
The Global Fund/Johis Alarcón/Panos

Community Engagement Strategic Initiative

Update

JUNE 2026

THE GLOBAL FUND

1. EVOLVED APPROACH TO COMMUNITY ENGAGEMENT

1.1 Engagement

The Grant Cycle 8 (GC8) Modular Framework reflects a strategically differentiated approach to community engagement in response to a changing global health and financing landscape. Shaped through engagement with communities, technical partners, bilateral partners and other stakeholders, this approach promotes a prioritized and operationally coherent model that sustains community engagement beyond Global Fund processes and strengthens community leadership in country-level decision-making over time. It reflects three strategic pivots and differentiates support according to country context.

1.2 Three Strategic Pivots

The updated approach to community engagement in GC8 reflects three strategic pivots to strengthen and sustain community engagement beyond Global Fund processes: from a focus on Global Fund processes to influencing broader national and sub-national health decision-making; from disease-specific engagement to community leadership across integrated health systems; and from externally financed engagement to community-led participation supported through domestic financing mechanisms, social contracting, and community-led monitoring to improve HIV, TB, malaria and broader health outcomes.

FROM	TO	NEW APPROACH
Global Fund centered engagement	**Influencing national and sub-national processes**	Enable communities shape governance and financing decisions that extend beyond Global Fund support, including national strategic planning, Technical Working Groups, health budgets, and co-financing negotiations.
Disease-specific engagement	**Community leadership across integrated systems**	Communities co-design integration systems, ensuring peer-led and community-led services for key and vulnerable populations are preserved and strengthened within primary healthcare systems.
Donor-dependent engagement	**Sustainable community participation**	Communities sustain influence through domestic and innovative financing, social contracting, and budget advocacy, with communityled monitoring, coordination, and advocacy funding protected to drive effective responses.

1.3 Differentiating Engagement Support Based on Country Context

The Global Fund's community engagement approach is increasingly differentiated according to country context, including sustainability and transition considerations. In low-income countries, the priority is to strengthen community systems and their integration into national health systems. In middle-income countries, the focus is on institutionalization, sustainable domestic financing and social contracting. In challenging operating environments, the emphasis is on protecting service continuity, sustaining community leadership, and strengthening community-led monitoring and coordination in fragile settings.

1.4 Operationalizing the Evolved Engagement Approach

To operationalize this evolved approach, the new intervention in the **Grant Cycle 8 (GC8) Modular Framework**—Community coordination and engagement in decision-making— creates an opportunity to support community engagement in national and sub-national HIV, TB, malaria, and broader health decision-making. It emphasizes strengthening inclusive community health platforms and coordination mechanisms, supporting meaningful participation in national health governance and planning processes, and strengthening community capacity to engage in health financing, accountability and evidence-informed decision-making.

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NEW INTERVENTION

In the Global Fund's GC8 Modular Framework

COMMUNITY COORDINATION AND ENGAGEMENT IN DECISION MAKING

Strengthening the meaningful participation and leadership of communities in health decision- making at all levels.

THE SCOPE

Activities that enable the participation of communitins and populations/ groups most affected by HIV, TB and malaria (including KVP and women, adolescent girls and young people) in national, sub-national and local planning and decision-making fora and processes.

1. Enable inclusive community platforms
Support community platforms and coordination mechanisms that enable consultation, peer learning, and structured engagement with governments and health decision-making bodies.

2. Support effective participation in governance
Support community representatives to participate effectively in national health planning and governance processes.

3. Build capacity for financing, accountability and evidence
Build community capacity to engage in health financing and accountability processes, and to generate and use evidence to inform prioritization, planning and accountability mechanisms.

4. Map stakeholders and entry points
Map community stakeholders and engagement entry points to influence national health decision-making.

The next iteration of the Strategic Initiative – Building Community Networks and Engagement (BCNE), from January 2027 to December 2029, will catalyze community engagement and leadership in health governance, planning and accountability as well as expanding its focus to community systems and financing.

To guide communities during operationalization at country level, the six Regional Learning Hubs have developed **"Community Engagement in Practice"** – a practical resource that brings together tools and case studies to guide community engagement in national health decision-making.

2. GLOBAL FUND ENGAGEMENT SUPPORT IN GC7

SNAPSHOT OF ENGAGEMENT SUPPORT IN GC7 (2024-2025)

Technical assistance

- 50 assignments in 36 countries and 1 multicountry grant.
- 100% of assignments deployed national or regional experts.
- 88% of assignments delivered to the satisfaction of the requestor.
- 100% of deliverables used to inform Global Fund decision-making.

Engagement of key and vulnerable populations

- 25 countries with national community engagement plans in place.
- 92% of countries with plans convened bi-annually progress reviews with CCMs.
- 20 countries with new community data generated or used.
- 93% of TB partners with increased organizational capacity.
- 25 countries with increased participation in decision-making.
- 14 countries with influence over policy and programming.

Regional learning support

- 63,139 people receiving timely and relevant information.
- 94 virtual and face-to-face learning exchanges convened.

The Global Fund/Brian Otieno

3. TEN YEARS OF THE COMMUNITY ENGAGEMENT SI:

The Global Fund's Community Engagement Strategic Initiative marked its tenth year of implementation in 2025. It has evolved from a pilot program into a **recognized practice model** that promotes inclusivity and has been recommended for replication in other global health financing mechanisms.

The Strategic Initiative has remained agile and responsive to evolving global health and financing contexts, continuously adapting its approach to emerging priorities and challenges. Over the last decade, it has consolidated lessons, models, and approaches that rigorous evaluations have shown to consistently deliver strong results (see boxes below).

Across most countries, technical assistance had a positive impact on supporting and mobilizing community and key population participation. Technical assistance from various partners, including the Community Engagement Strategic Initiative, was utilized to support communities. Evidence showed that this improved the quality of community submissions to the funding request process.

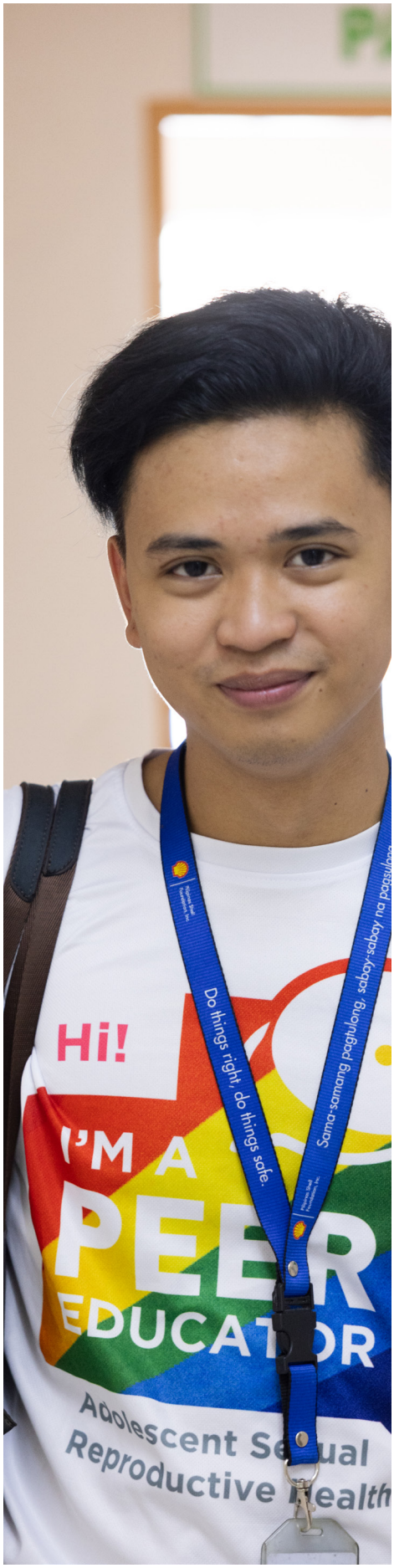
— Evaluation of Community Engagement in the Global Fund Grant Life Cycle, August 2025

"The Community Engagement Strategic Initiative has evolved over four cycles with a strong ethos of learning and critical reflection to become more efficient and cost-effective while retaining strong results and continuing to strengthen its focus on equity and sustainability."

— Global Fund Grant Cycle 7 (GC7) Community Engagement Strategic Initiative Mid-term Review, October 2025

As a learning-oriented Strategic Initiative, it has continued to evolve in response to major contextual shifts, including GC7 reprioritization, GC8 strategic changes, and growing priorities related to integration and transition. For example, **in a recent (May 2026) review** in **Zambia**, the Office of the Inspector General concludes that the Global Fund provided sufficient and appropriate engagement support to community stakeholders during the GC7 reprioritization process, specifically noting technical assistance provided by the Community Engagement Strategic Initiative.

The three sections of this update, focusing on (1) integration, (2) transition, and (3) innovation, demonstrate how the Strategic Initiative and its partners have responded with agility, flexibility, and creativity to rapidly changing needs and opportunities.



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4. ENGAGING TO ADVANCE INTEGRATION

In Grant Cycle 8, the Global Fund has introduced **strategic shifts** to optimize the use of all available funds, including through enhanced integration. The **Global Fund emphasizes** integration should be co-led with community and key population representatives at national and sub-national levels as an iterative process.

The Strategic Initiative is strengthening engagement around national reforms on integration, particularly of community-led services into primary healthcare. Its support includes an intentional focus on health decision-making at primary health care level, strengthening advocacy and community consultation for people-centered integration.

In **Cameroon**, CS4ME supported the establishment of four Local Community Health Committees in the Mbankomo and Soa health districts in December 2025. These Committees are implementing community action plans that strengthen community participation in malaria control interventions at the local level.

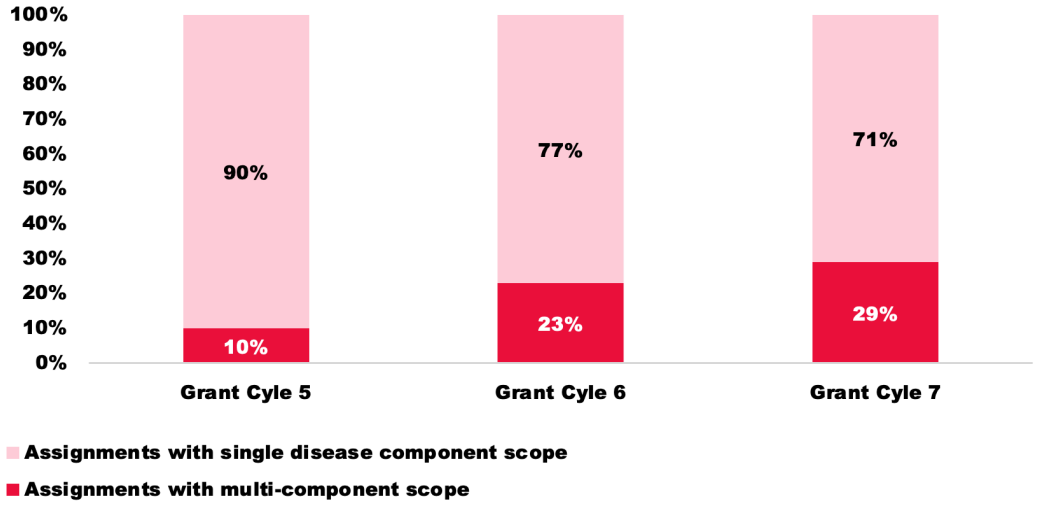
In **Kenya**, Mpact supported HIV key populations (KPs) to engage in the **National Health Integration Summit March 2026**, where they advocated for their engagement in planning for service integration while safe-guarding cost-effective and trusted community-led platforms.

Technical assistance provided through the Strategic Initiative is increasingly integrated across disease components. The proportion of assignments that have an integrated focus on more than one disease component has increased from 10% in Grant Cycle 5, to 23% in Grant cycle 6, to 29% in Grant Cycle 7 (Figure 1).

"A holistic health systems approach to HIV prevention that strengthens governance, is integrated into primary health care and national digital health systems and adopts systematic approaches to community engagement and new product introduction is crucial for sustaining the HIV response and strengthening broader health system capacity."

— Lancet Series on Sustainable HIV Prevention in Africa, January 2026

Figure 1. Integrated Technical Assistance Across HIV, TB and Malaria

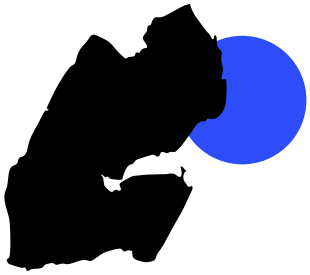


A particular emphasis was put on integrating TB and malaria into technical assistance assignments. In Grant Cycle 5, 22% of assignments included malaria, which rose to 35% in Grant Cycle 7. TB was included in 48% of Grant Cycle 5 assignments, increasing to 63% in Grant Cycle 7.

Strategic Initiative partners are strengthening communities' technical capacity to understand integration so that they engage more effectively. On 30 April 2026, the Regional Learning Hub for Anglophone Africa hosted **a community reflection session** on service integration for HIV, TB and malaria. Participants stressed that integration must be community-led, adequately financed, and designed to protect trusted community services, key populations, and community leadership structures—warning that poorly implemented integration could increase stigma, weaken access, and undermine hard-won gains. On 7 May 2026, **a similar event** was convened by the **Francophone Africa** Learning Hub, aiming to define the role that communities can play in creating more effective and equitable health systems in the context of integration. The Learning Hub for **Asia-Pacific** developed a **community guide on service integration**.

"Integration should be driven by need and not by resource constraints. Integration that does not include communities is actually not integration."

— Intervention from Maurine Murenga (Coordinator of TB Women Global) during the Community Reflection Session on HIV, TB and Malaria Service Integration, 30 April 2026



DJIBOUTI

COMMUNITIES ENGAGE TO FORMALLY INTEGRATE COMMUNITY-LED HIV TESTING INTO THE NATIONAL HEALTH SYSTEM.

In 2024, Djibouti's Ministry of Health initiated the development of a national Community HIV Testing Strategy aimed at expanding coverage among KPs through more person-centred approaches. In 2025, communities actively engaged in the strategy development process through consultations supported by the Global Fund's Community Engagement Strategic Initiative. This helped ensure that the integration agenda reflected the realities and needs of marginalized populations.

The consultation process included six focus group discussions with 60 participants from KP groups. Findings highlighted major barriers to HIV services, including stigma, fear of identification, violence, and weak links between communities and health facilities. Community recommendations directly informed the strategy, including the adoption of the "mères relais" peer support approach and more flexible community-led HIV testing models.

Importantly, the Community Testing Strategy was validated and incorporated into the national HIV strategy. This case demonstrates how effective community engagement can advance integration by strengthening the link between communities and the formal health system.

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5. ENGAGING TO ENSURE RESPONSIBLE TRANSITION

Another **strategic shift** for the Global Fund in Grant Cycle 8 is around setting predictable grant cycle-specific transition pathways. In April 2026, the Global Fund published new **transition timelines**. Under this approach, 63 national and regional disease components will transition to domestic reliance for their HIV, TB and/or malaria programs after Grant Cycle 8, and another 21 after Grant Cycle 9. The Global Fund emphasizes that sustainability and transition planning should be inclusive, engaging communities and civil society, and take a holistic health systems approach that incorporates community systems.

In this context, the Community Engagement Strategic Initiative is placing a more intentional focus on sustainability and transition. It provided organizational development support to TB networks in 14 countries[1], increasing their sustainability scores by 18% from between the baseline and mid-term assessments using the **Global Fund Community Pulse tool**.

Advocacy for increased domestic financing for HIV, TB and malaria is a major priority for communities and the Strategic Initiative. In **Niger**, community-led advocacy supported by CS4ME contributed to the preparation of a malaria resource mobilization initiative with the private sector under the auspices of the Prime Minister's Office. In **Tanzania**, INPUD supported the national network of people who use drugs to engage in high-level advocacy with government officials for increased domestic funding for harm reduction interventions. GNP+ supported the national network of young people living with HIV to engage in Technical Working Group sessions that shaped the **National HIV Response Sustainability Roadmap**. The Roadmap aims to have more than 50% of the national HIV response domestically funded by 2030. It also acknowledges that community-led HIV testing increases status awareness among youth, aiming for 30% of HIV testing to be community-led by 2030 and to increase the proportion of young people living with HIV who know their status from 68% (**THIS 2022-2023**) to 95% by 2030.

1. Azerbaijan, Bolivia, Central African Republic (CAR), Congo, Ghana, Guinea, Moldova, Mongolia, Namibia, Nepal, Pakistan, Peru, Ukraine, and Zambia

As countries prepare for transition, communities have identified national social health insurance schemes as a key mechanism for sustaining HIV, TB and malaria services. In **Kenya**, NSWP supported a network of sex workers to engage the Ministry of Health and advocate for their inclusion as well as other vulnerable groups in the country's new Social Health Insurance Fund. The Regional Learning Hub for **Asia-Pacific** supported a Dialogue on Grant Cycle 8 for communities from the region (25-27 March 2026) where stakeholders advanced a strategy to shift community advocacy beyond Global Fund grants towards Universal Health Coverage reform processes including domestic health insurance schemes. In Suriname, technical assistance supported communities to update a social contracting roadmap and examine the potential role of insurance-based financing of HIV services.

In **Kyrgyzstan**, technical support was provided to assess the readiness of the country to transition TB programs to state financing. The process included revising the costing of TB services and proposing amendments to the Standards of Medical and Social Services for TB patients delivered by non-profit organizations. The initiative aimed to better align reimbursement rates with the real costs of service delivery, helping to strengthen incentives for civil society organizations to engage in social contracting, as existing rates have remained too low to support broader civil society participation.

AFRICA

NMCP-CIVIL SOCIETY TASK FORCES HELP MOBILIZE RESOURCES FOR MALARIA

The Strategic Initiative supported the establishment of joint task forces between the National Malaria Control Program (NMCP) and civil society actors in Cote d'Ivoire, Ghana and Tanzania, and strengthened existing ones in Cameroon, Niger and Nigeria. The taskforces aim to strengthen and coordinate civil society engagement in the malaria response by improving advocacy, information sharing, and collaboration from community to national level, while helping raise priorities and gaps with government and Global Fund implementers and mobilize resources.

The initiative supported the development of a new malaria resource mobilization strategy in Ghana, with a strong focus on private sector engagement. One example was Ecobank's support to the National Malaria Elimination Programme (NMEP), which included digital microscopes, 100 Samsung tablets, and a Toyota Hilux pickup truck valued at approximately US$120,000 (**CS4ME, 2025**; **Ghanian Times, 2024**).

In Nigeria, taskforce meetings enabled malaria civil society organizations across 13 states to define and coordinate resource mobilization strategies. In Tanzania, the malaria taskforce strengthened coordination and engagement among civil society organizations implementing malaria programs, helping to build a more organized platform for advocacy and mobilization of additional domestic resources for malaria.

This example is **recognized by the Global Fund** as a good practice innovation for TB.

6. ENGAGING TO ACCELERATE INNOVATIONS

As part of the **strategic shift** to optimize the use of all available funds, the rapid introduction of new, high-impact and cost-effective innovations is critical.

An example of this is the **Global Fund's ambition to roll-out Lenacapavir** (LEN)—a twice-yearly injection with up to 100% efficacy—for pre-exposure prophylaxis of HIV to 3 million people by 2028. Through the Strategic Initiative, a young female sex worker was supported to join the national LEN Implementation Committee in **Kenya**. The Regional Learning Hub for Anglophone Africa also supported a **regional dialogue on community considerations in LEN rollout in Anglophone Africa** on 2 September 2025. During the dialogue, communities from **Eswatini, Tanzania** and **Uganda** emphasized that successful rollout of LEN requires enabling policies, equitable access, reliable supply chains, prepared health workers, and differentiated service delivery models. A follow up webinar to unpack implementation of LEN was organized by the Anglophone Africa Learning Hub in May 2026.

Another priority for communities is the adoption of near point-of-care (NPOC) TB tests, which cost roughly half the price of the current molecular tests and expand access for populations who struggle to produce sputum. The Global Fund has briefed all Strategic Initiative partners on this, and the Anglophone Africa Learning Hub will be organising a webinar in June 2026 to unpack the introduction of TB NPOC tools from a regional community perspective. The Global Fund also supported the development of a **fact sheet for communities** on how to advocate for these new tests in Grant Cycle 8 funding request.

With support from the **Communities in Pandemic Preparedness and Response (COPPER CE) Initiative**, communities expanded engagement in new decision making spaces. In the **Philippines**, communities developed "manifestos" on health, justice, and rights that serve as advocacy tools for engaging government and pandemic preparedness platforms. In **Indonesia**, HIV community networks collaborated with disaster management and public health actors to integrate community-led contingency planning into broader pandemic preparedness systems. COPPER CE also developed innovative tools (available at the **COPPER resource hub**) for community engagement in PPR, including a Community PPR Scorecard and a **Compendium of Community Guides**.

The Global Fund/Sylvain Cherkaoui/Panos

Strategic Initiative partners harnessed digital and virtual innovations to expand engagement reach. In **Kenya**, community "PPR Champions" used WhatsApp groups, local radio, and the M-Dharura mobile application for real-time disease surveillance, case reporting, and emergency response during cholera and Mpox outbreaks, while sex worker networks used WhatsApp to share service availability and health information within hotspots. In **Ghana**, a community TB network combined peer-led community mobilization with digital engagement tools—including monthly virtual TB updates for community advocates—to strengthen TB awareness and advocacy among marginalized mining communities.

With support from the Community Engagement Strategic Initiative, a national TB community network in Ghana introduced an innovative approach to community mobilization among highly marginalized "Galamsey" mining communities by combining peer-led outreach with virtual engagement and digital communication tools. Rather than relying on traditional awareness materials, trusted ex-miners and community members shared information on TB prevention, testing, and treatment through informal peer networks and local gathering spaces, helping to overcome stigma and fear associated with accessing formal health services.

The initiative trained 25 women and men from mining communities as TB peer educators and advocates, while also strengthening relationships between communities and local health providers. Two ex-miners were appointed as observers to the CCM, marking the first time mining communities affected by TB were represented in national Global Fund-related decision-making processes. Other recruited members from the mining community were included in the pool of community TB advocates who receive monthly virtual TB updates, expanding ongoing engagement through digital communication channels.

According to the network, the initiative improved health-seeking behaviours among 5,750 members of Galamsey communities across the three project districts and contributed to a 25% increase in TB case finding. The initiative demonstrates how virtual communication, peer-led mobilization, and community leadership can strengthen TB responses in hard-to-reach and stigmatized populations.

This example is **recognized by the Global Fund** as an innovation for TB.


The Global Fund/Sylvain Cherkaoui/Panos

GHANA

INNOVATIVE USE OF VIRTUAL TECHNOLOGIES HELPS FIND MORE MISSING PEOPLE WITH TB

The Global Fund/Ashley Gilbertson

7. GEARING UP FOR GRANT CYCLE 8

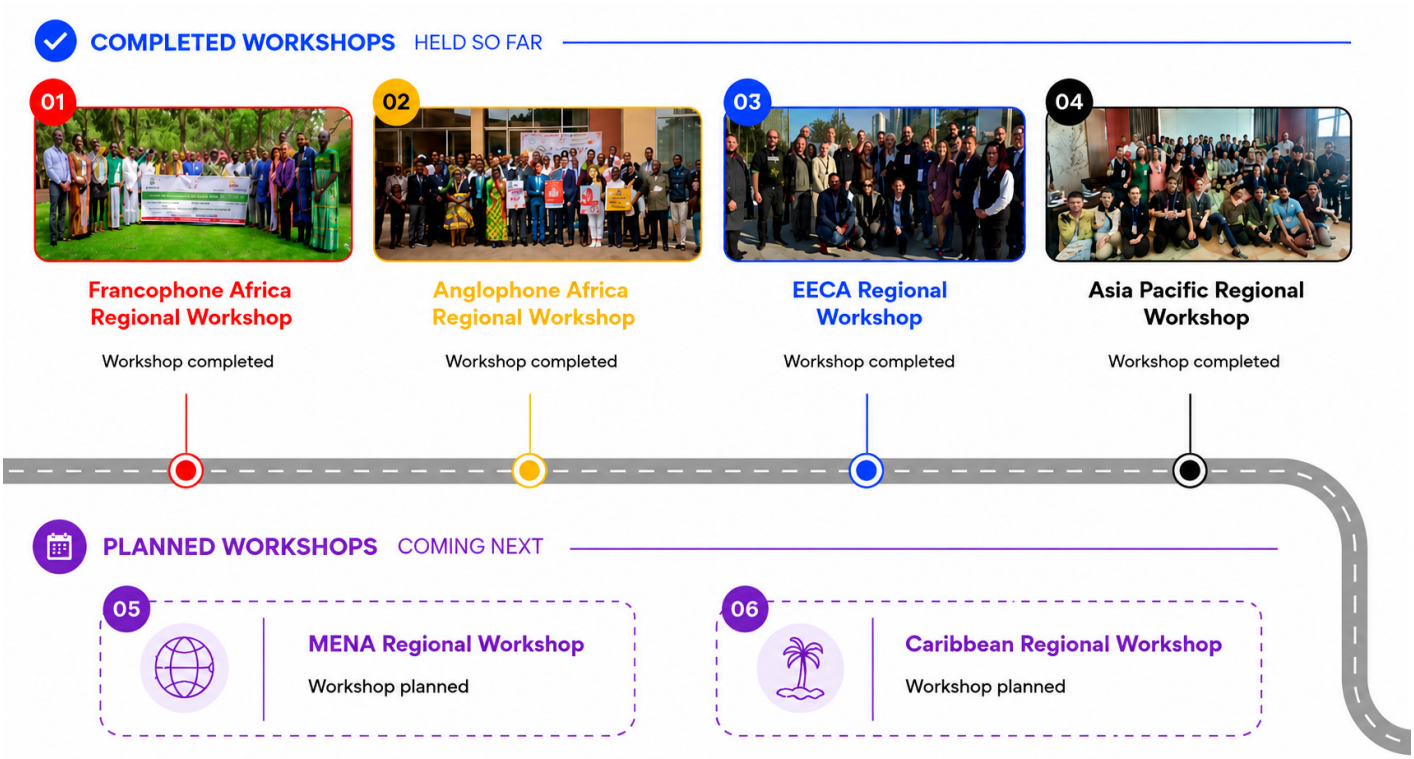
With Grant Cycle 8 officially underway, the Strategic Initiative is supporting communities to proactively engage in defining priorities, engage in country dialogue and funding request development. SI partners developed new guidance to support communities, including:

- **A Guide for Communities in Global Fund's Sustainability, Transition and Co-Financing**
- **Community Consultations Toolkit: Community Engagement during the Global Fund Grant Cycle 8 (GC8) 2026-2028 Allocation Period**
- **A Community Guide to Integration in the Global Fund GC8**
- **GC8 Community Costing Tool and Guide**
- **Trans Community Guide to Global Fund Grant Cycle 8**
- **Grant Cycle 8 Youth Engagement Guideline for Youth-Led Organizations in Asia-Pacific, Africa, and Eastern Europe**
- **GC8 for Sex Worker-Led Organizations**
- **How People who Use Drugs Can Influence GC8**
- **Understanding and Acting Effectively in the Global Fund GC8 Process – Malaria Component**

**Note: The Global Fund is sharing these resources to support community engagement only. This does not constitute an endorsement of the resources shared.*

These new partner GC8 resources are included in the updated **Community Engagement Toolbox**.

To help communities prepare for GC8, the Strategic Initiative is supporting Regional GC8 Readiness workshops, hosted by the Regional Learning Hubs. Four workshops were held in February and March 2026, with another two planned later in 2026.



As of 31 May, dedicated technical assistance for engagement in GC8 processes is underway in 30 countries, with another three in the planning stages. Rapid engagement support, provided through Regional Learning Hubs, is ongoing in 25 countries.
The Strategic Initiative and its partners are exploring innovative ways of engaging and supporting communities during GC8, including a **Community GC8 Podcast** series, and the first-ever GC8 consultant clinic aimed at community, rights and gender technical experts who are supporting funding request development.

The SI also supports the roll out of a new Community Responses and Systems Strengthening self-assessment tool, which provides quantitative analysis and recommended interventions for investment in GC8. The tool has been implemented in **Malawi**, the five countries of the MENA multi-country grant (Egypt, Jordan, Lebanon, Morocco and Tunisia), the **Philippines** and **Zimbabwe**, with additional countries planned in the coming months.

The Global Fund/Elan

MORE ABOUT THE COMMUNITY ENGAGEMENT STRATEGIC INITIATIVE

Strengthening Community Engagement Website

Contact Details of HIV, TB and Malaria Network Partners

Contact Details of Regional Learning Hubs

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