

EMRC Positions and Statements regarding BM35 discussions

Positions:

Strategy (GFB35-02)

While the alignment of GF strategy with global health targets is appreciated, EMRC expresses its concern about evaluation of Impact of the programs and GF contribution to those targets. Close collaboration with partners on defining overall impact targets and indicators in line with SDGs are highly commended.

EMRC appreciates the differentiated approaches and long term support embedded into the strategy objectives. (p6 , p25)

In many middle income countries the Global Fund is the main investor and in some the only investor in addressing the needs of key populations. We appreciate the approach for ensuring proper sustainability and transition planning before stopping contribution to countries. (p35) In particular EMR is facing with highest trend of risk of HIV infection, highest number of migrants and refugees, highest gap of access to HIV services including ART, although many of the countries there are not eligible or in transition right now. Jordan, Lebanon, Yemen, Syria, Libya and Iraq are some examples. Strengthening health system would be a challenging issue before any transition as well.

Considering the shortcomings in supply chain management which have been pointed out in many OIG investigations recently, EMRC welcomes the GF approach for capacity building and expanding partnership for improvement.

As mentioned before, our constituency appreciates the strategy and again asks the Executive Director and board members to reconsider EMR security, social and health situation and conduct a rapid assessment together with technical agencies of 3 diseases to find the existing gaps and opportunities to support the countries experiencing complex emergencies.

As discussed there are excellent experiences regarding integration of the 3 diseases into Public Health Care System in different parts of the world. Now there is a good opportunity for GF to support this integration and put it into the new strategy to sustain GF activities and efficiently spend limited financial resources.

Challenging Operating Environments Policy (GFB35-03)

In addition to current GF recipient countries assessment of COE eligibility should include other middle income countries and pay more attention to especially countries experiencing complex emergencies such as Libya, Iraq, Syria, Yemen or affected by external challenges such as Jordan, Lebanon and Tunisia.

The Eastern Mediterranean region continues to face multiple and complex emergency situations on an unprecedented scale, and also is one of origin, destination and transit of refugees and migrants. The EMR in the midst of one of the largest human displacements in modern history, with 14-15 million refugees and internally displaced people (IDPs). This number includes over 10 million Syrians that are now refugees abroad or IDPs, nearly 2 million Iraqi IDPs, and hundreds of thousands of Iraqi refugees. There are 2 two million Libyans abroad, mostly in Tunisia, and 400,000 IDPs within the country.

Since CCMs and even the government may no longer remain functional to control these three diseases in some of the COEs alternative approaches for sustaining service delivery to key populations should be sought, for example strengthening the role of a single PR, or a cluster of partner agencies and putting extra measures for oversight and grant management. In this regard we have to seek a special mechanism to foster the accountability of the recipient bodies and to make sure that these grants are completely traceable. Proposals which indicate delivering the funds to the refugees rather than established entities within the countries where people are as refugees could be subject to any fraud and often illegal actions which are completely beyond our intention and good-wills in the GF.

Allocation of additional fund to COE is crucial and highly recommended. Specially supporting what proposed by Germany to have a program for Jordan and Lebanon and I am asking the board for Libya.

Sustainability, Transition and Co-financing Policy (GFB35-04)

EMRC welcomes the approach for providing transition funding for up to one allocation period upon becoming ineligible and also the emphasis on transition planning.

GF is strongly advised to support strengthening of surveillance systems through WHO, UNAIDS,... for targeted diseases, invest in systematic monitoring and evaluation mechanisms and invest in evidence-informed decision-making in transitioning countries.

EMRC also asks for putting appropriate investment in these countries during transition period and mentioning a minimum and maximum level of funding for this initiative rather than just putting a maximum amount.

Allocation Methodology (GFB35-05)

Based on the ongoing crises across the Eastern Mediterranean region, limited progress made on controlling the 3 diseases, uncertainty of the final fate of migrants and mobile populations from and within the region, EMR urges for reconsideration of eligibility and transition in this region for a considerable duration.

I think all of you agree with me that chronic emergency leads to severely increase in TB/HIV and STIs incidence. Our constituency takes this opportunity to request you seriously for;

- 1- Increased share of upper middle income countries especially countries experiencing complex emergencies in EMR of overall GF grant allocation,
- 2- Encouraging sub-regional projects and concept notes,
- 3- And Advocating for increased availability of and dissemination of data on various health problems especially on emergency situation including information for board decisions.

GF Eligibility Policy (GFB35-06)

GF allocations should be based on ground realities rather than other considerations. Differentiated approach based on risk assessment might have implications on risk management; however it should not defer eligibility.

Global Fund's current model on prioritizing high burden is associated with the risk of neglecting concentrated epidemic countries such as some Eastern Mediterranean countries, EMRC calls for more emphasis on the "burden of risk factors" and epidemiologic trend instead of "burden of diseases" during global investment decisions.

We propose GF to consider shift of its focus from countries and their income level towards *location and population distribution* of the 3 diseases through development of sub-regional plans. Regions experiencing complex emergencies such as the EMR may benefit from adopting a more realistic criteria for eligibility.

Risk Management Report and Annual Assurance Statement on Risk Management

EMRC welcomes the efforts done for enhancing risk management at the secretariat and calls board and GF partners to assist in managing key enterprise risks mentioned in the report.

Office of the Inspector General Matters:

o Annual Report;

EMRC appreciates the various initiatives conducted by OIG for delivering reports that have impact, leveraging improved relationships, putting in place internal improvements and being proactive. We also commend OIG for decreasing the average time taken to close investigation cases to less than 8 months.

We recommend OIG to expand its relationship with constituencies and the civil society for further enhancing the investigations and audits.

EMRC also recommends the secretariat to be more proactive in capacity assessment of recipients and due diligence to ensure proper grant management.

o Annual Opinion on Governance, Risk Management and Internal Controls;

EMRC appreciates the comprehensive opinion provided by OIG and urges the secretariat and the board to improve the maturity of the organization considering the external context and the new strategic plan Global Fund has to implement.

o Progress Update on Status of Implementation of Agreed Management Actions

EMRC commends OIG and the secretariat for the follow ups on AMAs, however considering the high number of open and overdue AMAs in certain units we would like to ask for increasing efforts and maybe seeking additional support for improving the situation.

Corporate KPIs: Performance against 2015 KPIs

While EMRC appreciates the improvements and achievements on various KPIs, there are concerns about not achieving HSS targets which need putting more efforts on implementation and data collection.

Also EMRC expresses its concerns about not achieving targets for value for money and resource mobilizations.

Update on Resource Mobilization and Fifth Replenishment

EMRC is concerned about GF targets for 5th replenishment which is parallel to unfunded needs that may jeopardize yielding impact at the global level while GF has a strategy to end the epidemics. Moreover a risk management plan should be in place for ensuring the realization of adequate fundraising under current situation.