

This tool is adapted from the “Framework for Women, Girls, and Gender Equality in National Strategic Plans on HIV and AIDS in Southern and Eastern Africa.” The original Framework is a collaborative initiative of 19 organizations. For more information, please visit <http://heard.ukzn.ac.za/Homepage.aspx> and <http://www.athenanetwork.org>. We thank UNDP for their partnership and support in this endeavor.

A short list of key stakeholders whose meaningful involvement we view as central to the success of HIV and AIDS policies and programmes are identified at the end of this policy tool.

We use the term women from marginalised communities to signify women who are typically excluded or disenfranchised. For the purposes of successfully addressing women, girls, and gender equality in the context HIV, we note that specific attention needs to be paid to marginalised communities such as: women living with HIV; women engaged in sex work or drug use; lesbian, bisexual, and transgender women and men; migrant, refugee, or internally displaced women; women in prison; older women caregivers; and women with disabilities.



POLICY ANALYSIS TOOL

Addressing Gender-Based
Violence and Integrating Attention
to Engaging Men and Boys for
Gender Equality in National
Strategic Plans on HIV and AIDS



ATHENA



HEARD



Sonke Gender
Justice Network

HIV/AIDS, Gender Equality, Human Rights



Salamander Trust

TRANSFORMING THE WAY WE THINK ABOUT HIV

1: Eliminating Gender-Based Violence and Discrimination

NSPs must recognise gender inequality as a fundamental driver of gender-based violence with attention to addressing gender-based violence as both a cause and a consequence of HIV transmission.

Attention must also be paid to addressing gender-based violence in all its forms, such as intimate partner violence, sexual violence, and psychological violence as well as systemic, structural violence in peace, conflict, and post-conflict settings.

Specific interventions and approaches should include:	Strength	Gap	Priority	Comments
Interventions to create supportive legal and policy frameworks to prevent and redress all forms of violence against women, including in intimate partner settings				
Legal reform to criminalise marital rape				
Interventions that build the capacity of the police, healthcare workers, social workers, and the judiciary to respond more effectively and sensitively to gender-based violence				
Interventions to alleviate stigma and discrimination on the basis of HIV status, gender, and sexual orientation in the police, healthcare sector, social services, and the judiciary				
Interventions to support survivors of violence access to justice and remedies				
Legal and other responses to end cultural and traditional practices that are harmful to the health and rights of women and girls:				
The decriminalisation of sex work				
The decriminalisation of consensual adult same-sex sexual conduct				

Comprehensive post-rape care protocols for HIV prevention, including:

Specific interventions and approaches should include:	Strength	Gap	Priority	Comments
Post-exposure prophylaxis available within 72 hours				
Psycho-social support				
Emergency contraception				
Access to voluntary, safe, and comprehensive termination of pregnancy care and services				

Prevention strategies around gender-based violence need to include:

Specific interventions and approaches should include:	Strength	Gap	Priority	Comments
Age-appropriate comprehensive sexuality education for all women, men, girls, and boys from the age of 5 (both in and out of school) which includes factual information on knowing one's body and development of mutual respect, gender equality, human rights, and transforming social norms				
Women's economic empowerment and gender equality interventions to reduce gender-based violence				
Interventions to halt intimate partner violence, including marital rape				
Interventions to halt and address violence and discrimination against sex workers				

Prevention strategies around gender-based violence need to include: (cont'd)

Specific interventions and approaches should include:	Strength	Gap	Priority	Comments
Interventions to halt and address violence and discrimination against lesbian, bisexual, and transgender women				
Interventions to halt and address violence and discrimination against women who use alcohol and/or other drugs				
Interventions to halt and address violence and discrimination against women with physical and/or mental health illnesses and/or disabilities				
Interventions working with men, women, girls, and boys to challenge notions of violence, transform gender norms, and address harmful masculinities				
Interventions to support the rehabilitation of survivors of violence				
Interventions to support the rehabilitation of perpetrators of violence to prevent future violence				
Overall score on this component				

“Most of the HIV prevention programs are addressed to reduce risk factors that increase the possibility of getting HIV (number of sexual partners, use of condoms, etc). Almost no HIV prevention or care program is directed to reduce the vulnerability conditions in which women acquire HIV (poverty, violence, gender roles, lack of education, lack of leadership, etc).”

— **Community woman leader, Latin America**

2: Engaging Men and Boys for Gender Equality

NSPs should engage men and boys for gender equality. The work with men and boys to achieve gender equality must promote and advance the health and rights of all women, men, girls, and boys.

Specific interventions and approaches should include:	Strength	Gap	Priority	Comments
Interventions to transform gender norms, challenge harmful masculinities, including notions of manhood that contribute to violence and increase women's and men's vulnerabilities to HIV, and advance more equitable and healthy relationships between men, women, boys, and girls				
"Know your rights" initiatives and campaigns to empower and educate women and men, including boys and girls, on human rights in general and women's rights in particular				
Interventions to strengthen the health seeking behavior of men and boys, through work that addresses gender norms transformation and including the promotion of access to and utilization of services such as HIV testing, prevention, and treatment				
Specific interventions to support increased male involvement in the prevention of vertical transmission of HIV				
Age-appropriate comprehensive sexuality education for all women, men, girls, and boys from the age of 5 (both in and out of school) which includes factual information on knowing one's body and a focus on development of mutual respect, gender equality, human rights, and transforming social norms				
Interventions that reduce the disproportionate burden of care borne by women and girls, including improved public sector services and interventions to promote and support the equal sharing of responsibility between women and men in families and community care giving organisations				
Interventions that change gender norms at the household and community level: Increase male involvement in care-giving. Increase shared decision-making in the household				
Improve mutual respect between intimate partners				
Reduce alcohol consumption by men				
Interventions to address homophobia in all its forms				

Voluntary medical male circumcision (MMC) for HIV prevention should be an entry point to support the broader health seeking behaviour of men and boys. MMC programs also need to include strategies to ensure there are no adverse impacts on women and girls. Specific strategies include:

Specific interventions and approaches should include:	Strength	Gap	Priority	Comments
Specific targeted and factually correct information on MMC and HIV for women and men, including information on partial protection for men and the continued need for condom use to prevent HIV transmission				
Comprehensive counselling, including gender equality education for men, as part of MMC services				
Comprehensive reproductive and sexual health programmes for men linked into the delivery of MMC				
Overall score on this component				

3: Enabling Environment: Advancing Human Rights and Access to Justice

NSPs must firstly recognise and then uphold and protect women's rights.

Specific interventions and approaches should include:	Strength	Gap	Priority	Comments
Elimination of all forms of violence, stigma, and discrimination on the basis of HIV status, gender, and sexual orientation				
Women's enjoyment of equal rights in marriage and co-habitation, and protection of rights with respect to separation, divorce, and child custody				
Women's property and inheritance rights				

Specific interventions and approaches should include:	Strength	Gap	Priority	Comments
Women's access to justice and equal protection and benefit of the law				
Decriminalisation of HIV status and transmission, sexual orientation, gender identity, sex work, and abortion				
Elimination of all forms of coercive and discriminatory practices in health care settings, such as coerced and forced sterilisation of women living with HIV				
Overall score on this component				

4: Meaningful Involvement of and Leadership by Women Living With and Affected by HIV

NSPs should acknowledge and advance women's leadership and meaningful participation, particularly by key stakeholders such as women living with HIV, young women, home-based caregivers, and women from marginalised communities.

Specific interventions and approaches should include:	Strength	Gap	Priority	Comments
Recognition of the GIPA principle and clear mechanisms, including budget allocations, for the particular involvement of women living with and affected by HIV in AIDS responses				
Clear processes and mechanisms outlined for meaningful involvement of women living with and affected by HIV in NSP development, implementation, review, and evaluation				
Overall score on this component				

5: Preventing HIV Transmission among Women and Girls

NSPs must reduce vulnerability to HIV, and address the structural determinants of HIV transmission for women and girls. NSPs must also reduce HIV transmission to women and girls through specific interventions.

Specific interventions and approaches should include:	Strength	Gap	Priority	Comments
Interventions to address cultural and traditional practices that are harmful to the health and rights of women and girls, such as early marriage and widow inheritance				
Integrated sexual and reproductive health and HIV services				
Equitable access to female and male condoms, and interventions to build skills and confidence to negotiate condom use				
Access to, and programmes to support, the use of women controlled HIV prevention methods, including new prevention technologies as they become available, such as microbicides, pre-exposure prophylaxis, treatment as prevention, and vaccines				
Management of alcohol and/or other drug substance use for individuals, including harm reduction for women who use drugs and specific interventions for women who are partners of injecting drug users				
Overall score on this component				

“Women from vulnerable groups can provide practical advice not found in any literature; this is always a new look and a new vision. In my particular personal opinion, women (who went through hell) should be maximally involved in the work.”

— **Community woman leader, Eastern Europe and Central Asia**

6: Accountability: Budgeting, Monitoring, Research, and Gender Expertise

NSPs must recognise the central importance of accountability around responding to women, girls, and gender equality and the need to strengthen organisational abilities to monitor and report on interventions for women and girls.

NSPs must ensure the following with regard to budgeting:

Specific interventions and approaches should include:	Strength	Gap	Priority	Comments
Fully costed and budgeted gender interventions within the NSP				
Audits of spending in relation to the NSP which include gender audits				

NSPs must ensure the following with regard to monitoring:

Specific interventions and approaches should include:	Strength	Gap	Priority	Comments
Gender indicators, including a broader set of indicators around gender, health, human rights, and social change				
Indicators on the impact of programmes and policies on women and girls				
Meaningful civil society involvement in reporting, specifically by women's groups, networks of women living with HIV, caregiver's networks, and other key stakeholders				
Sex disaggregated data, including targets which are sex disaggregated				
Age disaggregated data by five year cohorts, and up to 64 years of age				

NSPs must ensure the following with regard to research:

Specific interventions and approaches should include:	Strength	Gap	Priority	Comments
The involvement of women in the design, delivery, and analysis of HIV research, including clinical trials				
Doing research with women, with communities – “by and for” – and finding out what data mean to the communities themselves				

NSPs must ensure the following with regard to gender expertise:

Specific interventions and approaches should include:	Strength	Gap	Priority	Comments
Gender training and sensitisation, including promoting expertise in health, human rights, and gender				
Gender analysis training, such as how to analyse data trends and utilise information for decision-making and resource allocation				

Process considerations through the setting of targets and monitoring include:

Specific interventions and approaches should include:	Strength	Gap	Priority	Comments
Demonstrating efficiency and effectiveness of a gendered response from a public health and human rights perspective				
Research that seeks to measure long term, transformative processes in terms of gender and social norms				

Overall score on this component				
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7: Key Stakeholders

NSPs must ensure the inclusion in all processes and consideration of the specific needs of the following groups:

	Strength	Gap	Priority	Comments
Women				
Women living with HIV				
Young women				
Care givers, both primary and secondary				
Lesbian, bisexual, and transgender women				
Women in sex work				
Women migrants/refugees/internally displaced persons				
Women who use drugs				
Women in prison				
Women with disabilities				
Vulnerable men: men who have sex with men, prisoners, men with disabilities, and refugee and migrant men				
Overall score on this component				