

Building women and girls' global meaningful participation in the High Level Meeting on AIDS



ATHENA

The Global Coalition
on Women and AIDS

The ATHENA Network and the Global Coalition on Women and AIDS (GCWA) initiated a global virtual consultation¹ with regional partners in order to ensure the broadest possible engagement and representation of women (and girls wherever possible) in the processes leading up to the High Level Meeting on AIDS in June 2011 – especially women living with and affected by HIV, and other key populations of women, who often lack platforms for priority issues to be raised and heard. The virtual consultation as a new platform has,

for the first time in the 30 year history of the AIDS response, brought together women in (and from) many different areas and with multiple identities in a personal and political capacity to speak to the successes, challenges, and key lessons learned through the AIDS response since the 2001 Declaration of Commitment on HIV/AIDS and in the effort to achieve Universal Access. This virtual consultation was launched on 01 March 2011 and has gathered responses from more than 700 women from over 95 countries around the world.

The focal areas for the consultation were defined by 4 criteria: 1) Centrality of women's rights to the success of the AIDS response; 2) Importance for women, girls, and gender equality; 3) Ability to speak to the future, specifically to move us toward realizing all the Millennium Development Goals; and, 4) Political opportunity to highlight an issue that has not received adequate attention to date in efforts to address women, girls, and gender equality in the context of HIV and AIDS.

¹ An archive of the survey, including translations into 9 languages, is available at http://www.women-europe.net/index.php/page/SURVEY_on_HL.



TOP PRIORITIES FOR POSITIVE CHANGE

as identified by women in **North America and Western Europe** toward achieving Universal Access

1: Inclusive and holistic prevention, treatment, care, and support for women in all of their diversity

- Scale up HIV information, education, testing, and prevention beyond 'high risk' groups, especially raising awareness among heterosexual women.
- Expand gender sensitive, non-discriminatory, and supportive harm reduction and needle exchange services.
- Increase funding for HIV prevention among minority women and girls.
- Address the unique HIV prevention needs of women and girls living with HIV, and those with disabilities.
- Improve services to reach marginalized women and girls, who are often not prioritized.
- Ensure high quality integrated HIV and sexual and reproductive health and related (eg TB) services and support for women in all their diversity, particularly for young women living with HIV.

"Ensure that women living with HIV have access to comprehensive mental health and talk therapy programs."

"Ensure universal access to HIV treatment and care, including nutrition, to women in rural areas."

"Female condoms continue to be more expensive and less readily available than male. Women living with HIV outside of activist communities, or without good access to support groups and information may not be aware of

the existence or development of new female centered technologies, their implications, or the debates around them."

2: Solidarity

- Eliminate stigma and discrimination against women and girls – in particular women and girls living with HIV, and key affected women and girls.
- End laws that criminalize HIV, sex work, and decisions around disclosure.
- Reform and strengthen drug policy away from punitive towards rights-based responses.
- Challenge stigma and discrimination, especially in health services and the work place, and ensure that HIV policies address discrimination based on racism and socio-economic circumstances.
- Improve awareness around HIV through positive media coverage and discussion that aims to create a culture of solidarity and support towards women and girls living with HIV.
- Support peer-led programming for women living with HIV.
- End gender-based violence against women living with HIV through developing better linkages between HIV positive women's networks and organizations that work to stop violence against women.

"Women who use drugs are particularly vulnerable to HIV and other drug-related harms and to being imprisoned for drug-related offences. But their voices are even less present in the current response, in no small part due to the increased stigma and challenges they face."

"Take bold action towards tackling stigma and discrimination against people living with HIV. Remembering that many face multiple discrimination because they may be women, migrants, unemployed, sexually diverse, a person who uses drugs, disabled, or just be a little different from what the society accepts as norm."

3: Education, including sexuality education

- Reach young women and girls through comprehensive prevention strategies, including comprehensive sexuality education, within and outside schools.
- Expand and ensure quality of comprehensive sexuality education in and out of schools, including HIV education, self-esteem and empowerment for girls, drug prevention education, and comprehensive relationship education that doesn't enforce gender stereotypes or a hetero-normative view.
- Ensure young women and key affected women, inclusive of those living with HIV, have equal access to education including comprehensive sexuality education and clear entry points and access to sexual and reproductive health, including HIV prevention, services.

"In the U.S. biased and limited sexual education in schools is the norm, especially in the South."

“Promote the greater participation of all key affected women and girls in decision-making that affects their lives.”

Concluding Comments

The virtual consultation has been developed with the ethos and intent of democratizing international processes – and to provide a vehicle whereby women from all walks of life and in all regions of the world can have their say on the achievements, challenges, and opportunities for change as the global community prepares for the High Level Meeting on AIDS.

What we have learned through the development of the consultation and through our analysis of

what women are saying is simply that women seek and are thirsty to be engaged and viewed as equal, active stakeholders and as agents of change rather than as subordinate, passive recipients. The responses we have received demonstrate that women want to enjoy opportunity, independence, sexual and physical autonomy – and as such, women seek an AIDS response that is holistic, shared sector-wide, gendered, comprehensive, equitable, and deeply rooted in human rights. Women all over the globe are

taking initiative and are on the frontlines of the response, implementing programs with their own capacity, and bringing about change in their communities.

The most affected must be most central to the response, and as history has shown us repeatedly where true social transformation has taken place, if these same women’s visions and aspirations were adequately supported, then the aspirations of us all would fall into place.

The ATHENA Network and the Global Coalition on Women and AIDS acknowledge and appreciate our outstanding team whose collaboration, investment, and shared expertise is making this virtual consultation possible

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Methodology: We have identified these issues from an open-ended question on the survey tool of the virtual consultation for participants to articulate their top three priority asks for positive change. We categorized the open-ended responses in line with specific areas of the 2001 Declaration of Commitment on HIV/AIDS and the 2006 Political Declaration.

Collaborating Partners



Additional Supporting Partners

Asia Pacific Network of Women with HIV, (WAPN+), Thailand
EATG, Europe
Echos séropos, Belgium
ICW North America, USA
International Women’s Health Coalition, Global
Mama’s Club, Uganda
Seres, Portugal
UK Consortium on AIDS and International Development, UK

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