Sustaining TB responses through transition

Global Fund policies, country timelines and priorities for TB advocates

3 November 2026

Why transition is accelerating in global health

Less external financing

Donor cuts and the end of exceptional COVID funding have reduced available support.

Competing priorities

Security and defence, fiscal pressures and domestic demands compete for resources.

Architecture reform

Stronger country leadership and coordinated support aligned with national systems.

For TB: domestic financing and integration must protect service continuity and community responses.

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What is transition?

A country or disease component takes full responsibility for financing and implementing its response independently of Global Fund support.

Success	TB service coverage and gains continue, with further scale-up where needed.
For TB advocates	Continuity of care and equitable access remain central throughout the change.

How the policies fit together

Eligibility Policy	Determines which country disease components can receive an allocation.
Allocation methodology	Determines funding amounts using disease burden, economic capacity and contextual adjustments.
STC Policy	Sets sustainability, transition and co-financing expectations for grant design and domestic uptake.

Eligibility alone does not guarantee an allocation or prevent a defined transition timeline.

Eligibility and transition triggers

Low and lower-middle income	Generally eligible for TB allocations regardless of burden.
Upper-middle income	TB incidence ≥50 per 100,000 OR rifampicin resistance in ≥5% of new TB cases. Exceptions apply.
Loss of eligibility	May allow one final Transition Funding allocation. High-income and OECD-DAC membership exclusions apply.

*Annual eligibility assessment uses three-year average GNI per capita.
**IDA-eligible Small States and challenging operating environments have specific provisions.

STC requirements for transition

Planning	Funding requests must reflect sustainability planning and transition planning where relevant.
Domestic financing	Countries must meet applicable co-financing requirements to access their full allocation.
Country systems	Progressively transfer externally financed interventions into domestic financing and implementation.

Revised STC Policy: November 2024. GC7 grants retain the previous policy.

Transition planning and process

1 Establish the pathway	Confirm the component timeline and requirements in the allocation letter.
2 Assess and cost	Identify service and financing gaps, including risks to community services.
3 Agree the work plan	Specify actions, budgets, responsibilities and milestones in national plans and the funding request.
4 Implement and review	Track domestic commitments and service continuity. Adjust where gaps emerge.

Integration during TB transition

Transition changes who funds and manages the response.
Integration connects TB care with wider health services and systems.

Care closer to people	Link community outreach, primary care and TB specialists through clear referrals.
Shared systems	Connect laboratories, medicine supplies, training and information systems while retaining TB expertise.
Sustainable financing	Include TB and community services in domestic budgets and payment arrangements.

Plan and test changes with communities before existing support ends.

Integration barriers for communities

Potential barrier	Safeguard to seek
Community groups cannot access public funds	Workable contracts, fair payment and funding for core costs
Broader duties overwhelm community workers	Paid roles, realistic workloads and TB training
Stigma or fewer trusted places to seek care	Retain trusted community services and safe referrals
Shared records expose sensitive information	Consent, confidentiality and controlled data access
Community voice and oversight weaken	Community decision-making and independent monitoring

Advocacy ask: fund these safeguards and track who loses access as services change.

Roles in the transition process

CCM / coordinating body	Leads an inclusive country transition planning process.
Government and TB programme	Agree domestic funding and delivery arrangements with finance authorities.
Communities and civil society	Shape priorities and track whether transition protects access to care.
Global Fund and partners	Clarify requirements and provide planning and implementation support.

Expectations for community engagement

Funding request	Transparent, inclusive consultations with affected populations. Document community funding priorities.
Grant-making	Community and civil society CCM representatives receive timely information on negotiations and changes.
Implementation	Representatives receive timely programme information to support oversight.

Advocacy priorities: funded community services, meaningful representation and a clear response to community recommendations.

TB allocation cycles and transition timing

Cycle	Allocation period	Meaning for transition cohorts
GC8	2026–2028	Final allocation for the GC8 cohort
GC9	2029–2031	Final allocation for the GC9 cohort

GC8 cohort grants end by 31 December 2030. GC9 dates follow individual grant agreements.

Allocations occur every three years. Implementation follows country cycles, usually over three years. GC8 TB funding uses burden and economic capacity, then contextual adjustments.

Upcoming TB transitions: GC8 cohort

Country / component group	Final allocation
Armenia, Azerbaijan, Belarus, Bhutan, Botswana	GC8: 2026–2028
Cabo Verde[1], Djibouti, Egypt, El Salvador, Gabon	GC8: 2026–2028
Georgia, Honduras, Kazakhstan, Moldova, Mongolia	GC8: 2026–2028
Morocco, Namibia, Peru, Sri Lanka, Thailand, Turkmenistan	GC8: 2026–2028
MC Western Pacific[2]: Fiji, Kiribati, Marshall Islands, Micronesia (Federated States), Samoa, Tonga, Tuvalu, Vanuatu	GC8: 2026–2028

All components shown are TB. Grants end by 31 December 2030.
[1] Transition Funding. [2] One multicountry TB component. Source: April 2026 list.

Upcoming TB transitions: GC9 cohort

TB country components	Final allocation
Bolivia, Eswatini	GC9: 2029–2031
India, Indonesia	GC9: 2029–2031
Philippines, South Africa, Viet Nam	GC9: 2029–2031

Grant end dates depend on country agreements.
Confirm national timelines with the CCM and Global Fund country team.