

Commission on the Status of Women

Fifty-third session

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Priority theme: The equal sharing of responsibilities of women and men, including caregiving in the context of HIV/AIDS

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Statement

Gender inequality has long been acknowledged as a cause for discrimination and violence against women and girls. The Beijing Platform for Action in 1995, expressed a strong affirmation of the equal sharing of responsibilities for the family by men and women stating that a harmonious partnership between (women and men) is critical to their well-being and that of their families as well as to the consolidation of democracy. At Beijing +5, unfortunately, although the outcome document reflects much discussion on various aspects of the sharing of responsibilities of women and men, it does not provide a generally accepted measure for determining if any progress has been made. (A/S-23/10/Rev.1 (SUPPL. NO. 3)

Since that time, the rapid advance of the AIDS pandemic has served to increase the burden caused by the unequal sharing of responsibilities of women and men even further as has been documented by many of the papers produced by the Expert Group Meeting held in October 2008 to prepare for this session.

Testimony from our members working in countries with a high incidence of HIV/AIDS throughout the world gives further concrete evidence of this increased burden.

It also gives evidence of the need for changes in policy to promote greater efforts toward equal sharing of responsibilities as the examples below indicate.

- Women are often tested for HIV in pregnancy. If they are positive, then we ask them to bring their spouse for counseling and testing, and often she refuses. She is afraid of being beaten or even worse totally rejected by him and by the family.
- In (my) country, the government does offer specific educational information (for healthy families) to assist, advise and educate women in relation to their own well-being and that of their families. However, such education does not include the men.
- Our greatest challenge is to care for children orphaned because of HIV/AIDS and widows who are often widowed at a very young age. We see many

parentified children, especially girls, who become heads of households and lose the opportunity for an education which can permit them to have a more productive role in society,

- The lack of possibilities for a woman to earn money results in greater social breakdown. This is accompanied by an increase in prostitution, which leads to new AIDS infections. We also see an increase in alcoholism aggravated by the selling of home-brewed liquor to earn a little more to support their families - “*How can I feed my children if I do not earn a few extra pennies?*”

We strongly affirm the statements in the Beijing Platform for Action calling for the equal sharing of responsibility of women and men and also the concerns for the promotion of gender equality expressed in the outcome document of Beijing +5.

Two levels of approach are required, one long term and the other more immediate, in the context of the HIV AIDS pandemic.

- Long term policies need to be designed, implemented and monitored with regard to comprehensive gender socialization programs so as to more rapidly bring about a ‘sharing consciousness’ between women and men – one that addresses patriarchal systems, power, privilege and valued resources.
- Comprehensive human rights educationally based programs to address widespread violence against women and girls supported by a legal framework which punishes this violence.

In the more immediate situation of caring in the context of HIV AIDS, we believe that there have been lessons learned particularly in sub-Saharan Africa which can be studied and adapted both in Africa and in other parts of the world. Some examples that have been pointed out in the papers of the expert group meeting are

- Volunteer caregiving programmes where women and men model equal sharing of responsibilities;
- Studying the relationships which exist between health care systems and home-based care which can mitigate the burden of AIDS on those systems. In some cases home-based health care organizations have eased the burden on families which provide this care. Many types of organizations have been involved in these programmes: community-based organizations, faith-based organizations. (*Towards equal sharing of AIDS caring responsibilities: Learning from Africa*: Olagoke Akintola for the Division for the Advancement of Women Expert Group Meeting on the Priority Theme, Geneva, 6-9 October 2008);
- Education of donor organizations regarding the benefits of promoting the equal sharing of responsibilities of women and men in the context of caregiving for HIV/AIDS.

We call for the Fifty-Third session of the Commission on the Status of Women to produce a strong outcome document and we recommend:

- That governments develop policy incentives for men to encourage their active

participation in counseling programmes particularly those which relate to HIV and AIDS.

- That just as male leaders have promoted HIV testing that they would also model and support equal sharing of responsibilities of women and men in the household domain and particularly in the context of caregiving for HIV and AIDS.

- That good practices of educational programmes to eradicate gender stereotypes and develop equal sharing between women and men from early ages be studied and model programmes be made widely available.

- That government policies be designed and implemented to raise the status of caregiving activities among males and also to provide incentives for programmes where the equal sharing of responsibilities has been implemented successfully. This will require the development of benchmarks and indicators to measure the change. It will also require participation of both women and men in the development of such programmes in ways that are culturally sensitive to local settings.