

“Every individual can be part of the change”

The Global Fund’s Role to Achieve Health Equity

Nigeria is making progress in the fight against HIV, tuberculosis and malaria, but a section of the population, namely queer people, are effectively excluded from healthcare. Eudora Ogechukwu is therefore particularly committed to this community at various levels, and to intersex people in particular.



Foto: Eudora Ogechukwu

With over 200 million inhabitants, Nigeria is not only the most populous country in Africa, it also faces enormous health challenges. For example, a quarter of the world's malaria cases are registered in the African state on the Gulf of Guinea.

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The Global Fund's efforts to support Nigeria in healthcare are correspondingly high. Since 2002, over 4.8 billion US dollars have been invested, including 1.2 billion in the last cycle - more than in any other country.

This is a commitment that has had an impact: With the support of donors and partners, solid progress has been made in Nigeria in the fight against HIV, tuberculosis and malaria. For example, 90% of people living with HIV now know their status. 98% of them are on treatment and 95% of those treated have a viral load below the detection limit. New HIV infections have fallen by 28% since 2012. In the fight against tuberculosis, the treatment rate rose from 24% to 40% between 2019 and 2021. Nigeria has also made considerable progress in the fight against malaria, reducing the prevalence of the disease by almost 50% between 2010 and 2018. Over the past five years, the Global Fund's investments have enabled the distribution of around 90 million insecticide-treated mosquito nets. While such programs can help contain the spread of malaria, more far-reaching structural changes are needed to give everyone their right to access healthcare.

Without gender equality, there can be no equality in health



Foto: Eudora Ogechukwu

The Global Fund has therefore also committed itself to promoting gender equality. This is because women and girls are often confronted with higher risks and greater susceptibility to infections and often have no or poor access to health information and services. They also lack the necessary decision-making power and control over resources. Ultimately, rigid gender norms also have consequences for health - not only for women and girls, but also for boys and men. This is particularly true for people from the LGBTIQ* community. Eudora Ogechukwu, who lives in Nigeria's capital Abuja, has therefore made it their mission to stand up for their interests, and in particular for those of intersex people. In the LGBTIQ* community - which encompasses inter* and trans* individuals alongside lesbians, gays, bisexuals, and queers - inter* and trans* people are a minority within an already marginalized group, as Eudora Ogechukwu highlights in the interview.

“Intersex people like me don't officially exist in Nigeria”

As an intersex person, they are repeatedly exposed to discrimination and marginalization. “Intersex people like me don't actually exist officially in Nigeria,” says Eudora Ogechukwu. This is because there are no official surveys or data for this group of people, nor are intersex people mentioned in the curricula of the medical professions. Doctors, nurses and other people who work in healthcare services are therefore never informed in their training that they may encounter an intersex person in the course of their work, explains Eudora

Ogechukwu. As a result, anyone seeking help in a hospital is categorized as either male or female as soon as they register. “Our existence as intersex people is thus completely erased.”

The United Nations assumes that up to 1.7% of the population is born with intersex characteristics. This means that there are probably around 3.9 million intersex people living in Nigeria alone.



Foto: Eudora Ogechukwu

As part of their activist work for the Silent Voices Initiative, a voluntary organization of young LGBTIQ* people in Nigeria, Eudora therefore also wants to ensure more visibility for intersex people, not only in their own country but throughout the continent.

“We are also using the development of the community to identify other intersex people and ultimately to be able to present concrete figures on the intersex community in Nigeria.”

The Silent Voices Initiative is trying to reach LGBTIQ* people, especially in rural and remote areas, integrate them into the community, provide them with basic information and network them.

“Empowerment is only possible once we have established a connection to organizations that offer appropriate services,” says Eudora. Help, advice and support are also needed, especially when it comes to mental and physical health issues.

“It is the criminalization of same-sex relationships that makes us vulnerable.”

Ogechukwu is outraged that the LGBTIQ* community is not recognized as a "key population" or a "vulnerable group" in HIV prevention efforts or other areas of healthcare. Not our sexuality makes us vulnerable but laws, guidelines and issues, such as the criminalization of same sex partnerships. These need to be changed. “It is the criminalization of same-sex relationships that makes us vulnerable. We must take up the fight against the stigmatization and discrimination that arise, for example, from religion and a heteronormative upbringing.”

Eudora Ogechukwu thus addresses an important point. Nigerian society is considered to be strictly conservative, with the vast majority of the population having an extremely negative attitude towards LGBTIQ*. As African societies are traditionally concerned with maintaining family units and adhering to culturally defined gender roles, queer people question these norms.

Since former President Goodluck Jonathan signed the law banning same-sex marriage in 2014, the situation of the queer community has deteriorated even further.



Foto: Eudora Ogechukwu

Homosexual acts can now be punished with long prison sentences of up to 14 years. In some Muslim-majority states in the north, Sharia laws even carry the death penalty.

The law also criminalizes advocacy for LGBTIQ*. This means that people who stand up for the rights of queer people are also at risk. Hunts for gays, lesbians and trans* people and raids on queer parties repeatedly make the headlines. The sentiment against LGBTIQ* people also have an impact on their healthcare. This is because they also experience open rejection from doctors in public and private clinics and practices. Because of such experiences, says Eudora Ogechukwu, many avoid the healthcare system.

Queer people avoid the healthcare system out of fear

“90% of trans* people in Nigeria that I know treat themselves because they no longer dare to go to a hospital to get health care.”

They buy the medication they need at the pharmacy, but they don't get any advice, no examinations and therefore no real treatment. “This puts their health at risk, but they have no other way out,” emphasizes Eudora Ogechukwu, “everyone should have the right to unrestricted access to healthcare services, regardless of their sexuality, sexual identity or gender.”

This is not only a human right, it is even a central point of the Nigerian constitution, which guarantees all Nigerian citizens equal access to healthcare. However, non-heterosexual citizens are excluded from this.



During the Interview. Foto: Peter Wiessner

One ray of hope for the queer community is the service offered by the non-governmental organization Community Population Health Initiative (CPHI). Originally founded to conduct HIV research, it developed into an independent clinic in 2020 that offers HIV and STI tests, sexual and mental health counselling and treatment specifically for sexual minorities at two locations - Lagos and Port Harcourt - free of charge. This is made possible by financial support from UNAIDS, PEPFAR and the Global Fund.

Even in the face of the criminalization of same-sex lifestyles, the CPHI has found ways to continue providing medical and psychological care to queer people without being prosecuted by the authorities. Nevertheless, only simple medical treatments can be carried out in the CPHI facilities. For surgeries, for example, patients have to be referred to a hospital.

As outstanding and necessary as the work of the CPHI team is, it cannot close the gaps in the health services. Capacities are limited and there would have to be numerous other facilities of this kind throughout the country to provide halfway comprehensive care. There is therefore still a long way to go to achieve equal health opportunities for all people. The goal would only be achieved, as Eudora says, “when I have access to basic healthcare without having to fear that I will be discriminated against, stigmatized or even arrested and killed. When intersex people like me are no longer forced to undergo gender reassignment surgery and people - regardless of gender, sexuality or identity and whether they live in the city or in a remote region - can access healthcare.”

“We must not leave anyone behind.”

Eudora Ogechukwu and her colleagues at the various organizations she works with are aware that it will take many small steps to achieve this goal. And that it will take a lot of people to get involved.

“When I joined the Global Fund Youth Council in 2020, I was still quite inexperienced in this regard,” they said. “I knew little about the work or the structures of the Global Fund. But this work has allowed me to develop on a personal and professional level.” As a result, they have firmly internalized one important message: “We must leave no one behind. I feel committed to this credo and I follow it in my activist work.” And this includes a whole range of organizations, including the African Network of Adolescence and Young People Development (ANAYPD), the Women Health and Equal Right Initiative (WHER) and the International Centre for Advocacy on Right to Health (ICARH).

It was only through their work on the committees of the Global Fund that they realized how powerful and influential their voice can be, and they want to use this power. “At the same time, the Global Fund has given me the tools to bring about change for my community and to stand up for our own rights”. In concrete terms, this means, for example, working to ensure that intersexuality is noted when registering with a hospital.



Priyanka Ayer and Peter Wiessner in the office of Action against AIDS Germany during the recordings. Photo: Alexej Sloljarov

Eudora wants to pass on this empowerment and has already been able to encourage many others in her community not to endure and accept injustice unchallenged. “Every individual can be part of the change and we must join forces and work together with the Global Fund to combat any inequalities.”

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Interview: Priyanka Ayer, Global Fund Advocates Network and Peter Wiessner, Action against AIDS Germany. October 2024

Fotos: Alexej, Stoljarov, Eudora Ogechukwu and Peter Wiessner

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