

## Remarks by Mark Dybul at Human Rights Council

*These comments were delivered by Mark Dybul, Executive Director of the Global Fund, at a panel discussion on human rights and HIV, at the Human Rights Council in Geneva on 11 March 2016.*

It is a great privilege to be here today, to highlight the importance of addressing human rights issues, as a key component of efforts to end the HIV epidemic.

The Global Fund was created as a partnership. Everyone here represents a part of that partnership. Working together, over the past 15 years, we have contributed to great progress in the fight against HIV, as well as TB and malaria. Through a collective effort, combining the contributions of governments, civil society, the private sector and affected communities, the Global Fund disburses nearly \$4 billion per year to support local programs that prevent infections and the premature deaths of millions of people from HIV, TB, and malaria.

The HIV response over the past 15 years has been tremendous. In 2000, there was no global public health response to the HIV epidemic. In 2016, almost every country around the world is implementing prevention and treatment programs. Just as important, there is a growing recognition that HIV discriminates, and does not affect people equally. The only way to maximize the impact of our investments, and end the epidemic, is to do a lot more to remove human rights-related barriers to services. We have to move toward treating everyone like a human being, being more inclusive, and finding the best side of our humanity. The sustainable development goals call on us all to do precisely that.

The Global Fund has had a human rights objective in its Strategy since 2011. We realized then that human rights-related barriers to services were preventing us from achieving maximum impact. Indeed, in many settings the impact of our grants is greatly reduced because of these barriers – whether it is in generalized epidemics in Africa where women and girls often do not access testing and treatment or are not retained in treatment because of stigma and discrimination and gender-based violence; or in concentrated epidemics where men who have sex with men, people who use drugs, sex workers, transgender people, migrants, and prisoners often cannot access prevention and treatment because of the discrimination they experience in health-care settings, or the violence perpetrated by police. It is worth noting that in many settings, many of the same vulnerable groups are susceptible to TB, and TB remains the leading cause of death among people with HIV.

The good news is that seven key programs that reduce human rights-related barriers to services have been clearly defined by UNAIDS, our close partner, to whom we defer on technical matters. They have been costed, and include:

1. Stigma and discrimination reduction;
2. HIV-related legal services;
3. Monitoring and reforming laws, regulations and policies relating to HIV;
4. Legal literacy (so-called "know your rights" programs);
5. Sensitization of law-makers and law enforcement officials;
6. Training of health care providers on human rights and medical ethics related to HIV; and
7. Reducing discrimination and violence against women, as well as harmful gender norms.

Collectively, over the last five years we have made some progress in increasing investment in these programs. Most countries that apply to the Global Fund for funding now acknowledge that human rights-related barriers hinder many people's access to the services we fund. However, investment in these programs remains minimal. Indeed, many grants do not contain any programs to remove human rights barriers, or include only one or a couple of them. Even where country grants include programs, they are rarely scaled up and reach only a small proportion of people in need.

We need to do better on removing human rights barriers - not only to achieve the Global Fund's objective to respect and promote human rights and gender equality, but because it is the right thing to do and because it is essential to our efforts to invest more strategically to end HIV. In the new Strategic Framework of the Global Fund for 2017-2022, which our Board adopted in November, one of our main objectives is therefore to "introduce and scale up programs that remove human rights barriers to accessing services".

We will concentrate our efforts on 15 to 20 countries with particular needs and opportunities for introduction and scale-up of these programs. The target will be implementation of comprehensive programs to address the human rights-related barriers to services, resulting in increased uptake of and retention in services through decreased stigma and discrimination, particularly in health-care settings; increased access to justice; reduction of violence against and reduced discrimination against women and girls; greater support among law enforcement officials for prevention and treatment services; a more conducive policy environment; and strengthened participation of affected persons in programs linked to these interventions. This effort to scale up programs will be accompanied by a rigorous effort to further increase the evidence of the health impact of the programs.

We look forward to working with all of you to make our collective vision a reality – greater access to HIV services, resulting in more infections averted and lives saved, thanks to a concerted effort to reduce human rights-related barriers and, ultimately, to create the inclusive human family we were intended to be. To end HIV, we must overcome discrimination in laws and policies, in practice and in our hearts. We must grasp the historic opportunity to become better people and societies built on the firm foundation of an inclusive human family.

Thank you.