



FOCUS ON

Women and Girls

The Opportunity

The Global Fund is focusing sharply on women and girls, making strategic investments to improve their health and supporting country-driven processes grounded in equity and inclusiveness.

Our commitment to women and girls has steadily increased in the past five years. In 2010, approximately 46 percent of programs were focused on women and girls; in 2015, approximately 55 to 60 percent of the Global Fund's spending was directed to women and girls. That translates to investments of between US\$15 billion and US\$16 billion since 2002.

It is making a difference. Between 2005 and 2014, AIDS-related deaths among women aged 15 years and above declined 58 percent in 13 key African countries where the Global Fund invests, while declining 39 percent among men the same age. Antiretroviral (ARV) therapy coverage is becoming available to more women, and more women are staying on treatment. In many countries, rates of new HIV infections have been dropping faster among men than among women. However, experience in high-HIV burden countries in Africa with Global Fund-supported programs shows that the new infection rates are declining equally among women and men.

The Challenge

Despite great global gains against HIV, tuberculosis and malaria over the past 15 years, women and girls have not made the same progress as others. Structural, legal and cultural factors sometimes push women and girls to the periphery, where the diseases – especially HIV – can devastate the most vulnerable and at risk. In southern and eastern Africa, they are drastically and disproportionately affected.

Gender inequalities, harmful practices, sexual violence and discrimination against women continue to fuel a disproportionate number of new HIV infections in women and adolescent girls, and to increase their overall health risks. In the hardest-hit countries, girls account for more than 80 percent of all new HIV infections among adolescents; 7,000 girls aged 15-24 are infected with HIV every week. The disease is the leading cause of death for women aged 15-44 worldwide. In low- and middle-income countries, in the same age group, TB is the fifth-leading cause of death for women. Pregnant women are particularly susceptible to malaria, a disease that is an important cause of illness and death during pregnancy.

We cannot end HIV, TB and malaria as epidemics without addressing these challenges.

Gender Equality

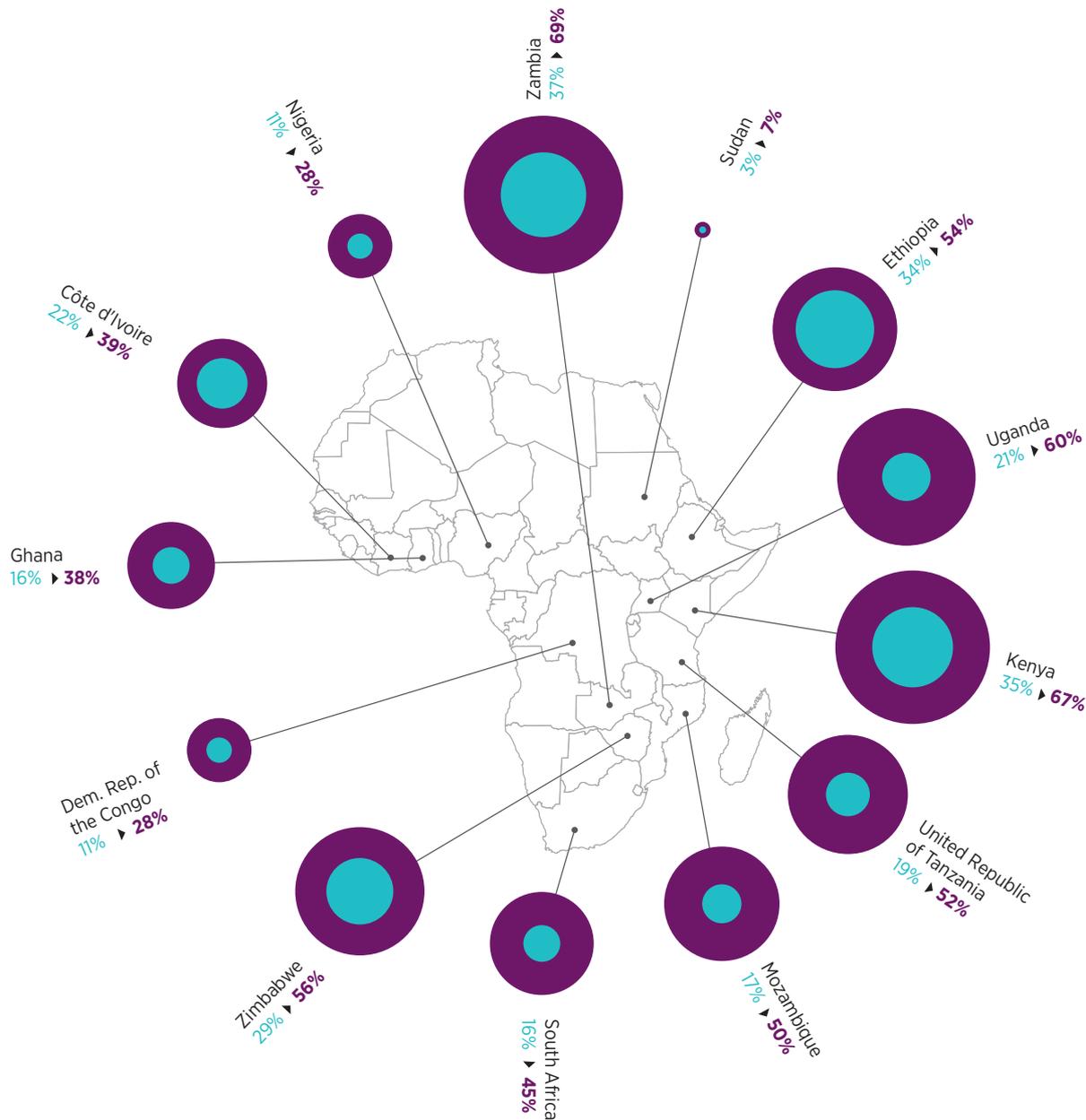
The HIV epidemic can only be ended by achieving more gender equality – and removing gender-based causes of the disease. The 2014-2016 Gender Equality Strategy Action Plan lays out a roadmap of how the Global Fund partnership will achieve strategic and high-impact investments to prevent new infections and save more lives; protect and promote the human rights of girls and women in all their diversity; and use technically sound proposals to fund programs that address the challenges that predispose women and girls to certain diseases, particularly HIV. In all grants, the Global Fund now requires countries to report sex- and age-disaggregated data.

In order to support countries in advancing gender equality, the Global Fund works with countries to develop appropriate approaches in concept notes and grants to address gender-related barriers to services, and supports the development and implementation of gender-responsive national health strategies. The

HIV Treatment for Women is Increasing, but Numbers are Still Low

Percentage of women living with HIV who accessed treatment in 2014, compared with 2010, in 13 key countries where the Global Fund invests.

Data Source: UNAIDS 2014 (www.aidsinfoonline.org)



Global Fund works closely with partners to develop and implement gender assessment tools to ensure investments are addressing the different needs of men and women, girls and boys.

Women and Girls at Risk

Even among women and girls, certain groups such as sex workers, transgender women and survivors of sexual and gender-based violence are particularly at risk of HIV infection. As many as 35 percent of women worldwide experience intimate partner violence or non-partner sexual violence in their lifetime, and rates are even higher in countries with ongoing conflict, or enduring post-conflict or post-disaster situations.

The Global Fund invests in programs to prevent gender-based violence and provide care to survivors. In Papua New Guinea, where gender-based violence was identified as the most significant gender issue driving HIV infection for women and girls, the Global Fund worked closely with the implementing partner to integrate clinical and psychosocial services for survivors of sexual violence into HIV programming. In the Democratic Republic of Congo and Nigeria, new TB/HIV grants engage with women-led community organizations to address gender-based violence.



Maternal and Child Health

Maternal illness and complications are the second leading cause of death for women of reproductive age worldwide. The Global Fund encourages countries to link reproductive, maternal, newborn, child and adolescent health interventions with HIV, TB and malaria programs, and improve overall health for women and girls. To ensure children are born free of HIV, Global Fund investments support programs that put 3.1 million women on treatment to prevent transmission of HIV to their babies. Programs supported by the Global Fund and partners in Kenya, for example, have led to more than 70 percent coverage of pregnant women living with HIV receiving prevention of mother-to-child transmission services, and a new grant aims to increase this to 90 percent by 2018. The Global Fund is also expanding its investment to support malaria interventions to pregnant women, particularly by providing insecticide-treated nets.

Integrated Health Care for Women in Ethiopia

In Ethiopia, 38,000 women have been trained as health extension workers, improving maternal and child care and contributing to transforming gender roles in their communities. These Health Extension Workers have brought TB diagnosis to the community level, significantly increasing the number of women diagnosed with and treated for TB. Through visits to pregnant women in communities, health workers have enabled more women to access prenatal care and prevent transmission of HIV to their babies; as a result, ARV therapy for pregnant women has sharply increased from 2 percent in 2009 to 55 percent in 2013. Programs that build resilient and sustainable systems for health improve the quality of care and access for all populations, and create opportunities for women to enter the workforce and expand their skills as providers of health services.

Keeping Girls in School

There is strong evidence that keeping adolescent girls and young women in school not only reduces their vulnerability to HIV infection but can yield healthy, educated and financially independent women who make well-informed choices about their lives. Reaching adolescent girls and young women with services that span health and education is an emerging priority for the Global Fund. In a select group of countries with a high burden of HIV among adolescent girls and young women (including Kenya, Swaziland, and South Africa) the Global Fund is supporting programs that aim to keep girls and women between 14 and 22 years in school, and to offer them additional educational and social support.

Women's Rights and Representation

Advancing and protecting human rights is a pillar of the Global Fund strategy, and the partnership works hard to eliminate human rights barriers to services, including legal and policy barriers, particularly for women living with HIV, transgender women, women who inject drugs, and sex workers. An HIV program in Botswana, for example, provides legal aid services and support to women and girls who are survivors of gender-based violence. Other programs strive to prevent discrimination, health interventions without informed consent, or breach of medical confidentiality.

The Global Fund also encourages steps to promote more women to take part in design and implementation of programs in their communities. At the country level, 40 percent of decision-makers in Global Fund grant committees are now women. While this is substantial progress, women must not be only represented, but also meaningfully engaged. With support of the German BACKUP Initiative, for example, women's organizations and gender advocates in South Africa, Malawi and Uganda are actively participating in the development of concept notes for Global Fund grants; in Uganda, they successfully advocated for setting up a gender technical working group to address gender-related barriers to services.



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Partnerships

The Global Fund partnership includes technical agencies and donor agencies, civil society organizations and governments as it pursues strong integration of principles of gender equality across its investments. The Global Fund has championed the Joint United Nations Programme on HIV/AIDS (UNAIDS) and the United Nations Children's Fund (UNICEF) All in! initiative to end adolescent AIDS. It is aligning its investments with the President's Emergency Plan for AIDS Relief (PEPFAR) DREAMS initiative, which aims to reduce HIV incidence by 40 percent among adolescent girls and young women in 10 countries in southern Africa in three years. A partnership with United Nations Population Fund (UNFPA) is strengthening linkages with HIV and sexual and reproductive health programs. In collaboration with UNAIDS and the Stop TB Partnership, the Global Fund supports the use of the Gender Assessment Tool so that countries can identify gender gaps in HIV and TB programming. Through partnerships with civil society networks like the Women4Global Fund and the International Community of Women Living with HIV (ICW), the Global Fund supports women activists in multiple regions to access the knowledge and tools they need to make the case for investments at the country level to reduce gender-related barriers to services. The Global Fund is a committed partner in the Every Woman Every Child campaign, making concrete contributions towards the global agenda to address the major health challenges facing women and children.

Seizing the Momentum

While there is a mounting body of evidence on what needs to be done, the world will need more funding to deliver on the urgent needs of adolescent girls and women. The incredible progress the Global Fund partnership has made in the past 14 years – including saving more than 17 million lives – shows that when global solidarity, political will, modern science and great implementation come together, the world can achieve transformative impact. The world needs to seize the momentum to protect the gains that have been made thus far, and to step up the fight in the communities and key populations where AIDS, TB and malaria continue to devastate lives.

About the Global Fund

The Global Fund is a 21st-century partnership designed to accelerate the end of AIDS, tuberculosis and malaria as epidemics. As a partnership between governments, civil society, the private sector and people affected by the diseases, the Global Fund mobilizes and invests nearly US\$4 billion a year to support programs run by local experts in more than 100 countries. The Global Fund's operating costs are just 2.3 percent of grants under management, reflecting an exceptionally high degree of efficiency. By challenging barriers and embracing innovative approaches, we are working together to better serve people affected by the diseases.