

RECOMMENDATIONS

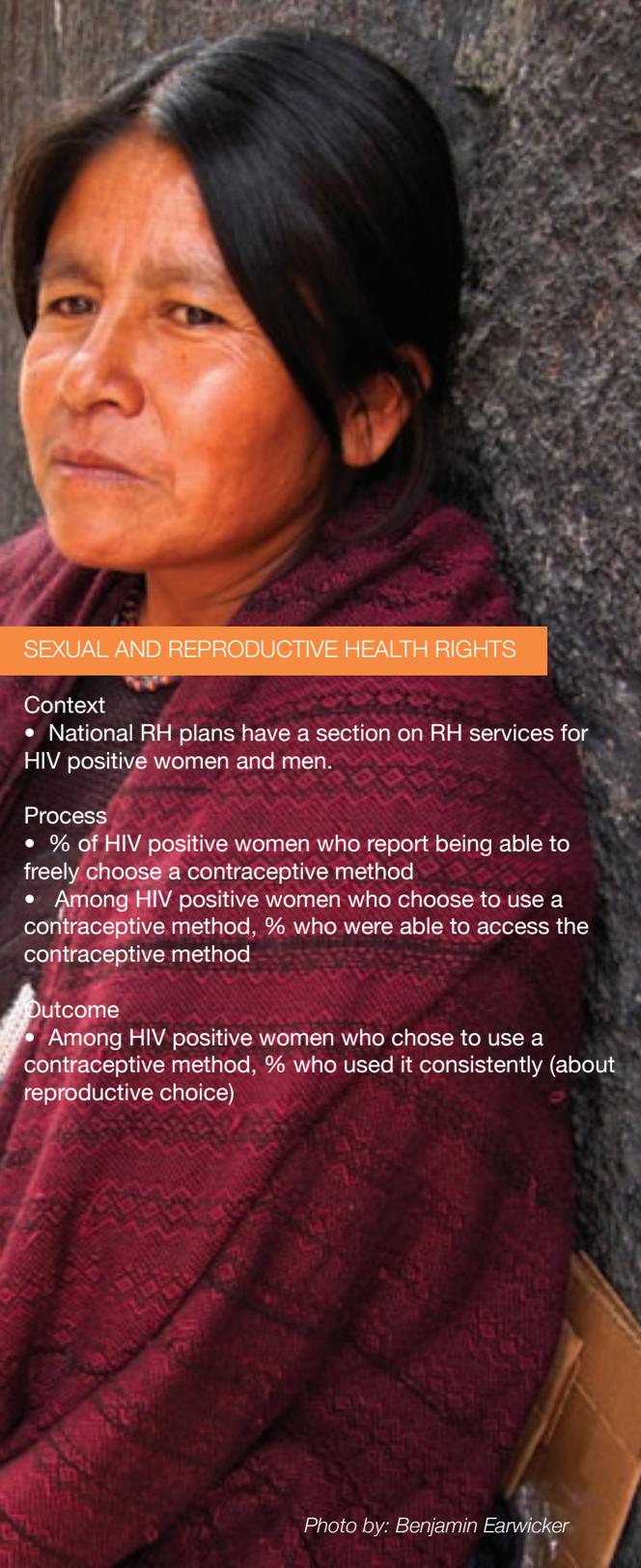
1. Adopt a conceptual framework for gender equality that takes into account multisectoral, structural and social factors that may constrain individual action.
2. Ensure alignment HIV programmes, national development priorities and international commitments on women’s rights, the MDGs, the Declaration of Commitment on HIV/AIDS, and human rights obligations.
3. Address gender equality in HIV programming at the High Level meeting on HIV, High Level Forum on Aid Effectiveness and the MDG review by including strategic programmatic actions and appropriate indicators.
4. Build policy and programming based on the centrality of violence against women as a barrier to effective and comprehensive prevention, care and treatment of HIV programming for women.
5. Advocate with leaders at all levels to support allocation of resources and programming to address intersections of gender-based violence and HIV in global, regional and national AIDS responses.
6. Integrate HIV, responses to violence, and sexual and reproductive health into policies, programming and services as needed.
7. Apply gender-responsive budgeting to HIV programming at all levels, including resource allocation and monitoring and evaluation.
8. Ensure substantive inclusion of gender equality machineries, civil society organisations, organisations of women and men living with HIV, and gender equality advocates in national consultations and planning.
9. Build and strengthen capacity in gender expertise and human rights of ministries and government bodies responsible for planning, budgetary, and resource allocations regarding HIV.
10. Strengthen women’s organisations where needed to fulfil their role as advocates and monitors in implementation of new aid effectiveness principles and modalities.

Gender-based indicators in the response to HIV should not only be outcome oriented but context- and process-oriented. As such, there may be a need to review the indicators in UNAIDS’ National Composite Policy Index (NCPI) and in National AIDS Spending Assessments (NASA) tools to incorporate gender equality and women’s empowerment indicators.

A critical step on the road to reducing vulnerability and increasing resilience for women and girls is al to ensure inclusion of multi-level indicators of vulnerability to HIV at the programme and policy level. These include designing and testing different kinds of indicators, for example indicators that address the intersections of HIV and violence against women, or HIV and access to sexual and reproductive health services more broadly. Below are examples of indicators that push us to think more deeply into what and how we measure success:

VIOLENCE AND HIV

- Context**
- Prevalence of HIV and STIs among women survivors of violence
 - Prevalence of women living with HIV who experience IPV, family and/or domestic violence and/or violence by non-partner perpetrators
- Process**
- Rate of condom use at last intercourse by women who have experienced violence
 - Awareness and availability of post exposure prophylaxis by the general public and health workers
- Outcomes**
- Existence of policies and guidelines to address the intersection of violence against women and HIV/AIDS in strategic sectors, including health and justice
 - Attitudes, knowledge and behaviour of communities as it relates to prevention aspects of violence against women and HIV/AIDS.



SEXUAL AND REPRODUCTIVE HEALTH RIGHTS

- Context**
- National RH plans have a section on RH services for HIV positive women and men.
- Process**
- % of HIV positive women who report being able to freely choose a contraceptive method
 - Among HIV positive women who choose to use a contraceptive method, % who were able to access the contraceptive method
- Outcome**
- Among HIV positive women who chose to use a contraceptive method, % who used it consistently (about reproductive choice)



EXPERT GROUP CONSULTATION ON TRACKING AND MONITORING GENDER EQUALITY AND HIV IN AID EFFECTIVENESS

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Outcomes and Recommendations



Photo by: Benjamin Earwicker

Aid effectiveness is connected to trade and macroeconomic frameworks. In restructuring development aid, governments and donors have to respond to aspects of these frameworks that may exacerbate inequalities between and within countries and limit state capacity to deliver on national development goals, at the core of which is realising gender equality and human rights.

While gender inequality is increasingly acknowledged as a driver of the HIV/AIDS epidemic, there is still uneven integration of gender analyses in global and national policies, planning and programming, and even less translation into action and budgetary allocations. The absence of a theoretical framework that links structural, social and individual determinants of gender inequality makes it difficult for programming to address differential gendered vulnerabilities.

“THERE IS STILL UNEVEN INTEGRATION OF GENDER ANALYSES IN GLOBAL AND NATIONAL POLICIES, PLANNING AND PROGRAMMING AND EVEN LESS TRANSLATION INTO ACTION AND BUDGETARY ALLOCATION.”

“GENDER INEQUALITY IS A VIOLATION OF HUMAN RIGHTS AND IS MANIFESTED IN VIOLENCE AGAINST WOMEN INCLUDING WOMEN LIVING WITH HIV AND THE DENIAL OF ACCESS TO SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS, BOTH OF WHICH EXACERBATE VULNERABILITY TO HIV, ITS CAUSES AND CONSEQUENCES.”

“BECAUSE GENDER INEQUALITY IS A PRECONDITION TO ACHIEVING ALL HIV-RELATED GOALS, A CRITICAL ISSUE IS THE EMBEDDING OF GENDER EQUALITY COMMITMENTS IN MONITORING AND EVALUATION FRAMEWORKS.”

Gender inequality is a violation of human rights and is manifested in violence against women, including among women living with HIV, and the denial of access to sexual and reproductive health and rights, both of which exacerbate women's vulnerability to HIV, its causes, and consequences. Gender inequality is also situated within other overlapping social, economic and political inequalities, which must all be addressed to ensure effective sustainable action to respond to the HIV epidemic and to broader development challenges.

Within the context of the Three Ones, the Paris Declaration requires the incorporation of gender equality into multi-sectoral HIV and AIDS programming, given its emphasis on harmonisation, alignment, ownership, managing for development results and mutual accountability.

As such, actions resulting from the Declaration provide opportunities to accelerate fulfilment of gender equality agreements

and integrate them into HIV and MDG planning, as well as into actions toward the fulfilment of governments' human rights obligations. Progress toward the goal of gender equality, made through the Paris Declaration and HIV and AIDS programming must be made explicit, thus a critical issue is embedding gender equality commitments in monitoring and evaluation frameworks.

Within the context of mutual accountability, governments, national partners, bilateral and multi-lateral agencies, donor agencies, civil society and the UN system must focus on the intersections of HIV, violence against women and sexual and reproductive health and rights and take immediate and effective action.

