

Glossary

Antimicrobial resistance (AMR)

A process that occurs when bacteria, viruses, fungi, and parasites no longer respond to medicines, making infections harder to treat and increasing the risk of disease spread and death.

Community-led monitoring (CLM)

CLM is when people in the community, especially those affected by tuberculosis, keep track of how well tuberculosis services are working for them. They do this by collecting information about real-life problems that people face when trying to get care. Information that might be missing from official government data. With this information, communities can make sure care respects people's rights, like privacy, dignity, and fairness.

Drug-resistant tuberculosis (DR-TB)

A form of tuberculosis disease caused by strains of Mycobacterium tuberculosis that are resistant to first-line tuberculosis drugs.

Ebola

Ebola is a virus that causes severe inflammation and tissue damage throughout the body. It is known as a hemorrhagic fever virus because it can cause problems with the clotting system of the body and lead to internal bleeding, as blood leaks from small blood vessels. Ebola is spread through direct contact with body fluids — blood, saliva, sweat, tears, mucus, vomit, faeces, breast milk, urine and semen — of people infected with it. It is also spread by touching things that have been contaminated with these fluids.

Global Fund to Fight AIDS, Tuberculosis and Malaria

The Global Fund is a major international financing body, established in 2002, that fights HIV/AIDS, TB, and malaria, ensuring a healthier, safer and more equitable future for people around the world.

It works by raising funds from governments, private foundations, civil society, and individuals. Anchored in strong, inclusive partnerships and overseen through rigorous governance and monitoring, the Global Fund has saved millions of lives and helped build more resilient, equitable health systems worldwide.

Global health security

Global health security is the actions taken to protect populations from health threats that can cross borders and endanger people's lives. This encompasses preventing, detecting and responding to infectious disease outbreaks and other public health emergencies. Building strong, resilient health systems worldwide can effectively manage and deal with these threats.

Gross National Income (GNI)

Gross National Income is an alternative to gross domestic product (GDP) as a measure of wealth. It calculates income instead of output.

GNI is the total amount of money earned by a nation's people and businesses in a given period (usually a year).

Human Immunodeficiency Virus (HIV)

HIV (human immunodeficiency virus) is a virus that attacks cells that help the body fight infection, making a person more vulnerable to other infections and diseases. It is spread by contact with certain bodily fluids of a person with HIV, most commonly during unprotected sex or through sharing injection equipment.

If left untreated, HIV can lead to the disease AIDS (acquired immunodeficiency syndrome).

The human body can't get rid of HIV, and no effective HIV cure exists. So, once you have HIV, you have it for life. However, effective treatment with HIV medicine (called antiretroviral therapy or ART) is available. If taken as prescribed, HIV medicine can reduce the amount of HIV in the blood (also called the viral load) to a very low level. This is called viral suppression. If a person's viral load is so low that a standard lab can't detect it, this is called having an undetectable viral load. People with HIV who take HIV medicine as prescribed and get and keep an undetectable viral load can live long and healthy lives and will not transmit HIV.

Glossary

Malaria

Malaria is a life-threatening disease caused by parasites that are transmitted to people through the bites of infected Anopheles mosquitoes. It is preventable and curable. People who have malaria typically experience severe symptoms, including a high fever, shaking, and chills. A blood test can diagnose malaria.

Mpox

Mpox is a viral illness caused by the monkeypox virus, part of the Orthopoxvirus genus. Symptoms include a rash or mucosal lesions lasting 2–4 weeks, along with fever, fatigue, headache, muscle pain, and swollen lymph nodes. Mpox spreads through close contact with infected individuals, materials, animals, or from mother to child during pregnancy or birth.

Vaccines are available, and vaccination is recommended in conjunction with other public health measures. Treatment focuses on symptom relief and supportive care, including attention to nutrition, hydration, and management of complications like co-infections (e.g., HIV).

North Atlantic Treaty Organisation (NATO)

NATO is an intergovernmental military alliance established in 1949. It consists of 32 countries from North America and Europe that agree to mutual defence in response to an attack by any external party.

NATO's primary purpose is to safeguard the freedom and security of its members through political and military means.

Official Development Assistance (ODA)

ODA is government aid that promotes and targets the economic development and welfare of developing countries. ODA is financial support from official providers to aid recipients (low- and middle-income countries) in areas such as health, sanitation, education, and infrastructure. It mainly consists of either grants or "soft" loans, and it accounts for over two-thirds of external finance for the least-developed countries.

Tuberculosis (TB)

TB is a contagious and severe infectious disease caused by Mycobacterium tuberculosis. TB is a bacterial infection spread through inhaling tiny droplets from the coughs or sneezes of an infected person. It is preventable and curable with proper treatment. TB mainly affects the lungs; however, it can affect any part of the body, including the glands, bones and nervous system. A person with TB disease can spread the infection to others. On average, one untreated individual with TB can spread the infection to 10-15 others per year.

Universal Health Coverage

All people have access to the full range of quality health services they need, when and where they need them, without financial hardship. It covers the full continuum of essential health services, from health promotion to prevention, treatment, rehabilitation, and palliative care.

Acknowledgements

This publication is dedicated to the Defenders of Freedom and the people of Ukraine.

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Cover Photo:

Amidst a challenging day, a doctor from a mobile clinic clenches his fists, reflecting on the resilience required to provide care in a frontline town in the Zaporizhzhia region of Ukraine. The clinic is vital and the only source of both medical and dental assistance.

Photo: Alliance for Public Health.

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From Ukraine, we see firsthand the undeniable impact of the Global Fund in sustaining life-saving programmes, keeping HIV and tuberculosis epidemics under control, and bolstering global health security, even amidst immense challenges. We implore the UK to uphold its legacy of supporting global health with a commitment of at least £1 billion to the Global Fund's Eighth Replenishment, inspiring global solidarity for a healthier and more secure future for all.



Executive summary

The Next Frontline

The United Kingdom (UK) stands at a critical geopolitical crossroads, where its investment decisions have profound implications not only for global development but also for international security and its national interest. Investing in the Global Fund's Eighth Replenishment is a strategic imperative for the UK that, in addition to saving lives, advances health security, reinforces collective defence, and asserts the UK's global leadership.

Pandemics and infectious diseases do not respect borders. The full-scale war by Russia against Ukraine has severely disrupted healthcare infrastructure, increasing the risk of outbreaks of diseases such as tuberculosis (including drug-resistant strains), HIV and other infectious diseases. Weak surveillance and treatment capacity in war-affected regions increase the likelihood of regional and global health threats. The disruptions to primary healthcare systems endanger people's health and well-being and challenge the ability to manage long-term chronic conditions and increase the risk of infectious diseases.

The work of the Global Fund to Fight AIDS, Tuberculosis and Malaria in Ukraine, alongside Ukrainian non-governmental organisations, has been critical in continuing healthcare services for the population, especially those living close to the frontline. The continued operation of the Global Fund in Ukraine demonstrates the resilience and agility of its operational model and close working relationship with civil society organisations on the ground. In a time when more investment is needed to ensure resilient and responsive health systems, it is regrettable that the UK and other European countries are drastically reducing Official Development Assistance (ODA) budgets, which are meant to promote peace, security and end extreme poverty. Cuts to development assistance are short-sighted and undermine the Ukrainian health response by making communities more vulnerable. Prioritising defence over diplomacy and development weakens global stability, damages the UK's soft power, and is a strategic failure that increases long-term security risks. Development aid plays a vital role in preventing conflict, combating poverty, bolstering health systems, and strengthening fragile statesfunctions that military power alone cannot fulfil.

Global health security is essential for national and regional stability, especially as NATO supports Ukraine. Rebuilding Ukraine's health system is key to its resilience and regional peace. The Global Fund enables efficient aid delivery, aligning defence and development efforts. The UK's support for the Global Fund's Eighth Replenishment is vital to continuing the humanitarian response in Ukraine. The UK must continue its leadership as a credible and ethical global leader and ensure a successful replenishment by promoting international solidarity.

The Eighth Replenishment of the Global Fund provides the opportunity for the UK and European countries to raise US \$18 billion to invest in health systems to protect global health security across the world for all people, and make sure no one is left behind.

Results UK calls on the UK
Government to maintain its £1 billion
pledge to the Global Fund for its
Eighth Replenishment.

The Next Frontline

Introduction

At independence in 1991, the Ukrainian healthcare system inherited an outdated organisational architecture that was based on centralised government and public funding. Since 2017, Ukraine has been undergoing extensive reforms to modernise its health system by shifting toward a patient-centred model, strengthening primary healthcare delivery and introducing international standards to better meet the needs of the population. There were, however, challenges related to underfunding, infrastructure, shortage of healthcare professionals and a reliance on foreign aid¹.

Before the full-scale invasion in 2022, Ukraine had the second-largest HIV epidemic and the fourth-highest burden of Tuberculosis (TB) in the Eastern European region, but progress was being made. With the help of Global Fund investments over the last 20 years, rates of TB were falling, and people living with HIV were on treatment and knew their status. Drug-resistant TB remained an ongoing challenge in Ukraine. Domestic financing for HIV prevention services for key and vulnerable populations also increased, as did the capacity of community-led organisations².

Crises such as wars have a critical impact on the detection, treatment and control of infectious diseases and health systems. Since its inception, the Global Fund has been a driving force in the global health landscape, supporting communities and national efforts to dramatically cut death rates from these deadly diseases and strengthen fragile health systems in some of the world's most vulnerable contexts. In times of crisis, this mission becomes even more urgent.

This report will highlight the devastating impact that Russia's invasion has had on efforts to tackle TB and HIV in Ukraine, and how tackling the resurgence of infectious diseases is vital to protecting global health security and peace. Crises such as wars have a critical impact on the detection, treatment and control of infectious diseases and health systems.



The Next Frontline

Olya's story



What I went through must not happen to anyone else. That feeling became my driving force. Thanks to the support of the Global Fund, TBPeopleUkraine was created in 2019 – a community of people who know what it's like to be on the edge, but who choose the path of change. We didn't just establish an organisation – we created a new space, where human dignity, care, and support became an essential part of the TB response.

This was the first step toward change, and it became possible thanks to the Global Fund's program.

Thanks to the Global Fund, we built bridges – between people and services, between the state and those who had never been heard before. Psychosocial peer-to-peer support programs emerged, mobile clinics, access to treatment in frontline areas, and support for digital tools like the StopTB Partnership (STP) OneImpactUkraine that allow us to help people even in times of war. During the pandemic, during missile strikes, we did not disappear. We stayed with the people. And the Global Fund stayed with us.

Yes, I had TB. It changed my life, and it affected the future of my child. Back then, people faced outdated approaches – isolation, stigma, no counselling or support, and no protection from the social burden of the disease. But the support of the Global Fund became a turning point. In 2019, TBPeopleUkraine had a simple mission – to change how TB is approached and perceived, so that no one else would have to go through what we did.

The fight for change has never been easy. In parallel with health system reform, TBPeopleUkraine worked to expand the circle of stakeholders engaged in TB response and its root causes – stigma, lack of awareness, and absence of services. With support from the Global Fund, our team and I, along with national partners, built a network of accessibility for people – and a shift in public attitudes. Living with TB without isolation, building programs rooted in social inclusion, supporting the state's leadership in implementing modern, people-centred treatment, the Global Fund has always been there, supporting these changes through pandemics and war.

By supporting community-led monitoring and tools like STP OneImpactUkraine, we enabled remote assistance to anyone – both in Ukraine and for those forced to flee due to the war. We could have lost everything – but we never lost faith. Because we were able to help people continue treatment, even through the hardest challenges.

After everything I had to go through, I was exhausted and hopeless, in deep depression. TB is not only about pills – even though access to treatment is a key factor in overcoming the disease. TB is a reflection of everything imperfect in the system and society. And once you've gone through that, you still have to keep living.

Today, I see real changes for people with TB – for children who will never have to suffer what my daughter once did, and what thousands of others have endured. With gratitude to the National TB Program, the Global Fund donors, technical and other partners for their tireless struggle in spite of. These changes are worth fighting for – and we will continue this path, calling on countries to build strong, people-centred programs that care for their citizens. And of course, to support Global Fund programs – which today are saving millions of lives around the world, giving states time and offering a shoulder of support and help.

Olya Chair TBPeople, Ukraine













The situation in Ukraine

The Next Frontline

In February 2022, Russia launched a full-scale illegal invasion of Ukraine, causing the largest and deadliest war in Europe since World War II. It is estimated that 13,341 civilians have been killed and 32,744 have been wounded³ over the last three years. The World Health Organisation identified conflict as one of the top health threats, with around 800 million people⁴ living in such conditions and facing collapsing health systems. The availability and effective functioning of healthcare systems play a major role in both the immediate humanitarian response and long-term societal recovery⁵.

War impacts not only health, but also social, economic, and environmental stability. Wars drive migration and displacement, which worsen health outcomes due to barriers like poor living conditions, limited healthcare access, and social exclusion. People living in poverty and displaced populations arising from war zones are more likely to experience the social risk factors that lead to TB. Malnutrition, overcrowded living conditions, inadequate sanitation and lack of access to quality healthcare all increase susceptibility to tuberculosis⁶.

Poverty, wars, political instability, and humanitarian crises are not gender-neutral. Women and girls are bearing the brunt. War-related sexual violence continues to be weaponised with impunity, and humanitarian aid structures themselves have too often failed to protect, leaving women and girls vulnerable to sexual exploitation, abuse, and harassment by those meant to provide safety⁷.

The war in Ukraine has not only caused immense human suffering, it has also put extensive strain on Ukraine's already fragile health infrastructure. Long before the war, the Global Fund had recognised Ukraine's critical needs, investing over US \$850 million to address some of the highest rates of HIV and multidrug-resistant TB in Europe. The Global Fund has demonstrated what a rights-based global health leadership looks like. Investing in fragile health systems improves global health security, a key driver of regional and global stability.

In Ukraine, violations committed by occupiers (Russian military) against key and vulnerable groups have been documented by the REAct project. REAct is a tool for monitoring responses to human rights violations at the community level, a system implemented by Alliance for **Public Health with technical** support from Frontline AIDS, funded by the Global Fund. These include refusal of TB treatment, deprivation of housing, physical assault and violence and withdrawal of drugs for HIV treatment, amongst others8.

TB and HIV status

Before 2022, Ukraine had the second-largest HIV epidemic and the fourth-highest burden of TB in the Eastern European region. Although progress in reducing the disease burdens was underway before 2020, the war in Ukraine has increased TB and HIV incidence and contributed to poor disease control in the war-affected region⁹.

Ukraine remains one of the 30 countries with a high burden of TB and one of the nine countries worldwide with the highest rates of drugresistant TB in the world¹0. Drug-resistant TB is complex, hard to treat and requires longer treatment time, putting a burden on individuals and health systems. Drug-resistant TB is also a major contributor to antimicrobial resistance (AMR). AMR occurs when bacteria, viruses and fungi no longer respond to the medicines, making

antibiotics ineffective and the infection difficult or impossible to treat, increasing the risk of transmission, illness, disability and death¹¹. The World Health Organisation has announced AMR as a top global public health and development threat, responsible for killing 1.27 million people¹² in 2019. Drug-resistant TB is responsible for one in three deaths from AMR¹³.

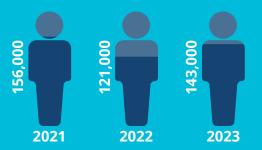
The war in Ukraine has negatively impacted efforts to tackle TB. Between 2015 and 2021, TB rates in Ukraine reduced from 91 to 73 cases per 100,000 of population. In 2022, this increased to 90 cases per 100,000 population, with drugresistant TB affecting 39% of people with TB¹⁴. In 2023, there were 42,000 new cases of TB and 13,000 cases of drug-resistant TB¹⁵. New cases of TB have increased by 23% since 2015¹⁶.

The figures for HIV tell a similar story.



Ukraine is one of four countries in the Eastern European and Central Asian region that account for **92%** of all new registered HIV cases¹⁷.

In 2021, 83% of people (156,000) living with HIV were on antiretroviral therapy (ART). In 2022, only 72% (121,000) of people with HIV were on ART; this slightly increased in 2023 to 143,000 people¹⁸.



Accurate diagnosis and early initiation of ART can improve the health and quality of life for people with HIV. It also greatly reduces the risk of HIV transmission to others.

Mass migration and displacement.

As of April 2025,
6.3 million people from Ukraine fled to Europe, 560,000 fled beyond Europe, and 3.6 million people remain internally displaced in Ukraine¹⁹.

This movement of people has meant that TB incidence has increased in countries where people have fled to, such as Poland, Germany, the Czech Republic, Moldova and Slovakia. These countries are reporting an increase in TB incidence beyond the average increase, as well as an increase in TB among individuals with Ukraine as the place of birth²⁰. The increase of TB and drugresistant TB across Europe is not only a challenge for individual countries' health systems, but threatens the wider global TB response.

Help Now Hub

The Help Now Hub²¹ is an initiative set up by the Alliance for Public Health on March 1, 2022, to assist Ukrainian refugees and internally displaced persons from key populations affected by the war. The support includes providing information and navigation, referring individuals to HIV services and medical treatments (HIV medication, anti-TB drugs, hepatitis and hormonal therapies), and offering psychological, legal, social, and mental health services. This emergency support project has delivered over 40,000 critical services to people living with HIV and key populations across more than 50 countries between 2022 and 2023.

Backed by the Global Fund, Aidsfonds, and the Alliance for Public Health, in partnership with the Public Health Center of the Ministry of Health of Ukraine, and supported by more than 50 civil society organisations around the world, the project has become a strategic pillar in the emergency response for waraffected individuals—offering medical aid alongside psychological, legal, and social support. From Ukraine to Germany, Poland, Moldova, and the Baltic States, Help Now Hub has evolved into an essential clinical and logistical resource for displaced Ukrainians.

Far more than a humanitarian project, Help Now Hub stands as a powerful statement: that international collaboration among civil society organisations, supported by strong public health institutions, can defy chaos and uphold human dignity amid conflict and war. Its work underscores a simple truth — that in moments of profound crisis, coordinated action and political will can save lives and restore hope.



The Global Fund to Fight AIDS, Tuberculosis and Malaria

The Global Fund to Fight AIDS, Tuberculosis and Malaria is the largest multilateral financier of global health programmes in low- and middle-income countries. The Global Fund stands on the frontline of the fight against HIV, TB and malaria – diseases that claim over 2.47 million lives a year^{22,23,24}. The Global Fund is an international partnership that brings together governments, community leaders, civil society, health workers, and the private sector to defeat HIV, TB, and malaria, and ensure a safer and more equitable world for everyone.

Since 2002, this global partnership has saved over 65 million lives and reduced the HIV, TB and malaria burden by 63% across 130 countries²⁵. The Global Fund has distributed more than US \$65 billion in funding. This funding not only provides immediate lifesaving medical interventions but also tackles the systemic injustice that allows pandemics to persist, building resilient health systems that protect the world's most vulnerable and marginalised populations. By reinforcing health systems, it accelerates progress toward universal health coverage, including community systems that reach the poorest members of society. Investing in interventions that reduce the HIV, TB and malaria burden allows primary care systems and hospitals to free up capacity and provide care for other health conditions²⁶. It also provides a healthy return on investment. For every one dollar invested in the Global Fund, it will return \$19 in health and economic gains²⁷.

The Global Fund is committed to a gender-transformative approach, as acknowledged by the 2023-2028 strategy²⁸. The strategy acknowledges that ending HIV, TB, and malaria requires addressing health inequities, gender inequality, and human rights violations. Recognising that gender-related barriers, such as stigma, discrimination, and harmful norms, limit

access to care and worsen health outcomes. The strategy also pledges to use the Global Fund's diplomatic influence to advocate against harmful laws and policies that increase vulnerability to these diseases, particularly for women, girls, and gender-diverse communities²⁹.

The Global Fund is primarily financed by donor contributions from country governments, which account for 94% of the funding. The remaining funds come from the private sector, foundations, and innovative financing initiatives. The Global Fund works in three-year cycles known as 'replenishments'. This approach enables stability and predictable financing for implementing countries. In February 2025, the Global Fund launched its investment case³⁰ for its Eighth Replenishment fundraising cycle, which will cover the period 2026-2028. The Global Fund has a target of US \$18 billion for the Eighth Replenishment.





Deliver a Return on Investment of

1:19

Importance of resilient health systems

Health systems are responsible for delivering essential health services and safeguarding the population from public health threats. Health systems encompass services, organisations and people that respond to the needs of the population across the life course. Primary healthcare services include health promotion, prevention, treatment, and rehabilitation for those with long-term conditions, as well as palliative care. When the foundations of a health system, such as primary care, are no longer accessible to the population due to the war, this endangers people's health. In Ukraine, attacks on medical services have affected access to medicines, vaccinations for children and increased the risk of epidemic diseases such as TB³¹.

Health systems are the first line of defence against infectious diseases and pandemics. Resilient and sustainable health systems are critical to prevent, detect, diagnose and treat infectious diseases such as TB and HIV. Along with Ukrainian nongovernment organisations and charities, the Global Fund is now bridging the gap in health service provision for the people of Ukraine.

Because treatment for TB is required over many months, it can be used as a proxy indicator for how well a health system is operating. Effective TB treatment represents a strong healthcare system that provides good access to universal health coverage and primary care systems.

A strong health system is needed for TB control and elimination, performing a range of critical functions from case detection to treatment and prevention. Effective TB control requires active case finding through screening and diagnostic tools, management of patients with appropriate treatment regimens, and support to ensure treatment completion, thereby preventing drug resistance and ongoing transmission. Health systems also implement infection control measures and provide preventive therapy to high-risk

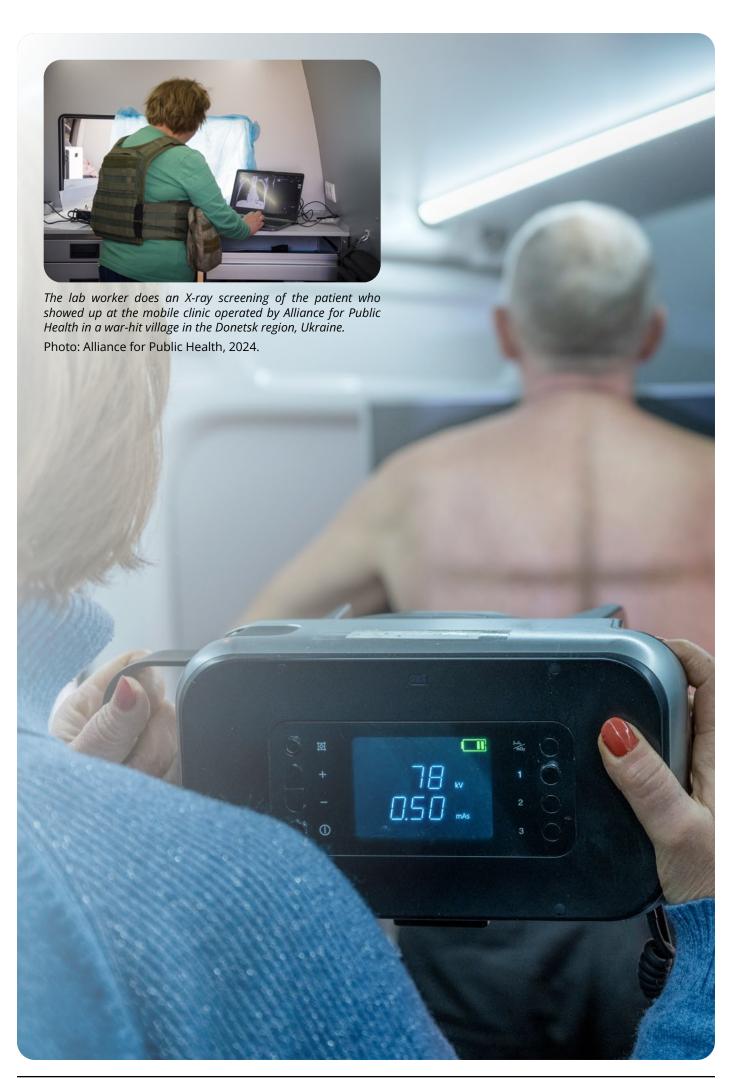


Natalya prepares sputum specimens for GeneXpert testing, which allows for the diagnosis of TB and identifies drug resistance in the Donestsk region, Ukraine. Natalya is a healthcare provider working for a TB hospital who visits villages as part of a mobile health team, operated by Alliance for Public Health and sponsored by the Global Fund.

Photo: Global Fund.

individuals. Strengthening infrastructure, training healthcare workers, and establishing robust surveillance systems are essential for delivering high-quality TB services. Community engagement and public awareness campaigns further support early diagnosis and adherence to care, while public health leadership ensures strategic planning and implementation. Collaboration across public and private sectors, as well as intersectoral partnerships, is key to addressing the broader determinants of TB.

Since the 2022 full-scale war by Russia in Ukraine, there have been over 1,500 attacks on the Ukrainian health facilities³², vehicles and health workers, injuring and killing healthcare workers, patients and infrastructure, including TB hospitals. 2,285³³ medical facilities have been damaged, 297 of them completely destroyed, causing at least US \$7 billion worth of damage to the medical infrastructure³⁴. The challenges faced by health systems in war-affected regions are complex and directly impact universal health coverage, medicines supplies, robust health plans and the ability to control infectious diseases and threats³⁵.



The Global Fund in UKraine

Since 2023, the Global Fund has invested more than US \$1 billion in Ukraine for HIV, TB and strengthening health and community systems. Despite the dangerous and challenging context in Ukraine, HIV and TB programmes have continued to operate, supported by the Global Fund. An adapted service delivery model has been implemented, using mobile care units to deliver TB and HIV testing to individuals and the military, alongside social support and mental health services for displaced persons and health workers. The funding has been used for:

- Generators for regional laboratories, where power supplies are at risk.
- Equipping vans to deliver essential medicines and supplies.
- Providing food and care packages for people with TB and HIV.
- Community-led organisations supporting displaced persons reconnect with HIV and TB services.
- Funding legal support for communities and displaced people.
- Additional mental health services, with a focus on support for women who have suffered sexual and gender-based violence as a result of the war.
- Global Fund-supported programmes are also offering support for people facing gender-based violence and stigma and discrimination due to gender identity or HIV/TB status.

The work of the Global Fund supports the impact of community-led monitoring initiatives, which have played a critical role in advancing people-centred approaches and shaping more responsive TB programming. In addition, the integration of mental health support for people with TB is an essential part of integrated TB care, supported by the Global Fund.



Vitaliy receives medical assistance at the mobile clinic operated by Alliance for Public Health in a village in the Donetsk region, Ukraine. Vitaliy lives by himself in a house without heating or electricity and is recovering from a stroke.

Photo: Global Fund, 2024.





The mobile clinic vans, operated by Alliance for Public Health and sponsored by the Global Fund, come to the villages in the war-hit Donetsk region in Eastern Ukraine. Dmytro is the driver and coordinator of the mobile health team.

Photo: Global Fund, 2024.



showed up at the mobile clinic in a hard-to-reach village in the Donetsk region, Ukraine. Yulia is a doctor providing essential services to people cut off from health care due to the war in Ukraine as part of the mobile health team, operated by the Alliance for Public Health and sponsored by the Global Fund.

Photo: Global Fund, 2024.

The Global Fund's response to global crises

The Global Fund's mission to end HIV, TB, and malaria as public health threats is under siege by a convergence of escalating global crises. The progress made over the last two decades is now at risk.

The climate emergency is accelerating, displacing millions and driving the spread of infectious diseases. Armed conflicts are multiplying, further destabilising regions and dismantling fragile health systems. Human rights are under attack, and global health inequities are worsening, denying the world's most vulnerable populations access to life-saving services.

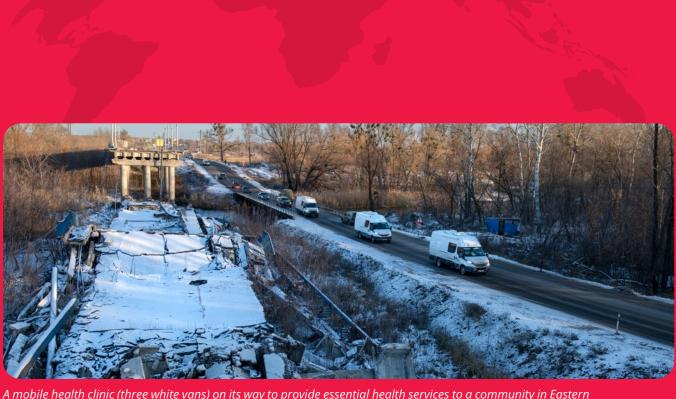
The Global Fund's agility and responsiveness to crises saves lives, with approximately onethird of Global Fund investments going to countries and communities in crises.

This is not a distant threat. It is happening now. The rise of antimicrobial resistance and outbreaks like Mpox and Ebola are not isolated incidents; they are the early warnings of the next global pandemic.

Today, over 3.5 billion people living in poverty are increasingly exposed to infectious diseases, with little protection.

Yet despite the clear and mounting dangers, political commitment and investment remain dangerously inadequate. The world is failing to meet this moment. Without urgent action, we risk a catastrophic backslide, losing momentum in the fight against HIV, TB, and malaria, deepening existing disparities, and leaving the world unprepared for future health emergencies.

The Global Fund was created for moments like this. It was born out of a global crisis and forged in the fight against seemingly insurmountable epidemics. From the early battles against HIV/ AIDS to the COVID-19 response, the Global Fund model has demonstrated agility, resilience, and impact.



A mobile health clinic (three white vans) on its way to provide essential health services to a community in Eastern Ukraine. The vans are operated by Alliance for Public Health and sponsored by the Global Fund. Photo: Global Fund / Oleksandr



Two mobile clinics operated by the Alliance for Public Health stand ready to provide care next to a building damaged by shelling in a settlement in the Donetsk region, Ukraine. The clinics travel to towns and villages where both civilian and medical infrastructure have been damaged, ensuring residents can access essential healthcare. Photo: Alliance for Public Health, 2024.

Alliance for Public Health

The full-scale war by Russia in Ukraine is not only a fight for sovereignty, but also for the health and well-being of its people. Despite the war, the country has managed to maintain its HIV and TB programmes. The Alliance for Public Health, with support from the Global Fund and partner organisations working in Ukraine, has expanded the scale of its operations, deploying innovations for health and humanitarian response. Operations focus on HIV, TB, viral hepatitis, mental health and humanitarian response. With support from the Global Fund, the Alliance for Public Health operates mobile health units providing vital healthcare services to the population.

Mobile health units are operating in both frontline and de-occupied areas. Alliance for Public Health have introduced integrated primary health services, TB/HIV screening, diagnostics and treatments – reaching 24,724 people (civilians only, living in frontline areas) in 386 remote locations in six regions close to the frontline, who would otherwise have no access to healthcare.

The contribution from the Alliance for Public Health has:

- Enabled 14,000 more people with HIV to access PrEP (66% among all enrolled into PrEP during the war).
- Provided medical and psychological support to 17,117 people with TB.
- Diagnosed over 4,000 cases of TB among vulnerable and key populations.
- Provided 5,270 people with HIV/TB coinfection from key populations accessed services with 98% treatment success.
- Increased TB detection, 2.5 times more cases of TB among internally displaced people were detected.
- Developed a special course for doctors on how to work with war veterans – 4,613 doctors have completed the course.

Other key areas of support include mental health support, winter preparedness resources, essential services for key populations, procurement of vital supplies (food, clothing, medicines) and employment and financial literacy training.

While responding to the war, they are also helping to rebuild Ukraine for the future.

Over 1.6 million Ukrainians have been supported by Alliance for Public Health since February 2022.



Doctor Roman consults with a patient at a mobile clinic operated by Alliance for Public Health in the Kherson region, Ukraine.

Photo: Alliance for Public Health, 2023.

The story of Yulia

The story of Yulia, a medical doctor providing healthcare through the mobile medical units, supported by Dmytro.

Watch the video -



In the Donetsk region, Ukraine, Doctor Yulia prepares the mobile clinic to deliver essential healthcare services to people cut off from care due to the war. The mobile health team, operated by the Alliance for Public Health with support from







Global health security

Global health security is not just a medical concern; it is a political and strategic priority that lies at the heart of national resilience and international stability. Global health security is about protecting people worldwide by preventing, detecting, and responding to infectious disease outbreaks before they become global emergencies. Defeating major diseases like HIV, TB, and malaria strengthens health systems and promotes global stability⁴⁰. This requires decisive leadership, strong institutions and investment in health systems. In today's interconnected world, where the movement of people, goods, and pathogens knows no borders, the stakes are too high for complacency.

Preventing, detecting, and responding to infectious diseases before they escalate into global crises is a sovereign responsibility with global implications. Diseases like HIV, TB, and malaria are not only public health challenges; they are threats to economic development, social cohesion, and geopolitical stability. Defeating them is essential to building resilient health systems that serve as the frontline of defence against future pandemics. Health system resilience is the capacity of institutions and communities to anticipate, absorb, and recover from shocks⁴¹; this must be seen as a cornerstone of national security. This requires political will to invest in infrastructure, workforce, governance, and service delivery, especially in conflict-affected and fragile settings. Strengthening health systems is not a luxury; it is a necessity for maintaining the integrity of states and the well-being of citizens.

The COVID-19 pandemic exposed the consequences of under-investment in public health. Butitals or evealed a critical lesson: countries with robust TB programs backed by sustained political and financial commitment responded more effectively and recovered more swiftly. These nations not only maintained or improved TB treatment coverage but also experienced lower COVID-19 incidence and mortality rates⁴². This is not a coincidence; it is evidence of what political leadership in health can achieve.

Work of Global Fund on Global Health security

Combating HIV, TB and malaria while reinforcing health systems is one of the most effective strategies for strengthening global pandemic preparedness. The Global Fund invests in health systems and disease surveillance in over 100 countries.

View the website



These investments strengthen entire health systems - train health workers, expand laboratory networks, improve disease surveillance, digitise health information systems and support countries to prepare for and effectively respond to future infectious disease outbreaks.

Importance of ODA budgets to protect global health security

The healthcare worker provides medical assistance to a patient who attended the mobile clinic in the Donetsk region, Ukraine.

Photo: Global Fund, 2024

The UK has been a strong supporter of Ukraine since the start of the war, providing military and humanitarian support. To date, the UK Government has committed £18 billion to Ukraine⁴³. Recent cuts to development budgets now undermine this support and risk making the world less safe.

In February 2025, the UK Government announced a massive reduction to the Official Development Assistance (ODA) budget from 0.5% to 0.3%⁴⁴ of Gross National Income (GNI), to fund defence spending. The move to 0.3% represents a further drop in ODA budget, which was previously reduced from the legally mandated 0.7% to 0.5% in 2021 in response to the COVID-19 pandemic on the UK economy.

This means that the ODA budget will fall from £13.8 billion in 2024 to £9.4 billion in 2028⁴⁵ – 59% below the legally mandated target. The real impact of these cuts will be felt in the poorest communities around the world. Other European countries have also reduced ODA budgets and increased defence budgets, indicating a move away from global solidarity and a focus on national security, as seen at the June 2025 NATO summit, where members agreed to increase military spending to 5% of Gross Domestic Product⁴⁶.

The cuts to ODA undermine the British and European efforts to create a more stable and safer region. Cutting development aid risks costing the UK more in future military interventions and weakening the UK's standing on the global stage, as well as our ability to influence international affairs⁴⁷. Cutting ODA to boost defence is counterproductive; it destabilises fragile regions, fuels terrorism and migration, and ultimately forces the UK into costlier military interventions. The UK's overstretched armed forces cannot compensate for the loss of diplomatic and development tools⁴⁸.



The purpose of ODA is to strengthen global peace, security, response to crises, promote global prosperity and tackle extreme poverty by helping the most vulnerable in society⁴⁹. By reducing the ODA budget, we risk increasing the vulnerability to poverty, which disproportionately impacts women and girls and reversing the gains made in public health outcomes. Out of the 30 high-burden countries for TB, 24 receive ODA⁵⁰. Reducing the ODA budget will directly impact progress on the global TB response and undermine global health security.

The Government's decision to cut ODA to 0.3% is a strategic and moral failure. Military leaders argue⁵¹ that this weakens the UK's global influence and increases long-term security threats and undermines national security. Aid and defence should not be seen as rivals but mutually supportive in ensuring global and national stability. The UK should be looking at a comprehensive security strategy that combines diplomacy, development and defence⁵². This requires true leadership and long-term investment.

Increasing ODA spend will address global poverty, reduce inequalities in access to health and education and improve global stability. Continuing to provide ODA can help make the world safer and reduce the need for military interventions in the future. ODA strengthens societies, economies and promotes global peace and security.

The Eighth Replenishment

The Next Frontline

The UK and South African Governments are cohosts of the replenishment process this year, marking the first time a donor and implementing country will jointly lead the replenishment process. While this is a step forward in ensuring that implementing countries are at the forefront, it also presents an opportunity for the UK to demonstrate genuine leadership and effective partnership working in the face of increasing geopolitical tensions worldwide.

The UK was a founding member of the Global Fund and has since been the third-largest donor, contributing £5.51 billion⁵³ since 2002.

The Eighth Replenishment is an opportunity for the UK and European donor countries to strengthen global health security in the region. The increase of infectious diseases such as drugresistant TB and HIV, as a result of the Ukraine war, shows why we need resilient health systems that can respond to crises and help keep people safe.

Funding for global health is both more necessary and more precarious because of the geopolitical situation of increased armed conflicts and increased humanitarian crises around the world. With the recent dismantling of the United States Agency for International Development, we have seen the global public health response destabilised; the ability to actively monitor and treat infectious diseases across low-resource settings is becoming more dangerous. The knock-on effect will be global economic and geopolitical instability.

Since the withdrawal of the United States funding (24 January 2025), it is estimated that there have been 10,566 additional TB-related deaths and 13,426 new TB infections associated with the funding discontinuation. If funding is not reinstated, there could be over 2.2 million additional TB deaths and 10.6 million additional TB cases globally by 2030⁵⁴.

Now is the time for the UK and European leaders to make the right choices and take a long-term view on the global health security needs of the region. Investing in health systems through the Global Fund to prevent and manage infectious diseases will make everyone safer in a volatile, unpredictable world. Investing in the Global Fund is an investment in global health and human security, which makes societies stronger, improves human capital and ensures less need for military interventions.

In the last replenishment cycle (2022-2025), the European region (including the European Commission and the UK) contributed a total of US \$5.8 billion to the Global Fund. For the Eighth Replenishment, we call on European Governments that did not pledge to make a contribution to protect global health security across the region and globally. In light of cuts to international development from the United States administration, it is even more important that the European region comes together to show its strength and act in solidarity and partnership with the Global South.

Conclusion

Ukraine has been a hotspot for drug-resistant TB and HIV in the European region. Years of progress in combating TB and HIV are now in jeopardy as TB and HIV rates continue to increase and spread across the European region. Ukraine's fragile health system balances under pressure from the war and the deliberate attacks on medical infrastructure.

In this context, the work of the Global Fund has never been more urgent. Providing the funding and resources to enable health services to be delivered to the people who need them most embodies what it means to lead with values, resilience and global solidarity. Funding the Global Fund's replenishment is not just a moral imperative; it is a political necessity. Global health security is central to economic stability, conflict prevention and geopolitical strategy. The resurgence of infectious diseases like drug-resistant TB, compounded by weakened health systems and mass migration, poses a transnational threat that no country can afford to ignore.

Cutting development aid, as the UK has done, weakens the very foundations of peace and security it claims to uphold, threatening to reverse decades of progress. By slashing ODA, we are not saving money—we are sowing the seeds of future crises that will cost far more in human lives, military expenditure, and global influence.

The Eighth Replenishment of the Global Fund represents a critical test for the UK and its European allies on international cooperation, long-term global health security investment and principled leadership. As co-host of this replenishment, the UK is uniquely positioned to demonstrate strategic alignment between its stated global ambitions and concrete actions, rebuilding international trust, and reaffirming its support for the Global Fund as a central pillar of its development policy.

Investing in the Global Fund is a strategic imperative that promotes global stability, strengthens health systems, and safeguards global health security and peace.



Recommendations

1

The UK Government should maintain its commitment to the Global Fund of £1 billion for the Eighth Replenishment.

2

European country governments (who did not pledge in 2022) must invest in the Global Fund's Eighth Replenishment to support security efforts across the region.

3

Existing European donors should consider increasing commitments to the Global Fund in a changing geopolitical landscape.

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