



HIV and gender inequality

By Vanessa Sun

As the 21st century begins, over 33 million adults are living with HIV, the virus that causes AIDS. Once, largely a disease of men in distinct populations, HIV is currently infecting women at faster rates than men in key regions, such as Sub-Saharan Africa.

-- Gender, HIV and Human Rights: A Training Manual by UNIFEM

The Human Immunodeficiency Virus (HIV), which is responsible for Acquired Immunodeficiency Syndrome (AIDS), has several transmission routes: via sexual intercourse, pregnancy-related vertical transmission, blood transfusion and via sharing of infected needles used to inject drugs intravenously. However, HIV can only be epidemic under certain social circumstances. Gender inequality is one of the crucial causes which we can not ignore. In Africa, it is a fact that there are fourteen infected women for every ten infected men. Since the relationship between HIV and gender inequality seems to be indirect and ambiguous, this article will try to discuss the impact of gender inequality on HIV transmission.

Gender refers to the socially created ideas and practices of what it is to be female or male, whereas sex refers to the biological characteristics that categorize someone as either female or male. (Baden and Reeves 2000) Different gender roles cause gender inequality in broad areas, such as different job opportunities, income disparities, uneven education chances and health care, discrimination or even different opportunities to infect HIV. As a matter of fact, females are biologically more vulnerable to HIV infection, and socially gender inequality exacerbates this situation.

When we consider the reasons why gender inequality makes females more vulnerable to HIV, first of all we see educational differences. There are regions, not coincidentally, where women have very limited knowledge of the AIDS and effective precautionary measures. In some countries, boys still have higher priorities than girls when the family can not afford all children's education and has to determine who can go to school. Thus, girls are less able to access basic knowledge of the disease, what makes them more risky of infection due to lack of prevention education.

Another factor to increase female vulnerability to HIV is economic insecurity. Poverty and less job opportunities force some women and girls into survival sex, which is a highly risky job to infect HIV. Then social discrimination for prostitutes limits their access to health care, especially psychological care, after they infect HIV. When these HIV-positive females continue the virus continues to spread.

Besides the above two reasons, gender inequality is making thousands of families stuck in the cycle of poverty. In some undeveloped rural parts of China, people traditionally think boys as the root of a family, so mothers keep giving births to babies until they get a boy. Having too many children makes them poorer, and sell blood to sustain the family. Journalists writing for *The Economist*¹ report that in the early 1990's, local officials encouraged poor people to supplement their meager income by selling their blood. Disastrously after removing the plasma, all the blood was pooled together, and later re-infused donors with blood from many different people; with no screening or HIV tests this plasma business has been responsible for an estimated 55,000 people becoming infected with HIV, with a further 130, 000 people in one province infected later by hospital blood transfusions from the same blood². In turn, the infection makes many family's lives much harder, which will probably drives more plasma business. Once this vicious circle forms, it contributes a lot to HIV prevalence.

Another important reason to consider gender inequality in leading to HIV transmission lies in sexual inequality between men and women. In many places, social norms allow men to have more sexual partners than women. That means if a woman's partner gets infection from other ones, then she may be infected through her husband or partner.

Often women have less decision-making power in relationship with men. For example, women may want their partners to use condoms, but often they lack the power to make men do so. To make things worse, some cultures encourage older men to have sexual relations with much younger women. This has contributed to higher infection rates among young women (15-24 years) compared to young men.

Actually, violence- both physical and sexual-has made many women experience increased HIV infection rates. Forced sex can contribute to infection due to tears and lacerations. Violence can also prevent women from asking for safer sex. Furthermore, social misconceptions about the illness and fear and ignorance can prevent women from learning and sharing their HIV status if their HIV test results turn out to be positive. Finally women have

¹ Blood Debts” in *The Economist*, January 20th-26th 2007.

² United Nations

limited access to medical resources which exacerbates the prevalence of AIDS.

Last but not the least, women often assume the major share of caretaking in the family, including taking care of those who are living with or affected by HIV. Most of these women lack necessary education, and they are made to bear additional burdens because of the assumption that family caretaking is a role that women “naturally” fill.

Fortunately, due to the importance of HIV and AIDS as public health problem, and the situation that more and more people realize gender inequality plays a negative role in HIV/AIDS prevalence, some actions against this issue have been carried out. The Department of Gender, Women and Health (GWH) has made focusing on gender and HIV/AIDS a priority. Some HIV/AIDS programs invest in the specific needs of women and girls. These actions will not only promote gender equality, but also contribute to the overall control of HIV/AIDS in the world.