



THE GLOBAL FUND AND FAITH-BASED ORGANIZATIONS

A Growing \$3.5 billion Partnership

The Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund) is a partnership of public, private and civic sectors that works closely with faith-based organizations. The Global Fund is one of the largest multilateral supporters of faith-based organizations. As of March 2024, the Global Fund awarded more than \$3.6 billion in [grants to faith-based organizations](#) worldwide, even accelerating such grants since 2016.

Faith leaders, religious congregations and faith-based civil society organizations are critical partners in global health programming. Thanks to their geographic reach and close ties with communities, faith-based organizations are well positioned to make substantial contributions to the fight against AIDS, tuberculosis (TB) and malaria.

Faith-based groups play a powerful role in reaching those most in need. Examples include the American Jewish World Service, which advocates for health access for marginalized communities and [sponsors](#) civil society groups in almost 20 countries; Christian Connections for International Health, which enables the exchange of best practices among faith groups working in international healthcare; and the Aga Khan Foundation, which coordinates research and public education in addition to supporting [2,000 health facilities](#) in low- and middle-income countries.

Faith-Based Organizations are Critical Partners

Global Fund-supported programming is shaped by [Country Coordinating Mechanisms](#), national committees that submit funding applications to the Global Fund and oversee grants on behalf of their countries. The success of the Country Coordinating Mechanisms depends on the active participation of community organizers and representatives, including faith-based organizations. Given their close community ties, faith groups offer unique insights in programming and grant-related discussions.

“Faith-based organizations were the megaphone of trust in the community [during the COVID-19 pandemic response]”

[Dr. John Nkengasong](#),
U.S. Global AIDS Coordinator

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Faith-based organizations are also highly skilled partners in program implementation and evaluation. In addition to working in disease prevention — such as distributing mosquito nets and educating communities on their use — many also treat patients and develop supportive environments for those living with HIV, TB or malaria. Additionally, faith groups play [critical roles in advocacy](#), which holds governments accountable and mobilizes additional funding for healthcare.

Combating HIV: Staying on treatment and lowering transmission rates in Tanzania

HIV infection rates remain very serious in Tanzania, as [1.7 million people](#) are living with HIV. Tanzania is one of the most resource-constrained lower-middle income countries in the world. Approximately [99,000 HIV-positive women](#) per year in Tanzania are estimated to deliver infants exposed to HIV, and this poses a daunting challenge to the struggle to achieve epidemic control of the disease.

Responding to this challenge, the Global Fund works in partnership with the [Christian Social Services Commission \(CSSC\)](#) to strategically strengthen Tanzania’s HIV response and drive down mortality rates. CSSC was launched by the Tanzania Episcopal Conference (TEC) and the Christian Council of Tanzania (CCT) in order to establish about [900 health facilities](#) focused on HIV in Tanzania.



Health workers at the Makole Health Center in Dodoma, Tanzania. The Global Fund/Vincent Becker

CSSC has made great strides in the fight against HIV in Tanzania. Given [lower rates](#) of adolescent girls and pregnant or breastfeeding women who stay on antiretroviral therapy compared to older individuals, CSSC was able to launch a partnership with Amref Health Africa (AMREF) with Global Fund support. This prevention of mother-to-child transmission (PMTCT) project spans eight regions across Tanzania, encompassing [264 health facilities](#). It aims to achieve a nation of HIV-free children through training mothers and fathers to act as mentors, as well recruiting other influential role models, support groups and council leaders. In an effort to promote PMTCT at the community level, village and council leaders offer support while building the bridge between the community and PMTCT health facilities.

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Combating TB: Faith-Based Groups Increase Health Workforce in Indonesia

Indonesia alone accounts for [10% of all TB cases worldwide](#). In 2020, TB treatment coverage was [below 50%](#), with the country's vast geography impeding expansion efforts. However, support from the Global Fund and faith-based organizations like the Central Board of Aisyiyah ([Aisyiyah](#)), an Islamic and women's organization, contributed to improving Indonesia's TB prevention and treatment.



A patient with TB visits the Embung Fatimah General Hospital in Batam, Riau Islands, Indonesia.

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Aisyiyah led implementation of systematic contact tracing investigations through the tens of thousands of community health workers (cadres) it engaged in [190 high TB burden districts](#). It worked closely with health facilities and provided direct support to patients and their families. It motivated religious resources at the village level to spread TB prevention and treatment information. It also worked with employers and local officials on TB prevention and control. Importantly, Aisyiyah cadres and case managers provided support at the hospital level to MDR-TB patients, which ensured patients stayed on treatment. In 2018, Aisyiyah received a \$32.1 million Global Fund [grant](#) to decrease TB prevalence, ensure 90% treatment success for standard TB treatment and ensure that patients on MDR-TB treatment stayed on course and received follow-up care.

As a Global Fund grant [principal recipient since 2009](#), Aisyiyah is a trusted and valued partner to Indonesia's national TB program. Rooted at the community level, it works to strengthen the capacities of Indonesia's health system in terms of TB diagnosis and treatment as well as removing human rights-related barriers to care. For example, it led a nationwide-campaign to [train more than 5,000 community health workers](#) on TB treatment strategies and to create a patient charter of rights.

Combating Malaria: Faith-Based Groups Increase Access to Testing & Treatment

Malaria incidence in Zambia remains among the [world's highest](#), where [77% of the population](#) lives in areas with a high risk of infection, and only [52% of children](#) under the age of five sleep beneath an insecticide-treated bed net.

For over 20 years, the Global Fund has partnered with [The Churches Health Association of Zambia](#) (CHAZ) to help fight the spread of malaria. CHAZ's strength has been implementing community-based case management of malaria under the guidance of the National Malaria Elimination Centre. A Catholic and Protestant partnership operating in compliance with the ministry of health, CHAZ provides health services through its network of 142 hospitals and health clinics, accounting for over [50% of formal healthcare](#) in rural Zambia.

CHAZ aims to enhance malaria prevention, detection and treatment. The Global Fund has signed \$633,227,906 in grants with CHAZ across HIV, TB and malaria, including supporting health systems strengthening within CHAZ sites and at the national level. A \$76.5 million Global Fund [grant](#), signed in 2021, seeks to grow CHAZ's capacity to meet these aims. One grant objective is to increase the distribution of insecticide-treated bed nets, adding to the [333,200 nets distributed since partnering with the Global Fund](#). The grant also aims to expand access to rapid diagnostic tests and artemisinin-based combination therapy. Complimenting these efforts, the grant increases training and support to community health workers to diagnose, report and treat malaria cases within their communities.

Care and Safety, Excluding No One: Strengthening Health Systems in Malawi

Global Fund programs to advance the HIV, TB and malaria response in Malawi have [bolstered](#) health systems and universal health coverage. [Communicable, maternal, neonatal and nutritional diseases](#) are the top causes of death in Malawi. [Malawi's universal health coverage index](#) is 56 (on a scale of 0 to 100), from the poorest performance to best, reflecting how well a country is delivering care. The government spends about [9% of its annual budget](#) on health care.

Expanding resilient health service access is foundational to prevent, detect and treat HIV, TB and malaria. It also advances equity of healthcare access for marginalized populations and bolsters pandemic preparedness. During the 2021-2023 funding cycle, the Global Fund [invested \\$4.9 billion](#), or about one-third of total investments, in formal and community health systems globally. For instance, working in tandem with faith groups like World Vision Malawi, the [Global Fund](#) is bolstering healthcare workforces, information systems and societal inclusion in health governance. World Vision Malawi delivers [community systems strengthening](#) through a network of community health and outreach workers to help identify HIV, TB and malaria cases; undertakes [Community Led Monitoring](#) of the national HIV, TB and malaria programs; and provides education and linkages with government health facilities to ensure that key populations have access to HIV and TB services.

In 2021, World Vision Malawi received a \$77.78 million Global Fund grant for [inclusive healthcare coverage](#) to develop an evidence-based malaria surveillance system, increase the uptake of [Intermittent Preventive Treatment](#) for malaria and reduce the annual average stock-out rate (when durable medical equipment is not available or out of stock).

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The Future of Faith-Based Partnerships

Faith-based organizations are critical partners in effectiveness and results in the fight against AIDS, TB and malaria. The Global Fund has distributed around [\\$450-500 million per year](#) in grants to faith-based organizations in low and middle-income countries. The Global Fund recognizes the value added by faith groups and will continue to rely on their community-centered insight, reach and social influence in remote places.

In the words of U.S. Global AIDS Coordinator Dr. John Nkengasong, ["faith-based organizations were the megaphone of trust in the community,"](#) most evident during the COVID-19 pandemic response, and instrumental to community ownership of public health responses. In its 2023-2025 funding cycle, buoyed by bold pledges from the U.S., Japan, Canada, Germany, the Europe Commission and other donors, the Global Fund will continue to strategically leverage the power of faith groups to drive toward epidemic control of AIDS, TB and malaria, and build the health systems accessible to all, including the most vulnerable and marginalized.



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