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Follow-up to the Fourth World Conference on Women and to the twenty-third special session of the General Assembly, entitled "Women 2000: gender equality, development and peace for the twenty-first century": implementation of strategic objectives and action in critical areas of concern and further actions and initiatives: the equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS

Statement submitted by Anglican Consultative Council, a non-governmental organization in consultative status with the Economic and Social Council

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

^{*} E/CN.6/2009/1.



Statement*

The Anglican Communion consists of 80 million Christians from 164 countries. More than half of our members are women and girls, and most are seen as the traditional caregivers in their family and community. Poverty and HIV/AIDS have placed undue burdens on these caregivers. Equal sharing has been on the United Nations agenda for many years including the review theme for this year: the equal participation of women and men in decision-making processes at all levels, and yet the burden of care has rested most heavily on women. They receive no reward for their compassion and dedication, and their contributions help to keep national budgets in the black.

Many caregivers volunteer in our child care centers, collecting orphaned children from school, making sure they are fed and helping with homework. Others visit those who are ill, sharing food from their kitchens, cleaning laundry and watering to wash the patient, taking patients to hospitals, managing youth groups and raising money for "good causes." These services are not often normally factored into the formal economic reporting, making any national Gross Domestic Product (GDP) inaccurate!

The Burden of Care

For Christians, care for others is their bounden duty. Throughout the Anglican Communion aid is needed as families face an ever-increasing number of orphans; handicapped children survive; and people age.

The formal institutions have abdicated care-giving duties to women and girls at home. In areas of Africa, the medical caregiver ratio has steadily declined. This stretches traditional family support systems to the breaking point. The "invisible" burden of care is ignored while the emotional, spiritual and psychological tolls impact both caregiver and those cared for.

The ravages of AIDS burden families and those who remain as caregivers are elderly grandmothers, young women and girls who have less time to earn needed income, let alone being allowed flex-time in the work place. Men also have difficulty getting time off to help, and women end up with little time to produce the food or fetch the buckets of water required for each person's nutritional needs. Girls are the first to drop out of school to care for siblings – 68% of caregivers are women; 7% younger than 18; and 63% over age 60. In addition, the demand for home-based care for AIDS orphans is placing huge burdens on every community; without governmental assistance, a family is devastated.

* Issued without formal editing.

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¹ UNIFEM.

The Anglican Response

In 1987, the Anglican Consultative Council affirmed the "equality of women and men before Godand the significant role both parents should have in the care and raising of children." The Anglican Consultative Council is aware of limitations of governmental health services and has established HIV/AIDS services in church-founded hospitals/clinics and in community projects such as Anglican Aids Healthcare Trust in South Africa. The Church has institutionalized orphan care and continues to support child-headed households and homes that care for orphans. Even so, there are stories from every province in the Anglican Communion that speak to the burden of care falling disproportionately on women and girls.

In the United Kingdom, Grace has a wheelchair-bound spouse and parents in their late 80's in a home 4 miles away; her day begins taking her son, Tom to school. She checks that her parents have been bathed, changed, fed and received medication and then, returns home to take her husband to the local village support group, run by church volunteers. They are slipping further into poverty because the husband's premature retirement means there is not enough money for Tom's college education.

An Ugandan couple with five children has taken in additional 8 orphaned children of friends and relatives. They took care of 13 children without any external help and sold off all assets to pay school fees. Her textile business collapsed; they sold their home and are now living in smaller unfinished housing without water."²

In Uruguay, many caregivers cope with stigma, death of spouses, parents, relatives and siblings. Young women are less likely to remarry and inherit property that would provide economic support and are often unlikely to get paying jobs. All these factors leave them vulnerable.

In Zambia, a 58 years old women is caring for 16 children ranging in age from 3 to 15 years; 14 of them are grandchildren whose parents are both dead. Her husband ran away from home because of the difficulties caring for this large family. She has no source of income at all."³

In the Philippines, men continue to perform their role as financial providers and generally do not contribute to care-giving. The woman caregiver often faces the same stigma as the person she is caring for, has emotional stress and a physical toll on her health. For those employed as caregivers, the pay is low; if she is a family member, care giving is demanded of her; she often loses her job, depletes her savings and stops having a social life.

In other parts of the world that are effected by the extensive devastating effects of HIV/AIDS, the issues of community beliefs, stereotyping and failure to involve men and boys perpetuates the inequality of care giving.

An interesting issue for Australia, and the Church's welfare agency Anglicare, is the impact of significantly increased numbers of refugees from nations where HIV/AIDS is more prevalent and

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² International Anglican Family Network, 2002.

³ International Anglican Family Network, 2002.

surrounding complex social/traditional mores will need understanding and new approaches to care giving. In this sense the Anglican Communion could bring a global understanding to the priority theme of the fifty-third session of the Commission on the Status of Women.

Care Giving and the Care Economy

The Anglican Consultative Council recognizes that current economic theories continue in the failure to recognize the domestic work of women – and this includes care-giving. As long as women and girls labor in non-income generating jobs, they will remain the poorest of the poor in our society. Therefore, to move to equal sharing of responsibilities between women and men, women must be prepared and trained in economic literacy, thereby understanding the imbalance between women and men, between caring for the family and journeying out in the work force.

Our Christian faith teaches us that women and men were created in God's image; they should share jointly in the responsibilities of bearing and rearing children. Since we believe that women and men were created for full and equal partnerships, it is imperative that economic opportunities be provided for women, challenging the stereotype that it is only the woman who should be the caregiver. Men must be included in these discussions; consultations excluding men prevent them from moving beyond traditional/cultural norms of care-giving. Schools must teach equal sharing of caring responsibilities.

We advocate for more and better health, medical and supportive services. These services would enable caregivers to be away from home for parts of each day and/or week, thereby earning the income necessary to sustain the healthy family as well as those being cared for because of HIV/AIDS, malaria, tuberculosis or any other debilitating condition. The Church must partner with business and Government both locally and regionally to create care support services.

In 2001, an All Africa Anglican Conference on HIV/AIDS resulted in a step-by-step guide to planning for the Anglican Communion. Community volunteers and caregivers have been trained and are engaged in Home-Based Care (HBC) activities, which include care and support for orphans and vulnerable children. As a Communion we must hear God's call to be transformed. We must confess our sins of judgment, ignorance, silence, indifference and denial and commit ourselves to:

- Train PLWHA, medical staff and caregivers on what needs to be done
- Train focus groups, including women, youth and PLWHA
- Increase the number of community care and support groups
- Provide counseling and home-based care
- Train women in economic literacy and advocacy

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We pledge to work in partnership with Governments and other stakeholders to support care givers through:

- Home-based projects or cottage industries for income generation
- Introduce projects linked to formal care, such as stipends for transport, support to HIV/AIDS testing and counseling centers
- Provide access to information on care management, referrals, supplies and nutritional support centers
- Psycho-social counseling for care givers
- De-stigmatize care giving
- Re-socialize and invest in girls and boys to remove stereotyping on the care they can give and finally break the silence in order to end new infections; educate ourselves at every level within the Church; confront poverty, conflict and gender inequality; end stigma and judgment; commit ourselves to work in partnership with governmental agencies; and hold ourselves accountable before God and the world.

"Truly I tell you, just as you did it to one of the least of these who are members of my family, you did it to me." The Gospel of Matthew 25:40 (NRSV)

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