United Nations Entity for Gender Equality and the Empowerment of Women (UN WOMEN)

2022 Organizational report
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HIV in UN WOMEN’s mandate

As a UNAIDS Cosponsor, UN Women supports the governance of the HIV response by:

- ensuring that national HIV policies, strategies and budgets are informed by sex- and age-disaggregated data and gender analysis;
- scaling up what works to tackle the root causes of inequality, including through mainstreaming HIV in efforts to end violence against women and promote women’s economic empowerment; and
- supporting the leadership of women and girls in all their diversity, particularly women living with HIV, to meaningfully engage in decision-making at all levels in HIV responses.

Key UN Women strategy for HIV

The UN Women Strategic Plan (2022–2025) sets out how UN Women will leverage its unique triple mandate—encompassing normative support, UN system coordination and operational activities—to mobilize urgent and sustained action to achieve gender equality and the empowerment of all women and girls in the context of HIV and support the achievement of the 2030 Agenda for Sustainable Development, including SDG 3. The UN Women Strategic Plan prioritizes this critical work through HIV-dedicated indicators and inclusion of HIV as one of the five “leave-no-one-behind” subcategories of programmatic disaggregation.

Top results in 2022

Global norms and standards setting on gender equality and HIV supported. UN Women continued to provide support to Member States to adopt and implement global norms and standards on gender equality and women’s empowerment in the context of HIV. UN Women’s policy support to the Southern African Development Community in preparation for the 66th session of the Commission on the Status of Women resulted in the unanimous re-affirmation of the 2016 CSW 60/2 resolution on women, the girl child and HIV and AIDS by Member States. The resolution reasserts the Beijing Declaration and Platform for Action and calls for accelerated efforts to address women's and girls' vulnerabilities in the context of HIV. To support implementation of the resolution, the Southern African Development Community, with policy support from UN Women, adopted the gender responsive oversight model—a regional framework and programme of action to monitor and oversee implementation. The model prioritizes tracking efforts to address the root causes of adolescent girls’ and young women's vulnerability to HIV. It was adapted by Angola, Lesotho, Malawi, Namibia and Zimbabwe to enhance government accountability.
Gender-responsive HIV policies and institutions promoted. UN Women strengthened gender equality expertise among AIDS coordinating bodies and HIV programmes across 26 countries.\(^1\) This has resulted in identifying persisting inequalities that affect the progress and integration of gender equality issues in national HIV strategies and plans, along with appropriate budgetary allocations, and tracking progress and outcomes with gender-responsive indicators. UN Women-supported gender assessments of the HIV response in Uganda and the United Republic of Tanzania have informed national planning and budgeting. Following the gender assessment, the Tanzania Commission for AIDS included actions to transform unequal gender norms and to prevent gender-based violence and discrimination against women in its next multisectoral strategic framework for HIV. The new HIV prevention strategy in Uganda prioritizes and resources actions to prevent new HIV infections among adolescent girls and young women.

Support provided for repealing discriminatory HIV-related laws and practices. UN Women worked with women’s organizations and networks of women living with HIV in Indonesia, Malawi, Papua New Guinea, Uganda and Viet Nam towards repealing discriminatory HIV-related laws. In Zimbabwe, organizations of women living with HIV and other partners successfully advocated with the national parliament to repeal section 79 of the country’s criminal code, which had criminalized HIV transmission. In Indonesia, the national network of women living with HIV participated in the development of the first-ever sexual violence crimes law which now acknowledges forced sterilization of women living with HIV as a form of violence and lays out measures to address the issue.

Unequal gender norms to prevent violence against women and HIV transformed to and accelerate progress towards the UNAIDS 95–95–95 targets. In 2022, UN Women scaled up evidence-based interventions across 17 countries\(^2\) to transform unequal gender norms in order to prevent violence against women and prevent HIV infections. As part of implementation of the EU/UN Spotlight Initiative, UN Women scaled up the implementation of the SASA! community-based initiative in Uganda and Zimbabwe to prevent HIV and violence against women. In Zimbabwe, UN Women invested in strengthening the capacity of the Ministry of Women Affairs, the National AIDS Council and several HIV and women’s rights organizations to continue implementation of the SASA! approach\(^3\) across multiple districts. UN Women’s “HeForShe” community-based initiative in Malawi, South Africa and Zimbabwe transformed harmful social and gender norms. In Malawi, over 1,500 men and boys were trained as "HeForShe" change agents, engaging in dialogues with community members across four districts to shift attitudes and behaviours, prevent violence against women and prevent HIV, and improve men’s health-seeking behaviours.

Women’s equitable access to services, goods, and resources promoted. Across 16 countries,\(^4\) UN Women worked towards ensuring that no women and girls are left behind in

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\(^1\) Central African Republic, Côte D’Ivoire, Democratic Republic of Congo, El Salvador, Ethiopia, Indonesia, Jamaica, Kenya, Kyrgyzstan, Lesotho, Liberia, Malawi, Namibia, Nepal, Nigeria, Papua New Guinea, Rwanda, Senegal, Sierra Leone, South Africa, South Sudan, Tajikistan, Uganda, United Republic of Tanzania, Viet Nam and Zimbabwe.

\(^2\) Botswana, Burundi, Cameroon, eSwatini, Ghana, Haiti, Kyrgyzstan, Lesotho, Liberia, Malawi, Morocco, Mozambique, Sierra Leone, South Africa, South Sudan, Uganda and Zimbabwe.

\(^3\) SASA! is a community mobilization approach developed by Raising Voices for preventing violence against women and HIV by addressing imbalance of power between men and women, boys and girls.

\(^4\) Cambodia, Cameroon, China, Côte D’Ivoire, Indonesia, Haiti, Malawi, Liberia, Nepal, Nigeria, Papua New Guinea, Senegal, Uganda, Ukraine, Viet Nam and Zimbabwe.
the HIV response by strengthening access to HIV information, testing, treatment and care, and gender-based violence services for women living with and affected by HIV and those in key populations. Based on UN Women’s *Essential services package for women and girls subject to violence*, the national network of women living with HIV in Indonesia developed and further improved an app, “DeLiLa” (“Listen, Protect, Report”), in collaboration with the Ministry of Women’s Empowerment and Child Protection and other partners involved in the response to violence against women. The app enables women facing violence to access peer legal and psychosocial counselling and to be referred to health services and the police. The network also successfully contributed to the special operating procedures implemented by the Ministry of Health to help promote their responsiveness to the needs and priorities of women living with and affected by HIV.

**Women’s voice, leadership and agency in the HIV response amplified.** Through the "Investing in adolescent girls and young women’s leadership and voice in the HIV response programme, funded by the United States President’s Emergency Plan for AIDS Relief" (PEPFAR), UN Women built feminist leadership skills of 185 young women in 15 sub-Saharan African countries, pairing young women in mentoring relationships with established women leaders. At the end of 2022, UN Women convened a high-level meeting on championing the priorities of women and girls in the HIV response, in partnership with PEPAR, the UNAIDS Secretariat, the African Women Leaders Network and the Government of the United Republic of Tanzania. At the meeting, Ministers of Health and Gender, representatives of National AIDS Commissions, and young women leaders addressed young women’s disproportionate burden of HIV. The meeting resulted in a set of recommendations, and UN Women’s Executive Director launched a multisectoral, cross-country, intergenerational collective to address the increasing rates of HIV among adolescent girls and young women in sub-Saharan Africa.

**Catalytic support provided for organizing and mobilizing of women living with HIV.** Investing in institutional capacities of the networks of women living with HIV remained at the heart of UN Women’s support in Cambodia, El Salvador, Nepal, Nigeria, Papua New Guinea, Senegal, Viet Nam and Zimbabwe. Thanks to technical and financial support from UN Women, the Association of Women Living with HIV in Nigeria successfully developed and adopted its new strategic plan and engaged in the final review of the national HIV strategic framework. The UN Trust Fund to End Violence Against Women, managed by UN Women, awarded US$ 2.5 million in grants to local and grassroots women’s organizations that work directly with women living with HIV, women who use drugs, and sex workers, empowering them to demand access to nondiscriminatory legal aid, HIV care and support and other health services.