Global Fund Grant Contribution to National Policy Framework – Ending AIDS & Sustainability (2023-2028)

NATIONAL AIDS AUTHORITY FIRST MEETING, 2026

25 JUNE 2026



Global Fund Overview & Mission

About the Global Fund

- Worldwide partnership to defeat **AIDS, TB, and malaria**
- Raises and invests up to **US$5 billion annually**
- Operates in **more than 100 countries**
- Since 2002: **70 million lives saved**
- Over **US$69 billion disbursed** to low- and middle-income countries

"With science, money, political will, and leadership, we can fight and overcome the deadliest disease threats."

The Global Fund Model

How the Partnership Works

- **Countries lead** – Tailoring responses to political, cultural, and epidemiological context
- **Communities at the heart** – Equal voice in the fight
- **Three-year funding cycles** – Long-term predictability
- **Board governance** – Donor and implementer governments, NGOs, private sector, foundations, affected communities
- **Market shaping** – Lower prices, improve quality, drive innovation

Cambodia – Overview of GF Investments

The Global Fund in Cambodia

Since	Metric
2003	Global Fund support commenced
US$641.16M (HIV US$424.91M)	Total disbursements to date (as of 19 June 2026)
US$54.88M (HIV US$41.55M)	Current HIV & TB grant budget (GC7)
20 grants	Total grants implemented

Principal Recipient for HIV & TB Grant (Current):

- Cambodia Ministry of Economy and Finance

Cambodia's HIV Achievements

Progress Against HIV

Indicator	Result
95-95-95 Targets	95-100-98 achieved – first country in Asia-Pacific to reach global targets
PLHIV on ART (2025)	72,097
PLHIV in Cambodia	75,987 (2025 estimate)
ART Coverage	95%
Treatment sites	74 sites providing ART

HIV Allocation – Detailed Comparison

Funding Allocation Comparison

Period	Allocation	Change
GC7 (2023-2025)	US$41,549,020	–
GC8 (2026-2028)	US$27,419,831	↓ 34%

Implications:

- Rigorous prioritization of interventions required
- Focus on highest-impact, cost-efficient programs
- Continued emphasis on key populations and hardest-to-reach communities

GC8 – A Major Strategic Shift

Grant Cycle 8 Context

"Significant constraints in external financing for health and a rapidly evolving global health ecosystem."

Strategic Implications for Cambodia:

Area	Change
HIV Allocation	↓ 34% reduction
Co-financing	↑ $51.3M minimum domestic commitment
ARV Financing	100% domestic by 2029
Community Services	Gradual transition to domestic funding
Grant Structure	Single integrated funding request
Innovation	Cost-saving approaches mandatory
Social Protection	HEF/NSSF integration required

HIV Priority Interventions - GC8

Aspect	GC8
Amount	$27,419,831
Key Populations	Young MSM (>24 y/o)
Priority Interventions	Expand PrEP, self-testing, virtual outreach, mobile/evening outreach, peer-led interventions
RSSH Linkage	System strengthening
Community Systems	"Strengthen community responses"

TIMELINE

GC8 FR Submission Roadmap

Proposed dates for: Draft FR Submission · CCC Endorsement Meeting · Final Submission through CCC Secretariat

Drafting & Review | Draft FR Submission & CCC Endorsement | Final Submission

First Disease Narratives
7 June

TB & HIV programmatic narrative first drafts submitted to TWG

Full aligned TB-HIV package submitted for TWG/CCC review and internal QA

First Joint FR Draft
23 June

Draft Joint TB HIV FR Submitted to CCC
4 July

Draft FR circulated to CCC members (≥10 working days before endorsement meeting)

CCC formally reviews and endorses the HIV & TB Funding Requests including all components and annexes

CCC Meeting: FR Endorsement
14 July

Final Packages Complete
18 July

All components final: narratives, PF, budget, HPMT, PAAR/UQD

CCC endorsement · Statement of Compliance · Partner Portal upload*

FINAL SUBMISSION
25 July

★ **Key required milestones: 4 July — Draft FR to CCC Secretariat | 14 July (indicative) — CCC Endorsement Meeting | 25 July — Final Submission via CCC Secretariat**

**Note: Grant-making PF and HPMT will be directly submitted online on the GF Partner Portal by MEF-PR*