

Eurasian Coalition on Male Health

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By Marcus Oda

<u>Intervention on Report by NGO Representative</u>

On behalf of the Eurasian Coalition on Male Health, I would like to commend the report by the NGO representative on the sexual and reproductive health and rights of people most affected by HIV. Access to quality information and services related to sexual and reproductive health and the ability to live free from violence, discrimination, and stigma are essential to ensuring that MSM, trans* people, and members of other key populations are able to enjoy the full realization of their rights and live healthy and productive lives.

MSM are 19 times more likely to be living with HIV than the general population. In the region of Eastern Europe and Central Asia, in particular, MSM and trans* people are disproportionately affected by the HIV epidemic, with the HIV incidence rising above 20% among these populations in certain major cities of the region. Stigma, discrimination, and legal and social barriers very frequently prevent these populations from accessing the HIV and SRH services that they require. In our region, MSM and trans* people face discrimination in their public and private lives on a daily basis. Laws purporting to ban the distribution of "homosexual propaganda" among minors infringe on the freedoms of expression and assembly and directly adversely affect the sexual and reproductive health and rights of MSM and trans* people. Unfortunately, healthcare service providers and law enforcement officals frequently lack the necessary knowledge to adequately address the specificities of MSM and trans* health and rights. In addition, trans* people often lack access to gender reassignment procedures and hormone therapy and may encounter problems when wishing to change their legal gender in official documents. Even more worrying is that these issues are usually the least of trans* peoples' worries, as they are attacked and murdered on an alarmingly frequent basis due to their gender identity.

On a more positive note, I would again like to underscore the importance of the role of communities in advocating for their interests and in fighting stigma and discrimination in order to realize their own sexual and reproductive health and rights. Representatives of MSM, trans*, and other key populations are best situated to advocate for their own interests and for the services and support they need. There have been a number of examples of MSM and trans* communities advocating for their rights in countries in the EECA region. Community groups have successfully combated proposed anti-homosexual propaganda bills in Ukraine, have worked to enact anti-discrimination bills in Moldova and Georgia, and have helped to pass reproductive rights legislation in Kyrgyzstan. These positive examples may be seen as best practices for other key populations wishing to engage in advocacy and underscore the progress that can be made when communities are engaged and involved in formulating the policies that affect their lives and their health.

<u>Intervention on the Report of Executive Director</u>

Thank you chair. On behalf of the Eurasian Coalition on Male Health, I would like to thank the executive director for his remarks and recognize the efforts made at the recent HLM. At the same time, I would like to highlight certain failures of the HLM to commit adequate attention, resources, and support to respond to the HIV epidemics among men who have sex with men, trans* people, and other key populations. HIV has a devastating and disparate impact on these populations. In the region of Eastern Europe and Central Asia in particular, stigma, discrimination, and other legal or social barriers serve to increase these populations' risk of HIV infection and to reduce their access to HIV services. In 2014, in our region, 96% of all new HIV infections occurred among key populations and their sexual partners.

Despite these facts, the Political Declaration overlooks important data with respect to key populations and uses language that essentially renders these populations invisible in the context of the HIV response. In order to achieve the ambitious goals set by the Political Declaration, it is imperative that key

populations receive the necessary attention, resources and support in the HIV response.

In addition, I would like to condemn the decision of certain UN member states to exclude a number of NGOs, including the Eurasian Coalition on Male Health, from participating in the High Level Meeting due to our work on the rights of MSM and trans* people. By voting for the exclusion of these organizations, conservative governments have sent the message that they do not care about the lives of MSM and trans* people and that they do not intend to address the HIV epidemic threatening these populations.

The involvement of communities in the development of HIV/AIDS programs and in the global HIV response, in general, is of the utmost importance. Communities are best situated to assess their own needs and to advocate for the services, resources, and support they require. If we are aiming to achieve the ambitious goals set by the Political Declaration, we must ensure the right of the communities most affected by HIV, including MSM and trans* people, to shape and influence global, regional, and national HIV responses.

Intervention for PCB Thematic Segment

Good morning. I would like to share a few examples from the EECA region that highlight the important role of communities in ending the HIV/AIDS epidemic. The first example concerns advocacy for access to medical and social services for representatives of key populations in Ukraine. The goal of the program was to ensure the sustainability of medical and social services for members of key populations by transitioning from donor funding to funding from local budgets and to strengthen community leadership capacity to enhance their influence in decision-making processes.

To achieve this goal, Regional Community Councils were created, as consultative and advisory bodies comprised of leaders from key populations, and which are designed to significantly enhance the mobilization capacity of communities through joint advocacy actions. In addition, the program held round tables with civil society and government representatives, individual

negotiations with government officials, drafted official letters to government officials, signed memoranda of cooperation, and other advocacy activities in order to increase the influence of key populations in the development of the continued HIV response in Ukraine. The many successes of the program include the adoption of four regional programs on HIV/AIDS, including funding from local budgets for HIV prevention among drug users, MSM and sex workers. In certain regions, additional funding was allocated in regional budgets for opioid substitution therapy and the provision of this therapy through primary healthcare providers.

I will also share a few additional examples from the region that demonstrate the important role of communities in the HIV response and their ability to effect positive change when they are engaged and empowered. In Kyrgyzstan, following extensive community advocacy efforts and their analysis of then current Kyrgyz legislation and its discriminatory effects with respect to reproductive rights, a "Law on the Reproductive Rights of Citizens and Guarantees for Their Implementation" was enacted in June 2015. In Ukraine, thanks to broad civil society discourse led by LGBT activists and organizations, all four attempts to introduce anti-gay propaganda laws since 2011 were rejected. Finally, in Moldova, a coalition of community-based organizations were involved in lobbying, public demonstrations, consultations, and engaging the media that resulted in the enactment of an antidiscrimination bill. It is evident that communities have an invaluable role to play in the fight against HIV. These examples show how strong communities have been able to break down some of the structural barriers that prevent their access to HIV services and to live healthy lives. Therefore, we must work to prioritize the role of communities in the HIV response and ensure that communities are valued and empowered. I call upon donors to provide the needed funding and technical support to community organizations so they can continue to show these results in the fight against HIV. Thank you.