



INFORMATION SESSION

Grant Cycle 8 Strategic Shifts

Overview

19 March 2026

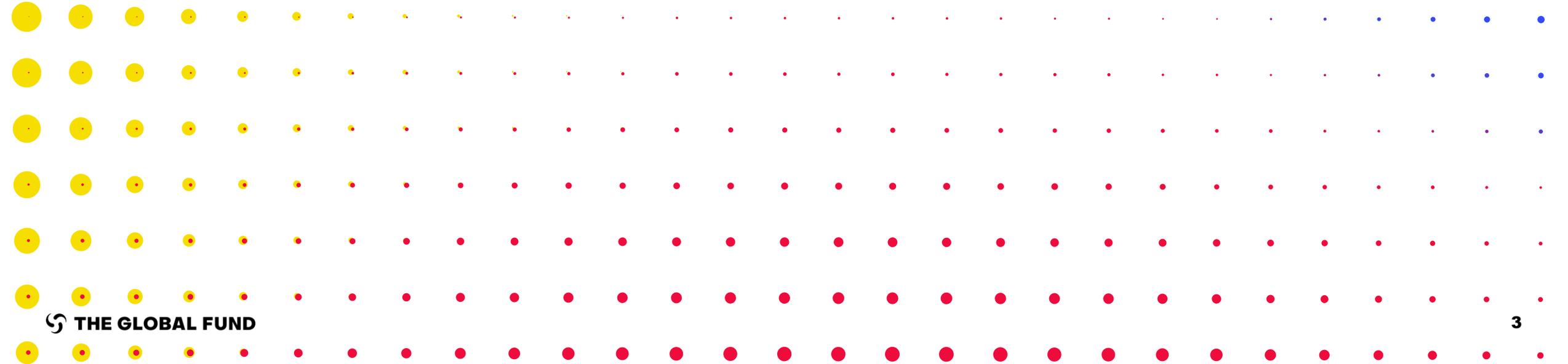
Agenda

- 1** GC8 Strategic Shifts Overview
 - 2** Effective, predictable transitioning from Global Fund financing
 - 3** Rigorous prioritization of Global Fund investments
 - 4** Integrate health systems and service-delivery
 - 5** Community systems and financing
 - 6** Optimize domestic resources and effective co-financing
 - 7** Next steps
 - 8** Q&A
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1

GC8 Strategic Shifts Overview



Context for Grant Cycle 8 (GC8)

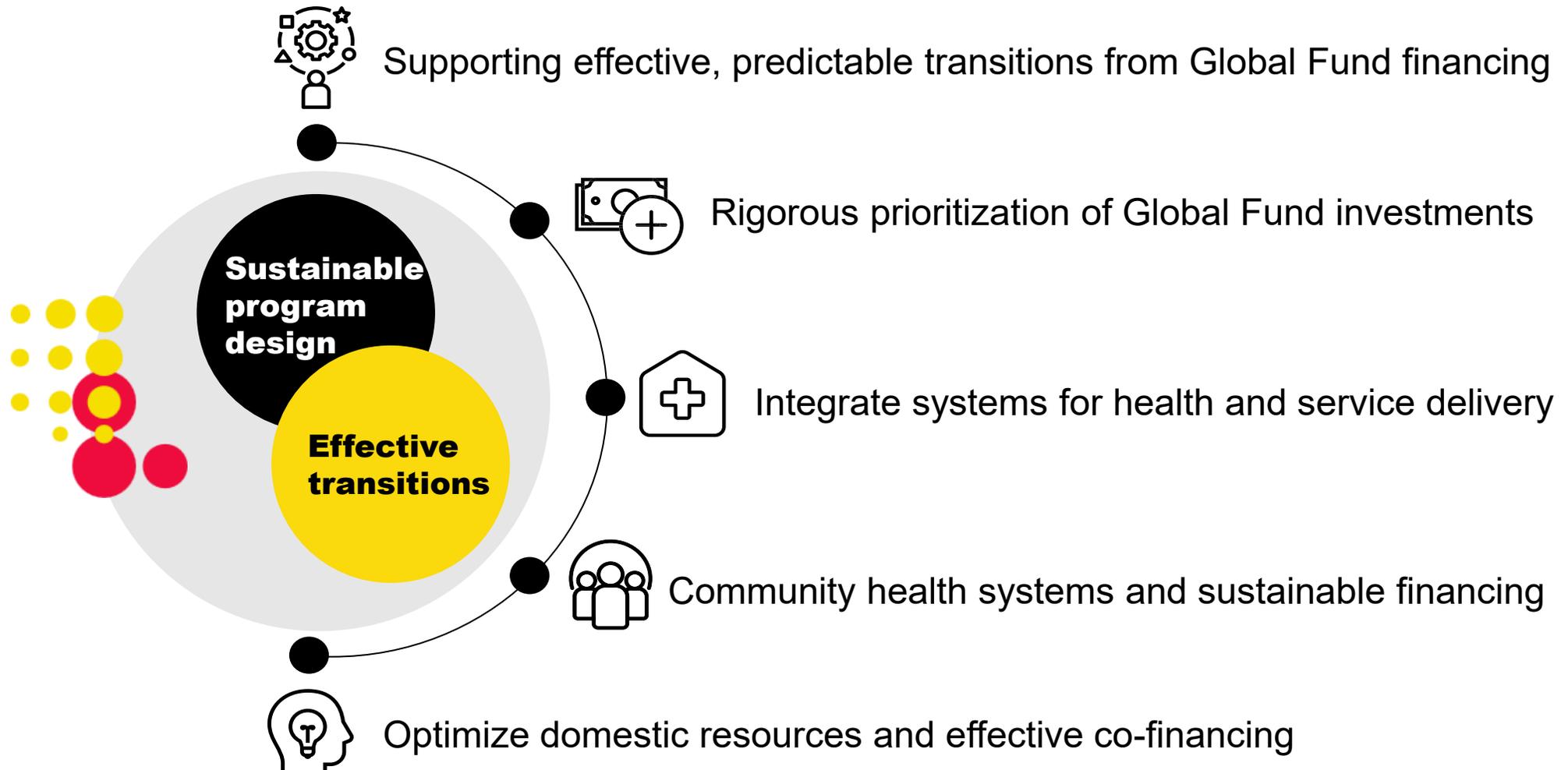
- **Fast-evolving and reduced** health financing landscape.
- Countries' desire to advance **self-reliance** for health outcomes.

The Global Fund is making **considerable changes** in GC8 in support of:

Sustainable program design
Effective transitions

Allocation Letters include information on transition timelines (as applicable) and on key programmatic and systems for health areas that should be prioritized to **translate the strategic shifts into effective and sustainable outcomes.**

Grant cycle 8 strategic shifts: on the path to self-reliance





2

Effective, predictable transitioning from Global Fund financing

GC8 and GC9 Transition Timelines



Final Allocation in GC8

- 63 components across 35 countries and 3 multi-countries.
- All components will have 4-5 to years to plan for eventual transition.



Final Allocation in GC9

- 21 components across 12 countries.
- All country components will have a minimum of 7 years to plan for transition.

- Support **predictability and transparency** for countries
- Encourage **gradual transitions** with sufficient time for country planning.
- **Avoid abrupt transitions**, including in the event of funding changes.



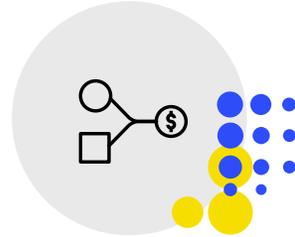
Global Fund's support to transition

Work backwards from a defined end-date to ensure that 1) funding request development and grant-design, 2) co-financing commitments; and 3) overall country engagement supports the end goal of effective transitions



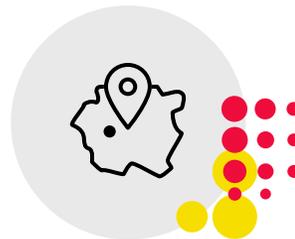
Funding request development and grant design

- Leverage grant financing, support investments on pathway towards transition.
 - Alignment and transfer of core program costs to national budgets.
 - Address critical transition challenges and barriers; reflect national planning for transition.
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Co-financing commitments

Co-financing focus areas will be highly differentiated across the portfolio, with strong focus on quality programmatic commitments.



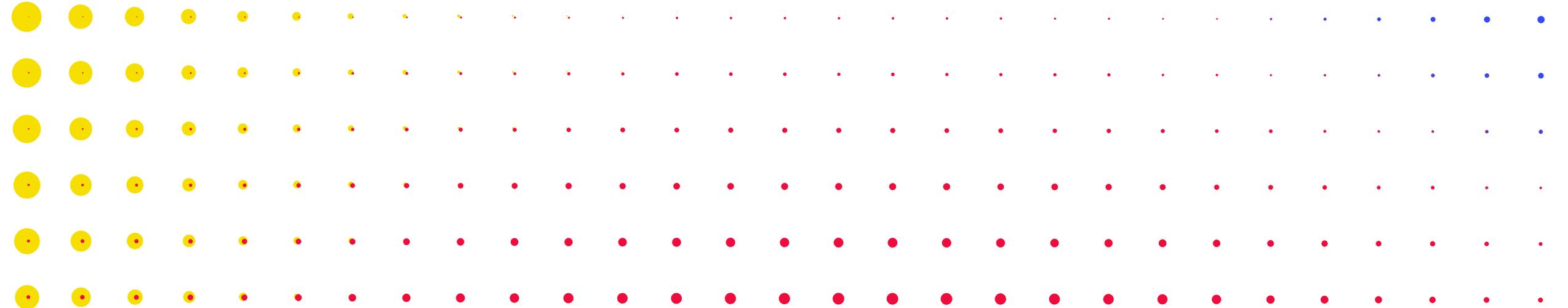
Overall country engagement

Leverage country dialogue including national planning, funding request and grant development so GC8 allocations are effectively positioned in the pathway to relevant transition timelines.



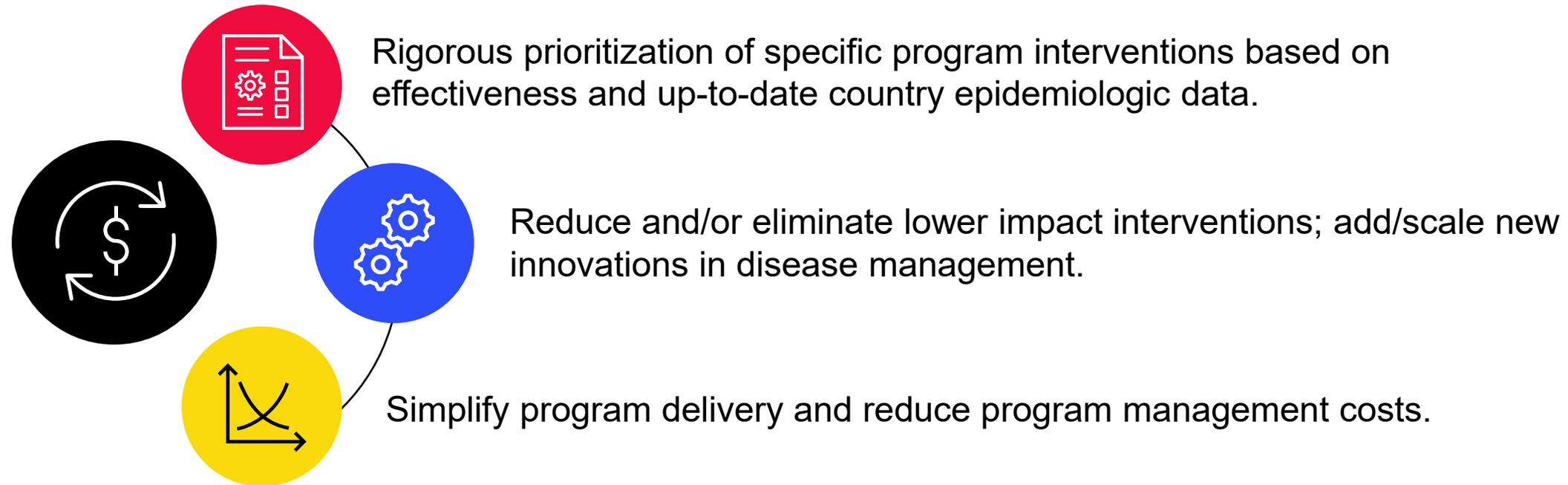
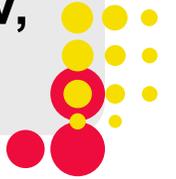
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Rigorous prioritization of Global Fund investments



Rigorous Prioritization of Global Fund investments

Prioritize the evidence-based interventions most critical to maximizing impact on HIV, TB and malaria including those that strengthen health and community systems.



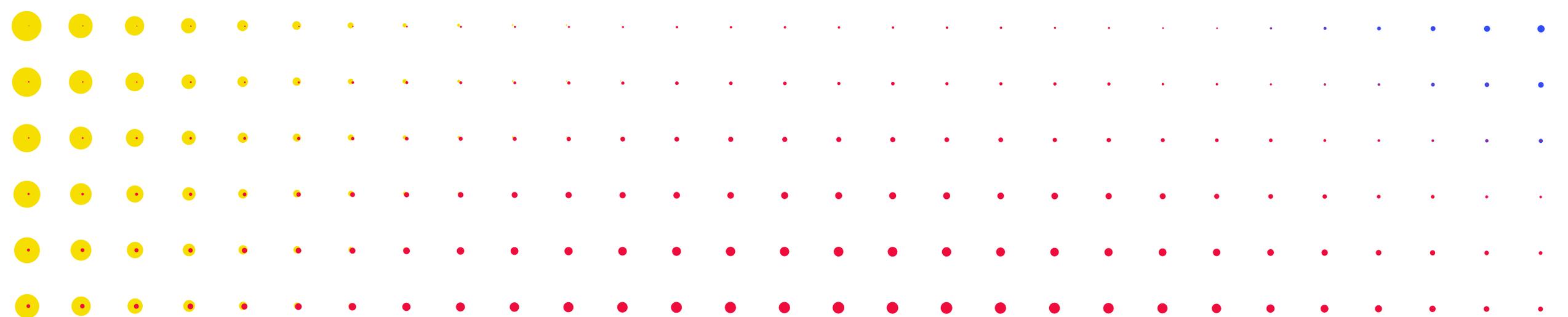
Access to innovations and life saving products





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Integrate health systems and service-delivery



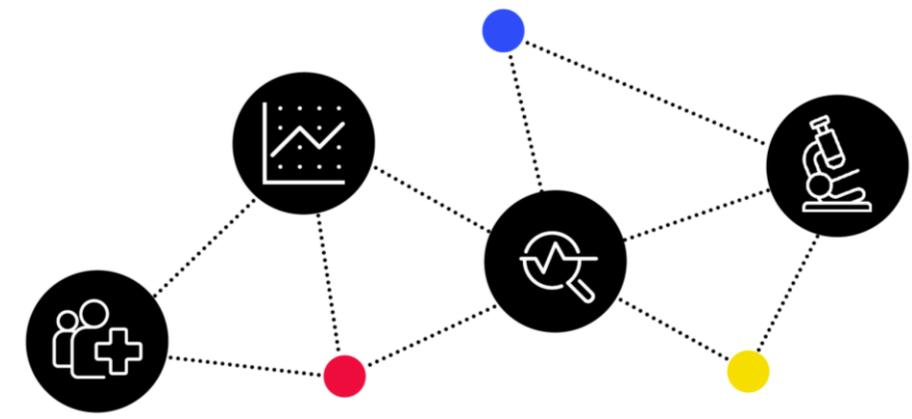
Accelerating Integration of HIV, TB and Malaria to improve Health Outcomes

Strengthen or initiate integration of services and systems for HIV, TB and malaria in a coordinated way within primary health care (PHC)

Integration of service delivery



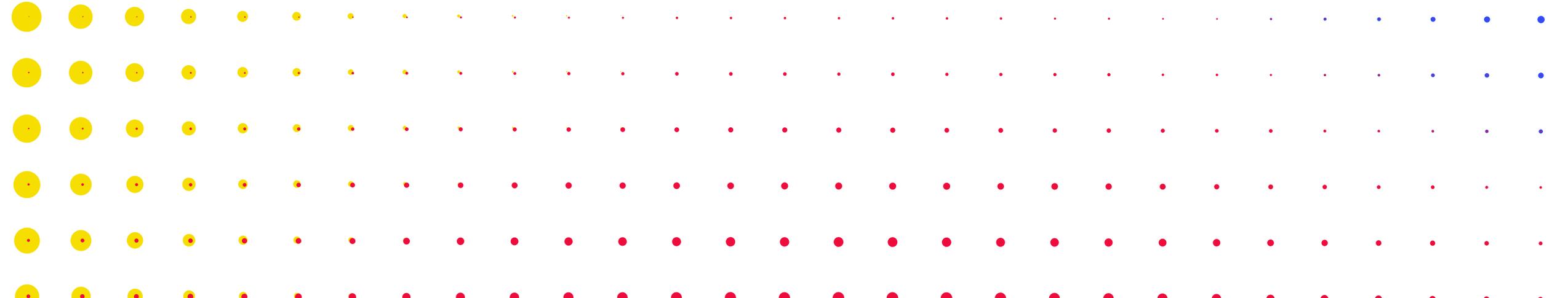
Integration of health systems





5

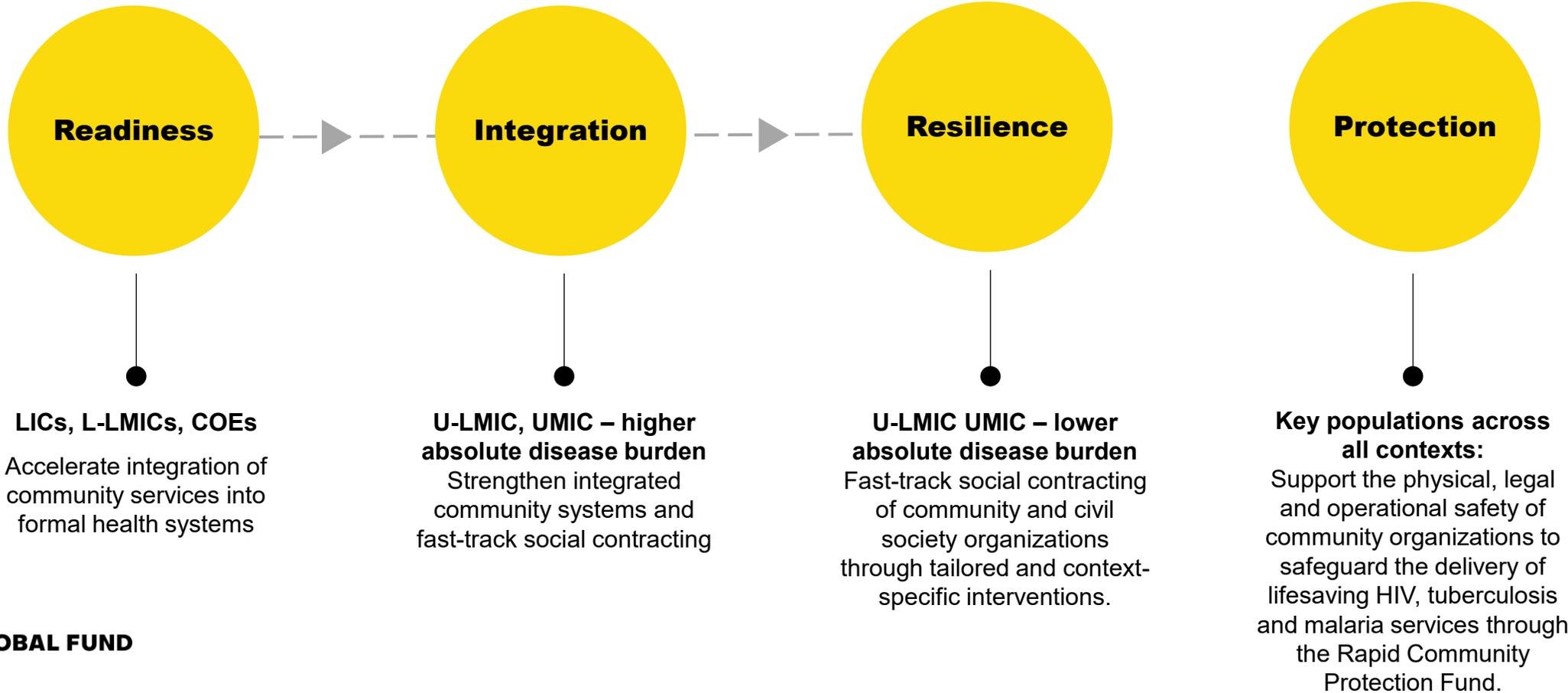
Community systems & financing



Strengthen the integration and financing of community systems

Use country context – **epidemiologic and economic** – as an investment guide for what and how to finance community systems

- 4 Pillars





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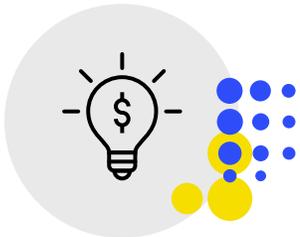
Optimize domestic resources and effective co-financing

Optimize domestic resources



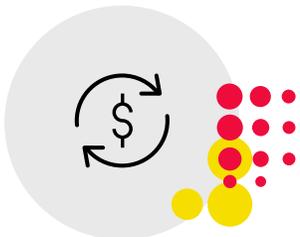
Domestic co-financing

- Revisions to improve differentiation and quality of domestic co-financing.



NextGen market shaping

- Facilitate PPM/wambo.org access for competitively priced, quality assured health products with domestic resources
- Scale-up of the **non-grant financed procurement through PPM/wambo.org**, including in those countries transitioning from Global Fund financing.



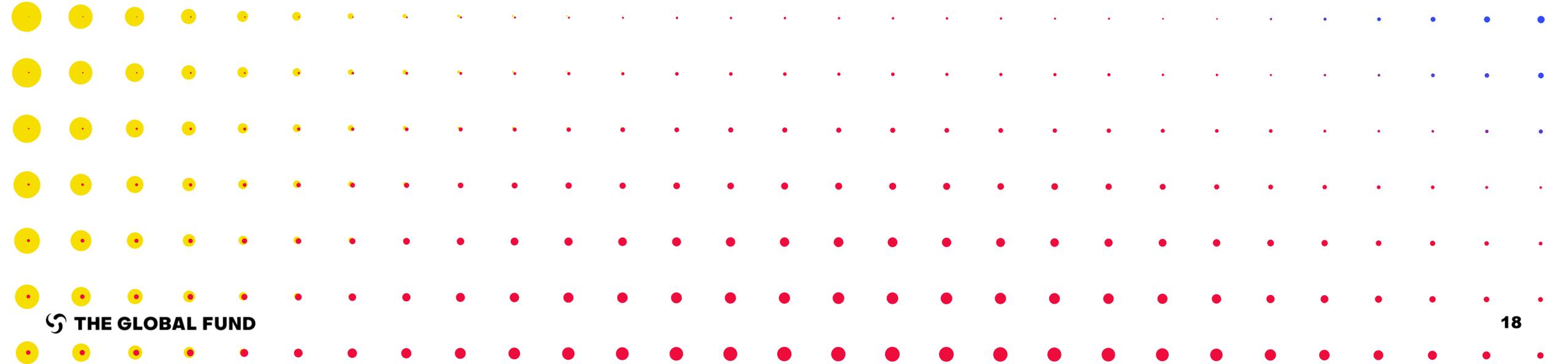
Financial systems and models

- Increase blended financing opportunities.
- Leveraging Debt2Health opportunities.
- Expanding Public Financial Management support.



8

Next steps



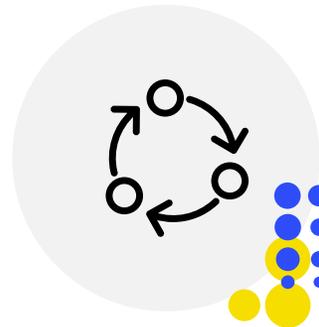
Next steps (1/2)

Using the Global Fund's grant cycle to realize the GC8 strategic shifts



What does success look like?

In-country disease programs are on track towards sustainable programming and a planned transition pathway, aiming to integrate HIV, TB and malaria services and/or maintain or scale up gains against HIV, TB, and malaria after external support ends.



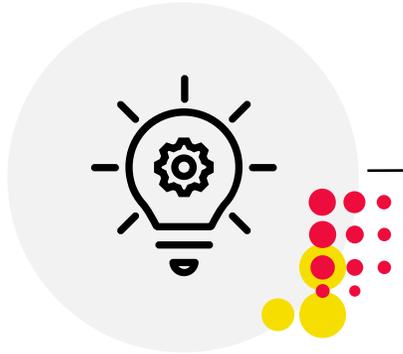
How can the Grant-Life Cycle enable this goal?

Global Fund funding request development can support this through (example):

- Country Dialogue: supporting this process through health sector engagement.

Next steps (2/2)

Using the Global Fund's grant cycle to realize the GC8 strategic shifts



What are some of the practical actions to start with?

- Identify key milestones on the pathway towards a transition timeline (where GC8 is final allocation)
- Make a plan for key investments to be transferred to domestic budgets (all countries)
- Prioritize (and deprioritize) interventions based on epi and program coverage; plans to simplify delivery
- Identify opportunities for integration of relevant areas of HIV, TB and malaria programs into PHC
- Look for opportunities to more closely integrate community and private systems with national health systems
- Establish social contracting mechanisms (or similar) so critical functions (such as community outreach) are sustainable as part of the national approach in the long term.

Thank you



The Global Fund to Fight
AIDS, Tuberculosis and Malaria

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