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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 Bangladesh Mahila Parishad, 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 equal sharing of responsibility between males and females including care giving in the context of HIV/AIDS

The Present HIV/AIDS situation in Bangladesh-

Area of Bangladesh is 1,43,999 sq.km,

Population -140 million.

Population density -948/sq.km

Urban population -25%,

Youth population -33 million,

Primary school enrolment -84%,

Total fertility rate -3.1

GNI per capita US\$ 470

Life expectancy 64 yrs.

Estimated 12,000 people living with HIV/AIDS at the end of 2007.

Estimated 1,400 Women (age 15-40) living with HIV/AIDS, 2007

AIDS deaths in 2007 is <500.

Although national HIV prevalence remains under 1% in Bangladesh, there are risk factors that could fuel the spread of HIV among high risk groups. Significant under reporting of cases occurs due to the country's limited voluntary testing and counseling capacity and social stigma attached to HIV/AIDS. Since Bangladesh is still considered a low-prevalence country, no special focus has been placed on the general population – and women in particular.

Bangladesh Mahila Parishad (BMP) is a mass people, movement oriented, non-partisan, non-profitable, voluntary, activist organization established in 1970. Since inception it has been continuing its relentless effort for the emancipation of women through awareness-raising for resisting Violence Against Women (VAW), proper health care and achieving political empowerment and safe shelter.

* Issued without formal editing.

Bangladesh Mahila Parishad (BMP) is now recognized nationally and internationally as a movement oriented advocacy-lobby organization to promote women human rights and gender equality. The Organization has also been raising a strong voice for equal rights in the political process and at the policy-making level.

Bangladesh Mahila Parishad (BMP) has been continuing an awareness-raising programme on the prevention of HIV/AIDS among adolescent Bangladeshi girls. We conducted the study from 2003 to 2008 among 6,000 school and college going girls and women of the capital city and its adjoining districts and Upazillas. The adolescent target group was aged between 13-18 years and women were about 40 years old. Questionnaires were filled out and views were shared on information regarding adolescent and reproductive health, what is HIV/AIDS, how it spreads, why AIDS is dangerous, how they could prevent HIV/AIDS and the attitude of family and society towards them as a whole. During the exchange of views, the issue of health education regarding HIV/AIDS and service available to the girls were also included.

Bangladesh Mahila Parishad has worked in the field of health rights of women. We gathered the experience that the Bangladeshi adolescent girls and women are not well informed regarding HIV/AIDS. On the issue of reproductive health like sex behaviour, girls were not found to be well informed as well. They are very shameful and embarrassed regarding discussions on these issues with the male members, even with family members. Very often they are provided with wrong information by their family. They were found to be quite ignorant about the attitude of society towards them on these issues.

Violence Against Women is a common feature in a country like Bangladesh. Domestic violence was always a common phenomenon in Bangladesh. But for the last few decades violence in the workplace and in public places is increasing at an alarming rate. Recently its nature and features are changing dramatically. Day by day it is becoming more brutal and barbarous, for example rape, gang rape, killing after rape, acid throwing. Kidnapping of young women becomes a very common phenomenon and again they are becoming victims of trafficking. Women and girls belonging to the Hindu Community become victims of political repression through rape and sexual harassment.

Degradation of the Law and Order situation makes women's life more vulnerable. Gross violation of women's human rights is now a very common phenomenon. Administration and the Law Enforcing Agency (Police) are not serious enough to address the situation properly.

The elimination of violence against women and girls will require changes in the family-structure and in deep-rooted values, beliefs and attitudes and cannot be separated from the position of women and the unequal power relations between women and men. Unless there are fundamental changes in these power relations, the root causes of violence against women will not be addressed.

We found the following vulnerable situation prevailing for HIV/AIDS cases in Bangladesh:

- Low socio-economic status
- Low income, early marriage, less access to health care including opportunities for HIV tests, counseling and medical care
- Porous borders
- Low level of literacy and education
- Lack of awareness regarding HIV/AIDS in all sections of men and women, including adolescent population
- Male resistance to condom use
- Low status of women leading to an inability to negotiate safe sex
- Alarming number of injectable drug users in the society
- Prevalence of sexually transmitted infection among married women
- Low HIV and high STD among commercial sex workers in Bangladesh
- Lack of availability of safe blood transfusion
- Lack of facility for screening pregnant women in antenatal check up.

Strategy to take in prevention of HIV/AIDS

The emerging epidemic in Bangladesh could be established by a diversity of social, cultural and economical factors. The most important factors that may fuel the epidemic are poverty, gender inequality, gender-based violence, mobility of the population and a cultural silence on what are considered sensitive issues, such as reproductive health and sexuality. Due to the prevailing social norms and values the youth are at risk in Bangladesh. For the prevention of HIV/AIDS the youth have taken the initiative to voluntarily or forcedly expose the impact. Adolescent and young people who are most at risk have access to information, skill and services to prevent HIV infection. They have to provide correct information and can practice life skills to reduce their vulnerability to HIV in an enabling environment. The Bangladesh Government has formed a National level Committee to prevent HIV/AIDS.

Equal sharing of males with females, including care giving with behavioural change communication must take:

- To create an enabling environment
- Increase understanding of the social and epidemiological dynamics
- Introduce life skills-based education for healthy living in the curricula of secondary school
- Introduce peer-led life skills-based education in selected areas
- Link information and skills-based intervention with services
- Ensure access to and affordability of condoms
- Advocacy to create a supportive environment for vulnerable children
- Community mobilization to develop and implement community-based response
- Strengthen the capacity of families to protect and care
- Capacity building of partners on how to support and protect
- Care and support of people having a potential risk of HIV/AIDS
- Development of paediatric HIV/AIDS treatment guidelines and Government support, including education, healthcare, nutrition, confidential counseling and psycho-social support

To meet those challenges we wanted to study further awareness raising program on prevention of HIV/AIDS with larger samples (among the school & college-going girls) in the rural areas of Bangladesh. HIV care and treatment should be provided by a multidisciplinary team, composed of physicians, nurses, medical officers, counselors, social workers, community advocates, outreach workers and peer educators. Voluntary counseling and testing for at risk population

- HIV prevention strategies depend on the twin efforts of care and support for those living with HIV/AIDS, and targeted prevention for all people at risk or vulnerable to the infection. It is difficult to capture such a large range of activities to help the HIV/AIDS groups. So for all types of care giving such as access to testing and blood screening to HIV, contraceptive prevalence, contraceptive users using condom, Anti Natal Care (ANC) activities where HIV testing is available.

- The International Conference on Population and Development (ICPD) built on this assertion and placed women's rights, empowerment and health, including reproductive health, at the centre of population and sustainable development policies and programmes.
- There is an urgent need for building a strong resistance movement to combat all kinds of violence and discrimination against women. There will be an emphasis on increased support to HIV positive pregnant women; their children receive comprehensive care and service, including ARV (Anti Retroviral) prophylaxis, treatment and support.
- Adolescents will have to receive the information and skill needed to reduce their vulnerability to HIV and affected children will be receiving care and support.
- There should be building of some life skills, such as decision-making and self-esteem.
- Women must be empowered to make positive life choices in all areas of their lives, including critical thinking and decision-making about safe sex.
- It is evident that male initiatives are on a strong footing when a safe sex environment is created to prevent HIV/AIDS. Women in Bangladesh are far behind men though women's participation rate in the public sector has increased to some extent. Women's employment opportunities and health care, including opportunities of medical care, should increase.
- To eliminate all kinds of discrimination the equality of opportunity to all citizens is a fundamental principle of our State policy. The Constitution of Bangladesh grants equal rights to women and men in all spheres of public life (Article 27, 28(1), 28(2), 28(3), 28(4), 29(1), 29(2) and 29(3)).

Source of Reference:

UNAIDS Country profile, 2008

USAID Overview of Bangladesh

HIV and AIDS in Bangladesh-UNICEF

Constitution of Bangladesh
