
2014 UBRAF thematic report

Supporting women and girls

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ACHIEVEMENTS

The Joint United Nations Programme on HIV/AIDS (UNAIDS) has made significant contributions to addressing the gender dimensions of AIDS epidemics, including:

- improving the integration of gender equality and human rights into national HIV strategies and plans (NSPs);
- strengthening human rights and policy frameworks in support of women's rights, especially for women living with HIV and women from key populations; and
- supporting greater leadership by women living with HIV and their meaningful participation in broader health and development initiatives (which result in enhanced HIV and gender policies).

Gender-responsive HIV policies

Enhanced technical guidance and tools developed by UNAIDS and other partners have strengthened national HIV strategies and concept notes for the Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund) by increasing the attention that is paid to gender equality, women, adolescents and girls, and key populations.

Used by more than 20 countries, the Gender Assessment Tool was developed to allow governments and civil society organizations (CSOs) identify strategic information gaps in age- and sex-disaggregated data and HIV service coverage, while also taking into account the effect of HIV on women and girls.

A technical working group established by the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women) and co-convened with the Global Fund—with participation by the United Nations Development Programme (UNDP), the United Nations Population Fund (UNFPA), the World Health Organization (WHO), donors and CSOs—commissioned and disseminated a menu of evidence-informed interventions on gender-transformative programming. This was done to support and contribute to Global Fund concept notes and other grant materials. The United Nations Children's Fund (UNICEF), UNFPA and UNAIDS Secretariat also signed memoranda of understanding with the Global Fund to support joint programming. UNICEF engagement resulted in integration of HIV, maternal and newborn health areas into 19 concept notes submitted to the Global Fund. The UNDP Gender Checklist was used as a tool for training on gender integration for national dialogues (Zambia), Country Coordinating Mechanisms (Pakistan) and concept notes (Kyrgyzstan).

The United Nations Office on Drugs and Crime (UNODC), UN Women and WHO's policy brief Women who inject drugs and HIV: addressing specific needs was instrumental in advocating for the incorporation of specific actions into NSPs in eastern Europe and central Asia (EECA).

Adolescent girls and young women

UNICEF, UNFPA, UN Women and other Cosponsors supported national partners in the following activities:

- produce data examining the social vulnerability of adolescents and young women. This was done to better address their needs through youth-friendly, integrated HIV-SRH services in HIV prevention strategies and new NSPs in Cambodia, Kenya and Mozambique;
- ensuring the use of strategic information on young people and key populations in Namibia; and
- supporting optimal coverage of sexual reproductive health and HIV programmes for in- and out-of-school adolescents and young people in order to address high HIV prevalence rates among pregnant girls (aged 14–24) in Uganda.

An initiative in East and southern Africa by the International Labour Organization (ILO), the UNAIDS Secretariat and South African Development Community empowered young women and girls in the informal economy by integrating entrepreneurial skills and economic enhancements (including access to loans) into HIV services. In Zambia, the percentage of young women who used a condom during last sex increased from 37% to 53%, and the percentage who accessed HIV services increased from 76% to 89%. Overall, there was a 72% increase in average profits among these women and a 58% increase in expenditure on education. Such outcomes provide concrete evidence of how addressing the socioeconomic determinants of HIV can reduce the vulnerability of young women. UNDP supported similar initiatives in Djibouti and Egypt.

Strengthened legal environment for gender equality and human rights

The UNDP, UN Women, WHO and the UNAIDS Secretariat supported countries in the review and revision of laws, policies or guidelines that hinder effective HIV responses. Legal analyses and reform efforts highlighted the relationship between HIV vulnerability and harmful cultural and gender norms, and they focused on removing discriminatory provisions and affording greater protection to women and key populations in personal status laws, domestic violence and sexual offences acts, social protection policies and HIV decriminalization laws. UNDP, UNFPA, UN Women and the UNAIDS Secretariat also continued to work with traditional leaders and decision-makers to safeguard property and inheritance rights of women living with HIV. For example, following a legal assessment in Malawi, the seven Paramount Chiefs committed to a Chiefs' Declaration that included a commitment to raise the age of marriage for girls.

Championing women's leadership and participation

Women and girls, especially those living with HIV or those who are from key populations, are important partners in the advocacy, development, implementation and monitoring and evaluation of gender-responsive HIV programmes. In more than 30 countries, efforts by the UNAIDS family has focused on strengthening the capacity of women living with HIV and their networks so that they can engage in different policy reviews and NSP

development. For example, the International Conference on Population Development (ICPD), Beijing+20 regional reviews and the International AIDS Conference resulted in recommendations that included the HIV-related needs and priorities of women and girls.

UNDP, UN Women and the UNAIDS Secretariat helped women living with HIV networks to participate in Committee on the Elimination of Discrimination Against Women (CEDAW) reporting processes and to connect with other women's organizations in order to shape a more inclusive human rights and gender equality agenda for post-2015.

UNAIDS also supported women living with HIV (including young women) to participate in the 58th session of the Commission on the Status of Women, including in the negotiations on the HIV Resolution and agreed conclusions.

MAJOR CHALLENGES AND HOW THESE WERE ADDRESSED

The lack of sex- and age-disaggregated data and evidence linking HIV, sexually transmitted infections (STIs) and gender equality continues to undermine target-setting, development, implementation and financing of gender-responsive policies and programmes. It also hinders the identification of gaps in services.

Despite progress in addressing gender equality and the empowerment of women and girls, there are still challenges in responding to sexual and reproductive health and rights, and to the rights of women in key populations.

Harmful practices and discriminatory laws and policies continue to have a negative impact on women and girls. Moreover, policies and plans still fail to comprehensively address the full diversity of women and girls living with and affected by HIV. Stigma and discrimination—including on the basis of age, sexual orientation, gender identity, sex work and drug use—continue to hamper HIV responses.

National HIV responses continue to reflect gender biases in policies, programmes, institutions and budgets to some extent. These trends must be reversed in order to ensure equal access and benefit for women, men, girls, boys and transgender people. This can be achieved through sustained investment in research and evidence on social and structural drivers, as well as political advocacy and improved technical knowledge.

Long-term investment and support is needed to facilitate the increased and meaningful leadership of women living with HIV and their networks as key participants in HIV responses. This includes supporting their organizational capacities, building alliances and mobilizing constituencies.

Conceptual clarity and the application of evidence-based programming aimed at promoting more equitable power relations between women and men with respect to sexual and reproductive decisions is needed. Evidence shows that this requires working with men and women—and with communities more broadly—while ensuring that all work on HIV

prevention with men and boys addresses harmful masculinities as an integral part of programming.

Limited resources to scale up innovative interventions for adolescents and young people (particularly girls and young women)—as well as a lack of youth-friendly, non-judgmental sexual reproductive health services and information—hinders efforts to reduce HIV infections, STIs and unwanted pregnancies.

Programming to address HIV prevention, treatment, care and support for women and girls often is considered to be in competition with (rather than linked and related to) programming and support for key populations. Key populations, however, include women and girls, so a gender equality perspective increases the understanding of the needs of women, men, girls, boys and transgender people, whether they are sex workers, intimate partners of sex workers, men or women who inject drugs, LGBT, or female partners of men who have sex with men.

KEY FUTURE INTERVENTIONS

- Conduct an end review of the UNAIDS Agenda for accelerated country action for women and girls to highlight results and lessons learned and to shape the UNAIDS Strategy 2016–2021. This includes integrating gender equality across all outcomes.
- Map and review the global and regional strategies and initiatives relevant to gender equality dimensions of HIV (for example, the Updated Global Strategy for Women and Children’s Health, FP2020 and UNiTE) and develop (or better utilize) existing frameworks and mechanisms for coordination.
- Continue to highlight and document the gender equality and human rights gaps in the HIV response, including rights violations against women who are living with and affected by HIV.
- Focus on strengthening the integration of HIV and sexual reproductive health and rights in global dialogues and political processes, including the new Sustainable Development Goals and the UNAIDS Fast-Track Initiative.
- Continue to advocate for and promote the engagement of women’s groups, grass-roots organizations, organizations of women living with HIV and key populations in designing, implementing, monitoring and evaluating HIV policies and programmes. Undertake the second global review of women’s engagement and participation as leaders in the AIDS response. Advocate for the use of a gender-transformative approach within AIDS responses, as well as in processes shaping global development and health agendas.
- Establish and enhance multisectoral partnerships with regional political platforms,

research institutions, nongovernmental organizations, faith-based leaders, women's organizations (including networks of women living with and affected by HIV) to highlight linkages between HIV and gender equality.

- Strengthen the understanding of gender-sensitive monitoring and evaluation of HIV programmes among national stakeholders, and support harmonized data collection by building capacity in the collection and using harmonized gender equality and HIV/AIDS indicators.
- Evaluate the experience of conducting gender assessments of HIV NSPs and continue conducting gender assessments, building on lessons from the evaluation. Develop guidance on gender-responsive budgeting for the HIV response as a part of efforts towards supporting greater resource allocation for gender equality in HIV NSPs.
- Expand strategies to engage men and boys in support of gender equality, empowerment of women and elimination of all forms of violence. Review evidence on what works to scale up their engagement.

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