

**GENDER AND HIV/AIDS:
Mobilizing African Leadership
for Prevention and Access to
Treatment.**

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Gender Issues in HIV/AIDS Prevention

Prevention Policy and the Role of Parliamentarians

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1. WHY WOMEN?

- 58% of people living with HIV/AIDS in Sub-Saharan Africa are women.
- Adult African women are up to 1.5 times more likely to be infected with HIV than their male counterparts.
- Girls aged 15-24 are 2.7 times more likely to be infected than their male age mates.

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- “The toll on women and girls is beyond human imagining; it presents Africa and the world with a practical and moral challenge which places gender at the centre of human condition. The practice of ignoring gender analysis has turned out to be lethal.... For the African continent, it means economic and social survival. For the women and girls of Africa it is a matter of life and death.”

This is what Steven Lewis, the United Nations Secretary General’s special Envoy on HIV/AIDS in Africa said at the Barcelona International AIDS Conference on HIV/AIDS in Africa in July 2002.

2. WHO ARE THESE WOMEN?

They are people who:

- In their majority numbers vote people into parliaments.
- Form the bulk of working people in key developments activities in our communities yet they remain the poorest;
- Are responsible for bringing up children.
- Are responsible for caring for the sick; yet over 90% of the work they do either deliberately or by default not recognised nor rewarded in monetary terms.

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Maybe as we deliberate the issue of mobilising African Leadership on HIV/AIDS in this conference, we will need to provide an answer to this question;

- “where are these women we are talking about at levels where decisions are made, specifically where policies on HIV/AIDS are developed, be it at national, regional or global levels?”

3. KEY INTERNATIONAL AND REGIONAL COMMITMENTS ON GENDER & HIV/AIDS

- Millennium Development Goals (2000).
- Declaration of Commitment of the United Nations General Assembly Special Session on HIV/AIDS (2001).
- Abuja Declaration on HIV/AIDS, Tuberculosis and other Related Infectious Diseases (2001).
- Convention on the Elimination of All forms of Discrimination Against Women (1979).
- Protocol on the African Charter on Human and People's Rights on the Rights of Women in Africa (2003).

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- Gender and Development Declaration by Heads of State of SADC (1999).
- SADC HIV/AIDS Strategic Framework and Plan of Action (2003-2007).
- The Maseru Declaration on the Fight against HIV/AIDS in the SADC Region (2003).
- High level committee on Programmes policy document on “Organising the U.N Response to the triple threat of food insecurity, weakened capacity for governance and AIDS, particularly in Southern and Eastern Africa (2003).

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- Platform of Action, Fourth World Conference on Women (1995).
- Programme of Action, International Conference on Population and Development (1994).

Today a significant gap remains between these declarations and policy commitments, and the reality on the ground. The implementation of even a portion of these noble declarations can make a difference. But today in the SADC region and in my country, Lesotho, the pandemic remains explosive and new infections are still rising.

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- Nine out of the twelve SADC member states have populations of which more than 10% of adults between the ages of 15 and 49 were living with HIV and AIDS at the end of 2001.
- The time has come for the gender issue to become somebody's responsibility or better still everybody's responsibility.

4. WHAT ARE THE ISSUES WHICH SEEM TO COMPROMISE WOMEN'S OPPORTUNITY TO EFFECTIVE PREVENTION

- Lack of access to quality reproductive health and family planning services.
- Social status of women, roles and relations.
- Pervasive poverty relegating women to the periphery of economic development.
- Poor health infrastructure and non-expanding and non-improving health services when the need is at its highest.

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- Even where health facilities exist, in most cases they are not user friendly towards women and girls.
- Prejudice, discrimination and associated stigma.

5. WHAT CAN PARLIAMENTARIANS DO?

Before one can even begin to consider what Parliamentarians can do I feel it is important to raise the following issues:

- Parliaments need to be adequately resourced and empowered to play their role in the fight against HIV/AIDS.
- There is an urgent need to unpack the oversight role of parliament within a democratic dispensation. What does it really mean and within which rules does it operate?

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- Defining and streamlining the operating space for parliaments within the national coordinating response and in the context of the three guiding principles namely:
 - one agreed HIV/AIDS Action Framework
 - one national AIDS authority
 - one agreed country-level monitoring and evaluation system.

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- It is important always to remember that the challenge of HIV/AIDS has no precedence in recent human history. Parliaments therefore need the ability and capacity to be imaginative and willing to learn fast.
- Parliamentary democracy in the SADC region and in Africa as a whole is still fragile and unable to withstand shocks without strong support and commitment. The HIV/AIDS pandemic poses one of the greatest development challenges our fledgling democracies have had to face in recent years.

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- Yet our very democracies provide the most enabling environment to tackle the pandemic. Therefore the success of the fight against HIV/AIDS may present the best opportunity for democracy to succeed.
“Turning a crisis into an opportunity.”

5.1 ROLE OF PARLIAMENTARIANS

- Keep the HIV/AIDS agenda high on parliamentary activities, at national, regional and international levels.
- Provide the necessary leadership in an environment of competing demands.
- Scrutinise policies and legislation with an HIV/AIDS lens.
- Advance services and support as well as empowering policies and legislation.
- Lead from the front, be pro-active in making parliament a critical institution and partner in the national, regional and international response to HIV/AIDS.

6. CONCLUSION

The truth which we cannot run away from is that the pandemic has a gender dimension. If we have to win the fight, gender rules and relations have to be put in their proper perspective. There are no precedences, we have to learn and adjust as we go along but we have to learn fast as time is not on our side. The sheer economies of scale of our collective and collaborative efforts as partners is a strong force and a recipe for success.

I THANK YOU!