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Follow-up to the Fourth World Conference on Women and to the special session of the General Assembly entitled “Women 2000: gender equality, development and peace for the twenty-first century”: implementation of strategic objectives and action in critical areas of concern, and further actions and initiatives; priority theme: “The empowerment of rural women and their role in poverty and hunger eradication, development and current challenges”

Statement submitted by International Planned Parenthood Federation, a non-governmental organization in consultative status with the Economic and Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* E/CN.6/2012/1.



Statement

The International Planned Parenthood Federation welcomes the priority theme of the fifty-sixth session of the Commission on the Status of Women.

The Federation is a global service provider and a leading advocate of sexual and reproductive health and rights, and works through 153 member associations in 174 countries. The Federation believes that the fulfilment of rural women's human rights and their empowerment are prerequisites for poverty and hunger eradication, the attainment of the Millennium Development Goals and sustainable development more broadly. In most regions of the world, including in middle-income countries, it is in rural areas that achieving the Millennium Development Goals is most off-track. This is in part because, worldwide, 1.3 billion people do not have access to effective and affordable health care. As a result, low- and middle-income countries bear 93 per cent of the world's disease burden, yet account for just 18 per cent of world income and 11 per cent of global spending on health care. According to the International Fund for Agricultural Development, 70 per cent of the developing world's 1.4 billion people living in extreme poverty reside in rural areas.

Sexual and reproductive health and rights are a crucial issue relating to the empowerment of women, including the many women who live in rural communities. Women continue to face serious challenges in carrying out their multiple productive and reproductive roles within their families and communities, in large part owing to a lack of access to essential goods and services. They are disadvantaged as a result of gender-based stereotyping and discrimination which deny women equal access to opportunities, resources and services.

Women and girls living in rural areas bring and make significant contributions to economic growth and the fight against hunger, ill health and poverty. Yet many barriers exist to their empowerment. These barriers are varied but all of them have an impact at different levels on women's ability to contribute to poverty and hunger eradication and to development. Recent events, including the financial, food and fuel crises, natural disasters and challenges such as climate change all exacerbate the impact of these barriers.

It is essential to recognize the importance of reducing barriers that keep rural women from accessing sexual and reproductive health information and services, including safe and affordable contraceptive and safe abortion services, in respect to which they are discriminated against on the basis of their geographical location and socio-economic status, making them particularly vulnerable to unwanted pregnancies, HIV and other sexually transmitted infections, and maternal morbidity and mortality.

Key problems specific to access to health care for women in rural areas include the distance to health facilities, transportation, the availability of health providers, and the cost and poor quality of services, which combine to expose rural women to an increased risk of mortality and morbidity. These access barriers are compounded by geographical isolation and the cost of travelling to areas where health services are more widely available. Another major barrier is the lack of skilled health-care providers in rural areas, in part caused by issues related to the recruitment and retention of trained staff. Another access barrier is the shortage of health workers and resources, especially in rural areas, and the unique health issues facing women, including reproductive health issues and increased vulnerability to

HIV infection. As the Executive Director of UN-Women pointed out in her statement at the opening session of the Fourth United Nations Conference on the Least Developed Countries, one in 16 women in the least developed countries risks dying in childbirth, and in sub-Saharan Africa young women are eight times more likely than men to be HIV positive.

HIV tends to take the path of least resistance and, in many regions, thus disproportionately affects rural communities. Despite medical advances, HIV is still the leading cause of death of women of reproductive age. Complications from pregnancy continue to be the leading cause of mortality among adolescent girls aged 15 to 19; young people aged 15 to 24 account for 40 per cent of all new HIV infections, and in sub-Saharan Africa young women make up 71 per cent of people living with HIV. The challenges of poverty and hunger have linkages with the causes and consequences of HIV, as HIV increases the likelihood of individuals falling into poverty and facing hunger. A coordinated and integrated approach is necessary to empower women. Empowering women socially and economically is a vital step in reducing their vulnerability to HIV and poor sexual and reproductive health. In part, this means ensuring that microfinance and similar schemes are made available to and specifically target young women and girls and those living with HIV. The lack, or neglect, of rural services — in particular those to address HIV and sexual and reproductive health — is a continuing problem in efforts to improve the situation of rural women. Ensuring that there are the necessary infrastructure and resources to support isolated rural services must be a key priority for the global community. The resources invested in HIV services offer a key opportunity for strengthening the broader health system.

Women play an important role in other people's lives — those of their children, their family and members of their community — but empowerment should focus on the situation of the individual woman, not empowering her solely to serve others' needs. The International Planned Parenthood Federation has been elected a member of the Global Coalition on Women and AIDS, which aims to address and advocate concerning many of the key HIV issues facing women and girls in particular. The active involvement of men and boys as partners in the lives of their wives, mothers and sisters needs to be more actively promoted. Linking HIV and maternal, newborn and child health is vital. Comprehensive services that address a woman's needs holistically are an essential factor in ensuring women are in a position to secure their own health and that of their children and of their families. Eliminating HIV transmission from mothers to their infants and keeping the mothers alive has become and should remain a key platform for addressing both maternal, newborn and child health and HIV.

Rural women are also often the first casualties of the current aid architecture, especially as their contribution to economies in the form of care and support for their families and subsistence agriculture/farming is often lowly regarded. This entrenches gender-based violence and deepens poverty. Rural women survivors of violence and abuse often find it difficult or impossible to access services. In many rural areas, women and girls often work in the lowest paid and most precarious forms of employment. Many also have no independent access to and control of resources, and usually have responsibility for caregiving and household duties. The disproportionate share of unpaid care work that falls on rural women relative to men restricts the time they have available for paid activities and active participation in society. These unpaid tasks are rarely recognized as important economic functions.

Sharing domestic responsibilities more equally between men and women is therefore an important means by which to improve the health and well-being of women and girls. Domestic responsibilities can result in girls and women being denied access to education and employment and thus may prevent them from participating fully in the public sphere, especially in decision-making forums and governance. When a girl is prevented from attending school, her ability to participate meaningfully in the formal economy and in decision-making forums as an adult is compromised. When men and women share household responsibilities, women have more time to engage in paid work and as a result, control over household income is shared more equally.

The International Planned Parenthood Federation recognizes the link between rural development and the access to and participation of women in education, health care and meaningful employment. In accordance with article 26 of the Universal Declaration of Human Rights, the Federation recognizes that education is a human right and that there is a bridge between education and health, especially in rural areas, which is essential for development at all levels.

Education for women and girls has a multiplier effect when it comes to poverty eradication. Yet education facilities in rural areas are neither well equipped nor adequately staffed. Children of educated women are usually healthier and better educated. It is vital also that young women and men and girls and boys have access to comprehensive and gender-sensitive sexuality education in both formal and informal educational settings. Approximately 16 million girls aged 15 to 19 give birth every year — around 11 per cent of all births worldwide, the vast majority of which occur in developing countries. Delayed first births, later marriage, birth spacing, fewer and healthier babies, and better educated better fed families are all largely the result of secondary education and access to family planning services and comprehensive and gender-sensitive sexuality education. This in turn leads to freedom for further training, education, empowerment and meaningful employment, so lifting families out of poverty. As such there is a clear link between sexual and reproductive health, access to health services, education, gender equity, well-being and development.

Recommendations

Concerted action to address the barriers that diminish opportunities for the social, political and economic empowerment of women and girls in rural areas is long overdue. The International Planned Parenthood Federation believes that the following recommendations if fully implemented would significantly help address the empowerment of rural women and their role in poverty and hunger eradication and development:

- Access to and availability of sexual and reproductive health services which are affordable and close to the community, with price exemption for the poorest women
- Laws that protect and promote women's liberty and bodily integrity should be enforced. Rural women are likely to suffer from harmful traditional practices which are a risk to women's health and well-being. The availability of the necessary infrastructure and resources to support isolated rural services, including health facilities, education (including comprehensive and gender-sensitive sexuality education), training and other support services

- Community outreach to inform women on the availability of safe legal abortion and care services, including referral to service delivery points
 - Task shifting where possible by training mid-level providers in abortion-related care
 - Rights-based policies and programming within health services and the community should be promoted, especially for primary prevention of HIV in women of childbearing age (with special emphasis on pregnant and breastfeeding women) and prevention of unintended pregnancies in women living with HIV
 - Initiatives that promote behavioural change around gender roles and encourage an equitable distribution of care work between men and women, in particular measures to encourage men's involvement in the care of children, the sick and the elderly, including in rural areas affected by HIV and AIDS
 - Recognition and respect for rural women's autonomy, freedom and sexual rights as a key means of empowerment
 - Accelerating access to universal primary and secondary education in rural areas to empower young women and equip them with the skills to participate in development, with a view to raising their income levels
 - Respect for rural women's agency and mobilization in local and national decision-making processes
 - Strengthening of health and economic systems to ensure socially equitable and efficient care for women's health and rights, and addressing the key underlying determinants of health, including sexual and gender-based violence
 - Training and meaningful involvement of community leaders in addressing gender inequality that fuels harmful practices, which are particularly prevalent in rural areas where community "laws", rather than often more progressive national laws, operate
 - Clear collection and disaggregation of data (along gender and rural/urban lines).
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