



International Community of Women Living with HIV
Feminist School: Leadership, Advocacy and Movement Building
October 21 -24th, 2019
Bangkok, Thailand

Workshop Report
October 27th, 2019

The ICWAP Feminist School: Leadership, Advocacy and Movement Building, is the third implementation and a variation of the ICWAP Feminist School in the region. It is a four-day interactive learning and consciousness raising experience for women living with HIV. It has been developed to enable women living with HIV to understand personal experiences, locate them politically and to develop strategies for transformation. Using feminist practices, this workshop has been designed to ensure that women see themselves as a community and to put into practice power to, with, and within – understanding that working together as a united conscious community is the secret to their success in their advocacy. The workshop report shares the overall learnings and outcomes by the participants

Facilitators:

Jessica Whitbread (Consultant) and Sita Shahi (ICW Asia Pacific Coordinator)

Objectives:

1. Interactive learning and consciousness raising experience for women living with HIV. It has been developed to enable women living with HIV to understand personal experiences, locate them politically and to develop strategies for transformation. Using feminist practices, this workshop has been designed to ensure that women see themselves as a community and to put into practice power to, with, and within – understanding that working together as a united conscious community is the secret to their success in their advocacy.
2. Movement building at regional and national level.

Participants¹:

25 women living with HIV participated in the workshop.

China (3), India (2), Indonesia (3), Malaysia (2), Nepal (3), Pakistan (3), Thailand (4), Vietnam (2)

4+ identify as drug users
3+ identify as sex worker
3+ transgender women
2+ queer/lesbian/bisexual

¹ For full participants list please see Appendix I

5 women identified as grandmothers
5 young women

Agenda²:

Day 1 – The Personal

Day 2 – Leadership and Power

Day 3 – Advocacy

Day 4 – Advocacy in Action

Day 1 – The Political

Welcome and Introductions

The workshop participants were welcomed by The Thai Positive Women Foundation to the space. The ICW Coordinator gave a brief history of ICWAP and the ICWAP School of Feminism. Following that the HIV Program Specialist for HIV and Gender Equality from Un women made remarks to the participants and shared UN Women's commitment to providing support for women living with HIV in Asia and the Pacific region.

Participants engaged in an activity to introduce themselves to each other and share their expectations of the workshop. Many women said that they came to learn about feminism and women's empowerment and that they wanted to share information from their country and bring information back to the women. The vast majority of the participants expressed that they wanted new tools to further develop their own leadership and learn from others in the workshop. A number of participants said that they wanted to then use these tools to cultivate new leadership of women living with HIV in their country networks.

Ways of Working Together

Participants were asked to make a list to make a list of guidelines to create a feminist space:

- Respect listening to each other
- Be open – Trust each other
- Be confident
- Be FLY
- Friendly environment
- Confidential
- Come on time
- Clear outcome
- Respect diversity

Self-Care

While discussed as important in advocate culture is often an afterthought in practice. For this workshop self care was brought to the beginning of the workshop and participants were asked to share what self care meant to them and examples of self-care. Participants were then asked to create personal self care plans and find solutions to barriers they had to implemented them.

² For full agenda see Appendix II

Locating Personal Journeys + Shared Experiences

Participants were asked create a personal map of their life with HIV. Everyone was asked to include on their timeline different experiences they had (both good and bad) that helped shape them. Following this they were asked to share their personal stories in their country group. While they listened to each other's stories they highlighted issues that were similar and raised their collective consciousness. Each country group was asked to identify 4-5 issues that they expressed in their stories. Country groups then paired with another country and shared their country issues, resulting in robust conversations. As a large group the issues were shared and overlap highlighted. All participants agreed that they also shared those issues in their country.

- Lack of comprehensive sexuality education
- Reproductive health violations (including forced and coerced sterilization and forced contraceptives and abortions)
- Gender inequalities and oppression
- Mental health supports
- Stigma and discrimination – in health care settings + family settings
- Lack of employment/schooling opportunities
- Difficulties for young women (child brides, forced contraceptives)

Country	Issues
China	Family breakdown Medical discrimination Unemployment and discrimination in service jobs Medical side effects
India	Lack of comprehensive SRHR education Child marriages Lack of women's empowerment and leadership Gender inequality Forced contraceptives for young women
Indonesia	Criminalization of HIV and populations Mental health Lack of pediatric medications Insurance discrimination Gender inequality
Malaysia	Forced sterilization Social exclusion of women living with HIV Marital testing Discrimination in religious institutions
Nepal	Criminal code Women's agenda not respected Harmful media and stigma Denied citizenship
Pakistan	Gender inequality Lack of counselling/supports for women living with HIV – women cannot be open Child marriages

	Discrimination by family No protocols for health intuitions
Thailand	Stigma and discrimination Forced and Coerced Sterilization Lack of employment Gender inequality
Vietnam	Stigma and discrimination Lack of funding on women living with HIV Dislocation by community Stigma in health care settings Harmful media stigma

**Highlight indicates which issues countries explored for advocacy campaign on Day 3.

LUNCH

Trees of Oppression

Discussion of Oppression and introduction of the Oppression Trees. Each country group was asked to draw their own Oppression Tree, thinking about the issues that they identified in the morning. The roots are what you see are the causes/conditions/ideologies that are driving the problem, the branches and trunk are the actors and fruits are the specific issues and problems.

Country	Issues	Actors	Root Causes
China	Medical discrimination, unemployment, treatment, domestic violence	School, institution, media, hospital, government	Lack of knowledge of HIV, stigma pressure, profession exposer, financial pressure
India	Lack of platform to speak for WLHIV issues, WLHIV doesn't know about their rights, Lack of access to information about treatment, No budget allocation from state government, Pregnant women are facing problem because of the ART medicine stock out	NGOs and INGOs, UN, Government, WLHIV, Family	Patriarchy society, Discrimination on HIV programs.
Indonesia	Lack of adherence, Kids uses adult ARV no pediatric medicine, Out of stock one of ARV FDC so PLHIV uses pieces ARV, ARV broken and almost expired, There is no monitoring for ARV procurement in small cities, Closing localization for sex workers, Catching the sex workers, Can't give condoms in public place. Young age marriage, Circumcision for women,	Family, Culture, Religion, Ministry of health, hospital, leaders, Government, society organization, Corporate	Patriarchy, Medicine problem & issues, Discriminative policy HIV status

	Violence, Opportunity for study in high level, Women's salary is lower than men, Women doesn't have the decision to choose contraception or having child, WWUD have a lot of challenge for health access, PLHIV can't be employed, Confidential of HIV status, PLHIV can't apply as a Government staff (Police, army etc.), There's no legal assistance for WLHIV who opened their status.		
Malaysia	PLHIV are discriminated as a sinner even though we are victim, Segregation of PLHIV bodies while doing funeral, Compulsory pre-marriage testing, Leak confidentiality, Stigma among family, Adolescents being left out.	Religious Department, Health Department, Social Department	Misinterpretation of HIV transmission between couple, Rakhnu xa
Nepal	Citizenship for single women, Orphan children's and Young people, Gender inequality in funding and resources, Lack of women involvement in decision making (Policy and National Planning), Lack of women orientated programs, Property issues for WLHIV, Cultural barriers, Lack of literacy on HIV treatment for YPLHIV, CLHIV and WLHIV, Criminal and panel code Criminalize the PLHIV, Negligence in treatment and discrimination in health care setting, women lead organization have no funding to continue programs for WLHIV, No Employment in Government sector for PLHIV (Military, Police force).	Government, Family, Media, Society, Policy Makers, Institutions (Religious leaders, schools etc.)	Paratactic society, Treated as a useless human, Lack of funding, Lack of information on HIV/AIDS, Pressure from the society Strongly policy and laws are not implemented
Pakistan	Denial, HIV accuse, non-confidential stigma and discrimination	Government, community Health department culture	Lack of awareness, stigma and discrimination, gender inequality, lack of funding communication

Thailand	Young women living with HIV are forced to have two methods of family planning, stigma and discrimination against young women living with HIV who has couple with negative status, lack of awareness concern on mental health of people living with HIV	Health providers, family, education institution, community mentor, government health volunteer, media, monk, psychiatrist	Gender norm, social norm, lack of information, belief stigma & discrimination against people who have mental problem, patriarchy, gender inequality, no comprehensive sexual & HIV education
Vietnam	Stigma and discrimination, national communication, no empowerment opportunity, no funding for women's activities HIV law is not fully implemented, no employment opportunity	Media, donors, geographical, government	Communication gap, media involvement, women is not priority, no clear instruction about law and not followed, limited capacity in education

Understanding Power

There was a discussion about the different types of power and how they impact society. Power Over – Power With – Power To – Power Within. Participants were led through a short visualization to think about a time in their life that they had experienced oppression. In this visualization they were asked to identify the oppressor and what type of power they experienced and how it made them feel --- had they felt it before? Following their personal visualization, participants talk in country groups about power and how to shift Power Over situation to other forms of shared power.

People gave examples of times they were oppressed and asked advice from the group in real life case studies. Two countries express their concern with how their countries were moving forward with EMTCT accreditation when they knew that women living with HIV were being forcibly sterilized, forced to take long active contraceptives and intimidated into family planning. These grave human rights abuses need to be documented and women living with HIV need to be supported to implement their own research. All the country participants expressed knowledge and concerned of this practice in their country.

Check Out

Everyone shared one thing that they learned throughout the day:

- *Younger voice made so much learning*
- *Cross learning from other country and solution in practical way*
- *It is first training every learning is new for me*
- *How we can act together as team make me come back*
- *When I hear from all country I felt the issues are facing same feel me come back*
- *Learnt from other culture and root causes*
- *Brave women and heard story /problem and I want to be like other in the room*
- *Feel glad to meet you inspire me to go on*
- *I want to encourage Norlela and give support to her to act together*

- *We make lot of issues become national issue to regional and global voice and how could we act together to make one voice*
- *Knew about treatment provision/options in Thailand*
- *Learnt from problem tree to identify the solution*
- *How to power over to government and other so that they can join us*
- *We have rights if we act through group and determination*
- *Glad to meet powerful women here*

Day 2. Leadership + Power

Check In

Hold a string, participants were asked to state one word in their original language about how they felt this morning. Still holding the string she was asked to then throw it to another person who would repeat this action until there was a spider web of integrated and connected feelings all attached by a string.

There was a recap of the previous day.

Intersectionality

Building on the discussions of power and oppression from the previous day, the group was introduced to the term intersectionality. The participants were divided into two and given placards of different identities (example, heterosexual man, religious leader, seller in the market, married woman, transgender woman...) and asked to place people in order of most power to least amount of power. After the group decided each person's identity in relation to power, they were given another intersecting identity (gay, disabled, HIV+, university student, land owner...) and asked to rank them in relation to power once again.

The group had a conversation about stereotyping and our hidden (or not so hidden) biases to identities. We discussed the goal of feminism is to move forward gender equality for all people of all genders. And to do this we need to be conscious of injustice and inequality. There was a discussion about privileges – many from birth right (skin colour, nationality, religion, cast, ethnicity ...) and others that were transient (education, employment...).

Powerful Me

For this activity participants were asked to take time to do a personal reflection in their workbook about their own privileges, identifying when they felt powerful and powerless. Following the personal reflection time, women were asked to share in country groups as well as in the plenary. Participants shared stories of discrimination in health care settings, by male-led HIV organizations, extended family members, as drug users, and in places of employment and how they shifted the power in these situations to regain their power within. All women in the group expressed that one source of feeling powerful was working and relating to other women living with HIV. In turn they all shared that they were also the source of power/role model for other women living with HIV in their country context.

Sites of Struggle - Wheels of Control and Equity

Continuing with the discussion on power and discrimination groups were introduced to Wheels of Power and Control and Equality Wheels. Groups were given the example of Violence and were asked to

create wheels both of Power and Control and Equality for various sites: HIV community/movement, family structures, women's bodies, and relationships.

Country	Site of Struggle	Wheel of Power and Control	Wheel of Equality
China	Relationships	<ol style="list-style-type: none"> 1. Cheating, lies hiding 2. Taking advantage 3. Using each other without permission 4. Constriction refuse reproductive career 5. Violence physical, mentally, economic silence 6. Tell the secrets to someone else 7. Sleeping with another person 8. Betray 9. Selfish always think about what self-needed 10. What I gain, sacrifice others to benefit self 	<ol style="list-style-type: none"> 1. Respect listen to 2. Responsibility 3. Justice 4. Support 5. Understanding 6. Honesty and trust 7. Do what you say, say what you do, be open in need whenever in. 8. Tolerance accept other bad or good
Indonesia	Women's Bodies	<ol style="list-style-type: none"> 1. Women's can't use sexy clothes and short pants 2. Some of cities and schools have regulation to wear hijab forcefully 3. Plastic surgery is a sin 4. Women's can't decide for abortion 5. Behave 6. Tattooed women's is perceived as a criminal 7. Women have to be pregnant 8. Perfect body white skin-color and thin 	<ol style="list-style-type: none"> 1. Have right to her body 2. Nobody can intervention about women body 3. Intolerance about bodily should not be exist 4. There is no indicator about beauty. 5. Who are sexy doesn't mean sex workers 6. Women can choose to have baby or not 7. Accept herself 8. Women have to love their body
Nepal + Vietnam	The Workplace	<ol style="list-style-type: none"> 1. No Promotion 2. Force medical test (HIV testing) 3. No equal payment 4. Gender inequality 5. No promotion 6. No Salary increases 7. Economical abuse 8. SRHR violation 9. Emotional abuse 10. Work place safety 11. Having accommodation for people with disability 12. Sexual abuse for women 	<ol style="list-style-type: none"> 1. Respect 2. Gender equality 3. Non-threatening behavior 4. Internal Communication guideline 5. Working environment policy 6. No judgement and understanding 7. Transparency 8. Filing case system 9. Consultative decision making 10. Sexual harassment committee

		13. Legal abuse	
Malaysia	Society	<ol style="list-style-type: none"> 1. Insurance disallowed for HIV positive 2. Employment termination due to HIV status 3. Transphobia in community 4. Marital status disclosure 5. Migration deportation 6. Forced/ Coers sterilization for women living with HIV 	<ol style="list-style-type: none"> 1. Treatment proven where PLHIV back to loaf 2. Treatment – Healthy productive life 3. Revised of mandatory pre-material testing to voluntary testing 4. Rights of transgender or to be treated equally
Pakistan + India	The Family	<ol style="list-style-type: none"> 1. Emotional- making her feel bad humiliating 2. Using children- Threating to make her children away 3. Economically- Preventing her from getting job 4. Isolation – Limiting her outside involvement 5. Deny and blame- Not taking her concern seriously says that she causes it 	<ol style="list-style-type: none"> 1. Good behavior- Safe and comfortable expression herself 2. Honesty & Accountable- Communicating openly and truthfully 3. Share responsibility- Mutually agreeing a fair distribution of work 4. Responsible parenting: Being a positive nonviolent role model for children 5. Economic Partnership: Making money decision together
Thailand	The HIV Movement	<ol style="list-style-type: none"> 1. Injustice criminal Law 2. Irresponsible leader 3. Corruption- Government officer using TNP+ as nominee 4. Make use of HIV stigmatization /victimization 5. Denying and blaming 6. Not funding support involving WLHIV issues 7. Government officer using power over making decision without us 8. Male dominant policy maker 	<ol style="list-style-type: none"> 1. Responsible leader 2. Share responsibility 3. Respect Human rights 4. Transparency 5. Gender Equality 6. Economic Partnership between GOV & Non GOV. 7. Honesty and trust worthy 8. Negotiation and listening

LUNCH

Feminist Leadership + Developing Feminist Organizations

Participants were introduced to the idea of feminist leadership. In plenary they were asked to think about the qualities and skill sets that make a strong leader.

Consults with others – strong communications skills – calm during controversy – accepting – has a vision – informed about the issue(s) – credible – solution oriented – take decisions – WE not I – active – understanding – has “skills” – daring and takes risks – good insight – skills to delegate – able to make brave tough decisions – has faith in themselves – commitment – empathy – values others’ opinions –

good listener – able to build connections/movement building – advocacy skills – non-judgmental – able to manage conflict – mentoring

The group was asked to work in country teams to dream of their ideal network of women living with HIV – thinking about the ideal qualities of good leaders. Then they were asked to compare this ideal network to their own organization/network and see what is lacking. The groups were then paired with other county groups to share their thoughts.

Group Dynamics

The participants were introduced to the idea of group dynamics. They were asked work in large country teams to make a list of things that helped to build a network and things that help to break a network down.

Builds a network	Breaks it down
Have a clear mission, vision and strategy Group is acknowledged by the members, government and other organizations Having an activity plan Have budget to run Have connections to organizations Transparent Accountable Has legal status Feminist leadership Clear and consistent communication Unity on issues Gender equality Opportunities to build leadership Opportunities to generate income Opportunities to meet and gather socially Same ideas/one voice Good relationship with organizations, and other partners Independent income Working as a team Good relationships with media The group accepts diversity Issue oriented Thinking outside the box Supporting all reproductive justice	No mission, vision or strategy Lack of funds Dishonest Disloyal Conflict of Interest Illegal Operations linked to organization Miscommunication Lack of connection Selfishness Depression Burnout Powerless Low education or information on issue Poverty Fear of being exposed/lack on confidentiality Irresponsible Corruption Cheating and stealing Taking sides – a group within a group Cannot separate personal issue and group Gossiping Male dominated Conflicts (and lack of ability to solve them) Diverted programing due to funding (mission drift) Saying you support reproductive justice but not supporting reproductive justice

Check Out

Participants were asked to share one commitment that they would make to the group:

- *I will be there for the community every time.*
- *Communication via WhatsApp*
- *Consistent to community*
- *Build the confidence*
- *Ask me I will fight for the community*
- *SRHR Movement*
- *Mentoring other women*
- *30% of time without any funding*
- *Increase the communication with everyone*
- *Share Information.*
- *I will continue to empower women's in Pakistan.*
- *I will continue to solve their issues and problems.*
- *Learning English to raise voice in region*
- *Continue to support every movement of WLHIV*
- *Continue my advocacy to youth.*
- *Will always advocates for the community.*
- *Will help you technically to review your abstract so more women can join the conference.*
- *Will share the information and will engage strongly in coming days*

Day 3 – Advocacy

Check In

Participants were given an overview of the previous two days and asked to state how they felt and if they needed any clarification from the workshop thus far.

Questions that were raised:

1. How do we use the Wheel of Power/Equality in our communities?
2. How to use tools for advocacy?
3. How to engage in policy?
4. How to engage in movement building better?
5. How to sustain leadership?
6. How to move to middle income country and get Global Fund funding?
7. How to implement programs that work for women in our networks?
8. How to work cross culturally on policy in different countries?
9. How to implement self-care?

The entire day focused on advocacy and leadership in advocacy.

Skills Mapping

The participants were explained what hard and soft skills were. Individuals were asked to list 3-5 hard and soft skills then share them with the groups.

Name	Hard Skill	Soft Skills
1.	Driving Data Collection Sewing Public speaking	Good listener Talk and advocacy Inclusive Good communication

	Counseling	Stay positive and happy Make friends Energizer
2.	Data Inputting Reporting Writing Writer (written 2 books) Video making and training	Happy go lucky Strong communication skills Friendly Passionate
3.	Data programing Community organizing Research Vocal	Passionate Sincere Loving person Determined Strong
4.	Accounting Cooking Proposal writing Computer skills Fashion	Team player Conflict management Listening skills Advocate for change
5.	Dialogue with government	Can speak on the issue and friendly
6.	Proposal writing educator using technology finance management built relationship report writing make up skills	Inspiring Skills to build personal image
7.	Counselor Note taker	Determination Good listener Analytical skills
8.	Cloth Making Trainor	
9.	Activism and can fight for every situation Advocacy Coordination Counselor	
10.	Driving Counselling	Good listener Passionate Good relationships with MSM
11.	Event organizing Budget setting Computer Leadership Human Rights documentation Coordination Trainor Counselor	Mutual working with others Clear communication Listening Mobilizing Open minded Understands diversity

12.	Computer Facilitation Proposal writing Organizing and management Coordination Attractive presentation Translation Note taking Budgeting Cook	Conflict management and passionate
13.	Counseling Awareness raising Vocational Training HIV testing Data collection	Responsible Active
14.	Electrician Cleaning dancer Computer	Friendly Trusting Working well with others Simple
15.	Organizing Nursing Cyber Technology software skills Confronting skills	Multi task
16.	HIV testing Monitoring Counseling	
17.	Media work Program planning Fund raising Policy advocacy Policy analysis Community issue delivery	Leading on the issue and communication
18.	Writing essay Business skills Report writing	Communicating with others Comforting
19.	Mobilization House wife task and can do a man's task Make own soap and lip balm -echo friendly Teach other youth in the shelter	Easy going and can be a good listener Can be a good seller - persuasive Can communicate well to key populations groups Love to motivate other I speak up when I feel I like and disagree Responsible
20.	Communication Report writing Computer	Easy going Honest Good listener Flexibility Critical Thinker

21.	Coordination	Responsible Very sensitive Multi-tasking I can work with any other community Simple and open minded
22.	Essay writing	Accountable and leadership

Advocacy

In plenary the group were asked to brainstorm what advocacy is to them. Then the advocacy definition was linked to advocacy issues and jointly the group was asked to brainstorm advocacy actions.

What is Advocacy?

- Advocacy is a common target or goal, to make a movement to achieve goals
- Raise issues of community
- Dialogue with policy makers
- Collective action to make change
- Combined effort to effect change
- Commitment and negotiating as a group to address issues

Types of Advocacy Interventions:

Posters campaigns	Lobbying/multi level
Protests/demonstrations	Postcard/letter writing campaign
Public hearings/town halls	Videos
Disrupting meetings	Banner drop
CEDAW shadow reports	Storytelling
Photo campaign	Flash mob
Social media (FB, twitter...)	Delegation
Official statement	Using art
Research	Media – TV, newspaper, radio
Make signs	Photo + sign campaign
Write a book	Street drama
Placards/signs	Signature campaign
Reports	Roadtrip campaign
Viral campaign	Awareness raising campaign

Advocacy Campaigns

The group was given an overview of the steps to implementing an advocacy campaign. They were asked to practice creating an advocacy campaign for their country and.

1. What is the problem/issue?
2. What is the change you want to see?
3. What is the message?
4. Who will deliver the message?
5. Who are the allies/opponents?
6. How do we get the message out? What are the tactics?
7. Identify resources – Do a SWOT analysis!

8. Planning and creating a timeline
9. M&E

UN Women Presentation on Media Interventions

The afternoon focused on working with media to enhance your advocacy message. This portion was led by the communication manager of UN Women Asia Pacific regional office. Following the presentation there was a question answer period for clarification. Later on, the day three deputy director from UN Women joined the workshop had short remarks on the issue of women in the region followed by conversation with participants.

Check Out

The participants jointly agreed to have a social team building event in the event at Condoms and Cabbages.

Day 4 – Advocacy in Action

Check In

The group was given an over view of the previous days. Everyone was asked to stand up and partner with a person that they did not speak the same language. They were then asked to try to teach the other person how to say “HELLO” in their mother tongue then tell them a short story. When everyone sat down again, as a group we did a call and response to all learn “HELLO” in 9 languages.

Putting Advocacy into Action

Participants worked in country groups and were asked to reflect on their advocacy campaigns that they developed yesterday. The entire morning was then dedicated to developing three different either advocacy, awareness raising or movement building interventions with a budget of a) \$10,000-\$50,000USD b) \$250USD and c) \$0USD

Participants were asked to think creatively and answer the following questions for each activity. The questions follow the same general guidelines for making an advocacy campaign. They need to present/sell their idea to the rest of the group when they are finish:

1. What is your activity?
2. What is the advocacy issues? (violence against women living with HIV- criminalization – maternal mortality – sexual diversity...)
3. Who is invited? Who are you trying to reach and advocate to?
4. What time, date, location? Is there a pre-existing advocacy opportunity to build on? Ex WAD, national celebration, Gay Pride?
5. What form of communication will be used to promote it?
6. How long will the planning take to develop it? What kind of supports will you need?
7. Who are your allies? Who are your opposition?
8. What is the budget? What are you the costs?
9. What skills does your group need to develop or collaborate with in order to make this a reality?

The country team presented their activities to the entire group. Participants were asked to imagine how other ideas could be implemented in their country and possibly at the regional level.

Final Presentation to UN Women and Closing Remarks

The coordinator of ICWAP presented an overview of the workshop to UN Women, highlighting the shared advocacy issues and desired way forward.³ Collectively as a group, the participants decided that although some countries had different priorities they thought that there were a number of shared issues in the region as well as priorities for ICWAP to focus on after the Feminist School workshop. These joint decisions will underpin how ICWAP moves forward in supporting the national networks moving this workshop.

Overarching regional issues/Key Challenges for Women Living with HIV in Asia and the Pacific:
<ul style="list-style-type: none">▪ Lack of comprehensive sexuality education for women and girls▪ Reproductive health violations (including forced and coerced sterilization and forced contraceptives and abortions)▪ Gender inequalities and oppression▪ Lack of mental health supports▪ Stigma and discrimination – in health care settings + family settings▪ Lack of and/or discrimination in employment/schooling opportunities▪ Difficulties for young women (child brides, forced contraceptives)▪ Women led organization are struggling for funding at country level ICWAP needs to play strong role to support country networks on strengthening and funding/resource mobilization
Priorities for ICWAP:
<ul style="list-style-type: none">• To create a regional platform to share information and conduct workshops• To do multi country research Treatment, Health Care Violations (FCS) and Testing Uptake with a gendered lens• Leadership Training for New Feminist Leaders• Campaigning on know your rights, SRHR and violence against women• Treatment literacy workshop including updated consolidated guideline on SRHR and HIV• Seek long term support for the ICWAP from UN Women and other funding partners to support women’s network at country level.

Closing

As a closing exercise, each participant said thank you and goodbye in their mother tongue and completed evaluations.

Evaluation Feedback:

Based on participant evaluations from provided in the training

Number of participants who completed an evaluation form:

- a. Number of participants who completed an evaluation form: 20 persons (some people were invited from same organization therefore completed one form together)

³ For full presentation see Appendix III

Kindly indicate your opinion:	Strongly Disagree 1	Disagree 2	Neither Agree nor Disagree 3	Agree 4	Strongly Agree 5
1. Overall organization of the ICW Feminist School was well done.				5	15
2. The workshop dates were well timed.			7	10	3
3. The venue chosen for the induction was good (country, town, location, accommodation)			2	2	16
4. The duration of the sessions was good.				8	12
5. Adequate time was provided for questions and discussion				2	18
6. Participation and interaction were encouraged				2	18
7. The quality of instruction was good (delivery mode)				3	17
8. The presenters were knowledgeable and accessible				3	17
9. The materials distributed were pertinent and useful					20
10. The structure supported the wellbeing of the participants				3	17
11. There was a synthesis between the workshops content and the workshops structure					20
12. The workshop's structure reflected ICW's feminist mission				1	19

Follow up plan

During the 4-day intensive discussion in the workshop participants agreed to implement 1 \$0 cost activities back to their country as first step. Then with the support of ICWAP look for small pots of resources to support country networks implementing their \$250 activities by February during the annual Love Positive Women holiday. ICWAP have created a tool to support monitoring and evaluation over a 1-year period, including two on line surveys, interviews and a final report which will be written in December 2020 (funding permitted). ICWAP will create a two regional social media and engagement tools 1. Instagram account (because it was noted that Instagram is easier to use and follow than other social media at this current time) and a regional social page which can be used by country groups to have more updates and provide technical/expertise support if required any. The latter tools will support ongoing engagement and accountability to ICWAP members and a direct line of contact for women living with HIV.

Following the workshop ICWAP will work with UN Women to ensure that all the country networks are introduced to their country UN Women offices (where applicable) and other processes that are occurring within the UN family. For example, ensuring that women living with HIV in Pakistan are urgently connected with the CEDAW process to give in put in the shadow report. In addition, ICWAP will draft a follow up concept note to plan with UN Women for ongoing regional support for the next 12-month (or more) funding cycle. We see this as an urgent need as ICWAP does not have any core funding to maintain its current activities.

In addition, ICWAP will follow up with regional networks to inquire about synergies and joint country grants where ICWAP can work on its identified priorities as stated in the meeting:

Overarching regional issues/Key Challenges for Women Living with HIV in Asia and the Pacific:
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Conclusion

National networks and groups of women living with HIV across the region are at very different stages of development with many of them experiencing difficulties in relation to sustaining leadership and resources for ongoing activities. Most of the women's network are struggling for funding.

Countries are seeking long-term support from the regional network for ongoing technical capacity strengthening and capacity building whereas the regional network is in weak position of resource mobilization in current funding scenario. In a recent article in the Stanford Social Innovation Review: *Philanthropy for the Women's Movement, not just 'Empowerment'* it stated that strong women's movements are "often the only, factor driving change on women's rights" and that support is needed for "diverse and broad coalitions". We whole heartedly agree. From this experience ICWAP learnt about the enormous impact that the first segments of the ICWAP Feminist School had on some participants –

"As a young woman my voice was not taken seriously in my country. I was threatened from male counterparts while applying the grant which was openly called for everyone and said that we should not apply for grants and if we did so they would not tolerate and challenged me. I felt depressed about what to do. Working with other women, and using feminism we are able to stand up for ourselves."

Nepal

And how desperate some countries are to have continuous, and dependable leadership development to inspire new fresh leadership in the women and HIV response.

"I have been leading the HIV and women's movement for a very long time in my country, I have tried to get new, young women to be involved but it is really hard without resources. It is my dream that we could have ongoing leadership trainings such as the ICWAP Feminist School in our country every year to support the new women who don't even know that they are activists. I want to see young leader come and lead in my country."

Malaysia

"We used to go to the clinics and do counseling and advocacy. I don't know why we do not anymore? We need new leadership because it has been the same women for a very long time. Without a strong movement of women living with HIV, we see the bad things that happen."

Thailand

The perception towards women living with HIV has not been changed in my country. We cannot be open in health care setting because we are not treated equally as others. We suffered a lot because of medications side effects and I frequently told to doctors but they never be responsive and not changed my ARV regime. After long research with my friends I bought and carrying my ARV medicine from Thailand for one year with my own money. Some of my friends also doing the same and because of high Stigma and Discrimination they cannot talk openly which always depressed me.

China

UN Women is key partner to play strong role for making sure that women living with HIV are part of the agenda and supported so that regional network of women living with HIV can make strong presence in the region and be able to support women's network at country level. We look forward to continuing to work with UN Women to turn around some of the current deficient in the HIV response and move forward and implementing some other priorities such as research and campaign development.

