

## GUIDE

# A Guide to Digital Health and Human Rights in Global Fund Grant Cycle 8

The Global Fund to Fight AIDS, Tuberculosis and Malaria (The Global Fund) is approaching a new grant cycle. **Grant Cycle 8 (GC8) will run for three years between 2026-2028** and there are a number of key ways that communities and civil society can input into the process. The purpose of this guide is to support communities and civil society in navigating digital health rights in GC8 documents and processes.

The logo for 'STOP AIDS' features the word 'STOP' in a bold, red, sans-serif font above the word 'AIDS' in a bold, black, sans-serif font. A small red dot is positioned at the end of the 'S' in 'AIDS'.The logo for 'DHRP' features the letters 'DHRP' in a large, bold, dark blue, sans-serif font. To the left of the 'D' is a small icon consisting of a cluster of teal and white squares. Below 'DHRP' is the text 'Digital Health & Rights Project' in a smaller, teal, sans-serif font.

# Why is digital health important in Global Fund grant-making?

In the context of rapid global digitalisation, the Digital Health and Rights Project (DHRP) has documented the many key opportunities and risks that digital technologies and artificial intelligence can present for achieving good health and wellbeing.

[The DHRP's research](#), published in 2025, highlights key risks including digital exclusion, lack of data privacy, surveillance and censorship, and online abuse and harassment. It also emphasised the disproportionate impact of these risks for key populations and historically marginalised groups. As a result of the research, the DHRP sets out many key recommendations for global health and human rights stakeholders, including funders like the Global Fund.

Global Fund grants are a key priority for communities and civil society to conduct advocacy for digital health rights. Grant development processes are an opportunity to shape how digital health is funded, implemented and governed - an opportunity to make concrete changes in the way that your community experiences digital health.

The DHRP has been advocating to decision-makers at the Global Fund to include more content on digital health within guidance documents for GC8 and we are pleased to see an increase in interventions in this grant cycle, including recommendations of:

- **Data solutions to safeguard privacy and confidentiality of personal data and digital rights**
- **Strengthening laws & policies that advance digital rights**
- **Involving communities in the design of health information systems**
- **Use of apps, social media and websites to reach key populations for disease prevention and peer support**
- **'Know your Rights' training including on protection from online harm and safe access to online health services**
- **Digital platforms to counter mis-/dis-information**

We need your support to ensure that this guidance is included and implemented in GC8 proposals to support communities fulfil their digital rights.

# What are the upcoming processes relevant to Grant Cycle 8?

The Global Fund allocates funds to eligible countries each grant cycle through a specified process. The process begins with countries hosting consultations and planning at the country level to develop grant proposals. The Global Fund then conducts a technical review and approves grants to be included in the grant cycle. Countries then implement their grants, with continued monitoring and evaluation with the support of the Global Fund. The grant cycle does not happen at the same time for each country; there are different funding application 'windows' so it is important to check the timeline per country.

## The formal grant-making process for GC8

### 1. Allocation Letters

Countries receive letters detailing their allocation amounts and any conditions or guidance (scheduled to begin in March 2026).

### 2. Grant Development

Countries and implementers prepare and submit detailed funding requests in set 'windows' throughout 2026 (e.g., June, July and October 2026).

### 3. Grant Review (2026)

The Global Fund Technical Review Panel will assess grant applications and select which will receive funds.

### 4. Grant Implementation (2026-2028)

The Global Fund recognises the value of communities being meaningfully engaged throughout the grant-making. For example, the Global Fund's goals and mission outlined in the [Global Fund Strategy 2023-2028](#) commits to: "a stronger role and voice for communities living with and affected by the diseases, reinforcing this unique strength of the Global Fund and tackling barriers to effective participation and leadership, to put the most affected communities at the center of everything we do."

Alongside commitments to [human rights](#), there is a series of '**minimum expectations**' for community engagement during the grant cycle. This includes:

- ✓ **Funding Request and Allocation Letter:** A transparent and inclusive consultation process at the country level with populations most impacted by the three diseases during funding request and, at the Global Fund level, the development of an "Annex of Funding Priorities of Civil Society and Communities Most Affected by HIV, TB and Malaria";
- ✓ **Grant Making:** Community and civil society representatives on the CCM should have timely access to information on the status of grant negotiations and changes to the grant to support their involvement in oversight.
- ✓ **Grant Implementation:** Community and civil society representatives on the CCM should have timely access to information on program implementation.

# How can communities and civil society engage?

**Engagement opportunities** for civil society and communities in the grant cycle process include:

- 1. Engage with your Country Coordinating Mechanism (CCM) - the national body overseeing a country's Global Fund processes**
  - a. Formal engagement i.e. as a voting member, participate in country dialogue processes and in the consultation process for the Funding Priorities of Civil Societies and Communities Annex
  - b. Informal engagement, i.e. write a letter or ask for a meeting to share key recommendations during the grant development process
- 2. Advocate visibly**
  - a. Develop tools and resources, i.e. produce a civil society briefing on digital rights in GC8
  - b. Use these tools to share your key priorities on social media and with key contacts
  - c. Build networks with other communities and civil society in your country to advocate together
    - » The CCM has formal representatives from certain communities and civil society groups. Find out who these people or groups are and reach out to build connections and share your priorities with them.

## TOP TIP

### **Start your engagement early!**

Plan your engagement as soon as possible by ensuring you have contact details for your CCM representative(s) and details of when key engagement opportunities are scheduled.

### **Not sure how to engage - not in contact with your CCM or unsure how to find out how your country engages in grant-making?**

Reach out to Molly for assistance [molly-pj@stopaids.org.uk](mailto:molly-pj@stopaids.org.uk)

# What documents are relevant to Grant Cycle 8? What do they say about digital health?

The GF publishes materials to support applicants with funding requests for each grant cycle. For GC8 the relevant documents include:

## **Core Guidance**

This is essential reading for those participating in the grant development discussions or process. It includes information notes and technical guidance on different Global Fund priority topics that provide information on how the Global Fund defines that issue and its priorities, best practice considerations, useful links and more. The guidance on health systems, human rights, specific diseases and integration include aspects related to digital health, rights and governance.

## **Modular Framework**

This includes standard modules, interventions and performance indicators to support the development of funding requests to the Global Fund.

## **Community Annex**

This is developed by the community representatives to the Global Fund and is a list of their top 20 priorities for the Technical Review Panel and Global Fund Secretariat to review to ensure the priorities are reflected in the final grants.

We've pulled out specific references to the words 'digital', 'online' and 'technology' in a table below. A complete list is included as an annex (Annex 2). You can use these tables as guidance for what to include in your engagement with the GC8 process.

### CASE STUDY 1

#### **Advocating for Digital Rights in a Country Dialogue with your CCM**

"I want to raise the importance of digital rights. Our communities are not equipped with the knowledge and tools to safely and effectively use digital health technologies. In the Global Fund Technical Brief on 'Reducing human rights and gender related barriers to HIV, TB and malaria services' it says that digital literacy is essential. The Modular Framework also contains guidance on how to build capacity for digital health. I'd like to see digital literacy and empowerment included in Kenya's grant activities"

### CASE STUDY 2

#### **Writing to your CCM**

"I am writing on behalf of a group of young people living with HIV in Vietnam to share our key priorities for GC8. We contributed to research by the Digital Health and Rights Project that demonstrates that many key populations feel that their privacy is at risk in the digital transformation of health, leading to concerns of stigma and discrimination if their information is leaked. In the GC8 Core Guidance on HIV, the Global Fund shares the importance of ensuring the protection of personal data. We'd welcome a discussion with the CCM on how this can be integrated into Vietnam's grant development"

## Digital Rights Reference

## Source

### Page 5: Section 1.2 Planning for sustainable integration

*'Plan any digital or AI-related investments holistically across disease programs, digital health data systems, digital health services (e.g., CAD for TB, social media for HIV, TB and malaria prevention messaging), and relevant ministries and stakeholders such as Ministry of IT, Ministry of Energy, and cross-sector eGov initiatives.'*

[Core Guidance - Integration Information Note](#)

### Page 9: 'Health Product Considerations'

*'The use of new technologies, in particular digital technologies, should be accompanied by analysis of safety and security considerations such as the protection of personal user data'*

[Core Guidance - HIV Information Note](#)

### Page 25: Priorities for GF investments

*'Strengthen national digital data governance, ensuring that different health information systems are interoperable and integrated into one national health information system and that private sector data are integrated into national systems securely, respecting confidentiality and data protection standards'*

[Core Guidance - TB Information Note](#)

### Page 16:

*'The Global Fund encourages an integrated, multi-purpose digital platform for malaria campaigns as well as other campaigns and activities (e.g., seasonal malaria chemoprevention (SMC), vaccination, considering different levels of digital literacy and accessibility (by gender, disability, literacy levels and socioeconomic status), and informed by surveillance intelligence on achievements of coverage and equity'*

[Core Guidance - Malaria Information Note](#)

### Page 56:

*'Enable people living with and affected by HIV, TB and malaria to know their rights and the relevant policies and laws, and advocate for access to quality health care, through legal literacy ("Know Your Rights") community-level campaigns and sensitization, digital platforms and tools to counter misinformation and disinformation, strengthened integration into key and vulnerable populations programming as well as their safety and security, and GBV and sexual and reproductive health programming, including crises response mechanisms'*

[Core Guidance - Resilient and Sustainable Systems for Health and Pandemic Response and Preparedness Information Note](#)

**Page 7**

*'Promote and protect digital rights: safeguarding privacy and confidentiality, ensuring equitable and inclusive access to digital tools and information, combating misinformation, preventing and responding to online harm, and strengthening digital literacy are essential for fair and effective health responses'*

**Core Guidance - Reducing human rights and gender related barriers to HIV, TB and malaria services  
Technical brief**

**Page 9: Section 1.3 Governance and coordination**

*'Data governance and accountability frameworks ensuring data quality, interoperability, and ethical use across digital platforms'*

**Core Guidance - Procurement and supply chain management  
technical brief**

**Page 52: Improving laws, regulation and policies**

*'Advocacy for the development of laws and policies that uphold health-related digital rights, including protections for health-related data privacy, safeguards against online harassment and discrimination, and equitable access to digital platforms for information and services related to HIV, TB, and malaria'*

**Modular Framework**



## Annex 1

# Additional Resources

### On Digital Health and Rights

- » [Digital Health and Rights Project Report](#)
- » [Digital Health and Rights Project Global Policy Brief](#)
- » ['Putting People and Human Rights First in Digital Health': Checklist for implementers, funders, communities and civil society](#)
- » [Checklist For Assessing Gender, Equity and Rights Inclusion in Developing Digital Health Strategies](#)
- » [UNDP Guidance on the rights-based and ethical use of digital technologies in HIV and health programmes](#)
- » [WHO Ethics and Governance of Artificial Intelligence for Health](#)

### Guidance and resources for Global Fund Grant Cycles

- » [GNP+ guidance for Grant Cycle 7](#)
- » [Women for the Global Fund guidance for Grant Cycle 7](#)
- » [Harm Reduction Initiative guidance for Grant Cycle 7](#)
- » [Global Fund Community Engagement Toolbox](#)

## Table of all relevant references to digital health and rights in the GC8 guidance documents

Digital Rights Reference	Source
<p><b>Page 8: Section 3.3.1 Climate Resilient HIV Services</b></p> <p><i>'Develop and expand flexible HIV service delivery models to reach vulnerable populations (e.g. mobile clinics, community delivery points, adjusted HIV commodity provision and digital tools)'</i></p>	<p><b>Core Guidance - Climate and Health Technical Brief</b></p>
<p><b>Page 4: Introduction</b></p> <p><i>'Integrating health systems (human resources for health, health product management, laboratory systems, surveillance and data systems, digital, community systems and health financing) can result in cost and implementation efficiencies and support broader health outcomes and sustainability. It requires engaging with the relevant departments in the Ministries of Health and others such as Ministries of Finance, Ministries of Social Justice and Ministries of IT, and sustaining community leadership to address the needs of populations at risk of being left out'</i></p>	<p><b>Core Guidance - Integration Information Note</b></p>
<p><b>Page 5: Section 1.2 Planning for sustainable integration</b></p> <p><i>'Establish policy-level decisions that formally institutionalize integration...For example, HRH policies that enable the delivery of integrated services, or policies on data governance, data privacy, digital rights, digital health standards, and internet availability across all digital health systems'</i></p> <p><i>'Plan any digital or AI-related investments holistically across disease programs, digital health data systems, digital health services (e.g., CAD for TB, social media for HIV, TB and malaria prevention messaging), and relevant ministries and stakeholders such as Ministry of IT, Ministry of Energy, and cross-sector eGov initiatives. Digital investments can be a strong enabler of integration (e.g., common dashboards for health data and health products) and contribute to quality and efficiency'</i></p>	

## **Page 7: 1.3 Mitigating risks of integration**

*'Fragmented data systems and analytic platforms. In many settings, Health Information Systems or analytic/intelligence platforms remain fragmented by disease programs limiting the ability to deliver and monitor integrated service delivery and outcomes. Many settings lack interoperability functionality for sharing specific digital data back and forth across systems. For example, multiple patient-level or community-level data systems for specific diseases/programs, fragmentation between routine early warning surveillance and response monitoring systems, or between electronic medical record, lab and logistics digital data systems'*

- » *'Identify the existing needs to integrate data systems and/or analytic platforms across disease programs, PHC, and early warning surveillance. Prioritize and plan to address these according to national HIS and digital strategy, as well as ability to catalyze integrated service delivery, along with patient management, referral tracking, and follow up. Identify the existing needs for digital data system interoperability functionality. Prioritize and plan to address these according to national HIS and digital strategy, digital maturity levels, and reflecting business processes that enable longitudinal patient management, referral tracking, and follow up'*

*'Siloed planning and implementation of digital health services and systems; lack of interoperable digital systems. While digitization can be a strong efficiency measure, digital health services or systems planned in silos risk creating greater fragmentation or digital systems that are too burdensome to maintain. In addition, many settings lack interoperability functionality for sharing specific digital data back and forth across systems (e.g., between electronic medical record, lab and logistics digital data systems)'*

- » *'Plan and align digital health investments towards shared digital services (power & internet availability and maintenance, data access, hosting, standards, interoperability functionality, etc.), according to national digital strategies, architecture, and governance mechanisms. Prioritize a shared Digital Public Infrastructure approach across the Ministry of Health and across other ministries and eGov initiatives. Identify the existing needs for digital health data system interoperability functionality. Prioritize and plan to address these according to national HIS and digital strategies, digital maturity levels, and ability to catalyze longitudinal patient management, referral tracking, and follow up'*

## **Page 12-13: Section 2.2 Operational examples of integrating HIV, TB and malaria into essential healthcare services**

*'... Where possible, support interoperable patient and laboratory data systems, including shared medical records, with safeguards for data protection, informed consent, confidentiality and digital rights, in line with national standards and human rights obligations'*

*'Collaborative reporting (including data quality and data validation) while safeguarding data privacy, informed consent and digital rights to ensure accountability, non-discrimination and trusted data sharing between levels of service'*

*'Treat digital rights as critical in system design.... (including) Safeguard personally identifiable information with encryption and access controls; Involve communities in design and accountability'*

**Page 15: Health Information Systems and Strategic Data (see table in document for operationalised examples)**

*'Include all health information systems (HIS) systems and tools within national HIS, surveillance/M&E, digital strategies, and/or digital health (operational) roadmaps with emphasis on PHC'*

*'Strengthen workforce capacity in data use and digital literacy'*

*'Consolidate core data functions for public health action'*

*'Integrate and ensure interoperability of data systems'*

*'Strengthen national digital enterprise architecture'*

*'Treat digital rights as critical in system design'*

**Page 8:**

*'Align RSSH digital investments in HRH, including CHWs, surveillance, health information and laboratory systems to strengthen digitalized disease surveillance and programmatic response monitoring systems'*

**Core Guidance - HIV Information Note**

**Page 9: 'Health Product Considerations'**

*'The use of new technologies, in particular digital technologies, should be accompanied by analysis of safety and security considerations such as the protection of personal user data'*

**Page 12: Investments**

*'Applicants are also encouraged to use online outreach where relevant, including CBOs/CLOs online platforms, and to integrate digital security into online programming to protect the confidentiality and privacy of organizations and beneficiaries'*

**Page 13: Section 2. 2.1 HIV Prevention**

*'Service integration: Applicants are encouraged to leverage existing service delivery platforms, such as sexual and reproductive health, family planning, STI, adolescent health, maternal health and gender-based violence services for HIV prevention and testing access. Global Fund supports pharmacy-based delivery of HIV prevention commodities and other private sector delivery models such as direct-to-consumer models, informal outlets such as kiosks and vending machines, and online service delivery'*

### **Page 16: Prioritization Approaches**

*'Combine interpersonal and targeted communication campaigns, using online modalities for priority populations. Ensure HIV prevention programs and communications are people-centered'*

*'Consider online service delivery where feasible and appropriate'*

### **Page 20: Prioritization Approaches**

*'Integrate service delivery (including community-, home-, facility-, school- and sports-based approaches, digital platforms for information and referrals).<sup>26</sup> VMMC services can be an entry point to other health services for adolescent boys and men (e.g., sexual and reproductive health, noncommunicable diseases and mental health) and to integrate change interventions on harmful gender norms'*

### **Page 23: Differentiated HIV Testing**

*'New approaches, such as distribution of self-test kits via online platforms, virtual consultations and counselling, and outreach through social media platforms, offer further opportunities to reach the hard-to-reach'*

### **Page 39: Section 2.8 Strategic Information**

*'The Global Fund supports the use of data for strategic decision-making to ensure the selection of the right mix of interventions for the HIV response...Priority investments include maintaining or establishing digital HIS, ensuring routine data quality assurance, improvement planning and promoting optimized data analysis and use at national, district and health facility levels'*

### **Page 7:**

*'Align RSSH digital investments in HRH, including CHWs, surveillance, health information and laboratory systems to strengthen digitalized disease surveillance and programmatic response monitoring systems'*

### **Page 9:**

*'Ensure rapid drug-susceptibility testing (DST) of all people diagnosed with TB to guide appropriate treatment and ensure rapid turnaround times for test results and treatment initiation, including through use of digital tools'*

**Core Guidance - TB Information Note**

**Page 25:**

*'Ensure rapid drug-susceptibility testing (DST) of all people diagnosed with TB to guide appropriate treatment and ensure rapid turnaround times for test results and treatment initiation, including through use of digital tools'*

**Page 26:**

*'Along with new products, non-product innovations in TB care are foreseen, including in specimen collection and processing, integrated services and quality improvement throughout the care cascade, integrated treatment decision algorithms, digital community-led monitoring and innovative financing'*

**Page 25: Priorities for GF investments**

*'Strengthen national digital data governance, ensuring that different health information systems are interoperable and integrated into one national health information system and that private sector data are integrated into national systems securely, respecting confidentiality and data protection standards'*

**Page 6: Additional Considerations**

*'Align RSSH digital investments in HRH, including CHWs, surveillance, health information and laboratory systems to strengthen digitalized disease surveillance and programmatic response monitoring systems'*

**Core Guidance - Malaria  
Information Note****Page 16:**

*'The Global Fund encourages an integrated, multi-purpose digital platform for malaria campaigns as well as other campaigns and activities (e.g., seasonal malaria chemoprevention (SMC), vaccination, considering different levels of digital literacy and accessibility (by gender, disability, literacy levels and socioeconomic status), and informed by surveillance intelligence on achievements of coverage and equity'*

**Page 22-23: Surveillance, Monitoring and Evaluation**

*'Digitalize data collection where possible to support streamlined operations and timely use; consider different levels of digital literacy and digital equity, as applicable. Digitalization should be interoperable with the national health management information system (HMIS) (e.g., DHIS2) via open standards/application programming interfaces (API), and comply with data protection (role-based access, audit trails, privacy safeguards). Avoid standalone platforms'*

**Page 6**

*'Base investments in digital services and data systems on national digital strategies, where possible. These should be developed in an integrated, holistic manner across diseasespecific, PHC and health system strengthening domains. To ensure impact and efficiency, digital investments must also align with the country's national digital health (operational) roadmap, architecture, and maturity (e.g. the Global Digital Health Monitor). Where digital foundations such as policy, governance, infrastructure, or workforce are insufficient to support proposed digital activities across the funding request, countries are encouraged to consider support for these in their funding requests or other sources'*

**Page 20: Health Financing Systems**

*'Support digital PFM payment and other solutions leveraging financial digital public infrastructure to strengthen sub-national, last-mile service delivery, internal audit assessments, and the inclusion of Global Fund and other external grants in the national budget'*

**Page 21: Health Product Management Systems**

*'Prioritize development or revision of supply chain strategic plans, including digital health strategies where needed. Use data from recent supply chain assessments, including maturity assessments, to inform strategic planning. Prioritize aligned national supply chain strategies that accelerate and embed supply chain sustainability across core areas such as digitalization'*

**Page 34: Human Resources for Health (HRH) including Community Health Workers (CHWs)**

*'Approaches should seize opportunities for introducing and scaling up innovation through digital solutions. This can apply to CHWs as well: where CHW digital systems are being introduced and scaled for monitoring, this investment can be leveraged for continuous learning (e.g. through in-app learning as part of eCHIS platforms) through structured blended approaches, replacing ad-hoc refresher trainings, especially in settings with a relatively mature CHW program'*

**Page 38**

*'Leverage investments in eCHIS for continuous learning, ongoing supervision, digital security and rights, quality improvement and target, especially in settings with stronger program maturity'*

## **Page 46-49: Health Information Systems and Strategic Data**

*'Strengthen national health information systems (HIS) advancing digitization and digitalization'*

*'Results from the WHO Global Digital Health Monitor and DHIS2 Maturity Profiles can guide investments in health information systems and digital health. Most of these interventions are included under the Monitoring and Evaluation Systems Module in the modular framework. Related activities are also included in the Health Product Management, Health Financing and Laboratory Systems modules'*

*'Ensure availability of appropriate data collection and reporting tools in hybrid systems (paper/digital) for all sectors (public, private, community)'*

*'Support digital transformation strategies...Support implementation and maintenance of security solutions to keep data safe during collection, in transit, and in storage, to ensure privacy and confidentiality of health information and digital rights'*

*'For AI solutions, reference national AI and digital strategies, and global ethics and governance guidelines'*

## **Page 56:**

*'Enable people living with and affected by HIV, TB and malaria to know their rights and the relevant policies and laws, and advocate for access to quality health care, through legal literacy ("Know Your Rights") community-level campaigns and sensitization, digital platforms and tools to counter misinformation and disinformation, strengthened integration into key and vulnerable populations programming as well as their safety and security, and GBV and sexual and reproductive health programming, including crises response mechanisms'*

## **Page 3**

*'Legal empowerment programs should begin with legal literacy to help people understand their right to health, non-discrimination, privacy and freedom from violence, including in digital spaces'*

## **Page 7**

*'Promote and protect digital rights: safeguarding privacy and confidentiality, ensuring equitable and inclusive access to digital tools and information, combating misinformation, preventing and responding to online harm, and strengthening digital literacy are essential for fair and effective health responses'*

**Core Guidance - Reducing human rights and gender related barriers to HIV, TB and malaria services Technical brief**

## **Page 12: Reforming laws and policies that create barriers**

*'Advancing digital rights and equitable access to scientific innovations is also an important catalyst for extending accessible healthcare to all'*

## **Page 15:**

*'Legal empowerment programs should begin with legal literacy to help people understand their right to health, non-discrimination, privacy and freedom from violence, including in digital spaces. People who know these rights can, for example, demand access to services, push back against police harassment, advocate for affordable medicines, or protection from gender-based violence, including sexual exploitation, abuse and harassment. Legal literacy is most effective when integrated into HIV, TB and malaria programs, for example, offering accessible and contextualized "Know your rights" information at harm reduction sites, in community-based TB programs or through malaria prevention campaigns'*

## **Page 6: Section 5 Information Systems**

*'Strengthening compliance with data standards and improving interoperability will unlock the full potential of digital systems for track-and-trace, inventory visibility, and real-time decision-making. Enhanced information systems will support transparency and efficiency across the supply chain'*

**Core Guidance - Procurement and supply chain management technical brief**

## **Page 9: Section 1.3 Governance and coordination**

*'Data governance and accountability frameworks ensuring data quality, interoperability, and ethical use across digital platforms'*

## **Page 16: Section 4.2 Strengthening national regulatory systems**

*'Promote operational efficiency by adopting risk-based approaches and digital solutions'*

*'Leverage existing global and regional digital platforms and systems to improve efficiency, avoid duplication and ensure interoperability'*

**Page 52: Improving laws, regulation and policies**

*'Advocacy for the development of laws and policies that uphold health-related digital rights, including protections for health-related data privacy, safeguards against online harassment and discrimination, and equitable access to digital platforms for information and services related to HIV, TB, and malaria'*

**Page 65: HIV Prevention**

*'Activities related to sexual health education for AGYW and adolescent boys and young men (ABYM) in moderate and high HIV incidence locations where not funded through the educational sector. For example: Digital sexual education using apps, websites and social media'*

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