Executive Committee Teleconference, 27 August 2015
Minutes

Attended: Joanne Carter (Vice-Chair) & Delia Clayton
Erika Arthun
Amy Bloom
Cheryl Boon
Austin Obiefuna
Victor Ramathesele
Katherine Floyd (representing Mario Raviglione)
Paula Fujiwara
Thokozile Phiri-Nkhoma

Apologies: Paula Fujiwara
Aaron Oxley
Mario Raviglione
Cheri Vincent

Secretariat: Lucica Ditiu
Shirley Bennett

Minutes of Discussion

1. Global Fund Country Allocation Formula for TB

The Executive Committee discussed the TB burden formula for the Global Fund country allocation for TB. This was a follow-up discussion to the one held on 6 August on the same subject.

The Secretariat provided analysis comparing (a) what countries should have got under the previous allocation formula if the old TB disease burden formula applied; (b) what countries actually received; (c) country allocation using new disease formula Option 2 (1 times TB incidence + 10 times MDR-TB incidence); (d) country allocation using new disease formula Option 3 (1 times TB incidence + 8 times MDR-TB incidence) as well as the difference between Option 2 and Option 3.

The Executive Committee thanked the Secretariat for preparing the analysis. Based on the analysis the Executive Committee supported Option 2 as the recommended new disease burden for TB for the Global Fund country allocation formula.

The Executive Committee discussed the impact of the cap for India (previously set at 10%) on the overall allocation (previously at 10%), and agreed it is not possible to remove the cap altogether.

The Executive Committee noted the costs associated with small grants and asked the Secretariat to discuss with the other diseases whether these should be reviewed.

Outcome
- The draft text about the allocation to be shared with the EC for review before being sent to the Global Fund Secretariat.
- Secretariat to follow up with representatives from malaria as well as HIV/AIDS to ascertain appetite to review small grants.
The Executive Committee noted that most TB/HIV is funded from TB and requested exploration whether this could be funded from HIV.