

Tackling human rights and gender equality in HIV, TB and malaria programmes in the Greater Mekong Subregion

To support human rights and gender equality in HIV, TB and malaria programmes, the Asia Regional Health Cluster (ARHC) of UNOPS, as the Principal Recipient for the Global Fund grants, has put in place special efforts to mainstream gender in its programmes and the provision of support to partners to ensure equity for key populations at risk or most affected in the context of the gender-based approach. In addition, PR-UNOPS also has directed its focus on building the capability of the implementing partners to prevent and respond to sexual exploitation and abuse (SEA) and to ensure shared access to the benefits from the programmes and prevent unintended effects.

Gender mainstreaming in HIV, TB and malaria programmes

Firstly, PR-UNOPS developed gender briefs for the five countries in the Greater Mekong Subregion (GMS). The briefs provided gender analysis of the critical issues and a set of recommendations for gender-responsive programmes in the GMS. With these briefs, PR-UNOPS has been advocating for strengthening gender and women empowerment in the development of the National Strategic Plan and the concept notes for the three diseases to the Global Fund and partners. With this advocacy for gender mainstreaming, gender-responsive activities have been considered and adopted to the plans during new grant-making.

Additionally, PR-UNOPS indicated that domestic and gender-based violence (GBV) is one of the areas of concern during the COVID-19 pandemic where movement is restricted. In collaboration with UNFPA, PR-UNOPS conducted online GBV training for Sub-Recipients (SRs), particularly for non-GBV-specialized partners, to prevent GBV and increase the partners' knowledge to adapt the GBV services in the context of COVID-19 in mid-2020. The training covered basic concepts of gender and GBV, the relation between GBV and COVID-19, and the role of health actors in addressing GBV. It brought together 38 attendees who actively participated. More of such training is planned.

Prevent and respond to sexual exploitation and abuse in the programmes

UNOPS acknowledges that, "Sexual exploitation and abuse represents a catastrophic failure of protection. It brings harm to those whom we are mandated to protect and jeopardizes the reputation of the organization." UNOPS acts with urgency to end, prevent and respond to SEA. The implementing partners of UNOPS stand at the front line of this response and UNOPS supports them to protect affected people and communities from harm. Therefore, UNOPS implementing partners are required to meet the United Nations standards related to Prevention of Sexual Exploitation and Abuse (PSEA).





Malaria Consortium, one of the sub-recipients in Cambodia, conducted internal PSEA training for staff members ©Malaria Consortium

Before the beginning of the Global Fund grants for HIV, TB and malaria for the period 2021–2023, the PSEA orientation was provided to all SRs during a virtual kick-off meeting in mid-2020 to support their project planning under the new Global Fund grants. In this orientation session, PSEA concepts and principles were shared with participants.

Moreover, the PSEA minimum requirements training and PSEA risk assessment for SRs were conducted, specifically for civil society organizations (CSO) and non-governmental organizations (NGO) who are working closely with the communities. With support from the PSEA specialists in UNOPS, this training provided information on the practical actions and activities for PSEA based on their capacities and risk factors before the grant implementation. A total of 104 participants from 31 partner organizations in the five GMS countries – Cambodia, Lao PDR, Myanmar, Thailand and Viet Nam – attended each country's training. After these full one-day intensive training sessions, SRs assigned at least one PSEA focal point in their organization and prepared their PSEA action plans in early 2021. Based on the plans, SRs have been implementing their PSEA activities during the grant period 2021–2023. Key activities include:

- References check and staff declaration for no SEA incidents in the past in the recruitment process;
- Updating their code of conduct, including core PSEA principles and reporting mechanisms;
- An induction training or PSEA orientation session for all new staff and regular PSEA training for staff, volunteers and short-term consultants;
- Establishment of a confidential, safe reporting and complaints mechanism in the project site;
- Dissemination of appropriate PSEA IEC materials in the project sites;
- Regular reporting on PSEA indicators;



- PSEA core elements in all contracts with SSRs (where the SR has a sub-contractor);
- Response to SEA cases in a timely and appropriate manner (e.g., mapping GBV services, case reporting, and referral of survivors to relevant services).



A Catholic Relief Services (CRS) staff-member explains PSEA principles in the PSEA poster at the CRS office in Preah Vihear Province, Cambodia ©Catholic Relief Services

For the implementation of key activities, PR-UNOPS has been supporting the PSEA IEC materials to SRs and sharing the PSEA-related resources such as PSEA training materials, sample declaration forms and other required templates and information. PR also provides technical consultation to the SRs through UNOPS PSEA specialists for their capacity building. Since the grant-making stage, the Programme and M&E team at PR-UNOPS have been coordinating and actively engaging with partners to support the PSEA roll-out.

In addition to the PSEA minimum requirements training, an advanced training was held virtually for the PSEA focal points of the SRs in Cambodia and Myanmar in late 2021. This PSEA focal point training aimed at building participants' knowledge to better understand the PSEA case management



process and gave them an overview of their roles and responsibilities as focal persons. Forty-nine participants from 16 SRs attended the training.

PR-UNOPS will keep engaging with SRs in the GMS to ensure that they work towards meeting the minimum requirements for the prevention of SEA and respond in a timely and adequate manner when they observe cases during grant implementation.