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

World Vision is an international non-governmental organisation present in nearly 100 countries. World Vision raised and invested more than $415 million annually in 65 developing countries for health programming in support of the Secretary General’s global strategy for women and children’s health, assisting more than 2.5 million people to access improved services for health, HIV/AIDS and infectious diseases, nutrition, sanitation and hygiene.

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Established in 2002, the Global Fund is a unique financing institution that has raised and invested around $4 billion annually in programs that treat, prevent, and provide services for millions of people with AIDS, TB, and malaria. By the end of 2014, with the aid of the Global Fund, there were 7.3 million people on antiretroviral therapy for AIDS; 123 million new smear-positive TB cases were detected and treated; and 450 million mosquito nets had been distributed to protect children and families from malaria.

In 2014 the cumulative portfolio of Global Fund grants implemented by World Vision grew to US$354 million. During its 12-year partnership with the Global Fund, World Vision has been the Principal Recipient (PR) of 17 grants in eight countries and a Sub-recipient (SR) on 90 grants covering all regions of the world and each of the three diseases. The Global Fund investments often leverage additional funds from World Vision private and public donors. Whether as PR or SR, World Vision works closely with communities and national partners within the guidance of the national health strategy to achieve outstanding results with Global Fund investments.
Malaria programmes

Since 2004, World Vision has been PR of malaria grants in Mozambique (round nine) and Guatemala (round four) and SR of 17 malaria grants in Africa and Asia, together totalling $89 million. All World Vision projects support national programmes using evidence-based practices to prevent and treat malaria, including distribution of long-lasting insecticide-treated nets (LLINs), prevention education, intermittent preventive treatment in pregnancy, confirmed diagnosis, and improved access to artemisinin-based combination therapy.

Mozambique
The round-nine project targets prevention, LLIN distribution, diagnosis and treatment for pregnant women and children, the rural population, and residents of areas not yet covered by IRS. As PR, World Vision leads a group of NGO partners responsible for community systems strengthening, behaviour change communication, and coordination between community and provincial levels. Since the project inception, World Vision and partners have assisted the government PR in scaling up malaria services with distribution of 7,000,000 LLINs in ten provinces; strengthening 3,222 active Health Committees; training of 800 community health workers; empowering 900 teachers for malaria education for school children; and reaching 3,026,057 people with malaria information and educational messages.

Myanmar
World Vision, as SR for this round-nine project, is working to strengthen public and private early diagnosis and treatment services and to maximise utilisation of these services by the public in six rural townships. Specific approaches include increasing use of insecticide-treated nets and LLINs, accurate diagnosis, community-based malaria control activities, and building technical and administrative management capacity for malaria control at all levels. Since conception, World Vision trained 1,967 community volunteers, treated 2,203 people with antimalarial treatments, re-treated 109,101 nets and distributed 81,342 LLINs.

Malawi
In Malawi, World Vision was appointed PR under the New Funding Model (NFM). This project’s objectives are to reduce malaria incidence through one or more malaria preventive interventions; ensure suspected malaria cases will be tested and treated according to national guidelines; and increase the practice of positive behaviours to prevent and control malaria. World Vision is responsible for a package of community strengthening activities including behaviour change communications and Integrated Community Case Management (iCCM). Expected results include increased care-seeking behaviour, client satisfaction, and demand for services; strengthened monitoring and collection, management, and efficient utilization of service data including use of Data Quality Assessment (DQA) for effective delivery of the iCCM program.

TB programmes
World Vision has implemented 33 TB grants from the Global Fund, with a total value of US$160.6 million. World Vision has been PR for TB grants in Somalia, Thailand, India, Papua New Guinea and Guatemala, and SR in the Philippines, Indonesia, Mongolia.
Myanmar, Somalia, Senegal, Thailand, and Bosnia and Herzegovina. Projects have focused on community systems strengthening using an advocacy and social mobilisation approach to increase case finding, diagnosis and Directly Observed Treatment Short-course (DOTS) enrolment. As PR, World Vision has consistently met or exceeded expected performance-based funding results in TB projects.

**India**

World Vision is PR of the round-nine India project aimed at improving access to quality TB care and control services including increasing diagnosis and treatment for multi-drug resistant TB. The project, through its 6 NGO partners, works through advocacy and social mobilization in 74 traditionally under-served districts and hard-to-reach populations (approximately 222 million people), and has been particularly successful in increasing case detection among women and children under 14 years of age. A total of 15,199 TB cases were confirmed during the project life, including 55 new cases in children during phase two. One innovation was a simple childhood TB detection tool used by community health volunteers to screen and refer children for diagnosis. Another successful innovation of the project has been to train and engage Rural Health Care Practitioners (RHCPs) to scale up case-finding and improve treatment adherence. World Vision has trained a total of 14,070 RHCPs to refer chest symptomatic/ presumptive TB cases and as DOT providers. The project also made meaningful contribution to bring the TB/HIV collaborative interventions to community level. It strengthened key linkages with community groups which not only enhanced notification of TB/HIV co-infected cases and TB cases in HIV high-risk groups but also improved their service-utilization. Of referrals from PLHIV networks and projects, 1466 people were tested and 106 diagnosed with TB and enrolled in DOTS at a cost of about 30 USD per case detected.

**Papua New Guinea**

After four years as a successful SR, World Vision was appointed by the Country Coordinating Mechanism (CCM) as PR in round six where DOTS was expanded to all 22 provinces, case notification rates were increased, and laboratory networks were strengthened. World Vision continues to act as PR under the New Funding Model (NFM) where the focus of the project is to ensure availability and access to quality drugs and laboratory diagnostics for TB, HIV, and Malaria; ensure high quality medicines are accessible and affordable to the population; and to establish and improve the quality of laboratory services with an emphasis on primary health care (PHC). Project implementation will include improving the quality of TB care and prevention; strengthening the PMDT network; strengthening HIV/TB collaborative activities at the national, provincial and peripheral levels; 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, WV is committed to collaboration, partnership and capacity strengthening.

**Somalia**

World Vision has been PR for rounds three, seven and 10 TB grants in Somalia, consistently achieving targets despite the fragile context and insecurity. Aimed at decreasing TB incidence and preventing the development of acquired drug resistance, the project has trained 132 health staff in DOTS and aided 30 laboratories in TB microscopy leading to 6,505 notified cases of TB registered and reported to the national health authority. The project is building local capacity and a supportive environment for health service delivery through strengthening coordination and partnership development at governmental, district and community level.
HIV and AIDS programmes

Since 2002, World Vision has managed HIV and AIDS grants from the Global Fund totalling US$104.7 million. Formerly PR in Guatemala and Armenia, World Vision successfully completed the first and second phases of those grants before turning the projects over to government and other local partners. Currently the portfolio includes four SR grants in Africa, two in Latin America/Caribbean and one in Eastern Europe. World Vision’s projects have shown success in reaching marginalised and hard-to-reach groups, including ethnic minorities, migrants, and orphans and vulnerable children, using community strengthening and integrated socio-economic support interventions.

Bosnia and Herzegovina (BiH)

As SR under a round-nine grant, World Vision is implementing a project with activities focusing on HIV prevention and care and the reduction of stigma among the Roma, the largest minority and most vulnerable population in BiH. An innovative approach to the project is being taken with the involvement of religious leaders from the Orthodox, Catholic, Jewish, and Islamic communities in the implementation of the project. Voluntary counselling and testing services reached 84 per cent of target and condom distribution reached 104 per cent. In addition, World Vision achieved 105 per cent of its target for those reached by behaviour change communication.

Democratic Republic of the Congo (DRC)

As SR in the round-eight grant, World Vision implements a host of community strengthening activities to prevent the spread of HIV 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 achieved strong success in OVC support: 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 PMTCT. In addition, 15,678 people living with AIDS received home based care, 1,101 HIV positive pregnant women received antiretrovirals to reduce the risk of mother-to-child transmission, and more than 5.8 million condoms were distributed.

Haiti

Increasing the number of orphans and people living with HIV & AIDS (PLWHA) as well as their families receiving care and support is the focus of a project in three health centres in Haiti. The project focuses on behaviour change and communication, condom distribution, prevention of mother-to-child transmission, and curative care where PLWHA receive ART treatment. The project supports 332 orphans and vulnerable children (OVC) through support for school fees and youth clubs. Since the project’s conception, 1,000,849 condoms were distributed, 726 adults received HIV care and/or support, and 165 PLWHA received antiretroviral treatment.

These outreach activities are implemented through partnerships with religious organisations representing all the major faith groups that sensitise communities to HIV and TB issues.

Papuans walked together for seven kilometres in Port Moresby, Papua New Guinea, to show their support for stopping TB in their lifetime.
Benefits delivered through World Vision-implemented Global Fund-supported projects

- 68,346 people reached with HIV-prevention messages and services
- 57,072 people helped with AIDS care and support including ART and PMTCT
- 728 community groups formed or strengthened for HIV care and support
- 78,978 people enrolled in Directly Observed Treatment Short-course for TB
- 49,795 people trained in improved TB service delivery
- 41,164 people trained in improved malaria service delivery
- 9,179,384 insecticide-treated bed nets distributed to prevent malaria

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 policy for secure and transparent supply chain management
- Sub-recipient management, including documented procedures for timely processing, disbursement and monitoring of funds to partners and a complete management training package for community-based and grass-root organisations.
- Established risk management policy 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 February 15, 2015, authorises co-signing of Global Fund grants by World Vision national and support offices, with agreement from the CCM. 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. Continued and increasing partnership is imperative to achieve the proposed SDG goals by 2030.

For more information about World Vision’s work with Global Fund or potential partnership opportunities, please contact Ann Claxton, Director, Resource Development, Sustainable Health—World Vision International: ann_claxton@wvi.org.

Raising awareness in the community on health and social issues in Myanmar.
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Countries with both World Vision and Global Fund coverage
Countries where World Vision currently has approved GF grants
Countries where World Vision previously had GF grants
Other countries with Global Fund coverage

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