A report on
WOMEN’S LEADERSHIP,
ORGANISING AND ACTIVISM
from AIDS 2016

OUR LIVES! OUR TIME!
POWERED BY
OUR SOLUTIONS!
Access Equity Rights Now

The XIII International AIDS Conference which was held in Durban in the year 2000 had as its theme ‘Breaking the Silence’. Central to both the theme and the HIV response at the time was the lack of access to treatment faced by the vast majority of people living with HIV, and especially in Southern Africa, the epicentre of the global AIDS epidemic.

Treatment activism, led by the South African Treatment Action Campaign, was the rallying cry for community engagement at Durban 2000, and the conference marked a watershed in terms of the informal activist and community spaces that were born out of that call to action.

Returning to Durban sixteen years later, under the banner of ‘Access Equity Rights Now’, the space for parallel community organising at AIDS conferences – be they national, regional or international – is well established. Yet globally,
activist spaces are being silenced as a result of increasing conservatism, decreasing funding for civil society, and the pulling away of international and bilateral agencies from the HIV response, with responsibility for national epidemics being shifted to domestic governments, especially in middle income countries, where the vast majority of people living with HIV live.

And in stark contrast to the 2000 conference, while equitable access to life-saving treatment remains a global – as well as Southern African – priority, the call from the community is that we cannot ‘treat ourselves out of the epidemic’. At AIDS 2016, activists demanded a response that is more than just biomedical: one that protects, respects and promotes human rights; one that upholds the promise of the Sustainable Development Goals to ‘leave no-one behind’; one that demands access not only to HIV medicines, but also to HIV prevention technologies, to sexual and reproductive health and rights, to quality rights-based services, to prevention and treatment for co-infections and non-communicable diseases; one that addresses inequality, violence, stigma and discrimination in all its forms; one that demands that all people living with HIV – and those most impacted by the epidemic – are in a position to live and love in safety, dignity and well-being.

We are in a unique moment where we see political commitment to women, girls, gender equality, and HIV in the 2016 Political Declaration on HIV/AIDS at the United Nations and as a cornerstone of emerging strategies, initiatives, and programmes. There are tools in the pipeline that women and young women could use to prevent HIV acquisition, and the world is paying unprecedented attention to the public health emergency young women and adolescent girls face. AIDS 2016 was a vital opportunity to move this commitment into action through engaging and bringing together the science, the policies, and the programmes to get us to a world where every woman, young or old, can realise her potential.

In this context, the Women’s Networking Zone (WNZ) was once again an essential space, to foster collective women’s organising and create a space for advocacy for women’s rights. In this conference, there was much discussion about women, especially young women and girls, but the space for women to set their own priorities, articulate their own solutions and implement their own agendas remains far too small and difficult to access. The WNZ plays a vital role in providing a space for all women and girls in all of our diversity to come together, to learn, share and innovate together.

In this report, we share an overview of the dynamic and engaging programme and outreach the WNZ brought to AIDS 2016. It is time for us to join together, so that we are creating collective action that is greater, more durable, and more transformative than any one effort on its own, and moving one step closer to embracing the theme of Access Equity Rights Now.

If you want to go fast, go alone.
If you want to go far, go together.
[African Proverb]
Born out of women’s parallel organising at the Durban conference in 2000, the Women’s Networking Zone (WNZ) is a community-focused forum running parallel to international and regional AIDS conferences, among other policy fora.

We looked to the return to Durban for AIDS 2016 as a key opportunity to celebrate and re-galvanize the women’s rights and HIV movement that has mobilised around the WNZ over the last decade and a half.

Over the last 16 years, the WNZ has become a globally recognised and valued space for democratic and inclusive women’s parallel organising, and for bringing together local, regional, and global perspectives, as well as for bridging the gender, human rights, HIV, and sexual and reproductive health and rights communities. The WNZ@AIDS 2016, under the theme of OUR lives! OUR time! Powered by OUR solutions!, created an opportunity to unite women locally, regionally and globally, to mark the advances made through women’s collective organising since the year 2000, and to platform a forward looking agenda of innovative community-building and advocacy, in order to:

- Create a vibrant, inclusive space to ensure the knowledge, expertise, and opportunities of these conferences are accessible to, and benefit from, engagements of women from around the globe and the regional Southern Africa community, many of whom would otherwise be excluded, due to prohibitive registration costs
- Spotlight and celebrate the diversity of women and girls, and showcase community-led and –driven innovation
- Advance a comprehensive, and inclusive women’s and human rights agenda
- Ensure women’s priorities and expertise are visible
- Champion the leadership of women living with HIV, particularly young women;
- Provide a platform to engage community members, researchers, donors and policy makers in cross-community dialogue and exchange, deepen our learning and analysis, and strengthen local and global partnerships;
- Highlight structural factors, such as poverty, sexism, racism, and gender-based violence, as a cause and consequence of HIV; women’s sexual and reproductive health and rights; female-controlled prevention tools; and the rights of women in all their diversities and across their life cycles, who face multiple forms of gender-based violence.

We do not tell our stories to be victims – we share our stories so that we know where we’ve been, and where we need to go. [Lillian Mworeko]
The WNZ@AIDS 2016 featured a full programme of panel sessions, workshops, and discussions. An open call for proposals was issued, with 53 proposals received.

Proposals were evaluated by a review committee formed of steering committee members, who evaluated proposals for quality, interest and to ensure diversity across the WNZ programme. 40 sessions were included in the final WNZ programme.

Based on the programmed sessions for which proposals were received and are available, there was significant breadth and diversity in the WNZ programme. They included nine networking or structured dialogue sessions, three panel discussions, five workshops, three showcase or performance arts sessions, and three critical dialogue sessions.

This report features session reports from key events held at the Women’s Networking Zone; an overview of the Young Women’s Leadership Initiative at AIDS 2016; the #WhatWomenWant campaign, which took the WNZ principle of women’s organising online and around the world; and finally a look ahead to AIDS 2018.

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In 2000, at the first International AIDS Conference (IAC) in Durban, a small group of women’s rights advocates found that there was no place for women to meet. This led to Women at Durban 2000, Women at Barcelona 2002, and Women at Bangkok 2004. ATHENA grew out this parallel organizing and in 2006, with the Blueprint Coalition, held the first Women’s Networking Zone, in Toronto.

Women’s Networking Zones are unique spaces for women and gender advocates – in all our diversity – to share experiences, showcase work, move the agenda and create new alliances between those otherwise unlikely to meet. We thank all collaborators and partners in this movement; one that places women and girls at the center of the HIV response and has contributed to the gains made to end AIDS. Mujeres adelante!

In 2008, at AIDS2008 in Mexico City, the Blueprint Coalition, held the first Women’s Networking Zone, in Toronto.

2006: Launch of first WNZ. 12 statements of ICW, the Blueprint Coalition’s manifesto and the Barcelona Bill of Rights frame the week. Advocacy centers around the intersectionality of women’s rights – from motherhood, research and technology advances to having good sex.

2008: Women’s voices take center stage. Women from across the world, Europe and Central Asia mobilize and network. Advocates and researchers establish that an absence of evidence does not equal to an absence when considering the women-shaped gap in the research agenda.

2010: Young women’s leadership initiative YWLI and ATHENA launches Community Innovation: achieving SRHR for all women through the YWLI. Women between scientific and women’s rights communities. Zena Stein traces the microbicide journey back to her call in 1990 for HIV prevention methods that women can use. Advocates ask “Where the hell is the gel?”

2011: A hub for local and pan-African women, and young women through the YWLI. Women leading the way: strengthening women roles in the HIV response. Women’s rights here, right now! Launch of Young Women’s Leadership Initiative YWLI and ATHENA builds bridges between scientific and women’s rights communities. Zena Stein traces the microbicide journey back to her call in 1990 for HIV prevention methods that women can use. Advocates ask “Where the hell is the gel?”

2011: Ambitious and vibrant WNZ, bringing into focus how the issues affecting women of color in USA relate to issues facing women and girls globally. Priorities include: criminalization; unanswered questions on hormonal contraception and HIV risk; and reproductive justice for women everywhere.

2012: The Blueprint Coalition’s manifesto and the Barcelona Bill of Rights frame the week. Advocacy centers around the intersectionality of women’s rights – from motherhood, research and technology advances to having good sex.

2013: As we look to AIDS2016 and the movement to end AIDS, we have powerful lessons for what it means and takes to put women and girls at the center of all our diversity.

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Thank you to UNIFEM and UN Women for supporting WNZ and funding The Herstory of the WNZ.
In Women’s Words
What women say about the WNZ

It’s very important [for women to be represented] because previously women were under-represented in Africa as a whole and now it is their time to shine. They have to stand up on their own, get out of their comfort zone.

Women are very well-informed and very well equipped on what they want as their rights.

As a woman my priorities would be to first educate the girl child, and educate the women. Improve literacy, especially around issues of health HIV/AIDS and TB and be able to get more women involved in activities as well and be more advocates of their own health and rights as well. I would like to see women taking over the reins to prevent violence, prevent discrimination, especially gender-based violence related to HIV and TB.

Having a conference [the WNZ] where issues are tailored specifically towards women would be a powerful tool to give them a voice in the greater sense of the word, where women can actually be the driving factor and the driving force from platforms like conferences to actually put forward the issues that need to be addressed at larger conferences. It would give them even a way to actually get priorities, to look at issues that are normally sidelined. To look at issues that are pertinent to women that women need to put across to be addressed and not issues that are decided for women.

I think for me and other girls and other women, we really want education, access to education, access to equal rights like any other person.
I think that would be a wonderful thing to do, when women come together to share their priorities and experiences.

I’m glad they [the WNZ] are fighting for women’s rights and to end discrimination.

I do think [the WNZ] is important but the work is not here, the work is outside. You need to come here, gather as much information as you can, listen to different stories from different people, take everything you can, but go back home and implement. I think [the WNZ] is very educational, it will help women and everyone basically to deal with issues better.

This [the WNZ] is very important and it’s very key because it empowers women in terms of how to target those issues and also taking some of those things they have learned from women globally across to their communities. Taking the information back to women in the communities for women who don’t have the opportunity to attend such conferences.
It is very valuable, because for starters, coming from a women’s organisation, that was the first thing I was looking for. It was catchy to say Women’s Networking Zone, then I knew that anything that I would want to learn or share I would know where to go to, and this has been always the place. I think I have spent more than seventy percent of my time for the whole of this week here. The impact that it has is the ability for it to bring in different experiences. And the other critical thing is bringing a face and a voice to the problems we are having. The important part is that women are here and they are telling their stories, which to me always has impact and makes it real.

The Women’s Networking Zone has a lot of value. It’s a safe space for women to address their issues, discuss their issues, so to us it is a better space where we address the issues of our sexual health and rights. To us it’s the best space for women and it’s a perfect space. It has a lot of impact because many women have been able to use this free space, without paying any money, to hold their focus group discussions, sessions, community dialogues on what they have done, what has gone well at the country level and what they have not been able to achieve at the country levels. To share their experiences with others, learn from other organisations’ best practices and also share their challenges and get feedback.

I think [the WNZ] is a safe space and the value is in creating a safe space for women. One thing that I like is that it doesn’t discriminate, it just welcomes you and is a safe space whereby we can talk about issues that we women face in our everyday lives. For me it’s my second time to be in the Women’s Networking Zone so the impact is so great in such a way that when I’m in my community and I see the women are experiencing this and that I can be able to talk to them about their issues and they open up to me because I know now how to handle these things and how to refer them to get some greater help.
Women’s experience, expertise and agency: Addressing gender-related and structural barriers to human rights of women living with HIV with regard to care, treatment and support

The Global Treatment Access Review of women living with HIV was conducted by ATHENA Network, AVAC and Salamander Trust, with UN Women, and was presented in the Women’s Networking Zone for 90 minutes on 19th July. The presenters were Sophie Dilmitis and Alice Welbourn from Salamander Trust, Dorothy Namutamba from ICW East Africa, and Deirdre Grant from AVAC, with Nazneen Damji of UN Women as moderator. About 20 women were in the audience. At the session, slides were presented which offered an overview of this extensive review. A four-page document was also released. This outlines the review methodology, findings and some key recommendations in a six-point plan. Both can be found online at [http://salamandertrust.net/project/global-treatment-access-review-women-living-hiv/]

ATHENA Network, AVAC and Salamander Trust have worked with women living with HIV from around the world, with support from UN Women, to conduct this global treatment access review for women living with HIV. The review was shaped from the outset by a Global Reference Group of women living with HIV.

The full report from this review, the largest to date, will be released later this year. It is an urgent must-read, since the findings have some major implications for those considering the real life experiences of women living with HIV in relation to treatment access, care and support - and long-term adherence, in the context of 90-90-90.

There are some key barriers facing women – and some key solutions.
With many thanks to our global reference group of women living with HIV in all their diversities from around the world.

Six-point plan for action:

1. **Human-Rights**: Define, implement and evaluate access in a rights-based framework that encompasses availability, affordability, acceptability and quality of care, to address gender-related social and structural barriers. This must include rights-based, voluntary and informed choice, with real options for women, so they can decide if and when to start, and how long to stay on treatment.

2. **Gender**: Engage in more analysis of treatment access barriers with gender at the centre, recognising the intersectionality with other structural factors.

3. **Diversity**: Fill the data gaps that exist across the treatment cascade for women in all their diversities. Investigate, innovate and implement the findings of research to fill the existing gaps related to barriers and facilitators of women’s access to ART.

4. **Multiple Levels**: Ensure that care and treatment packages include basic needs and account for gender-specific barriers at individual, household and community levels.

5. **Gender-based Community Engagement**: Incorporate a gender analysis into expansion of support for community-based service delivery – a core component of UNAIDS’ Fast Track goals.

6. **Peer-led Involvement**: Harness the power and leadership of peer-led and -governed analyses of treatment access as part of a participatory research, implementation and evaluation framework.
In 2015, ICWEA conducted a research study on SRHR violations experienced by women living with HIV. The study revealed that women living with HIV experience a wide range of SRHR violations in clinical settings, from misinformation and mistreatment or abuse when seeking reproductive health services, to coerced and forced sterilisation. Further, the study established that SRHR violations also occurred in homes and communities, in the forms of restricted mobility to access care; gender-based violence; abandonment; limited decision-making on reproduction and use of family planning; and forced/coerced termination of pregnancy. This must change!

Based on the research study and related advocacy work, ICWEA developed a Toolkit for researchers, organisations and networks of women living with HIV, which provides background information on the linkages between HIV and SRHR violations, including coerced and forced sterilisation; describes ICWEA’s research and advocacy work; and; presents concrete lessons learnt and best practices for replication.

The toolkit was officially launched in the Women’s Networking Zone at AIDS 2016 in Durban. A panel including the ICWEA programmes manager, the communications officer and one of the young women who participated in the research, highlighted their experiences in conducting the research, supporting women who experienced SRHR violations and their evidence-based advocacy work. The session was attended by approximately 25 people. ICWEA was recognised for the great work, as illustrated by one of the participants:

…This is exactly what I have been looking for. It is good that I attended this session as I have been assigned to provide technical guidance and support to a similar research in Swaziland…

Following the Toolkit launch, a March against SRHR violations took place where partners from all walks of life participated and showed solidarity and commitment to continue advocating and calling for the END of SRHR violations.


My Body My choice! My Rules!
Launch of the ICWEA Toolkit on sexual reproductive health and rights (SRHR) violations research and advocacy

ICW Eastern Africa, Stop AIDS Now! By Nienke Westerhof

A report on women’s leadership, organising and activism from AIDS 2016
Experiences in implementing gender transformative approaches to advocate against EARLY & CHILD MARRIAGES: THE CASE IN MALAWI

SAT held a session exploring gender transformative approaches to addressing child marriage. Susan Kaunda presented on SAT’s use of gender responsive programming to achieve gender transformation by addressing the systems and structures that drive gender inequalities.

This includes community advocacy to address and change social norms around traditional ceremonies, menstrual stigma, high rates of school dropout amongst adolescent girls, forced sex after puberty and sexual exploitation by adults in positions of authority. These norms and practices among others collectively underpin and drive child marriage.

A young woman advocate, who had worked with the programme, highlighted the need for advocacy within the community, saying:

...As young people we have been doing advocacy on child marriage, both at the policy level, but we also know it is really important to advocate with the community...

This was emphasised by Kaunda, who stressed that policy change is not enough to really achieve change on an issue, such as child marriage, if communities are not also supported to change. The gender transformative approach SAT adopts works with and mobilises families and communities, as well as advocating with authority figures at local and national levels. The process involves utilising a problem and socialisation analysis to understand what drives child marriages and involving the community in identifying and strategising to address these social norms.
OUR AGENCY, OUR SOLUTION:
Women’s access to healthcare
AIDS Legal Network (ALN), Lowveld LGBTI Group, Asiphileni Peer Educators

By Sophie Strachan

What must it be like for a young trans women attending health services/a young lesbian who is pregnant?

What is it that enables and allows workers to continue to discriminate us?

A nurse in the audience described the professional principles nurses are expected to abide by when working (which basically is setting aside prejudices) but that these aren’t always practiced – when this is the case it is people’s own views on gender and orientation that emerge and when this leads to judgment against identities or behaviours that fall out of ‘socially acceptable’ norms it facilitates barriers to LGBTQI youth accessing comprehensive SRHR with a human rights approach.

This was challenged by the audience pointing out that the stigma and discrimination already started before you reach the nurse. It happens at reception or whilst you’re sitting in the waiting area. Androgynous presentation can make a young girl vulnerable to abuse.

Healthcare staff are not able to have gendered appropriate conversations that enables a safe environment as despite presenting as a lesbian or trans youth they are making derogatory comments about ‘needing a penis to become pregnant’ and that the women ‘must have some problem for not liking a penis’.

Other issues that were discussed included discrimination against people living with HIV. In particular, the attitude that healthcare staff can have, thinking it is appropriate that they ask the patient how they became positive. This leads to increased vulnerability in that moment for the individual, who feels disempowered, and there is a lack of support in place for the patient to report that behaviour from staff.
WNZ DIARY

As a lead partner in the Women’s Networking Zone at Durban, AIDS Legal Network team members played a core role in womaning the WNZ, and so were able to be present for many sessions. The following is their WNZ diary...

MONDAY, 18 JULY 2016

VOICE to FACTS to RINGS: And what’s next
[11:00-12:30, Panel Discussion] – AVAC
The vaginal ring is seen as an additional option for women to protect themselves from HIV, but it is not 100%, it is 61% for women older than 25 years. There has been research done to make sure that it works; it has been done in most African countries where it was discovered that it is effective if used constantly. There were concerns raised by women participating about the fact that although it will be an option for women to protect themselves, if messages say this protects from (as compared to reduces the risk of) HIV acquisition, women will stop using condoms (hence, it is not really another option for prevention). There were also questions about side effects, and it was said that there are side effects, but they are busy looking at ways of treating, busy with research looking on how to deal with these. Despite the concerns raised, most of the women participating in the session, were excited that there is another option for women’s HIV prevention; and it was suggested that it is time for these options to be more accessible and available to women.

Women who use drugs: Taking a place in the HIV movement
The specific realities, risks and needs of women who use drugs were as much at the centre of debate at this session, as the dire need for the HIV movement to truly include women in all their diversity – both by commitment and action. As women living with HIV, we are using drugs and having very specific challenges, including stigma, criminalisation and even abuse. We can, therefore, not stand one side (not support when women who use drugs for other reasons and experience the same challenges); said by ICW. One should rather work around the choices people make and see how one can make prevention services accessible to all stigmatised and discriminated against groups; said by participant in that session. Prevention strategies focusing on ‘don’t do it’, as is too often the case in South Africa, don’t work and just drive these issues underground; another participant stated.
Women and HIV in armed conflicts
[16:30-17:30, Panel Discussion]
– Eurasian Network on Women and HIV
The session explored the realities of and responses to women and HIV in armed conflicts, highlighting amongst other the interconnectedness of women’s realities, risks and needs across our diversity. Said by participant: I realise now how the realities of women are all connected, East to West/North to South, women being displaced, because of war. Women who use drugs, do sex work, have non-conforming sexual relationships, and make reproductive decisions – all of us experience abuse in one way or another, because of our shared womanhood. Women’s needs for safety, peace and access to life saving drugs, for example, is universally compromised.

Dolls of Hope: Breaking the stigma and silence on HIV
[17:30-18:30, Skills Building Session]
– Drew University of Medicine and Science
Focusing on innovative ways to address the stigma and silence on HIV, the session highlighted that in the olden days, women used to make things together and at that time these spaces were also used to talk to younger women about different issues – a participant remembered. Nowadays, we do not sit and talk with our children anymore and we do need to spend more time with them to talk about issues. The session used the space to produce a ‘doll of hope’; raising the question if this much needed created space of discourse among women (and between generations) on particular topics, issues, realities, needs, challenges and strategies to overcome these, should produce a gendered object, such as a ‘doll’.

Thinking Autonomy: Pathways to feminist organising
[12:45-13:45, Panel Discussion]
– Coalition of African Lesbians
The session highlighted the overall lack of recognition of women’s access to their right of agency over their bodies and lives. Examples brought out included termination of pregnancy, sexuality and gender. Autonomy lies at the core of all these struggles faced by women; a participant concluded.

TUESDAY, 19 JULY 2016

Filling the gaps in adolescent SRHR
[15:15-16:15, Dialogue]
– What Works Association
The session underscored the need for young women to be given a space where they can speak about their SRHR needs; whilst at the same time become more upfront about their sexual and reproductive health needs and rights. Said by a participant, it is not only about empowering young women, but making the healthcare more accessible to young women, because when they go to access healthcare, they are asked so many questions – which may be one of the reasons they don’t go to the clinics for treatment.
**Sex workers speak: How we work and live around the laws and what we do to change them**

**[16:30-17:30, Panel Discussion] – Scarlet Alliance**

Sex workers from Japan, Australia, Sudan and South Africa shared their life and work experiences, highlighting the various forms of violence and abuse, due to amongst others, laws criminalising sex work and sex workers, including immigration laws exposing sex workers to deportation; and police brutality without limited to no protection by the law. Celebrating the progress made over the years from where we started to where we are now, sex workers also shared how things slowly change with police assisting when people in the community were throwing things at them while they were working on the street (Sudan). A sex worker said: doing sex work helped me with my dreams to go and study, and support me throughout my studies.

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**WEDNESDAY, 20 JULY 2016**

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**My Body, My Choice! (*except for sex workers): Feminist Sex Workers and their fight for decriminalisation**

**[11:00-12:30, Panel Discussion] – SWEAT**

Focussing on sex workers’ rights and needs for decriminalisation of sex work and sex workers, the session shared the impact of failing to decriminalise sex work on sex workers’ daily realities and risks – ranging from the risks of police arrests and intimidation to communities’ reactions and assaults and carrying condoms used as ‘evidence’ to arrest sex workers in the region. During the session, sex workers were harassed by Doctors for Life protesting outside the conference venue against the rights of sex workers, which ended this session before its time, and led to supporting direct actions for sex workers’ rights outside the conference venue.

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**Towards an updated, adaptable and implementable People Living with HIV (PLHIV) Stigma Index: What’s needed and how we get there**

**[14:00-15:00, Skills Building Session] – Population Council**

The session underscored yet once again that people continue to die of HIV, not necessarily due to lack of treatment, but instead due to high levels of stigma prevailing – at a home, community and clinic level – which amongst others, deter people from accessing available treatment, care and support services. Recognising this, there is an urgent need to address the stigma as much as the lack of treatment in some areas. Participants commented that access to safe treatment depends on the areas, as in many areas people, especially women, are still struggling to end discrimination and to access safe and non-judgemental services. One woman with HIV asked where are the locations where the stigma is decreasing, ‘so I can move there and experience that and not be stigmatised anymore’. 
We are not criminals: The impact of HIV criminalisation on women and girls
[16:30-17:30, Dialogue] – HIV Justice Worldwide

Looking at the persistent adverse impact of HIV criminalisation laws on women and the increasing number of countries introducing criminal laws to this effect, ICW cautioned against women’s HIV disclosure, by women, especially in countries where there are HIV criminalisation law, and its potential legal repercussion against women living with HIV. It should be a woman’s choice for her to decide what she wants to do and who and when she wants to disclose her HIV status to – and not for the law to make these decisions: said by woman participant.

THURSDAY, 21 JULY 2016

Knowing my human rights: Learning about reproductive justice and how to advocate for it
[14:00-15:00, Skills Building Session] – SisterLove

This session focussed on how women’s issues are interconnected and highlighted the various intersections – in that all of the realities, risks and needs one woman experiences is intrinsically connected to the issues of other women. The exercise brought out the intersectionality of women and their lives. A participant summarised: we are not one-dimensional, we consist of parts and these parts (race, gender, etc.) are connected with one another to make up the totality of our lives.

Understanding the Global Fund
[17:30-18:30, Dialogue] – W4GF

Introducing the Global Fund New Fund Model for Women and Human Rights, the session’s participants acknowledged the challenges remaining in implementing this new process to affect ‘change’ at a community level and within the response to women and HIV. Although informative, as many women and their organisations at country level do not have the ‘know how’ of the GF funding schemes or how to access them, participants commented that the available funding still goes to organisations without change happening where it’s needed; at a community level.

FRIDAY, 22 JULY 2016

Global networking through performance
– German Network on Women and HIV

As a network of women from all walks of life we aim to stay open and accessible to all women. Attending to women’s needs, we embark on a journey of discovering how to critically engage in politics, because as women we too often do not see that we have a role to play or being at the forefront of shaping politics and/or responses to women and HIV in our country, rather than being at the receiving end of politics – the presenter stated. There are many organisations globally who function without ever receiving sufficient funding for trying to change/improve circumstances for women in their communities – yet, change does happen. Too often however, we find organisations that are at the forefront when calls for proposals are made (be it from government structures or outside funders) who pose as bastions and ‘activists’ for communities of women who they have little connections/dealings with or knowledge about; hence women’s needs, realities and risks are not dealt with in these proposals, despite funding coming into the country. A participant summarised: In sessions like these, and several others in the WNZ, one would hope that more women will be persuaded to return to activism out of conviction, paid or unpaid.
Increasing the priority of women in the global response to HIV and related sexual and reproductive health challenges

This question was asked by Azizuyo Brenda, a young empowered woman living with HIV based in Uganda. She works with the International Community of Women living with HIV Eastern Africa (ICWEA) which aims at ending the HIV epidemic amongst women and challenging violations of sexual and reproductive health and rights, including the sterilisation of women living with HIV. She amazed me as we were discussing the priorities of women in Uganda and beyond:

I want a table in our government where women can sit and discuss their priorities, where women can participate in leadership and the power of a woman shine…

People should come out of their perspectives of women being weak; we are strong and energetic in the brain to make a bright today.

[Azizuyo Brenda]

Every woman or girl has a dream: a dream of good life, safety, leadership and family though many have been
denied fulfilling their dreams due to circumstances, such as stigma, gender inequality, culture, economic disempowerment, gender-based violence and lack of leadership, which all make women vulnerable.

Women's Networking Zone: Knowledge is power

The ATHENA Network is one of the global policy partners of Link Up which took interacting, sharing and learning by storm at AIDS 2016. As a Link Up youth advocate, I was lucky enough to join the ATHENA daily activities at the Women's Networking Zone, which was full of inspiring messages on women's sexual and reproductive health, women's response towards HIV, priorities for women and meaningful participation of women in the government. Empowering young women and supporting them to access the rights, which meet their needs, is crucial and this can be done well if they are fully participating in policy spaces. I love to see young women participating and this can be a way of amplifying their voices. Resty Nalwanga a young advocate for sexual and reproductive health rights and HIV said that ‘freedom, good health, gender equality and comprehensive sexuality education, safety and youth friendly services in all is what women want’. Likewise, Ebony Johnson from ATHENA Network said we have to claim for space in the government and take our responsibilities to enjoy our priorities though there are many barriers, such as stigma, violence, discrimination and culture, but we want to see women's empowerment and women-led civil society.

#WhatWomenWant?

The #WhatWomenWant campaign led by ATHENA Network took off at the AIDS 2016, with women champions working in the global village handing out campaign stickers, taking photos and tweeting key messages that pushed for priorities of women, including their rights. Women and girls shared their priorities, such as rights to access sexual and reproductive health services, gender equality, youth leadership, and sustained investment in women.

Women Matter Now

Along with my colleague and young woman leader Allen Kyendikuwa, I joined the pan African women’s HIV, sexual and reproductive health and justice summit which explored the intersections of HIV and SRHR in the lives of Black African women and girls. I noted that stigma, sexual and gender-based violence, cultural norms, and economic empowerment and leadership are essential in tracking women’s vulnerability and rallying young women to track progress towards the Sustainable Development Goal 5 on gender equality.

Women at heart

Working towards the 90-90-90 agenda of UNAIDS, and working to end HIV among young girls, UN Women, PEPFAR and the East African Youth Alliance charted ways that can ensure equal rights and participation of young women in the HIV response. This will be a game changer that will serve to arrest the spread of HIV among this segment of the population.
WNZ@AIDS2016 & #WhatWomenWant

ATHENA launched the #WhatWomenWant campaign with women’s civil society in May 2016 to amplify women’s voices, highlight our realities, and power our solutions.

The campaign mobilises advocates and thought leaders across issues of gender equality, HIV, gender-based violence, women’s rights, and sexual and reproductive health and rights (SRHR) for women in all of our diversity, to expand who is in the conversation and who has access to it.

The WNZ and #WhatWomenWant are perfect partners – both are spaces for women from around the globe and across communities to come together to share with each other, learn from each other, and create stronger platforms by amplifying each other’s voices.

The campaign brought the WNZ to the world, with tweets and other social media sharing from sessions, campaign photos from WNZ participants, and a skills-building session on social media campaigning to support women to develop their own campaigns.

During the AIDS 2016 pre-conference and main conference period 15 to 23 July, 1438 tweets were sent using the #WhatWomenWant hashtag, peaking on 19th July with 456 tweets in one day.

During AIDS 2016, ATHENA launched 4 new blog posts under the Young Feminist Blog Series, and the young women champions were hard at work building the movement in every corner of the conference. Activists, researchers, government leaders and institutional partners working across issues have used #WhatWomenWant to bring attention to key issues for women and girls throughout the week: gender equality; SRHR; the range of HIV prevention tools available and their effectiveness and accessibility for young women; funding gaps in the HIV and AIDS responses; the importance and impact of youth-led initiatives and programme design; and the urgent need to invest in women-led civil society and young women’s leadership.

In the week immediately following the conference, 601 tweets were sent using the hashtag. Top tweeters using the hashtag included Jan Beagle, Deputy Executive Director of UNAIDS, and other gender equality organisations and feminist activists. The list below shows the top ten by activity. In July overall, ATHENA’s Twitter account made 136,000 impressions, with nearly all driving the #WhatWomenWant campaign.
Developed by the Athena Network in 2011 with support from UNAIDS, it’s function has been to support young women’s advocacy and leadership in local, regional and global fora to influence and guide priorities and decisions on HIV, development, SRHR and gender equality. Participants in the YWLI have received support and skills building on translational science, campaign development, network expansion, reproductive health and a myriad of other aspects of health, human rights and leadership development tools. The YWLI has seen tremendous engagement as key support component to regional and global HIV and reproductive health and rights conferences.

Recognising the need for adolescent girls and young women to actively participate and lead in the HIV response, ATHENA has developed an evolving mentorship strategy, which includes key elements of:

- Mentorship and institutional support from ATHENA
- Peer mentorship among young women living with HIV
- Inter-generational mentorship
- Cross-movement mentorship.

The Young Women’s Leadership Initiative (YWLI) is a programme of the ATHENA Network. An ongoing programme of virtual organising and support, ATHENA also implements in-person YWLI’s at international and regional conferences and advocacy platforms, and was pleased to implement a YWLI at AIDS 2016 in partnership with the WNZ.
Through the Young Women’s Leadership Initiative (YWLI), ATHENA has developed spaces and strategies to create and support meaningful engagement in the HIV response, through providing to girls and young women:

- Support to engage in national, regional, and international policy fora
- Opportunities as country focal points to shape, inform and implement in-country project work
- Support to conduct and participate in community dialogues
- Opportunities on global reference groups alongside more experienced women living with HIV activists
- Advocating for and supporting the participation of young women in workshops, side events, panels and ATHENA-led spaces including the Women’s Networking Zone at international conferences.

During the 2016 International AIDS Conference, the YWLI supported young women’s participation in interactive skills building sessions, YWLI Daily Dialogues, Spotlight on Young Women Leaders interviews, Meet the Expert 21

A report on women’s leadership, organising and activism from AIDS 2016

Daily briefings: Let’s talk about it at the Zone!

Each day in the WNZ, ATHENA led informal sessions open to all young women. These briefings are a space to discuss issues, meet other young women, ask and answer questions, build community, and strategise on how to amplify young women’s voice and visibility at AIDS2016. The sessions are also a space to receive mentoring and support. The aim was to provide a mentored, coordinated experience at AIDS 2016 bringing together, creating space for, and promoting dialogue with, young women leaders. Through the sessions, young women were able to meet each other, and the ATHENA and WNZ teams, find out about and become involved in sessions and access support

...Today I just put my dream on paper during the social media training. So far, I learned a lot. I got fired up when I learned more about rights and what is being done. It was motivating to see a princess taking on women and girls’ rights. If she can do it, I can do it too! I’m looking forward to learning more... [Sherrie, YWLI participant]

...I like the strategies that were mentioned in the Link Up Session ‘Seat at the Table’. I like the emphasis on involving young people and not using them. The strategies shared were clear for the way forward and can be used. It was great to have young women share their real impact. Young people must be involved in all aspects of evaluation. It’s an important part of youth ensuring needs are met, best systems are used and to address changes that need to be made... [Emilia, Namibia]

...Being here at AIDS2016, it is all of our task to go back to our communities and share this information. It doesn’t stop with me. It’s important that I mentor other girls. Next time, it doesn’t have to be me here, there will be space created for other young women and girls. I learned how to speak up not just for myself, but for the girls and women in my community. Now I can inform my community about HR, SRHR, HIV. After being trained by ATHENA and Link Up, I have been anxious to speak up to my government about our needs like medication... [Resty, Uganda]

...As young women most of us want to reduce stigma. We want to be independent and have education. Attending community workshops need to happen. So many young women have to travel such long distances to get information. We need to have more day to day learning available... [Zanele, South Africa]
Critical Dialogues, youth leadership sessions and a range of sessions focused on SRHR and gender equality. The YWLI at AIDS 2016 included a number of key strands.

#WhatWomenWant campaign
YWLI participants led the #WhatWomenWant campaign efforts at AIDS 2016, engaging with people across the conference, and Global Village, to tell them about the campaign, hand out stickers, and take campaign photos to share on social media.

What's App group
ATHENA set up a What’s App group for YWLI participants at the conference and following virtually, to connect, share thoughts and ideas, discuss key issues and build networks. In excess of 250 young women from across the globe were connected. The YWLI What’s App group was central to facilitating information sharing, providing a forum for questions, supporting speakers, coordinating session invites and networking. Through the group, young women who were unable to attend were able to view photos, videos, quotes and reactions in real time. It also allowed young women who were not in attendance to share priorities, offer support and build connections with other advocates working in their regions.
When will our lives matter?:
Young women’s leadership workshop and intergenerational dialogue

By Glenda Muzenda

Access Chapter 2, in collaboration with ALN, facilitated a workshop and dialogue for young women, on the Saturday preceding the conference. The dialogue involved young women from communities and women’s organisations from and around Durban.

The event was aimed at pre-conference deliberations with young women for the purpose of highlighting the importance of involvement and active participation of especially young women in the HIV response during and beyond the AIDS 2016 conference. More than 35 participants aged 15-31 took part. Young women were brought into the fold as partners to have equal opportunity to express themselves as leaders in their own right to initiate a dialogue by:

- creating a safe space for young women’s conversation;
- sharing of experiences on SRHR and HIV response;
- facilitating leadership conversations; and
- identifying and developing concrete solutions powered by young women.

Through a series of facilitated discussions, key issues and recommendations emerged. Young women participating in the dialogue...
called for: intergenerational dialogues on SRH, education, economic empowerment and harmful social norms; increased access and engagement of young women through social media to make their voices heard; skills and knowledge sharing between young women activists in local, national, regional and global networks; meaningful involvement of young women in political processes that affect their lives; civil society to invest in young women and girls to build their agency to become champions of change in their communities; targeted interventions to support girls to stay in school, and access to higher education, vocational training opportunities and employment support post-school; and, information, resources and Apps to provide education on HIV, SRH, other issues.
Evaluating and looking ahead

AIDS 2018 in Amsterdam

The Women’s Networking Zone was once again a vibrant, inclusive and dynamic space, hosting a diverse range of sessions and creating a home for women and girls at the International AIDS Conference that facilitated networking and learning across countries, regions and communities.

As feedback from participants demonstrates, this is a valued and valuable aspect of the conference, which would be significantly poorer without it. We look ahead to AIDS 2018, to be hosted in Amsterdam, with determination, passion and expertise to bring the Women’s Networking Zone to the conference. Until the rights, experiences and voices of women and girls take centre stage within the main conference, the WNZ will continue to be an essential and pertinent women-led and defined space and addition to the regional and global discourse on women and HIV.

Presenters who lead sessions in the WNZ are vital partners in the effort to create an engaging, informative and innovative programme that underpins the value of the WNZ. Their contributions were invaluable, and we would like to thank everyone who led or facilitated a session at WNZ@2016, sharing their time, expertise and knowledge to further the collective response of women in all our diversity to women, violence and HIV.

Following the conference, a short survey was shared with all session lead organisers to gather their feedback. Seven responses were received, each representing different sessions led by different organisations (from a total of 40 sessions).

Responses overall were very positive. All respondents rated the application process to host sessions in the WNZ as satisfactory, good or very good, and the WNZ as a venue in the same way. One respondent felt communications with the organisers were very poor, but on average this was rated between satisfactory and good. On-site logistics and audio visual were ranked satisfactory on average, though two session organisers felt these were poor, while one session hosted by UNAIDS, WHO and GCWA on HPV, HIV and cervical cancer moved out of the WNZ to the Sex Workers Zone, who had the more adequate sound system. Despite this logistic challenge, the session was well attended and received, and afforded a unique space for women sharing, learning and organising around issues of leveraging synergies to save women’s lives pertaining to HPV, HIV and cervical cancer.

Respondents were asked what went well in their experience of hosting a session in the WNZ@2016, comments included:

…The energy in the space and the hosting as well as the organisers communication…

…It was open and everyone who was passing could hear a word…

…I think the participants that we did have was very active and took part in the sessions and they were keen to engage and that is what we want in a session, to get engagement, to get participants to talk and discuss. Also the organisers were great in giving us a space at WNZ and we were very grateful for that…

…The community spirit and the unity of the women from the WNZ…

Five of the seven respondents said that no unexpected problems had arisen with their session, but two pointed to challenges with the sound and power point screening facilities, as well as issues with entry to the Global Village in time for morning sessions.
Most were satisfied with the number of people who attended their session, though the challenge of competing with so many other sessions was highlighted; a challenge always experienced in the Global Village given the multiple sessions and activities scheduled parallel. Similarly, most were happy with the variety of people attending their session, though the need to reach out beyond the already converted was highlighted.

We also asked respondents what could have been done differently to improve their experience of leading a session at the WNZ. This provides key learning to be applied for AIDS 2018. Suggestions include: better sound system and digital equipment; earlier organisation of the WNZ; and more flyers and information to encourage people to participate in both the informal and formal spaces of IAS conference spaces.

Looking ahead to AIDS 2018, session organisers told us that what they hope to see from the next International AIDS Conference Women’s Networking Zone is:

…did a great job, the same effort to apply…

…preparations for everything related to the WNZ started early, organisers with previous experience on committees and people held accountable for their actions or non-actions…

…continue to provide a space for women to share information…

…marching – we should mobilise people to join our campaigns…

…I am not sure to be honest, because I did not spend much time at WNZ. I do think a better sound system. Thank you to the WNZ team for giving us a space to present, we really appreciated it and was happy to be there and to have a conversation. The space seemed very active and vibrant and I think from the outside the WNZ looked great. It seemed like great activities were going on and it was buzzing and busy and organised, so well done to the team!!…

…quieter space if possible…

…much of the same unity of spirit. I would also like us to start on planning to organise sponsorship for many of the women who will not be able to ‘hitchhike’ to Amsterdam….
#WhatWomenWant

WE WANT ...

- strategies to achieve gender equality and improve women’s and girls’ health and rights, interlinked and placed at the center of the HIV response.
- sustained investment in women-led civil society and young women’s leadership.
- urgent action to address the HIV epidemic among women, and especially young women, in all our diversity.
- full sexual and reproductive health and rights and the means to realize and enjoy them.
- safety from violence at home, work and school, in the community, and in health settings.
- women-centered and women-led research and innovation.
- a meaningful seat at decision-making tables as well as the resources to create our own.
- to be educated, empowered and equal in all areas of our lives. As girls, young women and women, in all our diversity, we can bring about change, enjoy our full potential and realize our dreams.