

Course Name	: Gender and women's health
Course Code	: APBPH 1207
Course Level	: Level 2
Credit Unit	: 4 CU
Contact Hours	: 60 Hrs

Course Description

The Course focuses Gender related issues in public health. It involves women's realities which tends to be a problem, women who are beaten and even killed. Case studies of domestic violence, Honour killings and crimes against women, addressing sexual violence in humanitarian settings, women's health, women and the Strategic development goals (SDGs)

Course Objectives

- To help students analyze the vital gender aspects in public health such as equal access of health services by both women and men.
- To help them learn the major challenges women face in accessing health services.
- To provide them with instincts to become sensitive about reproductive health needs of the gender spectrum.

Course Content

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Introduction Gender and public health

This third topic of module 1, we introduce the subject of gender and health and review the status of women in our world today. In order to understand the importance of gender equality for public health, we will demonstrate how much inequality exists in the world, inequality that can lead to disease and death. We shall see that while women in Africa are generally not regarded as having the same societal status as women in most countries, women all over the world have their own sets of problems to deal with. All of the stories told in this unit are factual and some of them have shocking consequences for women's health.

This unit provides introductory material for the later module on Population and Reproductive Health.

- **Women in the world today: an overview**

"Women do two-thirds of the world's work, receive 10 percent of the world's income and own 1 percent of the means of production."

Many of us in sub-Saharan African countries labour under the misapprehension that women in other countries are liberated, have equal opportunities with men, are economically independent, have access to good health care and education, and can make decisions and choices for themselves, especially in relation to family planning and reproductive health. As we shall see, this is not necessarily the case. While it is true that women in most of the so-called "developed" countries have what we could consider as more freedoms and opportunities than we in East Africa might have, women all over the world suffer from varying degrees of oppression and hardship. This topic of the module Foundations of Public health will attempt to give an overview of the state of women in the world today and try to document the most recent attempts to ensure that women are given as much liberty and opportunities as men appear to enjoy.

The overview that follows has been assembled by reading newspaper and magazine

articles, reports from various state and NGO organizations, and news stories highlighted on television and the Internet over the past three to four years.

- **Some statistics**

More than 1 billion people in the world today live in absolute poverty (i.e. earn less than US\$1 per day). Nearly 70 percent of them are women. Globally, women's wages average between 20 and 50 percent lower than men's.

At the end of the 20th century, 885 million of the world's adults (nearly one in four) are illiterate. Two-thirds of them are women. If present trends continue, this number will remain largely unchanged through 2010. Access to education varies according to income, race, ethnic origin, disability, and residence. But the single largest factor is gender. One out of three women in the world today cannot read or write. A large body of research has established a strong correlation between literacy and social development with the greatest social benefits accruing from the extension of basic education to girls and women.

In developing countries, populations with the lowest literacy rates have the poorest health status. The relationship between literacy and health is particularly strong when female literacy is studied. A survey of 106 developing countries shows that as the literacy level of women increases:

- Fertility rates decline because literate women tend to marry later and are more likely to use family planning;
- Infant mortality rates decline because mothers with even one year of schooling tend to take better care of their babies;
- Immunisation rates rise because literate mothers are more likely to seek medical care for their children.
- Women with even a few years of schooling are better agricultural workers, generate more income, and take better care of their families.
- Once low-income women increase their income, they use their new earnings to improve the education, health and nutrition of their families.

Given these statistics (which have been compiled from a number of diverse sources), we should immediately see that there is a problem. But what is it? Why are more than one half of the world's people treated differently? Why are development programmes not making a difference? Why are women still living under the rule of their men?

- **Women's realities: the problems**

According to the writer Kristen Sternberg (Georgia, USA), women all around the world face their own problems. If we take a look at news articles about women's issues worldwide: changes for Iranian women, the plight of Chinese women, and the difficulties faced by Latin American and Indian women, we shall see what kinds of problems women face in the 21st century. Sternberg points out that in the United States, during the past century, women gained many of their civil rights and today's females enjoy more legal, cultural, and societal freedoms than ever before. In the last

half-century alone, many changes have taken place in many different countries, but, paradoxically, most of us are getting mixed messages about the role of women in our cultures today. Think about the contrasts set up by the images of successful business women and then about the pros and cons of beauty pageants.

Women in many other regions and cultures around the world plan and participate in meaningful activities to celebrate International Women's Day on March 8th each year. And it is true that we have seen some remarkable changes due to this kind of sensitisation, but there have been gains and losses toward equality with men since the 1980 in relation to the following: marriage and divorce rates; the size of family households, including percentages of families living in poverty; incidences of domestic violence; fertility rates, including information on preference for males and girl-child neglect; population policies, including the issues of contraception and abortion practices and maternal mortality; women athletes; beauty contests, cosmetic surgery, and eating disorders; global sex trade and rape; types of work, status of pay, migrant workers, percentages of workforce; education issues; ownership of property; poverty and credit for women; women's political power at all levels – all these (and more) issues mean that women's realities worldwide are problematic.

According to Juleyka Lantigua (editor/writer from New York), as we celebrate Women's Day on March 8 every year, millions of women do not even notice because they are struggling for survival, literally in many cases. One life and death issue is childbirth. The World Health Organization estimates that half a million women die and 8 million are disabled each year during pregnancy or childbirth. In Mozambique 1,500 of every 100,000 women die during pregnancy or childbirth. Millions of women do not have reproductive freedom. In China, women undergo forced abortions. In the 1990s, more than 100,000 women in developing countries were subject to chemical sterilization with pellets containing quinacrine. The World Health Organization says quinacrine may cause cancer.

In north-east Brazil, 43 percent of women resort to female sterilization as a contraceptive method. These women have to take drastic steps to exercise their reproductive rights because more reversible methods are not available to them. In some countries, like in Chile, abortion is illegal under all circumstances. And close to 80,000 women die each year from unsafe abortions, according to the World Health Organisation.

Poverty is a global women's issue. It has been estimated that women constitute 70 percent of the 1 billion people living in poverty in the world today. As more women are displaced by rampant poverty, the trafficking and prostitution of girls and women is escalating. Japan is now home to more than 100,000 Thai and Filipino sex workers. Activists estimate that there are at least 1 million women and girls working in Thailand's sex trade. Colombia's Department of National Security estimates that 50,000 Colombian women are dispersed throughout European and Asian sex markets.

And all over the world, women face terrible situations of domestic abuse and sexual violence. According to the World Health Organization, one in five women in the world is physically or sexually abused in her lifetime. Violence against women is as serious a cause of death and disability as cancer, and causes more ill health than traffic accidents and malaria combined, according to the World Bank.

In parts of the Islamic world, such as Kuwait, Afghanistan, and Saudi Arabia, women are regarded as second-class citizens. Religious texts are invoked to deny women equal rights and to enforce strict laws against divorce, adultery, education, and employment. An Islamic court in the United Arab Emirates recently ordered a pregnant Indonesian domestic worker to be stoned to death for adultery. In Afghanistan, even after the 'liberation' from the Taliban, school buildings for girls continue to be burned down. The singing of women in public, including on radio and television, has been banned. Women can sing within their own schools but to attempt to sing outside the walls is to risk one's life in the hands of gunmen (BBC News, 04 July 2003).

Women in the industrialized world face many obstacles to equality, as well. A survey by the Foreign Press Centre, showed that 35 percent of Japanese women who responded felt that sexual harassment at work was one of the major problems they faced. Another 47 percent said they were subject to discriminatory treatment at work.

Women in the United States still earn, on average, 75 percent of men's pay, according to the AFL-CIO. And the United States is one of very few countries that does not have a national policy mandating paid maternity leave.

- **Women who are beaten and killed**

During the lawlessness after the overthrow of Saddam Hussain's government, many cases of violence, including espousal violence, were not prosecuted. Nineteen-year-old "Fatima" was shot in the legs by her husband in front of her family and their neighbours on 21 May 2003. Married at the age of 12, she was treated as a servant and regularly beaten in her husband's family home. She told Amnesty International that she tried to run away to her own family, but her husband came and said she should go back. When she refused he became very angry and took a piece of wood to beat her. It broke, so he grew even angrier and took his gun and shot her. Despite the number of eyewitnesses and the seriousness of the crime, neither the family nor the hospital reported the case to the police and the husband was not arrested. The family said it was a matter to be solved within the tribe. Fatima returned to her father's house after she left hospital. Her husband expressed regret and offered her compensation, seeking reconciliation with her through the mediation of elders of her tribe. However, she refused to return to him, despite the pressures. (Amnesty International)

Domestic violence or battering is a pattern of behaviour used to establish power and control over another person through fear or intimidation, often including the threat or use of violence. In all cultures the perpetrators of abuse are most commonly male. Women are most commonly the victims of violence, although elder and child abuses are also prevalent. Here are some disturbing facts:

- At least one out of every three women has been beaten, coerced into sex, or otherwise abused in her lifetime. Usually, the abuser is a member of her own family or someone known to her.
- The World Health Organization has reported that up to 70% of female murder victims are killed by their male partners.

- In the USA, the Surgeon General has warned that domestic violence poses the single largest threat to all women: more than rape, muggings, and car accidents put together.
- The Council of Europe has stated that domestic violence is the major cause of death and disability for women aged 16 to 44 and accounts for more death and ill-health than cancer or traffic accidents.
- In the USA, women accounted for 85% of the victims of domestic violence in 1999.
- The Human Rights Commission of Pakistan reported more than 1000 women were the victims of “crimes of honour” in the country in 1999.
- In Rwanda, approximately 500,000 women were raped during the 1994 genocide and an estimated 5,000 pregnancies resulted from those rapes.
- In Bangladesh, women who are killed by their husbands account for 50% of all murders.
- The Papua New Guinea Law Reform Commission found that 67% of rural women and 56% of urban women have been victims of espousal abuse.
- It is estimated that over 120 million women have undergone some form of genital mutilation and at least two million girls per year are at risk of mutilation.
- Women and children make up some 80% of the world's millions of refugees and other displaced persons.
- Over 50% of women experienced some form of sexual violence during the conflict in Sierra Leone in 1999.
- Women and girls are also subjected to forced prostitution and trafficking with the complicity or participation of peacekeeping forces.
- More than 60 million women are estimated to be “missing” from the world today as a result of sex-selective abortions and female infanticide according to an estimate by Amartya Sen. Indian economist and philosopher. China's last census in the year 2000 revealed that the ratio of newborn girls to boys was 100:119. The biological norm is 100:103.
- “Crimes of honour” have been reported in some countries in the Middle East, Latin America, and South Asia but estimating the prevalence is very difficult as most incidents escape official scrutiny.
- South African rape statistics include 52,975 rapes reported in 2000, the age group 12 to 17 years was the most vulnerable, with 472 reported rapes per 100,000 in that group; among 18 to 49 year-olds there were 286 rapes per 100,000; and for girls under 12 years 131 per 100,000.
- It is estimated that in Russia 14,000 women were killed by their partners or relatives in 1999, yet the country still has no law specifically addressing domestic violence.
- Up to 200,000 women were estimated to have been forced to serve as “comfort women” in military brothels of the Japanese Imperial army during World War II.
- Over 2 million women report being beaten every year in the United States. This means that a woman is beaten every 15 seconds somewhere in the United States alone.

The Beijing Platform for Action adopted at the Fourth World Conference on Women (1995) categorizes violence against women as an obstacle to the achievement of the objectives of equality, development, and peace. It underlines that violence against women violates and impairs or nullifies the enjoyment by women of their human

rights and fundamental freedoms. The Platform thus confirms the categorization of violence against women as a human rights issue and the resulting accountability of States to prevent, investigate, and punish acts of violence against women, whether perpetrated by the state or by private persons. The consideration of violence against women as a fundamental human rights violation critically enhances earlier approaches, such as criminal justice and public health approaches, to addressing all forms of violence against women.

The Platform provided an important impetus for data collection and research on violence against women. Specifically, it called attention to the lack of data on violence against women and exhorted governments to build national statistical capacity to collect such data and disseminate findings, and to encourage research into the causes and consequences of different forms of violence against women. It also urged governments to work with universities and other organizations from civil society to develop policies and institutional reforms on violence against women.

The 1993 United Nations Declaration on the elimination of violence against women provides a very broad and inclusive framework for studying violence against women. According to this definition, “violence against women” means 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 acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life. (General Assembly resolution 48/104 of 20 December 1993, Article 1). Specifically, the Declaration outlines a broad variety of acts and circumstances that are included in this definition:

Physical, sexual and psychological violence occurring in the family, including battering, sexual abuse of female children in the household, dowry-related violence, marital rape, female genital mutilation, and other traditional practices harmful to women, non-espousal violence and violence related to exploitation; physical, sexual and psychological violence occurring within the general community, including rape, sexual abuse, sexual harassment and intimidation occurring at work, in educational institutions and elsewhere, and trafficking in women and forced prostitution; physical, sexual and psychological violence perpetrated or condoned by the State, wherever it occurs.

The Declaration recognizes that some groups of women are particularly vulnerable to violence, such as: women belonging to minority groups, indigenous women, refugee women, migrant women, women living in rural or remote communities, destitute women, women in institutions or in detention, female children, women with disabilities, elderly women, and women in situations of armed conflict.

Given this state of affairs, it should be clear that inflicting suffering on another human being, whether within the walls of the family or otherwise, is a crime and should be punishable by law. And yet, most states do not wish to legislate for matter that have traditionally been considered private.

- **What Amnesty International says**

According to Amnesty International (2005 Global Annual Report on Human Rights), violence against women is endemic all over the world. Here in Africa, we tend to think of domestic violence as a “cultural” issue, that men somehow have the “right” to beat their wives. However, even in countries where traditional norms have almost entirely disappeared, women are subject to violence. Let us take a closer look at what Amnesty International reported about women in Afghanistan, Kenya, and Uganda.

Afghanistan is in the process of reconstruction after many years of conflict, but hundreds of thousands of women and girls continue to suffer abuse at the hands of their husbands, fathers, brothers, armed individuals, parallel legal systems, and institutions of the state itself such as the police and the justice system. There are reported increases in forced marriages; some women in difficult situations have even killed themselves to escape such a heinous situation, while others burn themselves to death to draw attention to their plight. Husbands, brothers, and fathers are the main perpetrators of violence in the home, but the social control and the power that they exercise is reinforced by the authorities, whether of the state or from informal justice systems such as 'shuras' (arabic word for "consultation"; believed to be the method by which pre-Islamic Arabian tribes selected leaders and made major decisions) and 'jirgas' (tribal assembly of elders which takes decisions by consensus, particularly among the Pashtun in Afghanistan).

Looking at gender violence in East-Africa, Amnesty reports that violence against women in **Kenya** remains widespread despite efforts to increase public awareness by the authorities and civil society. Perpetrators of violence against women included both state officials and private individuals, according to the report, which was launched by Amnesty's Kenyan chapter in Nairobi in May 2005. The report notes women and girls are subjected to domestic violence, sexual assault, rape, incest, forced marriages, and female genital mutilation. Gang rape and sexual assault during robbery and car-jacking are also frequently reported. Between January and August 2004, the police had recorded 1,895 rape cases, but noted that many more had not been reported to the police. In 2003, there were 2,308 rapes reported to law enforcement agencies.

Amnesty noted that a Kenyan demographic health survey released in August that year had indicated that more than half the women had experienced violence since they were 15. The survey showed that husbands inflicted 60 percent of the beatings. Women's rights groups in Kenya have attributed the low rate of convictions in sexual offence cases to a lack of trained police officers to carry out investigations, difficulties in the preservation of forensic evidence in rape cases and a shortage of lawyers with specialised training to prosecute such cases. The report states that government institutions for supporting survivors of violence were inadequate and services such as shelters and counselling were lacking - adding that there was no access to post-exposure prophylaxis against sexually-transmitted diseases in rape cases. Kenyan authorities have now formed a special unit in the office of the Director of Public Prosecutions to handle sexual offences and set up a women-only police station in Nairobi to deal exclusively with rape, domestic violence, and child abuse cases. We note here that this initiative is an excellent one but it treats the symptoms rather than treating the disease. However, until the disease itself is cured, then we argue that assisting women to deal with the after effects of domestic and other violence is a viable option and one which could alleviate the suffering of many women in Kenya.

And closer to home, gender violence in **Uganda** is still a problem despite the Constitution. Violence against women does not only take place behind the closed door of the home: our girls in schools are also at risk. A report from a collaborative research project between the University of Sussex School of Education and African educationalists, documents the abuse of girls in a number of secondary schools in sub-Saharan countries. Researchers found that “schools are breeding grounds for potentially damaging gendered practices which remain with pupils into adult life. By not clamping down on sexual abuse and aggressive behaviour, schools send messages to pupils that violence is a “normal” feature of life. Powerful peer pressures encourage pubescent girls to make themselves attractive to boys and boys to get girlfriends, using coercion if necessary. Transactional sex –as a means for girls to pay school fees, meet living expenses, or obtain gifts– seems common. Girls often see their bodies as an economic asset. Some may enter sexual relationships with older men out of choice, but poverty pushes other girls who have no other means of supporting themselves into dependent and potentially exploitative liaisons. Girls come to see their bodies as an economic asset.” In such relationships, they have limited choices over the use of condoms.

The researchers (Fiona Leach, Vivian Fiscian, Esme Kadzamira, Eve Lemani, and Pamela Machakanja) found that sexual abuse by older pupils, teachers and “sugar daddies” is only one aspect of a wider problem of school-based violence, which includes excessive corporal punishment and bullying. There are high levels of apathy among officials, lack of information among pupils and parents and a reluctance to believe girls who make allegations. Interestingly, most teachers do not see boys’ intimidating behaviour as a serious problem but as part of growing up, and they are generally unwilling to report other teachers’ sexual misconduct. Not all parents, teachers, and girls disapprove of teachers or older men having sexual liaisons with schoolgirls, whether for economic or cultural reasons.

Almost every day when we read the daily newspapers, we read of a case of abuse of an under-age girl. Given this situation, we can recognize the fact that serious work needs to be done so that teachers, parents, and school-children themselves recognize that sexual abuse and harassment also constitutes gender violence. Our greatest challenge is to make schools safe environments for Africa’s schoolgirls.

- **Domestic violence in Uganda**

Despite the chronic and widespread nature of the global phenomenon of domestic violence, there has been an astounding failure to prosecute this crime even in countries with greater institutional capacity. In Uganda, there are no specific laws that provide Ugandan women with any meaningful protection from domestic violence. Since the early 1990s, local NGOs have unsuccessfully lobbied the government to pass domestic violence legislation and legislation addressing domestic relations. According to women’s rights activists, in many Ugandan communities, wife battery that does not result in serious injury is tolerated and is considered a normal part of marriage. As a result of the under-reporting of domestic violence and the paucity of official statistics, domestic violence rates are difficult to measure with absolute accuracy. However, it is generally agreed that domestic violence rates are high in Uganda. According to U.N. statistics, in 2000, 41 percent of Ugandan women had suffered domestic violence. A

study that examined domestic violence among women attending the prenatal clinic in Mulago Hospital, the largest hospital in Uganda providing free medical services, found that 40.7 percent of women reported physical assaults in the year before conceiving. Police Superintendent Helen Alyek of the Child and Family Protection Unit at Nsambya Police Station told Human Rights Watch that complaints of domestic violence rose from 495 in 2001 to 1009 in 2002. Alyek attributed the rise primarily to training on women's rights, but also to increased levels of violence as a result of poverty.

As recently as August 2002, the U.N. Committee on the Elimination of Discrimination against Women (CEDAW Committee) expressed concern at the high incidence of violence against women in Uganda, including domestic violence and marital rape, and the absence of legal measures to address such violence. In the absence of a domestic violence law, the police and courts rely on assorted, non-specific provisions in the Penal Code that cover assault and homicide. A prior judicial order of separation is necessary in order to charge a man with the rape of his wife and the law otherwise relies on the common law presumption of consent within marriage. Existing criminal laws do not provide adequate legal remedies and punishments are often very lenient, with the accused being warned or fined. In our interviews we found that battered women rarely report domestic violence cases due to their lack of confidence in the legal system, and, in the cases in which they do report, law enforcement officials rarely intervene to protect women. A wife who reports her husband to the police for beating her faces social stigmatization for exposing family matters to the public. Most notably, in March 2002, the then Vice-President Specioza Kazibwe stated that she had been a victim of domestic violence. This deeply personal revelation, which should have helped in the destigmatization of the issue, was instead met by extremely negative press and "anti-women" rhetoric on the radio.

Individual women and NGO representatives depicted government institutions that directly handle cases of violence against women as ineffective and non-responsive to women's needs. The Coalition Against Gender Violence, composed of five professional women's NGOs and the Ministry of Gender, Labour and Social Development, reported: "Numerous challenges remain regarding reporting, follow up, arrest, trial and punishment of perpetrators [of gender violence]. These include the fact that officials in these different structures and often the victims themselves are inculcated in and have internalized the culture of gender inequality such that they are not cognizant of what constitutes gender violence." In an effort to enhance the police response, the government has established family protection units at police posts at the national level, gender desks at the district level, and has carried out gender sensitization of law enforcement agencies. However, NGOs report that while police are trained extensively on children's rights, training on women's rights is largely absent.

To date, the most significant pieces of pending legislation with regard to domestic relations are the Domestic Relations Bill (Draft) (Domestic Relations Bill), which seeks to consolidate the six different statutes that relate to marriage and divorce in Uganda, and the Sexual Offences (Miscellaneous Amendments) Bill (Sexual Offences Bill). There has been serious government opposition to their enactment because they address issues such as marital rape, women's ownership of marital property, and polygyny, and therefore have far-reaching cultural and religious ramifications. The CEDAW committee has expressed concern at the slow progress in eradicating both de jure and de facto discrimination and has strongly recommended the speedy enactment of the

Domestic Relations Bill and the Sexual Offences Bill. With the exception of criminalizing marital rape, however, neither the Domestic Relations Bill nor the Sexual Offences Bill addresses other facets of domestic violence.

The fact that domestic violence is an issue in Uganda today demonstrates that women (who are for the most part the victims of domestic violence) are regarded as second-class citizens. The fact that most of the women who are abused do not report their cases means that patriarchy is a deeply-rooted system that silences women because social structures (sometimes as a result of cultural beliefs and practices) are not conducive to women taking a stand and defending themselves.

- **Honour killings in Turkey**

Let us now turn our attention to another crime, a crime that shocks the world in its brutality: honour killings. According to a recent report by journalist Sebneb Arsu in the New York Times, a nationwide campaign in Turkey aims to end so-called honour killings, in which a woman is killed by her husband or a male relative for alleged behaviour that is perceived as a slight to the dignity and respectability of her family. Rights organizations in Turkey and abroad have long denounced the traditional practice as brutal and unfair to women. Shockingly, men who engage in these murders are not held accountable by the law. According to official records, 43 women in Turkey were victims of honour killings in 2004. But activists say the true number is far greater, with families reporting deaths as suicides or simply filing missing persons reports.

However, a new penal code, ratified in September 2004, eliminated “protection of family honour” as a mitigating circumstance in murder trials and introduced heavier penalties for honour killing convictions. Another recent law calls for the creation of a women's shelter in every large municipality in the country. The campaign entails promotional spots on at least 10 television stations and hundreds of radio stations nationally, plus messages on billboards and fliers. Nilufer Narli, a sociologist from Kadir Has University in Istanbul, asserts: "Panels and conferences reach the elite, but you need television and movies to reach people in the street." Perhaps this could also be a strategy Uganda rights groups could use more effectively to sensitize on violence against women countrywide.

- **Honour crimes in Iraq**

The following report from Amnesty International is given in full. Read it carefully and note your reactions as you do so.

Honour Crimes in Iraq. A Report by Amnesty International

Most victims of "honour crimes" are women and girls who are considered to have shamed the women's families by immoral behaviour. Often the grounds for such an accusation are flimsy and no more than rumour. "Honour crimes" are most often perpetrated by male members of the women's families in the belief that such crimes restore their and the family's honour.

In international human rights law, "honour crimes" are recognized as a form of violence against women in the family or community. The rights that they violate include the right to life and security of the person; freedom from torture and cruel, inhuman and degrading treatment; and the right to equality before the law and to equal protection of the law. They also deprive women of rights assured by the UN Women's Convention, for example the rights to choose a marriage partner, to enter into marriage freely, to freedom from discrimination, and to be treated as a human being with dignity and equal rights to men.

In recent years, reports by Kurdish women's organizations on violence against women in northern Iraq have gained international attention and been echoed in reports by international organizations. The Committee on the Elimination of Discrimination against Women, the UN expert body charged with monitoring implementation of the Convention on the Elimination of All Forms of Discrimination against Women, noted in 2000 that: "The Committee is... deeply concerned by the violence against women perpetrated through honour killings." The Committee urged the Iraqi government in particular "to condemn and eradicate honour killings and ensure that these crimes are prosecuted and punished in the same way as other homicides". Furthermore, the UN Special Rapporteur on violence against women referred to the practice of "honour killings" in Iraq in her report of January 2002 to the Commission on Human Rights.

The UN Commission on Human Rights has addressed "honour killings" in the context of the right to life and called on states to "investigate promptly and thoroughly all killings committed in the name of passion or in the name of honour...and to bring those responsible to justice before a competent, independent and impartial judiciary, and to ensure that such killings, including those committed by... private forces, are neither condoned nor sanctioned by government officials or personnel".

The organization, Kurdish Women Against Honour Killings (KWAHK), reported that between 1991 and 1998, hundreds of women had died in so-called "honour killings" in northern Iraq. The report listed more than 100 individual cases of women killed during the 1990s by their husbands, brothers, cousins, and other family members in northern Iraq. Among reasons given for the killings were that the women had committed adultery, refused to marry against her will, or left home in order to marry a man of her own choice.

Until legal reforms specifically to address "honour killings" were introduced by the Kurdish authorities in northern Iraq between 2000 and 2002, the perpetrators of such killings were either never tried or received generally lenient sentences.

In one well-documented case, a court in Dohuk, northern Iraq, accepted the "honourable motivation" of men who had killed a young woman as grounds for leniency in sentencing. Pela, unmarried and living with her family in Sweden, was killed on 24 June 1999 on a visit to the family home in Dohuk. Breen, Pela's younger sister, heard a shot upstairs. Her uncle, Rezkar Atroshi, came out of the room holding a gun, and claimed that Pela had shot herself. Breen, initially made to leave the house, later managed to get back in. Running upstairs, she found her sister covered in blood but still alive. Pela said that her uncle had shot her. Her mother helped bring her downstairs to the living room. There she was shot in the head and killed by one of her uncles. On 9 October 1999 the Dohuk Criminal Court convicted Pela's father, Agid

Atroshi, and her uncle Rezkar of the killing, but gave them each a suspended one-year prison sentence.

The court referred to a report from the autopsy that "the hymen was broken" and to the defendants' "honourable motivation" in support of its decision. The Court of Cassation reviewed the verdict and on 22 February 2000 ruled that the one-year sentence be served. In January 2000, Pela's uncles Rezkar and Dahasz Atroshi were arrested in Sweden. On 12 January 2001 the Stockholm City Court convicted both men of the murder and sentenced them to life imprisonment. The sentences were confirmed on appeal.

Mutilation is another form of "honour crime" used in northern Iraq as a punishment for people accused of a relationship considered to be illegitimate. In July 1996, Kajal Khidr, 24 years old and pregnant, was accused of adultery, tortured and mutilated by six members of her husband's family near the town of Rania, Sulaimaniya governorate. They cut off part of her nose, and told her that she would be killed after the birth of her child. She received treatment at a hospital in Rania, and a further three months of hospital treatment in Sulaimaniya, where she was kept under police protection. She then spent a year in hiding before finding refuge with a women's organization in Sulaimaniya. With the help of local human rights activists, she fled to Syria in February 1999 and was recognized as a refugee by the UN High Commissioner for Refugees. In July 2000 she was resettled in a third country where she lives with her daughter. Two of the men who had tortured her were arrested by the Patriotic Union of Kurdistan (PUK) authorities, which controlled the area, but were released within 24 hours on the grounds that they had acted to safeguard the "honour" of the family. No charges were ever brought against them.

Dunya (not her real name) from the Rania region was forced to marry against her will in 1999. Before her marriage she had been in love with Ahmed (not his real name), her husband's nephew. In March 2002 her husband accused her of adultery with Ahmed, and the families decided to cut off Dunya's nose and one of Ahmed's ears. In September 2002 one of Ahmed's relatives was sentenced to four years' imprisonment for carrying out the mutilations, two years for each offence.

Between 2000 and 2002 the Kurdish authorities amended the law so that courts could no longer find "honourable motivation" a mitigating circumstance in "honour crimes" against women. However, despite these reforms, Kurdish women's organizations fear that more efforts are made to conceal "honour killings", in order to avoid the judicial consequences. The Women's Information and Cultural Centre (WICC) suspects that the bodies of victims of "honour killings" have been hidden, or mutilated to conceal their identities. The Centre has reported recent cases where women have died in suspicious circumstances, and relatives have claimed that the deaths were accidental. One man who had killed his daughter-in-law, Gulestan, in June 2001 in the Balisan area, told the Centre in August 2002:

"We killed this woman to end the problem. If we did not kill this woman, two families would have got into a fight and maybe 15 people would have died over this. We have tribal customs and we do not take such cases to court... If I did not kill her I may have been told many times that I did not keep my honour... If I did not kill her, whenever I will have a family problem, the issue will be mentioned again." He said that they had

to act swiftly to prevent the authorities from protecting Gulestan. Although he was aware of the legal amendments regarding "honour killings", he did not expect the case to be brought to trial. An agreement, including the payment of compensation, had been reached with Gulestan's family, and the local authorities appeared to be aware of the arrangement.

Women and girls living in hiding to escape "honour killings" have given videotaped interviews about their experiences. One of them, Nivan (not her real name), ran away in 2002 at the age of 16 to marry the man she loved, against the will of her family. Attempts to reconcile her family and her husband's family, involving religious leaders and local authorities, were unsuccessful. Her family was allegedly behind an attempt to kill her and her husband, and the killing of her husband three months later in mid-2003. Initially detained on suspicion of involvement in the killing, she was released after two months, and now lives with her child in hiding. "I have no future. My family will look for me to kill me. I can never return to my family," she said.

In recent years several organizations have been established in northern Iraq that offer support for women at risk of violence, including survivors of attempted "honour killings". One of these organizations is the Sulaimaniya-based Asuda Centre for Combating Violence against Women (Asuda Centre), which in August 2002 opened a shelter for women survivors of violence at a secret location. Asuda Centre's work to protect women who have experienced violence or those at risk includes negotiating with their families. Most organizations operating in northern Iraq and offering support for women who have escaped violence in the home consider a controlled return to the family to be the most likely means of arriving at a long term solution. To ensure a woman's safe return, the male head of the family is often required to sign an official undertaking to guarantee the woman's protection. However, an activist of the Sulaimaniya-based women's centre, Khanzad, told Amnesty International that there had been cases in which families had killed a woman after her arranged return.

Kurdish women's rights activists have reported that several women who have remained in a shelter for more than a year, because no settlement with their families could be reached, might only be able to find safety in the long term outside northern Iraq or even outside Iraq altogether.

Violence associated with "honour crimes" has never been confined to northern Iraq. The Iraqi author, Fuad Tekerly, who worked as a judge in Baghdad, took a stand against such crimes when he published a short story in 1972 about a man claiming that he killed his sister-in-law in order to protect his family honour. The story reveals that the woman was murdered because she had discovered her brother-in-law's adulterous relationship with a relative.

More recently, lawyers have spoken of their involvement in cases of "honour killings" in the 1980s and 1990s in central and southern Iraq. A lawyer from Baghdad reported a case in which she was involved in the mid-1990s. She was representing Azima (not her real name), a teenage girl from the Abu Ghraib neighbourhood in Baghdad, who had been arrested after running away from her family with her lover. After several months of negotiations, she was returned to her family, who promised to ensure her safety. However, a month later she was shot dead by her teenage brother. The brother

was sentenced to six months' imprisonment for the killing.

Another lawyer reported details of more than a dozen cases of "honour killings" that have been tried at Basra Criminal Court over the past three decades. She told Amnesty International about the killing of a young single mother in Basra: "In the beginning of the 1980s I witnessed a case of 'honour killing'. I was on my way to the Basra Criminal Court. About 10 metres away from me, I saw a young man talking to a woman holding a baby child. Suddenly he pulled out a pistol and fired at her. The woman fell to the ground. The man lifted her up and pulled the child from beneath her. Then he covered her body, took the child and walked into the court building".

The murdered woman had become pregnant as a result of a secret relationship. She had turned to the police for protection and had been kept at a police station until her child was about a year old, when she was told to leave. She was apparently on her way to court to seek further protection when her brother killed her. At his trial, he was given a suspended two-year prison sentence.

The same Basra-based lawyer also reported cases in which the perpetrators of "honour killings" received significantly higher sentences. She recalled a case in the early 1980s in Basra. A young woman was returned to her family shortly after her wedding by her husband, who claimed that she was not a virgin when they married. She was stabbed to death by a member of her family. However, the autopsy report revealed that her hymen was intact, and the perpetrator was sentenced to at least 10 years' imprisonment. The lawyer had experience of negotiations with the families of women seeking protection from threats of "honour crimes", and of the killing of a young woman by a relative one year after a settlement ensuring her safety had been agreed with the family.

"Honour killings" have continued during and after the Iraq-Iran war, the Gulf war in 1990-91 and the 2003 US-led war on Iraq. There is insufficient information available to establish whether the incidence of "honour killings" has increased over the past decades of armed conflict in Iraq. However, during the months of lawlessness following the 2003 US-led invasion, the perpetrators of "honour killings" – like other criminals – were unlikely to be tried. The lack of a functioning judicial system during the months after the 2003 war contributed to an increase in the part played by tribal bodies in resolving conflicts, including in relation to "honour crimes". In one case at the beginning of 2004 in al-'Amara, there was a settlement between two tribes over an "honour killing". A husband of two wives had killed his second and younger wife when he discovered she had been involved in a love affair while he was absent for several months. The tribal settlement did not provide any punishment for the killing of the woman, but required her family to compensate the husband.

Thus, while the authorities in the countries where honour killings are taking place are attempting to enact laws that would outlaw the practice, we see that traditional cultural values and beliefs are often working against legislation.

Addressing Sexual Violence in Humanitarian Settings

Sexual violence is common in humanitarian settings. It may become more acute in the wake of a natural disaster and occurs at every stage of a conflict. The victims are usually women and adolescents, who have often been separated from their families and communities and whose care-taking roles increase their vulnerability to exploitation and abuse. Breakdowns in law and order and in protective societal norms mean that most perpetrators abuse with impunity.

In many conflicts, women's bodies become battlegrounds, with rape used as a method of warfare to humiliate, dominate or disrupt social ties. In the aftermath of natural disasters, women and young people may be left unaccompanied -- out in the open or in temporary shelters -- at the same time that security lapses lead to increased lawlessness and chaos.

The impact of sexual violence, especially rape, can be devastating. Physical consequences include injuries, unwanted pregnancies, fistula and HIV. Widespread sexual violence is also endemic in many post-conflict situations, where it can perpetuate a cycle of anxiety and fear that impedes recovery. However, because reliable data about sexual violence in these situations is scarce, UNFPA is spearheading efforts to determine the scope of the problem in many different contexts.

Prevention

Sexual violence is not inevitable. Better policing, involving women in the design of humanitarian assistance, working with displaced communities to develop systems of protection, and ending impunity for perpetrators are just a few of the actions that can help to minimize sexual violence. Information campaigns and community education can help to raise awareness of the issue, stimulate community dialogue, reduce stigma, and encourage survivors to report incidents and seek care. Effective campaigns positively engage men and promote reflection about cultural attitudes and gender inequalities that perpetuate violence against women.

- In Colombia, UNFPA's advocacy on sexual violence issues resulted in improved policies for women, including a law on the prevention of sexual violence and legal enforcement for perpetrators of rape.
- In Afghanistan, UNFPA supported the Afghan National Police to set up a centre that specifically deals with family violence and female crime victims and which is staffed by Afghan policewomen.
- In the Democratic Republic of Congo, UNFPA has trained and financially supported police units for Women and Children Protection Sections, and has engaged community groups to educate peers on the existence of these special police units and their sensitivity to the particular needs of women and children.
- In Darfur, Sudan, UNFPA-supported sexual violence committees have worked with the African Union Civil Police to arrange escorts for women and girls during firewood collection, as well as to monitor IDP camps. UNFPA has also successfully lobbied for an increased number of female Civil Police to be deployed to Darfur.

- In Liberia, UNFPA provided funding and support to the Ministry of Gender (MoG) which resulted in sexual violence being taken up within the highest levels of Government, as a core responsibility of the MoG.
- In the occupied Palestinian territories, UNFPA trained and supported gender focal points in several ministries and government-run institutions, and provided technical support to civil society organizations to institutionalize gender and human rights principles.
- At the global level, UNFPA has developed an exhibition of portraits from around the world focusing on actors and actions that help to prevent sexual violence in conflict and post-conflict situations

Response

UNFPA's country offices promote a multi-sectoral, holistic approach to addressing sexual violence in humanitarian settings. Using a survivor-centred and survivor-driven approach, UNFPA provides a wide range of services to encourage social reintegration of survivors, including counseling and assistance with livelihoods. It trains police officers, lawyers and judges to ensure safe and ethical care for survivors, and works with all levels of medical professionals to foster appropriate and timely responses.

Medical treatment is critical for someone who has been sexually assaulted. Survivors need antibiotics to prevent infection and may require treatment for abrasions, tears, or traumatic fistula, a devastating but operable injury that may occur as a result of sexual assault.

In addition to physical injury, women and girls who are raped may be at risk of unwanted pregnancy or sexually transmitted infection. If provided in time, emergency contraception can prevent an unwanted pregnancy, and post-exposure prophylaxis can prevent the transmission of HIV and other sexually transmitted infections.

Much of UNFPA's work to address the issue of gender-based violence in humanitarian contexts is in the field of health response, and training other first responders (such as police and community or women's advocates) to more effectively care for sexual violence survivors. For example:

- In countries such as Central African Republic, Uganda and Nepal, UNFPA has trained health-service providers, security forces and key decision makers to effectively address sexual violence.
- In Afghanistan, where survivors of violence can often barely receive health services, UNFPA has worked through national actors to mainstream gender and human rights issues into the health service sector and successfully advocated to integrate violence against women issues into the national training curriculum for health service providers.
- In Sudan, UNFPA's work with the Government resulted in sexual violence survivors being able to directly access health services without first having to visit the police.

At the global level, in late 2007 UNFPA partnered with UNICEF to lead two regional "Caring for Survivors" workshops, in Timor-Leste and Jordan. The training focuses on building knowledge and skills in various aspects related to how responders communicate and interact with

sexual violence survivors in conflict-affected settings. At the heart of this process is the emphasis on understanding and demonstrating a survivor-centred attitude, and using survivor-centred communication skills.

Clinical management of rape

Since 2005, UNFPA and UNHCR have partnered to conduct trainings for health care providers working in refugee, internally-displaced person and other humanitarian settings on the clinical management of rape survivors. The two-day curriculum includes modules on taking a survivor's history, collecting forensic evidence, examining a survivor and prescribing treatment, including emergency contraception, treatment of sexually transmitted infections and post-exposure prophylaxis to prevent the transmission of HIV. To date, UNFPA has conducted four regional training-of-trainers workshops in Geneva, Johannesburg, Nairobi and Cairo. Of those who have been trained as trainers, many are now actively engaged in training health providers in Nepal, Haiti, Liberia, Sudan, Zimbabwe and Cote d'Ivoire (among other countries). In addition, national trainings were conducted in over 10 countries, reaching nearly 500 health-care providers.

Overall coordination

In late September 2005, as part of the humanitarian reform process, UNFPA was tasked with coordinating gender-based violence issues in humanitarian settings. Proper coordination of this complicated issue, which often engages a wide range of UN and other actors, is vital to ensuring that survivors receive adequate care, and that prevention efforts are varied, wide-reaching and appropriate. As a development agency with growing experience in humanitarian settings, UNFPA continues to forge new partnerships and to increase its human resources and technical capacities to scale up its coordination efforts.

- UNFPA has been led the roll-out and operationalisation of the IASC Guidelines for Gender-Based Violence Interventions in Humanitarian Settings to ensure coordinated, cross-cluster action to prevent and respond to sexual violence.
- UNFPA has been working with partners to document 'good practices' in coordinating efforts to end gender-based violence across a range of humanitarian contexts.
- In January 2007 UNFPA helped mobilize a coalition of 12 UN entities to create UN Action against Sexual Violence in Conflict -- a global forum that encourages country and regional intra-UN partnerships for action.

UNFPA is partnering with Ghent University in Belgium to train senior-level sexual violence field actors to improve their knowledge, understanding and communication skills to coordinate multi-sectoral response to sexual violence in humanitarian settings

- **Women's health**

The **World Health Organization (WHO)** released its World Health Report 2005, simultaneously in Geneva and New Delhi, on World Health Day (6 April), to coincide with its theme 'Make Every Mother And Child Count'. According to the WHO, 10.6 million children die before age five, and half a million women die in childbirth every year because they have no access to life-saving care. The Report states that the death toll can be sharply reduced through wider use of key interventions and a "continuum of care" approach for mother and child that begins before pregnancy and extends through childbirth and into the baby's childhood.

About 530 000 women a year die in pregnancy or childbirth, more than three million babies are stillborn, more than four million newborns die within the first days or weeks of life. The report estimates that out of a total of 136 million births a year worldwide, less than two thirds of women in less developed countries and only one third in the least developed countries have their babies delivered by a skilled attendant - a fact which can make the difference between life and death, if there are complications. Almost 90% of all deaths among children under five years of age are attributable to just six conditions. These are: acute neonatal conditions, mainly pre term birth, birth asphyxia and infections, which account for 37% of the total; lower respiratory infections, mostly pneumonia (19%); diarrhoea (18%); malaria (8%); measles (4%); and HIV/AIDS (3%). Most of these deaths are avoidable through existing interventions that are simple, affordable and effective. They include oral rehydration therapy, antibiotics, antimalarial drugs and insecticide-treated bed nets, vitamin A and other micro nutrients, promotion of breastfeeding, immunization, and skilled care during pregnancy and childbirth.

India adds 16 million people every year to its population, just two million less than the entire population of Australia. Given the dangers of pregnancy and childbirth, India's maternal mortality rates are among the highest in the world today.

- 60 per cent of the women are anaemic.
- More women than men die before the age of 35.
- Maternal deaths in India account for almost 25 percent of the world's childbirth-related deaths.
- More than half of Indian women are illiterate though it has the second largest education system in the world after China.
- Maternal mortality rate in India is 100 times more than in the developed world.

India's women remain significantly more malnourished than men. Bias against women and girls is reflected in the demographic ratio of 933 females for every 1,000 males. The country's maternal mortality rates are very high, particularly in rural areas, ranging from 440 to 580 deaths per 100,000 live births. India made modest increases in primary education enrolment rates in the 1990s. Today, it has 108 million children aged 6 -10 attending primary school. Yet more than half of Indian women are still illiterate; about 40 million primary school-age children are not in school (mostly girls and those from the poorest and socially-excluded households); and only about one-third of an age group completes the constitutionally prescribed eight years of education.

According to the **United Nations Family Planning Association**, projections of the world's population should spur more urgent action to stop the spread of HIV/AIDS

and help more women and men determine freely the size of their families. According to its just released World Population Prospects: The 2004 Revision, the number of people in the world is expected to rise by 2.6 billion, from today's 6.5 billion to 9.1 billion in 2050. The report's 2002 edition had projected a population of 8.9 billion in 2050. Almost all growth will take place in developing regions, where population is expected to rise from today's 5.3 billion to 7.8 billion, according to World Population Prospects. By contrast, developed countries' population will remain mostly unchanged, at 1.2 billion. "We must take more urgent action to promote access to reproductive health, including family planning, and fight HIV/AIDS to save millions of lives from AIDS and maternal death, as well as to reduce poverty in developing countries," said Thoraya Ahmed Obaid, UNFPA's Executive Director. Post Beijing, it is important to promote women's rights to protect their welfare and health, especially reproductive health. Developing countries suffer most of the world's deaths from AIDS and lose most of the half million women who die each year from childbirth-related causes.

- **The case of widow "cleansing"**

According to Sharon LaFraniere in the New York Times, in several African nations including Malawi, Zambia, and Kenya, a husband's funeral has long concluded with a final ritual: sex between the widow and one of her husband's relatives, to break the bond with his spirit and, it is said, save her and the rest of the village from insanity or disease. She reports that widows have long tolerated it, and traditional leaders have endorsed it, as an unchallenged tradition of rural African life.

Now HIV/AIDS is changing that. Political and tribal leaders are starting to speak out publicly against so-called sexual cleansing, condemning it as one reason the disease has spread to 25 million sub-Saharan Africans, killing 2.3 million last year alone. Pushing for change is the region's fledgling women's rights movement, which contends that lack of control over their sex lives is a major reason 60% of those infected in sub-Saharan Africa are women.

Many women are taught from childhood not to challenge tribal leaders or the prerogatives of men, the fear of flouting tradition often outweighing even the fear of AIDS. In Zambia, where 20% of adults are now infected with the virus, the National AIDS Council calls the practice very common. President Levy Mwanawasa has declared that forcing new widows into sex or marriage with their husband's relatives should be discouraged, and the nation's tribal chiefs have decided not to enforce either tradition. But a survey by Women and Law in Southern Africa found that in at least one-third of the country's provinces, sexual "cleansing" of widows persists.

- **HIV/AIDS**

The UNAIDS report on the HIV/AIDS pandemic highlights the growing rates of infection among women worldwide. Women now account for nearly 50% of all individuals living with HIV/AIDS worldwide. However, in Africa, the situation is more ominous. Almost 57% of all individuals living with HIV/AIDS in Africa are women. For Africans ages 15-24 living with HIV/AIDS, women account for 76% of all infections. In South Africa, Zambia and Zimbabwe, young women ages 15-24 have rates of infection that are between three and six times that of their male peers. According to Chinua

Akukwe, professorial lecturer in Global Health at George Washington University, “the key question is whether African leaders are ready to make hard choices that would slow down the rate of infection among women. For the African woman at the receiving end of HIV/AIDS, the solution lies principally in changing societal beliefs and practices within her family, community, country, and the continent. The solution to gender inequities lies in the capacity of African governments to confront societal beliefs and practices that wittingly or unwittingly put women at risk of physical, emotional and mental harm.” The HIV/AIDS epidemic in Africa is exposing deadly consequences of gender inequities. As the toll of HIV/AIDS mounts in Africa and the epidemic gradually assumes a feminine connotation, every policy maker in Africa needs to work toward the end of all practices that prevent African women from becoming full partners in the titanic struggle ahead.

- **Women who are cut**

In this section we examine a subject that is extremely sensitive from a cultural point of view. While every attempt has been made to be non-judgemental, the evidence collected may prove disturbing reading.

According to the WHO, there is a practice that is predominantly prevalent in Africa but which has created uproar among many nations because of its severe health risks for the women, both physically and psychologically. It is used often as a symbol of subjugation for women in patriarchal societies. Once known as Female circumcision, health officials working for the rights of women are now calling this procedure Female Genital Mutilation [FGM] or Female Genital Cutting [FGC]. According to the WHO, FGC is the partial removal of the female genitalia. It is a procedure used primarily for religious or cultural practices. There have been no therapeutic benefits recorded for FGM. Worldwide, about 130 million women have experienced some form of genital mutilation. Women's activists groups are horrified by the health consequences as a result of this practice, and are working to ban it.

According to the World Health Organisation, there are six different types of female genital mutilation currently practiced. They are divided into Types I -- IV, and there are two additional methods.

1. One of these two methods involves scraping (angurya cutting) or cutting (gishiri cutting) the vaginal area.
2. The other unclassified method involves applying corrosive substances or herbs in or around the vagina to induce bleeding or to constrict the vaginal walls, making the vagina tighter and narrower.
3. Type I FGM, or clitoridectomy, is the removal of the clitoral hood. The clitoris may or may not be removed along with it. In Islamic cultures, this process is known as a "sunna circumcision." The significance of the word "sunna" refers to tradition and the prophet Muhammed.
4. Type II FGM, or an excision, is the removal of the clitoris along with either partial or full removal of the labia minora.
5. Type III FGM is called infibulation, or pharaonic circumcision. This is a clitoridectomy, an excision, and the removal of a part or all of the external

genitalia, which is then sewn over part of the vagina, narrowing the opening. This allows only a small hole for urine and menstrual blood to pass through.

6. Type IV FGM is the process of pricking, piercing, incising, stretching, or cauterization (burning) of the clitoris, labia and surrounding tissue. In a man, FGM can be equivalent to cutting of part of or the entirety of a man's penis.

In Africa, where most FGM cases occur, Amnesty International reports 15 percent of the procedures to be an infibulation. However, 85 percent of FGMs in Africa will be either a clitoridectomy or an excision. This statistic reflects about an annual rate of two million young girls that will expect to undergo this procedure. Many cultures where FGM is practised believe that a woman is only initiated into her womanhood when she experiences the knife, razor or glass shard to her genitalia. Gender identity as a woman is important for many tribal societies, who perform elaborate rituals that are central to the girl's coming of age.

The late Kenyan President Jomo Kenyatta has been quoted supporting FGM for reasons that abolishing the practice "[would] destroy the tribal system" that has been upheld for so long in the Kikuyu tribes from the rural Kenyan areas. Amnesty International claims that the people of Sierra Leone feel socially and politically cohesive when their cultures carry on FGM rituals for all their women in the Bundo and Sande societies. In other cases, FGM is believed to reduce the woman's desire for sex, thus reducing her tendency to become promiscuous. This is a way for men to subjugate and reduce a woman's basic freedoms.

In certain cultures, men are convinced that a woman will definitely stray if she is not cut. As a result, many women in patriarchal societies will attempt to deaden a woman's sexual appetite. Additionally some people hold the preposterous belief that FGM is essential for a woman's hygiene, cleanliness and health. In some communities, a woman who has not been cut is considered unclean and is not allowed to share food or drink with her community.

Other superstitious societies believe that if a woman's clitoris comes in contact with a man's penis, the man will die. Others believe that an uncut woman's baby will die during childbirth. However, the most common reason for FGM is that it regulates woman's sexual desire and "hysteria." Contrary to all these beliefs, medical proof has revealed FGM to be debilitating and dangerous to a woman's health. During the procedure, intense pain, shock and haemorrhage can occur. FGMs are usually carried out without sterile medical instruments.

Some girls or women can expect to be cut by a glass shard or a dull knife. Using the same piece of cutting apparatus on multiple women increases the risk of HIV/AIDS. Lack of proper sterilization procedures and unprofessional work carried out by tribal members will create such situations for women. Besides extreme pain and discomfort, chronic side effects include reoccurring vaginal infections, spontaneous bleeding, abscesses, keloids and small benign tumors can occur after a clitoridectomy. Infibulations come with many serious side effects. Women suffer from long term chronic urinary tract infections, which can damage the bladder, urethra and kidneys. Furthermore, menstrual flow is blocked, which infects the reproductive system. Pelvic infections, endometriosis, infertility, scar tissue buildups, keloids and cysts can arise. Sexual intercourse is also painful. Women have to be "reopened" in many cases. This

involves a gradual and painful reopening of her vaginal area, and many will experience another knife or cutting device to reopen the vagina.

Again, the lack of medical skill in many rural tribes and communities can create health risks during the reopening process. Penetration is extremely painful, and the fluids that flow from the unhealed wounds also increase the risk of spreading HIV during sex.

Childbirth is likewise excruciating. Build-ups of scar tissue can tear, and additionally, the mother has to be cut even more so that the baby can pass through the birth canal. If there is no attendant at hand to make these incisions, the perineum can tear, or there can be problems with obstructed labour. Sadly enough, many women are often closed up again to make their vaginal walls tight for their husband's sexual pleasure.

Repeated cutting and restitching of the genital area builds up rough scar tissue in the genital area, exacerbating the pain, and making intercourse and childbirth excruciating for a woman. Many international health organizations are working together to ban these practices. They are attempting to modify and compromise cultures which uphold FGM as an important and valued ritual. They even encourage a symbolic ceremony, such as holding a knife next to the genitals, pricking the clitoris, cutting pubic hair, or light and minimal scarification of the genital/ upper thigh area. However, while much progress has been made in recent years, much help is still needed in educating people about the effects of FGM.

This extract (which was taken from different reports of the WHO and AI) has attempted to document the health problems associated with FGC. It has not addressed the cultural ramifications of this and other practices. We ask you to think about the challenges posed to women's health through cultural practices.

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- **Sex workers in Uganda**

Let us now look at the issue of women as sex workers.

In 1949, the United Nations adopted a resolution in favour of the decriminalization of prostitution for individual prostitutes, which has been ratified by fifty countries (not by the United States). Many European countries including France and the United Kingdom decriminalize prostitution per se, leaving all related activities criminal such as soliciting, advertising, etc. In 1973 the National Organization for Women passed a resolution supporting the decriminalisation of prostitution.

Whether you are in favour of the decriminalization of prostitution or not, it remains a problem in East Africa just as it is all over the world. The fact that in **Uganda** most of the prostitutes are women, means that they are more at risk from the violent behaviour of their clients. Women who sell sex in Uganda today are also putting themselves at risk of contracting HIV and other sexually-transmitted diseases. The fact that in many rural areas of the country today, a man can buy sex from a 12 year old girl for between 500 - 800 shillings is a shocking fact. Young girls who sell sex are almost certainly unable to negotiate safe sex and are, therefore, cutting off their

chances of education since, unfortunately, few schools are willing to allow pregnant girls to attend class. This in itself is discrimination. And the police who regularly arrest the prostitutes in Kampala and herd them down to the Central Police Station for a night in the cells, themselves often take advantage of the girls' profession. Given the fact that many women and girls who sell sex are among the extreme poor, other options for gainful employment often are limited.

A study conducted in a town along the Kampala-Masaka highway in 2002 revealed that the women who sell sex (for various reasons) mostly sell sex to local men. In a culture where the senga prepares a girl for a monogamous marriage it is interesting to see how morality and norms refer to women only. As we have already seen, men are generally not expected to be virgins on their wedding night. Many of the women involved in the study had themselves dropped out of school early, had few other skills, and were under tremendous pressure to feed, clothe, and educate their children. Commercial sex seemed to be their only option. The study also pointed out that few of the local men consent to use condoms. Thus, the women were caught between wanting to make some money and leaving themselves open to sexually-transmitted diseases. And yet, few of the women in the study were ready to give up their line of work because they had more or less regular incomes. All this makes it extremely difficult to root out prostitution, and because so few men practise safe sex, we are likely to see the further spread of HIV infections among the girls who are increasingly being drawn into this trade because they are seen as clean and healthy. How long they remain so is questionable.

- **Women and the Strategic Development Goals**

Let us repeat some hard facts of the world today:

- More than 1,2 billion people around the world still live with less than one dollar per day and women are the worst hit by poverty.
- In the developing world, the risk of a woman dying during childbirth is one in 48.
- 113 million children (the majority female) do not attend school.
- Deadly diseases have destroyed a generation of development achievements.
- Two thirds of illiterate people around the world are women.
- Women and children make up 80 per cent of refugees.
- More than 1.2 billion people still have no access to drinking water.
- 11 million children die at birth each year.
- Too many developing countries spend more in debt servicing than in social services.

The eight Strategic Development Goals (SDGs), established in the Strategic Declaration, were approved by 191 Heads of State and Presidents at the General Assembly of the United Nations in the year 2000. They pledged to adopt new measures and join efforts in the fight against poverty, illiteracy, hunger, lack of education, gender inequality, infant and maternal mortality, disease and environmental degradation.

According to Ana Elena Obando of WHRnet (Women's Human Rights Net), numerous

women's rights advocates, such as Joanna Kerr, wonder whether women's organizations should be drawn completely into the SDGs given their need to focus backlash against reproductive rights, the prevalence of violence against women, the increase in militarism and fundamentalisms, as well as the poverty generated by neoliberal economic strategies. The SDGs, Kerr says, might be a good political tool for the World Bank or the UN agencies to promote gender equality through public policy, but not necessarily the most effective for women's groups seeking social transformation through many other means.

Under similar scrutiny, the SDGs have been subject to a series of critiques by the international women's movement, namely: The World Bank, the World Trade Organization and the national and international private sector are driving a free-market economy under neo-liberal policies which threaten the very essence of the Strategic Development Goals. There is no recognition in the Declaration or in the Goals of the global neo-liberal context and its potential affects on the implementation of the SDGs.

- **The SDG's: a commentary**

Privatisation, other reforms and deregulation through Free Trade Agreements are undermining the role of the States, leaving their citizens with a shrinking institutional space in which to demand accountability concerning the advancement of the SDGs. *Peggy Antrobus*, an academic from the Caribbean, wonders how governments are going to finance health and basic education when they are being pressured to reduce public spending sources.

Activists such as *Aruna Rao* from India point out that the SDGs are a technical overview of a series of very complex topics under a paternalistic approach which does not strengthen women's capacity to hold public and private governance and services accountable.

Another common critique is that the SDGs reduce the resolutions, platforms, programs and declarations of the United Nations Conferences of the eighties to eight objectives which exclude concepts, indicators and issues -such as gender-based violence and political participation- that are key to the advancement of women's human rights.

The indicators and goals of the SDGs are not adequate and, moreover, the indicators are quantifiable, which precludes measuring women's equality or empowerment, for instance.

Goal 3, which specifically calls for the promotion of gender equality and women's empowerment, does not recognize that gender equality is not just an objective by itself but also key to achieving the other seven Development Goals. Additionally, this objective should be measured at least with four indicators such as the percentage of women in parliament, levels of education and literacy as well as wage gaps. However, the UNDP report guide reduces it to just one indicator focused on education.

The SDGs exclude sexual and reproductive rights, as *Peggy Antrobus* argues. This

exclusion is an indicator of the politization of the process and the participation of international religious and economic fundamentalist groups and movements with an agenda that supposedly seeks to advance the rights of all human beings.

The SDGs do not include issues such as war and peace, although it is widely known that the problems women face during and after an armed conflict are one of the major challenges to advance development.

The SDGs do not take into account women's diversity: women with disabilities, indigenous women, and others who generally belong to the poorest groups and have less access to health, education, and other services.

Finally, the SDGs do not integrate the principle that human rights are indivisible, integral, and interrelated. Economic empowerment without reproductive rights or education without the elimination of sexual harassment and violence against women does not allow for the full exercise of human rights or women's full citizenship. It is not possible, for example, to think about promoting education for women if at the same time they cannot access water because this service has been privatized. It's impossible to analyze poverty without taking into account women's political participation and violence against women.

The international women's movement has also identified a number of challenges such as

- Strengthening the women's movement in order to propose strategies, mechanisms and plans to hold governments accountable locally and corporations accountable at the international level.
- Continuing to pressure them to implement the commitments made at the Conferences in the nineties, commitments which have not been included in the SDGs and are central to achieve gender equality and the other development objectives.
- Lobbying for Goal 3- "to promote gender equality and empower women" to include women as agents of change, decision-makers and policy beneficiaries.
- Urgently incorporating into the MGGs the relationship between the unequal distribution of wealth and poverty. We know that poverty is fabricated in order to make it seem like an independent variable, isolated from structural, economic and social causes, and that poverty indicators are selective and have been oversimplified.
- Integrating gender-specific actions into policies aimed at fulfilling the SDGs through the identification of operational and analytical examples of how a gender perspective can be mainstreamed into the policies; or the identification of tools that promote accountability in the implementation strategies; or awareness of the multidimensionality of Goal 3 in order to measure it through the reduction of poverty, economic security, the environment, and not only through education.
- Showing that the selection of the SDGs already exists in other Conferences, including Beijing, and that the efforts to achieve the Goals should take into account the rights, concepts, goals and objectives of those Conferences if they are to achieve gender equality.

- Ensuring that each of the SDGs can be disaggregated by gender and contains quantitative as well as qualitative gender-sensitive indicators in order to monitor their progress. Statistics are a political tool and a prerequisite for planning and monitoring national programs and policies.
- Training of those responsible for national planning on gender and development and providing them with tools for the development of gender budgets and the equitable distribution of public resources. At the same time, an accountability mechanism must be created to ensure that these people will effectively incorporate gender dimensions into national actions.

Perhaps the most important challenge is pointing out that without political will and global financial support, none of the other aspects will be possible and the SDGs will be mere words on paper.

There has been an on-line discussion which discusses among other things some of the opportunities that the SDGs provide to the women's movement.

According to some, the Strategic Declaration contains a strong language on human rights, equality and democracy, as well as a commitment to implement CEDAW; it also surges from global consensus and a common index of progress. It is an opportunity for high-level global politics under a development framework with goals and time-bound commitments.

Given that governments already have international legal obligations under human rights treaties concerning gender equality and UN monitoring and supervision mechanisms, these can be used in accordance with the SDGs. Examples of this are the official reports and shadow reports which are submitted to CEDAW and the recommendations from the Committee to be cross-used with the SDGs.

More than 40 countries have submitted reports related to the SDGs. The women's movement has the opportunity to include specific goals and indicators in each country, which are not already present in the reports and which are considered key for the advancement of gender equality.

The plans of action and platforms that stemmed from the Conferences of the nineties provide a framework to in which to advance the SDGs.

The SDGs present a strategic opportunity to open a dialogue between governments, donors and with civil society which could allow for further analysis of the barriers of women's unequal status in society which serves to hinder the achievement of the Development Goals.

The unequal human development in the world is easily visible in the advances of certain areas of the world and the stagnation or retrogression in others. Equality among nations, as well as between women and men, requires a global and local pact of the different powers in every sphere of human activity.

Even in those cases where issues related to human rights, sustainable development and social development prevail, advocacy for women's rights must go beyond the United Nations. The increasing number of international financial institutions (World

Trade Organization, IMF and the World Bank) and the agenda which they forward determines global policy, and the goals and objectives of any development policy including the SDGs will not be achieved if neo-liberal policies continue increasing the gender gaps. Given the publicity with which the SDGs were promoted when they were formulated, it is now a more sober human population who is faced with their limited success only.

Having painted a rather general picture of the state of some of the world's women, let us now look at the initiatives that have been made to eliminate discrimination and ensure that women's rights are safeguarded.

Beijing ++

Given the state of affairs we have outlined above, it is not surprising to find that institutional and non-institutional bodies and organs are working to achieve a more equal world. In June 2000, there was a conference at the United Nations, New York, continuing on 5 years from a similar conference in Beijing, 1995. (The formal name of the conference was "Women: 2000: Gender Equality, Development and Peace for the Twenty-First Century.")

Years before, in 1985, there was a conference in Nairobi, Kenya, to formulate strategies for advancing women's rights. This was followed by a "Plan of Action" defined in 1995, in Beijing. It has been recognized and agreed for a while that successful development also involves gender equality. The goals of this conference then was to reflect on the promised provisions of equality, development and peace for all women everywhere. Leading up to, and during the conference, many organizations had numerous issues to bring to the fore, including:

- Women's reproductive rights
- Abduction of girls
- Child soldiers and armed conflict
- Poverty and Economy
- Education and Training
- Health
- Violence
- Decision Making
- Institutional Mechanisms
- Human Rights
- Media
- Environment
- The Girl-child

According to a UN report, the international community had fallen far short of its commitments to empower women and achieve gender equality, and that only eight out of 188 member states had certain global agreements for this. It was also pointed out at this UN session that women continued to be deprived of basic and fundamental rights because of measures imposed in certain countries. In fact, some were even opposed to moving forward on such important issues, such as the Vatican, Nicaragua, Sudan, and Libya and sometimes Iraq and various other nations on particular issues such as

reproductive rights, even freedom of expression (Libya and the Vatican opposed this). The Vatican, Iran and some other delegations even wanted to delete references to sexual and reproductive rights and health in the Current Challenges section of the review document.

The Fourth World Conference on Women, held in Beijing in September 1995, culminated with the adoption of the Beijing Declaration and Platform for Action (BPFA) which we have already mentioned and will discuss further in unit 5. This Declaration describes and seeks to improve the situation of women around the world. It outlines and analyses twelve principal areas of concern:

- women and poverty;
- education and training;
- women and health;
- violence against women;
- women and armed conflict;
- women and the economy;
- women in power and decision-making;
- institutional mechanisms for the advancement of women;
- human rights of women;
- women and the media;
- women and the environment;
- and the girl-child. It outlines a series of measures, which governments, civil societies, and international organizations including bi-laterals and multi-laterals should adopt and practice in order to eliminate causes of discrimination against women in all societies, and to progress toward equality.

The most recent high-profile meeting was the 49th session of the Commission on the Status of Women (CSW) held in New York in February and March 2005. At the New York meeting, governments reaffirmed their commitment to the Beijing Declaration and Platform for Action. In addition to official country delegations, the CSW brought together NGOs and women's rights activists from around the world, all showing a strong display of solidarity. Uganda was, of course, represented at that meeting. Ten resolutions were adopted in New York, resolutions that reflect concern about various special areas today:

1. HIV/AIDS,
2. women in Afghanistan,
3. women in Palestine,
4. indigenous women,
5. women and natural disasters,
6. United Nations International Research and Training Institute for the Advancement of Women (INSTRAW),
7. economic advancement of women,
8. trafficking,
9. and a proposal to consider in 2006 the appointment of a Special Rapporteur on laws that discriminate against women.

According to an official report from a women's rights organization: "There was concern lest the focus on SDGs dilute the resources and energies going into the implementation of the BPFA. The 49th session of the CSW emphasized that the full and effective implementation of the BPFA is essential to achieving international development goals, including those contained in the Strategic Declaration."

While we have only taken a brief glance at the institutional and international efforts to eliminate all forms of discrimination against women, we should immediately see that gender realities are much more complex than some of the conferences care to admit. If we labour under the misapprehension that women's empowerment means women in gainful employment, then we have a lot of work to do because economic gains do not always go hand-in-hand with social and non-economic health gains.

At the end of this part of the topic, you should be well aware of the dangers of inequality for the health status not only of the women but also of the nations to which they belong. The complex realities that affect women's health are then issues of public health.

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