



**INFORMATION SESSION**

# **Grant Cycle 8: Allocation and Catalytic Investments**

25 March 2026

# Agenda

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**1**

**GC8 Allocations**

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**2**

**Catalytic Investments**

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**3**

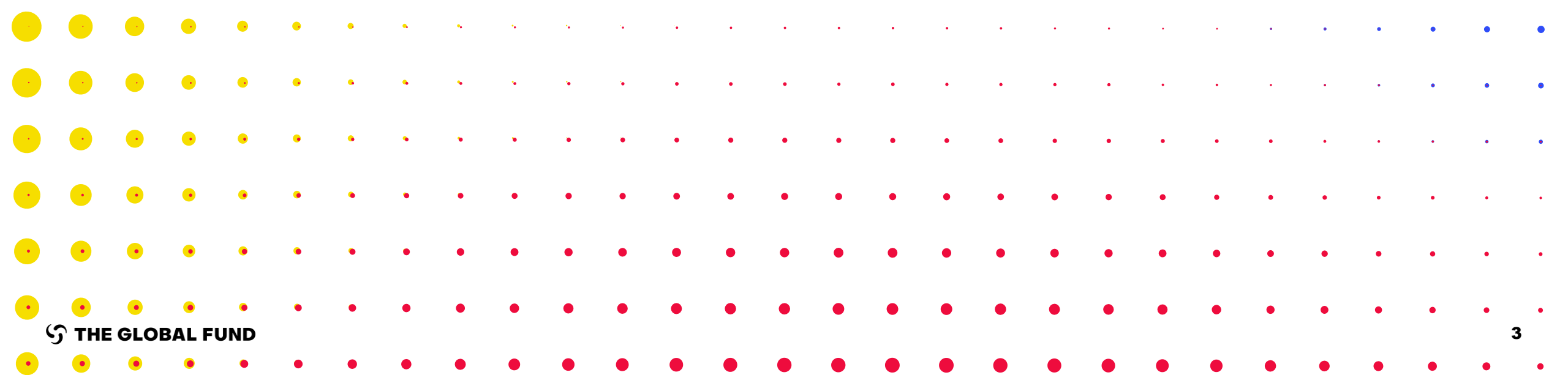
**Q&A**

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# 1

# GC8 Allocations



# Overview

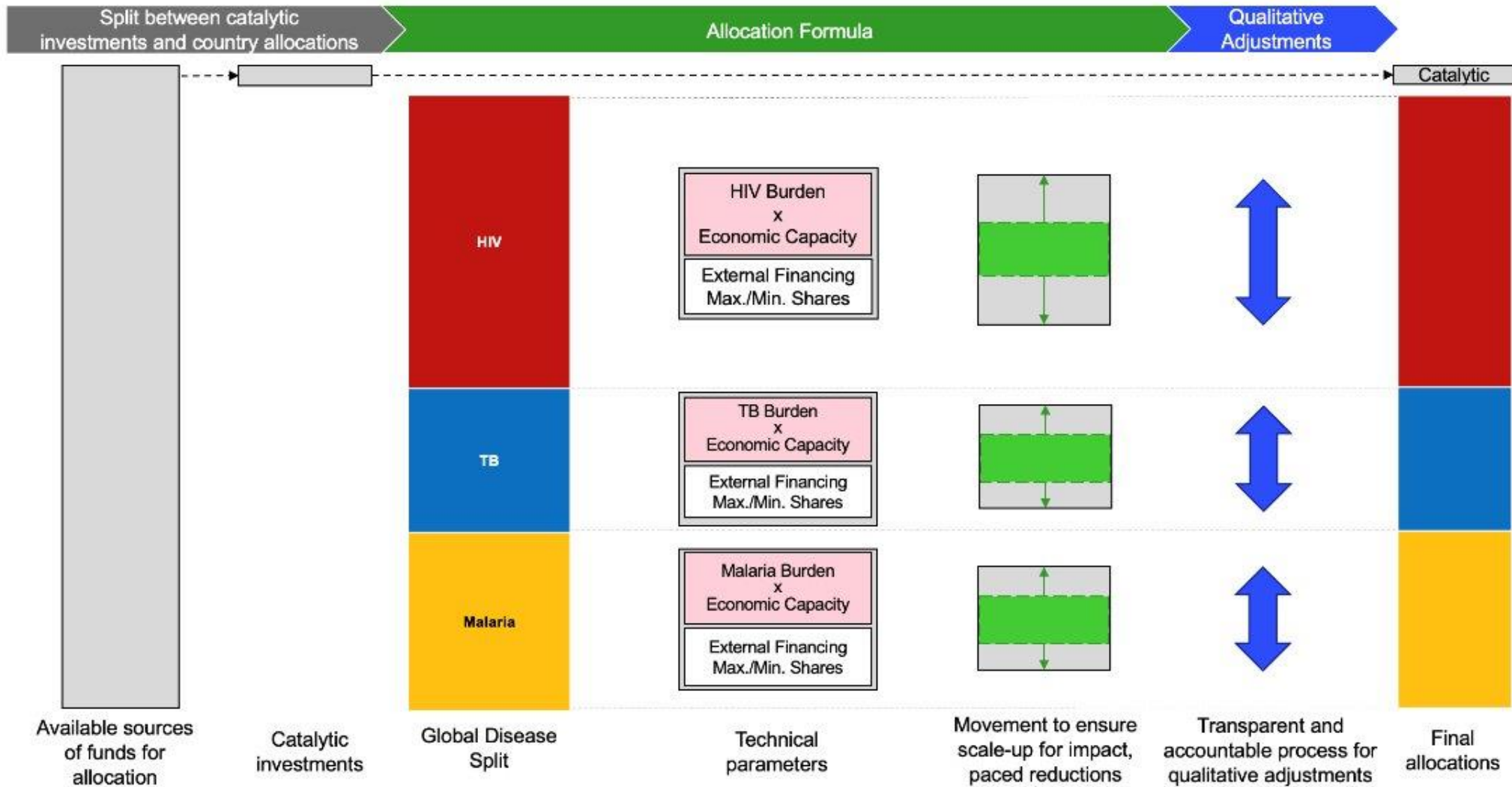
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- Grant Cycle 8 is focused on Sustainable Programs & Effective Transitions supported through a series of strategic shifts. **Shifting more funding to countries with the highest disease burden and lowest economic capacity is a strategic priority** – the GC8 allocations support this aim.
- **US\$ 10.783 billion has been allocated to countries for Grant Cycle 8 (GC8, 2026-2028)**. This is a 17.9% decrease from GC7 allocations (US\$13.1bn) and a 7.6%<sup>1</sup> decrease from the estimated GC7 reduced allocations. Almost every country has a reduced allocation, with low-income countries and Challenging Operating Environments (COEs)<sup>2</sup> allocations receiving the most limited reductions.
- As part of the GC8 strategic shifts and sustainability considerations, the Country Economic Capacity curve of the allocation methodology was updated **to shift more funds from higher to lower income countries**. The Board approved a limited flexibility to the global disease split **to help protect lowest income malaria allocations**. The qualitative adjustments aimed to protect allocations in countries with lowest fiscal capacity and COEs.
- Global Fund allocations must be considered in the wider fast-evolving and reduced health financing landscape. Countries will have to **rigorously prioritize evidence-based interventions** most critical to maximizing impact on HIV, TB and malaria, including those that strengthen health and community systems.

<sup>1</sup> Change in funding refers to GC7 mid-cycle reductions attributed to country allocations only. The decrease from GC7 reduced budget amounts, including, e.g., CIs and other investments, is -9.3%.

<sup>2</sup> Countries that experience infectious disease outbreaks, armed conflicts or civil unrest, natural disasters and climate-related crises, and/or mass displacement.

# Grant Cycle 8 Allocation Methodology

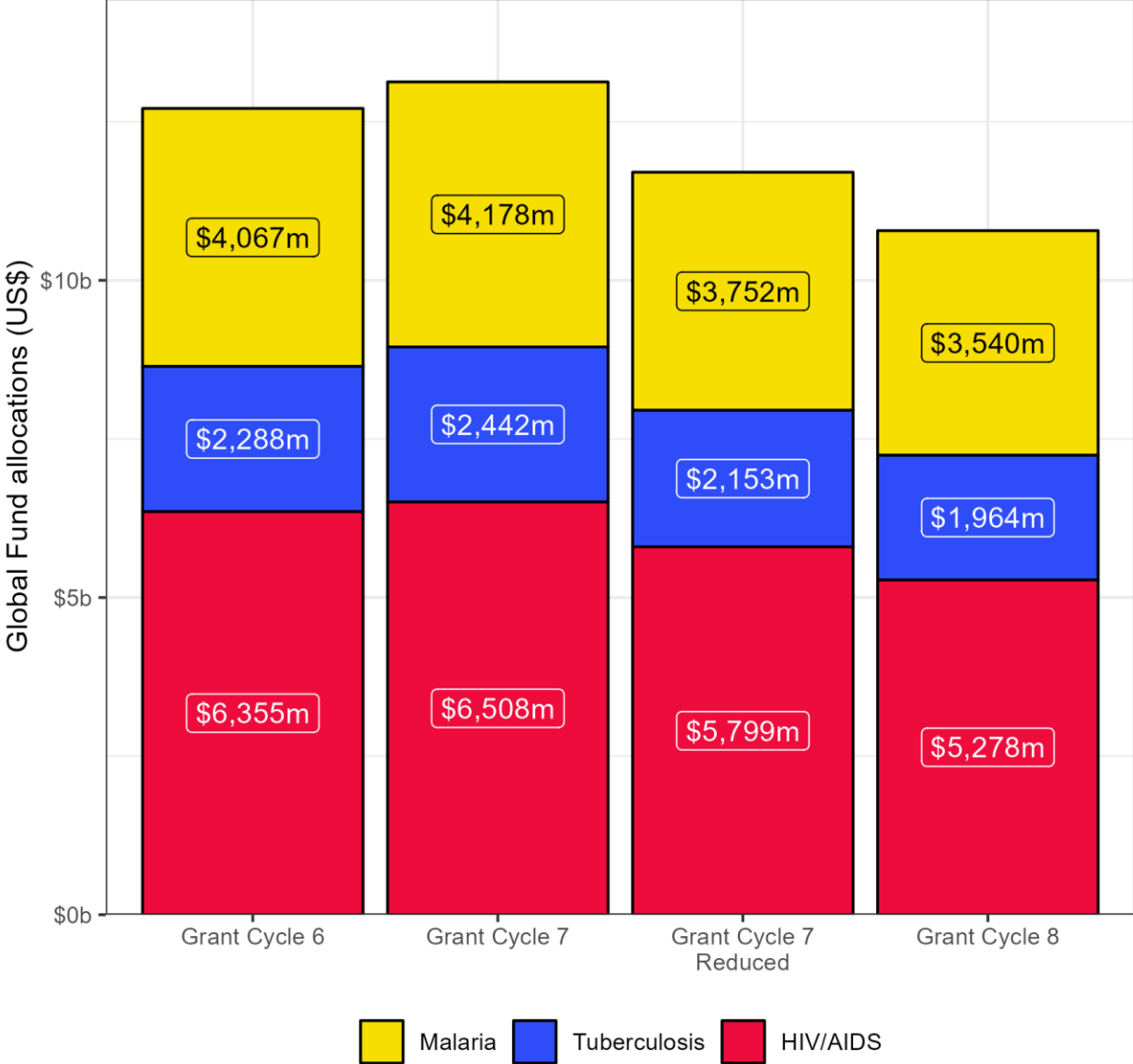


# Allocations by disease

US\$ 10.783 billion has been allocated to countries for GC8, split into:

- US\$ 5.278 billion for HIV
- US\$ 1.964 billion for TB
- US\$ 3.540 billion for malaria

Global Fund allocations by disease

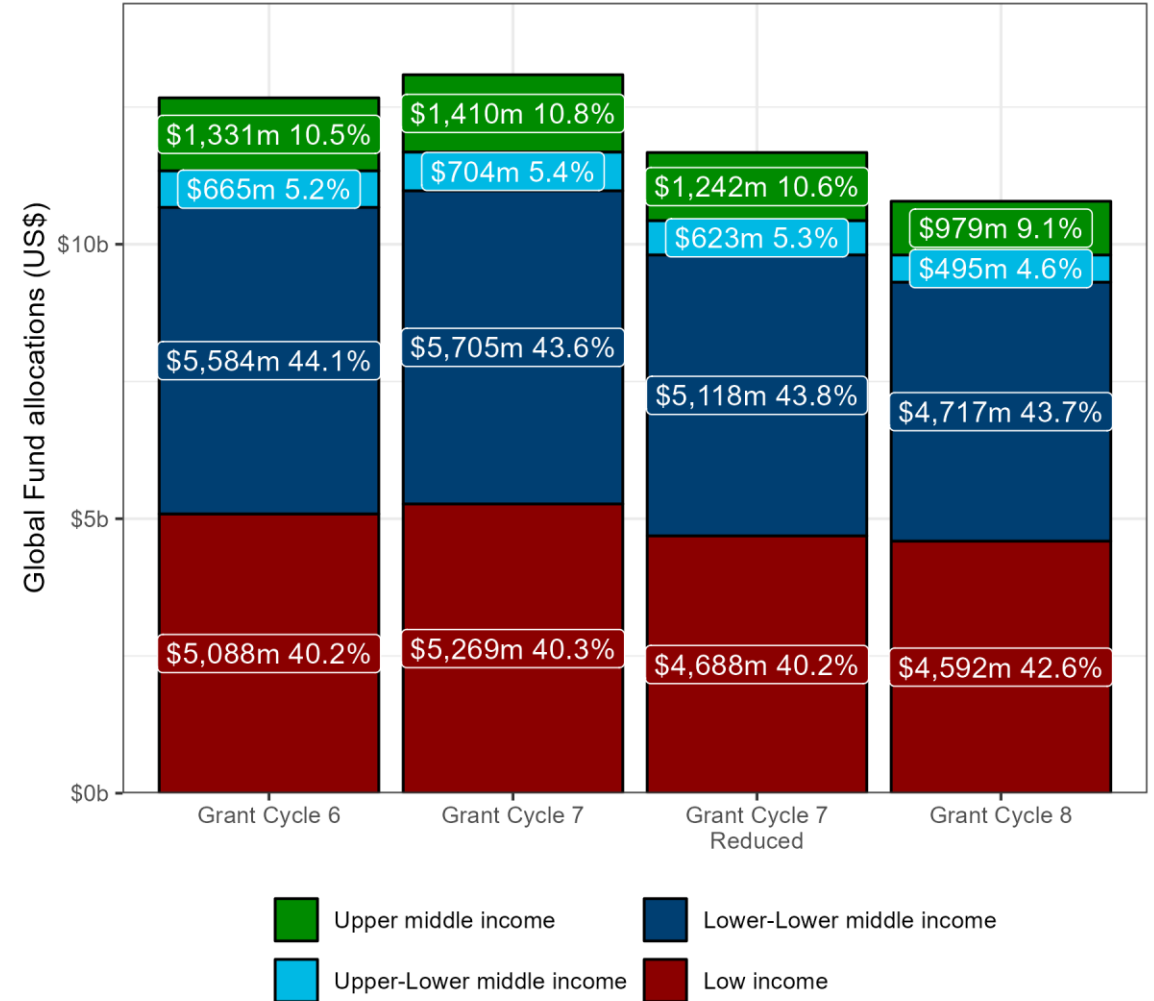


# Allocations by income

While absolute funding amounts decrease for all income groups, the funding share for low-income countries increased from 40.2% to 42.6%.

Lower-lower middle income countries' funding shares were stable at approximately 44% in both GC7 and GC8.

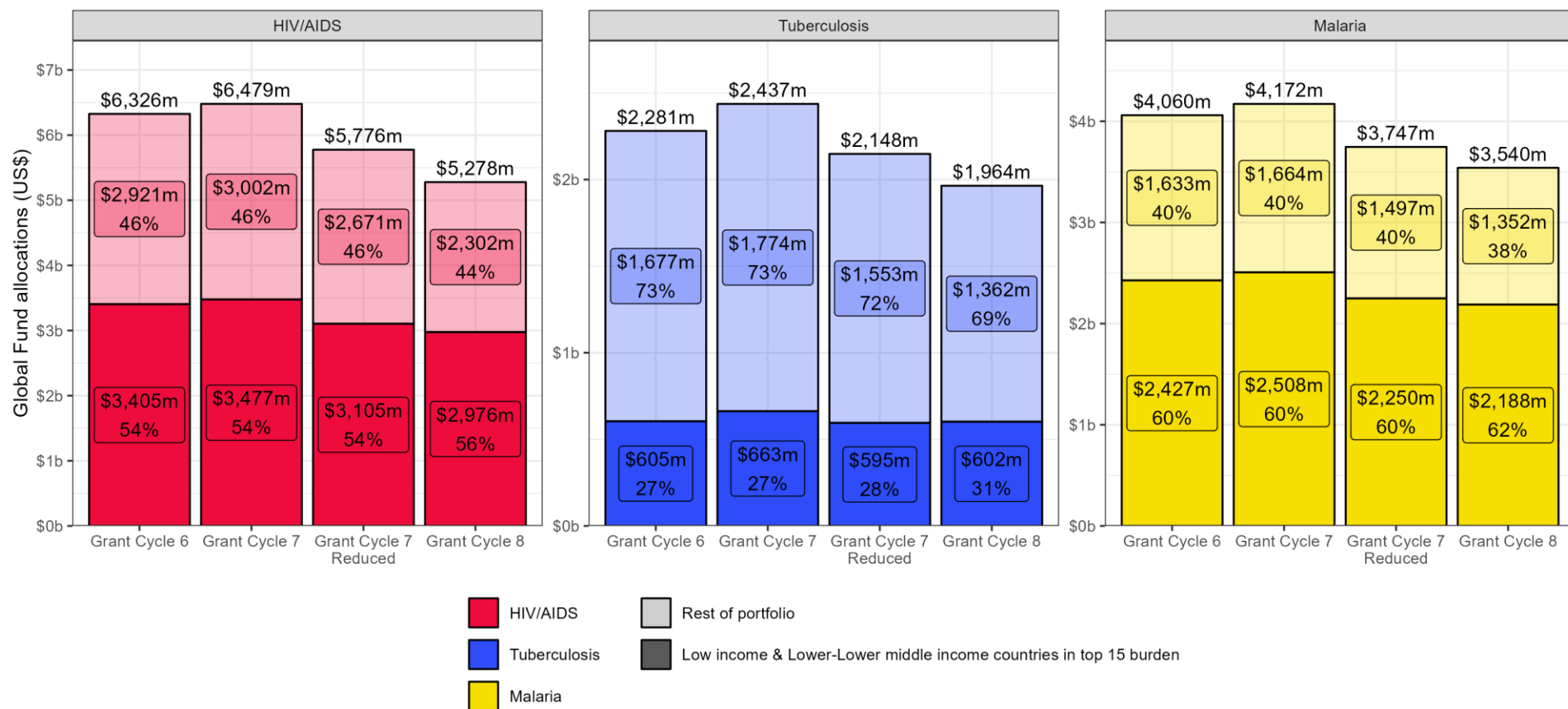
Global Fund allocations by income classification



NOTE:  
Only GC8 eligible components shown

# Allocations to highest burden countries

Funding shares for the lowest income countries with top 15 disease burden slightly increases in all 3 diseases: from GC7 54% to GC8 56% in HIV, 28% to 31% in TB and 60% to 62% in malaria.

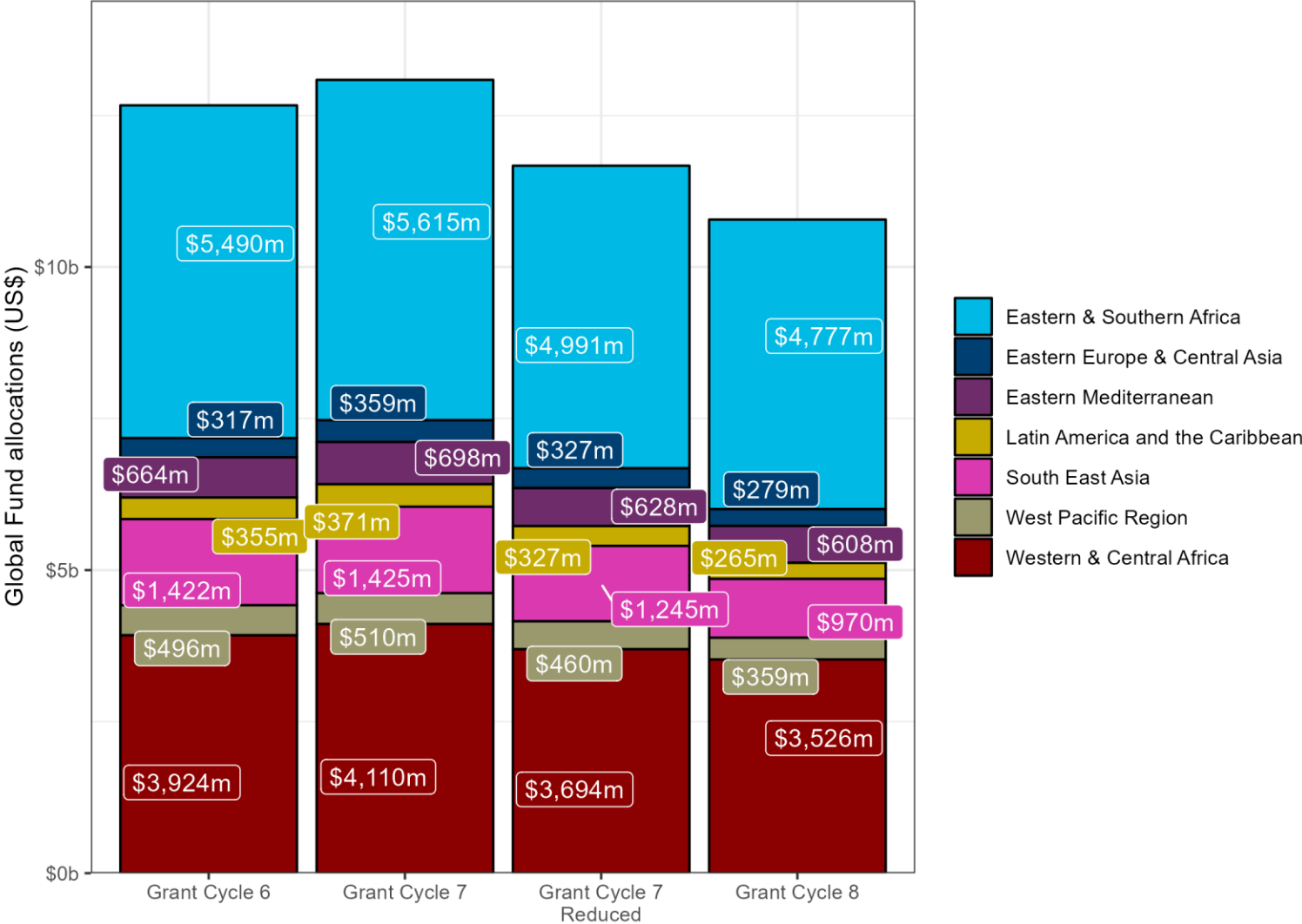


NOTE:  
DPRK excluded from top 15 burden list  
Only GC8 eligible countries shown

# Allocations by Global Fund constituency region

Funding by Global Fund constituency region is primarily a product of regional income levels and different burden of disease across regions.

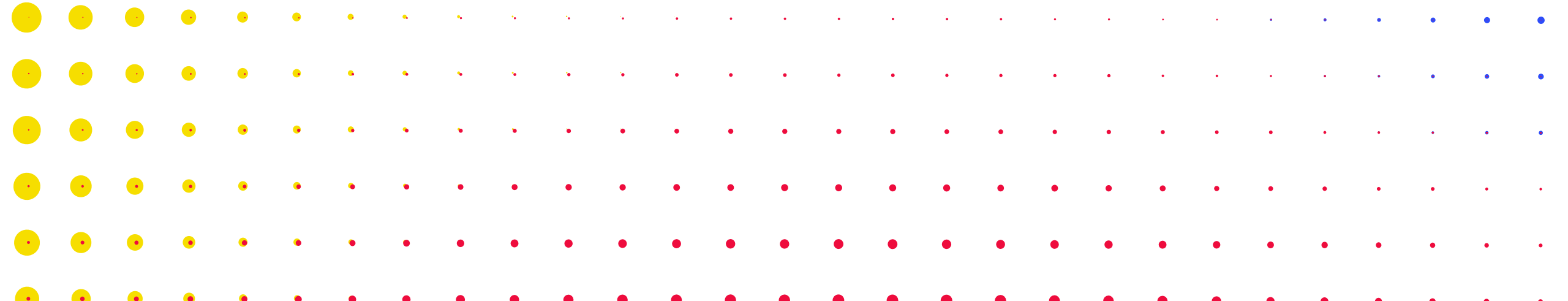
Allocation amounts in all regions are decreasing. There is a slightly further concentration of funds in Africa with 79% of total allocations.





# 2

# Catalytic Investments



# Catalytic Investments are operationalized using three (3) modalities

Today's focus

## Matching Funds

Funding available to selected countries to **incentivize programming of country allocation towards key strategic priorities** approved by the Global Fund Board.

Eligibility included in Allocation Letters.

## Strategic Initiatives

Limited funds for **strategic areas that cannot be addressed through country allocations alone** due to their innovative, cross-cutting or off-cycle nature.

To be approved by December 2026, with implementation starting in 2027.

## Multi-Country

Funding available to **target a limited number of pre-defined regional priorities** best addressed through a multi-country approach.

Approved and implemented on differentiated timelines.

# Catalytic Investments provide additional funding to reinforce grants and support the GC8 strategic shifts

	NextGen Market Shaping & Response	Address Human Rights & Gender Barriers to Services	Build Community Networks & Engagement to Enable Access to Services	Supporting Sustainability & Transition from Global Fund Financing	Optimize RSSH	Climate and Health
1 Support grant cycle-specific transition pathways	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
2 Place greater priority on lowest income and highest burden settings	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	
3 Support programmatic prioritization	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
4 Reinforce integration	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
5 Invest in community systems and financing		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
6 Grow and optimize domestic resources	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

# GC8 Catalytic Investment priorities and amounts were approved by the Global Fund Board in February, leveraging funding from private sector donors

Priority	Components	Total (US\$ million)
NextGen Market Shaping & Response	Accelerate innovation and scaled use of products	US\$115 <sup>1</sup>
	Promote sustainable regional manufacturing ecosystems	US\$10
Emergency Fund		US\$20
Address Human Rights & Gender Barriers to Services		US\$50 <sup>2</sup>
Build Community Networks & Engagement to Enable Access to Services		US\$37.9 <sup>2</sup>
Supporting Sustainability and Transition from Global Fund Financing	Responsible preparation for sustainability & transition	US\$36
	Cross-border progress toward malaria elimination in Southern Africa	
	Eliminating malaria in the Mekong region	
	Public Financial Management	US\$50
Optimizing RSSH <sup>4</sup>	Reinforcing impact of focused, integrated Resilient and Sustainable Systems for Health and Pandemic Preparedness (RSSH-PPR) investments in labs, surveillance and Human Resources for Health/ Community Health Workers (HRH/CHWs)	US\$126.3 <sup>3</sup>
	Improved HIV, TB and malaria outcomes through integration	US\$116.1
Climate and Health		US\$5
<b>Total</b>		<b>US\$566.3 <sup>5</sup></b>

\*Incremental increase from US\$260 million SoF for allocation scenario. <sup>1</sup>This priority is reinforced by additional US\$65 million in available TA support (contracted directly by the donor) and aligned investments within the Optimizing RSSH priority. <sup>2</sup> Includes US\$20 million earmarked private sector contribution with a notional 50/50 split across priorities; final allocation may be adjusted. <sup>3</sup>Allocated across integrated services including HRH & digitalization (US\$30 million) and Integrated lab & surveillance systems (US\$20 million). <sup>4</sup>Components are interdependent and reinforcing; current allocation of private sector contributions across components is notional and may evolve. <sup>5</sup>Private sector contributions reflected here do not include US\$121.2 million of unassigned earmarked contributions, all or some of which may be invested in catalytic investments, subject to final donor confirmation.

# How do Matching Funds work?

1. Eligibility for specified Matching Funds, where applicable, is **included in the country's allocation letter.**
2. Award of Matching Funds is subject to meeting certain **financial and programmatic conditions**, aligned with Board-approved priority objectives.
  - ✓ **Financial conditions** outline the minimum country allocation investment amounts required for each priority area.
  - ✓ **Programmatic conditions** describe the programmatic elements that must be reflected in the applicant's GC8 funding application.
3. Conditions will be verified as part of the funding application and grant-making process. When conditions are met, Matching Funds are **integrated into the relevant grant(s).**
4. Further details on Matching Funds will be provided in the Global Fund's forthcoming GC8 Matching Funds Guidelines.

**Conditions for Catalytic Investment Matching Funds**

This page summarizes the financial and programmatic conditions to access Catalytic Investment Matching Funds for Grant Cycle 8 (GC8). **Financial conditions** outline the minimum country allocation investment amounts required for each priority area. **Programmatic conditions** describe the programmatic elements that must be reflected in the applicant's GC8 funding application.

Conditions will be verified as part of the funding application and grant-making process. Further details on Matching Funds will be provided in the Global Fund's GC8 Matching Funds Guidelines (forthcoming).

Matching Funds	Financial conditions	Programmatic conditions
Public Financial Management (PFM)	Investment of at least a quarter of the amount of available Matching Funds from the country allocation in PFM activities.	<ul style="list-style-type: none"><li>Investments in PFM and/or health financing, aligned with relevant country PFM reforms, that address: (a) documented bottlenecks impacting national health sector performance; (b) health service delivery; and/or (c) financial sustainability.</li></ul>
Social Contracting	Investment of at least an equal amount of available Matching Funds from the country allocation in social contracting through community-led organizations (CLO) or community-based organizations (CBO).	<ul style="list-style-type: none"><li>Government co-financing commitments that include: (a) measurable and time-bound domestic investments in social contracting; (b) a defined set of financial and policy or regulatory measures (such as enabling legislation and budgetary reforms) to institutionalize social contracting; and (c) mechanisms to monitor and validate execution of these financial commitments and measures.</li><li>Workplan tracking measures to monitor programmatic progress related to social contracting (for High Impact and Core countries only).</li></ul>
Integrated HIV Prevention	Investment of at least an equal amount of available Matching Funds from the country allocation in HIV pre-exposure prophylaxis (PrEP) interventions and HIV self-testing (HIVST) commodities.	<ul style="list-style-type: none"><li>HIVST and PrEP coverage indicators, with a minimum target of PrEP users during the grant reporting period as communicated by the Global Fund.</li><li>Planned procurement of a mix of oral- and blood- or urine-based WHO pre-qualified HIVST.</li><li>Where these products are used, evidence showing that national policies and strategies currently allow, or will be developed within the first year of the grant implementation period to allow, (1) a single HIV rapid diagnostic test for initiation and continuation of long-acting injectable PrEP; and (2) HIVST for initiation and continuation of Tenofovir-based oral PrEP and the Dapivirine Vaginal Ring.</li><li>Investments in targeted HIV prevention programs based on geographic and population-level risk data from 2024 onwards.</li><li>Plans to increase the number of sites delivering integrated PrEP, HIVST and sexual and reproductive health services for HIV prevention, at primary health care and community level, compared to the number of sites at the end of 2025.</li></ul>

Conditions are available on the Global Fund Website

## Six (6) Matching Funds across multiple priority areas

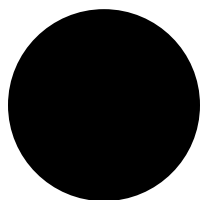
Matching Fund	Objective	Amount US\$ M	Total Eligible Countries
<b>Equitable, Resilient Integrated Community &amp; Health Services for Women &amp; Children</b> <i>(new in GC8)</i>	Strengthen integrated primary health services for women and children; and increase maturity and sustainability of health workforce and community health worker systems.	106	24
<b>Expanding Social Contracting to Enable Access to Services</b> <i>(new in GC8)</i>	Catalyze social contracting so that community-led organizations and community-based organizations (CLO/CBO) can systematically deliver a defined package of HIV, TB and malaria services for key and vulnerable populations through domestic resources, with measurable contributions to national health targets and a clear normative path from pilots to institutionalization of social contracting mechanisms.	10	8
<b>Integrated HIV Prevention</b> <i>(continuing / evolved from GC7)</i>	Expand geographic coverage of HIV self-testing and diversify kits to oral-fluid and blood- or urine-based tests; broaden access to oral and long-acting pre-exposure prophylaxis (PrEP), capitalizing on Lenacapavir investments; and support integration of HIV prevention services with reproductive maternal, newborn, child and adolescent health services to improve health outcomes and system efficiency.	52	9
<b>Digital Solutions Supporting Integration</b> <i>(new in GC8)</i>	Strengthen national digital health data systems and use, according to governments' national digital health strategies, standards, and architectures, to improve program services and increased efficiency of integrated primary health care programs.	22.5	6
<b>Public Financial Management</b> <i>(new in GC8)</i>	Enhance financial governance and accountability to enable financial sustainability and strengthen country ownership.	38	23
<b>Address Human Rights &amp; Gender Barriers to Services</b> <i>(continuing / evolved from GC7)</i>	Catalyze national ownership of programs to remove barriers to HIV, TB and malaria services, specifically those that are human rights or gender related, supporting targeted programmatic interventions to address those barriers and sustain access to essential and quality HIV, TB and malaria services.	34	20

**Thank you.**  
**Merci.**  
**Gracias.**

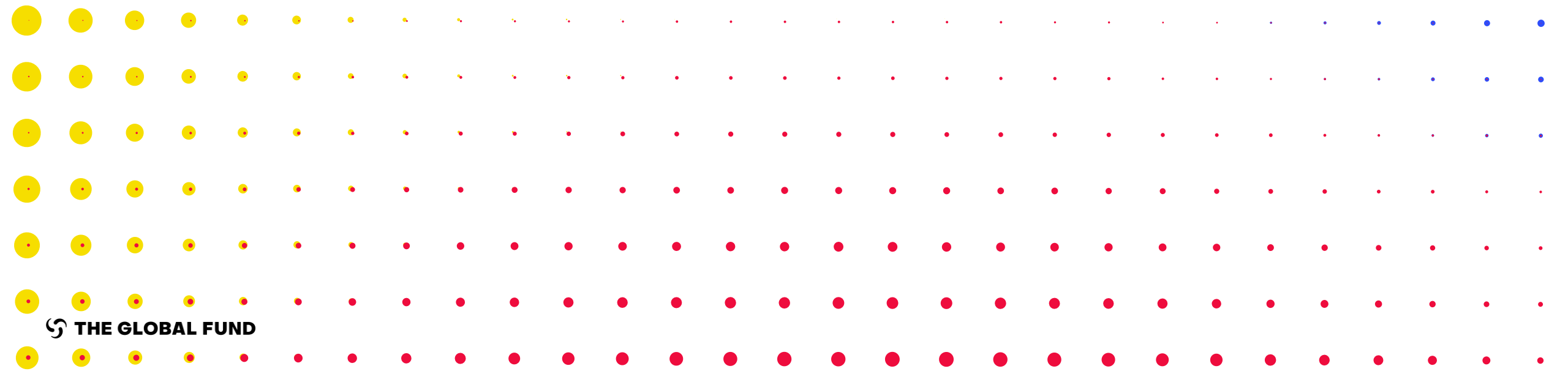


The Global Fund to Fight  
AIDS, Tuberculosis and Malaria

+41 58 791 17 00  
[theglobalfund.org](http://theglobalfund.org)



# Annexes



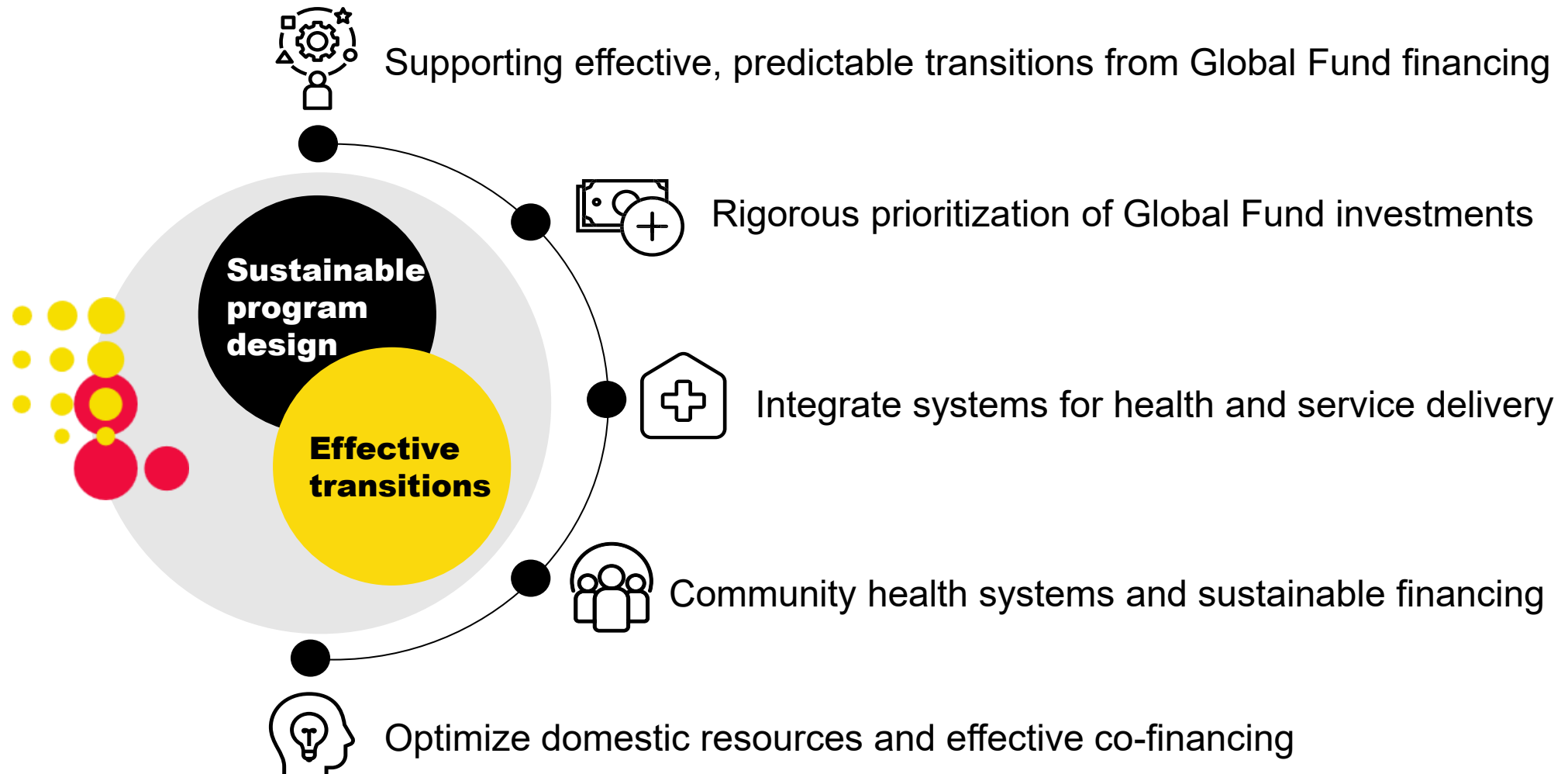
# Matching Funds Conditions (1/2)

Matching Funds	Financial conditions	Programmatic conditions
<b>Public Financial Management (PFM)</b>	Investment of at least a quarter of the amount of available Matching Funds from the country allocation in PFM activities.	<ul style="list-style-type: none"> <li>Investments in PFM and/or health financing, aligned with relevant country PFM reforms, that address: (a) documented bottlenecks impacting national health sector performance; (b) health service delivery; and/or (c) financial sustainability.</li> </ul>
<b>Social Contracting</b>	Investment of at least an equal amount of available Matching Funds from the country allocation in social contracting through community-led organizations (CLO) or community-based organizations (CBO).	<ul style="list-style-type: none"> <li>Government co-financing commitments that include: (a) measurable and time-bound domestic investments in social contracting; (b) a defined set of financial and policy or regulatory measures (such as enabling legislation and budgetary reforms) to institutionalize social contracting; and (c) mechanisms to monitor and validate execution of these financial commitments and measures.</li> <li>Workplan tracking measures to monitor programmatic progress related to social contracting (for High Impact and Core countries only).</li> </ul>
<b>Integrated HIV Prevention</b>	Investment of at least an equal amount of available Matching Funds from the country allocation in HIV pre-exposure prophylaxis (PrEP) interventions and HIV self-testing (HIVST) commodities.	<ul style="list-style-type: none"> <li>HIVST and PrEP coverage indicators, with a minimum target of PrEP users during the grant reporting period as communicated by the Global Fund.</li> <li>Planned procurement of a mix of oral- and blood- or urine-based WHO pre-qualified HIVST.</li> <li>Where these products are used, evidence showing that national policies and strategies currently allow, or will be developed within the first year of the grant implementation period to allow, (1) a single HIV rapid diagnostic test for initiation and continuation of long-acting injectable PrEP; and (2) HIVST for initiation and continuation of Tenofovir-based oral PrEP and the Dapivirine Vaginal Ring.</li> <li>Investments in targeted HIV prevention programs based on geographic and population-level risk data from 2024 onwards.</li> <li>Plans to increase the number of sites delivering integrated PrEP, HIVST and sexual and reproductive health services for HIV prevention, at primary health care and community level, compared to the number of sites at the end of 2025.</li> </ul>

# Matching Funds Conditions (2/2)

Matching Funds	Financial conditions	Programmatic conditions
<b>Integrated Community &amp; Health Services for Women &amp; Children</b>	Investment of at least half of the amount of available Matching Funds from the country allocation in activities for integrated community and health services for women and children.	<ul style="list-style-type: none"> <li>Investments that respond to documented priorities in national MNCAH acceleration plans and HRH and community health strategies, the results of which should align with these plans and strategies.</li> <li>Further, while not a programmatic condition, but as part of the country's GC8 co-financing commitments (where applicable under the STC policy) the country is encouraged to finance integrated services, including HRH/CHW activities, to which this Matching Fund contributes.</li> </ul>
<b>Digital Solutions Supporting Integration</b>	Investment of at least half of the amount of available Matching Funds from the country allocation in digital activities supporting integration.	<ul style="list-style-type: none"> <li>Fulfilment of the Integrated Community &amp; Health Services for Women &amp; Children Matching Fund financial and programmatic conditions.</li> <li>Investments to strengthen or maintain elements of digital data systems and/or data use that support programmatic activities funded under the Integrated Community &amp; Health Services for Women &amp; Children Matching Fund.</li> </ul>
<b>Addressing Human Rights &amp; Gender Barriers to Services</b>	Investment of at least an equal amount of available Matching Funds from the country allocation in activities to address human rights and gender-related barriers to services.	<ul style="list-style-type: none"> <li>Investments (which include funding to civil society organizations and CBOs) to address relevant barriers to health services that are informed by recent evidence on such barriers and the effectiveness of actions to address them.</li> <li>Indicators to assess performance and quality of programming in this priority area, as well as annual self-assessments of progress against baseline scores agreed with the Global Fund, for each programmatic area to enable Global Fund KPI reporting.</li> <li>Evidence of functional and inclusive national coordination mechanisms to oversee programs addressing barriers to accessing HIV, TB and malaria services, including those relating to human rights and gender.</li> </ul>

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



Matching Funds	Financial conditions	Programmatic conditions
<b>Public Financial Management (PFM)</b>	Investment of at least a quarter of the amount of available Matching Funds from the country allocation in PFM activities.	<ul style="list-style-type: none"> <li>Investments in PFM and/or health financing, aligned with relevant country PFM reforms, that address: (a) documented bottlenecks impacting national health sector performance; (b) health service delivery; and/or (c) financial sustainability.</li> </ul>
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<b>Integrated Community &amp; Health Services for Women &amp; Children</b>	Investment of at least half of the amount of available Matching Funds from the country allocation in activities for integrated community and health services for women and children.	<ul style="list-style-type: none"> <li>Investments that respond to documented priorities in national MNCAH acceleration plans and HRH and community health strategies, the results of which should align with these plans and strategies.</li> <li>Further, while not a programmatic condition, but as part of the country's GC8 co-financing commitments (where applicable under the STC policy) the country is encouraged to finance integrated services, including HRH/CHW activities, to which this Matching Fund contributes.</li> </ul>
<b>Digital Solutions Supporting Integration</b>	Investment of at least half of the amount of available Matching Funds from the country allocation in digital activities supporting integration.	<ul style="list-style-type: none"> <li>Fulfillment of the Integrated Community &amp; Health Services for Women &amp; Children Matching Fund financial and programmatic conditions.</li> <li>Investments to strengthen or maintain elements of digital data systems and/or data use that support programmatic activities funded under the Integrated Community &amp; Health Services for Women &amp; Children Matching Fund.</li> </ul>
<b>Addressing Human Rights &amp; Gender Barriers to Services</b>	Investment of at least an equal amount of available Matching Funds from the country allocation in activities to address human rights and gender-related barriers to services.	<ul style="list-style-type: none"> <li>Investments (which include funding to civil society organizations and CBOs) to address relevant barriers to health services that are informed by recent evidence on such barriers and the effectiveness of actions to address them.</li> <li>Indicators to assess performance and quality of programming in this priority area, as well as annual self-assessments of progress against baseline scores agreed with the Global Fund, for each programmatic area to enable Global Fund KPI reporting.</li> <li>Evidence of functional and inclusive national coordination mechanisms to oversee programs addressing barriers to accessing HIV, TB and malaria services, including those relating to human rights and gender.</li> </ul>