Briefing: Global Fund for HIV, TB and Malaria strategy consultation

Introduction

We are calling on the largest global health fund to integrate psychosocial support into all of their HIV and TB programmes. In order to reach the SDG targets, national leaders and The Global Fund should allocate funding and resources to strengthen the integration of mental health into the global response to HIV and TB. Without addressing mental health, there will be no end to HIV or to TB.

For those of you who are less familiar with the work of the Global Fund, and the opportunity to influence the fund to increase spending on mental health and psychosocial services, please begin by reading this policy brief, which outlines the links between HIV and TB and mental health, as well as the opportunities to address this co-morbidity.

The evidence base suggests that it will be a significant challenge for the SDG targets for HIV and TB to be met unless global, national and sub-national approaches are supported by adequate attention and resources for mental health.

The Global Fund have just launched a public consultation for their 2023 strategy, as we reach past the halfway point of the 2017-2022. This is our opportunity, as part of the global mental health community to advocate for better inclusion of mental health in the next phase of the Global Fund strategy. The first round of input received by 1 September 2020 will be reviewed by the Global Fund Board’s Strategy Committee in October 2020. You can find more about the strategy consultation website at https://www.theglobalfund.org/strategy-consultation/.

Opportunities

The Global Fund encourages all stakeholders to contribute to this open consultation by identifying the most pressing challenges and opportunities in the fight against the 3 diseases, in building resilient and sustainable systems for health (RSSH), promoting and protecting human rights and gender, mobilizing resources, as well as how these aims are affected by the COVID-19 pandemic and broader changes in the health and development landscape.

This policy brief lays out that in fighting HIV and TB psychosocial support is a pressing challenge and opportunity, and promoting and protecting the right to mental health services will enable the Global Fund to reach its aims of eradicating these two diseases; especially in the light of the Covid-19 epidemic.

What is the Consultation?
The consultation consists of 18 questions, presented as an online survey. Some of these questions are simple multiple choice answers, but most give you the opportunity to write a long answer.

The consultation is broken down into six sections:
- Background Information (4 questions)
- Overall (2 questions)
- Strengthening Program Implementation (5 questions)
- Supporting Stakeholders and Partnerships (4 questions)
- Delivering Results and Innovation (2 questions)
- Best Ideas for Change (1 questions)

It should not take more than 30 minutes to complete the form, and we are very happy for you to draw from the policy brief, key recommendations and our response given in this document.

In the annex below we have attached our full consultation response, which you can use to inspire your response.

**Key recommendations**

1. **Overall ask**: The Global Fund should increase resources and capacity for providing psychosocial services at every stage of the care continuum.
2. **Expert Task Force**: The Global Fund should establish a pragmatic taskforce of expert agencies, with the inclusion of academia, civil society, and people with lived experience of ill mental health and HIV and/or TB to work on the impactful integration of psychosocial support in HIV and TB programming.
3. **Holistic Approach**: The Global Fund should not approach mental health as a sub-sector of the health system, but rather install a holistic approach through fully integrating psychosocial services throughout their approach.
4. **Rights and Key Populations**: The Global Fund should help to promote and protect the right to good mental health in the key populations that are vulnerable to ill mental health, and HIV and TB. In focussing psychosocial support efforts on these vulnerable populations as part of the holistic HIV and TB planning, the Global Fund will also be fighting inequity.
Annex 1 - UnitedGMH’s consultation response

Question 5 - What do you see as the biggest barriers to ending HIV, TB, malaria and achieving SDG3 in the coming 10 years?

The most significant barrier to ending HIV and TB is the lack of psychosocial support for people at risk of, or living with HIV and/or TB. The relationship between HIV/TB and mental illness is bi-directional; poor mental health is a risk factor for HIV and TB exposure which complicates the disease course and treatment. Furthermore, living with HIV and/or TB is a significant risk factor for a decline in the individual’s mental health, and developing psychiatric illness. This is compounded by the psychological distress associated with stigma and discrimination which may also trigger or aggravate the symptoms of mental health conditions (e.g. depression) in affected individuals.

Individuals with unsupported mental health conditions, such as depression, anxiety, and substance use disorders are less likely to seek testing for HIV and/or TB, and follow advice given in response to their test result. Mental health conditions adversely impact medication adherence for HIV, TB, and TB/HIV coinfection As a result, they are significant risk factors for developing drug-resistance, loss to follow up and death.

Key vulnerable population groups for ill mental health, HIV and TB overlap considerably, not only reinforcing the bi-directional nature of ill mental health, HIV and TB but also providing considerable return on investment of mental health services and significant impact and efficiency of interventions.

Question 6 - Do you think that the 4 Strategic Objectives of the Global Fund’s current Strategy remain broadly relevant, but they need to be adapted to the current context and there are key areas where increased focus is needed to accelerate progress?

Yes.

Question 7 - What can the Global Fund do to better support national, regional and community programs to fight HIV, TB & malaria?

The Global Fund should increase resources and capacity for providing psychosocial services at every stage of the care continuum. It is critical, that as with an entire health system, mental health promotion, prevention and treatment services are fully integrated into the approach of the Global Fund to end HIV and TB. There is significant evidence that not only will the aims of the Global Fund not be achieved but they could be met sooner than planned for if the Global Fund does not see mental health as a sub-sector or ‘bolt-on’ but is genuinely placed at the core of how the Global Fund approach such as human rights.
Specific opportunities for mental health integration in HIV:
- **HIV prevention**: Integrate PrEP with mental health screening, prevention and promotion, as well as substance use referrals.
- **HIV testing**: Post-test counselling that includes mental health screening and referral for relevant services; Screening for depression, alcohol use and risk of suicide
- **ART initiation**: Routine screening for mental health conditions and psychosocial, psychological and pharmacological interventions as needed; Peer support groups and family-based interventions, particularly for adolescents
- **ART adherence and viral suppression**: Regular screening for mental health conditions at all follow up visits. Psychosocial and brief psychological intervention to support adherence; Regular screening for mental health conditions among individuals who have not achieved viral suppression; Suspicion and detection of neurological complications eg HIV-associated neurocognitive disorders (HAND); Provide psychosocial interventions to improve adherence and viral suppression (e.g., peer counsellors, phone messages, reminders); Educate people about mental health conditions, living with HIV, and substance use conditions; reduce stress and strengthen psychosocial stressors; and promote functioning in daily activities; Provide psychological interventions for depression, anxiety, and alcohol use; Pharmacological interventions for mental health conditions as needed.

Opportunities for mental health integration in TB
- Integrate mental health care in primary health care facilities providing care for TB
- Perform routine screening for mental health conditions at each follow-up visit for TB treatment and psychosocial, psychological and pharmacological interventions as needed
- Implement community awareness activities at facilities where mental health would be integrated, to inform communities about availability of service and reduce stigma.
- Establish a referral system with other levels of health care

**Question 8 - As one of many financers of health systems, what role is the Global Fund uniquely positioned to play in supporting countries to build resilient and sustainable systems for health, including to improve outcomes in the three diseases and contribute to universal health coverage (UHC)?**

The Global Fund has the resources, technical knowhow and foresight to fundamentally change health systems, particularly in low-income settings. The Global Fund can become a trailblazer, yet again, by installing a holistic approach to the ending of the HIV and TB crises through fully integrating psychosocial services throughout their approach.

The Global Fund can demonstrate that by not approaching mental health as a sub-sector of health systems that is focussed on institutions, but rather by placing mental health at the
heart of HIV and TB services, such as rights, then the impact of physical health outcomes can be dramatic.

This approach of placing mental health at the heart of the approach, primarily through primary and community level care, the Global Fund can lay the foundations of universal mental health coverage in many countries, particularly where UHC celebrations will be curtailed due to the system being incomplete, without adequate mental health provision; ‘there is no health without mental health’ - Dr Tedros.

**Question 9 - What can the Global Fund do to better promote and protect equity, human rights and gender equality through national, regional and community program**

With regards to rights, the Global Fund can do more to promote and protect the right to the highest attainable level of mental health. Mental health is a global public good, and a fundamental human right for all. Mental health policies, laws and interventions for treatment, prevention and promotion should be compliant with international and regional human rights instruments and frameworks. These include the Convention on the Rights of Persons with Disabilities (CRPD), which promotes, protects and ensures the rights and fundamental freedoms of all people with disabilities.

In particular, the Global Fund can help to promote and protect the right to good mental health in overlapping key populations who are vulnerable to ill mental health, and HIV and TB. In focussing psychosocial support efforts on these vulnerable populations as part of the holistic HIV and TB planning, the Global Fund will also be fighting inequity.

**Question 10 - Based on what we know so far from the COVID-19 response, what role is the Global Fund best positioned to play in improving global health security and pandemic responses, including to protect progress in the fight against the three diseases?**

The potential impact that the Global Fund can play in global health security through catalysing investment in mental health services is vast. Due to the close link between mental and physical health, optimal suppression of pandemics such as COVID-19 require investment in mental health services and support alongside investment in physical health measures. Such investment will help slow the spread of transmission through supporting persons with mental ill health who may be otherwise more prone to spreading the virus (e.g. through pursuing more risky behaviours).

In the case of COVID-19 mental health investment will also reduce the risk of a ‘second wave’ of COVID-19 through addressing the needs of vulnerable groups, who may otherwise become ‘reservoirs’ for infection build-up (e.g. those in institutions including mental health facilities and prisons). For the longer-term, there is evidence to suggest that persons with
mental ill health are less likely to adhere to immunisation schedules for themselves and for those they care for. Investment in COVID-19 vaccination adherence should include mental health support, once a safe and efficacious vaccine is developed.

Therefore, the opportunity to invest in mental health is clear: to provide emergency care for populations impacted by global health crises; to “build back better” and improve care delivery following global health crises, leveraging the rapid pace of innovation during the pandemic; to support pandemic control and suppression; and, finally, to improve health system and societal resilience against any future pandemics.

The Global Fund can use its relationships with global institutions including the World Bank (including the GFF), WHO and other UN agencies responding to COVID-19, along with bilateral donors, and most crucially with national governments to help action this agenda by encouraging them to integrate mental health in their health crisis responses and recovery plans and in longer term Universal Health Care efforts. Echoing the call from the UN Secretary General, the need for urgent action needs to be heeded by international and national stakeholders.

**Question 11 - What can the Global Fund do to strengthen the sustainability of programs, or better support countries transition from Global Fund financing?**

The Global Fund can play a leading and catalytic role in establishing sustainable mental health systems that are fully integrated into primary and community level care by demonstrating the importance to physical health outcomes and the significant return on investment of psychosocial services.

**Question 12 - What can the Global Fund do to better support you in your work to fight the 3 diseases?**

The Global Fund is uniquely positioned to not only fight three of the world’s great diseases, but to fundamentally shape how we protect and care for vulnerable people for the future. The size and reach of the Fund provides great, coordinated global and local influence in a fractured global health period. The Global Fund can better support us in fighting these diseases by showing great leadership and innovation in fully integrating psychosocial support into its approach in every setting. This will not only have a significant direct impact but will light the way for other powerful global actors and national agencies to take the same approach and so catalyse a great and decisive change in how we fight and therefore end this disease.

**Question 13 - Partnership with communities affected by the 3 diseases is a core principle of the Global Fund. What aspects of the Global Fund’s model could be strengthened to improve partnership with communities and strengthen impact?**
The Global Fund can actively seek and engage with local mental health civil society groups and service delivery organisations who understand how to address the subject of ill mental health within communities, and within vulnerable population groups. These organisations will be able to provide much needed expertise on how to tackle the challenges on ill mental health with relations to HIV and TB within the local population which will have a significant impact on local HIV and TB outcomes.

**Question 14 - How could the Global Fund work more effectively with development, technical and other partners to support countries fight the 3 diseases and achieve SDG3? How would this strengthen impact?**

Technical agencies such as the WHO and UNAIDS have world leading expertise and experience in the bidirectional relationship of mental health and HIV and TB, and the approaches that can be taken to significantly improve HIV and TB outcomes through psychosocial services. The Global Fund should establish a pragmatic taskforce of expert agencies, with the inclusion of academia, civil society, and people with lived experience of ill mental health and HIV and/or TB to work on the impactful integration of psychosocial support in HIV and TB programming.

**Question 15 - How do you think the Global Fund could better use its leverage at global level, to help shape the health, development, market shaping or financing agendas, and improve impact against the 3 diseases and SDG3?**

As the largest global health fund, and with financial and political support from a wide range of countries, donors, private sector organisations and multilateral organisations, the Global Fund is uniquely placed to influence the wider global health agenda beyond HIV, TB and malaria. This includes mental health, where the Global Fund has the opportunity to be a global trailblazer, by fully integrating psychosocial services into HIV and TB approaches and therefore demonstrating that quality psychosocial services create a more sustainable and resilient response to physical diseases. In this way the Global Fund can use its considerable influence to shape the global discourse in a critical area of global health.

**Question 16 - What can the Global Fund do to promote innovative, impactful programming, whilst balancing the need to be able to measure and report results and mitigate financial and programmatic risk?**

No answer given.

**Question 17 - What can the Global Fund do to facilitate the uptake of new technologies and innovations, and address market bottlenecks?**

Mental health is a sector with some of the largest growth of technology and innovation. The Global Fund can be a global leader in supporting the further development and access to new
mental health technology that will increase access to psychosocial support as part of holistic and effective HIV and TB programming.

**Question 18 - If there was one thing you would ask the Global Fund to do differently to have a greater impact towards achieving the SDG3 targets, what would it be and why?**

Fully integrate mental health through psychosocial support throughout the Global Fund’s approach to HIV and TB programming, showing leadership at national and global levels in the realisation of the right to the highest attainable level of mental health, and therefore accelerate the reaching of HIV and TB targets.