

Thematic Report

Promoting Gender Equality



The challenge

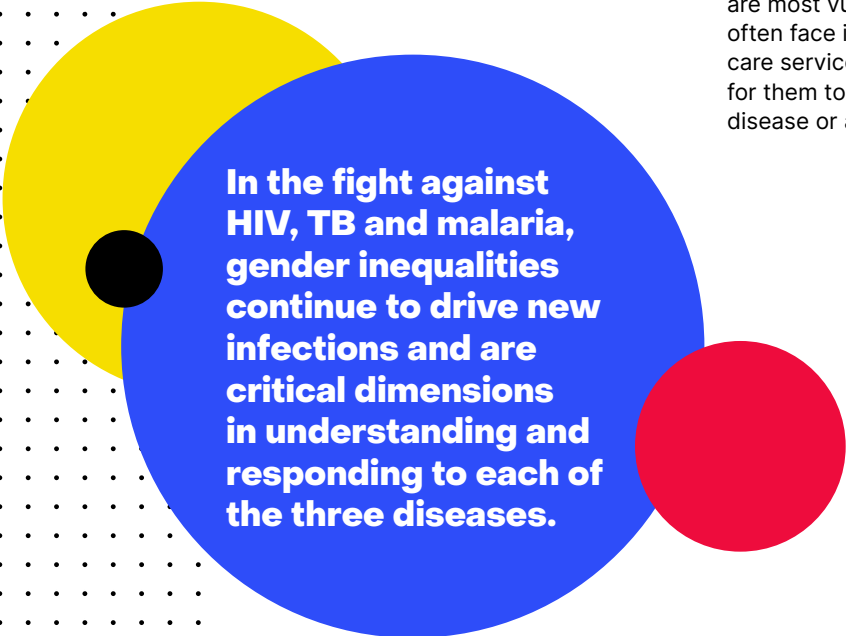
In every region of the world, gender remains a key determinant of health and well-being.

Gender norms, roles and relationships make a fundamental difference to a person's risk of contracting a disease, their ability to access health services and how they are treated once in the health system. In the fight against HIV, tuberculosis (TB) and malaria, gender inequalities continue to drive new infections and are critical dimensions in understanding and responding to each of the three diseases.

For HIV, gender inequality has long been recognized as a powerful driver of the epidemic. Adolescent girls and young women are still disproportionately affected. In sub-Saharan Africa, six in seven adolescents aged 15-19 who are newly infected with HIV are girls. With the 15- to 24-year-old population expected to increase by 40% over the next decade in the region, failure to protect adolescent girls and young women from HIV could lead to a resurgence of the epidemic. Worldwide, members of key and vulnerable populations including the LGBTIQ+ (lesbian, gay, bisexual, transgender, queer and intersex) community face a heightened burden of HIV due to several factors, including harmful gender norms.

Gender is a critical dimension for understanding and responding to TB. Globally, 64% of new TB infections occur among men – this may reflect societal gender patterns, including a trend among men to delay seeking treatment and to hold jobs that are high risk for contracting TB. In some contexts, women may have less access to TB treatment and prevention services due to cultural norms and inequalities. For example, when pregnant women living with HIV contract TB, the risk of them or their baby dying increases by almost 400%. Key populations most at risk of TB, including prisoners, migrants, refugees and indigenous communities, often face stigma that is further compounded by gender discrimination.

Gender-related barriers also impact heavily on people's vulnerability to malaria. Depending on an individual's gender there are often stark differences in their access to information and health care, sleeping patterns and division of labor. All of these factors impact a person's exposure to malaria and whether they can protect themselves from the disease, including by having access to and using a mosquito net. Children under 5 and pregnant women are most vulnerable to malaria, and too often face inequitable access to health care services, making it more difficult for them to protect themselves from the disease or access treatment.



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Our response

The Global Fund's approach to addressing gender inequality is embedded across the entire Global Fund partnership and is applied across all of our work, including every stage of the grant cycle. This includes gender responsive funding requests, grant making, program implementation, monitoring and evaluation.

The Global Fund has been a major contributor to the health and well-being of girls and women globally, and through its 2023-2028 Strategy, "Fighting Pandemics and Building a Healthier and More Equitable World," the Global Fund will scale up programs that remove gender-related barriers to health services and promote sexual and reproductive health and rights.

Supporting women to realize their sexual and reproductive health and exercise their rights is fundamental to gender equality and can be truly transformative, giving women control over their bodies, lives and futures.

The Global Fund is committed to strengthening programs targeting young people, including girls and members of the LGBTQI+ community while supporting meaningful participation of key and vulnerable populations.

Through its human rights work, the Global Fund supports countries to design, fund, implement and take to scale programs that remove human rights-related barriers, including gender discrimination to HIV, TB and malaria services. These programs include training health care workers, police officers and lawmakers on human rights while empowering community groups to know their rights and challenge discriminatory policies and legislation. Investments also help strengthen systems that ensure confidentiality and privacy related to HIV and TB diagnosis; tailor gender-responsive services to reach vulnerable and hard-to-reach populations who are more at risk of the three diseases; and collect, analyze, and use age- and sex-disaggregated data to better inform decision-making.

The Global Fund is also in the process of developing a Gender Equality Marker to systematically assess, strengthen and report on the extent to which our funding is working to advance gender equality.



A health worker from Global Fund partner Hope World Wide provides counselling to sex workers in Port Moresby, Papua New Guinea, before they are tested for HIV.

The Global Fund/Roan Paul

Nigeria: Tackling gender barriers in the fight against malaria



The Global Fund/Andrew Esiebo

Malaria is endemic in Nigeria and accounts for 27% of the disease's total worldwide burden.

Within Nigeria, the risk of malaria differs significantly across regions and among individuals due to a number of factors including geography, socioeconomic status, security, age and gender.

With support from the Global Fund, Nigeria's National Malaria Elimination Program undertook a Malaria Matchbox Assessment – a tool designed by the Global Fund and partners that uses desegregated data to determine and better understand barriers that prevent people from accessing malaria testing, treatment and care. When barriers are identified, including those related to gender norms, findings are used to inform decision-making and program delivery to increase access to malaria services among people who are most at risk of the disease and have limited access to services.

The assessment took place in Nigeria's northeast region, where the malaria burden is severe. Here, there is ongoing conflict and over 2 million internally displaced persons (IDPs) and refugees – groups who are particularly at risk of contracting the disease.

The Matchbox findings concluded that gender is a significant barrier to accessing malaria services among the refugee and IDP communities in the region. Based on these findings, the Global Fund, the World Health Organization, the National Malaria Program and civil society organizations have developed a plan of action to address these barriers. The plan includes efforts to improve access to information on malaria and shift attitudes and beliefs about the disease. Community health workers will be identified and trained, the majority of whom will be women, from displaced communities to help design and deliver services best suited to the local needs. There will be an increase in men participating in efforts to fight malaria, and education sessions will be conducted on addressing gender barriers that limit progress in the fight against the disease. The findings also informed Nigeria's 2021-2025 National Strategic plan to combat malaria.

Empowering adolescent girls and young women

To keep young women and girls HIV-free, the Global Fund supports programs that consider the many aspects of their lives that can protect them from, or make them more vulnerable to, HIV.

Between 2018 and 2020, Global Fund investments in HIV prevention and testing for adolescent girls and young women increased by 107% within the 13 priority countries where the HIV burden is highest: Botswana, Cameroon, Eswatini, Kenya, Lesotho, Malawi, Mozambique, Namibia, South Africa, Tanzania, Uganda, Zambia and Zimbabwe.

Each country and community tailors its approach to its own needs, but key elements of a comprehensive package of services the Global Fund supports to reduce HIV among adolescent girls and young women include programs that:

- Provide high-impact, adolescent-friendly HIV prevention interventions and comprehensive sexuality education.
- Scale up HIV treatment programs through services tailored for adolescent girls and young women living with HIV.
- Keep girls in school.
- Provide safe spaces for girls to discuss challenges and raise concerns through empowerment programs.

- Equip young women to be economically independent.
- Prevent and respond to gender-based violence.
- Ensure adolescent girls and young women can participate in the decisions that affect their lives through meaningful participation.

The Global Fund also recognizes that to end HIV as a public health threat among adolescent girls and young women, we must also work with boys and men to transform cultural and social norms that continue to drive infections. This includes ensuring that men at high risk of HIV infection are tested and supported to start and stay on treatment.

Carolyn's Story Siaya, Kenya



The Global Fund/Saiba Sehmi

Carolyn was 17 when she found out she was HIV-positive, but admits she was in denial about her status. She refused to take any treatment until she found out she was pregnant two years later.

"I started taking my treatment to protect my son – I had to save him," she says.

Thanks to prevention of mother-to-child-transmission (PMTCT) therapy, a treatment that prevents the transmission of HIV from mothers to their babies, Carolyn gave birth to a healthy baby boy. She also started working as a peer educator to support other young women living with HIV in her community.

"Being a peer educator made me smile again. It helped me accept my situation."

Carolyn is one of 400 peer educators who are part of a Global Fund-supported Kenya Red Cross Society program aimed at reaching adolescent girls and young women with HIV prevention, treatment and care.

Adolescent girls account for more than 25% of HIV infections in sub-Saharan Africa, despite making up only 10% of the population.

As a peer educator, Carolyn ensures other young women living with HIV in her community have access to health services, education and psychosocial support. She and her colleagues facilitate local support groups and are trained by pro bono lawyers to address cases of gender-based violence.

When public gatherings were banned due to COVID-19 lockdowns, Carolyn and her colleagues performed home visits to distribute antiretroviral treatment and offer support to the young women they work with.

It is expected that 20,000 adolescent girls and young women will be reached through the vital work of Carolyn and the hundreds of other peer educators supported through Global Fund investments in Kenya.

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Promoting sexual and reproductive health and rights

The Global Fund's investments in promoting sexual and reproductive health and rights cut across our work fighting diseases, strengthening health systems and protecting human rights. This includes investments in treatment and prevention programs, in formal and informal health systems, prevention of mother-to-child transmission of HIV, integrated services for antenatal and postnatal care, prevention and treatment of malaria during pregnancy

and targeted screening and testing of sexually transmitted infections. This also includes investments in pre-exposure prophylaxis (PrEP) – a medicine that people who are at high risk of HIV can take to protect themselves from contracting the disease – HIV self-testing, prevention of cervical cancer, post-violence care, as well as sexual health education for in-school and out-of-school youth.

Global Fund investments in building resilient and sustainable systems for health contribute to more women being involved in, and having influence over, health systems, including through employment opportunities. For example, in Ethiopia, the Global Fund supported the government's initiative to train and pay 40,000 female community health workers.

Promoting gender equality in challenging operating environments

In challenging operating environments – countries or regions that are post-conflict or where there are ongoing humanitarian emergencies or political instability – gender inequities may be particularly pronounced, including with heightened levels of gender-based violence.

In such settings, the Global Fund supports sexual and gender-based violence prevention services as well as services for post-violence care, protection and access to justice to help ensure equal access to HIV, TB and malaria services and good health outcomes overall.

The Global Fund also supports partners to use a gender-equity approach to assess people's changed environments, including understanding how existing groups and organizations that address gender – such as women's organizations or networks led by key populations – can be supported and empowered to have their voices heard and contribute to decision-making processes.

In Ukraine, the Global Fund supports community-led organizations of women living with HIV and LGBTIQ+ communities to address their specific needs during the Russian invasion, and has provided funding to provide psychological assistance and counseling to victims of sexual and gender-based violence during the war.

In Afghanistan, Global Fund investments have helped ensure women and girls have been able to maintain or improve access to health care services since the Taliban takeover. This includes financing the salaries of female health workers across the country.



A counselor from the organization 'Positive Women', a Global Fund partner, meets with a woman who has been displaced from her home in eastern Ukraine due to violence and is now living in a shelter. In addition to counseling the woman will also receive hygiene products and medication.

Positive Women



Women who are part of a nursing program in Afghanistan that is implemented by UNDP with support from the Global Fund.

UNDP Afghanistan/Omer Sadaat

Breaking down gender barriers to health for key populations

Gender discrimination heightens the vulnerability of key populations – people who are most likely to be exposed to HIV, TB or malaria and whose participation in fighting the disease is vital to ending the epidemics.

Rigid gender norms around masculinity and femininity can act as barriers for bisexual men, gay men and other men who have sex with men and transgender people from accessing health care and practicing safer sex. Other groups affected by gender inequities include male and transgender sex workers, female partners of men who have sex with men, people in prison, and people who use drugs.

One of the ways the Global Fund addresses gender discrimination against key populations is through “Breaking Down Barriers” – a bold initiative aimed at vastly scaling up programming and commitments to reduce human rights-barriers, including gender discrimination, to HIV, TB and malaria services.

Through the initiative, countries are supported to scale up programs for key populations that address barriers to health that exist in government policies and practices, service providers, religious leaders and law enforcement agencies. The programs also empower people from key population groups to know and mobilize around their rights and get access to justice.

For example, in Ghana, the Global Fund is helping to develop and roll-out rights-based and gender-responsive training for future and current police officers. The initiative is done in partnership with key population-led groups and local police services. In South Africa, the Breaking Down Barriers initiative supports a number of civil society organizations to advocate for decriminalization of sex work, and in Tunisia civil society advocacy efforts are supported to end harsh criminalization of LGBTQI+ persons.

All of the investments made through this initiative help reduce discrimination and violence, including gender-based violence, toward key populations, which in turn improves access to health services. Over the last six years, the Global Fund has provided US\$86 million in additional funding to the 20 countries that are part of Breaking Down Barriers.

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Bryanna's Story Guatemala City, Guatemala



Bryanna Nicole Camey studied business, but never managed to get a job in her field. She says this is “because of the way people look at me.” Faced with stigma and harassment, Bryanna, like many transgender women in Guatemala, makes a living as a sex worker.

In addition to facing violence and discrimination, transgender women are 34 times more likely to acquire HIV than other adults globally. They face barriers accessing health services, and the COVID-19 pandemic made the situation worse.

Due to lockdown measures, the health center where Bryanna got tested for HIV closed its doors.

To maintain testing services, the Global Fund works with community-based organizations Colectivo Amigos Contra el Sida (CAS) and Organización Trans, Reinas de la Noche (OTRANS)

to provide HIV self-testing kits. The kits are promoted on social media and delivered by post.

Bryanna has used the self-tests herself and spreads the word to other members of her community. Self-tests give people who otherwise may not get tested an option that is safe, confidential and convenient. They are easy to perform, accurate and fast.

Between 2021 and 2023, the Global Fund will invest US\$60 million in HIV self-testing – a fourfold increase compared to the previous three-year period. In the same period, the Global Fund will invest an additional US\$50 million in HIV programs as part of a matching fund to support community-led, community-based programming for key populations in selected countries.



FIGHT FOR WHAT COUNTS.

This year, the Global Fund launched its Seventh Replenishment fundraising campaign to raise at least US\$18 billion to fight HIV, TB and malaria and build stronger systems for health, and thus reinforce pandemic preparedness. At least US\$18 billion would save 20 million lives, cut the death rate from HIV, TB and malaria by 64% and strengthen systems for health to build a healthier, more equitable world.

With strong financing and strong partnerships, the Global Fund can continue to reinforce its essential role in breaking down gender-related barriers to health.

About the Global Fund

The Global Fund invests more than US\$4 billion a year to defeat HIV, TB and malaria and ensure a healthier, safer, equitable future for all. Since the beginning of the COVID-19 pandemic, we have invested an additional US\$4.3 billion to fight the new pandemic and reinforce systems for health. We unite the world to find solutions that have the most impact, and we take them to scale worldwide. It's working. Together, we have saved 44 million lives. We won't stop until the job is finished.