Friends of the Global Fight Against AIDS, Tuberculosis and Malaria  
Washington, D.C.

Comments on World Bank White Paper on a proposed  
FIF for Pandemic Prevention, Preparedness and Response

May 31, 2022

Friends of the Global Fight welcomes this opportunity to provide input on the World Bank white paper dated May 17, 2022. Friends is strongly supportive of efforts to bring substantial new resources to pandemic preparedness that supports stronger health systems to meet current and future health priorities; invests in proven, successful implementing agencies; and is founded on human rights-based principles and community engagement. That is the pandemic preparedness that responds to community needs, builds trust, and makes all of us safer.

We believe it is very important that fundamental aspects of the FIF – including core principles, governance and eligible entities – be outlined more fully before the FIF is established. We would like to raise the following three points regarding the white paper.

First, the FIF’s funding eligibility and approach should leverage and build upon existing assets for pandemic preparedness. In particular, the Global Fund should be explicitly identified as an implementing agency eligible for funding through the FIF. We are surprised that organizations, such as the Global Fund to Fight AIDS, Tuberculosis and Malaria and Gavi, that already contribute to pandemic preparedness and have demonstrated effectiveness during COVID-19 are not identified as initially eligible for funding through the FIF. Recent reports from both the International Panel on Pandemic Preparedness and Response (IPPPR) and G20 High Level Panel (HLP) call for funding preparedness through current implementing agencies, including Global Fund and Gavi.

The IPPPR report notes that, “We do not recommend creating new implementing agencies. But we do believe that existing implementing agencies need additional funding, directed towards the vital public goods they deliver.” The report then uses the Global Fund as an example of successful responses during COVID-19.

The HLP report argues, “Investments in pandemic preparedness should be integrated with the ongoing efforts and infrastructure to tackle endemic infectious diseases. Existing global health institutions like the Global Fund ...and Gavi should be given a more explicit mandate and increased funding to invest in system-level preparedness.”

Strengthening country-level capacity is identified as a focus area in the white paper. “Disease surveillance,” “laboratory systems,” and “community engagement” are all explicitly included in this category in the paper. Each of these are core aspects of health systems where the Global Fund is currently active and is poised to do more. Other priorities included in the white paper,
including incentivizing domestic resource mobilization and integrating preparedness with existing national plans, are already strengths of the Global Fund.

**Recent research in the Lancet** indicates that approximately 33% of the Global Fund’s investments advance health security and pandemic preparedness. A **new paper from the Global Fund** outlines areas where the organization is active in supporting preparedness, and where it can do more. An **infographic from Friends** highlights current and future opportunities for pandemic preparedness through the Global Fund.

We believe the white paper should speak to the numerous advantages of building out preparedness functions from current programming, thus strengthening health systems that can serve people’s needs today and that are better prepared to identify and respond to emerging threats. Investing in preparedness through current successful programs will reduce siloing of funding, better integrate preparedness with health systems, and minimize application and reporting demands on implementing countries. Such an approach will fulfill the white paper’s call for “linking financing with existing, country-level planning processes, thereby also reducing transactional costs for client countries,” while respecting the agency and leadership of implementing countries and communities as more than “clients.”

Moreover, the white paper should discuss pandemic preparedness in the context of responding to current pandemics. The paper speaks of strengthening preparedness during “peace time” for pandemics -- **but there is no peace time when AIDS, TB and malaria continue to claim millions of lives each year.** To pursue pandemic preparedness without addressing current pandemics would be to ignore the immediate health security needs of millions of people.

**Second, civil society, local communities, equity and human rights should be made essential, integral elements of the FIF’s design.** Community health workers and community systems of delivery, engagement and monitoring should be included from the outset as critical aspects of preparedness identified in the white paper. Funding eligibility for such community systems should be included in the FIF by design. It is also essential the white paper outline core principles to guide support of preparedness programming, including non-discrimination and commitment to reach marginalized populations.

The same socially inclusive elements must be part of the FIF’s own governance. In particular, **civil society and implementing countries must explicitly be included in FIF governance from the outset.** The white paper speaks of a tradeoff between “inclusivity” and “efficiency” in governance. In fact, success depends on including civil society and implementing countries in decision making at every level.

The Global Fund is a case in point. Much of the organization’s success - and its ability to maintain broad long-term support among implementing governments and advocates - is that its governance structure includes implementers, civil society and affected populations on its board and in country-level planning. **Recent research** on outcomes during COVID-19 point to the essential nature of trust in successfully addressing pandemics. Inclusion of civil society and
implementing countries in decision making is crucial to trust building. In its multistakeholder board and in country coordinating mechanisms, the Global Fund offers a useful model for how the FIF could incorporate civil society into its governance.

Third, the white paper should do more to outline strategies to ensure its financing will be truly additional and not siphon off resources from other global health entities. A crucial central premise of the IPPPR, HLP and proponents of the FIF has been to expand overall resources for preparedness and health, including from outside of official development assistance (ODA). The FIF’s design must incorporate incentives and strategies to bring new investment to preparedness and global health.

Thank you for considering these comments.

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