2006 Progress Report
The Global Coalition on Women and AIDS was launched by UNAIDS in 2004 to respond to the increasing feminization of the HIV epidemic and a growing concern that existing AIDS strategies did not adequately address women’s needs.

A loose alliance of civil society groups, networks of women living with HIV, and United Nations agencies, the Coalition works at global, regional, and national levels to advocate for improved AIDS programming for women and girls. It focuses on several key issues:

- preventing new HIV infections by improving access to reproductive health care
- promoting equitable access to HIV care and treatment
- ensuring universal access to education
- securing women’s property and inheritance rights
- reducing violence against women
- ensuring that HIV care and caregivers are properly supported
- advocating for increased research and funding for female-controlled HIV prevention methods
- promoting women’s leadership in the AIDS response.

For more information, contact UNAIDS or visit http://womenandaids.unaids.org

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UNAIDS/L. Gubb – HIV support group, Tzaneen area, South Africa
2006 Progress Report

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Preface

Twenty five years into the epidemic, it is clear that AIDS, like climate change and the threat of nuclear war, has become one of the defining issues of our time. The world’s leading cause of death among women and men aged 15-59 years, AIDS affects the entire social spectrum. However, its impact tends to be felt most severely by the socially and economically disadvantaged. In many parts of the world, this means those that are young, poor and female.

As our understanding of the epidemic deepens, we are learning more about the ways that gender inequalities both fuel its spread and intensify its effect on women and girls. The Global Coalition on Women and AIDS (GCWA), now three years old, has played a significant role in identifying and highlighting specific obstacles that make it difficult for many of the world’s women and girls to protect themselves from HIV infection and impede them from accessing treatment and care.

In 2006, governments made a number of important international pledges to overcome those obstacles – most notably at the United Nations High Level Meeting on AIDS in New York. The challenge now is to ensure that those promises are kept and that concrete action is taken at the country level to ensure that the AIDS response works better for women and girls systematically and over the longer term.

In this context, the Global Coalition has compiled *Keeping the promise: agenda for action on women and AIDS*, calling on national governments and the international community to take concrete steps in three areas. Progress in each of these areas is critical if we are to reach our shared objective of providing universal access to HIV prevention, treatment, care and support services.

First, governments and the international community must ensure that laws affirm and secure women’s rights (protecting them from violence, for example, and upholding their right to own and inherit property)—and that they are enforced effectively. This involves investing in strategies to educate the police, the judiciary, social service providers, civil servants and community leaders about laws and their legal responsibilities. It also means developing and funding programmes to improve legal aid services and other forms of support.

Second, they must review and adapt existing AIDS strategies to ensure they work for women. This will require a greater investment in the services women need, including education, sexual and reproductive health, antenatal care, prevention of mother-to-child transmission, as well as antiretroviral therapy and the development of microbicides.

Third, they must review the membership of national AIDS coordinating bodies and partnership forums to ensure the meaningful representation of women and people with gender expertise, and invest more in training women (especially those living with HIV) to be effective advocates and leaders in the AIDS response.

The challenge for the Global Coalition on Women and AIDS is to expand its focus on seeking concrete solutions and accelerating efforts to scale up its influence at the country level. The longer I work on AIDS, the more convinced I am that global advocacy alone cannot mobilize change fast enough. The Global Coalition has been effective in building partnerships internationally; the next challenge is to replicate this work at the country level. We would like the Global Coalition’s ultimate goal to be the point at which every official involved in designing and implementing AIDS policies and programmes can respond to the question, “Does this work for women and girls?” with the answer, “Yes”.

Dr Peter Piot
Executive Director, UNAIDS
As the Global Coalition on Women and AIDS completes its third year, I would like to pay tribute to the partners and partnerships that make the Coalition what it is.

Women’s organizations, activist groups, networks of women and people living with HIV, technical institutes, academic institutions, foundations, governments and donor agencies have been working for years—in different places and in different ways—to reduce the devastating impact of AIDS on women and girls.

The Global Coalition was created to bring together these different actors, with their different perspectives and skills, to speak with one loud clear voice with one clear aim: to make AIDS responses work better for women and girls.

This report provides a broad overview of the major activities of the Global Coalition Secretariat and convening agencies over the past year. Its achievements, however, resonate beyond its own specific activities. The Global Coalition has helped shape the global advocacy agenda around women and AIDS and embed these messages and strategies in major global and regional policies. We have seen national coalitions on women and AIDS formed in countries ranging from Haiti to Nigeria and regional coalitions being formed in the Caribbean.

Yet much, much more remains to be done. In the coming years, the Global Coalition partners will expand partnerships at regional and country levels, build the knowledge required to advance HIV programming for women and girls, and strengthen the voices of women’s advocates in forums where AIDS policies and plans are decided.

It is with gratitude to our partners and supporters—and to the critics who push us to do more and to do better—that the Global Coalition will advance into its future. We count on your continued support and energy for all the important work ahead.

Deborah Landey
Deputy Executive Director
UNAIDS
OVERVIEW 2006

The Global Coalition on Women and AIDS

The year 2006 was a landmark year for the global response to AIDS: 25 years into the epidemic and ten years after the founding of UNAIDS, UN Member States renewed and strengthened their commitments to scale up their responses to AIDS, pledging to take concrete steps towards ensuring universal access to HIV prevention and AIDS treatment services. As a first step towards achieving universal access to prevention, treatment and care, governments agreed to set national targets by the end of the year with the aims of expanding the availability of HIV-related services and addressing barriers and obstacles to access, particularly for women, girls and vulnerable populations. Overall funding for AIDS programmes increased (although it was still far below what was required) and there was increased recognition of the need to mount and sustain a full-scale worldwide AIDS response over at least another generation.

Throughout this important year, the Global Coalition on Women and AIDS (GCWA) worked hard to put women’s issues high on the agenda of top international AIDS forums. Global Coalition partners played a critical role in ensuring that the Report on the global AIDS epidemic contained more information about women and paid more attention to the obstacles that prevent so many women from accessing HIV services. These partners also played an important part in securing strong commitments from Heads of State and other high-level signatories of the 2001 Declaration of Commitment on HIV/AIDS to address the gender inequalities that fuel the epidemic, and in ensuring that issues relating to women and girls featured prominently at the XVI International AIDS Conference in August.

This global advocacy effort was underpinned by an increasing volume of research on key Global Coalition issues and the compilation of Keeping the promise: an agenda for action on women and AIDS, which highlights three cross-cutting areas where prompt action would significantly reduce women’s and girls’ vulnerability to HIV infection. This document calls on national governments and the international community to secure women’s rights, invest more money in AIDS programmes that work for women and allocate more seats at decision-making tables to women.

At the same time, Global Coalition partners stepped up progress at the country level. Efforts will be made in 2007 to accelerate this progress while maintaining momentum in the areas of global advocacy and evidence building.

The Global Coalition also expanded its network of partners in 2006 with the International Women’s Health Coalition, the Social Science Research Council, the United Nations Development Programme (UNDP) and the African Women’s Development Fund all coming on board. It looks forward to engaging additional partners in 2007.
STRATEGY AND ACTION IN 2006

In 2005, Global Coalition partners developed a strategic framework to guide their work, identifying three overlapping domains in which action is focused: evidence, advocacy and country-level action. Global Coalition partners seek to strengthen gaps in evidence around programming that works for women, to share this information with policy-makers to shape programmes and to catalyse changes within national and community AIDS responses. In this way, evidence informs our advocacy work which in turn informs actions at country levels. Increasing efforts to ensure that evidence-informed advocacy efforts support country needs is a major emphasis of the Global Coalition’s work.

Evidence and policy development

Throughout 2006, Global Coalition partners worked to strengthen the evidence base both on understanding women’s risk and vulnerability to HIV and on interventions to address these risks, with a view towards informing advocacy on policies that would improve women’s access to HIV prevention, care and treatment.

Global Coalition partners provided technical input to the Report on the global AIDS epidemic to ensure a stronger focus on gender issues. Launched at the UN High Level Meeting on AIDS, it includes case studies on caregiving and property rights, updated figures on the investment gap for microbicides and a synopsis of recent research on stigma- and gender-related barriers to the uptake of antiretroviral treatment. The report is issued every two years and highlights important trends in the AIDS epidemic and presents the latest estimates on country-level data.

Towards the end of 2006, partners, in their respective capacities, provided input to policy guidance for the implementation of the UNAIDS’ policy document Intensifying HIV prevention. Draft guidelines (to be released in early 2007) call for expanded access to reproductive health care and HIV information; comprehensive sexuality education in schools and other venues to reach out-of-school youth; scaling up of programmes to prevent mother-to-child transmission of HIV (within the context of PMTCT Plus); mass media and community campaigns targeting men to address sexuality, gender equality and fidelity; implementation of legal and policy measures to address violence against women; efforts to address employment and income-generating activities for women; and gender equity in primary and secondary education.

Gender-related discrimination, inequality and human rights abuses continue to be major barriers to universal access to HIV prevention, treatment and care services. In 2006, the Global Coalition commissioned a review of the reports of the country and regional consultations around universal access.
The situation today

HIV and AIDS continue to disproportionately affect women and girls. For every 10 adult men currently living with HIV in sub-Saharan Africa, there are 14 women living with HIV. In the Caribbean, Asia and eastern Europe, women—primarily young women—account for an increasing proportion of those infected with HIV. In India and most countries of South-East Asia, women comprise over 40% of those living with HIV. Women also bear the brunt of caring for those infected with HIV or orphaned by AIDS.

Women represent half of those living with HIV but are largely absent from the decision-making forums that shape global and national AIDS policies and programmes. According to a 2005 survey by UNAIDS, in fewer than 10% of 79 countries surveyed do women’s organizations participate fully in the development of national AIDS plans. Women’s organizations are also poorly represented on many of the Country Coordinating Mechanisms of the Global Fund to Fight AIDS, Tuberculosis and Malaria, which are designed to coordinate national strategies for the three diseases. In 2006, only half of proposals submitted to the Global Fund included funds for women’s organizations and just 20% on specifically engaging men in areas such as caregiving or violence prevention.
Consultations in the Asia-Pacific, Africa, Caribbean, Central Asia, Eastern Europe and Latin America regions, as well as in Albania, Bangladesh, Botswana, Burundi, Cambodia, Cape Verde, Ghana, India, Pakistan, Rwanda, Sierra Leone, Suriname, Ukraine, Zambia and Zimbabwe all specifically identified gender inequity as a key driver of the AIDS epidemic and a major barrier to accessing HIV services. The Global Coalition played an active role in strengthening attention to gender issues in the global guidance\(^1\) UNAIDS provided to countries on national target-setting for universal access, including underlining the need for sex-disaggregated data and calling for greater attention to gender-related barriers to accessing HIV prevention and AIDS treatment services.

The Global Coalition provided financial support to partners for research and advocacy to address evidence gaps in its seven priority action areas. Two convening agencies, HelpAge International and the Social Science Research Council, are working to strengthen evidence, collect data and develop strategies to support caregivers, a majority of whom are women. HelpAge International’s work on the Global Coalition’s behalf seeks to improve support to older women who care for people living with HIV, orphans and vulnerable children. The Social Science Research Council’s efforts focus on identifying strategies to increase financial and human resources for caregiving in the public and private sectors while also finding ways to increase the centrality of caregiving in global health priorities and AIDS policies and programmes.

It also continued its support of the International Center for Research on Women to evaluate and document effective strategies to strengthen women’s property and inheritance rights. Both have provided support to eight grass-roots organizations in sub-Saharan Africa striving to improve property and inheritance rights for women and support women in dealing with the consequences of disinheritance. The grants are intended to assist these organizations to expand services, strengthen organizational capacities and improve monitoring and evaluation of service delivery strategies. The International Center for Research on Women is also collaborating with a range of legal and community service organizations in South Asia to develop case studies on strategies to address these issues in the Asian context, where HIV awareness and prevalence at community levels are lower. The results of this two-year effort will be released in July 2007.

The Global Coalition has assisted the World YWCA and the World Association of Girl Guides and Girl Scouts—large membership organizations which collectively reach more than 35 million young women in 144 countries—to strengthen their focus on AIDS and provide strategic guidance and training on HIV to their vast membership. It also provided assistance to the newly established HIV window of the African Women’s Development Fund, which seeks to build the capacity and fund the work of small grassroots women’s organizations on the frontlines of the AIDS response. Fundraising also helped raise an additional US$ 700 000 for the HIV window of the UN Trust Fund on Violence against Women, administered by the United Nations Fund for Women (UNIFEM).

Together with the International Planned Parenthood Federation, UNFPA and Young Positives, the Global Coalition supported the release of *Change, choice and power: young women, livelihoods and HIV prevention*, an advocacy document examining the links between micro-credit and HIV prevention for young women. The report provides a review of existing research and literature on microcredit, economic empowerment, reproductive health, and HIV prevention for young women. It also includes examples of existing projects around the world working successfully on these issues, as well as lessons learnt and recommendations for action. All groups intend to undertake further activities in 2007 to build upon the findings of this report.

\(^1\) The document is entitled *Setting national targets for AIDS prevention, treatment, and care and support.*
Advocacy

Together with civil society organizations and activists, the Global Coalition has helped draw attention to the urgent need for AIDS strategies to focus on gender norms and gender inequality as principal drivers in the AIDS epidemic. Thanks in large part to the work of the Global Coalition and the intense lobbying by many members of civil society, an increasing number of donors have funding policies that include an explicit focus on women and AIDS, including issues such as violence against women, within their AIDS strategies. Future advocacy efforts must focus on ensuring that national AIDS strategies have a stronger emphasis on addressing gender norms and inequalities and that these strategies are translated into concrete programmes, are given priority, and receive adequate funding.

In 2006, significant efforts were focused on the UN High Level Meeting on AIDS in New York, where all sectors of the international community, governments, civil society and the private sector met to review progress in implementing the 2001 Declaration of Commitment on HIV/AIDS and to renew political commitment to achieving universal access. At this meeting, the Global Coalition launched Keeping the promise: an agenda for action on women and AIDS, which calls for an urgent and massive scaling-up of AIDS responses that work for women and girls in general. The document calls specifically for urgent action at national and international levels in three critical cross-cutting areas:

- **laws and policies that affirm and protect women’s rights**—particularly those that promote their property and inheritance rights, address rights within marriage and respond to domestic violence—and greater attention to enforcement and implementation of these laws and policies;

- **greater financial investments in AIDS strategies and programmes that work for women**—investments in primary and secondary education, sexual and reproductive health services, female-controlled HIV prevention methods, programmes that address violence and property-grabbing, and support for caregivers; and

- **more seats for women’s organizations at tables where AIDS policies are made**— along with training to enable women, particularly women living with HIV, to be more effective advocates and leaders in the response to AIDS.

The UN Secretary-General amplified these calls in the closing remarks to the High Level Meeting on AIDS. They were contained in the 2006 Political Declaration on HIV/AIDS itself (paragraphs 7, 27, 30 and 31) and highlighted at the XVI International AIDS Conference in Toronto, specifically in the co-chairs’ summary of the session, “Time to Deliver for Women and Girls”, organized by the Canadian International Development Agency and the International AIDS Council. International gatherings in 2007 are also building on these calls to action, with the International Women’s Summit on women’s leadership in the AIDS response (to be held in Nairobi in July 2007) being framed around the three calls for action.

In the week following the High Level Meeting on AIDS, the Global Coalition Leadership Council, the Executive Director and Deputy Executive Director of UNAIDS and two of the Secretary-General’s Special Envoys on HIV/AIDS met in Toronto to chart the way forward. Participants endorsed Keeping the promise: an agenda for action on women and AIDS and agreed to undertake joint and individual activities to promote the calls in the agenda.
In spring 2006, the Global Coalition published three new issue briefs for policy-makers, recommending urgent national and international action: Economic security for women; Increase women’s control over HIV prevention; Support caregivers: fight AIDS. Each of these four-page briefs gives an overview of the current situation, highlights promising developments and recommends actions to be taken by national governments and international partners. Field colleagues have reported that the briefs have been useful in advocating stronger attention to women within national AIDS programming, and several countries have adapted both the Agenda for Action and the format of the issues briefs using local data.

In June 2006, the Global Coalition sponsored the second annual Women and AIDS Tour of the United States, with the aim of educating civil society groups and informing US policy on the challenges of women and AIDS abroad. Leadership Council members joined a group of positive women from different regions who came to share their experiences and discuss the aspirations and needs of millions of women and girls worldwide. The Tour met with a wide range of constituencies (including political leaders, health workers, members of faith-based groups and the media) in four cities: Detroit, Houston, Minneapolis and Washington, DC.

The issue of women’s vulnerability to HIV featured prominently throughout the XVI International AIDS Conference in Toronto in July 2006 where Global Coalition convening agencies organized a number of sessions, were also able to provide considerable input to different aspects of the conference programme.

In November 2006, supporters of the Business Women’s Initiative, a Global Coalition partner, visited Kenya. Their objective was to raise awareness of the situation in Kenya among business leaders, demonstrate how women and community groups are making a difference, enable visitors to meet national and local decision-makers and increase their understanding of what kind of resources are required to ensure that the AIDS response meets the needs of Kenyan women and girls.

On World AIDS Day, the Global Coalition supported events in London and Washington. The London event, which was organized by World YWCA and SOFIA (a group of prominent women addressing AIDS issues in the UK), showcased practical ways to enhance the AIDS response at local and national levels with a film entitled “Women Are 2”, produced by World YWCA and featuring a number of Leadership Council members and other partners. In Washington, the focus was on engaging faith-based groups and women’s organizations globally and at the country level in efforts to reduce violence against women.
Country level action

Intensified action to address women and AIDS issues at the country level continues to be the Global Coalition’s ultimate goal. In 2006, it supported work in a range of target countries (Burkina Faso, Ghana, Kenya, Pakistan, Senegal, Serbia, Sudan, Zambia and Zimbabwe) seeking to catalyse action within the context of core national and community responses to HIV. Most activities are ongoing and address a range of issues.

In Zambia, funds were used to support the finalization of the National Action Plan on Women and Girls; to generate a movement for policy change; and to strengthen the legal framework for issues such as gender-based violence and women’s property rights. For example, a proposal was put forward to allocate 30% of titled land to women in the draft land policy. Funds were also used to provide advocacy support to national target-setting in the Zambia HIV/AIDS Strategic Framework (2006–2010) on the reduction of HIV prevalence among pregnant women, women in general and girls.

In Pakistan, support from the Global Coalition and UNFPA is helping to translate national commitments on women and AIDS into programme activities. This has involved increasing awareness among women’s organizations of HIV transmission and prevention, and at the same time, raising the awareness of HIV service organizations on issues that affect women, particularly the urgency of outreach to high-risk groups (female sex workers, migrant workers and truck drivers, injecting drug users and their spouses). This work will establish a partners’ network of women’s organizations and supporting agencies; seek to enhance political commitment to issues related to women and HIV; and develop a strategy and workplan for capacity-building among organizations serving high-risk groups and their spouses.

In Mozambique, donor support was mobilized from the Government of Flanders and UNAIDS to initiate follow up on the recommendations of the UN Secretary-General’s Report on Women, Girls and HIV/AIDS (2004); to ensure the protection of women’s and girls’ property and inheritance rights; and to address the growing feminization of the AIDS epidemic and the specific vulnerability of women and young girls within the national AIDS programme.

In Serbia, an analysis of voluntary counselling and testing services undertaken by the Global Coalition, International Planned Parenthood Federation, UNFPA and Young Positives led to the adoption of new protocols within the country and the creation and dissemination of a report on improving access to these services for most vulnerable adolescents—particularly young women and girls. These developments will greatly improve not only young women and girls’ access to essential HIV testing and counselling services, but also the quality of these services.

The Global Coalition also embarked on a review of progress in strengthening attention to women’s issues within national AIDS responses in the nine most-affected countries of southern Africa, which formed part of the Secretary-General’s Task Force on Women, Girls and AIDS held in November 2003. The objective of the review is to see how governments have taken forward the recommendations of the Task Force and to explore the progress and challenges in developing and implementing national actions plans on women and AIDS. The results of the review will be released in June 2007.

It also provided financial and technical support to partners working with civil society organizations in countries to advance strategies to protect women’s property and inheritance rights; to strengthen the capacity of positive women’s networks to participate in national and local AIDS processes; and to assist local women’s organizations in improving services in their communities.
In mid-2006, the Global Coalition and partners International Community of Women Living with HIV/AIDS, International Center for Research on Women, National Minority AIDS Council, and Center for Development and Population Activities (CEDPA) entered into a partnership with the Ford Foundation to advance women’s leadership and advocacy for AIDS action. The grant from the Ford Foundation will be used both to build the institutional capacity of networks of women living with HIV and women’s groups, and to strengthen the leadership and advocacy skills of individual women so that they can participate more effectively in national, regional and global decision-making processes for the AIDS response.

The Global Coalition supported efforts to mobilize women and AIDS action at regional and subregional levels in 2006. In March, it co-hosted a meeting with the Ministry of Women’s Affairs in Cambodia, the Rockefeller Foundation, and the Asia-Pacific Leadership Forum on women and AIDS in the Mekong region (The Women’s Face of AIDS in the Greater Mekong Subregion). The symposium was attended by 75 participants from Cambodia, Lao People’s Democratic Republic, Myanmar, Thailand, Viet Nam, and the Yunnan province of China. The meeting brought together policy-makers, networks of women living with HIV, and women’s organizations in the subregion to share approaches to addressing increasing rates of HIV infection among women. The Global Coalition also provided financial and technical support to the ASEAN Secretariat to develop a workplan to operationalize the ASEAN Declaration on the Elimination of Violence Against Women in the ASEAN Region. As host country of the 4th ASEAN Committee on Women (ACW) Meeting, the Philippines, through the National Commission on the Role of Filipino Women, coordinated the development of a concept proposal and workplan. The ASEAN Secretariat was able to secure funding support from UNIFEM to convene a workshop to finalize the workplan. The report and workplan were finalized in January 2007.

In addition, Leadership Council members are playing a pivotal role in mobilizing regional-level action. Work is under way to revitalize the Caribbean Coalition on Women and AIDS, and to launch a new coalition in Latin America. The Global Coalition provided financial and technical support to the regional meeting of HIV-positive women in Latin America and has helped link the recommendations of this meeting with an emerging initiative by Latin American First Ladies. In early 2007, a group of positive women will visit Armenia, Georgia, Kazakhstan, the Russian Federation and Ukraine to bring attention to women’s issues in the AIDS response in the region and to engage stakeholders in scaling up access to services in these countries.
PROGRESS ACROSS THE SEVEN ACTION AREAS

Preventing new infections among young women and adolescent girls by improving their access to reproductive health care

In 2006, Global Coalition partners greatly enhanced their work in the area of HIV prevention among young women and girls, with a strong focus on access to reproductive health services and addressing the prevention needs of young women and girls living with HIV. A key output of these efforts, led by the International Planned Parenthood Federation, UNFPA and Young Positives, was the creation of Global Coalition evidence-based Report Cards on HIV Prevention for Girls and Young Women for ten countries across Africa, the Caribbean and South-East Asia. Based on extensive research and in-country qualitative work, these Report Cards provide in-depth summaries of the current status of HIV prevention for girls and young women, together with recommendations for action. Each Report Card is also accompanied by a research dossier, providing more detailed responses to each of the 50 main research questions. These dossiers provide, for the first time ever, in-depth and rigorous country-based research on HIV prevention for young women and girls.

A further ten will be produced in 2007 covering Cameroon, Dominican Republic, Ethiopia, Kenya, Nepal, Papua New Guinea, Rwanda, Serbia, Sudan and Swaziland. In 2007, the International Planned Parenthood Federation, UNFPA and Young Positives will undertake a number of in-country activities to implement the recommendations from the existing Report Cards. This will include providing catalytic funding (in the form of small grants) to organizations in a number of countries and holding meetings of national stakeholders to step up HIV prevention efforts for and with young women and girls.

This work was complemented by the International Women’s Health Coalition (IWHC) campaign, “With Women Worldwide: A Compact to End HIV/AIDS”, which unites activists and women’s organizations on an action agenda to secure girl’s and women’s sexual and reproductive health and rights. The Compact demands universal access to sexual and reproductive health services and education, as well as protection of sexual and reproductive rights.
Promoting equitable access for women to HIV treatment and care

Treatment access has greatly expanded since the launch of the Global Coalition, although efforts have fallen short of the global goal of 3 million people on treatment by the end of 2005 (“3 by 5”). In 2006, the International Community of Women living with HIV (ICW) and WHO undertook a desk review of access to HIV treatment for women as part of the evaluation of the “3 by 5” initiative. The review concluded that while available evidence suggests that women are accessing treatment equitably in many countries, significant gaps in sex- and age-disaggregated data (including HIV prevalence, HIV testing and entry points for treatment and adherence) prohibit definitive conclusions. This underscores the need for gender and age-disaggregated data, as well as the need to focus not just on treatment access, but also on adherence to antiretroviral regimens and on the quality of treatment and prevention services.

In 2006, ICW also undertook some focus group research in Botswana, Kenya, Namibia, the United Kingdom and United Republic of Tanzania to better understand the health issues of women living with HIV. This included monitoring national commitments to meeting HIV treatment and sexual and reproductive health needs, as well as mapping experiences with access to antiretroviral treatment.

Promoting access to new HIV prevention methods

During 2006, the International Partnership for Microbicides, the Global Campaign for Microbicides and UNFPA successfully advocated greater investment in female-controlled prevention methods such as the female condom, the diaphragm and microbicides. New donors, including Belgium, Canada, Germany, Sweden, the United States and the European Commission, provided financial support for microbicide research and development.

In addition, advocacy efforts by these groups helped to place microbicides within the framework of the Millennium Development Goals as necessary to halt and reverse the spread of AIDS by 2015 and to reduce poverty.

The International Partnership for Microbicides is conducting clinical trials in Rwanda, South Africa and Uganda. Together with the Global Campaign for Microbicides, they are building capacity and opportunities for civil society engagement in microbicides research, development and access efforts. Its photo exhibit, “Giving women power over AIDS”, has mobilized support for microbicide development in the United States and across Europe.
Securing women’s property and inheritance rights

The International Center for Research on Women (ICRW), FAO, UNDP and other partners campaigned throughout 2006 to make women’s property and inheritance rights part of the core response to AIDS. In 2005, ICRW made small grants to grass-roots organizations in Kenya, Malawi, Rwanda, South Africa and Zimbabwe to examine the links between women’s property and inheritance rights and their vulnerability to HIV. During 2006, ICRW provided technical assistance to these organizations to help evaluate and document strategies to empower women on their property and inheritance rights. ICRW also organized a regional consultation in New Delhi to examine the legal and social issues associated with women’s ownership of property in South Asia and linkages with AIDS. FAO complemented the evidence-gathering work of ICRW through its technical and policy guidance to governments in east and southern Africa on strengthening the property and inheritance rights of women. This body of work in Africa and Asia should strengthen the evidence base concerning HIV and property rights, and thereby sharpen the Global Coalition’s advocacy and programming guidance in this area.

Reducing violence against women

In 2006, WHO, UNIFEM, and the Center for Women’s Global Leadership (CWGL) generated broad political commitment to addressing violence against women as a core component of the global AIDS response. In the 2006 Political Declaration on HIV/AIDS, Member States pledged to “eliminate gender-based abuse and violence, and to increase the capacity of women and adolescent girls to protect themselves from the risk of HIV infection” (paragraph 30). The Secretary-General’s “In-depth study on all forms of violence against women” launched in September 2006 called on national governments to integrate efforts to prevent and reduce male violence against women into AIDS programmes (paragraph 387).

Following the launch of the WHO Multi-Country Study on Women’s Health and Domestic Violence against Women in November 2005, WHO developed guidelines on post-exposure prophylaxis to prevent HIV infection, as well as guidelines for integrating gender into HIV programming. The guidelines include specific recommendations and strategies for integrating gender into prevention of mother-to-child transmission, treatment, and HIV testing and counselling, and are being field tested in Belize, Honduras, Nicaragua, Sudan and United Republic of Tanzania.

The Center for Women’s Global Leadership published a brochure entitled “Strengthening resistance: confronting violence against women and HIV/AIDS” featuring innovative stories from a range of countries to highlight advocacy, programming and campaigning at the intersections of violence and HIV. This built on the “16 days of activism against gender-based violence”, a campaign which in the last two years had a special focus on violence and HIV and has prompted Action Aid to launch its own campaign on violence and HIV.

UNIFEM and the Global Coalition secured a further US$ 2.1 million from the Johnson & Johnson Foundation for the UN Trust Fund to Eliminate Violence against Women to finance grass-roots organizations working on the interconnected issues of violence against women and risk of HIV infection. Through this special funding window, the UN Trust Fund is building a body of knowledge on the actions and interventions that can reduce violence against women and girls and their consequent risk of HIV, as well as reduce the violence resulting from stigma and discrimination, which inhibit access to HIV services. Five grants of between US$ 100 000 and US$ 400 000 are to be awarded over a three-year cycle. In addition, UNIFEM and the Government of Burundi launched a Joint Programme on Preventing Gender-Based Violence and HIV/AIDS in October 2006, with support from the Norwegian Government.
Supporting community-based care and caregivers

In 2006, HelpAge International partnered with the Social Science and Research Council (SSRC), World YWCA and GROOTS (Grassroots Organizations Working Together in Sisterhood) to build a network of home- and community-based care organizations, and to strengthen the evidence base concerning the provision and costing of HIV-related care work. GROOTS is working together with the World YWCA to hold a Caregivers Academy in conjunction with the World YWCA International Women’s Summit in Nairobi in July 2007. The SSRC initiated research to assess the direct and opportunity costs of care work in the public, private and family sectors, and the implications of this for AIDS, public health, employment and macroeconomic policies. This has supplemented the work of HelpAge International to improve data collection and information on households affected by AIDS, and to reduce the poverty of caregivers.

HelpAge International campaigned specifically to raise the visibility of grandmothers and older women caregivers. It developed advocacy materials to promote social protection for caregivers, as well as a World AIDS Day advocacy pack with the theme: “Keep the promise: support older carers”. HelpAge International also undertook work to map core standards and practices, and the key stakeholders in home- and community-based care for people living with HIV.
Universal education for girls

UNICEF and the Global Campaign for Education built on their advocacy work in 2005 extending the “Send a Child to School” campaign, and continuing to highlight the fundamental role girls’ education plays in reducing their vulnerability to HIV.

Leadership by and for women

World YWCA and the World Association of Girl Guides and Girls Scouts continue to strengthen the capacity of young women to become leaders in the AIDS response. The World Association is currently enhancing members’ ability to run peer education programmes on HIV prevention and the reduction of stigma and discrimination. World YWCA and the Global Coalition launched *If I kept it to myself*, a collection of profiles of young grass-roots women leaders on HIV at the International AIDS Conference in August. In addition, World YWCA has strengthened its global programming guidance on HIV and has made AIDS the central theme of its quadrennial worldwide conference, which will gather YWCA leaders from all 122 countries in Nairobi in July 2007.

The Global Coalition, along with the Centre for Development and Population Activities, the International Community of Women Living with HIV/AIDS and the National Minority AIDS Council, entered into a partnership with the Ford Foundation entitled “Advancing Women’s Leadership and Advocacy for AIDS Action”. This grant intends to provide leadership training and capacity-building support to local women’s organizations—particularly networks of women living with HIV—and to individual women leaders to enable their greater and more meaningful participation in decision-making forums which shape AIDS policies and programmes. The grant also aims to enhance these groups’ service-delivery capacities. Small grants to support positive women’s networks in eight countries will be made in early 2007. In 2006 the Global Coalition also provided funds to the African Women’s Development Fund to support the work of grass-roots women’s organizations delivering HIV prevention and AIDS treatment services.
PRIORITIES FOR 2007

At its Strategic Planning Meeting in November, the Global Coalition identified a number of priorities for action in 2007.

- A major push on women’s leadership and meaningful involvement in decision-making processes for the AIDS response at national, regional and global levels.

Efforts to advance women’s leadership and participation will include investments to build the capacity of women’s organizations and networks of women living with HIV to effectively participate in shaping national and local policies and delivering services to their members. It is hoped that the advocacy campaign will be launched at the YWCA’s International Women’s Summit in Nairobi in July 2007. It will also seek to link its work on participation with global efforts to strengthen the “Three Ones”, with a particular focus on ensuring that women’s organizations and needs are adequately reflected in formulating national policy through the one national coordinating body and civil society partnership forums.

Concerted advocacy around women and girls’ access to essential HIV services, as part of the push towards universal access.

Advocacy to increase women’s and girls’ access to essential HIV services will build upon national target-setting processes concerning universal access and may focus on specific services such as prevention of mother-to-child transmission, HIV counselling and testing, and reproductive health care. Efforts to monitor progress in selected countries could help to highlight gender-related barriers to access, such as stigma and discrimination.

- Continued efforts to influence and sensitize major partners on the Global Coalition’s calls to action: Laws and their enforcement; Money and a seat at the table.

Advocacy efforts will continue with Keeping the promise: an agenda for action and will link with regional and national partners to extend their advocacy reach and ensure that their work feeds into global efforts, strategies, priorities and programmes.

UNAIDS/H. Vincent – HIV Activist, Viure +, Chad
Continued advocacy and fundraising to support the generation of evidence and policy guidance where gaps in knowledge persist. Global Coalition partners will work closely with UNAIDS as it develops guidelines to drive universal access and enhance prevention efforts. The Global Coalition will also seek to highlight lessons learnt from convenor work across the action areas, in particular the results of efforts to promote property and inheritance rights for women, to provide support to caregivers and to reduce violence against women. Efforts will also be made to encourage UN and civil society partners to develop programme guidance and best practice examples to strengthen national programming on women and AIDS around the seven action areas.

A major thrust of all future work will be to more systematically support efforts at the country level to help ensure that action on women and AIDS is at the centre of national AIDS strategies and operational plans. The Global Coalition secretariat will conduct a review of its programme of catalytic funds in early 2007, particularly in the nine most affected countries in southern Africa, in an attempt to learn more about the interventions and investments that are most effective in driving women and AIDS efforts. They will also provide input to UNAIDS’ efforts to develop guidance on better addressing gender issues within national AIDS programmes in response to a request from its Programme Coordinating Board.

In 2007, the Global Coalition will conduct a management review of its structure with a view to strengthening its governance, streamlining its operating procedures, enhancing links to country-level partners, and expanding its partnerships. This review will coincide with the appointment by UNAIDS of a new director to oversee its work.
Annex I
Overview of Global Coalition Funding in 2006

A. Funds received in 2006

<table>
<thead>
<tr>
<th>Source</th>
<th>Funds received in 2006 (US$)</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Donor funding</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Luxembourg</td>
<td>$1,431,199</td>
<td>Core support</td>
</tr>
<tr>
<td>Finland</td>
<td>$1,285,347</td>
<td>Core support</td>
</tr>
<tr>
<td>Ford Foundation</td>
<td>$250,000</td>
<td>Promoting women’s leadership in the AIDS response: capacity building of grassroots women’s organizations and HIV-positive women’s networks</td>
</tr>
<tr>
<td><strong>UNAIDS funding</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unified Budget and Workplan 2006</td>
<td>$113,776</td>
<td>Core support</td>
</tr>
<tr>
<td>Unified Budget and Workplan 2006</td>
<td>In kind</td>
<td>Core support for post of senior coordinator of GCWA and GCWA secretariat overhead</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$3,080,322</td>
<td></td>
</tr>
</tbody>
</table>

Note: that funds received reflects all income recorded during the calendar year, including grants which span a two year implementation period and which are intended for obligation in 2007. For this reason, funds received exceed funds available for annual expenditure.

B. Overview of expenditures: (as of 30 December 2006)

<table>
<thead>
<tr>
<th>Line items</th>
<th>Funds expended (US$)</th>
<th>% of Total*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grants to conveners and partners</td>
<td>$335,000</td>
<td>23%</td>
</tr>
<tr>
<td>Catalytic funds to regional and country level</td>
<td>$430,000</td>
<td>29%</td>
</tr>
<tr>
<td>GCWA leadership and conveners’ meetings</td>
<td>$115,000</td>
<td>8%</td>
</tr>
<tr>
<td>Secretariat costs (salaries/travel)</td>
<td>$475,000</td>
<td>32%</td>
</tr>
<tr>
<td>Advocacy, publications and materials</td>
<td>$110,000</td>
<td>8%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$1.46 million</td>
<td>100%</td>
</tr>
</tbody>
</table>

*(calculated as percent of total obligations to date)
C. Funds leveraged by or for Global Coalition partners in 2006

<table>
<thead>
<tr>
<th>Donor</th>
<th>Amount (US$)</th>
<th>Recipient</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Johnson &amp; Johnson</td>
<td>$700 000</td>
<td>UNIFEM</td>
<td>HIV window in the UN Trust Fund on Violence Against Women</td>
</tr>
<tr>
<td>Foundation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>$700 000</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

D. Past supporters

Canadian International Development Agency (2004)
Commonwealth Secretariat (2004)
MAC AIDS Fund (2005)
Government of Sweden (2005)
United Nations Foundation (2005)
**ANNEX II**  
Global Coalition on Women and AIDS  
Leadership Council Members – December 2006

<table>
<thead>
<tr>
<th>Name</th>
<th>Position and Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Peter Piot</td>
<td>Executive Director, UNAIDS</td>
</tr>
<tr>
<td>HE Ms Libertina Amathila</td>
<td>Deputy Prime Minister, Government of Namibia</td>
</tr>
<tr>
<td>Ms Ludfine Anyango</td>
<td>National Coordinator, HIV/AIDS ActionAid Kenya Country Programme</td>
</tr>
<tr>
<td>Ms Louise D. Binder</td>
<td>Co-Chairman, Canadian Treatment Action Council</td>
</tr>
<tr>
<td>Ms Maire Bopp</td>
<td>Founder/Chief Executive Officer, Pacific Islands AIDS Foundation</td>
</tr>
<tr>
<td>Dr Brian A. Brink</td>
<td>Senior Vice President, Anglo American Corporation of South Africa Limited</td>
</tr>
<tr>
<td>Ms Lesley Bulman-Lever</td>
<td>SOFIA</td>
</tr>
<tr>
<td>Justice Edwin Cameron</td>
<td>Judge of the High Court, South Africa</td>
</tr>
<tr>
<td>Mr Edgar Carrasco</td>
<td>Director-General, Acción Ciudadana Contra el SIDA</td>
</tr>
<tr>
<td>Dr Kathleen Cravero</td>
<td>Assistant Administrator, United Nations Development Programme</td>
</tr>
<tr>
<td>Doña Xiomara Castro De Zelaya</td>
<td>Primera Dama, Honduras</td>
</tr>
<tr>
<td>HE Princess Norodom Rattani Devi</td>
<td>of Cambodia</td>
</tr>
<tr>
<td>Dr Yakin Ertürk</td>
<td>UN Special Rapporteur on Violence Against Women</td>
</tr>
<tr>
<td>Ms Mary Fisher</td>
<td>Mary Fisher Productions, Inc.</td>
</tr>
<tr>
<td>HE Mrs Jeannette Kagame</td>
<td>First Lady of Rwanda and former President, Organization of Africa First Ladies Against AIDS</td>
</tr>
<tr>
<td>Dr Musimbi Kanyoro</td>
<td>Secretary General, World YWCA</td>
</tr>
<tr>
<td>Ms Irene Khan</td>
<td>Secretary-General, Amnesty International</td>
</tr>
<tr>
<td>Mr Miloon Kothari</td>
<td>UN Special Rapporteur on Adequate Housing</td>
</tr>
<tr>
<td>Ms Periasiamy Kousalya</td>
<td>President, Positive Women’s Network Chennai, India</td>
</tr>
<tr>
<td>Sister Maria Martinelli</td>
<td>Unione Internazionale Superiore Generali, Rome</td>
</tr>
<tr>
<td>Ms Kati Marton</td>
<td>Chair of the Board, International Women’s Health Coalition</td>
</tr>
<tr>
<td>Ms Julie McHugh</td>
<td>Company Group Chairman, Global Virology Business, Johnson &amp; Johnson</td>
</tr>
<tr>
<td>HE Ms Elena Salgado Mendez</td>
<td>Minister of Health, Spain</td>
</tr>
<tr>
<td>Ms Thoraya Obaid</td>
<td>Executive Director, United Nations Population Fund</td>
</tr>
<tr>
<td>Name</td>
<td>Title/Position</td>
</tr>
<tr>
<td>-----------------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Ms Maria Eitel</td>
<td>President, Nike Foundation</td>
</tr>
<tr>
<td>Ms Marta Mauras Perez</td>
<td>Former Secretary of the Commission, Economic Commission for Latin America and the Caribbean</td>
</tr>
<tr>
<td>Ms Alena Peryshkina</td>
<td>Director, AIDS Infoshare</td>
</tr>
<tr>
<td>Ms Gracia Violeta Ross Quiroga</td>
<td>National Chair, REDBOL, Bolivian Network of People Living with HIV and AIDS</td>
</tr>
<tr>
<td>Ms Mary Robinson</td>
<td>Executive Director, Ethical Globalization Initiative</td>
</tr>
<tr>
<td>Ms Yolanda Simon</td>
<td>Coordinator, Regional Network of People Living with HIV/AIDS</td>
</tr>
<tr>
<td>Dr Alice Welbourn</td>
<td>International Community of Women Living with HIV/AIDS</td>
</tr>
<tr>
<td>Ms Jiang Wenli</td>
<td>Actress</td>
</tr>
<tr>
<td>Dr Debrework Zewdie</td>
<td>Director, Global HIV/AIDS Programme, Human Development Network, World Bank</td>
</tr>
</tbody>
</table>
Worldwide, 17.3 million women aged 15 years and older are living with HIV—48% of the global total.

Three quarters (76%) of all HIV positive women live in sub-Saharan Africa, where women comprise 59% of adults living with HIV.

In sub-Saharan Africa, nearly three out of four (74%) young people aged 15–24 years living with HIV are female.

In Asia, Eastern Europe and Latin America, an increasing proportion of people living with HIV are women and girls.

Women currently represent 30% of adults living with HIV in Asia. Figures are higher in some countries in the region, reaching 39% in Thailand and 46% in Cambodia.

In the Ukraine, which has one of the fastest growing epidemics in Europe, women now make up close to half (46%) of adults living with HIV.

In the Caribbean, 51% of adults living with HIV are female, while in the Bahamas and Trinidad and Tobago, figures are 59% and 56% respectively.

AIDS is the leading cause of death for African-American women aged 25–34 years in the United States of America, (CDC, 2006).
UNAIDS brings together ten UN agencies in a common effort to fight the epidemic: the Office of the United Nations High Commissioner for Refugees (UNHCR), the United Nations Children’s Fund (UNICEF), the World Food Programme (WFP), the United Nations Development Programme (UNDP), the United Nations Population Fund (UNFPA), the United Nations Office on Drugs and Crime (UNODC), the International Labour Organization (ILO), the United Nations Educational, Scientific and Cultural Organization (UNESCO), the World Health Organization (WHO), and the World Bank.

UNAIDS, as a cosponsored programme, unites the responses to the epidemic of its ten cosponsoring organizations and supplements these efforts with special initiatives. Its purpose is to lead and assist an expansion of the international response to HIV/AIDS on all fronts. UNAIDS works with a broad range of partners – governmental and nongovernmental, business, scientific and lay – to share knowledge, skills and best practices across boundaries.
Convening agencies

Center for Women’s Global Leadership
Food and Agriculture Organization
Global Campaign on Education
Global Campaign on Microbicides
HelpAge International
International Center for Research on Women
International Community of Women Living with HIV/AIDS
International Partnership on Microbicides
International Planned Parenthood Federation
International Women’s Health Coalition
Social Science Research Council
United Nations Children’s Fund
United Nations Development Fund for Women
United Nations Population Fund
World Health Organization
World YWCA
Young Positives