

UNAIDS 2020

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# **SRA 5: Gender inequalities and gender-based violence**

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SRA report 2018-2019



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## SRA 5: GENDER INEQUALITIES AND GENDER-BASED VIOLENCE

**Fast-Track commitment:** Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020

**SRA 5:** Women and men practice and promote healthy gender norms and work together to end gender-based, sexual and intimate-partner violence to mitigate risk and impact of HIV.

### Global overview

Globally, more than half of the people living with HIV are women and girls. In 2018, 18.8 million women aged 15 and older were living with HIV, compared with 17.4 million men. Since 2010, HIV treatment coverage among women and men has more than doubled but it continues to be higher among women than men (68% versus 55%), largely due to successful programmes focused on prevention of mother-to-child transmission of HIV. Despite the increased availability of ARV medicines, HIV-related illnesses remain a leading cause of death among young women of reproductive age (15–24 years) globally.

Between 2010 and 2018, the number of new HIV infections among women aged 15 years and older declined by 17% globally, from 890 000 to 740 000. Among young women aged 15–24 years, new infections declined by 25% over the same period. However, new infections among women are increasing in eastern Europe and central Asia, the Middle East and North Africa, and Latin America.

Adolescent girls and young women continue bear a disproportionate burden of HIV in sub-Saharan Africa. Progress in HIV prevention among women and girls is undermined by many of the same root factors that drive the HIV epidemic, including unequal gender norms, violence against women, gender-based discrimination and institutional biases. Knowledge on HIV prevention among adolescent girls and young women has remained alarmingly low in the last two decades.

## Joint Programme contributions towards Fast-Track and UBRAF targets

### *Integrating gender equality into national HIV responses*

About two-thirds of countries (68% in 2019) report having integrated gender equality and transformation of unequal gender norms in their national policies and strategies. However, implementation lags and data on costing and financing gender-transformative interventions in the national HIV response remains scarce. More nuanced UBRAF indicators are needed to measure and capture the progress around gender-responsive efforts, particularly what relates to changing unequal gender norms.

Legend *					
	Meets or exceeds 2019 milestone*		Is equal to or greater than 50% of 2019 milestone		Does not meet the milestone (less than 50% of milestone)

Indicator 5.1: Percentage of countries with national HIV policies and strategies that promote gender equality and transform unequal gender norms		2016 [N=88]	2017 [N=88]	2018 [N=88]	2019 [N=88]
2019 milestone—60%	Status 	48%	60%	58%	68%
Measurements					
Assessments of the social, economic and legal factors that put women and girls at risk of HIV are available		74%	77%	75%	78%
Sex- and age-disaggregated data and gender analysis are used in HIV planning and budgeting		85%	89%	91%	92%
Structural and social change interventions to transform unequal gender norms and systemic barriers implemented, including gender-sensitive education curricula and initiatives to engage men and boys		63%	73%	72%	81%

The Joint Programme was active on many fronts to address the gender dimensions of the HIV epidemic.

- The UNAIDS Secretariat updated a Gender Assessment Tool and worked together with UNDP, UNFPA, UN Women and other partners to support gender analyses and prioritize gender equality interventions in national HIV responses.
- UN Women helped build the capacity of 17 national AIDS coordinating bodies to address gender inequality in HIV policies and programmes, including conducting gender analysis of the HIV epidemic and integrating gender-responsive actions and indicators in HIV strategies.
- UN Women led a global expert group on financing for gender equality interventions and for women's organizations in HIV responses.
- The ILO and partners led the work on adoption of the Violence and Harassment Convention No. 190, while UNDP trained Country Coordination Mechanisms on gender equality and HIV.
- Together with other Cosponsors, UNDP assisted AIDS commissions to design Global Fund Concept Notes that prioritize gender-responsive interventions.
- UN Women, the UNAIDS Secretariat and UNFPA supported the Southern African Development Community to develop a gender-responsive oversight tool to monitor and oversee the implementation of Resolution 60/2 on Women, the Girl Child, and HIV/AIDS of the UN Commission on the Status of Women, with the tool adapted for country-specific use in five southern African countries.

#### *Promoting leadership of women living with HIV*

The Joint Programme enhanced the leadership skills and capacities of women living with HIV to participate in national HIV responses.

- UN Women invested in the leadership skills and capacities of women living with HIV to participate in the national HIV responses in more than 30 countries.
- Women living with HIV, with the support of UN Women and the UNAIDS Secretariat, successfully advocated for inclusion of gender equality actions and indicators in Ukraine's national HIV strategy.

- The Joint Programme’s support aided the International Community of Women Living with HIV in Latin America to establish a network of young women living with HIV to catalyse national implementation.
- UNDP supported the establishment of a Network of Vulnerable Women in the Middle East and North Africa to advocate for prevention of HIV and violence against women in the region.
- The WHO Director-General established an Advisory Group of Women Living with HIV to advise WHO in the areas of HIV and SRHR.
- With support from WHO and the UNAIDS Secretariat, women living with HIV developed a [Checklist for Community Engagement](#) to implement the [WHO Consolidated Guideline on Sexual and Reproductive Health and Rights of Women Living with HIV](#).

Women living with HIV benefitted from income-generation activities and improved their access to HIV services and adherence to HIV treatment.

- More than 10 000 women living with HIV in 30 countries benefitted directly from UN Women support, resulting in expanded access to HIV services and economic empowerment.
- The ILO, the UNAIDS Secretariat and partners improved the business skills of young women and men in the United Republic of Tanzania (who in turn created their own businesses and local revolving fund).
- WFP provided nutritional support and training to more than 10 000 adolescent girls, young women and women living with HIV in Latin America.
- UNHCR piloted MADE51<sup>1</sup> projects that improved livelihoods of women and engaged them into community dialogues to challenge harmful gender norms, prevent violence and enhance their awareness of HIV and sexual health issues.
- The World Bank provided livelihood support to 324 000 women in Nigeria, including women living with HIV.

UN Women and other partners ensured meaningful engagement of women living with HIV in the national-level and regional-level reviews of progress and challenges encountered in the implementation of the Beijing Declaration and Platform for Action through civil society forums

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<sup>1</sup> UNHCR has created [MADE51](#), a global initiative that connects refugee artisans with social enterprises to facilitate the design, creation and marketing of unique home décor and fashion accessories across the world.

and inter-ministerial meetings. These fora helped to highlight the priorities of women and girls affected by HIV in the national reviews.

### *Transforming unequal gender norms to prevent new HIV infections*

A range of the Joint Programmes activities focused on transforming unequal gender norms.

- In Kenya and the United Republic of Tanzania, ILO, WHO and the UNAIDS Secretariat helped transform harmful masculinities among more than 70 000 people (61% men) to encourage men to access HIV testing.
- Through the World Bank's Sahel Women's Empowerment Project, 210 000 young women in 5 countries improved their life skills education and access to reproductive, child and maternal health services, including HIV prevention.
- The UNFPA "We Decide" programme enhanced the access of women and young people with disabilities to HIV information, prevention, treatment and care services, violence prevention information, and SRHR.
- UN Women scaled-up evidence-based interventions to transform unequal gender norms and prevent violence against women, as well as reduce gender-based stigma and discrimination, and enhance access to HIV testing and treatment in 15 countries.

The Joint Programme intensified its role in facilitating socioeconomic support to girls and women.

- Cosponsors and the Secretariat supported programmes to enable girls to remain in school and ensure they could access conditional cash transfers as a strategy to prevent HIV.
- World Bank engagement in Zambia benefitted 49 865 young women and girls from extremely poor households, covering school fees for 25 239 girls and ensuring they could stay in school as a protective factor against HIV. School drop-out rates fell from 5.8% to 3.9%.
- Support for Global Fund grant implementation in Namibia resulted in the development of a minimum package of care, including access to conditional cash transfers.
- WFP increased girls' school enrolment and attendance rates by distributing monthly rations and nutritional commodities to girls, also contributing to the HIV prevention.

- UNESCO, UN Women, UNICEF and others adapted and rolled out the new "[Connect with Respect curriculum tool](#)" in Asia and the Pacific and in eastern and southern Africa to transform unequal social norms, address school-related violence and prevent HIV among adolescent girls.
- UNESCO, UNICEF and other partners engaged in joint global campaigns, such as *#EndSRGBV* and *'Safe To Learn'*, to mobilize the education sector to end school-related violence and increase awareness on HIV and violence among students and teachers.

### Preventing violence and HIV

By 2019, only 59% of countries (52 of 88) reporting against the UBRAF indicators reported having laws or policies and services addressing gender-based violence. Studies show that women who experience or fear intimate partner violence are 50% more likely to acquire HIV.

Indicator 5.2: Percentage of countries with laws and/or policies and services to prevent and address gender-based violence		2016 [N=88]	2017 [N=88]	2018 [N=88]	2019 [N=88]
<i>2019 milestone—60%</i>	Status 	43%	55%	60%	59%
Measurements					
Disaggregated data on prevalence and nature of gender-based violence are available and used		64%	70%	73%	78%
Legislation and/or policies addressing gender-based violence exist		95%	98%	100%	100%
A mechanism to report and address cases of gender-based violence is available, e.g. special counselling centres, ombudsman, special courts and legal support for victims		94%	95%	95%	95%
HIV, sexual and reproductive health, and gender-based violence services		67%	73%	77%	74%

Technical assistance enabled countries to ensure that national actions plans and policies on violence against women also prioritized HIV prevention.

- UNDP supported 71 countries to review and improve policies to address the intersections of violence, HIV and alcohol abuse.

- UN Women supported Guatemala’s inclusion of actions and strategies for women living with HIV in the National Plan for the Prevention and Elimination of Domestic Violence 2019–2028.
- With UNESCO’s support, the South Sudan education strategy incorporated actions to prevent and address school-related violence.
- UN Women, UNDP and UNFPA worked with partners across 20 countries in the Middle East and North Africa to repeal discriminatory laws that forced women to marry their rapists.

The Joint Programme invested in scaling-up evidence-based interventions to prevent violence and HIV infection, and to enhance survivors’ access to services. UNDP worked in 7 countries to integrate a cofinancing approach that addresses the links between HIV and violence. In Zimbabwe, UN Women worked with national partners to implement the SASA! intervention,<sup>2</sup> which reached almost 20 000 people (75% women) with community-based outreach activities to prevent HIV-related and gender-based violence.

Female refugees were supported to access sexual violence prevention information and services along with HIV prevention, treatment and care. This was done by implementing the Minimum Initial Service Package for Reproductive Health in Emergencies and by rolling out the Gender-based Violence Information Management System across 32 humanitarian operations.

UN Women and UNFPA supported 60 countries to adapt and roll out the [Essential Services Package](#), which helped improve services for survivors of violence against women, including access to post-exposure prophylaxis. The UNFPA programme “2gether 4 SRHR” developed new operational guidance and standards on gender-based violence, HIV and sexual and reproductive health and rights in humanitarian settings in 10 sub-Saharan African countries.

## Key challenges and future actions

Progress towards gender equality and the elimination of gender-based violence is hindered by many factors, including gaps in the availability and use of data on rates of intimate partner violence, especially in the context of schools and humanitarian settings. Limited knowledge and technical skills programming with a gender lens in national AIDS coordinating bodies hamper recognition of the impact of unequal gender norms on HIV interventions. In addition, community-led HIV responses that challenge unequal gender norms, prevent violence against

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<sup>2</sup> 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.

women and HIV, and expand access to HIV services are not sufficiently prioritized and financed in national HIV programmes.

Engagement of women living with HIV as advocates and leaders in the HIV response continues to be challenged by limited funding, which affects institutional capacity. Joint Teams rarely prioritize the scale-up of initiatives that transform unequal gender norms, which often require at least 3–5 years to demonstrate measurable changes in the lives of women and men. The 2020–2021 biennium saw a reduction in UBRAF core resources dedicated to SRA 5 compared to the 2018–2019 (from US\$ 9.32 million to US\$ 7.80 million), thus limiting the Joint Programme’s capacity to appropriately prioritize this work.

The Joint Programme will undertake or actively support a range of actions to advance gender equality and eliminate gender-based violence.

- To accelerate progress towards gender equality in the context of the HIV response and elimination of gender-based violence, the Joint Programme will work to leverage the 25th Anniversary of the Beijing Platform for Action and the Generation Equality Forum to advocate for a more gender-transformative HIV response and for meaningful engagement of women living with HIV.
- UN Women, UNDP, UNICEF, UNFPA and UNESCO will capitalize on the UN/EU Spotlight Initiative to address the intersection of violence against women, HIV and sexual and reproductive health and rights as well as leaving no one behind.
- The Joint Programme will advocate for the integration of gender equality dimensions in target setting for social enablers, drawing from a policy brief which UN Women will develop to define gender-transformative interventions in the context of the HIV response.
- The Joint Programme will support the scale-up of community-based and -led gender-responsive interventions to improve HIV outcomes, transform unequal gender norms, prevent violence and HIV and enhance access to HIV testing, treatment and care, and continue to promote the leadership and meaningful participation of networks of women living with HIV and adolescent girls and young women in the HIV response, including those facing intersecting and multiple forms of discrimination.





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