PRESS RELEASE

Forty years into the HIV epidemic, AIDS remains the leading cause of death of women of reproductive age—UNAIDS calls for bold action

Gender discrimination and violence, gaps in education and lack of economic empowerment and protection of sexual and reproductive health and rights are blocking progress

GENEVA/JOHANNESBURG, 5 March 2020—Ahead of International Women’s Day, UNAIDS has launched a new report showing that the stark inequalities and inequities between men and women are continuing to make women and girls more vulnerable to HIV. We’ve got the power urges governments to do more to empower women and girls and fulfil their human rights.

“The HIV epidemic holds a mirror up to the inequalities and injustices faced by women and girls and how the gaps in rights and services are exacerbating the epidemic,” said Winnie Byanyima, Executive Director of UNAIDS. “This is unacceptable, it is avoidable and it must end.”

Twenty-five years ago, governments took the historic step of adopting the Beijing Declaration and the Platform for Action, the most comprehensive and progressive global policy road map for fulfilling the human rights of women and girls and achieving gender equality.

Progress has been made in key areas. More girls are in school and gender gaps in primary schooling are closing globally, in some countries there are more women involved in political leadership and other countries have worked to protect women’s rights in legislation. HIV treatment has also been scaled up, so that by mid-2019 there were more than 24 million people living with HIV on treatment, including more than 13 million women aged 15 years and over.

The report shows, however, that many of the promises made to improve the lives of women and girls around the world have not been kept. Almost 40 years into the response, AIDS is still the leading cause of death for women aged between 15 and 49 years and around 6000 young women aged between 15 and 24 years acquire HIV every week.

We’ve got the power outlines some critical areas to address, including eliminating violence against women. In areas with a high HIV prevalence, intimate partner violence has been found to increase the risk of women acquiring HIV by 50%. Being HIV-positive can also be a trigger for violence, with women living with HIV frequently reporting violence from intimate partners, family and community members and in health services.

The report highlights that outside of sub-Saharan Africa, most women at risk of HIV belong to marginalized communities, such as sex workers, women who inject drugs, transgender women and women in prison. However, gender inequality, stigma and discrimination, criminalization, violence and other human rights violations continue to prevent them from accessing the services they need. Laws and policies need to be reformed in order to end harmful criminalization and coercive practices based on people’s sexuality, sexual activity, HIV status and gender.
For the AIDS response to be fully effective, policies and services must answer to what women and girls want and need. This includes ensuring adolescent-focused approaches and peer support systems and that rights, gender and non-violence components are integrated into comprehensive sexuality education. Data show that in 2019 adolescents younger than 18 years needed parental or guardian consent in 105 of 142 countries in order to take an HIV test and in 86 of 138 countries they needed consent to access HIV treatment and care.

Surveys from 2013 to 2018 also show that knowledge of HIV prevention remains worryingly low, particularly among women and girls. In sub-Saharan Africa, the region most affected by HIV, seven out of 10 young women did not have comprehensive knowledge about HIV. In contrast, countries that do invest in scaling up effective HIV prevention programmes show impressive results. When Lesotho provided a comprehensive package of HIV prevention programmes it saw new HIV infections among women and girls fall by 41% between 2010 and 2018.

There are huge gaps in education more generally. Studies show that keeping girls in school can have a protective effect against HIV. When Botswana extended mandatory secondary education, it found that each additional year of schooling after year 9 was associated with a 12% reduction in girls’ risk of acquiring HIV. However, nearly one in three adolescent girls from the poorest households around the world has never been to school.

The economic autonomy of women is crucial in its own right and an important component of the AIDS response, yet women still have far fewer economic opportunities than men and shoulder most unpaid care and domestic work. Only 88 countries of 190 had laws mandating equal pay for equal work. Ensuring legal protections to end gender discrimination and guaranteeing women equality before the law are critical to advancing the response to HIV.

“Women and adolescent girls are demanding their rights,” said Ms Byanyima. “Governments must act on those demands by providing resources and services to protect their rights and properly respond to their needs and perspectives.”

The report highlights a number of ways forward. These include investing in HIV policies and programmes proven to foster gender equality, investing in education, including comprehensive sexuality education and the economic empowerment of women and girls, reforming laws that uphold the equal rights of all women and girls, including measures to end stigma and discrimination, violence and criminalization directed at women and girls, holistic care and dignified treatment, the meaningful participation of women in all decision-making relating to HIV programming and supporting the leadership and engagement of women and young people in decision-making at all levels of the AIDS response.

**Contact**

UNAIDS Geneva | Sophie Barton-Knott | tel. +41 79 514 6896 | bartonknotts@unaids.org

UNAIDS Media | tel. +41 22 791 4237 | communications@unaids.org

**UNAIDS**

The Joint United Nations Programme on HIV/AIDS (UNAIDS) leads and inspires the world to achieve its shared vision of zero new HIV infections, zero discrimination and zero AIDS-related deaths. UNAIDS unites the efforts of 11 UN organizations—UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, UN Women, ILO, UNESCO, WHO and the World Bank—and works closely with global and national partners towards ending the AIDS epidemic by 2030 as part of the Sustainable Development Goals. Learn more at unaids.org and connect with us on Facebook, Twitter, Instagram and YouTube.