

# Women, girls, HIV/AIDS and the world of work

## HIV/AIDS - economies feel the impact, but women bear the brunt

37 million adults<sup>1</sup> worldwide HIV-positive, and counting... Numbers for HIV/AIDS are everywhere. We may not like it, but the number of people living with HIV continues to rise and the only reason the numbers are not even larger is because 2-3 million adults are dying of AIDS each year. There is growing recognition of the damage HIV does to national economies, and clear evidence now that women are bearing the largest share of the costs.

## The risk of transmission is greatest for girls and young women

*"The greater the gender discrimination in societies and the lower the position of women, the more negatively they are affected by HIV."*

*ILO Code of Practice on HIV/AIDS and the world of work*

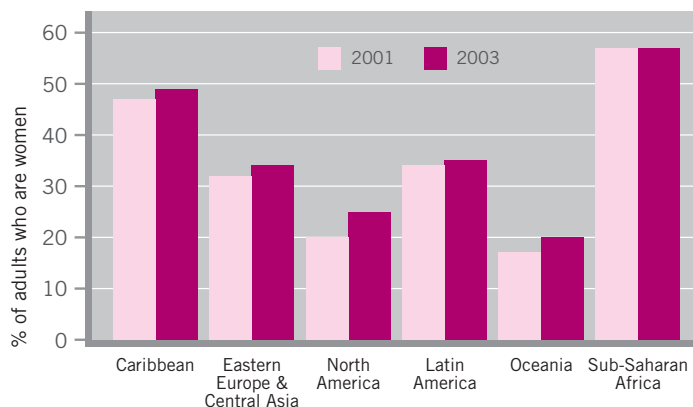
Most people who become HIV-positive and who die of AIDS in developing countries, especially Sub-Saharan Africa, are now women. Moreover, it is principally the young who are becoming HIV-positive. But Africa cannot afford to lose girls and young women in large numbers: young women are essential to Africa's growing economies, as well as to family-building, community care and the education of future generations.

Together, young men and women<sup>2</sup> account for half of all new HIV cases globally, but more

### Gender statistics for HIV/AIDS:

- Women as a proportion of all adults living with HIV/AIDS rose from 43 per cent in 1998 to 48 per cent in 2003, and the proportion continues to grow
- Worldwide, 60 per cent of new HIV transmissions are to women, and 52 per cent to young adults
- In Sub-Saharan Africa, already 57 per cent of all HIV-positive adults are women, and 75 per cent of young people living with HIV are women and girls
- In 2003, there were more than 12 million orphans in Africa, most of them motherless due to HIV/AIDS.

Women as a proportion of adults 15 to 49 living with HIV, major world regions, 2001 and 2003 (per cent).



Source: UNAIDS, 2004

The proportion of women living with HIV/AIDS is increasing in all regions of the world. But the 'feminization' of the epidemic is much more pronounced in Sub-Saharan Africa, where the gap in prevalence started earlier and widened rapidly.

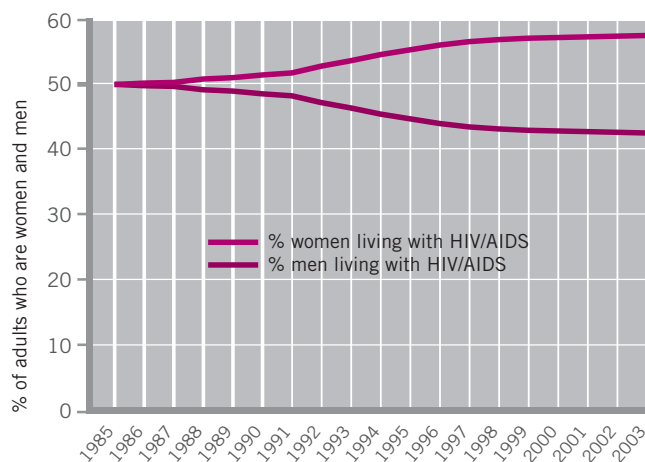
than two-thirds in Africa. Because the young are becoming HIV-positive at a faster rate than the general population, future as well as present human capacity is undermined and progress in sustainable development is jeopardized. Young men and women are the new generations of the labour force that should produce and consume goods and services, as well as the entrepreneurs and innovators of tomorrow. They are also the parents who will shape the next generations. The high prevalence of HIV among them means that the size of the labour force will be drastically reduced, that many will struggle to go to work when they are ill, and that their children will lose the care and guidance of parents. Many of these young persons are already caring for ill and dying relatives. They also pay a high price for living in a world with HIV/AIDS when duties of care and of finding work force them to drop out of school – in most cases girls are the first to have their education interrupted or ended. As a result each young person is less prepared for the world of work, and his or her generation is less prepared for the labour market than earlier generations. They are at risk of impoverishment as well as HIV.

<sup>1</sup> Adults refers to persons 15 to 49 years. This note does not address the 3 million or so children living and dying with AIDS.

<sup>2</sup> Young men and women are adults 15 to 24 years.

But already - in the current context of poverty, lower levels of education and limited access to resources - young women and girls are at higher risk of HIV than young men and boys. In Africa, there are now twice as many young women living with HIV as young men, and in numerous eastern and southern African countries, there may be six times as many young women as men who are HIV-positive. In parts of these regions, more than one-third of teenage girls are HIV-positive.

**Women and men as a proportion of adults 15 to 49 living with HIV/AIDS, Sub-Saharan Africa, 1985-2003 (per cent)**



Source: UNAIDS/WHO, 2004

### Low status of women linked directly to their risk of HIV

The main threat to women lies in the fact that it is not their own behaviour that puts them at risk, but that of men. Women's low social status - deriving from their legal, economic, social and cultural inferiority - is the driving force of women's greater risk of HIV. When and where women have inferior status, they have little freedom to act independently to earn a livelihood. This dynamic of dependence, poverty, and fear of impoverishment is how their status raises their odds of becoming HIV-positive.

### Dependence on men

In many developing regions, men have control over critical productive resources, such as land for farming, and women gain access to assets through their relationship with a man, especially in marriage. Financial or material dependence on men means that women have less control over when, with whom and in what circumstances they have sex.

### Poverty exacerbates women's dependence

In developing countries, where the majority of poor people are women, poverty not only becomes linked to risky behaviours for survival, it also prevents women from prevailing with husbands and partners over protected sex: they fear that if they assert themselves, they will experience reprisals. Poor women often fail to negotiate safer sexual relations - through condom use, for example - because of their fear of losing assets and of further impoverishment. Domestic violence and rape also rob them of any choice.

*"Less than 50 percent of women used a condom in last sex act with their casual partner according to a population survey in 15 sub-Saharan Africa countries."*

Family Health International

### No autonomy, no choice

With no access to assets otherwise, women may be bound into abusive marital or sexual relations because they are the basis for their access to resources such as land. Women without other resources may be forced to rely on their bodies for a livelihood, having recourse to exchanging sex for material favours for their daily survival. Most sex work in Africa is survival sex, and sex work is about making money for women and their families to remain alive. When sex becomes the means for a woman's economic survival, she is highly exposed to the risk of HIV transmission.

### Lack of education fuels discrimination in the labour market

*"De-schooling of children not only damages their individual futures, but also leads to de-skilling of their entire generation, thereby compromising their ability to obtain decent work throughout their adult lives."*

ILO

A first major danger of HIV/AIDS for girls is the decrease in their school enrolment. In countries where HIV/AIDS is prevalent, girls are twice as likely as boys to be kept out of school to care for sick relatives, or to work to contribute to household income. In Swaziland, school enrolment has fallen by 36 per cent due to HIV/AIDS and girls have been the most affected.

### **Factors linked to low status that raise women's risk of HIV**

Background economic, social and cultural factors:

- Financial or material dependence on men for support
- No access to resources
- Low education, illiteracy
- No property or inheritance rights

Proximate social and demographic factors:

- Early marriage or early sexual relations
- Violent and abusive sexual relations inside or outside of marriage
- Recourse to sex work

When older, their employment opportunities are diminished by low education and illiteracy, which in turn reduces women's opportunities to develop financial independence and enjoy autonomy. Moreover, in all developing regions, women face sex discrimination in the labour market, especially in the formal sector that is biased in favour of men on the basis of preconceptions of men as breadwinners, and as more competent.

As a result, women are more likely to be in the urban informal economy, in subsistence farming, or lower paid employment in the formal sector, which all provide little or no social and economic security whether in terms of income, savings, insurance or social protection.

Even women who do enter the workplace face violence, stigma and discrimination.

### **Violence in the workplace**

At the workplace, women may be exposed to the risk of sexual harassment and abuse. They face pressure to have sex in return for being hired or promoted, or to avoid dismissal. In addition, in a climate of daily violence against women, just the anticipation and fear of violence may prevent them from refusing sex, or from insisting on the use of condoms or another safer sex method.

#### **Research in Kenya's export-oriented sectors - coffee, tea, and light manufacturing industries - found that women experienced violence and harassment as a normal part of their working lives:**

- over 90 per cent of the women interviewed had experienced or observed sexual abuse within their workplace;
- 95 per cent of all women who had suffered workplace sexual abuse were afraid to report the problem, for fear of losing their jobs;
- 70 per cent of the men interviewed viewed sexual harassment of women workers as normal and natural behaviour.

International Labour Rights Fund, 2002

### **Stigma and discrimination**

HIV/AIDS-related stigma and discrimination alter individual behaviour, damage employment and career prospects, and blight the quality of health and other social services. It is recognized that women are more likely than men to be stigmatized or repudiated. In the workplace, discrimination can mean mandatory testing, quarantine, exclusion, and outright job loss.

*"At the same time that I got AIDS, I had my job and they wanted to drive me out. I knew but I did not accept it because I did not want to quit my job. They forced me to have blood taken. Eventually, they drove me to live in this house for AIDS people."*

Thailand Voices and Choices

### **Action on all fronts can avert the loss of productive women**

In the absence of action, many more working and productive women will become ill

and die, depriving the economy and the household. But a path to the alternative outcome has already been traced; it now needs political will, determination and appropriate resources. Poverty eradication, transformation of workplace practices, keeping girls in school, job training, and attacking the root causes of women's low status through legislation are as essential to reduce HIV transmission as raising women's awareness of the risk of transmission and giving them the direct means of prevention.

*"Failure to transform the status of women will deepen the tragedy of HIV/AIDS and women's ability to cope may totally disintegrate."*

UN Resident Coordinator, Zimbabwe

*"AIDS prevention remains key to fighting the disease. Treatment will not be able to keep pace unless new infection rates are cut sharply."*

World Health Organization

But we must not deceive ourselves. The alternative outcome calls for massive concerted effort at all levels. Broad efforts to include women in strategies and programmes designed to reduce and eventually eradicate poverty can, when well designed, help women reduce their exposure to the risk of HIV/AIDS.

Legislation to protect women's rights, access to resources, their fair allocation of treatment, redress against violence and abuse, enforced legislation against female genital mutilation and other factors of low status must be targeted in any actions to tackle the HIV/AIDS epidemic.

## Projected cumulative labour force losses, one-year death toll of working-age women and increase in social burden for women, Sub-Saharan Africa, 1995-2015, assuming no widespread access to antiretroviral treatment

	1995	2000	2005	2010	2015
Lost female labour force	988,000	3,551,000	8,671,000	15,325,000	22,745,000
Lost male labour force	1,810,000	5,255,000	11,165,000	18,584,000	26,840,000
Lost female and male labour force as a per cent of total labour force	1.2	3.2	6.3	9.4	12.0
One-year death toll of women due to HIV/AIDS	213,000		1,294,000		1,884,000
One-year death toll of men due to HIV/AIDS	272,000		1,168,000		1,527,000
One-year increase in burden of care for women of working-age due to AIDS (per cent)	0.4		3.2		5.8

Source: ILO, 2004

*In 1995, the female labour force lost was half of the male labour force; by 2015, the female labour force lost will be almost on par with the male labour force, despite across-the-board lower participation rates for women in the formal labour force. When all persons of working-age are counted, although female deaths number fewer than male deaths in 1995, female deaths will be greater by 2005, and the excess will widen up to 2015. The yearly increase in the social burden of AIDS illness and death on surviving women of working-age is projected to rise by a multiple of 8 between 1995 and 2005, and then double by 2015.*

### **The ILO Code of Practice on HIV/AIDS and the world of work**

*The ILO Code of Practice provides guidelines to both employers and workers as well as governments with respect to workplace actions. It includes the principles of gender equality, stressing that successful prevention and impact mitigation will depend on more equal gender relations and the empowerment of women.*

*"More equal gender relations and the empowerment of women are vital to successfully prevent ... HIV."*

ILO Code of Practice

## Keeping girls in school at any cost

Keeping girls in school is a crucial and powerful way of protecting them from HIV transmission; the more educated girls are, the more aware they are of HIV and prevention methods, and the greater their capacity and confidence to negotiate safer sex. More educated girls marry later, have greater choice in marrying, are less dependent on men, and have a higher status within the family. Increasing girls and women's educational and employment opportunities contribute in major ways to help them achieve autonomy.

## Empowering women to work will reduce transmission of HIV

Gender inequality has magnified the HIV epidemic into an economic and social crisis, especially in Africa. The challenge is to pursue two parallel lines of action simultaneously. There is an urgent need to address the problem of AIDS now, and women must have their fair share of treatment. At the same time, it is essential to address the root causes of HIV transmission. To address the low status of women is the means to intervene and avert the violence against women and girls that places them directly in harm's way. To promote women's empowerment, protect their rights, target actions to raise their status, and provide them with training, life skills and access to work will enable them to gain better control of their lives, their bodies and their sexual relations.



Joint United Nations Programme on HIV/AIDS

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