

## Executive Summary

Gender audit like any other kind of audit is a tool for assessment and evaluation of its correspondence to definite standards and norms. In case of gender audit it is related to institutionalization of gender equality within organizations including their policies, programs, projects and/or provision of services, structures, proceedings and budgets these organizations are responsible for.

In November 2019 The Cabinet of Ministers of Ukraine adopted **The National Strategy to Fight HIV, Tuberculosis and Hepatitis by 2030** (further on referred to as the Strategy 2030). The development process of such a long-term strategy demanded involvement of civil society organizations to support human rights and gender equality in the process of decision taking especially regarding those issues related to civil society. One of the possibilities for meaningful participation of civil society is a three-year action plan for implementing the Strategy at the same time representing budgeting tool for different funding sources. Previous experience clearly demonstrated problems with coordination that continue prevent effective advocacy activities on behalf of civil society.



Taking all the above mentioned challenges Charitable Organization “Positive Women” applied to support conducting gender audit of the Strategy 2030 to reveal the possibilities for gender-sensitive interventions within the package of services for HIV positive people funded by the inner resources as well as by the Global Fund to Fight AIDS, tuberculosis and malaria (further on referred to as GF) and informing about gender-oriented budget for implementing the three-year action plans. This technical support is aimed to promote the increase of involvement of women who live with HIV as well as women from the key groups in such gender budgeting.

Involvement of communities and civil society is specified as the cross-cutting sphere to put more innovational and synergetic efforts to essentially speed up the overall process in healthcare worldwide.

Ukraine has been working on achieving Sustainable Development Goals, joined Beijing Declaration and the Platform for Action during the 4<sup>th</sup> World Conference on (1995), UN Security Council Resolution related to women, peace and security (UNSCR 1325) and its further resolutions and ratified major international documents related to gender equality and women rights including Convention on the Elimination of Discrimination Against Women (CEDAW) and Optional Protocol. At the regional level Ukrainian membership in the Council of Europe, participation in the activity of the Organization for Security and Cooperation in Europe, Memorandum of Understanding with the Organization for Economic Cooperation and Development, membership with the North Atlantic Treaty Organization and the Association Treaty with the European Council all these promoted efforts to make the national legislative framework compliant with the European and Euro Atlantic norms related to gender equality and human rights.

HIV and AIDS prevention is one of the main and prioritized directions of the state policy in the area of healthcare and social development and the object for international commitments.

According to estimates of WHO/UNAIDS Ukraine remains the region with high level of HIV spread among the countries of Central Europe and Eastern Asia. Situation analysis with HIV and AIDS demonstrates the gaps in the epidemic control: only every second HIV-infected person is aware of their positive status and receives services of health care institutions; there is rather a high percentage of HIV positive results among blood donor, especially among primary blood donors; elimination of mother-to-child transmission is not achieved; there is a more growing epidemic significance of highly stigmatized group of men who practice sex with men. A crucial situation is with the number of untimely medical treated cases of PLHIV and thus late diagnosis of cases with AIDS or combined cases of HIV/TB that leads to a high mortality rate among those affected. All the above mentioned proves the statement about the absence of a comprehensive approach that would combine prevention and treatment programs at the state and regional levels onto a single workable countermeasure system.

Gender peculiarity of the disease spread began drawing attention from the very first years of HIV rate increase. At the same time, there are still problematic areas even today that don't take this specificity into consideration at all or their attention to it is insufficient.

The main objectives of Gender Audit are:

- To develop expertise as to what extend priorities integration of gender equality is a constituent part of work of executive authorities, local governance and non-governmental organizations working in the field of HIV and AIDS in Ukraine.

- To evaluate stages/levels of integration of gender principles from the perspective of development and implementation of the policy to prevent HIV and AIDS in Ukraine into functioning of different systems and organizations.
- To identify and share the information about the mechanisms, practice and views that made a positive contribution into implementing of gender issues.
- To evaluate the level of resources allocated and spent on integration of gender issues.

## Methodology

There exist many models of gender mainstreaming none of which is used as a unified model by all the structures and experts. This gender audit will use the model developed in 1999 by InterAction's Commission on the Advancement of Women identifying integration as a limited process and very similar to a living tree<sup>1</sup>.

Technical Capacity

Organizational Culture



Political Will

Accountability

Political will is the root and the starting point. Strong roots promote the development of strong, stable and vital branches.

In our case we have the following:

- Technical capability
- Accountability
- Organizational culture

All the components are interrelated and the activity can be divided into several categories.

### Political Will

Political will is stronger when government leaders publicly lobby for gender equality and thoroughly follow their implementation. This means that they understand, accept and allocate time, resources and finances for gender policy and are bound by a definite topic/area (HIV strategy and wider strategy) to recognize the progress in implementing gender issues throughout the whole period of their implementation.

### Organizational culture

<sup>1</sup> [https://www.google.com/url?sa=t&source=web&rct=j&url=http://www.ekvilib.org/wp-content/uploads/2017/06/03\\_Organisational\\_Assessment\\_Refreshing\\_Your\\_Knowledge.pdf&ved=2ahUKewjOxLfVvKPnAhUGcZoKHY4KAKkQFjAOegQIBBAB&usq=AOvVaw2AuuoU87nvGsroCQ2fVdlQ&cshid=1580119436363](https://www.google.com/url?sa=t&source=web&rct=j&url=http://www.ekvilib.org/wp-content/uploads/2017/06/03_Organisational_Assessment_Refreshing_Your_Knowledge.pdf&ved=2ahUKewjOxLfVvKPnAhUGcZoKHY4KAKkQFjAOegQIBBAB&usq=AOvVaw2AuuoU87nvGsroCQ2fVdlQ&cshid=1580119436363)

Organizational culture is related to values as it is indicated in gender balance among personnel, governance structure, informal principles and rules towards women and men at their working places etc.

Organizational culture describes gender atmosphere within organization, its reflection in internal and external documentation.

Gender responsive working environment deals with personnel regardless of their gender or position as equal stakeholders in effective implementation/reaching organizational objectives. It also takes different roles of men and women in balancing the double responsibility in professional and individual life into consideration.

#### Technical capability/Gender competencies

It is necessary to develop technical capability, skills and gender competencies needed for the implementation of practical aspects of gender integration.

This aspect includes knowledge of personnel, skills of gender analysis, other tools and methods for gender issues integration and development. This part includes gender organizational procedures as well as improvement of personal skills including development of communication skills among staff.

#### Accountability

Accountability is important for any process. In case of gender mainstreaming, it is also needed. Management should demand reports in their relative spheres of responsibility to clearly see how the Strategy is implemented and to make sure that the consequences will reflect the results of internal and external analysis and evaluation. This indicates that the organization is making efforts to promote gender equality and is consequently supporting this kind of efforts. Setting yearly objectives and assessment of gender strategy implementation might serve as the example of reporting.

Responses got during the interviews give the opportunity to assess the degree to which each of the components of gender integration is implemented.

Combination of different laws and regulations and other relative documents desk review with the stakeholders interviews promotes organizational learning as well as aims to eventually develop the Action Plan to target those directions with the most barriers to gender equality identified. To conduct Gender Audit a working group was formed. The group consist of representatives from Alliance Consultancy, CO “Positive Women” and national and international consultants – Olena Suslova (Ukraine) and Blerina Xhani (Albania). The core methodology for this project as well as involvement of stakeholders to interviews (5-6 interviews in each of the pilot cities) during gender audit were thoroughly discussed by the core team.

During the audit three main tools were used:

- 1) Desk review of the available literature/documentation related to gender equality and HIV response pandemic, identifying best practices and lessons learnt to include all these examples into the results of gender audit.
- 2) Review of legislative framework, laws and decrees, international, regional and national liabilities and government policy in the area of gender equality in Ukraine and all the relevant documents related to HIV and AIDS.
- 3) Key interviews with the stakeholders representing structures\organizations responsible for implementing the state policy in the area of HIV, social welfare and gender equality, civil

society organizations working in the sphere of support or human rights protection for PLHIV.

Individual interviews were conducted with 32 interviewees in five regions of Ukraine (Donetsk, Luhansk, Mykokayiv, Odessa) and in Kyiv. In addition to this, the team also organized and conducted interviews with the representatives of the National Council to fight TB, HIV and AIDS. The questionnaire for the interviews within this project was developed taking all the recommendations of UNAIDS Gender Assessment tool<sup>2</sup> into consideration and in compliance with the regional context and the tasks and objectives of the audit.

The results of the desk review and outcomes obtained from the interviews were discussed with the representatives of the Customer CO “Positive Women”.

Ukraine ratified all the main international documents and supports all the main initiatives in the sphere of gender equality as well as in the area of HIV response. For a long period of time different institutional mechanisms, national programs and action plans have been developed. Civil/non-governmental organizations play a vital role in these processes.

One of the main initiatives of today is validation of elimination of mother to child transmission of HIV and inborn syphilis. In compliance with the international requirements the country is planning to conduct validation of HIV elimination from mother to child transmission on condition when mandatory target indicators are reached. In 2017 – 2019 a range of actions to reach target indicators on HIV infection and inborn syphilis took place in the country. Double elimination increases the rationale and use of such an integrated approach for reaching Sustainable Development Goals 3, 5 and 10 targeted at supporting and assuring health, access to services and scale-up of rights of women, girls and children.

With the aim to prepare to validation of HIV elimination from mother to child transmission and inborn syphilis a special Working group responsible for the validation was formed and began its activity in April 2018 with the technical support of UNICEF (further on referred to as the WG EMTCT). The WG included representatives of the state, public and international organizations (such as WHO, UNICEF, UNAIDS). In August 2019 Intersectoral Working Group (IWG) on EMTCT was created and the WG began functioning as its working body providing activity of IWG in-between sessions.

Monitoring and evaluation of PMTCT (prevention of mother-to-child transmission) and prevention of inborn syphilis at the national and regional levels taking a 4-component process of validation of EMTCT into consideration includes the following:

- Data validation and evaluation of the impact of PMTCT.
- Evaluation of laboratory data, diagnostics, programs and services.
- Evaluation of integration and quality of services.
- Evaluation of respect of human rights, gender equality and involvement of key population to implementing PMTCT within national and regional HIV response programs.

During the first screening/examination of a pregnant woman on HIV they are offered an informed consent and to avoid case of HIV infecting during pregnancy they are also offered to bring their husband (partner) for HIV screening/examination.

---

<sup>2</sup> [https://www.unaids.org/sites/default/files/media\\_asset/JC2543\\_gender-assessment\\_en.pdf](https://www.unaids.org/sites/default/files/media_asset/JC2543_gender-assessment_en.pdf)  
<https://www.unaids.org/en/resources/documents/2019/un aids-gender-assessment-tool>

The national policy of Ukraine implies involvement of civil society organizations of PLHIV, HIV-positive women to the process of policy, legislation formation that provide the quality of their life. As a rule this means delegation or having their representatives at local and national coordination councils dealing with HIV and AIDS, TB, as well as participation in supervisory committees of healthcare institutions, departments and administration. Other mechanisms of involvement of civil society and women communities suffering from HIV to the process of decision taking at the national/state level, forming the global evaluation and state reporting on the issues of HIV and AIDS include the following:

- Participation in the stakeholders' forums on accepting the global AIDS reporting (Global AIDS Monitoring -GAM) within implementing UN political declaration "Accelerating HIV response in epidemic elimination by 2030" held annually.
- Participation in the discussion of national liability and filling of the political tool NCPI to assess progress in development and implementing the national policy, strategies and legislative framework in the sphere of HIV and AIDS and to follow the ongoing progress in the area of HIV response that are held annually.
- Filling the reporting tool SID 3.0 (Sustainability Index and Dashboard 3.0) – Sustainable development index on HIV and discussion of indicators during large-scale forums.
- Inclusion of CO "Positive Women" chair of the board to IWG/WG of EMTCT. Women living with HIV take part in focus groups and in-depth interviews on gender equality, stigma and discrimination, human rights violation etc.

A very important constituent part of the mechanism of the state policy of HIV response serves the **National Council to fight tuberculosis and HIV** founded 11.07.2007 by the Decree of the Cabinet of Ministers № 926<sup>3</sup>. The Council assures performance by the Cabinet of Ministers of Ukraine of the National Coordinator functions in implementing the programs funded by the Global Fund to Fight AIDS, Tuberculosis and Malaria. The personnel composition of the Council is formed based on the principle of equal possibilities for women and men. The Council includes the representatives of non-governmental organizations providing services to women living with HIV/AIDS. As of 08 April 2020 the Council has 40 representatives, there are 18 women and 22 men<sup>4</sup>. The delegation from non-governmental organizations counts 14 representatives, there are 7 women and 7 men among them.

Human rights and zero health, age, social status/wellbeing, sexual orientation, gender identity, occupancy discrimination as well as insuring equality including gender equality and provision of rights and freedoms for people irrespective of these principles/indicators are among the core principles of the **National Strategy to Fight HIV/AIDS, Tuberculosis and Viral Hepatitis by 2030** that is focus of this gender audit. Consequently, the Action Plan (that should be still developed) should also consider this approach and the national programs in the sphere of gender equality.

The Action Plan of the National Strategy to Fight HIV/AIDS, Tuberculosis and Viral Hepatitis by 2030 and some other documents should take the following **recommendations** into consideration:

1. Governance, structure, education, personnel
  - Regular training for management team of executive branch and local government bodies on gender component in the area of HIV response.

---

<sup>3</sup> <https://zakon.rada.gov.ua/rada/show/926-2007-%D0%BF>

<sup>4</sup> <https://moz.gov.ua/personalnij-sklad>

- Inclusion of sensitive issues in gender, human rights, stigma overcoming and zero discrimination, considering gender peculiarities of clients and patients in prevention and treatment into curriculum of potential medical workers.
- Inclusion of sensitive issues in gender, human rights, stigma and zero discrimination, considering gender peculiarities of clients and patients in prevention and treatment into curriculum of Public Health Service.
- Support of responsible sexual behavior programs for adolescents and youth taking gender peculiarities, danger of early and forced marriages etc.
- Development and dissemination of information materials on misunderstanding, stigma and discrimination to eliminate possible existing barriers to prevention, testing and treatment for different strata of society taking peculiarities of urban and rural areas, gender aspects, experience etc. into consideration.
- Specification of providing comprehensive services for representatives of key population living with HIV and in particular scaling up statements in III.10

## 2. Human rights, legislation

- Introducing changes and amendments into legislative framework to provide rights of PWLH to adopt children.
- Elimination of discrimination towards PWLH in the legislation and in particular cancellation/amendment of Article 130 of the Criminal Code that sets the criminal responsibility for creating risk of HIV infecting.

## 3. Removal of legal barriers to access substitution maintenance therapy and in particular cancellation/amendment of Article 164 of the Domestic Relations Code on termination of parental rights based on “alcohol and drug addiction”.

- The State Party should develop and adopt policy of humanization in regards to sex workers, laws and practices based on respect for human rights that will ensure protection and exclude any discrimination and violence against women - to repeal Article 181-1 of the Code of Ukraine on Administrative Offenses and replace punitive measures against sex workers with the provision of healthcare and social services.

## 4. Accountability, monitoring

- Unifying the process of data collection of stigma and discrimination including multiple discrimination (for instance, HIV status or gender discrimination) in compliance with the Global AIDS Monitoring.
- Implementation and monitoring of gender-oriented approach in the budgeting process of HIV and AIDS programs.
- Monitoring integration of violence and help to those suffered from it into HIV and AIDS programs.
- Monitoring of different kinds of healthcare institutions on the availability of their own internal policy targeted to decrease stigma, organize regular learning in the process of employment, to check the level of knowledge and skills etc.

## 5. Development and regular update of statistical and analytical materials (gender portraits, infographic) on equal rights and possibilities for women and men in the area of HIV and AIDS.

## 6. Service provision

- Service provision should be based on gender equality principles and consider the following factors:
- Involvement of service recipients following the principle of equal rights without any gender discrimination.

- Service providers’ refusal from gender stereotypes in the process of staff recruitment and while providing services to service recipients.
  - Considering physiological, social and psychological peculiarities, needs and ways for addressing the issues of men and women living with HIV in the process of implementing programs.
  - Ensuring equal rights and possibilities to access information, prevention, treatment, resources and services.
  - Provision of case management for HIV-positive pregnant women.
  - Ensuring complete access to services of sexual and reproductive health and women rights who live with HIV and vulnerable communities.
  - Taking the influence of the military conflict on prevention, care and support for PLHIV into consideration.
  - Development of effective actions to prevent violence and to deal with it considering the needs of women and girls living with HIV.
7. Civil society
- Support of HIV positive women’s network organizations and representatives of key population involved into research, documenting cases of human rights violation, advocacy targeted to eliminate discriminating laws, representing the voice of the community during different meetings and advisory committees, providing peer-to-peer support etc.
  - Support of institutional and program capacity building of network of women living with HIV, sex workers, transgender people, women who use drugs.
  - Real inclusive involvement of civil society and in particular women’s organizations and key population to the processes of forming regional and national HIV and AIDS policy and gender equality.