



HIV PBC 6 Progress Update Jan-June 2026 (Q1+Q2)

Joint meeting Excom, OC and RMC on 29 June 2026



Outline:

1. HIV PBC 6 Progress Update (HANSA II)
2. Update HIV priorities for GC8 allocation

HIV PBC 6 Year 3 (2026)

No.	Conditions of HIV PBC 6	Target 2026			(%)		
		Y1 2024	Y2 2025	Y3 2026	Y1 2024	Y2 2025	Y3 2026
6.1	Percentage of FSW (5 target sites) that have received an HIV test during the reporting period and know their results	9,476	9,711	9,939	93%	94%	95%
6.2	Percentage of MSM/TG (5 target sites) that have received an HIV test during the reporting period and know their results	4,435	5,521	6,708	57%	70%	84%
6.3	Percentage of PLHIV on ART at the end of the reporting period	11,979	12,934	13,967	64%	66%	69%
6.4	Number of MSM/TG who received any PrEP product at least once during the reporting period	1,100	1,300	1,500	NA	NA	NA
6.5	Percentage of PLHIV on ART with a viral load test result at least once during the reporting period	1,610	12,232	13,627	89%	95%	98%

Progress Update for Q2 (Jan-June 2026)

PBC_6.1 : Percentage of female sex workers (FSW) in the 5 target sites that have received an HIV test during the reporting period and know their results Lao PDR

No.	Provinces	Denominator	Baseline	2026						Total		Target: +1%	Target	Progress
				Jan	Feb	Mar	Apr	May	Jun	Sum	%			
1	01 Vientiane Capital	4,149	94%	54	196	258	273	103	276	1,160	27.96%	95%	3,942	29.43%
2	10 Vientiane	1,728	94%	96	97	96	95	240	49	673	38.95%	95%	1,642	40.99%
3	12 Khammouan	1,435	94%	69	79	78	86	228		540	37.63%	95%	1,368	39.47%
4	13 Savannakhet	1,747	94%	110	94	125	83	297	68	777	44.48%	95%	1,659	46.84%
5	16 Champasak	1,398	94%	81	81	82	84	224	78	630	45.06%	95%	1,328	47.44%
Total		10,457	94%	410	547	639	621	1,092	471	3,780	36.15%	95%	9,939	38.03%

PBC_6.2 : Percentage of men who have sex with men/transgender (MSM/TG)

No.	Provinces	Denominator	Baseline	2026						Total		Target: +14%	Target	Progress
				Jan	Feb	Mar	Apr	May	Jun	Sum	%			
1	06 Louangphabang	2,142	70%	120	114	121	114	138	101	708	33.05%	84%	1,800	39.33%
2	08 Xainyabouli	1,324	70%	84	90	100	74	80	86	514	38.82%	84%	1,113	46.18%
3	10 Vientiane	2,460	70%	181	168	173	135	159	115	931	37.85%	84%	2,067	45.04%
4	11 Bolikhamxai	760	70%	42	53	42	53	48	50	288	37.89%	84%	638	45.14%
5	12 Khammouan	1,298	70%	73	103	94	93	91	36	490	37.75%	84%	1,091	44.91%
Total		7,984	70%	500	528	530	469	516	388	2,931	36.71%	84%	6,709	43.69%

PBC 6.3 Percentage of PLHIV on ART at the end of the reporting period

	Y1 (2024)	Y2 (2025)	Y3 (June 2026)
Denominator	18687	19469	20297
Target (against denominator)	11979 (64%)	12934 (66%)	13967 (69%)
Actual achievement (against denominator)	13310 (71%)	14866 (76%)	15394 (75%)
Progress (Actual achievement vs Target)	111%	115%	110%

Performance: Consistently exceeding targets (110–115%) across all years.

Data reporting from 49 ART/POC sites vs Total 55 ART/POC sites

PBC_6.3 : Percentage of people living with HIV (PLHIV) on ART among all estimated PLHIV at the end of the reporting period Lao PDR 2026												
No.	ART Sites	Denominator	Baseline	2026						Target: %	Target	Progress
				Jan	Feb	Mar	Apr	May	Jun			
1	0001 CH Mahosot	20,297	66%	2,126	2,133	2,157	2,169	2,192	2,186	69%	13,967	76%
2	0002 CH Mittaphap			1,410	1,414	1,441	1,439	1,458	1,472			
3	0003 CH Setthathirath			4,073	4,090	4,086	4,115	4,121	4,122			
5	0005 CH Mother & Child			24	28	28	29	27	28			
7	0010 CH 5 Mesa (Police)			10	10	12	14	14	14			
8	0105 DH Naxaythong			2	7	9	10	15	15			
9	0106 DH Xaithani			2	2	3	3	2	2			
10	0107 DH Hatxayfong			5	5	7	8	12	12			
11	0108 DH Sangthong			9	13	14	13	13	13			
12	0109 DH Paknum			2	2	4	7	7	8			
13	02 PH Phongsali			45	49	50	47	52	56			
14	03 PH Louangnamtha			235	242	242	239	239	240			
15	0302 DH Sing			4	5	6	6	7	7			
17	04 PH Oudomxai			306	315	328	327	322	306			
18	05 PH Bokeo			312	312	302	300	299	307			
19	0502 DH Tonpheung			145	145	144	143	144	143			
21	06 PH Louangphabang			912	902	889	889	904	903			
22	0602 DH Xiangngeun			11	11	10	8	10	13			
23	0603 DH Nan			1	1	2	4	5	5			
24	0605 DH Nambak			88	96	115	122	123	129			
25	07 PH Houaphan			147	171	174	174	164	165			
27	08 PH Xainyabouli			361	365	365	373	376	369			
28	0803 DH Hongsa							1	1			
29	0807 DH Paklay			38	42	42	40	26	27			
30	09 PH Xiangkhouang			244	244	246	252	253	256			
31	0902 DH Kham			19	18	22	23	23	22			
32	10 PH Vientiane			349	358	355	358	362	362			
33	1005 DH Vangviang			68	74	79	83	83	81			
34	1006 DH Fuang							2	2			
35	1007 DH Xanakhom				1	3	4	11	10			
36	11 PH Bolikhamxai			195	202	203	198	192	188			
37	1105 DH Khamkeut				2	3	3	5	5			
38	12 PH Khammouan			697	702	709	714	714	718			
39	1203 DH Nongbok			9	10	10	13	14	12			
40	1205 DH Nyommalat					3	3	5	5			
41	13 PH Savannakhet			1,476	1,467	1,464	1,462	1,466	1,452			
42	1303 DH Atsaphangthong			24	29	32	33	35	37			
43	1305 DH Xepon			10	9	8	9	7	6			
44	1308 DH Songkhon			104	106	107	107	110	109			
45	1309 DH Champhon			32	33	35	34	29	28			
46	14 PH Salavan			111	114	116	115	115	115			
47	15 PH Xekong			60	61	62	62	63	63			
48	16 PH Champasak			1,229	1,235	1,239	1,232	1,232	1,220			
49	1604 DH Pakxong			6	7	9	13	13	13			
50	1607 DH Champasak			11	15	19	20	20	21			
51	1610 DH Khong			16	16	20	20	20	23			
52	17 PH Attapu			67	68	76	78	75	77			
53	18 PH Xaisomboun			14	14	15	17	16	15			
54	DH Sopbao			6	8	9	10	11	11			
Total				20,297	66%	15,015	15,153	15,274	15,342			

PBC_6.4 : Number of men who have sex with men (MSM)/transgender (TG) who received any PrEP product at least once during the reporting period Lao PDR 2026

No.	ART Sites	2026						Total	Target	Progress
		Jan	Feb	Mar	Apr	May	Jun			
1	0001 CH Mahosot	27	28	39	21	18		110	1,500	49%
2	0002 CH Mittaphap	14	22	19	23	19	19	87		
3	0003 CH Setthathirath	33	47	44	35	49	46	209		
20	06 PH Louangphabang	8	7	6	7	14		36		
23	0605 DH Nambak			1				1		
26	08 PH Xainyabouli			3				3		
31	10 PH Vientiane	2		1				2		
37	12 PH Khammouan	3	8	5	3	7	5	24		
40	13 PH Savannakhet	12	24	10	12	13	9	74		
47	16 PH Champasak	6	30	12	26	26	6	106		
54	DIC-MSM Vientiane Capital	21	14	19	15	21	8	80		
Total		126	180	159	142	167	93	732	1,500	49%

Data Exp: 28.6.2026

PBC 6.5 Percentage of PLHIV on ART with a viral load test result at least once during the reporting period

	Y1 (2024)	Y2 (2025)	Y3 (June 2026)
Denominator	11979	12934	13967
Target (against denominator)	10610 (89%)	12232 (95%)	13627 (98%)
Actual achievement (against denominator)	10940 (91%)	12540 (97%)	12739 (91%)
Progress (Actual achievement vs Target)	103%	102%	93%

Performance: Strong performance in 2024–2025 (>100% achievement) with high coverage (91% → 97%); decline in 2026 reflects **partial-year reporting**. Data reporting from 49 ART/POC sites vs Total 55 ART/POC sites

PBC_6.5 : Percentage of people living with HIV (PLHIV) on ART with a viral load test result at least once during the reporting period (Nationwide) Lao PDR 2026

No.	ARV Sites	Denominator	Baseline	2026						Target: %	Target	Progress
				Jan	Feb	Mar	Apr	May	Jun			
1	0001 CH Mahosot	13,967	95%	1,640	1,656	1,676	1,677	1,684	1,674	98%	13,627	91%
2	0002 CH Mittaphap			1,149	1,163	1,181	1,182	1,187	1,181			
3	0003 CH Setthathirath			3,434	3,457	3,452	3,463	3,470	3,417			
5	0005 CH Mother & Child			8	12	12	12	10	10			
7	0010 CH 5 Mesa (Police)			0	0	0	0	0	0			
8	0105 DH Naxaythong							0	0			
9	0106 DH Xaithani							0	0			
10	0107 DH Hatxayfong							1	2			
11	0108 DH Sangthong					0	0	0	0			
13	02 PH Phongsali			8	8	8	8	10	11			
14	03 PH Louangnamtha			170	174	178	178	177	165			
15	0302 DH Sing								0			
17	04 PH Oudomxai			164	168	174	169	167	158			
18	05 PH Bokeo			243	238	232	232	232	235			
19	0502 DH Tonpheung			94	90	91	90	91	90			
21	06 PH Louangphabang			705	710	715	713	713	707			
22	0602 DH Xiangngeun							0	0			
24	0605 DH Nambak				0	1	1	1	1			
25	07 PH Houaphan			90	114	119	119	114	103			
27	08 PH Xainyabouli			190	194	189	191	193	186			
29	0807 DH Paklay			9	9	8	9	9	9			
30	09 PH Xiangkhouang			105	106	108	111	115	110			
31	0902 DH Kham			6	5	8	9	10	9			
32	10 PH Vientiane			179	179	180	186	185	184			
33	1005 DH Vangviang					1	1	2	3			
36	11 PH Bolikhamxai			73	76	78	81	84	82			
38	12 PH Khammouan			614	608	607	610	605	601			
41	13 PH Savannakhet			1,282	1,281	1,285	1,273	1,262	1,242			
44	1308 DH Songkhon			3	3	3	4	4	4			
46	14 PH Salavan			28	28	31	28	27	25			
47	15 PH Xekong			17	17	16	17	17	16			
48	16 PH Champasak			1,078	1,072	1,082	1,084	1,097	1,077			
52	17 PH Attapu			23	23	25	27	24	26			
53	18 PH Xaisomboun			0	0	0	0	0	0			
Total		13,967	95%	12,670	12,793	12,905	12,938	12,952	12,739	98%	13,627	91%

Data Exp: 28.6.2026

PBC 6 Challenges

PBC 6	Risk	Challenges
1. PBC 6.1 (FSW) "95%" → Q1: 15% → Q2: 38%	"Risk of not achieving"	• Delay on budget disbursement to implementors • Crisis of gasoline price
2. PBC 6.2 (MSM/TG) "84%" → Q1: 23% → Q2: 43%	"Risk of not achieving"	• Delay on budget disbursement to implementors • Crisis of gasoline price
3. PBC 6.4 (PrEP for MSM/TG) "1,500" → Q1: 369 cases (25%) → Q2: 732 cases (49%)	"Risk of not achieving"	• Delay budget disbursement to implementors • Crisis of gasoline price
4. PBC 6.5 (VL for PLHIV) "98%" → Q1: 97% → Q2: 93%		• Crisis of gasoline price • iSRS still piloting in 2 provinces

Budget Allowances

HIV Component budget summary for 2026 (PBC6)

Item No.	Implementers	AOP Budget (USD)	2024-2025 Saving (USD)	Saving from Procurement (\$160K)	Additional Fund (USD)	Total (USD)	Percentage (%)
1	CHAS	367,466	60,500	78,328	77,462	583,756	25.34%
2	PHO	361,606		10,562	56,500	428,668	18.61%
3	PEDA	68,860				68,860	2.99%
4	CHIAs	121,316				121,316	5.27%
5	APL plus	43,720				43,720	1.90%
6	UNAIDS (TA)			30,000	105,751	135,751	5.89%
7	Procurement (Budget Outside)	880,614		41,110		921,511	40.00%
	Total budget (USD)	1,843,582	60,500	160,000	239,713	2,303,582	100.00%

1. Activities under Procurement Saving (160k)

Activities	No. of Activities proposed for funds	Values of proposed funds (USD)	Values of funds received (USD)
Procure HIV/Syphilis Dual test for key populations (MSM/TG and FSW)	1	41,110	Sumit Order
Carry out regular site monitoring visits to all existing and newly established POC sites focusing low performance sites (60 sites).	1	9,508	Not Yet
Training for new personnel and new POC sites on ARV/OI case management in district level.	1	24,066	Not Yet
Support adolescent champion activities to encourage adolescent LWHA retention (Pilot idea in high volume sites).	1	10,562	Not Yet
Implement a rapid assessment to understand the current situation of chemsex practices in the country.	1	30,000	Not Yet
Field visits and consultation meetings for the chemsex assessment.	1	11,000	Not Yet
A staff contract will be engaged to provide maintaining the website for online interventions, support to design innovative interventions through online platform.	1	15,000	Not Yet
Promote HIV testing, HIVST provision, PrEP, U=U message and S&D reduction in community among youth and workers through collaboration with line ministries (MOES and MOL)	1	18,754	Not Yet

2. Activities of Additional Fund (239,713\$)

Interven tions	Activities	Implemente rs	Values of proposed funds (USD)	Values of funds received (USD)
TB/HIV	M&E joint program data coordination meeting.	CHAS	3,500	Not Yet
eMTCT	Conduct on-site training for health providers in ANC, delivery and labor (D&L), and pediatrics on case finding and continuum of care.	PHO	11,500	Not Yet
eMTCT	Conduct on-site training for district trainers on HIV testing (T1, T2, T3) using Duo-Test, and the service delivery package at district and health center levels. Target: 3 provinces (LPB, Savannakhet and Champasak).	PHO	45,000	Not Yet
M&E	Printing VCT logbook, PrEP log book, and STI logbook for districts and HCs.	CHAS	12,249	Not Yet
TA	UNAIDS TA-SI to Support for Strategic Information.	UNAIDS	95,304	Not Yet
TA	UNAIDS TA-HE to provide specialized technical expertise in health financing, costing, and funding landscape.	UNAIDS	10,447	Not Yet

2. Activities of Additional Fund (239,713\$)

Interven tions	Activities	Implementers	Values of proposed funds (USD)	Values of funds received (USD)
PrEP	Conduct 3 regional trainings on PrEP services for health providers from ART and POC sites in nationwide and 3 DICs Vientiane, Savannakhet, and Champasak.	CHAS	45,000	Not Yet
PrEP	Finalize and print referral cards for MSM and FSW from CSOs to health facilities and drop-in centers.	CHAS	8,000	Not Yet
Program mng.	AEM projection workshop with development partners, impenmenting partners (5 days)	CHAS&TA	2,500	Not Yet
Program mng.	Meeting with all stakeholders to consult and share GF guidance and preparation plan of GC8 submission	CHAS&TA	3,000	Not Yet
Program mng	Dissemination meeting with all stakeholders on guidance and preparation plan of GC8 submission	CHAS&TA	3,213	Not Yet

3. Key Progress of 2024-2025 (60,500\$) (saving on hand)

Activities	No. of Activities proposed for funds	Values of proposed funds (USD)	Values of funds received (USD)
Strengthen on strategic information system (M&E capacity building and coordination, RDQA) and NSP	10	25,000	25,000
TA to support programmatic review to support NSP outcome and PSE	2	35,500	35,500

GC8 & STRATEGIC PLANNING SUPPORT

NSAP 2026–2030

Finalized TORs for technical assistance for the National Strategic Action Plan. Recruitment process initiated by CHAS.

KP Size Estimation

Prepared TORs for technical assistance. Recruitment process initiated by CHAS.

GC8 Submission

Prepared all required documents, including application forms and official letters to CCM and French I 'initiative.

Chemsex Rapid Assessment

Prepared TORs for technical assistance. Recruitment process initiated by UNAIDS.

Recommendations from Country Dialogue on HIV priorities for GC8 and Refinement of HIV Priorities for GC8

Preparation, Strategic Priorities, and Submission Strategy

Country Dialogue Overview

Held on 22 May 2026, chaired by Dr. Phayvanh Keopaseuth, Vice Minister of Health
(CCM Chair)

Objective

Review national TB/HIV status, identify gaps, and discuss strategic priorities for the GC8 application (2027-2029).

Participants

Included line ministries, WHO, development partners, CSOs, representatives from affected communities, and technical agencies.

Key Focus:

- Investing in high-burden populations,
- Strengthening people-centered services, and integration into Primary Healthcare (PHC) to ensure service sustainability.

Scenario 2: Proposed Extended Development Timeline

Phase 1 & 2 (May-August 2026)

- **May:** Country Dialogue.
- **June-Mid August:** Extended period for PR/CT development of core application package and Performance Framework negotiations.

Phase 3 & 4 (Aug-Oct 2026)

- **End August:** CCM Official Endorsement.
- **September:** PR Official Submission.
- **October:** GAC Review with TRP inputs.

Completion: November 2026 (Board Approval) → 1 January 2027 IP Start.

Technical meeting to refine and finalize HIV priorities with CSOs (held on 24 June 2026)

Objective

Review and consensus on the final HIV priorities for inclusion in the GC8 funding request.

Participants

Included CHAS, NTC, NCLE, MCH, development partners WHO, TA- UNAIDS, CSOs (Chias, PEDDA, APL+, APWDL)

Key Focus:

- The final HIV priorities matrix for GC8 application
- Refine the investment in high-burden populations and provinces
- Strengthening people-centered services, and integration HIV/TB services into Primary Healthcare (PHC) to ensure service sustainability.

HIV Strategic Priorities (High priorities)

Prevention:

- Scale up nationwide RRTTPR strategy with intensify intervention for KPs
- Target key populations (MSM/FSW).
- Expand PrEP and STI services - Pilot acceptability, accessibility and feasibility of new prevention technologies (including injectable PrEP) and assess chemsex situation in the country.
- Establish one-stop service models integrating psychosocial support.

Testing & Treatment:

- Expand differentiated HIV testing integrated into PHC point-of-care services (up to health centres)
- Decentralize ART/POC sites with strengthen paediatric and adolescent HIV services, including AHD package to improve ART outcomes.
- Pilot Triple testing in high burden and scale up HIV/syphilis dual testing in nationwide
- Strengthen EMTCT and paediatric HIV follow-up.

TB/HIV integrated services:

- Strengthen integrated TB/HIV service delivery package at all levels
- Scale-up TPT for all eligible PLHIV and assess expansion to HIV-negative key populations

Prioritization of Provinces for Hotspot Analysis on Programmatic Data (2025) – MSM (1/2)

Province	Estimated MSM Population	MSM Coverage (%)	MSM Tested	HIV Positive MSM	HIV Positivity (%)	Interpretation	Priority
Vientiane Capital	12,016	42.84%	5,148	307	6%	Largest MSM population and highest HIV burden nationally, high clustering due to tourism and migration	Very High Priority
Savannakhet	4,693	24.72%	1,160	46	4%	Large MSM burden with seemingly important unmet prevention needs; cross-border migration	High Priority
Champasak	3,902	36.77%	1,435	70	5%	High HIV burden with important mobility and border dynamics	High Priority
Luangprabang	2,431	64.24%	1,562	24	2%	Large MSM population with significant programme reach and high tourism-linked vulnerability	Medium-High Priority
Vientiane Province	2,792	59.30%	1,656	10	1%	Large MSM population; high tourism-linked vulnerability	Medium-High Priority
Khammouan	1,579	60.36%	953	15	2%	Moderate size, with work related migration	Medium-High Priority
Xayabouly	1,640	53.30%	874	11	1%	Moderate size; work related migration	Medium-High Priority
Bolikhamxai	1,017	48.78%	496	4	1%	Moderate size; work related migration	Medium-High Priority

Prioritization of Provinces for Hotspot Analysis on Programmatic Data (2025) – FSW (1/2)

Province	Estimated FSW population	Coverage (%)	Tested	HIV Positive	Positivity (%)	Interpretation	Priority
Oudomxai	698	38%	264	12	4.55%	Highest positivity among sizeable tested groups; clear hotspot	High Priority
Luangnamtha	736	66%	483	16	3.31%	High positivity with moderate coverage; may be concentrated transmission	High Priority
Luangprabang	1,073	61%	651	15	2.30%	Large FSW size with high positivity; high tourism related vulnerability	High Priority
Vientiane Capital	3,713	113%	4,209	20	0.48%	Largest FSW programme volume; with complete coverage (may be ongoing transmission), high tourism related vulnerability	High Priority
Bokeo	623	26%	164	4	2.44%	High positivity with low coverage; likely unmet need; SEZ zone	Medium-High Priority
Salavan	747	17%	129	2	1.55%	Low coverage with elevated positivity; requires focused expansion	Medium-High Priority
Sekong	241	55%	92	1	1.09%	Smaller size but positivity above national FSW average	Medium Priority

HIV Strategic Priorities (High priorities)

Community System Strengthening:

- Ensure availability of essential HIV commodities at community level and explore dual testing through CSOs.
- Scale up HIV/syphilis dual testing in nationwide
- Strengthen EMTCT and paediatric HIV follow-up, including EID

Data Systems & Strategic Information:

- Strengthen data quality assurance and utilisation of data dashboards for public action
- Strengthen data management and monitoring and evaluation systems for evidence-based program implementation.
- Need-based infrastructure strengthening to ensure continuity of services (including IT equipment for data management etc.)

Budget allocation for GC8 and Co-financing

Table 1: Summary of allocation

Eligible disease component	Allocation up to US\$	Allocation Utilization Period
HIV	5,262,419	1 January 2027 to 31 December 2029
Tuberculosis	6,332,299	1 January 2027 to 31 December 2029
Total	11,594,718	

Updated on 11 JUNE 2026								
Product category	2027 (in USD)		2028 (in USD)		2029 (in USD)		TOTAL - 3years	
	GoL	Global Fund	GoL	Global Fund	GoL	Global Fund	GoL	GF
PrEP	6,368.94	6,368.94	7,096.51	5,806.23	7,836.66	5,224.44	21,302.11	17,399.62
ARVs (include PSM20%)	340,901.49	340,901.49	548,777.82	449,000.03	643,638.79	429,092.52	1,533,318.09	1,218,994.05
HIV RDTs (include PSM20%)	108,405.16	67,019.26	228,907.90	103,414.40	256,982.38	103,255.83	594,295.44	273,689.50
VL, EID cartridge (include PSM10%)	-	380,652.93	207,876.72	207,876.72	228,664.39	187,089.05	436,541.11	775,618.70
CD4 equipment & AHD screening test	46,667.71		53,815.10		53,907.50		154,390.32	-
OI medicines	88,618.06		97,179.86		105,642.81		291,440.72	-
Lab reagents & consumables	12,100.00		12,100.00		12,100.00		36,300.00	-
TOTAL	603,061.36	794,942.63	1,155,753.91	766,097.38	1,308,772.53	724,661.85	3,067,587.80	2,285,701.86

Next Step:

Phase 2: Grant Document Development (June – July 2026)

- **June – July 2026: Develops Core Application Package.**
 - 1-2 July 2026: Detailed Action Plan on agreed priorities for GC8 with CSOs;
 - 8-10 July 2026: Meeting to finalize CSOs with costing and budget preparation along implementation arrangement
 - 13-17 July 2026: The National Programs prepare the mandatory funding landscape table, performance framework, detailed budget, and the *2-page CCM Investment Priorities Summary* template are finalized.
 - 20-23 July 2026: The PR, CCM, and National Programs co-develop the GC8 Co-financing Commitment Letter.
 - 24 July 2026: The PR and CCM draft and negotiate the grant level documents with the GF Country Team (CT).

Proposed Timeline and key documents for GC8 grant submission

	The tasks to complete for GC8 submission:	Time	Progress
1	Propose CCM email to GF to confirm for extension Program split deadline	May 2026	Done
2	TB and HIV country dialogue – complete on May 22,	May 2026	Done
3	Programmatic Gaps table - Prepared by National programs	24 July 2026	
4	Performance Framework - Prepared by National programs	24 July 2026	
5	Focused Funding Landscape Table” - Prepared by National programs	24 July 2026	
6	Two pages of CCM Investment Priorities Summary - Prepared by National programs	24 July 2026	
7	GC8 Co-financing commitment letter – Prepared by PR/CCM and national programs Evidence of GC7 co-financing realization – Submit report on GoL actual expenditures for 2025, and 2026 budget approval to NPCO	24 July 2026	Submit draft letter is possible
8	Meeting to compile all key documents before submission to Stefan (GF FPM) on 27 JUL 2026	24 July 2026 27 July 2026	
9	Mandatory CCM documents (uploaded alongside the grant package): - PR nomination - completed - CCM endorsement – August 14, incorporating with 2 nd CCM plenary meeting - CCM statement of compliance - August 14, incorporating with 2 nd CCM plenary meeting - Evidence of GC7 co-financing realization – Already report GoL actual expenditures for 2024-2025, and 2026 budget approval	August 2026	

Thank you for your attention

