

Civil society engagement in the UNAIDS Outcome Framework priority areas

The UNAIDS Outcome Framework focuses on ten priority areas, each of which represents a pivotal component of the AIDS response. Building on gains already made in these areas will contribute to the achievement of universal access to HIV prevention, treatment, care and support and the Millennium Development Goals. For each Outcome Framework Priority Area, a Business Case has been developed which explains the rationale for the priority area and outlines why success in this area will dramatically decrease new HIV infections and improve the lives of people living with HIV.

The Outcome Framework priority areas are as follows:

1. We can reduce sexual transmission of HIV
2. We can prevent mothers from dying and babies from becoming infected with HIV
3. We can ensure that people living with HIV receive treatment
4. We can prevent people living with HIV from dying of tuberculosis
5. We can protect drug users from becoming infected with HIV
6. We can remove punitive laws, policies, practices, stigma and discrimination that block effective responses to AIDS
7. We can meet the HIV needs of women and girls and can stop sexual and gender-based violence
8. We can empower young people to protect themselves from HIV
9. We can enhance social protection for people affected by HIV
10. We can empower men who have sex with men, sex workers and transgender people to protect themselves from HIV infection and to fully access antiretroviral therapy

Below are some examples of potential activities for Civil Society in each of the ten priority areas of the Outcome Framework. This list is not intended to be exhaustive and there are many other actions that could be undertaken by civil society partners to support implementation of the Outcome framework.

1. We can reduce sexual transmission of HIV

Civil Society can:

- Roll out Positive Health, Dignity and Prevention models and strategies in communities- including to promote universal access, uptake and adherence to ART as part of the prevention package- particularly treatment as prevention.



- Provide input on the social context of sexual behavior to inform social change communication activities including programme design, implementation and evaluation.
- Create a social movement to increase demand for male circumcision.
- Create and re-shape social norms around sexual behaviors, sexuality, traditional and cultural practices that increase vulnerability or risk of HIV infection. Religious and cultural leaders can be particularly influential.
- Encourage a social dialogue on the structural barriers that impede the HIV response, i.e. mobility, food insecurity, drivers of transactional sex etc.
- Provide HIV prevention education and services to communities (particularly in remote areas or among difficult to reach populations)
- Promote comprehensive HIV prevention methods, encourage condom use.
- Mobilize communities to discuss sero-discordance and promote voluntary testing and counseling (VCT) and the use of condoms among couples, including female condoms.

2. We can prevent mothers from dying and babies from becoming infected with HIV

Civil Society can:

- Mobilize a social and political movement to demand VCT and prevention of mother-to-child (PMTCT) services, as well as integration of HIV and sexual and reproductive, maternal and child health care services.
- Advocate for and monitor that all women who access PMTCT are also able to access antiretroviral treatment (ART).
- Monitor and advocate for a women's right to HIV testing in conformance with the 3 Cs (confidentiality, consent and counseling).
- Ensure women who are tested for HIV in the context of pre-natal services and those who receive PMTCT are protected from stigma and discrimination. In addition, support women who as a result of their HIV status are subject to domestic violence and social exclusion.
- Mobilize men to engage in advocacy and VCT for couples - through trade unions, men's groups, religious leaders etc.
- Be advocates and activists as well as service providers: Faith-based organizations, nongovernmental organizations and other groups can and do provide sexual and reproductive health and PMTCT services and should be included in national scale up plans. Civil society service providers can be included in training on guidance tools/clinical standards.
- Task shifting- community based volunteers and midwives can be mobilized to support demand for, uptake of HIV testing and PMTCT services as well as adherence to medication and long term support.

3. We can ensure that people living with HIV receive treatment

Civil Society can:

- Be key advocates for universal access to treatment and availability of HIV testing and counseling services as a human right and for setting bold new treatment targets.
- Advocate for the importance of treatment as prevention - including advocacy for affordable medications, and diagnostics and child friendly services?

- Be effective service delivery partners, bringing their facilities (community volunteers, peer educators, clinics and hospitals) alongside state facilities to strengthen service delivery capacity.
- Contribute to advocacy for a strengthened health service delivery system.
- Be actively involved in national procurement decision bodies.
- Be actively involved in training health workers.
- Use strong academic, research and clinical capacities to contribute to treatment policy and guidelines development.
- Use existing legal frameworks in partnership with law clinics or private law firms willing to provide legal services for problematic cases to treatment access.
- Act as watchdog regarding availability of ARVs and avoidance of stock-outs, accessibility for key and criminalized population groups and tracking of treatment targets.
- Engage communities against stigma and discrimination, which impede the uptake of health services.
- Engage in advocacy to demonstrate that ART decreases maternal and child mortality, reduces numbers of TB infections- and has other beneficial effects on the Millennium Development Goals and health to both policy makers and communities.

4. We can prevent people living with HIV from dying of tuberculosis

Civil Society can:

- Build understanding among their communities of the impact that TB has on people living with HIV.
- Promote HIV testing among people on TB treatment and raise awareness about the symptoms of TB among people living with HIV.
- Reach out to build multisectoral coalitions of NGOs at national level working on TB and HIV to strengthen understanding and build programmatic linkages.
- Create a social movement to demand integrated TB/HIV services: broker stronger partnerships between the civil society communities working on TB and HIV.
- Provide clinical services for HIV and TB through hospitals, clinics and primary health care services, drop-in centres, in prisons, urban slums, remote rural communities and in situations of humanitarian crisis etc.
- Reach communities that public services find hard to reach.

5. We can protect drug users from becoming infected with HIV

Civil Society can:

- Advocate for harm reduction and substitution therapy.
- Especially those groups led by or working closely with people who use drugs can be effective service delivery partners for harm reduction and substitution therapy and should be included in national implementation plans.
- Facilitate ongoing discussion and raise awareness of the needs of people who use drugs and vulnerability in order to avoid stigma and discrimination and enhance their social protection.
- Work with national partners to advocate for and create an enabling legal environment for people who use drugs to access prevention services (including

removing laws that criminalize drug users, legal obstacles to harm reduction interventions and mandatory drug treatment policies).

- Ensure the meaningful involvement of people who use drugs in the development, implementation, monitoring and evaluation of programmes.

6. We can remove punitive laws, policies, practices, stigma and discrimination that block effective responses to AIDS

Civil Society can:

- Develop an early warning system in partnership with UNAIDS- to highlight punitive laws in countries and hold governments accountable to remove them.
- Document examples of punitive laws that block the AIDS response, or cases of the violation of human rights e.g. lack access to HIV treatment or prevention services.
- Lead on implementation of the people living with HIV Stigma Index and follow-up activities.
- Document and promote positive examples – where the removal of punitive laws has led to reduction in stigma, promotion of rights and increased access to HIV related services.
- Create enabling environments and political will for the removal of punitive laws and create the social movements to advocate for the removal of punitive laws- e.g. to lobby and inform parliamentarians.
- Empower people living with HIV and other key populations at higher risk with knowledge about human rights.
- Provide training to health care/police/prison and other professionals on punitive laws and HIV to reduce stigma and discrimination.
- Provide legal aid, facilitate access to legal aid, engage in strategic litigation and support justice programmes for PLHIV and key population groups.
- Engage in the global review of UNGASS indicators, specifically the review of the national composite policy index to ensure a comprehensive set of indicators continue beyond 2010 to monitor human rights, policy and legal frameworks at country level.

7. We can meet the HIV needs of women and girls and can stop sexual and gender-based violence

Civil Society can:

- Collect and use information—in five-year age groups (especially 10–14, 15–19, 20–24)—on how HIV affects women and girls, particularly those living with HIV, and on how programmes affect women's and girls' human rights and health outcomes.
- Analyze how cultural factors, stigma and discrimination, poverty, and social and legal barriers prevent women and girls from exercising their human rights and make them more vulnerable to HIV and to the consequences associated with it.
- Monitor implementation of national, regional and global commitments by governments related to women, girls, gender equality and HIV, including through the Committee on the Elimination of Discrimination against Women (CEDAW), and use the information for advocacy and to hold governments accountable.
- Support 'know your rights' campaigns and the provision of free and accessible legal aid services to enable women and girls to exercise their rights.

- Incorporate into national AIDS programmes actions to prevent and respond to violence against women and girls, based on improved data on violence against women and girls, for example through the UN Secretary-General's UNiTE to End Violence against Women campaign.
- Ensure implementation of a national minimum package of integrated services for sexual and reproductive health, HIV and tuberculosis.
- Support women, especially young women and girls, to demand sexual and reproductive health rights, including safe and consensual sexual relations and increased access to sexual and reproductive health services, information and HIV prevention commodities, including female condoms.
- Educate men and boys about a woman's right to negotiate whether and how sex takes place.
- Advocate for and support nationwide access to comprehensive sexuality education that promotes gender equality, human rights and skills-building for negotiation of sexual relations.
- Promote broad social movements to reduce stigma and discrimination and to advance women's rights.
- Support microfinance and social protection schemes that strengthen women's economic positions and that reduce their vulnerability to HIV.
- Engage men and boys and address social norms about gender and sexual relationships in ways that reduce violence, address stigma and discrimination, and provide the foundation for gender equality.
- Advocate for quotas or targets for women with the necessary expertise to participate in Country Coordinating Mechanisms (at least 40% of positions).
- Partner with political, religious and other leaders to establish common advocacy messages for policy and for the protection of the human rights of women and girls.

8. We can empower young people to protect themselves from HIV

Civil Society can:

- Youth led organizations and networks of young people living with HIV at national level, with support from the regional and global networks, can mobilize a youth movement to become engaged actively in the response through demand creation and advocacy
- Youth led and serving organizations need to negotiate and gain clarity on their role within the in-country action plan and, as an implementing partner, strengthen the provision of comprehensive HIV information, services, commodities and safe and supportive environments for young people
- Youth and civil society organizations can take part in the design of planning, policy setting, implementation and monitoring and evaluation of HIV prevention activities at national level.

9. We can enhance social protection for people affected by HIV

Civil Society can:

- Support social protection programmes to develop nuanced and appropriately disaggregated data on risk, vulnerability and social factors that contribute to this: to inform the development of HIV-sensitive social protection programming.

- Take part in/lead analysis of the legal framework for social protection to ensure equitable access for PLHIV and key population groups.
- PLHIV and representatives from key populations should be involved in the design, implementation and M&E of social protection programmes.
- Provide broad based care and support programmes for people and households living with HIV.
- Provide support to increase adherence to HIV medications: e.g. financial support for out of pocket expenses, nutritional support, psychosocial, emotional and practical support to households.
- Advocate for broader social protection initiatives at country level beyond traditional families, orphans and vulnerable children, to include key populations most at risk of HIV infection and vulnerable to it's impact.
- Monitor the impact of social protection initiatives on HIV vulnerability and risk.

10. We can empower men who have sex with men, sex workers and transgender people to protect themselves from HIV infection and to fully access antiretroviral therapy

Civil Society can:

- Mobilize and support sexual minorities and sex workers to advocate for access to services appropriate to their needs.
- Support the engagement of sexual minorities and sex workers in policy making, planning and programme implementation, monitoring and evaluation- of HIV prevention services.
- Advocate for the removal of punitive laws that inhibit access to essential services and human rights for sexual minorities and sex workers.