

Electronic Report to the Board

Report of the Secretariat's Grant Approvals Committee

GF/B51/ER05

Board Decision

Purpose of the paper: This document proposes the decision point as follows:

1. GF/B51/EDP08: Decision on the Secretariat's Recommendation on Funding from the 2023-2025 Allocation.¹

Document Classification: Internal.

Document Circulation: Board Members, Alternate Board Members, Constituency Focal Points and Committee Members. This document may be shared by the Focal Points within their respective Board constituency. The document must not however be subject to any further circulation or otherwise be made public.

¹ The Secretariat recommends the approval of funding from the 2023-2025 Allocation for two grants: Congo (Democratic Republic) Malaria, and Congo (Democratic Republic) RSSH up to an amount of **US\$253,914,377** of country allocation funding.

Decision

Decision Point: GF/B51/EDP08: Decision on the Secretariat's Recommendation on Funding from the 2023-2025 Allocation

The Board:

1. Approves the funding recommended for each country disease component, and its constituent grants, as listed in Tables 1a and 1b of GF/B51/ER05 ("Tables 1a and 1b");
2. Acknowledges each country disease component's constituent grants will be implemented by the proposed Principal Recipients listed in Tables 1a and 1b, or any other Principal Recipient(s) deemed appropriate by the Secretariat in accordance with Global Fund policies;
3. Affirms the funding approved under this decision (a) is subject to the availability of funding, and (b) shall be committed in annual tranches; and
4. Delegates to the Secretariat authority to redistribute the overall upper-ceiling of funding available for each country disease component among its constituent grants, provided that the Technical Review Panel (the "TRP") validates any redistribution that constitutes a material change from the program and funding request initially reviewed and recommended by the TRP.

This decision does not have material budgetary implications for operating expenses.

Executive Summary

Context and Input Received

Secretariat's Recommendation on Funding from the 2023-2025 Allocation

The Secretariat recommends the approval of funding from the 2023-2025 Allocation for 2 grants: Congo (Democratic Republic) Malaria and Congo (Democratic Republic) RSSH, up to an amount of **US\$253,914,377** of country allocation funding.

The grant in Table 1a has been found to be disbursement-ready by the Global Fund Secretariat following a thorough review process and in consultation with Partners.

The funding requests for each country component were reviewed by the Technical Review Panel (TRP) and determined to be strategically focused and technically sound. The TRP, upon its review and when relevant, highlighted issues for the applicant to clarify or address during grant-making and/or grant implementation.

During grant-making, the applicant refined the grant documents, addressed relevant issues raised by the TRP and Grant Approvals Committee (GAC) and sought efficiencies where possible. For each grant, the GAC reviewed: the strategic focus of the program; operational issues, risks and implementation challenges; domestic contributions; and the final grant documents for disbursement-readiness. The GAC also confirmed that the applicant addressed issues requested for clarification by the TRP or the Secretariat to its satisfaction.

A list of documents per disease component to substantiate the Board decision is provided below.

- Funding Request;
- Funding Request Review and Recommendation Form;
- Grant-making Final Review and Sign-off Form;
- Grant Confirmation; and
- TRP Clarification Form (applicable only if the TRP requested clarifications).

The GAC has reviewed the materials associated with the grant in Table 1a and has deemed the grant disbursement-ready. All relevant documents containing the Secretariat's reasons for its recommendations to the Board have been made available on the Governance Extranet and are accessible through [this link](#).

Secretariat Update on Co-financing Commitments from Board-approved 2023-2025 Allocation Period grants

- The Secretariat hereby notifies the Board, as set out in Table 2, of the co-financing compliance outcomes for the following countries, and relevant components as listed below: Haiti (HIV, TB and Malaria), Ghana (HIV, TB and Malaria) and Kyrgyz Republic (HIV and TB). This includes, where relevant, final co-financing compliance from the 2020-2022 allocation period and final co-financing compliance / commitments for the 2023-2025 allocation period.

Input Sought

The Board is requested to review the request and agree on a 'no objection' basis, the decision point GF/B51/EDP08: Decision on the Secretariat's Recommendation on Funding from the 2023-2025 Allocation.

Table 1a: Secretariat’s Recommendation on Funding from the 2023-2025 Allocation

Please note that each country name is [linked](#) to the extranet site where supporting documents are available for review.

N	Applicant	Disease Component	Grant Name ²	Grant End Date	Currency	Total Program Budget	Catalytic Funds in Grant	Domestic Commitment ³	Unfunded Quality Demand (US\$)
1	Congo (Democratic Republic)	Malaria	COD-M-SANRU	31/12/2026	US\$	250,871,032	-	11,430,000	112,292,186

Table 1b: Secretariat’s Recommendation on integrating Funding into Board approved grants from the 2023-2025 allocation

Please note that each country name is [linked](#) to the extranet site where supporting documents are available for review.

N	Applicant	Disease Component	Grant Name	Additional Funding Source	Currency	Previous Approved Grant Budget ⁴	Additional Funds	Revised Grant Budget for approval	Context
1	Congo (Democratic Republic)	RSSH	COD-S-MOH	RSSH Allocation	US\$	43,015,571	3,043,345	46,058,91	Following a revision of the implementation arrangements for the 2023-2025 allocation period, the country requested to integrate US\$3,043,345 of RSSH funding into the COD-S-MOH grant which was approved pursuant to Board decision 19 December 2023 (GF/B50/EDP07) and signed in December 2023. These funds were originally intended to be integrated into the HIV-TB 2023-2025 allocation period grant, which is still being negotiated. These funds will support the implementation and expansion of the

² The Grant names are subject to change based on the ISO code.

³ Domestic commitments pertain to the disease programs and exclude other specific commitments for RSSH, unless otherwise specified. Commitments for disease specific programs and RSSH are subject to local currency value fluctuation against US dollar and Euro currencies. Please note that the domestic commitments included in this report are recorded as of the date of the GAC meeting and may be updated during implementation for countries that have been granted policy flexibilities.

⁴ "Program budget for approval" is the budget for GAC recommendation to the Board. This excludes C19RM funding and any other funding that does not require Board approval. Accordingly, the Program budget for the Grant may be higher than the Program budget being recommended to the Board for approval.

									<p>ongoing Direct Funding Facility (DFF) pilot in DRC to the Kinshasa province.</p> <p>The DFF in Kinshasa will focus on a package of services for pregnant women and newborns to align with the government programme of free maternity care, a key element of achieving Universal Health Coverage in DRC. The DFF will also increase performance incentives for Ministry of Health civil servants at the central, provincial, and district levels.</p>
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Summary of the Deliberations of the Secretariat's Grant Approvals Committee on Funding Recommendations

This section will provide an overview of some grants recommended by the GAC, prioritizing for Board visibility by, among others, level of financing, strategic risks and impact on the achievement of the 2023-2028 Global Fund Strategy. Grant summaries will also highlight key observations and recommendations made by the GAC and Partners, as well as other key strategic issues. Unless otherwise specified, each applicant has met the co-financing requirements for the 2020-2022 allocation period and has made sufficient co-financing commitments for the 2023-2025 allocation period as set forth in the Sustainability, Transition and Co-Financing (STC) Policy. Where co-financing commitments for the 2023-2025 allocation period are indicated as pending, final commitments will be shared with the Board, upon receipt of duly finalized and signed commitment letters. In most cases, the letters are expected to be received within six months of the implementation period start date, in line with requirements in the Grant Confirmations. The Secretariat will monitor the finalization and realization of commitments over the grant's implementation period. Domestic commitments for disease-specific and health-related spending are subject to local currency value fluctuations against US dollars and Euro currencies.

Following GAC recommendation, the Grant Confirmations relating to these grants have been transmitted to the Principal Recipients to commence the grant signature process contingent to Board approval. These grants will be countersigned by the Global Fund only if Board approval is obtained and will not come into effect until full execution. Execution will be subject to any further revisions recommended by the Board.

For the following grants, the GAC provided additional guidance or made specific observations to inform the investment decision:

Congo (Democratic Republic) Malaria: SANRU Asbl (COD-M-SANRU)

1.1 Background and context

The Congo (Democratic Republic) (DRC) has the second-highest malaria burden globally, accounting for 12% of total malaria cases in 2022. Malaria remains the leading cause of hospitalization, morbidity and mortality in the country, with an estimated 29 million cases and 82,000 deaths in 2021. Test positivity rates remained high at 73% in 2022. Despite these challenges, malaria incidence has decreased by 18% and mortality by 37% since 2010, linked to increased coverage of malaria case management and prevention.

Since 2015, the Global Fund's interventions have expanded to 325 health zones, with coordinated efforts among major malaria donors and Partners, ensuring nationwide activity coverage. The malaria programme results saw significant progress between the 2017-2019 allocation period and the 2020-2022 allocation period with 88% (39.6 million) more insecticide-treated nets distributed through mass campaigns; 87% (49.2 million) more malaria tests done at public, private and community sites (49.2 million) and 133% (39 million) more treatments provided. Despite high-impact interventions, current efforts are insufficient to significantly reduce the malaria burden or achieve the 2030 goals.

1.2 Risks and mitigation measures

Challenging Operating Environment. The DRC is categorized as a challenging operating environment with significant operational and fiduciary risks. The Secretariat emphasized that continuous monitoring will be conducted to assess risks, actively course-correct, and implement necessary mitigation measures during implementation.

1.3 Co-financing

DRC submitted a signed commitment letter on 24 November 2023 committing to a total co-financing of US\$140.1 million from 2024-2026, including: (i) US\$22.3 million for essential commodities for HIV, TB and malaria and (ii) an RSSH investments. Please refer to full summary in GF/B50/EDP07.

1.4 GAC review and recommendation

- The GAC and Partners commended the malaria program design and acknowledged the Secretariat's efforts to maximize coverage, navigate prioritization decisions amid funding gaps, and build on the COD-M-MOH grant approved in GF/B50/EDP07 following the reselection of SANRU as a Principal Recipient by the CCM. They recognized the challenges in ensuring alignment among Partners due to varying implementation periods and emphasized the need to ensure complementarity and alignment during implementation.
- GAC Partners noted significant funding gaps in net coverage (US\$110 million for universal coverage and US\$31 million for high priority areas), highlighting a decrease from the 2020-2022 allocation period. They emphasized prioritizing this area if additional resources become available and committed to supporting efforts to address these gaps. Partners stressed the importance of seeking resource mobilization opportunities and strengthening subnational tailoring for optimal resource allocation.
- The Secretariat confirmed coordination with Partners and the Ministry of Health to ensure a comprehensive approach to entomological monitoring, noting that Global Fund-financing will focus on distinct sites and activities. The Government is finalizing the planning and costing of activities. If overlap with Partner-funded activities is identified, resources will be reallocated to other priority areas. Pending final Government confirmation of the activities planning and costing, resources will be reallocated to other priority areas in the event of overlap with activities funded by other Partners.
- GAC Partners expressed strong support for the expansion of integrated community care sites and the inclusion of non-malaria integrated community case management commodities in the grant, calling for coverage to be extended to additional provinces should more resources become available.
- **Complementarity with C19RM Investments:** The Secretariat highlighted the complementarity of this funding request, particularly in strengthening community health services, including managing 8,627 sites across 16 provinces and providing malaria health products. C19RM funds will cover all TRP-recommended community health activities for 2024 and 2025. Concurrently, the malaria grant will cover the cost of health products for 2024-2026 and all community health activities that need to be implemented in 2026.

Additional Information

Table 2: Co-financing update to the Board from 2023-2025 allocation period grants

The Secretariat hereby notifies the Board of the status of co-financing for the 2020-2022 and 2023-2025 allocation periods assessed as “conditionally compliant” or “conditionally non-compliant” at the time of Board approval. For these countries, a grant requirement was included in Grant Confirmations, requesting specific information and/or a final signed commitment letter to be submitted by an agreed due date to finalize the compliance assessment. Throughout grant implementation, the Secretariat will notify the Board of final co-financing compliance for outstanding countries. This report provides an update on co-financing compliance for Haiti (HIV, TB and Malaria), Ghana (HIV, TB and Malaria), and Kyrgyz Republic (HIV and TB).

Country	Components	2020-2022 Allocation Period		2023-2025 Allocation Period	
		Status at Board Approval	Update	Status at Board Approval	Update
Haiti	HIV TB Malaria	Conditionally compliant Document for verification of 2020-2022 allocation expenditure required (three months to provide the document – due 30 March 2024)	Compliant Government provided documentation for verification of 2020-2022 allocation expenditure, with realizations above total minimum requirement assessed in local currency (HTG) <ul style="list-style-type: none"> • HIV: US\$8,544,629 • TB: US\$8,816,463 • Malaria: US\$8,424,536 • RSSH: US\$3,058,654 	Conditionally compliant Final Commitment Letter pending submission (due 31 March 2024)	Compliant Government provided final Commitment Letter, with commitments in local currency (HTG) meeting total minimum requirement: <ul style="list-style-type: none"> • HIV: US\$6,847,033 • TB: US\$7,187,206 • Malaria: US\$6,746,359 • RSSH: US\$3,568,114
Ghana	HIV TB Malaria	Compliant	n/a	Conditionally compliant (HIV, malaria) / Conditionally non-compliant (TB) Final Commitment Letter pending submission (due 30 March 2024) including TB commitments (at least US\$1.4 million increase from 2020-2022 allocation period) and co-signed	Compliant Commitment Letter co-signed by the Minister of Finance submitted with commitments related to procuring commodities above the minimum requirement for each disease component, including for TB. <ul style="list-style-type: none"> • HIV: US\$14,956,404 • TB: US\$6,000,000

				by the Minister of Finance. Compliance of malaria co-financing to be reassessed against the final value of commodities supplied by December 2023.	<ul style="list-style-type: none"> • Malaria: US\$43,502,354
Kyrgyz Republic	HIV TB	Conditionally compliant Document for verification of 2020-2022 allocation period expenditure to be provided (three month to provide the document – due 31 January 2024)	Compliant Government provided documentation for verification of 2020-2022 allocation period expenditure, with realizations above total minimum requirement assessed in local currency (SOM) <ul style="list-style-type: none"> • HIV: US\$10,045,613 • TB: US\$29,004,070 	Conditionally compliant Final Commitment Letter pending submission (due 31 January 2024)	Compliant Government provided final Commitment Letter, with commitments in local currency (SOM) meeting the total minimum requirement <ul style="list-style-type: none"> • HIV: US\$12,224,313 • TB: US\$34,780,500

Privileges and Immunities

The applicant for which funding recommendations are currently being made, has not signed or ratified the Global Fund Agreement on Privileges and Immunities.

Document Classification: Internal.

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Annex 1 – Relevant Past Decisions

Pursuant to the Governance Plan for Impact as approved at the Thirty-Second Board Meeting,⁵ the following summary of relevant past decision points is submitted to contextualize the decision points proposed in Section I above.

Relevant past Decision Point	Summary and Impact
GF/B50/EDP07: Decision on the Secretariat's recommendation for funding the grants	This decision point approved the allocation funding for the DRC RSSH grant (COD-S-MOH).
GF/B50/EDP06: Decision on the Secretariat's recommendation for funding the grants	This decision point approved the allocation funding for the Ghana HIV, Ghana HIV/TB, Ghana Malaria grants (GHA-H-WAPCAS, GHA-C-MOH, GHA-M-MOH, GHA-M-AGAMal).
GF/B50/EDP03: Decision on the Secretariat's recommendation for funding the grants	This decision point approved the allocation funding for the Kyrgyz Republic HIV/TB grant (KGZ-C-UNDP).
GF/B50/EDP05: Decision on the Secretariat's recommendation for funding the grants	This decision point approved the allocation funding for the Haiti HIV/TB, Haiti Malaria and Haiti RSSH grants (HTI-C-WV, HTI-M-UNDP, HTI-S-UGP).

⁵ GF/B32/DP05: Approval of the Governance Plan for Impact as set forth in document GF/B32/08 Revision 2 (<http://www.theglobalfund.org/Knowledge/Decisions/GF/B32/DP05/>)