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

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Organizational report 2018-2019

the 1990s, the number of people in the world who are undernourished has increased from 600 million to 800 million (FAO 2001).

There are a number of reasons for this increase. One of the main reasons is the increase in the world population. The world population is expected to increase from 6 billion in 1999 to 9 billion by 2050 (UN 2000). This increase in population is expected to be concentrated in the developing countries, where the population is expected to increase from 4 billion in 1999 to 7 billion by 2050 (UN 2000).

Another reason for the increase in undernourishment is the increase in the number of people who are living in poverty. The number of people living on less than \$1 per day is expected to increase from 1 billion in 1999 to 2 billion by 2050 (UN 2000). This increase in poverty is expected to be concentrated in the developing countries, where the number of people living on less than \$1 per day is expected to increase from 1 billion in 1999 to 2 billion by 2050 (UN 2000).

A third reason for the increase in undernourishment is the increase in the number of people who are living in rural areas. The number of people living in rural areas is expected to increase from 5 billion in 1999 to 6 billion by 2050 (UN 2000). This increase in rural population is expected to be concentrated in the developing countries, where the number of people living in rural areas is expected to increase from 5 billion in 1999 to 6 billion by 2050 (UN 2000).

There are a number of ways in which the world can meet the needs of the growing population. One way is to increase the production of food. This can be done by increasing the area of land used for agriculture, by increasing the yield of crops, and by increasing the number of crops that are produced. Another way is to reduce the amount of food that is wasted. This can be done by reducing the amount of food that is lost during production, by reducing the amount of food that is lost during distribution, and by reducing the amount of food that is lost during consumption.

There are a number of ways in which the world can reduce the amount of food that is wasted. One way is to reduce the amount of food that is lost during production. This can be done by using better farming practices, by using better irrigation systems, and by using better pest control methods. Another way is to reduce the amount of food that is lost during distribution. This can be done by using better transportation methods, by using better storage methods, and by using better marketing methods.

There are a number of ways in which the world can reduce the amount of food that is lost during consumption. One way is to reduce the amount of food that is lost during consumption. This can be done by using better eating habits, by using better storage methods, and by using better marketing methods. Another way is to reduce the amount of food that is lost during consumption. This can be done by using better eating habits, by using better storage methods, and by using better marketing methods.

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Key strategies and approaches to integrate HIV into broader agency mandate

As a Cosponsor of the Joint Programme, UN Women's approach to HIV prioritizes action to address the challenges that stem from unequal power relations between women and men. UN Women provides technical and financial support to Member States and women's organizations, particularly organizations of women living with HIV to:

- integrate gender equality into the governance of the HIV response, ensuring that national HIV strategies are informed by sex- and age-disaggregated data and gender analysis and include gender-responsive actions, budgets and monitoring and evaluation frameworks;
- amplify the voices and leadership of women and girls in all their diversity, particularly adolescent girls and young women, to meaningfully engage in decision-making in HIV responses at all levels; and
- scale up what works in tackling the root causes of gender inequalities, including addressing the intersections between HIV and violence against women, promoting women's economic empowerment to prevent HIV and mitigate its impact; and ending gender-based stigma and discrimination that deter women from accessing HIV services.

Civil society is a key constituency for UN Women. It plays a vital role in promoting gender equality and women's rights at all levels. UN Women partners with international, regional and national networks of women living with HIV, women's organizations, alliances and coalitions of women caregivers, legal and human rights organizations, and community development, grassroots and media organizations to increase the influence and power of women living with HIV and to promote their leadership and meaningful participation in all decisions and actions in the response to the epidemic.

Contributing to progress towards the SDGs

UN Women was established to accelerate progress on meeting the needs of women and girls worldwide. UN Women supports UN Member States in setting global standards for achieving gender equality and the empowerment of all women and girls. It works with governments and civil society to design laws, policies, programmes and services needed to ensure that the standards are effectively implemented and truly benefit women and girls. It also works to make the vision of the SDGs a reality for all women and girls, and it supports women's equal participation in all aspects of life, focusing on these priority areas:

- women lead, participate in and benefit equally from governance systems;

- women have income security, decent work and economic autonomy;
- all women and girls live a life free from all forms of violence; and
- women and girls contribute to and have greater influence in building sustainable peace and resilience, and benefit equally from the prevention of natural disasters and conflicts and humanitarian action.

Strengthening gender expertise in the national AIDS coordinating bodies for gender-sensitive HIV response

In 2018–2019, UN Women’s support assisted 17 national AIDS coordinating bodies or other government institutions responsible for the coordination of national HIV responses in increasing their knowledge, skills and capacities to address gender inequality in HIV policies and programmes.¹ This led to gender analysis of HIV epidemic in planning, integration of gender-responsive priorities and actions into the national HIV strategies, use of gender-responsive indicators to track progress, engagement of women living with HIV and implementation of evidence-based, community-led initiatives to prevent HIV infection and violence against women.

For instance, the UN Women-supported gender assessment informed Indonesia National Action Plan on HIV/AIDS for 2020–2024. The Ukrainian National Council on HIV/AIDS partnered with the national network of women living with HIV and adopted the State Strategy on combating HIV, Tuberculosis and Viral Hepatitis 2030, which included actions to address and monitor the influence of gender norms and discrimination in access to HIV services for women. The Uganda AIDS Commission established a central dashboard with gender-responsive indicators to track the progress of key gender equality priorities in implementation of the National HIV and AIDS Strategic Plan.

UN Women led a global expert group meeting to examine how to strengthen financing for gender equality in the HIV response. The meeting noted the scarcity of data on financing of gender-responsive HIV strategies, plans and programmes. It emphasized the urgent need to strengthen the resource needs estimation process to define and cost gender equality interventions and to advocate for their inclusion in national HIV budgets. As an outcome of the meeting, UN Women is currently leading the process of defining gender-responsive interventions for the HIV response.

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¹ Cameroon, China, Ethiopia, Guatemala, Haiti, Indonesia, Liberia, Malawi, Papua New Guinea, Rwanda, South Africa, Tajikistan, Tanzania, Uganda, Ukraine, Viet Nam and Zimbabwe.

Promoting leadership and participation of women living with HIV

Women living with HIV across 30 countries² engaged in decision-making processes around the HIV response due to UN Women’s targeted advocacy. In 2018–2019, 10 000 women living with HIV directly benefitted from UN Women’s support, resulting in increased advocacy and leadership skills, increased participation in decision-making around the HIV response and greater access to HIV services. UN Women facilitated collaboration between women living with HIV and health institutions to identify and address the stigma and discrimination they face when accessing HIV services.

For instance, in Uganda, women living with HIV increased their leadership skills through the mentorship programme, led by the International Community of Women Living with HIV-East Africa. As a result, women successfully engaged in the development of and integrated their priorities into the PEPFAR Country Operational Plan and other processes. In South Africa, UN Women revitalized the work and strengthened capacity of the National AIDS Council’s Women’s Sector to participate in and influence the mid-term review of the national HIV strategy for 2017–2022, responding to specific priorities women and girls face in the context of HIV.

UN Women ensured meaningful engagement of women living with HIV in the national- and regional-level reviews of progress and challenges encountered in the implementation of the Beijing Declaration and Platform for Action³ through civil society forums and inter-ministerial meetings. With 2020 marking the 25th anniversary of the Beijing Declaration, all states undertook comprehensive national-level reviews of implementation of the Beijing Declaration. Fully 43% of the national reports included information on specific measures taken to prevent discrimination and promote the rights of women and girls living with HIV during the past 5 years. The outcome documents of the regional reviews in Europe and central Asia, Asia and the Pacific, and Africa integrated commitments to prioritize gender equality and women’s empowerment in the HIV responses.

Transforming unequal gender norms to prevent HIV

Across 15 countries,⁴ UN Women scaled up evidence-based interventions to transform unequal gender norms to prevent violence against women and HIV, reduce gender-based stigma and discrimination and enhance access to HIV testing and adherence to HIV treatment. Over 70 000 beneficiaries (39% women and 61% men) improved their knowledge

² Cambodia, Cameroon, Chile, China, Colombia, Democratic Republic of Congo, Ethiopia, Guatemala, Indonesia, Jamaica, Kenya, Kyrgyzstan, Liberia, Malawi, Mali, Moldova, Mozambique, Nepal, Nigeria, Papua New Guinea, Rwanda, Sierra Leone, South Africa, Tajikistan, Tanzania, Tunisia, Uganda, Ukraine, Viet Nam and Zimbabwe.

³ At the Fourth World Conference on Women: Action for Equality, Development and Peace held during 4-15 September 1995 in Beijing, China the governments from around the world agreed on a Declaration and Platform for Action aimed at achieving greater equality and opportunity for women, known as the Beijing Platform for Action.

⁴ Cameroon, Democratic Republic of Congo, Egypt, Indonesia, Kenya, Kyrgyzstan, Liberia, Papua New Guinea, Rwanda, Sierra Leone, South Africa, Tanzania, Tunisia, Uganda and Zimbabwe.

about HIV and accessed HIV testing, treatment and care as a result of UN Women's community-based initiatives.

In 3 districts in South Africa, UN Women's HeForShe community-based initiative on engaging men and transforming harmful norms to prevent violence and HIV engaged 39 577 people in 206 taverns, soup kitchens and churches,⁵ resulting in improved attitudes and behaviours and increased uptake of HIV testing. In only 8 months in 2018, 22 579 beneficiaries (46% women and 54% men), took HIV tests. Those who tested HIV-positive were linked to treatment and care. The initiative included regular community-level dialogues regarding violence and HIV prevention, led by trained "changemakers"—tavern owners and faith leaders. In 2019, UN Women expanded this work to 8 additional impoverished communities, where community-level dialogues and peer support groups enabled 17 781 men who had been lost to follow-up to restart HIV treatment.

UN Women also adapted the HeForShe methodology and rolled it out in Malawi and Zimbabwe. Within 4 months in 2019, 3 600 men engaged in discussions regarding the harmful impact of violence against women and responsible health-seeking behaviour and accessed HIV testing and voluntary medical male circumcision.

As a co-convenor of the Global Partnership for Action to Eliminate All Forms of HIV-related Stigma and Discrimination, UN Women worked in almost 20 countries to increase the capacities of the justice and health sectors to identify and reduce gender-based stigma and discrimination. It also mobilized women living with HIV to advocate for the repeal of discriminatory laws and to engage with international human rights treaties such as the Committee on the Elimination of All Forms of Discrimination Against Women (CEDAW).⁶

Health professionals in China, Ethiopia and Tajikistan learned about specific types of discrimination women face when they access HIV services and how to address those. In Zimbabwe, women's organizations, including women living with HIV, advocated for repealing the section on criminalization of HIV transmission in the Criminal Code and submitted an alternative bill to the Parliament. The Tajikistan National Network of Women Living with HIV influenced the development of the second National Action Plan on implementation of the CEDAW Concluding Comments, which prioritized issues related to ending stigma and discrimination against women living with HIV and enhancing their access to sexual and reproductive health and services in response to the latest CEDAW Concluding Comments to Tajikistan.

⁵ 159 taverns, 23 churches and 24 soup kitchens.

⁶ Cambodia, Cameroon, China, Cote D'Ivoire, Democratic Republic of Congo, Ethiopia, Indonesia, Kyrgyzstan, Malawi, Maldives, Moldova, Liberia, Papua New Guinea, Sierra Leone, Tajikistan, Viet Nam, Uganda, Ukraine and Zimbabwe.

Case study: Leadership of women living with HIV in Ukraine

UN Women's collaboration with the International Community of Women Living with HIV equipped over 200 women from 10 countries with knowledge on localizing 2030 Agenda. In Ukraine, this work spearheaded the development of a common advocacy strategy for continued, meaningful engagement of women living with HIV in national and local actions to implement the SDGs.



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The Ukrainian national network of women living with HIV now routinely advocates for national and local strategies to guarantee women's participation in the local AIDS councils, bolster HIV prevention measures among women and girls, and eliminate gender-based stigma and discrimination against women to accelerate uptake of HIV counselling, testing, treatment and care.

With UN Women's support, women living with HIV presented to the CEDAW Committee the findings of a survey of 1000 women living with HIV [to assess how CEDAW implementation addresses the rights of women living with HIV](#) in Ukraine. As a result, the CEDAW Concluding Comments to Ukraine called for accelerated HIV prevention among women and girls and improved access to gender-based violence services for women. In 2019, this culminated in the approval of the State Strategy on Combating HIV, Tuberculosis and Viral Hepatitis until 2030. The strategy integrated gender equality as a key priority, included gender-responsive actions to help improve women and girls' access to HIV services and reduce discrimination, and prioritized gender-sensitive indicators for monitoring progress. UN Women created a space for women living with HIV to jointly develop the new national HIV strategy and advocate for the CEDAW Concluding Comments and for the findings and recommendations of the survey to inform that process.

For the first time, a special seat for the representative of the national network of women living with HIV was reserved in the National Council on Combating Tuberculosis and HIV/AIDS. A woman activist living with HIV is now a member of the national decision-making body coordinating the national HIV response, with a mandate of advocating for the rights of women living with HIV in legislation and policy dialogue at the highest level.

Knowledge products

	<p>UN Women continues to update its Gender Equality and HIV/AIDS web-portal. The web portal contains cutting-edge research, training materials, advocacy tools, current news, personal stories, and campaign actions on the gender equality dimensions of the HIV epidemic.</p>
	<p>UN Women's Progress on the Sustainable Development Goals: The gender snapshot brings together the latest available evidence on gender equality across all 17 SDGs, including Goal 3, underscoring the progress made as well as the actions still needed to accelerate progress.</p>
	<p>UN Women's factsheet, Leaving No One Behind in HIV response: data from Eastern Europe and Central Asia, is an infographic project that aims to provide an overview of the main and most recent HIV-related issues and trends in the region, identifying the needs of the most affected and vulnerable groups.</p>
	<p>UNICEF, UNAIDS, UNFPA, UN Women, UNDP, UNODC and other partners published Looking out for Adolescents and Youth from Key Populations, which provides an assessment on the needs of adolescents and youth at risk of HIV, including young women and adolescent girls, with case studies from Indonesia, the Philippines, Thailand and Viet Nam.</p>
	<p>UN Women led the development of the Gender-based Violence Training Resource Pack: A Standardized Training Tool for Duty-bearers, Stakeholders and Rights-holders with contributions from the members of the Joint Programme on preventing and responding to gender-based violence in Kenya. The training pack provides programmatic guidance to respond to violence and intersections of violence and HIV.</p>
	<p>UN Women partnered with the Viet Nam Administration of HIV/AIDS Control on the Gender Assessment of Viet Nam's HIV Response. It identifies opportunities, gaps and challenges in mainstreaming gender equality and women's empowerment into the national HIV response and provides a set of recommendations for improved HIV policies and programmes.</p>

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