

ELIMINATION AND PREVENTION OF ALL FORMS OF VIOLENCE AGAINST WOMEN AND GIRLS

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SPEECH

By: Ms. Jantine Jacobi, Chief, Gender Equality and Diversity Division

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ELIMINATION and prevention of all forms of violence against women and girls

Madame Chairperson, Excellences, Distinguished Delegates,

This statement is on behalf of the Secretariat and the cosponsors of the Joint United Nations Programme on HIV/AIDS (UNAIDS) - UNDP, UNESCO, UNFPA, UNHCR, UNICEF, UNODC, UN Women, ILO, WFP, WHO, and the World Bank. We appreciate the opportunity to address the linkages between HIV and violence against women and girls during the 57th session of the Commission.

Madame Chairperson,

Violence against women and girls and HIV are intersecting human rights, development and public health problems worldwide. Both **violence against women and HIV are rooted in persistent gender inequality**, discrimination against women and girls, and the social and economic power-imbalances between women and men that exist in societies all over the world. Violence against women and HIV are also mutually reinforcing: **women who are subject to violence are at increased risk of HIV, and women who are living with HIV may experience stigma, discrimination and gender-based violence**^{i, ii, iii, iv.}

Globally, about half (49%) of all adults living with HIV are women^v. In sub-Saharan Africa, the region most severely affected by the epidemic, women constitute 58% of people living with HIV^{vi}. Young women aged 15–24 years are particularly vulnerable, with infection rates twice as high as in young men. This disparity is most pronounced in sub-Saharan Africa, where 3.1% of young women are living with HIV, versus 1.3% of young men. Each minute one young woman acquires HIV, accounting for 22% of all new HIV infections, with sexual transmission being the dominant mode of infection^{vii}.

While there are physiological reasons why women and girls have a greater risk of HIV acquisition than men and boys, strong evidence indicates that gender inequality more broadly, and violence against women in particular, play an important role in influencing their vulnerability to HIV. The intersections between HIV and violence against women are multiple and complex, and can be both direct and indirect.

Violence or threat of violence against women and girls compromise their ability to refuse sex, negotiate condom use, or to refuse to inject drugs with partner's equipment. Women who experience forced sexual intercourse, including by intimate partner, may be exposed to elevated HIV risk. The sexual violence perpetrated against women and girls may not only constitute a risk factor for HIV transmission in itself, but it can also lead to risk-taking behaviours in the aftermath of violence that increase the vulnerability to HIV. For example, women who have a previous history of sexual or physical violence in their childhood and adolescence may be more likely to have multiple sexual partners, or engage in harmful use of substances. Similarly, men who perpetrate sexual and/or physical violence are more likely to engage in high risk-taking behaviours that increase the risk of HIV.

Closing this vicious circle, women who are living with HIV may experience stigma, discrimination and even violence due to their status, including but not limited to intimate partner violence. Women living with HIV from several countries report that they have been subjected to coerced sterilisation.

Fear of rejection, abandonment and/or violence continue to be a major **barrier to HIV prevention, treatment and care**. Many women may avoid HIV testing and/or subsequent disclosure of their HIV status to the partner, which may compromise their access to treatment and hinder prevention (i.e. condom use, eMTCT, harm reduction programmes).

At the 2011 High-level meeting of the United Nations General Assembly, Member States unanimously adopted the Political Declaration on HIV and AIDS which recognized the need to address the interlinkages between violence against women and girls and HIV in order to ensure an effective response. They pledged to *eliminate gender inequalities, discrimination and gender-based violence to increase the capacity of women and girls to protect themselves from the risk of HIV infection, including by undertaking all necessary measures to empower women and girls, such as legal measures for the promotion and protection of women's full enjoyment of all human rights and elimination of violence against them; providing access to education and health services, including for sexual and reproductive health; strengthening their economic independence; and engaging men and boys in achieving gender equality.*

Madame Chairperson,

Directly or indirectly, violence against women increases women's and girl's risk of HIV infection. Some groups of women and girls are more likely to experience violence that may increase their vulnerability to HIV.

Sexual violence, especially against women and girls, is wide-spread in conflict and post-conflict situations. The unanimous adoption of the Security Council Resolution 1983 in June 2011 marked a determination to *address HIV-related needs of women and girls in the prevention and response to sexual violence in conflict and post-conflict situations, including through integration of HIV programmes into UN peacekeeping operations.*

Women in key populations at higher risk of HIV, such as women sex workers, transgender women, women who use drugs, and women in detention and prisons are more likely to experience violence. In many countries, there are laws that criminalize several of these groups, which only compound their vulnerability to both HIV and violence by impeding access to services. *In order to create an enabling environment to address HIV and violence against women in key populations, it is essential to remove the punitive laws and to strengthen access to services by ensuring that service providers do not engage in stigmatizing or discriminatory treatment of these women, and support community-led approaches.*

Though violence against women and girls and HIV affect women's and girl's lives in interconnected ways, these issues have typically been addressed separately. Closing this gap requires *integrating interventions that address violence against women and girls into policies, programmes and services addressing HIV, and vice-versa*, including provision of post rape care with post-exposure prophylaxis (PEP) of HIV, interventions that integrate violence prevention and counselling into HIV prevention/risk-reduction counselling, etc. It is also critical to continue and strengthen efforts aimed at: *empowering women and girls through integrated, multi-sectoral approaches (e.g. economic empowerment of women); transforming unequal social and cultural norms (e.g. promote norms and attitudes on gender equality among men and boys); ensuring comprehensive sexuality education; and developing and implementing laws, policies and programs that promote gender equality, prohibit violence against women and protect the rights of key populations. It is also important to invest in innovative participatory research projects and national data collection efforts that provide a better understanding of the diversity of women and the linkages between gender-based violence and HIV.*

Madame Chairperson,

UNAIDS Secretariat and its cosponsors are strongly committed to eliminating and preventing all forms of violence against women and girls. Gender equality and zero tolerance for gender-based violence are strategic priorities under the *UNAIDS Strategy 2011-2015: Getting to Zero*^{viii}. To help measure progress on gender equality and HIV, a global indicator on "prevalence of recent intimate partner violence" has been added to the core indicators for country reporting on the progress in the AIDS response,^{ix} with 52 countries having reported on the indicator. The UNAIDS family would like to reiterate its readiness to work with all partners to eliminate violence against women and girls and work towards the vision of Zero new HIV infections, Zero AIDS-related deaths, and Zero discrimination.

Thank you.

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- i Silverman J et al, 2008.
- ii Dunkle et al, 2004.
- iii Jewkes et al 2010.
- iv Iliyasu et al., 2011.
- v UNAIDS (2012), Women out loud: How women living with HIV will help the world end AIDS.
(http://www.unaids.org/en/media/unaids/contentassets/documents/unaidspublication/2012/20121211_Women_Out_Loud_en.pdf)
- vi UNAIDS (2012), Report on the global AIDS epidemic (http://www.unaids.org/en/media/unaids/contentassets/documents/epidemiology/2012/gr2012/20121120_UNAIDS_Global_Report_2012_with_annexes_en.pdf)
- vii UNAIDS (2012), Women out loud: How women living with HIV will help the world end AIDS.
- viii <http://www.unaids.org/en/aboutunaids/unaidsstrategygoalsby2015/>
- ix http://www.unaids.org/en/media/unaids/contentassets/documents/document/2013/GARPR_2013_guidelines_en.pdf