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Agenda item 3

Report from the Executive Director

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Introduction

Unitaid, together with other health organizations, countries, communities, and civil society actors which are engaged in the global health response, is having to deal with a complex set of challenges in its external environment. The greatest difficulties stem from a sea change in policy by the new U.S. administration, as well as broader longer-term trends that are ongoing.

European countries have also tightened funding by reducing their own Official Development Assistance (ODA) budgets as they race to build up defence capabilities in response to the situation in Europe and multiple crisis. As low- and middle-income countries (LMICs) will adjust to bearing a much larger share of the cost of public healthcare themselves, there is a unique opportunity to step up collaboration with governments that are engaged in this process. Unitaid's mission to make health products more affordable and accessible is aligned with the Lusaka Agenda, which has called for sustainable, domestically financed health systems.

Access to innovation will become more important than ever as countries seek to find efficiencies and extract maximum value from investments in public health. Our work can help to shape the global health landscape of the future. Unitaid has been working with countries and partners for two decades to drive access to innovation through market shaping in a way that no single country can achieve on its own. By negotiating lower prices, supporting and creating generic competition, and ensuring security of supply, our investments help bring about healthier, more affordable markets.

The scale of the challenge is very real. Deaths from malaria are forecast to rise by 107,000 this year alone. Cases of tuberculosis could soar by up to 32 percent next year as drug-resistant strains emerge and 2.9 million additional deaths of children and adults from HIV-related diseases, and 10 million additional cases are likely in the next five years, according to modelling and data by UNAIDS, WHO and academic sources.

We are seeing a widening gap between countries in their capacity to respond. The opportunities for access to treatment and prevention risk being more impacted in some countries than in others and as a result we may see an increase in the three diseases.

Given the situation, we took the opportunity provided by the mid-term review of Unitaid's 2023-2027 Strategy to develop various scenarios for the global health response and to review our priorities for the remainder of the strategy period. Our work will be presented and discussed with the Board. In the meantime, an informal consultation with the Executive Board was conducted by consultants from Agulhas at the invitation of the Board Chair. We face four scenarios from "downsizing" to "fragmentation" of the global health response, each with potentially dire consequences. In this context it is very welcome that the member states of the World Health Organization (WHO) have formally adopted by consensus the world's first pandemic agreement and reaffirmed the commitment of the vast majority of member states to multilateralism. It is also incumbent on the international community to review the Sustainable Development Goals (SDGs) and the commitment to elimination of the three diseases by 2030.

In the light of the trends and potential scenarios we identified, there is a leading role for each and every country to play, based on individual circumstances, in financing their own health systems. The diversity of country health systems, the epidemiological context, and other economic considerations, as well as the role of civil society in each individual country, will help determine how they navigate the challenging transition ahead.

In all of the scenarios we have outlined except that of "fragmentation", the options below will need to be considered in our next steps. Overall, three key goals will be helpful to support countries: driving efficiencies in securing optimal costs for goods and models of care and prevention; advancing integration of access to care and prevention; and achieving sustainability through a combination of domestic finance, blended finance, and whatever remains of international ODA. The international community should factor these three dimensions into their thinking on reforming global health for the future.

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Given Unitaid's unique role and mandate we have a specific role to play in the current situation. We have 20 years of experience and success in creating markets and promoting access to therapeutics and diagnostic tools at affordable prices that will be essential for the global health response. No other organization has the track record and the impact that we have in this area.

Unitaid has built strong partnerships with diverse actors including the World Health Organization (WHO), the Global Fund, the Gates Foundation, diverse implementers, civil society and communities as well as with regional organizations, including Pan American Health Organization (PAHO), the WHO Regional Office for Africa (AFRO), and the Africa Centres for Disease Control (Africa CDC). In addition, we continue to pursue country engagement at different levels.

Access to innovation is also achieved through decentralized and different models of delivery that can prove transformative in securing equitable access to care. For people in need, interventions supported by Unitaid in many countries have been game changers for HIV, TB, and malaria, including HIV self-tests, seasonal malaria chemoprevention (SMC), bed nets and various tools that serve to improve women's health.

Integration provides a clear pathway to primary health care in LMICs. Unitaid is rising to the challenge by making integration a guiding principle of our portfolio on women's health and maternal and child health. Aggregating cervical cancer, triple elimination, and access to lenacapavir will also contribute to more efficiencies and improved access to women and children's needs in many countries.

The recent report issued by the Africa CDC focused on sustainability and financing for health. The report outlined the potential in leveraging diverse sources of funding including innovative financing, a topic that will be discussed at the upcoming board meeting. We are gaining valuable experience in the work we are doing in regional manufacturing for equitable access.

Today there is a fundamental need for faster, equitable access to affordable and effective health products. Meeting this need requires making optimal use of scarce resources, securing better outcomes, and improving lives for the people who gain access to those products. By engaging with a range of global and regional health partners and countries we can accomplish far more than the sum of our parts. Unitaid's role as an innovator pursuing efficiency, health integration and sustainability has never been more relevant.

The mid-term review of Unitaid's 2023 -2027 strategy gives us an opportunity, at a critical time for Unitaid and for global health, to consider our strategic positioning and direction of travel. One of our tasks is to determine how best to apply our unique expertise to assist countries in their transition towards a domestic funding model.

As we look to the future, in the coming years, we aim to advance our work on climate and health with the Green Climate Fund. Today the need for faster, equitable access to affordable and effective health products has never been greater.

Mobilizing the funding required to implement the 2023-2027 Strategy

Recent changes in global health financing are unprecedented and since January we have worked to remain agile and forward-looking in our planning. The global health community, including governments in LMICs, is now re-evaluating its priorities, funding models, and institutional roles. We had already anticipated that 2025 would be a complex year for resource mobilization due to the replenishment cycles of the Global Fund, Gavi and the new WHO investment round as well as the inauguration of the new U.S. President. Even before the change of administration in Washington, several European countries had already begun redirecting their official development assistance (ODA), with further budget cuts announced in the first quarter, often in favour of defence and other national interests at the expense of international aid. These shifts have made 2025 an especially difficult year for securing financial resources.

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In this rapidly evolving context, strengthening and diversifying our donor base is critical. At a time when every cent counts, it is reassuring for us to hear that Unitaid's mandate remains high on the global health agenda. As an organization, we are able to demonstrate that our expertise, built up over 20 years, can be rapidly applied to a new, and considerably more complex, operating environment.

We are building on relationships with Executive Board members to deepen institutional ties and expand outreach to new donors. I would like to thank all of our donors who have confirmed their commitments for 2025 and those who have lent us political support and connected Unitaid with influential institutions. For example, UK Board members facilitated contacts with British International Investment to explore coinvestment in regional manufacturing. The core funding that we receive from our Executive Board members is the lifeblood of Unitaid, which we can never take for granted. It is the means by which we can implement the programs of work and drive a significant return on investment – which is one of the best in global health. Furthermore, targeted contributions—such as Japan's support for cervical cancer and oxygen, South Korea's backing for pandemic preparedness and the Gates Foundation's funding for maternal, newborn, and child health, build on the platform created by core funds to advance key initiatives. In addition, we have heard from the Green Climate Fund that Unitaid's Climate and Health Strategy and its approach, as defined in the area for intervention, are highly germane, innovative, and much needed in an under-resourced area. We continue to diversify our funding streams by pursuing all of these opportunities and many others with vigor.

We are also exploring new and innovative financing strategies. In partnership with the UN Advisory Alliance (UNAA), we have assessed nearly 30 innovative financing mechanisms, evaluating their alignment with Unitaid's goals and potential for economic returns. Preliminary findings will be shared at the upcoming Board meeting in June.

At the same time, to support our resource mobilization efforts, we are increasing Unitaid's visibility and reinforcing our core message that access to innovative health solutions is more vital than ever in today's funding environment. Unitaid is the global health institution that delivers results that multiply their value. These skills have never been more relevant than today. At a time when we have less money, we are using our financial resources as efficiently as possible. Furthermore, our impact speaks for itself. By delivering innovative health products in partnership with others, Unitaid helps countries and donors maximize the value of their investments. These efforts are projected to generate over US\$10 billion in savings by 2030—resources that can be redirected to other urgent needs.

SO 1: Accelerate introduction and adoption of key health products

Unitaid's portfolio of investments demonstrates a commitment to identify and introduce game-changing health products in low- and middle-income countries that advance equitable access and efficient delivery. Our work on HIV, tuberculosis and malaria is critically important at this time while our efforts to improve the health of women and children and to address global health emergencies are crucial to the success of Unitaid's mission. Unfortunately, in the present resource-constrained environment, we are unable to fund all of the opportunities we have identified. However, there are several key areas under our programmatic priorities where we have committed funding.

Unitaid's support for pre-exposure prophylaxis (PrEP) is absolutely crucial amid the current scarcity of funding for HIV which has severely impacted prevention. Building on its longstanding PrEP investments, Unitaid is focusing efforts on removing barriers to scaled use by countries of the groundbreaking new tool, lenacapavir. Requiring only two injections per year, lenacapavir holds the potential to turn the tide on new HIV infections. Unitaid is accelerating the pathway to access by supporting normative and policy steps for lenacapavir's use, including market entry of generics and country adoption. This accelerated pathway for access requires a focus on integration, efficiency, and sustainability.

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As more countries integrate HIV prevention services into national programs, it is essential that global organizations support country-led approaches that facilitate uptake and scaled use of innovative long-acting PrEP options, such as lenacapavir. From Unitaid's PrEP investments, we know that individuals who need this treatment also require other care. Integrating PrEP with other services such as comprehensive sexual and reproductive health care and mental health care can better meet the diverse needs of individuals.

To ensure efficiency, Unitaid is enabling the rollout of lenacapavir through support to WHO for rapid development of global guidelines and, in parallel, for prequalification. In the current funding landscape, low-cost products are essential to ensure an efficient response. Unitaid is therefore working in collaboration with partners to accelerate the availability of quality-assured generic lenacapavir at the lowest possible price and is supporting civil society to navigate access barriers across countries. In addition to ensuring affordable products, cost-efficient delivery models that reach high-impact populations are equally critical to make a dent in the pandemic. Unitaid is collecting real-world evidence on implementation of efficient and impactful delivery approaches for lenacapavir that are tailored to different populations. We recognize the need for diversified and large implementation programs to build the market and achieve broad impact.

Finally, sustainability requires co-creation of interventions with countries and communities. Based on unique needs identified by early adopter countries, Unitaid is working with countries and communities to advance the full suite of interventions required for the introduction of lenacapavir. Unitaid is committed to collaborating with all partners to accelerate every step of the pathway for introduction to this groundbreaking tool, while ensuring broad access to all those in need.

We are also advancing our work in TB, including community engagement that supports the use of new treatment regimens. This work is an important contribution to supporting vulnerable people and addressing the expected increase in cases and deaths resulting from interrupted care and services. Addressing antimalarial drug resistance is particularly urgent. If effective first-line antimalarial drugs were no longer available, the impact of a surge in new malaria cases would be devastating. Our work on new spatial repellents will also be essential to sustain a more cost-effective fight against malaria.

Unitaid's work to support the health of women and children is on track to address preventable deaths and make disease-specific interventions an integral part of primary healthcare. Our planned investments will help eliminate mother-to-child transmission of HIV and other infections, accelerate the elimination of cervical cancer, provide access to vital medical oxygen, and address the leading causes of death for women and babies in childbirth – notably post-partum hemorrhage and pre-eclampsia.

While we have several promising investments underway, limited funding has unfortunately forced us to pause or reduce the scope of some promising opportunities, including monoclonal antibodies, post-discharge malaria chemoprevention, and climate and health. We aim to revisit these key opportunities in the near future.

SO 2. Create systemic conditions for sustainable equitable access

Strengthening health systems against future health crisis

Affordable and quality-assured health products should be available to everyone across the globe. However, in LMICs the vast majority of people do not have access to affordable tests, treatments, and other health products. For example, Africa bears 25% of the global disease burden, yet imports more than 95% of the active pharmaceutical ingredients and 70% of the medicines it consumes. Furthermore, the continent has 600 health product-manufacturing sites for a population of 1.1 billion. This high level of dependence creates vulnerabilities across several areas including trade, quality assurance, and regulatory compliance which collectively can threaten the achievement and long-term sustainability of equitable access in public health programs.

This reliance becomes particularly problematic in the event of a health emergency, where supply chain disruption, export restrictions, and global competition for limited resources can severely limit timely access to unitaid.org

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essential medical products. In addition, insufficient local manufacturing and regulatory capacity undermine the ability of LMICs to ensure consistent quality, affordability, and availability of critical health commodities. To strengthen health system resilience and improve health outcomes, there is an urgent need to reduce dependence on imports by investing in regional production, enhancing regulatory harmonization, and building supply chain infrastructure across the continent. Accordingly, Unitaid continues to actively engage with countries and key actors to help address the critical challenges posed by countries' reliance on imported health products—particularly in Africa-

At Unitaid's flagship World Health Assembly event in May, Unitaid and the Africa Centres for Disease Control and Prevention (Africa CDC) signed a Memorandum of Understanding, marking the establishment of a new strategic partnership focused on scaling up regional manufacturing as a central pillar of Africa's health security and autonomy. The aim is to expand the production of essential health products in Africa and improve sustainable access to medicines, diagnostics, and medical oxygen across the continent. The initiative will focus on major health challenges including HIV, tuberculosis, malaria, hepatitis, cervical cancer, sexually transmitted infections, and other illnesses, especially those impacting women and children. Under this agreement, Unitaid and Africa CDC will collaborate to address regulatory, financial, and market obstacles that limit regional production. The partnership will also work towards strengthening pandemic preparedness by advancing the creation and accessibility of health tools that are developed, manufactured, and distributed across Africa. Unitaid is working towards formalizing a similar agreement with AUDA NEPAD in the new future.

The adoption of the Pandemic Agreement at the 78th World Health Assembly, on 20 May 2025, marks a key milestone. Its provisions, including research and development (R&D), sustainable and diversified local production, technology transfer and regulatory systems strengthening, closely align with Unitaid's ongoing efforts in pandemic prevention, preparedness, and response (PPPR). Our investments with our national, regional, and global collaborators and partners, illustrate that there is a viable path forward to operationalize this crucial agreement.

The COVID-19 pandemic exposed critical gaps in the global response to health emergencies, revealing that without strong preparedness, the world remains vulnerable to future threats. Key areas requiring urgent attention include insufficient and poorly directed R&D funding for medical countermeasures such as treatments and diagnostics, complex regulatory pathways, and fragile supply chains resulting from geographically concentrated manufacturing. Addressing these issues is essential to ensure rapid and effective responses to emerging pathogens.

Unitaid is helping shift the focus from crisis response to long-term preparedness through strategic investments in PPPR. By reinforcing the link between regional production and pandemic readiness, Unitaid is shaping global approaches to achieving more efficient, equitable preparedness. A core part of this strategy is advancing regional manufacturing for equitable access (RMEA), aimed at building the capacity to locally produce essential health tools, including therapeutics and diagnostics, and medical oxygen. We are also working to an ecosystem that addresses issues and prepares for access to medical counter measures in a systemic manner. Supporting the Medicines Patent Pool (MPP) in negotiating voluntary licenses for three COVID-19 antivirals to facilitate affordable access in low- and middle-income countries (LMICs), is one example. To further strengthen PPPR, innovation, and manufacturing capabilities, Unitaid is deepening collaboration with regional partners.

In addition, Unitaid continues to champion equitable access to essential health tools in collaboration with other stakeholders. This includes working with the WHO-led interim Medical Countermeasures network (iMCM-Net) and engaging in multilateral fora such as the G7 and G20 to advocate for timely and equitable access to countermeasures against pandemic threats. Unitaid is also a key partner in the therapeutics pillar of the 100 Days Mission. To advance the mission's objectives, Unitaid is working on establishing a Therapeutics Development Coalition. This Coalition, formed in collaboration with industry, academia, governments, and

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international organizations, aims to enhance coordination and investment in end-to-end therapeutic development, strengthening the pipeline of candidates targeting pathogens with pandemic potential.

Looking ahead, the upcoming G20 Health Working Group meeting in South Africa offers a vital platform for Unitaid to showcase its dual role as both a strategic investor in areas such as RMEA and oxygen, and as a global influencer through partnerships with diverse stakeholders.

Regional production of medical oxygen

If the COVID-19 pandemic taught us anything, it is that oxygen must be a fundamental part of healthcare infrastructure, not just an emergency intervention. Oxygen is essential for treating a breadth of health issues including pneumonia, advanced HIV, severe tuberculosis, and malaria, as well as supporting maternal care, surgery, and emergency treatment.

Unitaid is working with regional actors to further strengthen PPPR, innovation, and manufacturing capabilities. At the end of last year, in close collaboration with partners, Unitaid launched a regional manufacturing initiative to improve access to medical oxygen in sub-Saharan Africa. Unitaid's East African Program of Oxygen Access (EAPOA) is now in its second phase and is expanding into Tanzania as part of a \$22 million initiative to significantly improve access to medical oxygen through a hub-and-spoke distribution model, with regional partnerships including TOL Gases Plc and the Tanzanian Ministry of Health. The expanded infrastructure will triple regional oxygen production, lower prices by up to 25%, and benefit neighbouring countries including Malawi, Mozambique, Uganda, and Zambia.

Ensuring equitable access is essential and requires immediate action and long-term, sustainable solutions to meet growing demand. By increasing local production, the program provides a more reliable oxygen supply and strengthens the long-term resilience of healthcare systems. Unitaid is committed to supporting initiatives that drive enduring impact, and we will continue to work towards ensuring that medical oxygen becomes an integrated, self-sufficient part of the healthcare system in East and Southern Africa by focusing on sustainability, market competition and affordability.

SO 3: Foster inclusive and demand driven partnerships

Country engagement

To effectively tackle access barriers to high-quality healthcare and to develop sustainable solutions, Unitaid collaborates with a wide range of partners who bring diverse expertise. Currently Unitaid's investments are implemented in more than 60 countries, and we would like all countries to benefit from our overarching work. At the same time, we are an organization with a unique mandate and 115 staff. Unitaid's size, capacity and unique organizational role means our country engagement must be realistic in scope, credible, impactful and resourced. This requires that our cooperation with countries be both direct and through several partners, including WHO regional and country offices and regional intergovernmental organizations.

Unitaid's partnership team was established in mid-2024 to bring a more strategic and coordinated approach to our engagement with diverse stakeholders. Since the formation of the team Unitaid has enhanced collaboration with several countries, signing an updated Memorandum of Understanding (MoU) with the National Department of Health in South Africa and developing an updated MoU with Kenya. These agreements and related co-developed workplans, enable collaboration on shared priorities.

By engaging with government ministries and prioritizing country-led strategies, Unitaid is working to advance the adoption and scale-up of improved health solutions. This approach has the potential to enhance impact, strengthen political and financial commitments to health innovations, and strengthen Unitaid's role as a key partner in delivering sustainable, cost-effective global health solutions that generate lasting benefits for people

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and communities. This has become even more critical in light of the recent downturn in overseas development funding.

We are deepening our partnership on cervical cancer with country governments, with an emphasis on sustainable financing to complement domestic funding commitments and Unitaid's own investments. Partnering with countries with a focus on their priorities and working in new ways, is essential for long term impact and will be key to managing risks related to implementation and scalability.

Unitaid's engagement with the governments of South Africa and Rwanda exemplifies a transformative collaboration aimed at eliminating cervical cancer. In South Africa, Unitaid's investment has been pivotal in transitioning from liquid-based cytology to Human papillomavirus (HPV) molecular testing as the primary screening method. This shift, supported by Unitaid, has significantly accelerated the country's efforts towards achieving the WHO 90-70-90 targets by 2030. Unitaid is the only partner in South Africa supporting the country's cervical cancer secondary prevention ambitions. This collaboration will not only address immediate needs but also establish a scalable model for decentralized care, providing a roadmap for other countries to fast-track progress and sustainably reach elimination targets.

Rwanda's commitment to cervical cancer elimination is demonstrated by the launch of its Accelerated Plan for Cervical Cancer Elimination (2024–2027), which is based on years of building evidence and strategies with Unitaid's funding. This plan aims to reach 70% screening and 90% pre-cancer treatment coverage by 2027, three years ahead of the global timeline. Unitaid's catalytic support is expected to further advance domestic and partner financing against the overall target of US\$16 million needed to reach the screening target.

Furthermore, Unitaid has conducted significant engagement with the Ministry of Health in Kenya, developing an updated MoU and workplan which will be finalized in 2025. This provides a foundation for closer working relations and there is an immediate opportunity focused on maternal and newborn health. The new SUPREME portfolio will be a key area for collaboration in providing essential health products for preventing and addressing post-partum haemorrhage and pre-eclampsia morbidity and mortality. Unitaid and the Kenyan Ministry of Health will establish an approach on which the grantees and local stakeholders can develop the conceptual platform and agreed actions.

Global alliances

Unitaid is engaged across a number of diverse global alliances, including Unitaid's partnership with the Global Fund, which remains central to achieving sustainable and equitable access to life-saving health products. Formalized through a Memorandum of Understanding in June 2024, the collaboration brings together Unitaid's catalytic role in innovation with the Global Fund's scale and reach. This strategic alignment enables us to cocreate solutions that are piloted, validated, and then scaled in support of country-led responses.

Unitaid plays a distinct value-adding role by creating markets for transformative health products—de-risking early introduction, generating evidence, and shaping demand. We then work with partners like the Global Fund to sustain and expand these markets, leveraging their capacity for large-scale procurement and delivery. At its 53rd Board Meeting in May 2025, the Global Fund recognized the depth of this collaboration, highlighting Unitaid's involvement in the majority of its market shaping initiatives.

Recent joint successes include the scale-up of dual active ingredient insecticide-treated nets—initially codeveloped through the New Nets Project—and the planned introduction of long-acting injectable PrEP, where Unitaid's early-stage investments are paving the way for broader access through Global Fund-supported programs. These efforts demonstrate how coordinated action can accelerate the availability of next-generation products and shorten the time from innovation to impact.

This partnership exemplifies the kind of strategic, demand-driven collaboration that Unitaid seeks to foster across the global health ecosystem. In a context of constrained resources and rapidly evolving global health

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priorities, Unitaid's catalytic model—anchored in strong, complementary partnerships—is more essential than ever. Working in close alignment with partners like the Global Fund helps reduce duplication, sharpen our focus, and improve our ability to work with countries to deliver greater impact with fewer resources. Through such collaboration, we can ensure that innovations reach those who need them most—faster, more affordably, and at scale.

We continue to play a vital role in advancing equitable access to innovative health solutions, complementing the G20's broader goals to strengthen health systems, improve access to essential medical products, and enhance pandemic preparedness. This year, Unitaid is actively supporting the South African G20 Presidency by engaging on key health priorities, including advancing Universal Health Coverage (UHC) through strengthened Primary Health Care (PHC); promoting regional and domestic manufacturing in the context of PPPR and broader access to essential health products; and ensuring that research, technology, and evidence-based solutions drive health and economic progress.

At the meeting in March, Unitaid co-hosted two high-impact events. One, in partnership with South Africa and the World Health Organization (WHO), highlighted the role of communities and civil society in promoting PHC, UHC, and financial protection. The second, focused on cervical cancer elimination, by positioning non-communicable diseases and gender equity within PHC and UHC frameworks. Both events underscored Unitaid's value and deepened partnerships, including through the signing of a Memorandum of Understanding (MOU) with South Africa that reinforces our shared commitment to address HIV, TB, and cervical cancer, while strengthening African health programs through regional production of health products.

Unitaid's participation in the G20 High-Level Working Group also reinforced our leadership in global health innovation and our commitment to supporting country-driven solutions and removing access barriers. Looking ahead, Unitaid will continue to reinforce its leadership within the G20 by aligning with South Africa's health agenda to contribute technical expertise and influence meaningful commitments. This includes expanding partnerships and donor engagement to unlock collaborative investment opportunities and championing sustainable health financing through domestic resource mobilization and innovative mechanisms.

In addition, in November Unitaid intends to send a small, focused delegation to COP30 to represent our efforts in advancing the Climate and Health Strategy. This will build on our previous attendance at the COP28, where Unitaid launched the Climate and Health Strategy at the French Pavilion, and COP29 where we convened leading voices to discuss what it would take to bring to market the world's first decarbonized medicine at the WHO Pavilion. At COP30, which will be held in Natal, Brazil, we intend to shine a strong light on the importance of innovation in health products in order to adapt to our changing planet, and how adaptation can go hand in hand with effective mitigation efforts for the future. In this way, we are taking care of the problems health care systems face today, while doing our part to resolve them in the longer term. Looking ahead to COP30 in November, Unitaid's delegation will actively contribute to key discussions and events, engage in bilateral meetings, and further advance the climate and health agenda. The COP offers a unique platform to drive dialogue at the intersection of climate and health, including through the Alliance for Transformative Action on Climate and Health (ATACH), where Unitaid is a member of the steering group.

The conference will also be a valuable moment to take stock of progress, discuss challenges in implementation of climate and health priorities, and identify new partnership opportunities to help advance Unitaid's Climate and Health Strategy. In the two years since Unitaid launched its strategy it has increasingly demonstrated the important role that climate-smart health products can play, carving out a clear and unique niche within the sector. This has been recognized by Executive Board Members, LMIC governments, and development partners in the climate and the health sectors.

At COP30, we are planning to co-host side events with like-minded partners. Unitaid welcomes opportunities to work with Executive Board Members to integrate discussions and key knowledge products into the agenda of the COP, their pavilions, and events. Thanks to the Government of Brazil, we are delighted to participate unitaid.org

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in the Global Climate and Health Conference in Brasilia in July 2025. This meeting serves as a key preparatory milestone for shaping the climate and health agenda ahead of COP30. We are pleased to see that during the WHA, at an event convened by Brazil, Egypt and the United Kingdom, climate change and supply chains were included within the plans for Natal. This provides an excellent platform for us to work together, bring on board new voices and encourage others to support innovative health products for a just transition.

Working with communities and civil society

Communities and civil society lie at the heart of the global health response and are key drivers of our success in addressing unmet health challenges. In February 2025, a Community and Civil Society Technical Advisor was recruited to complete the partnerships team that was established in 2024. This key role is mandated to provide leadership and vision for Unitaid's work on Communities and Civil Society Engagement (CCSE) and to advance guidance on ethical engagement of communities to ensure successful implementation of the CCSE strategy.

Over the past year we have ensured that CCSE is systematically included in proposal reviews, project plans, and grant development processes. In addition, we finalized the review, and operationalization, of key community engagement tools including a Community Engagement Framework, Community Advisory Board (CAB) model, and Small Grants model. These tools facilitate the standardization and scale-up of CCSE best practices across Unitaid functions. To illustrate this point, our latest performance report indicates that project proposals that had opportunities for early CCSE integration in 2024 had strong CCSE engagement that helped to raise overall project performance scores.

Our proactive engagement with Unitaid Communities and NGO delegations has strengthened trust and accountability, reinforcing Unitaid's credibility with civil society stakeholders. We achieved this through enhanced communication and collaboration, investment in formalizing and strengthening networks, including Unitaid's Advocates Network (UAN), and co-creation of key events and linking learning processes with the most affected communities.

Optimizing the Secretariat and systems for greater efficiency, improved quality and performance

Unitaid's staff remains our greatest asset. I am pleased to report that the results of the 2024 staff survey reflect a significant and encouraging improvement across key indicators of staff satisfaction (KPI H.1), confirming that our sustained investment in culture and systems change is yielding tangible results. Initiatives such as feedback and leadership training, the Staff and Management Charter, informal exchange forums, and enhanced internal communication have contributed to a more open, collaborative, and supportive work environment. We have also strengthened career development pathways and improved operational efficiency through streamlined processes and digital tools, with further enhancements planned in 2025 through the implementation of Salesforce.

At the same time, we remain acutely aware of the need to further improve staff wellbeing (KPI H.2). This includes promoting team-led initiatives, improving workload distribution, ensuring clearer guidance and leadership communication, and fostering a sense of connection and purpose. We also recognize that the current instability across the global health ecosystem — including shifts in global health governance, evolving funding landscapes, and institutional change among key partners — brings both uncertainty and increased pressure that can affect our staff, directly and indirectly. Our response must therefore be grounded in this wider context.

Looking ahead, we have set out five key internal priorities: supporting staff through change with resilience and care; reinforcing a clear and motivating organizational vision; ensuring psychological safety; fostering stronger collaboration within the Senior Management Team; and driving team cohesion through concrete, inclusive

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engagement activities. These focus areas will remain central to our internal agenda in 2025, as we continue to navigate change together.

With regards to Unitaid's operations, during the first half of 2025 the Secretariat has taken a range of actions to strengthen operational performance, efficiency, and quality. As an organization committed to continuous improvement, there have been many incremental improvements across all areas of our work, ranging from administrative functions, to how we plan, prioritize, and ensure the impact of our investments.

One important area of work that I would like to highlight is an initiative started in 2024 to establish a unified information management system within the Secretariat that will digitize and automate many of its resource mobilization and investment planning, development, and management processes. This is expected to not only reduce staff workload, increase our speed, and promote standardized approaches, but also enable more timely access to data and knowledge that can inform our work. During the first half of 2025, this project brought together staff from across the Secretariat in a series of targeted workshops to review existing processes, identify ways to optimize them, and where needed to harmonize ways of working to achieve best practices. The establishment of this system responds to the recommendations from Unitaid's recent Functional Review, as well as earlier recommendations from external audits and internal assurance reviews by WHO/IOS.

Mid-term Review

As I stated in my introduction, this year we initiated the mid-term review of Unitaid's 2023–2027 Strategy. The review plays a key role in assessing our progress to date, identifying and reflecting on challenges, considering the way we look for which key priorities to focus on, as well as lessons learned that can inform how we navigate the latter half of our current strategy and prepare for the future. This is a critical moment for Unitaid, as profound changes are rapidly taking place in global health and more broadly. The exercise provides a timely opportunity for us, in collaboration with the Board, to consider our strategic positioning and direction of travel in the immediate term, and in the years to come.

The Unitaid Policy and Strategy Committee (PSC) meeting in April kicked off the review and served as an introduction to the consultants from Agulhas. In May we held an ad hoc PSC meeting focused on the inception report, including the review approach, methodology and key questions. Elements related to the mid-term review, the changing context and the implications for prioritization will be discussed in both the informal Board consultation on 10 June and during the official Board meeting on 12 June. The informal consultation aims to bring forward emerging key considerations and takeaways from the interviews conducted with Board delegations and to foster consensus around how Unitaid can best adjust in a changing environment. The Unitaid Executive Board meeting in June will serve as a platform for the Secretariat and the mid-term review consultants to present an update on the review's progress, focusing particularly on areas 1 (shifting context) and 4 (prioritization). This update will include an analysis of the external environment, exploration of various scenarios, and the related implications. In addition, the meeting will outline key considerations and preliminary strategic and operational priorities. The review is not only a moment of reflection but also one of recalibration. We are taking a comprehensive and inclusive approach—engaging internal teams, partners, and external stakeholders—to ensure we capture what is working well, where adjustments may be needed, and how we can remain agile and impactful in a shifting landscape. Our aim is to ensure that Unitaid continues to be a catalytic force in global health—delivering on our mandate to bring innovative health products to the people who need them most, and doing so with an eye toward equity, sustainability, and resilience.

I would like to thank the Board for your engagement in this process to date, which has been of vital importance. We will continue to regularly consult with the Board throughout the review as together we map the road that lies ahead. The Board's insights and guidance will be essential in shaping a strategic trajectory that is bold, responsive, and aligned with the evolving needs of the communities we serve.

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Conclusion

The biggest upheaval in development cooperation and humanitarian assistance in a generation has put 20 years of progress in global health in jeopardy. With global health funding at risk, countries need all the support they can get to implement smart solutions that help safeguard the health of their populations at lower cost.

Our approach works by ensuring scarce resources are used effectively to serve country needs. The reduced prices and greater efficiencies that come with the products we deliver with partners are set to yield more than \$10 billion in savings by 2030.

As countries switch to a health funding model that relies more heavily on domestic government resources, Unitaid can help build capacity for long-term resilience in a number of ways, including by helping to develop regional manufacturing of critical tools such as medical oxygen; by pursuing long-acting Pre-Exposure Prophylaxis (PrEP), a long acting injectable that can reverse the growth trajectory of HIV; and by working to integrate essential maternal health products into antenatal care, ensuring women have access to the care they need where they need it.

Innovative tools and approaches, adapted to and centred on patients' needs, hold the key to transforming healthcare and have a lasting impact, which makes health systems more efficient and accessible for the long term.

Best regards,

Dr. Philippe Duneton

Executive Director Unitaid

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