

The No-Nonsense guide to HIV/AIDS, Gender Equality and Communication

Gender inequality is a key factor in the spread of HIV/AIDS. Power relations lie at the heart of a pandemic that disproportionately affects women and young girls. Therefore, tackling gender inequality is central to tackling the pandemic itself.

HIV/AIDS is a health and development issue, and it is inextricably linked to gender inequality and to violence against women. Often women are prevented from having adequate knowledge about the disease, access to sexual and reproductive health and education services, and are unable to negotiate safer sex owing to gender discrimination and lack of power. Violations of women's human rights make women's vulnerability to HIV worse.

The 'ABC' slogan – abstain, be faithful, use a condom – is the mainstay of many HIV prevention programmes. But for too many women, this message is useless. Where rape and other forms of sexual violence are widespread, abstaining or insisting on the use of a condom is unrealistic. Between one fifth and a half of all girls and young women around the world report that their first sexual encounter is forced.

Nor does fidelity provide the answer. The reality across the developing world is that the majority of women are married by the age of 20 and have higher rates of HIV than their unmarried, sexually active peers. The reason is simple: male infidelity. At the

same time, women bear a disproportionate share of the burden of AIDS care. In poor households, the presence of an AIDS patient can absorb a third of all household labour, most of it by women. The knock-on effect of the plunge in household income caused by AIDS is often to pull children out of school, and girls are usually the first to go.

Property rights are often enshrined in national constitutions and international human rights treaties. However, a large majority of women are denied those rights, rendering them even more vulnerable to violence, poverty and homelessness. Poverty can also fuel HIV transmission as women engage in unsafe sex in exchange for money, housing, food or education.

To address AIDS effectively, we have to understand how women are contracting the virus and why. A comprehensive strategy is needed to combat sexual harassment and violence against women, to ensure they have access to HIV care and prevention services, to boost girls' access to education, and to strengthen legal protection for women's property and inheritance rights.

Tackling such inequalities is not just a matter for women – men must also be fully involved. Men need to declare zero tolerance for violence against women. They must become committed to their daughters' education and help alleviate the burden of care. In short, women and men need to work together to promote and protect the human rights of women and girls and to confront the gender inequalities and poverty that fuel the epidemic.

delay sexual activity, practising safer sex (including consistent and correct condom use), and having a reduced number of sexual partners.

Providing information and training in social skills helps empower young people to protect themselves against HIV/AIDS. Research confirms that higher educational levels are associated with higher rates of condom use. Young people have the right to information and to education that is affordable, of good quality, promotes gender equality and is available to all.

Young people also need access to gender-sensitive, youth-friendly health services and supplies for sexually transmitted infections/HIV/AIDS prevention and care, including condoms and voluntary and confidential counselling and testing. In many cultures, however, societal norms are not receptive to the needs of young people in accessing reproductive health services.

Crucial to the whole process is challenging unequal gender norms and promoting positive gender relationships. It is vital to create an enabling environment that includes building resilience among young women and girls, young men and boys; ensuring an effective social support system in the family, school and community; and enhancing protective factors such as feeling valued in society, being exposed to positive rules and expectations; and having a sense of hope in the future.

WHAT ROLE CAN COMMUNICATORS PLAY?

Communicators are vital in the world's fight against HIV/AIDS. Journalists and broadcasters are already doing impressive work, but much more needs to be done and monitoring the media for their coverage and impact is vital:

'We urge a critical examination of the role of the media, one that goes much further than portraying the media primarily as a vehicle for information dissemination.

Information is crucial, but so too are the ways in which it is passed on and which voices are granted credibility. For HIV/AIDS, where stigma, gender and other forms of inequality play such key roles, the media ideally can provide a forum where a plurality of voices is heard, and discrimination based on prejudice or socio-economic status is set aside.²

Communicators can highlight the fact that gender inequality lies at the heart of the HIV/AIDS pandemic; give prominent news coverage to HIV/AIDS; dedicate broadcasting time to HIV/AIDS public service messages; support the development of AIDS storylines in existing programming; make public service messages and original programming available to other outlets on a rights-free basis; and generally amplify the voices of people living with HIV/AIDS.

This task requires vision, dedication and, above all, creative programming that truly engages audiences. Journalists and broadcasters can talk to listeners and viewers about HIV in a language they understand and find compelling. They can build partnerships and alliances. They can put pressure on the powerful to take the issue seriously and give people the information they need to protect themselves and those they love.

Above all, they can do so from the perspective of gender justice, avoiding discrimination and stigmatisation and challenging people to rethink their prejudices. For gender activists, the questions are the same as they have always been:

'Those questions revolve around the most basic issues of power and control, definitions and values, access and exclusion... Even though global political and communication environments have changed dramatically, patterns of gender inequality still await transformation.'³

Notes

1. *Missing the Message? 20 Years of learning from HIV/AIDS*. London: Panos, 2003, p. 48.
2. *Ibid.*, p. 51.
3. 'Beijing's legacy for gender and media', by Margaret Gallagher, in *Media Development* 3/2005, p. 6.

RESOURCES

1. *Guidelines on Gender-Neutral Language*, Paris: UNESCO, 1999.
2. *Gender Sensitivity - A training manual*, Paris: UNESCO, 2002 .
4. *Addressing Gender Relations in HIV Preventive Education Material*; Carol Medel-Anonuevo, UNESCO Institute for Education, 2002.
5. *Operational Guide on Gender and HIV/AIDS: A Rights- Based Approach*; UNAIDS Interagency Task Team on Gender & HIV/AIDS.
6. *Handbook for Culturally Appropriate Information, Education, Communication for Behaviour Change. A Cultural Approach to HIV/AIDS Prevention and Care*, Paris: UNESCO, 2003.
7. UNFPA and UNICEF – 'Positive Language for Supporting People Living with HIV/AIDS'
8. UNAIDS – 'Glossary of HIV/AIDS-related terms & Terminology Database' <http://www.unaids.org/en/resources/terminology.asp>
10. *HIV/AIDS Stigma: Finding Solutions to Strengthen HIV/AIDS Programs*. Washington: ICRW, 2006.
11. *Candles in The Dark: Voices from Christian Communicators and Church leaders against AIDS*. Zimbabwe: EDICISA, 2006.

Acknowledgement

The above material draws on two UNAIDS publications: *HIV and AIDS Fact Sheet Overview* (UNAIDS Inter-Agency Task Team on Gender and HIV/AIDS), and the *Operational Guide on Gender and HIV/AIDS A Rights-Based Approach*, prepared for the UNAIDS Interagency Task Team on Gender & HIV/AIDS (2005).

Photo credit: Sergi Reboredo Manzanares (WACC Photo Competition 2004).

This No-nonsense Guide is a resource from the World Association for Christian Communication, compiled by Philip Lee.

The World Association for Christian Communication (WACC) promotes communication for social change. It believes that communication is a basic human right that defines people's common humanity, strengthens cultures, enables participation, creates community, and challenges tyranny and oppression. WACC's key concerns are media diversity, equal and affordable access to communication and knowledge, media and gender justice, and the relationship between communication and power. It tackles these through advocacy, education, training, and the creation and sharing of knowledge. WACC's worldwide membership works with faith-based and secular partners at grassroots, regional and global levels, giving preference to the needs of the poor, marginalised and dispossessed. Being WACC means 'taking sides'.

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COMMUNICATION FOR BEHAVIOUR CHANGE

Communication is considered one of the most important activities in HIV/AIDS programming. It can play a critical role in empowering people to tackle HIV/AIDS and in overcoming HIV/AIDS-related stigma and prejudice. It is critical for effective communication that:

- œ information is accurate, simple and appropriately targeted;
- œ information takes into consideration the local context;
- œ by building culturally sensitive messages, information motivates people to transform their ideas, practices and behaviour in a long-term and sustainable manner.

But information alone is not enough to make people change their minds or alter their behaviour, because knowledge is not the only – or even the most important – factor that makes people act in particular ways. There are, for example, a range of reasons why people engage in sexual activity: because they want to have children, for pleasure or to experiment, to be accepted by their peers or partners, to express their

power and domination of women and out of a sense of entitlement (including rape), for ritual purposes, or out of necessity to earn money or get food. The ‘ABC’ slogan of HIV prevention campaigns fails to address these different motivations for engaging in sexual activity.

Communication messages and materials need also to take into account the social and cultural norms in which people live and the influence those norms have on their ability to act on knowledge and information. Here, women’s lack of power and lack of access to skills and resources are important issues.

In addition, information and communication messages must be appropriately packaged and targeted to ensure the most effective outreach. This requires clarity about who the intended beneficiaries are, how best to reach them and what the information or message is supposed to achieve. For example, written material is not the best way to inform an illiterate or semi-literate audience or those who lack time to read – which generally applies to women from poor and informal settle-

ments. A more effective way of reaching them may be through local radio or using participatory methods such as group discussions or community theatre.

Another important question relates to who conveys a message and whether that person or organisation has sufficient credibility to have an impact on the audience. The messenger is as important as the message: local politicians, religious leaders, traditional healers and midwives are likely to be in the best position to deliver appropriate and effective messages to their communities. Because HIV/AIDS is such a sensitive issue, using peer educators may be the most effective strategy to reach particular audiences.

In countries with high HIV prevalence rates, it is crucial that communication not only focuses on HIV prevention, but also on living with the consequences of HIV/AIDS. Thus, people living with HIV need to have appropriate information on treatment options, nutrition, sexual and reproductive health, their rights and what to do if their rights are violated. Similarly, people directly affected by AIDS, for example widows and orphans, require information on support mechanisms and how to assert their rights.

TACKLING EXCLUSION

Of course, communication for behaviour change is not merely concerned with providing information to those infected with HIV and affected by AIDS, but also with confronting and transforming the norms and stereotypes that perpetuate inequality and social exclusion, particularly on the basis of gender. Effective communication has to be grounded in and relevant to local realities, while seeking to transform those norms and practices that ignore human rights standards and principles.

Crucial to this analysis is an assessment of which voices are heard and which are excluded in decision-making circles. The process through which the agenda on

HIV/AIDS is set often excludes the voices of those most affected. As the Panos Institute points out:

‘Communication strategies need to be redirected so that they give prominence to the creation of communication environments which encourage interpersonal communication, dialogue and debate, and which focus as much on providing a voice to those most affected by HIV as they do on educating them through messages. The evidence increasingly suggests that only when people become truly engaged in discussions and talking about HIV, does real individual and social change come about.’¹

HOW DO WOMEN’S RIGHTS RELATE TO HIV/AIDS?

Lack of respect for women’s rights increases the prevalence and worsens the impact of HIV/AIDS. For those denied or with poor access to information, education and health care services, the risk of contracting HIV is increased and the impact of the virus felt more keenly. The ability of any individual to access their human rights (outlined in the table below) is thus closely linked with the spread of HIV/AIDS and its impact on people and communities around the world.

The spread of HIV also undermines progress in realizing women’s rights (which are basic human rights) since the pandemic strains a country’s resources, depletes its social capital and undermines attempts to provide a full complement of services to all its citizens. The disproportionate incidence of HIV/AIDS among certain groups, including in every country women and girls, those living in poverty, and specific groups such as disabled people, illustrates this broad correlation.

International human rights law guarantees the right to equal protection before the law and freedom from discrimination on grounds of sex, race, colour, language, reli-

HUMAN RIGHTS AFFECTED BY HIV/AIDS

- The right to life.
- The right to the highest attainable standard of mental and physical health.
- The right to liberty and security of the person.
- The right to freedom of association.
- The right to non-discrimination, equal protection and equality before the law
- The right to freely receive and impart information
- The right to equal access to education.
- The right to marry and found a family.
- The right to privacy.
- The right to freedom of movement.
- The right to freedom of expression and opinion.
- The right to be free from torture and other cruel, inhuman or degrading treatment or punishment.
- The right to work.
- The right to seek and enjoy asylum.

gion, political or other opinion, national or social origin, property, birth or other status. States’ obligations in relation to equality and non-discrimination – and to the promotion and protection of all human rights – are defined in a series of international agreements, such as the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW). Such treaties also provide a legal framework for a rights-based approach in relation to HIV/AIDS.

Equality and non-discrimination are cornerstone principles of international human rights law and they are vital to HIV/AIDS prevention and to ensuring equitable access to care, treatment, and support for those infected and affected by HIV/AIDS.

Cultural taboos and empowerment In many cultures, girls are perceived as promiscuous if they show an interest in or have knowledge about sexuality issues. In contrast, many boys are brought up to

believe that males are expected to be experienced in and knowledgeable about sex, which may encourage them to have multiple sexual partners and deter them from asking questions or seeking health-related information.

Young people can only make safer choices to protect themselves and their sexual partners if they are empowered to act on information about HIV/AIDS. This requires overcoming stereotypical gender norms that contribute to preventing young people from acquiring this knowledge. Policies that target children and young people need to take into account the large numbers of young people outside formal education systems, permanently or for protracted periods.

In order to put their knowledge on how to protect themselves into practice, young women and girls, young men and boys, need the skills and confidence to use the information they receive. This includes self-esteem and negotiation skills, skills to