



UNAIDS Agenda for Accelerated Country Action for Women, Girls, Gender Equality and HIV Mid-Term Review

UNAIDS Programme Coordinating Board
11 December 2012

Scenario

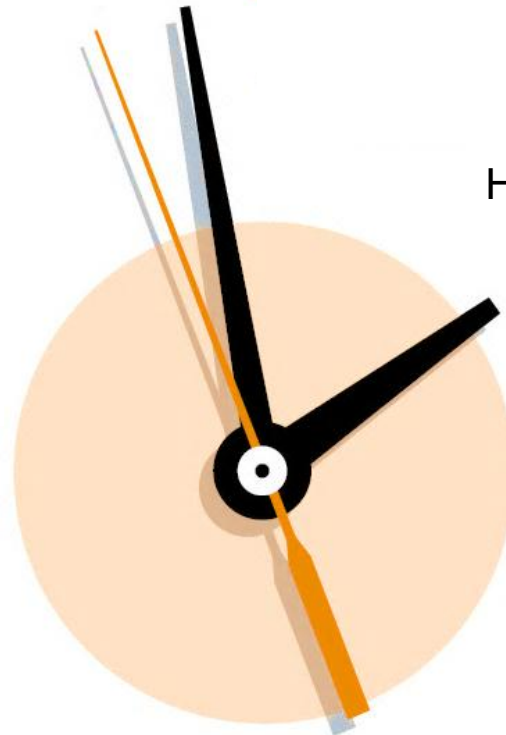
Every minute a young woman acquires HIV



Women living with HIV are more likely to experience violations of their sexual and reproductive rights



Only 1 female condom for every 36 women in sub-Saharan Africa



2x

Young women (15-24 years) are twice as likely as young men to acquire HIV infection



HIV is the leading cause of death for women of reproductive age

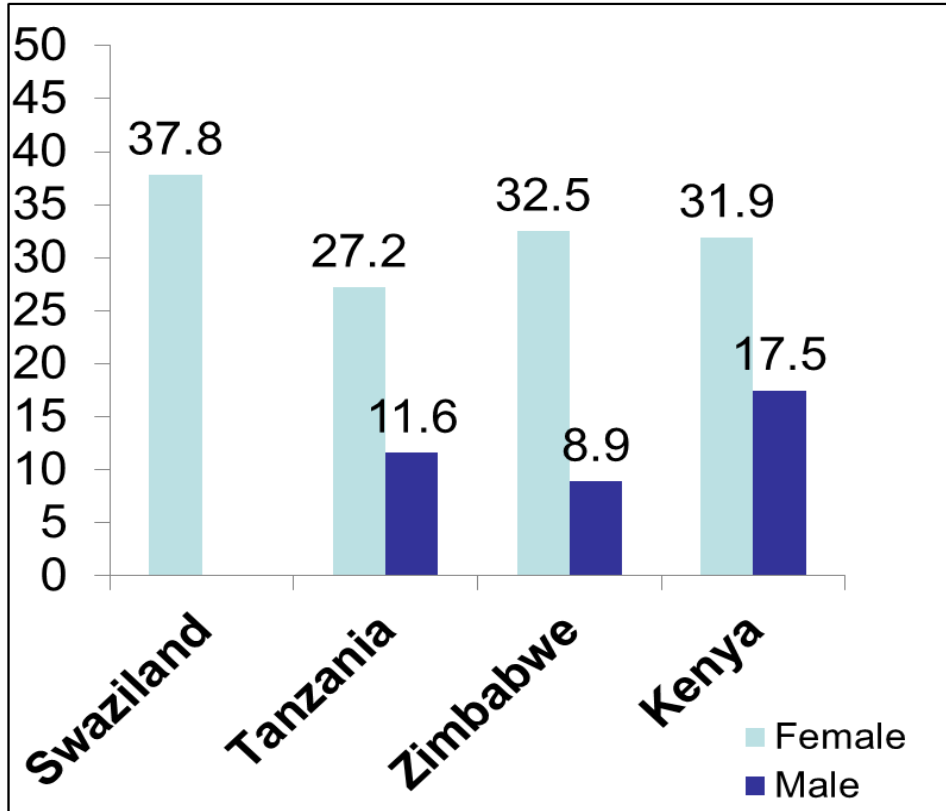


Fewer than 30% of all young women have comprehensive, correct knowledge of HIV



Together for Girls*: the power of partnership

Any sexual violence before 18yrs (%)



- Addressing violence against children – especially sexual violence and girls
- Country led-efforts for change in 9 countries
 - National surveys
 - Multi-sector response
 - Global communication and advocacy

* 5 UN Agencies, US government, private sector

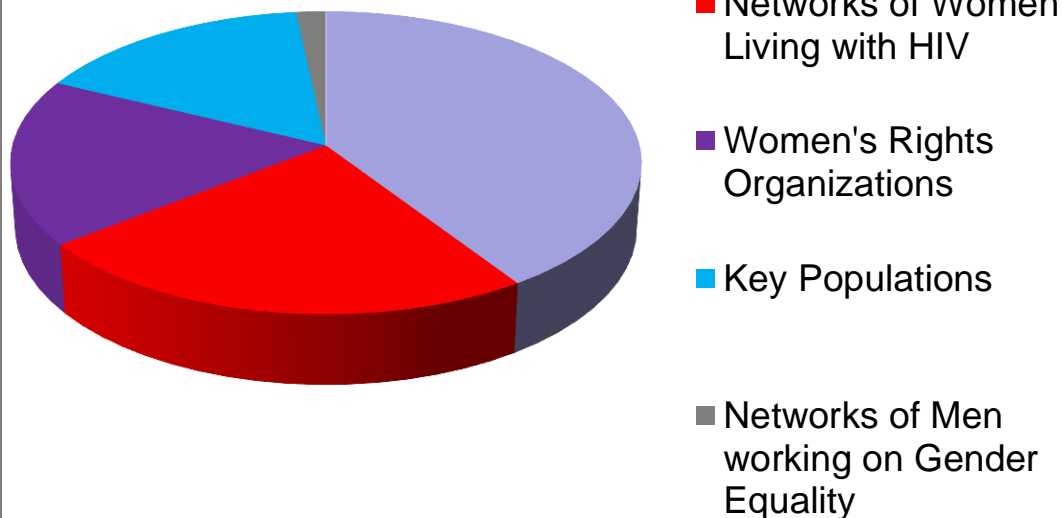
Background on the UNAIDS Agenda

- Developed in 2009 following a consultative process:
 - to provide a common platform for focused action on gender and HIV
- Welcomed at the 25th PCB, December 2009, and launched at the 54th CSW, February 2010
- Country roll out in almost 100 countries, engaging 738 civil society groups
- Requested by the PCB to present a midterm review (MTR) by the end of 2012

Mid-Term Review Process – July to Sept 2012

- Data collection - inclusive, participatory approach
- Diverse participation of civil society
- Guided by multi-partner reference group

Civil Society participation in the Stakeholder Survey



July to September 2012

- **5** country missions
- **22** key informant interviewed
- **152** documents reviewed
- **222** participants in joint country survey
- **234** respondents to stakeholder survey

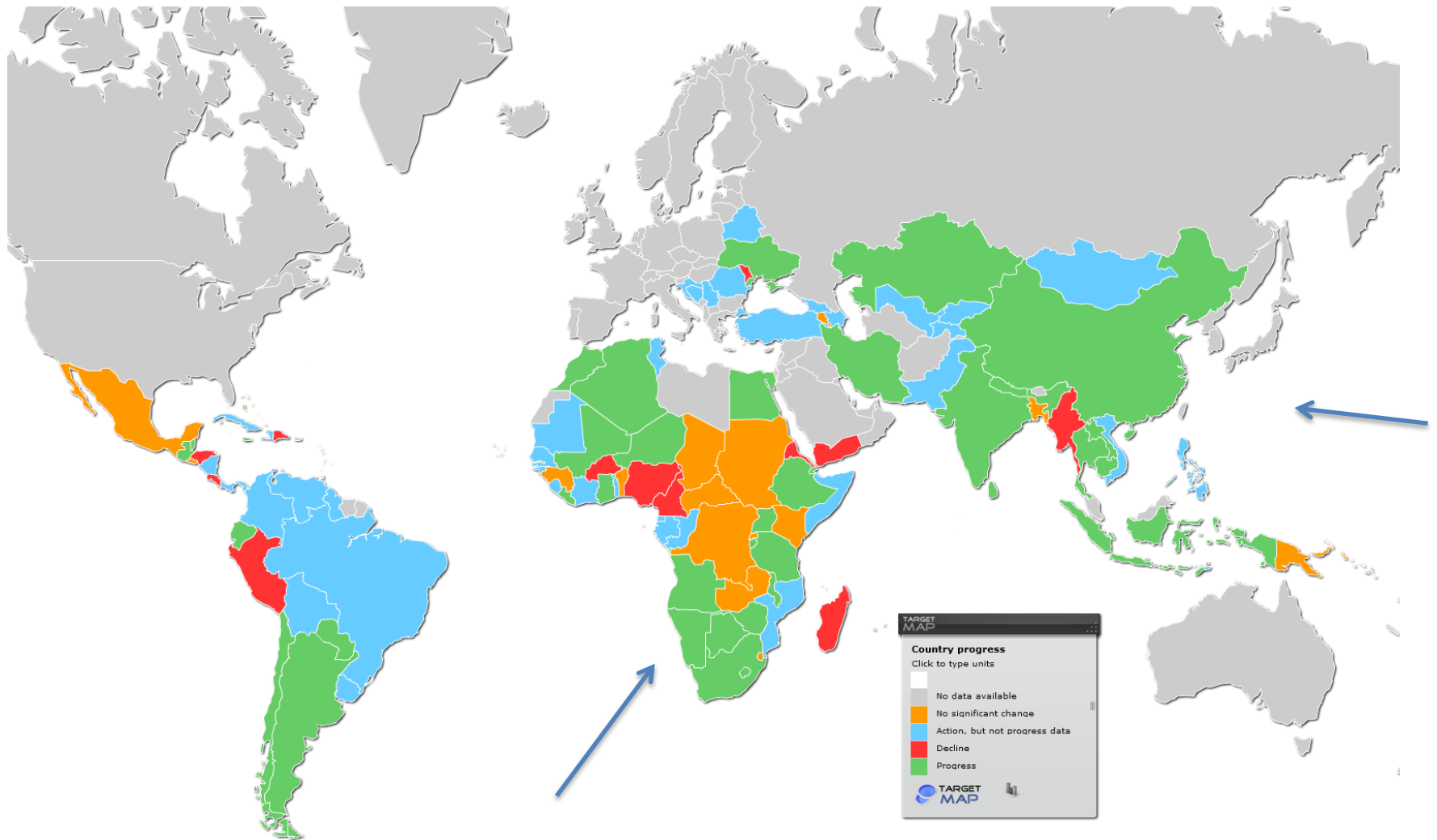
MTR - is the Agenda working or not?

- In at least 90 countries - the agenda fostered political commitment and accelerated action
- In 60% of the countries - strengthened gender equality within HIV responses tailored to local context
- Common platform for partners, including civil society

Is that a YES?



The Agenda catalyzed action around the world, building on earlier work

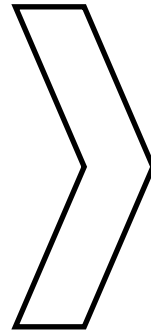


Source: UNAIDS Scorecard on Women, Girls, Gender Equality and HIV

MTR - What have we learned so far?

Common elements for success:

- Strong political commitment from government
- Having active civil society
- Financial and technical support



Striking progress:

- Data on gender based violence is increasingly used for the HIV response
- Affected women participation in CEDAW monitoring
- Capacity building of women's groups

Zero new HIV infections.
Zero discrimination.
Zero AIDS-related deaths.

Examples from implementation

- Leadership programmes for women living with HIV in 67 countries
- Greater linkages between HIV and SRH (79% of countries initiating action since launch. 43% linked services at national level)
- Improving and introducing quality sexuality education in 34 countries
- 57 countries supported to undertake analysis of HIV related policies for development of new strategic plans
- Countries that made the substantial progress include Angola, China, El Salvador, Jamaica, Kazakhstan, Lesotho, Malawi, Mali, Morocco, Niger, Rwanda, Tanzania and South Africa

The Agenda has triggered several political actions

- 2011 high level consultation on “*violation of sexual and reproductive health and reproductive rights of women living with HIV*”
- Security Council resolution 1983 - HIV and sexual violence in (post) conflict
- Consultation with women and girls - priorities for the UN HLM on HIV/AIDS
- 2011 Political Declaration on HIV/AIDS – centrality of gender equality
The global indicator on violence, reported biannually to UNAIDS
- Global Power Women Network Africa
 - Pan African Positive Women’s Coalition

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MTR - Challenges

- Insufficient funding to operationalize the Agenda at country level
 - particularly networks of women living with HIV and women's rights groups
 - Sub-Saharan Africa and Asia Pacific lack gender-sensitive budgeting
- Mixed political commitment for gender-transformative HIV responses across countries and regions
- Insufficient coordination, in particular at country level

MTR - Challenges

- Gender is not fully integrated in M&E systems
 - Inconsistency in knowing epidemic, context and response from a gender perspective
 - HIV responses in Eastern Europe and Central Asia, and Middle East and Northern Africa lack data on violence
- Technical support does not always produce results
- Inconsistent meaningful involvement of women in all their diversity

What is the way forward?

Gender transformative HIV responses:



Gender Equality and HIV in action for social change

- NSPs and Investment approach - integration
- Gender-sensitive budgeting
- Harmful gender norms

People centred-approaches:



Tailoring to the gender- specific needs of women, men and transgender populations

- Sexual & Reproductive Health
- Rights-based approach
- End sexual violence

Inclusiveness and equity:



Addressing gender barriers to services

- Women and girls living with HIV
- Key populations

Thank you

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