



# Asia Pacific Community of Practice on HIV, Gender and Human Rights

Summary of E-discussion on

## Key Affected Women and Girls in Asia and the Pacific

1-23 February • 2012

a partnership initiative with



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**The Asia Pacific Community of Practice on HIV, Gender, and Human Rights [HIV-APCoP]**

is an interactive and dynamic knowledge network jointly established by UNDP, UNAIDS, UN Women, UNOHCHR, and APN+ in response to the challenges faced by the Asia Pacific countries on HIV, gender, and human rights.

This network is open to a broad range of actors working on these issues, including all relevant UN family partners, networks of people living with HIV, national and local governments, key civil society organizations, and academic and research institutions.

This publication has been prepared by the UNDP Asia-Pacific Regional Centre on behalf of UNDP, UNAIDS, UN Women, OHCHR and APN+.

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## Introduction

From 1-23 February 2012, the Asia Pacific Community of Practice on HIV, Gender and Human Rights (HIV-APCoP) held an e-discussion on **Key Affected Women and Girls in Asia and the Pacific** with the primary objective of stimulating dialogue to ensure proper policy attention is paid to key affected women and girls in the context of HIV. In order to accomplish this, the network sought input from its members to identify what must be strategized and prioritized to reach the 10 targets of the 2011 Political Declaration, especially targets 1, 3, and 7 (detailed below) that speak most directly to the HIV needs of women and girls.

More specifically, the e-discussion sought input to clarify:

- who members consider to be the key affected women and girls; and
- what are the priority actions that need to be taken by governments and civil society to achieve the targets regarding women and girls set forth in the Political Declaration, by 2015.

The e-discussion coincided with and was advertised at the UNESCAP Asia-Pacific High-level Intergovernmental Meeting on the Assessment of Progress against Commitments in the Political Declaration on HIV/AIDS and the Millennium Development Goals<sup>1</sup>. By taking place in tandem with this influential meeting the HIV-APCoP was able to obtain contributions from the delegations and civil society participants attending the meeting and feed these into engagements at the meeting itself.

More than 25 contributions were received from nine countries (Philippines, Australia, Papua New Guinea, Fiji, Sri Lanka, India, Cambodia, New Zealand and Thailand) over the e-discussion's three week duration. Contributors included UN agencies (UNDP and UNAIDS), government (Viet Nam, Sri Lanka) and civil society organizations (WAPN+, PATH India, ANPUD, IDLO, Asia Pacific Alliance for Sexual and Reproductive Health and Rights (APA), FHI, 7Sisters, ICRW, IPPF, and CCW).

This e-discussion was conducted by the HIV-APCoP in partnership with UNZIP the Lips! (<http://unzipthelips.org>), a coalition of Asia-Pacific regional networks on HIV/AIDS together with supporting partners and activists across the region to articulate the needs of key affected women and girls. A special thanks to Asia Pacific Alliance for Sexual and Reproductive Health and Rights for the support provided in developing the content for the e-discussion.

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<sup>1</sup> Held in Bangkok from 6 to 8 February 2012, organized by ESCAP in partnership with UNAIDS, UNDP, UNODC, UN Women, UNFPA, UNICEF, and WHO. The meeting outcomes report is accessible at [http://www.unescap.org/commission/68/documents/English/E68\\_13E.pdf](http://www.unescap.org/commission/68/documents/English/E68_13E.pdf)

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## Message from the Guest Moderator

Vince Crisostomo

Executive Director, Coalition of Asia Pacific Regional Networks on HIV/AIDS  
(7 Sisters), on behalf of Unzip the Lips!

In 2011, through the Political Declaration on HIV/AIDS: Intensifying our Efforts to Eliminate HIV/AIDS<sup>2</sup>, governments reaffirmed that women remain disproportionately burdened and compromised by unequal legal, economic and social status. Gender equality, the empowerment of women and girls, elimination of gender-based abuse and violence, and access to health care services, including sexual and reproductive health, continue to be recognized as fundamental to reducing women and girls' vulnerabilities to HIV. These concerns were reflected in the 10 targets recorded in the 2011 Political Declaration highlighted below:

- Target 1: Reduce sexual transmission of HIV by 50 percent by 2015;
- Target 2: Reduce transmission of HIV among people who inject drugs by 50 percent by 2015;
- Target 3: Eliminate mother-to-child transmission of HIV by 2015 and substantially reducing AIDS-related maternal deaths;
- Target 4: Reach 15 million people living with HIV with lifesaving antiretroviral treatment by 2015;
- Target 5: Reduce tuberculosis death in people living with HIV by 50 percent by 2015;
- Target 6: Close the global AIDS resource gap by 2015 and reach annual global investment of US\$22-24 billion in low- and middle-income countries;
- Target 7: Eliminate gender inequalities and gender-based abuse and violence, and pledge to take all necessary measures for the empowerment of women to increase the capacity of women and girls to protect themselves from HIV;
- Target 8: Eliminate stigma and discrimination against people living with and affected by HIV through promotion of laws and policies that ensure the full realization of all human rights and fundamental freedoms;

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2 United Nations (2011). 65/277 Political Declaration on HIV/AIDS: Intensifying our Efforts to Eliminate HIV/AIDS. United Nations General Assembly, Sixty-fifth session, Agenda item 10. Accessible at <http://www.hivapcop.org/resource/65277-political-declaration-hiv-aids-intensifying-our-efforts-eliminate-hiv-aids>.

- Target 9: Eliminate HIV-related restrictions on entry, stay and residence;
- Target 10: Eliminate parallel systems for HIV-related services to strengthen integration of the AIDS response in global health and development efforts.

However, often programmes and policies do not specifically address women and girls; and fail to acknowledge that gender equality is a cross-cutting issue and critical to reach all the goals and targets in the 2011 Declaration and the Universal Access agenda.

Many countries in Asia and the Pacific are experiencing concentrated epidemics with key affected populations (KAPs) identified as most-at-risk. It is especially important to recognize the needs of women and girls who work as sex workers, use drugs and/or are transgender. In a number of settings, women and girls, as well as adolescents and other young people, experience substantial, and in some cases disproportionate, impacts of the epidemic and must be addressed in the context of KAPs. Prioritizing KAPs is also dependent on the context and dynamics of the epidemic in a particular country. Evidence-based research is needed to guide targeted interventions for the most-at-risk and affected women and girls to ensure that their specific needs are accurately addressed.

Governments commit to comprehensively target populations at higher risk in national prevention strategies and to ensure that services are accessible to them. This recognition is a step forward; however, the specific needs of key affected women and girls are often neglected and punitive laws, policies, practices and stigma and discrimination continue to exist.

I am pleased to launch this e-discussion on behalf of Unzip the Lips<sup>3</sup>, to stimulate the participation of members to contribute to the dialogue and to ensure more policy attention is paid in the region to key affected women and girls.

Your contributions will help shape our engagement at the upcoming Asia-Pacific High-level Intergovernmental Meeting on the Assessment of Progress against Commitments in the Political Declaration on HIV/AIDS and the MDGs that will take place from 6-8 February 2012.

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<sup>3</sup> For more information visit <http://unzipthelips.org>

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## Contributors

The HIV-APCoP received responses, with thanks, from:

- Alka Narang, Assistant Country Director, HIV and Development Unit, and Ernest Noronha, Programme Officer, HIV and Development Unit, UNDP India
- Bolalava Vaia, FHI 360, Papua New Guinea
- Brianna Harrison, Human Rights Programme Officer, UNAIDS Asia Pacific Regional Support Team
- Dean Lewis, Regional Coordinator, Asian Network of People who Use Drugs (ANPUD)
- Ferdinand J. Strobel, HIV, Health & Development Specialist, UNDP Pacific Centre-PMB Suva, Fiji Islands
- Gina Davis, WAPN+ Coordinator, Women working group of APN+
- Hon. Lalith Piyum Perera, Chairman/Director General of National Youth Services Council, Ministry of Youth Affairs and Skills Development in Sri Lanka, via Milinda Rajapaksha, Coordinator, South Asia Regional Youth Network (SARYN), International Planned Parenthood Federation (IPPF)
- Jane Bruning, National Coordinator, Positive Women Inc., New Zealand
- Kimberly Whipkey, Global Advocacy Specialist, Technology Solutions Global Program, PATH
- Madhumita Das, Senior Technical Specialist, International Center for Research on Women
- Maria Nepel, PSMO/Gender focal point – UNAIDS, Papua New Guinea
- Marsha Stevens, Registered Nurse and consultant for PLHIV, Emun Baptist Church, Philippines
- Naomi Burke-Shyne, Legal Officer, and Sara Nardicchia, Gender Focal Point, International Development Law Organization (IDLO) Health Law Program
- Philip Castro, Programme Officer for HIV and AIDS, UNDP Philippines
- Premreeda Pramoj Na Ayutthaya, Asia Pacific Transgender Network (APTAN)
- Rose Koenders, Executive Director, Asia Pacific Alliance for Sexual and Reproductive Health and Rights (APA)
- Sarah Kirk, Senior Policy and Project Officer, Sexual Health and Family Planning Australia (SH&FPA)
- Silja Rajander, Consultant and Cambodian Community of Women living with HIV/AIDS (CCW) Board member
- Susana T. Fried, Senior Gender Advisor, UNDP, BDP, HIV/AIDS Practice
- To Duc, Chief of Social Work Division, Social Protection Administration, Ministry of Labour, Invalids and Social Affairs, Viet Nam
- Vince Crisostomo, Executive Director, Coalition of Asia Pacific Regional Networks on HIV/AIDS (7 Sisters)

“ National responses should meet the specific needs of women and girls ‘through strengthening legal, policy, administrative and other measures for the promotion and protection of women’s full enjoyment of all human rights’.

ROSE KOENDERS, ASIA PACIFIC ALLIANCE FOR SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

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## Summary of Responses

Members were asked to submit contributions on what they thought needed to be strategized and prioritized in order to reach the 10 targets of the Political Declaration, especially with respect to targets 1, 3, and 7. Members were also asked the following two clarifying questions:

1. Who you consider to be the key affected women and girls in your country, province or community; and
2. What are the priority actions that governments and civil society should undertake to achieve the three targets regarding women and girls in the Political Declaration by 2015?

Depending on the circumstance and country, the following groups of women were identified as key HIV affected women and girls by contributors:

- **women living with HIV;**
- **female sex workers and female intimate partners of male clients;**
- **women who use drugs and female partners of men who use drugs;**
- **transgender women;**
- **female partners of men who have sex with men;**
- **young key affected women; and**
- **women and girls from households impacted by HIV.**

The following issues were highlighted by contributors as those that need to be addressed in order to address HIV needs of key affected women and girls

- migration; and
- violence against women.

### Part 1: Who are Key affected women and girls

#### Women living with HIV (WLHIV)

It has long been recognized that women and girls living with HIV constitute a key affected population. Contributors noted that governments have committed to ensuring that national HIV policies and programmes are sensitive to the needs and rights of women and girls living with HIV and that these commitments are fulfilled and implemented in practice. It was noted that programme and policies

were more likely to succeed (including government initiated initiatives) by fostering stronger partnerships with civil society, in particular positive women's networks and women's rights organizations, and by meaningfully involving them in programme design and implementation. Respondents also called for positive women to be more closely involved in the service delivery of programmes that impact them. Community level examples that were cited include the valuable role that positive women play as peer educators, counselors, and out-reach workers. Contributors further called on governments in the region to ensure that these type of initiatives are funded from national budgets and that the meaningful involvement of women and girls living with HIV in national AIDS responses should not be reliant or conditional upon external donor funding.

### Female sex workers and female intimate partners of male clients

Sex work remains a key driver of the HIV epidemic in Asia and the Pacific. This e-discussion highlighted female sex workers as one of the groups of key affected women and girls in the region. Respondents from the Philippines reported significant progress made in their country with regard to addressing the HIV-related needs of this key affected population. Recent research showed significant increases in coverage of HIV prevention services for female sex workers, from 14 per cent in 2006 to 55 per cent in 2010<sup>4</sup>. This corresponds with an overall decrease in the proportion of new infections among women in the Philippines from 33 per cent in the period 1984-2006 to 7 per cent in 2011<sup>5</sup>.

In contrast to this picture of progress, respondents from the Philippines and India noted that the vulnerability of non-brothel based female sex workers to HIV has increased in recent years. Reasons cited include difficulties among this group in accessing HIV prevention services that is further exacerbated by criminalization of sex work in those countries. Citing recent studies done in India, a respondent reported that in their country both aging and younger women in sex work were at higher risk of HIV compared to other groups in the population. Evidence also shows that significant numbers of sex workers continue to be susceptible to abuse by law enforcement officers and laws remain in place in many Asia-Pacific countries that criminalize sex work, hindering access to HIV services<sup>6</sup>.

The majority of women living with HIV in Asia have become HIV-positive as a

// The study among the female sex workers highlights... awareness and access to services are directly proportionate to the income and decision making power of sex workers.

ALKA NARANG AND  
ERNEST NORONHA, UNDP  
INDIA

4 HAIN (2011), Universal Access to HIV Prevention, Treatment, Care and Support: Philippine Country Report. Accessible at <http://www.unaids.org/ph/index.php?mod=download&type=view&mid=12&rid=0&sid=0&tid=0&pid=47>

5 Department of Health, Philippines (December 2011). HIV and AIDS Registry. Accessible at [http://www.doh.gov.ph/sites/default/files/NEC\\_HIV\\_Dec-AIDSreg2011.pdf](http://www.doh.gov.ph/sites/default/files/NEC_HIV_Dec-AIDSreg2011.pdf)

6 For additional information see the HIV-APCoP e-discussion on the issue of HIV and the law at <http://www.hivapcop.org/e-discussion/hiv-and-law>



result of their husbands or boyfriends engaging in paid sex or injecting drugs, currently or in the past<sup>7</sup>. Engaging male clients of sex workers to protect themselves and their female spouses is critical in order to address the issue (see page 9 on 'Involving men and boys').

### Women who use drugs and spouses and female sexual partners of men who use drugs

The Asian Network of People who Use Drugs (ANPUD) noted that “key affected women and girls include women and girls who use drugs, spouses and sexual partners of people who use drugs, and children of people who use drugs”.

The need for better linkages between sexual reproductive health services (SRH) and drug and alcohol services was highlighted, especially given that alcohol and drug use can negatively impact on a women’s ability to negotiate safe sex.

### Transgender women

Transgender women are vulnerable to HIV and should be considered as one of the groups of key affected women and girls in the region. In their statement to the UNESCAP High-level Intergovernmental Meeting which was subsequently posted to the HIV-APCoP e-discussion, the Asia Pacific Transgender Network (APTN) noted, “Resolution 66/10<sup>8</sup> is the first UN Declaration to mention transgender people. We applaud the leadership of our region in recognizing us.”

APTN also shared the significant challenges they face as citizens in their countries, including holding identity cards/passports which do not match their appearance, being denied employment and repeatedly facing stigma and discrimination, including in health care settings.

APCASO and APA, in their recently released report Women and Girls: The 2011 Political Declaration on HIV/AIDS, Civil Society Perspectives on the 2011 HIV/AIDS High Level Meeting<sup>9</sup>, noted that while the 2011 Declaration commits governments to comprehensively target populations at higher risk, which in this region includes transgender people, what is needed is national prevention strategies that ensure gender sensitive services are available by removing punitive laws, policies, practices and stigma and discrimination blocking access.

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7 Commission on AIDS in Asia (2008). Report of the Commission on AIDS in Asia - Redefining AIDS in Asia: Crafting an effective response. Accessible at [http://data.unaids.org/pub/Report/2008/20080326\\_report\\_commission\\_aids\\_en.pdf](http://data.unaids.org/pub/Report/2008/20080326_report_commission_aids_en.pdf)

8 UNESCAP (2010), Resolution 66/10: Regional call for action to achieve universal access to HIV prevention, treatment, care and support in Asia and the Pacific. Accessible at [http://www.unescap.org/sdd/issues/hiv\\_aids/Resolution-66-10-on-HIV.pdf](http://www.unescap.org/sdd/issues/hiv_aids/Resolution-66-10-on-HIV.pdf)

9 Accessible at <http://www.womenandaids.net/CMSPages/GetFile.aspx?guid=ed645877-b1b8-4553-856c-d5f183862996&disposition=inline>

In practice, government and donor programmes that target transgender people rarely reach them.

### Female partners of men who have sex with men

Contributors, while noting that there is limited data available on the HIV vulnerabilities of this particular group, highlighted that female sexual partners of men who have sex with men (MSM) should be considered as key affected women. The available evidence suggests that a significant minority of MSM in the region have long-term female partners/spouses. With MSM recognized as a key affected population with high HIV prevalence rates reported in several countries in the region, intimate partner transmission of HIV in this context requires greater attention than has hitherto been the case<sup>10</sup>.

### Young key affected women

A number of contributors highlighted the need for focusing attention on key affected young women and girls. A contribution from the Cambodian Community of Women Living with HIV (CCW) noted, “girls living with or affected with HIV share the challenges of being more likely to drop out of school than boys; of getting married at a younger age; of poorer, unequal economic prospects; and of enhanced vulnerability to HIV infection and (if infected) of difficulties ensuring they do not pass on the infection to others due, in large part, to gender norms and ideals in Cambodia.” The contribution also pointed to the fact that the country’s young population has been given special attention by the government, and addressing the HIV needs of young people included in the National Policy on Cambodian Youth Development.

A statement made by the government of Sri Lanka at the UNESCAP High-level Intergovernmental Meeting’s side event on ‘Engaging with young people: removing legal and access barriers’, which was shared with the HIV-APCoP, also highlighted their commitment in working with young people. Members from Papua New Guinea commented on the need for more focused attention on young key affected populations in their country.

### Contributors noted that in the Asia Pacific region the following issues also need attention

**HIV and Migration:** The Asia Pacific Alliance noted “...female migrants, often experience conditions of high vulnerability, endure abuse, exploitation, violence, stigma and discrimination, and lack access to reproductive health

<sup>10</sup>Figures between 13 percent and 32 percent being found in surveyed men in cities of China, India, Myanmar and Viet Nam.

// ...girls living with or affected with HIV share the challenges of being more likely to drop out of school than boys; of getting married at a younger age; of poorer, unequal economic prospects; and of enhanced vulnerability to HIV infection and (if infected) of difficulties ensuring they do not pass on the infection to others due, in large part, to gender norms and ideals in Cambodia.

SILJA ANNIINA RAJANDER,  
CAMBODIAN COMMUNITY  
OF WOMEN LIVING WITH  
HIV/AIDS

services leading to sexually-transmitted infections, including HIV. This group is often forgotten, including in the 2011 Declaration and their needs and rights should be more comprehensively addressed.”

***HIV and Violence against Women:*** A key point highlighted by the UNAIDS Strategy on Getting to Zero is zero tolerance on gender-based violence. Similarly, the UNAIDS Agenda for Women and Girls calls for appropriate systems to be established to investigate and document violence, as well as the link between HIV and different forms of violence against all women and girls, including key affected populations such as sex workers, women living with HIV, women who use drugs, young women and transgender persons.”

Many contributions noted vulnerability of women to violence, their fear in voicing their concerns, and the stigma and discrimination that they face.

## **Part II - Priority actions that need to be taken by government and civil society to achieve the targets regarding women and girls set forth in the Political Declaration by 2015?**

### **Involving men and boys**

Many contributors stressed the importance of involving men and boys in addressing the HIV needs of women, especially given that the majority of women acquire HIV from their long term intimate male partners. Contributions from UNAIDS noted the work done in Indonesia targeting mobile men with money, as highlighted by the Indonesian delegation at the High Level meeting, as a good example and pointed to the inclusion of the following text in the Outcome document of the UNESCAP High-level Intergovernmental Meeting as a clear recognition of the need to involve men and boy.

*“The Meeting recognized that addressing gender norms and relations were crucial for reducing HIV vulnerability. For women, a major source of transmission of HIV was unprotected sex with their male partners, especially if those were the clients of sex workers, and the impact of the epidemic across the region on monogamous women infected by their intimate partner was highlighted by one delegation. The need to increase male involvement in reproductive health was noted.”*

### **Making HIV prevention technologies, including female condoms more readily available for women and girls**

The importance of making it easier for women to access HIV prevention

technologies such as female condoms was made clear in the discussion. Citing a report conducted by the Guttmacher Institute (2011), a member stated that 72 percent and 32 percent of women younger than 20 have an unmet need for modern contraceptives in South Central Asia and South-East Asia, respectively<sup>11</sup>. A number of barriers hinder women's access to HIV prevention technologies, including women's inability to negotiate condom use with their partners, cultural and religious norms that inhibit, and laws and policies that prohibit women from accessing contraceptives.

Contributors called on decision makers to endorse policies and funding that raise awareness of and increase access to more protection options for women.

// Good sexual and reproductive health, in some kind of sustainable way, would not result unless and until men get their foot off women's and girls' necks, unless and until the land and its resources are redistributed, and unless and until both "culture"-related and clearly religion-inspired sexism and homophobia are revealed for what they are and opposed and rooted out. Everything else, in my opinion, is simply a temporary solution.

### **Address the needs of females who use drugs and female spouses of male drug users**

In order to address the HIV needs of women and girls within the context of injecting drug use, ANPUD called for implementation of all nine interventions listed in the WHO/UNODC/UNAIDS Technical Guide for Countries to set targets for universal access to HIV prevention, treatment, care for injecting drug users<sup>12</sup>, with sufficient coverage (at least 80 percent of the target population).

The nine interventions are:

1. Needle and Syringe Programmes (NSPs)
2. Opioid Substitution Therapy (OST) and other drug dependence treatment
3. HIV Testing and Counselling (T&C)
4. Antiretroviral Therapy (ART)
5. Prevention and treatment of sexually transmitted infections (STI)
6. Condom programs for IDUs and sexual partners
7. Targeted Information, Education and communication (IEC) for IDU and sexual partners
8. Vaccination, diagnosis and treatment of viral hepatitis
9. Prevention, diagnosis and treatment of Tuberculosis

In addition to the above ANPUD called on making available "...community-sensitive, accessible, free, voluntary PMTCT services including testing and treatment for pregnant women who use drugs or who are sexual partners of

11 Darroch et al (2011). Contraceptive Technologies: Responding to Women's Needs. Accessible at <http://www.guttmacher.org/pubs/Contraceptive-Technologies.pdf>

12 Accessible at [http://www.unodc.org/documents/hiv-aids/idu\\_target\\_setting\\_guide.pdf](http://www.unodc.org/documents/hiv-aids/idu_target_setting_guide.pdf)

people who use drugs. This would also include the provision of these services to pregnant women incarcerated in closed settings.” Accessibility of HIV prevention technologies for women such as sterile injecting equipment was also recommended.

### **Strengthen sexual reproductive health programmes**

The importance of strengthening sexual and reproductive health services in the region was emphasized by a number of participants, especially (as one participant pointed out) within the context of broader health systems strengthening.

The importance of capacity building of health workers to ensure that the rights of key affected populations are not violated in health care settings was repeated. In particular, it was noted that key affected women face severe stigma and discrimination in health care settings, are not given proper information on treatment that can prevent transmitting the disease to their children and that can at times save lives, and HIV positive women who are pregnant continue to be forced or coerced into abortions or sterilization.

### **Remove punitive laws and enhance access to justice for women**

A number of laws that prevent key affected women from accessing HIV services and the existence of barriers to accessing justice were noted by participants of the e-discussion. Some laws that impact key affected women in the region reported include: laws that criminalize sex work, sex between men and drug use; property and inheritance rights that discriminate against women ( or have special implications for HIV affected women); laws and policies that prevent key affected women, including young key affected women, from accessing reproductive health services and information.

IDLO shared with the HIV-APCoP information on a recent workshop conducted on ‘Access to justice and legal services for positive women and women vulnerable to HIV’, and highlighted the importance of legal literacy for women living with HIV as many are unaware of their rights. It was recognized that a lot of work remains to be done in order to build sufficient capacity of lawyers and the judiciary in the region.

### **Address wider issues of gender equality in the region and empower women to claim their rights**

Contributors repeatedly underscored that gender dimensions of the epidemic cannot be addressed without also addressing wider issues of gender equality in the region. Susana Fried from UNDP observed, “In the context of the AIDS epidemic, understanding and responding to gender inequality is essential

to delivering results. The wide variation in patterns, resources and responses, in concentrated as well as generalized epidemics, points to the importance of understanding the role of gender inequality in driving epidemics, as well as the interaction between gender inequality and other social and structural factors—such as economic status, ethnicity and religion—that influence disease dynamics.”

Brianna Harrison from UNAIDS noted, “Addressing the rights and needs of key affected women and girls will not only enable progress towards the three targets specifically relating to women and girls in the Political Declaration 2011, it will also ensure progress on advancing human rights to eliminate stigma, discrimination and violence related to HIV (another of the 10 targets - which in fact impacts on countries’ ability to achieve all targets). It will also enable our efforts to address HIV to contribute to progress on broader development and human rights issues.”

“ Addressing the rights and needs of key affected women and girls will not only enable progress towards the three targets specifically relating to women and girls in the Political Declaration 2011, it will also ensure progress on advancing human rights to eliminate stigma, discrimination and violence related to HIV (another of the 10 targets - which in fact impacts on countries’ ability to achieve all targets).It will also enable our efforts to address HIV to contribute to progress on broader development and human rights issues.

BRIANNA HARRISON,  
UNAIDS ASIA PACIFIC  
REGIONAL SUPPORT  
TEAM

### Greater awareness of HIV

Contributors emphasized the importance of raising awareness among women and girls and men and boys, particularly the importance of including sexual reproductive health in the school curriculum. A number of countries in the region have made significant progress in this regard and lessons should be shared between countries.

Innovative approaches to raising awareness among the wider public were also shared. As one example, a contribution from Papua New Guinea highlighted the 2011 Human Rights Film festival it sponsored under the theme of ‘Right to health and ending discrimination on the basis of sexual orientation and gender identity’,.

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## Conclusions:

The recently released report by the Asia Pacific Council of AIDS Organizations (APCASO) and Asia Pacific Alliance, titled Women and Girls: The 2011 Political Declaration on HIV/AIDS, Civil Society Perspectives on the 2011 HIV/AIDS High Level Meeting<sup>13</sup> was shared with the HIV-APCoP during the discussion. Key points of the document are worth noting here in the conclusion of this summary as it also sums up the points that were raised by the members during the discussion.

They include the need to:

- comprehensively target populations at higher risks - including women and girls who work as sex workers, drug users and or are transgender women - in national prevention strategies and ensure that gender sensitive services are available to them;
- undertake measures to address legal barriers that impede effective HIV responses, in particular with regard to key affected populations;
- ensure access to comprehensive sexuality education for girls and boys both in and out of school;
- strengthen national health and social systems and ensure proper linkages with sexual and reproductive health and maternal and child health services;
- ensure that services provided to prevent vertical HIV transmission are part of a holistic, rights-based HIV prevention, treatment, care and support package for women;
- ensure women of child-bearing age have access to HIV prevention services;
- ensure laws and policies on preventing vertical HIV transmission should adhere to principles of informed consent, confidentiality, pre- and post-test counselling and proper referral to treatment, care and support services;
- ensure that the needs of migrants, especially female migrants are more comprehensively addressed;
- ensure national responses meet the specific needs of women and girls through strengthening legal, policy, administrative and other measures for the promotion and protection of women's full enjoyment of all human rights;

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<sup>13</sup> Available at <http://www.womenandaids.net/CMSPages/GetFile.aspx?guid=ed645877-b1b8-4553-856c-d5f183862996&disposition=inline>

- recognize that the role and engagement of men and boys in the achievement of gender equality is crucial; and
- invest in women's leadership, community capacity building, and eliminate gender based violence, as they are critical enablers that are essential to the success of HIV programmes.

We hope the dialogue has helped to strengthen lasting partnerships across countries and between policy makers and civil society to take the work forward.

*This e-discussion, including all contributions in their entirety, can be accessed by visiting:*

<http://www.hivapcop.org/e-discussion/e-discussion-key-hiv-affected-women-and-girls-asia-and-pacific>



*Resources cited in this e-discussion summary are available at the following links as well as in the HIV-APCoP Resources Document Library:*

APCASO (2012). Women and Girls: The 2011 Political Declaration on HIV/AIDS, Civil Society Perspectives on the 2011 HIV/AIDS High Level Meeting.

<http://www.womenandaids.net/CMSPages/GetFile.aspx?guid=ed645877-b1b8-4553-856c-d5f183862996&disposition=inline>

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[http://data.unaids.org/pub/Report/2008/20080326\\_report\\_commission\\_aids\\_en.pdf](http://data.unaids.org/pub/Report/2008/20080326_report_commission_aids_en.pdf)

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<http://www.unaids.org.ph/index.php?mod=download&type=view&mid=12&rid=0&sid=0&tid=0&pid=47>

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<http://www.un.org/Docs/asp/ws.asp?m=A/RES/65/277>

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## How can the HIV-APCoP help you?

- Provide access to important publications, presentations, tools, and other materials.
- Provide access to emerging and good practices across the region.
- Provide information on upcoming events related to HIV, gender, and human rights in the region.
- Provide peer-review for your studies and guidance to resources under development.
- Link you to professionals working on issues related to HIV, gender, and human rights.
- Provide technical advice on specific queries.

## How can you contribute?

- Share your organizations work on the HIV-APCoP through publications and best practices.
- Post details of upcoming events relevant to HIV, gender and human rights in the region.
- Respond to member's queries and share your expertise.
- Participate in e-discussions.
- Seek solutions to challenges encountered in work on issues associated with HIV, gender and human rights.

Join us at [www.hivapcop.org](http://www.hivapcop.org)



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