. Second, by strengthening the health systems on which Universal Health Coverage depends, the Global Fund is yielding benefits that extend well beyond its three priority diseases.

While documenting the substantial health dividends yielded by Global Fund investments, this review has also identified areas where further adaptations and improvements could maximize the broader health systems impacts and wider benefits of Global Fund support to assist countries in moving faster toward Universal Health Coverage. These include:

- Developing with countries a stronger framework for supporting effective country governance, operational planning and prioritization, and monitoring and evaluating progress in different health systems areas;

- Investing more in building the capacity of countries to mobilize expanded national co-financing for health systems and essential public health functions;
- Assisting countries to manage health financing and to include HIV, TB and malaria services in their Universal Health Coverage benefit packages using pooled funding;
- Promoting epidemic-ready primary health care to ensure strong links between Universal Health Coverage and pandemic prevention, preparedness and response;
- Continuing to build the Global Fund's in-house expertise on health system areas while at the same time drawing more on the expertise of other agencies.

Given its success in fighting AIDS, TB and malaria; its track record of investing in cross-cutting systems; and its unique model emphasizing results, equity and engagement, the Global Fund offers a critical pathway to Universal Health Coverage.

An expanded role in accelerating progress towards Universal Health Coverage

The Global Fund's already-considerable leadership in strengthening resilient and sustainable health systems is set to expand even further. In its projected \$13.1 billion in investments for 2023-2025, the Global Fund expects around 30% to be invested in strengthening health systems. In addition, with the decline in COVID-19 cases, countries are wisely choosing to prioritize reinvesting COVID-19 funding, enabling over \$2 billion in additional health systems and pandemic preparedness investments. Going forward, with the new grant round combined with reprogrammed COVID-19 funding, the Global Fund is on course to invest significantly increased sums in strengthening health system capacity to deliver integrated primary care — an infusion of new resources that will expand health care capacity and improve health service outcomes.

Given its success in fighting AIDS, TB and malaria; its track record of investing in cross-cutting systems; and its unique model emphasizing results, equity and engagement, the Global Fund offers a critical pathway to Universal Health Coverage. By fully and strategically leveraging Global Fund investments, countries can work to build the health systems needed to make health coverage meaningful for all, including the most vulnerable and marginalized.

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