

The Commission on the Status of Women, 53rd session

The Commission on the Status of Women (CSW) is part of the Economic and Social Council (ECOSOC) of the United Nations (UN). The Commission takes place annually in its headquarters of New-York, bringing together Member States of the Council (45 over the current 192 Member States), other States members of the UN represented by observers and representatives of some chosen NGOs. The aim is to evaluate the evolution concerning gender equality: which efforts and progresses have been made or not, what are the new challenges and which global policies can be formulated to counter discriminations based on gender all over the world. From March 2 to March 13 occurred the 53rd session of the CSW. This year, the main theme was “the equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS”.

History of the CSW

In 1945 has been signed the United Nations Charter in San Francisco. Then, on June 21, 1946, is set the Commission on the Status of Women. During its 1st session, the CSW declared as a guiding principle “*to raise the status of women, irrespective of nationality, race, language, or religion to equality with men in all fields of human enterprise, and to eliminate all discriminations against women in the provision of statutory law, in legal maxims and rules, or in interpretation of customary law*”¹. Soon, the CSW began to work hand in hand with Non Governmental Organizations. In the 50’s, around 40 NGOs were already attending the Commission, focusing together on political rights of women², discriminations in marriage, economic rights³. It was a work on the long run, especially because discriminations were more and more disclosed, and more and more countries applied to the UN, but the Governments didn’t really pay attention to the recommendations of the CSW. After the organization of four World Conferences on Women, the UN Decade for Women (from 1975 to 1985) and above all the adoption by 189 countries of the Platform for Action in Beijing⁴ (1995), the Commission succeeded to legitimate the gender issue. Many efforts led to consider discriminations against women as a transverse problem rather than a separate one, demanding the gathering of Governments, UN entities, NGOs and other international or regional organizations. Moreover, since the mid-90’s, the conclusions of the annual meeting of the CSW are definitely action-oriented. Not even does the Commission notice the discriminations at stake but participants also propose some actions to be taken all over the world. High-level roundtables are organized to discuss the measures done and to be done. Experts are also invited to introduce people to their researches.

¹ See on the CSW website: <http://www.un.org/womenwatch/daw/csw/52sess.htm>

² The Convention on the Political Rights of Women adopted by the General Assembly on December 20, 1952, is the first international law concerning this field of gender equality in politics.

³ The Convention on Equal Remuneration for Men and Women Workers has been signed in 1951.

⁴ The Beijing Platform for Action consists on action-oriented recommendations in twelve areas of concern: Women and Poverty, Education and Training of Women, Women and Health, Violence against Women, Women and Armed Conflict, Women and the Economy, Women in Power and Decision-making, Institutional Mechanism for the Advancement of Women, Human Rights of Women, Women and the Media, Women and the Environment, the Girl-child. For example then, in the area of “Women and Health”, one of the objectives is: Increase women's access throughout the life cycle to appropriate, affordable and quality health care, information and related services. Actions to be taken”. See “the Beijing Process and Beyond”:
<http://www.un.org/womenwatch/daw/csw/critical.htm#beijing>

Non-Governmental Organizations

Since the beginning then, the Economic and Social Council has forged a close relationship with NGOs. Indeed, those organizations are deeply ingrained in the civil society and deal daily with the discriminations people are confronted to. That is why the ECOSOC grants a consultative status to NGOs, such as the Federation for Women and Family Planning, whose concern are the reproductive rights of women. It means that they are allowed to attend the official meetings, to propose some statements, to intervene and to organize parallel events during the sessions. To reach the accreditation, NGOs must have aims and principles complied with the spirit of the United Nations Charter, they must be of recognized standing within their particular field and they must have a democratic functioning.

The 53rd session

- *Which problems?*

The main theme of this session was “the equal sharing of responsibilities between women and men, including care giving in the context of HIV/AIDS”. It is indeed a well-known issue that caregiving, as a domestic or an external work, usually goes to women, due to stereotypical representations of the division of labour between men and women. Different consequences are following: some studies show that more and more women enter the working-market, however, their domestic work is still the same, consequently, they work doubly; also, sometimes, because of their necessity to stay home, women can’t work, can’t earn money and have a lesser access to education, formation, leisure, political activity or social security; then, the caregiving remunerated work is also an activity often reserved to women, and it represents one of the main source of work for them⁵, however, it is most of the time very bad-paid.

Furthermore, the increasing HIV/AIDS participates to these gender differences in responsibilities for caregiving. 33 millions people on earth are infected by HIV/AIDS, especially in developing countries. But the lack of medical staff, the dysfunction of health-systems, the unequal distribution of resources induce that the dispenser of care is often a close relative or a friend, with no particular skills and no equipment. Yet, statistics have shown that 90% of these caregivers were women and girls. Except from the physical and emotional burden that it supposes, the risks are: to be isolated (because of the shame of the sick man/woman who wants to keep his/her illness secret and therefore doesn’t go out and doesn’t ask for help elsewhere), to give up production of labour (which could mean a lesser source of food), to be more exposed to sexual infection by the patient, to have less time for work, leisure, education and so on.

- *Which solutions?*

Michel Sidibé, executive director of United Nations Programme on HIV/AIDS assumed that “Community coping mechanisms are increasingly strained and undermined by HIV and the financial crisis. 90-percent of care-giving takes place in our homes and communities. Women provide the lion’s share of this care. Promoting a more equitable sharing of responsibilities between women and men is a practical necessity as well as a matter of rights and justice. Redistribution of care-giving responsibilities is simply not enough. Women and girls need legislative

⁵ For example, studies have shown that 10% of the jobs created in Latin America in 2004 were domestic jobs, insecure and bad-paid.

and judiciary initiatives, policies and community-driven programmes. These are essential to ensure access to economic resources, social protection and safety nets, and access to education, skills training and employment.” What can be concretely done then? For example, he pointed out the need for women to be able to protect themselves from HIV. This demands, he said, “*investment in universal access to comprehensive sexual and reproductive health services*” and the development of “*antenatal, sexual and reproductive health and HIV services*”⁶. Purnima Mane, deputy executive director of the Programme United Nations Population Fund also emphasized on the necessity of an increasing access to sexual and reproductive health: “*Advancing the right to sexual and reproductive health is crucial for eliminating extreme poverty, combating AIDS and improving maternal health*”⁷. Thandika Mkandawire, director of United Nations Research Institute for Social Development has proposed other measures, such as **more easily accessible provisions** (drinking water, sanitation and electricity), **reliable and affordable social care services, the recognition of unpaid care work in social security, decent wages and decent working conditions for paid care workers**, to reduce unequal sharing of responsibilities between men and women, concerning especially caregiving⁸. And Ines Alberdi, executive director of the United Nations Development Fund for Women, then testified that one of its main work was first to **enhance knowledge about the links between HIV/AIDS and violence against women**, and then to **develop services to broadcast this knowledge**: “*increasing the capacity of the judiciary, law enforcement and health service providers, creating and strengthening data collection systems and indicators, building multi-sectoral partnerships and increasinsg attention to the links between violence against women and the spread of HIV and AIDS [...] Under the HIV and AIDS, particular emphasis has been placed on ensuring a rigorous monitoring and evaluation plan to ensure that lessons learned are widely available and shared*”⁹.

- the Agreed Conclusions

The “agreed conclusions” adopted at the end of the session after difficult negotiations reconfirmed the international agreements such as the Beijing Platform for Action or the Convention on Elimination of all forms of Discrimination Against Women.

Among many recommendations the Commission called on the governments to:

“Strengthen education, health and social services and effectively utilize resources to achieve gender equality and the empowerment of women and ensure women’s and girls’ rights to education at all levels and the enjoyment of the highest attainable standard of physical and mental health, including sexual and reproductive health, as well as quality, affordable and universally accessible primary health care and services, as well as sex education based on full and accurate information in a manner consistent with the evolving capacities of girls and boys, and with appropriate direction and guidance”; and

“Emphasize the importance of HIV prevention as a long-term strategy to reduce the number of new HIV infections and, consequently, to reduce the burden of caregiving responsibilities on both women and men through universal access to comprehensive prevention, treatment, care, and support programmes, including sexual and reproductive health and services, and to

⁶ See the UNAIDS’ statement: http://www.un.org/womenwatch/daw/csw/csw53/off_statements/UNAIDS.pdf

⁷ See the UNFPA’s statement: http://www.un.org/womenwatch/daw/csw/csw53/off_statements/UNFPA.pdf

⁸ See the UNRISD’s statement:

http://www.un.org/womenwatch/daw/csw/csw53/off_statements/UNRISD%20Director%20Speech%20CSW%202009.pdf

⁹ See the UNIFEM’s statement: http://www.un.org/womenwatch/daw/csw/csw53/off_statements/Unifem.pdf

increase access to voluntary and confidential counselling and HIV testing, investments in HIV/AIDS and sex education and awareness, based on full and accurate information in a manner consistent with the evolving capacities of the child, with appropriate direction and guidance, research and development of, and access to, new, safe, quality and affordable HIV/AIDS prevention products, diagnostics, medicines and treatment commodities, including female-controlled methods, and new preventive technologies and microbicides and AIDS vaccines”.

The whole agreed conclusions of this 53rd session of CSW are available on the website: <http://www.un.org/womenwatch/daw/csw/csw53/AC%20adopted%2013%20March%20advance%20unedited%20version.pdf> .