

TACKLING GENDER – THE NEXT WAVE IN THE WAR AGAINST HIV/AIDS.

By Angela Johnson for the Maritime Centre of Excellence for Women's Health

A recent workshop, hosted by the Maritime Centre of Excellence for Women's Health at the Westin Nova Scotian Hotel in Halifax, Nova Scotia, resembled a meeting of the United Nations in more ways than one. Thirty-one participants from 10 countries, including Canada, the United Kingdom, India, Zambia and Zimbabwe, gathered to participate in a workshop with global implications. 'Gender and HIV/AIDS: Putting the Pieces Together', took place from January 16th to the 18th, 2002.

"In this workshop we're recognizing that HIV/AIDS is more than a global health issue. It's a development issue and it's fundamental to how our society is structured and power balanced with issues of equity and equality", explained Carol Amaratunga, Executive Director of the Maritime Centre of Excellence for Women's Health (MCEWH). The Maritime Centre of Excellence for Women's Health, its sponsoring organizations, Dalhousie University and the IWK Health Centre, along with the Commonwealth Secretariat, organized and hosted the 3-day workshop on Gender and HIV/AIDS. The agenda included many presentations from a cross section of panelists with varied national, historical, cultural and professional backgrounds and experiences.

Since the first cases of HIV/AIDS were identified in the early 80's more than 50 million people have been infected, and of these, more than 22 million have died. Methods of transmission and prevention have been established, but in the ongoing battle to eradicate the disease, worldwide health care activists, educators, providers, and professionals have acknowledged a new challenge in the war against HIV/AIDS, and it has to do with gender. "Part of the purpose here is to look at how Gender and HIV/AIDS can be brought together from a policy and program perspective. As new policies and programs are developed we will look at how HIV/AIDS affects women and men differently, right from the prevention side, on to treatment and access to treatment", Amaratunga clarified.

Helping to bring a South Asian point of view to the issue of Gender and HIV/AIDS was Mahdu Bala Nath, Regional Advisor, Asia Pacific, UNIFEM Global Programme on Gender and HIV/AIDS. She gave a presentation called 'From Tragedy to Hope: The South Asian Experience' as part of the International Perspectives panel of the conference. "The change in the behaviour of men is critical to prevent the spread of the epidemic and it applies a lot more to our countries where women's empowerment is still improving", she declared.

That women are vulnerable is an understatement when it comes to HIV/AIDS, especially in developing countries. Studies show that the rate of infection and death is increasing in females as opposed to males. Women are hit hardest due to their secondary role in society, lack of power, economic dependence on their male counterparts, social, cultural and traditional views, values and norms, plus additional factors like poverty, illiteracy and unemployment. According to the Joint United Nations Programme on HIV/AIDS (UNAIDS), 95 percent of persons infected with HIV live in developing countries with little or no access to health services and education, and you only have to consult your news medium of choice to witness the devastation attributed to HIV/AIDS in Africa. The statistics are - 25.3 million people of the 36 million infected with HIV or living with AIDS are in Africa.

Two of the five male workshop participants were from Africa and they shared different but complementary views of Gender issues surrounding HIV/AIDS in their countries. One of the more passionate presentations came from a young researcher with UNIFEM from Zimbabwe named Emmanuel Chirebvu. Animated and earnest, Chirebvu detailed a traditional Zimbabwean man's view that gender was a woman's issue, and that men in his country commonly view HIV as a woman's disease. "They believe that the disease comes from the woman and is passed on to the man". He explained that even information and support programs for the disease offered in his country are viewed as the woman's domain.

Gender roles in African society were also part of the examples Dr. Frank Abamu, Coordinator for an HIV/AIDS agriculture network of the CGIAR in West and Central Africa, cited. But he brought another perspective to the table - A gender agricultural connection to HIV/AIDS. He explained that men between the ages of 15 and 49 are sexually active and are the same men providing human labour for an economy heavily dependent on agriculture. "Let's say a man contracts the disease, dies, and has two wives with about 15 children. If you take

away that man, the father of a household, who doesn't have a pension or unemployment insurance like you have in Canada, you have a disaster on your hands. Crops don't get harvested, the economy suffers, poverty continues, and so on."

His second agricultural example involved a poverty stricken country experiencing five years of drought. He described young women having to leave their villages to travel to the big city. Once there, they become involved in prostitution in order to have money to send back home. In a few years the girl returns home sick, after contracting the disease; she passes it on and eventually dies. Abamu maintained that the lack of a strong agriculture base in an African setting is exacerbated when people are exposed to HIV / AIDS.

Despite these unique examples relating to societal, cultural or national issues, workshop participants agreed on key points with regards to Gender management and HIV/AIDS: a clear understandable definition for gender; create programs that target youth and heterosexual men; build organizational and individual change management; provide mentors for the lost generations; better integration into men and women's health management; put tools in place to hold government accountable; deal with issues of exclusion and risky behaviour; unlearn old myths and old ways.

Not only did the workshop consists of panels, testimonials, and small group work, there were also networking lunches, a dinner at Pier 21, a tour of the Black Cultural Centre and the creation of 'snow-persons' for those whose first time it was seeing the white stuff.

'Gender and HIV/AIDS: Putting the Pieces Together' workshop was the result of two years of work by the Maritime Centre of Excellence for Women's Health and its sponsors and supporters. It is a step in the process of creating an International Institute on Gender Management for middle managers and professionals from Africa and elsewhere. The institute will provide professionals with training, a space to conduct research, share ideas and test theories around gender and HIV/AIDS, "ensuring that policies and programs are based on sound gender analysis principles, designed to promote equity, to reach men and women with services as appropriate as possible to their sex/gender and their age and be responsive to diversity." Carol Amaratunga.

The next step in this process according to its project leader, Amaratunga, is another workshop later in 2002 to develop the curriculum for the institute.

HIV/AIDS Stats and Facts taken from UNAIDS website www.unaids.org

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