

# World Vision Partnership with The Global Fund



In partnership with The Global Fund to Fight AIDS, Tuberculosis and Malaria and national partners, World Vision is working towards achieving Sustainable Development Goal (SDG) 3 to 'ensure healthy lives and promote well-being for all at all ages', by reducing global maternal mortality, ending preventable deaths of newborns and children under 5 and ending the epidemics of AIDS, tuberculosis (TB), malaria and other diseases by 2030.

World Vision is an international non-governmental organisation (NGO) committed to the well-being of children, their families and communities. In 2016 World Vision raised US\$510 million to invest in health programming in 65 developing countries in support of the United Nations Secretary-General's global strategy for women's and children's health, assisting more than 2.5 million people to access improved services for health, HIV and AIDS, infectious diseases, nutrition, sanitation and hygiene.

Established in 2002, The Global Fund is a unique financing institution that has raised and invested around US\$4 billion

annually for programmes that treat, prevent and provide services for millions of people with HIV and AIDS, TB and malaria. By the end of 2016, with the aid of The Global Fund, 9.2 million people were on antiretroviral therapy (ART) for HIV, 15 million people had received TB treatment and 650 million mosquito nets had been distributed to protect children and families from malaria.

In 2016 the cumulative portfolio of Global Fund grants implemented by World Vision grew to US\$443 million. During its 14-year partnership with The Global Fund, World Vision has been the principal recipient (PR) of 22 grants funding solutions for HIV and AIDS, TB and malaria in nine countries and a sub-recipient (SR) on 90 grants supporting programming for all three diseases in every region of the world. The Global Fund's investments often leverage additional funds from World Vision's private donors to fight these diseases. Whether as the PR or SR, World Vision works closely with local communities and national partners within the guidance of national health strategies to achieve outstanding results with Global Fund investments. The following pages contain a few samples of this work.

### Malaria programmes

Since 2004, World Vision has been the PR of malaria grants in Guatemala, Mozambique, Angola and Malawi and the SR of 17 malaria grants throughout Africa and Asia, together totalling US\$137.8 million. In 2016, with funding from The Global Fund, World Vision brought life-saving malaria prevention and treatment to more than 14 million people in 10 countries. All World Vision projects support national programmes to control or eliminate malaria using evidence-based practices for vector control, community case management (CCM), women's and children's health, and health systems strengthening (HSS). In six high-burden countries, World Vision leads the scaling up of CCM, taking accurate rapid diagnosis and treatment the last mile to children under 5 through trained community health workers (CHWs).

#### Mozambique

As the co-PR with Mozambique's Ministry of Health since 2010, World Vision is responsible for distributing long-lasting insecticidal nets (LLINs) and strengthening community systems. World Vision leads a group of NGO partners responsible for training CHWs in CCM, behaviour change communication, coordination between community and provincial health systems and mass LLIN distribution, which is nearing universal coverage. Since the project's inception, World Vision and partners have assisted the government PR with distribution of 13,047,000 LLINs by conducting mass campaigns in 10 provinces; strengthening 3,222 active health committees; training 800 CHWs in CCM and 34,000 teachers and volunteers in malaria education and behaviour change communication. World Vision's most recent progress ratings were AI.

#### Malawi

World Vision was appointed the co-PR with Malawi's Ministry of Health under the new funding model (NFM). In this project, World Vision provides a package of community strengthening activities, including behaviour change communication, CCM and social accountability. A critical innovation was the training of citizen advocates in 24 districts to improve local oversight of health facilities, service quality and drug stock maintenance. In this first year, the project achieved or exceeded most of its targets for an AI progress rating. Results include training 3,100 CHWs, strengthening 2,500 community health facilities to maintain drug supplies, indoor spraying of 900,000 houses and providing 132,000 patients, primarily children under 5, anti-malarial treatments.

#### Angola

World Vision is the PR for a malaria and HSS grant supporting the National Malaria Control Programme (NMCP) that began in Angola in October 2016. The grant aims to reduce malaria morbidity and mortality through CCM and vector control activities at both the health facility and community levels. The project introduced an integrated CCM approach using the government's community system and technical assistance to improve case management and vector control. World Vision, leading a group of six NGOs, provides oversight for CHW training activities in 18 municipalities in six provinces to diagnose and treat pneumonia, diarrhoea and malaria in children under 5. During the first year the project trained 1,297 CHWs to accelerate the scaling up of CCM. The project has also begun to implement innovative mobile technology for data collection and behaviour change communication.

#### Indonesia, Myanmar, Thailand, Democratic Republic Congo, Senegal and Chad

As the SR for grants in these countries, World Vision works in some of the most challenging, remote and under-reached areas, delivering LLINs, strengthening human resources and community systems and taking malaria prevention, diagnosis and treatment the last mile to reach underserved communities.



A child in Myanmar is tested for malaria with a rapid diagnostic kit.

## **Tuberculosis programmes**

World Vision has implemented 30 TB grants from The Global Fund with a total value of US\$198.86 million. World Vision has been the PR for TB grants in Somalia, Thailand, India, Papua New Guinea and Guatemala, and the SR for grants in the Philippines, Indonesia, Mongolia, Myanmar, Senegal, Thailand, Kenya, and Bosnia and Herzegovina. Projects have focused on HSS and community systems strengthening using an advocacy and social mobilisation approach to increase case finding, diagnosis and directly observed treatment, short-course (DOTS) enrolment. In most grants World Vision also increasingly supported diagnosis and treatment for multi-drug resistant (MDR) TB as well as HIV-TB coinfection. As the PR, World Vision has consistently met or exceeded expected performance-based funding results in TB projects.

#### India

As the PR of this project as of round nine, World Vision focuses on the 222 million people living in the 74 most remote and underserved districts in India. Alongside six partner NGOs and the national TB programme (NTP), World Vision has successfully scaled up case detection and TB treatment through active case finding, locallevel advocacy and systems strengthening. This project has also provided integrated TB-HIV screening and treatment by partnering with community-based HIV organisations; produced improved results for MDR TB through enhanced diagnosis, home-based counselling and food support; and has been particularly successful in increasing case detection amongst women and children through contact tracing. One successful innovation of the project has been to train and engage rural health-care practitioners (RHCPs) to scale up case detection and improve treatment adherence. World Vision has trained a total of 14,070 RHCPs as DOT providers to recognise chest symptomatic/presumptive TB cases. Additionally, a mobile health package has digitised data collection, validation and reporting for better quality data collection and also supports the tracking of treatment outcomes from private practitioners, linking the records with the NTP's information system.

#### Papua New Guinea

After four years as a successful SR, World Vision was appointed by the Country Coordinating Mechanism as the PR in 2011. DOTS was subsequently expanded to all 22 provinces, case notification rates increased and laboratory networks were strengthened. World Vision continues as the PR under new allocation period where the focus of the project is to ensure availability and access



In India there is greater stigma attached to TB in females than in males. The Axshya India Project has been providing TB education and support particularly to women to encourage them to seek care.

to quality drugs and laboratory diagnostics, ensure high quality medicines are accessible and affordable to the population, and establish and improve the quality of laboratory services with an emphasis on primary health care (PHC). The project also focuses on improving the quality of TB care and prevention; strengthening HIV-TB collaborative services; and establishing a coordinated national clinical and public health laboratory service that supports diagnosis, treatment, monitoring, surveillance and prevention of diseases. As the national government increases its investment and commitment to TB control, World Vision is committed to collaboration, partnership and capacity strengthening.



Screening children for TB in Somalia.

#### Somalia

World Vision has been the PR in Somalia since round three, consistently achieving targets and saving lives despite the challenging political context and insecurity. Aimed at decreasing TB incidence and preventing the development of acquired drug resistance, the project has supported more than 73 TB centres, trained more than 1,200 health staff in DOTS and aided 74 laboratories in TB microscopy. These successes led to 78,800 cases of TB detected and treated and a consistent 88 per cent treatment success rate maintained. Scaling up detection and treatment for MDR TB and HIV-TB coinfection has been a focus in the recent allocation period and integration of TB services into PHC centres is a new goal. The project is working with more than 20 local partners to build local capacity and a supportive environment for health service delivery through strengthening coordination and partnership at governmental, district and community levels.

### **HIV and AIDS programmes**

Since 2002, World Vision has managed HIV and AIDS grants from The Global Fund totalling US\$114 million. Formerly the PR in Guatemala and Armenia, World Vision successfully completed the first and second phases of those grants before turning the projects over to the government and other local partners. World Vision's portfolio currently includes six SR grants in Zimbabwe, Democratic Republic of Congo, Malawi, Kenya and Haiti totalling US\$8 million. World Vision's projects have shown success in reaching marginalised, hard-to-reach and key affected groups, including ethnic minorities, migrants, adolescent girls, sex workers and orphans and vulnerable children (OVC), using community strengthening and integrated socio-economic support interventions.

#### Zimbabwe

World Vision's programme focuses on increasing the adoption of safer sexual behaviour and access to HIV services amongst young at-risk women and sex workers. The programme has facilitated the formation of support groups by sex workers to empower them in overcoming stigma and difficulties in seeking health services. Trained behaviour change facilitators from the community led sessions to build self-awareness, financial awareness, health knowledge, negotiation skills and assertiveness, reaching 184,000 adolescent girls and young women.

#### Malawi

This NFM project aims to reduce the incidence of HIV amongst young women aged 15 to 24. As an SR, World Vision expects to reach 73,000 in-school and 106,000 out-of-school adolescents and young women. The strategy focuses on improving the learning and social support environments to keep girls in school and sustainably integrating activities focused on adolescent life skills, health education and female empowerment

within school and community structures. An estimated total of 450,000 indirect beneficiaries, including school teachers, parents, male counterparts and community leaders are involved in project interventions that strive to increase adolescent girls' HIV prevention knowledge, skills, and access to services; reduce school dropouts, gender-based violence and sexual exploitation.



Girls are more likely to attend school when the school includes access to safe hygiene and sanitation facilities.

#### Democratic Republic of the Congo

As an SR, World Vision implements a host of communitystrengthening activities to prevent the spread of HIV and AIDS and provide aid to orphans and other vulnerable children (OVC) and their families in 12 health zones. Over the life of the project, the project has achieved strong success supporting OVC: 688 received educational benefits and 6,960 received health care and psychosocial support. The project also trained 240 health zone medical officers on universal precautions and gender-based violence and 120 CHWs on community mediation on prevention of motherto-child transmission (PMTCT). In addition, 15,678 people living with HIV and AIDS (PLWHA) received home-based care, 1,101 HIV-positive pregnant women received antiretrovirals to reduce the risk of mother-tochild transmission and more than 5.8 million condoms. were distributed.

#### Haiti

Increasing the number of OVC and PLWHA and their families receiving care and support from three health centres in Haiti is the project's focus. This project focuses on behaviour change and communication, condom distribution, PMTCT and curative care where PLWHA receive ART. The project also supports 332 OVC with school fees and youth clubs. Since the project's conception, 1,000,849 condoms have been distributed, 726 adults have received HIV care and/or support and I65 PLWHA have received ART.

# Benefits delivered in 2016 by Global Fund-supported projects implemented by World Vision

- 417,700 people reached with standardised HIV-prevention interventions
- 70,000 pregnant women received prevention of mother-to-child transmission (PMTCT) services for HIV
- 32,000 people received antiretroviral therapy
- 242 facilities supported and 118 community groups strengthened to provide HIV care
- 32,240 people enrolled in directly observed treatment, short-course (DOTS) for TB
- 629 people started on a second line of treatment for multi-drug resistant (MDR) TB
- 366 facilities supported and 4,527 community groups formed for TB prevention and care
- 10,601,000 insecticide-treated bed nets distributed to prevent malaria
- I,597,820 confirmed cases of malaria received anti-malarial treatment
- 1,953 facilities and 6,016 community groups strengthened to provide malaria prevention and care.



Children in Myanmar, where World Vision is an SR for Global Fund grants.

# World Vision's organisational capacity

World Vision's effectiveness as a Global Fund grant implementer is based on sound organisational governance and structure as well as proven institutional capacities that meet or exceed Global Fund minimum standards for implementers, including:

- national legal registration and local governance in 74 countries eligible for Global Fund funding
- depth of technical expertise, including a global network of experts in various aspects of health programming and disease control
- robust financial systems and staff capacity to ensure transparency, accountability, judicial use of resources and efficient financial processes
- monitoring and evaluation expertise, experience and tools for quantitative and qualitative assessment of health interventions, data collection, systems design, data management, analysis and security

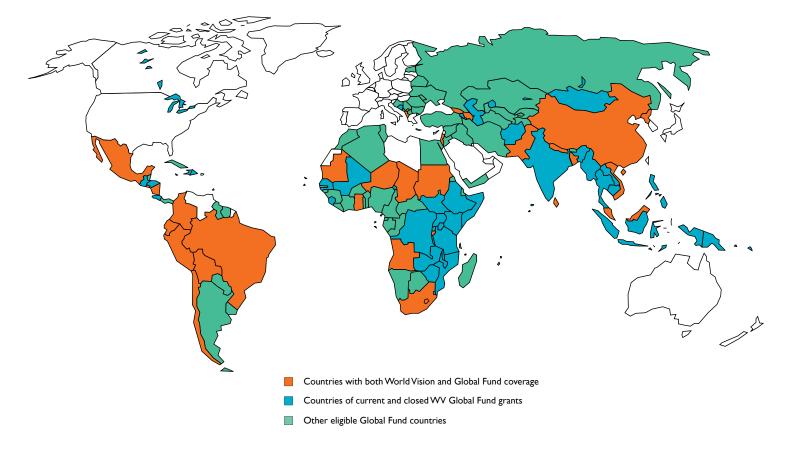
- procurement capacity, including established systems and policies for secure and transparent supply chain management
- SR management, including documented procedures for timely processing, disbursement and monitoring of funds to partners and a complete management training package for community-based and grassroot organisations
- established risk management policies and procedures integrated into management, including risk assessment and mapping, audit, fraud prevention, conflict of interest and related policies.

World Vision also brings a unique capacity to mobilise additional resources from its international partnership in support of Global Fund grants. World Vision's framework agreement with The Global Fund, signed 15 February 2015, authorises co-signing of Global Fund grants by World Vision national and support offices, with agreement from the Country Coordinating Mechanism. This agreement enables World Vision to more effectively leverage funding and its network of technical support for the programmes implementing Global Fund grants.

The partnership between World Vision and The Global Fund has proven to be an effective way to achieve sustainable results in the fight against HIV and AIDS, TB and malaria. Maintaining partnerships and finding new ways to collaborate are imperative to achieving the proposed SDG goals by 2030.

For more information about World Vision's work with The Global Fund or potential partnership opportunities, please contact Ann Claxton, Director, Resource Development, Sustainable Health, World Vision International at ann\_claxton@wvi.org.





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