



EURASIAN
WOMEN'S NETWORK ON AIDS
(EWNA)

STRATEGIC PLAN

FOR 2015-2020

*"In many countries of Eastern Europe
and Central Asia,
HIV has a female face".*

Svetlana Moroz, Founder of EWNA

INTRODUCTION

The countries of Eastern Europe and Central Asia (EECA) share many similarities in regard to the nature of the HIV epidemic and the development of health and community systems. All of the countries in the region have inherited a developed health infrastructure, which is based on the idea of universal access to basic health services.

Each EECA country and each region of the world have active networks of people living with HIV and / or networks of the various key population . With the support of UN agencies and through the Global Fund to fight AIDS, Tuberculosis and Malaria, many of these groups have the opportunity to contribute to the development of policies and procedures that affect the provision of equal access to public health services.

Networks of people living with and/or vulnerable to HIV and AIDS have become powerful mechanisms for combating the pandemic worldwide, and such networks are able to advocate and call for evidence and human rights based approaches to respond to the epidemic. In so doing, these networks are defending their rights to fulfill their potential and experience a decent life.

The Eurasian Women's Network on AIDS (EWNA) is an example of such an alliance, which brings together women affected by HIV in Eastern Europe and Central Asia. The EWNA helps to ensure that women in the EECA region will take advantage of the political declaration on human rights.

This document describes the history of the Eurasian Women's Network on AIDS and outlines its activities for the period from 2015 to 2020.

1. HISTORY OF THE ORGANIZATION

The idea of creating a network of women affected by HIV and AIDS in the EECA region came about in 2011, just before the International Forum on the Millennium Development Goals (MDGs) 6. The focus of the discussions held during the forum centered on women and HIV. In a speech on behalf of all of the women living with HIV in the EECA region, Alexandra Volgina, the founder of the National Women's Network in Russia, noted: "In the countries of the former Soviet Union, HIV-positive women face similar challenges. Linking up women's networks will allow us to share the best practices and apply them in our own regions. Together, we can more confidently speak about the fact that majority of HIV-prevention programs in our countries do not focus on women".

In the summer of 2013, a group of female activists from Russia, Kazakhstan, Ukraine, Georgia, and Tajikistan was formed. The group established a regional association of women affected by HIV, which was supported by the representatives from Moldova, Armenia, Uzbekistan, Kyrgyzstan, Estonia, and Belarus. In December 2013, in Tbilisi, with financial and technical support from UNDP, UNFPA and UN Women, the founding meeting of the Eurasian Women's Network on AIDS (EWNA) was held. The meeting was attended by female leaders from 11 countries of Eastern Europe and Central Asia. At the EWNA founding meeting, the vision and mission of the organization was defined, plans for 2014 were outlined, and the management structure of EWNA was established.

In 2014, EWNA prepared the newsletter "The Invisible Women", issued on 8 March. It developed and submitted a joint bid with the East Europe & Central Asia Union of PLWH to the UN Trust Fund to address the cases of violence against women. EWNA representatives participated as members of the Civil Society Committee in the preparation of the 4th Conference on HIV and AIDS in Eastern Europe and Central Asia. With the support of UNAIDS offices in Moscow and Ukraine, the EWNA representatives participated in the 20th International Conference on AIDS, under which they became the co-organizers of the European dialogue platform in the AIDS2014 Global Village. Based on the results of the conference, the newsletter "The Chronicle of EWNA Participation in the 20th International AIDS Conference (AIDS 2014), 20-25 July 2014, Melbourne, Australia" was developed and distributed. In 2014, EWNA representatives participated in the development of a UNAIDS report "Violence against Women and HIV". In WHO consultation they participated in the development of report on setting priorities for the revision of the guidelines on Sexual and Reproductive Health of women living with HIV.

2. VISION AND MISSION OF THE ORGANIZATION

Eurasian Women's Network on AIDS is a network of women leaders who advocate for the rights of women living with and vulnerable to HIV in the EECA region. These rights are related to access to health care services, including reproductive health, the elimination of violence against women and the right to be involved in political and public debate on which they depend on for their lives and health.

VISION is

To be a powerful regional social movement of women and to put women leadership at the center of AIDS response in the EECA region.

MISSION is

To improve the quality of life of women living with HIV and women affected by HIV in Eastern Europe and Central Asia (EECA).

3. OVERVIEW OF THE SITUATION

In low- and middle-income countries, women account for 52% of all new HIV infections¹. Globally, young women aged 15 to 24 years are twice as likely to be HIV-positive as young men. Every third woman experiences violence from her sexual partner, which increases women's risk of HIV infection by 50%. Women from key population groups are particularly vulnerable to HIV and are at greater risk of experiencing violence. In Kazakhstan, Uzbekistan, Kyrgyzstan, Belarus, and Ukraine, HIV prevalence among women who inject drugs is higher than among men who inject drugs². Many women who use drugs also become sex workers (62% in Kyrgyzstan and 84% in Azerbaijan)³. In many EECA countries, very few prevention programs are in place to address the needs of women.

Despite targets in the European Action Plan for HIV/AIDS 2012-2015, which state that "all Member States shall ensure equal access of all persons to services related to HIV and related health services, regardless of gender and age," the importance of equal access to such services, regardless of sex or age, is seldom mentioned in policy documents and/or strategic plans at the national level.

Over the past decade, the interrelation of the issues of gender-based violence, sexual and reproductive health and rights and women's vulnerability to HIV is becoming increasingly recognized both by community activists and world political leaders. The goals of ending the AIDS epidemic and eliminating violence against women go hand in hand, and both goals shall be considered in the post-2015 agenda of sustainable development. This program shall give an opportunity for all women and girls to reach their full potential, without the threat of violence, risk of HIV infection or violation of their sexual and/or reproductive rights (UNAIDS.Unite with women Unite against violence. 2014).

¹ UNAIDS, Global AIDS Report. 2013

² UNAIDS, The Gap Report. 2014, p.106

³ UNAIDS, The Gap Report. 2014, p.109

4. GOAL, INTERIM RESULTS, AND OBJECTIVES

In November 2014, with technical and financial support of UNDP and UNFPA, a meeting on Strategic Planning of EWNA for 2015–2020 was held. Based on the achievements of EWNA in 2013, the activities of the organization in 2014, and the review of the situation, the participants of EWNA identified the following goals, intermediate results, and objectives, which are reflected in Figure 1 and are described in detail below. The hierarchy of the results and indicators is shown in Annex 1.

GOAL FOR 2020:

Improved access to rights-based public health services for women affected by HIV in EECA, including equal access to gender-oriented services on sexual and reproductive health and elimination of violence.

INTERIM RESULTS AND PRIORITY OBJECTIVES FOR 2017

To achieve this goal, EWNA defined interim results for 2017, which are expected to be achieved by meeting the goals below.

INTERIM RESULT 1: To develop EWNA potential to strengthen cooperation with key stakeholders in order to promote equal access of women affected by HIV in the EECA region to sexual and reproductive health-care services.

OBJECTIVE 1.1. To improve the professional level of leading activists to advocate to decision-makers to promote equal access for women affected by HIV to SRH services.

In order to improve the professional level of EWNA members, EWNA will be conducting training sessions at least once per year on the following topics: "New Funding Model of GF and Entry of Women in the CCM," "high-level Advocacy", "International Recommendations and Guidelines on SRH and HIV," and other related topics.

In order to attract broader attention to the issue of equal access of women living by HIV to HIV and SRH services, in 2015 EWNA plans to collect and analyze information on existing studies and surveys, including the study of the "Stigma Index" conducted in the EECA region for SRH and HIV. In addition, EWNA intends to study international recommendations and guidelines, which are relevant to EECA countries. The data obtained will be submitted to key stakeholders, including decision makers at both national and international levels. To ensure a constructive dialogue with partners on the results of the analysis, EWNA plans to hold a roundtable at the national level, in no less than five countries of the region.

In 2016, EWNA plans to conduct a gap analysis of the legal documents related to SRH and HIV. According to the results of the analysis, reports and recommendations will be prepared for decision makers at national, regional and international levels. Reports and results of the study will be published and distributed between all key stakeholders and partners.

In order to include the recommendations made during the course of the research into national policies on HIV and AIDS and SRH, women leaders must be involved, and they must have the opportunity to participate effectively in the work of relevant national committees, structures and working groups on HIV/AIDS and SRH. To this end, key committees that shape policies on HIV and AIDS and SRH at national, regional and international levels will be mapped. Following this, committees in which female

leaders play an important role will be identified, and formal requests will be sent to the appropriate bodies to include EWNA participants in these committees.

EWNA seeks to attract broader attention to the issue of equal access of women affected by HIV to services for HIV and SRH in the EECA region. EWNA plans to disseminate newsletters and conduct roundtables, press conferences, and community actions on a regular basis linked to memorable dates, for example, World AIDS Day, Human Rights Day, International Women's Day, Memorial Day for people who have died of AIDS, and the 16 Days of Activism against Gender-Based Violence Campaign.

Representatives of EWNA will also be attending regional and international meetings, conferences, and events in order to represent the interests of women affected by HIV in the EECA region and to place the issue of equal access of women to public health services on the regional and international agenda.

OBJECTIVE 1.2. To create and ensure proper functioning of the regional platform for the exchange of best practices and expertise that exists in the EECA in the area of SRH and HIV.

In order to facilitate the exchange of experiences and best practices, EWNA plans to create and regularly update a Russian-language online content resource that would incorporate infographics and allow for webinars, surveys and other interactive activities to be offered for the resource users.

Under this objective, EWNA also plans to collect and analyze best practices to improve access to SRH services for women affected by HIV in EECA countries. Best practices will include topics on advocacy and the prevention of violence. With the support of a consultant, a structure describing the best practices will be developed, descriptions will be collected and analyzed, and an overview of best practices in EECA will be prepared and distributed among key stakeholders.

EWNA will also organize exchange visits between EWNA participants to exchange the EECA experience of women affected by HIV in regard to equal access to public health services. At least five exchange visits will be organized annually with the involvement of decision-makers.

OBJECTIVE 1.3. To register and ensure proper functioning of EWNA

In order to ensure that EWNA functions properly, official registration of the Network will be pursued and all of the supporting documents will be obtained. Annual meetings of EWNA participants and the EWNA Board of Directors will also be scheduled to provide strategic management of the organization.

Furthermore, to ensure the implementation of activities under the approved strategic plan for 2015 – 2020, a Secretariat will be established under the supervision of the EWNA Coordinator, who will be also responsible for the development of project proposals to raise funds for the activities of the Network.

EWNA will also work to ensure operation of the EWNA Focal Points in order to facilitate the implementation of planned activities at the country level.

INTERIM RESULT 2: To strengthen opposition to violence against women affected by HIV in the EECA region.

OBJECTIVE 2.1. Develop the evidence base: the collection and analysis of discriminatory practices, cases of violence and best practices to prevent them.

In order to accomplish this goal, EWNA plans to develop a tool for gathering evidence in cases of violence among women affected by HIV and for collecting and analyzing discriminatory practices. The tool will be finalized in the framework of regional consultations with women activists, representatives of government agencies and regional and international organizations, including representatives of UN agencies.

Furthermore, in order to engage women affected by HIV in EECA countries in the collection of evidence, a regional campaign with the same name, slogans and messages will be developed by 2015. This regional campaign is planned to be launched in 2016 in 11 EECA countries. The evidence base in 11 countries of the EECA region will be collected during 2016, based on the developed tool, both by women themselves, and with the help of EWNA Focal Point.

On the basis of the evidence collected a report and recommendations will be developed and will be presented at the national, regional, and international levels in 2017.

OBJECTIVE 2.2. A dialogue with decision-makers about the need to prevent incidents of violence against women affected by HIV based on the evidence base

Under this objective, in 2015 EWNA plans to collect and analyze best practices for the prevention of violence against women affected by HIV. With the support of a consultant, a structure describing the best practices will be developed, the descriptions will be collected and analyzed, and an overview of best practices in EECA will be prepared and distributed among key stakeholders.

It is planned that dialogue will be conducted with decision-makers in 2016 and in 2017. Dialogue will be facilitated through the organization of round tables and press conferences with the participation of decision-makers and media coverage in 11 countries of EECA. It will be supported by the use of evidence gathered in 2016.

ANNEX 1. HIERARCHY OF THE RESULTS OF THE EURASIAN WOMEN AIDS NETWORK

<p>EWNA GOAL for 2020: Improved access to rights-based public health services for women affected by HIV in EECA, including equal access to gender-oriented services on sexual and reproductive health and elimination of violence. <i>Indicator: № and % of the countries that have adopted and implemented protocols on SRH, family planning and HIV, based on standards on human rights, non-discrimination and absence of violence (in no less than ten EECA countries (over 50%))</i></p>	
Hierarchy of the Results	Indicators
INTERIM RESULT 1: To develop EWNA potential to strengthen collaboration with key stakeholders in order to promote equal access of women affected by HIV in the EECA region to sexual and reproductive health-care services.	<p>1) Number and percentage of the countries in which data and the WHO guidelines on HIV and SRH have been provided to be included in national policies;</p> <p>2) Percentage of offers from EWNA, which have been adopted by key committees * at the national, regional, and international levels.</p>
<i>OBJECTIVE 1.1. To improve the professional level of leading activists to advocate the decision-makers to promote equal access of women affected by HIV to SRH services.</i>	<p>1) An advocacy package on SRH and HIV has been developed;</p> <p>2) № and % of members of EWNA included in the working groups to develop protocols for SRH and HIV at the national and regional levels;</p> <p>3) Number of decision-makers involved in round tables and conferences.</p>
<i>OBJECTIVE 1.2. To create and ensure proper functioning of the regional platform for the exchange of best practices and expertise that exists in the EECA in the area of SRH and HIV.</i>	<p>1) Number and percentage of countries that have analyzed best practices;</p> <p>1) Number and percentage of countries participating in the exchange of experience.</p>
<i>OBJECTIVE 1.3. To register and ensure proper functioning of EWNA</i>	<p>1) Documents for registration have been received;</p> <p>2) Number and percentage of project proposals provided by EWNA and accepted by donors</p>
INTERIM RESULT 2: To strengthen the opposition to violence against women affected by HIV in the EECA region.	<i>Number and percentage of countries that applied and / or completed the legislative regulation in accordance with the recommendations based on the evidence collected by EWNA</i>
<i>OBJECTIVE 2.1. Collect the evidence base: the collection and analysis of discriminatory practices, cases of violence and best practices to prevent them.</i>	Number of countries that have collected discriminatory practices, cases of violence, and best practices
<i>OBJECTIVE 2.2. A dialogue with decision-makers about the need to prevent violence against women affected by HIV based on the evidence base</i>	Decision-makers have received evidence on cases of violence and its prevention for decision-making