



BASED ON THE RECOMMENDATION OF THE STRATEGY COMMITTEE. THE BOARD APPROVES

THE REVISED **ELIGIBILITY POLICY**

The Previous Eligibility Policy

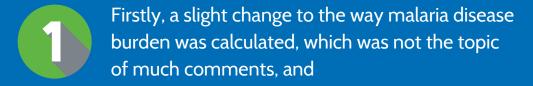
remains applicable to grant programs originating

from the 2020-2022 allocation period.



The Steering Committee and the Secretariat are also recommending that, given the potential programmatic and financial impact of the COVID-19 pandemic, the six (6) Transition Funding components from the 2020-2022 allocation period be made exceptionally eligible for consideration of an additional allocation of Transition Funding, noting that eligibility does not guarantee an allocation.

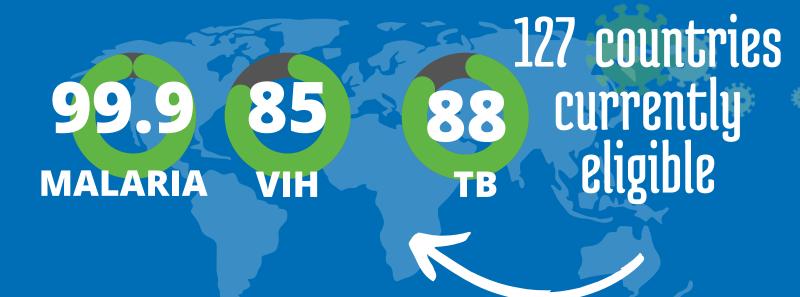
The two proposed revisions to the eligibility policy were:







Secondly, that countries receiving transition funding during the current cycle be eligible to receive an additional allocation of transition funding for the next cycle, in light of the damage and on-going impact of COVID-19.



The current Eligibility Policy results in 127 countries currently eligible for at least one disease component. This results in countries representing 99.9% of the total malaria burden, 85% of the total HIV burden and 88% of the total TB burden being eligible. This broad reach, combined with the ability to fund non-eligible countries as part of multi-country or regional grants, does not suggest the need for a significant change or shift to the Eligibility Policy

The Communities Delegation expressed its disappointment at the refusal to reconsider the use of GNI, arguing that it did not accurately reflect inequalities within countries, nor the capacity of countries to levy taxes. The Developing Country NGO and Developed Country NGO Delegations, as well as the Latin America and Caribbean Delegations echoed this opinion.



The decision points passed meaning a new, slightly modified eligibility policy ensuring more countries will be eligible for further transition funding and a modified malaria burden calculation will be utilized in determining eligibility for funding in the post-Replenishment cycle.



Read more about the revised Eligibility Policy:

https://www.theglobalfund.org/media/12050/bm47_02-revised-eligibility-policy_report_en.pdf

APPROVAL OF THE ELIGIBILITY

of the 2020-2022 Transition Funding Components for an Additional Allocation

6 components

The Board approves the eligibility of the six (6) Transition Funding components from the 2020-2022 allocation period for an additional allocation of Transition Funding for the 2023-2025 allocation period.



JJavier Bellocq from the Communities Delegation re-iterated the Communities Delegations long- standing position to object to policies and formulas that do not ensure that funding be allocated to address the needs of people living with the 3 diseases regardless of which country they live in or its economic status. Javier also challenged the room and attendees to reflect critically on the fact that

"while we emphasize - as a Board, the GF Secretariat - that implementing countries be science- and evidence-based in their approaches, the donors represented in the partnership are usually driven by political priorities".



The two changes to the allocation methodology were regarding its scale-up and paced reduction components, which can lead to funding reductions more progressive if their Initial Calculated Amounts (ICAs) drop, and allowing for countries to receive resources above their ICA to stay ahead of the three diseases.

Approves that no more than 7.5% of the total available sources of funds be used for country allocations, to ensure that the Steering Committee catches up, impact and pace of reductions.

CATALYTIC INVESTMENTS

for the 2023-2025 Allocation Period

 Community System Strengthening, Human Right and Gender programs have been elevated in the new strategy to Contributory Objectives, with limited funding. However, there was also a decrease in funding allocated to multi-country programs.

The Developed Country NGO Delegation noted that during the last Board Meeting, promises were made that the limited increase in funding for TB in the disease split would be compensated through Catalytic Funding; but that the proposed budgets were not high enough to give the Global Fund the means to address the deep crisis of the fight against TB.





They noted in particular that funding for the establishment and strengthening of country-level TB community networks has been identified as a particular challenge by advocates of people vulnerable to TB.

The Developing Country NGO Delegation noted concern with the decrease in funding allocated to Multicountry programs, which was deemed especially important for Civil Society and Community advocacy; they also noted that in lower funding scenarios, cuts to Catalytic Investment were severe and threatens the capacity of the Board to deliver on its ambitious strategy.



Six new catalytic priorities are recommended for the 2023-2025 allocation period, emphasizing key areas with greater focus in the new Strategy where catalytic investments were identified as an optimal lever

That the total amount of sources of funds for allocation for the 2023-2025 allocation period will be decided by the Board in November 2022. The approval will be determined by the total amount of sources of funds for allocation for the 2023-2025 allocation period; if period are above the midpoint of the funding range, the Secretariat may recommend to the Board to approve additional amounts for Catalytic Investments .



Read more about Catalytic investments for the 2023-2025 allocation period:

https://www.theglobalfund.org/media/12052/bm47_04-rev1-catalytic-investments-2023-2025-allocation-period_report_en.pdf



