

Results Report 2022: Annex 1

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The **Global Fund Results Report 2022** includes selected programmatic results such as people on antiretroviral therapy, people with TB treated and mosquito nets distributed delivered by Global Fund-supported programs in 2021. Table 1 below provides a comparison of the aggregated results over 2019-2021. Countries accounting for a large share of portfolio-level increases or drops over 2020-2021 are listed in Table 2. Table 3 provides a qualitative explanation of the drivers of notable changes over 2020-2021 in selected countries.

Note that due to continuous retroactive updates and corrections, some of the 2019 and 2020 results might differ from what was published in the previous reports. To access the most up-to-date country and indicator-specific results, please refer to <https://data.theglobalfund.org/results>.

Table 1: Selected programmatic results over 2019-2021 in countries where the Global Fund invests

	Selected services in countries where the Global Fund invests	2019	2020	2021
HIV	PEOPLE ON ANTIRETROVIRAL THERAPY FOR HIV	20.2M ⁽⁹⁷⁾	21.9M ⁽⁹⁹⁾	23.3M ⁽⁹⁸⁾
	HIV TESTS TAKEN	127M ⁽⁹⁹⁾	102M ⁽⁹⁹⁾	70.8M ⁽¹⁰³⁾
	<ul style="list-style-type: none"> HIV TESTS TAKEN BY PRIORITY AND KEY POPULATIONS* 	6.4M ⁽⁹⁷⁾	5.8M ⁽⁹⁷⁾	12.6M ⁽¹⁰¹⁾
	MOTHERS RECEIVED MEDICINE TO PREVENT TRANSMITTING HIV TO THEIR BABIES	719K ⁽⁵¹⁾	686K ⁽⁵⁰⁾	670K ⁽⁵⁰⁾
	MEDICAL MALE CIRCUMCISIONS FOR HIV PREVENTION	1.3M ⁽⁸⁾	1.2M ⁽⁸⁾	1.1M ⁽⁸⁾
	PEOPLE REACHED WITH HIV PREVENTION PROGRAMS & SERVICES	9.7M ⁽⁹⁹⁾	8.7M ⁽⁹⁹⁾	12.5M ⁽¹⁰²⁾
<ul style="list-style-type: none"> MEMBERS OF KEY POPULATIONS REACHED WITH HIV PREVENTION PROGRAMS YOUNG PEOPLE REACHED WITH HIV PREVENTION PROGRAMS 	4.8M ⁽⁹⁷⁾ 3.5M ⁽²⁰⁾	4.6M ⁽⁹⁷⁾ 3.1M ⁽²⁰⁾	5.8M ⁽¹⁰⁰⁾ 6.1M ⁽²¹⁾	
TB	PEOPLE TREATED FOR TB	5.8M ⁽⁹¹⁾	4.7M ⁽⁹¹⁾	5.3M ⁽⁹²⁾
	HIV-POSITIVE TB PATIENTS ON ANTIRETROVIRAL THERAPY DURING TB TREATMENT	321K ⁽⁷⁴⁾	273K ⁽⁷⁵⁾	283K ⁽⁷⁵⁾
	PEOPLE TREATED FOR DRUG-RESISTANT TB	125K ⁽⁹³⁾	100K ⁽⁹¹⁾	110K ⁽⁹⁰⁾
	PEOPLE TREATED FOR EXTENSIVELY DRUG-RESISTANT TB	6071 ⁽¹⁴⁾	3821 ⁽¹²⁾	1634 ⁽⁷⁾
	PEOPLE IN CONTACT WITH TB PATIENTS RECEIVED PREVENTIVE THERAPY	171K ⁽²⁹⁾	194K ⁽²⁹⁾	395K ⁽⁴⁷⁾
Malaria	MOSQUITO NETS DISTRIBUTED	162M ⁽⁵⁹⁾	202M ⁽⁶¹⁾	133M ⁽⁶¹⁾
	CASES OF MALARIA TREATED	138M ⁽⁶⁵⁾	137M ⁽⁶⁵⁾	148M ⁽⁶⁶⁾
	PREGNANT WOMEN RECEIVED PREVENTIVE TREATMENT FOR MALARIA	11.4M ⁽²⁵⁾	11.5M ⁽²⁵⁾	12.5M ⁽²⁹⁾
	SUSPECTED CASES TESTED FOR MALARIA	259M ⁽⁶⁵⁾	261M ⁽⁶⁵⁾	280M ⁽⁶⁸⁾
	STRUCTURES COVERED BY INDOOR RESIDUAL SPRAYING	9.1M ⁽²²⁾	10.1M ⁽²¹⁾	10.1M ⁽²²⁾

M indicates million; K indicates thousands; brackets show the number of countries/multicountry grants contributing to the results.

** Infants, adolescent girls and young women, adolescent boys and young men, gay men and other men who have sex with men, sex workers, transgender people, people who inject drugs, people in prisons and other vulnerable populations.*

Table 2: Programmatic results with a notable change* ($\pm 10\%$) over 2020-2021 or a directional change \leftrightarrow comparing trends over 2019-2020 vs. 2020-2021

	Services	2019->2020 # [%]	2020->2021 # [%]	% of countries where A: 2020 results > 2019 results and B: 2021 results > 2020 results	Top-5 countries accounting for the largest share of portfolio increase over 2020-2021	Top-5 countries accounting for the largest share of portfolio drop over 2020-2021
HIV	HIV TESTS TAKEN*	-24M [-19%]	-32M [-31%]	A. 45% B. 62%	+5.6M • Mozambique (34%) • Mali (16%) • Burkina Faso (15%) • Haiti (6.5%) • Sierra Leone (3.1%)	-37M • India (49%) • Uganda (13%) • DR Congo (9.2%) • UR Tanzania (7.6%) • Nigeria (6.4%)
	HIV TESTS RECEIVED BY PRIORITY AND KEY POPULATIONS* \leftrightarrow	-640K [-10%]	+6.9M [+119%]	A. 47% B. 73%	+7.4M • Nigeria (80%) • Mozambique (2.3%) • Zanzibar (1.9%) • DR Congo (1.7%) • Philippines (1.2%)	-523K • Madagascar (16%) • Viet Nam (15%) • Cuba (12%) • Malawi (11%) • Chad (7.1%)
	PEOPLE REACHED WITH HIV PREVENTION PROGRAMS & SERVICES* \leftrightarrow	-984K [-10%]	+3.8M [+44%]	A. 49% B. 65%	+5.5M • Mozambique (41%) • Nigeria (28%) • Togo (8.4%) • IR Iran (2.6%) • Côte d'Ivoire (2.6%)	-1.7M • UR Tanzania (15%) • Indonesia (12%) • Namibia (12%) • Ethiopia (11%) • South Sudan (8.3%)
TB	PEOPLE TREATED FOR TB * \leftrightarrow	-1.1M [-19%]	+586K [+12%]	A. 21% B. 65%	+722K • India (38%) • Bangladesh (11%) • Indonesia (10%) • Nigeria (9.6%) • Pakistan (9.4%)	-136K • Myanmar (26%) • Viet Nam (16%) • Thailand (14%) • South Africa (14%) • Lao PDR (5.9%)
	PEOPLE TREATED FOR DRUG-RESISTANT TB \leftrightarrow	-24.6K [-20%]	+9.4K [+9.3%]	A. 37% B. 53%	+12.9K • India (50%) • Angola (9.5%) • Philippines (7.9%) • Nigeria (5.4%) • Pakistan (4.4%)	-3.5K • Myanmar (30%) • Viet Nam (21%) • Afghanistan (9.8%) • Thailand (4.6%) • Kenya (4.3%)

	Services	2019->2020 # [%]	2020->2021 # [%]	% of countries where A: 2020 results > 2019 results and B: 2021 results > 2020 results	Top-5 countries accounting for the largest share of portfolio increase over 2020-2021	Top-5 countries accounting for the largest share of portfolio drop over 2020-2021
	PEOPLE TREATED FOR EXTENSIVELY DRUG-RESISTANT TB*	-2.3K [-37%]	-2.2K [-57%]	A. 17% B. 14%	196 • Turkmenistan (100%)	2.4K • Ukraine (44%) • India (33%) • Uzbekistan (8.1%) • Viet Nam (3.9%) • Azerbaijan (2.9%)
	HIV-POSITIVE TB PATIENTS ON ANTIRETROVIRAL THERAPY DURING TB TREATMENT↔	-49K [-15%]	+11K [+4.0%]	A. 25% B. 44%	+37K • India (65%) • Uganda (10%) • Angola (8.4%) • DR Congo (3.1%) • Indonesia (2.3%)	-26K • South Africa (26%) • Myanmar (15%) • Sierra Leone (12%) • UR Tanzania (10%) • Mozambique (7.8%)
	PEOPLE EXPOSED TO TB RECEIVED PREVENTIVE THERAPY*	+24K [+14%]	+201K [+103%]	A. 55% B. 73%	+210K • Bangladesh (18%) • Ukraine (15%) • Uganda (11%) • Ethiopia (8.5%) • Mozambique (7.5%)	-8.8K • Myanmar (21%) • Namibia (17%) • Sudan (16%) • Burundi (15%) • Kenya (11%)
Malaria	MOSQUITO NETS DISTRIBUTED* ↔	+40M [+25%]	-69M [-34%]	A. 63% B. 39%	+72M • Côte d'Ivoire (25%) • India (20%) • Madagascar (17%) • Ghana (17%) • Malawi (8.6%)	-140M • DR Congo (18%) • Uganda (15%) • Mozambique (12%) • Mali (5.3%) • Benin (5.2%)
	CASES OF MALARIA TREATED	-936K [-0.7%]	11M [+8.0%]	A. 44% B. 56%	+23M • DR Congo (30%) • Côte d'Ivoire (11%) • Nigeria (9.3%) • Benin (9.0%) • Burundi (6.8%)	-12M • UR Tanzania (34%) • Zambia (19%) • Papua New Guinea (11%) • Mozambique (9.7%) • Rwanda (8.9%)
	STRUCTURES COVERED BY INDOOR RESIDUAL SPRAYING↔	+996K [+11%]	-24K [-0.2%]	A. 58% B. 29%	+2.72M • Zimbabwe (49%) • Uganda (36%) • Burundi (7.3%) • Malawi (4.8%) • Cape Verde (1.7%)	-2.74M • Mozambique (32%) • Ethiopia (23%) • Rwanda (23%) • Namibia (9.6%) • DPR Korea (3.9%)

Country mass net distribution campaigns occur every three years and are not evenly distributed across the three-year implementation cycle, so year-on-year comparison has limited value in measuring progress and success of the national malaria programs.

Table 3: Drivers of the notable changes over 2020-2021 in selected countries

Services	Notes
HIV TESTS TAKEN	<p>Kenya: HIV tests taken among the general population reduced due to multiple factors, including changes in the HIV testing strategy since 2018, which is now more focused on targeted testing; the impact of the COVID-19 pandemic, which heavily impacted routine health facility HIV testing programs due to reduced patient flows and disrupted the implementation of most community-led HIV interventions; and persistent stockouts of HIV test kits in some counties due to supply chain issues. To mitigate the impact, the Global Fund supported the provision of personal protective equipment (PPE) for health care workers and initiatives to create demand for COVID-19 vaccinations. This has made the environment more conducive for health care workers and beneficiaries of care. Patient flows to health facilities have started picking up. More investments were also made to adapt most meetings and support supervision activities into virtual ones, or in-person ones with COVID-19 protective measures in place.</p> <p>Mozambique: HIV tests taken among the general population reduced due to adopting a need- and yield-based HIV testing approach.</p> <p>Nigeria: Aggregate results for 2020 and 2021 are not fully comparable since reporting coverage has changed from subnational in 2020 to national in 2021 for prevention programs serving men who have sex with men, sex workers and people who use drugs. Reporting on young people aged 10-24 years reached with HIV prevention programs started on 2021.</p> <p>UR Tanzania: HIV tests taken among the general population reduced due to adopting a need and yield-based HIV testing approach.</p> <p>Uganda: In the new funding cycle, the number of HIV tests taken among the general population was replaced by the percentage of people newly diagnosed with HIV who are initiated on antiretroviral therapy (ART).</p>

Services	Notes
<p>MEDICAL MALE CIRCUMCISIONS FOR HIV PREVENTION</p>	<p>Kenya: The reduction in voluntary medical male circumcision (VMMC) in 2021 was mainly due to changes in implementation policy on target age, as well as restrictions on non-emergency surgery brought about by COVID-19.</p> <p>Malawi: The reduction in VMMC in 2021 was mainly due to competing priorities at health facilities providing VMMC services due to COVID-19 response needs, delayed arrival of VMMC kits related to global supply chain issues and a much lower number of people seeking VMMC services due to fear of coming to health facilities during the time of the COVID-19 pandemic. Mitigation efforts included providing more medical assistants at the health facilities where VMMC service was provided and hiring a local organization to offer circumcisions in these VMMC-supported districts to improve the availability of circumcision services in the districts.</p> <p>Namibia: The reduction in VMMC in 2021 was mainly due to a change in the implementation policy on target groups and a reduction in the number of regions covered (14 regions in 2020 vs. 9 in 2021).</p> <p>Zambia: The significant reduction in VMMC in 2021 was mainly due to inadequate provision of VMMC supplies by some non-Global Fund implementation partners.</p> <p>Zimbabwe: Funding for this service was discontinued from 2021.</p>

Services	Notes
PEOPLE REACHED WITH HIV PREVENTION PROGRAMS & SERVICES	<p>DR Congo: The increase in the number of sex workers reached with HIV prevention programs in 2021 was mainly due to expanding the network of “Centres Conviviaux” to serve key populations using resources provided by grants and C19RM.</p> <p>Côte d'Ivoire: The increase in the number of young people aged 10-24 years reached with HIV prevention programs was due to an increase in the program implementation districts (from 28 to 30), with an annual increase in the number of adolescents and young persons targeted. The observed performance compared to 2020 therefore represents the combined effect of post-COVID-19 implementation recovery, an increase in implementation area, and overall increase in targets in the new funding cycle. The C19RM mitigation measures implemented in 2021 have allowed for more regular HIV testing supplies, resumption of awareness-raising activities targeted towards adolescents in youth centers, as well as an increase in the number and capacity of service providers to reach more young people. C19RM funding also allowed improvements to youth centers, rendering the services more youth-friendly, and allowed for outreach activities to reach more young people living further from these designated youth centers.</p> <p>Ethiopia: An indicator measuring the results of focused interventions reaching young people aged 10-24 years with HIV prevention programs was included in 2021.</p> <p>India: An indicator measuring the results of interventions reaching people who use drugs with HIV prevention programs was included in 2021.</p> <p>Iran: An indicator measuring results of interventions reaching people in prisons with HIV prevention programs was included in 2021.</p> <p>Mozambique: The increase in the number of young people aged 10-24 years reached with HIV prevention programs between 2020 and 2021 was mainly due to the expansion of the program from the previous 50 intervention districts to 78 districts for the period 2021-2023.</p> <p>Philippines: The increase in the number of men who have sex with men reached with HIV prevention programs in 2021 was partly due to the lifting of many COVID-19-related restrictions.</p> <p>South Africa: The increase in the number of young people aged 10-24 years reached with HIV prevention programs was due to reprogramming and increasing targets due to savings as well as lifting COVID-19-related restrictions.</p> <p>Togo: The increase in the number of young people aged 10-24 years reached with HIV prevention programs was partly due to use of a web-based platform to reach young people, leading more young people to attend education sessions on reproductive health and HIV.</p>

Services	Notes
PEOPLE TREATED FOR TB	<p>India: The increase in 2021 results was due to lifting COVID-19-related restrictions as well as a number of new initiatives to find “missing” people with TB.</p> <p>Bangladesh: The increase in 2021 results was due to COVID-19-related mitigation measures.</p> <p>Indonesia: The increase in 2021 results was due to a shorter period of service disruption due to COVID-19, the pilot of the Public-Private Mix project, the beginning of the return to contact investigation, implementation of TB notification services for high-risk populations such as people in prisons and diabetes mellitus patients.</p> <p>Nigeria: The significant increase in TB case notification in 2021 was mainly due to intensified case finding in health facilities through systematic and routine screening of patients in outpatient settings, strategic engagement of the private sector, and integration of TB screening into the COVID-19 response to find missing people with TB.</p> <p>Pakistan: The increase in case notification in 2021 reflects a recovery from the COVID-19 impact due to relaxation of some of the restriction measures, leading to improved uptake of services, and scale-up of active case finding and Public-Private Mix interventions, which involve all health care providers (public and private as well as formal and informal) in the provision of TB care, in line with International Standards for TB Care for patients who have, or are suspected of having, TB.</p>
PEOPLE TREATED FOR EXTENSIVELY DRUG-RESISTANT TB	<p>India: XDR patients continued to be treated; however, the results are not captured as part of reporting to the Global Fund.</p> <p>Azerbaijan: XDR patients continued to be treated; however, the results are not captured as part of reporting to the Global Fund.</p> <p>Kyrgyzstan: XDR patients continued to be treated; however, the results are not captured as part of reporting to the Global Fund.</p> <p>Ukraine: The treatment of XDR patients is taken over by the government in the new funding cycle.</p> <p>Uzbekistan: XDR patients continued to be treated; however, the results are not captured as part of reporting to the Global Fund.</p> <p>Viet Nam: The decrease in 2021 was driven by low notification of multidrug-resistant TB (MDR-TB), as health services placed a priority on controlling the spread of COVID-19. People were also less likely to pay visits to hospitals. Due to the COVID-19 impact, many TB hospitals were totally or partly transformed into COVID-19 treatment hospitals, and health staff were reallocated for COVID-19 testing and treatment. The program has intensified implementation of the case-finding strategy to increase detection of both TB and rifampicin-resistant TB (RR-TB) cases. Several TB hospitals returned to TB management after having been repurposed for COVID-19 diagnostics and therapeutics.</p>

Services	Notes
PEOPLE EXPOSED TO TB RECEIVED PREVENTIVE THERAPY	<p>Mozambique: The target population changed from children under 5 years old to children 0-14 years who were contacts of people diagnosed with TB.</p> <p>Uganda: This indicator was introduced in 2021; therefore, there are no comparable results in 2020.</p> <p>Ukraine: This indicator was introduced in 2021; therefore, there are no comparable results in 2020.</p>

Services	Notes
MOSQUITO NETS DISTRIBUTED	<p>Benin: No mass campaign was planned for 2021, as one was conducted in 2020 accordingly to plan. The next mass campaign is planned for 2023.</p> <p>Chad: The difference in mosquito nets distributed between 2020 and 2021 is explained by the fact that in 2020 a mass campaign was organized and covered all eligible provinces of the country (19/23), with 6,294,817 mosquito nets distributed during the mass campaign. The results reported in 2021 (731,254) concern only the routine distribution in antenatal clinics and the immunization program. In 2020, 508,600 mosquito nets were distributed through routine distribution. The 2021 results for routine distribution represent a 44% increase compared to 2020, when the COVID-19 pandemic negatively impacted overall health service utilization.</p> <p>DR Congo: In 2021, COVID-19 significantly jeopardized the availability of long-lasting insecticidal nets (LLINs), meaning that about 22 million LLINs were not distributed and activities were postponed to the first semester of 2022. C19RM has been used to finance the gap due with adaption measures, mainly by changing the distribution strategy by switching from a fixed distribution to door-to-door distribution, which brings an additional need of funds.</p> <p>Mali: During the grant implementation period 2019-2021, all 10 regions except the districts of Bamako (due to low parasite prevalence rate of 1% according to the Mali DHS VI) were covered with rolling mass LLIN distribution campaigns in 2019 and the reporting period January-June 2020. There were no targets set for 2021. The next national mass LLIN distribution campaign is planned for 2023.</p> <p>Mozambique: The numbers of LLINs captured in 2020 are inclusive of nets that were distributed through the mass LLIN campaign and those distributed through routine continuous distribution to at-risk target populations (ANC mothers and children under 5) while the numbers captured in 2021 are only accounting for LLINs distributed through continuous routine distribution. Mass LLIN campaigns are done once every 3 years while continuous routine LLIN distributions to at-risk populations are done every year.</p> <p>Togo: The 2020 result includes the number of nets distributed through the mass campaign (5.8 million). The 2021 result is related only to the routine distribution. The next campaign will take place in 2023.</p> <p>Uganda: In 2020, in addition to the regular continuous distribution of nets to at-risk populations, there was a mass net distribution campaign, where over 21 million nets were distributed. Mass distribution of nets is not done annually, but after 2-3 years. In 2021, therefore, only continuous distribution of nets was conducted. This is the reason for the variation in the number of nets distributed between the two years.</p>