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

The ATHENA Network and the Global Coalition on Women and AIDS (GCWA) initiated a global virtual consultation 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.womeneurope.net/index.php/page/SURVEY_on_HL.

TOP PRIORITIES FOR POSITIVE CHANGE

as identified by women from East and Southern Africa toward achieving Universal Access

1: Inclusive and holistic prevention, treatment, care, and support for women in all of their diversity
- Ensuring and enhancing access to comprehensive, holistic, and inclusive quality services for HIV prevention, testing, treatment, care, and support, including nutrition, as well as other health services, for all women and girls.
- Placing particular emphasis on including women and girls in all their diversity, such as those living in rural and hard to reach areas; young women, women living with HIV, women with disabilities, women in conflict areas; transgender women, women who have sex with women, women involved in sex work, and refugees.

“Provision of comprehensive sexual and reproductive health services to women living with HIV including family planning options and youth friendly services through one stop centres.”

“Ensure adequate information, training, support, and remuneration for women and girls who are care-givers, including mothers, volunteers and older carers, and women and girls living with HIV.”

2: Gender equality
- Promoting and achieving gender equality for women and girls through promoting women’s empowerment, including through representation in parliament and in all other national decision-making fora, such as processes to develop National Strategic Plans on HIV and AIDS.
- Ensuring gender sensitivity and mainstreaming in HIV and sexual and reproductive health policy and programming.
- Promoting and protecting women’s rights, including sexual and reproductive rights and autonomy over sexual and reproductive decision-making.

3: Safety
- Achieving an enabling legal and social environment for women and girls and eliminating gender-based violence through the promotion and protection of women’s human rights.
- Strengthening measures to address and prevent all forms of gender-based violence and violence against women and girls, including HIV-related violence and abuse.
- Eliminating customary practices which harm girls and women, including widows.
- Protecting women’s inheritance, property, and land ownership rights.
- Promoting and protecting sex worker rights and well-being.
- Promoting and protecting the rights and well-being of lesbians, bisexual women, and other women who have sex with women, particularly with regard to so-called ‘corrective rape’, as well as transgender women.
- Sensitizing law enforcement agencies to respond in an appropriate and timely manner to rape and all other forms of gender-based violence.

“Legislation around domestic violence, sexual violence and other laws that protect women’s rights exist on paper but are frequently not translated or comprehensively implemented.”

4: Solidarity
- Achieving an enabling environment for women
- Eliminating stigma and discrimination against women and girls – in particular women and girls living with HIV, and key affected women and girls.
- Repeal punitive laws including those that criminalize on the basis of drug use, sex work, sexuality, or HIV exposure and transmission.
- Address stigma and discrimination against people living with HIV, women on the basis of their sexuality, women who do sex work, and widows – both at a societal level and within health services.

“Health workers are still judgmental about HIV positive women’s sexual and reproductive choices”

1 The virtual consultation has identified clear global consensus prioritizing an integrated, holistic, and life-long prevention through to treatment and care approach to women across all regions.
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

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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
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