

GENDER, HIV/AIDS AND THE UNGASS

Throughout the world, the unequal social status of women places them at higher risk for contracting HIV. Women are at a disadvantage when it comes to access to information about HIV prevention, the ability to negotiate safe sexual encounters, and access to treatment for HIV/AIDS once infected. In accordance with these inequities, the percentage of women infected with HIV continues to rise in Latin America, the Caribbean, and throughout the world.

The United Nations General Assembly Special Session on HIV/AIDS, which took place in New York from June 25th-27th 2001 declared HIV/AIDS to be a global emergency requiring immediate action. The **Declaration of Commitment** from the UNGASS sets out a number of policy and programmatic resolutions and recommendations to help local, national and international leaders address the HIV/AIDS pandemic in an integrated, effective, and above all just manner.

Listed below are some of the key recommendations and resolutions which pertain to women and the gendered aspects of the pandemic, which carry with them significant implications for policies and programmes which attempt to address this global crisis.

Declaration of Commitment

Article 4 - Noting with grave concern that all people, rich and poor, without distinction as to age, gender, or race, are affected by the HIV/AIDS epidemic, further noting that people in developing countries are the most affected and the at women, young adults and children, in particular girls, are the most vulnerable;

Article 6 - Recalling and reaffirming our previous commitments on HIV/AIDS made through:...

- o The political declaration and further action and initiatives to implement the Beijing Declaration and Platform for Action of June 10, 2000 (see box 2);
- o Key actions for the further implementation of the Programme of Action of the International Conference on Population and Development, of July 2, 1999 (see box 1)...

Article 37 - By 2003, ensure the development and implementation of multi-sectoral national strategies and financing plans for combating HIV/AIDS that address the epidemic in forthright terms; confront stigma, silence and denial; address gender and age-based dimensions of the epidemic; eliminate discrimination and marginalization; involve partnerships with civil society and the business sector and the full participation of people living with HIV/AIDS, those in vulnerable groups and people mostly at risk, particularly women and young people; are resourced to the extent possible from national budgets without excluding other sources, inter alia, international cooperation; fully promote and protect all human rights and fundamental freedoms, including the right to the highest attainable standard of physical and mental health; integrate a gender perspective; address risk, vulnerability, prevention, care, treatment, and support and reduction of the impact of the epidemic; and strengthen health, education and legal system capacity;

Gender Roles and Stereotypes

Article 47 - By 2003, establish time-bound national targets to achieve the internationally agreed global prevention goal to reduce by 2005 HIV prevalence among you men and women aged 15 to 24 in the most affected countries by 25 per cent and by 25 per cent globally by 2010, and intensify efforts to achieve these targets as well as challenge gender stereotypes and attitudes, and gender inequalities in relation to HIV/AIDS, encouraging the active involvement of men and boys;

Empowerment of Women and Elimination of Discrimination

Article 14 - Stressing that gender equality and the empowerment of women are fundamental elements in the reduction of the vulnerability of women and girls to HIV/AIDS;

Article 59 - By 2005, bearing in mind the context and character of the epidemic and that, globally, women and girls are disproportionately affected by HIV/AIDS, develop and accelerate the implementation of national strategies that promote the advancement of women and women's full enjoyment of all human rights; promote shared responsibility of men and women to ensure safe sex; and empower women to have control over and decide freely and responsibly on matters related to their sexuality to increase their ability to protect themselves from HIV infection;

Background and Rationale

The resolutions and declarations made at the UNGASS are not without precedent. For some useful background information on Gender and HIV, see:

o **The International Conference on Population and Development** (Cairo 1995) - (**Article C**. Sexually transmitted diseases and prevention of human immunodeficiency virus)

<http://www.un.org/popin/icpd/conference/offeng/poa.html>

o **The Fourth World Conference on Women** (Beijing 1995) (**Strategic objective C.3**. - Undertake gender-sensitive initiatives that address sexually transmitted diseases, HIV/AIDS, and sexual and reproductive health issues)

<http://www.un.org/womenwatch/daw/beijing/platform/health.htm>

Article 60 - By 2005, implement measures to increase capacities of women and adolescent girls to protect themselves from the risk of HIV infection, principally through the provision of health care and health services, including for sexual and reproductive health, and through prevention education that promotes gender equality within a culturally and gender-sensitive framework;

Article 61 - By 2005, ensure development and accelerated implementation of national strategies for women's empowerment, the promotion and protection of women's full enjoyment of all human rights and reduction of their vulnerability to HIV/AIDS through the elimination of all forms of discrimination, as well as all forms of violence against women and girls, including harmful traditional and customary practices, abuse, rape and other forms of sexual violence, battering and trafficking in women and girls;

Sexual Exploitation

Article 62 - By 2003, in order to complement prevention programmes that address activities which place individuals at risk of HIV infection, such as risky and unsafe sexual behaviour and injecting drug use, have in place in all countries strategies, policies and programmes that identify and begin to address those factors that make individuals particularly vulnerable to HIV infection, including...all types of sexual exploitation of women, girls and boys, including for commercial reasons. Such strategies, policies and programmes should address the gender dimension of the epidemic, specify the action that will be taken to address vulnerability and set targets for achievement;

Emergency Situations

Article 75 - By 2003, develop and begin to implement national strategies that incorporate HIV/AIDS awareness, prevention, care and treatment elements into programmes that respond to emergency situations, recognizing that populations destabilized by armed conflict, humanitarian emergencies, and natural disasters, including refugees, internally displaced persons and in particular women and children, are at increased risk of exposure to HIV infection; and, where appropriate, factor HIV/AIDS components into international assistance programmes;

Mother-to-Child Transmission

Article 54 - By 2005, reduce the proportion of infants infected with HIV by 20 percent, and by 50 percent by 2010, by ensuring that 80 percent of pregnant women accessing antenatal care have information, counselling and other HIV-prevention services available to them, increasing the availability of and providing access for HIV-infected women and babies to effective treatment to reduce mother-to-child transmission of HIV, as through effective interventions for HIV-infected women, including voluntary and confidential counselling and testing, access to treatment, especially anti-retroviral therapy and, where appropriate, breast-milk substitutes and the provision of a continuum of care;

Women as Caregivers

Article 68 - By 2003, evaluate the economic and social impact of the HIV/AIDS epidemic and develop multi-sectoral strategies to address the impact at the individual, family, community and national levels; develop and accelerate the implementation of national poverty eradication strategies to address the impact of HIV/AIDS on household income, livelihoods and access to basic social services, with special focus on individuals, families and communities severely affected by the epidemic; review the social and economic impact of HIV/AIDS at all levels of society, especially on women and the elderly, particularly in their role as caregivers...;

Article 94 - Conduct national periodic reviews with the participation of civil society, particularly people living with HIV/AIDS, vulnerable groups and caregivers, of progress achieved in realizing these commitments, identify problems and obstacles, to achieving progress, and ensure wide dissemination of the results of these reviews;

Female-controlled Methods of Prevention

Article 23 - Recognizing that effective prevention, care and treatment strategies will require behavioural changes and increased availability of and non-discriminatory access to, inter alia, vaccines, condoms, microbicides, lubricants, sterile injecting equipment, drugs, including anti-retroviral therapy, diagnostics and related technologies, as well as increased research and development;

Access to IEC

Article 53 - By 2005, ensure that at least 90 percent, and by 2010 at least 95 percent of young men and women aged 15 to 24 have access to the information, education, including peer education and youth-specific HIV education, and services necessary to develop the life skills required to reduce their vulnerability to HIV infection, in full partnership with young persons, parents, families, educators and health-care providers;

- Visit the UNAIDS Website for the full text of the UNGASS Declaration of Commitment:
 - In English: http://www.unaids.org/UNGASS/docs/AIDSDeclaration_en.pdf
 - In Spanish: http://www.unaids.org/UNGASS/docs/AIDSDeclaration_sp.pdf