The Global Fund is carrying forth the legacy of the AIDS response that “health for all” cannot be achieved without human rights. In groundbreaking work with partners, we have expanded this approach to TB and malaria.

The movement to end epidemics calls us to build more just and equal societies. Too often, the people most vulnerable to disease are the same people who don’t have access to health care because of stigma, gender inequality or discrimination. The Global Fund Strategy 2017-2022 recognizes the need for greater investment to include and expand programs to remove such barriers in national responses to the three diseases, so everyone can access the health services they need.

The Challenge

There is ample proof, as demonstrated in the AIDS response, that without human rights there is little hope for access to health services for all in need. When people’s rights are not realized, they not only suffer hardship and abuse, they often cannot participate in protecting their own health. In particular, many of those most affected by the three diseases are so marginalized they have little or no access to prevention and treatment services, or are denied them outright.
The Global Fund is taking a pragmatic and programmatic approach to reducing human rights-related barriers to health services. This human rights work increases the effectiveness of Global Fund grants by helping them to reach the most people and maximize uptake of services and retention in services, particularly for the most vulnerable. Promoting and Protecting Human Rights is one of the four key objectives of the Global Fund Strategy 2017-2022, and includes the following targets:

- Introduce and scale up programs that remove human rights barriers to accessing HIV, TB and malaria services
- Integrate human rights principles not only in grant making, but also in policies and policy-making processes

### Addressing Human Rights-related Barriers to Health

Human rights and gender-related barriers to health have long blocked national responses to HIV, TB and malaria, including: stigma and discrimination; gender inequality and violence; punitive practices, policies and laws; and social and economic inequality. The Global Fund’s Sustainability, Transition and Co-financing Policy now requires all countries, regardless of income level, to include programs to address these barriers in their proposals.

Seven key program areas that are effective in reducing human rights-related barriers to HIV and TB services include:

- stigma and discrimination reduction;
- training for health care providers on human rights and medical ethics;
- sensitization of lawmakers and law enforcement agents;
- reducing discrimination against women in the context of HIV and TB;
- legal literacy;
- legal services; and
- monitoring and reforming relevant laws, regulations and policies.

In addition, for TB there is a need to ensure confidentiality and privacy, mobilize and empower patients and community groups, address policies regarding involuntary isolation or detention for failure to adhere to TB treatment, and make efforts to remove barriers to TB services in prisons. For malaria, human rights and gender assessments of malaria-related risks and vulnerabilities should be undertaken, meaningful participation of affected populations should be ensured, and access to malaria services for refugees and others affected by emergencies improved.

To assist implementers in rolling out these programs, the Global Fund has developed and issued technical briefs on human rights and TB, malaria and HIV, and human rights in challenging operation environments – countries or regions affected by natural disaster, conflict or poor governance.

### Breaking Down Barriers Initiative

Through our Breaking Down Barriers initiative, we are providing intensive support, including US$45 million in additional funds, to 20 countries to vastly scale up evidence-based programming to reduce human rights-related barriers to HIV, TB and malaria services. Countries

### Countries receiving support through the Breaking Down Barriers Initiative

- Benin
- Senegal
- Sierra Leone
- Cote d’Ivoire
- Ghana
- Bosnia and Herzegovina
- Georgia
- Moldova
- Kyrgyzstan
- Tunisia
- Mozambique
- South Africa
- Nigeria
- Cameroon
- Uganda
- Kenya
- Indonesia
- Philippines
- Democratic Republic of Congo
- Somalia
- Honduras
- Senegal
- Sierra Leone
- Cote d’Ivoire
- Ghana
- Botswana
- South Africa
- Ukraine
include: 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.

The 20 countries 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 adolescent girls and young women and address gender-related barriers to services.

In each of these countries, the Global Fund has supported baseline assessments with two broad objectives: to provide the data necessary to craft a comprehensive response to human rights-related barriers to HIV, TB and malaria services; and 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. The findings provide critical data on the populations most affected by human rights-related barriers to services, the nature of the barriers, existing programs, what it will take to effectively remove such barriers, and the costs that would be involved.

As assessments are completed, multi-stakeholder meetings are held to validate the findings and support countries to develop plans to comprehensively address human rights-related barriers. A strong monitoring and evaluation component measures the impact of scale-up. In the first 16 countries within the 20-country cohort that had their funding requests approved, funding allocated to programs to reduce human rights-related barriers has increased nearly 10-fold, and data from the baseline assessments is informing grant proposals, matching fund applications and grant-making. This work takes human rights principles and turns them into concrete programs that improve the health and well-being of those affected by HIV, TB and malaria.

For instance, Mozambique will invest a total of US$7.4 million in programs to address human rights-related barriers in the context of HIV, including pre- and in-service training for health care workers on medical ethics in the context of HIV and TB; know-your rights programs for communities through peer-educators; and community-based monitoring of the service quality at health care facilities.

Nepal will invest US$1.3 million of its own domestic resources in programs to address human rights- and gender-related barriers in the context of HIV and TB, in addition to US$1.3 million from the Global Fund.

Ghana has fully integrated programs and approaches to address human rights-related barriers in the context of TB in all their key population programming and ensured that people with TB and those cured of TB fully participate in the development of a comprehensive response to human rights-related barriers. The goal is to reach comprehensive responses: when the right programs are implemented for the right people in the right combination at the right level of investment to remove human rights-related barriers and increase access to HIV, TB and malaria services.

The Global Fund supports, among many other programs to reduce human rights-related barriers to services:

- In Kenya, training of health care workers in nondiscrimination, working with key populations, informed consent and confidentiality
- In Cameroon, community monitoring of health care provision and service quality, including stock-outs of medicines
- In Mozambique, peer educators and outreach workers working with adolescents to support their access to HIV prevention and treatment
- In Ghana, a community-led TB stigma index to better understand the stigma in the context of TB
- In Cote d’Ivoire, joint activities between sex workers and the police to reduce and prevent police violence, extortion and harassment against sex workers
- In Sierra Leone, training of traditional and religious leaders to help fight discrimination, and prevent violence against key and vulnerable populations.
Integrating Human Rights Throughout Our Work

The Global Fund’s approach to human rights is established by the Global Fund Board and based on consultations with governments, affected populations, human rights experts, civil society organizations and technical partners. The Global Fund has committed to integrate human rights principles – participation, equity, accountability and transparency – throughout the grant cycle, and increasingly into the policy-making process. Global Fund staff receive training on human rights, gender and key and vulnerable populations. Beginning with the country dialogue, the Global Fund works with countries to ensure that key and vulnerable populations most affected by the diseases are represented and have a voice in the process.

Human Rights Standards to Support Efficacy and Accountability

The Global Fund has also established minimum human rights standards that grant implementers must commit to respecting:

- **Respecting and protecting informed consent, confidentiality and the right to privacy concerning medical testing, treatment or health services rendered; and**

- **Avoiding medical detention and involuntary isolation, to be used only as a last resort.**

To ensure compliance, the Global Fund has established a human rights complaints procedure. It allows individuals and groups to submit a complaint to the Global Fund’s Office of the Inspector General if they believe that any of the human rights standards have been violated by an implementer of Global Fund grants. The Office of the Inspector General is committed to careful assessment, follow-up and necessary corrective action.

The Global Fund is making human rights real and practical in the lives of those affected by HIV, TB and malaria through ambitious goals, standards of accountability and concrete programs.

About the Global Fund

The Global Fund is a 21st-century organization 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. By challenging barriers and embracing innovative approaches, we are working together to better serve people affected by the diseases.