

July 2010 action:

Investing Wisely: UK aid and the Global Fund to Fight AIDS, Tuberculosis and Malaria

RESULTS
the power to end poverty

TAKE ACTION:

This month we will be writing directly to Andrew Mitchell MP to ask him to strongly support the replenishment of the Global Fund to Fight AIDS, Tuberculosis and Malaria. We will ask him to:

- **Commit to increasing UK contributions to the Global Fund to meet its 'fair share' of £840 million;**
- **Push other donor countries to follow the example and to invest in this effective, results-driven institution.**

If you feel it is appropriate, you could copy your letter to Andrew Mitchell to your MP, but this is not essential as many of you will have already talked to your MP about this issue for the May action.

Introduction

HIV/AIDS, tuberculosis (TB) and malaria are diseases that disproportionately burden people living in developing countries. These diseases reduce economic productivity and severely hamper development efforts. HIV/AIDS and tuberculosis in particular affect people of child-bearing and working age, meaning their impact is felt throughout societies as victims leave behind young children and other dependents. Fighting poverty means fighting these diseases because a healthy population translates into a more productive population, able to work its way out of poverty.

Between them, these three diseases are the major infectious killers in the world. In 2010, HIV became the leading cause of death for women worldwide. TB is the third leading cause of death, despite the fact that it is curable and standard TB treatment can cost as little as \$10 in some parts of the world. A woman with untreated TB is four times more likely to die during childbirth. You can read more about the impact of TB on women on the ACTION Project's [website](#). After diarrhoea and pneumonia, malaria is the third biggest killer of children under five – in 2008 it killed over 730,000 children.

We know how to prevent and treat these diseases – in fact, we have known how to treat TB for a very long time, as the first effective antibiotic against TB, streptomycin, was discovered in the 1940s – but we continue to fail to deliver effective prevention and treatment to many of those affected.

UK government context

Over the past month it has been reassuring to hear the new coalition Conservative-Liberal Democrat government continue to affirm their commitment to international development and their pledge to

achieve the target of 0.7% of GDP to aid by 2013. It is now absolutely crucial that we go one step further and insist that the valuable aid money support programmes and organisations that have proven they can deliver improvements in the lives of those most affected by the inequality in our society: the poorest.

It has also been encouraging to hear over the past few weeks that the government is planning to review its aid portfolio to ensure value for money. The UK Department for International Development currently spends £2.27 billion annually – almost half of its budget – through multilateral agencies like the UN, the World Bank and the Global Fund to Fight AIDS, Tuberculosis and Malaria. According to [press reports](#), these contributions will be assessed based on efficiency, effectiveness and their ability to show an impact on reducing poverty. Andrew Mitchell, the Secretary of State for International Development, said: 'I want to direct money towards those bodies that share our aims and have a proven track record of delivering results.'

UK government concentrating on mothers and children

Another welcome aspect of the new government's position on international development is the strong focus on health, in particular the health of mothers and children. Millennium Development Goals 4 and 5 concentrate on child and maternal health respectively, and they are among the goals that are most off-track. MDG 5 aims to reduce maternal mortality by three quarters by 2015, as well as to achieve universal access to reproductive healthcare. Although some progress is being made, the current rate of reduction in maternal deaths is only 1.3% per year, compared to the 5.5% needed. Mothers are fundamental to the health of the future generation,

so the lack of progress towards this goal inhibits progress in other areas.

In a recent [newspaper article](#) explaining the government's views on international development, Prime Minister David Cameron wrote: 'Levels of maternal mortality in many regions have barely fallen in 20 years. That is shocking and shameful. But it doesn't have to continue like this.' The article announced a £5 million fund 'to help midwives and health workers share their skills with birth attendants, nurses and doctors in the world's poorest countries.' This is a great first step, but a very small one in light of such a massive need.

During the election, the Conservatives pledged to spend £500 million annually to fight malaria. In a recent [discussion in parliament](#), a DfID Minister confirmed that this pledge is now government policy. This pledge of £500m annually is a bold commitment. However, it is important that this pledge does not divert money away from other health and development areas. By channelling a significant amount of this money through the Global Fund, the UK government could make a much broader impact on fighting infectious diseases, strengthening health systems and reducing maternal and child mortality.

What more should the UK government do?

Concerted action is needed to fight the biggest killers of women and children. Clearly the UK government should commit resources to fighting the infectious killers of women and children – AIDS, TB and malaria – and in the case of malaria it has already pledged to do so. But how should the money be spent?

The Global Fund to Fight AIDS, Tuberculosis and Malaria

About a quarter of the UK government's spending on health goes through multilateral agencies. Aid provided in this way has important advantages, for example by being able to draw on a pool of institutional knowledge, and in some cases reducing transaction costs for the recipients. However, the performance of multilateral organisations varies hugely, as the UK government has acknowledged.

As one of the most effective bodies funding health in the developing world, the Global Fund finances two thirds of all TB programmes in the world, a quarter of

AIDS programmes and three quarters of malaria programmes. The Global Fund is a partnership between governments, civil society, the private sector and affected communities, and attracts funding from donors and distributes it to implementing organisations. It prioritises funding programmes in countries with low income and a high burden of disease, thereby ensuring that money is spent where it is most needed. One of the guiding principles of the partnership is to operate with transparency and accountability. In background sheet 1 you will find a useful comparison between the way that the Global Fund operates and some of the shortcomings of other approaches.

Because of careful monitoring systems built into the Fund's structure, it has been easy to measure its impact. Since the creation of the Fund in 2002, an estimated 5.7 million lives have been saved, thousands of new infections have been prevented and vulnerable populations such as orphans have been supported. By June 2010, Global Fund supported programmes provided antiretroviral therapy to 2.8 million people, treated 7 million new smear-positive tuberculosis cases and distributed 122 million insecticide-treated nets to prevent malaria.

Combining effective, well-evaluated interventions that have been proven to make a difference to the poorest and to save lives with a strong focus on women and children, the Global Fund is a perfect candidate for increased support from the UK government.

Insufficient funding

Partly because it is so successful, the Global Fund is now facing a funding crisis. It is currently going through a 'replenishment' process designed to raise funds from donors for the next three years (2011-2013). Estimates for what is needed simply to continue current funding and scale up well-performing programmes range from \$13 to \$20 billion. The UK has been a strong supporter of the Global Fund in the past, pledging £1.36 billion between 2001 and 2015. However, the need is greater still, and if the UK is serious about supporting transparent, effective aid it should put this into practice by stepping up funding to £840 million and pushing other countries to follow this lead.