United Nations E/cn.6/2016/NGO/19



Economic and Social Council

Distr.: General 17 November 2015

Original: English

Commission on the Status of Women

Sixtieth session

14-24 March 2016

Follow-up to the Fourth World Conference on Women and to the twenty-third special session of the General Assembly entitled "Women 2000: gender equality, development and peace for the twenty-first century"

Statement submitted by International Council of AIDS Service Organizations, a non-governmental organization in consultative status with the Economic and Social Council*

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

^{*} The present statement is issued without formal editing.





Statement

HIV is widely acknowledged as a key cause for and a consequence of the violation of women's rights. More than twenty years ago, the Beijing Platform for Action recognized the staggering number of people living with HIV as well as new infections, and, critically, the gendered aspect of the epidemic and the importance for global HIV strategic responses to address the particular needs and vulnerabilities of women, particularly young women and adolescents. We recognize the significant advances made in by Millennium Development Goals 5 and 6, and look forward to the implementation of the Sustainable Development Goals, which include greater attention to gender equality both as a specific goal and as an overarching theme. While HIV is included under the health goal in the Sustainable Development Goals, we note with discouragement that the connections between HIV, gender and development are not clearly articulated in the Sustainable Development Goals. We therefore respectfully submit for consideration the following:

Women, girls and the economics of HIV

Although significant advances have been made in the global response to HIV, the epidemic persists and yet funding for this threat to public health — and the health of women and girls in particular — continues to shrink. At the current rate of reduced funding, the global goal of ending AIDS by 2030 simply will not be possible, especially considering that AIDS remains the leading cause of death for women (aged 15-44) worldwide [WHO, 2013]. We therefore urge Member States to recognize this persisting health concern and prioritize continued funding of the response to HIV as integral to the health and well-being of women and girls worldwide.

Women and girls and their sexual and reproductive health and rights

Globally, young women 15 to 24 years of age are at particular risk of HIV infection, early and unintended pregnancy, and violence, and they have infection rates twice as high as among young men. Young (aged 15-24) women account for more than a fifth of all new HIV infections and represent more than 40 per cent of new HIV infections among all women [UNAIDS GAP Report 2014]. More than half of people living with HIV are women, and AIDS remains one of the leading causes of death among women of reproductive age. Young women and girls are the most likely to have unmet reproductive health needs. Universal access to sexual and reproductive health services and reproductive rights is a critical element in rightsbased development, gender equality and empowerment of women and girls. The realization of the full range of sexual and reproductive health and rights is critical to all of the worthwhile aims in the post-2015 development agenda. Sexual and Reproductive Health Rights are key to reducing maternal mortality, tackling gender inequality, reducing HIV infection, and improving treatment access. The vulnerability of women and young people to HIV is linked to their limited access to Sexual and Reproductive Health Rights. We therefore encourage that "sexual and reproductive health and rights" are explicitly referenced by the Commission on the Status of Women within the context of the respect of the right of all women and girls to have control over and make decisions concerning their sexuality, which includes their sexual and reproductive health.

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Violence against women and girls

Women living with HIV are more vulnerable to gender-based violence; in turn, exposure to gender-based violence increases vulnerability to HIV. Women disproportionately bear the twin burdens of HIV vulnerability and limited access to sexual and reproductive health and rights. Evidence shows that women living with HIV who experience violence are less likely to have positive outcomes related to adherence to treatment, contributing to a hastened progression from HIV to AIDS complications. Member States have pledged to eliminate gender inequalities and gender-based violence, and increase the capacity of women and girls to protect themselves and future generations from HIV. These laudable goals are achievable, but only through strengthened, scaled-up action that will take them through the post 2015 development setting. We therefore urge that HIV be explicitly referenced and included in the Commission on the Status of Women 59 Declaration as a strong indication that HIV and AIDS are considered key determinants in women's health and well-being.

Conclusion

For the over 17 million women and girls living with HIV around the world, the epidemic is far from over. The current pace of progress is insufficient to reach several of the targets to be achieved by 2015 as agreed in the Political Declaration of the 2011 High Level Meeting on HIV/AIDS. Even with all the advances made, a young woman acquires HIV every minute — this means that 5 young women have contracted HIV while you were reading this statement. We therefore urge that no woman and girl living with HIV and no woman and girls vulnerable to HIV be left behind. We must preserve funding streams and maintain a continued focus on access to care, treatment, and support, prevention of stigma and discrimination, and increased attention to securing sexual, reproductive, and human rights protections for women and girls living with HIV. This body must take action to include language within the Commission on the Status of Women 60 declaration that reflects the reality for women and girls worldwide.

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