



ACHIEVING GENDER EQUITY IN GLOBAL FUND PROCESSES:

AN URGENT NEED FOR ENGAGEMENT AND WOMEN-LED RESPONSES

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Gender equality and the promotion and protection of human rights have emerged as critical objectives in the <u>Global Fund Strategy 2023-2028</u>. Global Fund's third objective of "Maximizing Health Equity, Gender Equality and Human Rights" is recognized as integral to eradicating AIDS, tuberculosis, and malaria. The emphasis on gender equality has led to a required gender assessment for each country proposal and the establishment of a Gender Equality Marker to track progress towards achieving gender equity. This commitment involves the integration of gender equity across all Global Fund supported programs. encompassing targeted health interventions, comprehensive barrier-removing initiatives, and advocacy for changes in discriminatory policies. These increased and practical commitments to realizing human rights and gender equity in Global Fund processes aims to safeguard human rights and promote gender equity as essential to ensuring the right to health and ensuring universal healthcare access.

However, a UNAIDS-commissioned report on Prioritization in Global Fund Grants reveals some concerning realities about the realization of gender equity in Global Fund processes Among the 46 funding requests submitted in the 2020-2022 allocation cycle, only one utilized a gender assessment in its prioritization process. Lessons from the Technical Review Panel (TRP) and Peer Review Process emphasize the urgent need for heightened attention to the active engagement and leadership of communities, especially women living with HIV, and their involvement in funding requests development and beyond, particularly within national dialogues.

There is commitment from the organizations to improve inclusion and address the root causes of gender inequality yet further refinement and clarity are essential for full integration. Consequently, the International Community of Women Living with HIV (ICW) and Women4GlobalFund (W4GF) have actively supported networks of women living with HIV worldwide, enhancing their engagement in GC7 processes to advocate for evidence-based priorities, challenge entrenched misogyny and sexism, and ensure the inclusion and preservation of women's priorities at the heart of country proposals. Key lessons have been derived from these processes, highlighting the challenges women's networks face in advancing their priorities within Global Fund processes. This report presents insights gleaned from our combined technical assistance efforts and a multi-country survey of over 81 responses from 23 countries, ¹ shedding light on the experiences of women engaging in Global Fund initiatives.

The 2023 GC7 allocation period introduced new gender-focused initiatives and programs, such Breaking Down Barriers to support countries to design, fund, implement and scale up programs in reducing gender-based violence. Recommendations for Window 1^2 include conducting comprehensive gender

¹ Bangladesh, Barbados, Bolivia, Busia, Cameroon, El Salvador, Eswatini, Gabon, Germany, Ghana, India, Indonesia, Kenya, Lagos, Malawi, Nepal, Nigeria, Pakistan, South Africa, St Vincent, Tanzania, Uganda, United States, Zambia, and Zimbabwe

² The Global Fund (2023). Gender Equality: Reflections on Window https://www.wlhiv.org/_files/ugd/682db7_3e03de05223846b180c92b287830ec7f.pdf





assessments while Window 2 ³, TRP saw progress in equity with 80% agreeing the proposal had a strong focus on equity, although consistent gender and human rights scoring by the TRP in both windows in the funding proposal indicate ongoing work is required. ICW and W4GF acknowledge the commendable endeavors aimed at achieving gender equity; nevertheless, we have documented the following challenges in our report.

OUR METHODS

ICW and W4GF employed a multifaceted approach to gather information. The process involved technical assistance projects and interviews targeting women living with HIV who were seeking to engage in GC7 processes. In addition to these efforts, an online survey was conducted specifically for women living with HIV. As of July 13, 2023, a total of 81 responses were collected, spanning 23 countries across nine distinct regions. These regions encompassed South Asia, the Caribbean, North America, Latin America, Europe, East Africa, South Africa, Central Africa, and West Africa.

OUR FINDINGS

Gender Assessments

Gender assessments hold significant importance as a tool, yet their underutilization persists, and involving women living with HIV in these assessments remains challenging.

Although gender assessments are required in GC7 proposal development processes, these assessments have been implemented unevenly and where they have been implemented the meaningful engagement in the assessment is low and the application of the assessments findings in program prioritization processes remains unclear. In our survey 58.02% (47) of respondents had either not heard of a gender assessment or stated that no gender assessment had been conducted. Only 40.74% (33) confirmed that gender analysis had been utilized during their Global Fund proposal prioritization.

The TRP window 1 debrief on gender showed slight progress in addressing gender barriers, with funding requests increasingly prioritizing gender equality. However, the UNAIDS-commissioned report confirmed the persistence of funding requests lacking comprehensive gender assessments. quality of assessments often falls short, with limited meaningful engagement of women and girls, including in diverse contexts, their input and influence on funding requests frequently overlooked. Where gender assessments have been implemented they have not consistently translated into program design improvements. ⁴

The funding request review conducted by the TRP⁵ has been instrumental in highlighting the importance of meaningful participation of women and girls in decision-making processes. The emphasis on incorporating assessment findings into funding requests and allocating budgets for essential gender activities is a significant step towards promoting gender equity. By addressing gender disparities in relation to health outcomes and tackling root causes of inequality, transformative change can be achieved. Emphasizing gender sensitivity contributes to fostering inclusive and resilient communities for all.

³ Aidspan (2023) Technical Review Panel's observations and recommendations on Window 2 funding applications: Part I https://aidspan.org/?action=catelog_singlepost&id=27676

⁴ Eurasian Women's AIDS Network (2023) Gender assessment of the EWSS. https://ewna.org/2023/08/22/gendernaya-oczenka-ezhss/

⁵ The Global Fund (2023) Gender Equality: Reflections on Window 1 https://www.wlhiv.org/files/ugd/682db7_3e03de05223846b180c-92b287830ec7f.pdf





ENGAGEMENT IN THE GC7 AND COUNTRY PROCESSES

Challenges persist for women living with HIV in their involvement within the GF country processes.

The Global Fund Strategy also emphasizes maximizing the engagement and leadership of most affected communities to leave no one behind.⁶ Regarding the level of engagement in the CG7 process, our study indicated that 46.91% (38) of the respondants felt they were not as involved as they wanted to be, while 27.16% (22) encountered challenges in actively participating in the discussions. In contrast, only 18.52% (15) of the respondents expressed being very involved in country-level dialogues, and only 6% (5) stated they were part of the proposal writing team. Some of the challenges reported were being tokenized, or invited to broader meetings but excluded from the meetings where decisions were made, women also reported that their priorities were included in early drafts of country priority lists but often did not make it to the final country proposal or only one or two priorities made it into the final proposal.

Several concerns and challenges were identified in getting involved around the GC7 process. Foremost among these was a prevailing lack of clarity and transparency, leaving the civil society community confused about its impact and decision-making procedures. Accessibility was also an issue, with some participants facing barriers such as language constraints, restricted internet access, and financial limitation, as most were on a voluntary non-remunerated participation that hindered their full engagement. In the context of Latin America, a notable concern underscored the existence of limited quotas in country dialogues, resulting in narrower engagement, restricted observations, and constrained contributions, particularly affecting women and young women. Advocacy for increased participation of women and girls was identified as an overarching challenge, compounded by difficulties in effectively promoting the gender component within the GC7 process. Countries like Eswatini, India and Malawi, highlighted the issues related to their CCM representatives - some representatives were reportedly inactive or absent from meetings, leaving communities without the necessary support. In some cases, certain elected CCMs failed to involve networks of women in their engagement meetings, further underscoring the need for more comprehensive and inclusive representation and participation within the Global Fund's processes.

The study also revealed the limited participation of women in the Country Coordinating Mechanisms (CCMs) despite the Global Fund's commitment to gender equity. Only 16.05% (13) of respondents claimed membership in the CCM, primarily from West and Central Africa, West and Central Africa, with at least one representation from other regions such as East, North, South Africa, and South Asia. Challenges encountered in the CCM and GC7 processes revolve around political commitment from stakeholders and difficulties in ensuring active engagement during proposal development. Despite some participants having vast experience in CCM and innovative proposal writing, they still faced barriers to have a meaningful involvement. For others, the opportunity to be part of the process was simply not accessible, leading to limited information sharing and hindered participation. The issue of insufficient representation of indigenous women in country dialogues emerged as a significant concern.





Cultural factors influencing decision-making processes created obstacles in effectively addressing women's priorities, which could potentially have repercussions on HIV-related outcomes. For example, In Uganda, discriminatory policies and limited knowledge and enforcement of existing policies emerged as barriers, underscoring the need for continuous efforts to address gender inequalities and improve policy enforcement to effectively respond to HIV.

Furthermore, the lack of adequate information dissemination left participants with a sense of being uninformed about the intricacies of the processes, as well as, advocating for equity, particularly in relation to women's concerns, presented additional challenges for certain respondents. Throughout the proposal writing phase, efforts were made to advocate for the inclusion of TB-CRG and HIV-TB Coinfection, aiming to address critical health concerns with the Ministry of Health of Bangladesh. Despite these efforts, these topics were not included in the CCM meeting agenda.

Despite these challenges, positive instances emerged, such as the Tanzanian government's support in incorporating women's issues into the Gender Inequality agenda, although only after addressing government concerns first in the writing process.

ACHIEVING WOMEN'S PRIORITIES

Women's priorities were often not included in the final proposals, but nevertheless women made progress despite the challenges.

An early previous consultation during the first early stages of the 2023 funding period led by ICW, revealed common challenges among local networks identified for Window 2 countries. Engagement and understanding of required gender assessments were limited across these networks, and there was a lack of coordination among women's efforts across NGOs. Women's voices were scattered and unheard due to the absence of coordination, leading to a focus on prevention for girls and young women while neglecting women's identified priorities.

For example, women living with HIV reported that participation in the GC7 and the CSO evaluation meeting in Morocco provided valuable opportunities for engagement with diverse stakeholders. As a result, women living with HIV in Morocco learned to interact and share their insights, helping to identify priorities within the community.

One woman in Nigeria, took action which led to the inclusion of PMTCT/EMPOWERMENT and AGYW components, however, her involvement in the proposal writing was limited. These components were entrusted to youth-led organizations for implementation, marking a significant step forward as they had not been part of the initiative before. The active involvement of community members and civil society in Nigeria further strengthened the writing process.

While certain achievements may not have been thoroughly outlined or had limitations, it's important to acknowledge that the concerns voiced by the communities were taken into consideration when writing the proposal. However, a significant portion of these concerns were not entirely integrated.





Women also reported some achievements, such as influencing the prioritization of COVID-19 vaccines for women living with HIV at the country dialogue level and conducting impactful training sessions on gender equity, women's rights, and sexual health in El Salvador. Similarly, progress has been observed in other regions. For instance, in Eswatini, women have actively participated in proposal writing and engaged in country-level dialogues. The network of women living with HIV have benefited from technical assistance provided by the CRG, aiding in the establishment of community priorities related to TB, HIV, and KP. This involvement also extended to workshops and training sessions aimed at enhancing understanding of the GC7 processes. A significant leap in progress has been seen in Kenya's efforts within the GC7 initiative, including documenting the priorities of adolescent and young people, mobilizing women to health care facilities, strengthening community differentiated service delivery models, advocating against female genital mutilation (FGM), ensuring comprehensive inclusion of community TB priorities, enhancing the role of Community Outreach Specialists (COS), disseminating information at the grassroots level, and promoting pre-exposure prophylaxis (prep). In Eswatini, the women-led organization has received essential technical support from CRG to identify community priorities, specifically concerning TB, HIV, and key populations. Educational campaigns have been conducted to raise awareness about the Global Fund and GC7, emphasizing recent updates and opportunities within the GC7 grant framework. With the prioritization process now completed, the organization is ready to assess costs and plan for implementation.

These achievements collectively underscore the transformative potential of the engagement of women and particularly women living with HIV in engagement and participation in the GC7 processes, contributing to more inclusive and effective responses to HIV and beyond.

Advancing women-led responses in Global Fund Program Implementation:

Networks of women living with HIV also reported challenges being considered as recipients of Global Fund funds and in competing to implement global fund funded programming. In ICW Malawi, women highlighted the need for improved data, gender analysis, and organizational strengthening, aiming to establish a new network itself officially as a chapter in the country to ensure that they could become implementers of programming. In the MENA region, Sudan requires a local bilingual consultant to facilitate consultations with women and support their priorities in negotiations.

The identified needs within ICW local networks for Window 2 countries highlight critical challenges like limited engagement with required gender assessments, and no involvement in such assessments has been reported. Coordination among women's efforts across NGOs is lacking, leading to dispersed voices and unaddressed priorities. ICW Mozambique requests support for women's consultation and collaboration to address these issues, along with technical assistance for Gender Analysis review and priority formulation.





CONCLUSION

The Global Fund has made powerful commitments to achieving gender equity, including promising steps through the establishment of the Gender Assessment Requirement and gender equality marker, these efforts are propelling progress to achieve gender equity in the GC7 processes. Recently, the Global Fund reaffirmed its dedication to gender equity within its processes by bolstering investments in the Gender Equality Fund, which will help accelerate progress towards gender equality through community engagement and empowerment. The Global Fund has and has done truly incredible work increasing however we still have more to do to eliminate stigma and discrimination to achieve the last HIV mile, Achieving women's priorities within the Global Fund processes and programming is more urgent than ever, as a we confront a rising tide of misogyny and concerns about transparency, accessibility, and representation persist.

Clear and transparent decision-making procedures, enhanced accessibility for all, and broader representation across all stages of engagement are essential to ensure effective participation and to elevate the women's perspectives. It is important to address this vicious cycle where the lack of influence or accountability in prioritization processes has led to underfunding or deprioritization of women's programs, low rates of program implementation led by women-led responses and projects once proposal hurdles are met, limiting funding to prevention of vertical transmission services only.

We have articulated a set of recommendations arising from our lived experiences that are essential to counter the challenges of weak involvement of women living with HIV and women's networks, address the chronic underfunding and precarious funding situation for networks of women living with HIV that poses significant challenges and power imbalances in achieving the sustained advocacy necessary to influence these lengthy and highly political processes and position networks of women living with HIV to deliver women-led responses that will accelerate the HIV response.

RECOMMENDATIONS

Moving forward, we recommend the expectations expressed are to:

- Require gender assessments to be conducted with the active participation from networks of women living with HIV, networks of women from key populations and key gender allies. Gender assessments should meet rigorous standards including being validated by women living with HIV and key allies.
- Empower these networks by enabling them to utilize gender assessment findings to inform priority interventions, support gender-transformative initiatives and the inclusion of diverse women's priorities within proposals, thereby promoting inclusivity and equity.

⁷ The Global Fund (18 July 2023) Global Fund, GSK and ViiV Healthcare Strengthen Their Partnership for Gender Equality. https://www.theglobalfund.org/en/news/2023/2023-07-18-global-fund-gsk-viiv-healthcare-strengthen-their-partnership-for-gender-equality/





- Strengthen women's participation, representation, and voice within the Global Fund's country processes. Implement measures to improve equity, clarity, transparency, and accessibility in GC7 decision-making processes. Address barriers such as language constraints, limited internet access, and financial constraints that hinder full engagement.
- Advocate for inclusive quotas in country dialogues to ensure broader representation, particularly of marginalized groups like indigenous women and confront harmful dynamics with prime recipients and powerful actors at the country level.
- Meaningful involvement of women living with HIV directly in proposal writing and dialogues for GF TB, HIV, and Malaria, essential for progress.
- Strengthen the coordination and collaboration among women's networks, civil society, and other stakeholders to effectively advocate for women's priorities within Global Fund processes.
- •Establish clear channels for information dissemination and feedback mechanisms to ensure the voices of women living with HIV are heard and integrated into proposals. Promote awareness and training to empower women to engage in proposal writing, country-level dialogues, and decision-making processes.
- Invest in women-led responses to ensure readiness and equity for program implementation at the country level.

The required gender assessments must be conducted with meaningful engagement of networks of women living with HIV and key gender focused allies. Not only should engagement be ensured, but the gender analysis must meet acceptable standards and findings validated by networks of women living with HIV. Networks should have the opportunity and support to leverage the assessment in informing and advancing priority interventions, with a focus on promoting gender-transformative approaches and diverse women's priorities within proposals rather than to constrain or limit these priorities.