Case Studies on Global Fund Contributions to Universal Health Coverage

Global Fund Investments in Rwanda

The Global Fund to Fight AIDS, Tuberculosis and Malaria has provided **\$1.1 billion** for health to date (2002–2015)

Funding Flow

Principal Recipients:

- · Ministry of Health (MOH)
- Comité National de la Lutte contre le SIDA (National AIDS Control Commission)

Health Expenditure

Global Fund grants comprise an average of 15% of total health expenditure in Rwanda

Gains in the Fight against AIDS, Tuberculosis, and Malaria (since 2003)

- · Rwanda has seen deaths from HIV/AIDS, tuberculosis, and malaria drop by over 80%
- · Universal access to antiretroviral treatment; voluntary counseling and testing for HIV offered at 99% of health facilities; full package of prevention of mother-to-child transmission services offered at 96% of health facilities

Contributions to UHC

Equity & Affordability

As part of an innovative new approach, Global Fund grants have financed health insurance premiums on a comprehensive package of basic health services for Rwanda's most vulnerable, including the following groups:

- People living with HIV/AIDS
- Orphans
- · The poorest of the poor

Accountability

The flow of Global Fund money in Rwanda helps bolster the overall financial management and accountability of national health programs and systems:

· Rwanda was chosen in 2014 to pilot the Global Fund's resultsbased financing model. So long as disease-specific targets are also met, this gives the government of Rwanda more freedom to use grant funds to build the systemic capacity to increase access to a range of health services

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Sustainability & Resilience

Global Fund grants have helped support and strengthen Rwanda's health infrastructure:

- · Strengthen pharmaceutical procurement and supply chain by providing operational costs for central procurement agency warehouse, overhead, and renovations
- Build up monitoring and evaluation systems that can be used for a range of health programs by funding software, staff training, and salaries
- · Fund renovations-solar panels and medical equipment, etc.for health facilities used for various health initiatives in addition to HIV, malaria, and tuberculosis responses
- · Nurture human resources by providing training and education, including for health workers, hospital managers, and supply chain management staff

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Sub-recipients:

insecticidal nets

Includes all 30 district hospitals, health centers, national reference laboratories, and MOH medical procurement and production divisions

· 90% success rate for smear positive tuberculosis case treatment

Highest point: 23% of total health expenditure (2010) Lowest point: 2% (2003)

· Rwanda achieved universal distribution of long-lasting



