Today, evidence points indisputably to the important intersection of HIV and gender inequality. In 2010, women and girls accounted for more than half of all people living with HIV (about 52%\(^1\)). They are disproportionately affected by gender-based violence, suffer economic inequalities and shoulder the bulk of the burden of caring for people living with HIV. These factors, combined with the greater biological vulnerability of women and girls to contracting HIV, have major consequences for women and girls in the context of HIV.

The UNAIDS 2010 report on the Global AIDS Epidemic emphasizes that efforts to promote universal access to HIV prevention, treatment, care and support services require a sharper focus on women and girls. The new UNAIDS strategy (2011-2015) emphasizes that meeting the HIV needs of women and girls and calling for zero tolerance for gender based violence are essential to advancing global progress toward universal access to HIV prevention, treatment, care and support and to halting and reversing the spread of HIV, thus contributing to the achievement of the Millennium Development goals by 2015.

**Women, girls and HIV**

- The HIV epidemic has taken a devastating toll on the lives of young women, who account for 66% of infections among young people worldwide.\(^1\)
- HIV is the leading cause of death and disease among women of reproductive age (15-49 years) worldwide.\(^1\)
- In nearly all countries in sub-Saharan Africa and certain Caribbean countries, the majority of people living with HIV are women, especially girls and women aged 15-24 years.\(^1\)
- One half of people living with HIV globally are women and 76% of all HIV-positive women live in sub-Saharan Africa.\(^1\)
- Women living with HIV are more likely to experience violence due to their HIV status.\(^1\)
- Globally, up to 90 per cent of the care due to illness is provided in the home by women and girls. (Global Coalition on Women and AIDS, 2004)
- Women account for two thirds of all caregivers for people living with HIV in Africa; women also comprise 70% of the world’s poor and two-thirds of the world’s illiterate. (UNAIDS 2008: Report on the Global AIDS Epidemic, Executive Summary).

\(*\) This note was prepared by ILO and UNESCO, with support of UNDP, as respective leads in the Joint UN Programme on HIV/AIDS (UNAIDS) in the areas of “Scale up HIV workplace policies and programmes and mobilize the private sector” and “Ensuring good quality education for a more effective HIV response”.

Education: a key component of the HIV prevention revolution

For every additional year in school, girls are better equipped to make decisions affecting their sexual behaviour and they have higher earning potential – factors that have been proven to substantially lower the risk of HIV infection:

- The Global Campaign for Education states that seven million cases of HIV could be prevented in the next decade if every child receives an education.
- The risk of HIV infection is more than halved for young people, particularly girls, who stay in school and complete a basic education.2
- Women with post-primary education are five times more likely than illiterate women to be educated on the topic of HIV and AIDS.3

And yet, in spite of the recognised benefits of education:

- Two-thirds of the world’s 796 million illiterate adults are women.4
- 72 million out of school children, of which slightly over 50% are girls.5 In particular, rural girls suffer disadvantages in accessing education, which undermine their potential for skills development, economic empowerment and access to decent work.6
- Two out of three countries in the world face gender disparities in primary and secondary education and as many as half will not achieve the goal of gender parity in education by 2015.7
- Globally, less than 30% of young women have comprehensive and correct knowledge on HIV compared with about 37% of young men, both of which fall far short of the UNGASS target of 95%.8

In addition, it has been found that HIV and AIDS account for up to 77% of teacher shortage in countries with high HIV rates.9

Education as protection

The international community has made numerous commitments to women’s literacy, getting more girls into school, and to ensuring that schools are providing empowering quality education. Yet concrete action to match these commitments and to address the linkage between access to quality education and HIV prevention has been lacking.10 It is clear that strengthening girls’ education is inextricably linked to effective HIV prevention. Indeed, growing evidence points to the fact that education levels are often correlated with factors that substantially lower HIV risk, such as delayed sexual debut, greater HIV awareness and knowledge, and higher rates of condom use.

The Commission on the Status of Women (CSW) has highlighted these links. The agreed conclusions of the 53rd session concluded that there is a clear need to ‘strengthen education…..to achieve gender equality and the empowerment of women and ensure women’s

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2 World Bank website. Accessed on 09.02.11
3 UNESCO. Education counts towards the Millennium Development Goals. 2010.
4 Ibid.
7 UNESCO Institute for Statistics. Gender Parity in Primary and Secondary Education. Fact Sheet, September 2010, No. 4.
9 UNESCO. Education counts towards the Millennium Development Goals. 2010.
and girls’ rights to education at all levels and the enjoyment of the highest attainable standard of physical and mental health, including sexual and reproductive health…...as well as sex education based on full and accurate information in a manner consistent with the evolving capacities of girls and boys, and with appropriate direction and guidance.’

Keeping girls, notably the most vulnerable and marginalized, in school, beyond primary, into secondary is therefore critical as well as ensuring that schools remain safe and empowering spaces for girls and women, where they can learn free from all forms of violence and discrimination.

In order to reach the millions of women and girls that are out of school or have never received any formal schooling, it is equally important to diversify women’s and girls’ educational opportunities throughout life by ensuring their access to quality technical, vocational, literacy and life skills education and training.

To help address these gaps, UNAIDS Accelerated Agenda For Women, Girls Gender Equality and HIV supports access to comprehensive sexuality education for young people, both in school and out of school, that promotes gender equality and human rights and that equips youth with evidence-based knowledge, skills and resources necessary to enable them to make responsible choices about their social and sexual relationships.

The workplace – a gateway to facilitating universal access

The workplace offers a unique entry point to promote gender equality, address gender-based violence, and facilitate equitable access for women to HIV prevention, treatment, care and support. It can be a place where gender inequalities are addressed and where equal opportunities are promoted.

To be effective, responses to the AIDS pandemic need to address the inequality, discrimination and marginalization that render women and girls more at risk to HIV and exacerbate the consequence of HIV on them, their families and their communities. These include socio-cultural norms on sexual behaviour, access to education, and ability to use prevention and health services.

ILO Recommendation concerning HIV and AIDS and the world of work, 2010 (No. 200)

Recommendation No. 200 was adopted by governments, employers’ and workers’ representatives from ILO member States in June 2010 at the International Labour Conference. The Recommendation, which identifies gender equality as one of its general principles notes that women and girls are disproportionately affected by the HIV pandemic as a result of gender inequalities and that women’s empowerment is a key factor in the global response to HIV and AIDS.

The Recommendation calls for measures to be taken in or through workplaces to reduce transmission of HIV and alleviate its impact through the following measures:

- ensure respect for human rights including gender equality and fundamental freedoms;
- ensure gender equality and the empowerment of women;
- ensure actions to prevent and prohibit violence and harassment in the workplace;
- promote the protection of women and men’s sexual and reproductive health and sexual and reproductive rights.11

11 ILO. Recommendation concerning HIV and AIDS and the world of work, 2010 (No. 200) at paragraph 14 (f).
The Recommendation applies to all women and men workers "under all forms or arrangements, and at all workplaces". The broad definition of "worker" is intended to encompass all categories, including seasonal workers, migrant workers, health workers, sex workers and workers in the informal economy. The scope of the Recommendation covers all workers as well as their families and their dependants in HIV prevention and impact mitigation efforts. The Recommendation calls for workplace measures to promote the active participation of both women and men in the HIV response as well as the involvement and empowerment of all workers regardless of their sexual orientation or whether or not they belong to a vulnerable group.

**Economic empowerment of women**

Gender equality and women’s economic empowerment are key development goals in themselves, as asserted in international conventions and in the Millennium Development Goals. There is also evidence that promoting women’s economic empowerment can make a positive impact on the response to HIV. In some regions, obstacles posed by unequal access to credit and market information drive women into the informal economy with little access to social protection. This situation in turn increases the vulnerability of these women to HIV and hampers impact mitigation.

Taking action through the world of work to promote gender equality and women’s economic empowerment increases the bargaining power of women to negotiate safer sex, and may also help women afford and have access to HIV testing and counselling services and to antiretroviral treatment. 12, 13 Women’s inclusion, especially at decision-making levels, in work-related groups and organizations such as trade unions can contribute to greater access and control over productive resources. It allows women to better access their rights, including sexual and reproductive rights, and lower their vulnerability to HIV.14

**Violence in the workplace**

Gender-based violence and sexual harassment threaten the health of women workers and increase their risk of HIV infection. The vast majority of women working in informal arrangements are not covered by protective regulations or social services15 and therefore have limited access to HIV prevention, treatment, care and support services. Women form a significant percentage of workers at higher risk of violence in the workplace, such as informal economy workers, domestic workers, migrants, and sex workers.

Domestic workers, who are also predominately female, are especially vulnerable to violence as they work and often live in private homes and are thus isolated from their own families.16

Women migrant workers may be at higher risk of HIV as they often have limited or no access to HIV prevention and health-care services.17 Sex workers are highly vulnerable to many forms of

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gender-based violence from clients, brothel owners or other controllers, law enforcement officials, intimate partners, their families, neighbours, and other sex workers. Moreover, evidence from some regions shows that, as a result of the economic crisis, more girls and boys are being forced into street work including sexual exploitation.18

The ILO Recommendation concerning HIV and AIDS in the world of work, 2010 (No. 200) calls on governments, employers’ and workers’ organizations to take measures in or through the workplace to reduce the transmission of HIV and alleviate its impact by ensuring actions to prevent and prohibit gender-based violence and sexual harassment.

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