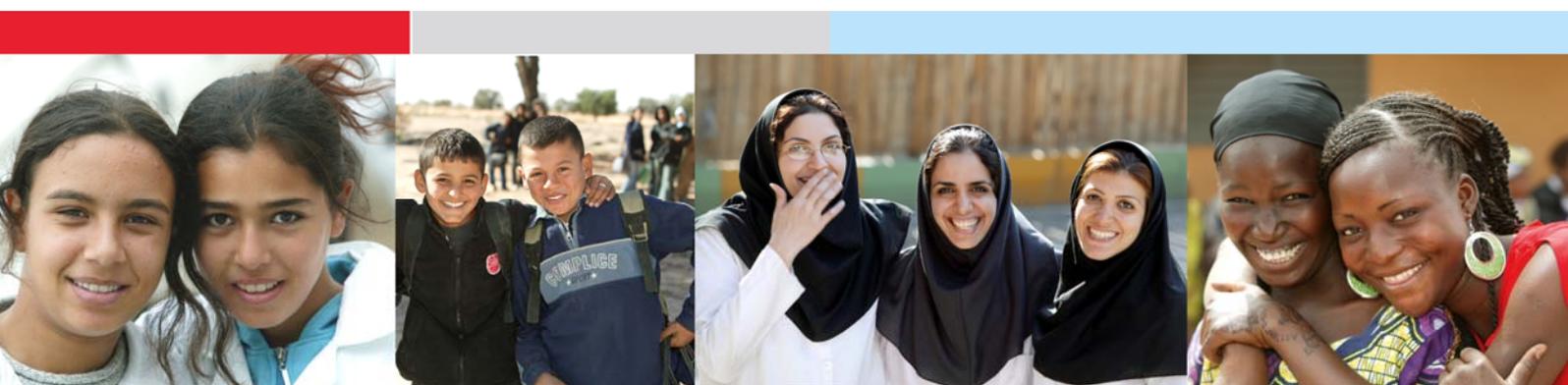


Operational plan for UNAIDS

Action Framework:

addressing women, girls, gender equality and HIV



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EXECUTIVE SUMMARY

This *Operational Plan* (2010-2014) supports the implementation of the three Action Areas below, identified in the *UNAIDS Action Framework: Addressing Women, Girls, Gender Equality and HIV*¹. The Action Framework (2009) was developed in response to the pressing need to address the persistent gender inequality and human rights violations that put women and girls at greater risk and vulnerability to HIV, and threaten the gains that have been made in preventing HIV transmission and increasing access to anti-retroviral treatment. The Action Framework focuses on action in three areas, outline below, in which UNAIDS² and UNIFEM can bring specific and unique contributions.

- ▶ 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.
- ▶ Assisting countries to 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 in the context of HIV
- ▶ Advocacy, capacity strengthening and mobilization of resources to deliver a comprehensive set of measures to address the needs and rights of women and girls in the context of HIV.

The Operational Plan was developed through a widely consultative process conducted by the *Global Task Force on Women, Girls, Gender Equality and HIV*, led by Professor Sheila Tlou, former Minister of Health of Botswana, and Michel Sidibé, Executive Director of UNAIDS, as requested at the UNAIDS 24th Programme Coordinating Board meeting³. The Global Task Force and its three working groups were comprised of high-level leaders and experts on women, girls, gender equality and HIV from 51 countries and diverse constituencies, representing civil society groups, women’s rights organizations and networks of women living with HIV, government, academia and the UN system.

In line with the UNAIDS Action Framework, the Operational Plan is rooted in a broad-based human rights approach and reflects a number of principles including participation, evidence-informed, tailored and ethical responses, partnership, the engagement of boys and men, leadership, multi-sectorality and accountability. The Operational Plan leverages growing political momentum for positive changes to the lives of women and girls. The Operational Plan is particularly timely given a range of recent developments which reflect past and present current political commitment to this issue and respond to the increasing mobilization by women’s groups demanding accountability for these commitments and the need to ensure coherence.

The Operational Plan focuses on country-level action, capitalizing on the role of the UN Joint Teams on AIDS and fostering country leadership. The Operational Plan supports UN Reform for a more

¹ Herein referred to simply as the UNAIDS Action Framework

² In the document, unless stated otherwise, “UNAIDS” refers to the 10 Cosponsor organizations and the Secretariat

³ The 24th UNAIDS Programme Coordinating Board, decision 12.4

http://data.unaids.org/pub/InformationNote/2009/20090603_pcb_24_decisions_en.pdf

coherent and effective UN response, including within the “Delivering as One” pilot countries.⁴

The Operational Plan addresses the rights and needs of women and girls and highlights opportunities to work with networks of women living with HIV and diverse women’s groups, while engaging men and boys, in particular those working for gender equality. UNAIDS will seek the collaboration of global partners, interested in moving forward the agenda on women, girls and gender equality in the context of HIV, in particular working with the US President’s Emergency Plan for AIDS Relief and the Global Fund to Fight AIDS, Tuberculosis and Malaria to leverage resources and seek enhanced efficiencies in resource use.

Though every country is urged to identify actions relevant to their context, there are some common strategies that can achieve results on universal access targets and Millennium Development Goals. These may include empowering leadership of women and girls, especially women and girls living with HIV, access to integrated HIV and sexual and reproductive health services, addressing violence against women and girls and addressing the needs of marginalized women and girls. It is envisaged that countries facing different epidemics will be equally engaged, so that lessons can be learned from a variety of contexts.

The Operational Plan is structured around three issues, in line with the *UNAIDS Action Framework*, which were identified by the Global Task Force as critical to overcoming obstacles to achieving major breakthroughs on women, girls, gender equality and HIV. As outlined below, each *issue* is accompanied by a *recommendation*, a set of *results* and corresponding *actions* as well as the parties to be held accountable for delivering results—including the UNAIDS family, individual Cosponsors, the Secretariat, the UN Joint Teams on AIDS, UNIFEM and other partners as well as envisioning a role for the to be established UN agency for women. The 26 concrete and feasible actions aim to be catalytic in nature, generating synergies between AIDS responses, and work on the human rights of women and girls, and gender equality, as well as tapping into the richness, expertise and diversity of the women’s movement. The Operational Plan targets strategic opportunities, such as the review of the UN development assistance framework or the development of a new national strategic plan for HIV to facilitate its implementation.

⁴ Albania, Cape Verde, Mozambique, Pakistan, Rwanda, Tanzania, Uruguay, and Viet Nam

Issue: Knowing, understanding and responding to the particular and various effects of the HIV epidemic on women and girls.

- ▶ Recommendation: Jointly generate better evidence and increased understanding of the specific needs of women and girls in the context of HIV, and ensure prioritised and tailored national AIDS responses that protect and promote the rights of women and girls (knowing your epidemic and response).

Results:

- Quantitative and qualitative evidence on the specific needs, risks of and impacts on women and girls in the context of HIV exists through a process of comprehensive and participatory data collection, including on male and female differentials in the epidemic, and better inform the implementation of effective policies and programmes that promote and protect the rights and meet the needs of women and girls.
- Harmonized gender equality indicators are used to better capture the socio-cultural, economic and epidemiological factors contributing to women's and girls' risk and vulnerability to HIV.
- Evidence-informed policies, programmes and resource allocations that respond to the needs of women and girls are in place at the country level are in place.

Issue: Translating political commitments into scaled-up action to address the rights and needs of women and girls in the context of HIV.

- ▶ Recommendation: Reinforce the translation of political commitments into scaled-up action and resources for policies and programmes that address the rights and needs of women and girls in the context of HIV, with the support of all relevant partners, at global, national and community levels.

Results:

- Stronger accountability from governments to move from commitments to women's rights and gender equality to results, for more effective AIDS responses.
- All forms of violence against women and girls are recognized as violations of human rights and are addressed, in the context of HIV.
- Women and girls have universal access to integrated, multi-sectoral services for HIV, tuberculosis and sexual and reproductive health and harm reduction, including services addressing violence against women.
- Strengthened HIV prevention efforts for women and girls through protection and promotion of human rights and increased gender equality.

Issue: An enabling environment for the fulfilment of the women's and girls' human rights and their empowerment, in the context of HIV.

- ▶ Recommendation: Champion leadership for an enabling environment that promotes and protects women's and girls' human rights and their empowerment, in the context of HIV, through increased advocacy and capacity, and adequate resources.

Results:

- Women and girls empowered to drive transformation of social norms and power dynamics, with the engagement of men and boys working for gender equality, in the context of HIV.
- Strong, bold and diverse leadership for women, girls and gender equality for strengthened HIV responses.
- Increased financial resources for women, girls and gender equality in the context of HIV.
- Gender responsive UNAIDS.

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CONTEXT AND ISSUES

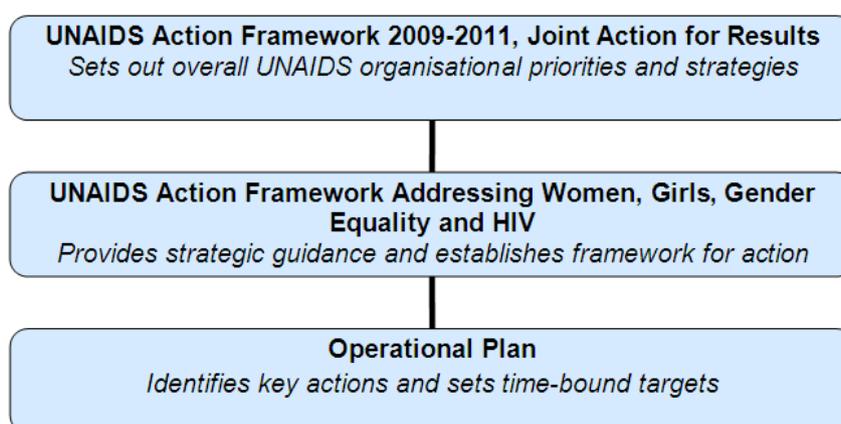
Nearly 30 years into the HIV epidemic, persistent gender inequality and human rights violations that put women and girls at greater risk and vulnerability to HIV, continue to hamper progress and threaten the gains that have been made in preventing HIV transmission and increasing access to anti-retroviral treatment. In addition to women and girls' biological susceptibility to HIV, women and girls face many interacting socio-cultural, economic and legal challenges that worsen their vulnerability to HIV. Young women and girls are often particularly vulnerable to HIV, and at risk of human rights violations. Widespread discrimination, injustice and brutality against women and girls manifest themselves in women, young women and girls being excluded from decision-making, epidemic levels of violence against women and girls and impunity for crimes committed against women and girls. The HIV epidemic exacerbates these wrongs, rendering women and girls yet more vulnerable to violations of their human rights and harming society as a whole.

In the broader context, the effects of the epidemic on women and girls intersect with pressing global challenges such as climate change, food insecurity, economic instability and conflict. Socio-economic issues interact in complex ways with the HIV epidemic. For example, infrastructural investments are observed to result in an influx of male labour and migration of women seeking livelihood opportunities, increasing risk of HIV transmission, particular in situations where there is limited access to health services for migrant workers. Urbanization, poor city planning and design, informal settlements and lack of access to housing influence women and girls' degree of insecurity and create conditions that place them at greater risk of HIV and limit their access to public services. In addition, forced migration and displacement place women and girls at risk of being deprived of much needed HIV and reproductive health services and are likely to interrupt their access to treatment. The AIDS response needs to anticipate and address women's and girls' complex vulnerabilities to HIV through multi-sectoral approaches to achieve the Millennium Development Goals.

Countries have made several global and regional commitments to address the needs and rights of women and girls, as part of effective HIV responses, within the broader context of the Charter of the UN (1945) and the Universal Declaration of Human Rights (1948). International agreements addressing issues related to women, gender equality, health and human rights include the Vienna Declaration and Programme of Action (World Conference on Human Rights, 1993), the Programme of Action of the International Conference on Population and Development (1994) and the Beijing Declaration and Platform for Action (1995), as well as international human rights instruments and regional covenants and conventions such as the Convention on the Elimination of all Forms of Discrimination against Women (CEDAW, 1979) and its 1999 Optional Protocol, and the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (2005). Additionally, countries have also committed to scale up responses to AIDS and women, through the Declaration of Commitment on HIV/AIDS (2001) and the Political Declaration on HIV/AIDS (2006), the UN Millennium Declaration and the Millennium Development Goals (2000). Recognizing the need for increased resource allocation and capacity building, these commitments provide a sound basis for a strengthened multisectoral response for women, girls and gender equality by creating enabling environments for upholding women's human rights and addressing the needs of women living with HIV, as well as providing a strong focus on comprehensive prevention approaches to HIV, sexual and reproductive health, and violence against women.

Despite these significant commitments to promote and protect the human rights of women and girls, the HIV epidemic continues to reveal a gap between rhetoric and reality. The AIDS response can serve as a catalyst and bring about socio-cultural, political and legal transformations to promote, protect and fulfil the rights of women and girls. By weaving human rights and gender equality into the global AIDS response, we can ensure that women and girls not only have the knowledge and power to protect themselves, but also take their rightful, equal place as advocates, leaders and policy makers who drive change.

The AIDS response needs to anticipate and address women's and girls' vulnerabilities to HIV within the broader global and social context to achieve the Millennium Development Goals. To this end, UNAIDS has committed itself, through its Outcome Framework 2009-2011, “*to making the response to AIDS an entry point to contribute to efforts to reduce intimate partner and sexual violence and developing comprehensive responses to gender-based violence and HIV prevention within and beyond the health sector*”⁵.



The Operational Plan for the UNAIDS Action Framework utilizes a growing political momentum for positive changes to the lives of women and girls, as demonstrated by the recent decision to establish a new UN agency for women⁶. The UN Secretary General’s UNiTE to end violence against women campaign, and the multi-partner Clinton Global Initiative to address sexual violence against girls present powerful opportunities to make a difference to the lives of women and girls. Furthermore, the UNAIDS Outcome Framework commits to guide future investments in the AIDS response by promotion of human rights and gender equality. Indeed, although the Operational Plan calls for financial resources, much can be achieved by utilizing political will and commitment, such as ensuring the engagement of women in decision-making at all levels. To this end, the richness, strength, expertise and diversity of the women’s movement represents a critical resource to scale up AIDS responses at global, regional and country levels. In this context, the Operational Plan for the UNAIDS Action Framework aims to unite work for the human rights of women and girls with the global AIDS response.

⁵ Joint Action for Results: UNAIDS Outcome Framework 2009-2011
http://data.unaids.org/pub/Report/2009/jc1713_joint_action_en.pdf

⁶ When the new UN agency for women is agreed by UN member states, all reference in this Operational Plan to UNIFEM will revert to the new agency

While the UN provides a vehicle for moving this political and strategic agenda forward, this mission will only be successful through key strategic partnerships, involving new allies, at all levels of government and civil society. As such, the Operational Plan aims to mobilize all constituencies, starting with UNAIDS and UNIFEM, around strategic actions through increased political commitment, stronger capacity and increased resources. Progress at the county level will only be possible through an inclusive process facilitated by UN Joint Teams⁷ on AIDS that engages national governments, donors and all levels of civil society organizations, including networks of women living with HIV and women's groups, as vital partners. UNAIDS and UNIFEM will bring their specific and unique contributions to the cause of women, girls, gender equality and HIV and will implement the Operational Plan through a coordinated approach and strengthened provision of technical support, in line with the UNAIDS technical support division of labour and the UNIFEM strategic plan 2008-2011.

⁷ It is understood that UN Joint teams on AIDS include UNAIDS co-sponsors and the secretariat, as well UNIFEM and other UN system organizations with a country presence.

Principles

This Operational Plan is founded on six cross-cutting principles:

Human rights based approach. Discrimination and violations of human rights influence both the spread of HIV and women's access to care and treatment. Consequently, the HIV response must be based on and infused with a full respect for human rights for all and greater gender equality.⁸ The Operational Plan pivots on the need to invest and be accountable for protecting and promoting the rights of women and girls and to focus on their needs in all different types of epidemics. The recommendations therefore build upon the global and regional political commitments to human rights, outlined above.

Participation. The successful implementation of the Operational Plan depends on the meaningful and equal participation of women and girls, including women living with HIV, recognizing their contributions, experiences and expertise. The actions of the Operational Plan are inclusive of and responsive to women of all ages and status, including those who have traditionally been marginalized: women and girls living with HIV; sex workers; women of diverse sexual orientations and gender identities; women and girls with disabilities; women and girls who use or have a partner who uses drugs; migrants women, refugees, internally displaced or seeking asylum; racial and ethnic minorities; women in prison; women living in conflict or post-conflict settings among others. Meaningful participation requires dedicated resources and strengthened institutional capacities, alongside a commitment to the principles of Greater Involvement of People living with HIV/AIDS⁹.

Evidence-informed and ethical responses. The Operational Plan recognizes that the HIV epidemic impacts differently on women and girls and men and boys, and that the AIDS response needs to recognize the different epidemiological, economic, social, cultural and political contexts. AIDS responses need therefore to be evidence-informed and context-specific. Actions undertaken under this Operational Plan will cause no harm to any woman or girl and will recognize their diversity and respect their right to participate. Therefore, all research undertaken must be ethical and programme-oriented and involve women and girls in all their diversity at every stage, from design through implementation and monitoring and evaluation.

Partnership. UNAIDS recognizes the importance of partnership with relevant stakeholders for the successful implementation of the Operational Plan. It is therefore committed to build bridges between civil society, in particular women's rights organizations and HIV organizations; networks of women living with HIV; human rights organizations; faith-based organizations; adolescents and young people; organizations of men and boys in particular those working for gender equality; and traditional leaders, governments, donors and UN organizations. UNAIDS is equally committed to working with national governments to support all relevant ministries and other actors to jointly take action for gender equality, and girls' and women's empowerment that will comprehensively address the determinants of their vulnerability to HIV.

⁸ Rights-based approaches to HIV seek to empower rights-holders (vulnerable and affected communities) to claim rights and duty-bearers (governments and international community) to protect and realize rights in the context of the response to HIV; seek to ensure that HIV structures, processes, policies and programmes are implemented in ways that support human rights principles: non-discrimination, inclusion/participation, accountability, responsibility and transparency; seek to ensure that HIV structures, processes, policies and programmes further the protection and realization of human rights standards; seek to ensure that HIV structures, processes, policies and programmes include the appropriate funding and support to address rights-related drivers of the epidemic and community and individual vulnerabilities (UNAIDS REFERENCE GROUP ON HIV AND HUMAN RIGHTS)

Engaging men and boys. The Operational Plan acknowledges that traditional and stereotypical views of women and men and girls and boys, and the relations between them, that cast females as subordinate and males as superordinate, hinder an effective AIDS response. The engagement of men and boys in the implementation of this Operational Plan is therefore critical. Men must work with women for gender equality, question harmful definitions of masculinity and end all forms of violence against women and girls. Men's responsibility for children and the care of their families is key to HIV prevention work, as is their involvement in mitigating the effects of the epidemic. Changes in men's and boy's attitudes and behaviours, and in unequal power between women and men, are essential to prevent HIV in women and girls.

Strong and courageous leadership. The Operational Plan hinges on bold political leadership for women's and girls' rights. International, regional and national leaders must challenge current ways of thinking, make gender equality a central element of the AIDS response and allocate resources accordingly. UNAIDS, through the implementation of this Operational Plan, will demonstrate strong institutional commitment to women's leadership in the AIDS response and strengthen its own capacity to work towards a more just and equitable world for women and girls.

These principles will guide the implementation of the Operational Plan; using multisectoral approaches and tailored to country contexts. Recognizing the complex interplay between gender equality, human rights and HIV, the Global Task Force has identified three overall issues, outlined below, in line with the UNAIDS Action Framework. These issues are further detailed in the next section.

Issues addressed by the Operational Plan

- ▶ Knowing, understanding and responding to the particular and various effects of the HIV epidemic on women and girls.
- ▶ Translating political commitments into scaled-up action to address the rights and needs of women and girls in the context of HIV.
- ▶ An enabling environment for the fulfilment of the women's and girls' human rights and their empowerment, in the context of HIV.

⁹ The Greater Involvement of People Living with HIV and AIDS (GIPA) agreed to at the Paris AIDS Summit in 1994 as a critical principle to ethical and effective national responses to the epidemic

RECOMMENDATIONS

Knowing, understanding and responding to the particular and various effects of the HIV epidemic on women and girls

Globally, women account for 50% of all people living with HIV, and in sub-Saharan Africa 60% of people living with HIV. In the Caribbean, young women are approximately 2.5 times more likely to be infected with HIV than young men. The increased vulnerability of women and girls to HIV infection stems from biology and from social, economic, legal and cultural factors such as entrenched gender roles, unbalanced power relations, disproportionate burden of AIDS-related care and the occurrence, and societies' acceptance of, violence against women, including sexual coercion. In addition, unsustainable urbanization and poor living conditions in urban slums and informal settlements increase women and girls vulnerability to and impact from HIV. These issues not only limit women's and girls' autonomy and skills to protect themselves from HIV, but also hinder access to services and ultimately women's and girls' ability to exercise their human rights.

Women, young women and girls are vulnerable in many settings, be it in generalized or concentrated epidemics. Understanding the unique impact of HIV on women and girls requires refined qualitative and quantitative data and information, as well as a set of robust indicators that capture the nuances and complexities of the ways the HIV epidemic affects women and girls differently at different stages of their lives and in different settings. This knowledge is essential for effective AIDS responses. However, there is a lack of capacity, at global, regional and country levels, to collect and analyze data and effectively and sustainably integrate activities on women, girls and gender equality in HIV programmes. In addition, many women's and girls' groups need greater capacity building to use data to contribute to enhanced awareness and understanding of the vulnerability of women and girls to HIV. This however should not stop planners and implementers from using already available data to better address and effectively mitigate the vulnerability of women and girls to HIV.

Efforts to address gender equality are rarely tracked in ways that make accountability possible. Gender-responsive budgeting can help countries prioritize resource and monitor programmes, track funds intended to address gender equality across budgets and provide a clear link between budgeted resources and outcomes. The UN system is well placed to lead costing exercises to estimate the resources needed for comprehensive gender-responsive programmes to meet the needs of women and girls and address gender inequality in the context of HIV. While new and additional resources will be required, much can be done by allocating and more effectively using existing resources for the AIDS response.

Recommendation 1: Jointly generate better evidence and increased understanding of the specific needs of women and girls in the context of HIV, and ensure prioritised and tailored national AIDS responses that protect and promote the rights of women and girls (knowing your epidemic and response)

Result: Quantitative and qualitative evidence on the specific needs, risks of and impacts on women and girls in the context of HIV exists through a process of comprehensive and participatory data collection, including male and female differentials in the epidemic, and better inform the implementation of effective policies and programmes that promote and protect the rights and meet the needs of women and girls.

Actions:

- Strengthen capacity and support governments to
 - Collect and analyze new and existing epidemiological and qualitative data - disaggregated by sex, age (5-year cohorts of all age groups) and setting, on how the epidemic affects women and girls, by helping convene and supporting country processes in collaboration with women's organizations and networks of women living with HIV
 - Use data collected on women and girls in the context of HIV to develop on sound interventions and activities for more effective planning of HIV programmes for women and girls, as well as for generating strategic information, for allocating resources and budgets, and developing national key advocacy messages to be promoted by government at all levels.
- Equip and support community-based women's groups and networks of women living with HIV to collect and use data, on how the epidemic affects women and girls, to monitor programmes to assess their human rights impact and to contribute to national data collection.
- Promote and enable analysis of male/female differentials by age in national HIV research agendas; in partnership with national research institutions, women's organizations and networks of women living with HIV. Include including ethical participatory research on the vulnerabilities, and specific needs of the diversity of women, including marginalized groups such as female sex workers. Assess the impact on women of prevention approaches such as male circumcision and continued research for methods of female-initiated prevention efforts.
- Support governments to track expenditure of country-level resources allocated to programmes for women, girls, gender equality and HIV in the national AIDS spending assessments so that resources and results can be tracked and quality improved.

Accountability:

- UNDP and UNIFEM to advocate and support at least 50% of countries each year, that are due to report to CEDAW according to the four-year reporting cycle, to include in the report quality age and sex disaggregated data on how the HIV epidemic affects women and girls in the report. UN Joint Teams on AIDS to utilize the UNDAF reviews as per country roll-out scheme, to assess how the epidemic affects women and girls for gender-sensitive UN development assistance programmes.

- UNAIDS secretariat support women's groups and networks in at least ten countries every year, including those countries due to report each year to CEDAW, to contribute to national data collection
- UN Joint Teams on AIDS to support governments and national research institutions to include the advancement of women's rights gender equality analysis in the HIV research agenda, in at least ten countries every year, including those countries due to report each year to CEDAW
- UNAIDS Secretariat to support five countries to serve as model and include gender equality analysis in national AIDS spending assessments by 2011

Result: Harmonized gender equality indicators are used to better capture the socio-cultural, economic and epidemiological factors contributing to women's and girls' risk and vulnerability to HIV.

Actions:

- Convene a global participatory process to update the UNGASS/HIV core indicators through existing mechanisms e.g. the MERG, to measure women and girls' inequities in the context of HIV, working with relevant partners such as women's groups and networks of women living with HIV, building on gender equality indicators currently used (e.g. the US President's Emergency Plan for AIDS Relief, the Global Fund) and drawing on indicators used for the Millennium Development Goals, the Beijing Platform of Action, and the International Conference on Population and Development's Program of Action, and subsequently support countries to use harmonized outcome indicators.

Accountability:

- UNAIDS and UNIFEM at global level to support the participatory updating of UNGASS/HIV core indicators by the next UNGASS reporting round.

Result: Evidence-informed policies, programmes and resource allocations that respond to the needs of women and girls are in place at the country level are in place.

Actions:

- Establish regional repositories of regional and national evidence on the linkages between HIV and different forms of violence against women and girls and on what works in order to inform relevant national policies and programmes, including in conflict and crisis situations, in collaboration with national and regional research institutions, women's groups, organisations of men and boys working for gender equality, networks of women living with HIV, female sex workers, female drug users and other relevant stakeholders, and in partnership with regional intergovernmental bodies.
- Support national AIDS authorities to
 - Undertake analyses of how HIV-related policies¹⁰ affect women and girls with a specific focus on socio-cultural factors, stigma and discrimination and economic barriers that

hamper women and girls to exercise their human rights. Modify or develop the policies accordingly and translate them into gender-sensitive programmes, in partnership with relevant actors, including women's rights organizations, networks of women living with HIV, faith-based organizations, youth, organizations of men and boys working for gender equality, and traditional leaders.

- Include analyses of how the epidemic affects women and girls, as part of joint reviews of national HIV responses and the development of new national strategic plans for HIV, in, engaging all relevant government agencies, women's organizations, networks of women living with HIV and organisations of men and boys working for gender equality Realign the national strategic plan for HIV, including budgets, accordingly.

Accountability:

- The seven Regional Directors Groups to establish regional repositories of evidence on the linkage between HIV and violence against women by 2011.
- UN Joint Teams on AIDS to support 30 countries in 2010 and 20 countries in 2011 that are due to develop new national strategic plans for HIV, to undertake analyses of HIV-related policies¹¹.
- The World Bank to take the lead within the Joint UN Team on AIDS in supporting 30 countries in 2010 and 20 countries in 2011 that are due to develop new national strategic plans for HIV, to undertake gender analyses of their national AIDS response.

¹⁰ These policies may include the national AIDS policy or programmatic policies such on as testing and family planning

¹¹ This is based on current timeframes of national strategic plans for HIV.

Translating political commitments into scaled-up action to address the rights and needs of women and girls in the context of HIV

Since the 1994 Paris Declaration on the greater involvement of people living with HIV, there have been increasing calls to address the drivers and impact of the epidemic on women and girls, with limited results so far. Existing global commitments, such as CEDAW and its optional protocol, the Beijing Platform for Action, the International Conference on Population and Development Program of Action, and the Millennium Development Goals all provide a strong framework for comprehensive and multisectoral policies and programmes that address both the causes and consequences of HIV for women and girls. Also, regional and national level commitments, such as the African Protocol on the Rights of Women, the Maputo Plan of Action on Sexual and Reproductive Health and Rights and the Abuja Declaration are in place. However, accountability for these commitments resides at various levels - community, national, regional and global - and involves different actors, such as governments, UN agencies, donors, civil society, media and the private sector. Therefore, there is a need to better translate the human rights and gender equality commitments into action and to monitor implementation. Accountability mechanisms should also foster shared responsibility among different partners and build on the expertise of women's rights advocates.

The AIDS response can be a positive force in challenging rights violations of, and stigma and discrimination against, women and girls, including in laws criminalizing HIV transmission, laws infringing upon the rights to privacy and confidentiality and the right to be free from violence, sexual assault and rape inside and outside of marriage as well as within and outside of situations of conflict and emergency; laws involving inheritance, ownership, access to and control over land ownership law and family laws, and other policies and practices which violate women's human rights. National governments must reform and enact and enforce laws and legislation to end discrimination against women and girls. The justice system must promote women's rights regarding inheritance and ownership, access to and control over land, and sexual and reproductive health rights. They must also design interventions that will guarantee appropriate, immediate, timely, exhaustive, serious and impartial judicial response to acts of violence against women, including rape inside and outside of marriage, and will create the conditions enabling women to use the justice system to remedy violations of their human rights.

Violence against women and girls is one of the most pervasive manifestations of gender inequality and is an indicator of the status of women in a society. Violence against women is both a cause and a consequence of HIV infection. Therefore, violence needs to be dealt with as an integral part of multisectoral HIV responses. Ending violence against women and girls requires, first of all, improving data and understanding of the phenomenon at the country level, currently scarcely available. This information is needed to better address structural determinants of violence and undertake socially transformative programmes that promote gender equality and respond to violence against women, including discouraging its perpetration. Such interventions should also increase women's social and economic empowerment and stop harmful traditional practices. Countries need to take measures to ensure that women and girls are safe from all forms of violence, sexual assault and rape within and outside of situations of conflict and emergencies and that they receive appropriate services to deal with the physical, psychological and legal consequences as well as providing necessary health services in and outside of situations of conflict and emergencies, that are presently lacking.

In order to effectively curb the HIV epidemic, national HIV responses need to more systematically address the rights and needs of women and girls. At present HIV services do not comprehensively include the promotion and protection of the right to sexual and reproductive health of all women and girls, for example, insufficiently addressing the sexual and reproductive health needs of women using drugs and the female partners of male drug users, and inadequate comprehensive sexuality education for adolescents and young people in and out of school. Also, services to prevent vertical transmission of HIV fail to take into consideration the rights and needs of women living with HIV. HIV services equally neglect the empowerment of women and girls to exercise their rights, access services and make autonomous choices about their bodies and lives. Moreover, sexual and reproductive health services HIV-related services fail to consistently provide HIV-related services such as male and female condoms, post exposure prophylaxis referral and treatment of HIV and co-infections as well as contraceptives, emergency contraception and safe abortion services, where legal, for unintended pregnancies.

It is critical to enable women and girls to take control of their own HIV prevention. The lack of female control of prevention is evidenced by the fact that currently, one female condom is distributed for every 700 male condoms. Additional programmatic and budgetary investments are needed to make male and female condoms available and accessible to all women; and to resource and fast track research on female controlled methods of prevention e.g. microbicides. Women and young people also need to be able to access comprehensive reproductive health services, including comprehensive sexuality education. Finally, assessments of the impact on women of male prevention approaches, such as male circumcision, must continue.

Recommendation 2: Reinforce the translation of political commitments into scaled-up action and resources for policies and programmes that address the rights and needs of women and girls in the context of HIV, with the support of all relevant partners, at global, national and community level

Result: Stronger accountability from governments to move from commitments to women's rights and gender equality to results, for more effective AIDS responses.

Actions:

- Support national AIDS authorities to incorporate actions to achieve global and regional commitments on the rights of women and girls into their national strategic HIV plans, in consultation with women's organizations, groups of women living with HIV, national women's mechanisms and organisations of men and boys working for gender equality, and ensure scaled-up action and gender-responsive budgeting at the country level.
 - Support women's groups and networks of women living with HIV at the country level to map, national, regional and global commitments of governments related to women, girls, gender equality and HIV, and to assess and document their implementation status to serve as strategic information for advocacy and accountability.
 - Facilitate the launch of "know your rights" campaigns, and support the provision of free and accessible legal aid services to enable women and girls to claim their rights. Support

the establishment or strengthening of existing fora for the enforcement of rights, accessible to all, through women's organizations and networks of women living with HIV, which target women at the community level, with a particular emphasis on marginalized and stigmatized women and girls, as well as women outside groups "most at risk".

- Advocate on a regional basis together with civil society partners, including those working on legal issues and human rights organizations, among countries' members of parliament for the removal national HIV-relevant legislation that fails to protect the rights of women and girls or discriminates against them, and monitor enforcement, in compliance with international norms and standards, including CEDAW, with particular emphasis on those groups of women and girls who are most excluded and whose rights are most frequently violated.

Accountability:

- UN Joint Teams on AIDS support countries to support 30 countries in 2010 and 20 countries in 2011, due to develop new national strategic plans for HIV, to incorporate actions to implement global and regional commitments into the national strategic plan, as part of the development of new national strategic plans for HIV.
- UNDP to support at least two national networks of women living with HIV per region to map and assess progress on international gender equality and women's and girls' human rights commitments, as input to the 2010 UN Millennium Development Goals Summit.
- UNDP to support the eight "Delivering as One" countries to launch "know your rights" campaigns, and support the provision of free and accessible legal aid services, and the establishment or strengthening of existing fora for the enforcement of rights, by end 2010, with subsequent annual roll-out of at least two countries per region.
- Regional Directors Groups to undertake a regional assessment of gender discriminatory laws with ongoing monitoring by 2011, and to establish regional advocacy and monitoring mechanisms for the removal of these laws by the end of 2012.

Result: All forms of violence against women and girls are recognized as violations of human rights and are addressed, in the context of HIV.

Actions:

- Advocate for and support the inclusion of HIV in the Secretary General's UNiTE to End Violence against Women campaign and support its implementation, through a coalition of government and state actors; women's groups, including female sex workers, women who use drugs; youth groups; women living with HIV and other stigmatized and marginalized groups, and development partners, as per technical guidance, based on the findings of national, regional and international research and promising programmes, including the WHO Multi-country Study on Women's Health and Domestic Violence against Women and the Clinton Foundation/US Centre for Disease Control and Prevention/UN multi-partner initiative, to:
 - (i) Raise awareness on violence against women and girls, as a cause and consequence of HIV transmission, including sexual violence;
 - (ii) Establish national data collection, analysis and reporting systems on

violence against women and girls;

- (iii) Foster the development of national, comprehensive, evidence-informed responses to violence against women and girls, including sexual violence and violence against female sex workers and violence against women in prisons, conflict situations and emergencies, within the health sector and beyond;
- (iv) Integrate interventions to address and respond to violence against women within HIV prevention, treatment, care and support programmes, including access to emergency contraception, post-exposure prophylaxis, and safe abortion, where legal.
 - Utilize the momentum of the UN Secretary General's campaign to end violence against women, to give political space to national sex worker networks and build their capacity to reduce stigma against sex workers and address violence experienced by female sex workers, particularly by law enforcement authorities and other state actors, as part of national responses to HIV.

Accountability:

- Secretary General to communicate to UN Resident Coordinators by the first quarter of 2010 to request for the inclusion of HIV into national UNiTE campaigns. WHO to support the inclusion of HIV into national UNiTE campaigns and its implementation by 2010, in the five countries already engaged, and to expand its support in line with the roll-out of the campaign.
- UNFPA to build the capacity of female sex workers to reduce violence against female sex workers as part of the five national UNiTE campaigns by 2010; and to expand its support in line with the roll-out of the campaign.

Result: Women and girls have universal access to integrated multisectoral services for HIV, tuberculosis and sexual and reproductive health services, including harm reduction, nutrition and services addressing and responding to violence against women.

Actions:

- Support the development, operationalization, utilization, and monitoring of a national minimum package of integrated services for HIV, tuberculosis, sexual and reproductive health services, including harm reduction and services addressing and responding to violence against women, prevention of vertical transmission, treatment, care and support and nutrition, delivered through a multisectoral HIV and primary health care services, and strengthened referral systems, with the participation of women's groups, networks of women living with HIV, female sex workers and, other stigmatized and marginalized groups.
- Strengthen capacity and resources of and coordination among key ministries and national machineries for women to prioritize gender equality and the rights of women and girls in the context of HIV within their sectoral operational plans and budgets, in partnership with women's groups, networks of women living with HIV and organisations men and boys working for gender equality, in line with key global commitments on the rights of women and girls.

Accountability:

- UN Joint Teams on AIDS in the 17 International Health Partnership and Related Initiatives (IHP+) countries to support the development of a national minimum package of services by the end of 2010 and the roll-out by 2011; with subsequent roll-out in an additional two countries per region per year.
- UN Joint Teams on AIDS in the 17 International Health Partnership and Related Initiatives (IHP+) countries support at least three key ministries (health, education and gender machineries) to implement sectoral operational plans addressing gender equality and the rights of women and girls in the context of HIV by end-2011. Subsequent roll-out to take place in an additional two countries per region per year.

Result: Strengthened HIV prevention efforts for women and girls through promotion, protection and fulfilment of women’s and girls’ human rights and greater gender equality.

Actions:

- Develop the capacity of national AIDS authorities and ministries of health to advance HIV prevention by incorporating gender equality into HIV prevention policies and programmes, including male and female condom distribution, safe and voluntary HIV testing and counselling, a gender equality education component as part of male circumcision counselling and services with subsequent follow-up, and comprehensive sexuality education, in collaboration with civil society.
- Support women's groups and networks of women living with HIV, in close collaboration with national AIDS authorities, to demand respect for their rights, to sexual and reproductive health including better negotiate safe and consensual sexual relations and increase access to sexual and reproductive health services and supplies including female condoms and educate men and boys about women's rights to negotiate whether and how sex takes place.
- Advocate for and support access to country-level comprehensive sexuality education - that promotes gender equality and human rights, and equips youth with evidence-informed knowledge, skills and resources necessary to enable them to make responsible choices about their social and sexual relationships - for young people of all age groups, in-school and out-of-school, including through:
 - (i) National legislation/policy change for comprehensive sexuality education, as required;
 - (ii) Development, revision, monitoring and gender-sensitive evaluation of adolescent and youth-friendly curricula, with the participation of adolescents and young people;
 - (iii) Design and launch of mass media national campaigns to reach parents, out of school youth and the general public with messages about and on comprehensive sexuality education and gender equality;
 - (iv) Support regional economic commissions to monitor and share lessons learned between governments on the roll out of comprehensive sexuality education.

Accountability:

- UN Joint Teams on AIDS to support two model countries per region to incorporate gender equality into HIV prevention policies and programmes, by end-2010. Subsequently, Regional Directors Groups facilitate mechanisms for South-to-South learning to facilitate annual roll-

out of at least four countries per region by 2011.

- The UN Joint Teams of these countries to support translation of gender-sensitive prevention policies into programmes for women, young women, adolescents and girls by end-2011.
- UNESCO to support Member States and other key partners to improve and introduce quality sexuality education in at least two countries per region by 2010.

An enabling environment for the fulfilment of the women's and girls' human rights and their empowerment, in the context of HIV

Deeply-rooted social, economic, legal and cultural factors underpin women's and girls' unequal status in societies and the related risk and vulnerability to HIV and violence. Unbalanced power relations, lack of access to services, economic and legal empowerment differentials between men and women, sexual coercion and violence, and entrenched gender roles limit women's and girls' ability to exercise their rights. HIV-related stigma and discrimination disproportionately affect women and girls, constraining women and girls' ability to access services. HIV positive women and girls are less likely to have access to services, disclose their status or negotiate safe sex for fear of being mistreated, rejected or experiencing violence. Moreover, women and girls carry a disproportionate and debilitating burden of AIDS-related care, especially in places with weak health and other public sector services. In addition, girls miss school and women are forced to leave paid work due to factors such as early marriage, pregnancy outside marriage, and socially ascribed requirements to care for the sick, thereby deepening women's poverty and economic dependence, reducing their ability to participate in public life, and hindering their socio economic, cultural and political potentials.

Promoting, strengthening, resourcing and scaling up initiatives that challenge structural gender inequalities is crucial in shifting gender norms and upholding the rights of women and girls. The AIDS response can spearhead efforts to secure women's and girls' human rights and enable them to exercise these rights, for example through girls' access to education –irrespective of marital and pregnancy status, social protection and access to justice; through livelihood opportunities and through the removal of barriers to their equal economic empowerment. Engaging men and boys as agents of change is critical to bring about more equal societies and social cohesion that supports women and girls, by working together with women and girls to promote and protect their rights.

Recognizing and facilitating the leadership of women, young women and girls, in particular those living with HIV, is essential for an effective AIDS response. While strong women's leadership exists at many levels, women, young women and girls need to be supported to effectively participate in making decisions, designing solutions and implementing strategies that will reduce the impact of HIV and AIDS on their lives. Women's organizations and civil society are an insufficiently tapped resource for leadership for gender equality and the rights of women and girls in the context of HIV. By enabling them to actively participate in the processes that concern and affect them, they can play a watchdog role for human rights and serve as a voice for women to strengthen national responses to HIV.

Strategic and bold political leadership for gender equality matched by concrete actions is an important measure for the effectiveness of the AIDS response to counter violations of women's and girls' property grabbing, widow inheritance and marital rape. This leadership must come from a variety of communities and levels, from political, cultural and religious leaders to women's organizations and networks of women living with HIV, as well as governments, civil society, organizations of men working for gender equality, the UN, donors and the private sector. Leaders must respond to and advance women's rights, priorities and articulated needs and must move beyond raising awareness to mobilization of action and programmatic interventions that empower women.

Leadership from UNAIDS, donors, foundations and the private sector is equally important to contribute to an enabling implementation environment at the country level, through supporting rights based and context-specific laws and regulations, advancing programmes and policies and resource allocation and building stronger relationships and partnerships with women's organizations and networks of women living with HIV.

The second independent evaluation of UNAIDS identifies key areas for strengthening of UNAIDS gender responses. For UNAIDS to foster positive changes to the lives of women and girls in the context of HIV, it must develop its capacity to address gender. This will require internal changes in its policies, systems and human and financial resource management and allocation. External issues, such as the technical support it provides to countries and its guidance documents and toolkits must also be realigned for more focused support to women, girls and gender equality in the context of HIV. The success of this Operational Plan depends on the way in which UNAIDS will lead and champion gender equality internally. Gender equality should be everyone's responsibility but accountability for creating an enabling environment, introducing incentives and tracking progress rests with senior management.

Several bilateral and multilateral organizations are committing increased resources to promote gender equality and meet the needs of women and girls, as part of their efforts to address the HIV epidemic. However, many areas of work with women and girls, such as that on harmful traditional practices, violence against women and girls, sexual and reproductive health, women as caregivers and economic empowerment for women, remain under-funded. Furthermore, women's organizations have little access to HIV funds. Targets can be set for the allocation of resources to programmes specifically addressing women, girls and gender equality. Donors can also individually or collectively make resources available at the country level to explicitly support work on women and HIV.

Recommendation 3: Champion leadership for an enabling environment that promotes and protects the women's and girls' human rights and their empowerment, in the context of HIV, through increased advocacy and capacity, and adequate resources

Result: Women and girls are empowered to drive transformation of social norms and unequal power relations, in the context of HIV.

Actions:

- Strengthen capacity and facilitate coalition building among women's groups, networks of women living with HIV, organizations of men working for gender equality, AIDS activists and human rights groups to create a social movement to reduce stigma and discrimination and advocate for and advance gender equality and women's rights and empowerment against women in the context of HIV.
- Advocate for and support ministries of social welfare to put in place specific policies and programmes, such as micro-finance and social protection schemes, that decrease women's economic vulnerabilities and realign the burden of care between men and women, specifically targeting HIV positive women and unpaid care givers to reduce their vulnerability to, and the impact of, HIV.

- Convene country-level dialogues between organizations working for women's rights, networks of women living with HIV and organizations working with men and boys for gender equality to generate shared parameters and principles for engaging men and boys and to develop strategies to address social norms around gender and sexual relationships in ways that reduce violence, address stigma and discrimination and promote respect for the rights of women and girls, as part of HIV prevention.

Accountability:

- UN Joint Teams on AIDS provide support to women's organizations in 25 countries through mobilizing coalitions in support of women's and girls' rights and gender equality to be part of the 2010 UNGASS country reporting.
- ILO and UNICEF to take the lead in the UN Joint Teams on AIDS in supporting at least three countries per region to gauge and cost unpaid care work women and girls provide in the context of HIV and operationalize social protection programmes for women living with HIV and female care givers by 2012.
- UNFPA to take the lead in the UN Joint Teams on AIDS in supporting at least three countries per region to jointly develop and operationalize, with men and boys, in particular those working for gender equality, strategies addressing social norms around gender and sexual relationships by 2010, and subsequently roll-out to at least four country per region per year.

Result: Strong, bold and diverse leadership for women, girls and gender equality, for their participation in decision-making, in the context of HIV.

Actions:

- Strengthen the leadership skills of women, young women and girls living with HIV to ensure that their rights and needs are addressed through national HIV responses.
- Advocate for governments and/or Country Coordinating Mechanisms to set quotas or targets (at least 40% of positions), for women with the necessary expertise to participate in Country Coordinating Mechanisms, to ensure that the needs and views of women and girls are adequately reflected in the national HIV response. These women will be democratically selected from networks of women living with HIV and women's organizations, including sex worker organisations.
- Support national AIDS authorities in collaboration with networks of women living with HIV, women's organisations, human rights organizations, faith based organisations and organisations working with men and boys, in particular those working for gender equality, to engage and partner with:
 - (i) Eminent political leaders, including parliamentarians, traditional and private sector leaders, by developing and using a common set of national advocacy messages for policy changes for the rights of women, young women and girls and girls in the context of HIV, with specific attention to violence against women.
 - (ii) Country-level influential religious leaders and leverage their power to support the rights and needs of women and girls and reduce stigma and discrimination in the context of HIV; using jointly agreed messages, including for promotion of women's and girls' right to live free of violence and the threat of violence.

Accountability:

- UNDP to take the lead in the UN Joint Teams on AIDS to support leadership development programmes for women, young women and girls living with HIV in 30 countries by end-2010 and 20 countries by the end of 2011, due to develop new national AIDS strategies.
- UN Joint Teams on AIDS advocate for of 40% of positions in Country Coordinating Mechanisms to be allocated to women's groups and networks of women living with HIV by end 2010.
- UN Joint Teams on AIDS support at least three countries per region to establish and document partnerships with eminent political and religious leaders for women, girls, and gender equality in the context of HIV by the end of 2011.

Result: Increased financial resources for women, girls and gender equality in the context of HIV

Actions:

- Facilitate the establishment of a capacity-building "basket fund" with independent oversight, to address fairly the needs identified by networks of women living with HIV; women's groups, including sex worker organisations; groups of men working for gender equality, and marginalized groups so they can engage in and strengthen the national response to HIV for women and girls and gender equality.
- Utilize the UNAIDS Universal Budget and Workplan to align planning and monitoring of UNAIDS programming to the recommendations of this Operational Plan for strengthened accountability for results.
- Advocate for financing institutions and mechanisms, especially PEPFAR, the Global Fund, and foundations, to prioritize work to address the rights and needs of women and girls and gender equality and commit to a minimum target percentage of each grant and/or budget to work toward gender equality and address the rights and needs of women and girls, in the context of HIV.

Accountability:

- UN Joint Teams to support all 17 International Health Partnership and Related Initiative (IHP+) countries to establish and operationalize capacity building basket funds for civil society by end 2010; to document lessons learnt for global policy dialogue, by end 2012.
- UNAIDS to ensure measurable resource allocation for gender programmes, in line with the Operational Plan, and to report on results annually.
- UNAIDS and UNIFEM to monitor and report annually to the UNAIDS Programme Coordinating Board on the funding allocated for the agenda on women, girls, gender equality and HIV, to start in 2010.

Result: Gender responsive UNAIDS

Actions:

- Develop, fund and operationalize a UNAIDS institutional capacity building plan on women, girls, gender equality and HIV, including:
 - (i) An institutional assessment of staff knowledge and capacity to incorporate gender

- equality into their areas of work;
 - (ii) Integration of at least one deliverable for women, girls and gender equality into the job descriptions of all management and programme staff, and assessment of performance accordingly;
 - (iii) Equipping each UN Joint Team on AIDS with a senior specialist on gender equality in line with the recommendations of the Second Independent Evaluation of UNAIDS.
 - Realign relevant UNAIDS technical support and policies, guidelines and tools, including the national AIDS spending assessment, for use at country level to address gender equality and the rights and needs of women and girls in the context of HIV:
 - (i) Equip regional technical support facilities, hubs and centres with expertise on engaging men and boys in gender equality to provide country-level technical assistance;
 - (ii) Advocate for the 2011 Human Development Report at the regional and country level to exclusively focus on women, girls, gender equality and HIV.
 - Support UN Special Envoys and Goodwill Ambassadors to use platforms and strategic opportunities to advocate and galvanize commitment to the rights of women, young women and girls in the context of HIV, with specific attention to violence against women and girls, at regional and global levels, by developing a common set of advocacy messages and a coordinated communication plan.

Accountability:

- The UN Interagency Human Resource Network to propose a UNAIDS policy on the development and operationalization of capacity building development plans for staff to incorporate gender equality into their work by 2010. Report annually to the UNAIDS Programme Coordinating Board on the operationalization of the policy from 2011 onwards.
- Recruit of a senior gender equality specialist under the UN Resident Coordinators system in the eight “Delivering as One” countries, by the end of 2010, in 20 countries by the end of 2011.
- UNAIDS and UNIFEM to ensure that all regional technical support hubs have dedicated resources and expertise for engaging men and boys for gender equality by the second quarter of 2010.
- Regional Directors’ Group to advocate for the 2011 national and regional human development report to focus on women, girls, gender equality and HIV, with specific attention to violence against women and girls. Progress report to be submitted to the UNAIDS Programme Coordinating Board by end 2011.
- UNAIDS and UNIFEM to develop key advocacy messages and a coordinated communication plan for UN Special Envoys and Goodwill Ambassadors for the rights of women and girls in the context of HIV, with specific attention to violence against women and girls, by the first quarter of 2010, with thereafter an annual report to the UNAIDS Programme Coordinating Board on achieving the intended outcomes.

Accountability and Reporting for the Operational Plan

The timeframe of the Operational Plan is five years, from January 2010 to December 2014. It will be implemented by UNAIDS and UNIFEM in line with the UNAIDS technical support division of labour and the UNIFEM strategic plan 2008-2011. The UNAIDS Programme Coordinating Board will take overall responsibility and oversight for the implementation of the Operational Plan. Progress will be monitored and evaluated according to the results and defined indicators and timeframes.

It is proposed that the UN interagency working group on gender equality, including representatives of civil society, in particular women living with HIV and women's organizations, will take responsibility for the global level monitoring of the Operational Plan, based on country-level implementation of UN joint programmes of support for AIDS. To this end it will meet twice a year to measure progress. The interagency working group will present a progress report to the UNAIDS Programme Coordinating Board and the UNIFEM Consultative Committee on an annual basis. In line with the decisions of the 24th Programme Coordinating Board, a report on progress of the first six months of implementation will be presented to the UNAIDS Programme Coordinating Board at its 26th meeting. A fuller assessment of progress will be presented to the 27th meeting of the UNAIDS Programme Coordinating Board.

At the country level, the Operational Plan will be monitored as part of UN joint programmes of support for AIDS, with the participation of representatives of civil society, especially networks of women living with HIV and women's organisations. The country-level data will contribute to country UNGASS reporting and civil society shadow reports, where relevant, as well as country reporting on global commitments to gender equality and national Millennium Development Reports. Country level monitoring data will feed into the global monitoring of the Operational Plan.

Monitoring and evaluation of the Operational Plan will be linked to the UNAIDS 2010-2011 Unified Budget and Workplan performance evaluation framework for UNAIDS. Its performance monitoring indicators specific to women, girls and gender equality will be used to track and evaluate the following:

- ▶ Outcomes on Issues and relevant Results, outline in the Operational Plan;
- ▶ Delivery of key outputs against time-bound indicators;
- ▶ Implementation of actions as set out in framework by cosponsors and secretariat;
- ▶ Expenditure against and actions.

UNAIDS and UNIFEM will assess the Operational Plan biennially at the country and global levels, starting in 2010, to ensure relevance to the dynamics of the HIV epidemic and the response and to learn lessons on its implementation for national, regional and global policy dialogue. A final independent evaluation will take place at the end of the implementation period of the Operational Plan, to measure the impact of the Operational Plan and guide future programming for gender and HIV.

Next Steps

All UN Joint Teams on AIDS will initiate dialogue with civil society, including networks of women living with HIV and women's groups, government and development partners at country levels to identify opportunities to launch prioritized country action to implement this Operational Plan. These actions will be integrated into joint programmes of support. Civil society organizations, in particular networks of women living with HIV and women's organizations are encouraged to identify actions in the Operational Plan that they can take forward, in close consultation and coordination with national counterparts and the UN Joint Teams on AIDS. Where additional finance is required UNAIDS will jointly allocate resources to catalyze action and mobilize resources through existing country-level mechanisms. It will also advocate for partners to do likewise.

Countries interested and ready to take this Operational Plan forward, will be supported to “kick start” the implementation of the Operational Plan. UN Joint Teams on AIDS, national AIDS authorities and women's groups will jointly identify country-specific actions to be included in the UN Joint Programme of Support to the national strategic plan for HIV. It is envisaged that countries facing different epidemics will be equally engaged, so that lessons can be learned from a variety of contexts. These costed two-year strategies should address key elements of the Operational Plan, relevant for the country, to allow lessons to be learned in different contexts. UNAIDS will strive to allocate its resource accordingly, including programme acceleration funds, to enable these countries to accelerate their agenda on women, girls, gender equality and HIV and to utilize experiences gained for strategic input into high level policy dialogue.

As stated above, much can be achieved by utilizing political leadership to make a difference to the lives of women and girls, in the context of HIV. However given the commitment, commensurate financial resources will also be required for the implementation of the Operational Plan. An expert working group in the UNAIDS Secretariat is currently working on the question of costing the Operational Plan. A preliminary estimate of costs will be present to the 25th meeting of the Programme Coordinating Board. In addition, countries are invited to identify activities from the Operational Plan that are relevant to their context, cost them and identify what resources gaps they face, to be presented to the UNAIDS Programme Coordinating Board, at its 26th meeting.

PARTICIPANTS

GLOBAL TASK FORCE ON WOMEN, GIRLS, GENDER INEQUALITY AND HIV		
Name	Position	Organization/Country
Mr Michel Sidibé (Co-Chair)	Executive Director, UNAIDS	UNAIDS Secretariat
Professor Sheila Tlou (Co-Chair)	Former Minister of Health	Botswana
H.E. Ms Grace Dairo	State Minister	Southern Sudan
H.E. Ms Fatoumata Sire Diakite	Malian Ambassador to Germany	Mali
H.E. Ms Nilcéa Freire	Minister of the Special Secretariat of Policies for Women	Brazil
H.E. Ms Vabah Gayflor	Minister of Gender and Development	Republic of Liberia
H.E. Mr Lennarth Hjelmaker	HIV/AIDS Ambassador	Sweden
H.E. Dr Marijke Wijnroks	AIDS ambassador for the Netherlands	Netherlands
Ms Claudia Ahumada	Acting Constituencies Programme Manager	World AIDS Campaign
Ms Alanna Armitage	Director	UNFPA Office in Geneva
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Ms Mandeep Dhaliwa	Cluster Leader	Human Rights, Gender & Sexual Diversities UNDP
Ms Vuyiseka Dubula	General Secretary	Treatment Action Campaign
Ms Ndèye Tening Gaye	Member Coordinator	Groupe pour Etude et Enseignement de la population (GEEP)
Ms Adrienne Germain	President	International Women's Health Coalition
Ms Nyaradzayi Gumbonzvanda	General Secretary	World YWCA
Dr Carol Jacobs	Chairman	National HIV/AIDS Commission-Prime Minister's Office
Ms Kaburo Kobia	Director of Communications	World YWCA
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Dr Françoise Ndayishimiye	Senior Gender Adviser	The Global Fund to Fight AIDS, TB and Malaria
Ms Rolake Odetoynbo	Project Director	Positive Action for Treatment Access (PATA)
Mr Dean Peacock	Co-Director	Sonke Gender Justice Project
Professor Linda Richter	Executive Director	Child, Youth & Family Development, Human Sciences Research Council, South Africa
Ms Christine Ricardo	Senior Programme Officer	Instituto Promundo
Dr Nafis Sadik	UN Secretary-General's Special Envoy For HIV/AIDS in Asia & the Pacific	UNFPA
Dr Joanne Sandler	Deputy Director for Programmes	UNIFEM
Dr Mariangela Simao	Director, National AIDS Programme, Ministry of Health	Brazil
Ms Ruth Morgan-Thomas	Project Coordinator	SCOT-PEP
Ms Zonibel Woods	Programme Manager	The Ford Foundation

WORKING GROUP 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

Name	Position	Organization/Country
Dr Lynn Collins	Technical Advisor HIV	UNFPA
Ms Alexandra Garita	International Advocacy Coordinator	International Planned Parenthood Federation, USA
Ms Beri Hull	Global Advocacy Officer	International Community of Women Living with HIV/AIDS (ICW), USA
Ms Malu Marin	Director	Action for Health Initiatives (ACHIEVE) Inc. Philippines
Ms Mukamulumbu Mweemba	Youth Coordinator	YWCA, Zambia
Ms Alessandra Nilo	Director	President GESTOS- Soropositivity, Communication and Gender Issue”, Brazil
Ms Nathalie Nkoume		Cameroon National Association for Family Welfare, Cameroon
Mr Mika Salminen	Principal epidemiologist on HIV/AIDS.	National Public Health Institute, Finland
Ms Zonibel Woods (Chair)	Programme Manager	The Ford Foundation, USA

WORKING GROUP 2: ASSISTING COUNTRIES TO ENSURE THAT NATIONAL STRATEGIES, OPERATIONAL PLANS AND ASSOCIATED BUDGETS ADDRESS THE NEEDS OF WOMEN AND GIRLS IN THE CONTEXT OF HIV

Name	Position	Organization/Country
Ms Claudia Ahumada, (Chair)	Acting Constituencies Programme Manager	World AIDS Campaign
Dr Robert Carr	Executive Director	Caribbean Vulnerable Communities Coalition
Ms Nazneen Damji	Programme Manager	Programme Manager Gender equality and HIV/AIDS UNIFEM
Ms Nomi Fuchs-Montgomery,	Senior Advisor for Prevention and Gender	Office of the Global AIDS U.S. Department of State
Dr Imane Khacani		Youth Coalition for Sexual and Reproductive Rights Morocco
Ms Neelanjana Mukhia	Manager	International Secretariat of Women Won't Wait Campaign, Action Aid International
Dr Lydia Mungherera	Policy/Advocacy officer	The AIDS Support Organisation Uganda (TASO)
Ms Sophie Pinkham		International Harm Reduction Development Program Open Society Institute
Ms Ale Trossero	Senior HIV Officer	International Planned Parenthood Federation, UK
Ms Eva Wallstam	Consultant	Swedish International Development Cooperation Agency

WORKING GROUP 3: ADVOCACY, CAPACITY STRENGTHENING AND MOBILIZATION OF RESOURCES TO DELIVER A COMPREHENSIVE SET OF MEASURES TO ADDRESS THE NEEDS AND RIGHTS OF WOMEN AND GIRLS IN THE CONTEXT OF HIV

Name	Position	Organization/Country
Dr Avni Amin,	Technical Officer	Department of Gender, Women and Health, World Health Organization
Mr Khumalo Bafana	Co-Director	Sonke Gender Justice, South Africa
Ms Nobayeni Dladla	Health Attaché	Permanent Mission of South Africa to the United Nations, South Africa
Ms Sophie Dilmitis	HIV and AIDS Coordinator	World YWCA
Dr Khadija T. Moalla (Chair)	Regional HIV/AIDS Practice Leader & Programme Coordinator for Arab States	UNDP
Ms Noelene Nabulivou	Coordinator	Women's Action for Change, Fiji
Dr Francoise Ndayishimiye	Senior Gender Adviser	The Global Fund to Fight AIDS, TB and Malaria
Ms Marion Quinn	Health Advisor	Ministry of Foreign Affairs and Trade, New Zealand
Ms Lisa Schechtman	Senior Policy Officer	Global AIDS Alliance

Global Task Force on Women, Girls, Gender Equality and HIV

During the 24th Programme Coordinating Board, members reaffirmed their collective commitment to urgently move forward the agenda on women, girls, gender equality and HIV and decided to operationalize the ***UNAIDS Action Framework: Addressing Women, Girls, Gender Equality and HIV***, as follows:

“Recognizing the need to urgently move to implementation of the UNAIDS Action Framework as a tool for accelerated UN action, and the need to garner the necessary support for the document from the Programme Coordinating Board, requests the Executive Director of UNAIDS to appoint an advisory work group made up of experts on women and HIV, with representation of women’s organizations and women living with HIV to work with the Executive Director in developing, implementing, and monitoring an operational plan and further requests UNAIDS to begin operationalization by October 2009 (decision 12.4).”

In support of this commitment, Michel Sidibé, Executive Director of UNAIDS, pledged to establish a Global Task Force on Women, Girls, Gender Equality and HIV, with the overall aim of significantly improving global action for women and girls within the context of AIDS, toward the achievement of Universal Access to HIV prevention, treatment, care and support, and in support of the achievement of the Millennium Development Goals. The Global Task Force will build on the extensive consultative process already undertaken around the UNAIDS Action Framework document. The Operational Plan will include strategic recommendations as well as a defined set of milestones, to measure progress on the implementation of the Action Framework and inform the 26th Programme Coordinating Board accordingly.

Accelerating global action for women and girls within the context of AIDS

The UNAIDS Action Framework: Addressing Women, Girls, Gender Equality and HIV has been developed for the UNAIDS family and UNIFEM as a key internal tool to guide United Nations (UN) action to accelerate and expand country-specific action for women, girls and gender equality in the context of HIV. The Action Framework has adopted a strategic and prioritized approach, with an emphasis on greater coordination of policies, programmes, and resources. It builds on past accomplishments and important contributions from governments, civil society (especially organizations and networks of HIV-positive women and women’s health and rights organizations), AIDS service organizations, and donors and multilateral agencies at country, regional and global levels. The Action Framework also draws upon learning from numerous gender assessments and analyses and the UN Secretary General's Task Force on Women, Girls and HIV/AIDS in Southern Africa.

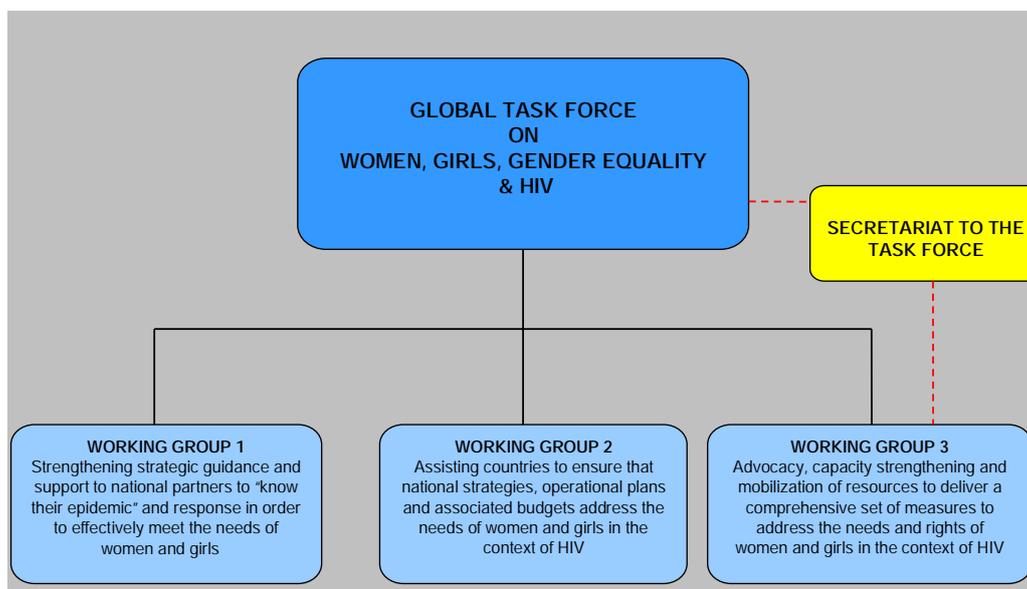
The Action Framework focuses on action in the following three areas:

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. assisting countries to ensure that national HIV and development strategies, operational plans, monitoring and evaluation frameworks and associated budgets address the needs of women and girls in the context of HIV; and,
3. advocacy, capacity strengthening and mobilization of resources to deliver a comprehensive set of measures to address the needs and rights of women and girls in the context of HIV

A time-compressed process for results

The Global Task Force and its Working Groups will work to operationalize the *UNAIDS Action Framework: Addressing Women, Girls, Gender Equality and HIV* within a period of 30 days, as committed by the UNAIDS Executive Director at the Programme Coordinating Board.

More than 30 governments and organizations are participating in the process (see Annex 1). The members of the Global Task Force have outstanding expertise and experience in the area of women, girls and AIDS, especially at the country level. The members are high-level institutional leaders who can speak on behalf of their organizations or constituencies, and represent women’s organizations, networks of people living with HIV, other civil society organizations, government sector, academics, and United Nations agencies. The Task Force will be informed by the work of the three Working Groups, the members of which have been identified through an open call for nomination. Each of the working groups will focus on one of the action areas outlined above and prepare a draft action plan accordingly.



Working Group 1 will develop an action plan on how to strengthen UN support to countries in gathering and using relevant sex-and age-disaggregated, qualitative and other data to build the knowledge base for programming action, to facilitate gender analysis, to integrate lessons learned from previous experiences, and to assist countries in using this evidence to inform gender-responsive programming for women and girls.

Working Group 2 will develop an action plan to assist countries in focusing on women and girls in their national AIDS strategies and development plans and processes, and translating these into operational plans and programmes. This will also include effectively linking international health initiatives to national responses in order to achieve better HIV, health, human rights and development outcomes for women and girls.

Working Group 3 will develop an action plan to advance advocacy at the global, regional and country levels to help translate policy commitments on women, girls and gender equality into fully funded programmes with the full support of the UN system. The plan will also focus on capacity building and mobilizing necessary resources.

Recommendations for positive change

The Task Force will meet once in 2009, to review the synthesized Operational Plan, based on the outcomes of the three Working Groups. This Operational Plan will include actionable and strategic recommendations which will not only guide the work of the UNAIDS Cosponsors, Secretariat and UNIFEM, but also inspire partners to accelerated action at national, regional and global level.

In keeping with the *UNAIDS Joint Action for Results: UNAIDS Outcome Framework*, specific recommendations could focus on:

- Addressing specific gaps in the response to the epidemic, as well as social, political and structural constraints, and delivering results;
- Utilizing opportunities for linking specific actions and broader agendas for reaching the MDGs;
- Ensuring greater clarity on the relationship between needs, financing, activities and outcomes; and,
- Engaging partners at all levels of the response, in particular communities and civil society.

Key events in the Global Task Force process

