

SALAMANDER TRUST AT THE WOMEN'S NETWORKING ZONE

Washington, July 2012

Salamander Trust coordinated and took part in several sessions in the Women's Networking Zone, which is coordinated by our partner, the ATHENA Network and local organisations. The sessions in which we took part or which we coordinated were as follows:

1. [Development Connections](#), [ICW Global](#), [Positive Women's Network](#), [Salamander Trust](#)

Violence Against Women Living with HIV/AIDS: An International Overview

Speakers from: Spain; USA; Kenya; Ukraine; Jamaica; Tajikistan. ["A global perspective: Conceptual framework, available data and policy implications"](#)

Monday 23rd July, 10:30 – 11:30

Global Village, WNZ, Main Stage

This session, coordinated by Development Connections, included Salamander Trust Associate Marijo Vazquez from Spain, who spoke about the key background paper on HIV and GBV which she and co-researcher Fiona Hale wrote for Development Connections, UN Women and ICW Global, as Salamander Associates. This background paper has been widely referenced, since it is the first document to bring together many previous articles and reports on this immense issue into one coherent overview document.

2. [Salamander Trust](#)

The Global Plan: What does it mean for Women's Rights?

Speakers include: Dr Mitch Besser (Mothers2Mothers), Anandi Yuvaraj (ICW Asia Pacific), Beri Hull (ICW Global), Assumpta Reginald (ICW W Africa), Teresia Otieno (ICW E Africa), Esther Sheehama (Namibian WHN), Baby Rivona (APN+), Professor Carrie Foote (Indiana University).

Monday 23rd July, 12:45 - 1:45

Global Village, WNZ, Annex

This session brought together a number of key activists from around the world, together with Dr Mitch Besser of Mothers2Mothers to discuss the challenges of the Global Plan, in terms of women's rights. Whilst the Global Plan is very well-intentioned, in terms of eliminating "mother to child transmission" as it is known, the document is not without its challenges. For instance, there is no mention of the words "voluntary" or "confidential" or the phrase "informed consent" in relation to HIV testing of women during pregnancy. This has sadly led to a number of countries taking a carte blanche approach to testing women, with little or no recognition of the potential gender-based violence which many women are experiencing, both from healthcare professionals themselves and from their partners or other family members when their HIV diagnosis is known. This can have an inadvertent but devastating effect on the health both of the woman concerned and her unborn child – as well as on her older children, who can face physical and psychological



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consequences. We have written about this with other colleagues elsewhere, including in an article entitled: "Towards an HIV-free generation: getting to zero or getting to rights?", published in a special edition of Reproductive Health Matters journal.

The Global Plan

For the Elimination of HIV Infection in Children and Keeping their Mothers Alive has two global targets by 2015 – "to reduce the number of new HIV infections among children by 90% & the number of AIDS-related maternal deaths by 50%"

What does it mean for women's rights?

MISSING THE TARGET

The Long Walk: Ensuring comprehensive care for women and families to end vertical transmission of HIV
Community experiences of efforts to prevent vertical transmission of HIV in India
March 2012

PILLAR 1: Preventing HIV among women of reproductive age

my health

PILLAR 2: Meeting the unmet family planning needs for women living with HIV

my choice

PILLAR 3: Preventing HIV transmission to infants during pregnancy, delivery and breastfeeding

my child

PILLAR 4: HIV treatment and care for women living with HIV and their families

my life

What is being done to reach these targets?

What are the realities and needs of women regarding the Global Plan?

How can we overcome daunting barriers to achieving these targets? To name but two:

- HIV stigma, discrimination, criminalization
- GBV, especially in health care settings

How can we best build women's meaningful participation in the scale-up of Global Plan initiatives & support women with HIV, and their babies, to live safe, happy, & healthy lives?

The Forced and Coerced Sterilization of HIV Positive Women in Namibia

The International Community of Women Living with HIV/AIDS (ICW)

ICW Southern Africa & ICW Eastern Africa
Sexual, Reproductive and Maternal Health and Rights (SRMHR)
Regional Advocacy & Policy Forum Meeting Report
January 2011

Building women's meaningful participation in the scale-up of prevention of vertical transmission programmes

Ensure that women's voices are heard...¹

POSITIVE AND PREGNANT: HOW DARE YOU

A study on access to reproductive and maternal health care for women living with HIV in Asia

APMT
Women of the Asia Pacific Network of People Living with HIV

PANEL: Anandi Yuvaraj, ICW, Asia Pacific, India; Assumpta Reginald, ICW, W Africa; Baby Rivona, ICW Asia Pacific, Indonesia; Dr. Mitch Besser, Founder, Director of Mothers2Mothers, South Africa; Beri Hull, ICW, Global, Washington DC; Esther Sheehama, Namibian Women's Health Network; Teresa Otieno, Women Fighting AIDS in Kenya, ICW, E Africa; Agness Mkwue, Site Coordinator, Mothers2Mothers; Chair: Prof. Carrie Foote, Indiana Univ. US; Organizer: Alice Welbourn, Salamander Trust, UK (Contact: alice@salamandertrust.net)

3. [Program on Global Health and Human Rights](#), Institute for Global Health, University of Southern California

The Pregnancy Intentions of Women living with HIV

Speakers include: Alice Welbourn (Salamander Trust): "Towards an HIV-free generation: getting to zero or getting to rights?"

Wednesday 25th July, 11:45 - 12:45

Global Village, WNZ, Main Stage

This session, coordinated by Sofia Gruskin, Founding Director of the Program on Global Health and Human Rights at the University of Southern California, presented the Special Edition of the Reproductive Health Matters Journal, in which our article, mentioned above, appeared. Alice was invited to say a few words about the issues outlined above (Chitembo et al 2012). The whole journal special edition, including this article, can be accessed here: http://rhm-elsevier.com/issues?issue_key=S0968-8080%2812%29X0003-X



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4.

Monitoring and Evaluation: Shaping the Evidence Base WHAT DOES IT MEAN FOR WOMEN'S RIGHTS?

"Absence of Evidence Does not equal Evidence of Absence"

Dr Shirin Heidari, International AIDS Society, Vienna WNZ, 2010

Following on from hugely popular sessions at the Women's Networking Zones in Vienna, 2010 and Rome, 2011, Salamander Trust is delighted to welcome you to another session on this important issue in the

**Women's Networking Zone, Washington DC, 2012
Wednesday 25th July 2012
3.45-4.45 - Annex stage**

Guest discussants include:

Dr Avni Amin	WHO
Ms Nazneen Damji	UNWomen
Ms Dalish Prum	Cambodian Community of Women living with HIV
Ms Luisa Orza	ATHENA Network

What is an "RCT"?

What is a "trial"?

How come our stories are just called "anecdotes" and rejected?

How come some evidence is "stronger" than others?

How can we turn our stories into "evidence"?

How can we meet researchers?

How can we influence what questions researchers investigate?

How can researchers involve us?

.....How can WE become researchers??



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This session arose out of an ongoing concern that we have addressed in WNZs in Vienna and Rome. This is that most of the lived experiences of women living with HIV are not acknowledged or addressed by policy makers, owing to the lack of



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recognition of so-called “anecdote” by academics or policy makers alike. This leads also to a lack of recognition of the importance of involving those most affected by an issue in the research, planning, implementation, M&E process, since it is assumed that this involvement will somehow “bias” or “corrupt” the research data. This view is rooted very much in ideas of how to conduct science in a laboratory. However, there is sadly limited recognition, to date, that such approaches are largely inappropriate for the social sciences. There are other key areas of medical advancement which have embraced whole-heartedly the value of involving those most affected as key stakeholders. The work of the McGill Institute for Human Development and Well-Being in Canada, and the Papua New Guinea Institute of Medical Research are notable exceptions, where the involvement of communities in the entire research process is seen as critical to the success of the work. Dalish Prum of Cambodia described how women living with HIV in her country made use of the CEDAW process to produce a shadow report, which highlighted her own country’s short-comings in relation to women’s rights. Nazneen Damji of UNWomen explained how women in any country can build on this process to hold their government to account in its policies and practices.

Luisa Orza of ATHENA Network talked about the complex process of setting indicators; the "gap" between the high level indicators and the kind of data that it is feasible for grassroots organisations to gather; the fact that big quantitative indicators do not get into the nuanced realities of people's lives and are a bit of a blunt tool; the need to work with both quantitative and qualitative data. Luisa also discussed “the evidence” issue and the fact that small organisations are usually sitting on a huge amount of data which often never get analysed or used because they are treated as not relevant or not in the right format – or because organisations do not know who to give the data to.

Avni Amin of WHO talked about the WHO research validation process, whereby guidelines are developed by the Guidelines Review Committee. She also discussed the WHO good practice guide in relation to HIV and gender-based violence that was under development.

TO READ MORE ABOUT THE WNZ and related issues, please click [here](#).

