

The Johannesburg Position on HIV/AIDS and Women's and Girls' Rights in Africa
April 2006

We, African women including HIV positive women, women's rights activists, feminists, scholars, professionals, community workers and policy makers from the African continent participating in the African Women's Regional Consultation on Women's and Rights and HIV/AIDS in Africa, in Johannesburg, South Africa, April 6-7, 2006 are:

Deeply concerned that despite various interventions aimed at prevention, care, support and treatment of HIV and AIDS, the global pandemic has had and continues to have a devastating impact on the lives of African women and girls;

Further concerned that in spite of the disproportionate impact of the pandemic on women and girls, governments are yet to recognise the centrality of promoting and protecting women's and girls' human rights in all HIV and AIDS interventions;

Mindful of the fact that the assault on women's human rights continues through various forms of violence against women and girls, including, but not limited to: rape, marital rape, domestic violence, trafficking, harmful customary and traditional practices, violence and torture during conflict, forced marriages and early marriages. These forms of violence take place: within homes, at work, in schools, in clinics and hospitals, at police stations and many other places and they are continuing and increasing at an alarming rate fuelling HIV infections amongst women and girls;

Recognising that violence against women and girls is a key driver of increased risk and vulnerability to HIV infection among African women and girls;

Aware that unequal power relations between women and men result in the inability of many African women and girls to negotiate safe and pleasurable sex;

Acknowledging that women living in militarised communities and zones of armed conflict face peculiar and heightened risks of HIV infection as a result of violence, sexual crimes and torture perpetrated against women and girls, in war and emergency situations or as refugees and internally displaced persons, with extremely limited protection of their human rights;

Further acknowledging that women's: low socio-economic status, lack of access to and control over empowering and emancipating resources such as land and property increases women's and girls' exposure to many dehumanising cultural norms, beliefs and practices that undermine women's and girls' emotional, spiritual and psychological well being, choices and agency, bodily integrity and self esteem and increase their vulnerability to HIV infection;

Noting with grave concern, that little investment has been made in securing women's and girls' sexual and reproductive health and rights in the context of a pandemic that robs many women of their choices related to childbearing and rearing, and the enjoyment of their full sexual rights;

Concerned that diminishing investments at the national and international level in the education of women and girls has an adverse effect on the ability of women and girls to access HIV and AIDS information, education and services that are critical for: the prevention of new infections, re-infections, for treatment and care knowledge and protection of women's and girls' human rights;

Further concerned that women and girls, and in particular; HIV positive women, women living with AIDS and orphaned girls, have been forced to become the backbone of the community,

family based care and nursing systems; with limited knowledge and skills, without resources, remuneration or other forms of state support, further adding to their already disproportionate burden of care and support for PLWHA, in contexts of extreme poverty and inadequate state health services;

Dismayed that, notwithstanding the firm commitment to the indivisibility and interrelatedness of all human rights, and the crisis of HIV/AIDS in Africa, women's and girls' human rights are ignored by international financial and trade institutions-WTO, IMF, World Bank. The aforementioned institutions urge African governments to withdraw investment from health; to privatise basic services such as health and to prioritise debt repayments in the face of two major pandemics in the continent-HIV/AIDS and violence against women. These multilateral donors are yet to commit significant resources to institutionalise women's rights as central pillars for halting the HIV/AIDS pandemic in Africa.

Mindful of the fact that both the *Abuja Declaration on HIV/AIDS, Tuberculosis and other Related Infectious Diseases* of 2001 and the *UNGASS Declaration of Commitment on HIV/AIDS* of 2001 are under review in 2006, presenting clear opportunities for heads of state and government to promote and protect African women's and girls' rights in order to mitigate the impact of the HIV and AIDS epidemic on women and girls, and to halt the pandemic in Africa by taking action to:

Reaffirm commitments heads of state and government have made through regional and international agreements on HIV&AIDS, and women's human rights, in particular, *the Convention on Elimination of all Forms of Discrimination Against Women (CEDAW)* (1979); *Vienna Declaration on Human Rights* (1993); *International Conference on Population and Development (ICPD Plan of Action)* (1994); *Beijing Declaration and Platform for Action* (1995), All the African Regional Conferences on Women; *The Millennium Declaration* (2000); *Protocol to the African Charter on the Rights of Women in Africa* (2003); *Solemn Declaration on Gender Equality in Africa* (2004) amongst others;

We acknowledge that limited progress has been made in the response to AIDS at global and national levels in respect of raising resources and extending access to services;

We Stress with deep concern that in spite of the various commitments to action, the provision of resources and the promotion and protection of the human rights of African women and girls, given the devastating scale and impact of the HIV and AIDS pandemic on African women and girls, there is need for renewed urgent actions, at all levels and in all sectors, to promote and protect the human rights of African women and girls.

We note with urgency that there is a critical need to move from rhetoric to action if we are to see a major change in the spread of the HIV and AIDS pandemic and its increasing and alarming feminisation.

We therefore urge all African heads of state and government and other relevant stakeholders to ensure the following:

1 Women's and Girls' Human Rights

African heads of state and government take all necessary measures to create a national and international community that places top priority on the development of policy, legislative and administrative environment in which the human rights of Africa women and girls, especially those living with HIV and AIDS are actively promoted, fully enjoyed and protected within and through national, regional and continental responses to violence against women and girls, and through HIV and AIDS policies, programmes and interventions.

2. Leadership and Accountability

We urge all African heads of state and government to provide the necessary leadership for the fulfilment of women's and girl's human rights in the context of HIV and AIDS.

We urge all African heads of state and government to bear full accountability for the commitments they have made to women's human rights as signatories to various national, continental and global women's and girls' human rights and HIV and AIDS agreements.

We urge African heads of state and government to be exemplary, in both their public duties and private lives on the matter of the promotion and protection of the human rights of African women and girls.

We call upon all African heads of state and government to intensify the protection of the rights of African women and girls by enacting and implementing laws that protect women from all forms of violence that increase the legal age of marriage for young girls and that protect women's and girls' access to, ownership of and control over resources, including land.

African heads of state and government should create mechanisms to provide solidarity and support that enable HIV positive women and girls can meaningful and effective participate in and provide leadership, by occupying strategic positions of leadership and power, to strengthen movements of women living with HIV and AIDS so that their voices are heard loudly and clearly on issues affecting HIV positive women.

They should further address policy and legal gaps that exist with regards to discriminatory, statutory, customary and religious laws that deny women and girls their full and equal rights and increasing their vulnerability to HIV infection and burden of AIDS. These include but are not limited to enactment and implementation of laws against violence against women and girls, for land and property rights and women's and girls' sexual and reproductive rights.

3 HIV and AIDS Programme Interventions

African heads of state and government strengthen HIV and AIDS programming by giving pivotal priority to women's and girls' rights in:

Prevention strategies, in particular, expand the current prevention paradigm to promote and protect women's and girls' sexual and reproductive rights, legislate and implement interventions that protect against violence against women and girls, legislate and implement property and inheritance rights of women and girls, ensure access to appropriate and evidenced based prevention information, provide PEPs to all women and girl survivors of sexual violence and invest in fast tracked development of microbicides.

Treatment. Ensure that women and girls have access to, appropriate, free and comprehensive treatment-including but not limited to nutrition-services on HIV and AIDS. Further ensure that women and girls have an equitable share of treatment services.

Remove social and institutional barriers that prevent women and girls from accessing HIV and AIDS treatment and services, including violence they face as a result of their status

Expand PMTCT interventions beyond protecting the foetus to include comprehensive pre and post natal treatment of women.

Ensure interventions such as VCT and PMTCT do not contribute to increased risk of women and girls to stigma and violence.

Care. Invest in reducing the burden of care on women and girls through programmes that provide enhanced access to palliative care and that compensate women and girls equitably for their contribution.

Prioritise the strengthening of health services and infrastructure through adequate resources to reduce the burden of care and medical costs of HIV and AIDS on women and girls in Africa.

Ensure that women's access to appropriate treatment and care facilities is scaled up, especially rural areas, where a majority of African women live.

Given the limited resources African governments are directing to public health care, in part because of the aid restrictions and conditionality of the World Bank and International Monetary Fund, governments should take back their mandate and responsibility to provide quality, affordable public health care to its citizens so as to effectively eliminate the burden on women and girls of home based care.

Further governments should compensate women and girls for the care work they perform in respect of HIV and AIDS as this burden takes women and girls away from other forms of economically productive and income earning activities.

End the bias that currently exists in AIDS treatment programmes which, especially in the commercial sector, benefit predominately male work forces, by ensuring that HIV positive women and girls have access to treatment as citizens in their own right.

Provide sex disaggregated data clearly illustrating how women and girls are benefiting equally in care programmes and access to health facilities that are specifically designed to address women's care and treatment requirements.

4 Resources

That all **African heads of state and government** increase investment and resources for the protection and promotion of women's and girls' rights, concerns and priorities in HIV and AIDS at the national, regional, continental and international levels through the following mechanisms:

Specific Women's and Girls' Resource Facility from existing global funding mechanisms targeted at ensuring that women and girls have access to and control over HIV and AIDS resources, with clear, pro-HIV positive women policy guidelines for the management and disbursement of the resources that formulates specific guidelines of the kinds of resource disaggregation.

Ensure that from this facility governments establish resources targeted at prevention mechanisms that enhance women's human rights, such as, programmes that are aimed at preventing violence against women through:

- strengthening the role of the police force in preventing violence against women;
- the raising of consciousness among women and girls against violence
- strengthening the role of the judiciary in preventing violence against women by providing a clear legislative frame work criminalizing violence against women and girls and providing training on approaches to criminalization of violence against women in the context of HIV and AIDS;
- Ensure that special resources are availed for the protection of the rights of sex workers from violence.

Develop, at continental level, a HIV specific target within the Abuja commitment to allocating 15 per cent of national budgets on health, of which at least 50 per cent must directly address rights of African women and girls.

Ensure that all forthcoming international financing commitments on HIV and AIDS, made to global, continental and national initiatives, at a minimum channel 50 per cent of all resources to programmes that protect women and girls from rights violations, for instance, violence against women.

Targeted support for women's organizing at local and community levels. Providing financing for the development of sustainable, viable and independent initiatives that ensure HIV positive women and girls have access to prevention, treatment, care and support that is designed specifically for their needs and requirements as citizens.

Scaling up HIV and AIDS Special Efforts and Interventions Proven to be Effective in Preventing New Infections in Women and Girls. These include universal access to Post Exposure Prophylaxis (PEP), programmes aimed at the prevention of parent to child transmission and extending the lives of mothers (PPTCT+) and fast tracking the development of microbicides, vaccines and other new women-controlled technologies.

Ensure that resources are available to enable women to access VCT facilities that are specifically designed to provide information and services that are appropriate to female clients with HIV and AIDS related queries of a specifically feminised nature

Ensure that there is widespread access to Post Exposure Prophylaxis for women who have been exposed to HIV transmission through acts of sexual violence and aggression

Promoting and Protecting Women's and Girls' Sexual and Reproductive Health and Rights. Ensure that women in their own individual right as citizens have access to appropriate services that address their reproductive health and care needs beyond the limited frame of child birth and pregnancy, as there is increasing evidence of opportunistic infections of a reproductive health nature being witnessed in women who many not necessarily be pregnant or in child birth.

Scaling up Broad-based Women's and Girls' Rights Programmes. Particularly in areas known to minimize women's and girls' vulnerability to HIV infection, including but not limited to: prevention of violence against women and girls and promotion of women's and girls' sexual and reproductive health and rights, expanding girls' access to education, increased access to and control over land and property and economic empowerment.

5. International Institutions of Development

We stress the need for international institutions whose policies and interventions have a strong impact on the social and economic position of African women and girls to actively advance and protect the human rights of women and girls as outlined in international norms and standards, as they are intrinsic to halting the HIV/AIDS pandemic, in all their policies and programmes.

Their policies discouraging governments from investing in social services, particularly health, and privatisation of basic services should stop to reduce the burden of care and cost for HIV/AIDS on African women and girls.

International institutions must in particular pay due heed to the rights of African women and girls living with HIV and AIDS by ensuring that they have administrative and policy procedures that respect and protect the human rights of HIV positive African women and girls.

Conclusion

We, African women are profoundly concerned and aggrieved that it has taken so long for governments to fully appreciate the centrality of African women's rights and voices in dealing with HIV/AIDS, which is one of the greatest threats to our collective existence as a people and the continent. As African women, we demand meaningful participation and involvement in institutions and processes that shall guide the global responses to HIV and AIDS. As women of Africa, we fully commit ourselves to working with our heads of state and government and other stakeholders to mitigate the impact of HIV and AIDS on African women and girls, the continent and the world. Women's rights are not negotiable. The women and girls of Africa deserve more. The time to act is now!

April 7, 2006

Signed:

Actionaid International, African Union, African Women's Development and Communication Network (FEMNET), Akina Mama Wa Afrika (AmWA), African Network for Religious Leaders Living With or Personally Affected by HIV/AIDS (ANERELA), African Women's Development Fund (AWDF), Association for Women in Development (AWID), Civil Resource Development and Documentation Centre (CIRDDOC)- Nigeria, Common Market for East and Southern Africa (COMESA), Coalition on Violence Against Women (COVAW)-Kenya, Eastern Africa National Networks of AIDS Service Organisations (EANNASO)-Tanzania, Empinsweni Aids Centre-South Africa, Equality Now-Africa, Inter-African Network of Women in the Media and Development (FAMEDEV)-Senegal, FIDA-Ghana, Gambia Committee against Traditional Practices (GAMCOTRAP), Gender AIDS Forum-South Africa, International Coalition of Women Living with AIDS (ICW)-Southern Africa, Friends of Cannon Gideon Foundation (FOCAGIFO/ICW)-Uganda, International Centre for Reproductive Health and Sexual Rights (INCREASE)- Nigeria, Medical Research Council (MRC)-South Africa, Musasa Project-Zimbabwe, National Human Rights Commission - Abuja, OPIC, Open society Initiative for Southern Africa (OSISA), Positive Women's Network-South Africa, Southern Africa AIDS Information Dissemination Service (SAFAIDS)-Zimbabwe, Society for Women and AIDS in Africa (SWAA) - Nigeria, Sierra Leone and International, Swaziland Positive Living (SWAPOL), Treatment Action Campaign(TAC)-South Africa, The Women's Trust-Zimbabwe, United Nation's Fund for Women (UNIFEM), Women and AIDS Support Network(WASN)-Zimbabwe, Women in Law in Southern Africa (WLSA)-Zambia, WOLDDOF- Sierra Leone, Women in Law and Development in Africa (WILDAF), Women's Aid Collective (WACOL)-Nigeria, Young Women's Christian Association (YWCA)-Switzerland, World Student Christian Federation (WSCF)-Kenya, Young Women Leaders Network (YWLN)-Malawi

Convened by: ActionAid International's HIV/AIDS and Women's Rights Themes, African Women's Development Fund (AWDF), United Nations Fund for Women (UNIFEM) and Open Society Initiative for Southern Africa (OSISA)