

# Statement

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## **Statement of the UNAIDS Secretariat to the 56<sup>th</sup> Session of the CEDAW**

### **General Discussion on Rural Women Geneva, 7 October 2013**

Chairperson, distinguished CEDAW members, ladies and gentlemen,

The UNAIDS Secretariat is delighted to have the opportunity to take part in this important discussion on the promotion and protection of the human rights of rural women. We would like to use this occasion to underscore the strong link between the extent that rural women are able to enjoy their rights and their vulnerability to HIV.

Globally, every minute, a young woman acquires HIV. Nearly one quarter (24%) of all adult new infections in low and middle income countries occur among young women 15-24; 50% higher than their male peers (16%).<sup>1</sup> This disparity is most pronounced in Sub-Saharan Africa.<sup>2</sup>

Women, especially rural women, experience a range of harmful traditional practices which increase their vulnerability to HIV infection and impact. These include limited decision-making power both in the family and the wider community, affecting utilization of HIV services; violence against women, including forced sex; limited access to financial resources and assets, denial of property and inheritance rights, and widow-cleansing.

Violence against women is deeply rooted in many societies.<sup>3</sup> Recent research reveals that women who have been physically or sexually abused by their partners are 1.5 times more likely to acquire HIV, as compared to women who have not experienced partner violence.<sup>4</sup>

Due to their HIV status, women living with HIV are disproportionately affected by stigma and discrimination, as well as gender-based violence, both in the community and in the health system. Women who are economically dependent on their partners are more likely to discontinue antiretroviral therapy for fear of revealing their HIV

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<sup>1</sup>UNAIDS Global report, 2012

<sup>2</sup><http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTARD/0,contentMDK:20445375~menuPK:1308541~pagePK:148956~piPK:216618~theSitePK:336682,00.html>

<sup>3</sup> ICW Global. UN Women. Violence against Women Living with HIV/AIDS: A Background Paper. 2011

<sup>4</sup> WHO. Global and Regional Estimates of Violence against Women: Prevalence and Health Effects of Intimate Partner Violence. 2013  
and non-partner sexual violence

status to their husbands and suffering the potential negative consequences on their marriage, including violence, abandonment and divorce.<sup>5</sup>

For rural women living with HIV, access to a variety of goods and services to reduce the impact of HIV infection is a major and overarching challenge. These include access to information about HIV, to sexual and reproductive health services and to HIV treatment itself, to a healthy diet, adequate shelter, micro finance and social grants. These are all critical elements for an effective HIV response<sup>6</sup> and particular efforts to provide them must be made for rural women. Widely cited barriers to accessing HIV services among women are travel distance and/or transportation to services and financial issues with child care.<sup>7</sup> More specifically, blame for HIV infection; fear of abandonment, abuse and violence; and resulting stigma and discrimination, hinder women from accessing services which prevent vertical transmission from mother to child.<sup>8</sup> Last but not least, among the many challenges we want to highlight faced by rural women in the context of HIV, is the issue of care-giving. Women bear the burden of providing care to the ill members of their families. This care giving is neither recognized, supported nor remunerated and often falls on the shoulders of women and girls. It is time consuming and diverts women from income-generating activities, leading to further impoverishment.

It is high time for change on many fronts. Rural women, including those living with HIV, need to be empowered to be able to claim their rights and make informed choices, including in the context of HIV. How can we achieve this paradigm shift? The HIV response has demonstrated the critical importance of participation, voice and inclusion of affected communities. We need rural women living with, and affected by, HIV to be at the forefront of this effort. We need to engage rural women and empower them to claim their rights, including their right to health and their sexual and reproductive rights.

UNAIDS is working to enhance the legal and human rights literacy of affected communities including rural women. We are also working to ensure that national responses to HIV are gender transformative and catalyze social change for women and girls; and we are building bridges between the real life experiences of women living with HIV and ongoing policy-making processes through our Dialogue Platform on the Rights of Women Living with HIV.

We look forward to working with CEDAW, a crucial partner in the struggle for gender equality, to ensure that States report on steps taken to ensure that rural women can access HIV prevention, treatment, care and support services; that data is better disaggregated to reflect the situation of rural women; that harmful traditional practices and gender based violence are eradicated; that care-giving is supported and that governments and the UN provide the necessary space and support for rural women to effectuate the change they need.

UNAIDS has prioritized gender equality and zero tolerance for gender-based violence in its Strategy for 2011-2014. Please count on us as you take this important agenda forward. Thank you.

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<sup>5</sup> Women Out Loud, UNAIDS 2012, p.36

<sup>6</sup> Multi-country research on community care-givers, Ethiopia, Malawi, South Africa and Zambia Country Reports. Care-givers Action Network (CAN) July, 2013, p.5

<sup>7</sup> Women Out Loud, UNAIDS 2012, p.36

<sup>8</sup> Rapid Assessment of gender-related barriers in accessing services to prevent vertical transmission, UNAIDS, 2011.

