UBRAF thematic report: supporting women and girls

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Results

The UNAIDS Agenda for Accelerated Country Action for Women, Girls, Gender Equality and HIV ('The Agenda for Women and Girls') includes strategic actions addressing the rights and needs of women and girls across epidemics. A 2012 external mid-term review of the agenda improved knowledge of country accomplishments, gaps, challenges in implementation and priorities for moving forward. It provided the basis for stronger technical and financial support, including a monitoring and evaluation framework for the final agenda review. Implementing the agenda is primarily captured within UBRAF outcomes C3 (HIV-specific needs of women and girls are addressed in at least half of all national HIV responses) and C4 (zero tolerance for gender-based violence). However, the Joint Programme is working across the UBRAF towards a gender-transformative response to HIV.

Gender and HIV-related actions were supported in many countries. Examples include:

- increased antiretroviral therapy (ART) coverage among breastfeeding women (WHO);

- policy and legislative reviews and assessments (UNDP, ILO, WFP, UN Women, WHO, UNFPA);

- linked economic empowerment and HIV prevention programming (UNDP, World Bank, ILO); and

- support to national authorities to address the gender dimensions of HIV (all Cosponsors and the UNAIDS Secretariat).

Joint UN Teams provided technical support and training to integrate gender into national strategic plans (NSPs) in Lesotho, Rwanda, Swaziland, and the United Republic of Tanzania. Eight countries in West and Central Africa (WCA) received similar support. This resulted in NSPs with specific targets and costed programmes for women and girls, and men and boys, with clear indicators. In 2013, a World Bank health initiative in Tajikistan improved the coverage and quality of rural primary health-care services by focusing on gender-specific health needs. The Joint Programme engaged with several broader gender and health initiatives, such as *Together for Girls, Every Woman Every Child*, and *Adolescent Girls Initiative*, and the *International Conference on Population Development (ICPD) Beyond 2014 review*. This review aimed to identify progress and achievements towards the goals set out at the conference when 179 governments committed to a 20-year programme of action to deliver human rights-based development through attainment of gender equality, empowerment of women, education, and sexual and reproductive health.

1) Knowing your epidemic

The Joint Programme worked at all levels to scale up action for women, girls and gender equality in national HIV responses, including through stand-alone and integrated programming. To support implementation at country level, a complementary set of tools was developed, including: a gender/HIV assessment tool (UNAIDS Secretariat); a checklist for integrating gender into Global Fund processes and a roadmap for integrating gender into national HIV strategies and plans (UNDP); a programming tool for addressing violence against women in the context of the HIV epidemic (WHO and the UNAIDS Secretariat); a guide on gender-responsive HIV services for women who use drugs (UNODC); a compendium of gender equality and HIV and AIDS indicators (UN Women); a compendium of sexual and reproductive health and rights (SRHR) and HIV Linkages Indicators (UNFPA/WHO/IPPF and partners); and a Job Aid for EMTCT (UNFPA, IPPF, WHO, UNICEF, IATT ETMCT). The mid-term review's joint country survey showed 90% of the 80 countries that launched the agenda acted to understand their epidemic and context, which will help strengthen the

HIV response to better meet the needs of women and girls.

2) Linkages between sexual and reproductive health and rights and HIV strengthened

A strong focus from UNAIDS and its partners resulted in strengthened links between SRHR and HIV, including this linked agenda being robustly integrated into laws and policies, health systems, education, and service delivery. Twenty-one countries reviewed and mapped national policies to incorporate SRHR/HIV linkages, and 12 undertook rapid assessments of SRH and HIV linkages at the policy, systems, and service delivery levels. The mid-term review found 79% of countries surveyed had integrated HIV and SRH services, using various models. A compendium of SRHR and HIV linkages indicators was developed that captures progress and identifies opportunities for improvement, including two integrated service delivery indictors that were successfully piloted in seven countries. The integration indicators measure which SRH and HIV services are combined, and how other indicators in the compendium capture information on intimate partner violence and wider structural determinants of vulnerability and risk. Thirteen countries in Africa participated in a workshop on models of integrated service delivery in the context of the Global Plan hosted by UNFPA, WHO, UNICEF, EGPAF, UNAIDS, and other Interagency Task Team partners.

3) Women living with HIV more meaningfully involved in response

Building on the support provided to 60 countries in 2010–2011, UNDP, UN Women and UNAIDS strengthened the leadership capacity of women and girls living with HIV and key populations through programmes in Belize, Bolivia, Honduras, Grenada, Guyana, Nicaragua, Panama and Peru. Other work included support to a collaborative civil society platform, UNZIP the lips, which provided political space for women living with HIV at the Women Deliver Conference in Kuala Lumpur in May 2013, and successfully influenced the outcomes at the Asia-Pacific High-level Intergovernmental Meeting convened in Bangkok in February 2012, which endorsed a regional framework for action, *The ESCAP roadmap to 2015*, to support regional implementation of the 2011 Political Declaration on HIV/AIDS. In Europe and Central Asia, the UNAIDS family helped establish the Eurasian Women's Network on AIDS (EWNA), comprising Georgia, Kazakhstan, Russia, Tajikistan and Ukraine, with networks from Armenia, Belarus, Estonia and Uzbekistan also expressing an interest. Seven regional dialogues organized by UNHCR led to guidance on enabling women, including women living with hIV, to participate in community decision-making. The UNAIDS Secretariat and UNFPA supported ICW and GNP+ to attend key policy-making events, and undertake research on the experiences of women living with HIV in receiving elimination of mother-to-child transmission of HIV (EMTCT) services.

Global Fund Country Coordinating Mechanism engages with civil society organizations: The Joint Programme strengthened policy engagement with the Global Fund to promote gender being integrated into its policies, strategies, governance mechanisms and programmes. For example, through intensive lobbying to promote the Global Fund's Gender Equality Strategy, reform of the Global Fund Country Coordinating Mechanism (CCM) in China stipulated that one of three civil society organizations (CSOs) on the CCM board must represent women living with and affected by HIV. In the past, the CCM had only one CSO seat.

Enhancing human rights: The Joint Programme supported 84 countries to include strategic action on HIV in women's human rights frameworks as part of follow-up activities to the Global

Commission on HIV and the Law. UNDP worked with the Huairou Commission,[1] the Open Society Foundations[2] and the Centre on Housing Rights and Evictions (COHRE) to advance women's property and inheritance rights. Organizations in Cameroon, Uganda and Zambia piloted *Tools for Change*, an easy-to-use human rights tool for advocates working on women's housing, land and property rights in the context of HIV. UN Women supported community groups in Cameroon, Ghana, Kenya, Malawi, Nigeria, Rwanda, Uganda, the United Republic of Tanzania and Zimbabwe on these issues, increasing awareness among 3000 duty bearers and 20 000 community members, and improving the knowledge and skills of 250 community justice and legal service providers. UNFPA supported capacity strengthening of community-led organizations to address the HIV and SRHR needs of sex workers in 29 of UNAIDS' 38 high impact countries. A tool on Implementing Comprehensive HIV/STI Programmes with Sex Workers: Practical Approaches from Collaborative Interventions (SWIT) was published in 2013 by WHO, UNFPA, UNAIDS, NSWP, and the World Bank.

Comprehensive sexuality education (CSE): An initiative in Eastern and Southern Africa (ESA) increased young people's knowledge of sexual and reproductive health and rights, through access to high quality, gender-transformative, evidence-informed, and age and culturally appropriate comprehensive sexuality education. By the end of the biennium, political commitment to scale up such education and increase access to sexual and reproductive health services for young people had been secured in 20 countries, with curriculum developers in 20 ESA countries trained to develop comprehensive sexuality education and gender-transformative curricula.

Constraints, challenges and lessons learned

Women and girls remain under-represented in HIV policies, programmes and resource allocation. HIV is not consistently prioritized in gender action plans, nor is gender equality reliably highlighted in HIV responses. Exacerbating this, programmes for key populations often operate in isolation from those for women and girls, and neither routinely addresses the full diversity of women and girls. Related issues, such as gender-based violence, sex work, sexual diversity and drug use, are considered too sensitive to address, resulting in a lack of action. Stakeholders, especially women living with HIV, have emphasized the lack of commitment and inadequate funding as two of the most significant barriers to implementing the Agenda for Women and Girls. Despite the fact that 90% of countries that launched the Agenda for Women and Girls took action to understand their epidemic from a gender perspective, there are budgeting gaps and insufficient participation of women and girls, including those in key populations, which continue to present challenges.

Countries might have expanded data collection but only a few systematically conduct gender analyses. As a result of failures to prioritize gender equality, weak relationships among stakeholders, lack of clarity on roles and responsibilities, and staff changes within government and the UN, coordination remains a major barrier at all levels. Monitoring and reporting on the Agenda for Women and Girls' performance need to be strengthened, particularly tracking country-level progress and capturing and sharing good practices and knowledge. Women living with and affected by HIV in all their diversity must be engaged more meaningfully.

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[1] New York City-based global coalition of women supporting grassroots women's organizations to enhance their community development practices.
[2] Open Society Foundations, based in New York, work to build vibrant and tolerant societies whose governments are accountable and open to the participation of all people.

The mid-term review identified common characteristics of countries that have achieved better agenda results: strong political commitment from government, an active civil society, sizeable financial resources and strong support from UNAIDS, including strategic information, advocacy and partnership building.

Countries that have not already advanced significantly tend to benefit more from the agenda than those that have addressed gender equality in their HIV response, or already significantly addressed HIV in their gender equality plans. However, more effort is needed. The mid-term review indicated that ministries for gender and women's affairs are still not consistently engaged and supported as part of the HIV response.

The mid-term review showed a complex relationship between technical support and implementing the agenda. Technical support generally meets quality standards but fails to consistently produce results. UN agencies' technical support is generally considered to be of good quality, even if country-level coordination is insufficient. There is a gap in providing legal support generally, as well as in technical support focused on gender-transformative national strategic planning and resource mobilization.

Key future interventions

The Inter-Agency Working Group (IAWG) on women, girls, gender equality and HIV developed complementary tools and is coordinating their use. During a recent meeting organized by UN Women and the Global Fund, participants from several UN agencies and partners mapped out plans for using these tools in the 2014 roll-out of the Global Fund's new funding model. Lessons from the experience will strengthen future technical support to countries on matters relating to women, girls and gender equality. In line with the mid-term review and Programme Coordinating Board (PCB) decision points, the IAWG identified strategic priorities for the 2013–2015 period:

- Integrate gender analysis and action into the country roll-out of strategic investment approaches, supporting a gender analysis of investment approaches.

- Finalize and roll out the integrated package of tools to support gender transformative planning/implementation, assessment and indicators, with support from technical support facilities, including support for the roll-out of the new funding model.

- Strengthen the evidence base and normative guidance on gender-based violence (GBV) and HIV, and accelerate country support for GBV, including in emergency situations, drawing upon investment approaches.

- Promote better coordination at national, regional and global level, including to:
  a. strengthen the gender and HIV capacity of Joint Teams by establishing regional communities of practice, for example;
  b. improve global-level coordination, including through expanded UN/civil society partnerships;
  c. increase political commitment at national, regional and global levels through high-level advocacy and by mobilizing high-level political champions.

- Support resource mobilization for networks of women living with HIV and women's organizations working on the gender equality dimensions of HIV.

- Continue to support countries to strengthen policy and programmatic linkages between HIV and sexual and reproductive health (SRH) and between GBV and HIV.

- Strengthen links between programming for women and girls living with HIV and for key populations.

- Advocate removing discriminatory laws, and reducing stigma and discrimination against women living with and affected by HIV and key populations.

Supporting documents

- IAWG, UNFPA, WHO, IPPF, 2012, *Connecting Sexual and Reproductive Health and HIV: navigating the work in progress* www.srhhivlinkages.org

- UNAIDS, 2012. *Women Out Loud: How Women Living with HIV Will Help the World End AIDS* http://www.unaids.org/en/media/unaids/contentassets/documents/unaidspublication/2012/201212 11_Women_Out_Loud_en.pdf

- UNDP, ILO, IOM and SAIEA, 2012, *Guidelines for Integrating HIV and Gender-related Issues into Environmental Assessment in Eastern and Southern Africa* http://www.undp.org/content/dam/undp/library/hivaids/English/Guidelines_for_Integrating_HIV_ and_Gender_related_Issues_into_Environmental_Assessment_in_Eastern_and_Southern_Africa. pdf

- UNDP 2013, *Checklist for integrating gender into the New Funding Model of the Global Fund to Fight AIDS, TB and Malaria* http://www.undp.org/content/undp/en/home/librarypage/hiv-aids/checklist-for-integrating-gender-into-the-new-funding-model-of-t/

- UN Women multi-media microsite – *Promoting Women's Property and Inheritance Rights in the Context of HIV and AIDS in sub-Saharan Africa* http://www.genderandaids.org/wpir

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