The AMFm is an innovative financing mechanism for ACTs that aims to...

1. Increase access to ACTs, especially among poor and vulnerable populations

2. Delay the spread of resistance (by driving monotherapies out of the market & eliminating selection pressures)

...through......

1. Access to subsidized drugs

2. Supporting interventions

Changes since the AMFm Grant Amendment was signed in April 2010 –

**Grant Management:** AMFm grant amendment has been consolidated into the GFATM Single Stream Funding with Round 9.

**AMFm Co-Payment:** Cambodia has not been able to access the AMFm co-payment for ACTs due to the lack of a GMP or SRA approved ACT suitable for Cambodia’s evolving drug resistance landscape.

**Elimination:** In March 2011, the Honorable Prime Minister of Cambodia Hun Sen announced the approval of the National Strategic Plan to Eliminate Malaria by 2025.
AMFm Supporting Interventions have been launched to improve access to quality diagnosis and treatment, e.g. –

Public-Private Mix (PPM) has been launched - Decentralized approach to improving case management, referrals and reporting among private sector providers:

- Private providers mapped & census conducted
- Local PPM teams established (including provincial and district health authorities & drug bureau)
- Orientation, training and supervision to take place within the context of the newly formed Elimination Task Forces

CNM has successfully partnered with the Ministry of Interior Anti-Economic Crime Police to combat counterfeit drugs & enforce ban on monotherapies

- 418 Police have been trained to identify and investigate counterfeit antimalarials and enforce ban on oral artemisinin monotherapies.
- AMFm-MoIE team & CNM staff conducted field visits to key provinces and border check points to discuss proposed action plans & encourage collaboration with local authorities
AMFm-Related Next Steps for Cambodia include:

- Securing supply of co-formulated ACTs for the public and private sectors,
- Securing supply of RDTs for public and private sectors,
- Issuing revised National Treatment Guidelines once ACT is secured,
- Launching Public-Private Mix nationwide,
- Continuing collaboration with MoIE,
- Reprogramming funds to adapt to changes in country context.