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Summary

Evaluation of France's contribution to Unitaid (2006-2022)



This document is a summary of a final evaluation report drawn up at the request of the Ministry for Europe and Foreign Affairs (MEAE). The detailed final report is freely accessible on the Ministry's website. The content of this document represents the authors' views alone.

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The multidisciplinary reference group brought together representatives of ministries (Ministry for Europe and Foreign Affairs, Ministry of the Economy, Finance and Industrial and Digital Sovereignty, Ministry of Health and Prevention), the Agence Française de Développement (AFD), Unitaïd, and members of the French National Assembly and Senate. It met three times at the end of each phase of the evaluation to enrich and comment on the analysis, and held a workshop for preparation of the recommendations.

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Chapter 1

Scope of the evaluation

Founded in 2006 by five countries (France, Brazil, Chile, Norway and the United Kingdom), Unitaid is an atypical global organization in the global health landscape. **Its creation followed reflection on innovative financing for development** in response to the inadequacy of traditional official development assistance (ODA) instruments.

Unitaid's core mission is focused on **fighting the three major pandemics (HIV/AIDS, tuberculosis and malaria) by expanding "the reach of the best health products for those who need them most.** [It designs and invests] in innovative approaches to make the best

health products available and affordable in low- and middle-income countries [and encourages] collective efforts with partners, countries, and communities, unlocking access to the tools, services and care that can deliver the best results and improve health."¹ Unitaid also extended its scope from 2015, to include maternal and child health, more recently, the fight against COVID-19, and then more broadly to global health emergencies.

Since its inception, Unitaid has received nearly US\$4 billion from its contributors (21 in total).² Some 95.5% has been made up of contributions to the ordinary model³ and



↑ Launch of Unitaid, New York, 2006. From left to right: Alejandro Foxley Rioseco, Minister for Foreign Affairs of Chile; Bill Clinton, Former United States President; Jacques Chirac, President of France; Luiz Inácio Lula da Silva, President of Brazil; Secretary-General Kofi Annan; and Jens Stoltenberg, Prime Minister of Norway, at the launch of UNITAID, an international drug purchasing facility that will provide medicine and treatment against HIV/AIDS, malaria and tuberculosis. © UN Photo/ Paulo Filgueiras

¹ Source: [Unitaid Strategy 2023-2027](#)

² US \$3.92 billion over the period 2006-2022, according to the Unitaid "donors commitments" monitoring document for 2006-2022.

³ This model aims to fulfil Unitaid's priorities in line with its mandate, without distinction.

4.5 % of the specific contributions associated with the ACT Accelerator scheme⁴ launched in April 2020 to accelerate access to anti-COVID-19 tools.

France has played a structural role in the creation and development of Unitaid since 2006.

Its involvement is reflected in the fact that it is the leading contributor, having granted total funding of more than US \$2 billion between 2006 and 2022, which represents 56% all funding received by Unitaid since its creation.

In this context, the Ministry for Europe and Foreign Affairs (MEAE) has launched **the first strategic evaluation of the French contribution to Unitaid since its creation**, with three main objectives:

- **Taking stock**, in both quantitative and qualitative terms, of the evolution of Unitaid and its projects on the one hand, and of France's political, strategic and operational priorities for the initiative on the other;
- **Assessing how Unitaid addresses France's priorities**, its ability to pass them on, and the impact of France's contribution to Unitaid for French operators and those of developing countries;
- **Fuelling reflection on France's position** with regard to Unitaid and to help refine the positions it defends there.

The analysis considered the whole of the 2006-2022 period, with greater attention post-2015. The evaluation was carried out between January 2022 and July 2023 and used the following investigative tools:

- 81 individual or group interviews with 124 actors: French institutional actors, Unitaid employees, members of the Executive Board, organizations receiving Unitaid funding, partners, civil society organizations (NGOs), research institutes, other international actors in global health, etc.
- Field collection in two countries (Cameroon⁵ and Côte d'Ivoire⁶) and case studies of six projects⁷ funded by Unitaid, including interviews with 69 additional actors;
- Comparisons with the United Kingdom and Brazil.

⁴ Launched in late April 2020, ACT-A (or Access to COVID-19 Tools Accelerator) is a global collaboration aimed at speeding up development and production of COVID-19 diagnostics, therapeutics and vaccines and ensuring equitable access through strengthening of health systems. It brings together leaders from governments, global health organizations in the health field, companies and philanthropic organizations.

⁵ Including 26 interviews with 37 interviewees.

⁶ Approximately 25 interviews with 32 interviewees.

⁷ CT-Namsal in Cameroon, OPP-ERA in Cameroon and Côte d'Ivoire, TB-Speed in Cameroon and Côte d'Ivoire, ATLAS in Côte d'Ivoire, SUCCESS in Côte d'Ivoire, End TB in Ethiopia.

Chapter 2

Main results of the evaluation

UNITAID, AN ORGANIZATION THAT REFLECTS A FRENCH VISION OF GLOBAL HEALTH

France's priorities for Unitaid are consistent with those of the French strategic framework for global health, without greater precision

France's contribution to Unitaid is fully rooted in the French strategic framework for global health, a sector in which it is historically active and which has enjoyed significant increases in aid volumes over the last decade (€1.7 billion in 2021).⁸ The French priorities for Unitaid stem from successive French global health strategies (2005, 2012,⁹ 2017-2021¹⁰), which themselves draw on the conclusions of the Interministerial Committee on International Cooperation and Development (CICID), which last met in 2018¹¹, as well as French cooperation and development assistance laws.¹² This strategic framework and the underlying guidelines support France's involvement in Unitaid, particularly **in the fight against diseases and health systems strengthening**. They also support the extension of Unitaid's scope from 2015 to cover maternal and children's health.

France's positions with regard to Unitaid are expressed mainly at the meetings of the Executive Board and/or Committees, and recalled orally during regular discussions

between the MEAE and Unitaid teams. French expectations regarding the organization are also succinctly mentioned in writing in the regular letters accompanying pledges.¹³ These letters show **high expectations regarding collaboration with the Global Fund, the visibility of Unitaid, the strengthening of its investment model and, more recently, the need to diversify its resources**.

There has however been a lack of continuity in the formal expression of French priorities since the creation of Unitaid.¹⁴ **They lack precision as regards France's priority regions.** The letters accompanying French contributions sometimes mention (on two occasions)¹⁵ the "fair share" expected for "French-speaking" countries in the Unitaid project portfolio, but without specifying the scope of these countries. In a review of the minutes of the Executive Board's meetings since 2015, available to the public, there is very little expression by France of its commitment to the least developed countries.¹⁶ They are moreover not accompanied by targets to be achieved, tied in with the strategy of Unitaid or the cooperation between France and the organization, which would help track them. In comparison, the United Kingdom, the second-largest contributor to Unitaid, expresses its expectations more formally and systematically in its Annual Review of the performance of the multilateral organizations it contributes to. The UK

⁸ Sources: [OECD Creditor Reporting System for data concerning health ODA via bilateral channels](#) and the MEAE for data on health ODA through the multilateral channels.

⁹ [France's strategy for international cooperation in the field of health](#).

¹⁰ [France's global health strategy 2017-2021](#)

¹¹ [Conclusions of the CICID 2018](#)

¹² Act of 7 July 2014 on development and international solidarity policy, and then the Programming Act of 4 August 2021 on inclusive development and the fight against global inequalities.

¹³ This analysis is based on the French pledge letters to Unitaid for the following years: 2010, 2011-2013, 2013, 2014, 2015, 2016-2017, then for trienniums 2017-2019, 2020-2022 and 2023-2025.

¹⁴ For example, no priorities were expressed for the 2010, 2011-2013 and 2016-2017 contributions.

¹⁵ Francophone countries were mentioned only in 2015 and 2019.

¹⁶ For example, in 2016: [Unitaid executive board meeting](#)

draws on a number of performance indicators (aligned with Unitaïd's Key Performance Indicators) that reflect its own priorities,¹⁷ which do not include geographical objectives.

Moreover, the expression of France's positions with regard to Unitaïd does not appear to have been based over the years on **interministerial coordination mechanisms or a broad consultation of the French global health ecosystem**. There has been change recently, with the creation of a global health interministerial taskforce meeting (since July 2021), as well as meetings for consultation with external partners and civil society organizations by the French Ambassador for Global Health. Based on interviews and the documentation collected, these bodies do not however make sufficient use of all the opportunities of broad consultation, as they so far fail to involve certain research institutions (Agency for Research on AIDS and Viral Hepatitis –ANRS, National Research Agency – ANR, Pasteur Institute).

Unitaid's strategy converges strongly with France's priorities for the organization

Unitaid's priorities have shifted since its creation, in line with evolving needs and global health challenges. **Since 2015, Unitaïd has reaffirmed the focus on the three major pandemics, while gradually expanding its scope of action**, including to maternal and children's health and, more recently, COVID-19. **France has supported this strategic expansion insofar as it converges with its own priorities**. This does however now involve a challenge for Unitaïd, when it comes to prioritizing investments to ensure the clarity of its action.

This challenge emerged following the adoption in June 2022 of the latest Unitaïd Strategy for 2023-2027, which is built around 6 themes set out in 16 Programmatic Priorities. In addition to the continued focus on the three major pandemics (HIV/AIDS

and their co-infections, tuberculosis and malaria), maternal and children's health is now an explicit Programmatic Priority, as is the response to global health emergencies.

France's priority regions have a fair share in the Unitaïd project portfolio

Unitaid's investment model is not guided by a "country" approach¹⁸ or based on predefined geographical allocation, since Unitaïd has a universal approach whereby it first invests in "products" or solutions that may have a subsequent larger-scale impact on health systems. Unitaïd is primarily intended to demonstrate, on a small scale, the efficacy, relevance and/or cost-effectiveness of innovative solutions to improve the availability of, access to and quality of health products, working with operators, partner governments and communities to identify the best care models. Unitaïd's funding then seeks, at country level, to support the introduction, adoption and scaling-up of trialed products and solutions. **Like the other Unitaïd contributors, France has therefore not set specific targets for Unitaïd to take into account its geographical priorities** beyond its 'attention' to certain countries, indicated in some of its contribution letters (see section 2.1).

Nevertheless, analysis during the evaluation confirmed that France's geographical priorities, including the priority countries¹⁹ for French official development assistance, **are relatively well represented** in Unitaïd's project portfolio. Africa's importance in the Unitaïd investment model, both in grants (77%) and in number of projects (62%), was confirmed, accounting for over 50% in the period 2006-2021. Investments go in particular to southern Africa (29 % of funding) and East Africa (22 %), rather than West Africa (18 %). However, this distribution is not fully in line with the epidemiological needs reflected by the number of cases identified in these subregions²⁰, with a

¹⁷ The Annual Review focuses on four outputs: (i) Effective implementation of the Unitaïd 2017-21 Strategy; (ii) Efficient and effective grant implementation; (iii) Unitaïd governance, management and operational work is economical, efficient and effective and embraces equity consistent with its New Operating Model; (iv) Coordinated partnership to ensure alignment and engagement.

¹⁸ Unlike those of other organizations such as the Global Fund or Gavi, the Vaccine Alliance, or the concessional and vertical development funds for of international financial institutions more generally.

¹⁹ Defined in the annex to the [conclusions of the Interministerial Committee for International Cooperation and Development \(CICID\) meeting of 8 February 2018](#): Benin, Burkina Faso, Burundi, Central African Republic, Chad, Comoros, Democratic Republic of the Congo, Djibouti, Ethiopia, the Gambia, Guinea, Haiti, Liberia, Madagascar, Mali, Mauritania, Niger, Senegal, Togo.

²⁰ The data on the number of cases come from the WHO database (indicators 'People (all ages) living with HIV', 'Estimated number of incident cases of tuberculosis', and 'Estimated number of malaria cases')



↑ AIRE Project: Improving the Identification of Respiratory Distress in Children. ©ALIMA

greater relative effort of Unitaid in East Africa.²¹

The least developed countries (LDCs) have had 58 projects worth US\$1 billion in Unitaid grants since 2006, or 48% of the total. They are well represented overall in terms of the average amount invested per case, with higher amounts than middle-income countries. Similarly, while the largest share of Unitaid's investments goes to English-speaking developing countries (US\$1 billion, 48% of the total), the share allocated to French-speaking countries²² (US\$408 million, or 20%) remains satisfactory in relation to Unitaid's investment per case.²³ This also goes for the share allocated to the priority countries of French ODA, which is relatively low in absolute financial volumes (US\$318 million, or 15%), but consistent with the average amounts invested by Unitaid in relation to the number of cases.

France has a variety of levers that it uses relatively effectively to support consideration of its priorities

The close relationship between France and Unitaid is founded on an **unrivalled financial partnership based on innovative financing mechanisms (air ticket levy, financial transaction tax)**, making France the main contributor since Unitaid's creation (56%). Unitaid's creation was driven by a Franco-Brazilian initiative, under the leadership of Presidents Chirac and Lula.

²¹ On average, US\$60, US\$74 and US\$3 respectively were invested per case of HIV, tuberculosis and malaria, compared to an average of US\$47, US\$31 and US\$2 in West Africa over the period 2006-2021.

²² The analysis concerning French- and English-speaking countries was carried out from a classification. The French-speaking countries (19) were identified using the list of officially Francophone countries and those for which French is an official language. The English-speaking countries (17) were identified from the list of countries with English as an official language. This analysis was carried out in part because France expressed its wish for a "fair share" to be allocated the "French-speaking" countries (categorization not specified) in its 2015 and 2019 contribution letters. It was also requested by the commissioner of the evaluation.

²³ Unitaid's per-case investment corresponds to the ratio of Unitaid's investments in 2006-2021 per disease to those affected by the disease (average number of cases in 2006 and 2021) in HIV, tuberculosis and malaria. The Unitaid investment per case of HIV, tuberculosis and malaria is US\$60, US\$51 and US\$2 respectively for French-speaking developing countries, and US\$59, US\$43 and US\$2 for English-speaking developing countries.

Major historical contributors to Unitaid by total contribution from 2006 to 2022 (including ACT-A) – in thousands of US dollars

France	2 228 430	56%
UK	854 236	22%
Norway	253 646	6%
Bill & Melinda Gates Foundation	150 000	4%
Brazil	130 890	3%
Spain	87 965	2%
Republic of Korea	75 000	2%
Germany*	39 320	1%
Chili	36 543	1%
Global Funds	33 000	1%
Others**	4 156	2%

↑ Source : EY, based on the 2006-2022 Unitaid donor contributions document

* Contribution under ACT-A. Germany is not an official contributor to Unitaid.

** Mauritius, Canada (ACT-A contributions), Japan, Wellcome Trust, Cameroon, Democratic Republic of the Congo, Millennium Foundation, Cyprus, Luxembourg, Italy, Mali, Niger, Portugal, Guinea, Madagascar. Each contribution is less than 1%.

France, which has provided **strong political and institutional support** to the organization since its creation, also plays an active representative role and in strategic decision-making within governance bodies (Executive Board, Committees). **The French presence is also particularly visible** when it comes to strategic positions within the Executive Board, management and the Secretariat of Unitaid (15 French nationals, representing 14% of permanent staff). **This key position held by France can be a double-edged sword**, as it justifies vigilance in their view to ensure this strong position does not discourage certain donors from investing in the organization.

The French diplomatic network in global health is also an unprecedented asset for the partnership between France and Unitaid, and there are 11 Regional Global Health Advisers (CRSM). Yet this network is only partly active in promoting France's global health investment when it comes to Unitaid, given issues around the scale of the CRSMs' monitoring portfolios and the need to prioritize issues within them.

UNITAID IS A HIGH-PERFORMANCE ORGANIZATION THAT FACES VISIBILITY AND RESOURCE MOBILIZATION CHALLENGES

Unitaid, which has overhauled its operational model since 2015, has proven its agility

In 2015, Unitaid modernized its investment model to enhance its transparency and predictability, so as to accompany the growth and upscaling of the projects funded. Processes and tools were introduced to better establish its strategic priorities in the themes of calls for proposals so as to identify particularly central issues and to select the most relevant projects to address them. In this respect, these processes help ensure the priorities expressed by France and the other members of the Executive Board, which are well reflected in the Unitaid Strategy, are also equally reflected in calls for proposals and in funded projects.

Evaluation of Unitaid’s 30 calls for proposals since 2015 suggests that the themes targeted by Unitaid correspond strongly with France’s priorities. In 2020, the organization’s portfolio totalled US\$1.3 billion and counted 63 projects. Of these **63 projects, almost two thirds (39) supported the fight against the three major pandemics, as defended by France.** Some 20 projects concerned HIV (32% of the portfolio), while 11 concerned malaria (17%) and 8 tuberculosis (13%).

To make the model more strategic, Unitaid has also introduced an investment plan since 2017 for better predictability and increased transparency on the use of resources.

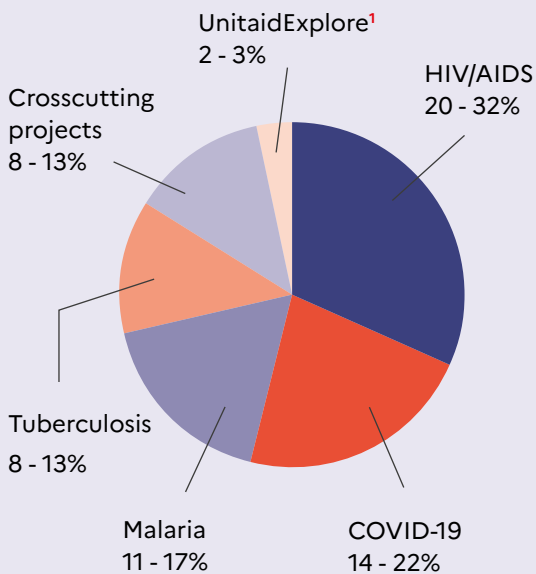
Another indicator of its performance is **Unitaid’s agility, as proven during the COVID-19 crisis**, diversifying its portfolio to incorporate related projects and

demonstrating responsiveness in the granting of funds (an average of 1.4 months compared to about 6 months for traditional projects). This agility was illustrated by the idea of developing a radio series, digital content and social media content on COVID-19 in Côte d’Ivoire, which was proposed and funded in two weeks.

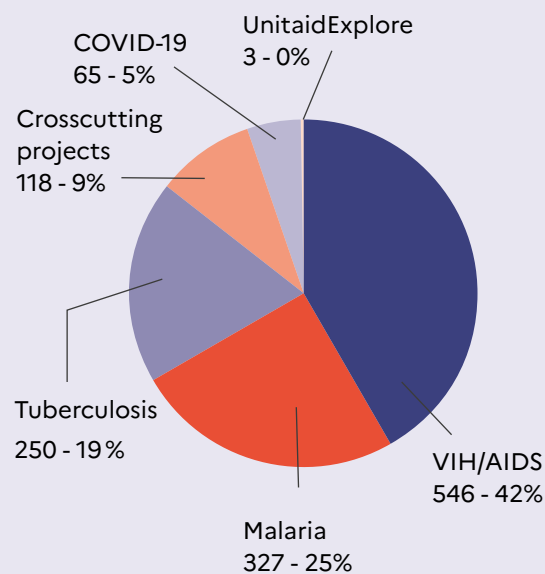
Unitaid’s partnership policy is key to enabling it to assert its position in the global health architecture

Unitaid has an atypical position in the landscape of global health organizations, seeking to link the upstream phase of research and the production of health products with the downstream phase of large-scale distribution of therapeutics to populations in least-developed countries and middle-income countries.

Distribution of projects funded by Unitaid in 2020 (in number of projects and %)

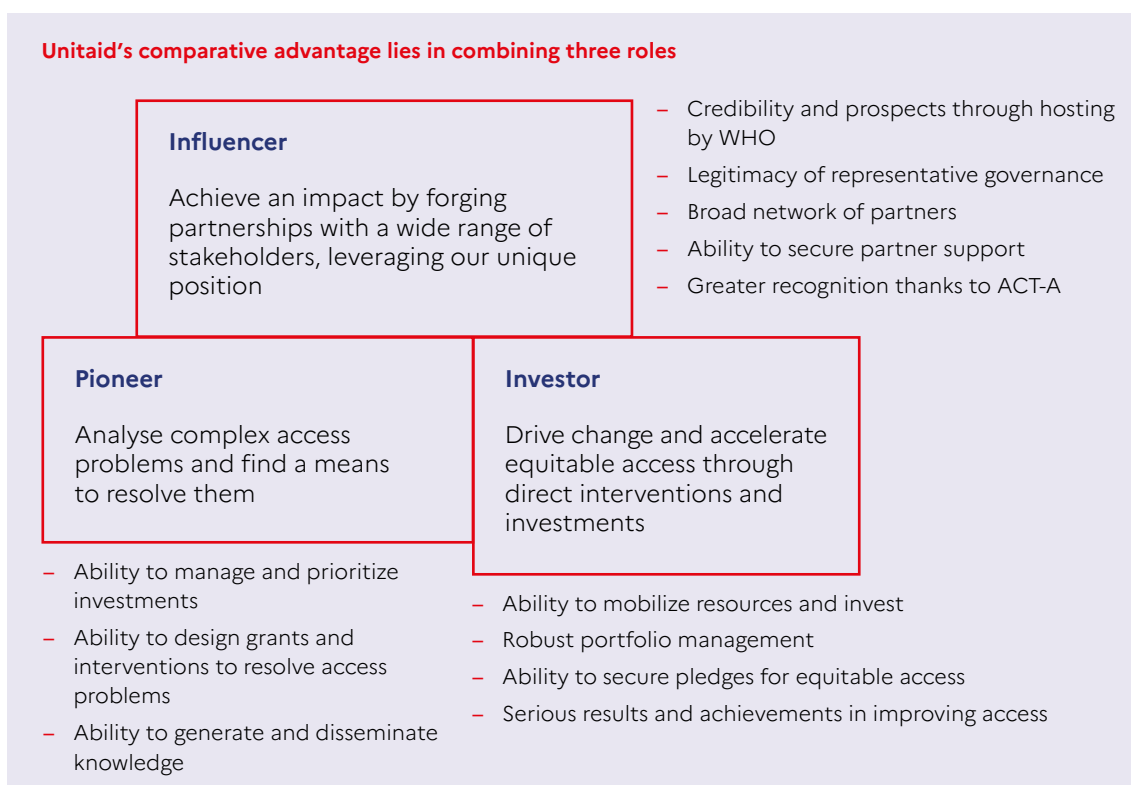


Distribution of projects by theme and by amount allocated to each theme (in millions of USD and %)



¹ UnitaidExplore is a new, more flexible procedure for adopting proposals deployed in 2019 alongside the standard call for proposals procedure.

↑ Source : Unitaid



↑ Source: EY, based on the Unitaid Strategy 2023-2027

This niche approach **requires it to refine and promote its comparative advantage, and to coordinate** with other organizations, in particular with the Global Fund.

France expects Unitaid and the Global Fund to collaborate to strengthen the visibility and scaling-up of Unitaid's projects. Progress was made in this area with the new Strategic Framework for Collaboration signed in 2019 to encourage this scaling-up and boost the impact of global responses to diseases. However, the conditions do not all appear to be met yet to maximize synergies between the Global Fund and Unitaid. **Collaboration between the two continues to suffer from the lack of a formal dialogue between the two organizations which would enable** to structure scaling-up efforts where the Global Fund is able to take over from Unitaid. Moreover, Unitaid and its projects are not sufficiently discussed at the local level in countries where Unitaid oversees projects, particularly within the Global Fund's Country Coordinating Mechanisms. The Global Fund funding request preparation phase does not include systematic analysis and consideration of the challenges of scaling up local Unitaid projects that have proven their worth for incorporation into Global Fund

programmes. Lastly, there is a lack of clarity as to the respective roles of Unitaid and the Global Fund when it comes to shaping the market, with the incorporation of the NextGen Market Shaping initiative, aimed at guaranteeing equal access to quality health products, to the Global Fund's 2023-2028 Strategy.

Tie-ins with French bilateral assistance are also underdeveloped, as shown by the two field visits to Cameroon and Côte d'Ivoire and case studies of six projects²⁴ (apart from the ATLAS project). **Few ties have been developed between Unitaid and the AFD**, France's bilateral assistance agency, or between Unitaid and other research initiatives and actors like L'Initiative and ANRS | Emerging Infectious Diseases (ANRS | MIE). **There are however prospects for stronger ties with L'Initiative, which is implemented by Expertise France** (incorporated into the AFD). L'Initiative is tasked with developing its partnership with Unitaid between 2023 and 2025, following a partnership between Expertise France and the organization via the SUCCESS project.

²⁴ CT-Namsal, TB-Speed, OPP-ERA, ATLAS, SUCCESS, End TB.

Unitaid and the challenge of diversifying its resources

Unitaid does not have a predefined replenishment cycle like the Global Fund, for example, meaning each contributor is free to commit as often and for the amount they wish. This means there is **considerable annual volatility of Unitaid's funding**. This vulnerability was thrown into sharp relief by the recent cut in the United Kingdom's contribution as second-largest Unitaid contributor. This cut was announced in 2020 and represents a shortfall of US\$33 million.²⁵ Moreover, Unitaid's ordinary model has seen a fall in resources collected since 2019 and a **reduction in average contributions per donor**. The target of US\$300 million in resources each year, set from 2023 by the latest Unitaid Strategy, will be a challenge to achieve given the resources levied in recent years.²⁶

However, Unitaid's financial model has seen renewed impetus with the ACT-A initiative, which was launched in April 2020 and brought in additional contributions of US\$193 million over the period 2020-2022. Unitaid was particularly active under ACT-A, co-leading the Therapeutics Pillar alongside the Wellcome Trust, leading the market access working group of the Diagnostics Pillar and working within the Health Systems & Response Connector (HSRC). **That strengthened Unitaid's visibility and legitimacy among both international institutions and countries, expanding its donor base** which grew from 9 in 2019 to 14 in 2021.

Moreover, Unitaid's ordinary model has seen a structural fall in resources collected since 2019 and an overall reduction in the resources mobilized from certain donors.

The widening and diversification of the donor base is therefore increasingly important for Unitaid. Moreover, its financial model is today characterized by its hybrid dimension, combining mobilization of ordinary resources and ACT-A-related resources. In a post-COVID-19 context, **there is a challenge in converting new ACT-A donors to Unitaid's ordinary model**. There is moreover a risk of contributions being earmarked for the thematic priorities of one or more donors, which was already observed in the framework of the ACT-A initiative.

Reducing dependence on the French contribution is also a challenge, as it represented 67% of resources under Unitaid's financial model in 2022.

Other areas for improvement regarding diversification efforts could be studied. In this respect, **more targeted advocacy efforts by Unitaid are needed with regard to certain countries that do not contribute to the ordinary model**: other European companies (including those with the revolving Presidency of the Council of the European Union), the G20 and other emerging countries, for example. Moreover, certain countries that do not contribute to the Unitaid financial model, such as the United States and South Africa, do however benefit from Unitaid funding via their operators.

Distribution of volumes of structural and ACT-A-linked resources mobilized by Unitaid, in thousands of US\$

	2017	2018	2019	2020	2021	2022
Total ordinary contributions	254 491	190 901	256 041	172 184	108 719	120 167
Total ACT-A contributions				52 554	84 872	55 259
% ACT-A of the total				23%	44%	31%
Number of donors	8	8	9	9	14	9

↑ Source : EY, based on Unitaid data

²⁵ Source: interview with Unitaid. Unhonoured multi-year pledges do however remain very rare for Unitaid, which has seen such incidents only once in history, when Cyprus did not honour its pledge for economic reasons.

²⁶ In 2022, US\$175 million was secured. In 2021, US\$193 million was raised, as against US\$224 million in 2020.

To address these multiple challenges, Unitaid recently stepped up its resource mobilization efforts in the implementation of the new Strategy, through the actions aimed at current and potential donors as well as participation in multilateral and international forums.²⁷

In 2023, Unitaid has also drawn up a **resource mobilization roadmap** for the next two years, as part of the implementation of its new Strategy. This roadmap should help France and other current contributors to support and assist Unitaid in raising resources at both multilateral and bilateral levels. Political opportunities are also perceptible in 2023, with the Brazilian Presidency of the G20 and the return to power of President Lula, who co-founded Unitaid in 2006).

Unitaid suffers patchy visibility and a lack of awareness of its impact, despite a monitoring and evaluation framework that is gradually becoming more robust

There is a persistent challenge when it comes to visibility and explaining the unique mission and impacts of Unitaid, which remain little-known as was observed in interviews with partners and field investigations. Unitaid's universal mission, with the ambition of having a global impact on public health in developing countries after scaling-up the innovative solutions it finances, is not always totally understood.

To address this issue of visibility, Unitaid has launched promotion efforts²⁸ through growing communication around its mandate and the impact of its work. Moreover, Unitaid is stepping up its close relationships with countries through more regular high-level field visits and the signing of MoUs (in Kenya, with review ongoing for Rwanda and South Africa). These partnerships are however still few and far between, and Unitaid suffers

from the lack of focal points for engagement with countries and regions. Efforts still need to be made in direct relationships between Unitaid and the major local stakeholders in the health field, both to highlight Unitaid's impact and to facilitate the scaling-up of projects.

Moreover, Unitaid's monitoring and evaluation framework has gradually been strengthened, helping clarify and highlight its action. The evolution of Unitaid's operating model has come with greater attention on the part of the organization to the issues around measuring impact, return on investment and conditions for scaling up projects. As the organization updated its evaluation framework to align with its new Strategy for 2023-2027, it also strengthened its monitoring and evaluation framework throughout the project cycle.²⁹ It takes part in innovative impact modelling initiatives, in liaison with Global Fund teams.

REAL AND GROWING BENEFITS FOR FRENCH OPERATORS AND THOSE FROM DEVELOPING COUNTRIES, DESPITE PERSISTENT CHALLENGES

The role of French operators has grown within Unitaid, but their financial benefits remain lower than operators in other countries

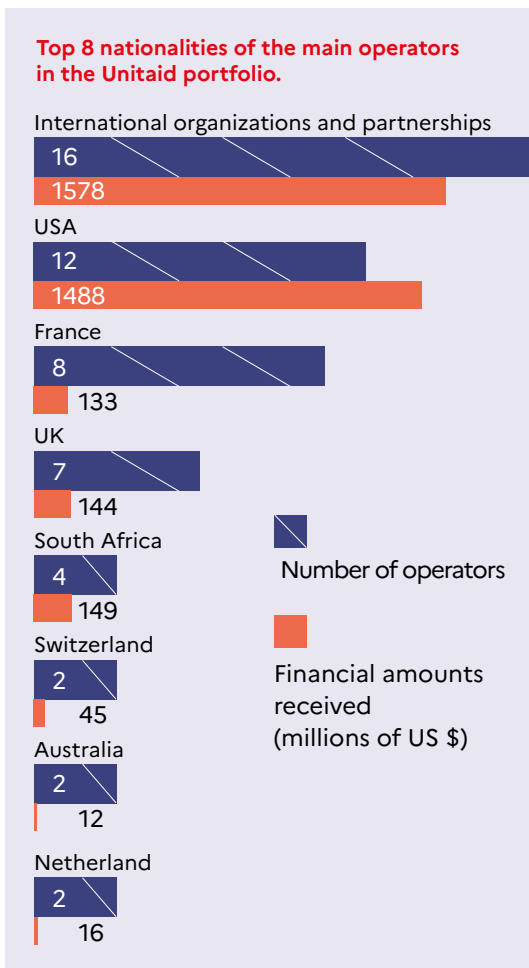
French operators rank second³⁰ among those most represented in the Unitaid portfolio for the 2006-2021 period. Of 106 projects implemented by 60 different operators over the period, with a total grant of US\$3.7 billion, 10 projects (9% of the total) were led by 8 different French operators (13% of the total) for a total financial volume of US\$133 million (4% of the total).

²⁷ These actions involve political dialogue with ministries, visits to the capitals of donor countries by the Unitaid Board Chairperson and the Executive Director, and the organization of events, such as on the sidelines of the United Nations General Assembly (UNGA).

²⁸ For example in the form of videos, stories and active presence on social media.

²⁹ From initial phases through targeting of areas of intervention and design of proposals (estimation of project impact) through to their achievement (external evaluation), including the grant preparation phase (creation of a matrix, measuring of return on investment) and the implementation of projects (project summary).

³⁰ After the United States.



↑ Source: EY, based on Unitaid data

Including secondary operators,³¹ a total of 17 different French operators, both operators on the ground and research institutes, took part in 12 projects.

Since 2015, the position of French operators has improved: France has moved up one place, both in terms of projects (8, compared to 2 previously) and in terms of main operators (7, compared to 2 in the previous period, including 1 shared across both periods). This positive progress for French operators is also reflected in the gradual annual increase in the number of projects in the Unitaid portfolio in which French operators are involved, both as primary and secondary members. They increased from 2 operators in Unitaid-funded projects in 2013 to 15 different French operators working simultaneously on 8 projects in 2020 and 2021.

Despite their increased numbers in the Unitaid project portfolio however, French operators have a smaller share of the resources.

They rank fifth³² in terms of financial amounts received (fourth in terms of nationality) and the projects they support are generally smaller than the average. Their average amount per project is US\$13 million, compared to an overall average of US\$35 million.

The rank of operators in developing countries has also increased

Unitaid's portfolio diversification **benefitted 9 operators in 5 developing countries (Pakistan, Botswana, India, South Africa and Brazil), conducting 12 projects.** This is in line with the expectations of the Executive Board, including France. A strategic indicator was introduced to encourage this portfolio diversification for the benefit of developing countries with the aim of achieving **40% of the operator base originating from developing countries by the end of the Strategy period (2027).** This share was 15% between 2015 and 2021 (compared to 12% between 2006 and 2014).

Within this framework, the increasing influence of South Africa (fourth position in terms of received financing) is in line with the epidemiological needs of this developing country: South Africa is the country hardest hit by HIV and the country with the highest amount of Unitaid investment in the illness (US \$84 million). India, which has been seriously affected by HIV, tuberculosis and malaria and has received heavy investment from Unitaid, could in this regard be better represented among the recipient operators (no operators since 2015).

On the other hand, there are no operators from the least developed countries.

Positive effects in terms of promoting French expertise

On the whole, the collaboration between French operators and Unitaid is beneficial for promoting and recognizing the French expertise invested into projects. These benefits can be seen at various stages of the project roll-out.

³¹ Consortium members but not leaders like the main operators

³² Behind international organizations and partners: the United States, South Africa and the United Kingdom respectively.

Upstream, French NGOs' scientific and operational opinions and expertise are regularly requested by the MEAE's Global Health Ambassador and Human Development Department, just as the Executive Director encourages collaboration between Unitaid and French operators when drawing up areas for intervention and calls for proposals. However, as already mentioned in part 2, the framework for this consultation does not include a number of key actors, including the research community, and more broadly, does not systematically involve the French global health ecosystem.

Downstream, operator expertise is promoted via their integration with consortia of international operators, sometimes in governance positions. Expertise France is thus leading a consortium of international operators comprising Jhpiego³³ and the Union for International Cancer Control (UICC) as part of the SUCCESS project. Similarly, Doctors Without Borders (MSF) France was chosen by Partners In Health (PIH) to be part of the "EndTB" project consortium for its expertise in projects fighting tuberculosis. French expertise is also promoted via the strong geographical coverage and diversity of their projects.

After that, scientific conclusions from other Unitaid-funded studies are routinely used by the World Health Organization (WHO). Projects overseen by French operators led to **changes in international and national public health directives** through innovative health products. For example, the NAMSAL project in Cameroon, run by the Institut Bouisson Bertrand, helped update WHO recommendations by proving the efficacy of Dolutegravir as HIV treatment for pregnant women. Furthermore, the ATLAS project led by NGO Solthis in Senegal, Côte d'Ivoire and Mali helped update the national policy on HIV self-testing in the three countries by making self-tests widely available to the public.

Unitaid projects thus increase the ability of French operators to enhance developing countries' healthcare systems. For example, Expertise France's OPP-ERA project in Côte d'Ivoire, Cameroon, Guinea and Burundi helped build the capacities of laboratories in these countries by introducing sample analysis

platforms to detect the viral load of HIV and helped train staff on this innovative tool.

For operators, project results provide an opportunity to widely distribute their observations and further establish their legitimacy with regard to their peers, the public and the international global health community. With the support of France, French operators have been invited to present their feedback on Unitaid-funded projects. This was the case, for example, at the 11th AFRAVIH conference, the Francophone Alliance of health actors against HIV and chronic or emerging viral infections, held in Marseille in 2022. Similarly, Solthis participated in project ATLAS³⁴ as part of the AIDS 2022 international conference.

Finally, **French operators' collaboration with Unitaid provides them with resources to become more professional**, including through the financial contributions provided by Unitaid grants in their operating models. Thus in 2021, Unitaid was the leading donor to the NGO Solthis in terms of financial support for projects (ATLAS, AIRE and TB-Speed projects) and the third-largest donor to the NGO Alima through its support for the AIRE project. **The professionalization of operators is also achieved through the expertise gained by NGOs as they respond to calls for proposals. Solthis, which is accustomed to Unitaid calls for proposals**, thus supported ALIMA in responding to Unitaid's call for proposals under the AIRE project.

Persistent structural and economic challenges

Within Unitaid-funded projects, the visibility of French operators varies from one country to another, including among the priority countries for French ODA. While French operators enjoy strong visibility in countries where they are implementing numerous projects such as Cameroon or Côte d'Ivoire, their visibility is naturally lower in countries where they are less present, and even more so when operators from other countries have a significant presence. For example, few French operators in Senegal receive Unitaid funding, despite being a French-speaking country in West Africa with several French operators on site (a single Unitaid-funded project is led by a French operator: the

³³ Non-profit international health organization affiliated with Johns Hopkins University.

³⁴ Source: [Feedback on the AIDS 2022 conference - Solthis](#)



↑ HIV self-test in Cote d'Ivoire as part of the ATLAS project. © Solthis

ATLAS project run by Solthis). Conversely, Senegal is one of the main beneficiary countries for projects run by American operators (17 led by CHAI and PATH).

Furthermore, French operators are facing structural challenges which are restricting their options to collaborate with Unitaïd.

Compared with their Anglo-Saxon counterparts, French operators and in particular research institutes face challenges such as access to information regarding calls for proposals, but above all capacity and critical size: their more limited resources restrict their ability to respond to calls for proposals from major international donors like Unitaïd and thus to access major financial resources. The lack of a major French NGO equivalent to large Anglo-Saxon NGOs (like Partners In Health (PIH), the Clinton Health Access Initiative (CHAI), Population Services International (PSI), The Elizabeth Glaser

Pediatric AIDS Foundation (EGPAF) and Save the Children) should also be noted, as these NGOs have a much greater presence in countries than French NGOs.

Finally, **economic factors also limit the impact of French operators.** For example, the OPP-ERA project led by French operator Expertise France delivered mixed results due to delays linked to competition issues. Furthermore, many projects implemented by French operators are rolled out in countries with difficult socio-economic backgrounds and major security issues: such projects account for 50% of Unitaïd projects in Sierra Leone, 30% in Burundi and 20% in Burkina Faso and Niger.

Chapter 3

Recommendations

RECOMMENDATION 1

Encourage Unitaid to increase its visibility and continue its efforts to promote its unique mission and operational model

Overview of observations

- Despite the efforts made, there is a persistent shortfall when it comes to visibility and explanation of the unique mission and impacts of Unitaid, which remain little-known, and the mobilization of significant resources to seek funding. The competitive global health environment requires the comparative advantage of Unitaid to be fine-tuned and promoted, taking into account its niche approach.
- The monitoring and evaluation framework has gradually become more robust, with greater attention for challenges relating to return on investment, the measuring of impact and the conditions for scaling up projects, and with an increasing focus on thematic or project group evaluations. Certain avenues have not yet been explored, however, or only partially, when it comes to perfecting this framework, including on the basis of best practices and international standards.
- Moreover, Unitaid is enhancing its visibility and strengthening its relations with countries through field visits (Board Chair, Executive Director, workshops, etc.) and the signing of MoUs (in Kenya, with review ongoing for Rwanda and South Africa). These partnerships are however still few and far between, and Unitaid suffers from lack of visibility on the ground and focal points for engagement with countries and regions. Efforts still need to be made in direct relationships between Unitaid and the major local stakeholders in the health field, both to highlight Unitaid's impact and to facilitate the scaling-up of projects.

1. Continue to support Unitaid's communication efforts to promote its unique mission, its model and its work

- **Support Unitaid in setting out a discourse and a summary of arguments to promote its comparative advantages** and specific position.³⁵
- **Maintain efforts to enhance the international representation and visibility of Unitaid** via the promotion of Unitaid as part of international forums and the promotion of its role as part of discussions on the development of the global health architecture.
- **Enhance projects and increase the visibility of Unitaid project financing** via dedicated events and by encouraging Unitaid to tighten its requirements regarding its operators while verifying compliance therewith.
- **Encourage Unitaid to communicate in a targeted fashion with decision-makers** within administrations by promoting key performance indicators (KPIs) in the form of infographics.

2. Encourage Unitaid to collaborate more closely with the governments of recipient countries to promote its action on the ground

- **Encourage Unitaid to continue its field visits**, including high-level visits at reasonable intervals.
- **Support discussions on how to increase countries' commitment to Unitaid**, particularly with the support of regional actors and Regional Global Health Advisers (CRSM) (provided further funding is allocated by France).³⁶

³⁵ Prior to research, financing and production of innovative healthcare products and to create favourable conditions.

³⁶ This could be tested in the countries which have an MoU with Unitaid (in Kenya, Rwanda and South Africa) and/or which have a large number of ongoing projects.

RECOMMENDATION 2

Help Unitaid strengthen its partnership policy

Overview of observations

- With an atypical position and unique mission giving it a niche approach, Unitaid draws on a rich and varied partnership policy which does however lack clarity as to the synergies that are sought and the expected benefits of such partnerships.
- Despite the progress that has been made, the collaboration between Unitaid and the Global Fund can be improved, such as to foster the deployment of Unitaid projects by the Global Fund. There is currently no formal mechanism for strategic dialogue between the two organizations. There is also confusion of the respective roles of Unitaid and the Global Fund when it comes to market shaping with the Global Fund's NextGen Market Shaping initiative, part of its Strategy 2023-2028, which aims to guarantee equal access to quality health products. Moreover, Unitaid and its projects are not sufficiently discussed in countries, particularly within the Global Fund's Country Coordinating Mechanisms.

1. Support Unitaid in the operationalization of its partnership policy

Through an operational roadmap, better define collaborative needs, particularly partnerships or types of priority partnerships, and better highlight the advantages of Unitaid and how it can complement other organizations.

2. Help strengthen collaboration between Unitaid and the Global Fund to encourage the scaling-up of projects on the ground

From their headquarters in Geneva, **encourage Unitaid and the Global Fund to step up their strategic dialogue** by putting in place a formal exchange mechanism to align their objectives and investments, coordinate their action and seek solutions should there be deadlock between the two organizations. This strategic dialogue also aims to seek and highlight areas of complementarity between their respective actions³⁷ and to work on implementing a clear continuum in the transition mechanism for projects between the organizations.

3. Support increased crosscutting collaboration between headquarters of Unitaid and the Global Fund

On the ground, help and encourage Unitaid to increase its visibility with regard to the CCM in order to encourage the scaling-up of Unitaid funding for tried-and-tested local projects. Special efforts must be made in the preparatory phase of financing requests to the Global Fund and via a closer partnership with L'Initiative.

³⁷ E.g. in the area of market shaping, to reduce any overlap with the NextGen Market Shaping initiative from the Global Fund's new Strategy

RECOMMENDATION 3

Continue supporting Unitaid's resource diversification efforts

Overview of observations

- Unitaid has stepped up its resource mobilization efforts, including through the implementation of bilateral actions for certain donors and actions via multilateral bodies and international forums. These efforts have not however reduced the dependency on France's financial contribution, or the volatility of the contributions received. The resource mobilization plan for the coming years was recently finalized in the framework of the implementation of the new strategy.
- A lack of volume has been observed in the basic contributions of donors. However, there are opportunities: there is currently momentum in Brazil, with President Lula's return to power, which should be capitalized on. Moreover, more regular advocacy work by Unitaid is needed with the countries holding the revolving Presidency of the Council of the European Union; this was seemingly not established ahead of the drafting of the last Unitaid strategy, i.e. during the Portuguese Presidency (a contributor to Unitaid's ACT-A model).

1. Support and inform the implementation of the Unitaid's resource mobilization roadmap

- **Take on a greater role within the Executive Board in monitoring Unitaid's resource mobilization policy and support the implementation of the mobilization roadmap for Unitaid resources**, as well as the underlying action plans.³⁸

- **Promote discussions on changing the Unitaid model,³⁹ while calling for operating contributions to remain the main part of Unitaid's financial model.**
- **Play a leading role in discussions on the link between health and climate/SDGs and potential innovative financing, and help Unitaid become a leading-edge organization**, including by drawing up a specific strategy or action plan.

2. Continue advocacy efforts focusing on current or potential contributing countries

- **Help Unitaid carry out more systematic advocacy work among countries taking on the rotating EU Council Presidencies.**
- **Support Unitaid in its advocacy work with countries which could appreciate its added value but also with countries with which France has regular bilateral relations**, and which contribute to the Global Fund (e.g. Qatar, Saudi Arabia). It would also be judicious to target countries which are already contributors, with special focus, for example, on Brazil, by encouraging it to play the role of Unitaid Ambassador in certain international forums (in particular the G20 Presidency for 2024).

³⁸ To do so, France can mobilize its diplomatic network (CRSM or Regional Global Health Advisers) by increasing/updating contextual analysis and Unitaid's commitment plans by donor.

³⁹ Several scenarios can be examined, including the possibility of jointly replenishing Unitaid and the Global Fund in 2025 (announced by the French President last September); using resources from donors other than States; introducing windows by theme or area of programming, like the existing model for concessional development finance; other innovative financing mechanisms (e.g. a climate-health bond issue, the role of taxes).

RECOMMENDATION 4

Improve the definition, the drafting process and the monitoring of French priorities expressed to Unitaïd

Overview of observations

- France's positions with regard to Unitaïd are expressed mainly at the meetings of the Executive Board and/or Committees, and recalled orally during regular discussions between MEAE and Unitaïd teams. They are also recalled succinctly in the successive letters accompanying pledges.⁴⁰ There has however been a lack of continuity in the formal expression of these priorities since the creation of Unitaïd. More generally, they are insufficiently precise, particularly as regards France's geographic priorities.⁴¹ In comparison, the United Kingdom, the second-largest contributor to Unitaïd, expresses its expectations more formally and systematically in its Annual Review of Unitaïd's performance.
- The expression of France's positions with regard to Unitaïd does not appear to have been based over the years on interministerial coordination mechanisms or a consultation of the French global health ecosystem. However, there has been positive change recently.⁴²
- France has a variety of levers that it uses relatively effectively to support consideration of its priorities. However, it makes only partial use of its diplomatic network for global health in its monitoring of Unitaïd. This may be due to scale issues and the need to prioritize issues within the monitoring portfolio of Regional Global Health Advisers.

1. Step up the efforts of the French ecosystem to fuel discussions on Unitaïd's position and the areas of cooperation between Unitaïd and France

- **At interministerial level, step up cooperation between departments and ministries** (Ministry of Health and Prevention, Ministry of the Economy, Finance and Industrial and Digital Sovereignty, Ministry for the Ecological Transition and Territorial Cohesion, Ministry of Higher Education and Research, etc.) with a view to drafting French positions prior to Executive Board meetings on issues of common interest (e.g. innovative financing, issues relating to developments in the financial model, the link between health and the climate and SDGs, etc.).
- **At the level of consultations with external partners, expand the advisory group** by including, in addition to civil society and operators which are already present, other major research institutes (e.g. ANRS | MIE, National Research Agency – ANR, Pasteur Institute, etc.) and the scientific community.
- **At the level of the global health diplomatic network, mobilize the network more systematically** (meetings every two months, preparing a summary of Unitaïd's activity in areas for intervention),⁴³ and examine the feasibility of creating at least one or two International Volunteer in Administration (VIA) positions for global health in Africa.⁴⁴

2. Clarify and more clearly express France's expectations of Unitaïd

- **In terms of priorities to be defined, further explain France's expectations of Unitaïd during each multi-year contribution** (at thematic, institutional and operational levels).
- **Define the operational expectations** to be prioritized regarding the development of Unitaïd and cooperation between France and Unitaïd over the next three years.
- **Improve the monitoring and consideration of priorities** expressed to Unitaïd and regarding cooperation with Unitaïd (accountability framework to be defined).

⁴⁰ This analysis is based on the French pledge letters to Unitaïd for 2010, 2011-2013, 2014, 2015, 2016-2017, and the trienniums 2017-2019, 2020-2022 and 2023-2025.

⁴¹ Regions and countries where development needs are greatest, and priority countries for French official development assistance.

⁴² With the creation of a global health interministerial taskforce (since July 2021), as well as meetings for consultation with external partners held by the French Ambassador for Global Health. These could be expanded. The last mission statement issued to the Ambassador for Global Health strengthened this dimension, as did the foreign service review (EGD) and instructions from the Ministry for Europe and Foreign Affairs' Director-General for Administration and Modernization (DGAM).

⁴³ At least once every five years prior to drafting the Unitaïd Strategy or every two and a half years during the mid-term review.

⁴⁴ With a Unitaïd-focused mandate, in addition to the CRSM mandate focusing on the Global Fund and bilateral ODA, for example.

RECOMMENDATION 5

Strengthen partnerships between Unitaid and French actors

Overview of observations

- French agencies rank second among those most represented in the Unitaid portfolio for the 2006-2021 period, and fifth in terms of the financial amounts received. Although their position has been progressing since 2015, these agencies still appear relatively limited in terms of financial amounts received, behind for example agencies that do not contribute to Unitaid such as the United States and South Africa.
- Moreover, French agencies face challenges when it comes to promoting French expertise. Factors⁴⁵ limit collaboration with French agencies, particularly those from the research sphere.
- Unitaid's linkage with French bilateral assistance and other initiatives/actors of research like the AFD, L'Initiative and ANRS | MIE could be improved, given relatively limited ties so far.

1. Mobilize levers to promote French visibility and expertise

- **With regard to support mechanisms and levers, strengthen the ecosystem of French operators by drawing on the network managers**, e.g. by providing educational support to better understand the global health ecosystem.

- **Improve sharing and distribution of information** regarding Unitaid calls for proposals with French operators, including those from research community. It would also be useful **to draw up a good practice guide** to encourage this support and create an annual event to promote French expertise and encourage experience sharing.

2. Encourage Unitaid to strengthen partnerships with other French actors and mechanisms

- **With regard to tools**, encourage Unitaid to form partnerships with AFD Group (including Expertise France), ANRS | MIE⁴⁶ and the Pasteur Institute, for example. The work with the AFD can be based around issues such as the climate, innovative financing and regional production of health products and technologies. Further synergies can also be sought with L'Initiative.
- **With regard to organizations/mechanisms**, set up a seminar or, alternatively, high-level bilateral meetings (Deep Dive)⁴⁷ bringing together Unitaid and French actors (AFD, Expertise France, L'Initiative, the research community, civil society).

⁴⁵Various degrees of knowledge of Unitaid calls for project on the part of French actors, particularly in the research sphere; structural weaknesses of French agencies compared to those of the English-speaking world (budget, scale, presence, dedicated team for responding to calls for proposals); different conception of donor-agency partnership between Unitaid and French agencies (Unitaid is very keen for justifications and updates from the agency, which the latter may see as a lack of trust); possible divergent view of the measuring of results and impact (French agencies focus on the qualitative side).

⁴³ ANRS | MIE could be the network manager for the research community.

⁴⁷ On a timescale to be defined: annually, every two and a half years during Unitaid's mid-term review, or every five years prior to drafting the Unitaid Strategy.



↑ HIV Self-Test. © PSI and Dogsontherunphotography

Main abbreviations

ACT-A	Access to Covid Tools Accelerator (mechanism for speeding up access to tools to fight COVID-19)
AFD	Agence Française de Développement
ANRS MIE	French National Agency for Research on AIDS and Viral Hepatitis Emerging Infectious Diseases
Bn USD	Billions of US dollars
MHP	Ministry of Health and Prevention
CCM	Country Coordinating Mechanism
CICID	French Interministerial Committee for International Cooperation and Development
CRSM	Regional Global Health Advisers
DGM/HUMA	Human Development Department of the Ministry for Europe and Foreign Affairs
EB	Executive Board
EU	European Union
FCDO	British Foreign, Commonwealth & Development Office
GF	The Global Fund to Fight AIDS, Tuberculosis and Malaria
GH	Global health
LDCs	Least Developed Countries
MEAE	French Ministry for Europe and Foreign Affairs
MUSD	Millions of US dollars
NGO	Non-governmental organization
ODA	Official development assistance
OECD	Organisation for Economic Co-operation and Development
SDG	Sustainable Development Goal
TFP	Technical and financial partner
UNGA	United Nations General Assembly
VIA	International Volunteer in Administration
WHO	World Health Organization

Evaluation of France's contribution to Unitaid

Founded in 2006 by five countries (France, Brazil, Chile, Norway and the UK), Unitaid is an unusual organization in the global health landscape. It was created following discussions on innovative financing for development and its core work is mainly focused on fighting the three major pandemics: HIV/AIDS, tuberculosis and malaria. Since its creation, Unitaid has received almost US \$4 billion in grants, including \$2 billion from France, its largest contributor.

The evaluation deems Unitaid to be an organization that reflects a French vision of global health. France's priorities with regard to Unitaid are deemed to be consistent with its strategic global health priorities. Furthermore, Unitaid stands out as a high-performance organization, despite visibility and resource mobilization challenges. Despite persistent challenges, the evaluation has also observed real and growing benefits for French operators and those from developing countries.

The evaluators recommend that France encourage Unitaid to keep working to improve its visibility and promote its unique mission and investment model. They recommend that support be provided to strengthen Unitaid's partnership policy and for the diversification of the organization's resources. Finally, the evaluators propose improving the definition and monitoring of France's priorities with regard to Unitaid, as well as strengthening partnerships with French actors.

Ministry for Europe and Foreign Affairs

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Program and Operators Delegation
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