As the world nears 2 million COVID-19 deaths, different variants of SARS-CoV-2 have been identified across the globe. As COVID-19 vaccines are rolling out in 42 countries, of which 36 are high-income countries and six are middle-income countries, WHO Director-General urged the international community to work through COVAX and the ACT-Accelerator to ensure lower-income countries have access to the vaccines on the same urgent timeline as wealthier countries. He also encouraged all countries to fulfill their pledges to COVAX at the WHO Executive Board scheduled on 18–26 January. According to the World Bank, the global economy is expected to expand 4% in 2021, assuming an initial COVID-19 vaccine rollout becomes widespread throughout the year. On the research front, experts from the WHO are due to arrive in China on 14 January to investigate into the origins of the coronavirus pandemic. Herd immunity to the coronavirus will not be achieved this year despite widespread vaccination campaigns, said WHO’s top scientist.
The Global Fund has awarded nearly US$1 billion to 106 countries and 14 multicountry programs to support their responses to COVID-19, but has now fully deployed all its funding for this purpose. There are significant further needs for immediate funding, including for personal protective equipment (PPE), testing and treatment, and to mitigate the impact on lifesaving HIV, TB and malaria programs. Unfunded country requests for support now amount to over US$355 million.

**Funding Approved**

<table>
<thead>
<tr>
<th>US$221 million</th>
<th>US$759 million</th>
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**Grant flexibilities**

Use of funds remains mostly from grant savings, focused mainly on infection control, diagnostics activities & products, and lab equipment; reprogramming requests approved in small number of cases.

**COVID-19 Response Mechanism**

- Funding requests received: 105 and 46 top-up requests
- Funding remaining: US$0
- Projected funding gap: US$355 million
- Demand for funding has exceeded available funds. Countries are continuing to submit urgent requests for funding, and requests are expected to rise.

NOTE: Full list of countries with approved funding is available [here](#). The totals in the online table may differ from the table above because countries are only added to the online list once they have been officially notified of funding approval.

In response to COVID-19 the Global Fund has awarded an additional **US$980 million** to **106** low- and middle-income countries and **14** multicountry programs in 2020. The final US$41.5 million was approved on 21 December. The awards for COVID-19 are on top of the approximately US$4 billion the Global Fund has invested in its core HIV, TB and malaria programs this year.

Countries are using the funds awarded as part of the Global Fund’s COVID-19 response to:

- **Reinforce national COVID-19 responses**, including purchasing critical tests, treatments and medical supplies; protecting front-line health workers with training and PPE like gloves and masks; and supporting control and containment interventions, including test, trace and treat/isolate;
- **Mitigate COVID-19 impact on lifesaving HIV, TB and malaria programs**, including by delivering medicines, mosquito nets and critical supplies door to door, protecting community health workers and providing support and prevention services via digital platforms;
- **Make urgent improvements to health and community systems** to help fight COVID-19, HIV, TB and malaria, including by reinforcing supply chains, laboratory networks and community-led response systems.

The Global Fund partnership moved swiftly to help countries respond to COVID-19, providing millions of tests and PPE, and enabling rapid adaption of HIV, TB and malaria programs. In addition to redeployed internal funds, the Global Fund’s COVID-19 response received **US$259 million** from donors including Canada, Denmark, Germany, Italy, Sweden, Norway and the FIFA Foundation.

The Global Fund has estimated that it needs a further **US$5 billion** on top of its core funding to support countries in responding to the pandemic. This figure represents part of the overall financing needs of the Access to COVID-19 Tools Accelerator (ACT-Accelerator), the global collaborative partnership in which the Global Fund plays a leading role.
The Global Fund is a founding partner of the Access to COVID-19 Tools (ACT) Accelerator, a global collaboration of organizations and governments working to accelerate the development, production and equitable access to new COVID-19 tests, treatments and vaccines once available. As part of the ACT-Accelerator, we are a co-convener of both the Diagnostics Partnership (with FIND) and the Health Systems Connector (with the World Bank), and we are a procurement and deployment partner in the Therapeutics Partnership. Along with other partners, the Global Fund is actively involved in the WHO Diagnostics Consortium to monitor the supply and demand of molecular and rapid diagnostics tests for COVID-19 and implement the WHO allocation for scarcely available COVID-19 products. We have opened our innovative online sourcing portal, wambo.org, to all countries and organizations so they also can benefit from the Global Fund’s economies of scale for health products.

Protecting Front-line Health Workers: The Global Fund is providing funding to countries to purchase personal protective equipment such as masks, gloves and gowns. Countries can purchase equipment locally or can place orders for price-assured quality health products through our Pooled Procurement Mechanism or on wambo.org, the Global Fund’s online sourcing portal.

- **US$202 million** of COVID-19 Response Mechanism funds have been allocated for the provision of personal protective equipment (PPEs)
- **46 countries** have purchased PPEs on wambo.org

### Diagnostics

The Global Fund is the co-lead of the ACT-Accelerator Diagnostics Pillar, along with FIND. We also co-lead the WHO Diagnostics Consortium along with UNICEF to negotiate pricing and procure molecular diagnostic tests for COVID-19. To scale up antigen rapid diagnostics tests (Ag RDTs), the Global Fund has made available an initial **US$50 million** from its COVID-19 Response Mechanism to enable countries to purchase at least **10 million** of the new rapid tests for LMICs at the guaranteed price. The Global Fund is supporting countries and partners to develop and implement national testing strategies using a combination of PCR and Ag RDT tests.

- **US$117 million** of COVID-19 Response Mechanism funds have been allocated for the provision of diagnostics tests. To date, more than **6.5 million** requisitions for diagnostics tests (PCR and Ag RDT) have been placed across a total of **78 countries**, including:
  - **2.5 million** requisitions placed for automated PCR diagnostic tests across **78 countries**
  - **4 million** requisitions placed for Ag RDT tests across **18 countries**
  - **360,000** requisitions placed for manual PCR diagnostic tests

### Additional Resources:

- [Scaling-up Testing with Antigen-Detection Diagnostics](#)
- [Ordering COVID-19 Diagnostics through the Global Fund: Frequently Asked Questions](#)
- [List of SARS-CoV-2 Diagnostic Test Kits and Equipment Eligible for Procurement](#)
- [PPM Reference Price List for COVID-19 Diagnostics](#)

### Treatment

Following [WHO recommendation](#), the Global Fund is supporting the use of corticosteroids for COVID-19. Global Fund implementers can include corticosteroids for COVID-19 in COVID-19 funding requests. Corticosteroids are a standard medication in most countries and available for local purchase, and many countries and partners had existing stock.
ACT-Accelerator:
The ACT-Accelerator is making significant progress. We have advanced our understanding of what works to fight the disease. We have new vaccine efficacy data being announced, new diagnostic tests that provide results in less than 30 minutes and strong evidence that dexamethasone treats the disease, while trials on other new medicines such as monoclonal antibodies are advancing quickly. Further, clinical practice has advanced in understanding how oxygen, PPE, and overall health system capabilities can be best used to improve a patient’s chances of recovery.

By the end of 2021, the ACT-Accelerator aims to deliver 500 million diagnostic tests, 245 million courses of treatment and 2 billion doses of vaccine to low- and middle-income countries.

▶ Diagnostics Pillar update:
▶ Over 40 million COVID-19 tests (28 million PCR tests and 12 million Ag RDTs tests) have been procured for low- and middle-income.
▶ 120 million affordable, quality COVID-19 rapid tests have been secured for low- and middle-income countries, but the Diagnostics Pillar only has enough funding to purchase 16 million of those tests.
▶ Over 23,000 health care workers are being trained in almost 200 countries to effectively implement the tests.
▶ Over 50 diagnostic tests are currently being evaluated.

▶ Therapeutics Pillar update:
▶ 3.2 million lifesaving dexamethasone treatments have been supplied.
▶ 15 clinical trials have been supported, and 21 therapies have been investigated in 47 countries, with 85,000 patients enrolled.
▶ Manufacturing capacities are reserved for scale-up of monoclonal antibodies while research into monoclonal is advancing.

▶ Health Systems Connector Pillar update:
▶ The Health Systems Connector (HSC) aims to support countries on key health systems enablers as well as be the vehicle to make oxygen and personal protective equipment available as high priority commodities, especially in low and low-middle-income countries (LMICs). Systems requirements for delivery of COVID-19 tools have been mapped in four out of six world regions.
▶ US$200 million worth of personal protective equipment (PPE) has been procured for LMICs. This is enough to purchase 73 million daily basic PPE kits of gloves and masks for health workers.

ACT-Accelerator funding update:
Out of the US$38 billion needed, over US$5.8 billion has so far been committed to the ACT-Accelerator (through the Vaccines, Therapeutics, and Diagnostics pillars and the Health Systems Connector) and US$5 billion committed to COVAX. The ACT-Accelerator Commitment Tracker provides details on total commitments to date.

As of January 2021, US$3.7 billion is urgently needed to accelerate immediate progress, with a further US$23.7 billion required by the end of the year, if tools are to be deployed across the world as they become available. Without contributions from advanced economies to fill that gap, the ACT-Accelerator will not be able to provide low- and middle-income countries (LMICs) with the lifesaving tests, treatments, and vaccines they need. Bridging the funding gap will help save 3,000 lives per day and restore the global economy. Now is the pivotal moment to move fast for the mass rollout of these tools. Manufacturing capacity needs to be rapidly reserved, regulatory pathways accelerated, and delivery systems secured. All of this must happen now to avoid long delays in future and corresponding delays to the end of the crisis, but the urgent financing gap threatens the world’s ability to tackle the virus.

Diagnostics pillar:
The Diagnostics Pillar requires total funding of US$6 billion. To date, US$727 million has been raised. Funds are needed urgently to:
▶ Accelerate the diagnostic innovation needed to rebuild lives and restore economies by driving development of transformative, low-cost self-tests and digital solutions (US$146 million);
▶ Catalyze equitable deployment by ensuring countries, businesses and people can take up these products effectively (US$218 million);
▶ Support countries that cannot shoulder the costs alone by providing procurement funding (US$761 million).

Beyond March 2021, the focus will be on making a mass-produced, US$0.50 test available to everyone, everywhere, with 500 million tests deployed to LIC/LMICs by mid-2021.
Therapeutics Pillar:
The Therapeutics Pillar requires a total of **US$6.6 billion** through end-2021. To date, **US$683 million** has been raised. The Therapeutics Pillar investment case beyond March 2021 is built to enable flexible support for R&D, market preparation, and deployment at-scale for any therapeutics assets with positive clinical data.

Health Systems Connector:
The Health Systems Connector requires a total of **US$9.5 billion**. To date, **US$361 million** has been raised. Funds are urgently needed to facilitate access to PPE and oxygen. As country readiness is an absolute prerequisite to the equitable scale-up of other COVID-19 tools, **US$89 million** is needed urgently to support these health systems activities.

Additional Resources:
- [Case for Private Sector Support](#)
- [Statement of the Co-Chairs of the 3rd Meeting of the ACT-A Facilitation Council](#)
- [ACT-Accelerator Commitment Tracker](#)
- [Chairs’ Summary of the 2nd Meeting of the ACT-A Facilitation Council](#)
- [Letter to the G20](#)
- [Urgent Priorities & Financing Requirements at 10 November 2020](#)
- [ACT-A Status Report & Plan](#)
- [ACT-A Economic Investment Case and Financing Requirements](#)
- [ACT-A Diagnostics Partnership Investment Case](#)
- [ACT-A Therapeutics Partnership Investment Case](#)
- [ACT-A Vaccines Pillar (COVAX)](#)
Global Fund Response
Mitigating the Impact of COVID-19 on HIV, TB and Malaria

IN FOCUS ROSEMARY’S STORY: PASSION FOR SAVING LIVES REMAINS UNDIMMED BY COVID-19

For Rosemary Wanjiru, a community health volunteer in Nairobi’s Soweto Village, fighting TB in the time of COVID-19 has meant making impossible choices. For instance, she was torn between keeping herself and her family safe at home or going out to see patients, who desperately needed her help.

The mother of two has dedicated more than 18 years of her life to volunteerism, supporting her community in the eastern part of Nairobi to fighting infectious diseases such as HIV and TB. With a sure step, she walks the narrow alleyways in her neighborhood, offering lifesaving treatment and education to the people. But when COVID-19 arrived here, it changed everything – without much notice, her daily work was putting her and her family at risk.

Rosemary remembers coming home the day the first case of COVID-19 was registered in her clinic and breaking the news to her children, who recoiled with fear. They were afraid that Rosemary may have brought the virus home. It was a tough moment for her as a mother.

“I felt stigmatized, I felt unwanted, unloved,” Rosemary recalls. “But I understood that everybody is scared to die.”

Such a moment could have disheartened many people. Not so Rosemary, who could not stop seeing her patients, who were desperate for help during those early months of the virus after the Kenyan government had instituted lockdown measures.

“People could not find enough to eat, everyone was scared, yet my clients believed I could solve their problems. For instance, I had one person who was bedridden with TB and HIV co-infection and who needed my care, there was no way I could abandon her during lockdown,” says Rosemary. “I had no option but to go out and serve.”

However, Rosemary knew she needed to do everything within her means to protect herself and her family from a possible infection. Her clinic did not have enough PPE. She drew funds from her savings to purchase masks and hand sanitizer to keep the virus at bay.

That situation improved when a partnership between Amref Health Africa and Malteser International with support of the Global Fund provided PPE to community health workers, allowing Rosemary to step up ways of protecting herself from the virus. Since March, the Global Fund has provided more than US$45 million to support Kenya’s response to COVID-19, including training and PPE like gloves and masks to protect community health workers like Rosemary.

Today, as she serves people in her community, she feels more assured.

Still, thousands of health workers throughout Kenya lack the equipment they need to protect themselves and their families from COVID-19. As COVID-19 spreads across Kenya, the available PPE is barely enough to go around. Rosemary hopes all health workers in the country can have enough PPE, so they do not have to choose between protecting themselves and their families from the virus and doing the work they love.

“We are saving lives, giving hope, and spreading the gospel that TB is curable,” Rosemary says. “It’s an awesome feeling …I feel fulfilled.”

Despite COVID-19 disruptions that have slowed down the fight against TB, Rosemary remains hopeful that she can play a critical role in ending the disease as a public health threat in her community.

See video of Rosemary’s story here
Communications Products

- **News Releases:**
  - Global Fund signs a record-breaking $8.54 billion in grants to fight HIV, TB and malaria [ENG](#) | [FRA](#)

- **Stories and videos:**
  - Rosemary’s story: passion for saving lives remains undimmed by COVID-19 [ENG](#) | [Video](#)

In the News

- The Star - 13 January 2021 - [Stipend gives TB patients a lifeline after Covid woes](#)
- Transversal - 8 January 2021 - [La Covid-19 met la santé mondiale sous haute tension](#)
- The Manila Times - 30 December 2020 - [Beyond Covid-19, HIV and other illnesses deserve attention too](#)
- Foreign Affairs - 29 December 2020 - [Vaccine Nationalism Will Prolong the Pandemic](#)

On Social Media

- @GlobalFund – [Grace’s story](#)
- @ONEDeutschland – [Was macht die Corona-Pandemie mit Mädchen & jungen Frauen?](#)
- @GlobalFund – [Community outreach workers in Panama](#)
- @GlobalFund – [Nombasa’s story](#)
- @antonioguterres – “I’m deeply grateful for the courage & commitment of all health workers on the front lines of the global fight against #COVID19”

Partners’ Publications

- 8 January 2021: WHO – [COVID-19 response Report by the Director-General](#)
Upcoming Events

18-21 January: Goals House - Equitable access event. The Goals House event will bring together some of the most important decision makers and voices in the equitable access space under the One19 campaign banner. Participants may include Gavi Chair; Professor Chris Whitty, UK Chief Medical Advisor; Bill Gates or representative; Michael Froman, Vice Chairman of Mastercard; and Jane Halton, Chair of CEPI. The panel will also include representation from the Global South.

18-26 January: WHO Executive Board: 148th session

26-27 January: 1st G20 Health Working Group meeting

26-29 January: World Economic Forum Planning Meeting

29 January (tbc): South Africa/Norway-hosted Finance Ministers meeting on the ACT-Accelerator

1 February: Roundtable with ACT-Accelerator principals and CEOs co-hosted by the WHO, Global Citizen and the International Chamber of Commerce. Speakers may include: Peter Sands, Executive Director of the Global Fund; Dr. Ngozi Okonjo-Iweala, Board Chair of Gavi, the Vaccine Alliance; Dr. Jeremy Farrar, Director of the Wellcome Trust; Dr. Kristalina Georgieva, Managing Director of the International Monetary Fund; representatives from governments, private sector, and communities.

2 February: IAS COVID-19 Conference on Prevention

2 February: Global Fund Joint Global Opening of the Sixth Partnership Forums (virtual). The Sixth Partnership Forums are designed to collect ideas, perspectives and guidance from across the full Global Fund partnership to feed into our post-2022 strategy.

4 February (tbc): Community of Latin American and Caribbean States (CELAC) meeting of Finance, Foreign Affairs and Health Ministers on the ACT-Accelerator


9-11 February: Global Fund Partnership Forum 1 (virtual) - Regional Forum for Eastern Europe, Central Asia, Latin America and the Caribbean

17-19 February: Global Fund Partnership Forum 2 (virtual) - Regional Forum for West and Central Africa; East Africa and Southern Africa

3-5 March: Global Fund Partnership Forum 3 (virtual) - Regional Forum for South West Asia; East Asia and the Pacific

15 March: Global Fund Joint Global Closing of the Sixth Partnership Forums (virtual)