

# Correcting gender inequalities is central to controlling HIV/AIDS

Olive Shisana<sup>1</sup> & Alicia Davids<sup>1</sup>

Although HIV/AIDS is a global epidemic, the majority of people living with HIV/AIDS are in sub-Saharan Africa. It is a leading cause of death in that region (1) and a serious public health problem, with southern Africa being the most affected. Sub-Saharan Africa is the only part of the world where HIV prevalence and AIDS deaths are higher for women than for men. The gender dimension is therefore vital to understanding how HIV is spread: the concept facilitates an analysis of how men's and women's roles increase vulnerability to the disease (2).

In every society, males and females — who by nature are biologically different — are expected to behave in prescribed ways. In some cultures in southern Africa, men are expected to have multiple partners, while women are expected to be monogamous; the age of marriage is often lower for females than for males, and men are expected to have younger sexual partners. Common law and customary laws reinforce these expectations.

Most harmful sexual practices have their origin in patriarchal societies that promote the superiority of men over women; gender-insensitive and gender-biased laws are passed in parliaments, which are usually male dominated. In a study on human rights and gender issues in Botswana, Lesotho, Mozambique, South Africa, Swaziland and Zimbabwe, it was observed that, while these countries have acceded to the Convention of the Elimination of All Forms of Discrimination against Women, there was evidence of common and customary laws that encourage gender discrimination. Few of these countries have applied domestically the international conventions to which they agreed, and their laws keep women subservient to men and thus put them at increased risk

of HIV infection. For example, in Botswana, tribal courts treat adultery as a female crime only (3), suggesting that men are allowed to have multiple partners. In Lesotho and Swaziland, if a woman is married in community of property she is considered a legal minor and cannot sign a contract without her husband's permission (4). In Mozambique, because the man is the traditional head of household, the wife is subordinate: her property is given to her husband, who has authority to allow her to enter into a commercial transaction. In Swaziland a woman cannot have access to land without her husband or male relative nor inherit from her deceased husband.

Women must be protected if the AIDS epidemic is to be checked. It is therefore essential for governments to implement gender-sensitive policies. First, to reduce new HIV infections in southern Africa it is crucial that government and civil society collaborate to create a social environment that discourages men from engaging in behaviour that puts them and their partners at risk. It is necessary for governments to domesticate international laws and conventions to ensure women do not remain subservient to men. This includes challenging through the courts the customary laws that disempower women in property ownership, land ownership and inheritance (3).

Second, as part of the HIV prevention programme, we must go beyond the "abstain, be faithful, and use a condom" campaign and adopt strategies that involve traditional leaders to lead a campaign to change the traditional practices and stereotypes that increase vulnerability of men and women to HIV infection.

Finally, appropriate gender-sensitive training programmes for the judicial system must be developed and implemented, to ensure that sex offenders are punished to the full extent of the law. This will reduce the prevalence of sexual violence that permeates our society and puts women and children at high risk of HIV infection. ■

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<sup>1</sup> South African Human Sciences Research Council, 69–83 Plein Street, Cape Town, 8001, South Africa. Correspondence should be sent to Dr Shisana (email: oshisana@hsr.ac.za).

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