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The Global Fund in the era of SDGs: time to rethink?

In the context of stagnating development assistance for health, the sixth Replenishment Conference of the Global Fund to Fight AIDS, Tuberculosis, and Malaria, held on Oct 9–10, 2019, in Lyon, France, was a success. Pledges from donors for the next 3 years reached the minimum US\$14 billion target that was needed to contribute to saving 16 million additional lives. Yet, although there have been positive synergies between vertical programmes for each of the three pandemics, as well as between those programmes and other components of health-care systems, the effective contribution of the Global Fund towards strengthening health-care systems has remained low. Only in a few exceptional cases (namely Rwanda¹ and Ethiopia²) has the Global Fund directly contributed to improvements in financing the pathway towards universal health coverage.

The 2030 Agenda³ offers new opportunities by emphasising the need to better link interventions related to individual targets for each of the Sustainable Development Goals (SDGs). Such links are needed within SDG3 between the targets for various diseases and for strengthening universal health coverage, and, more importantly, between different SDGs. For example, interventions relating to SDG3 on health should be aligned with those dealing with environmental issues—namely SDG6 on water, SDG12 on responsible consumption and production, SDG1 on the climate, SDG14 on oceans, and SDG15 on land and biodiversity. Agenda 2030 is directly related to the emergence of a new field of interdisciplinary research aimed at finding solutions for transforming our current, damaging models of growth and development.⁴ Global health

research should be more explicitly part of this field of sustainability science, and the Global Fund can help by assuming a leading role in renewing funding for global health operational research.

Science is key to generating innovative solutions and helping to scale up their adoption and implementation. For instance, if access to antiretroviral therapy could be guaranteed for everyone who had already contracted HIV, and if pre-exposure prophylaxis could be provided for all those at high-risk of contracting HIV, we could rapidly end the AIDS epidemic.⁵ There is an urgent need to bridge the gap between theory and reality. Propelling the Global Fund into the era of SDGs is crucial. This movement could be achieved through three main actions. First, the implementation of Global Fund treatment and prevention programmes should also be used as an opportunity for supporting improvements of the research capacities in those countries. Second, rigorous scientific impact evaluations should be done more frequently alongside Global Fund interventions, as is done by the World Bank Strategic Impact Evaluation Fund. Third, the Global Fund should serve as a template for increasing synergies between the fight against the three diseases and all other 17 SDGs, to maximise the complementarity of people-centred research, action, and interventions among the SDGs.⁶ The Global Fund will soon start elaborating a new strategy for the period after 2022, it should be a major opportunity for embedding its actions within Agenda 2030 and the SDGs.

We declare no competing interests.

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For more on the the sixth Replenishment Conference see <https://www.theglobalfund.org/en/stepupthefight/>