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**59th Session of the
United Nations Commission on Human Rights**

**Agenda item 12:
Integration of human rights of women and a gender perspective:
Violence against women
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Statement by

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Chairperson, distinguished delegates,

About half of the 42 million people living with HIV/AIDS worldwide are women and girls. No discussion on the rights of women can disregard the vulnerability and plight of women in the context of this deadly epidemic. HIV/AIDS cannot be successfully addressed, and therefore, the Millennium Development Goals not achieved, without a rights-based approach addressing the particular concerns of women and girls. We have already registered a decline in life expectancy because of AIDS and in some countries men will soon outnumber women in the most productive and fertile age groups.

The lack of enjoyment of human rights aggravates the vulnerability of women in a world of AIDS. The subordination of women in private and public life is compounding the risk to infection and to the ability of women to combine dealing with disease and sustain a household crumbling as family breadwinners die.

In the context of HIV/AIDS, women suffer double tragedy: one, discrimination de jure through gender biased laws such as with regard to inheritance rights; and two discrimination de facto through social practices rendering women second class citizens being subject to stigma and with few means of social security to make ends meet.

Biological, social, economic and cultural factors all contribute to women's vulnerability to HIV/AIDS. These factors have to be properly understood and addressed to protect women from falling victim to HIV, when transmission and risk exposure could very well be prevented. Girls in particular have a right to know about reproductive health to help them prevent transmission and protect their lives.

AIDS affects in particular young people in the prime of life. Young girls are taken out of school to help manage the household where HIV has weakened the capacity of adults to earn an income and to attend to farming and cattle. The situation in Southern Africa has seen AIDS affected communities suffer doubly from food insecurity and AIDS. Orphans and other affected children turn into child labour.

AIDS has led to a dramatic increase in female-headed households, surviving on increasingly meagre resources and sinking families into poverty and destitution. Women often are the prime care-givers and the first to have their own health and well-being neglected. Promoting the right to health should increasingly attend to gender equality in access to treatment.

UNAIDS welcomes that the Special Rapporteur on Health, Mr Paul Hunt, has made one of his priorities to examine HIV/AIDS issues within the interrelated themes of the right to health and poverty with due gender sensitive perspectives and addressing stigma and discrimination so common in the context of AIDS. UNAIDS looks forward to continue our close cooperation with him and the OHCHR, particularly in ensuring that action is taken to protect women's rights and in so doing reduce their vulnerability to HIV infection. UNAIDS has set aside USD 160.000 for cooperation with the OHCHR for the promotion and operationalisation of human rights in the context of HIV/AIDS, including the rights of women.

The evidence on the spread and impact of the HIV/AIDS epidemic indicates that women increasingly are disproportionately exposed to risks of HIV infection and burdened in AIDS affected households. In situations of violent conflict, this exposure is even harsher: rape as a weapon of war, coerced survival sex whereby girls and women have no other option but to trade sex in exchange for protection, shelter, food and care. It is a particular challenge to protect human rights in general and women's right in particular in times of conflict, and human rights protection should embrace protecting women and girls from sexual violence.

Chairperson, all of the above examples are violations of human rights. The centrality of human rights to reverse the spread of HIV/AIDS and to reduce its impact was recognised by all the UN member States in June 2001 when a Special Session of the General Assembly adopted the *Declaration of Commitment on HIV/AIDS*.

This framework of accountability *on HIV/AIDS* confirms that “globally, women and girls are disproportionately affected by HIV/AIDS” and suggests to “develop and accelerate the implementation of national strategies that promote the advancement of women and women's full enjoyment of 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.”

Through the *Declaration of Commitment* States have committed themselves “by 2005, to develop and begin to implement national, regional and international strategies that facilitate access to HIV/AIDS prevention programmes for migrant and mobile workers, including information on health and social services,”

Like in the *Declaration of Commitment on HIV/AIDS*, the Millennium Development Declaration, central to the MDGs, also places human rights and the dignity of the person as a cross-cutting issue. The MDG on gender equality and women's empowerment contributes to achieving many of the other goals, including the MDG on reversing the HIV/AIDS.

For UNAIDS promoting human rights of people living with HIV/AIDS and in particular the rights of women is a ground pillar in our work. Support to countries to develop policies and legal frameworks that advance gender equality and implement programmes aimed at reducing women vulnerabilities and risks to HIV/AIDS infection will continue to expand. We know that we have a strong ally in this work in the Office of the High Commissioner for Human Rights.

Thank you.