



Independent observer  
of the Global Fund

## Global Fund makes steady progress on Human Rights and Gender Equity, amid implementation challenges

A report presented at the 39th Board meeting on 9-10 May 2018, in Skopje, Macedonia, provided an update on the implementation of activities under the objectives and sub-objectives of the Global Fund's 2017-2022 Strategy. For each sub-objective, the report described the progress the Fund has achieved to date, as well as key challenges and risks, and future plans. In addition, the report identified the [key performance indicator \(KPI\)](#) tied to each sub-objective. Some of these KPIs already have data available, while others will report only in Q2 2019. The report cites numerous delays due to insufficient resources (budget and staffing) and challenges with internal coordination.

In this article, we provide a general overview of progress to date and specific examples related to Strategic Objective 3: "Promote and Protect Human Rights and Gender Equality". Due to space considerations, we have been selective with the examples highlighted. The examples have been summarized below under corresponding Sub-Objectives below:

### a) Scale up programs for women and girls

The CRG Strategic Initiative has continued to roll out the HER Voice (see [GFO 330](#)) meaningful engagement fund for organizations led by and for women and girls in 13 focus countries. The initiative is being managed by the Southern African AIDS Trust and Eastern Africa National Networks of AIDS Service Organizations (EANNASO). Further support is being provided by the Global Fund Secretariat, which has recruited two adolescent girl and young women (AGYW) advisors and a full-time gender M&E advisor to guide this work. Additionally, outreach has begun to mobilize financial and in-kind contributions to extend the project beyond the initial period.

To date, more than \$100 million has been invested by 11 priority countries to reduce HIV incidence among adolescent girls and young women, with two countries still to submit funding requests with AGYW matching funds. Six of the 13 AGYW priority countries applied during the first funding window (March 2017).

With only a short gap between the approval of the Community Rights and Gender Strategic Initiative (CRG SI) (see [GFO 301](#)) and the start of the Strategy 2017-2022, technical assistance to support the inclusion of interventions to prevent new infections among AGYW was lacking. An AGYW learning group has been established with key stakeholders to coordinate around bottlenecks and technical assistance needs in the countries. The Global Fund has developed a comprehensive M&E plan and will also work with technical partners to collect incidence data that will be used to set impact targets.

b) Reduce health inequities related to age and gender

The Global Fund has developed a framework for global analysis of gender-related barriers and risks to TB and TB services. Stop TB Partnership has mobilized funds to support at least 7 gender assessments (in addition to the 4 that have already been completed) by the end of this year. A complete global review of surveys to identify trends and programmatic responses will be completed by the end of Q1 2019.

Within the Secretariat, a new Human Resources induction has been live since March 2018. It includes a section on Gender Equity and Human Rights, covering the importance of scaling-up programs that remove barriers to human rights and gender equity, and in particular, programs targeted to AGYW.

In terms of challenges, despite the Global Fund's strong push on the importance of integrating gender considerations into TB programming, the demand for gender assessments within TB programming remains low. The CRG department is working with the CRG SI Regional Platforms to further stimulate demand for these assessments.

c) Scale up programs that remove human-rights barriers

Eighteen of 20 baseline assessments in human-rights priority countries are currently underway, with many nearing completion. The remaining two baseline assessments are scheduled for the coming months. According to the completed assessments, these eighteen countries with TRP-recommended human-rights matching fund applications have invested over \$50 million into these programs. For new funding requests in middle income countries, 19% of the HIV grant budget is invested in activities targeting key populations and 2% is invested in removing human rights barriers (based on partial cohort reporting) (KPI9b).

Moreover, all but one of six upper-middle-income countries (UMICs) assessed funding requests report domestic investments in key population programs, while only three report investments in human rights. According to the report, this low performance is likely driven by the lack of existing policy levers to stimulate domestic investment (and reporting investments) in human rights. The baseline data collected in the assessments will be used to inform discussions of what kinds of policy levers will be needed to provide an incentive for increased domestic commitments to programs aiming to reduce human rights-related barriers to services.

Given the need to ensure the sustainability of programs to reduce human rights-related barriers to services in countries nearing transition, sustainability and transition training has been delivered to Country Teams working in the 20 target countries – identifying challenges and opportunities for sustaining this programming. Encouragingly, technical briefs and country profiles have been created and disseminated, and efforts to increase collaboration with technical partners are beginning to bear fruit. However, capacity at the Secretariat remains low, hindering efforts to deliver on new programmatic approach to human rights.

d) Integrate human rights considerations

Terms of reference have been developed to conduct a comprehensive human-rights review of policies. In addition, work has started on a human-rights complaints procedure, as well as on the development of a revised approach to human-rights crises. All three areas are expected to be completed in Q2 2018. A new staff member has been hired by the CRG department to support this work.

e) Support meaningful engagement of key and vulnerable populations

Following a global stakeholder meeting in January to promote the uptake of Key Population Implementation tools, there were 4 in-country consultations organized by global constituency-led key population networks: the Network of Sex Worker Projects, the MSM Global Forum, the International Network of People who Use Drugs, and the Global Network of Trans Women and HIV/Action for Trans Equality. Consultations enabled local key population groups to discuss the quality of existing programs using the tools as benchmarks and to develop action plans to advocate for scaling-up comprehensive, rights-based services in line with the tools.

In addition, the CRG department is continuing to focus on communities affected by TB and malaria. It is strengthening regional TB networks and supporting TB advocates to influence Global Fund-related processes at country level. The CRG department will also roll out the Malaria Matchbox: A Toolkit to Shed Light on Human Rights and Gender-related Barriers, Match Responses to Needs, and Ignite Action in the Malaria Response, in 3 countries. All implementers have requested additional resources to work with these communities.

On the CCM front, the Global Fund has revised several policies and practices to support the greater engagement of civil society and key populations. In fact, of 23 CCMs in 'high-impact' or 'core' countries that had at least 1 of 2 civil-society engagement indicators ranked as not "fully compliant" in their January 2017 performance assessments, all now have relevant activities in their improvement plans, and 13 of the 23 have improved on these indicators. The plan is for the CCM Hub to follow up with the outstanding 10 CCMs once there is greater clarity around the CCM Evolution process. In addition, CCM funding guidelines have been revised to include a budget requirement that 15% of CCM funding be allocated to strengthening constituency engagement.

Finally, the CRG Strategic Initiative completed work planning and contracting with all 40 selected suppliers through Requests for Proposals released throughout 2017. Two remaining Requests for Proposals to select suppliers under Component 2 of the CRG SI: Long-Term Capacity Development and Meaningful Engagement of Key and Vulnerable Populations have been released and the new suppliers will be selected by the end of Q2 2018. Ten technical assistance requests were fulfilled in Q4 2017 and an additional 10 requests were received during the same period, with 9 of those technical assistance requests being fulfilled in Q1 2018. The CRG planned and convened a learning event in Bangkok in Feb 2018 that brought together participants from all the newly selected suppliers to discuss lessons learned from the SI and present the monitoring, learning and evaluation framework that will be used to track and report on achievements.

f) Crosscutting considerations

Given the volume of funding requests submitted for approval at the end of 2017, alongside the immense number of process and system related trainings for Grant Management Division staff, no training activities were implemented in last quarter of 2017. During this period, the CRG developed a workshop for Country Teams, Fund Portfolio Managers and Public Health and Monitoring and Evaluation staff who work on 20 priority countries to scale up programs aiming to remove human-rights barriers access to services. The

workshops were delivered in January 2018, with more to come over the course of the year.

Lastly, a comprehensive report on incorporating structural interventions within country HIV program planning, and applying them to HIV investment models, has been finalized based on an expert consultation convened by technical partners. The Technical partners will guide the Global Fund on the most efficient way to implement the report's recommendations.

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