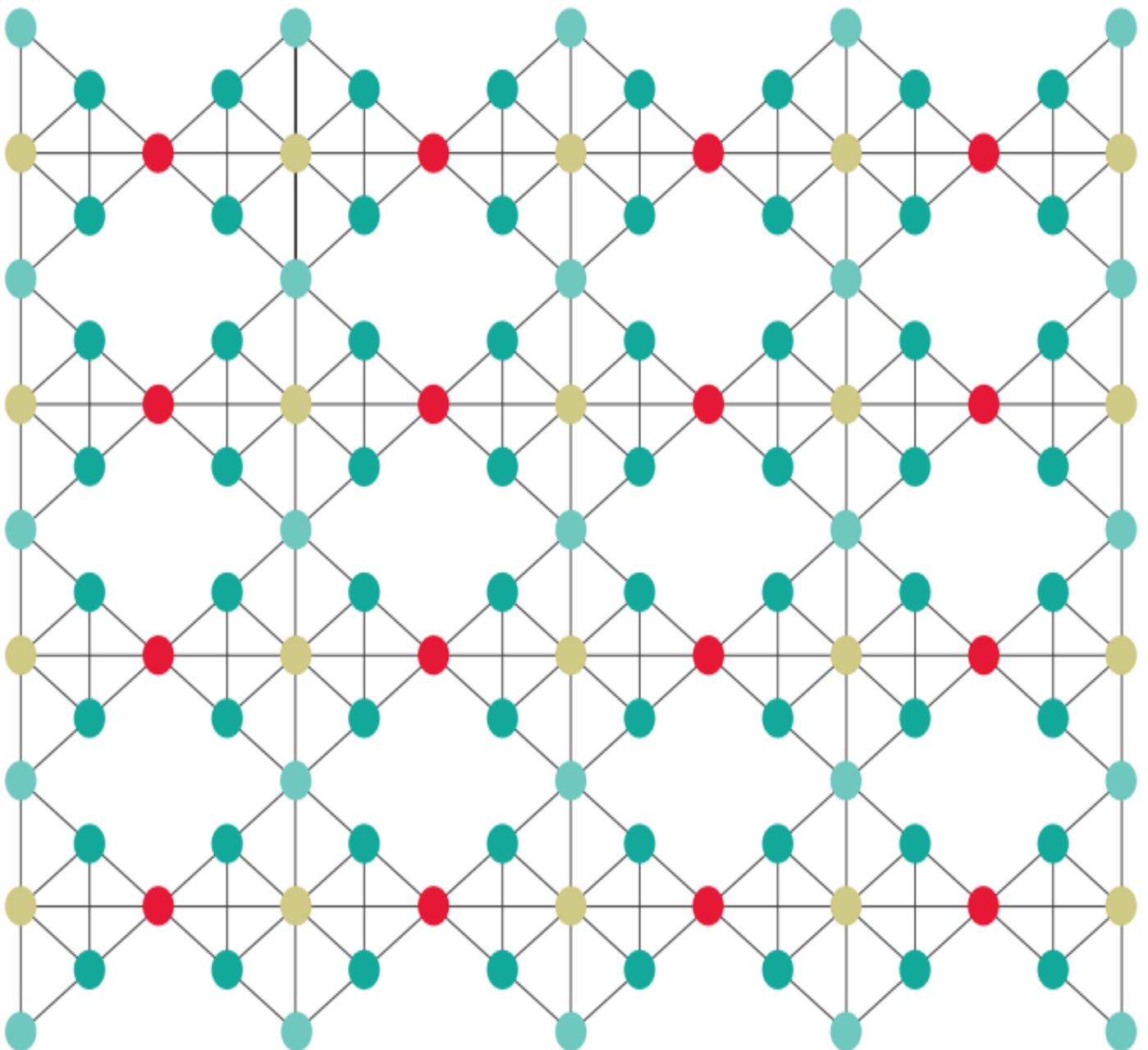


UNAIDS

Global Partnership for Action to
Eliminate All Forms of HIV-related
Stigma and Discrimination



“There is no such thing as a single-issue struggle because we do not live single issue lives.” Audre Lorde

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Global Partnership for Action to Eliminate All Forms of HIV-related Stigma and Discrimination

Social marginalization, stigma, discrimination and human rights abuses are often the reality for excluded groups worldwide, and these increase their vulnerability to HIV. People living with or affected by HIV often experience intersectional forms of stigma and discrimination fuelled by multiple factors, including their HIV or other health status, age, sex, gender identity, sexual orientation, race, disability, ethnicity, drug use, migration status, etc.

One in every eight people living with HIV report being denied health services¹. The removal of barriers that stigma and discrimination create in accessing HIV prevention, treatment and care services, is key to ending AIDS as a global public health threat.

The Global Partnership for Action to Eliminate All Forms of HIV-related Stigma and Discrimination (henceforth called “The Global Partnership”) aims to accelerate implementation and scale up of evidence-based programs and initiatives to end HIV-related stigma and discrimination in countries. It will furthermore gather data to inform policy and program implementation and demonstrate measurable progress towards eliminating all forms of HIV-related stigma and discrimination.

¹ UNAIDS 2016 Reference. [Eliminating discrimination in health care : Stepping stone towards ending the AIDS epidemic.](#)

1. Why this initiative?

The global scale-up of antiretroviral therapy has been the primary contributor to a 48% decline in deaths from AIDS-related causes. Efforts to strengthen HIV prevention and treatment programs are also reducing the transmission of HIV: since 2010, new HIV infections among adults have declined by an estimated 16% annually from 1.9 million to 1.6 million in 2017.²

However, these gains are not distributed equally. Groups that face HIV-related stigma and discrimination are often left behind – in many cases in fear of or facing discrimination, which drives them further away from accessing the services they need. Without confronting HIV-related stigma and discrimination, we won't achieve the goal of ending AIDS as a public health threat by 2030.

Facts:

- Stigma and discrimination are major barriers for people to access HIV prevention, treatment, care and support services.
- People living with HIV who perceive high levels of HIV-related stigma are 2.4 times more likely to delay enrolment in care until they are very ill.
- More than a billion people live with some form of disability. People living with disabilities are four times more likely to report being treated badly by health-care staff and nearly three times more likely to be denied health care³.
- Stigma and discrimination towards key populations of gay men and other men having sex with men, sex workers, people who use drugs, prisoners and people in closed settings, and transgender people is reinforced by criminal laws and other structural barriers, which fuel violence, exploitation and a climate of fear⁴.
- One hundred and thirty million girls between the age of six and 17 are out of school and 15 million girls of primary-school age—half of whom live in sub-Saharan Africa—will never enter a classroom. Every child has a right to education⁵.
- Women and girls experience multiple forms of discrimination, including in the context of HIV that limit their ability to prevent HIV and mitigate living with it. Violence against women is one of the more extreme forms of discrimination – one in three women worldwide have experienced either physical and/or sexual intimate partner violence or non-partner sexual violence in their lifetime⁶.

Across all regions, gender inequality, discrimination, exclusion and other human rights violations increase the vulnerability of women and girls, key populations and other marginalized populations to HIV and limit their ability to mitigate the impact of the epidemic. Coordinated and concerted action at country level must be accelerated to end HIV-related stigma and discrimination.

² UNAIDS 2018. [Factsheet – World AIDS Day 2018](#).

³ WHO 2017. [10 Facts on Disability](#).

⁴ [Global Commission on HIV and the Law](#).

⁵ World Bank 2017. [Girls' Education](#).

⁶ WHO 2017. [Key Facts on Violence Against Women](#).

2. What aspects make this project unique?

While notable progress has been made in meeting the HIV treatment targets, the vision of ending AIDS by 2030 will not be achieved without similar progress in reducing new HIV infections and ending HIV-related stigma and discrimination. The 2016 Political Declaration on Ending AIDS recognizes the HIV epidemic as a human rights challenge and includes a firm commitment by the Member States to eliminate HIV-related stigma and discrimination by 2020. There is an urgent need now to accelerate action to implement these commitments.

This global partnership provides a platform where partners can join their efforts and resources to ensure national commitments to eliminate HIV related stigma and discrimination are translated into measurable policy change and programmatic interventions in different settings.

The absence of data is impeding the scale up and the prioritization of programmes to address HIV stigma and discrimination by implementing organizations and other entities. This Global Partnership will help in closing the data gap and demonstrating the clear link between stigma and discrimination reduction and improved HIV outcomes, as well as the cost-effectiveness of these approaches. Countries will report using a comprehensive set of standardized stigma and discrimination indicators that will be included in the Global AIDS Monitoring Guidelines⁷.

A game-changer in this effort is the leadership of civil society and communities in the Global Partnership and their meaningful participation in the design, implementation, and monitoring and evaluation of the programmes.

⁷ UNAIDS 2018 Guidance. [Global AIDS Monitoring 2019](#).

3. Collaboration

The civil society members of the UNAIDS Programme Coordinating Board requested that urgency be added to the implementation of the Zero Discrimination goal of the UNAIDS Strategy. The Global Partnership was thus created to reinvigorate the political commitment and action by Member States, UN, civil society organizations and communities to end HIV-related stigma and discrimination.

The Global Partnership is co-convened by the Executive Director of the Global Network of People Living with HIV (GNP+), UNAIDS Executive Director, UNDP Administrator and UN Women Executive Director. The NGO Delegation to the UNAIDS Programme Coordinating Board has a strong leadership role and through its regional representatives ensures an active participation of people living with HIV and community networks of key populations in the establishment of the partnership.

At the country level, national multi-stakeholder groups will be established composed of representatives from civil society, including faith-based organizations, key and vulnerable populations, governments, multilateral and bilateral donors, private sector, academia, transnational networks of parliamentarians and national human rights institutions.

The Global Partnership encourages all member states and partners to join their efforts to eliminate HIV-related stigma and discrimination.

4. The project approach and timeline

January 1, 2020 – December 31, 2021.

Overall objective: Accelerate implementation of commitments to end HIV-related stigma and discrimination by Member States, UN agencies, bilateral and international donors, NGOs and communities to end AIDS as part of achieving the Sustainable Development Goals by 2030 with the creation of a special partnership dedicated to sharing technical knowledge and making heard the voices of those living with HIV and key populations that face stigma and discrimination when accessing services in different settings.

The global partnership has three sub-objectives:

- **Fulfil commitments.** It will support countries to undertake concrete actions to fulfill their human rights obligations and commitments made at the global, regional and national levels towards the elimination of HIV-related stigma and discrimination.
- **Build meaningful partnerships.** It will establish, strengthen and revitalize partnerships among stakeholders to implement and scale up evidence-based programmes towards ending HIV-related stigma and discrimination.
- **Share responsibility for measurement and accountability.** It will generate and disseminate evidence-informed data to inform policy and programming, measure progress and support accountability toward the elimination of HIV-related stigma and discrimination.

To join the Global Partnership, governments, civil society and other partners will agree to:

- Partner with various stakeholders, including civil society organizations, UN entities, community groups, private sector, academia, and other partners, to address HIV-related stigma and discrimination.
- Implement evidenced based policies and programmes to eliminate HIV-related stigma and discrimination in a minimum of three of the priority areas - through initiatives that are measurable and can be brought to scale;
- Allocate resources to finance the implementation, monitoring and reporting of activities to address HIV-related stigma and discrimination; and
- Monitor and report on the concrete steps taken to address HIV-related stigma and discrimination.

In the initial phase, the government will:

- a) Establish a national multi-stakeholder core group on HIV-related stigma and discrimination composed of government and other stakeholders (private sector, UN, bi- and multilateral agencies, and civil society, including people living with HIV, networks of key populations, young people and women living with HIV). Their key focus will include tracking HIV-related stigma and discrimination in the six priority areas and support monitoring activities. Where groups with similar or overlapping objectives exists, government will work to include the above functions as part of their work.
- b) Undertake or build on existing policy, programme and legal assessments about HIV-related stigma and discrimination in the six settings, based on the agreed indicators.
- c) Develop a costed roadmap for national action to address HIV-related stigma and discrimination in the six settings through a wide consultative process. Roadmaps for national

action must comprise activities and initiatives that respond to the indicators in the assessment methodology tool including legal environment assessments.

Where national processes are underway, or similar action plans have been developed, governments will work with national stakeholders to complement any gaps from existing plans to avoid duplication.

- d) Utilize suggested stigma and discrimination indicators contained in the Global AIDS Monitoring Guidelines to monitor progress and produce an annual report based on progress in implementing the roadmaps for national action to addressing HIV-related stigma and discrimination.

Priority areas

1. Healthcare settings,
2. Workplace settings,
3. Educational settings,
4. Justice settings,
5. Household settings: Individuals, families and communities
6. Emergency and humanitarian settings

Programmes to eliminate HIV-related stigma and discrimination will focus on populations 'being left behind', including but not limited to people living with HIV, key populations (gay men and other men who have sex with men, sex workers, transgender people, people who inject drugs, prisoners and other incarcerated people and migrants), women and girls, particularly adolescent girls and young women, and migrants.

Initiatives addressing stigma and discrimination faced by these populations will also consider critical cost-cutting dimensions, such as: harmful gender, social and cultural norms; sexual and gender-based violence; legal and policy environment, impact of gender, social and economic inequalities; existence of social protection policies; communication and media, internalized and experienced stigma and intersectional stigma and discrimination.

5. Indicators: How will we measure success?

How will this help us end AIDS by 2030?

HIV incidence, HIV prevalence and other epidemiological measures do not fully reflect the structural and social determinants that facilitate the spread of HIV or the substantial stigma and discrimination faced by people living with HIV, women and girls, and other key populations. They also fail to capture the need to establish an enabling legal and policy environment to protect these individuals from rights violations and to change the attitudes and behaviors of the general population

The set of indicators of the Global AIDS Monitoring Guidelines and the National Composite Policy Index indicators on stigma and discrimination will be used as interim measures to monitor progress and produce an annual report based on progress in implementing the roadmaps for national action addressing stigma and discrimination in different settings.

This interim set of indicators to measure the drivers, facilitators, manifestations and outcomes of HIV-related stigma and discrimination can be found in the UNAIDS 2018 data book⁸ and the [AIDS info website](#).

UNAIDS and a group of civil society leaders and expert researchers are working on the development of a comprehensive set of indicators for the monitoring framework of the Global Partnership to eliminate all forms of HIV-related stigma and discrimination that will be included in the Global AIDS Monitoring Guidelines.

It is expected that by the end of 2020, at least 10 countries are:

- implementing evidence-base programmes to eliminate HIV related stigma and discrimination faced by people living with HIV, women and girls, and key populations,
- progressing in meeting their national commitments in the key areas of focus (health care, educational, workplace, household, justice, emergency settings), and
- ensuring that those communities mostly affected by stigma and discrimination in the context of HIV are contributing to and monitoring the implementation.

⁸ UNAIDS 2018 Reference. [UNAIDS Data 2018](#).

6. Questions and Answers

How many people will be reached?	At least 20,000 people living with HIV across 10 countries as direct beneficiaries.
How will my money be used exactly?	<p>Identifying and supporting opportunities for the scale up of programmes proved to address stigma and discrimination, prioritizing community engagement.</p> <p>Optimizing and mobilizing resources in support of the implementation of HIV-related non-discriminatory evidence-based programs, identifying synergies with existing funding mechanisms and opportunities.</p> <p>Strengthening the target-setting, monitoring and reporting mechanisms that will inform the implementation status of HIV non-discriminatory policies and programs.</p> <p>Supporting community leadership in efforts to advance laws, policies and programmes -- including their participation in monitoring and reporting progress and in other accountability mechanisms.</p> <p>Convening and linking United Nations agencies, Member States and other stakeholders to catalyze leadership, ownership and increased action in advancing legal and policy frameworks that address HIV-related stigma and discriminations, sharing of best practices, knowledge and promotion of innovative strategies and the implementation of HIV-related non-discrimination programmes, at the international, regional and local levels.</p>
How will you ensure people will stay on treatment?	More people will have access to the healthcare services needed to ensure that people stay on treatment as currently approximately 1 in 5 people living with HIV reported having been denied healthcare because of stigma and discrimination. ⁹
How will success be monitored? What are the indicators?	<p>A Task Force of civil society leaders and expert researchers led by UNAIDS has been set up to develop an M&E framework to measure progress in implementing the commitments and pledges made as part of the Global Partnership.</p> <p>The indicators will include the number of countries which have implemented evidence-based programmes and have progressed in meeting commitments in the following areas: health care, educational, workplace, household, justice, emergency settings. It will also include the number of communities most affected by stigma and discrimination which are contributing to the programme design, implementation and monitoring.</p> <p>The Global AIDS Monitoring Guidelines and the National Composite Policy Index indicators on stigma and discrimination will be used to</p>

⁹ UNAIDS 2017 Reference. [Confronting discrimination: Overcoming HIV-related stigma and discrimination in healthcare settings and beyond.](#)



	<p>monitor progress and produce an annual report based on progress in implementing the roadmaps for national action addressing stigma and discrimination in different settings.</p>
<p>Who are the co-conveners of the Global Partnership?</p>	<p>UNAIDS Programme Coordinating Board NGO Delegation, UNAIDS Secretariat, UN Women, UNDP, the Global Network of People living with HIV.</p>
<p>Who are the contributing partners?</p>	<p>Partners that have demonstrated strong commitment to promote human rights principles and gender equality as civil society organizations, including faith-based organizations, UNAIDS co-sponsors and Secretariat, key and vulnerable populations, governments, multilateral and bilateral donors, private sector, academia, transnational networks of parliamentarians and national human rights institutions, among others, are invited to join the Global Partnership.</p>

7. The budget

Global Partnership for Action to Eliminate All Forms of HIV-related Stigma and Discrimination

Activity	Estimated cost per country (US\$)	Total estimated cost for 10 countries (US\$)
Inception	\$35,000	\$350,000
Implementation	\$360,000	\$3,600,000
Knowledge	\$60,000	\$600,000
Monitoring, evaluation and reporting	\$45,000	\$450,000
TOTAL – Project		\$5,000,000



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