

Women living with HIV: Adding value to the Robert Carr Network Fund

The International Community of Women Living (ICW) is an international advocacy network and membership based organization by and for Women living with HIV. The different ICW networks have been beneficiaries of the Robert Carr Fund and have each contributed to the outcome of the Robert Carr Fund. The networks include ICW Eastern Africa, ICW Western Africa, ICW Global.

The networks have made a number of **achievements** including;

Organizational growth: This investment and collaboration with Robert Carr has helped the networks come out stronger by development of regional operational plan whose implementation has already started at the country level. Organisations' structures have also grown. A face to face board meeting and eleven members from USA and Canada attended; A Board of directors composed of seven people was elected; Committees of the Board were put in place and functional; the strategic planning process was started on to be completed in 2015 and the membership drive and recruitment exercise was initiated.

Capacity building: ICW regional offices have built the capacity of women living with HIV in more than 20 African countries on project management and resource mobilizations, to eliminate new HIV infection among children and keeping their mothers alive. ICW WA has trained and built the capacity of over 200 mentor mothers in three west African Countries to deliver effective counseling at the PMTCT facilities. We also leveraged on UNFPA, ECOWAS and UNDP training program to build the capacities of our members in two countries on advocacy and community mobilization for HIV prevention among non HIV positive Women. ICW WA engaged in all the processes of global fund New funding model by organizing community town hall meetings, Focused group discussions were held to identify the issues and the needs of women living with HIV which formed the part of concept note development at the country level consultations for the global fund NFM. ICW networks have also learnt best practices from other Regions of ICW such as ICW East Africa which is role model for all ICW networks.



Expanding the scope: ICW network membership now include women with disabilities that are living with HIV in our activities. A woman with disability from Nigeria and another one from Ghana are currently mentor mothers delivering PMTCT services and counseling at the facility levels.

Monica Nana says that she was so impressed by the high turnout of pregnant Women at the PMTCT sites in Gold coast Region of Ghana as a result of Community dialogue meetings we conducted, “I am happy that my work as a physically challenged person is making an impact in my community, all thanks to ICW west Africa,” she said.

From Senegal, the base of ICW West African Chairperson Astou Diop said that through the Robert Carr project she has been able to form three support groups of Women living with HIV, most especially of Muslim women in Pudah to come together and discuss the issues that affect their lives and also create awareness on cervical cancer among women living with HIV in Dakar and other Regions of Senegal.”

Participation at different levels: ICW members attended and participated in 130 meetings. The meetings focused on areas ranging from SRHR, criminalisation of HIV, access to care, treatment and support services, violence against women and economic justice. ICW Global facilitated the representation of women in major global advocacy platforms including but not limited to the UN

Commission on the Status of Women (CSW), the UN International Conference on Population and Development (ICPD); the Beijing +20 Review processes in Asia Pacific and Africa; the IATT Global Plan Processes, WHO guideline review processes, the WHO Human Rights Validation Process for PMTCT, the IATT Annual Meeting, at key conferences such as Research for Prevention and at major global conferences such as AIDS 2014. ICWEA supported 65 WLHIV to participate in WAD (30 were from Uganda, five from Tanzania and 30 for Burundi). ICWEA also supported two WLHIV to attend the IAC in Melbourne. ICW Tanzania was supported to host World TB Day 2014 in Zanzibar and with over 50 WLHIV in attendance, facilitated 30 WLHIV to attend the World TB Day in Uganda and hosted IWD in Burundi with over 60 WLHIV and attended by over 100 people. Two ICWWA members attended and participated in the activities and programmes during the International AIDS Conference 2014 in Melbourne Australia. The conference provided the opportunity for ICWWA to share and network with other organizations who share the same vision. ICWWA participated in series of roundtable meetings and side events cutting across PMTCT, HIV prevention and Early Infant Diagnosis (EID) meetings to share best practices and also learn from the success stories of other Regions as well. There was participation of over 100 WLHIV in following the debate on the HIV Prevention and AIDS Advocacy Bill in Uganda which unfortunately was passed into law in July 2014.

Developed an advocacy plan: ICWEA participated in the East African Community Partners Forum held in Rwanda, positioning of women living with HIV priorities on the agenda. ICWEA actively participated in the processes of developing the regional advocacy plan that would provide strategic direction in engaging with the EAC and the EA Legislative Assembly through the coordination of the East African Civil Society Organizations (this is now a formalised group of CSOs) that will on a regular basis engage with the East African Community (EAC) and the East African Legislative Assembly (EALA) . The sessions were held in December 2014.

Increased number of advocates: Of the 35 women reached, 16 are actively involved in Advocacy Working Group. JCW+ conducted a sensitization meetings for 10 women living with HIV and 13 supportive family members, with topics on sexual health, disclosure, life skills and personal development as well as sessions to discuss and share information on issues such as aging with HIV, accessing treatment for age related illness, isolation and participation in mentoring. Six women were enabled to access three webinars on aging with HIV. Two women living with HIV referred for training in Policy Monitoring and Community Participatory Research.



Established a resource centre to empower women living with HIV: In July 2014, ICW/ JCW+ launched its Information Access Resource and Production Centre also known as ABC or Apples, Butterflies and Condoms Resource Centre. The space has computers, and seating for meetings and gatherings. The ABC Information Access Resource and Production Centre Brochure was developed to introduce WLHIV to the space and the services. Five (5) monthly dialogues were held with average of 15 women participating at each meeting. Forteen (14) women per week use the resource center. Six (6) events per month have been held including sensitization session, literature review, internet access and monthly dialogue to update and discuss activities and actions with WHIV. About 65% of women have access to information from the ABC Resource Centre. The Book Review Club held 3 meetings and examined the Uganda HIV Prevention and Control A projector was purchased for audiovisual presentation at meetings, enlightenment session and monthly forums. The Book Review Club has reviewed the Jamaica response for CEDAW Report, High Commission on Human Rights Report, signed ICW petitions and reviewed five ICW Policy Briefs on issues that affect human rights of PLHIV.

Dialogues: ICWEA in collaboration with ICW Tanzania organized and held a stakeholders dialogue on Sexual and reproductive health and rights and took place on December 6, 2014 at Blue Pearl Hotel Ubungo - Tanzania. The aim of the meeting was to get an update on the national status of the implementation of HIV and SRH related programmes (PMTCT/eMTCT, STI including Cervical Cancer screening and testing, and Family Planning) and hear from WLHIV as they share their experiences around the SRHR but also work as a team to identify strategies of reaching the national targets. Policy Makers that attended were then Ministry of Health and Social Welfare (MoHSW), Tanzania Commission for AIDS and the National AIDS Control Programme. Issues which were discussed and or presented

included a presentation and discussions on Cervical Cancer screening and treatment, presentation and discussions on SRHR priorities and needs of WLHIV, Discussions on HIV and SRH financing, HIV and SRH related legal and policy environment, Presentation and discussions on PMTCT/eMTCT and Family Planning and an update on engagement of WLHIV in influencing the national planning processes and Funding mechanisms.

Increased activism: ICWEA in November run a campaign dubbed “WLHIVSpeakOut” during the 16 days of Activism against GBV with a different theme each day. In total 18 messages were developed and disseminated through various medium (SMS, website, Facebook and Twitter). To make the campaign interactive and visually appealing to the online audience, we designed and used graphic images. These images were shared on the ICWEA website, Facebook and Twitter on a daily basis. On the ICWEA Website, a specific section for the 16 Days Campaign was designed and this section can be seen here - (<http://www.icwea.org/topics/16-days-of-activism-against-gbv/>).

Key Highlights: On Twitter, we reached out to 3,727 accounts and created 3,920 impressions. On Facebook, the campaign registered a lot of success reaching over 30,000 people; Tanzania: 7412, Zambia: 7,304, Uganda: 6,282, Burundi: 3,240 and in Kenya, Rwanda, Eritrea, Canada, United States, Zimbabwe.

The above campaign laid the foundation for the campaign on Sexual Reproductive Health (FP) whose design and foundation is already underway for example ICWEA has trained 30 WLHIV in Tanzania and 70 in Burundi through a mentorship trainings held in December at which awareness was created about Family Planning 2020.

Mentorship: One orientation training workshop targeting 20 mentor mothers was held. The mentor mothers were imparted with counselling skills to enable them counsel women who tested positive at the antenatal clinic and referred them for other services. Other skills imparted include basic nursing skills, documentation and recording of number of women that they provided with services, monitoring and evaluation skills to enable them complete loss to follow up and other referral processes

Increased membership: So far over 20 women living with HIV have been recruited as members of ICWNA. A membership committee was formed to spearhead the membership drive campaign and a membership draft form is in place and being reviewed by members. ICWEA’s membership has also grown and now boasts of more than 2,000 members.



Provided technical assistance: Technical Assistance was provide to a total of 156 people where by 153 belonged to groups. Additionally, we have provided technical assistance to strengthen advocacy efforts including drafting statements for public distribution, developed strategies around forced and coerced sterilization, regional strategic plans, resource mobilization including proposals, reporting & monitoring and evaluations, and communications technical support including strategy development and press releases.

The Finance Manager carried out a technical and financial visit to Nigeria from 26th of May 2014 and found out that the financial reports were not developed according to the provided guidelines. With the technical support from the Finance Manager, it was corrected. ICWEA hired the consultant who helped to develop the reporting and M&E tools as well as supporting the team to review the activity framework which was approved. In addition, meetings have been taking place both on skype and one face to face meeting - to allow for the consortium members share notes and plan together.

Evaluation: The evaluations were carried out for example in six states of Nigeria, these helped in bringing out the clear issues and the impact of the role of mentor mothers as role models in contributing to the reduction of new HIV infection among new borns. Key findings were: increase in the numbers of women of reproductive age who patronize ANC clinic for HIV testing; with massive sensitization and community town hall meetings, more HIV positive women are now willing to deliver at eMTCT sites and there is increased number of babies that were being born HIV negative as a result of eMTCT.