



➤ Integrating strategies to address **gender-based violence** and **engage men and boys** to advance gender equality through National Strategic Plans on HIV and AIDS

IMPACT AND NEEDS ASSESSMENT: OVERVIEW OF FINDINGS





My participation in the Nairobi and Istanbul consultations, had a significant impact on the improvement of the National Strategic Plan for HIV, and planning for future activities. I believe that these consultations should continue in the future.

NAIROBI DELEGATE, SERBIA

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Background

The UN Interagency Working Group on Women, Girls, Gender Equality and HIV¹, (specifically: UNFPA, UNDP, UNAIDS, UN Women and WHO), in collaboration with the MenEngage Alliance, Sonke Gender Justice and ATHENA Network has convened two global consultations on **Integrating Strategies to Address Gender-based Violence and Engage Men and Boys to Advance Gender Equality through National Strategic Plans on HIV and AIDS**. The meetings aimed to review current National Strategic Plans on HIV and AIDS (NSPs), to assess the strengths and weaknesses of these plans with regard to addressing gender-based violence and engaging men and boys for gender equality, and to develop country action plans for advocacy to address priority issues and gaps.

The consultations were designed and undertaken in a highly participatory manner, with delegates immersed in cross-country and –regional sharing of experience, peer-to-peer and south-to-south learning, and the collaborative development of country action plans. The first of these consultations was held in Nairobi, Kenya, from 30th November to 2nd December 2010, and brought together participants from 14 countries across five regions. The second meeting was held in Istanbul, Turkey, from 14th to 16th November 2011, bringing together delegations from 16 (new) countries.

These consultations were organized in response to commitments in the *UNAIDS Agenda for Accelerated Action for Women, Girls, Gender Equality and HIV* and the *UNAIDS 2011-2015 Strategy: Getting to Zero*, which highlight the importance of achieving zero tolerance to gender-based violence and engaging men and boys for gender equality. In particular, they were conceived to address the concern that gender-based violence and the engagement of men and boys for gender equality have not been sufficiently integrated into countries' NSPs, by creating a space to systematically analyze NSPs and develop a coordinated approach to strengthen support moving forward.

Far from standing alone, the Nairobi and Istanbul consultations form part of growing efforts to address the intersections of gender equality and HIV, including: championing women's rights in the context of HIV; addressing the HIV needs of women and girls; enhancing efforts to integrate a focus on gender-based violence as a cause and consequence of HIV into HIV responses; and actively engaging men and boys in achieving gender equality to challenge constructions of masculinity that exacerbate the spread and impact of HIV.

1. Includes UNAIDS Secretariat, co-sponsors (UNDP, UNFPA, UNHCR, ILO, WFP, UNESCO, UNICEF, UNODC, WHO, WORLD BANK) and UN Women.

The impact and needs assessment



In April and May 2012 an impact and needs assessment was instigated to evaluate progress against country action plans developed during the meeting, and to map technical needs for moving further forward on country action plans. The purpose was to inform the on-going work of the UN Interagency Working Group on Women, Girls, Gender Equality and HIV, and civil society partners to support past consultation participants; to highlight achievements, showcase successful programmatic and/or advocacy strategies, and share good practice; and to inform future initiatives to advance policy and programming on addressing gender-based violence and engaging men and boys to advance gender equality through NSPs.

PROCESS AND METHODOLOGY

The impact and needs assessment was conducted by means of:

- An on-line survey for all participants of both the Nairobi and Istanbul consultative meetings, available in English, Russian, Spanish and French
- In-depth interviews with selected participants from both meetings
- An on-line survey for resource people involved in the Nairobi and Istanbul meetings, to triangulate technical support provided since the meeting, key areas of progress and on-going support needs at regional/country levels.

All the delegates (35 from Nairobi, 50 from Istanbul) were contacted via email, with an introduction to the impact and needs assessment in English and/or Russian, Spanish or French respectively, and a link to the on-line survey in the relevant language(s). Follow-up emails were sent at roughly weekly intervals to those who had not responded, and to those who had only partially responded. These included the option of sending input via a Word version of the survey questionnaire as well as on-line.

Participants for in-depth interviews were selected individually to ensure regional and sectoral diversity. Some delegates were approached specifically to inform up-coming country follow-up visits, and/or on the basis of earlier preliminary reports of successful outcomes of the Nairobi and Istanbul meetings.

ASSESSMENT OUTPUTS

The assessment outputs include:

1. **This report**, comprising of an executive summary of key findings, conclusions and next steps drawn from the analysis of the on-line questionnaire and in-depth interviews, followed by an annexe of more detailed summaries of the on-line questionnaire's nine sections.
2. **A compilation of country case studies**, highlighting key stories of change and impact resulting from the consultations, drawn primarily from in-depth interviews and follow-up.



Executive summary

1. Key findings



In our National Strategic Framework for HIV we had identified gender inequality as one of the drivers of the epidemic ... but for some reason, when it came to developing programmes ... we forgot that being a patriarchal society we need to get men involved if we want to stop the issues. It hadn't been something we even thought about.

ISTANBUL DELEGATE, SWAZILAND



What shall we do to make change happen? What did other countries do to make change happen?

ISTANBUL DELEGATE, CHINA

Approximately half the 85 delegates of the Nairobi 2010 and Istanbul 2011 consultative meetings on **Integrating Strategies to Address Gender-based Violence and Engage Men and Boys to Advance Gender Equality through National Strategic Plans on HIV and AIDS** took part in the impact and needs assessment. Of the 30 countries represented at the two meetings, substantive inputs were received from over 20. (See Annex Q1.)

It is difficult to draw generalized findings from the survey, due to the differing nature, context, stage and trajectory of countries' HIV epidemics, *and* due to the differing perspectives of actors within country delegations. For example, the involvement of a woman openly living with HIV in a national forum on HIV and AIDS for *the first time* in China, can be considered equally as significant an achievement as the concrete revisions made to the final draft of the National Action Plan on HIV and AIDS in Belize to strengthen specific policy goals related to gender-based violence.

What comes across clearly, from the survey and the interviews, is that the meetings had a catalytic effect on thinking, policy and practice regarding the urgency to address gender-based violence as a cause and consequence of HIV, and the need to engage men and boys as agents of positive change to halt gender-based violence, and bring about more gender equitable communities.

Broadly speaking, some of the principle strategies that have been taken up since – and as a result of – the consultative meetings are:

- Policy/legal review by a gender consultant
- Strengthened language around gender equality and gender-based violence integrated into national policies, including in accountability structures
- Increased engagement and leadership of women living with HIV and other key affected women
- Further training on the engagement of men and boys as agents to halt gender-based violence and advance gender equality
- Increased partnership and cooperation between National AIDS Councils (NACs) and civil society
- Engagement of traditional and faith leaders to address cultural factors which underpin gender-based violence, and encourage men and boys as positive change agents.

An accompanying publication has been developed to explore successful outcomes and strategies in more depth, based on in-depth interviews with meeting delegates from eight countries.

What was also evident from the study is that most countries need some level of technical support for the development and implementation of these strategies – again, to varying degrees and in a range of areas, including financial and human resources. Other key areas of technical support needed included:

- Further training and capacity building on the issues of violence against women, HIV and engaging men and boys as agents of gender equality
- Policy and situational analyses at country level to see what frameworks are already in place, and what is being implemented on the ground
- Examples of good practice
- Strategic planning, including engagement and coordination of key stakeholders
- Gender expertise
- Advocacy and networking skills
- Monitoring and evaluation/accountability systems.

2. Next steps



UNAIDS identifies 38 'priority' (high burden) countries that are particularly targeted through the implementation of the *Getting to Zero* strategy and the *Global Plan to Eliminate New HIV Infections in Children by 2015 and Keeping their Mothers Alive*. Of these, 20 countries participated in the Nairobi and Istanbul consultations.

The relatively large number of priority countries that did not take part in these consultations (18/38) is explained by the fact that the two meetings aimed for an equitable regional representation across five regions (Africa, Asia-Pacific, Middle East and North Africa, Latin America and the Caribbean, and Eastern Europe and Central Asia), whereas the majority of priority countries are located in the high prevalence areas of sub-Saharan Africa. Most of the 'remaining' countries are located in sub-Saharan Africa, and fall into two sub-regional categories: East and Southern Africa, and West and Central Africa.

Outliers from the sub-Saharan region are Guatemala, Djibouti and Iran. Delegations from these countries were invited to the two meetings, but visa and logistical issues prevented their participation.

TABLE 1: COUNTRY REPRESENTATION AT THE NAIROBI AND ISTANBUL CONSULTATIONS

Region	Priority countries	Participated	Non-priority countries	Participated
Africa	Angola			
	Botswana			
	Burundi			
	Cameroon			
	Central African Republic			
	Chad			
	Côte d'Ivoire	✓		
	Democratic Rep. Congo			
	Ethiopia			
	Ghana			
	Kenya	✓		
	Lesotho			
	Malawi	✓		
	Mozambique			
	Namibia			
	Nigeria	✓		
	Rwanda	✓		
	South Africa	✓		
	South Sudan	✓		
Swaziland	✓			
Tanzania				
Uganda	✓			
Zambia				
Zimbabwe				
Asia-Pacific	Cambodia	✓	Papua New Guinea	✓
	China	✓		
	Indonesia	✓	Pakistan	✓
	India	✓		
	Myanmar	✓		
	Thailand	✓		
Middle East and North Africa (MENA)	Iran		Liberia	✓
	Djibouti		Egypt	✓
Latin America and Caribbean (LAC)	Brazil	✓	Ecuador	✓
	Guatemala		Belize	✓
	Haiti	✓		
	Jamaica	✓		
Eastern Europe and Central Asia	Russian Federation	✓	Serbia	✓
	Ukraine	✓	Moldova	✓
			Tajikistan	✓
			Kazakhstan	✓



Two areas of on-going, collaborative follow-up work are underway:

1. **A sub-regional consultative meeting** to take place before the end of 2012 comprising delegations from five priority countries in East and Southern Africa, namely Angola, Mozambique, South Africa, Tanzania and Zimbabwe.
2. **Targeted in-country follow-up and support** in 1–3 pilot countries that have already taken part in the consultations. This will be informed by the needs assessment, available resources and country-level mappings to ascertain country preparedness. Short-listed pilot countries for follow-up, as of October 2012, are Ukraine, Nigeria, Uganda and Swaziland.

Beyond the above efforts, in-country support and country or regional follow-up work and linkages have been provided through targeted or parallel work-streams in the following countries:

- **Swaziland** (Sonke Gender Justice): training on strategies for engaging men and boys for gender equality (May 2012)
- **Moldova** (UNDP regional office): National Stakeholder Dialogue Meeting (Russia and Ukraine to follow)
- **Tajikistan** (UNDP regional office): supporting the 2012 Regional Forum on Gender Issues on Reproductive and Sexual Health and Rights of Women Living with HIV in Central Asia
- Regional meeting on HIV and gender-based violence (GBV) in **Eastern Europe and Central Asia**, (November 2012)
- **Haiti** (UNDP): planning follow up support focusing on GBV/HIV intersections, including sexual orientation-related violence, which has been identified as a priority issue in Haiti
- **Papua New Guinea** (UNDP): carrying out an institutional capacity assessment on GBV and HIV in four districts
- **Indonesia, Cambodia, Rwanda** (UN Women): provided a national consultant to assist the Gender Coordinator at NAC, to review the current National Strategy and Action Plan on AIDS Response with a gender framework/lens
- **Jamaica** (UNAIDS country office): technical and financial assistance in conducting a high level meeting with the Prime Minister and the Leader of the Opposition resulting in a Declaration of Commitment to Eliminate Stigma, Discrimination and Gender Inequality affecting Jamaica's HIV/AIDS response.

In moving this work forward, partners will also look to utilizing linkages with complimentary programme areas and priorities, including:

- UN Women administration of the UN Trust Fund to End Violence Against Women and Girls
- ATHENA collaboration with HEARD, South Africa: programme on integrating women, girls and gender equality into NSPs on HIV (East and Southern Africa focus, with a potential to expand and replicate in a second region/sub-region)
- Roll-out of UNAIDS Agenda for Women, Girls, Gender Equality and HIV
- UNFPA cluster countries on sexual and reproductive health and rights (SRHR)/maternal health and youth and adolescents
- Roll-out of Compendium of Gender indicators.

3. Conclusion



The Nairobi and Istanbul meetings represented a catalytic moment in countries' on-going efforts to address gender inequality, including gender-based violence, through their HIV response.

Members of the UN Interagency Working Group on Women, Girls, Gender Equality and HIV, (specifically, UNAIDS, UNDP, UNFPA, UN Women, UND and WHO) and civil society partners ATHENA Network, Sonke Gender Justice and the MenEngage Alliance, are committed to continuing this work, both through regional or sub-regional multi-country consultative meetings, and through focused technical support at country level.

Participation in the assessment: country, regional and sectoral representation

Responses to the survey were received from approximately half the delegates from each meeting, including representatives from each of the regions represented at the meetings.

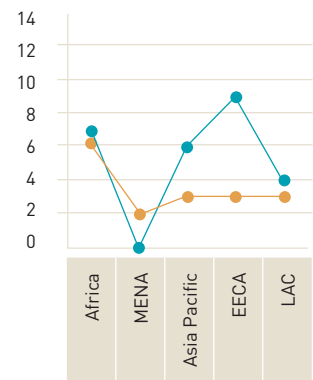
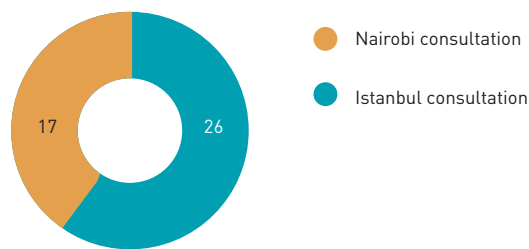


FIGURE 1: NUMBER OF RESPONSES

FIGURE 2: NUMBER OF RESPONSES BY REGION

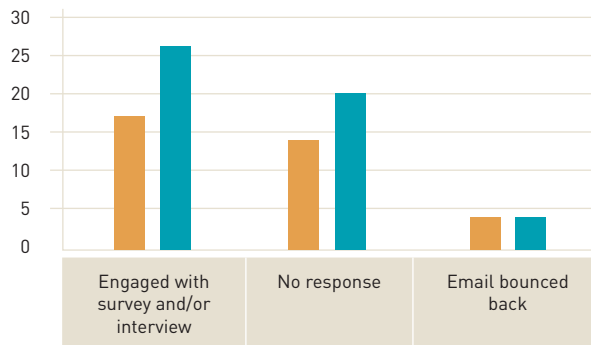


FIGURE 3: NUMBER OF RESPONSES AND NON-RESPONSES

Note: Only one delegate from the MENA region was present at the Istanbul meeting, and she was not able to finalize the development of a country action plan. Similarly, only one country from this region was represented at Nairobi; other regions had a more equitable distribution of countries and delegates.

Meeting participants were invited as members of country delegations composed of between one and five from relevant government Ministries (health, education, gender, etc.), National AIDS Councils, relevant UN agencies' country offices, and civil society, with an emphasis on networks of women living with HIV, and other key affected populations. The delegates were selected with the help of UN country offices. The assessment sought and achieved a reasonable regional and sectoral response through a combination of survey responses and the in-depth interviews.

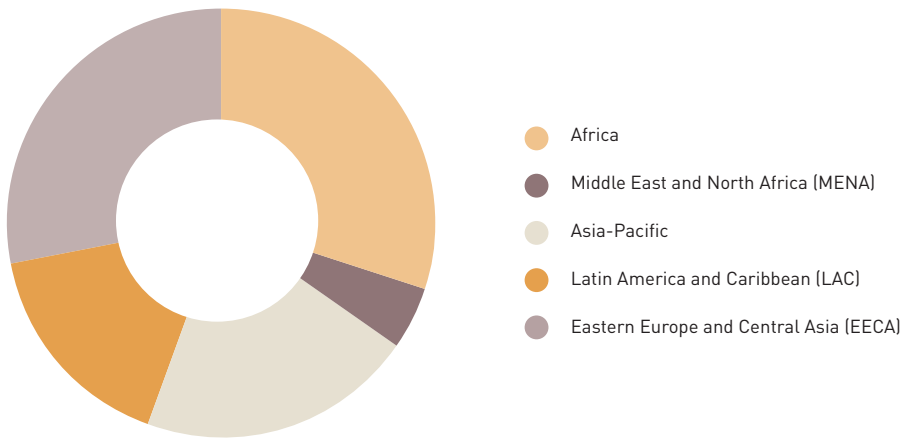


FIGURE 4: COMBINED RESPONDENTS BY REGION

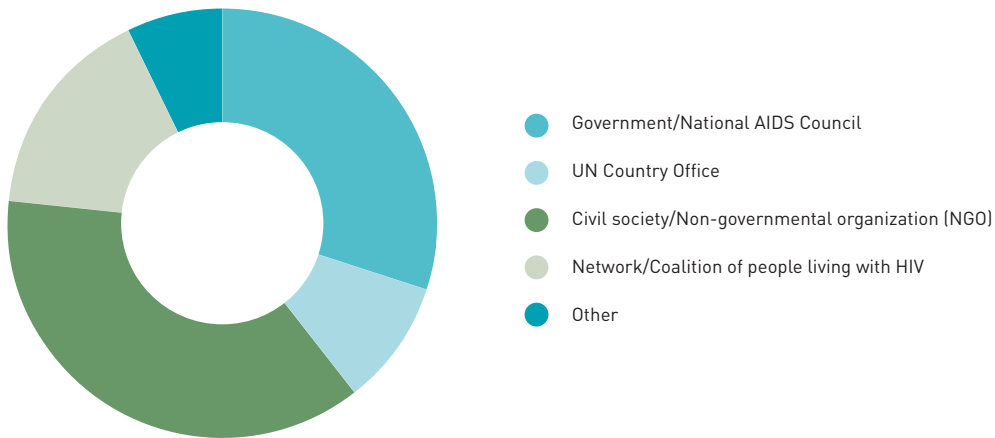


FIGURE 5: COMBINED RESPONDENTS BY SECTOR

Q1

In terms of country representation, most countries were represented in the survey responses, and of those that weren't, the majority were countries with only one delegate at the meetings, where it was felt to be less likely that significant progress had been made on the country action plans (and in the case of Egypt, no country action plan was developed).

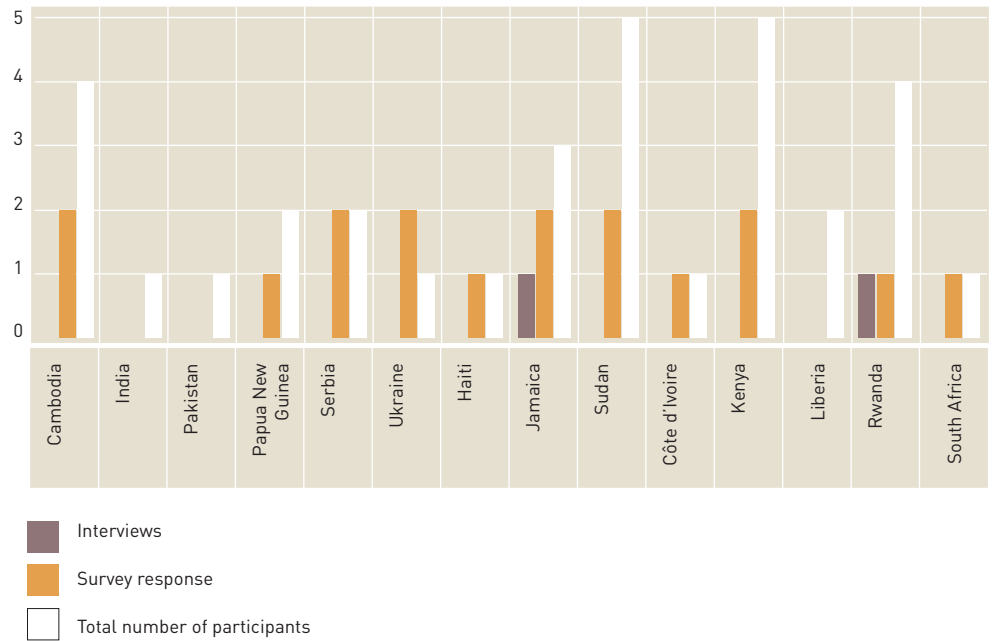


FIGURE 6: NAIROBI MEETING: PARTICIPATION, SURVEY RESPONSES AND INTERVIEWS BY COUNTRY

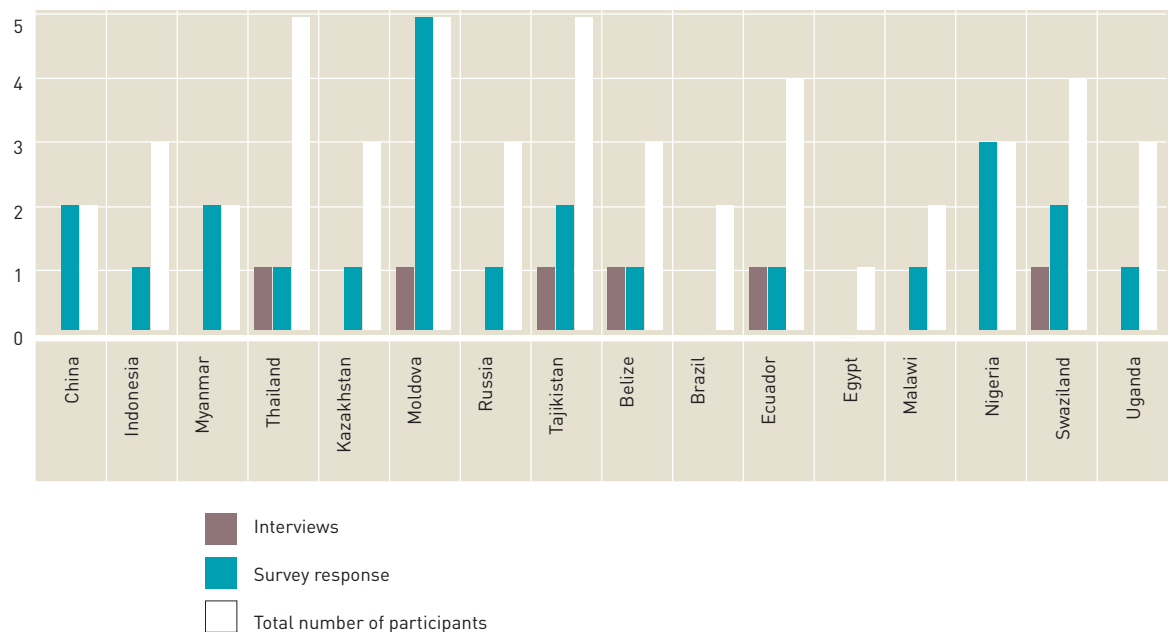


FIGURE 7: ISTANBUL MEETING: PARTICIPATION, SURVEY RESPONSES AND INTERVIEWS BY COUNTRY

Overall assessment of the meetings

The vast majority of respondents reported finding the workshops useful or very useful (see Figure 8).

The key components of the meetings (see Table 2) constituted conceptual (why) and practical (how) sessions on the integration of gender-based violence, engagement of men and boys for gender equality, and the meaningful involvement of women living with HIV into programming through NSPs. Delegates then carried out an analysis of their own country's NSP and developed action plans based on identified strengths and weaknesses, gaps and priority areas. Time was made for cross-regional exchange and tool sharing to inform these processes.

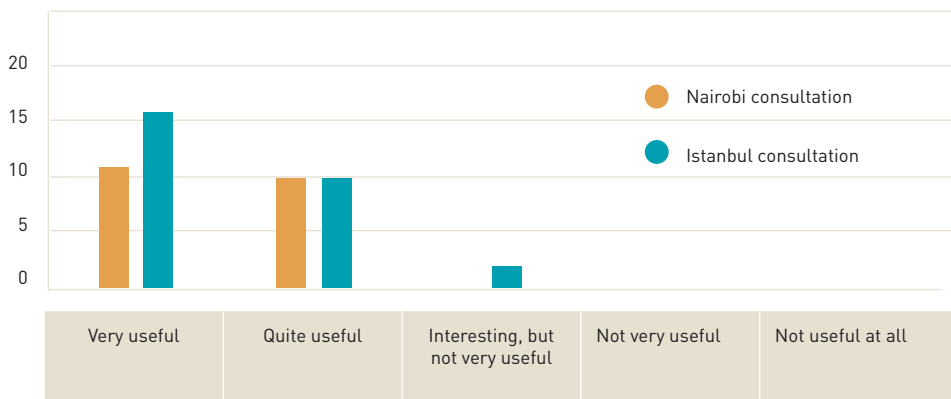


FIGURE 8: FEEDBACK FROM RESPONDENTS

TABLE 2: THE THREE MOST USEFUL COMPONENTS OF THE MEETINGS AS IDENTIFIED BY RESPONDENTS		
	Nairobi	Istanbul
1.	Sessions on why it is important to integrate engagement of men and boys into NSPs on HIV	Tools (policy analysis, gender roadmap, planning frame, etc.)
2.	Sessions on why it is important to integrate gender-based violence into NSPs on HIV	Developing Country Action Plans
3.	Tools and developing country action plans	Sessions on why it is important to integrate strategies for addressing gender-based violence into NSPs on HIV and sessions on how to integrate engagement of men and boys for gender equality into NSP processes



For me it was incredible to have the opportunity to look at myself through the mirror of others' experiences.

ISTANBUL DELEGATE, ECUADOR

Q2

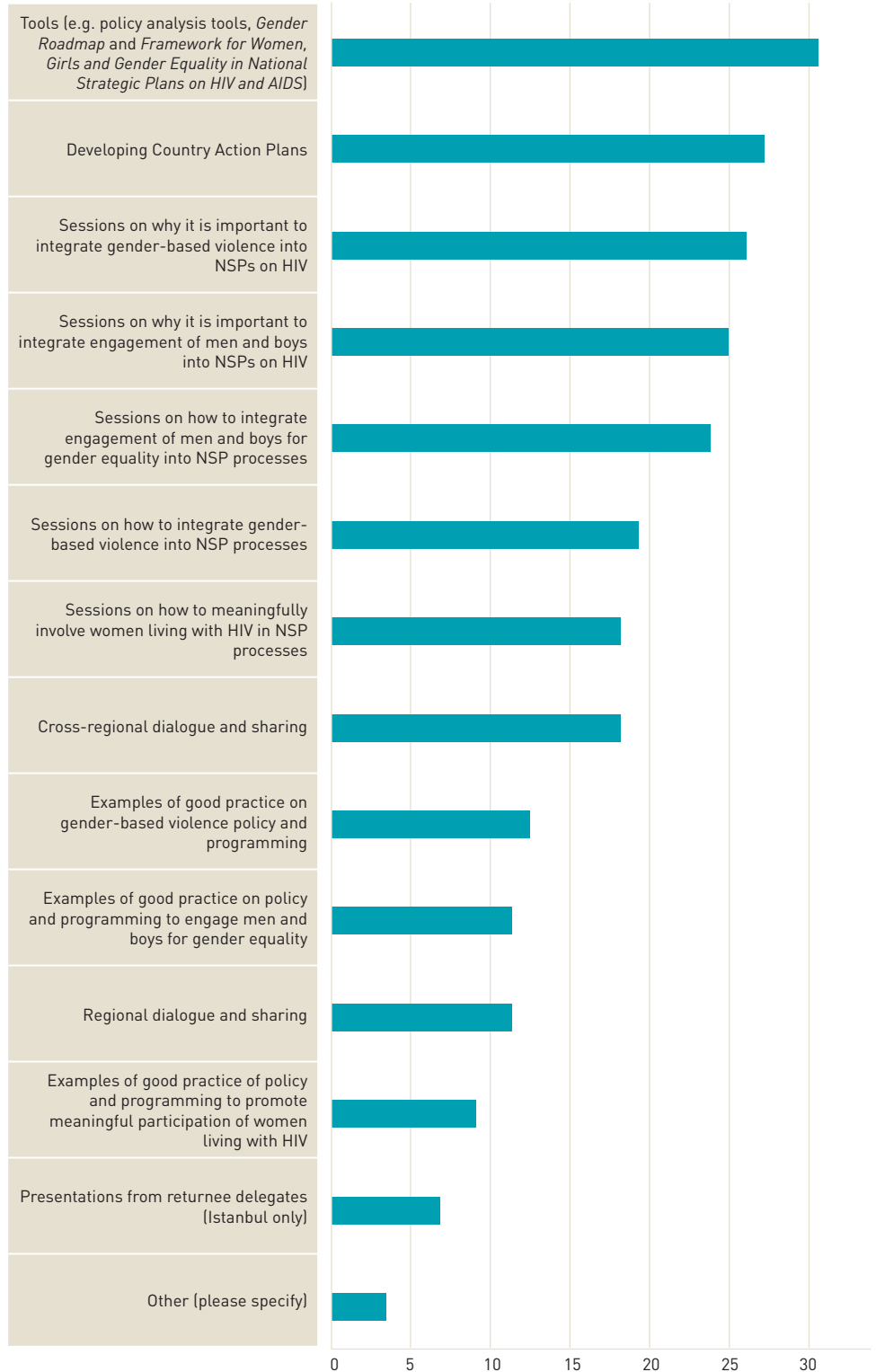


FIGURE 9. MOST USEFUL ELEMENTS OF THE MEETING (COMBINED RESPONSES FROM NAIROBI AND ISTANBUL)

Implementation of action plans

During the meetings, country delegations, made up of a mix of Ministry, National AIDS Council, and civil society were encouraged to develop advocacy plans to address issues and priorities discussed at the meeting at country level. A *Policy Analysis Tool*, developed by ATHENA, in collaboration with HEARD, Salamander Trust and Sonke Gender Justice, and a *Gender Roadmap* developed by UNDP, guided the development of these plans. It was recommended that country action plans include relevant national partners, responsible entities and a time frame for each action.

Of the 21 countries that reported on implementation of their action plans, 19 reported that they had made progress against the plan and/or adapted their plan in collaboration with other key stakeholders at country level. The two that hadn't were China, due to lack of funds, and lack of access to policy makers; and Côte d'Ivoire due to political unrest in the country and the repeated change of ministers and civil servants holding posts relevant to these processes.

Respondents identified strategies and barriers for the successful implementation of their plans (see Table 3).

TABLE 3: STRATEGIES AND BARRIERS TO THE IMPLEMENTATION OF NSPS

Successful strategies	Barriers to implementation
Strategic engagement of key stakeholders; multi-sectoral cooperation and advocacy (17)	Lack of capacity, including financial and human resources (13)
Capacity building among key stakeholders (6)	Lack of interest or support for the issue in general; lack of uptake of the issues in NSPs (10)
Policy analysis (including gender analysis of budgets) to identify gaps/weaknesses (4)	Lack of political will (7)
Participation of women living with HIV, including direct financial support for networks of women living with HIV (4)	Lack of communication and coordination between key actors (e.g. between government and civil society, and/or between members of country delegations)
Economic empowerment programmes for women (2)	Entrenched cultural/traditional attitudes among the general population (including women); stigma and discrimination (4)
Mobilizing and supporting the engagement of men and addressing cultural barriers (2)	Lack of entry points for strategic engagement (2)
Building on strong existing policy frameworks on reproductive health and HIV (1)	Weak national plans and policies on violence against women and HIV – nothing to build on (2)
Resource mobilization (1)	Geographic issues (2)
Outreach through existing services (e.g. ante-natal care), schools and community mobilization (1)	Political instability/conflict (1)
Raising awareness of issues at all levels (1)	Political jurisdiction/status (1)
Providing services for key populations (1)	
Organizational development and systems strengthening (1)	
Use of music as a universal language (1)	

Q4

Partnerships

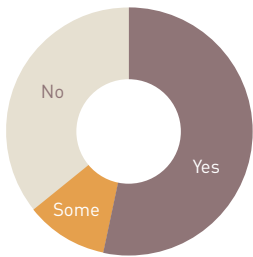



FIGURE 10: COLLABORATION WITH OTHER DELEGATES FROM COUNTRY TEAM

Over half of the respondents had remained in contact with and were continuing to partner with other members of the country delegation. In general, delegates that reported more success than those who were no longer in contact with other members of their delegation. Several respondents reported a need for in-country follow-up meetings among country delegations, or commented that there had been no opportunity for this to happen.

Figure 11 and Table 4 illustrate the different partnerships respondents reported working in.

Nearly half the respondents described either new partnerships or strengthened partnerships resulting from the meeting. New partnerships came about at both government and civil society level, including with legal and law enforcement organizations (e.g. South Sudan) and with UN offices.



We began to include women living with HIV in the research, development of reports and records. We brought them in to conduct surveys and interviews. Recommendations developed by us in different national documents (CEDAW, and HIV in the Workplace) have been developed in conjunction with the participation of women living with HIV. It was the first time to happen in the country.

TAJIKISTAN

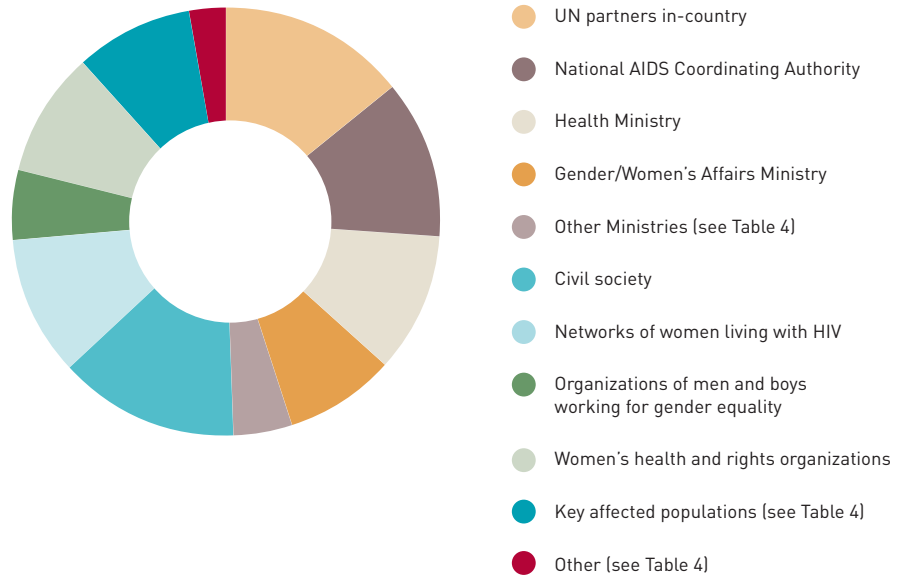


FIGURE 11: PERCENTAGE OF PARTNERSHIPS BY LEVEL THAT RESPONDENTS WENT ON TO DEVELOP AFTER THE MEETING



The National AIDS Authority has engaged one civil society network named Cambodia Community of Women Living with HIV as a key partner in the action plan. The significant change is to provide technical support to them to help them to do resource mobilization.

CAMBODIA



Some partnerships came directly as a result of this meeting. We involved them when we learnt that gender-based violence and HIV needs a multi-sectoral approach.

NAIROBI DELEGATE, SOUTH SUDAN



The partnership with the Woman’s Affairs Bureau came about as a direct result of this meeting as it was the first time the Ministry of Health/NHP had sat with that Bureau and identified activities and areas for collaboration.

NAIROBI DELEGATE, JAMAICA

TABLE 4: ‘OTHER’ PARTNERSHIPS RESPONDENTS WENT ON TO WORK WITH

Partners	Government Ministries	Networks and coalitions
<ul style="list-style-type: none"> ➤ Local government ➤ Survivors of domestic violence ➤ Community Rehabilitation Department ➤ Female HIV service users 	<ul style="list-style-type: none"> ➤ Ministry of Social Protection, Family and Child – working with key affected populations (e.g. injecting drug users (IDU), lesbian, gay, bisexual and transgender (LGBT), and children) ➤ Ministry of Youth ➤ Social Ministry, National Planning Ministry – working with transgender people, men who have sex with men (MSM) network, sex worker organization, IDU organization ➤ Ministry of Interior, Ministry of Legal Affairs and Law Enforcement ➤ Ministry of Labour, Social Protection and Family ➤ Ministry of Health and Social Development of the Russian Federation – working with women affected by domestic violence ➤ Ministry of Culture ➤ Ministry of Labour and Social Protection ➤ Ministry of Education ➤ Committee on Religion (Government standing committee) ➤ Community Development Ministry 	<ul style="list-style-type: none"> ➤ Network of family planning associates ➤ Sex worker networks ➤ Networks of MSM, sexual minority and transgender people ➤ Networks and organizations of people who inject drugs ➤ Gender and key affected population components of the NAC



Our organization provides shelter for both women living with HIV and AIDS and women confronting violence. We provide counselling and empower them. Vocational skills training has also been given. What I have done after the meeting is mainly raise an awareness on the linkages between gender-based violence and HIV to staff, counsellors and the clients.

THAILAND



We have been working with key affected women such as sex workers and HIV infected women in our current project with Global Fund Round (9). We have had more coordination and cooperation with Myanmar Positive Women Network after the meeting. In addition, our organization have planned to focus more on gender-based violence and male involvement in the future. We already planned and submitted the concept note based on our country action plan to the UN Trust Fund in partnership with Myanmar Positive Women Network.

MYANMAR

WORKING WITH NETWORKS OF WOMEN LIVING WITH HIV

A key area of discussion during the meetings was the importance of the central and meaningful involvement of women living with HIV in policy and programme design, development, implementation and monitoring and evaluation. Several countries reported having made significant changes and achievements with regard to the meaningful involvement, visibility and support for networks of women living with and affected by HIV, following on from the meetings, as illustrated in Figure 12 and the following vignettes.²

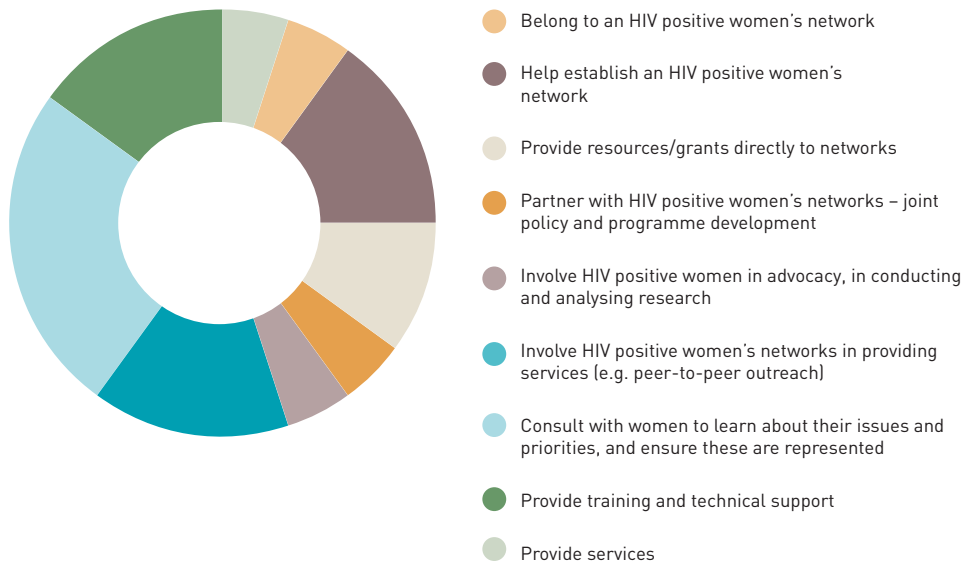


FIGURE 12: PERCENTAGE OF RESPONDENTS WHO AFTER THE MEETING ENGAGED WITH NETWORKS AND ORGANIZATIONS OF WOMEN LIVING WITH HIV BY ROLE



We held a seminar titled “HIV and gender strategy” in Beijing in December 2011. The seminar included women living with HIV to tell their stories, their worries and what they want. This was the first time that a women’s network held a seminar to discuss women’s issues in the area of AIDS.

CHINA

2. In some instances the form of engagement was not new, subsequent to the meeting, and answers referred to an on-going or enhanced form of engagement. ‘Before and after’ scenarios were not always explicit from the survey responses, although the question format did ask specifically about changes that had come about since the meetings.

Technical support

TECHNICAL SUPPORT RECEIVED

Over half (25/43) of the respondents reported receiving some technical support to facilitate implementation of country action plans or other follow-up work around integrating programmes to address gender-based violence and engaging men and boys towards gender equality into their NSPs.

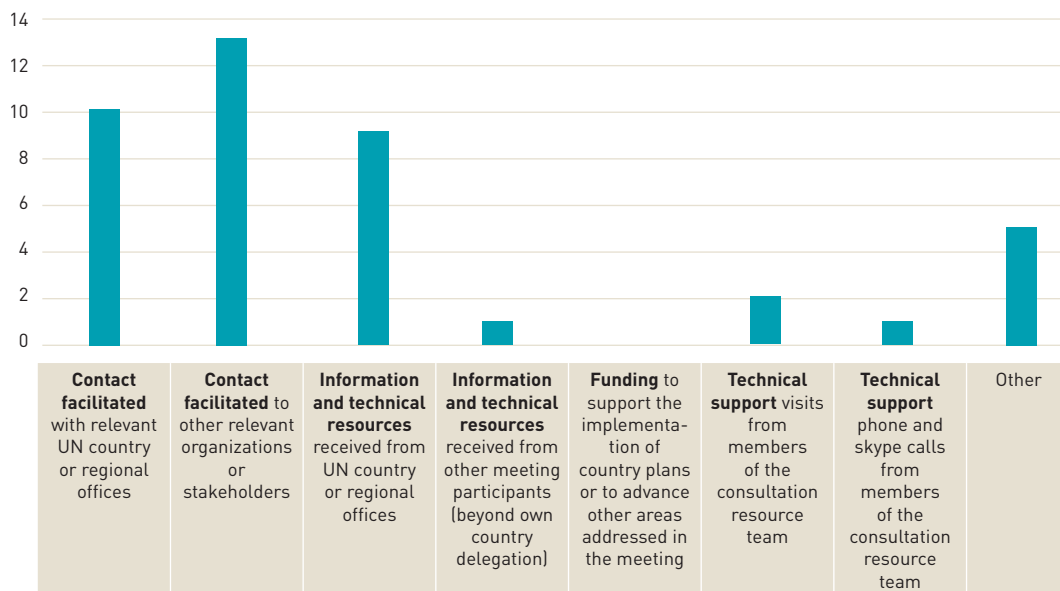


FIGURE 13: NUMBERS OF RESPONDENTS WHO RECEIVED TECHNICAL SUPPORT

'Other' areas included:

- Funding to support a desk review by UN Women
- Emails from members of the consultation resource team
- All actions have been implemented jointly by UNAIDS and UNDP Moldova, under the project *Support for a gender-sensitive and rights-based response to HIV*.



I need technical support on how to engage men and boys. And if there is training anywhere I am ready to pay for it.

NAIROBI DELEGATE,
SOUTH SUDAN



I do not know how to do it. I am being very realistic here, I do not know how to do it as a programme, with three people and the resources according to the weakness of the institutional structure.

ISTANBUL DELEGATE,
ECUADOR

Q5



What shall we do to make change happen? What did other countries do to make change happen?

ISTANBUL DELEGATE, CHINA



Through the European Commission project, my organization provides grants to women living with HIV networks to sensitize communities in women's property rights, provide technical assistance to partners and implementing partners, and further undertake capacity building to HIV positive women's networks to respond to their needs in a rights-based manner as well reporting on their implementation.

KENYA

TECHNICAL SUPPORT NEEDED

Technical support and capacity building needs identified by respondents fell into the following categories:

Research/information/knowledge

- Further knowledge and training on the issues of violence against women, HIV and engaging men and boys as agents of gender equality at national/sub-national levels
- Research on knowledge gaps on issues affecting men and boys
- Situational and policy analyses at country level to see what frameworks are already in place and what is being implemented on the ground
- Regional meetings and exchange programmes
- Examples of good practice from other countries, networks and organizations

Strategic planning and policy and programme development

- Strategic engagement of and coordination among key stakeholders (including men and boys, religious leaders, national and provincial government officials)
- Capacity building on how to address the issues
- Translation of research findings into advocacy plans at national/sub-national levels
- Implementation mechanisms

Gender expertise

- Gender expertise for policy analysis, advocacy and budgeting

Tools/manuals/guidelines

- Technical resources in gender-based violence training and need assessment
- Relevant guidelines, manuals and training curricula

Policy advocacy

- Policy analysis and development skills
- Advocacy skills, especially among women and women living with HIV to lobby/influence policy makers
- Networking skills

Organizational development

- Training for staff and Board
- Better accountability and communication systems (internal and external)
- Better information management systems and documentation of project work

Resource mobilization

- Financial and human resources to implement plans (trainings, advocacy, research, planning meetings etc)
- Funding to support networks of women living with HIV

Rights literacy

- Among women living with and affected by HIV and other key populations, including on access to treatment, care and support, SRHR, maternal and child health, and gender-based violence

Monitoring and evaluation – indicators and systems

- Of policy and programme implementation
- Of behaviour change

Outputs and outcomes

Outputs and outcomes of the meetings were identified by participants as in Table 5 and 6. Fewer longer-term outcomes and impacts could be identified by participants of the Istanbul meeting, due to the shorter time frame for implementation of country action plans.

TABLE 5: OUTPUTS AND OUTCOMES FROM NAIROBI MEETING 2010

Country	Outputs	Outcomes
Cambodia	<ul style="list-style-type: none"> ➤ The gender analysis ➤ The curriculum on gender mainstreaming into the national HIV and AIDS response ➤ The ToT on gender mainstreaming ➤ The advocacy tool for policy makers 	<ul style="list-style-type: none"> ➤ Gender is mainstreamed into principle of the NSP III development ➤ Gender is mainstreamed into the national guideline on M&E ➤ Gender budget is allocated in the HIV and AIDS work plan ➤ National HIV and AIDS budget approved for gender mainstreaming
Kenya	<ul style="list-style-type: none"> ➤ Gender analysis of Kenya constitution to inform the review of the NSP ➤ Increased awareness on the implication of the Kenyan Constitution on HIV ➤ Mapping of HIV positive networks in Kenya ➤ Report of the first national convention of HIV positive women in Kenya 	<ul style="list-style-type: none"> ➤ Increased participation of HIV positive women's issues in Kenya
Jamaica	<ul style="list-style-type: none"> ➤ Stakeholder consultations conducted ➤ Tools developed for gender mainstreaming ➤ Participation in the development of the new HIV/AIDS Strategic Plan 2012–2017 	<ul style="list-style-type: none"> ➤ Gender sensitive indicator added to the NSP
Rwanda	<ul style="list-style-type: none"> ➤ Partnership between NAC and RWAMLEC ➤ Resource mobilization ➤ Advocacy to parliamentarians on the decriminalization of sex work ➤ Booklet for community leaders on HIV gender-based violence, prevention, family planning and gender norms ➤ National awareness raising campaign on ending gender-based violence ➤ Gender review of current NSP 	<ul style="list-style-type: none"> ➤ Increased awareness on the importance of specifically considering issues of men involvement. This could very easily be underestimated in the national HIV response
Serbia	<ul style="list-style-type: none"> ➤ Correction and adaptation of newly advised NSP in the context of gender-based violence 	<ul style="list-style-type: none"> ➤ Even though the revisions have been accepted, there are still obstacles in implementing the strategy in terms of political support and budgetary constraints
South Sudan	<ul style="list-style-type: none"> ➤ Workshops, service provision for survivors and development of the Standard Operating Procedure ➤ Timely services including provision of PEP (HIV post-exposure prophylaxis) to the survivors of gender-based violence ➤ Advocacy for the rights of survivors of violence lead to accessing justice for their cases ➤ Referral pathway formed ➤ Survivor centre opened at Juba National Hospital 	<ul style="list-style-type: none"> ➤ Standard Operating Procedure developed for gender-based violence ➤ Improved service provision and access ➤ Improved access to justice for survivors of gender-based violence
Ukraine	<ul style="list-style-type: none"> ➤ Analytical notes ➤ New research training seminars 	<ul style="list-style-type: none"> ➤ Discussed indicators that reflect a gender perspective in the field of HIV



After the Istanbul meeting, we managed for the first time, to have an open face HIV positive women talking about HIV and gender-based violence issues, at conferences, TV shows and awareness events. After the meeting, we started to think more intensively on creating an HIV positive women's network and their greater involvement in decision making and planning. We started by organizing monthly women club meetings and self support groups.

MOLDOVA

TABLE 6: OUTPUTS AND OUTCOMES FROM ISTANBUL MEETING 2011

Country	Outputs	Outcomes
Belize	<ul style="list-style-type: none"> ➤ Revised draft of [national] plan of action pending cabinet approval 	
China	<ul style="list-style-type: none"> ➤ Lobbied Country Coordinating Mechanism (CCM) to add gender strategy to terms of reference (ToR) during revision of ToR in March 2012; pending outcomes ➤ Seminar on women's issues to be held in Beijing in December 2012 	
Ecuador	<ul style="list-style-type: none"> ➤ Materials on violence and discrimination of women developed for distribution within and outside of the country 	
Indonesia	<ul style="list-style-type: none"> ➤ Desk review on current National Strategy of AIDS response, using gender lenses, to be shared with other countries 	
Kazakhstan	<ul style="list-style-type: none"> ➤ Advocacy workshops for women and girls ➤ A study among girls, law enforcement agencies, crisis centres, parents and women survivors of violence. ➤ Helpline established ➤ Assembled a working meeting with the participation of leaders of men 	<ul style="list-style-type: none"> ➤ Changing direction on gender-sensitive approach
Malawi	<ul style="list-style-type: none"> ➤ Country Action Plan shared and developed at a meeting of the Sub Technical Working Group (TWG) members on Gender, Culture and Human Rights ➤ Task team of the TWG instituted to oversee the research to be carried out by COWLHA on the linkages between gender-based violence and HIV, with the purpose of generating data that will be used for influencing the next National AIDS Framework on gender-based violence programming. 	<ul style="list-style-type: none"> ➤ No tangible outcome can be mentioned at this point; processes on-going
Moldova	<ul style="list-style-type: none"> ➤ Presentations and workshops on HIV positive women's leadership and gender-based violence included in National AIDS Conference ➤ Conference resolution stipulates the need for continued efforts on prevention of mother-to-child transmission (PMTCT) through prevention and reproductive health programmes, and complex comprehensive services for key populations. This resolution will serve as a base for future advocacy actions on more specific issues ➤ One-day training seminar held for gender focal points in all key Ministries and central public administration in the area of non-discrimination, human rights and HIV ➤ Four roundtables with the involvement of local public administration, civil society organizations, central public administration (MLSPF and MoH). ➤ Three trainings for strengthening capacities of local public administration in four key regions to develop local action plans for preventing HIV and for eliminating stigma and discrimination towards persons living or affected by HIV, with due consideration of gender-associated vulnerabilities (particularly of rural women and MSM). 	<ul style="list-style-type: none"> ➤ Establishment of a women living with HIV initiative and advocacy task force within the Moldovan League of People Living with HIV

TABLE 6: OUTPUTS AND OUTCOMES FROM ISTANBUL MEETING 2011

Country	Outputs	Outcomes
	<ul style="list-style-type: none"> ➤ Awareness raising and informing the members of the League about the importance gender-based violence issues at regular meetings and at General Assembly, as well as through bulletins on website ➤ Changes in the report about the survey, <i>Women's vulnerability to HIV infection in Transnistria</i>, conducted by our organization in the second half of last year commissioned by UNAIDS in Moldova ➤ Results include activities organized at the local level, consultation on gender identity, meetings with representatives of the medical and social structures, management education, and seminars on gender – one unit from each ministry. 	
Myanmar	<ul style="list-style-type: none"> ➤ Strategies for addressing gender gaps in current NSP were identified ➤ Limited role of HIV positive women leadership in CCM and NSP processes was recognized by UNAIDS and some CCM members through our advocacy meetings and dissemination of our country action plans to organizations working in HIV ➤ Women's organizations have more focus on gender-based violence and male involvement as separate programme ➤ The innovative strategy was developed according to our country action plan which will be implemented by our organization in closed partnership with Myanmar Positive Women Network ➤ Advocacy meeting, briefing information sharing, advocacy tools 	<ul style="list-style-type: none"> ➤ The outcome will be the process of women living with HIV leadership in CCM and NSP in 2014 ➤ To add a gender-sensitive indicator to our NSP
Nigeria	<ul style="list-style-type: none"> ➤ Held a consultative meeting that included Governments and all the civil society groups; the media was also represented. We advocated for the funding needed and pushed for the implementation of the action plan 	
Russia	<ul style="list-style-type: none"> ➤ Working group was created for writing the draft law on domestic violence ➤ Roundtable was held with representatives of the UN and the Russian authorities; working group represented and reached consensus on the need for the law 	<ul style="list-style-type: none"> ➤ Participation in the consultation was the impetus for change in Russian law
Tajikistan	<ul style="list-style-type: none"> ➤ Report to CEDAW and consultation on the National Policy of HIV/AIDS in the Workplace, involving women living with HIV and women victims of violence ➤ Joint project proposal developed by Tajik and Kazakh Networks of Women Living with HIV and submitted to the UN Trust Fund (pending approval/selection) ➤ Regional forum of women living with HIV in Central Asia proposed as part of our plan to involve vulnerable women and men and boys 	<ul style="list-style-type: none"> ➤ Increased awareness and participation in decision making by women living with HIV; increased awareness of gender issues on the part of the Government and NGOs ➤ Improved status of vulnerable women in the country

Lessons learnt

Survey respondents from both consultations identified the following lessons learnt and the follow-up efforts to implement their country actions plans and on-going advocacy in this area.

1. Gender mainstreaming in NSPs needs to be scaled up, including comprehensive programming on gender-based violence

- Need for integrated/mainstreamed strategies to engage men and boys in advancing gender equality rather than stand-alone strategies



Gender-based violence was for a long time ignored, being considered as a second place issue. Today, it is important to put this issue on our (governmental and non-governmental institutions) agenda and to make particular actions which will reduce gender-based violence.

ISTANBUL DELEGATE, MOLDOVA



There is a need to strengthen the capacity of people whose work is primarily in the HIV or gender-based violence area. Collaborative and strategic partnerships need to be developed in order to strengthen work at the nexus of gender-based violence and HIV.

ISTANBUL DELEGATE, MOLDOVA

2. The importance of strong partnerships and coordination at country level

- Important to engage a range of actors
- Need for both government and civil society mobilization
- Intra- and inter-ministerial collaboration needed
- Need to promote participation and responsibility
- Capacity building is needed among all stakeholders
- Partnerships and teams working on these issues should ensure gender expertise

3. The importance of engaging men to address gender-based violence

- Addressing cultural stereotypes and gender norms
- Engaging local leaders

4. The importance of engaging women living with HIV and mobilizing a broad range of civil society perspectives

- A community perspective is imperative to inform strong policy and laws
- HIV positive women's organizations and networks need support through direct funding and capacity building



For the involvement of women living with HIV in this kind of work it is necessary to carry out pre-orientation workshops, building capacity at the national level and an introduction to already existing work.

ISTANBUL DELEGATE, TAJIKISTAN



Community-level consultation is integral to the success of a country action plan.

ISTANBUL DELEGATE, BELIZE

Sharing of lessons from across regions is useful towards country-specific learning processes.

ISTANBUL DELEGATE, MALAWI



Addressing gender-based violence and HIV requires tackling sometimes long-held cultural and predominant social understandings of gender roles. Men and boys can and must be involved and engaged in eliminating gender-based violence.

ISTANBUL DELEGATE, MOLDOVA

5. A need for greater awareness of the links between HIV and gender-based violence at all levels

- On-going advocacy and visibility needed
- Raise public awareness through large-scale information campaigns

6. While the issues have global resonance, the response needs to be tailored to country and regional contexts

- Sharing intra- and inter-regional best practice and experience is important
- Countries need to carry out situational and policy analyses
- Need for robust country data

7. Need to strengthen political will and resource mobilization around the issues

- Funding remains a challenge
- Gender budgeting and resource allocation needed



Constant visibility and advocacy has to be maintained, with funding to keep issues on the political agenda... but funding remains a challenge.

NAIROBI DELEGATE, JAMAICA

Q8



The main goal at this point is the **creation and promotion of the law** on domestic violence. Our activities will include consultations with civil society and representatives of the Government, the mobilization of local communities through educational actions, and cooperation with UN agencies.

ISTANBUL DELEGATE, RUSSIA



We will collect the data to show that gender-based violence is the cause and consequence of HIV. We will hold a meeting to communicate our data and our thoughts. We need to write technical guidance to inform women of their rights and what they can do if they meet with violence. We need to support the women who need help.

ISTANBUL DELEGATE, CHINA

Next steps

Respondents were asked to identify their next steps in terms of implementation of their country action plans, or related advocacy or policy and programme development. Approximately half the survey respondents gave an answer to this question (most indicating multiple next steps) indicating that there is adequate momentum for the in-country work.

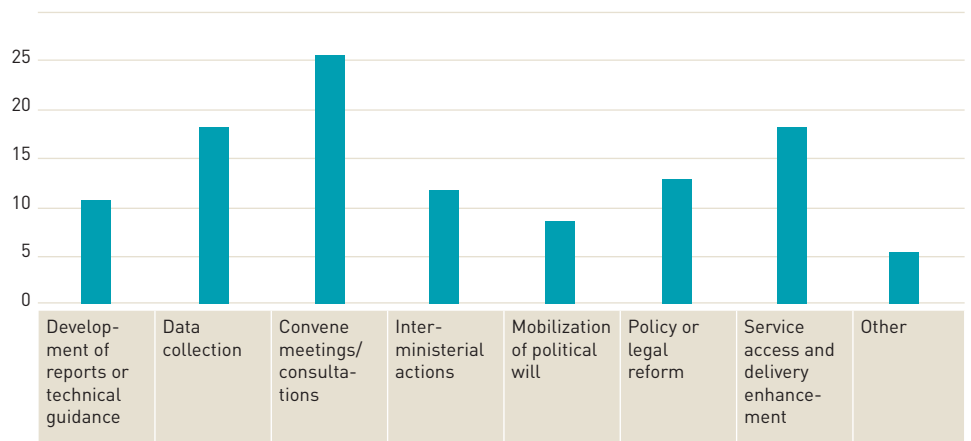


FIGURE 14: SUMMARY OF NEXT STEPS BY CATEGORY, IDENTIFIED BY RESPONDENTS

'Other' responses included:

- Gender responsive planning and budgeting for the AIDS response
- Sharing of training manuals and guidelines for men's engagement for gender equality
- The involvement of local leaders (key persons in rural areas and towns)
- Promotion of the law on domestic violence
- Informing through seminars, workshops, study visits, etc. offered at all levels, ranging from civil society leaders to local officials.



We need **services** in place because we have policies but just on papers and not operational. We also need to actively involve men – not as beneficiaries only but as actors as well.

NAIROBI DELEGATE, SOUTH SUDAN

FOSTERING NEW NETWORKS FOR WOMEN LIVING WITH HIV



Our next step is to establish a network of HIV positive women who are willing to be actively involved in the promotion of HIV positive women's rights, including in the context of gender-based violence. For this we will definitely need the support of other networks in this area that are willing to share their experience and best practices. The network will need some funding in order to register the network and support it to become independent and strong enough to use its own resources to develop. We have outlined about 10 women activists who will participate at a roundtable in April, which hopefully will represent the keystone for a strong initiative that will promote the rights of HIV positive women and also strategically develop a plan for engaging men and boys, and also be key persons in the reduction of gender-based violence and protection of women in the context of HIV.

MOLDOVA

BUILDING PARTNERSHIPS WITH NETWORKS OF WOMEN LIVING WITH HIV



We have planned to implement three main intervention in our proposed concept note submitted to the UN Trust Fund: preventing violence; improving service delivery and strengthening the institutional response.

The proposed programme is designed to promote understanding in SRHR and prevention of gender based violence among vulnerable women especially women and girls living with HIV and sex workers. The partnership with Myanmar Positive Women Network is the main strategy to empower women and ensure their rights so that they can protect themselves from infection, overcome stigma and gain greater access to treatment and care. This programme will engage and strengthen the networks of women living with HIV at community and national levels so that they can represent themselves and be engaged in the NSP process.

Understanding the gender dimensions of HIV, the links between gender-based violence and HIV among local organizations, women living with HIV and stakeholders will support the integration of gender inequality issues into the NSP. It helps to foster a sustainable response to HIV and AIDS. Building partnerships, coalitions and networks among the local networks will support to address gender-based violence in national strategic planning on HIV/AIDS. It can help the understanding of the integration of gender-based violence into local organizations' current HIV programmes. We envision that the leadership role of women living with HIV will be shown in the National Technical and Strategic Working Group and M-CCM in 2014 and that gender-based violence will be covered under the upcoming NSP on HIV/AIDS (2015–2020).

MYANMAR



The country action plan is implementing now, therefore, the **monitoring and evaluation** is the top priority to measure the progress and effectiveness, as well as lessons learnt and best practice that could influence policy and strategy decisions to scale up the effective interventions.

NAIROBI DELEGATE, CAMBODIA

Q9



People who make the decisions are not aware of human rights and HIV issues – there needs to be high level training for the big bosses such as the NAC Director, etc. This should be organized as training and not consultations and at the regional level.

NAIROBI DELEGATE, RWANDA

Final recommendations and comments³

Composition of delegations

- Include a gender expert
- Ensure a mix of civil society, government Ministries and community groups, especially networks of women living with HIV
- Government representation could include Ministries of education, community development and justice

Regular or repeat meetings should be held at international, regional and national levels where possible

- Monitoring and evaluation of progress needed
- Hold meetings at regional and country level, focused on the specific legislative and policy contexts
- Hold in-country follow-up meetings
- On-going capacity strengthening around the issues

Pre- and post-consultation

- Country teams should have more time to consult with communities prior to engagement
- Evaluation process provides a good opportunity for personal and organizational reflection and re-evaluation

Meetings should include

- More practical examples, testimonials and audio-visuals

Timing of meetings

- Month of December is not great because it coincides with the 16 Days of Violence initiative



My participation in the Nairobi and Istanbul consultations, had a significant impact on the improvement of the NSP for HIV, and planning for future activities. I believe that these consultations should continue in the future.

NAIROBI DELEGATE, SERBIA



Thanks for your assessment for the representation from Myanmar. It is very useful and it helps to re-assess myself and how we can implement the country action plan or not. I am proud of myself.

ISTANBUL DELEGATE, MYANMAR



I have put my heart forward to address the issue and therefore, I need more personal and professional capacity building programmes.

NAIROBI DELEGATE, PAPUA NEW GUINEA

3. Refers to recommendations and comments made by survey respondents, not by report authors.

