

**10 December 2012**

***A letter to Mark Dybul,  
Executive Director  
The Global Fund to Fight AIDS, TB and Malaria***

*On this Human Rights Day African Civil Society Calls for a Responsive and Fully Funded Global Fund*

**Nairobi, Kenya – The following is a letter unanimously adopted and issued by representatives of various African civil society organisations who attended a special meeting between 27th and 28th November 2012 to support the Global Fund in implementing its current strategy and the campaign for the 4<sup>th</sup> replenishment process.**

We as representatives of various African civil society organisations and networks across the continent having gathered at Nairobi in Kenya between the 27<sup>th</sup> and 28<sup>th</sup> of November 2012 welcomes your appointment as Executive Director of the Global Fund. We urgently request an opportunity to meet with you as the Global Fund moves into the next era of contributing to the Right to Health for All.

Recognising the on-going challenges that Africa continues to face with regards to providing quality public health care service delivery;

Further recognising the on-going multiple stakeholder efforts to mitigate the adverse socio-economic impact of Africa's major disease burdens such as HIV and AIDS, Tuberculosis and Malaria, among others;

Appreciating the crucial progressive impact in Africa for the past ten years of the Global Fund;

Noting with serious concern the decline in recent years of the funding commitments towards the Global Fund;

Further noting the recent efforts to reform the Global Fund that culminated in the adoption of the new Strategy 2012 – 2016 and the New Funding Model;

Concerned about the need to ensure that the 4<sup>th</sup> Replenishment Process of the Global Fund meeting that is due to be held in September 2013 is a substantial success;

**Now hereby adopt the following resolutions:**

1. We fully commend the efforts to reform the Global Fund while maintaining its founding principles of country ownership and multi-stake holder engagement as represented by the recently adopted new Strategy and Funding Model.
2. We re-affirm our full support for a fully funded Global Fund given its crucial role in combating Africa's major disease burdens and we call on the all countries to contribute their fair share toward a fully funded Global Fund,
3. We strongly call upon the governments of Africa to commit to developing and implementing domestic resource mobilisation strategies and plans that complement the efforts and commitments the Global Fund makes.

4. We strongly call upon the governments of Africa, international community and the private sector to ensure that the 4<sup>th</sup> Replenishment process for the Global Fund meeting in September 2013 is a big success.

As Africa civil society we commit to implementing the advocacy Road Map developed in Nairobi November 2012 that aims to build a public movement both in Africa and Globally to actively campaign for the continued success of the Global Fund and in particular the 4<sup>th</sup> Replenishment process. But in order for us to do this effectively; we need your assurance of the following:

1. **Meaningful Civil Society Engagement:** The past year has seen a dearth of response to civil society from the Global Fund spurred on by all the structural changes in the organisation. Processes around the Strategic Plan and the New Funding Model have been vague, overly technical, rushed and had limited meaningful engagement at country level. We urge the Global Fund under your leadership to provide us with a strategy and plan that outlines how the Global Fund will once again meaningfully engage civil society.
2. **Capacity Building on the New Funding Model:** The NFM, whilst promising does not spell out our role as civil society at country level. We therefore require capacity building for civil society to understand the NFM so as to allow us to more effectively participate in its implementation at country level.
3. **Community Systems Strengthening:** Through your leadership we expect continued investment in Community Systems Strengthening and respect for civil society organisations contributions during the country NFM decision making process.
4. **That disbanding of the Pharmaceutical Management Unit doesn't mean less purchasing of medicines:** We are concerned about the disbanding of this unit and request to understand what this means for the funds allocated by the Global Fund for the purchase of medicines. We further draw your attention to the Pharmaceutical Manufacturing Operational Plan for Africa approved by the Africa Union for release in November 2012 and request to understand the position of the Global Fund in engaging with the AU and this plan.
5. **Addressing the Human Rights of Most at Risk Populations:** On the African continent MARPS face a continuous barrier to accessing health services amongst a range of other human rights violations. We urge the Global Fund and you in particular to clarify your strategy and commitment to being more vocal in condemning human rights violations and discrimination against MARPS.

In closing, we will remain the Global Fund's strongest Allies; but we will not waiver in our constructive critique when at times the Global Fund appears to be misguided in decisions that affect all of our lives.

Thus done and signed by the representatives of the following organisations:

1. African Council of AIDS Service Organisations (AfriCASO)
2. African Union Youth Expert Panel
3. Alliance for Community Action for HIV/AIDS in Zambia (Alliance Zambia)
4. Central Africa Treatment Action Group (CATAG)

5. Communication for Development Centre
6. Eastern Africa National Networks of AIDS Service Organizations (EANNASO)
7. Evolve Cameroon
8. Global Youth Coalition on HIV and AIDS (Africa Region)
9. International Treatment Preparedness Coalition (Africa Region)
10. International AIDS Vaccine Initiative (Africa Region)
11. Journalists Against AIDS (JAAIDS)
12. Kenya AIDS NGOs Consortium (KANCO)
13. Network for African People Living With HIV and AIDS in Southern Africa (NAPSAR+)
14. Pan African Treatment Campaign (PATAM)
15. Southern Africa Regional Programme on Access to Medicines and Diagnostics (SARPAM)
16. Southern Africa AIDS Information Dissemination Services (SafAIDS)
17. TB ACTION Group
18. West Africa Treatment Action Group (WATAG)
19. World AIDS Campaign International

For more information and to set up a meeting with Africa civil society contact the Regional Platform for Health Secretariat through:

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