



COMMUNITY GUIDE ON GENDER

GRANT CYCLE 7

(2023-2025 ALLOCATION PERIOD)



WHAT IS THIS GUIDE?

This community guide provides key highlights from the Technical Brief on Gender Equality. It is meant to support the meaningful engagement of civil society and communities involved in the preparation of Global Fund funding requests.

HOW IS GENDER EQUALITY REFLECTED IN THE NEW STRATEGY?

The Global Fund's 2023-2028 Strategy recognizes that the goal of ending HIV, TB and malaria cannot be achieved without maximizing health equity, gender equality and human rights.

The Strategy commits to take a gender-transformative approach to the three diseases and aims explicitly at transforming inequitable social and cultural norms and discriminatory laws, policies and practices that contribute to gender inequalities and increase vulnerabilities to HIV, TB and malaria for women, girls, and gender-diverse communities.

The Global Fund will support communities to:

1. Scale up comprehensive programs and approaches to remove human rights and gender-related barriers.
2. Support comprehensive sexual and reproductive health and rights (SRHR) programs and their strengthened integration with HIV services for women in all their diversity and their partners.
3. Advancing youth-responsive programming, particularly for adolescent girls and young women, young key populations and their partners.
4. Deploying quantitative and qualitative data to identify drivers of HIV, TB and malaria inequity and inform responses.

WHAT ARE THE GLOBAL FUND'S GENDER-RELATED EXPECTATIONS FOR PROGRAMS:

1. They should be informed by a comprehensive gender assessment.
2. They should not contribute to or perpetuate gender inequalities or inequalities through their design or implementation.
3. They should ensure the full participation of women, girls, and gender-diverse communities in the design, implementation, and monitoring of programs.
4. They should ensure that women, men, girls, boys, and gender-diverse communities benefit equitably from the program's results.
5. They should be gender-responsive: tailored to meet gender-specific needs and remove gender-related barriers in the context of the three diseases. In addition, where possible they should be gender-transformative: seeking to advance gender equality by tackling the underlying causes of gender inequality in health, including social norms and power imbalances between women, men, girls, boys and gender-diverse¹ communities.
6. They should use gender-specific and/or sex-disaggregated indicators, including impact indicators, to monitor and evaluate progress and results, or take steps to fill data gaps.

WHAT DOES GENDER HAVE TO DO WITH HEALTH?

Sex and gender are both determinants of health. An individual's sex impacts both sex-specific health needs, their experiences of health conditions and reactions to medicines. Gender inequality and discrimination puts women's and girls' health and well-being at risk. They often face greater barriers than men and boys to access health information and services.

Gender-diverse people also face violence, stigma and discrimination because of their gender identities and expressions, including in healthcare settings, increasing health risks and vulnerabilities and worsening health outcomes.

Harmful gender norms – especially those related to rigid notions of masculinity – cause significant harm to women, girls, and gender diverse-communities, while at the same time negatively affecting boys and men's health.

1. The term "gender-diverse communities" is used throughout this brief to refer to people whose gender identity and expression does not conform to the norms and expectations traditionally associated with their sex at birth. This includes trans people as well as people who do not identify as completely male or completely female.

HOW DOES THE GLOBAL FUND EVALUATE GENDER EQUALITY?

The Global Fund relies on a Gender Equality Marker to score funding requests. The scoring is based on the availability of gender assessments. These assessments will help to identify whether specific groups of women, girls, and gender-diverse communities experience greater vulnerability due to multiple and intersecting forms of discrimination, identify strategies to address the imbalances in power and inequalities that drive them, as well as specific needs for prevention, treatment, care and support.



WHAT ARE EXAMPLES OF GENDER-RESPONSIVE AND GENDER-TRANSFORMATIVE INTERVENTIONS FOR EACH DISEASE?

HIV/TB

EXAMPLES OF GENDER-RESPONSIVE INTERVENTIONS FOR TB

- Integrating TB diagnosis and preventative treatment into antenatal care programs.
- Gender-responsive community-based prevention education and case finding (e.g., at men's places of work particularly where occupational risk contributes to TB infection, or in places where women gather).
- Training TB providers about the impacts of gender on TB vulnerability and gender-responsive care and patient rights.
- Case finding algorithms that consider sex differences and needs in screening and diagnostic processes.
- TB infrastructure that responds to gender-differentiated needs (e.g., different or extended operating hours, private consultation, and sputum collection rooms for women and trans and gender-diverse people, organization of waiting areas).
- Gender-sensitive peer and psychosocial support programs for women, men and gender-diverse people.
- TB prevention, diagnosis, and treatment services, including peer education, for incarcerated women or gender-diverse people living in group housing.
- Linkages with HIV, gender-based violence, sexual and reproductive health services, and services for trans and gender-diverse people

EXAMPLES OF GENDER-TRANSFORMATIVE INTERVENTIONS FOR TB

- Interventions to increase gender equality within health providers engaged in the provision of TB care, including by ensuring equal opportunities for participation, training, and leadership for women and gender-diverse people, closing gender pay gaps, increasing employment security, and eliminating sexual harassment and violence in the workplace.
- Social norm change strategies focused on reducing both TB and gender-related stigma and discrimination, their intersections and resulting inequalities.
- Interventions to reduce unpaid care burdens for women and girls who are caregivers of people with TB.
- Human rights and gender equality literacy programs for people affected by TB, combined with access to legal services and initiatives to address harmful laws and policies.

MALARIA

EXAMPLES OF GENDER-RESPONSIVE INTERVENTIONS FOR MALARIA

- Community-based case management provided by female community health workers to reduce costs related to malaria treatment and increase accessibility for women.
- Strengthening linkages between malaria and maternal and child health interventions and integrating malaria prophylaxis and net distribution into antenatal care and immunization programs.
- Gender-responsive communications and messaging for malaria prevention and treatment.
- Engaging women in vector control activities such as indoor residual spraying and net distribution to increase acceptability in women-led households/when men are not present in households.
- Integrating gender-responsive malaria education and prevention with services targeting affected populations, including for trans and gender-diverse people, indigenous people, and migrants and mobile populations, as relevant.
- Partnerships with indigenous community-based organizations or community change agents to develop and disseminate messages on gender-responsive malaria prevention, treatment and control strategies in ways that are locally and culturally relevant.

EXAMPLES OF GENDER-TRANSFORMATIVE INTERVENTIONS FOR MALARIA

- Interventions to increase gender equality within the malaria workforce, including as IRS sprayers, seasonal malaria chemoprevention distributors and community health workers, by ensuring equal opportunities for participation, training, and leadership for women and gender-diverse people, closing gender pay gaps, increasing employment security, and eliminating sexual harassment and violence in the workplace.
- Interventions to increase women's economic independence and decision-making power within households, such as conditional cash transfers, and referral systems.
- Health education interventions at the community level that reinforce women's authority to make decisions about whether/when to seek care for themselves and family members.



The Global Fund expects that gender considerations are integrated into every element of the Global Fund's funding cycle, from the development of funding requests and grant-making and program implementation to monitoring, evaluation and learning.

READ MORE

GLOBAL FUND STRATEGY 2023-2028 - The new strategy puts communities at the centre.

APPLICANT'S HANDBOOK: Explains how to develop a funding request and key steps required to access funding from the Global Fund.

MODULAR FRAMEWORK: identifies the interventions that the Global Fund supports, associated budget and indicators against which progress is measured.

TECHNICAL BRIEF GENDER EQUALITY: ANNEX 2: Identifies specific entry points for addressing gender equality in the modular framework.

CONTACT US

☎: +255 739 210598 ✉ eannaso@eannaso.org

🌐 www.eannaso.org | 🐦 [eannaso](https://twitter.com/eannaso) | 📘 facebook.org/eannaso.org