

China: Rolling the Agenda for Women, Girls, Gender Equality and HIV

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Sexual transmission has become the primary mode of transmission

- By the end of 2009, it is estimated that 740,000 people were living with HIV in China. Some 30.5% of them were female.
- 44.3% were infected through heterosexual transmission, 14.7% through homosexual transmission, 32.2% through IDU, 7.8% through commercial plasma donation & transfusion, and 1% through MTCT.
- 12.3% of those who were living with HIV in 2009 contracted the virus from their regular partners. This figure was 10.4% in 2007 and 6.4% in 2005. (*source: HIV estimation in 2005, 2007, and 2009*)
- Of the 480,000 new infections in 2009, 42.2% were transmitted through heterosexual contact, 32.5% through homosexual contact, 24.3% through IDU, and 1% through MTCT.
- 25% of MSM have sex with female partners in the last 6 months; 70% do not use condom consistently. (*source: MSM survey in 61 cities*)

Key Issues & Challenges

Two **key issues** need to be addressed to reduce HIV infection among women and girls in China:

- **Increased vulnerability** of women to HIV infection especially those in **long-term relationships**
- **Barriers** preventing women and girls to **access HIV services** are largely associated with gender equality and stigma

Challenges

- **Lack of rigorous gender analysis**
- **Limited understanding & capacity** on gender responsive HIV programming among national staff and implementing partners
- **Low level of participation** of women's networks/ organizations /women living with HIV and women leaders, in the AIDS response
- **Stigma and discrimination** against women infected and affected by HIV/AIDS

Five Strategic Areas

- Area 1: **Strengthen analysis of gender** disaggregated data in order to generate strategic information and orient decision making and planning processes at national and provincial levels.
- Area 2: **Capacity strengthening** of GF RCC staff at national & provincial level, & implementing partners, on gender responsive policy advocacy & programme implementation.
- Area 3: Strengthening of the **prevention** component of the AIDS response with particular focus on **spousal transmission** including spouses of MSMs.
- Area 4: Increasing and supporting an effective **participation of women** leaders/living with HIV, women's networks and organizations, in policy, planning and advocacy
- Area 5: Implementation of **Know-your-Rights** campaigns with a focus on reducing stigma, discrimination & gender inequality, and breaking down barriers to women's & girls' access to services .

Key achievements

- Gender Analysis completed in six priority provinces and findings disseminated and utilized for designing of operational research on spousal transmission and gender barriers.
- Gender Responsive Budgeting training provided to key staff in RCC, NCAIDS, SCAWCO, ACWF.
- CCM Gender Strategy developed and gender training provided to CCM members.
- Advocacy Action on Women's Rights and HIV/AIDS launched at a High Level Forum jointly convened by All China Women's Federation and UNJP on WAD 2010. Provincial plans for community advocacy action developed for 7 pilot provinces.

Priorities for 2011

- **National and sub-national planning & implementation to be informed by vigorous gender analysis.** National M&E framework to include gender analysis and reporting; sub-national planning to be guided by sex & age disaggregated data and gender analysis.
- **National strategy on prevention of spousal transmission:** Support operational research on gap areas and contribute to meta-analysis of similar studies by NCAIDS and other partners for dialogue and consensus reaching.
- **Community advocacy action** on women's and girls' rights to promote gender equality and HIV in priority provinces, forging partnerships between All China Women's Federation and Women's Network Against AIDS-China, women's organizations and community-based groups.
- Strengthen **capacity development** of staff and implementing partners on gender responsive HIV analysis and programming.

Thank you