



## 'A WIN FOR WOMEN IS A WIN FOR ALL'

Update on the UNAIDS Agenda for Accelerated Country Action for Women, Girls, Gender Equality and HIV and the Universal Access for Women and Girls Now! initiative

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*"With solid partnerships, dedicated resources, and unwavering political leadership, we can build inclusive and equitable societies where it is widely understood that a win for women is a win for all."*

UNDP Administrator Helen Clark, 30 March 2010

*"Violence against women is unacceptable and must not be tolerated. By robbing them of their dignity, we are losing the opportunity to tap half the potential of mankind to achieve the Millennium Development Goals. Women and girls are not victims, they are the driving force that brings about social transformation."*

UNAIDS Executive Director Michel Sidibe, 2 March 2010

It is now widely accepted that violations of human rights, especially women's rights, hamper HIV prevention efforts and impede access to HIV treatment, care and support. Human rights violations also undermine governments' abilities to realize commitments made in the Millennium Declaration and to achieve the Millennium Development Goals. The Joint UN Programme on HIV/AIDS (UNAIDS) is firmly committed to supporting and expanding the global effort to empowering women and girls, safeguarding their human rights, preventing HIV and addressing the challenges that accompany the pandemic at individual, community, country, regional and global levels. Bringing broader attention to the intersection of HIV, gender and sexuality is essential to success, along with engaging men and boys in the effort to challenge harmful gender norms and reverse the HIV epidemic.

In the new *UNAIDS Agenda for Accelerated Country Action for Women, Girls, Gender Equality and HIV (the UNAIDS Agenda for Women and Girls)*, UNAIDS and UNIFEM have pledged their commitment to intensify efforts to deliver concrete and sustainable results in this realm. The roll-out of the *Agenda for*

*Women and Girls* is now well underway. UNAIDS and UNIFEM are implementing the *UNAIDS Agenda for Women and Girls* in partnership with governments; organizations of women living with HIV and other women's rights organizations; HIV service providers and advocacy networks; donors; and other stakeholders at the local, national and international levels. Indeed, the Global Task Force that developed the *UNAIDS Agenda for Women and Girls* was comprised of representatives of civil society, including women's rights and HIV organizations; government; donors and United Nations agencies.

Human rights principles guide the *UNAIDS Agenda for Women and Girls*. The XVIII International AIDS Conference, with the theme of "Rights Here, Right Now," constitutes an important opportunity to engage policy makers, leaders and the HIV community on issues of gender equality and HIV. Without sufficient attention to human rights, and especially to the rights of women and girls, AIDS responses will not fully accomplish the goal of halting and reversing the epidemic: stigma and discrimination will continue to prevent people from accessing treatment; women will continue to refrain from getting

### CONTACT INFORMATION

For more information on the UNAIDS Agenda for Accelerated Country Action for Women, Girls, Gender Equality and HIV, please contact **Jantine Jacobi**, Head of Gender Unit, UNAIDS Secretariat. E-mail: [jacobij@unaids.org](mailto:jacobij@unaids.org)

For more information on the Universal Access for Women and Girls Now! initiative, please contact **Susana Fried**, Senior Gender Advisor, United Nations Development Programme HIV/AIDS Practice, Bureau for Development Policy at [susana.fried@undp.org](mailto:susana.fried@undp.org).

tested for fear of violence or other reprisals by their families and community if they test positive; and men who have sex with men and transgender people will continue to avoid HIV outreach and prevention efforts for fear of stigma, discrimination and violence.

The *UNAIDS Agenda for Women and Girls* focuses on three inter-linked areas of activity: 1) strengthening strategic guidance and support to national partners to “know their epidemic and response” in order to effectively meet the needs of women and girls; 2) helping countries ensure that national HIV and development strategies, operational plans, monitoring and evaluation frameworks and associated budgets address the needs

and rights of women and girls; and 3) fostering advocacy, capacity-strengthening and the mobilization of resources to address the needs and rights of women and girls.

The *UNAIDS Agenda for Women and Girls* highlights strategic country-level actions. It is intended to foster broad partnerships that engage women’s ministries, ministries of gender, ministries of health, national AIDS authorities, reproductive health networks, women’s rights advocates, organizations of women living with HIV, organizations providing HIV services and other stakeholders. It is also designed to build on existing initiatives, such as the **UN Secretary-General’s UNiTE to End Violence against Women** campaign.

HIGHLIGHTS OF UA NOW! PROJECTS IN ETHIOPIA, INDIA, KENYA, MADAGASCAR AND ZAMBIA

“The Gender and HIV project is one of the first in Madagascar and the results of the analysis of the vulnerability of women and girls in two pilot regions are used to guide future actions towards women and girls during the next mid-term review of the National Strategic Plan 2007-2011 on HIV/AIDS in Madagascar.”

Clarimond Raveloson, Madagascar UA Now! Country Task Team Member, UNAIDS, Madagascar, June 2010

UA Now! interventions are evidence-based and are informed by multi-stakeholder assessments at country level. In India, UA Now! has a particularly strong research focus. The India office of the International Center for Research on Women (ICRW) is assessing barriers that prevent women from accessing HIV services, with a focus on female sex workers and wives of migrant men. There is an urgent need to address heterosexual transmission of HIV in India, especially among key populations. The proportion of Asian women to Asian men living with HIV doubled between 2000 and 2008, mainly as a result of sexual transmission in long-term intimate partnerships. ICRW prioritised wives of migrant men after a literature review indicated there was very little data on how to work with these populations. ICRW also identified female sex workers – among whom HIV prevalence is 5.1% – as a group requiring increased attention after finding that existing studies of female sex workers in India did not comprehensively examine barriers impeding their access to HIV prevention, treatment, care and support. ICRW and other stakeholders will use research findings to develop an action plan with the aim of accelerating universal access for all women and girls in India and shaping relevant components of India’s *National AIDS Control Programme (NACP IV)*.

Another important feature of UA Now! is its emphasis on ensuring sustainability by building on national gender, development, human rights and public health policies and processes. This ranges from national AIDS strategies to health sector plans; from gender equality plans to poverty reduction strategies and plans. In some countries, UA Now! specifically seeks to contribute to the development and implementation of gender-specific elements of national AIDS strategies. In **Zambia**, for example, the National AIDS Council (NAC) is working with a range of stakeholders to expand support for integrating gender into the country’s *National AIDS Strategic Framework (2011-2015) (NASF)*. NAC recruited a gender advisor who is working on including the concerns of women and girls in the first draft of the *NASF*. A subsection about universal access for women and girls expresses the government’s commitment to integrating gender into all parts of its strategy. The draft also calls for targeted HIV programming for women and girls. Similarly, in **Ethiopia**, the Federal HIV Prevention and Control Office intends to use the findings of an assessment of barriers to universal access for women and girls to inform both the *National AIDS Strategy and Plan* and the *Plan for Accelerated and Sustained Development to End Poverty (2011-2015)*.

In **Kenya**, UA Now! implementing partner Liverpool VCT, Care and Treatment (LVCT) is working to increase civil society and public sector implementers’ capacity to address gender and HIV. This is expected to improve the overall response to problems such as a lack of concrete guidelines on how to make policies and programmes responsive to the specific needs of women and girls. For example, the Kenyan government is utilizing LVCT technical assistance to develop HIV-related health service delivery standards and guidelines, and also to enhance quality assurance systems for HIV-related health services. One outcome of the collaboration with LVCT has been a plan to scale up comprehensive post-rape care services in health facilities. LVCT has also supported the development of national guidelines on the medical management of rape and has contributed key inputs to Kenya’s *National HIV Strategic Plan III and its first National Plan of Operations*.

**Madagascar’s** implementing partner, Action Socio Sanitaire Organisation Secours (ASOS), is a civil society organization working in seventeen of the country’s twenty-two regions on capacity-building, health and development. Under UA Now! ASOS organized two regional consultations in the country. The aim was to understand key barriers to universal access for women and girls and devise appropriate and sustainable responses. Participants in the consultations emphasized the importance of livelihood support for women and girls to be able to protect themselves from HIV.

UA NOW!’S PROJECTS, PARTICIPATING COUNTRIES AND IMPLEMENTING PARTNERS

PROJECT	COUNTRY	IMPLEMENTING PARTNER
Universal Access for Women and Girls in Ethiopia Now!	Ethiopia	The Federal HIV Prevention and Control Office
Universal Access for Women and Girls Now – India Study	India	International Center for Research on Women
Strengthening Kenya’s National AIDS Strategic Plan and First National Plan of Operations	Kenya	Liverpool VCT, Care and Treatment
Appui a la Reduction de la Vulnerabilite des Femmes et des Files Face au VIH/ SIDA dans les Regions d’Androy et d’Atsimo Andrefana  (Reducing Women’s and Girls’ Vulnerability to HIV in the Regions of Androy and Astimo Andrefana)	Madagascar	Action Socio Sanitaire Organization Secours
Addressing Gender-Based Violence, Stigma, and Discrimination for Universal Access for Women and Girls in Malawi	Malawi	The Coalition of Women Living with HIV and AIDS
Enhancing Empowerment and Social Protection for Women and Girls Aimed at Reducing Gender-Based Violence, Stigma, Discrimination and Punitive Cultural Laws that Make them Vulnerable to HIV Acquisition	Namibia	The Legal Assistance Center
Protection of Women and Girls against Violence and Restoration of Justice to Victims of Violence and Vulnerable Women in Rwanda	Rwanda	The Forum for Activists Against HIV/AIDS Scourge
Improving Universal Access for Women and Girls in Swaziland	Swaziland	Gender Unit, Deputy Prime Minister’s Office
Supporting Women and Girls affected by GBV, Trafficking and Sexual Abuse and Exploitation to Access Protection and HIV related Services in Iringa and Dar es Salaam Regions	Tanzania	AMREF Tanzania
Support to the Integration of Gender in the NASF 2011-2015	Zambia	The National AIDS Council
Global Advocacy	Geneva (global)	World YWCA



Rwanda’s most recent Demographic and Health Survey (DHS) indicates a distinct gender disparity in terms of HIV prevalence: 3.6% of Rwandan women aged 15-49 are living with HIV, in comparison to 2.3% of men in that age range. Overall HIV prevalence among people aged 15-49 is 3%. Although HIV prevalence among young people aged 15-24 years is lower than in the general population, it is higher among young women than young men. The disparity is especially striking in urban areas, where young women and young men aged 15-24 have 3.9% and 1.1% HIV prevalence, respectively. According to the Rwandan government’s most recent report to the United Nations General Assembly (UNGASS), the populations most at risk of contracting HIV include sero-discordant couples, sex workers, prisoners, truck drivers, and men who have sex with men.

In 2009, 77% of HIV-positive Rwandans who needed HIV treatment were receiving it. While statistics show that in 2009, 61% of patients in HIV treatment centers were women, persistently high levels of violence against women and violations of women’s property rights often limit women’s ability to continue taking HIV treatment. Rwanda’s *Economic and Poverty Reduction Strategy* includes, among its objectives, improving access of vulnerable people, including those living with and affected by HIV. UA Now! in Rwanda contributes to the implementation of the REPRS through providing such support to women living with HIV.

UA Now!’s implementing partner in Rwanda, the Forum of Activists against AIDS Scourge, works to protect women and girls from gender-based violence, including sexual violence; to increase awareness of laws that protect property rights; and to pursue justice for women who have experienced gender-based violence or violations of their property rights. FAAS addresses these complex challenges through a combination of training and paralegal support services, including supporting a legal clinic for women living with HIV who face violence

or property rights abuses. In addition, FAAS has initiated a training program for the police, judges, advocates, prosecutors, and community leaders. The aim is to enable these actors to respond better to the claims of women and girls living with HIV.

**DEEPENING COMMITMENTS TO AND ACTION FOR WOMEN AND GIRLS IN UNAIDS OUTCOME FRAMEWORK 2009-2011**

The *Joint Action for Results: UNAIDS Outcome Framework (2009-2011)* sets an action agenda with ten priority areas for achieving universal access and the Millennium Development Goals. In April 2010, the UNAIDS Committee of Cosponsoring Organizations endorsed *the inclusion of UNAIDS Action Framework: Addressing Women, Girls, Gender Equality and HIV* and the *UNAIDS Agenda for Accelerated Country Action for Women, Girls, Gender Equality and HIV* in the priority area on ‘*Stopping Violence against Women and Girls*’. The revised priority area states that ‘*We can meet the HIV needs of women and girls and can stop sexual and gender-based violence: by building on the synergies between the gender and AIDS response for positive change to the lives of women and girls and by utilizing opportunities to comprehensively respond to sexual and gender-based violence*.’ This expanded outcome area will allow UNAIDS to leverage the extensive political commitment for the *UNAIDS Agenda for Women and Girls* and deliver on its ambitious targets. Moreover, joint action around the *UNAIDS Agenda for Women and Girls* presents an excellent opportunity to demonstrate the strategic value and responsiveness of the UN system in meeting the needs of women and girls in the context of HIV. Gender-based violence against women and girls, including sexual violence, will remain visible as an important entry point to support social change, and in turn address other factors that affect women and girls in the context of HIV.

**ADDRESSING HOW HIV INTERSECTS WITH VIOLENCE AGAINST WOMEN AND GIRLS**

Several United Nations Agencies are producing tools and activities to better understand and address the relationship between HIV and violence against women and girls:

- WHO, on behalf of the Interagency Working Group on Women, Girls, Gender Equality and HIV, convened a working group of experts and practitioners, whose work focuses on understanding and intervening on the linkages between violence against women and HIV. The meeting: a) reviewed the current level of evidence supporting different strategies that link violence against women and HIV and assess their relevance for program development; b) developed policy and programmatic recommendations for national and international HIV/AIDS programmes, and c) developed an agenda for future programme development, evaluation and research, including identifying steps for testing and scaling up ‘evidence-based’ interventions. Based on the principles identified and case studies presented at the meeting, **a programming guide for addressing the intersection of violence against women and HIV** will be designed, following the logical steps in programme planning and design in order to help programme planners, and those supporting programmes in this area to develop an evidence-based approach to programme development.
- UNFPA, with the Interagency Working Group, commissioned the International Program on Health and Human Rights at the Harvard School of Public Health, to compile and assess evidence about the intersection of HIV and gender-based violence. The report examines peer reviewed literature on the topic in the period 2000-2009, identifies gaps, and sets priorities for research accordingly. It also proposes a framework and key messages for donors, policy-makers, programme planners and researchers to incorporate action on gender-based violence into HIV programming.

**UA NOW!’S FRAMEWORK AND METHODOLOGY**

UA Now! operates within the framework of the *UNAIDS Agenda for Women and Girls* and its commitment to deliver results for women and girls through country-led, country-driven and multi-stakeholder processes. It capitalises on the important role that the UN Joint Teams on AIDS play in coordinating and aligning UN support for national HIV responses in partnership with government, civil society, donors and other stakeholders. UA Now! has generated significant interest among UN Joint Teams, UNAIDS Country Coordinators, and UNDP country offices and has generated strong commitment from national partners. The initiative depends on robust partnerships with key actors in UA Now! participating countries, including government agencies, organizations of women living with HIV, and women’s rights and other civil society organizations. With these partnerships, UA Now! moves priority initiatives forward with sufficient political will and financial and technical resources to deliver results for women and girls.

UNDP is also partnering with the World YWCA to carry out advocacy in international fora, and to implement a learning component of UA Now! Joint activities include an intergenerational dialogue at the 54<sup>th</sup> session of the Commission on the Status of Women/Beijing + 15 meeting, as well as an upcoming satellite session at the XVIII International AIDS conference, where several UA Now! implementing partners will share lessons learned from the inception and early implementation phases. In November 2010, UA Now! implementing partners and other key stakeholders will meet in Lusaka, Zambia, to share insights with each other and contribute to planning the second phase of UA Now!

*“Investing in women and girls could well be the breakthrough strategy we need to accelerate progress on the MDGs.”*

UNDP Administrator Helen Clark, 2 March 2010

**HIGHLIGHTS: UA NOW! IN EAST AND SOUTHERN AFRICA**

*“... UA Now! project is an eye opener to me and also to most women living with HIV and AIDS. ... UA Now! has helped the community to identify causes and effects of GBV and how they can help eliminate all forms of GBV. The project has built capacity of women living with HIV and AIDS to fight gender-based violence and HIV/AIDS-related stigma and discrimination within their communities.*

*The project has also generated interest from the Malawi Police Force who has structures (victim support units) to support victims of gender-based violence asking for partnership with COWLHA so that they should be incorporated into the project through community policing agencies that are operational at traditional authority level.”*

Ulanda Chilezi, President, Coalition of Women Living with HIV and AIDS (COWLHA), June 2010

Although causes of women’s vulnerability to HIV differ across and within regions, gender-based violence and other violations of human rights are notable factors in many settings, particularly in sub-Saharan Africa. Women’s and girls’ socio-economic and legal disadvantages also continue to drive the epidemic in sub-Saharan Africa and hamper an effective response. UA Now! projects in Malawi, Namibia and Rwanda therefore place the human rights of women and girls at the core of their efforts.

**Malawi** remains at the epicenter of the global HIV pandemic despite the stabilization of HIV prevalence at 12%. According to Malawi’s 2004 *Demographic and Health Survey*, HIV prevalence among women aged 15-49 is 13.3%, while only 10.2% of men in the same age group are living with HIV. There is also a gender disparity among young people aged 15-24, with HIV prevalence estimated to be 9.1% for girls and young women in that age range and 6% for their male counterparts. According to Malawi’s *National HIV Prevention Strategy (2009-2013)*, new infections often occur in stable long-term sexual relationships. The strategy identifies four cross-cutting drivers of the epidemic: 1) transactional sex; 2) gender inequalities; 3) harmful cultural practices; and 4) stigma and discrimination.

UA Now! in Malawi contributes to strengthening the national response to these issues. The Coalition of Women Living with HIV and AIDS (COWLHA), which has a membership of 50,000 women living with HIV, is leading the implementation of UA Now! in Malawi. A baseline survey carried out by COWLHA identified gender-based violence as a major factor in Malawi’s AIDS epidemic. COWLHA documented prevalent forms of gender-based violence as well as forms of HIV-related stigma that particularly affect women and girls. This research guided the development of training materials to build the capacity of women living with HIV, men, the police, and social workers to address violence, stigma and discrimination.

For several years, COWLHA has been using the “Stepping Stones” training package, which addresses gender and HIV at the community level through informal learning methods.



Promotional material by the Legal Assistance Centre, UA Now! implementing partner in Namibia.

“Stepping Stones” participants are invited to question perceptions that disempower women and expose them to violence, and to explore possibilities for change. The aim is to develop people’s ability to challenge gender inequality through effective communication. UA Now! has enabled COWLHA to expand their Stepping Stones work.

HIV disproportionately affects young women in **Namibia**, where overall prevalence among people aged 15-49 is 13.3%. In 2008, about 31% of new infections occurred among people aged 15-24, with young women accounting for 68% of those cases. In 2004, Namibia launched *Vision 2030*, the country’s long-term development policy framework. *Vision 2030* emphasizes the challenges arising from the HIV epidemic. The *Mid-Term Plan III* lists reduction of HIV as a key priority. The document outlines five strategies to address HIV, including the creation of an enabling environment where “people infected and affected with HIV and AIDS enjoy equal rights in a culture of acceptance, openness and compassion.” This strategy guides the work of UA Now! in Namibia, where the Legal Assistance Center (LAC), UA Now!’s implementing partner, is carrying out various rights-focused training programs to empower women and girls to deal with gender-based violence, stigma and discrimination in order to improve their access to HIV prevention, treatment, care and support services.

LAC has developed a training manual for use with traditional community authorities and rural women and girls. LAC’s HIV and human rights trainings in March 2010 for 125 women and girls in rural locations included a discussion of key Namibian laws that have implications for women’s and girls’ rights, including *Combating of Rape Act No. 8 of 2000*, *Married Persons Equality Act 1 of 1996*, *Combating of Domestic Violence Act No. 4 of 2003*, *Maintenance Act 9 of 2003*, *Affirmative Action (Employment) Act 29 of 1998*; and *Communal Land Act 5 of 2002*. LAC organized a workshop in April 2010 that brought together traditional leaders from seven districts, along with social workers. Through its work with traditional leaders, LAC addresses customary laws that increase women’s vulnerability to HIV and exacerbate its impact on them. For example, while customary marriages are not generally recognised under Namibian law, they have been granted statutory recognition. However, since customary marriages are not necessarily registered, it can be difficult for women to make claims on matrimonial property.

For the past fifteen years, **Rwanda** – a country where 57 % of the population lives below the poverty line – has been addressing HIV and its effects on women while recovering from the 1994 genocide and its aftermath. During the genocide, women, especially from the Tutsi ethnic group, were targeted for violence, including large-scale rape and sexual assault.

**ROLL-OUT OF THE AGENDA FOR ACCELERATED COUNTRY ACTION FOR WOMEN, GIRLS, GENDER EQUALITY AND HIV**

Civil society partners worked with UNAIDS to develop a related *Briefing Note for Action by Communities*, which introduces the UNAIDS Agenda for Women and Girls to communities and civil society organizations, especially networks of women living with HIV, women’s rights organizations and organizations of men and boys working for gender equality. The *Community Briefing Note* emphasizes ways in which communities can participate in data collection, analysis of strategic information, and monitoring of national, regional and global commitments related to women, girls, gender equality and HIV. Civil society organizations in Peru and Brazil intend to use the *Community Briefing Note* to develop civil society-driven initiatives relating to women, girls, gender equality and HIV.

The *UNAIDS Agenda for Women and Girls* is now rolling-out in several countries including Liberia, China, Nigeria and Uganda. UNAIDS and UNIFEM have committed to ensuring that by the end of 2011 at least 50 countries have undertaken a broad consultative process to agree on strategic actions, based on the key issues faced by women and girls and gaps in the national AIDS response, guided by the *UNAIDS Agenda for Women and Girls, Gender Equality and HIV*. In addition, the UN agencies will facilitate that at least 25 countries have included three or more strategic actions from the *UNAIDS Agenda for Women and Girls* in their national strategic plans, with appropriate budgets for implementation.

In the fall of 2009, Liberia, under the leadership of its Minister of Gender and Development, became the first country to begin operationalising the *UNAIDS Agenda for Women and Girls*. Through consultations with stakeholders, including networks of women living with HIV and other women’s organizations, the Liberian government identified several priorities: improving data collection and analysis to better understand the impact of the HIV epidemic on women and girls, and to better understand their specific needs; adapting policy and programming efforts accordingly; accelerating access to integrated and comprehensive HIV, tuberculosis and reproductive health services; and working to end violence against women and girls.

Liberia’s early experience with the *UNAIDS Agenda for Women and Girls* suggests a number of lessons. First, the presence of a champion in the government, civil society or a United Nations organization appears to be crucial. This process can provide a platform for coordinating a large body of previously fragmented efforts to address the significance of HIV for women and girls. Second, focusing on the HIV-related needs of women and girls appears to increase the effectiveness of the overall national response to the HIV epidemic. Third, aligning around key issues and intended results, such as those in the *UNAIDS Agenda for Women and Girls*, can lead to the better use of resources by the UN Joint Teams and other partners. Adequate resources, of course, are also an essential element.

**UN ACTION TO DELIVER ON THE UNAIDS AGENDA FOR WOMEN AND GIRLS**

The Joint UN Programme on HIV/AIDS and UNIFEM are assisting countries to accelerate action on women, girls and gender equality within the context of AIDS. In addition to establishing the Interagency Working Group on Women, Girls, Gender Equality and HIV, the Joint Programme and UNIFEM are intensifying implementation of the *UNAIDS Action Framework* and *Agenda for Women and Girls* as tools for accelerated UN action in partnership with a wide range of national, regional and global partners.

- In several countries, UNAIDS, UNIFEM, UNDP, WHO and UNFPA are working with partners to address intimate partner transmission of HIV (transmission occurring via sex within marriage and long-term partnerships). In Fiji and Kiribati, WHO, UNFPA and UNAIDS Country Coordinators have been working with the Ministries of Health to conduct quantitative and qualitative assessments to better understand transmission patterns of sero-discordant couples. Information gathered through this process is informing programming in a number of countries in the region.
- UNESCO, UNIFEM and the Social Science Research Council (SSRC) are working with partners to support efforts to understand and respond to the effects of HIV on women and girls. Since October 2009, UNESCO, UNIFEM and SSRC have been hosting a book blog on the UNESCO/SSRC publication, *The Fourth Wave: Violence, Gender, Culture and HIV in the 21<sup>st</sup> century*. The publication presents innovative thinking about how HIV and AIDS affect women and girls worldwide and how governments and other stakeholders can engage to promote change. *The Fourth Wave* brings together well known experts, young scholars, and practitioners from across the world to contribute to the understanding of gender in the HIV pandemic.
- UNAIDS, UNDP and WHO have supported Global Fund for Rounds 9 and 10 processes, including through Technical Review Panel (TRP) briefings, updates of technical guidance and review of proposal forms. UNAIDS also coordinated and participated in the TRP briefings including on gender, and has contributed to the review of Round 10 proposal form modifications proposed by the Fund. Support also included convening training workshops on gender and HIV for countries submitting Global Fund Round 9 proposals.
- To help improve monitoring of the gender dimensions of the HIV epidemic, UNIFEM, UNAIDS and MEASURE Evaluation have launched a process with key partners (GFATM, GTZ, PEPFAR, VSO, WHO and others) to guide and participate in the development of ‘harmonized’ indicators on gender equality and HIV/AIDS for tracking country-level progress on gender equality in HIV responses. On 28-29 June, 2010, a technical consultation explored how to develop harmonized indicators for monitoring progress on gender equality dimensions of HIV and AIDS. Several of the partners (GTZ and WHO, for example) have already initiated an analysis to feed into the larger project. The UNAIDS Monitoring and Evaluation Reference Group will recommend that the indicator(s) identified, which include gender-based violence be used in monitoring the UNGASS commitments. UNIFEM, UNAIDS and partners are also working to develop a menu of gender and HIV monitoring indicators for program managers at the national and sub-national levels.
- WHO launched and disseminated a tool to assist countries integrate gender into HIV/AIDS programmes in the health sector, and to improve responsiveness to the needs of women. WHO organized several capacity strengthening events, using its gender and HIV tool, including in the Caribbean and in the Eastern Mediterranean Region of WHO.
- UNAIDS Programme Acceleration Funds (PAF) provide crucial support to partnership efforts. In India, UNODC, the Department of AIDS Control, and the Ministry of Health and Family Welfare are using PAF funds to develop service delivery models for women drug users and partners of male drug users. In Malaysia, UNHCR is assessing vulnerability to and risks associated with sex work among women, girls, men and boys in Kuala Lumpur’s refugee community, where UNHCR is currently assisting 47,000 registered refugees, most of whom are from Myanmar.
- UNDP is providing financial and technical support in the eight pilot “Delivering as One” countries (Albania, Cape Verde, Mozambique, Pakistan, Rwanda, Tanzania, Uruguay and Viet Nam) to launch “know your rights” campaigns that explicitly address the rights of girls and women, and where relevant, to address other priority populations (for example, people living with HIV, sexual minorities, sex workers, and migrants) in the context of HIV. Following the roll-out in these countries in 2010, UNDP will support the subsequent roll-out of additional campaigns in at least two countries per region. UNDP is also running leadership development programmes for women living with HIV in twelve regionally-diverse countries and supporting women living with HIV to more actively engage in the review of the MDGs.

For more information on UN Action on gender and HIV, please see “Gender-sensitivity of AIDS Responses.” Report to the 26th session of the UNAIDS Programme Coordinating Board. *UNAIDS/PCB (26), 3 June 2010*. [http://data.unaids.org/pub/Report/2010/20100604\\_pcb\\_report\\_agenda\\_for\\_accelerated\\_action\\_final\\_en](http://data.unaids.org/pub/Report/2010/20100604_pcb_report_agenda_for_accelerated_action_final_en).