



Beijing at Ten:

UNFPA's Commitment to the Platform for Action



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Promoting girls' right to education in Kabul, Afghanistan, is one way of working towards achieving the objectives of the Beijing Platform for Action.

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Introduction

“We, the Governments participating in the Fourth World Conference on Women, gathered here in Beijing in September 1995, the year of the fiftieth anniversary of the founding of the United Nations, determined to advance the goals of equality, development and peace for all women everywhere in the interest of all humanity... Dedicate ourselves unreservedly to addressing these constraints and obstacles and thus enhancing further the advancement and empowerment of women all over the world, and agree that this requires urgent action in the spirit of determination, hope, cooperation and solidarity, now and to carry us forward into the next century.”

— *Beijing Declaration*

Beijing Platform for Action: 12 Critical Areas of Concern

- 1 Women and Poverty
- 2 Education and Training of Women
- 3 Women and Health
- 4 Violence against Women
- 5 Women and Armed Conflict
- 6 Women and the Economy
- 7 Women in Power and Decision-making
- 8 Institutional Mechanisms for the Advancement of Women
- 9 Human Rights of Women
- 10 Women and the Media
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- 12 The Girl-child

How Does the Work of UNFPA Reinforce the Beijing Declaration and Platform for Action?

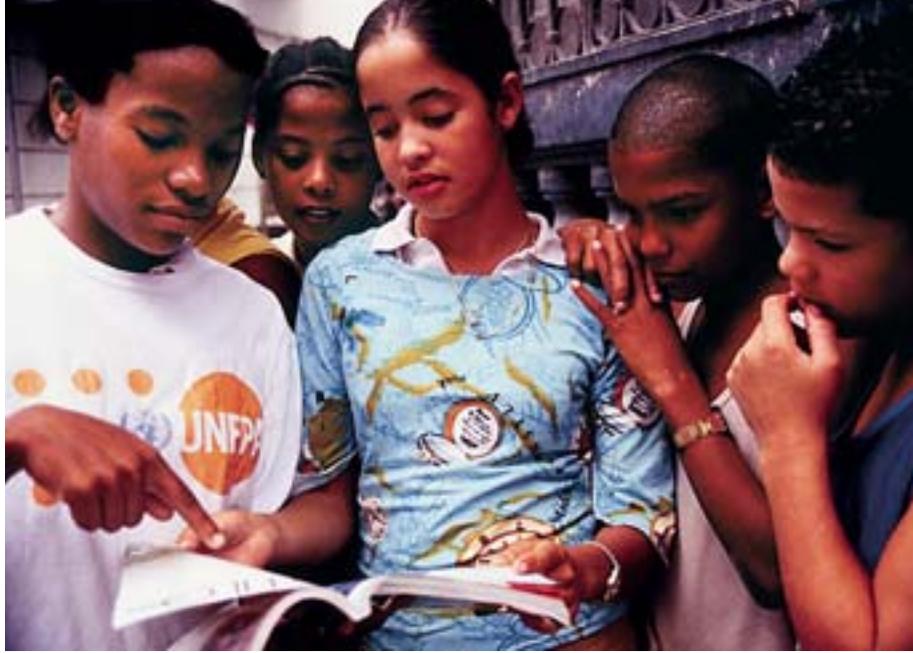
At the Fourth World Conference on Women (FWCW) in Beijing, China, September 1995, 189 countries adopted the Declaration and Platform for Action, reflecting a new international commitment to the goals of equality, development and peace for all women everywhere. Five years later, in June 2000, Member States reaffirmed their commitments to the twelve critical areas of concern in the Beijing Platform at the Beijing +5 session of the General Assembly at United Nations Headquarters in New York, and considered future actions and initiatives for the year 2000 and beyond.

The United Nations Population Fund (UNFPA) is fulfilling the principles and recommendations of Beijing through its ongoing work, mandated by the Programme of Action endorsed by 179 countries at the International Conference on Population and Development (ICPD) in Cairo in 1994. The Cairo agenda represents an international commitment to principles of reproductive health and rights for women and men, gender equality and male responsibility, and to the autonomy and empowerment of women everywhere.

The ICPD Programme of Action further established that population and development are inextricably linked, and that individual advancement and balanced development would be more efficiently achieved by focusing on satisfying individuals' needs and rights, rather than striving to obtain demographic targets.

The key to this new, rights-based approach is to empower women, as well as

men, and provide them with more choices by expanding access to education and health services, skills development and employment, and through their full involvement in policy- and decision-making processes at all levels. Indeed, one of the greatest achievements of the Cairo confer-



A UNFPA peer educator in Cuba provides information on health to adolescents.

ence was the recognition of the need to empower women, both as an end in itself and as a key to improving the quality of life for everyone. By setting out 20 year goals in the areas of universal education, reduction of infant and child mortality, reduction of maternal mortality and universal access to reproductive health services, the Programme of Action established a firm ground on which to build the realization of women's reproductive rights and gender equality.

The ICPD Programme of Action and the Beijing Platform play independent and mutually reinforcing roles in revolutionizing the international standards for the rights and

health of the world's women. The Cairo Conference took the lead in focusing on reproductive health, including family planning and sexual health, reproductive rights, education and women's empowerment as necessary tools to achieve social and economic progress and sustainable development. The Beijing Conference brought all rights of women to the forefront to promote equality, development and peace in the world.

Both conferences focused on gender equality as a concern for all and for the benefit of all, prescribing societies to take all women's roles into consideration, including their reproductive and productive roles. Both

ICPD + 5

The 1999 five-year review of the Cairo Programme of Action pushed the agenda forward. While showing that much progress had been made, the review revealed that much greater and urgent action was needed to reduce maternal morbidity and mortality, address the sexual and reproductive health needs of adolescents and young people, prevent the spread of HIV/AIDS, and provide reproductive health care to women and youth in emergency situations. The Key Actions adopted at the special session of the General Assembly affirm the ICPD goals and provide a set of benchmarks for achieving them.

conferences also recognized the importance of women's empowerment, which is the process by which unequal power relations between men and women are transformed and women gain equality with men. This transformation has been widely recognized — in international, regional and national conferences — as an imperative for national development and global progress. On the individual level, it includes processes by which women gain inner power to express and defend their rights and gain greater self-esteem and control over their own lives and relationships. Male participation and acceptance of changed roles are an essential element of these processes.

Some of the objectives that both conferences highlighted as crucial in achieving gender equality, equity and women's empowerment include:

- Securing women's human rights;
- Ensuring male involvement and responsibility in women's reproductive health;
- Providing quality health care services;

- Taking a life-cycle approach to women's health;
- Attending to adolescent sexual and reproductive health needs;
- Preventing and treating HIV/AIDS;
- Eliminating all forms of violence against women, including harmful cultural practices such as female genital mutilation/cutting (FGM/FGC).

Both conferences also emphasized the rights of particularly vulnerable groups, such as women migrants and refugees.

More than common objectives and subject areas, however, the two documents reflect principles of human rights shared and supported by the international community and affirmed in several international conventions, such as the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW, 1979) and the Convention on the Rights of the Child (CRC, 1989).

ICPD @ 10

The 10th anniversary of the ICPD provided a mid-term review of the 20-year commitments, and consisted of an in-depth, country-by-country analysis of achievements, constraints, lessons learned and ways to move forward to full implementation of the ICPD Programme of Action. In regional meetings, governments reiterated their commitment to the Cairo agenda. Overwhelming government support was also displayed at a special meeting of the UN General Assembly, where Ministers stressed the importance of the ICPD Programme of Action to the achievement of the Millennium Development Goals. A Global Survey undertaken by UNFPA showed that while countries have gone a long way in adopting laws to protect the rights of women and girls and providing reproductive health services, greater investments are needed in education, health and human rights of women and young people to ensure a more equitable and sustainable world.

Building on both the Beijing Platform for Action and the ICPD Programme of Action, the Millennium Declaration was unanimously adopted at the Millennium Summit in September 2000. It strives, among other objectives, to make the right to development a reality for everyone. The Millennium Development Goals (MDGs), developed from the Declaration, are mutually reinforcing and set the priority objectives to ensure sustainable development.

Why Do Sexual and Reproductive Health and Reproductive Rights Matter?

Reproductive health and rights are central to the fulfillment of some of the most basic human desires, for rich and poor alike. However, impoverished people are more likely to face poor health, and have less capacity to afford and access health care services. Furthermore, poor sexual and reproductive health outcomes strike harder at women than at men, as women are child bearers and often attend to the needs of their children before their own. The ability of women to control their own fertility is absolutely fundamental to women's empowerment and equality. When a woman can plan her family, she can plan the rest of her life. When she is healthy, she can be more productive. And when her reproductive rights are promoted and protected, she has freedom to participate more fully and equally in society.

- When women can control their fertility, they are in a better position to stay healthy and have the number of children they want.
- If women do not have the power to negotiate safer sex they are more susceptible to

The Millennium Development Goals

- 1 Eradicate extreme poverty and hunger
- 2 Achieve universal primary education
- 3 Promote gender equality and empower women
- 4 Reduce child mortality
- 5 Improve maternal health
- 6 Combat HIV/AIDS, malaria, and other diseases
- 7 Ensure environmental sustainability
- 8 Develop a global partnership for development

HIV, as well as other sexually transmitted infections (STIs).

- When women and girls delay childbearing, and contribute economically to the household, their sense of worth, confidence and decision-making in the household is also likely to increase, enhancing their position within families.
- Girls in smaller families are more likely to stay in school compared to girls in larger households.

- Sick women or women with too many children cannot fully contribute to their household economy or to the national productivity. They are also prevented from accessing education. This exacerbates their own poverty as well as the poverty of their families, communities and society.
- Fewer unwanted births lead to lower public expenditures on health, education and other social services. Moreover, preventing premature death and disability due to HIV/AIDS or complications of pregnancy and childbirth keeps families intact, relieving the burdens on society of taking care of orphans or destitute families.

The neglect of a woman's right to empowerment and sexual and reproductive health lies at the root of many problems that the international community has targeted for urgent action, including poverty, gender-based violence (GBV), HIV/AIDS and other STIs, maternal mortality, teenage pregnancy, and abandoned children. UNFPA collaborates closely, both at the global and local levels, with other UN agencies such as UNIFEM, UNICEF and UNDP, as well as with NGOs, to implement the twelve critical areas of the

Beijing Platform for Action with a clear starting point of the ICPD mandate, and the clear result of working towards achieving the MDGs. This publication shows some of the work that UNFPA does in each respective area.

Some of UNFPA's work is particularly challenging, and implementing it with the ownership and commitment of the whole community can be difficult. UNFPA believes that social and cultural realities present opportunities for advancing development goals and human rights. This is why UNFPA is also working with communities and local, religious and cultural leaders to share knowledge, listen to their experiences and together advance towards the fulfillment of the ICPD Programme of Action, the Beijing Platform for Action and the Millennium Development Goals.

Population dynamics and reproductive health must be an integral part of development planning and poverty reduction strategies. Safeguarding and promoting individuals' inherent human rights, including reproductive rights, and promoting the well-being of children, especially girls, are development goals in themselves. All couples and individuals have the right to decide freely and responsi-

ICPD PROGRAMME OF ACTION AND THE MILLENNIUM DEVELOPMENT GOALS (MDGs)

The full implementation of the ICPD Programme of Action is essential for the achievement of all the Millennium Development Goals. In particular, the access to quality reproductive health services is a key element to promote gender equality and empowering women, as emphasized in MDG 3, and thus creates sustainable development for all individuals (women, men and children), for entire families, communities and society as a whole. The Millennium Project has identified increased access to sexual and reproductive health information and services as one of 17 "quick wins" that could bring vital gains in well-being to millions of people and start countries on the path to achieving the MDGs.



Pregnant woman has herself checked at a clinic at the Grafton camp for displaced people in Freetown, Sierra Leone.

bly the number and spacing of their children as well as the right to the information and means to do so. Fully implementing the Cairo Programme of Action and the Beijing Platform will ensure that women's empowerment and gender equality stay at the centre of efforts to promote sustainable development for all humanity.

What Are Some Current Challenges to Implementing the Beijing Platform?

The Cairo Programme of Action and the Beijing Platform for Action provide detailed guidance on how to achieve the goals of gender equality, equity and the empowerment of women. In the current international arena, there is a resistance to the Beijing commitments among some organized groups, especially around issues such as reproductive rights. This can jeopardize implementation of the recommendations and delays the process of gender equality, equity and women's empowerment worldwide.

The traditional roles for women, primarily as mothers and wives, are still prevalent in most parts of the world, and there are major obstacles to viewing women as active participants in the development process. Other factors exacerbating the situation are the lack of good quality data disaggregated by age and sex, confusion about gender mainstreaming, and lack of funds to enable governments and civil society to meet commitments. Much of this reflects a lack of political will and commitment at both the international and national levels. Political leadership can play an important role for advancing gender equality, equity and women's empowerment.

In this context, it is important to further promote women's human rights, including reproductive rights, by building on the advancements made by the conferences in Beijing and Cairo. This publication highlights what UNFPA has done and is doing to support governments and civil society in each of the 12 critical areas of the Beijing Platform for Action.



Women and Poverty

“Women’s poverty is directly related to the absence of economic opportunities and autonomy, lack of access to economic resources, including credit, land ownership and inheritance, lack of access to education and support services and their minimal participation in the decision-making process. Poverty can also force women into situations in which they are vulnerable to sexual exploitation.”

— Beijing Platform for Action, Paragraph 51

Today, some 1.2 billion people in less developed countries, the majority of whom are women and children, are living in extreme poverty. Poverty is a multifaceted and widespread phenomenon, with devastating effects on entire populations, but with a disproportionate impact on women and girls. Poverty affects all aspects of people’s lives; not only income and consumption, but also education, nutrition, water and sanitation, employment, social and political participation, and not least, health, including reproductive health.

The poorest women have the least access to education and health services. Young women from the poorest households in low and middle income countries are more likely to enter into early marriages, to give birth at an early age, and are less likely to use maternal health services. On average 31 per cent of the poorest 20 per cent of women have skilled attendance at delivery compared to 84 per cent of the richest 20 per cent. The poor

also bear a disproportionate burden of maternal mortality, with 99 per cent of deaths occurring in developing countries. Some 529,000 women die from preventable deaths in pregnancy and childbirth each year, with millions of children left motherless. A recent maternal mortality study by WHO, UNICEF and UNFPA shows that a woman living in sub-Saharan Africa has a 1 in 16 chance of dying in pregnancy or childbirth compared to a 1 in 2,800 risk for a woman from Western Europe. Another example is that most women and young girls who are the targets of human and sexual trafficking are destitute or from poor families.

There is a reciprocal relationship between HIV/AIDS and poverty, a relationship that is growing stronger over time. Poverty is seen as the key factor leading to behaviours that expose many people to the risk of HIV infection. The biological factors predisposing girls and women to increased

Due to the disproportionate burden that poverty places on women, **the Beijing Platform for Action** particularly urged the international community to:

- ▶ Shape macroeconomic policies and development strategies to address the needs and efforts of women in poverty;
- ▶ Revise laws and administrative practices to ensure women's equal rights and access to economic resources;
- ▶ Give women access to banking, savings and credit mechanisms and institutions;
- ▶ Conduct research to discover the causes, effects and possible cures for the "feminization of poverty."

risk of HIV infection are aggravated by poverty. Poverty often results in a lack of control by women over the circumstances in which intercourse occurs, a lack of access to acceptable health services, and malnutrition, which slows down the healing process and depresses the immune system.

The prevalence of HIV/AIDS also exacerbates poverty, as it mostly affects people of working age. Women face additional vulnerabilities. For example, they may become impoverished when their husbands die of AIDS because they lose rights over, and access to, land.

The Declaration on the Right to Development, adopted by the UN General Assembly in 1986, confirmed the right to development as an inalienable human right. For women and girls, this right is harder to claim.

The Beijing +5 review identified obstacles that have constrained women's economic empowerment and exacerbated the feminization of poverty. Mainly they included gender inequalities and disparities in economic power-sharing, unequal distribution of unremunerated work, unequal access to and control over capital, particularly land and credit and to labour markets, as well as all harmful

traditional practices. National efforts to combat poverty have been impeded by debt burdens, excessive military spending, lack of financial support from the international community, as well as inefficient use of resources.

There is a long way to go before women achieve economic power equal to men. In the Global Survey conducted by UNFPA in 2003 in the context of the Ten-year anniversary of ICPD, only 66 of 144 responding countries had taken programmatic and administrative measures to provide economic opportunities for women.

The UNFPA Experience

UNFPA's work contributes to the ultimate goal of reducing poverty and achieving sustainable development. Without greater gender equality and women's empowerment, as well as universal access to gender-sensitive and quality reproductive health services, it will be difficult to achieve a more favourable balance between population, available resources, and sustainable development.

UNFPA is committed to actions to attack poverty and powerlessness, especially among women. About half of the UNFPA programme countries have developed strategies to pro-

vide women with economic opportunities. The Fund supports economic empowerment and microcredit initiatives in dozens of countries. UNFPA strongly supports addressing the feminization of poverty through the integration of gender concerns in macroeconomic policy and poverty reduction strategies.

In **Viet Nam**, UNFPA and partners support national efforts that link economic empowerment, environmental management and reproductive health services. Participation involves 500 Women's Savings Groups in nine provinces with a membership of over 12,000 women.

The Production Credit for Rural Women, the Mothers' Club Central Committee and UNFPA, together assist national efforts for the empowerment of women in **Nepal**. By strengthening mothers' groups for community action, women's leadership qualities are developed and their confidence to improve household economics, family planning and health, and related issues is increased.

In the **Latin American and Caribbean region**, a UN Interagency Project on the use of gender indicators for the design of public policies, which reviewed the links between gender and poverty, resulted in reproductive rights being integrated as "new dimensions" in policy making. The Economic Commission for Latin America and the Caribbean (ECLAC) Regional Conference on Statistics recommended integrating sexual and reproductive health, including access to services, into methodologies for measuring poverty.

In **Nicaragua**, UNFPA has worked to integrate population dynamics and gender aspects into the Poverty Reduction Strategy Paper, giving these issues greater emphasis in the social and economic policy documents

of the Government. On the macro-level, this clarified the progress of the demographic transition in Nicaragua, including the issue of the "demographic bonus." On the micro-level, UNFPA analysed household survey data to show the greater upward economic mobility enjoyed by families with fewer dependent children; and investigated the relationship between the productive and



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Woman with children sitting on edge Stupa, a Buddhist temple just outside Nepal's capital.

reproductive roles of women, particularly regarding the provision of microcredit, which often results in the greater economic participation by women and lower fertility.

Supported by UNFPA and the Women National Committee along with the Red Crescent Association, a two-day workshop was held in **Yemen** in December 2004 to train Red Crescent volunteers on gender issues and how they can be incorporated into development programmes. Red Crescent volunteers are crucial for raising awareness among society members on issues such as gender, women's empowerment, women's political participation, violence against women and discriminative laws.

Education and Training of Women

“Creation of an educational and social environment, in which women and men, girls and boys, are treated equally and encouraged to achieve their full potential, respecting their freedom of thought, conscience, religion and belief, and where educational resources promote non-stereotyped images of women and men, would be effective in the elimination of the causes of discrimination against women and inequalities between women and men.”

— Beijing Platform for Action, Paragraph 72

Education generates development both for the individual, and for the community and society as a whole. Educated women are more independent, self-confident and able to exercise their human rights. Educated mothers are more likely to send their children to school; they also get married later and have fewer children. An extra year of schooling for girls reduces fertility rates by 5-10 per cent. In turn, girls born into smaller families have a greater chance of attending and completing school. Education, particularly of women and girls, can stop poverty from being transferred to future generations.

Furthermore, educated mothers have healthier families, as they are able to access and use beneficial information about health-care for themselves and their families and use health services more often. Education of women has proved to be the most influential factor in improving child health and reducing infant mortality.

Education is a key defence against the spread of HIV. Providing more educational opportunities for girls and young women is a priority for UNFPA, as well as one of the eight Millennium Development Goals. Studies in many countries have linked higher education levels with increased AIDS awareness and knowledge, higher rates of condom use, and greater communication on HIV prevention among partners. Evidence shows that secondary education can significantly reduce girls' vulnerability to HIV, since those years of schooling boost the skills and opportunities they need to achieve greater economic independence. Experience in many countries confirms that school subsidies increase girls' access to education and offer other benefits for girls and their families. This is one of the Quick Wins identified by the Millennium Project to accelerate development progress.

The benefit of education for girls is indisputable. However, in most countries, the

education of boys is more highly valued than that of girls. While nearly all boys begin primary school, only three out of four girls do. Globally, nearly 600 million women are illiterate, compared to 320 million men. Gender disparities in education have many causes including parents' seeing fewer economic benefits from educating girls. When family resources are limited, they often give higher priority to the education of sons. Decisions about schooling for girls are also influenced by social norms such as the value placed on marrying girls while they are still virgins and on early childbearing.

The right to education has a firm foundation in the human rights tradition. Article

10 of the Convention on the Elimination of All forms of Discrimination against Women calls on states parties to take appropriate measures to ensure women's equal rights with men in the field of education, and article 28 of the Convention on the Rights of the Child denotes a child's right to education on the basis of equal opportunity. Education is a fundamental human right for everyone, and in ensuring this right it is particularly important to focus on the opportunities provided for women and girls.

Unfortunately, much more needs to be done before all women can enjoy the empowerment that education provides. The Beijing +5 review pointed out that efforts to

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Girls education is critical to expanding their choices in life. Here, girls attend school in Pakistan.

increase the literacy levels and access to education of women and girls was often constricted by lack of resources, political will and commitment among governments to undertake educational reforms. Likewise, traditional roles and stereotyping of women continue to deter women's educational advancement.

Only 58 of 142 responding countries in UNFPA's Global Survey in 2003 reported an increase in public spending on schools, and 14 countries had taken measures such as advocacy campaigns to promote education of girls. Of 129 responding countries 23 had promulgated laws and legislation for equal education of girls and boys, and 16 had provided an increased number of girls' schools at the secondary level. Out of 140 responding countries, 124 had school curricula that included reproductive health and/or life skills, 27 countries implemented peer education programmes on reproductive health, and 10 countries had produced training manuals and/or teaching guides.

The UNFPA Experience

UNFPA is a convener of the Education for All initiative. In partnership with UNICEF and WHO, the Fund has reached out to the specific needs of young women and men in thirteen countries. Though the activities in each country vary, all work to improve the rights and opportunities of adolescent girls. The inter-agency programme, funded by the United Nations Foundation, works to create an environment conducive to keeping girls in school through the secondary level and increase literacy.

In **Senegal**, UNFPA is helping some 10,000 girls and young women from poor disadvantaged families break the cycle of poverty. Through close links with communities and NGOs, girls are receiving comprehensive education, with an emphasis on gender and human rights. Some are being trained as peer educators. In addition to training in income-generating skills, girls now have access to youth-friendly reproductive and sexual health information and services.

The Beijing Platform for Action affirmed everyone's right to education, with special attention to women and girls, particularly as education is a foundation for women's empowerment. Education enables women to grasp opportunities, challenge traditional roles and fundamentally change their lives in the direction that they desire. The platform specifically urges governments and private organizations to act on the following recommendations:

- ▶ Ensuring equal access to education;
- ▶ Eradicating illiteracy among women;
- ▶ Improving women's access to vocational training, science and technology, and to continuing education;
- ▶ Developing non-discriminatory education and training;
- ▶ Allocating enough resources for, and monitoring the implementation of, educational reforms;
- ▶ Promoting lifelong education and training for girls and women.



Girls, mostly former abductees in the conflict in Sierra Leone, attend a vocational programme which will empower them to build a better life.

In the **Latin American region**, UNFPA has supported several successful initiatives, which have focused on indigenous women's empowerment, sexual education and literacy, and access to sexual and reproductive health services. *The Bilingual Literacy Project in Reproductive Health with a Gender and Intercultural Approach* in **Bolivia** targeted 75,000 indigenous women and 25,000 men to increase their literacy and reproductive health status. By training educational coordinators and teachers in the Quechua-Spanish bilingual methods on sexual and reproductive health, it further increased the literacy of men and women in 35 municipalities. This initiative was awarded with an international UNESCO award for its progressive gender and culturally sensitive approach.

In the **Arab States region**, support is provided for capacity building on Women Self-Empowerment (WSE) skills and competencies, including training of facilitators,

women leaders and NGOs, in **Algeria, Jordan, Lebanon, Morocco, Occupied Palestinian Territories, Syria and Tunisia.**

In **Benin**, UNFPA supports a programme for youth in cooperation with the Government that integrates job training with education about preventing HIV and unwanted pregnancies, so trainees can also become local advocates for health.

UNFPA's strategic approach engages decision makers at all levels to support programmes aimed at keeping girls in school longer and improving adolescent reproductive health. For instance, in **Bangladesh**, an initiative empowers adolescents through the provision of quality adolescent-friendly reproductive health services, skills development and income generation activities, as well as education on gender issues and reproductive health.

Women and Health

“Women’s right to the enjoyment of the highest standard of health must be secured throughout the whole life cycle in equality with men. Women are affected by many of the same health conditions as men, but women experience them differently. The prevalence among women of poverty and economic dependence, their experience of violence, negative attitudes towards women and girls, racial and other forms of discrimination, the limited power many women have over their sexual and reproductive lives and lack of influence in decision-making are social realities which have an adverse impact on their health.”

— Beijing Platform for Action, Paragraph 92

Attending to a woman’s sexual and reproductive health care needs throughout the life cycle is one of the many strategies for achieving gender equality and empowerment of women. Inadequacies and inefficiencies in health provision cause almost one fifth of the worldwide burden of illness and premature death, and one third of the illness and death among women of reproductive age. Around 8 million women suffer life-threatening pregnancy related complications each year, and 35 per cent of pregnant women in developing countries, or 45 million each year, receive no antenatal care. Every minute a woman dies in childbirth, which means more than 500,000 deaths per year.

Some 340 million new cases of curable sexually transmitted infections (STIs) occur every year. This figure does not include HIV or other viral STIs — including hepatitis B,

genital herpes and genital warts, which are not curable. Women are at a greater risk of contracting STIs than men, and screening is more difficult; 70 per cent of women with STIs do not have symptoms compared to 10 per cent of men. Sexually transmitted infections are the leading cause of health problems for women of reproductive age after complications of pregnancy and childbirth. They can cause pregnancy-related complications, including spontaneous abortions, premature birth, stillbirth and congenital infections. They can also lead to pelvic inflammatory disease and cervical cancer. STIs also increase the risk of being infected with HIV.

HIV/AIDS is the leading cause of death for adults between 15 and 49 years of age, and as the epidemic spreads through the general population, women are increasingly affected. Today, more than 20 years into the

epidemic, women account for nearly half the 40 million people living with HIV worldwide. In sub-Saharan Africa, young women aged 15 to 24 are more than three times as likely to be infected as young men. HIV infection further affects women and their children, as the virus can be spread to newborns during pregnancy, childbirth and breastfeeding.

Despite this alarming trend, women know less than men about how HIV is transmitted and how to prevent infection. What little they do know is often rendered useless by their relative powerlessness to refuse sex or negotiate safer sex due to discrimination and/or violence, especially in the context of marriage. Reversing the spread of HIV/AIDS must address the critical role that gender relations play in sexual and reproductive life, and how it affects HIV prevention.

The right to health is established in the major human rights treaties of our time. Article 24 of the CRC recognizes the right of the child to the enjoyment of the highest attainable standard of health and. Article 12 of CEDAW calls on states parties to “ensure, on a basis of equality of men and women, access to health

care services, including those related to family planning.” Article 12 of the International Convention on Economic, Social and Cultural Rights recognizes the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.

Furthermore, three of the eight MDGs, eight of the 18 targets, and 18 of the 48 indicators relate to health.

The Beijing +5 review in 2000 showed that the gap between and within rich and poor countries with respect to infant mortality and maternal mortality and morbidity rates, as well as measures undertaken to address the health of women and girls, given their special vulnerability to sexually transmitted infections, including HIV/AIDS, remained unacceptably large. Some of the obstacles preventing women and girls from enjoying their highest attainable standard of health include lack of investment in essential obstetric care, absence of a holistic approach to health, lack of gender-specific health research and technology, and insufficient gender sensitivity in the provision of health information, health care and services.

The Beijing Platform affirms women’s right to enjoy the highest attainable standard of physical and mental health, and specifically calls on governments and private organizations to:

- ▶ Make appropriate and affordable health care and information available to women of all ages;
- ▶ Bolster preventive programmes that promote women’s health;
- ▶ Begin to address the problems of sexually transmitted infections, HIV/AIDS, and sexual and reproductive health in gender-sensitive programmes;
- Promote research and disseminating information on women’s health;
- Increase funding and monitoring results for women’s health.

The UNFPA Global Survey (2003) showed that 77 of 143 responding countries had increased staff and training to increase access to high-quality reproductive health services. However, merely 48 countries had increased the number of service delivery points, and only 36 had allocated more resources to reproductive health.

The UNFPA Experience

UNFPA is committed to partnerships and alliances with governments, the UN system, civil society and the private sector to improve reproductive health and to more fully link reproductive health services with HIV prevention. UNFPA was an active member of the Secretary-General's task force on women, girls and HIV/AIDS in southern Africa. UNFPA is also a member of the

Global Coalition on Women and AIDS (GCWA), a new initiative by UNAIDS, supported by activists, leaders, government representatives, community workers and celebrities. The GCWA has brought two issues to the top of the gender and HIV agenda: young girls and HIV/AIDS, and the role of women living with HIV/AIDS in addressing the issue.

In June 2004, UNFPA and UNAIDS, in collaboration with Family Care International, convened a high-level global consultation at the Rockefeller Foundation in New York. Participants, including parliamentarians, ambassadors, leaders of United Nations and other multilateral agencies, donor organization officials, community and non-governmental organization leaders, young people, and people living with HIV issued *The New York*

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Reproductive health information at a local clinic in Na Phoon, Viet Nam.

Call to Commitment: Linking HIV/AIDS and Sexual and Reproductive Health.

In **Armenia**, UNFPA is funding the project *Improving Sexual and Reproductive Health of Women, Men and Young People*, which aims to provide basic equipment, materials and protocols, and develop capacity for a timely, quality and evidence-based integrated service provision, including antenatal, family planning and STI services and HIV/AIDS counselling. This multi-pronged project also contributes to the improved access to sexual and reproductive health information and services for young people.

In the **Occupied Palestinian Territories**, UNFPA responded to the humanitarian crisis through provision of emergency obstetric care, including provision of equipment, training, and additional support for the Women's Health Centres in Al-Breij, Jabalia, and Hebron that provide psychological and social counselling to traumatized women and their families.

A regional project on HIV prevention in the Arab States works with women and vulnerable groups to improve utilization of quality reproductive health services and information dissemination for HIV/AIDS prevention for women, men, and youth in seven countries; **Lebanon, Morocco, the Occupied Palestinian Territories, Somalia, Sudan, Syria and Yemen.**

The UNFPA Campaign to End Fistula covers some 30 countries in sub-Saharan Africa, South Asia and the Arab States region. The Campaign works in three key areas: prevention, treatment and support to help women who have been repaired return to their communities. The Campaign is implemented in three phases: assessing needs, planning interventions and imple-

menting national strategies. Obstetric fistula is caused by prolonged labour without timely medical intervention, which leaves women incontinent, and subsequently, often neglected and ostracized by their communities. At the new National Fistula Centre in **Bangladesh** supported by UNFPA, over 150 complicated surgeries on fistula repair were performed between 2003 and 2004 and about 35 doctors and 18 nurses have received trainers training on fistula management and repair. More providers from the centre were scheduled for training at the Addis Ababa Hospital for late 2004. In addition, the centre has initiated a course on fistula surgery and management.

In 76 countries, UNFPA supports training of health personnel in various aspects of maternal care, including emergency obstetric care, prenatal and post-natal counselling, delivery care norms and procedures and use of postpartum family planning services. For instance, in **Mozambique**, training of nurses to perform Caesarean sections resulted in making emergency obstetric care available at the lowest levels of the health system, as well as in remote rural areas. In the **Philippines**, the Gattaran Birthing Centres and Pre-natals' Forum, located in the Gattaran municipality where 75 per cent of the population live below the poverty line, started receiving support from UNFPA in 1998 for a 10-bed hospital. Services have since expanded to include family planning, treatment for STIs and maternal and child-care through birthing centres, keeping maternal mortality at a minimum.

Violence against Women

“Acts or threats of violence, whether occurring within the home or in the community, or perpetrated or condoned by the State, instil fear and insecurity in women’s lives and are obstacles to the achievement of equality and for development and peace. The fear of violence, including harassment, is a permanent constraint on the mobility of women and limits their access to resources and basic activities. High social, health and economic costs to the individual and society are associated with violence against women. Violence against women is one of the crucial social mechanisms by which women are forced into a subordinate position compared with men.”

— Beijing Platform, Paragraph 117

One out of three women in the world has been beaten, coerced into sex or abused in some other way, and most often by a man she knows, including her husband or other male relatives. Still, despite this common occurrence, violence against women is shrouded in silence and shame. Victims’ silent suffering is therefore often undiagnosed and untreated. Worldwide, violence against women and girls causes more death and disability for women between 15 and 44 than cancer, malaria, traffic accidents and war.

Violence and the fear of violence make it hard for women to access prevention, treatment and care for HIV/AIDS, and the very fact that they are living with violence seems to increase their susceptibility to HIV.

Women who are beaten by their husbands or boyfriends are 48 per cent more likely to become infected by HIV than those who are not. Those who are emotionally or financially dominated by their partner are 52 per cent more likely to be infected than those who are not dominated. This increased vulnerability is caused by several issues, including lack of control over intercourse and contraception and forced vaginal penetration resulting in abrasions and cuts.

The UN Declaration on the Elimination of Violence against Women (1993) recognized that “violence against women is a manifestation of historically unequal power relations between men and women, which have led to domination over and discrimina-

tion against women by men and to the prevention of the full advancement of women, and that violence against women is one of the crucial social mechanisms by which women are forced into a subordinate position compared with men.”

Gender-based violence takes many forms, from verbal abuse to rape and practices such as female genital mutilation/cutting, which are prevalent all over the world, and are not only physically and psychologically damaging, but constitutes a violation of human rights as well. Many of those who have experienced gender-based violence never seek help, and due to the lack of research, not much hard data on the issue is available. This complicates both interventions estimations of the scope of the problem.

The Beijing +5 review identified continued obstacles to addressing violence against women. Foremost among these was an insufficiently multidisciplinary approach to addressing the problem on the national level, including in the health system, workplace, media, and education and justice systems. The review found that awareness of prevention and consequences of violence as well as

the rights of victims is lacking, and most legal measures implemented are weak.

In the UNFPA Global Survey, 97 of 147 responding countries worldwide had established laws that punished gender-based violence, however only 24 countries actually enforced them. Thirty-six countries had trained service providers or government officials about gender-based violence and the same amount of countries had set up monitoring mechanisms. Fifty-four of 147 responding countries reported that they had established national commissions on gender-based violence, and 36 countries had set up institutional mechanisms to monitor violence against women.

The UNFPA Experience

UNFPA is committed to addressing the difficult issue of gender-based violence. Because gender-based violence is sustained by silence, women’s voices must be heard. UNFPA puts every effort into enabling women to speak out against gender-based violence, and to get help when they are victims of it. The Fund is also committed to keeping gender-based violence in the

The Beijing Platform for Action defines violence against women as “any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such act, coercion or arbitrary deprivation of liberty, whether occurring in public or private life.” Recognizing that violence against women is a human rights violation, the Beijing Platform for Action calls on the international community to:

- ▶ Take integrated measures to prevent violence against women;
- ▶ Study the causes and consequences of violence against women and the effectiveness of preventive measures;
- ▶ Eliminate trafficking in women and assisting victims of violence due to prostitution and trafficking.



Prostitute in Piazza area of Addis Ababa, Ethiopia.

spotlight as a major health and human rights concern.

UNFPA advocates for legislative reform and enforcement of laws for the promotion and the protection of women's rights to reproductive health choices and informed consent, including promotion of women's awareness of laws, regulations and policies that affect their rights and responsibilities in family life. The Fund promotes zero tolerance of all forms of violence against women and works for the eradication of traditional practices that are harmful to women's reproductive and sexual health. UNFPA addresses the issue of FGM/FGC by working with cultural and religious institutions, building a support base in the community, as part of its Culturally Sensitive Approaches to Programming. UNFPA emphasizes that both harmful and positive practices are found in all cultures, and solicits the advice of the local community in the design of a

programme to ensure that the strategies and advocacy messages will be culturally acceptable.

As part of its work to counter gender-based violence, UNFPA has supported training of medical professionals to enable them to be more sensitive towards women who may have experienced violence and to meet their health needs. Pilot interventions have been tested in 10 countries—**Cape Verde, Ecuador, Guatemala, Lebanon, Lithuania, Mozambique, Nepal, Romania, the Russian Federation and Sri Lanka.**

Attention has been paid to involving communities, including both police and healthcare providers and to creating support networks and counselling services for victims of gender-based violence. UNFPA has also trained health providers on recognizing the effects of gender-based violence on women's health, and on how to detect and prevent



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A woman takes her husband to the Islamic court for domestic violence in the Afar area of Ethiopia.

abuse and assist victims. The trainings stressed the need for confidentiality and monitoring. Based on this experience UNFPA has produced a manual, *A Practical Approach to Gender-based Violence*, which has been translated into seven languages.

In **Morocco**, UNFPA supported the development of a national strategy on fighting gender-based violence. In the current country programme, UNFPA is making this new strategy a reality through evidence-based advocacy and policy dialogue, legislation, awareness creation, development of a training module for the police and judiciary bodies and provision of legal and psychological assistance to women, including shelters.

In **Turkey**, with UNFPA's support, the Government launched a national campaign on violence against women in November 2004. The message was very clear: Violence is a crime and a human rights violation —

STOP VIOLENCE AGAINST WOMEN NOW.

The message was carried to the general public on 15 national television channels and on the T-shirts of the Turkish Football Federation. On 11 March 2005, before the Friday prayer, in all mosques in the country, the religious leaders will deliver a speech on stopping violence against women and supporting women's rights. The campaign will continue throughout 2005 with the involvement of politicians and celebrities.

In **Kenya**, UNFPA has supported advocacy and counselling services for rescued girls at the Waa School in Kwale and in Narok, inspiring financial support from the Ministry of Education. The services help girls who have run away from home to escape genital mutilation/cutting or forced marriage to return home without risking their health and well-being.

Women and Armed Conflict

“While entire communities suffer the consequences of armed conflict and terrorism, women and girls are particularly affected because of their status in society and their sex. Parties to conflict often rape women with impunity, sometimes using systematic rape as a tactic of war and terrorism. The impact of violence against women and violation of the human rights of women in such situations is experienced by women of all ages, who suffer displacement, loss of home and property, loss or involuntary disappearance of close relatives, poverty and family separation and disintegration, and who are victims of acts of murder, terrorism, torture, involuntary disappearance, sexual slavery, rape, sexual abuse and forced pregnancy in situations of armed conflict, especially as a result of policies of ethnic cleansing and other new and emerging forms of violence.”

— Beijing Platform for Action, Paragraph 135

Women and girls are disproportionately affected by conflict. In the chaos and destruction of war and other emergency situations, sexual violence, HIV-infections and pregnancy-related deaths drastically increase, and reproductive health services, such as prenatal care, assisted delivery and obstetric care, as well as contraceptive services, become unavailable to large segments of the population.

During crises, whether caused by war, persecution or natural disasters, women and girls usually account for the majority of refugees and displaced persons, and one in five women under the age of 50 is likely to become pregnant. Women who are already

poor become even more vulnerable to sexual exploitation and violence away from their partners and communities. The injuries and medical and psychological consequences of such violence are generally ignored by authorities or considered marginal concerns.

The Declaration on the Protection of Women and Children in Emergency and Armed Conflict (1974), recognized the special needs of women and children in conflict situations, and stated that “women and children belonging to the civilian population and finding themselves in circumstances of emergency and armed conflict...shall not be deprived of shelter, food, medical aid or

The Beijing Platform urged governments to work towards the following strategic objectives in the area of women and armed conflict:

- ▶ Increasing women's participation in conflict resolution and protect women living in situations of armed conflict or under foreign occupation;
- ▶ Reducing excessive military expenditures and controlling the availability of armaments;
- ▶ Promoting non-violent forms of conflict resolution and reducing the incidence of human rights abuse in conflict situations;
- ▶ Providing protection, assistance and training to refugee women;
- ▶ Providing assistance to the women of the colonies and non-self-governing territories.

other inalienable rights." The UN Security Council furthermore passed resolution 1325 on women, peace and security in 2000, which recognizes that war affects women differently from men and reaffirmed the necessity of increasing women's role in conflict prevention and resolution. Peace and security and humanitarian response remain male-dominated arenas, and more women are needed in decision-making and negotiating positions in order to stop these abuses of power. Police, security, peacekeeping and humanitarian personnel need to be trained to recognize and respond to gender-based violence, including sexual violence, which occurs in war situations.

The Beijing +5 review in 2000 noted the deteriorating situation for women and girls in times of war, and pointed to the need for training personnel dealing with the needs of women in situations of armed conflict. It further emphasized that excessive military expenditures and national security requirements often cause governments to allocate funds away from social and economic development especially those designed for the advancement of women.

Increased political will is needed to ensure that women and girls receive real pro-

tection from sexual violence and abuse in their homes and communities, in refugee and internally displaced persons' camps as well as in disarmament and demobilization areas. UNFPA has been at the forefront of international efforts to protect women against violence in conflict situations. In an address to the UN Security Council in October 2004, UNFPA warned: "If women and girls, and communities as a whole, are threatened by gender-based violence, then there is no real chance for peace and security. If the needs of victims of sexual violence are not recognized and addressed, then the opportunity for

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Pregnant woman and family in a Tunisian camp in Tirana, Albania.

building a more peaceful and equitable society is wasted. If families and communities are not helped to cope with this issue, then the cycles of violence and revenge will continue.”

The UNFPA Experience

UNFPA addresses the disproportionate vulnerability of women and girls through emergency assistance to meet their urgent needs for reproductive health care and family planning services. It also supports longer-term efforts to address adequate quality of care as affected populations rebuild their lives in the aftermath of war, conflict or other emergencies.

Working with governments, other UN agencies, and non-governmental organizations (NGOs) to meet the emergency reproductive health needs of refugees, the internally displaced, and others affected by crises, UNFPA has supported emergency projects in more than 50 countries and territories since 1994.

Women in the Darfur region of the **Sudan** are targeted with sexual violence during armed attacks on their villages, during flight and in and around refugee settlements. Many victims do not seek help, particularly from doctors or nurses, as they are often worried about lack of confidentiality. UNFPA and partners in the region help communities to organize women’s groups to support victims of sexual violence and their families. These groups also serve as entry points for treating victims who are hesitant to seek help at hospitals or clinics. UNFPA further provides medical supplies, collaborates with partners to make refugee settlements safer for women, and trains doctors, nurses and counsellors to treat the effects of sexual violence. UNFPA and partners are carrying out similar interventions in other conflict and refugee settings.

Inter-agency coordination on mainstreaming gender equality in post-conflict situations and on HIV/AIDS is also increasing in many countries. In the **Democratic Republic of the Congo**, UNFPA is leading a joint initiative, which constitutes the first national comprehensive integrated response to sexual violence in a conflict country. With the involvement of nearly a dozen UN agencies as well as NGOs and the Government, the UN country team conducted a comprehensive joint needs assessment and developed a multisectoral framework for responding to sexual violence, which addresses a broad range of urgent issues from medical support for victims to reestablishing the rule of law to prevent impunity.

In **Sierra Leone**, UNFPA, UNIFEM, UNDP and WFP are supporting the national machinery for women so that it can assist the Government in the preparation of its initial CEDAW report. And in **Burundi**, UNICEF, UNFPA, UNDP and UNIFEM worked closely together to support the women’s ministry, with a particular focus on reviving the coalition against violence to bring in new strategic members like the police, the media and the human rights commission and to launch a National Action Plan to eliminate violence against women. At the global level, all of these organizations work together through the Inter-Agency Task Force on Women, Peace and Security coordinated by the Office of the Special Advisor on Gender Issues and Women’s Advancement to stimulate stronger joint action to implement Security Council resolution 1325. UNFPA has also taken the lead on the development of guidelines for addressing HIV prevention and sexual and gender-based violence in humanitarian settings.

Women and the Economy

“Although many women have advanced in economic structures, for the majority of women, particularly those who face additional barriers, continuing obstacles have hindered their ability to achieve economic autonomy and to ensure sustainable livelihoods for themselves and their dependents. Women are active in a variety of economic areas, which they often combine, ranging from wage labour and subsistence farming and fishing to the informal sector. However, legal and customary barriers to ownership of or access to land, natural resources, capital, credit, technology and other means of production, as well as wage differentials, contribute to impeding the economic progress of women.”

— Beijing Platform for Action, Paragraph 156

The work performed every day by many women in the world is still undervalued and often not accounted for in official productivity figures. Women typically work in rural areas and the informal economy as subsistence producers, and in the service sector with low levels of income and little job and social security. If employed in the formal sector, women still lag behind men in level of income and career mobility. Discrimination and limitations from early childhood; in education, nutrition, health, economic resources, self-expression and participation, hinder girls’ personal development and prospects for escaping poverty once grown up.

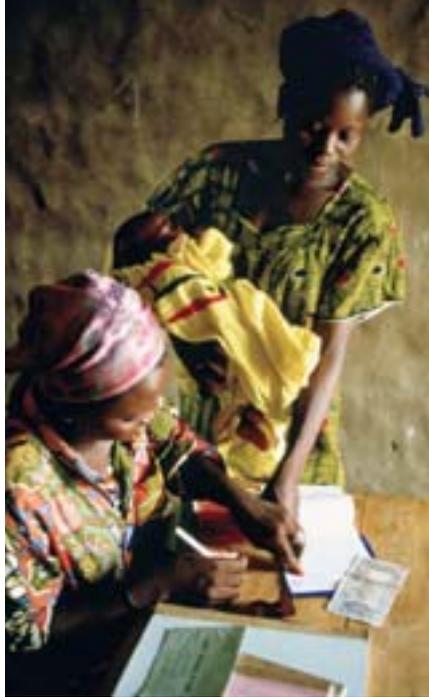
Article 11 of CEDAW establishes the responsibility of states parties for

appropriate measures to eliminate discrimination against women in the field of employment, to ensure the same rights to women and men, in particular the right to the same employment opportunities, right to equal remuneration, and right to social security. Article 13 further delineates measures to eliminate discrimination in other areas of economic and social life to ensure rights to benefits, bank loans and credits. Article 14 notes the rights of rural women, and acknowledges their role in the economic survival of their families, including their work in non-monetized sectors of the economy.

The Beijing +5 review identified a number of obstacles to women’s economic

empowerment, among those a persistent gender discrimination in hiring and promotion related to pregnancy in the workplace, as well as the lack of national legislation ensuring women's rights to own land and other property, including the right to inheritance.

In the UNFPA Global Survey undertaken in 2003, 66 of 144 responding countries reported having taken measures to provide economic opportunities for women.



Empowering women through microcredit in Burkina Faso.

The UNFPA Experience

In **Yemen**, UNFPA has successfully assisted the ministries and NGOs to create sustainable initiatives to increase women's economic power. In **Morocco** and **Algeria**, economic empowerment is being integrated in the services provided to survivors of gender-based violence, further enhancing these women's independence and self-assurance.

In **Zimbabwe**, UNFPA supports a microcredit finance scheme including training in business planning as well as leadership courses on HIV/AIDS, gender and domestic violence that have empowered women to speak out and gain community support for HIV prevention.

In **Iran**, several activities have improved women's socio-economic conditions, particularly in remote areas. Within the

framework of the Centre for Women's Participation (CWP) and Literacy Movement Organization initiatives, support for poor women and girls, especially women-headed households in rural areas of Kurdistan province, includes distribution of booklets on cooperative formation and management, carpet weaving and flower making to enable students to start their own income-generation activities. Established learning centres provide literacy, life skills and reproductive health education classes.

The Beijing Platform recommends efforts to achieve the following strategic objectives in the area of increasing women's economic empowerment:

- ▶ Promote women's economic rights and independence, including access to employment, appropriate working conditions and control over economic resources;
- ▶ Facilitate women's equal access to resources, employment, markets and trade;
- ▶ Provide business services, training and access to markets, information and technology, particularly to low income women;
- ▶ Strengthen women's economic capacity and commercial networks;
- ▶ Eliminate occupational segregation and all forms of employment discrimination.

Women in Power and Decision-making

“Although women make up at least half of the electorate in almost all countries and have attained the right to vote and hold office in almost all States Members of the United Nations, women continue to be seriously underrepresented as candidates for public office. The traditional working patterns of many political parties and government structures continue to be barriers to women’s participation in public life. Women may be discouraged from seeking political office by discriminatory attitudes and practices, family and child-care responsibilities and the high cost of seeking and holding public office.”

— Beijing Platform for Action, Paragraph 182

The lack of women’s political power is a worldwide injustice. The share of women in parliaments still does not reach the level of 30 per cent in most countries of the world.

Despite some improvement of *de jure* equality between women and men, the actual participation of women at the highest levels of national and international decision-making has not significantly changed since the time of Beijing. Women’s equal participation with men in political processes, decision-making and priority-setting at all levels, is not only an inherent right, but serves to ensure that policies and programmes address both women’s and men’s needs equally. Studies have even shown that agendas change when women enter into politics.

Article 7 of CEDAW establishes the responsibility of states parties to take appropriate measures to eliminate discrimination against women in political and public life and ensure women’s equality with men on the right to vote in all elections, eligibility for election to all publicly elected bodies, and participation in the formulation and implementation of government policy.

The Beijing +5 review reported a lack of human and financial resources for training and advocacy for women’s political careers, gender-sensitive attitudes, awareness of women to engage in decision-making, and accountability of elected officials and political parties for promoting gender equality and women’s participation. Around the world



Despite some improvement of the equality between women and men, participation of women in decision-making has not significantly changed since Beijing.

women are still largely absent from national parliaments. Only 14 countries have met the Beijing Platform for Action target of 30 per cent of seats in national parliament held by women. Traditional gender roles still limit women's choices in education and careers and compel women to assume the burden for household responsibilities.

UNFPA's Global Survey from 2003 reported that a number of countries had established mechanisms for women's equal participation and equitable representation at all levels of the political process and public life, over the

The Beijing Platform addresses the disparity in public affairs between men and women by calling for the achievement of the following objectives:

- ▶ Ensure women's equal access to, and full participation in, power structures and decision-making;
- ▶ Increase women's capacity to participate in decision-making and leadership.

past ten years. However, only 74 of 144 responding countries had taken policy and legislative measures to include women in governance, and 29 countries had promoted increased participation of women in the political process.

The UNFPA Experience

UNFPA works to enhance women's decision-making capacity at all levels in all spheres of life, especially in the area of sexuality and reproduction. One priority for improving political opportunity is increasing women's share of seats in local and national government bodies.

A regional initiative in collaboration with the Centre for Arab Women for Training and Research (CAWTAR) used evidence-based advocacy to improve women's status in the **Arab States region**, and also included training of women leaders on decision-making in areas of poverty alleviation and reproductive health and rights.

Nicaragua, with the help of UNFPA and UNICEF, has developed and implemented a holistic national youth policy that combines the issues of reproductive health, citizenship, peer education and political participation. Following a nationwide consultation with adolescents, the Government explicitly included the reproductive health needs of adolescents in its Poverty Reduction Strategy, the first country in the world to do so.

UNFPA arranged, in collaboration with UNIFEM, the sixth regional conference of the Network of African Women Ministers and Parliamentarians in Libreville, **Gabon**, in November 2004. The conference allowed women parliamentarians and ministers from **sub-Saharan Africa** to learn and discuss means of combating gender-based violence as a key action to achieve the millennium development goals. A kit on advocacy addressing gender-based violence in national contexts was presented to participants at the conference.

Institutional Mechanisms for the Advancement of Women

“At the regional and international levels, mechanisms and institutions to promote the advancement of women as an integral part of mainstream political, economic, social and cultural development, and of initiatives on development and human rights, encounter similar problems emanating from a lack of commitment at the highest levels.”

— Beijing Platform for Action, Paragraph 197

Gender mainstreaming is a strategy for making sure that the concerns of women are represented in the analysis, formulation and monitoring of policies and programmes to the same degree as men's. It is therefore a process not a goal. The purpose of gender mainstreaming is to promote gender equality and the empowerment of women by addressing known gender disparities and gaps in such areas as the division of labour between men and women; access to and control over resources; access to services, information and opportunities; and distribution of power and decision-making.

The Beijing +5 review noted a number of obstacles for instituting mechanisms to advance women, such as lack of financial and human resources in a number of countries, coupled with an unfortunate lack of political will and commitment. Other obstacles included insufficient understanding of gender equality and gender mainstreaming among government officials, as well as pre-

vailing gender stereotypes and competing government priorities.

UNFPA's Global Survey of 2003 found considerable shortcomings in understanding of what a gender equity approach means and how to implement it within programmes and policies. Gender mainstreaming efforts, undertaken without a supportive agency, can be unfocused and even easier to ignore than women-focused initiatives. Fifteen out of 17 responding countries in Latin America reported having established a national commission for women, compared to one out of five responding countries in the Central Asian republics. In Africa, Asia and the Caribbean, at least half of the countries reported that they had established such a commission.

The UNFPA Experience

UNFPA mainstreams gender concerns into all population and development activities as the primary means of achieving the

commitments on gender equality, equity and empowerment of women. For instance, UNFPA takes part in the Inter-Agency Network on Women and Gender Equality (IANWGE) promoting gender equality throughout the United Nations system and following up on Beijing and Beijing +5.

National machineries can work as catalysts for promoting gender equality, mainstreaming and monitoring the implementation of the Platform for Action and setting legal standards in line with CEDAW. To this end, **the Beijing Platform for Action** recommends:

- ▶ Creating or strengthening national machineries and other governmental bodies;
- ▶ Integrating gender perspectives in legislation, public policies and programmes;
- ▶ Generating and disseminating data and information – broken down by gender – for planning and evaluation.

UNFPA has been an active member at the task forces such as *Ten-year review of Beijing Platform for Action, Mainstreaming a gender perspective in the CCA/UNDAF, Gender equality and the MDGs* and contributes to gender mainstreaming in the work of the United Nations.

In the **Dominican Republic**, UNFPA collaborated with the Ministry for Women's Affairs and the Ministry of Education to successfully integrate gender into the curricula of the education system. In **Honduras**, UNFPA has supported a national initiative with the Ministry of Women's Affairs and the Ministry of National Security aiming at main-

streaming gender equity and preventing domestic violence in the National Police.

In **Panama**, important UN Interagency work has been done in the field of national public policies for gender equity. As leader of the UN Gender Group, UNFPA has mobilized resources and coordinated activities for the design and implementation of both a National Plan for Equity Plan and a National Plan for the Prevention and Eradication of Gender Based Violence. UNFPA further supported the Ministry of Education and other governmental institutions in the design and implementation of a national initiative for preventing sexual abuse of girls in schools. In **Ecuador**, UNFPA also supported the Ministry of Education in the elaboration of a national law regarding sexual abuse within the education system. UNIFEM, UNICEF and UNFPA are coordinating their support to the national machinery and are working with the UN regional commission, ECLAC, to prepare and disseminate background reports that highlight indicators needed to bring a stronger gender equality dimension to MDG processes throughout the region.

UNFPA has supported institutional capacity building in a number of countries in the Arab States region, such as **Algeria, Djibouti, Egypt, Morocco, Occupied Palestinian Territories, Oman, Qatar, Syria, the Sudan, and Yemen**. Activities include developing gender strategies, gender audit and budget methodologies, mainstreaming gender in planning processes, and reviewing legislation.

In **Iran**, UNFPA has increased support of parliamentarians, national and provincial policy makers, religious and community figures and mass media for broader reproductive health programmes for men, women and adolescents.

UNFPA and other UN agencies are now using gender-responsive budgeting. As a general strategy across regions, informal gender networks have been established for coordinating the efforts of UN agencies, key NGOs and donors to identify emerging issues and make a collective advocacy effort. As a result, inter-agency partnerships are emerging in many countries where gender-budgeting is being used to secure greater investments in such areas as girls' education, sexual and reproductive health, women's political participation and in programmes to end gender-based violence.

UNFPA supports institutional capacity building in several countries to improve the advancement of women, benefitting people like this Moroccan woman and child.

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Human Rights of Women

“Governments must not only refrain from violating the human rights of all women, but must work actively to promote and protect these rights. Recognition of the importance of the human rights of women is reflected in the fact that three quarters of the States Members of the United Nations have become parties to the Convention on the Elimination of All Forms of Discrimination against Women.”

— Beijing Platform for Action, Paragraph 215

The Vienna Declaration and Programme of Action, adopted by the World Conference on Human Rights in Vienna on 25 June 1993, recognized women’s rights as human rights. It is telling that almost fifteen years after the adoption of CEDAW, women’s rights were still in need of such a clarification. Despite having been adopted by 179 countries (as of 20 October 2004), CEDAW is the international convention with the most reservations made to it — many of those stating there was a conflict between their customary or religious interpretations and human rights norms.

Human rights are universal standards. Implementing these standards in various countries demands great cultural sensitivity in order to enable local communities to claim ownership of their human rights. UNFPA often engages with communities, including religious and traditional leaders, as entry points, to empower whole communities.

Likewise, gender equality is difficult to achieve without changing both men’s and women’s knowledge, attitudes and behaviour. Engaging men is necessary to successfully address women’s rights and eliminate discrimination at the grassroots level and other levels, making men and women equal partners in both private and public life.

The Beijing +5 review pointed out that although a number of countries have ratified CEDAW, the goal of universal ratification by the year 2000 was not achieved, and there were numerous reservations to the convention. Negative stereotyping, harmful practices and discriminatory legislation persist, and a gender perspective is largely lacking in legislation. Where gender-sensitive legislation exists, enforcement is often weak. The Committee further pointed out the insufficient recognition of women’s and girls’ reproductive rights, as well as existing barriers to their full enjoyment of these rights.

In UNFPA's Global Survey from 2003, 107 of 150 responding countries reported that they had formulated national laws and legislation on women's rights, 67 countries had ratified conventions on the rights of women, 61 had adopted policies to remove gender discrimination and 43 countries had provided constitutional protection to women. Forty-nine countries had adopted laws for the empowerment of women. The same survey revealed that 57 of 106 responding countries reported advocacy campaigns on men supporting women to achieve their rights and empowerment, and 44 countries had formulated plans encouraging male involvement in reproductive health.

The UNFPA Experience

The concept of human rights underlies all of UNFPA's work. The human rights-based approach fosters programming that advances human rights as established in international human rights instruments and that recognizes people as key actors in their own development.

Particularly relevant to UNFPA's mandate is the safeguarding of reproductive rights, encompassing rights to decide the number and spacing of one's children, to attain the highest attainable standard of health, to ben-

efit from scientific progress, and to receive and impart information, among many others.

On the global level, UNFPA works to ensure the national implementation of women's rights by, among other activities, providing support to the International Women's Rights Action Watch (IWRAP) in their "Global to Local" training of NGOs around the world. This training enables NGOs to work with the UN Human Rights system, particularly the Committee on CEDAW, and helps to support the implementation of CEDAW in their specific local contexts.

UNFPA works to build awareness and capacity at the local level to bring the words of CEDAW, Beijing and Cairo to life. Support is provided to women's and girls' rights organizations, youth groups, women's health groups, legal associations and other organizations to increase awareness of human rights. Training is provided to government officials and to the personnel of judicial systems, including police, paralegals, lawyers and judges.

In the **Arab States region**, UNFPA provided technical assistance to the design of a training manual on CEDAW, including a module on reproductive health and rights.

In order to further establish women's rights as human rights, **the Beijing Platform** urges the international community to work towards achieving the following strategic objectives:

- ▶ Promoting and protecting the human rights of women through the full implementation of all human rights instruments, especially the Convention on the Elimination of All Forms of Discrimination against Women;
- ▶ Ensuring equality and non-discrimination under the law and in practice;
- ▶ Achieving legal literacy.



Afghan girl in the I-11 Refugee Camp on the outskirts of Islamabad, Pakistan.

Gender mainstreaming has increased with UNFPA assistance in a number of countries.

In **Latin America and the Caribbean**, UNFPA together with UNIFEM, RED-LAC (Latin American and Caribbean Youth Network for Sexual and Reproductive Rights) and ILANUD, published a training handbook on the human rights of young women and the implementation of CEDAW. Subsequently, training has been undertaken in several countries in the region. In 2003, in coordination with the Office of the United Nations High Commissioner for Human Rights (UNHCHR), UNFPA supported a regional workshop for governmental institutions on preparing national reports to CEDAW and other women's rights treaties. As a result, UNFPA has been supporting the preparation of official reports in some countries in the region.

In **Benin**, the National Assembly adopted two landmark laws promoting reproductive health and rights in 2003, through a partnership between UNFPA, the Ministry of Health and a number of non-governmental organizations. One law outlaws female genital mutilation/cutting and the other affirms the right of men and women to be informed of and to use family planning methods of their choice.

In the **Caribbean**, human rights ombudsmen from nine countries were informed on applying human rights to sexual and reproductive health during a 2003 workshop in Kingston, Jamaica. The meeting provided an opportunity for participants to discuss reproductive health and rights within the region, to

address obstacles and opportunities, and to review existing structures and mechanisms to protect reproductive rights. The meeting was co-sponsored by UNFPA, UNHCHR, the Inter-American Institute of Human Rights, and the Caribbean Ombudsmen Association.

UNFPA entered into partnership with the Sabiny Elders Association in **Uganda** in 1995, and has since worked to enhance reproductive health of women and young girls and to eliminate the harmful practice of female genital mutilation/cutting, while promoting the cultural values of the Kapchorwa district. The Reproductive, Educative and Community Health (REACH) initiative was successful as it was based on the understanding that discarding of a harmful traditional practice does not mean that the underlying social values have to be undermined. As one result, FGM/FGC has been demystified and its harmful impacts can be discussed publicly. The number of girls subjected to FGM/FGC has also decreased.

In **Thailand**, a programme initiated by the local Planned Parenthood Association with the support of UNFPA, uses peer educators to reach out-of-school Muslim youths. The programme has also enlisted the cooperation of religious leaders, and, by working with Muslim perspectives on issues of reproductive health and male responsibility, helped sensitize the influential Provincial Islamic Council on the importance of reproductive health education.

Women and the Media

“More women are involved in careers in the communications sector, but few have attained positions at the decision-making level or serve on governing boards and bodies that influence media policy. The lack of gender sensitivity in the media is evidenced by the failure to eliminate the gender-based stereotyping that can be found in public and private local, national and international media organizations.”

— Beijing Platform for Action, Paragraph 235

Mass media can be used to raise awareness in the policy arena, to inform and encourage responsible behaviour and to publicize available services in the community. Programmes use a variety of formats to deliver appropriate messages to targeted segments of the population. Media and entertainment are often effective means to reach out to target groups. As long as severe and negative gender stereotyping exists in media, and women lack control over the use and contents of media, these stereotypes will persist. Real and lasting change in social perceptions of roles and responsibilities assigned to women must come from within.

The Beijing +5 review noted that the often degrading, violent and negative images of women in media had increased in different forms since the adoption of the Beijing Platform for Action, with new technologies such as the Internet. Access to information and the media is often non-existent for

women due to poverty, illiteracy and language barriers.

The UNFPA Global Survey indicated that 32 of 139 responding countries had undertaken media campaigns to promote healthy and responsible reproductive health behaviour, 115 of 142 responding countries reported using electronic media, such as television, Internet and radio, to expand mass media coverage of reproductive health and rights issues, while 84 countries used the print media.

The UNFPA Experience

UNFPA is mandated through the ICPD Programme of Action to “encourage attitudes in favour of responsible behaviour in population and development, especially in such areas as environment, family, reproduction, gender and racial sensitivity.” Moreover, UNFPA often uses advocacy in programming

The Beijing Platform recommends that governments work towards achieving the following objectives in the area of women and media:

- ▶ Increase the participation and access of women to self-expression and decision-making through the media and new technologies of communication;
- ▶ Promote a balanced and non-stereotyped portrayal of women in the media.

to induce behaviour change, simultaneously working to change the negative stereotyping of women in mass media.

When it comes to adolescents, UNFPA espouses a “life skills” approach to education. This approach can build skills that can be useful throughout many aspects of life, using participatory and interactive methodologies. A life skills-based curriculum can enable young people to challenge harmful gender norms, resist peer pressure and critically assess mass media stereotypes.

The Emmy award-winning *Staying Alive* initiative is the largest global HIV/AIDS awareness and prevention campaign for young people implemented by MTV, one of the world’s most widely distributed and most-watched television network. The network reaches more than 384 million households in 166 countries and territories. In 2004, MTV’s *Staying Alive* campaign was focused on women, girls and AIDS. UNFPA served as a special advisor to the project, to give special attention to empowerment of women and gender equality and equity in HIV/AIDS prevention messages. Other partners of the *Staying Alive* Campaign are the UNAIDS, the World Bank, the Kaiser Family Foundation and Youth Net/Family Health International.

UNFPA supports the development of a training manual for journalists on using soap

operas for HIV/AIDS prevention, to be used in all regions. The manual provides media workers with skills to create effective entertainment-education programmes. It is based on a methodology developed by Miguel Sabido of Mexico, in which characters in long-running radio and television soap operas evolve to become role models for the adoption of health and social development goals, including gender equality and women’s empowerment. In the countries where it has been used, this methodology has been shown to result in population-wide behaviour changes.

In **the Philippines**, UNFPA creates sustained awareness and knowledge of national NGOs and mass media professionals for advocacy on reproductive health, population, and gender issues. At the national level, the Population and Reproductive Health Movement implemented a campaign that called on key policy-makers and candidates during the 2004 elections to address the issue of population and reproductive health integration into their platform of government.

In **Uzbekistan**, a popular soap opera, “Ayol zoti” (womankind) started on national state television in 2003 with UNFPA support. The programme draws attention to problems facing women in their daily lives, focusing particularly on gender inequality, health, drug abuse and HIV prevention.

In eight **African** and six **Asian** countries, UNFPA has supported training on strengthening partnerships between radio networks and community-based health organizations to raise awareness and increase action on HIV/AIDS. Participants were trained on how to create life-like radio dramas that reach out to listeners and produce positive behavioural changes. The workshops also developed plans to enhance radio programmes and involve more youth, women and people living with HIV/AIDS.

In **Cuba**, UNFPA is supporting an initiative using media to improve adolescent capacity for preventive behaviour regarding STIs, HIV and unwanted pregnancies and decrease risky

sexual and reproductive behaviour and the occurrence of gender-based violence.

UNFPA in **Nicaragua** has developed a model of motivation and education in reproductive health and rights through municipal youth clubs. The youth club activities are implemented through AMUNIC, the local government association of Nicaragua. The clubs provide recreational space for adolescents and motivate participation in behaviour change communication activities. Young people are trained as reproductive health and rights promoters and work in their communities using adolescent-to-adolescent contacts and a wide range of media (newsletters, radio spots, theatre, etc).

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Workshop about sexuality, love and reproduction for teenagers at a local college. The workshops are organized by Corporacion de Desarrollo de Magdalena Medio (Magdalena Development Organization), funded by UNFPA.

Women and the Environment

“Through their management and use of natural resources, women provide sustenance to their families and communities. As consumers and producers, caretakers of their families and educators, women play an important role in promoting sustainable development through their concern for the quality and sustainability of life for present and future generations.”

— Beijing Platform for Action, Paragraph 248

Traditionally, the socially created roles and responsibilities assigned to women have resulted in a direct and close relationship between women and the natural resources at their disposal. Women constitute 51 per cent of the world’s agricultural work force, and they often grow vegetables, fruit and other crops for home consumption as well as for sale. Due to the increasing number of female-headed households, this production is often critical for families’ survival.

However, women’s access to natural resources is frequently restricted. For example, although women process and sell the fish that men catch, they are not often allowed to fish themselves, or even come near the boats used for fishing. While being responsible for household resources, women often lack secure access to land and other productive natural resources. Even so, women are most affected by environmental degradation; soil erosion, water shortages,

and crop failures. Deforestation and contamination increase the time women must look for fuel and clean water, while other responsibilities for the home do not diminish. Toxins in the air and water present significant health risks to women, and are passed on to infants through the breast milk.

National law or local customs often effectively deny women the right to secure title or inherit land, which means they have no collateral on which to raise credit. Moreover, women who lack rights to own and manage natural resources often lack rights in other aspects of their lives, reinforcing gender inequalities.

One legacy of high fertility, lower infant mortality and a limited supply of land is fragmentation. Plots passing down through the generations are divided again and again, eventually becoming too small to support a family. In these situations, men often leave for town

to find work, and women's responsibilities for the family increase. In the worst affected areas, HIV/AIDS has increased poverty and decreased choices, forcing people to rely on natural resources to meet basic needs.

To be effective managers of households and resources, women need a range of options regarding family size and spacing of children, health care, including reproductive health services, education, ownership and inheritance rights, access to credit and agricultural extension and resource management services.

Several conferences during the 1990s raised the issue of preserving the environment to ensure development for present and future generations. The United Nations Conference on Environment and Development (UNCED) (Rio de Janeiro, 1992), marked a breakthrough in the discussion of population and environment issues. The importance of considering the linkages between population, the environment and sustainable development was emphasized in the ICPD Programme of Action of 1994, and also at the World Summit on Sustainable Development 1995.

The Beijing +5 review noted the lack of public awareness about environmental risks faced by women and of the benefits of gender equality for promoting environmental protection. As in many areas, due to lack of information and education, women are often excluded from participation in decision-making regarding environmental issues. Furthermore, environmental policies and programmes lack a gender perspective and fail to take into account women's roles and contributions to environmental sustainability.

UNFPA's Global Survey indicated that 122 of 133 responding countries had formulated

plans and strategies to address population and environment linkages, 40 countries had created policies, and 22 countries had formulated legislation on the topic. These actions acknowledged the linkages between high population growth rates and deforestation, desertification, health and environmental conservation, as well as the relationship between population, available resources and sustain-

The Beijing Platform for Action affirms governments' commitment to achieve the following, in order to strengthen women's role in the management of natural resources and the environment:

- ▶ Involving women actively in environmental decision-making at all levels;
- ▶ Integrating gender perspectives in policies and programmes for sustainable development;
- ▶ Strengthening or establishing mechanisms at all levels to assess the impact of development and environmental policies on women.

able development. The countries also reported the adoption of policies incorporating issues related to population, gender and the environment into laws and legislation covering environmental management and protection.

The UNFPA Experience

UNFPA supports key population, poverty and environment activities at global, regional and national levels. Strengthening national capacities to plan, implement and monitor effective policies that take into account and mainstream gender concerns into environmental planning and management is critical



Women constitute 51 per cent of the agricultural work force in the world. These women work in a grain cooperative in Yatenga province, Burkina-Faso.

for sustainable development. UNFPA provides support for institutional capacity building for implementing, monitoring and evaluating policies and programmes to improve data collection, analysis, research and dissemination, and promotes population education and advocacy.

A community-based environment and reproductive health initiative in two rural districts was initiated in 1998 by the Government in **South Africa**, together with Planned Parenthood Association of South Africa, Working for Water Programme, and UNFPA. The initiative's original objective was to restore original water flows to rivers and streams, but it then became linked to the provision of clean water, reproductive health and other basic services including addressing HIV/AIDS and the provision of employment, especially for women.

In **Azerbaijan**, UNFPA has supported efforts to increase the capacity of the Government to incorporate population into

its environmental planning, as well as to promote gender-sensitive policies and programmes for population and sustainable development. Key components of this initiative, launched in 2000, include building research and planning capacities, improving training facilities, and mobilizing national and local leaders as advocates for issues relating to women and environment, among others.

In 1999, UNFPA, in collaboration with WHO and London School of Hygiene and Tropical Medicine conducted research on the interlinkages between reproductive health and nuclear radiation in the Semipalatinsk region in **Kazakhstan**. The study included a review and analysis of the hereditary and genetic effects of radiation and formulation of a research protocol to further investigate the evidence of nuclear radiation in the region in respect to infertility, spontaneous miscarriages, congenital malformations, still-birth and maternal and infant mortality, and other genetic abnormalities and continuing risk for the offspring.

The Girl-child

“Girls are often treated as inferior and are socialized to put themselves last, thus undermining their self-esteem. Discrimination and neglect in childhood can initiate a lifelong downward spiral of deprivation and exclusion from the social mainstream. Initiatives should be taken to prepare girls to participate actively, effectively and equally with boys at all levels of social, economic, political and cultural leadership.”

— Beijing Platform for Action, Paragraph 260

Half of the world’s people today are under the age of 25. This includes the largest generation of teenagers coming of age in history. Naturally, the needs and concerns of this generation will have to be met. Furthermore, realizing young people’s potential is crucial to achieve sustainable development.

Reproductive health and rights play an important role during the transition to adulthood. Young people, especially young women, are at high risk of HIV infection both before and within stable partnerships or marriage. Reproductive rights, gender equality and women’s empowerment are crucial components of reducing high-risk behaviour along with knowledge and access to contraception. The life-long consequences of early marriage and childbearing often influence the likelihood of entering into or remaining in poverty.

Although specific circumstances vary by setting, a defining factor governing a teenag-

er’s autonomy, sexual health and reproductive outcomes is gender. “Adolescence” is not an adequate defining category in itself. There are often fundamental differences between girls’ versus boys’ experiences and needs. Girls (especially married adolescents) are often unable to refuse sex or negotiate condom use, and consequently, females account for 67 per cent of new HIV infections among 15-24 year olds in developing countries. Studies in India, Jamaica, Mali, United Republic of Tanzania and Zimbabwe show that between 20 and 30 per cent of adolescent girls have experienced sexual violence. In many countries moreover, girls continue to face prospects of too-early marriage and lower levels of investment in their health, nutrition and education than boys.

The Beijing +5 review noted several obstacles that continue to hinder the potential, dependence and self-assurance of girls: poverty, discriminatory attitudes, including

stereotyping, inadequate awareness of girls' specific situation, child labour domestic responsibilities, inadequate nutrition, and lack of access to health services and finances. Lack of parental support and guidance, inadequate access to information and education, abuse, exploitation and gender-based violence further exacerbate the situation. While the awareness of girls' health needs, including sexual and reproductive health needs, has increased, this has not yet resulted in sufficient provision of necessary information and services. Despite advances in legal protection, there is increased sexual abuse and sexual exploitation of the girl-child. Adolescents continue to lack the education and service needed to enable them to deal in a positive and responsible way with their sexuality.

The UNFPA Global Survey noted that 36 of 139 responding countries have integrated reproductive health education into school curricula. Twenty-five countries provided counselling for adolescents, and 14 countries had trained those working with adolescents

on reproductive rights and reproductive health needs of adolescents. Only 13 countries had ratified UN conventions pertaining to reproductive rights and reproductive health needs of adolescents, and 25 of 139 responding countries had provided counselling for adolescents on reproductive health. Fifty-one of 120 responding countries said that open discussion of sexual reproductive health issues is considered culturally inappropriate. Forty-nine countries reported that adolescents and youth face opposition based on cultural mores in seeking reproductive health services.

The UNFPA Experience

Guided by the Beijing Platform, the ICPD Programme of Action and other international agreements, UNFPA places a high priority on safeguarding young people's rights, particularly those of girls. Several regional and global initiatives support youth and their access to reproductive health and rights information, education and services.

To ensure the well-being and empowerment of girls, **the Beijing Platform for Action** recommended that governments, agencies and the private sector:

- ▶ Eliminate all forms of discrimination against the girl-child;
- ▶ Eliminate negative cultural attitudes and practices against girls;
- ▶ Promote and protect the rights of the girl-child and increase awareness of her needs and potential;
- ▶ Eliminate discrimination against girls in education, skills development and training;
- ▶ Eliminate discrimination against girls in health and nutrition;
- ▶ Eliminate the economic exploitation of child labour and protect girls at work;
- ▶ Eradicate violence against the girl-child;
- ▶ Promote the girl-child's awareness of and participation in social, economic and political life;
- ▶ Strengthen the role of the family in improving the status of the girl-child.



Adolescents are eager to learn about reproductive health issues from their peers, Chiang Rai, Thailand.

The African Youth Alliance, a programme developed by UNFPA, the Program for Appropriate Technology in Health (PATH) and Pathfinder International, has strengthened the ability of existing organizations to serve youth more effectively, created new methods and techniques, and changed the lives of thousands of African young people, by improving adolescent sexual and reproductive health in **Botswana, Ghana, Tanzania and Uganda.**

The development of Y-PEER is one of the activities of the Subcommittee on Peer Education of the United Nations Interagency Group on Young People's Health Development and Protection (IAG), which was established in 1999 and includes UNFPA. This initiative has provided support to peer education in 27 countries in the **Central and Eastern Europe, the**

Commonwealth of Independent States, the Baltic States and Central Asia through sub-regional training workshops, advice on project development and educational materials, and through dissemination of information and exchange of experience and good practices. Youth Peer Education Electronic Resource (Y-PEER) is a web site aimed at supporting the development of youth peer education.

In September 2003, a group of 38 young people between the ages of 15 and 26 from 27 countries around the world founded Global Youth Partners (GYP). The initiative, which is youth-driven with support from UNFPA, aims to increase investment and strengthen commitments for preventing HIV infections among young people, especially among under-served youth.

UNFPA has further set up a Youth Advisory Panel with representatives from youth networks and organizations from around the world to recognize and promote youth rights and needs within UNFPA's policies and programmes. Once the Youth Advisory Panel is formalized, it aims to ensure that UNFPA's global, regional and national initiatives are youth-friendly and adequately address young people's concerns, particularly regarding their sexual and reproductive lives, HIV/AIDS and gender issues. One of the key recommendations that came out of the preparatory Youth Advisory Panel meeting was the need for youth to be involved at various levels of the organization. This key recommendation has led UNFPA to set up the Special Youth Programme, which recruits young people from developing countries to join UNFPA Headquarters for paid internships of six months, followed upon their return home by a continued internship of up to 3 months with the UNFPA Country Office.

Meeting the Development and Participation Rights of Adolescent Girls is a global pilot initiative covering 12 countries and territories: **Bangladesh, Benin, Burkina Faso, Jordan, Malawi, Mali, Mauritania, Mongolia, the Occupied Palestinian Territories, the Russian Federation, Sao Tome and Principe, and Senegal.** In collaboration with UNICEF and WHO, and funded by the United Nations Foundation, UNFPA is implementing this global initiative. Its activities vary from country to country, depending on local needs, but its ultimate goal is to put adolescents at the forefront of the development agenda of the three implementing UN agencies. The initiative allows for adolescent participation being institutionalised and adolescent issues and rights being mainstreamed. Indicators beyond health and education are being developed, and best practices and lessons

learned are being incorporated into policy frameworks.

UNFPA is spearheading a programme on married adolescents to address the issues of too early marriage and pregnancies, which can lead to complications of childbirth and unsafe abortion. Thus, UNFPA and UNIFEM are partnering with the Population Council, the International Planned Parenthood Federation, and UNICEF to conduct research and learn how to increase social and economic opportunities for girls in **Bangladesh, Ethiopia and India.**

In **Jamaica**, UNFPA supported a programme through an alliance with the Women's Centre of Jamaica Foundation during 1992-1996. The programme provided over 10,300 pregnant teens with vocational training and counselling. To keep them in school or help them find jobs, the Foundation referred these young girls to family courts and medical practitioners. The programme enabled more than 6,500 girls to return to school and helped about 2,500 girls acquire technical skills.

In **Honduras**, UNFPA is providing support through the Government to a hospice admitting young women living with AIDS. The hospice works to educate and empower patients and help them accept their illness. UNFPA has also provided the hospice with a small grant to support community prevention programmes targeted at women and young people. UNFPA works throughout Honduras to improve access to information, education and services for youth, including family planning and prevention of sexually transmitted infections and HIV/AIDS.

The Way Forward

The UNFPA Global Survey, which was carried out in 2003 to determine progress and challenges at the midpoint of the 20-year ICPD Programme of Action, showed that progress has been made during the past decade to increase gender equality and women's empowerment. Of the 169 countries that responded, a large percentage reported having addressed gender equality as a priority concern and almost all countries reported having taken at least one policy, legislative or administrative action to protect the rights of women and girls and to support women's empowerment.

However, much stronger action is needed to address gender discrimination and violence, to institutionalize gender mainstreaming, to make reproductive health and rights a reality, to reduce trafficking in women and girls, and to build national capacity. While many laws and policies have been put in place over the past decade, there is an urgent need to ensure their effective implementation.

One of the guiding principles of UNFPA is that advancing gender equality and equity and the empowerment of women, the elimination of all kinds of violence against women, and ensuring women's ability to control their own fertility, are cornerstones of population and development-related programmes. Together with partners, we will continue to assist countries and communities in carrying the recommendations of Beijing and Cairo forward. This is particularly important as we strive as an international community to achieve the Millennium Development Goals.

In this spirit, UNFPA will continue to work and advocate for women's empowerment, men's involvement and responsibility, and universal access to reproductive health care services as prerequisites for achieving the MDGs. We will continue to cooperate with sister agencies on gender mainstreaming, with a particular focus on gender budgeting and support to women's machineries. UNFPA moves forward with the knowledge that the political and economic empowerment of women and their full participation in decision-making are essential to good governance and effective development.

To make greater progress, UNFPA works to systematically mainstream cultural factors into our programming efforts. On the ground, this means a greater emphasis on working with communities and local leaders and activists, engaging in dialogue, sharing knowledge and jointly planning the way forward. UNFPA acknowledges the special needs of youth and adolescents, advocating for women and girls to enjoy their human rights, and to enjoy freedom from coercion, whether in the form of early marriage, FGM/FGC or interrupted schooling.

By continuing to promote the recommendations of the Beijing Platform for Action and the Cairo agenda, UNFPA supports countries and their populations to achieve the right to development—as envisioned in the Millennium Declaration—with human beings and human rights at the centre.

Sources

A Rights-Based Approach to Reproductive Health, Outlook, Volume 20, Number 4. Path, UNFPA. December 2003.

Culture Matters – Working with Communities and Faith-based Organizations, UNFPA, 2004.

Division for the Advancement of Women (DAW) web site: <http://www.un.org/womenwatch/daw>

Further Actions and Initiatives to Implement the Beijing Declaration and Platform for Action, Resolution adopted by the General Assembly, (A/RES/S-23/3). 16 November 2000.

The Global Coalition on Women and AIDS (GCWA) web site: <http://womenandaids.unaids.org/default.html>

The Human Rights Based Approach – Statement of Common Understanding, Culture, Gender and Human Rights Branch, UNFPA. 2004.

Investing in People, National Progress in Implementing the ICPD Programme of Action 1994-2004. UNFPA. 2004.

Kaakbay – Building Better Lives Together, Success Stories in Reproductive Health, 5th Country Programme, UNFPA, Philippines. 2004.

Office of the United Nations High Commissioner for Human Rights web site: <http://www.unhcr.ch>

Progress Towards the Millennium Development Goals, 1990 – 2003. United Nations, Department of Economics and Social Affairs, Statistics Division, 3 December 2004. http://unstats.un.org/unsd/mi/mi_coverfinal.htm

Report of the Ad Hoc Committee of the Whole of the Twenty-third Special Session of the General Assembly, United Nations, General Assembly, Official Records, Twenty-third special session, Supplement No. 3. (A/S – 23/10/Rev.1). 2000.

Sexual & Reproductive Health & Rights for All. Countdown 2015. 2004. <http://www.countdown2015.org/ContentController.aspx?ID=1355>

State of the World Population, UNFPA. 2001.

State of the World Population, UNFPA. 2004.

The United Nations Millennium Project website: <http://www.unmillenniumproject.org>

UNFPA Country Offices Annual Reports. 2003, 2004.

UNFPA web site: <http://www.unfpa.org>

Universal Sexuality Education in Mongolia: Educating Today to Protect Tomorrow, Population Council, New York. 2002.

Women and HIV/AIDS: Confronting the Crisis, UNAIDS/UNFPA/UNIFEM, 2004.

Youth Peer Education Electronic Resource, Y-PEER web site: http://www.youthpeer.org



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