

‘Everyone has the right to equal health opportunities’

The Global Fund’s Role to Achieve Health Equity

Healthcare is increasingly at risk in Ghana - especially for people living with HIV. The government is responsible for this, says Priscilla Ama Addo. A new law targeting the LGBTIQ community threatens to exacerbate the situation, as the young activist explains in an interview for [Action against AIDS](#).*



Photo: Priscilla Ama Addo

In recent years, people with HIV in Ghana have repeatedly experienced shortages of vital medicines. It happened again in March 2024 and HIV healthcare facilities waited in vain for additional supplies. Patients desperately reduced their medication doses or shared their supplies with others. This is because interrupting treatment can lead to the dangerous development of resistance, for example. The cause of this bottleneck was self-inflicted: Ghana's healthcare bureaucracy is so complicated and costly that imported medicines were stuck at the harbour for weeks.

Although the situation has eased again, Priscilla Ama Addo is still outraged. Above all, however, this incident is symptomatic for the activist. ‘Our government is not affected by HIV itself, which is why it is not interested in the concerns of people with HIV,’ says Addo, who studied public relations at the Ghana Institute of Journalism.

The HIV prevalence rate among women is twice as high as among men

‘The people in charge don't seem to understand how important the medication is for those affected and how dangerous it is to interrupt treatment,’ says Priscilla Ama Addo, who is HIV-positive herself. ‘That's why we have to make our voices heard and, if necessary, take it to the streets.’

She is not only combative, but also energetic. Addo is already passionately committed to the needs of young women and young people living with HIV in Ghana - including as an employee of [Hope for Future Generations](#), a community-based non-governmental organisation that campaigns for the needs of women, children and girls in the country. She is also President of [Young Health Advocates Ghana](#), a youth-led network for young people living with HIV/Aids with over 700 members nationwide and speaker of the [Global Funds Advocates Network](#).

It is true that the HIV infection rate in the country has been reduced from up to 30 per cent in the 1980s to around 7 per cent today. However, the UN goal of ending Aids as a threat to public health by 2030 is still a long way off. The current figures also reveal striking inequalities: At 2.0 per cent, the HIV prevalence rate for women is twice as high as for men. And according to a study, only around 22% of people under 24 have sufficient information about HIV.

However, there are also inequalities in the care of people with HIV, as Priscilla Ama Addo explains in an interview.

The laboratory tests required for HIV treatment, for example, are only subsidised for certain groups of people. Young people in particular are therefore unable to afford all laboratory tests. ‘This problem doesn't just affect people with HIV, but also other patients,’ says Addo. ‘However, if people have to go without medication because they simply can't afford it, this is a violation of human rights.’ Addo emphasises that everyone has the right to equal health opportunities. And this means that everyone should receive first-class medical care - regardless of their financial situation, their sexual orientation, their gender, their political or religious beliefs or the region in which they live.



Priscilla Ama Addo. Photo: Peter Wiessner

A new anti-gay law threatens healthcare

Priscilla Ama Addo mentions sexual orientation for a reason. An anti-LGBTIQ* law passed by the Ghanaian parliament in February 2024 threatens queer people with even harsher prison sentences than before. Anyone who belongs to the LGBTIQ* community or has sex with people of the same gender can be punished with three years in prison. And anyone who publicly campaigns for the interests of the community can even be sentenced to ten years in prison. Specifically, the law aims to criminalise any promotion of educational, health and legal services that support LGBTIQ* people in

overcoming the health and social consequences of stigmatisation, discrimination and violence - in other words, all organisations that campaign for the rights of queer people or offer health services.

‘This means that our years of efforts to provide these people with prevention and healthcare free from stigmatisation and discrimination are now also at risk,’ says Addo, describing the impact of the new legal situation. Queer people also have a right to health, but this is being massively violated by the law.

Although it still has to be ratified by President Nana Akufo-Addo, this is expected to happen after the elections in December. However, the situation of the queer community has already deteriorated dramatically. There are repeated raids on bars and establishments. Activists are being arrested and fear is spreading. Some LGBTIQ* people are even outed, rejected and publicly stigmatised by their own families, says Addo. ‘They now literally have to fear for their lives. The new law means that even an unproven accusation is enough to destroy their existence.’

Intensified prosecution and pogrom atmosphere



Photo: Priscilla Ama Addo

However, the intensified criminal prosecution and pogrom atmosphere, particularly against gay men, also make prevention for this group virtually impossible.

Many young queer people in particular, and not least people with HIV, no longer dare to visit healthcare facilities. ‘The fear of coming out is too great,’ says Addo. The law also provides for the LGBTIQ* community to be denied healthcare services, including HIV medication, as a matter of principle.

The international protests against the proposed law have largely died down. [Winnie Byanyima, Executive Director of the Joint United Nations Programme on HIV/AIDS \(UNAIDS\)](#), has also pointed out the [far-reaching consequences](#). Last but not least, the law would also hinder the fight against AIDS: ‘If it comes into force, it will restrict access to life-saving services, curtail social protection and jeopardise Ghana's development success.’

Ghana is not an isolated case in this respect. In Byanyima's home country of Uganda, a new, draconian anti-homosexuality law came into force in 2023.

There, ‘aggravated homosexuality’ is even punishable by death. Individuals or groups who stand up for homosexuals can be punished with up to 20 years in prison.

According to a global survey by the [International Lesbian, Gay, Bisexual, Trans and Intersex Association \(ILGA\)](#), almost half of all countries in which homosexuality is legally persecuted are in Africa. According to the report by the global umbrella organisation of LGBTIQ* organisations, same-sex relationships are only legal in 23 out of 54 African countries. In most African countries, laws against LGBTIQ* rights date back to the colonial era. They have shaped society's hostile attitude

towards sexual minorities for over two centuries, so that they have been branded as criminals for many generations.

These laws were often not changed after the countries gained their independence. On the contrary, Christian fundamentalists and evangelicals have reinforced anti-gay attitudes in society. In many places, lobbying by right-wing US churches plays a not insignificant role.

'If these laws and measures remain in place, the lives of queer people will be jeopardised because life-saving treatments and services will no longer be accessible to them,' warns Priscilla Ama Addo.

Excluding certain population groups not only violates their right to access healthcare but is also counterproductive for society as a whole.

Community-based projects as the key to combating HIV

The fact that Ghana has been able to reduce the number of HIV infections so significantly in recent decades is largely due to the development and safeguarding of health services and the associated care for HIV patients. This sustainable structural improvement was also made possible with funding from the Global Fund to Fight AIDS, Tuberculosis and Malaria. In rural areas in particular, this has given more people access to treatment in the first place. Just as importantly, it has ensured that the necessary medication is always available all year round, free of charge. 'I personally and many of my friends also benefit from this,' says Priscilla Ama Addo. 'These successes show that the work of the Global Fund is successful and works. Every euro, every dollar is well invested and saves lives.'

The key element of the partnership between local and regional organisations and the Global Fund is the so-called '[Country Coordinating Mechanism](#)'. This refers to national committees that submit funding applications to the Global Fund and monitor the grants on behalf of their countries. Addo has already had a lot of personal experience with Ghana's national committee. She is convinced by this process: 'It enables the communities to get directly involved in and lead measures to combat HIV.'

For the future, she hopes that even more young people will take on such leadership roles. Addo is certain that the goal of actually ending Aids by 2030 as a threat to public health will not be achieved without them.

'We need to recognise that young people have the necessary strength and power to take on such leadership roles and thus bring about change. But we have to give them the opportunities to do so.'

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