

## Breaking Down Barriers to Access

### Scaling up programs to remove human rights-related barriers to health services in 20 countries and beyond

#### Why has the Global Fund committed to major expansion of programs to reduce human rights-related barriers to HIV, TB and malaria services?

Global Fund Strategy (2017-2022) Strategic Objective 3(c) commits the Global Fund to support all countries that apply for grants to include and scale up programs to remove human rights-related barriers to health services. This is because such barriers remain major obstacles to the uptake of prevention, treatment and care for HIV, TB and malaria. Expanding these programs will ensure that the health services supported by the Global Fund reach those living with or vulnerable to the diseases. Thus, these programs are an essential means by which to increase the effectiveness of Global Fund grants. Many partners, including countries, UNAIDS, WHO and the Stop TB Partnership, have long recognized these programs as “critical enablers” of health services. The Global Fund has developed Technical Briefs on these programs which include: for HIV and TB - stigma and discrimination reduction, training for health care providers on human rights and medical ethics, sensitization of law-makers and law enforcement agents, reducing discrimination against women, legal literacy, legal services, monitoring/reforming laws, regulations and policies; for TB - ensuring confidentiality and privacy, mobilizing and empowering patient and community groups, addressing involuntary isolation/detention for failure to adhere to TB treatment, removing barriers to TB services in prisons; and for malaria - human rights and gender assessments of malaria-related risks and vulnerabilities, meaningful participation of affected populations, strengthening of community systems for support of malaria programs, addressing gender-related vulnerabilities and barriers in the context of malaria, improving access to malaria services for refugees and others affected by emergencies, addressing HIV-related barriers to malaria services for those living with HIV, and improved malaria services in prison and pre-trial detention.

#### What is being done by the Global Fund to provide intensive support to 20 countries to scale up programs to remove barriers to health services?

The Global Fund is providing intensive support to 20 countries where needs, opportunities, capacities and partnerships provide real possibilities for scale-up that will result in important gains for the health of those affected. This intensive support takes the forms of: (a) provision of USD 45 million in additional funds for programs to reduce human rights-related barriers to services; (b) implementation of baseline assessments; (c) multi-stakeholder meetings in country to review the assessments and develop and fund jointly a comprehensive response to the barriers; (d) support in grant-making for the inclusion, scale-up and implementation of the programs; (e) follow-up studies to assess impact of scale-up; and (e) where possible, mathematical modeling to inform scale-up and impact of the programs. The 20 countries range across Global Fund regions and include high impact countries, challenging operating environments, countries nearing transition, countries with concentrated epidemics, and countries that are part of efforts to scale up programs for women and girls and address gender-related barriers to services. The 20 countries are: Benin, Botswana, Cameroon, Democratic Republic of Congo (province-level), Cote d’Ivoire, Ghana, Honduras, Indonesia (selected cities), Jamaica, Kenya, Kyrgyzstan, Nepal, Mozambique, Philippines, Senegal, Sierra Leone, South Africa, Tunisia, Uganda and Ukraine.

#### What are the baseline assessments that are being conducted in 20 countries?

By the second quarter of 2018, baseline assessments will have been completed in all 20 countries. These assessments have two broad objectives: (a) to provide data necessary to craft a comprehensive response to human rights-related barriers to HIV, TB and malaria services; and (b) to provide a baseline of the national situation with regard to existing barriers and programs to address them

against which the impact of scale-up can be measured in follow-up studies. The baseline assessments have involved: (a) desk reviews of relevant information and data; (b) telephonic contacts/interviews with key stakeholders; (c) in-country visits to conduct key informant interviews and focus group discussions; (d) engagement and meaningful participation of affected populations; and (e) descriptions of comprehensive responses to remove barriers to health services. Four research groups, which were selected by the Global Fund through a competitive process, have worked with country stakeholders to conduct the baseline assessments.

### What have the baseline assessments accomplished?

The findings of these baseline assessments provide to a degree never seen before critical data on the following issues: (a) the nature of the human rights-related barriers to health services, (b) the populations most affected by these barriers, (c) the scope, costs and quality of current programs to reduce barriers, (d) the capacity of CCMs, government ministries, civil society, and technical partners to support implementation of programs to remove barriers, (e) larger environmental barriers and facilitators, and (f) the content and estimated costs of a comprehensive response to the barriers. This data will be invaluable in developing, scaling up, implementing and evaluating a comprehensive, strategic and effective national response to removing human rights-related barriers to health services.

### Has there been increased investment in programs to remove human rights-related barriers to services?

Yes! By the first quarter of 2018, twelve countries have applied for and received additional funding from the Global Fund based on their commitment to use these funds for programs to reduce human rights-related barriers to services and to contribute funding to such programs themselves. In these 12 countries, funds allocated to programs to reduce human rights-related barriers have increased dramatically, from less than US \$6 million in 2014-2016 to over 50 million for 2017-2019. Throughout this effort, the Global Fund has worked and continues to work with government, CCM members, key and vulnerable populations and technical partners towards better understanding of the programs to remove barriers, including which activities are most effective, how these can best be integrated into national plans and grants, the costs of such activities, and ways to overcome challenges of implementation and evaluation. Every attempt is being made to engage and increase local capacity in the implementation of these programs in ways that are sustainable and strengthen health and community systems.

### What are next steps and who will be involved?

The Global Fund alone cannot fund the programs necessary to address human rights-related barriers to health services. Thus, it is working closely with partners who share the goal of removal of these barriers and depends on these partners to contribute to this effort. These partners include government; civil society implementers; those living with, or vulnerable to HIV, TB and malaria; technical partners; other donors; and public health and human rights experts on programs to remove human rights-related barriers to health services. After completion of the baseline assessment in each of the 20 countries, there will be held multi-stakeholder meetings at which participants will consider the assessment findings as well as the possibility of crafting a cost-shared, longer-term comprehensive response to human right-related barriers to services. At this meeting, country stakeholders, technical partners, other donors and the Global Fund will consider existing resources and relevant programs, including those in the Global Fund allocation, what else needs to be done, and who can best implement and fund needed additional activities. The impact of the programs put in place and scaled up will be evaluated in 2019 and in 2021 against the baseline assessments, with periodic reporting to the Global Fund Board, the final results being available to inform the next Global Fund Strategy.

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